



# MIDWEST HIDTA IOWA OVERDOSE REPORT - 2024



MIDWEST HIDTA – EXECUTIVE DIRECTOR DANIEL W. NEILL



## **Background Information**

The results of the Midwest High Intensity Drug Trafficking Area (HIDTA) 2024 Threat Assessment revealed that fentanyl and methamphetamine were again the top two drug threats to the region.<sup>[1]</sup> This conclusion was made utilizing Midwest HIDTA initiative responses to a law enforcement survey (LES) and public health partner responses to the public health survey (PHS), as well as drug trend and other related information collected over the past 12 months. This is the second year in a row fentanyl was ranked as the number one drug threat.

## **Ongoing Causes for Concern**

- Fentanyl will likely continue to pose the greatest overdose threat to the region as the supply is expected to increase.<sup>[1]</sup>
- Drug Enforcement Administration (DEA) laboratory testing in 2023, revealed 7 out of 10 fentanyl-laced counterfeit prescription pills now contain a potentially lethal dose of fentanyl, up from 4 out of 10 in 2021.<sup>[2]</sup>
- Fentanyl is expected to remain the greatest driver of drug poisoning deaths. Adulterants such as xylazine and medetomidine are of great concern to the Midwest HIDTA and will continue to be, especially if they have an increased impact on poisoning deaths in the region.<sup>[1]</sup>
- Methamphetamine will endure as a significant threat to the region with its high levels of availability, demand, use, and its transportation to and through the region.<sup>[1]</sup>
- Low-cost, high potency methamphetamine transported from the Southwest Border will continue to saturate both rural and metropolitan drug markets.<sup>[1]</sup>
- The level of violence and crime surrounding methamphetamine production, trafficking, and use will remain a threat to both law enforcement and the public.<sup>[1]</sup>

