Statewide Semiannual Overdose Report

Illinois Department of Public Health

January 2025

ALL DRUG OVERDOSES

In 2023, the Centers for Disease Control and Prevention (CDC) predicts 105,007 people will die from drug overdoses in the United States,¹ which is a 4% decrease in the overall age-adjusted rate of drug overdose deaths. The number includes 3,502 Illinois residents who died from drug overdoses in 2023.

In 2023, there was an 8.3% decrease in overdose deaths from any drug in Illinois (Table 1), the first reduction in drug overdose deaths in the state since 2018. Many of those who died from drug overdose tested positive for more than one substance at their time of death. A single individual may be included in multiple categories. Deaths involving any opioids decreased by 9.7%, and deaths involving synthetic opioids (i.e., fentanyl and fentanyl analogs) decreased by 9.5%. Deaths involving heroin and natural and semi-synthetic opioids decreased by 21.2% and 17.4%, respectively.

Other substances include cocaine, alcohol, psychostimulants, benzodiazepines, and xylazine. Alcohol and psychostimulants-related fatalities increased by 0.8% and 1.5%, respectively. Benzodiazepine-related overdoses decreased by 10.5%. Overdose fatalities involving cocaine decreased by 2.5%. Xylazine, a non-opioid veterinary sedative, has been increasingly prevalent in the unregulated drug supply. Xylazine-involved deaths increased by 6.4% in 2023.

With decreasing drug overdose deaths, opioids continue to account for the majority of deaths (82%; Fig. 1). Additionally, opioids are responsible for the highest drug overdose fatality rates across all Illinois geographic categories (Fig. 2; Table 2).

Table 1. Drug Overdose Deaths, Illinois Residents, 2022-2023							
Drug Involved		2022	2023	Percent Change			
Any Drug		3819	3502	-8.3%			
Any Opioid	b	3160	2855	-9.7%			
	Synthetic Opioid	2889	2614	-9.5%			
	Heroin	532	419	-21.2%			
	Natural and Semi-synthetic	426	352	-17.4%			
Cocaine		1479	1442	-2.5%			
Alcohol		625	630	0.8%			
Psychostin	nulants	529	537	1.5%			
Benzodiaz	epines	449	402	-10.5%			
Xylazine		234	249	6.4%			







Figure 2. The overdose fatality rates (per 100,000 capita) by geographic region and substance type in Illinois in 2023.

Table 2. Overdose Fatality Rate by Geographic Region and Substance Type, Illinois 2023							
Drug Involved	Rural	Small Urban	Suburban	Urban			
Any Opioid	11.3	24.0	14.2	31.5			
Synthetic Opioid	9.8	22.0	12.6	29.3			
Heroin	0.7	1.9	1.9	5.8			
Natural and Semi-							
synthetic	2.0	2.5	2.4	3.5			
Cocaine	3.3	8.1	8.0	18.2			
Benzodiazepines	1.9	2.8	2.4	4.4			
Alcohol	0.9	2.3	3.2	8.9			
Psychostimulants	7.0	8.2	1.6	3.1			

FATAL OPIOID OVERDOSES

In 2023, there were 2,855 fatalities due to opioid overdose in Illinois. This represents a 9.7% decrease from 2022 (Fig. 3). Monthly trends, although variable, have shown a generally decreasing trend through 2023 with a median monthly total of 239 deaths (Fig. 4). The monthly totals were generally higher in 2021 and 2022, with the median number of fatalities totaling 257 and 261, respectively.



Figure 3. Yearly opioid fatalities in Illinois from 2013-2023 as reported by the Illinois Vital Records System, IDPH.



Figure 4. Monthly and 12-month rolling averages of opioid fatalities in Illinois from 2021-2023 as reported by the Illinois Vital Records System, IDPH.

Demographics of opioid fatalities are listed in Table 3. The highest number of opioid fatalities in 2023 occurred in non-Hispanic White individuals (1,295), while the highest age-adjusted fatality rate was among non-Hispanic Black individuals (69.3 per 100,000). There is a marked disparity between the fatality rates with non-Hispanic Black individuals of any age 3.9 times more likely to die from an opioid overdose than a non-Hispanic White individual.

The highest number of opioid fatalities occurred in the 35-44-year age group (645), followed closely by the 55-64-year age group (640). Similarly, the highest age-adjusted fatality rate occurred in the 55-64-year age group (40.4 per 100,000), followed by the 45-54 and 35-44-year age groups (39.9 per 100,000 and 38.5 per 100,000, respectively). Finally, the highest number and rate of opioid fatalities occurred in males (2,143; 34.2 per 100,000), which accounted for 75% of the fatalities.

