Los Angeles County
Sentinel Community Site (SCS)
Drug Use Patterns and Trends, 2020

August 2020

NDEWS Coordinating Center
A unique feature of NDEWS is its capability to describe and compare drug use patterns and trends in selected communities across the United States. The NDEWS Coordinating Center works closely with Sentinel Community Epidemiologists (SCEs) in 12 Sentinel Community Sites (SCSs) across the U.S. Emerging drugs and changing drug trends are monitored by each local SCE utilizing indicators such as drug overdose deaths, treatment admissions, hospital cases, poison center exposure calls, and law enforcement seizures. In May 2020, each SCE was asked to review available indicators and identify up to five drugs they considered most important to summarize for their site and include in their 2020 annual Drug Use Patterns and Trends Report.

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National Drug Early Warning System (NDEWS)  
Los Angeles County Sentinel Community Site (SCS)  
Drug Use Patterns and Trends, 2020

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Highlights

- **Methamphetamine** continues to be a major problem in Los Angeles County.
  - Medical Examiner toxicology cases (2019): 40.3% tested positive for methamphetamine (n=1,285 of the total of 3,192 cases testing positive for drugs), an increase over n=1,126 in 2018.
  - Treatment admissions (2019): 35.2% of admissions were for methamphetamine, an increase over 32.9% in 2018 (11th straight year of increases).
  - Poison Control System (2019): methamphetamine accounted for 5.1% of all drugs reported (more than any other illicit substance), an increase over 2018.
  - Lowest prices in recorded history.

- **Heroin** showed mixed trends, but lower numbers and percentages than methamphetamine.
  - Medical Examiner toxicology cases (2019): 14.6% tested positive for heroin/morphine (n=466), an increase over n=360 in 2018.
  - Treatment admissions (2019): 21.9% of admissions were for heroin, a decrease from 25.5% in 2018.

- **Prescription opioids** continue to be a focus of public concern, with sharp increases in two indicators, but still a small presence in treatment admissions.
  - Medical Examiner toxicology cases (2019): narcotic analgesics (including fentanyl) were identified in 28.0% of cases (n=893) an increase over 21.5% in 2018. This increase was due primarily to increases in fentanyl, which was positive in 16.4% of cases (n=522) in 2019, an increase over 9.8% in 2018.
  - Poison Control System (2019): prescription opioids (not including fentanyl) accounted for 18.4% of drugs reported, a substantial increase over 2018 (13.1%). Fentanyl was identified in 2.5% of reports.
  - Treatment admissions (2019): 3.3% of admissions were for prescription opioids, little changed from 2018 (3.5%).
Number of Toxicology Cases with Drugs Detected
Los Angeles County Medical Examiner 2010 – 2019

Notes: Data are from medical examiner cases in which drugs were detected (drug-involved, not necessarily drug-caused). Narcotic analgesics and narcotic-like analgesics (other than heroin/morphine) include codeine, hydrocodone, hydromorphone, oxycodone, oxymorphone, methadone, fentanyl, other narcotics, and tramadol. The number of toxicology cases: n=2981, 2866, 3068, 3109, 3038, 3024, 3038*, 2789, 2930, 3192 for 2010-2019, respectively.

*For 2016, graph used estimated total and estimated methamphetamine frequency (see Sources for more information); heroin/morphine data not available for 2017

Source: Drugs detected in Los Angeles County medical examiner toxicology cases were extracted from data provided by the Los Angeles County Coroner’s office for 2010–2019.
Selected Additional Drugs Detected in Toxicology Cases with Multiple Drugs Detected, Los Angeles County Medical Examiner 2019

For each of the 3 drugs (methamphetamine, heroin, fentanyl), percentages indicate fraction of the cases for that specific drug with more than one drug type detected with positive results for cocaine, meth, heroin, fentanyl, or THC.

For example, cases with methamphetamine detected and at least one additional drug, 10% also had cocaine detected, 20% also had heroin detected, etc.

Notes: Medical examiner cases in which drugs were detected (drug-involved, not necessarily drug-caused). Percent of cases with specified drug detected and with at least one other type of drug detected: methamphetamine, 90%; heroin, 83%; fentanyl, 80%. Each case may have more than one drug detected; therefore, percentages should not be summed across drug categories.
Percent of Poison Control System Reports for Selected Illicit Drugs, Los Angeles County 2008-2019

- Reports of illicit drugs constitute small percentages of the Poison Control reports summarized.

Source: California Poison Control System, 2019 data (5/22/20) n=3878 drug reports for illicit drugs or for cases with “intentional/suspected suicide, misuse, abuse, unknown,” “contamination/tampering,” or “malicious” reasons.

Note: Of 3878 reports, 14.5% were for “illicit” drugs or marijuana; 26.2% for benzodiazepines, 18.4% for prescription narcotics (excl. fentanyl), 2.5% specifically fentanyl (extra triangle-dot on graph for 2019), 3.8% for non-narcotic analgesics.
Treatment Admissions & NFLIS-Drug Reports, Los Angeles County (through 2018)

**Treatment Admissions**

- **Cocaine/Crack**
- **Heroin**
- **Prescription opioids**
- **Marijuana**
- **Methamphetamine**

**NFLIS-Drug Reports (Seizures)**

- **Cocaine/Crack**
- **Heroin**
- **Cannabis**
- **Methamphetamine**
- **Hydrocodone/oxycodone**
Treatment Tables
**Table 1: Trends in Admissions* to Programs Treating Substance Use Disorders, Los Angeles County Residents, 2015-2019**

Number of Admissions and Percentage of Admissions with Selected Substances Cited as Primary Substance at Admission, by Year and Substance

<table>
<thead>
<tr>
<th>Calendar Year</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(#)</td>
<td>(%)</td>
<td>(#)</td>
<td>(%)</td>
<td>(#)</td>
</tr>
<tr>
<td><strong>Total Admissions (#)</strong></td>
<td>31,596</td>
<td>100%</td>
<td>30,885</td>
<td>100%</td>
<td>28,557</td>
</tr>
<tr>
<td><strong>Primary Substance of Abuse (%)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Alcohol</td>
<td>5,384</td>
<td>17.0%</td>
<td>5,148</td>
<td>16.7%</td>
<td>5,650</td>
</tr>
<tr>
<td>Cocaine/Crack</td>
<td>1,391</td>
<td>4.4%</td>
<td>1,235</td>
<td>4.0%</td>
<td>1,060</td>
</tr>
<tr>
<td>Heroin</td>
<td>9,709</td>
<td>30.7%</td>
<td>9,154</td>
<td>29.6%</td>
<td>8,061</td>
</tr>
<tr>
<td>Prescription Opioids**</td>
<td>1,240</td>
<td>3.9%</td>
<td>1,245</td>
<td>4.0%</td>
<td>1,102</td>
</tr>
<tr>
<td>Methamphetamine</td>
<td>8,083</td>
<td>25.6%</td>
<td>8,938</td>
<td>28.9%</td>
<td>8,760</td>
</tr>
<tr>
<td>Marijuana</td>
<td>5,150</td>
<td>16.3%</td>
<td>4,487</td>
<td>14.5%</td>
<td>3,347</td>
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<tr>
<td>Benzodiazepines</td>
<td>192</td>
<td>0.6%</td>
<td>242</td>
<td>0.8%</td>
<td>227</td>
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<tr>
<td>MDMA</td>
<td>28</td>
<td>0.1%</td>
<td>34</td>
<td>0.1%</td>
<td>33</td>
</tr>
<tr>
<td>Synthetic Stimulants</td>
<td>0</td>
<td>0.0%</td>
<td>0</td>
<td>0.0%</td>
<td>0</td>
</tr>
<tr>
<td>Synthetic Cannabinoids</td>
<td>0</td>
<td>0.0%</td>
<td>0</td>
<td>0.0%</td>
<td>0</td>
</tr>
<tr>
<td>Other Drugs/Unknown</td>
<td>419</td>
<td>1.3%</td>
<td>402</td>
<td>1.3%</td>
<td>317</td>
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</tbody>
</table>

