

Opioid overdoses killed over 4000 Canadians in 2017

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The Public Health Agency of Canada announced last month that an estimated 4,000 Canadians lost their lives due to drug overdoses in 2017—more than ten per day. Dr. Theresa Tam, chief public health officer of Canada, said this estimate is probably lower than the true figure because Ontario, Quebec and Manitoba had yet to report all of their opioid-related overdose deaths for even the first half of the year.

Three-quarters of overdose deaths in 2017 were males, with the highest proportion, 28 percent, clustered among those aged 30 to 39.

In 2016, there were 2,861 overdose deaths, with the Yukon and British Columbia having the highest death rates, at more than 15 per 100,000 people. This means that even based on preliminary statistics for 2017, opioid deaths increased by more than 30 percent last year.

The dramatic increase in deaths is primarily the result of the spread of fentanyl, a synthetic opioid estimated to be a hundred times stronger than heroin. Even a tiny amount of the substance can be enough to trigger a fatal overdose.

Successive federal and provincial governments bear political responsibility for creating the terrible social conditions that have exacerbated the drug crisis and of chronically underfunding the healthcare system, which has proven utterly incapable of coping with the opioid emergency. Justin Trudeau's Liberals have imposed a miserly 3-4 percent increase in provincial health transfers, which amounts to a substantial cut in health spending when the rising cost of healthcare and population growth and aging are taken into account.

In the worst-affected provinces, BC and Alberta, New Democratic Party (NDP) governments are in power. In Alberta, the NDP has enforced austerity budgets since 2015, including for healthcare and critical social

services. Last year, it even cut the number of available hospital beds in public mental health facilities in the face of warnings from psychiatrists about the devastating impact this would have on those suffering as a result of the opioid crisis.

Meanwhile, BC Premier John Horgan has frequently boasted that his budgetary plans are based on the financial framework laid down by the former Liberal government, which held power for 16 years and slashed public spending, gave tax handouts to big business and attacked workers' living conditions. The few token measures the NDP has proposed, including the creation of a mental health ministry and testing various pilot projects to tackle the overdose crisis, are a drop in the bucket.

Canada's public health care system does not cover the cost of prescription drugs nor drug rehabilitation programs. Injured workers, or those who have a medical condition requiring pain-killing medications over an extended period of time, frequently cannot afford the prescribed pain medications and instead turn to much cheaper, but highly addictive street drugs. Drug users cannot just check themselves into a hospital or detox centre to remove the drugs from their system because there are not enough publicly-funded beds and because detox programs run by provincial health services often require the addict be clean for a period of months in order to gain admission, creating a Catch-22 situation. Barrier-free housing to help drug users get a stable routine before attempting to manage their addiction is virtually non-existent.

Private rehabilitation clinics are out of reach for the vast majority of working people, with average care packages for a month-long treatment program running into the tens of thousands of dollars.

For every overdose death in BC, 27 others are treated

and survive. A January 11 Angus Reid Poll on the effects of opioid use in Canada found 49 percent of BC residents and 28 percent of Albertans thought there was a province-wide opioid crisis. Yet only BC has declared a public health emergency. It also found that 81 percent of Canadians support mandatory treatment programs for people who have survived overdoses and 64 percent of Albertans support safe supervised-consumption sites.

Health Canada has only approved supervised consumption sites in Vancouver, Surrey, Victoria, Kelowna, Kamloops in BC, Calgary, Edmonton and Lethbridge in Alberta, Toronto and Ottawa in Ontario, and Montreal in Quebec.

The Angus Reid survey also found one in eight Albertans have close friends or family members who have become addicted to opioids in the last 5 years, which is in line with the national average. One-fifth of Albertans have been prescribed opioids for pain in the last 5 years.

Alberta Health's quarterly report in November 2017 projected 550 fentanyl-related deaths for the year. It said carfentanyl, an opioid up to 100 times more toxic than fentanyl, had been detected in 138 of the fentanyl-related overdoses in 2017, as compared with 29 in 2016.

Growing numbers of paramedics, police and hospital workers require assistance to process what they are dealing with. Paramedic and police suicide rates are rising and PTSD-related despair is believed to be a major contributor.

While BC and Alberta have been hit hardest, overdose deaths are rising across the country. In New Brunswick, paramedics administered naloxone, a drug that reverses the effects of an opioid overdose, 214 times in the first 9 months of 2017, with 22 deaths. There were 32 overdose deaths in New Brunswick in 2016.

In September 2017, Dr. Robert Strang, Nova Scotia's chief public health officer, reported that about 800 people were being treated through the province's addiction program and another roughly 450 through charity Direction 180's methadone program. Another 250 were on a waiting list for detox. Data released the same month by the Federal, Provincial and Territorial Special Advisory Committee on the Epidemic of Opioid Overdoses showed 57 Nova Scotians died of overdoses between March 2016 and June 2017. Nearly

a quarter of those deaths were adults aged 30 to 39 years.

Between July and September 2017, there were 2,449 emergency-department visits related to opioid overdoses in Ontario, a 29 percent increase from the 1,896 such visits in the previous 3 months and a staggering 115 percent increase over the same period a year earlier. Chief coroner Dr. Dirk Huyer said the data revealed "the mean age of the deaths were 41." Fifty-one percent of the deaths occurred in those between the ages of 25 and 44. "It's a terrible tragedy from that perspective," he said, noting a skyrocketing amount of fentanyl found in overdose victims. "In 2015, it was 19 percent; in 2016 it was 41 percent; and in the three months ... of our snapshot (for 2017), 67 percent of the time fentanyl was detected."



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