# Pennsylvania State Coroners Association



# Report on Overdose Death Statistics 2014

"To the living we owe respect, but to the dead we owe only the truth." Voltaire

## "And I looked, and behold a pale horse: and his name that sat upon him was Death" Revelations Chapter 6 Verse 8

This report in the following pages provides statistics on deaths where drugs caused or contributed to the death of an individual. In reviewing the numbers on these pages we must be mindful that each number represents a history of an individual with hopes and dreams and families and friends. It is hoped that these numbers can assist in developing policies that will help abate this terrible scourge of drug related deaths.

One very poignant statement of the cascading spiral of death from heroin comes from the following poem shared by a mother on the loss of her daughter with Dauphin County Coroner Graham Hetrick. The mother had asked that the poem be shared in hopes that its reality can help prevent other mothers, fathers, brothers and sisters from having to share in the devastation of the loss of a child.

"She was a good student, a good kid that most likely went down this path of first abusing prescription drugs and then finally using heroin. She tried to escape the lure of opiates but wasn't strong enough. Just a week or two before her death she wrote this poem to her younger sister, warning her about the dangers of drug abuse." Hetrick Testimony before the House Human Services Committee, January 31, 2014.

#### Heroin

By Natalie Cribari Through poison-tainted veins, I feel A warmth that soothes, but is surreal It's funny how we became acquainted He made me quiver, I almost fainted. He seemed so cool, so calm, and sweet He swept me off my virgin feet. We fell in love, or so 1 thought My soul, Almighty love, is what he sought. He hid his identity with a comforting mask, Only to disguise his horrid task. With every kiss, he sucked me dry. His soft caress was all a lie. He came inside me: just a little prick It made me lightheaded, and a little bit sick He abused me raw, "ti1 my arms were sore My cheekbones were visible But I craved him more. He made me chase him And steal, lie and cheat He wore down my body Until I fell in defeat. He cackled at my pain His full destruction of me But I am too dope sick

That this I can't see. Still, I begged and I pleaded

For him to return An ongoing cycle Why didn't I learn? So at night I fell asleep With him by my side But woke up with no one "He promised!" [He lied) So today, again, I make it My priority, my chore, To find him in vain And again be his whore. His passion I want I crave, and I need The rush that I get Fill that indeed I may never make it But to you, I dare say If he should strut by, look the other way He'll charm you and flirt With his deadly advances He'll shower you with false promises And convincing romances He could come upon you, any old day With a twinkle in his eye, And his look that could sway. This is your warnin', so dalin' take heed What he does offer you, you surely don't Need: A handful of problems, a life that is dark In no time he'll have you, And your gravestone he'll mark.

#### Natalie, May You Rest In Peace

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#### **Data Collection**

During the period of January – December 2014, the Coroners and Medical Examiners of the State reported 2488 deaths resulting from drug poisoning. This number may not reflect all drug related deaths for the time period, since there is lag time in getting toxicology reports and autopsy reports completed and not all drug related deaths may have been reported to the Coroner or Medical Examiner. Therefore, the current totals may ultimately be increased. Of the cases investigated by the State's Coroners and Medical Examiners, toxicology results determined that the drugs listed below were present at the time of death. It is important to note that each death is a single case, while each time a drug is detected represents an occurrence. The vast majority of the decedents had more than one drug occurrence. A drug is indicated as the cause of death only when, after examining all evidence and the autopsy and/or toxicology results, the Coroner/Medical Examiner determines the drug is present or identifiable in the deceased and has played a causal or contributing role in the death. It is not uncommon for a decedent to have multiple drugs listed as a cause of death. This report is limited to deaths where the manner of death is accident, suicide, homicide or undetermined. The reported deaths herein do not include natural deaths, where there may be a significant number of drugs in the person's system, but the drugs are not determined to be the cause of death. But, if the drugs were determined to have a underlying impact on a death, which is otherwise due to medical complications, it is included in this report even though it has been determined to be a natural death.

Data and demographics may be missing or flawed from certain counties which will alter the outcome of various totals to a certain degree.

Of the 67 counties data has been received from 54 counties. The Coroners and Medical Examiners who took time out of their busy schedules serving the people of their counties in determining the cause and manner of death of those who have died as a result of violent acts, unintentional or intentional, are gratefully acknowledged. Without their assistance this report would not have been possible.

Any perceived opinions in this Report are those of the compiler of the Report and do not necessarily reflect the opinions of the Pennsylvania State Coroners Association, nor any individual Coroner or Medical Examiner in the State of Pennsylvania.

Susan M. Shanaman, Attorney PSCA Solicitor/Legislative Liaison

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#### **Report Summary**

The CDC has stated that our country is in the midst of an overdose epidemic.

The New York Times quoted Dr. Hamilton Wright of Ohio stating "Of all the nations of the world, America consumes the most opium in one form or another. The habit has this Nation in its grip to an astonishing extent. ... The drug habit has spread throughout America until it threatens us with a very serious disaster." What is astonishing about these comments is not that they were said, but when they were said. These remarks were made in 1911 by the first appointed US Drug Czar (appointed by President Theodore Roosevelt).

Drug related deaths have continued to increase. In 2014 that number reached at least 2,489 individuals. The year 2014 showed an average increase of about 20% over the prior year for many counties. If, initial data for 2015 is any indication, the number of deaths will continue to increase.

Seven (7) people die every day in Pennsylvania from drug related causes. Not known are the number of persons who overdose but survive.

The age of the deceased ranges from 4 months to 85 years of age. The slight majority of deaths are found in the age group 41 - 50 years old, but with all the age groups of 20 through 61 almost equal in the number of deaths. The typical decedent is white, male, aged 41 - 50 and single.

Most deaths are the result of multiple prescription drugs either alone or with the addition of heroin or cocaine, to a lesser degree. Found in 8% of the toxicology reports of the drug related deaths are the two opiods generally prescribed to treat addiction, methadone and suboxone (buprenorphine). Methadone is prescribed in clinics under the regulation of the Substance Abuse and Mental Heath Services Administration (SAMSHA) and the Pennsylvania Drug and Alcohol Prgrams. To prescribe suboxone, the prescriber only needs to secure a DEA authorization.

As stated by US Senator Tim Murphy at the beginning of hearings he is chairing into the issue of Examining The Growing Problem Of Prescription Drug And Heroin Abuse: State And Local Perspectives, March 26, 2015:

"Buprenorphine can more safely maintain a person's dependence by reducing the need for illegal opioid use, such as heroin, and thereby the risk for overdose. But make no mistake, buprenorphine is a highly potent opioid, which according to SAMSHA, is 20 to 50 times more potent than morphine. So it is worth considering that our national strategy to combat substance abuse is to maintain addiction by either prescribing or administering a heroin-replacement opioid. ... And unlike clinics that administer methadone, there are no requirements for buprenorphine clinics to offer or even discuss non-addictive treatment alternatives, no requirement to develop treatment plans, no requirements to protect the public against it being diverted for illicit use."

Statewide drug related deaths occur throughout the year with a slight increase in May. Deaths generally occur on the weekends and Wednesday.

This report is based upon a review of toxicology results and does not include any review of a decedent's prescription history, evidence at the scene (which may be collected by coroners or law enforcement based upon county protocol), autopsy results, investigatory reports or interviews with next of kin, friends or witnesses.

#### **Glossary of Drugs**

Amphetamines – A group of synthetic psychoactive drugs called central nervous system (CNS) stimulants. The collective group of amphetamines includes amphetamine, dextroamphetamine, and methamphetamine. Methamphetamine is also known as "meth," "crank," "speed" and "tina."

Benzodiazepines – A family of sedative-hypnotic drugs indicated for the treatment of stress, anxiety, seizures and alcohol withdrawal. Benzodiazepines are often referred to as "minor tranquilizers." Xanax (Alprazolam) and Valium (Diazepam) are the most commonly prescribed drugs in this drug class.

Buprenorphine – A semi-synthetic opioid known as Buprenex, Suboxone, and Subutex indicated for the treatment of opioid addiction and moderate to severe pain.

**Cathinones** - a family of drugs containing one or more synthetic chemicals related to cathinone, an amphetamine-like stimulant found naturally in the Khat plant. They are 'cousins' of the amphetamine family of drugs, which includes amphetamine, methamphetamine and MDMA (ecstasy). It often goes by the street name of "Molly."

**Cannabinoids** – A series of compounds found in the marijuana plant, the most psychoactive of which is THC, a strong, illicit hallucinogen. Street names for this drug are often associated with a geographic area from which it came but also include generic names like "ganja," "MJ," "ragweed," "reefer" and "grass." **Carisoprodol** – Muscle relaxant indicated for the treatment of pain, muscle spasms and limited mobility. It is often abused in conjunction with analgesics for enhanced euphoric effect. It is marketed as Soma. **Cocaine** – An illicit stimulant. Powdered cocaine goes by many street names including "C," "blow," "snow," and "nose candy," while freebase cocaine is mostly commonly known as "crack." **Ethanol** – ethyl alcohol.

**Fentanyl** – Synthetic narcotic analgesic (pain killer) used in the Durgesic transdermal patch. Also available in a solid "lollypop" sold under the brand name Actiq.

**Flunitrazepam (Rohypnol)** – Commonly referred to as a "date rape" drug. It is a sedative-hypnotic drug in the Benzodiazepine class. It often goes by the street name "roofies".

**Gamma-Hydroxybutyric Acid (GHB)** – A depressant, also known as a "date rape" drug. GHB often goes by the street name "easy lay," "scoop," "liquid X," "Georgia home boy" and "grievous bodily harm." **Heroin** – An illicit narcotic derivative. It is a semi-synthetic product of opium. Heroin also has multiple street names including "H," "hombre" and "smack," and others too numerous to mention.

**Hydrocodone** – A narcotic analgesic (pain killer). Vicodin and Lortab are two common drugs containing hydrocodone.

**Hydromorphone** – A narcotic analgesic (pain killer) used to treat moderate to severe pain. Marketed under the trade name Dilaudid, it is two to eight times more potent than morphine. Commonly used by abusers as a substitute for heroin.

**Ketamine** – An animal tranquilizer and a chemical relative of PCP. Street names for this drug include "special K," "vitamin K" and "cat valium."

**Levamisole-**A drug originally developed for use in treating cancer but discontinued for human use due to its negative effects on the human body. Generally found in the Philadelphia area as a cutting agent for cocaine.

**Meperidine** – A synthetic narcotic analgesic (pain killer) sold under the trade name Demerol, it is used for pre-anesthesia and the relief of moderate to severe pain.

**Methadone** – A synthetic narcotic analgesic (pain killer) commonly associated with Heroin detoxification and maintenance programs but it is also prescribed to treat severe pain. It has been increasingly prescribed in place of oxycodone for pain management. Dolophine is one form of methadone.

Hallucinogenic Phenethylamines/Piperazine – Includes such drugs as MDMA (Ecstasy, a hallucinogen), MDA (a psychedelic), MDEA (a psychedelic hallucinogenic) and Piperazine derivatives. Ecstasy has multiple street names including "E," "XTC," "love drug," and "clarity." MDMA is often also known by a large variety of embossed logos on the pills such as "Mitsubishis" and "Killer Bees."

**Hallucinogenic Tryptamines** – Natural tryptamines are commonly available in preparations of dried or brewed mushrooms, while tryptamine derivatives are sold in capsule, tablet, powder, or liquid forms. Street names include "Foxy-Methoxy", "alpha-O", and "5-MEO."

**Morphine** – A narcotic analgesic (pain killer) used to treat moderate to severe pain. MS (Morphine Sulfate), Kadian, and MS-Contin are the tablet forms; Roxanol is the liquid form.

**Nitrous Oxide (N2O)** – Also known as "laughing gas," this is an inhalant (gas) that produces light anesthesia and analgesia. "Whippets" are a common form of nitrous oxide.

**Oxycodone** – A narcotic analgesic (pain killer). OxyContin is one form of this drug and goes by the street name "OC." Percocet, Percodan, Roxicet, Tylox, and Roxicodone also contain Oxycodone.

**Oxymorphone** – A narcotic analgesic (pain killer), that is often prescribed as Opana, Numorphan and Numorphone.

**Phencyclidine (PCP)** – An illicit dissociative anesthetic/hallucinogen. Common street names for this drug include "angel dust," "ace," "DOA" and "wack."

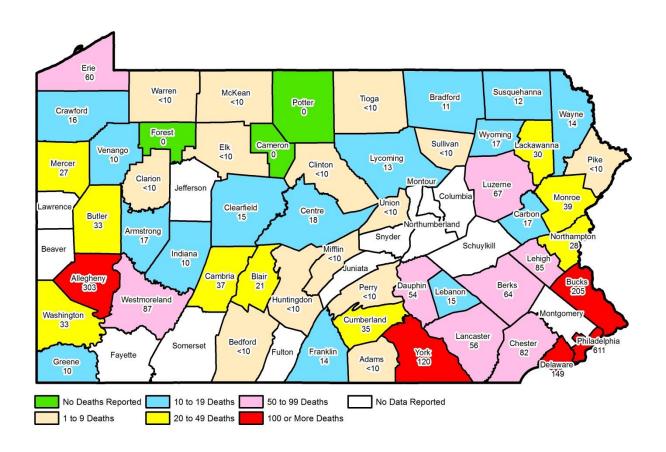
**Synthetic Cannabinoids** – Synthetic cannabinoids are man-made chemicals that are applied (often sprayed) onto plant material to mimic the effect of delta-9-tetrahydrocannabinol (THC), the psychoactive ingredient in the naturally grown marijuana plant (cannabis sativa). Synthetic cannabinoids, commonly known as "synthetic marijuana", "Spice" or "K2", are often sold in retail outlets as "herbal incense" or "potpourri", and are labeled "not for human consumption."

**Sympathomimetic Amines** – A group of stimulants including phentermine (an appetite suppressant) and other sympathomimetic amines not tracked elsewhere in this report.

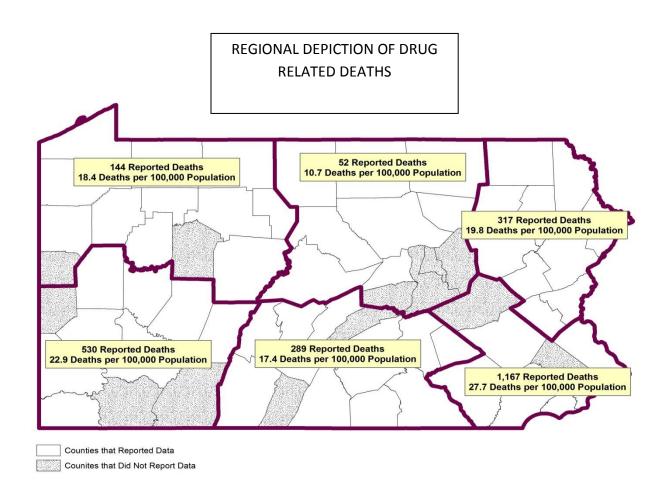
**Tramadol** – A synthetic narcotic analgesic sold under the trade name Ultram and Ultracet. Indications include the treatment of moderate to severe pain. It is a chemical analogue to Codeine. Not currently a scheduled drug.

