

San Francisco
Sentinel Community Site (SCS)
Drug Use Patterns and Trends, 2020

August 2020

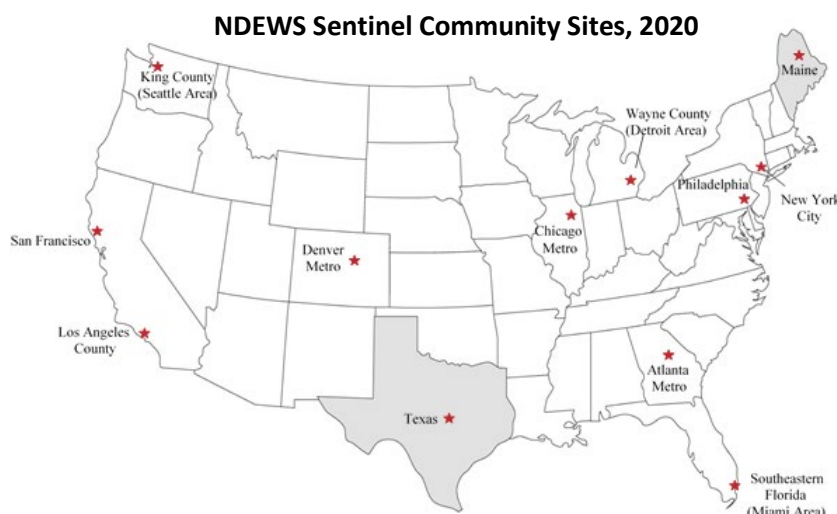
NDEWS Coordinating Center

NDEWS *National Drug Early Warning System*

Funded at the Center for Substance Abuse Research by the National Institute on Drug Abuse

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) San Francisco Sentinel Community Site (SCS) Drug Use Patterns and Trends, 2020

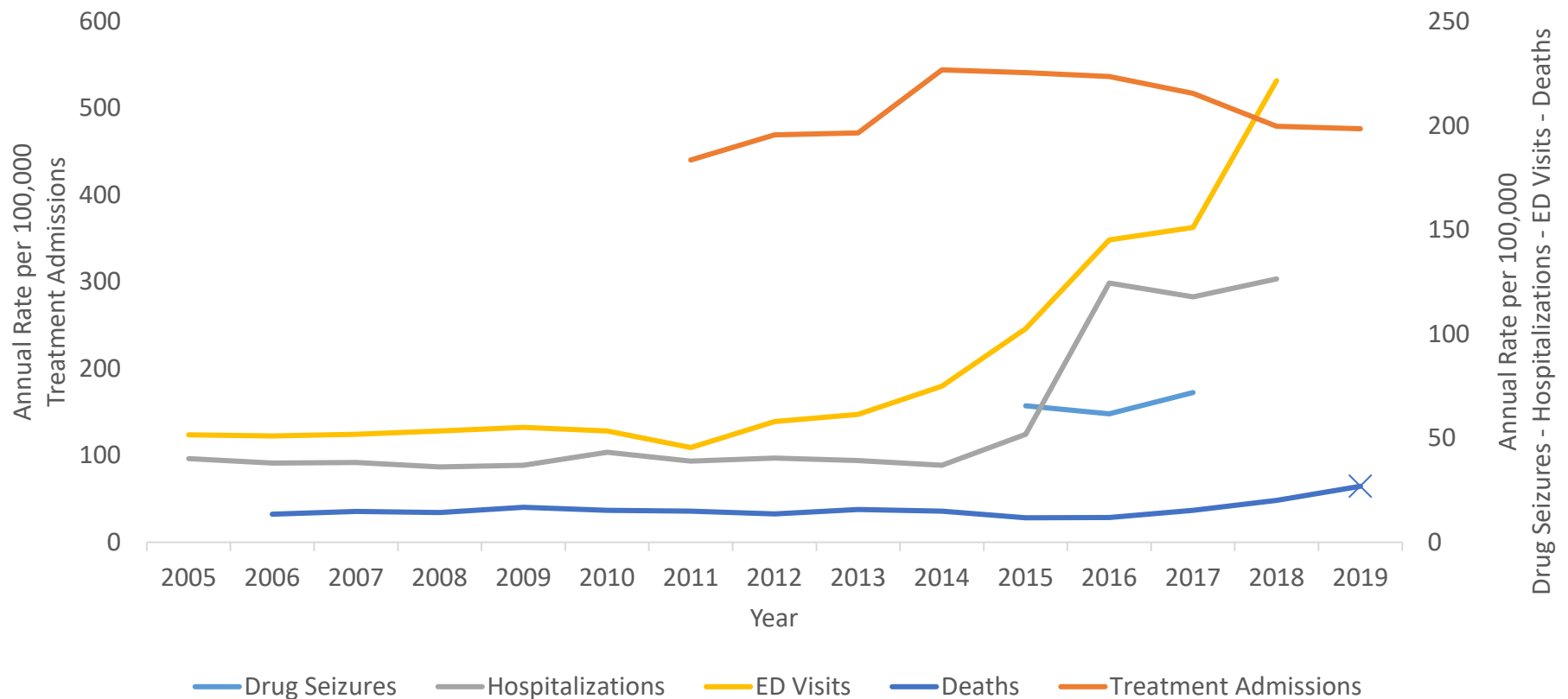
Phillip O. Coffin, M.D., and Christopher Rowe, M.P.H.
San Francisco Department of Public Health