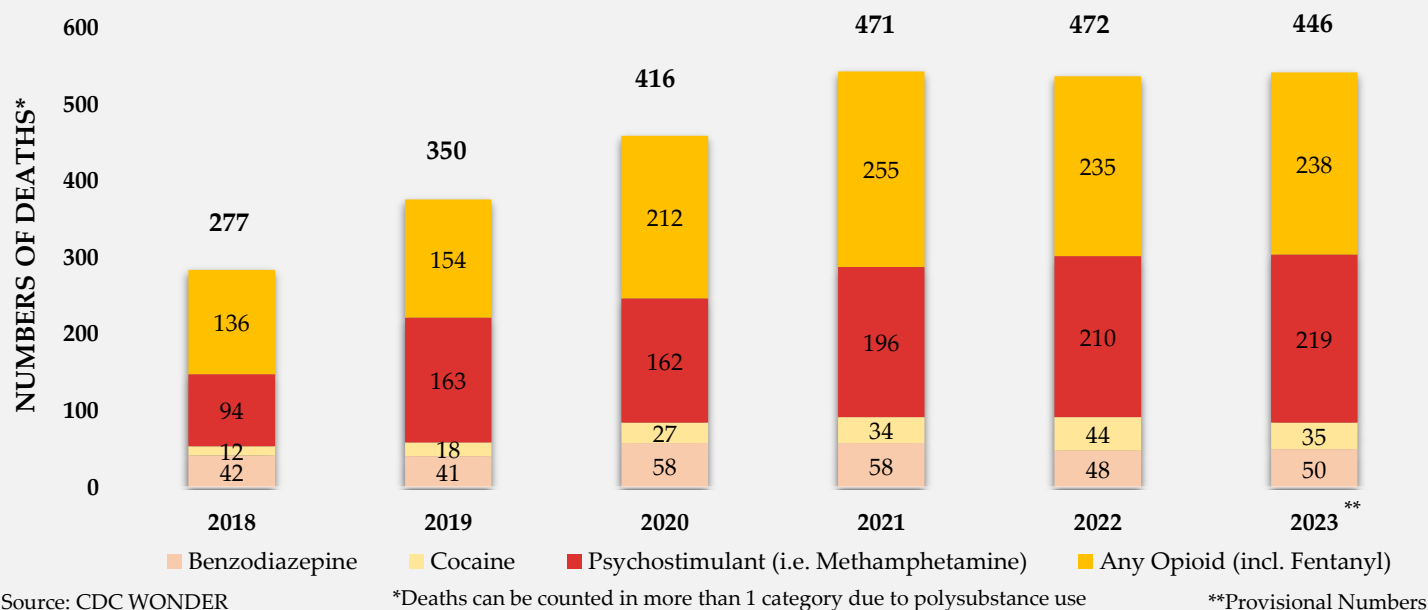
## **Iowa Outlook**

The LES responses for Iowa had slight deviations from the overall Midwest HIDTA results, ranking methamphetamine as the primary threat and fentanyl as the secondary threat in the state.<sup>[1]</sup> The Iowa LES responses indicated the availability of methamphetamine and fentanyl pills were “high,” while the availability of fentanyl powder was reported to be “moderate.” The LES respondents also stated the use and availability of fentanyl was rapidly approaching the level of methamphetamine, and fentanyl was the primary opiate being ingested, although smaller amounts of heroin were still being seen. Finally, the LES respondents indicated groups which traditionally solely distributed methamphetamine, were transitioning to become poly-drug distributors, expanding to the distribution of counterfeit oxycodone tablets containing fentanyl.<sup>[1]</sup>

## **Iowa National Substance Use and Mental Health Services Survey – 2022**

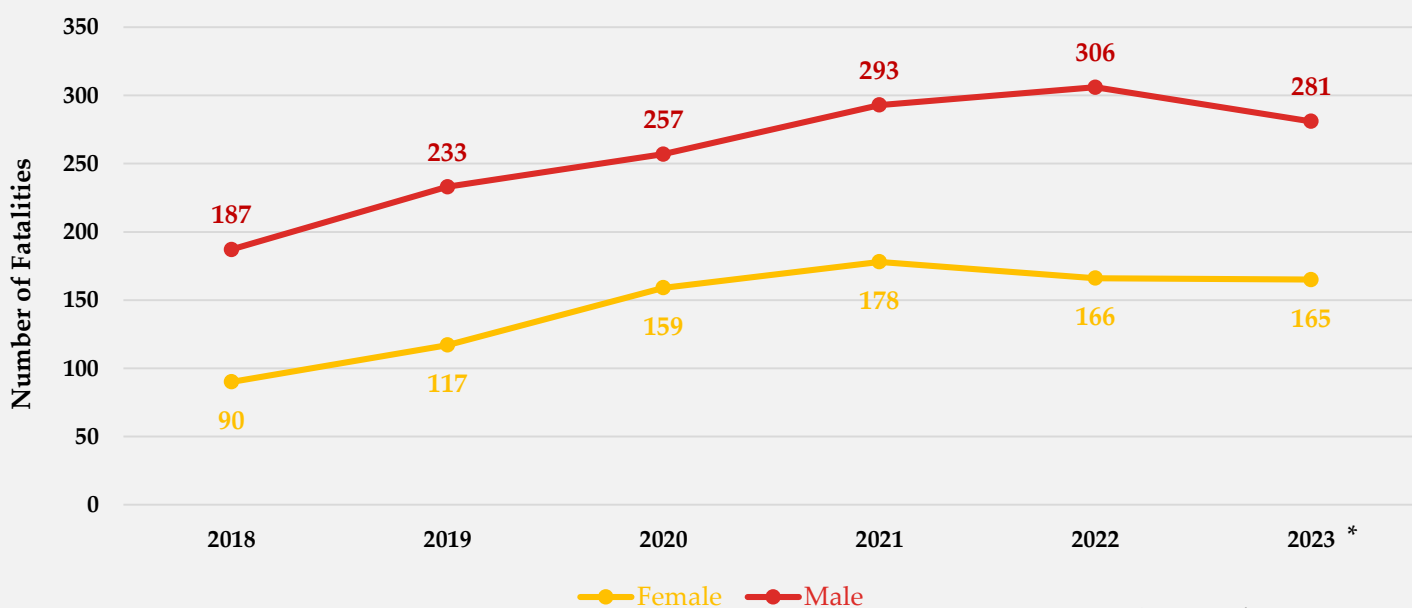
As of March 31, 2022, which is the most current survey available, there were 166 treatment facilities in Iowa, 132 of which were private non-profit (79.5%), 28 private for-profit (16.9%), 1 state (0.6%), 2 federally (1.2%), and 1 tribal (0.6%) government operated. These facilities were treating 28,444 clients, the majority of which were on an outpatient basis, 27,685 (97.3%). These facilities may accept more than 1 type of payment, the following are some of the payment options: cash or self-payment 97.0% (161), private health insurance 92.8% (154), Medicare 36.7% (61), Medicaid 91.6% (152), and treatment at no charge or minimal payment for clients who could not pay 44.6% (74).<sup>[3]</sup>