Fatality Rate (per 100,000 of each **Total Number** population) Statewide* 22 2,855 Race/Ethnicity* Non-Hispanic White 1,295 17.7 Non-Hispanic Black 69.3 1,168 347 14.4 Hispanic/Latinx Non-Hispanic Other 4.4 45 Age Groups⁺ < 25 166 4.3 25 - 34 525 31.1 35 - 44 645 38.5 45 - 54 619 39.9 55 - 64 640 40.4 65 + 260 11.8 Sex Female 712 11.1 Male 2,143 34.2

Table 3. Statewide opioid fatality rate by race/ethnicity, age group, and sex for 2023 as reported by the IllinoisVital Records System, IDPH

*Age-adjusted rates

+Age-specific rates

The rise in the number of opioid fatalities in the past decade nationwide is attributed to the influx of synthetic opioids (fentanyl and its analogs) into the drug supply and to an increase in polysubstance use. In 2023, toxicology testing found 2,614 (92%) of the opioid fatalities involved a synthetic opioid. Further, 1,964 (69%) of the opioid fatalities involved at least one additional substance (Table 4).

Table 4. Substance involvement in opioid-related fatalities for 2023, as reported by the Illinois Vital Records System, IDPH

Total Opioid-Involved Fatalities	2,855
Opioid Only	891
Opioid + Another Substance	1,964
Multiple Substances	749
Cocaine	658
Psychostimulant	212
Benzodiazepine	175
Alcohol	170

Opioid use and opioid fatalities are spread across the state. High opioid overdose rates occur in both urban, small urban, and rural counties, with 13 counties having a rate equal to or greater than the statewide opioid fatality rate of 22 deaths per 100,000 capita. Figure 5 and Tables 4 and 5 depict the provisional county-level opioid overdose fatality rate per 100,000 capita.

Illinois Opioid Overdoes Fatality Rates by County, 2023



Figure 5. The 2023 Illinois opioid fatality rate per 100,000 capita by county as reported by the Illinois Vital Records System, IDPH. County-level fatality rates are calculated by the number of county residents who died due to opioid overdose per year divided by the population of the county and multiplied by 100,000. Counties with smaller populations could have higher rates than counties with larger populations, even though there are fewer opioid fatalities.

Table 4. The number of opioid fatalities and opioid fatality rate per 100,000 capita by county, 2023.

County	Number of Opioid Fatalities	Opioid Fatality Rate per 100,000	County	Number of Opioid Fatalities	Opioid Fatality Rate per 100,000		County	Number of Opioid Fatalities	Opioid Fatality Rate per 100,000
Adams	6		lackson	8	15.3	_	Pulaski	0	
Alexander	0	0.0	lasper	1	10.9		Putnam	1	18.0
Bond	2	12.2	lefferson	3	83	-	Randolph	0	0.0
Boone	8	15.0	lersev	5	23.7	-	Richland	0	0.0
Brown	1	15.9	lo Daviess	0	0.0	-	Rock Island	18	12.7
Bureau	2	6.1	Johnson	0	0.0		St. Clair	57	22.7
Calhoun	0	0.0	Kane	64	12.4		Saline	4	17.5
Carroll	0	0.0	Kankakee	27	25.5		Sangamon	64	33.1
Cass	0	0.0	Kendall	13	9.3		Schuyler	0	0.0
Champaign	43	20.9	Knox	5	10.3		Scott	0	0.0
Christian	2	6.0	Lake	130	18.3		Shelby	0	0.0
Clark	2	13.3	LaSalle	15	13.8		Stark	0	0.0
Clay	1	7.7	Lawrence	1	6.8		Stephenson	12	27.8
Clinton	2	5.4	Lee	1	3.0		Tazewell	28	21.6
Coles	2	4.3	Livingston	3	8.5		Union	0	0.0
Cook	1604	31.5	Logan	5	18.1		Vermilion	28	39.1
Crawford	0	0.0	McDonough	2	7.5		Wabash	1	9.1
Cumberland	0	0.0	McHenry	38	12.1		Warren	2	12.4
DeKalb	9	9.0	McLean	19	11.1		Washington	1	7.4
DeWitt	2	13.0	Macon	19	18.9		Wayne	2	12.7
Douglas	1	5.1	Macoupin	7	15.9		White	0	0.0
DuPage	103	11.2	Madison	72	27.4		Whiteside	7	12.8
Edgar	0	0.0	Marion	6	16.4		Will	112	16.0
Edwards	0	0.0	Marshall	2	17.1		Williamson	3	4.5
Effingham	1	2.9	Mason	1	8.0		Winnebago	124	44.1
Fayette	2	9.5	Massac	1	7.3		Woodford	1	2.6
Ford	1	7.5	Menard	0	0.0				
Franklin	4	10.8	Mercer	1	6.5				
Fulton	1	3.1	Monroe	7	20.0				
Gallatin	1	21.4	Montgomery	4	14.5				
Greene	2	17.3	Morgan	8	24.9				
Grundy	12	22.4	Moultrie	1	7.0				
Hamilton	0	0.0	Ogle	11	21.5				
Hancock	0	0.0	Peoria	50	28.2				
Hardin	0	0.0	Perry	3	14.6				
Henderson	0	0.0	Piatt	2	12.0				
Henry	6	12.4	Pike	1	7.0				
Iroquois	4	15.3	Роре	1	27.0				

Table 5. The number of opioid fatalities and opioid fatality rate per 100,000 capita by county sorted by opioid fatality rate, 2023. The mean county fatality rate is 11.1 per 100,000 capita and the median county fatality rate is 9.9 per 100,000 capita.

		Opioid
	Number	Fatality
County	of Opioid	Rate per
	Fatalities	100,000 Conito
Alevender	0	Capita
Alexander	0	0.0
Calnoun	0	0.0
Carroll	0	0.0
Cass	0	0.0
Crawford	0	0.0
Cumberland	0	0.0
Edgar	0	0.0
Edwards	0	0.0
Hamilton	0	0.0
Hancock	0	0.0
Hardin	0	0.0
Henderson	0	0.0
Jo Daviess	0	0.0
Johnson	0	0.0
Menard	0	0.0
Pulaski	0	0.0
Randolph	0	0.0
Richland	0	0.0
Schuyler	0	0.0
Scott	0	0.0
Shelby	0	0.0
Stark	0	0.0
Union	0	0.0
White	0	0.0
Woodford	1	2.6
Effingham	1	2.9
Lee	1	3.0
Fulton	1	3.1
Coles	2	4.3
Williamson	3	4.5
Douglas	1	5.1
Clinton	2	5.4
Christian	2	6.0
Bureau	2	61
Mercer	1	65
Lawrence	1	6.8
Moultrie	1	7.0
Pike	1	7.0
1 INC		7.0

		Opioid		
	Number	Fatality		
County	of Opioid	Rate per		
	Fatalities	100,000		
		Capita		
Massac	1	7.3		
Washington	1	7.4		
McDonough	2	7.5		
Ford	1	7.5		
Clay	1	7.7		
Mason	1	8.0		
Jefferson	3	8.3		
Livingston	3	8.5		
DeKalb	9	9.0		
Wabash	1	9.1		
Kendall	13	9.3		
Adams	6	9.3		
Fayette	2	9.5		
Knox	5	10.3		
Franklin	4	10.8		
Jasper	1	10.9		
McLean	19	11.1		
DuPage	103	11.2		
Piatt	2	12.0		
McHenry	38	12.1		
Bond	2	12.2		
Warren	2	12.4		
Henry	6	12.4		
Kane	64	12.4		
Wayne	2	12.7		
Rock Island	18	12.7		
Whiteside	7	12.8		
DeWitt	2	13.0		
Clark	2	13.3		
LaSalle	15	13.8		
Montgomery	4	14.5		
Perry	3	14.6		
Boone	8	15.0		
Iroquois	4	15.3		
Jackson	8	15.3		
Brown	1	15.9		
Macoupin	7	15.9		
Will	112	16.0		

		1
		Opioid
	Number	Fatality
County	of Opioid	Rate per
	Fatalities	100,000
		Capita
Marion	6	16.4
Marshall	2	17.1
Greene	2	17.3
Saline	4	17.5
Putnam	1	18.0
Logan	5	18.1
Lake	130	18.3
Macon	19	18.9
Monroe	7	20.0
Champaign	43	20.9
Gallatin	1	21.4
Ogle	11	21.5
Tazewell	28	21.6
Grundy	12	22.4
St. Clair	57	22.7
Jersey	5	23.7
Morgan	8	24.9
Kankakee	27	25.5
Роре	1	27.0
Madison	72	27.4
Stephenson	12	27.8
Peoria	50	28.2
Cook	1604	31.5
Sangamon	64	33.1
Vermilion	28	39.1
Winnebago	124	44.1