**Zolpidem** – A prescription medication used for the short-term treatment of insomnia; it is commonly known as Ambien.

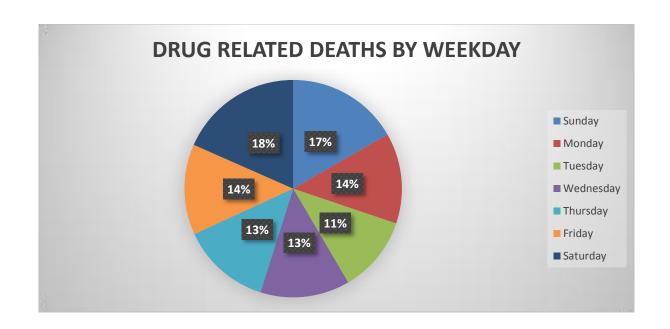
#### PENNSYLVANIA STATEWIDE STATISTICS OVERVIEW

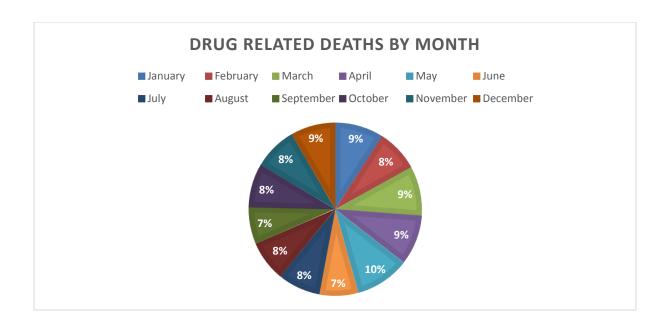


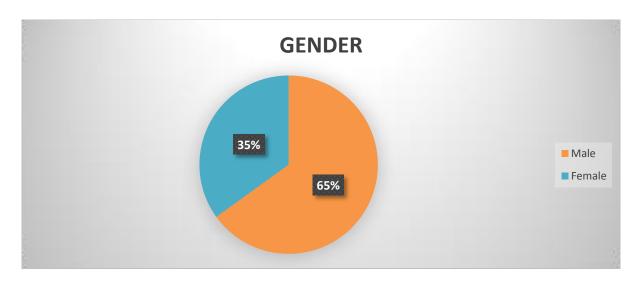
Source: Pennsylvania State Coroners Association

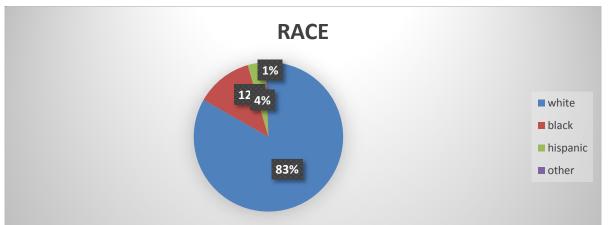


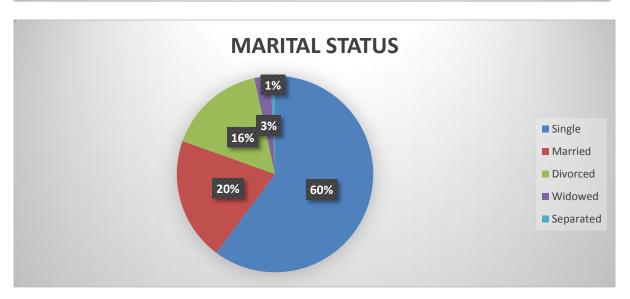
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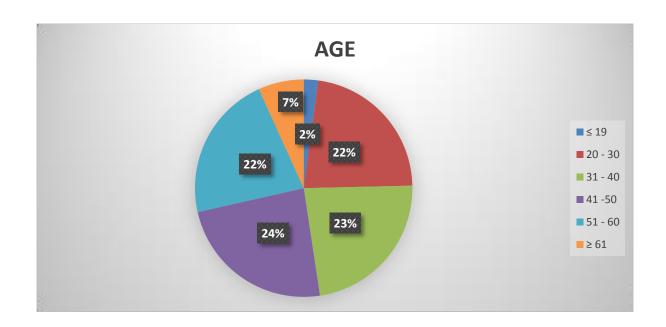




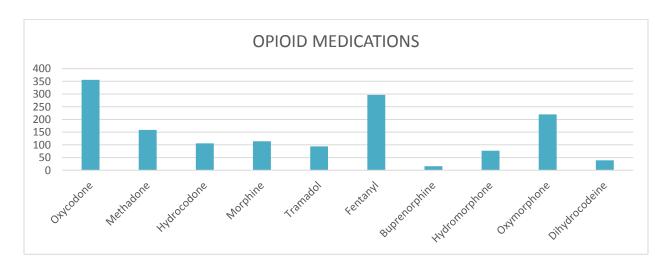


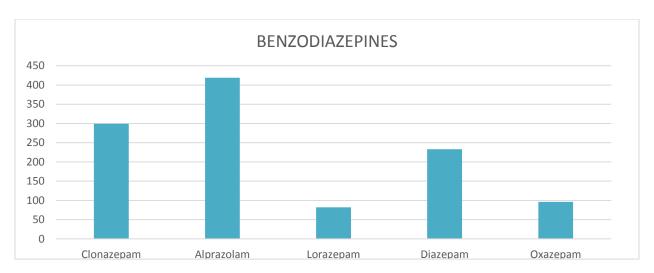


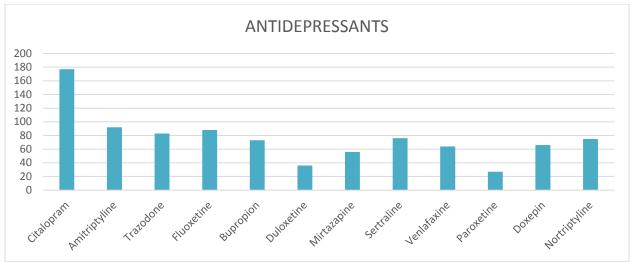


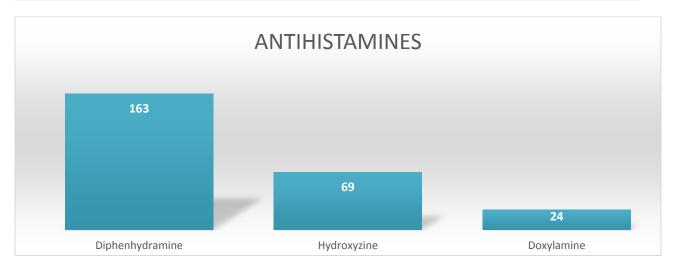


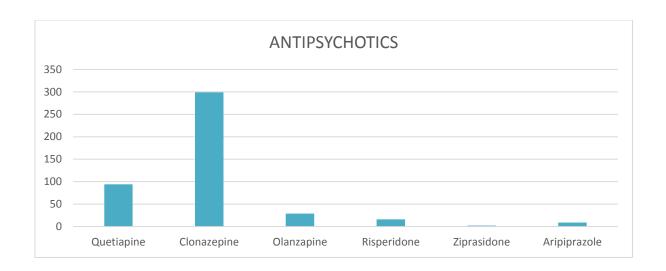
## **OVERDOSES**

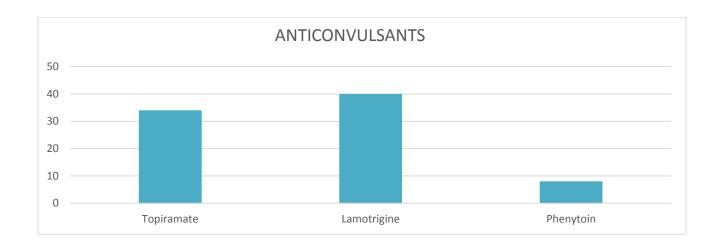


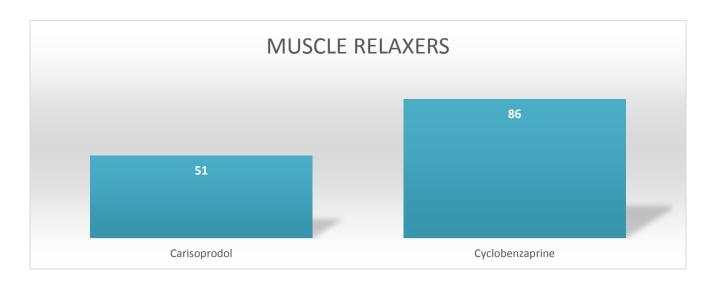


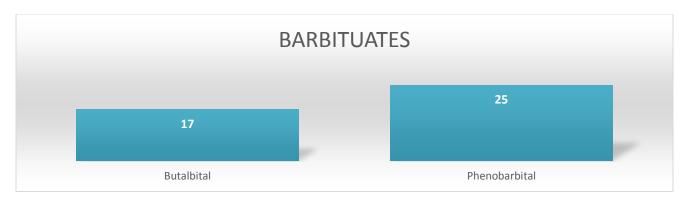


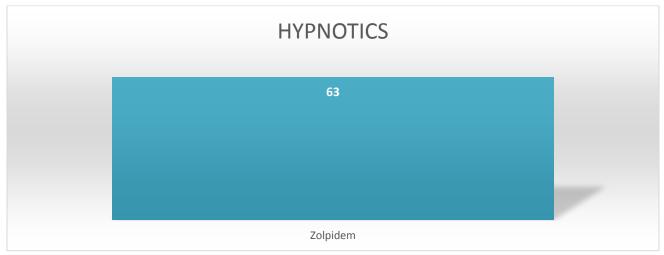


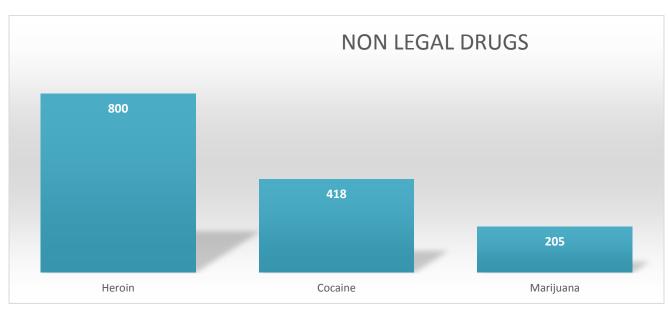


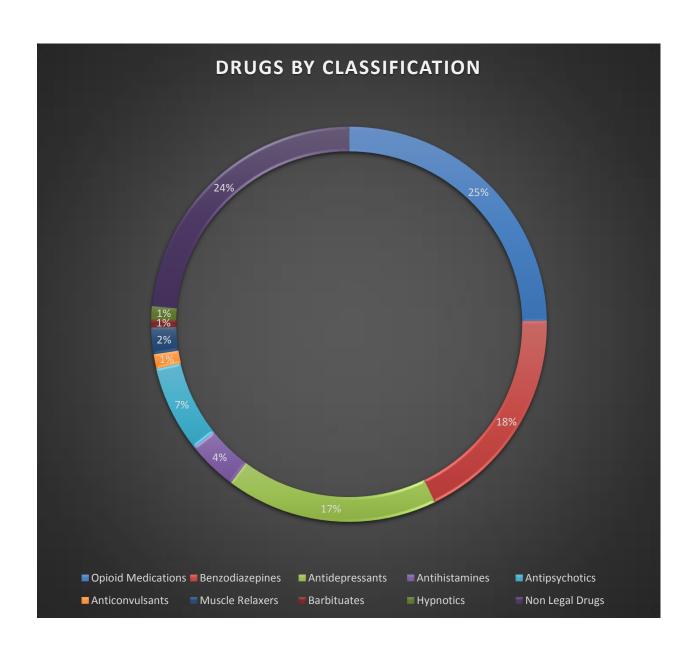


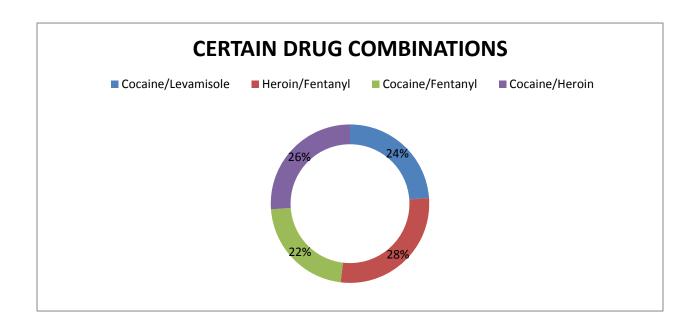










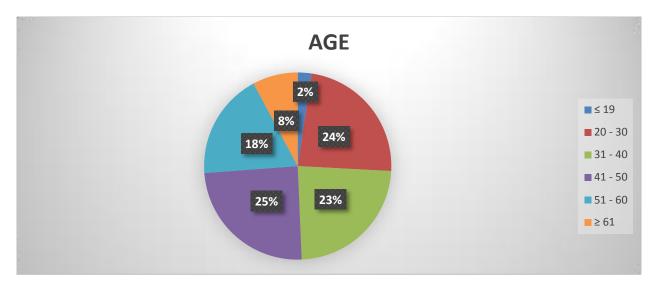


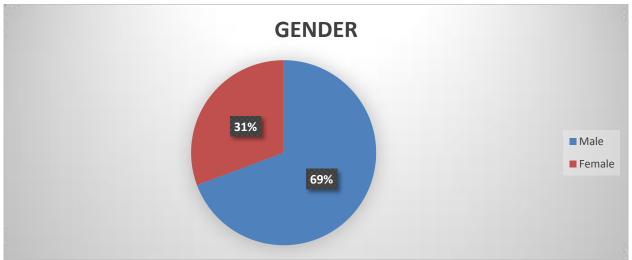
In the mix of drugs there were 473 instances where alcohol was found in the toxicology result

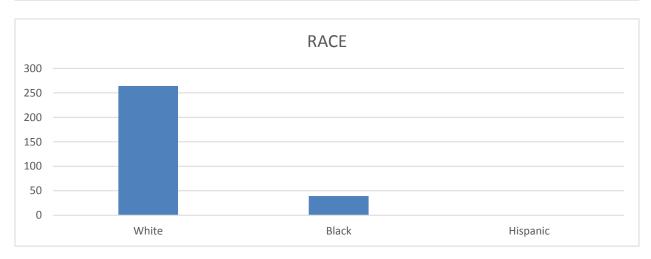
#### **ADAMS COUNTY**

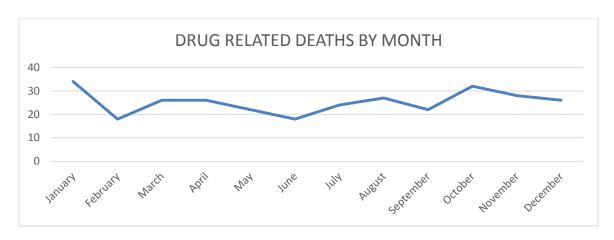
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics. Also, all the county data for the less than 10 drug deaths has been compiled in charts following the individual county charts.

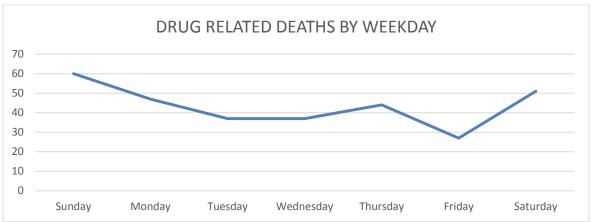
#### **ALLEGHENY**

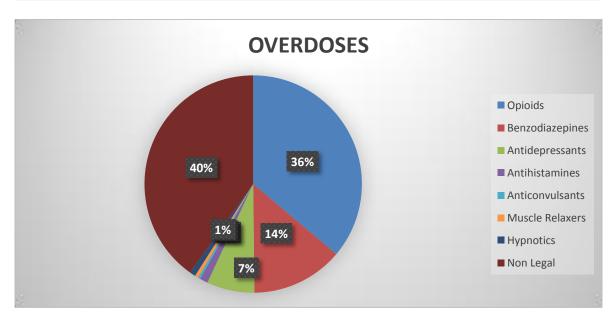






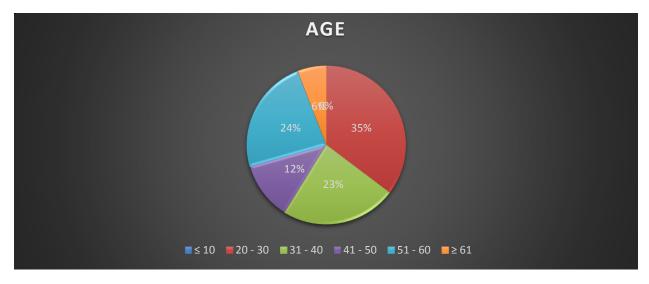


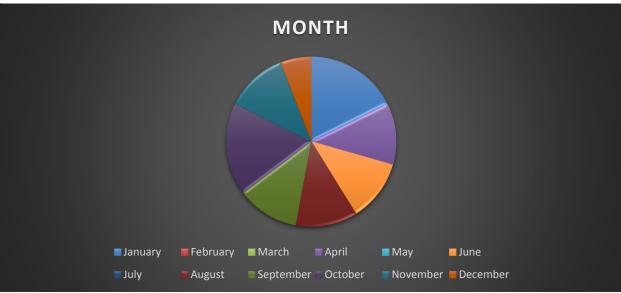




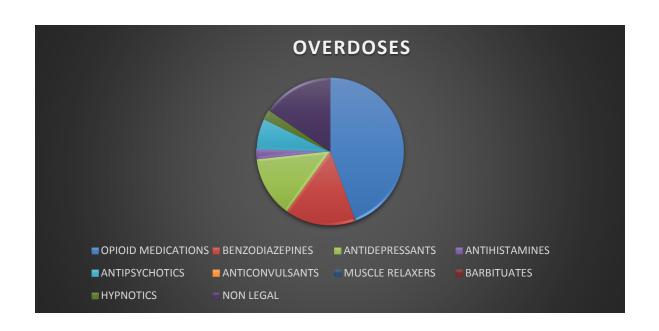
Complete data on Marital Status was unavailable, so no chart was made to separately identify. The data available was included in the overall statewide statistics.

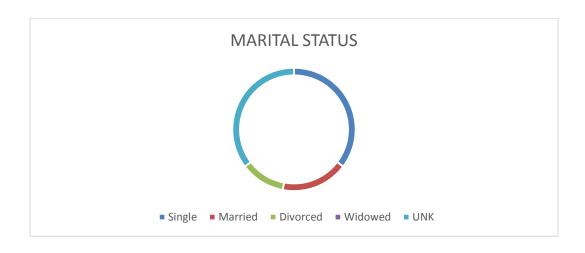
#### **ARMSTRONG**

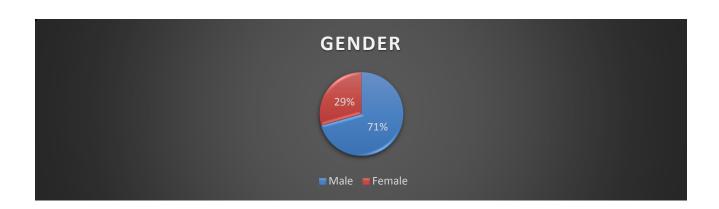




Complete data on date of death was unavailable, so no chart was made to separately identify WEEKDAYS. The data available was included in the overall statewide statistics.







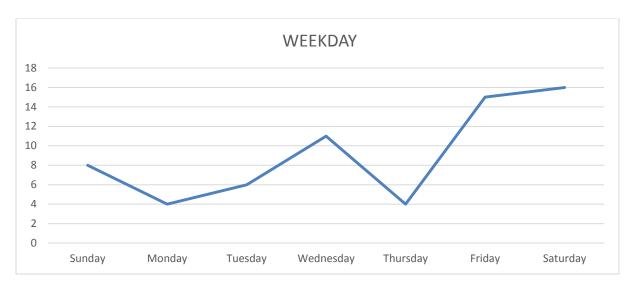
# **BEAVER**

NO DATA PROVIDED.

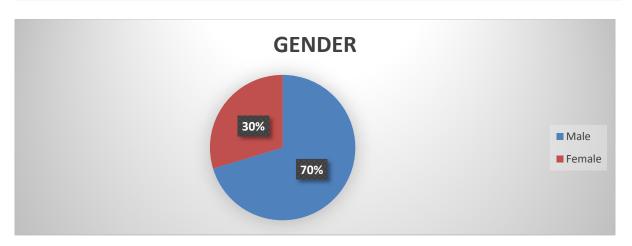
#### **BEDFORD**

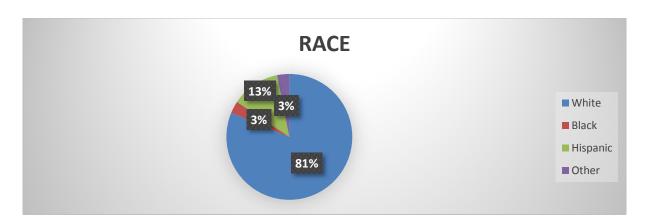
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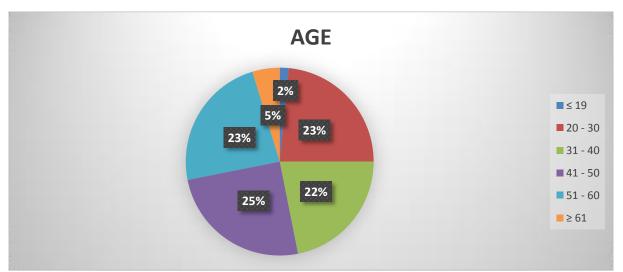
# **BERKS**

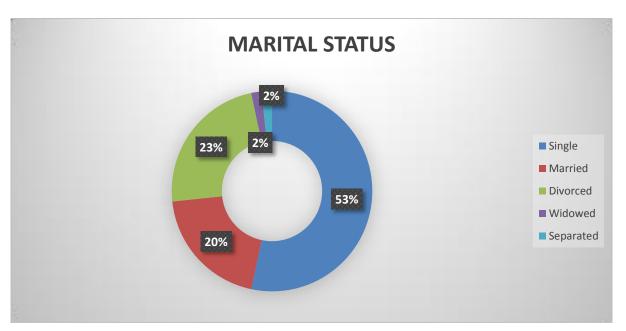


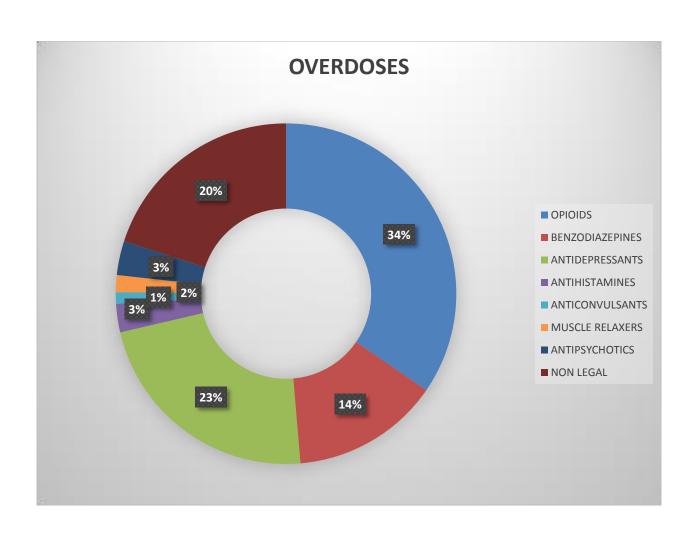




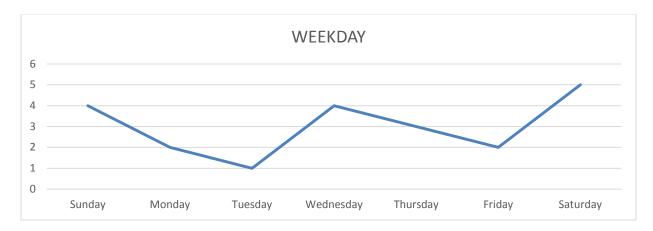




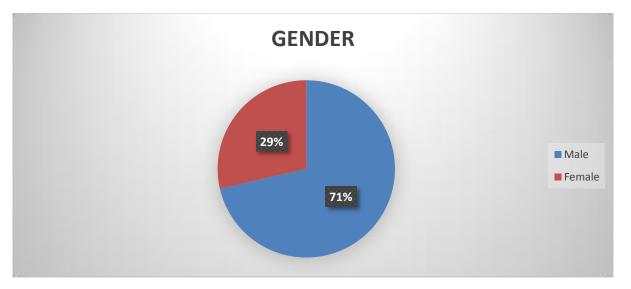


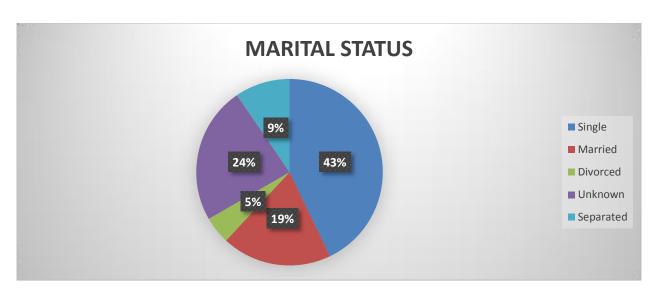


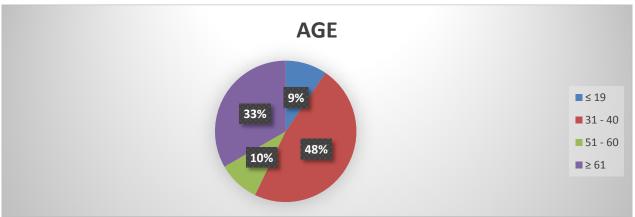
#### **BLAIR**

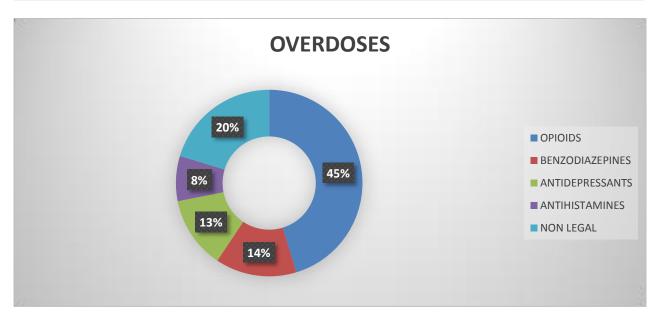




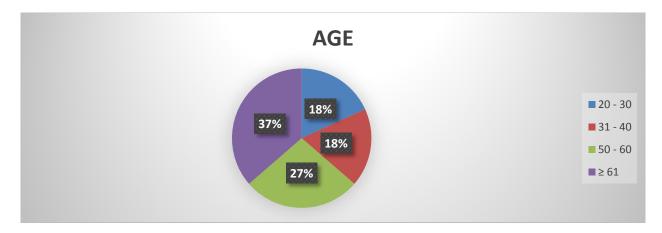


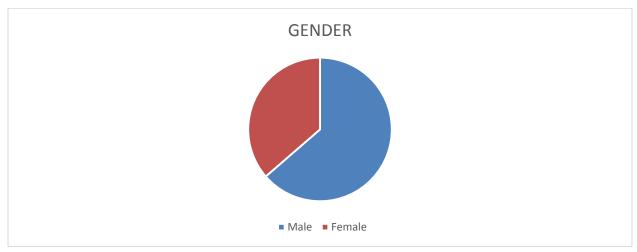


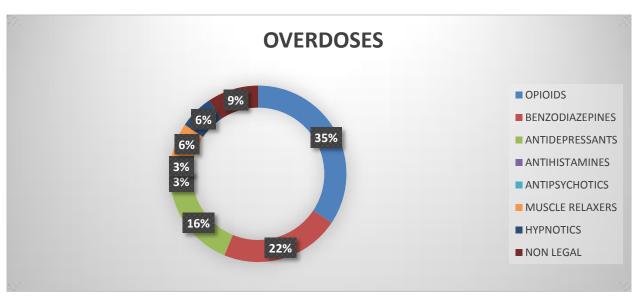




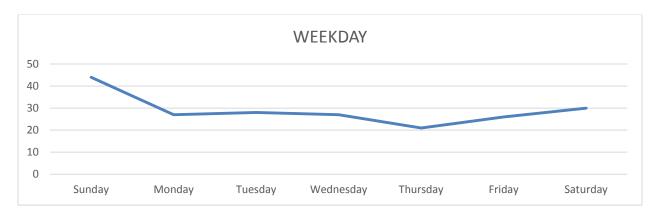
#### **BRADFORD**



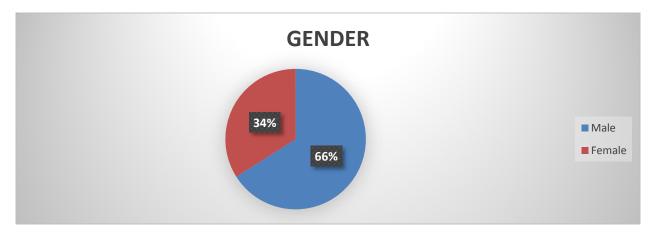


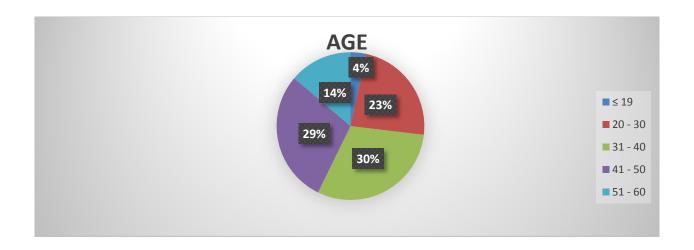


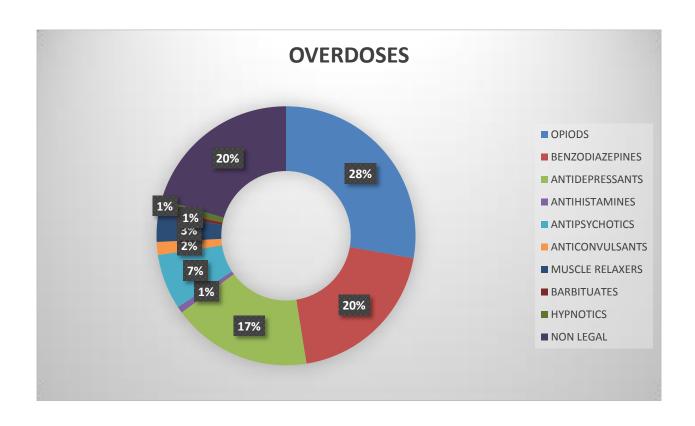
# **BUCKS**



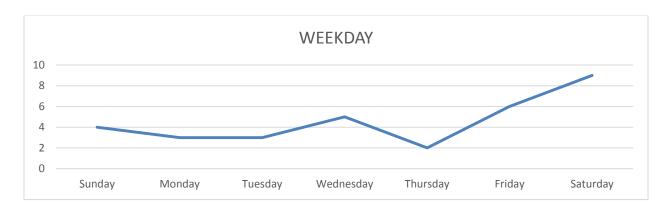


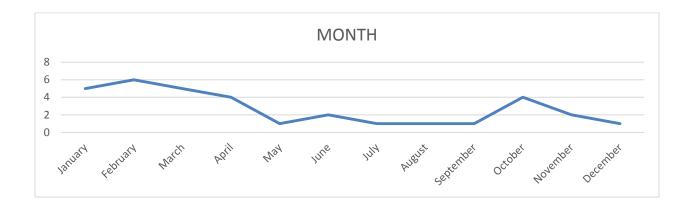


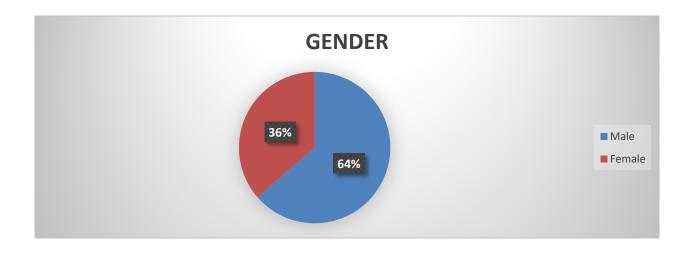


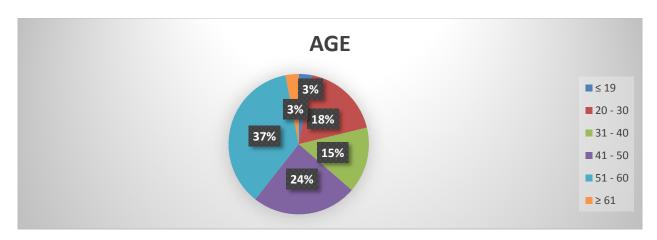


#### **BUTLER**

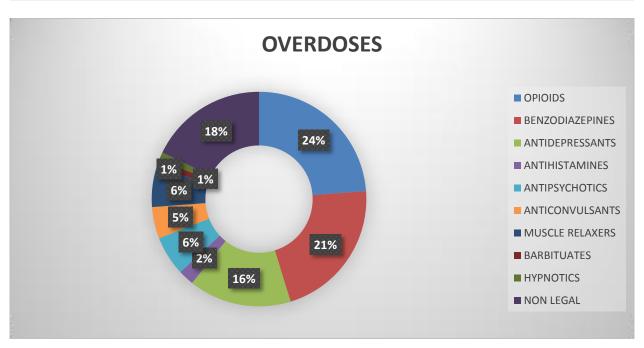




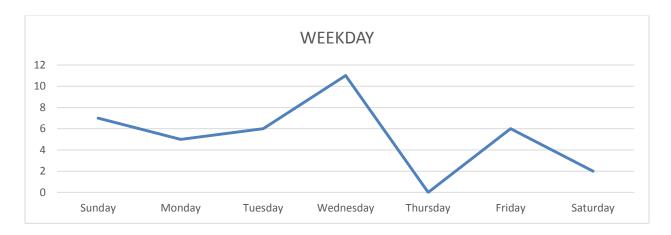


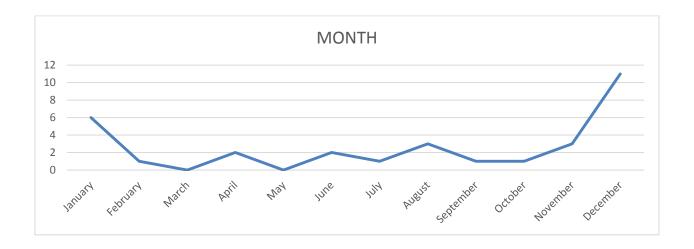


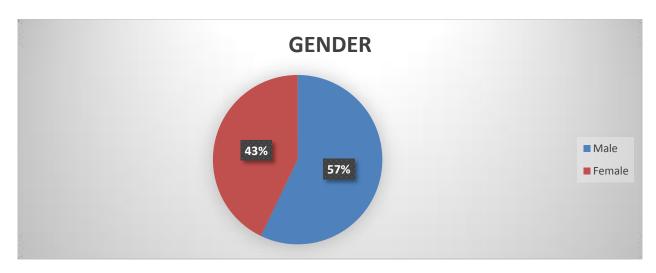


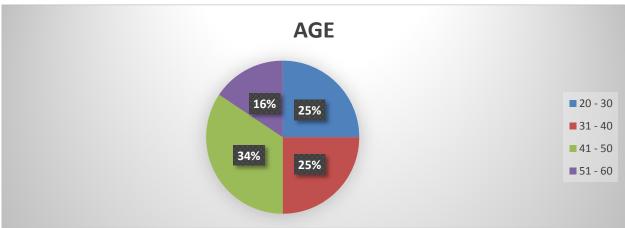


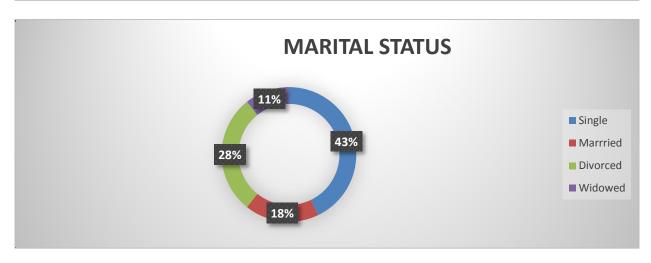
## **CAMBRIA**

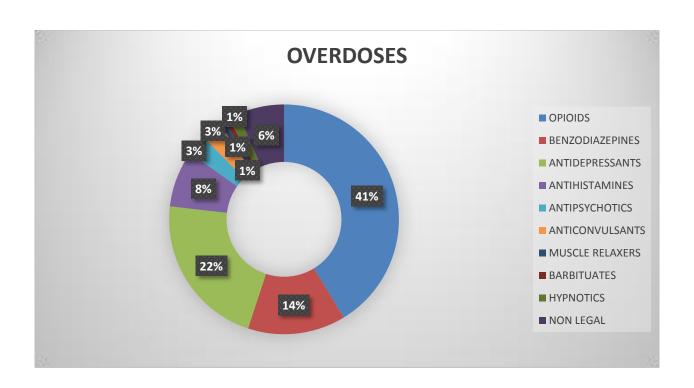








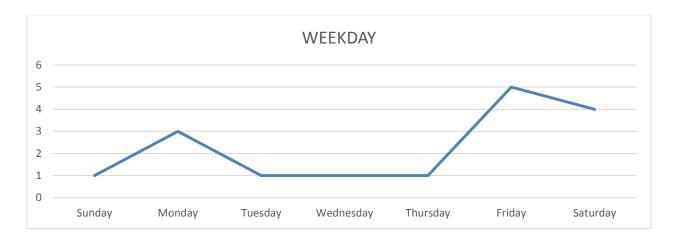




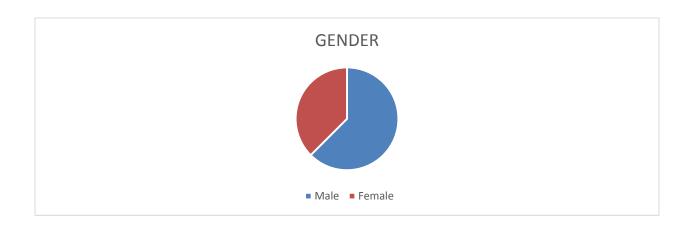
# **CAMERON**

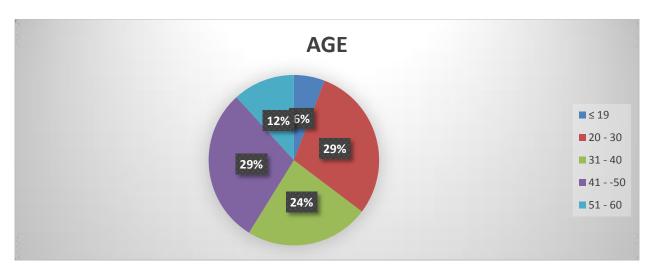
# None

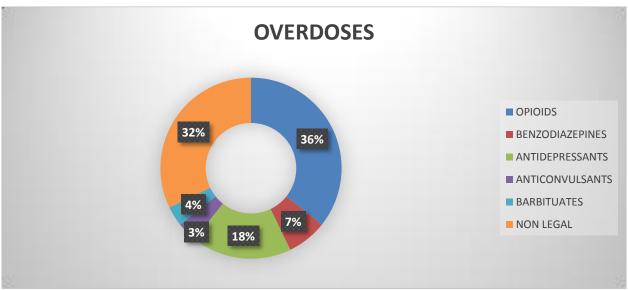
## **CARBON**



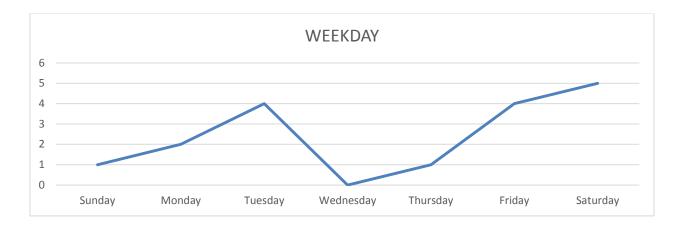




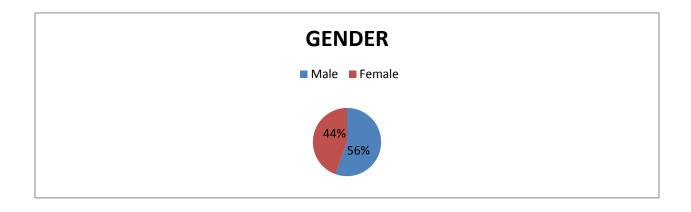


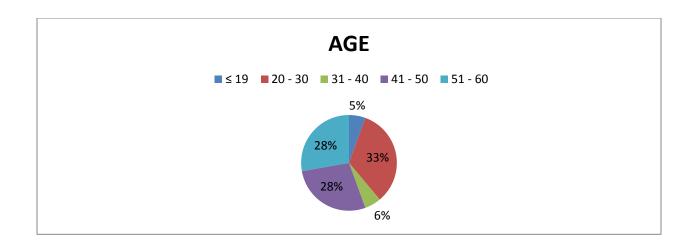


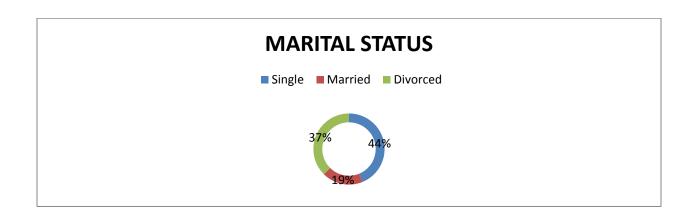
## **CENTRE**

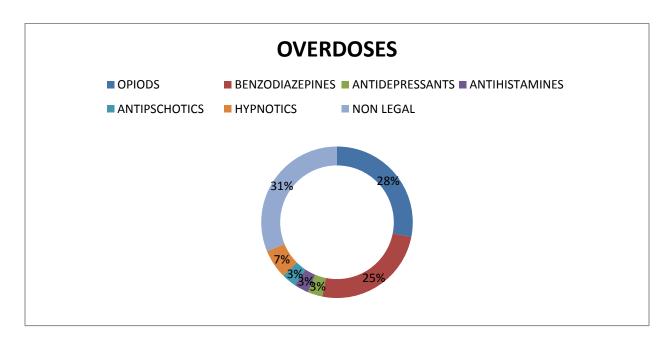




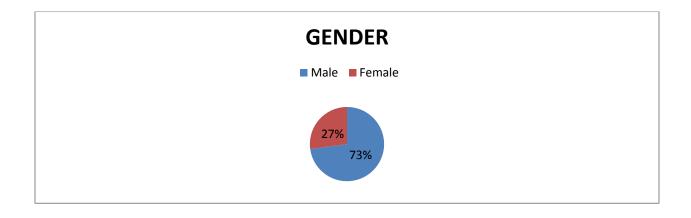


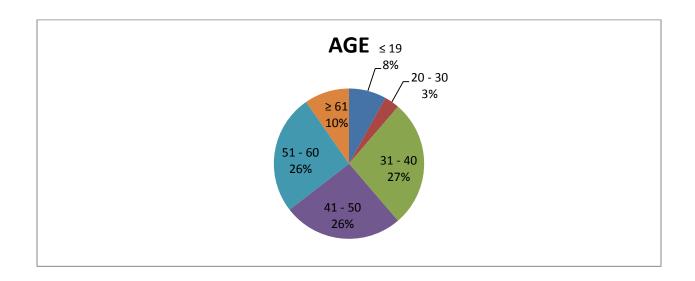


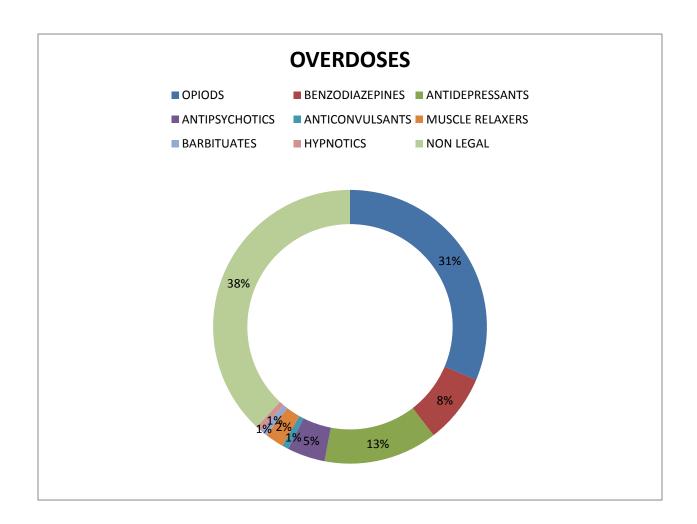




# CHESTER



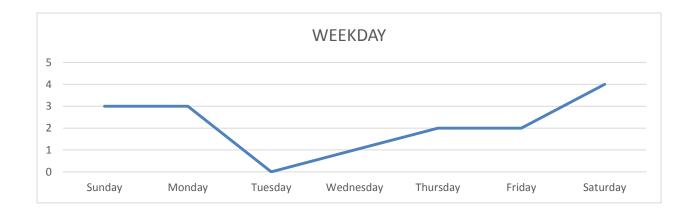




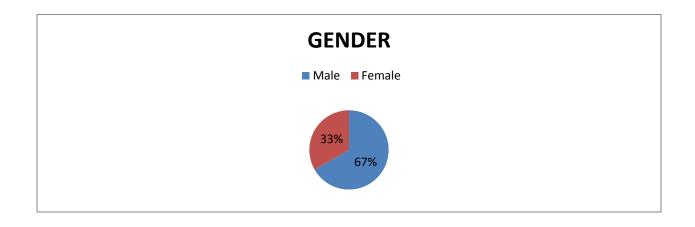
### **CLARION**

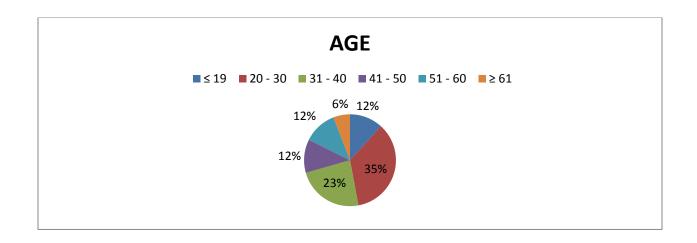
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics. Also, all the county data for the less than 10 drug deaths has been compiled in charts following the individual county charts.

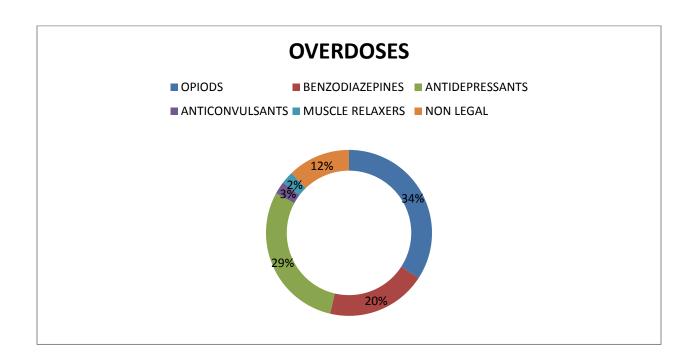
## **CLEARFIELD**











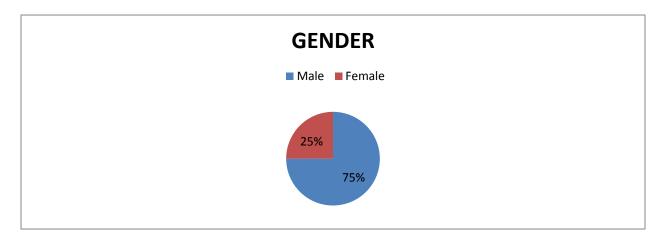
### **CLINTON**

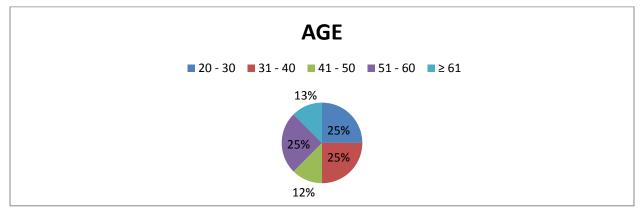
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics. Also, all the county data for the less than 10 drug deaths has been compiled in charts following the individual county charts.

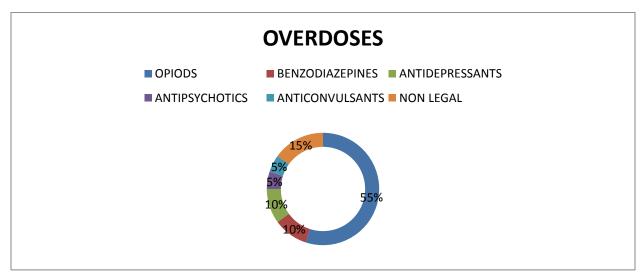
# COLUMBIA

No Data Provided.