## Iowa Resident Overdose Deaths Top 4 Drug Categories 2018-2023 <sup>[4]</sup>



- Cocaine overdose deaths increased 191.7% (12 to 35) from 2018 to 2023 with a provisional decline of 20.5% (44 to 35) from 2022 to 2023 <sup>[4]</sup>
- Psychostimulant overdose deaths increased 133% (94 to 219) from 2018 to 2023 <sup>[4]</sup>
- Any opioid deaths increased 75% (136 to 238) from 2018 to 2023; 77.2% of these were synthetic opioids (950 of 1,230) <sup>[4]</sup>

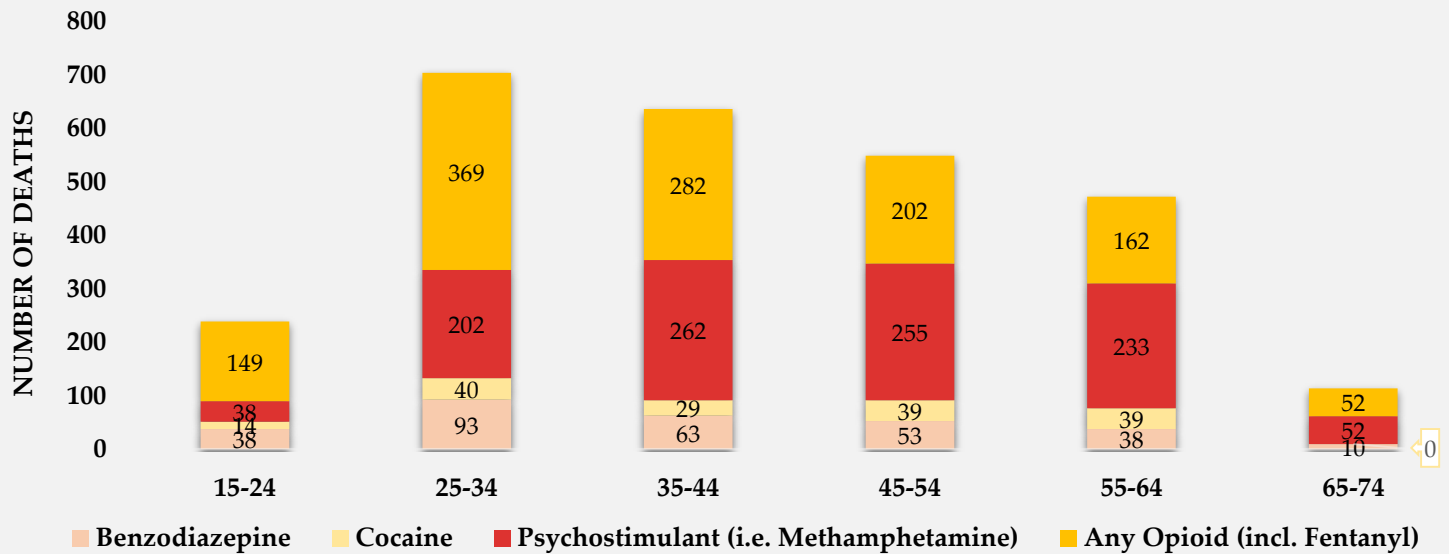
## Iowa Overdose Death Rate by Sex - All Drug 2018 to 2023 <sup>[4]</sup>



- From 2018 to 2023, female overdose deaths increased 83.3% (90 to 165); they decreased 0.6% (166 to 165) from 2022 to 2023 <sup>[4]</sup>
- From 2018 to 2023, male overdose deaths increased 50.3% (187 to 281); they decreased 8.2% (306 to 281) from 2022 to 2023 <sup>[4]</sup>



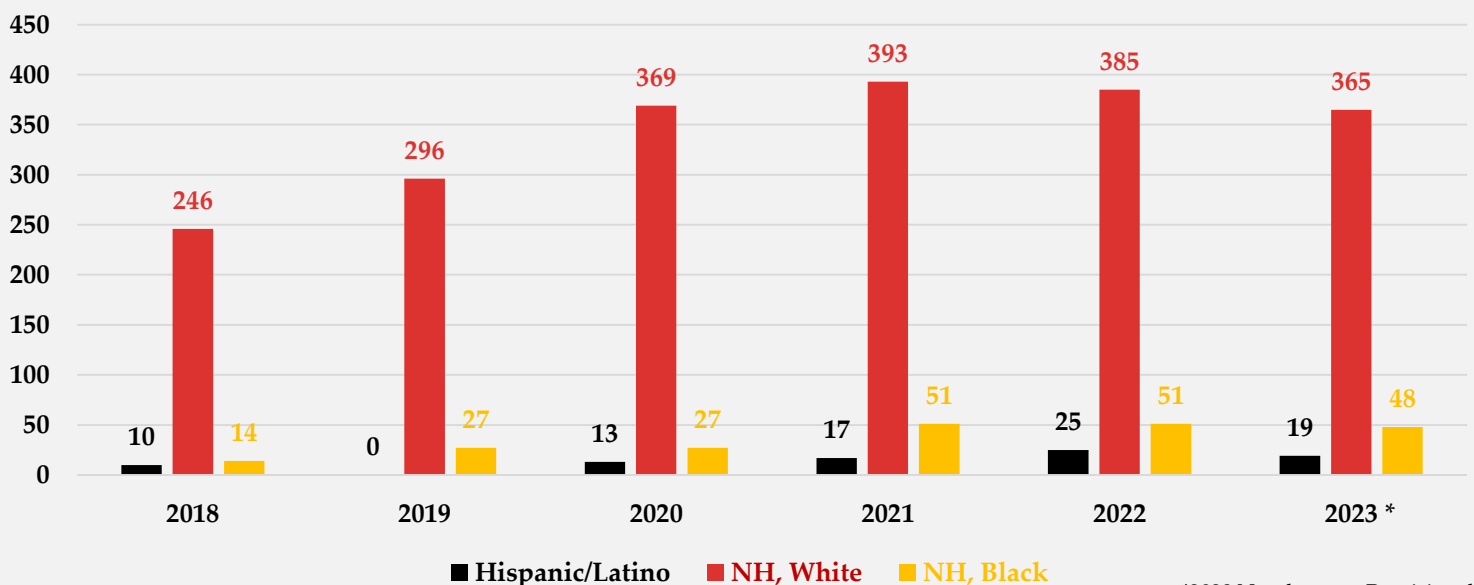
## Iowa Resident Overdose Death Rates by Age Group - Top 4 Drug Categories 2018-2023 <sup>[4]</sup>



Source: CDC WONDER

- The largest percentage increase in overdose death rates between age groups, for all drug types, was from 15-24 and 25-34: benzodiazepine +144.7% (38 to 93), cocaine +185.7% (14 to 40), psychostimulants + 431.6% (38 to 202), and opioids +147.7% (149 to 369) <sup>[4]</sup>
- The largest percentage decrease in overdose death rates between age groups, for all drug types, was from 55-64 and 65-74: benzodiazepine -73.7% (38 to 10), cocaine 100% (39 to 0), psychostimulants - 77.7% (233 to 52), and opioids -67.9% (162 to 52) <sup>[4]</sup>

## Iowa Overdose Deaths by Race/Ethnicity - All Drugs 2018 to 2023 <sup>[4]</sup>



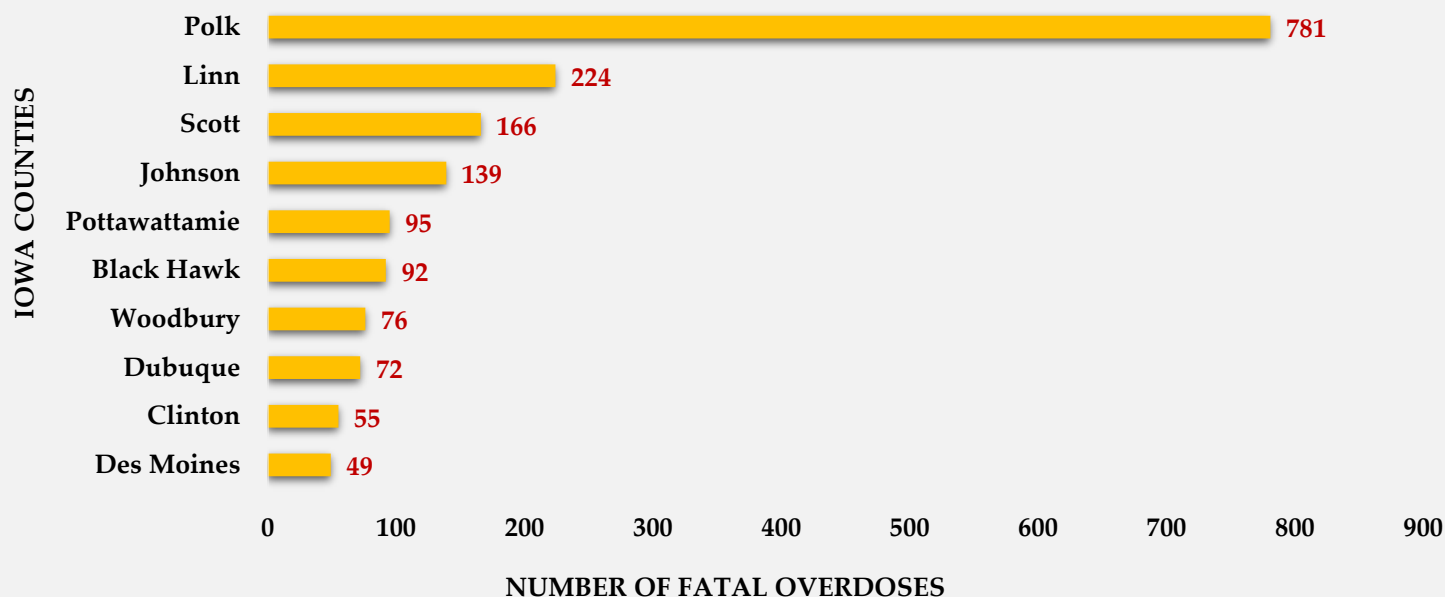
Source: CDC WONDER

\*2023 Numbers are Provisional

- From 2018 to 2023, the “NH, Black” ethnicity group had the greatest increase, +242.9% (14 to 48); this ethnicity group had a decrease of -5.9% (51 to 48) from 2022 to 2023 <sup>[4]</sup>
- From 2018 to 2023, the “NH, White” ethnicity group had the smallest increase, +48.4% (246 to 365); this age group also had the smallest decrease from 2022 to 2023, -5.2% (385 to 365) <sup>[4]</sup>
- From 2022 to 2023, the “Hispanic/Latino” ethnicity group had the greatest decrease, -24% (25 to 19) <sup>[4]</sup>



## Top 10 Counties with the Highest Mortality Counts - All Drug Types - 2018 to 2023 <sup>[4]</sup>



Source: CDC WONDER

Eight of the top ten counties with the highest fatal overdose counts were also in the top ten most populated counties in Iowa, with the two exceptions being Clinton County, which ranked 12<sup>th</sup> in population, and Des Moines County, which ranked 16<sup>th</sup> in population, according to 2024 estimates. <sup>[5]</sup> The top three counties with the highest fatal overdose counts were consistent regardless of the drug type. <sup>[4]</sup>