Special Populations

While fatalities due to opioid overdoses are decreasing, certain populations are still disproportionately affected or show concerning trends. One such group is the older non-Hispanic Black population, which has the highest rates of opioid overdose fatalities across all age groups, with the peak in the 55–64-year age group (Table 5). Non-Hispanic Black individuals of any age are 3.9 times more likely to die from an opioid overdose than non-Hispanic White individuals of any age (Table 2). However, when separated by age, the disparities are exacerbated in certain age groups. The fatality rate of non-Hispanic Black individuals aged 45-54 and 55-64 is 3.7 and 10.7 times higher than non-Hispanic White individuals 65+ years of age is 15 times higher than non-Hispanic White individuals 65+ years of age is 15 times higher than non-Hispanic White individuals 65+ years of age is 15 times higher than non-Hispanic White individuals 65+ years of age is 15 times higher than non-Hispanic White individuals 65+ years of age is 15 times higher than non-Hispanic White individuals 65+ years of age is 15 times higher than non-Hispanic White individuals 65+ years of age is 15 times higher than non-Hispanic White individuals of the same age.

Table 5. Age-Specific Opioid Fatality Rate (per 100,000 capita) by Race/Ethnicity in Illinois, 2023

	Age					
Race/Ethnicity	< 25	25 - 34	35 - 44	45 - 54	55 - 64	65+
Non-Hispanic Black	11.2	46.2	64.1	119.6	194.0	67.5
Non-Hispanic White	3.0	33.2	39.7	32.2	18.1	4.5
Hispanic/Latinx	3.8	25.5	31.0	23.1	16.1	4.2
Non-Hispanic Other	1.6	5.7	9.8	4.7	5.3	3.1

Another Illinois population with a concerning trend is adolescents, specifically those 13-17 years of age. The number of fatalities due to synthetic opioids increased from three in 2020 to 14 deaths in 2021. The number remained elevated in 2022 and 2023, with 10 and 15 deaths, respectively, due to synthetic opioids (Fig. 6).



Figure 6. Synthetic opioid overdose fatalities in Illinois adolescents 13-17 years of age.

Non-Fatal Opioid Overdoses

Monthly opioid overdose-related emergency department (ED) visits and emergency medical services (EMS) encounter trends are showing yearly seasonality, with the number of overdoses rising through the spring into summer and decreasing through autumn into winter (Fig. 7). In 2024, the peak number of opioid overdose-related ED visits and EMS encounters occurred in May and July and then decreased into autumn. However, the spring and summer peak in 2024 was of lower magnitude than the spring and summer peak of 2023.



Figure 7. Monthly opioid overdose-related ED visits and EMS encounters in Illinois, 2023-October 2024. ED visits as reported by IDPH Syndromic Surveillance System; EMS encounters as reported by IDPH Prehospital Emergency Medical Services. The definition for EMS encounters was updated in May 2023 based upon updated recommendations from the Council of State and Territorial Epidemiologists (CSTE), resulting in more cases considered "suspected opioid overdoses."

Illicit substances are not regulated and pose a significant risk of harm. If taking illicit substances, there are precautions that can be utilized. Consider testing the substance for fentanyl using fentanyl test strips. Carry naloxone and do not use substances alone. Also, be aware that more than one dose of naloxone may be required to reverse an overdose when a synthetic opioid is ingested. Naloxone can be obtained at your local health department or Drug Overdose Prevention Program. To find the closest provider, visit the Illinois Helpline online at https://helplineil.org, call 833-234-6343, or text "HELP" to 833234.

For more information on opioids, visit <u>https://dph.illinois.gov/topics-services/opioids.html</u>. If you or someone you know has an opioid use disorder, there is help, including treatment, available immediately, 24 hours a day, seven days a week. With the Medication Assisted Recovery Now (MAR NOW) service, a care manager can help callers determine the best treatment options and connect them to a provider for an immediate telephone appointment and medication prescription. Care managers can also facilitate a same- or next-day, in-person appointment. Callers are connected to ongoing treatment with a community provider that best meets their needs. Access the MAR NOW service at the Illinois Helpline numbers above.

References

¹Garnett MF, Miniño AM. Drug overdose deaths in the United States, 2003–2023. NCHS Data Brief, no 522. Hyattsville, MD: National Center for Health Statistics. 2024. DOI: <u>https://dx.doi.org/10.15620/cdc/170565</u>