**NOTES:**

*Admissions: Includes all admissions to programs receiving any public funds or to programs providing narcotic replacement therapy, as reported to the California Outcomes Monitoring System (CalOMS). An admission is counted only after all screening, intake, and assessment processes have been completed, and all of the following have occurred: 1) the provider has determined that the client meets the program admission criteria; 2) if applicable, the client has given consent for treatment/recovery services; 3) an individual recovery or treatment plan has been started; 4) a client file has been opened; 5) the client has received his/her first direct recovery service in the facility and is expected to continue participating in program activities; 6) in methadone programs, the client has received his/her first dose. Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

**Prescription Opioids: Includes drug categories labeled "oxycodone/OxyContin" and "other opiates or synthetics."

unavail: Data not available.

**SOURCE:** Data provided to the Los Angeles NDEWS SCE by the California Department of Health Care Services, Mental Health Services Division, Office of Applied Research and Analysis, CalOMS.
<table>
<thead>
<tr>
<th>Primary Substance</th>
<th>Alcohol</th>
<th>Cocaine/Crack</th>
<th>Heroin</th>
<th>Prescription Opioids**</th>
<th>Methamphetamine</th>
<th>Marijuana</th>
<th>Benzodiazepines</th>
<th>Synthetic Stimulants</th>
<th>Synthetic Cannabinoids</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Admissions (⁰)</td>
<td>7,666</td>
<td>1,392</td>
<td>7,578</td>
<td>3,633</td>
<td>283</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Sex (%)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>4,761</td>
<td>850</td>
<td>5,329</td>
<td>6,485</td>
<td>2,240</td>
<td>61.7%</td>
<td>35.4%</td>
<td>64.8%</td>
<td>66.0%</td>
</tr>
<tr>
<td>Female</td>
<td>2,875</td>
<td>537</td>
<td>2,228</td>
<td>480</td>
<td>1,154</td>
<td>38.0%</td>
<td>45.9%</td>
<td>35.2%</td>
<td>33.0%</td>
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<tr>
<td>Other</td>
<td>29</td>
<td>4</td>
<td>16</td>
<td>85</td>
<td>10</td>
<td>0.7%</td>
<td>0.7%</td>
<td>0.7%</td>
<td>0.7%</td>
</tr>
<tr>
<td>Race/Ethnicity (%)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White, Non-Hisp.</td>
<td>2,253</td>
<td>103</td>
<td>3,789</td>
<td>1,371</td>
<td>2,620</td>
<td>37.7%</td>
<td>50.0%</td>
<td>37.7%</td>
<td>43.4%</td>
</tr>
<tr>
<td>African-Am/Black, Non-Hisp</td>
<td>1,329</td>
<td>947</td>
<td>426</td>
<td>1,315</td>
<td>2,260</td>
<td>17.3%</td>
<td>68.0%</td>
<td>10.8%</td>
<td>14.3%</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>3,619</td>
<td>264</td>
<td>2,854</td>
<td>7,619</td>
<td>2,260</td>
<td>47.2%</td>
<td>5.6%</td>
<td>62.7%</td>
<td>46.3%</td>
</tr>
<tr>
<td>Asian</td>
<td>78</td>
<td>16</td>
<td>87</td>
<td>240</td>
<td>36</td>
<td>1.0%</td>
<td>1.1%</td>
<td>2.5%</td>
<td>6.4%</td>
</tr>
<tr>
<td>Other</td>
<td>243</td>
<td>39</td>
<td>277</td>
<td>398</td>
<td>123</td>
<td>3.2%</td>
<td>3.7%</td>
<td>3.3%</td>
<td>3.4%</td>
</tr>
<tr>
<td>Age Group (%)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Under 18</td>