Highlights

- San Francisco is experiencing a dramatic increase in drug overdose deaths across **opioids** and **stimulant drugs**, all driven by **fentanyl**.
- **Methamphetamine** indicators, including hospitalizations and emergency department visits, along with overdose deaths, all continue to rise.
- **Cannabis** indicators are not yet suggestive of an increase in morbidity, mortality, or treatment utilization since recreational use was legalized in 2018.
- San Francisco completed a Methamphetamine Task Force in 2019 with plans for a "sobering center" for people who are high on **methamphetamine**; these plans have been put on hold due to COVID-19.
- San Francisco has ceased breaking up encampments of people experiencing homelessness to avoid exacerbating COVID-19 transmission.
- San Francisco has housed people experiencing homelessness in hotels throughout San Francisco, both to manage and to prevent outbreaks in shelters and other congregate living settings.
- San Francisco has heavily utilized telehealth for delivery of treatment for SUDs, particularly **buprenorphine**.

Opioids

Rates of Opioid Drug Seizures (NFLIS-Drug), Treatment Admissions, Emergency Department (ED) Visits, Hospitalizations, and Deaths in San Francisco, 2005-2019*

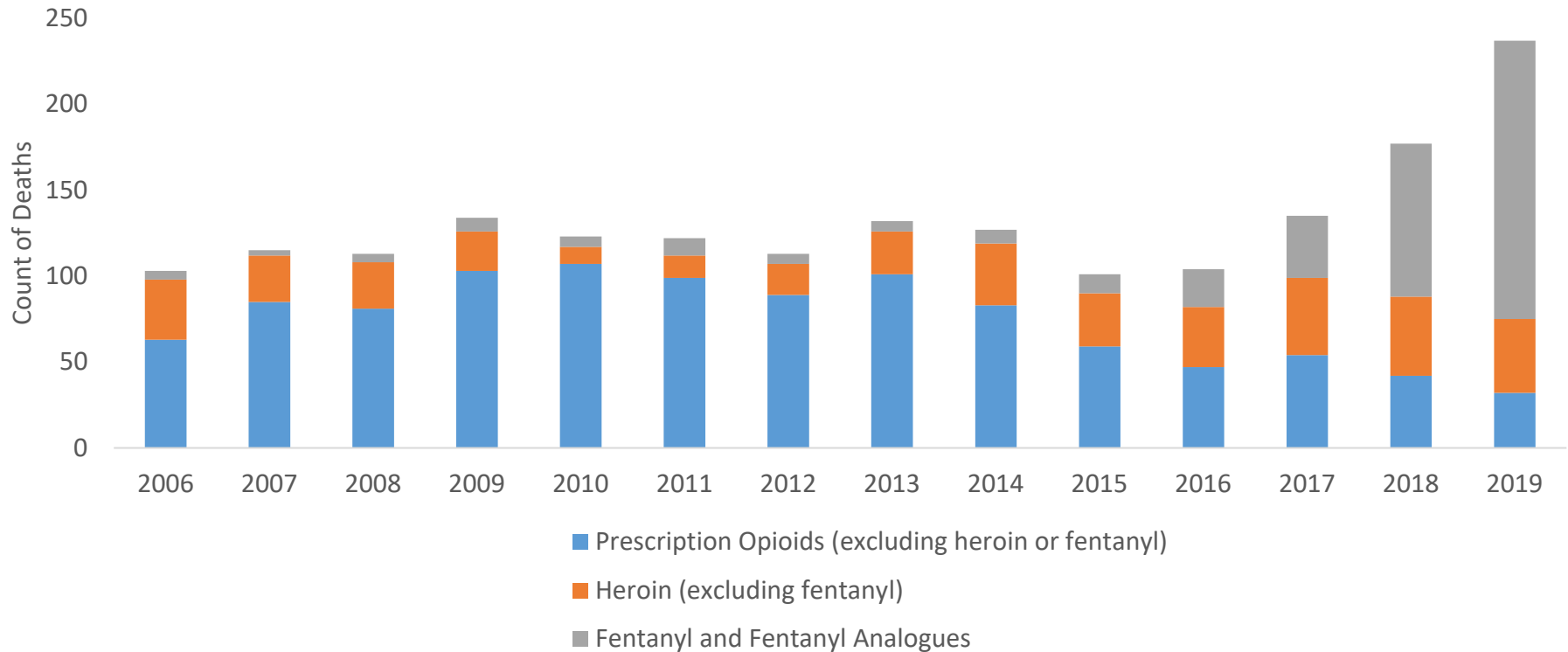


- Opioid-related ED visits have increased steadily since 2011.
- Opioid-related deaths were stable through 2016 but have increased since (more detail on next slide).
- Treatment admissions have been relatively stable despite system-wide declines.

*2019 mortality data are incomplete.

Opioids

Counts of Opioid-Related Deaths in San Francisco by Year and Opioid Type, 2006-2019*

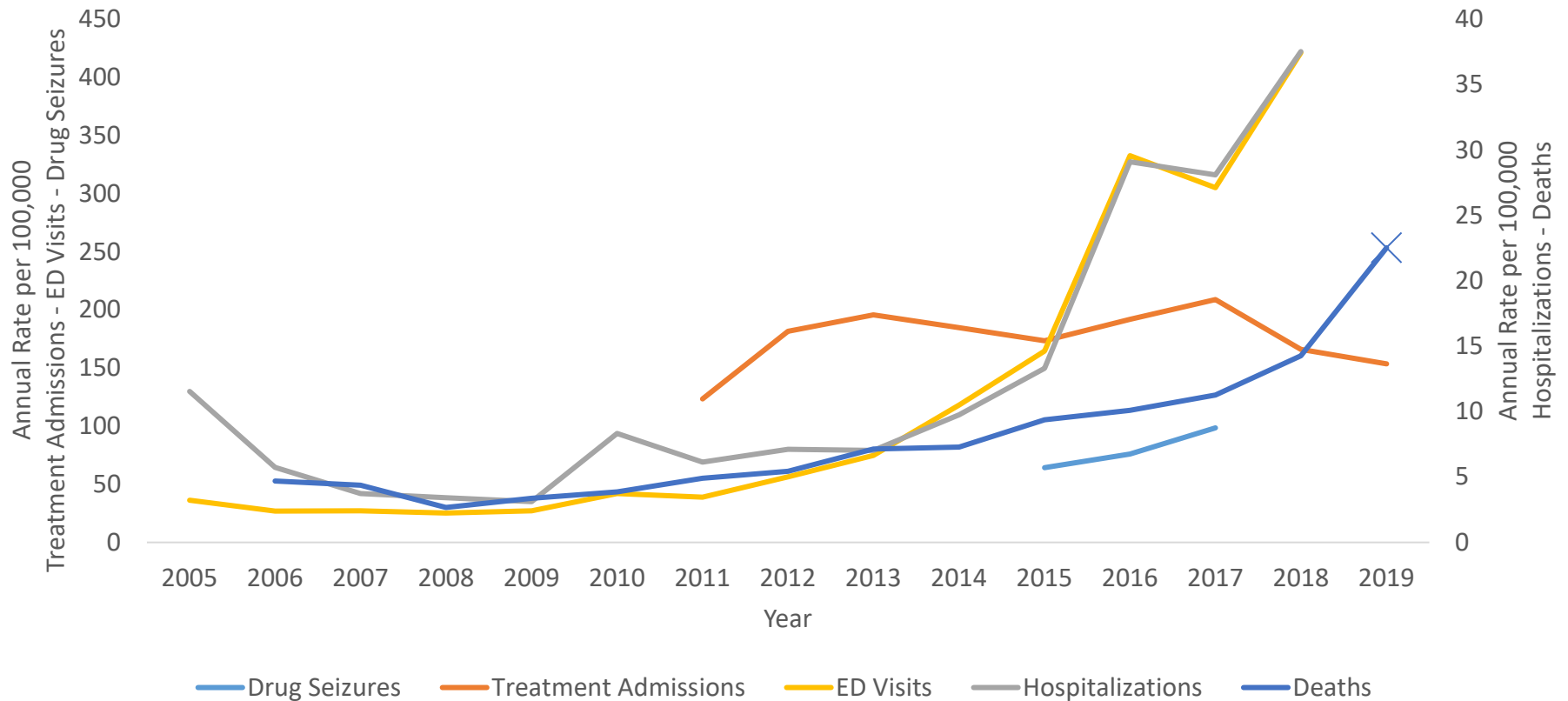


- Opioid overdose deaths were relatively stable 2006-2016, increased significantly 2017-2019
- Deaths increased from 104 in 2016 (21% including fentanyl) to more than 237 in 2019 (68% including fentanyl)
- Heroin deaths (without fentanyl) are stable, prescription opioid deaths (without heroin or fentanyl) continue to decrease.

*2019 mortality data are incomplete.

Methamphetamine

Rates of Methamphetamine Drug Seizures (NFLIS-Drug), Treatment Admissions, Emergency Department (ED) Visits, Hospitalizations, and Deaths in San Francisco, 2005-2019*

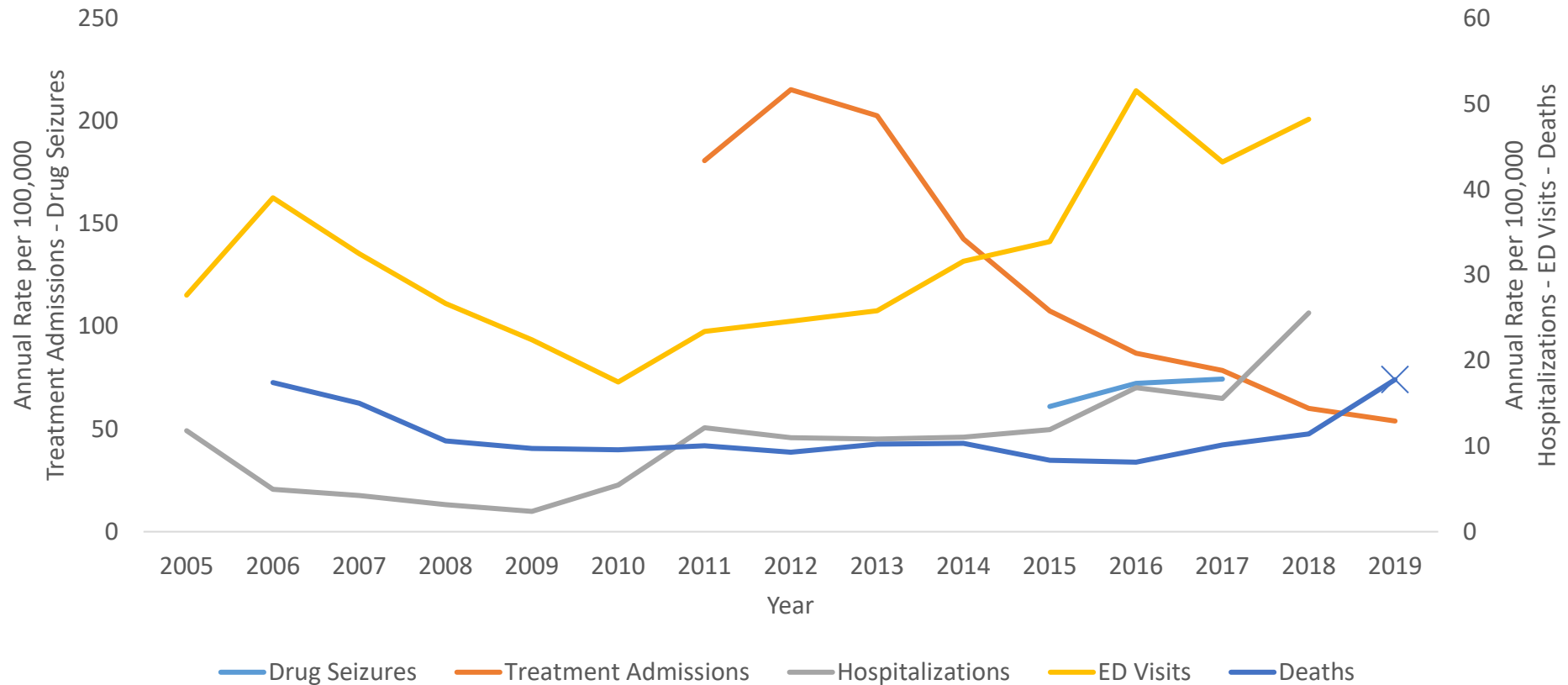


- Methamphetamine-related morbidity and mortality continue to increase.
- Although ED visits, hospitalizations, and deaths have been increasing steadily for 10+ years, the rates of increase are faster in recent years.

*2019 mortality data are incomplete.

Cocaine

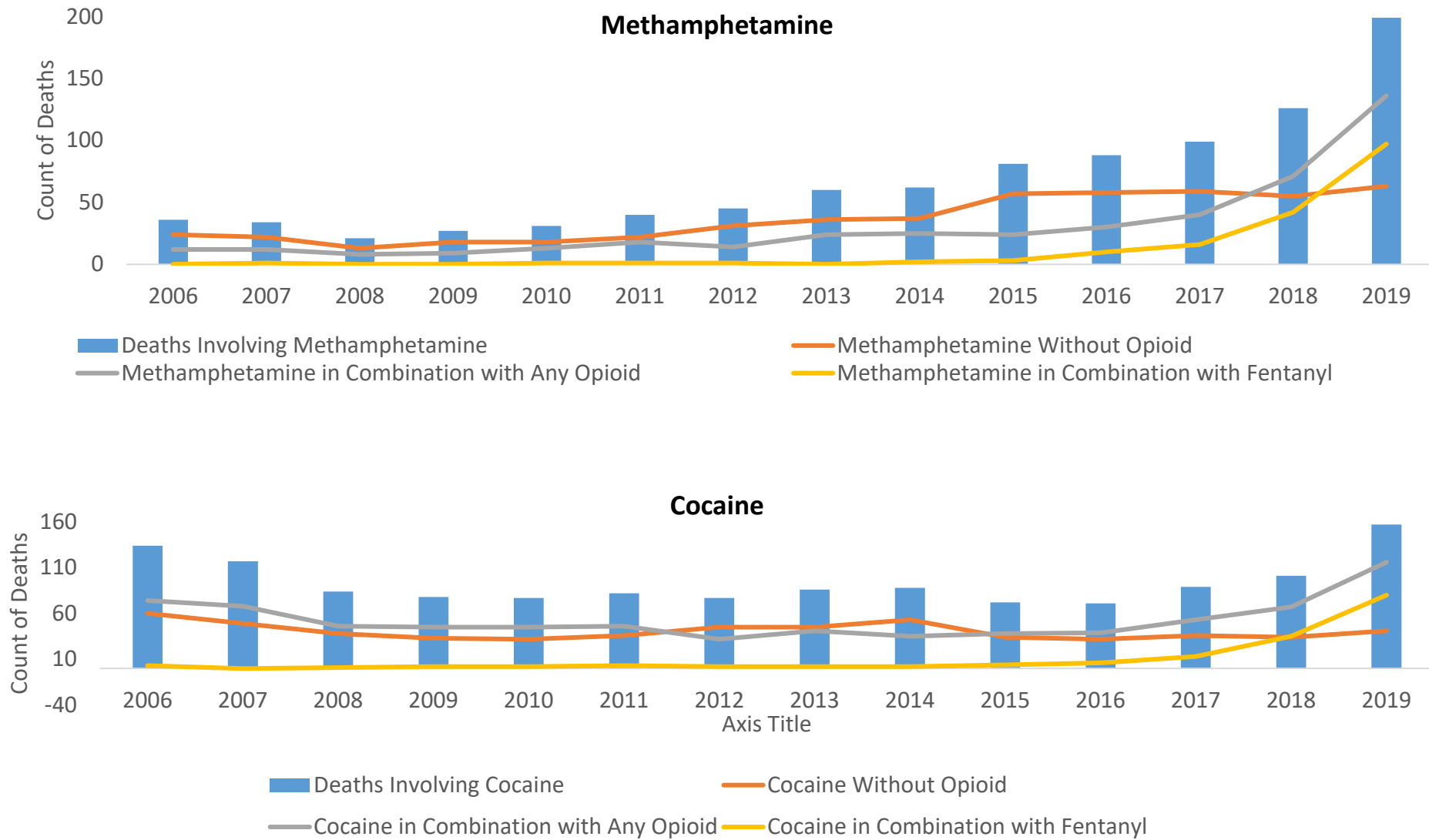
Rates of Cocaine Drug Seizures (NFLIS-Drug), Treatment Admissions, Emergency Department (ED) Visits, Hospitalizations, and Deaths in San Francisco, 2005-2019*



- Cocaine-related morbidity and mortality are increasing.
- Mortality was stable through 2016 but has been increasing since (more detail on next slide).
- Emergency department visits have been increasing since 2010, and hospitalizations since 2015.

*2019 mortality data are incomplete.

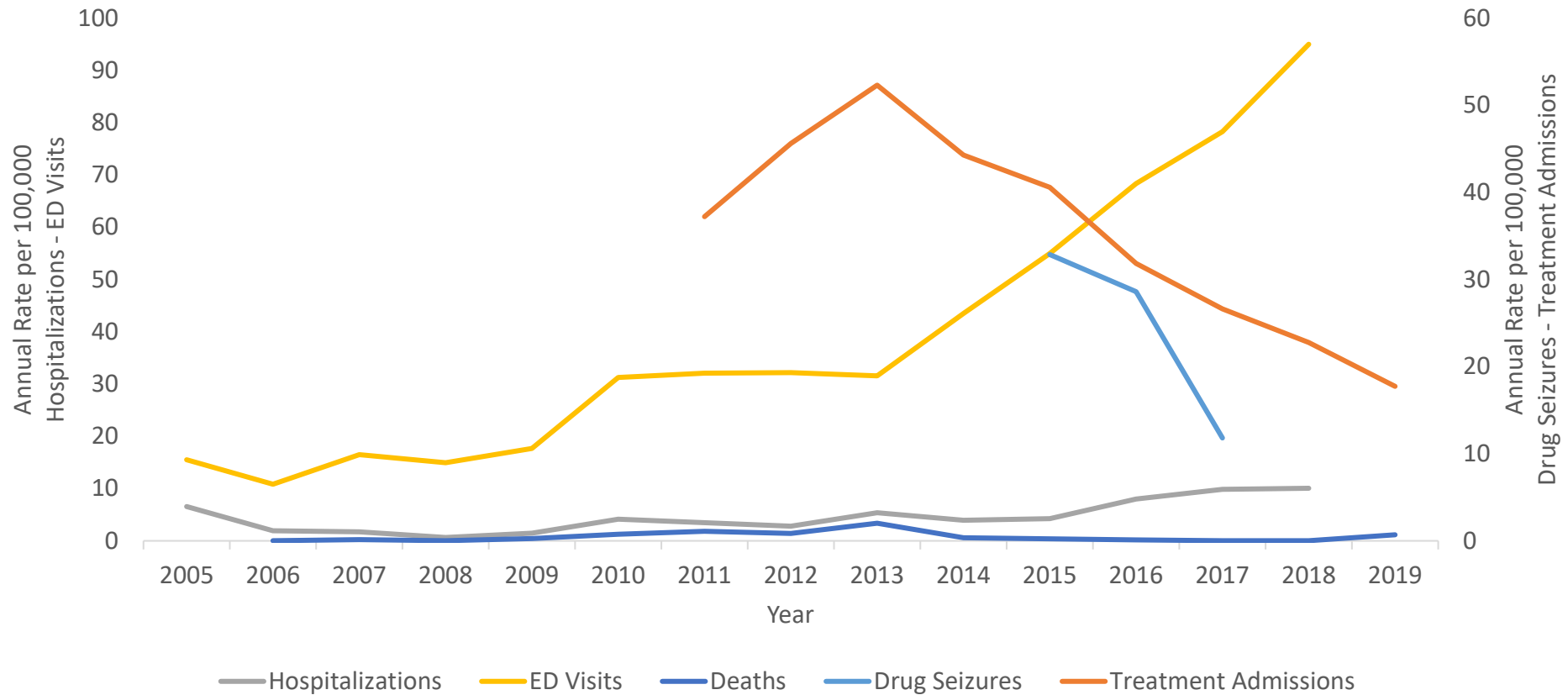
Methamphetamine and Cocaine Mortality by Opioid Involvement, 2006-2019*



*2019 mortality data are incomplete.

Cannabis

Rates of Cannabis-Related Hospitalizations, Emergency Department Visits, Drug Seizures (NFLIS-Drug), and Treatment Admissions in San Francisco, 2005-2019*



- Although cannabis-related treatment admissions and drug seizures have been declining, hospitalizations and emergency department visits have increased.
- California legalized cannabis for recreational use in 2018.

*2019 mortality data are incomplete.

Policy Updates

- **Methamphetamine Task Force**
 - The SFDPH Methamphetamine Task Force in 2019 recommended multiple new programs that were under development prior to the COVID-19 pandemic and have now been put on hold.
- **San Francisco has ceased breaking up encampments of people experiencing homelessness to avoid exacerbating COVID-19 transmission.**
- **Isolation and Quarantine efforts**
 - SFDPH has housed people experiencing homelessness in hotels throughout San Francisco, both to manage and to prevent outbreaks in shelters and other congregate living settings
 - SFDPH has heavily utilized telehealth for delivery of treatment for SUDs, particularly buprenorphine

Treatment Tables

Table 1: Trends in Admissions* to Programs Treating Substance Use Disorders, San Francisco Residents, 2015-2019
Number of Admissions and Percentage of Admissions with Selected Substances Cited as Primary Substance at Admission, by Year and Substance

	Calendar Year									
	2015		2016		2017		2018		2019	
	(#)	(%)	(#)	(%)	(#)	(%)	(#)	(%)	(#)	(%)
Total Admissions (#)	10,270	100%	9,958	100%	9,660	100%	8,626	100%	8,309	100%
Primary Substance of Abuse (%)										
Alcohol	2,293	22.3%	2,144	21.5%	1,959	20.3%	1,779	20.6%	1,745	21.0%
Cocaine/Crack	928	9.0%	757	7.6%	693	7.2%	530	6.1%	476	5.7%
Heroin	4,177	40.7%	4,183	42.0%	4,077	42.2%	3,825	44.3%	3,743	45.0%
Prescription Opioids	502	4.9%	482	4.8%	419	4.3%	407	4.7%	464	5.6%
Methamphetamine	1,488	14.5%	1,656	16.6%	1,836	19.0%	1,466	17.0%	1,356	16.3%
Marijuana	584	5.7%	463	4.6%	390	4.0%	335	3.9%	261	3.1%
Benzodiazepines	22	0.2%	23	0.2%	14	0.1%	26	0.3%	52	0.6%
MDMA	12	0.1%	5	0.1%	5	0.1%	7	0.1%	11	0.1%
Synthetic Stimulants	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Synthetic Cannabinoids	1	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Other Drugs/Unknown	263	2.6%	245	2.5%	267	2.8%	251	2.9%	201	2.4%

NOTES:

***Admissions:** Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

Source: Data provided to the San Francisco SCE by the San Francisco Department of Public Health (SFDPH), Community Behavioral Health Services Division.

Table 2: Demographic and Drug Use Characteristics of Treatment Admissions* for Select Primary Substances, San Francisco Residents, 2019
Number of Admissions, by Primary Substance and Percentage of Admissions with Selected Demographic and Drug Use Characteristics

	Primary Substance																	
	Alcohol		Cocaine/Crack		Heroin		Prescription Opioids		Methamphetamine		Marijuana		Benzo-diazepines		Synthetic Stimulants		Synthetic Cannabinoids	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%
Number of Admissions (#)	1,745	100%	476	100%	3,743	100%	464	100%	1,356	100%	261	100%	52	100%	0	n/a	0	n/a
Sex (%)																		
Male	1,339	76.7%	348	73.1%	2,603	69.5%	313	67.5%	1,040	76.7%	198	75.9%	42	80.8%		n/a		n/a
Female	404	23.2%	128	26.9%	1,140	30.5%	151	32.5%	316	23.3%	63	24.1%	10	19.2%		n/a		n/a
Race/Ethnicity (%)																		
White, Non-Hisp.	665	38.1%	80	16.8%	1,736	46.4%	267	57.5%	480	35.4%	45	17.2%	36	69.2%		n/a		n/a
African-Am/Black, Non-Hisp	338	19.4%	303	63.7%	1,092	29.2%	57	12.3%	298	22.0%	95	36.4%	2	3.8%		n/a		n/a
Hispanic/Latino	516	29.6%	58	12.2%	540	14.4%	78	16.8%	393	29.0%	91	34.9%	10	19.2%		n/a		n/a
Asian	63	3.6%	19	4.0%	85	2.3%	13	2.8%	73	5.4%	10	3.8%	0	0.0%		n/a		n/a
Other	163	9.3%	16	3.4%	290	7.7%	49	10.6%	112	8.3%	20	7.7%	4	7.7%		n/a		n/a
Age Group (%)																		
Under 18	7	0.4%	0	0.0%	1	0.0%	0	0.0%	2	0.1%	60	23.0%	0	0.0%		n/a		n/a
18-25	55	3.2%	14	2.9%	103	2.8%	30	6.5%	106	7.8%	49	18.8%	3	5.8%		n/a		n/a
26-44	739	42.3%	113	23.7%	1,535	41.0%	274	59.1%	879	64.8%	113	43.3%	42	80.8%		n/a		n/a
45+	944	54.1%	349	73.3%	2,104	56.2%	160	34.5%	369	27.2%	39	14.9%	7	13.5%		n/a		n/a
Route of Administration (%)																		
Smoked	0	0.0%	393	82.6%	305	8.1%	99	21.3%	875	64.5%	257	98.5%	1	1.9%		n/a		n/a
Inhaled	0	0.0%	63	13.2%	748	20.0%	29	6.3%	109	8.0%	0	0.0%	1	1.9%		n/a		n/a
Injected	0	0.0%	4	0.8%	2,558	68.3%	90	19.4%	318	23.5%	0	0.0%	0	0.0%		n/a		n/a
Oral/Other/Unknown	1,745	100.0%	16	3.4%	132	3.5%	246	53.0%	54	4.0%	4	1.5%	50	96.2%		n/a		n/a
Secondary Substance (%)																na		na
None	1,072	61.4%	172	36.1%	1,037	27.7%	154	33.2%	649	47.9%	95	36.4%	13	25.0%		n/a		n/a
Alcohol	n/a	n/a	124	26.1%	144	3.8%	18	3.9%	231	17.0%	65	24.9%	5	9.6%		n/a		n/a
Cocaine/Crack	198	11.3%	n/a	n/a	997	26.6%	48	10.3%	78	5.8%	23	8.8%	8	15.4%		n/a		n/a
Heroin	59	3.4%	64	13.4%	n/a	n/a	55	11.9%	130	9.6%	9	3.4%	5	9.6%		n/a		n/a
Prescription Opioids	26	1.5%	9	1.9%	185	4.9%	n/a	n/a	18	1.3%	1	0.4%	8	15.4%		n/a		n/a
Methamphetamine	225	12.9%	48	10.1%	1,053	28.1%	104	22.4%	n/a	n/a	54	20.7%	9	17.3%		n/a		n/a
Marijuana	129	7.4%	54	11.3%	237	6.3%	29	6.3%	197	14.5%	n/a	n/a	4	7.7%		n/a		n/a
Benzodiazepines	18	1.0%	2	0.4%	74	2.0%	23	5.0%	16	1.2%	9	3.4%	n/a	n/a		n/a		n/a
Synthetic Stimulants	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	n/a	n/a		n/a
Synthetic Cannabinoids	2	0.1%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%		n/a	n/a	n/a

NOTES:

***Admissions:** Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

n/a: Not applicable; **unavail:** Data not available; **Percentages** may not sum to 100 due to missing data, 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 San Francisco SCE by the San Francisco Department of Public Health (SFDPH), Community Behavioral Health Services Division.

Sources

DATA FOR THIS REPORT WERE DRAWN FROM THE FOLLOWING SOURCES:

Treatment admissions data for San Francisco County were provided by the Community Behavioral Health Services Division of the San Francisco Department of Public Health (SFDPH). Treatment episodes include clients admitted in prior years who are still receiving services in a particular year (e.g., methadone maintenance clients).

Hospital admission and emergency department visit data for San Francisco County were provided by the California Office of Statewide Health Planning and Development. Emergency department visits and hospitalizations include primary or nonprimary ICD-9 codes: E850.0*, E850.1*, E850.2*, 965.0* and ICD-10 codes: T40.0* (excluding T40.0X6), T40.1*, T40.2* (excluding T40.2X6), T40.3* (excluding T40.3X6), T40.4* (excluding T40.4X6), T40.6* (excluding T40.606, T40.696); primary only ICD-9 codes: 304.0*, 305.5* and ICD-10 code: F11*.

Drug mortality data were taken from the National Vital Statistics System-Mortality data, with additional information provided by the California Electronic Death Record System (CA-EDRS).

Drug seizure data were provided by the National Forensic Laboratory Information System (NFLIS), Drug Enforcement Administration (DEA). Data were retrieved on Identified Drugs of Total Analyzed Drug Reports, San Francisco, 2015 and 2016, NFLIS, DEA. NFLIS methodology allows for the accounting of up to three drugs per item submitted for analysis. The data presented are a combined count including primary, secondary, and tertiary reports for each drug.

For additional information about the substances and substance use patterns discussed in this report, please contact Phillip Coffin, M.D., Director, Substance Use Research Unit, San Francisco Department of Public Health, 25 Van Ness, Suite 500, San Francisco, CA 94102, Phone: 628-217-6282, E-mail: phillip.coffin@sfdph.org.