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Drug Abuse Warning Network

The DAWN Report

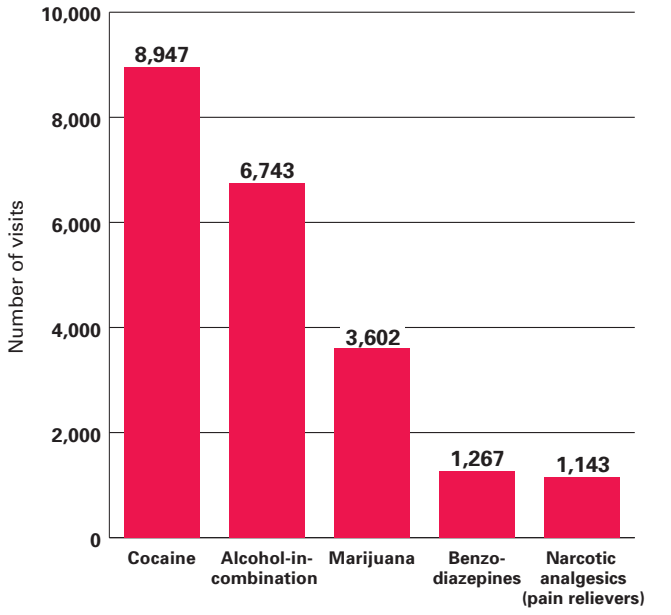
MARCH 2004

Highlights From DAWN: Atlanta, 2002

This special report presents findings based on data submitted by 14 hospitals in the Atlanta metropolitan area for 2002.

- Of the 1.3 million visits to Atlanta area emergency departments (EDs) in 2002, about one percent (14,211) were related to drug abuse.
- During 2002, the most common drugs involved in these ED visits were cocaine, alcohol in combination with other drugs, marijuana, benzodiazepines, and narcotic analgesics (pain relievers).
- Between 1995 and 2002, the rate of ED visits involving marijuana in Atlanta increased 53 percent (from 63 to 96 visits per 100,000 population).
- Among the 21 DAWN areas, Atlanta ranked in the top 6 in terms of ED visits involving cocaine and marijuana.

Top 5 drugs in drug abuse-related ED visits in Atlanta, 2002



DAWN: The Warning Network

Local information is essential to support local action, and drugs, drug use, and drug-related morbidity can differ dramatically across communities. DAWN focuses on metropolitan areas to reveal emerging drug problems before they become widespread. DAWN detects new drugs, new drug combinations, new health consequences of drug use, and changing patterns involving old drugs. Facilities participating in DAWN can use this information to train staff and improve patient care. Communities can use this information to plan, target resources, and act more effectively.

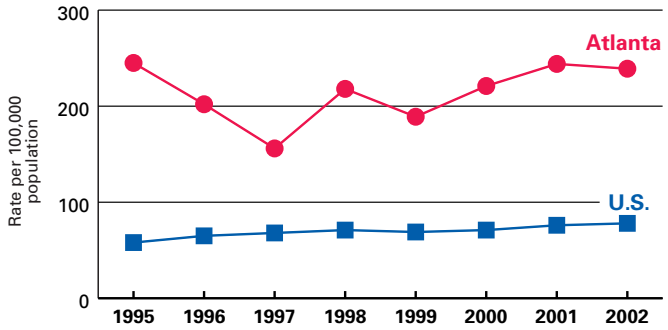
Today, hospitals in Atlanta and 20 other metropolitan areas serve their communities by participating in DAWN. Expansion to other areas is underway.

DAWN serves a diverse audience. In addition to participating facilities, users include researchers and policy analysts; pharmaceutical firms; State and local substance abuse agencies; community coalitions; and Federal agencies, including the White House Office of National Drug Control Policy, the Food and Drug Administration, and the National Institute on Drug Abuse. For more information, go to **http://DAWNinfo.samhsa.gov/.**

Trends in Top 4 Drugs, 1995-2002

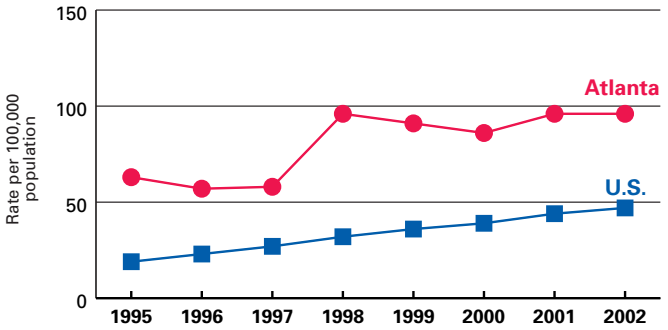
Cocaine

- Atlanta had 239 cocaine-related ED visits per 100,000 population in 2002, a rate similar to that in 1995. By contrast, the rate for the U.S. was 78 per 100,000 in 2002.
- More than two-thirds (71%) of cocaine-related ED visits in Atlanta also involved other drugs.
- Almost one-half (46%) of cocaine-related ED visits were attributed to "crack."