<td>57</td>
<td>10</td>
<td>2</td>
<td>3</td>
<td>51</td>
<td>0.7%</td>
<td>0.4%</td>
<td>1.0%</td>
<td>0.6%</td>
</tr>
<tr>
<td>18-25</td>
<td>617</td>
<td>87</td>
<td>773</td>
<td>2,112</td>
<td>829</td>
<td>0.7%</td>
<td>10.2%</td>
<td>17.4%</td>
<td>22.8%</td>
</tr>
<tr>
<td>26-45</td>
<td>4,559</td>
<td>486</td>
<td>4,525</td>
<td>8,382</td>
<td>1,264</td>
<td>59.5%</td>
<td>34.9%</td>
<td>38.0%</td>
<td>25.4%</td>
</tr>
<tr>
<td>46+</td>
<td>2,433</td>
<td>809</td>
<td>2,278</td>
<td>1,605</td>
<td>169</td>
<td>31.7%</td>
<td>38.1%</td>
<td>34.8%</td>
<td>31.5%</td>
</tr>
<tr>
<td>Route of Administration (%)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Smoked</td>
<td>0</td>
<td>0.0%</td>
<td>0</td>
<td>0</td>
<td>0.0%</td>
<td>72.1%</td>
<td>24.7%</td>
<td>67.3%</td>
<td>63.9%</td>
</tr>
<tr>
<td>Injected</td>
<td>0</td>
<td>0.0%</td>
<td>1</td>
<td>0</td>
<td>0.0%</td>
<td>22.7%</td>
<td>3.9%</td>
<td>4.2%</td>
<td>7.3%</td>
</tr>
<tr>
<td>Vaping</td>
<td>0</td>
<td>0.0%</td>
<td>0</td>
<td>3</td>
<td>0.0%</td>
<td>0.8%</td>
<td>0.8%</td>
<td>0.7%</td>
<td>0.4%</td>
</tr>
<tr>
<td>Oral/Other/Unknown</td>
<td>7,666</td>
<td>61</td>
<td>99</td>
<td>265</td>
<td>82</td>
<td>100.0%</td>
<td>31.8%</td>
<td>2.3%</td>
<td>2.3%</td>
</tr>
<tr>
<td>Secondary Substance (%)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>None</td>
<td>3,391</td>
<td>435</td>
<td>2,723</td>
<td>4,930</td>
<td>1,642</td>
<td>44.2%</td>
<td>31.3%</td>
<td>42.8%</td>
<td>45.2%</td>
</tr>
<tr>
<td>Alcohol</td>
<td>n/a</td>
<td>n/a</td>
<td>357</td>
<td>292</td>
<td>64</td>
<td>25.6%</td>
<td>36.9%</td>
<td>46.7%</td>
<td>47.0%</td>
</tr>
<tr>
<td>Cocaine/Crack</td>
<td>487</td>
<td>64</td>
<td>286</td>
<td>276</td>
<td>137</td>
<td>6.4%</td>
<td>8.6%</td>
<td>2.6%</td>
<td>2.3%</td>
</tr>
<tr>
<td>Heroin</td>
<td>121</td>
<td>11</td>
<td>29</td>
<td>85</td>
<td>10</td>
<td>1.6%</td>
<td>0.8%</td>
<td>2.6%</td>
<td>3.3%</td>
</tr>
<tr>
<td>Prescription Opioids**</td>
<td>94</td>
<td>10</td>
<td>22</td>
<td>443</td>
<td>71</td>
<td>1.2%</td>
<td>0.7%</td>
<td>4.6%</td>
<td>0.7%</td>
</tr>
<tr>
<td>Methamphetamine</td>
<td>1,553</td>
<td>133</td>
<td>2,864</td>
<td>2,030</td>
<td>554</td>
<td>20.3%</td>
<td>9.6%</td>
<td>16.7%</td>
<td>15.2%</td>
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<tr>
<td>Marijuana</td>
<td>1,174</td>
<td>279</td>
<td>319</td>
<td>2,974</td>
<td>52</td>
<td>15.3%</td>
<td>20.0%</td>
<td>17.4%</td>
<td>18.4%</td>
</tr>
<tr>
<td>Benzodiazepines</td>
<td>86</td>
<td>10</td>
<td>220</td>
<td>86</td>
<td>15</td>
<td>1.1%</td>
<td>0.7%</td>
<td>2.9%</td>
<td>0.5%</td>
</tr>
<tr>
<td>MDMA</td>
<td>5</td>
<td>0.1%</td>
<td>1</td>
<td>0.0%</td>
<td>2</td>
<td>0.1%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Other Drugs/Unknown</td>
<td>156</td>
<td>39</td>
<td>97</td>
<td>226</td>
<td>0.0%</td>
<td>2.0%</td>
<td>2.8%</td>
<td>2.4%</td>
<td>2.8%</td>
</tr>
<tr>
<td>Synthetic Stimulants</td>
<td>0</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>Synthetic Cannabinoids</td>
<td>0</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
</tbody>
</table>

**NOTES:**
- Admissions: Includes all admissions to programs receiving any public funds or to programs providing narcotic replacement therapy, as reported to the California Outcomes Monitoring System (CalOMS). An admission is counted only after all screening, intake, and assessment processes have been completed, and all of the following have occurred: 1) the provider has determined that the client meets the program admission criteria; 2) if applicable, the client has given consent for treatment/recovery services; 3) an individual recovery or treatment plan has been started; 4) a client file has been opened; 5) the client has received his/her first direct recovery service in the facility and is expected to continue participating in program activities; 6) in methadone programs, the client has received his/her first dose. Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.
- Prescription Opioids: Includes drug categories labeled “oxycodeone/OxyContin” and “other opiates or synthetics.” Admissions with one opioid subcategory as primary drug could have had the other subcategory as secondary; but these are not shown in this table.
- n/a: Not applicable; unav: Data not available; Percentages may not sum to 100 due to rounding and/or because not all possible categories are presented in the table. Category frequencies may not sum to drug total due to missing data and/or not all possible categories are presented in the table.

**SOURCE:** Data provided to the Los Angeles NDEWS SCE by the California Department of Health Care Services, Mental Health Services Division, Office of Applied Research and Analysis, CalOMS.
DATA FOR THIS REPORT WERE DRAWN FROM THE FOLLOWING SOURCES:

Data for admissions to substance abuse treatment for 2013-2019 were provided by Substance Abuse Prevention and Control, Los Angeles County Department of Public Health (data received 6/12/19 for 2015-2019). Note that the source for treatment admission data is different from reports prior to 2017 and values may differ slightly. Data are based on all admissions to programs in Los Angeles County receiving any public funding and all admissions to programs providing narcotic replacement therapy (whether or not the program receives public funding). Admissions in which a primary drug was indicated were included.

Drugs detected in Los Angeles County Medical Examiner toxicology cases were extracted from data provided by the Los Angeles County Medical Examiner’s office for calendar year 2019 (data received 5/20/20) with reference to earlier years from the same source. Frequencies reflect cases for which toxicology tests were conducted with a drug detected (i.e., not just drug-related deaths). Each case may have more than one drug detected. Emerging synthetic drugs typically were not included in the toxicology testing and thus are not reported. For reporting purposes, we have combined narcotic analgesics and narcotic-like analgesics (other than heroin/morphine) into one category; these include codeine, hydrocodone, hydromorphone, oxycodone, oxymorphone, methadone, fentanyl, other narcotics, and tramadol. Number of cases in which drugs were detected totaled 3,192 in 2019.

Poison Control calls were summarized from data from the California Poison Control Center for calendar year 2019 (data received 5/22/20). References to prior years are from the same source. Drug mentions are included for cases (calls) that reported illicit drugs or cases for which the reason for the call was labeled as “intentional/suspected suicide, misuse, abuse, unknown,” “contamination/tampering,” or “malicious.” The number of reports of drugs to the California Poison Control Center in 2019 for Los Angeles County totaled 3,878 in 2019.

Drug reports from seized items analyzed by the U.S. Drug Enforcement Administration’s (DEA’s) National Forensic Laboratory Information System (NFLIS-Drug) correspond to reports of drugs from drug items seized by law enforcement and analyzed by participating NFLIS-Drug laboratories in Los Angeles County. The drugs reported include the first, second, and third drugs identified in cases where multiple substances are reported with other drugs within the same item (e.g., a bag of pills containing two different pharmaceuticals may be reported together within the same item by the laboratory, depending on laboratory policies, procedures, and reporting practices).

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