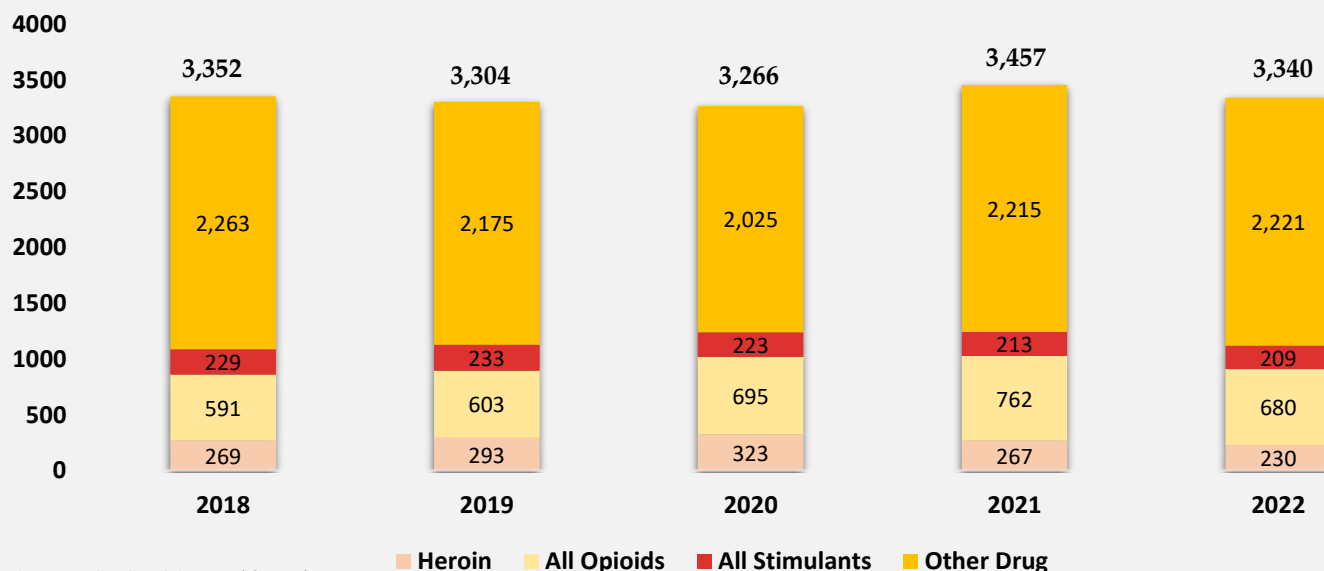
### Overdose Deaths – Top 4 Drug Categories – 2018-2023

- Any Opioid OD deaths: Polk (430), Linn (140), Scott (101), and Black Hawk/Johnson (52) <sup>[4]</sup>
- Benzodiazepine OD deaths: Polk (93), Linn (36), Scott (32), and Dubuque (12) <sup>[4]</sup>
- Cocaine OD deaths: Polk (50), Linn (28), Scott (25), and Dubuque (11) <sup>[4]</sup>
- Psychostimulant OD deaths: Polk (370), Linn (82), Johnson (56), and Scott (56) <sup>[4]</sup>

HIDTA INITIATIVE	SEIZED DRUG - YEAR - AMOUNT							
	FENTANYL (GRAMS)				METH / "ICE" (GRAMS)			
	2021	2022	2023	TOTAL	2021	2022	2023	TOTAL
CEDAR RAPIDS DEA TF	1,100	480	0	1,580	57,420	73,157	40,029	170,606
DES MOINES DEA TF	454	3,765	659	4,878	80,084	182,782	117,455	380,321
IOWA INTERDICTION SUPPORT	17,549	3,000	453	21,002	88,165	105,154	68,091	261,410
MUSCATINE TF	0	31	6	37	130,425	5,547	1,180	137,152
QUAD CITIES MET ENF GRP	2,591	19	466	3,076	20,853	5,231	33,101	59,185
TRI-STATE SIOUX CITY DEA TF	1,067	1,271	2,690	5,028	172,619	66,825	31,670	271,114
TOTALS	22,761	8,566	4,274	35,601	549,566	438,696	291,526	1,279,788

Over the past three years, these initiatives have seized almost 17,800,500 potentially lethal doses of fentanyl. In 2023, the grams of fentanyl pills seized also began to be reported: Cedar Rapids DEA TF 1,347 g, Des Moines DEA TF 4,282 g, Iowa Interdiction Support 7,291 g, Muscatine TF 300 g, Quad Cities Metropolitan Enforcement Grp 86 g, and Tri-State Sioux City DEA TF 2,169 g. These seizures (15,475gms/34.1 lbs.) convert to approximately 153,000 dosages units, and with 7 out of 10 containing a potentially lethal dose of fentanyl, equates to another 107,100 potentially lethal dosages being seized. <sup>[6]</sup>

## Iowa Nonfatal Overdose Emergency Department Visits 2018-2022 <sup>[7]</sup>



- Emergency department visits involving “All Opioids” had the greatest increase between 2018 and 2022, +15.1% (591 to 680) <sup>[7]</sup>
- Emergency department visits involving “Heroin” had the greatest decrease between 2018 and 2022, -14.5% (269 to 230) <sup>[7]</sup>

## REFERENCES

1. Midwest HIDTA 2024 Threat Assessment Report; Midwest HIDTA Intelligence Support Center; pages 4, 11-20, 74-75.
2. Drug Enforcement Administration *Public Safety Alert*; <https://www.dea.gov/onepill>
3. Substance Abuse and Mental Health Service Administration, National Substance Use and Mental Health Services Survey, 2022 Iowa State Profile, [https://www.samhsa.gov/data/quick-statistics-results?qs\\_type=nsumhss&state=Iowa&year=2022](https://www.samhsa.gov/data/quick-statistics-results?qs_type=nsumhss&state=Iowa&year=2022)
4. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Provisional Mortality on CDC WONDER Online Database. Data are from the final Multiple Cause of Death Files, 2018-2022, and from provisional data for years 2023-2024, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Accessed at <http://wonder.cdc.gov/mcd-icd10-provisional.html> in September, 2024
5. World Population Review, Population of Counties in Iowa (2024); <https://worldpopulationreview.com/states/iowa>
6. Frazier, R. (September 2024), Midwest HIDTA Performance Management Process Data, 2023. Kansas City; Midwest HIDTA
7. Centers for Disease Control and Prevention. Drug Overdose Surveillance and Epidemiology (DOSE) System: Nonfatal Overdose Emergency Department and Inpatient Hospitalization Discharge Data. Atlanta, GA: US Department of Health and Human Services, CDC; 2024, September. Access at: <https://www.cdc.gov/drugoverdose/nonfatal/dose/discharge/dashboard/index.html>



## Iowa Overdose Response Strategy 2024 Highlights

### **ODMAP Expansion in Iowa:**

The Iowa Overdose Response Strategy Team continues to promote the utilization of ODMAP within the State of Iowa. The team has partnered with the Drug Free Communities program to educate local coalitions on the value of ODMAP and implementation in their areas. As a result, In the last 12 months, several agencies in Jackson County signed participation agreements with ODMAP, as well as Clinton County and Dubuque County agencies. These include several EMS services, hospitals and law enforcement agencies.

One Fire Service in eastern Iowa even established an “application programming interface” (API) with ODMAP which automates the transfer of non-personally identifying information to the ODMAP system when responding to suspected overdoses. This is the first time an agency in Iowa has established this connectivity with ODMAP which has become common in other parts of the country.

### **Overdose Fatality Review Teams:**

Although an Overdose Fatality Review Team (OFR) has not been established in Iowa to date, the ORS Team continues to promote this strategy when speaking with local community partners both in the public health and public safety sectors. Several organizations have expressed interest in developing a team and the ORS Team continues to provide these organizations with support and guidance as they work through the process.

OFR’s are a valuable way to identify system gaps and innovative community-specific overdose prevention and intervention strategies. In practice, OFRs involve a series of confidential individual death reviews by a multidisciplinary team. A death review (also referred to as a “case review”) examines a decedent’s life cycle in terms of drug use history, comorbidity, major health events, social-emotional trauma (including adverse childhood experiences), encounters with law enforcement and the criminal justice system, treatment history, and other factors, including local conditions to facilitate a deeper understanding of the missed opportunities for prevention and intervention that may have prevented an overdose death.

By conducting a series of OFRs, jurisdictions begin to see patterns of need and opportunity, not only within specific agencies, but across systems.

### **Local Collaboration**

The Iowa ORS team has also been working on expanding partnerships more with local entities such as The Iowa Department of Health and Human Services, Polk County Public Health Department and local law enforcement/first responders. Working with different levels and entities through the local community is what the ORS is focused on and have seen success with our developing partnerships and planned collaboration projects.