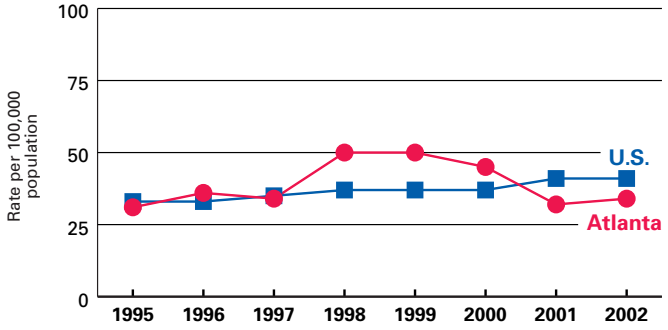
Marijuana

- Since 1995, marijuana-related ED visits in Atlanta have risen 53 percent (from 63 to 96 visits per 100,000 population in 2002). The national rate increased 139 percent (from 19 to 47 visits per 100,000) over the same 8-year period.
- Marijuana was reported in one-fourth of all drug abuse-related ED visits in Atlanta; more than 80 percent of the time, these visits involved other drugs as well.



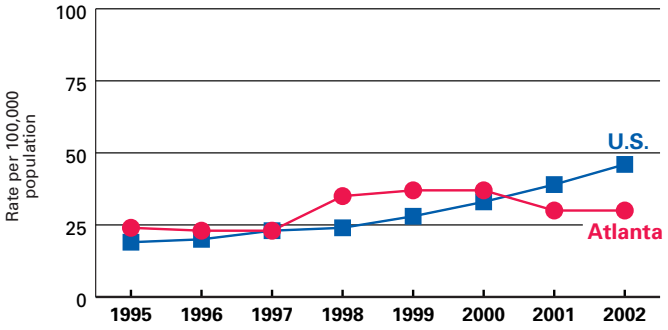
Benzodiazepines

- From 1995 to 2002, mentions of benzodiazepines in drug abuse-related ED visits in Atlanta remained relatively stable. Over the same period, the national rate rose 25 percent (from 33 to 41 visits per 100,000).
- Alprazolam was the most frequently named benzodiazepine in drug-related ED visits in Atlanta in 2002.



Pain Relievers

- From 1995 to 2002, pain relievers implicated in drug abuse-related ED visits increased 27 percent in Atlanta (from 24 to 30 mentions per 100,000 population). The increase nationally during this time was 139 percent.
- Hydrocodone and oxycodone were the most frequently named pain relievers in drug-related ED visits in Atlanta in 2002.

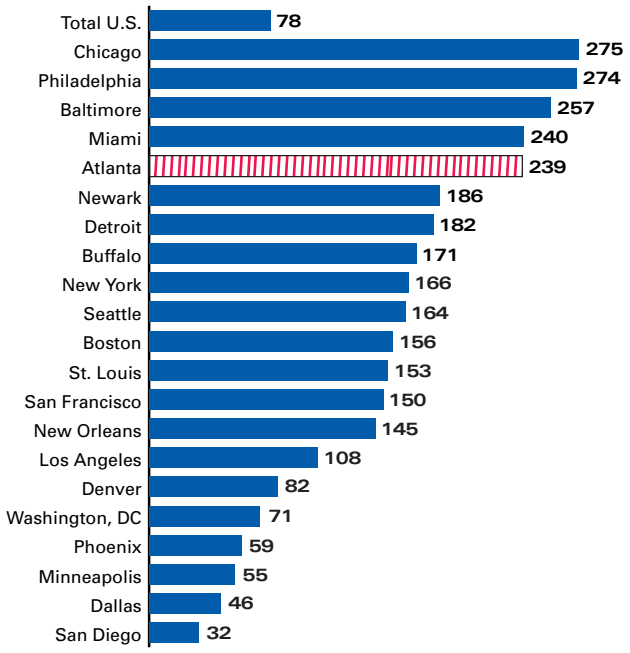


Comparisons Across 21 Metropolitan Areas

The following figures show Atlanta in relation to the Nation and 20 other metropolitan areas represented in DAWN for selected drugs in 2002. Comparisons across areas are possible because the number of visits for each drug is represented in terms of a rate per 100,000 population. Not all differences in rates are statistically significant.