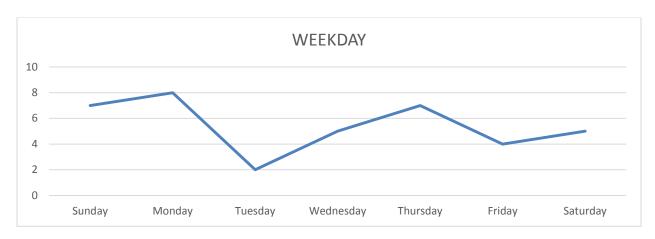
### **CRAWFORD**



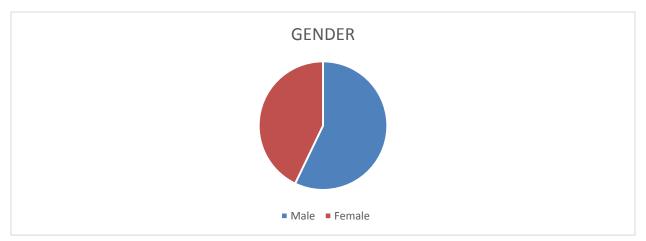


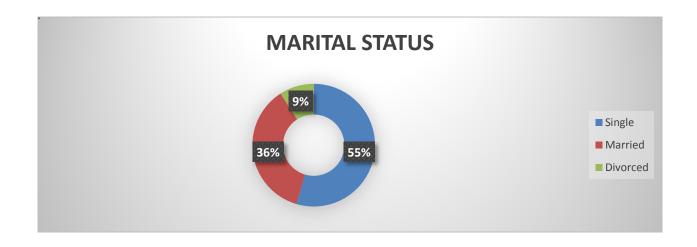


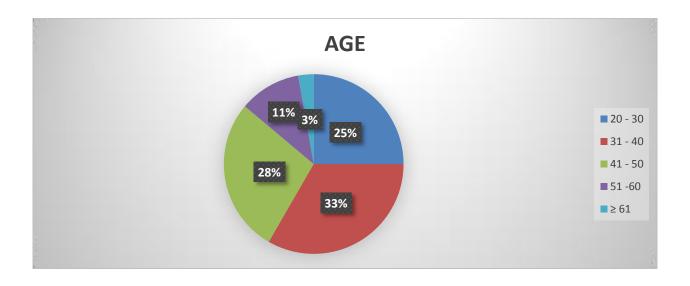
## **CUMBERLAND**

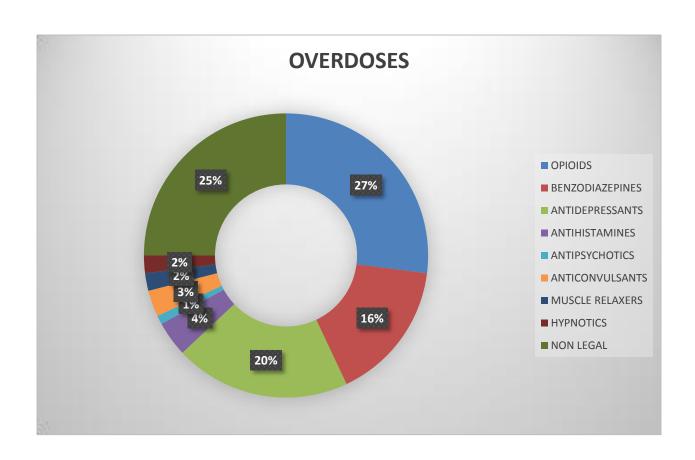






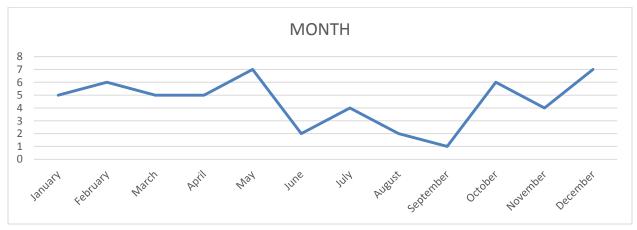


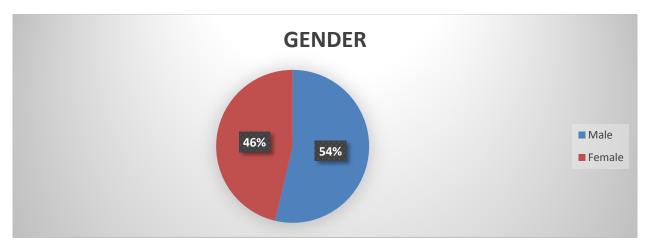


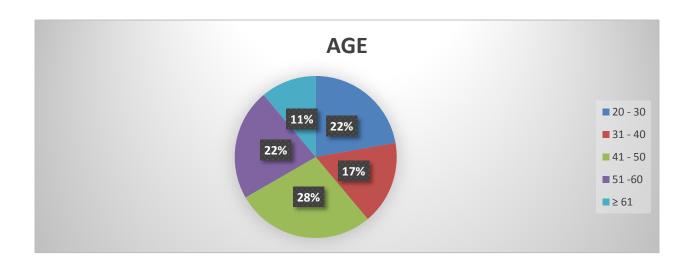


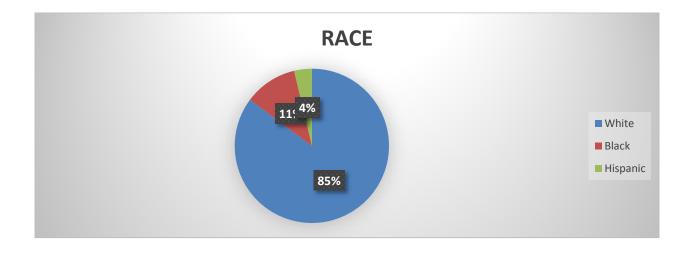
### **DAUPHIN**

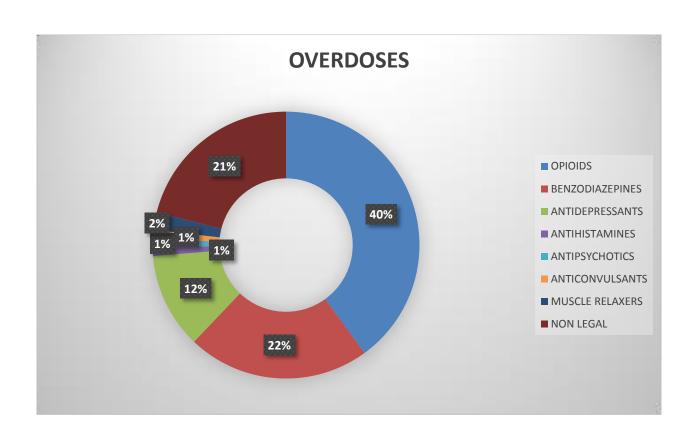




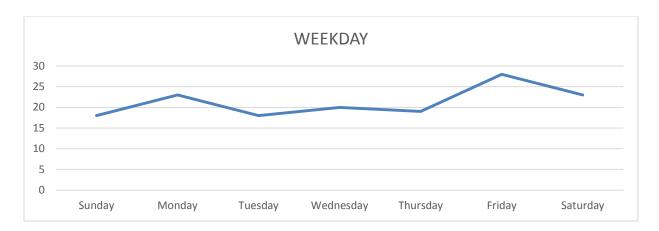


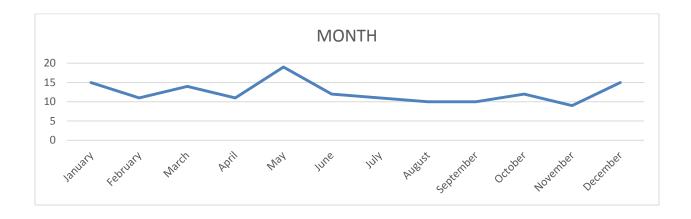


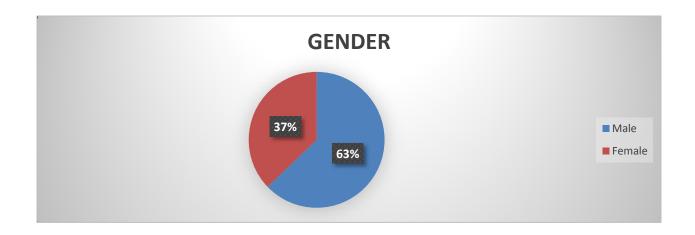


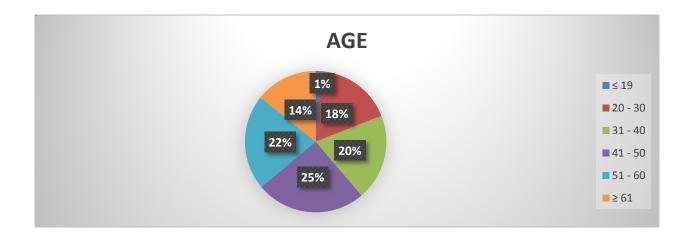


## **DELAWARE**

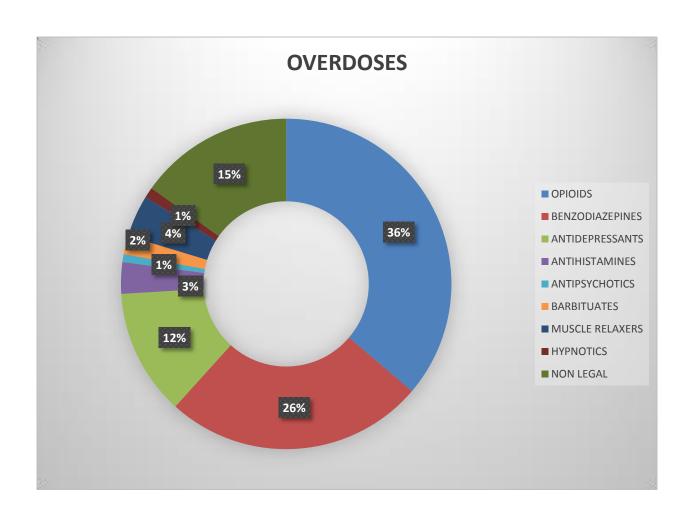










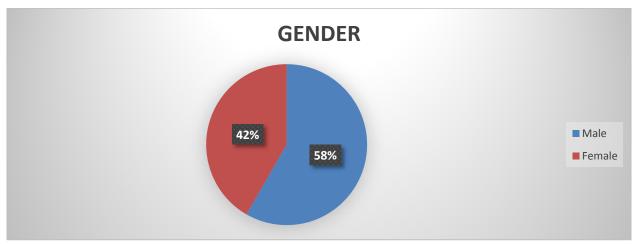


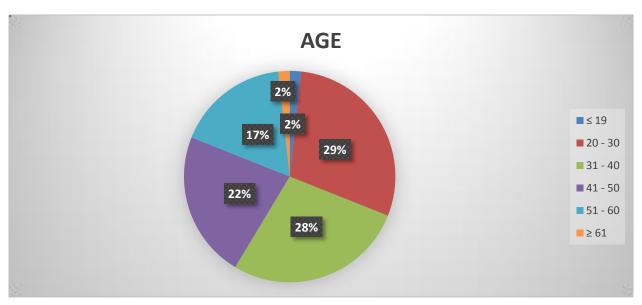
## **ELK**

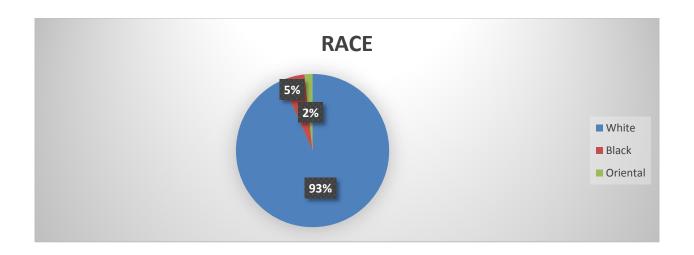
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics. Also, all the county data for the less than 10 drug deaths has been compiled in charts following the individual county charts.

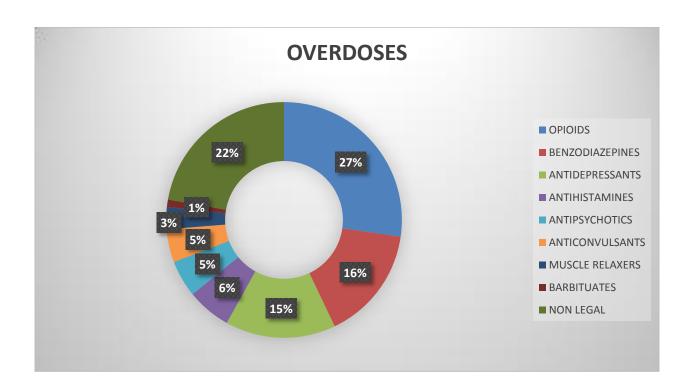
## **ERIE**











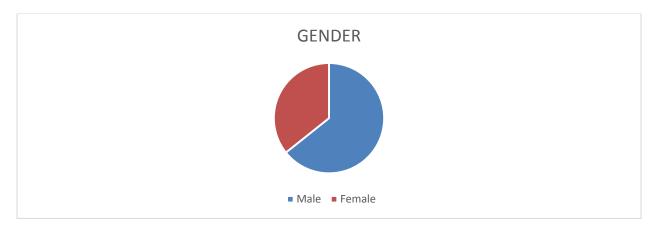
# **FAYETTE**

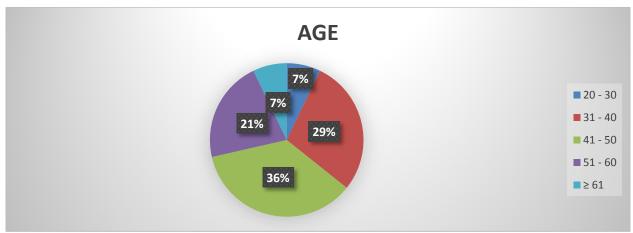
No Data Provided.

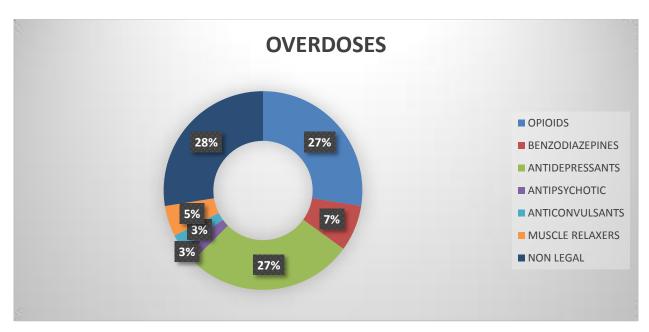
# **FOREST**

None

### **FRANKLIN**



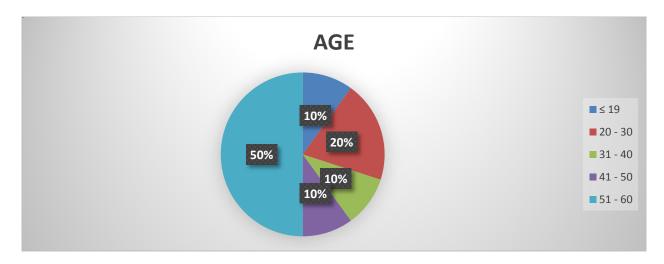


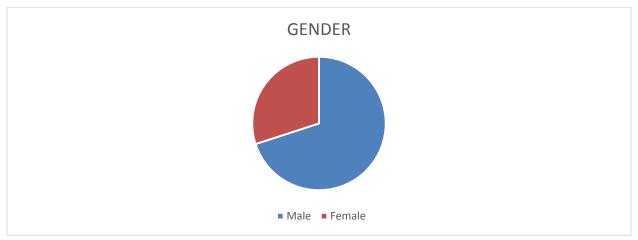


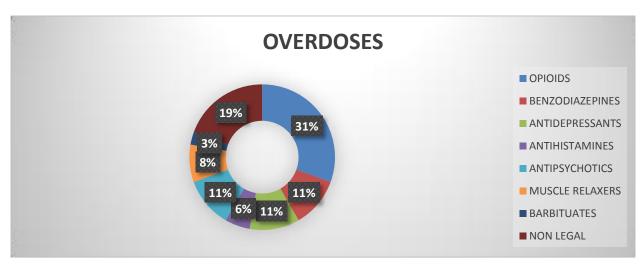
# **FULTON**

No Data Provided.

### **GREENE**



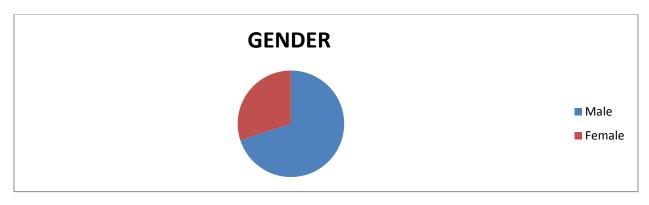


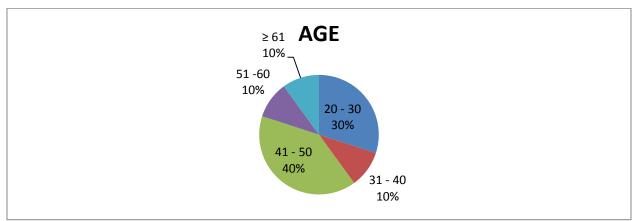


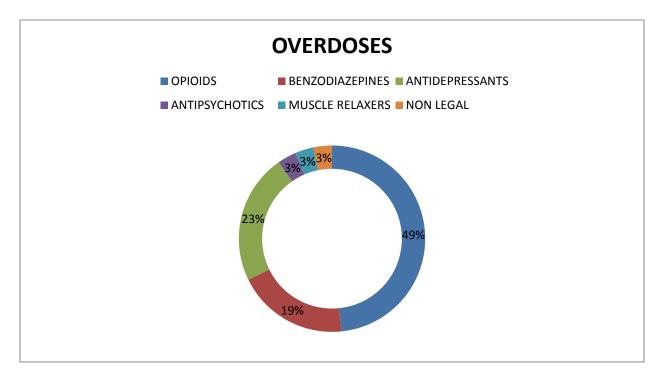
### **HUNTINGTON**

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## **INDIANA**





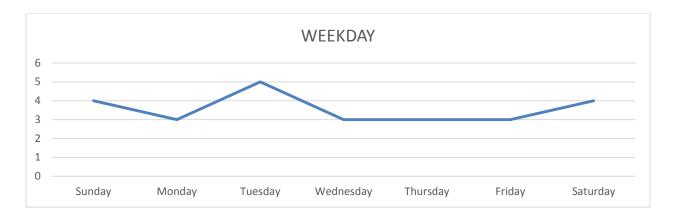


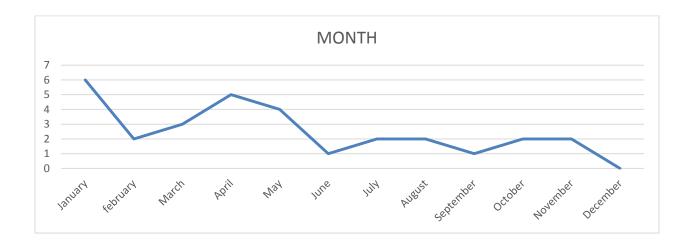
# **JEFFERSON**

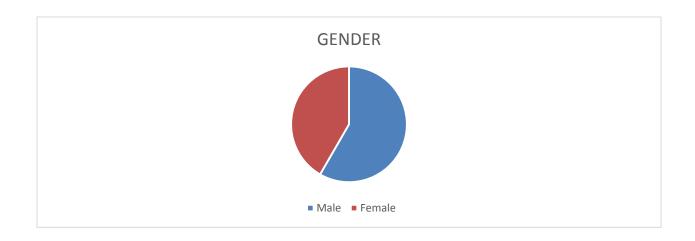
No Data Provided.

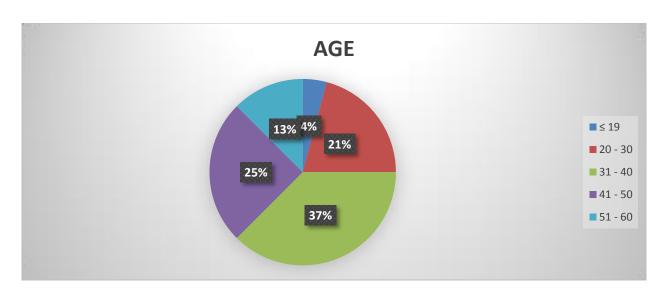
## JUNIATA

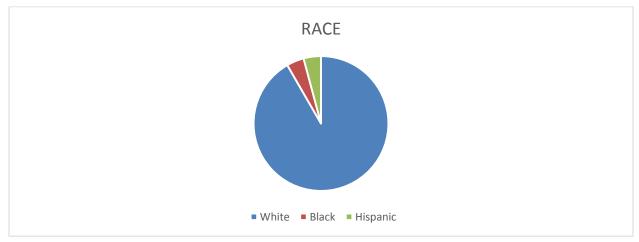
## **LACKAWANNA**

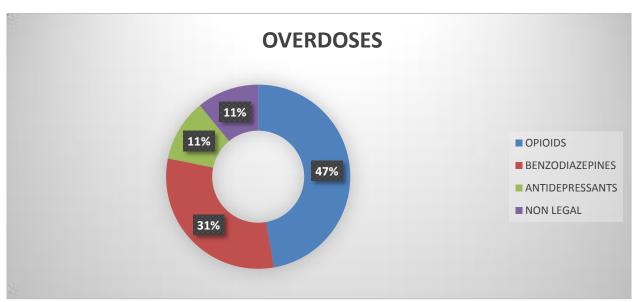




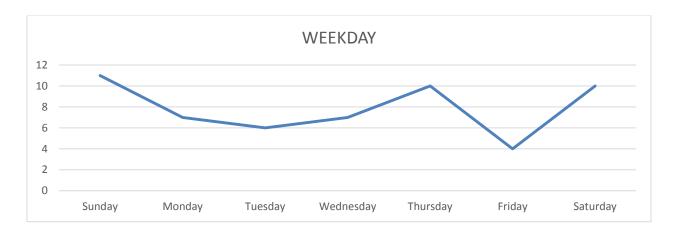


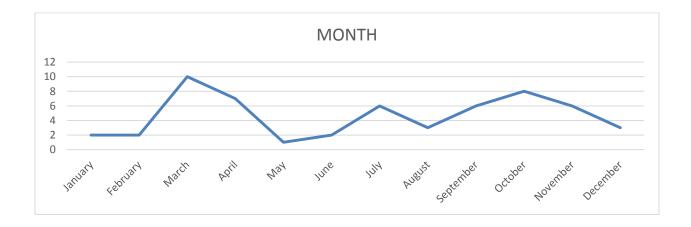


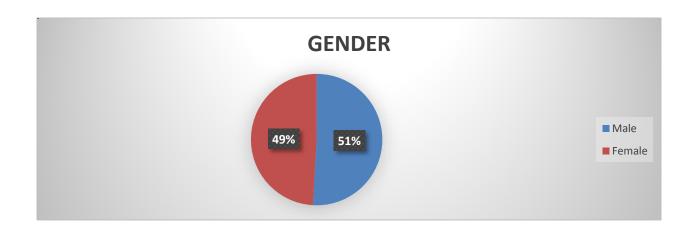


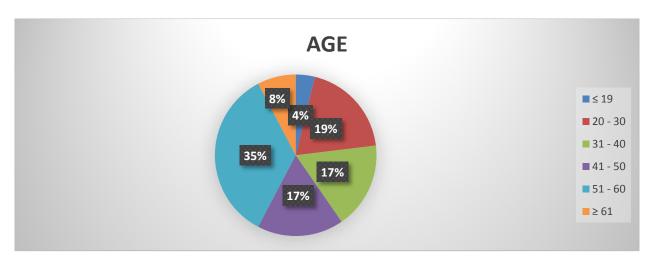


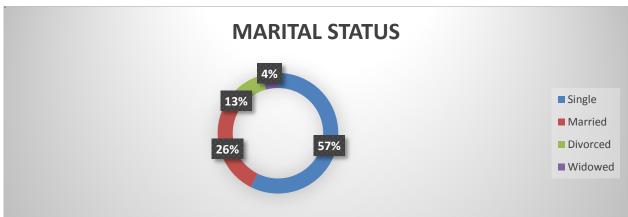
## **LANCASTER**

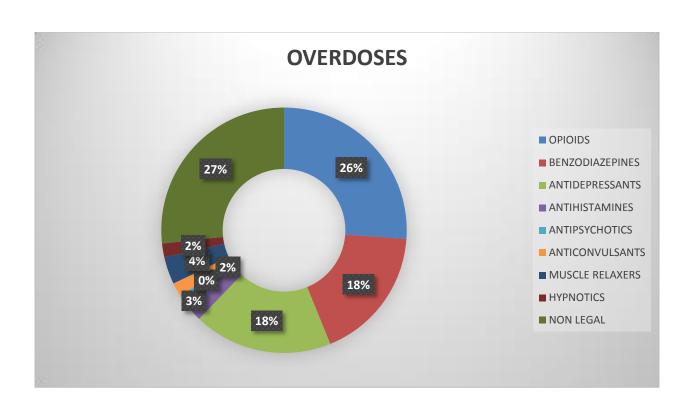






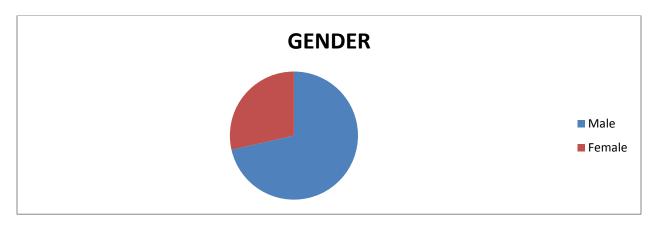


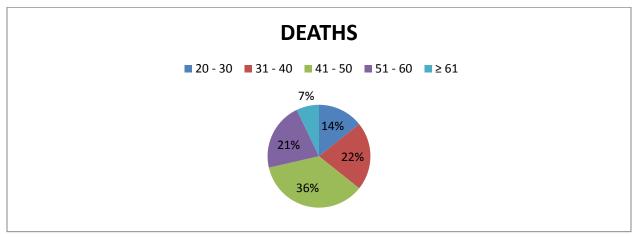


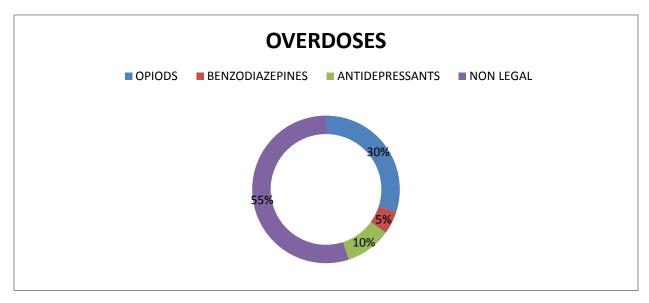


## **LAWRENCE**

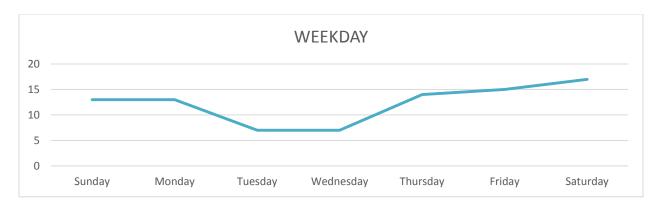
### **LEBANON**

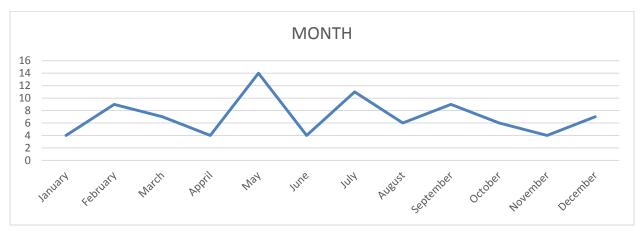


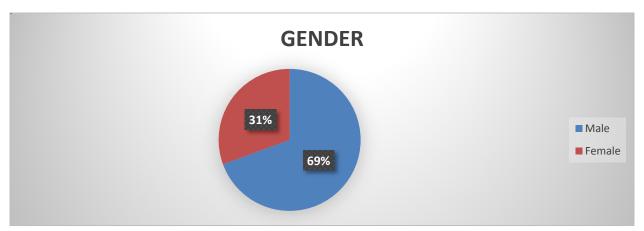


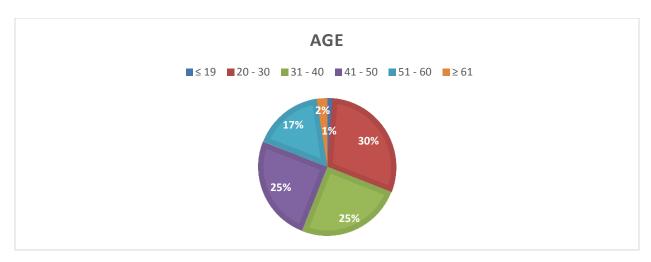


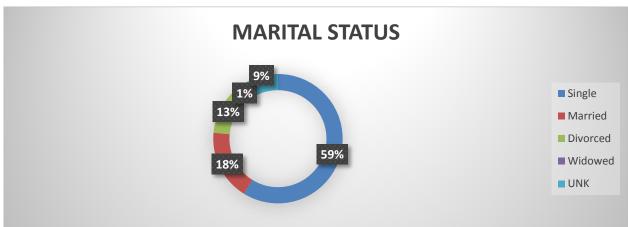
## **LEHIGH**

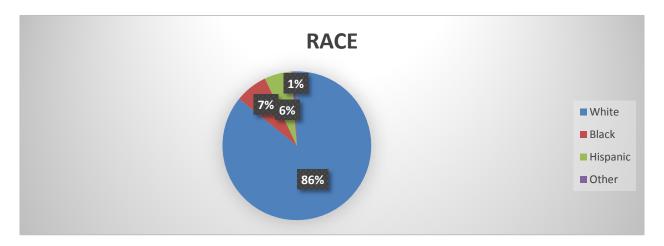


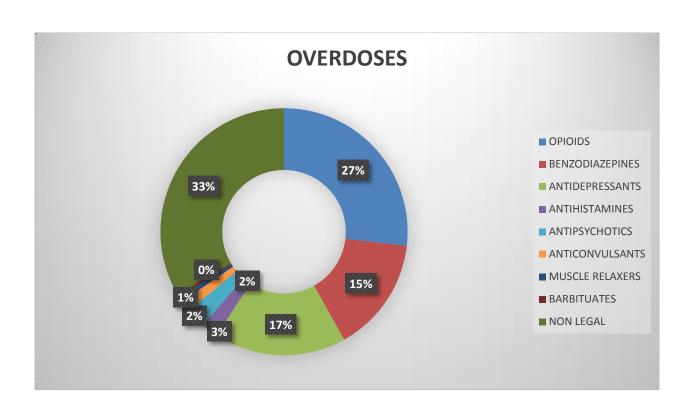




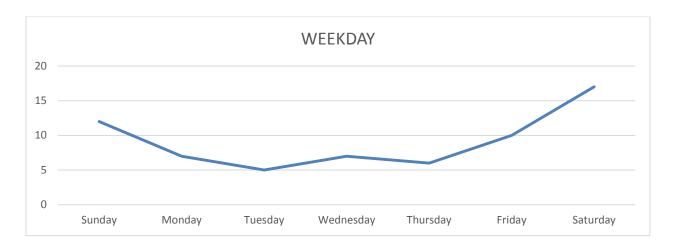


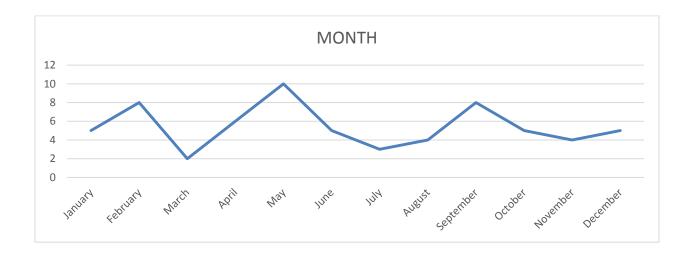


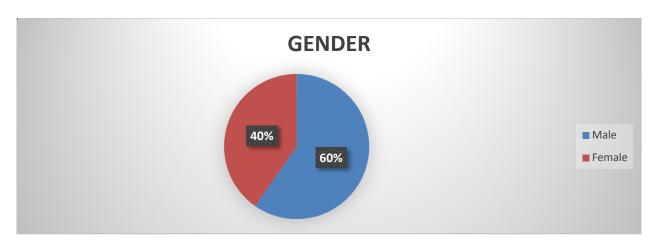


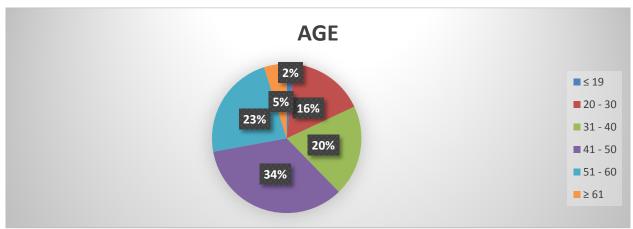


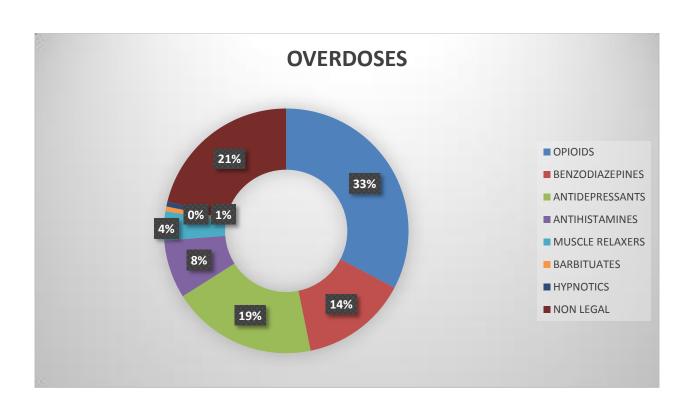
## **LUZERNE**



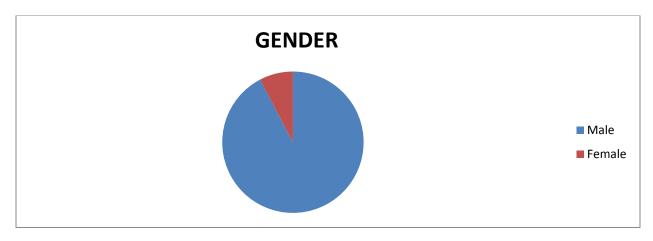


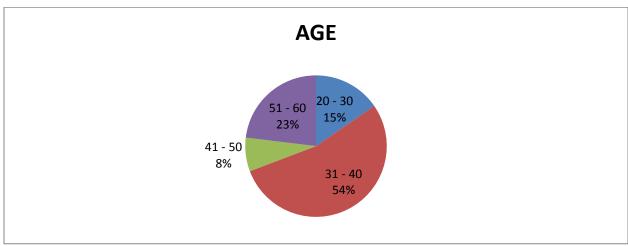


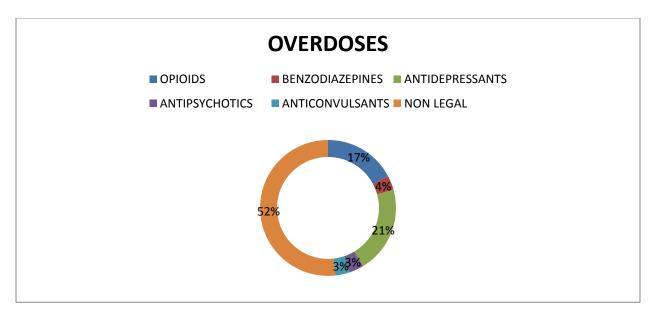




## **LYCOMING**

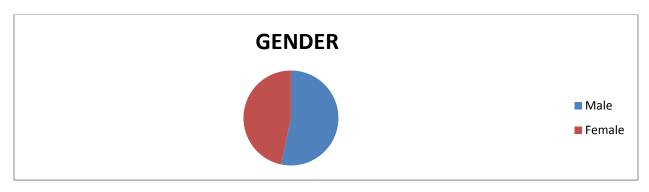


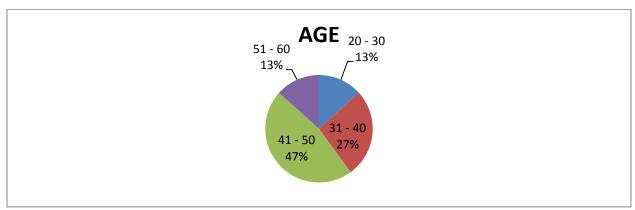


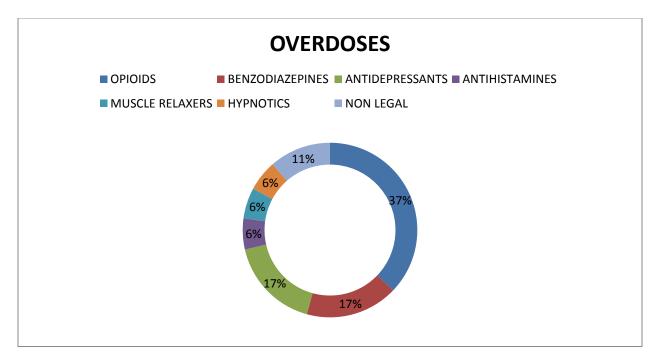


### **MCKEAN**

### **MERCER**

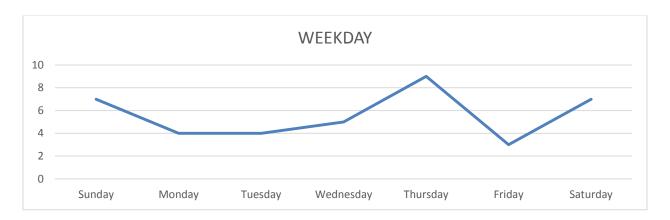




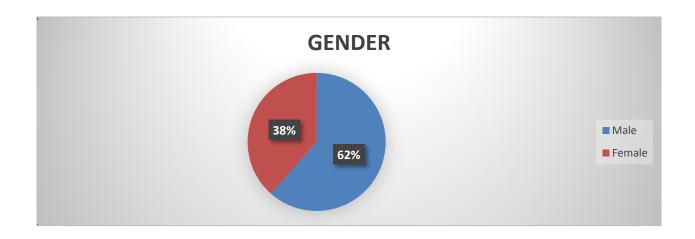


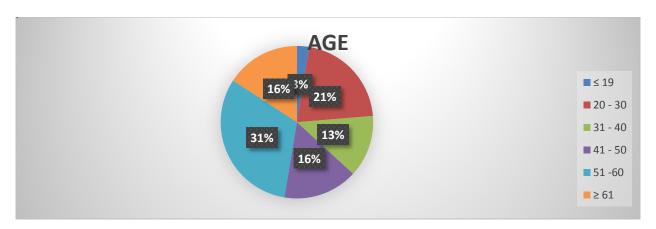
### **MIFFLIN**

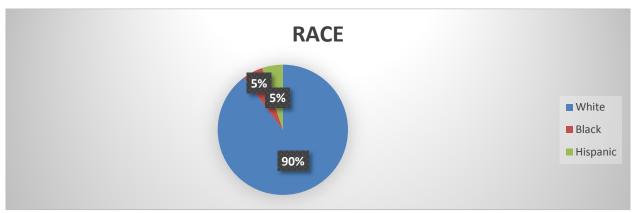
## **MONROE**

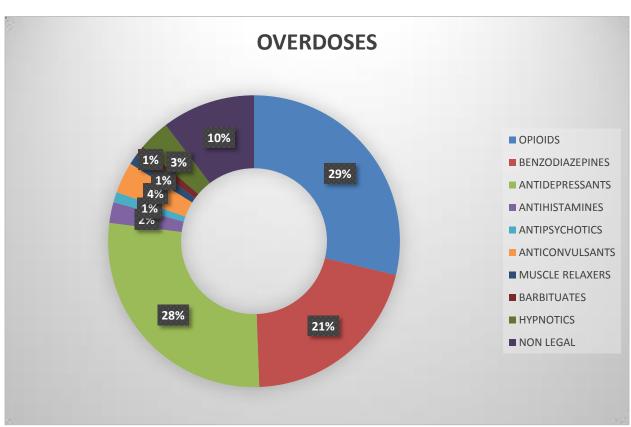








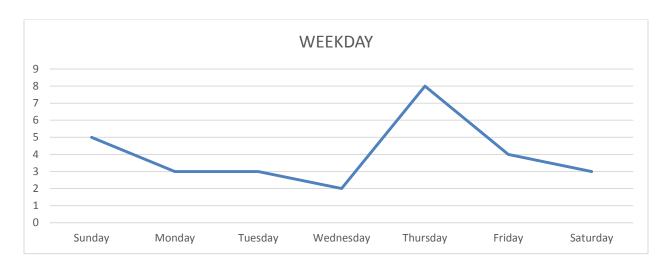




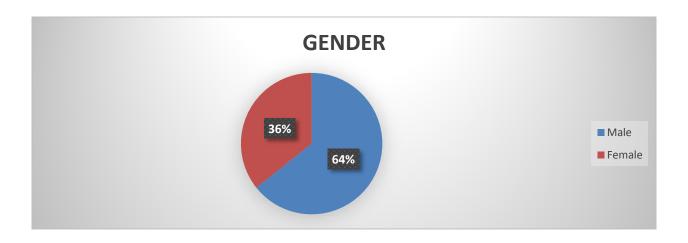
# **MONTGOMERY**

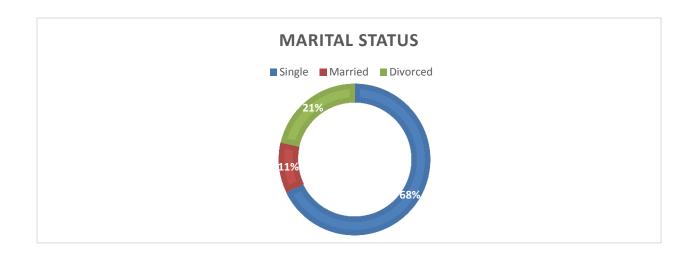
# **MONTOUR**

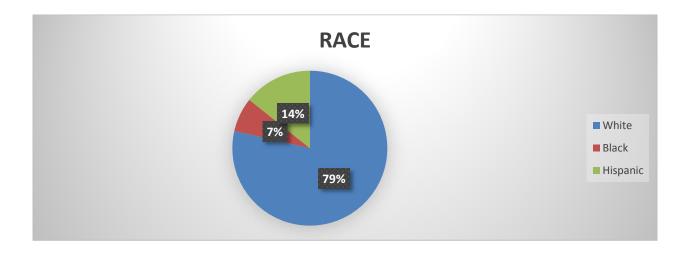
## **NORTHAMPTON**

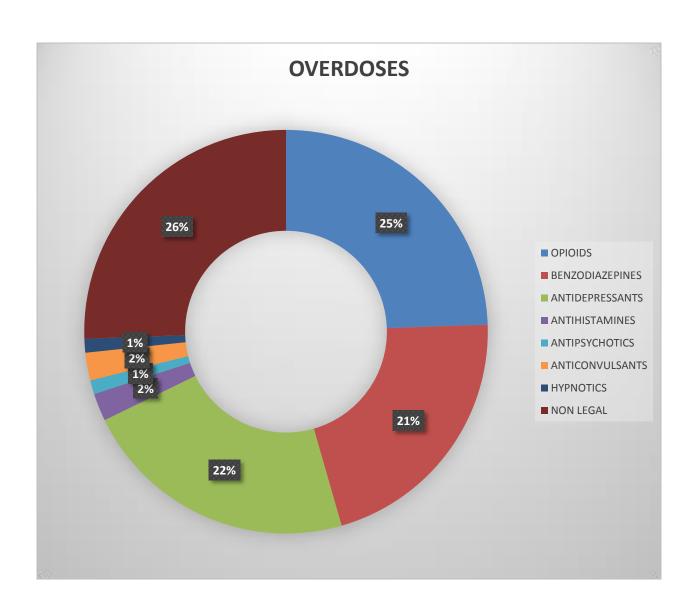








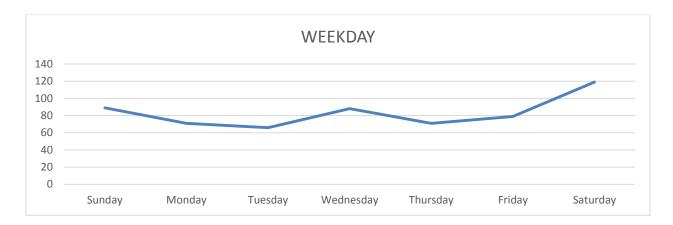




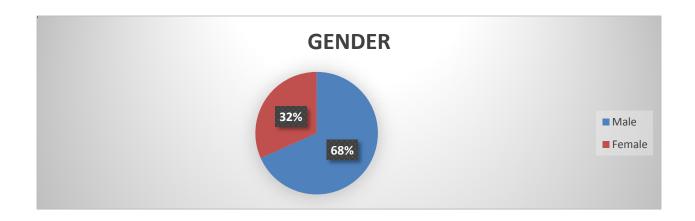
## **NORTHUMBERLAND**

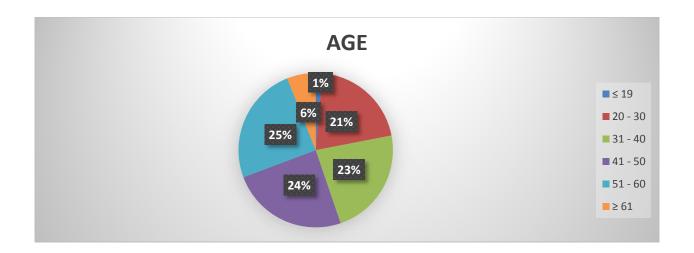
### **PERRY**

## **PHILADELPHIA**

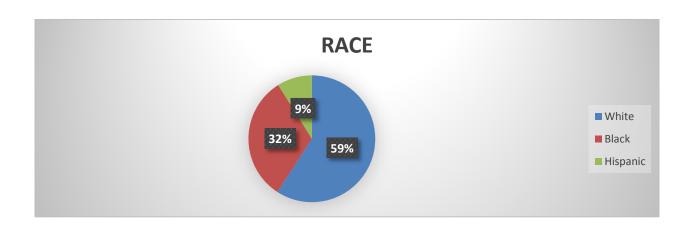


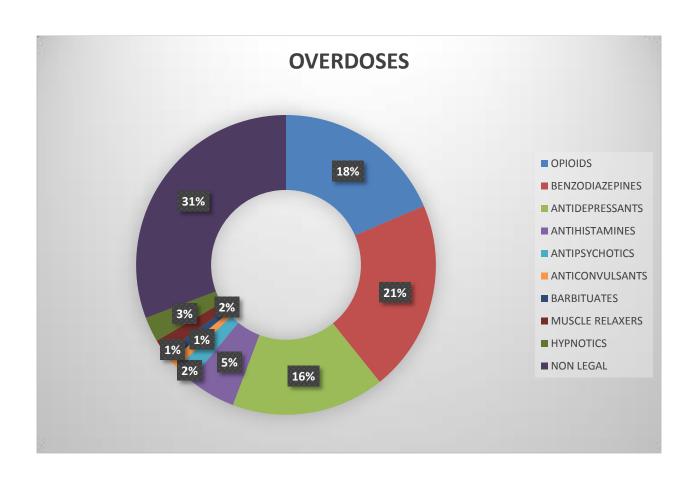












### **PIKE**

# **POTTER**

None

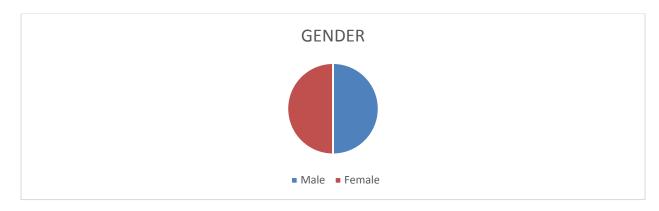
# SCHUYKILL

## **SNYDER**

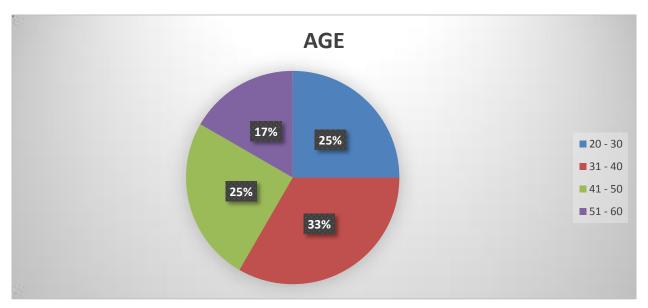
# **SOMERSET**

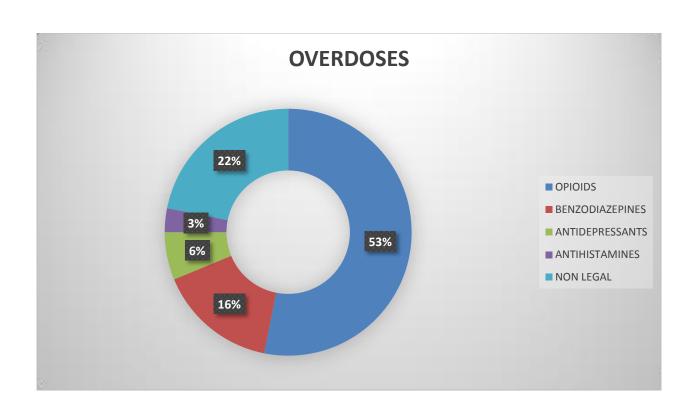
### **SULLIVAN**

## SUSQUEHANNA









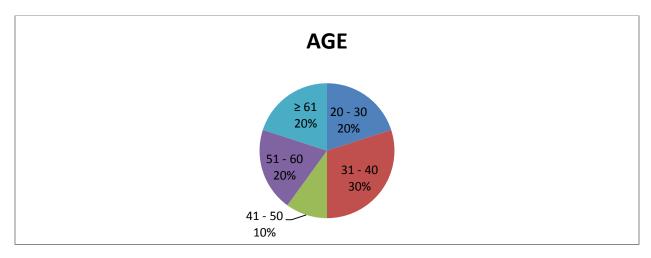
#### **TIOGA**

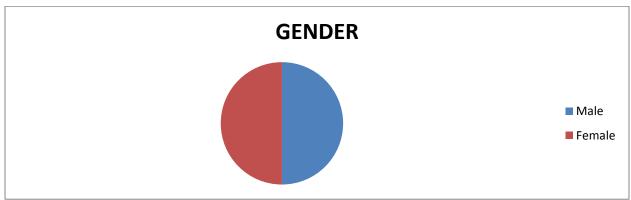
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics. Also, all the county data for the less than 10 drug deaths has been compiled in charts following the individual county charts.

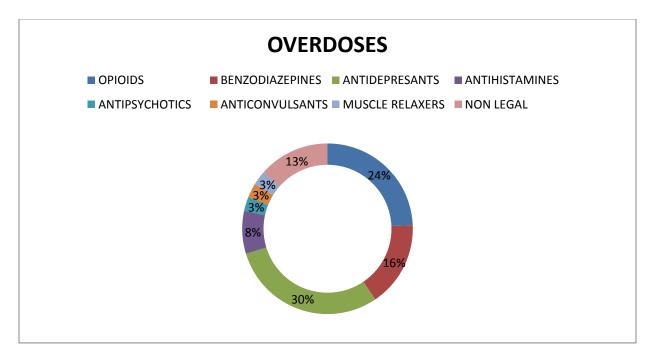
#### **UNION**

In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics. Also, all the county data for the less than 10 drug deaths has been compiled in charts following the individual county charts.

#### **VENANGO**



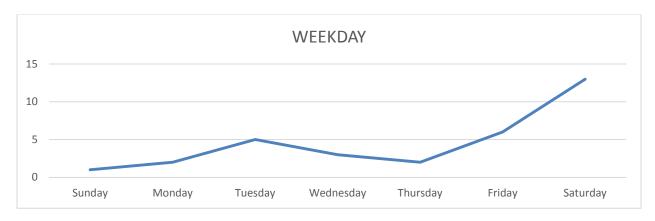


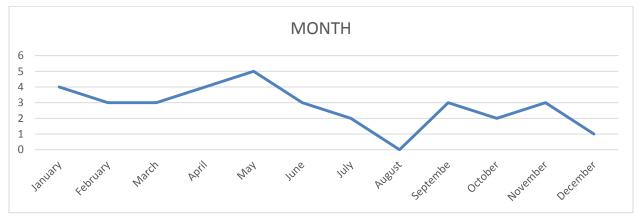


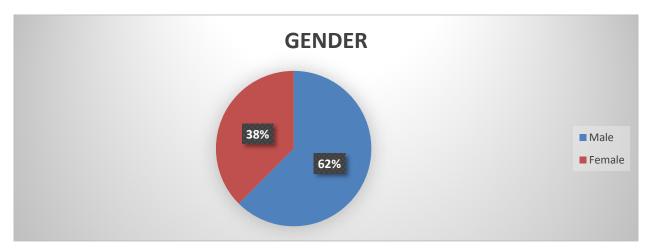
#### **WARREN**

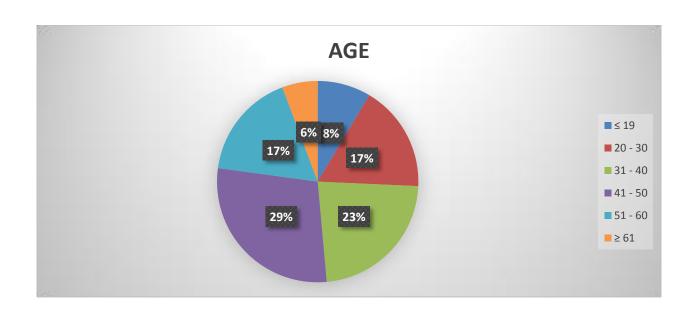
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics. Also, all the county data for the less than 10 drug deaths has been compiled into charts following the individual county charts.

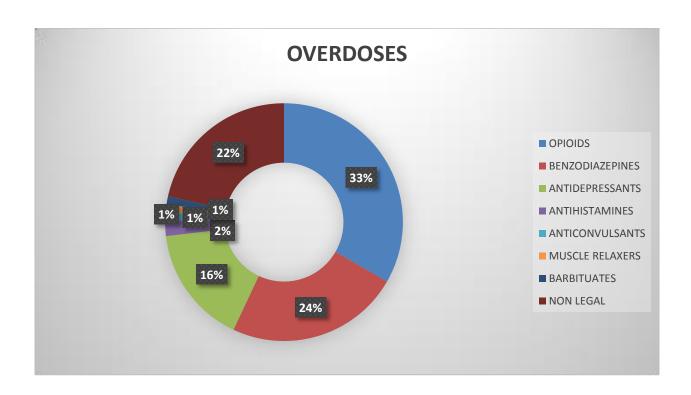
#### WASHINGTON



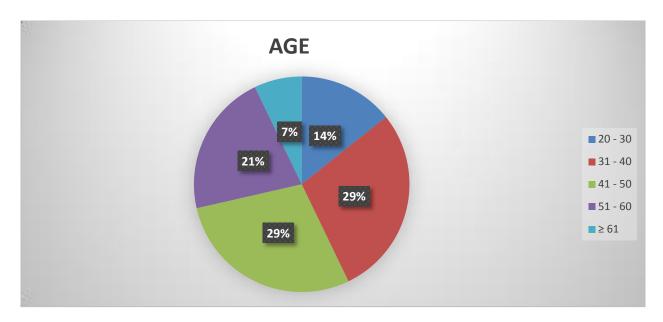


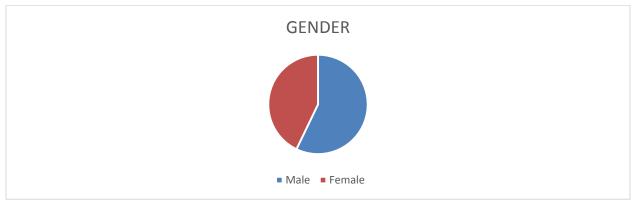


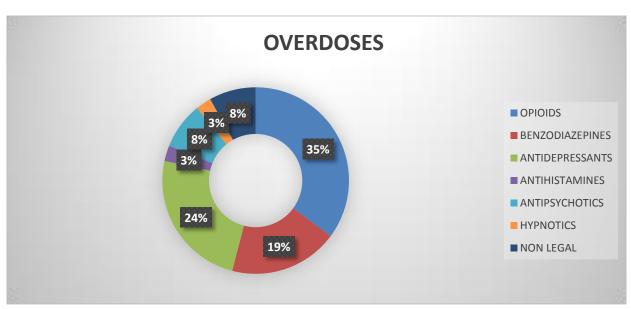




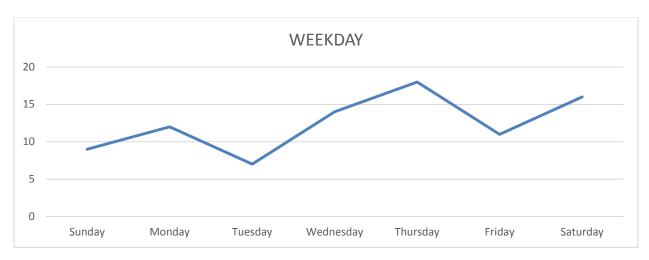
#### **WAYNE**

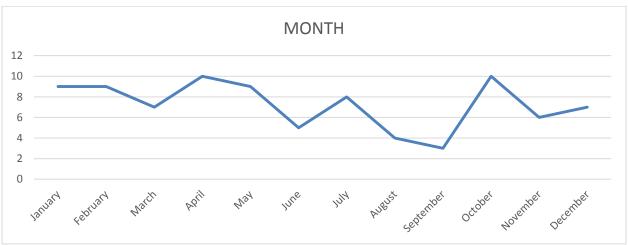


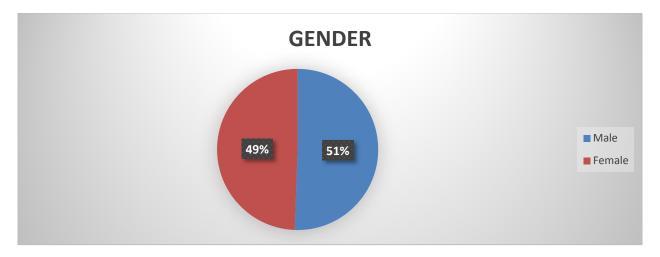


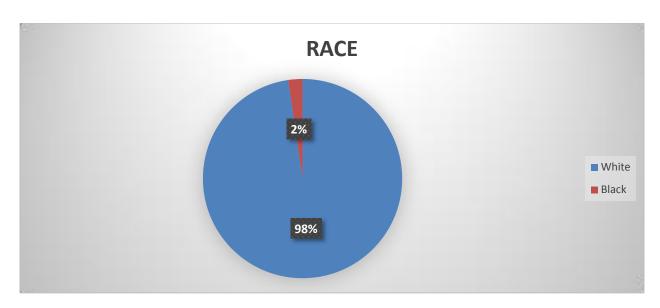


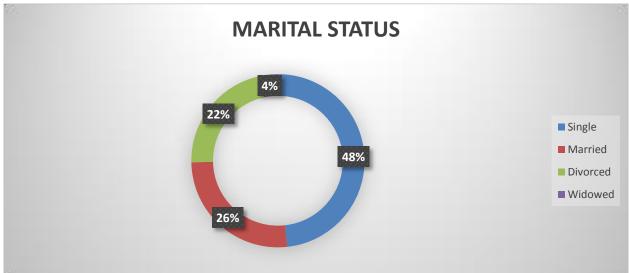
#### **WESTMORELAND**

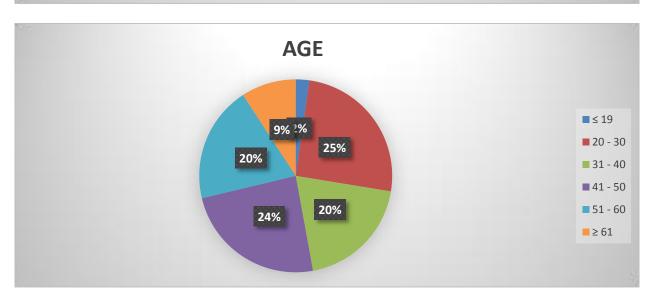


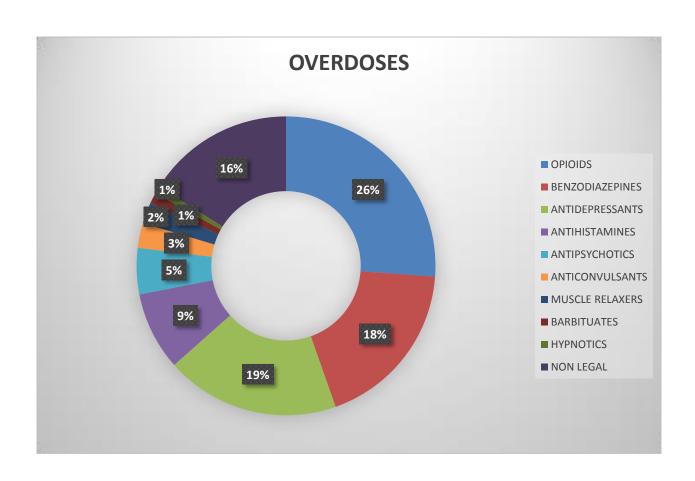




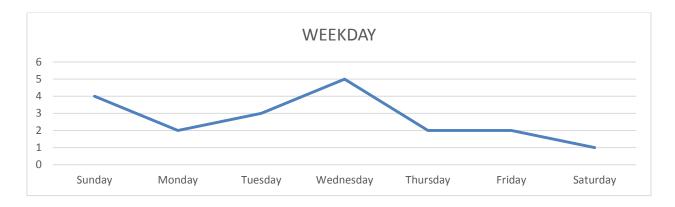




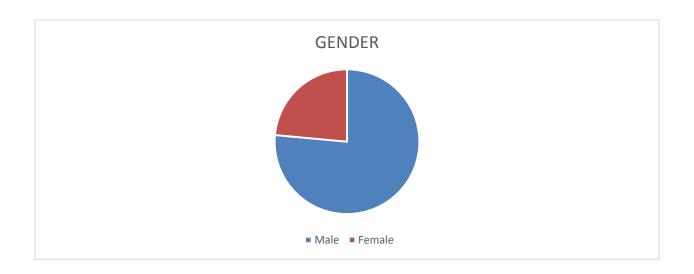


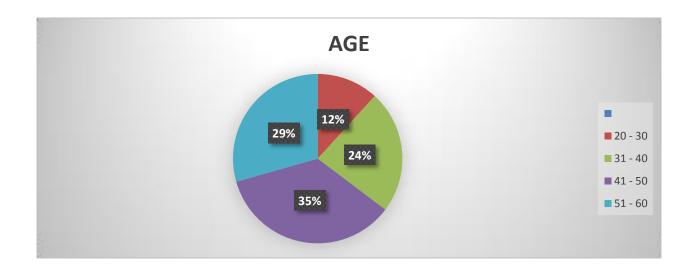


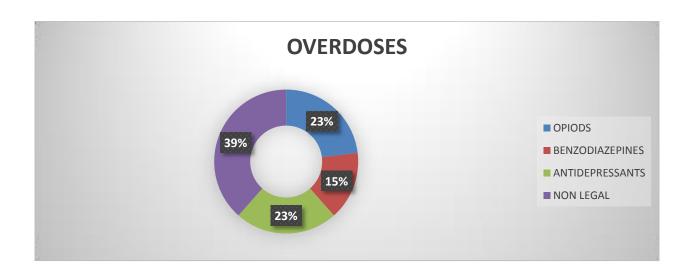
#### **WYOMING**



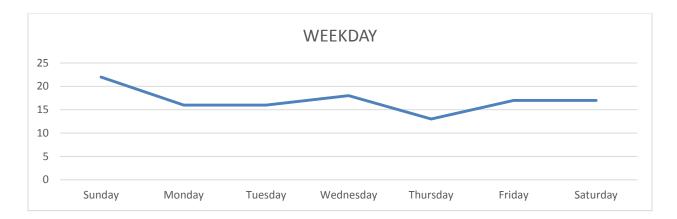


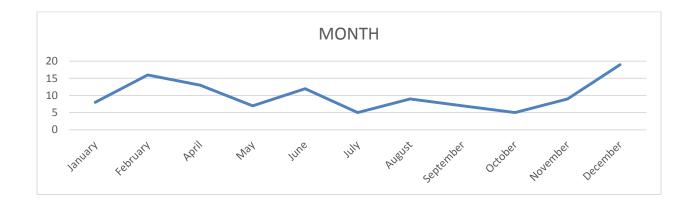


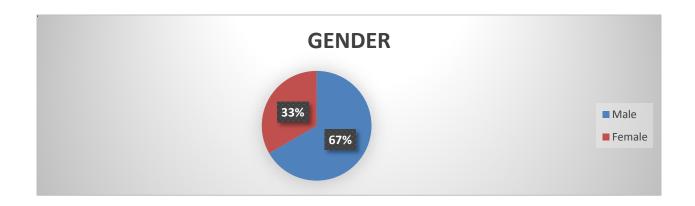


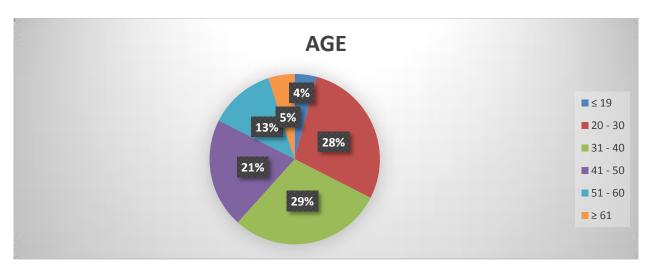


### YORK

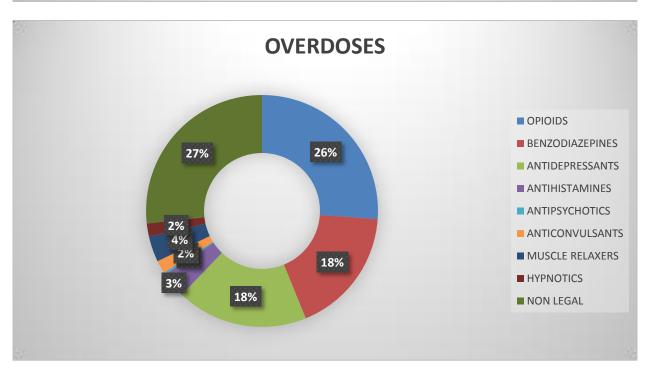




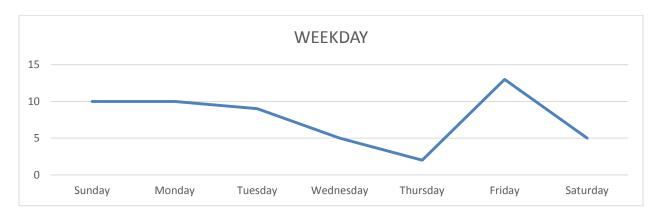


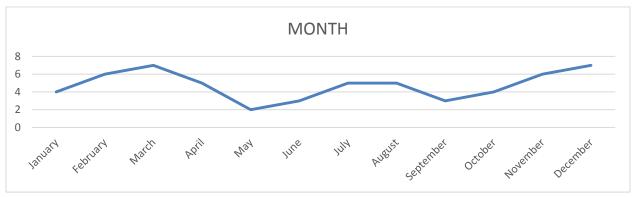


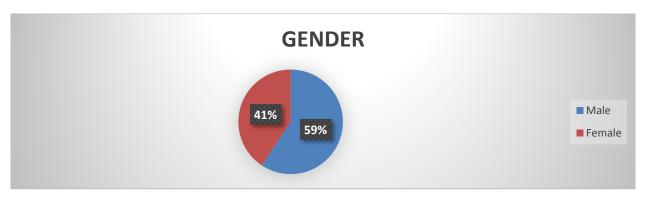


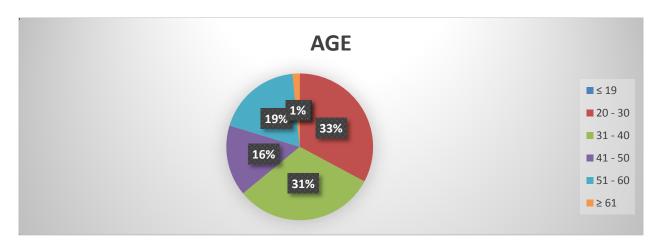


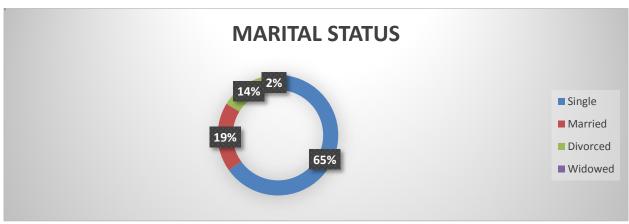
# COMBINED COUNTY DATA FOR THOSE WITH FEWER THAN 10 DRUG RELATED DEATHS

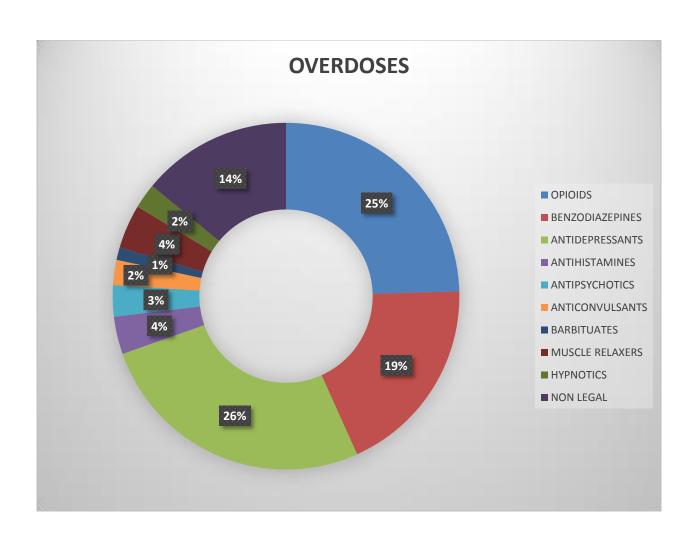


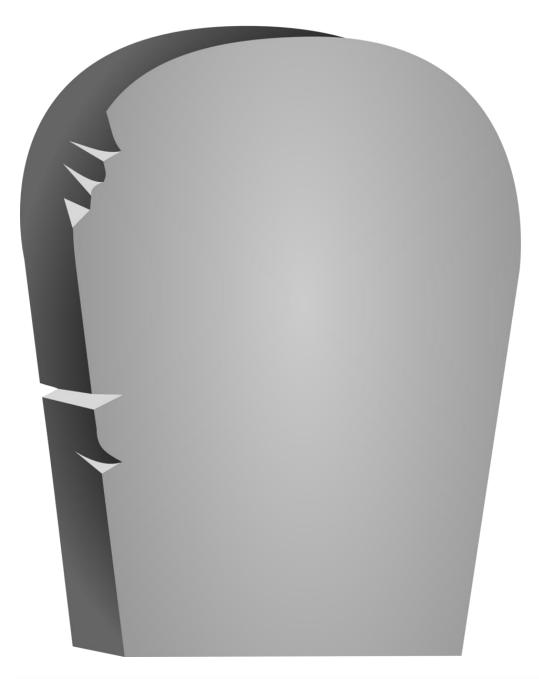












More needs to be done. Drug deaths represent approximately 10 percent of the drug abuse issue. Until hospitals, EMS, poison control centers, 911 call centers, law enforcement and all who prescribe and administer Narcan report on drug overdoses where the person survives, and on the judicial results of those who sell drugs, we are doing nothing more than establishing a drug policy which deals with drug use "one grave at a time."