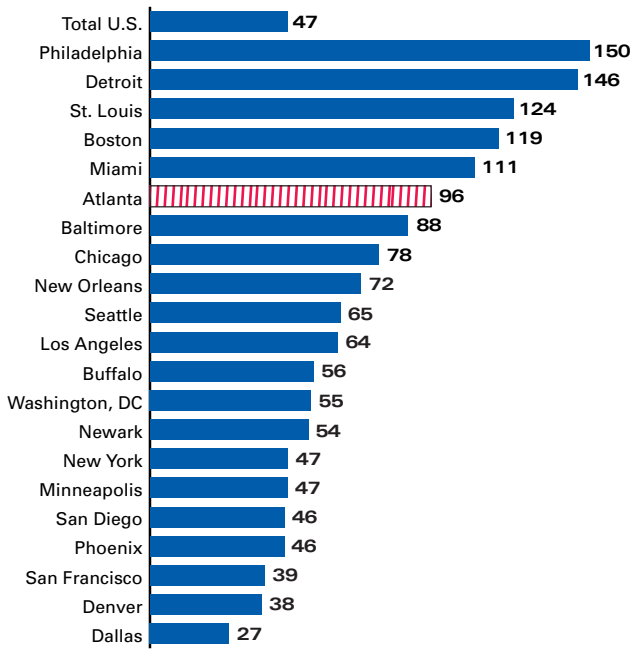
Cocaine visits

Rate per 100,000 population, 2002



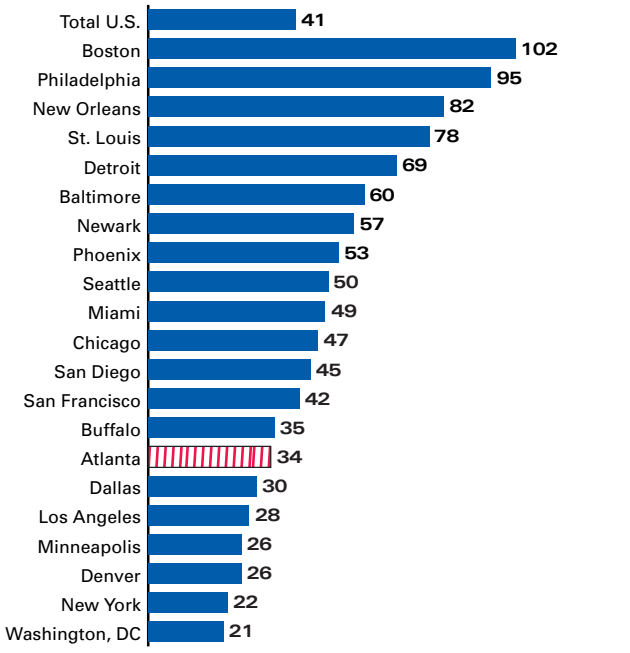
Marijuana visits

Rate per 100,000 population, 2002



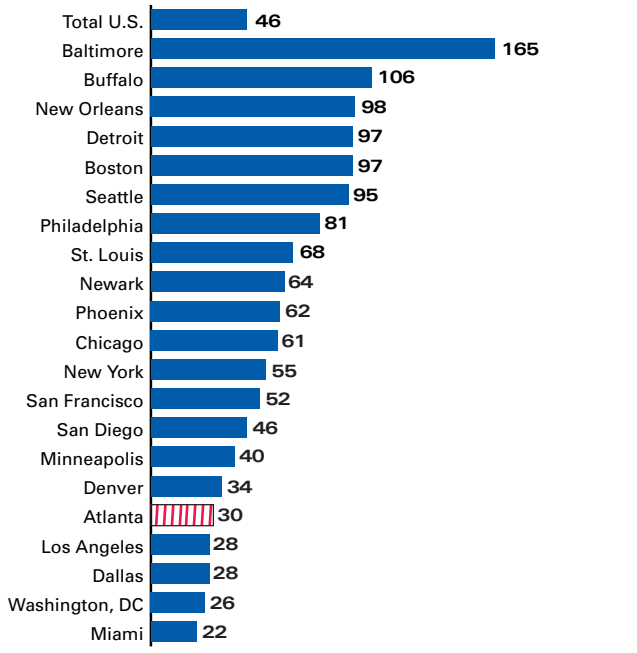
Benzodiazepines visits

Rate per 100,000 population, 2002



Pain Reliever visits

Rate per 100,000 population, 2002



About DAWN

The **Drug Abuse Warning Network (DAWN)** is a national surveillance system that monitors drug-related morbidity and mortality. Section 505 of the Public Health Service Act assigns this responsibility to the Substance Abuse and Mental Health Services Administration (SAMHSA), an agency of the U.S. Department of Health and Human Services. The Act requires SAMHSA to report annually on drug-related visits to hospital emergency departments and on drug-related deaths reviewed by medical examiners and coroners. SAMHSA has a contract with Westat, a private research firm based in Rockville, MD, to operate the DAWN system.

DAWN collects data from a scientific sample of hospital emergency departments and a set of medical examiners and coroners from across the U.S., with concentrations in selected metropolitan areas. Each participating facility has a DAWN Reporter who is specially trained to identify DAWN cases by retrospectively reviewing emergency department medical records or death investigation case files. No patient, family member, or physician is ever interviewed. No direct identifiers for individual patients or decedents are collected.

Beginning in 2003, DAWN cases include any emergency department visit or death that was related to drug use. Reportable cases include drug abuse, misuse, overmedication, accidental and malicious poisonings, and adverse drug reactions. For each case, the DAWN Reporter submits a case report detailing the specific drugs involved, and characteristics of the patient or decedent and event (visit or death). Patient and decedent characteristics include demographics (age, gender, race/ethnicity) and ZIP code. Other data items include date/time, chief complaint, diagnoses, and disposition for each emergency department visit; and date, cause, manner, and place of death for each decedent.

U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES