

Study reveals doubling of opioid deaths across Canada during early stages of COVID-19 pandemic

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A recent study authored by scientists at Unity Health Toronto and published in the *Canadian Medical Association Journal* has revealed that premature opioid-related deaths more than doubled across Canada at the start of the COVID-19 pandemic. They increased from 3,007 in 2019 to 6,222 in 2021.

Using publicly available aggregate and age- and sex-stratified data from the Public Health Agency of Canada, representing 98 percent of Canada's population, the study also found that more than one-quarter of those deaths occurred among younger adults. In 2021 the proportion of deaths related to opioids among people aged 20-29 was 29.3 percent. Another 29 percent of deaths occurred among people aged 30-39, meaning that those in their prime years under 40 accounted for close to 60 percent of all opioid deaths.

At the end of 2019 when COVID first emerged globally, Canada was already in the throes of a drug toxicity crisis. The number of opioid-related deaths rose by almost 40 percent from 2,470 in 2016 to 3,447 in 2019. Opioids can cause euphoria, one of the main reasons why they are taken for non-medical reasons, but they can also cause breathing difficulties and death. Of the approximately 600,000 deaths attributable to drug use worldwide in 2019, close to 80 percent were related to opioids.

Some have attributed the sudden increase in deaths in Canada over the 2019-2021 period to the public health measures taken during the early days of the ongoing pandemic. It is suggested that the lockdowns of various forms and duration imposed in certain jurisdictions during that time reduced access to harm reduction programs, and intensified the levels of anxiety in vulnerable populations, leading to increased substance use.

The attempt to blame limited efforts to combat the pandemic for problems that are ultimately rooted in the capitalist system's prioritization of corporate profits over everything else plays directly into the hands of the political far-right, whose demagogic denunciation of all public health measures was subsequently embraced by the political and media establishment to justify their "let it rip" pandemic policy.

Canada was the country hardest hit, outside of Asia, by the 2003 Severe Acute Respiratory Syndrome (SARS) epidemic. Hundreds of people caught the disease and 44 died. Valuable lessons about public health measures, quarantine restrictions and the need to promote collective well-being in a crisis situation were learned by medical professionals. But the political establishment cavalierly ignored these lessons in the intervening years, leaving Canada totally unprepared for the pandemic.

Under mass pressure from the working class to combat the pandemic, as shown by a series of wildcat work stoppages in early 2020, including in the auto industry, governments across Canada and around the world intermittently enacted a series of haphazard measures whose principal purpose was to ensure the continuation of corporate profits. Society's most vulnerable, and those who were already struggling to make their way in uncertain and harsh economic conditions, were offered little assurance or material assistance.

The fact of the matter is that to the extent anxiety, isolation and increased drug use did occur among vulnerable populations, this had far more to do with the protection of corporate interests by granting vast exemptions to lockdowns for big business, thereby allowing a deadly virus to run rampant and kill tens of thousands, than with any anti-COVID measures. Advocates of this position also conveniently forget the small matter of the overwhelming of hospitals and other medical services by the ruling elite's criminal "profits before lives" pandemic policy, which had the effect of significantly restricting the availability of emergency medical care.

The authors of the Unity Health study, which covers the period from January 2019 to December 2021, note that while both prescription and unregulated drugs have contributed to the crisis for some time, the proportion of opioid-related deaths involving fentanyl had risen to more than 80 percent of the total by early 2023.

Shaleesa Ledlie, a PhD candidate at the University of Toronto's Leslie Dan Faculty of Pharmacy, and co-author of the study, stated that there were likely several factors involved in the finding that such a large percentage of opioid-related deaths was comprised of younger people. This may include the fact young people are often in social situations that involve more casual drug use where overdoses are not expected and a life saving medication like naloxone is not available.

Another possibility is that younger people are unaware of how the composition of illicitly available opioids has changed dramatically over the past decade. Fentanyl and other additives comprise a much larger and unpredictable level of the product on the street, leading to a vast range of potential potency and effects.

According to data provided by the Government of Canada through its Health Infobase, between January 2016 and September 2023 there was a total of 42,494 apparent opioid toxicity deaths; 41,045 reported opioid-related poisoning hospitalizations, where 65 percent were accidental; and 169,723 reported opioid-related poisoning emergency department visits, where 77 percent were accidental.

The Health Infobase also showed that between January and September 2023, 88 percent of the accidental apparent opioid toxicity

deaths in Canada occurred in British Columbia, Alberta and Ontario. Males accounted for 72 percent of accidental apparent opioid toxicity deaths, while those aged 20 to 59 years accounted for 88 percent.

Of all accidental apparent opioid toxicity deaths, 82 percent involved fentanyl, a 44 percent increase since 2016 when national surveillance began. Additionally, 82 percent involved opioids that were only non-pharmaceutical and 57 percent also involved a stimulant. Over the same period, fentanyl and its analogues were involved in 44 percent of opioid-related poisoning emergency department visits, a frequency which has increased 120 percent since 2018, when national surveillance began.

Another recent study by the MAP Centre for Urban Health Solutions at St. Michael's Hospital, published in *BMJ Public Health*, adopted a race-based approach to analyzing data on opioid-induced deaths. Researchers surveyed more than 6,600 opioid toxicity deaths in Ontario from July 2017 to June 2021.

The researchers found that the vast majority of the deaths over this period were among those identified as white, but that racialized groups were over-represented in relation to their percentage of the provincial population. The MAP Centre study also specifically noted the broader observation that across all ethno-racial groups, with some variations between them, opioid toxicity deaths were concentrated among people who resided in low-income neighbourhoods and among the homeless. This far more significant finding exposes the crisis as primarily an issue of class, not race.

A study published in *The Lancet* in February 2023 noted that what began as a jump in overdose deaths from prescription opioids some 15 years ago has turned into a runaway crisis involving mostly illicit toxic synthetic opioids. Fentanyl and its analogues are now combined with psychostimulants such as cocaine, methamphetamine and benzodiazepine, creating a poly-drug death crisis.

Benzodiazepine is a depressant that slows the nervous system but it is not an opioid—therefore naloxone is ineffective against it. Combining benzodiazepine with a strong opioid like fentanyl reduces the effects of countermeasures and increases the risk of death.

In the United States, a new class of synthetic opioids known as nitazenes that contain more than 20 unique compounds and that could be hundreds to thousands of times more potent than morphine, and 10 to 40 times stronger than fentanyl, have appeared in the illicit opioid market. Fentanyl test strips cannot detect nitazene analogs and specialized lab testing is required to identify them in toxicology samples.

Eight years ago, on April 14, 2016, the government of British Columbia declared an opioid-death public health emergency. Since then, more than 14,000 people have died, making toxic drugs the leading cause of death for people in the province aged 10-59. According to the BC Coroners Service, they account for more deaths than homicides, suicides, accidents and natural disease combined.

The crisis has continued to worsen in spite of the declaration of a public health emergency because the entire response, like the response to the COVID-19 pandemic across the country, has been subordinated to the imperatives of the capitalist profit system.

It is no coincidence that a July 2023 report from Oxfam International found that Canadian billionaires saw their wealth grow by an astonishing 51 percent since the beginning of the pandemic in 2020. Mirroring the sudden spike in opioid deaths between 2019 and 2021, which was concentrated in the least wealthy layer of society, the jump in wealth accumulation for the richest layer was the accelerated continuation of a decades-long trend.

According to the report, in November 2022, Canada's 50 billionaires, now estimated to number 63, had assets of \$249 billion. The bottom 40 percent of the Canadian population, 15.6 million people, had slightly less at \$248 billion.

For 2023, Statistics Canada reports that average disposable income for the highest income households, the top 20 percent of the income distribution, increased at the fastest pace of any income group relative to a year earlier. Furthermore, the top 20 percent held more than two-thirds of the country's net worth, while the bottom 40 percent only held 2.7 percent.

The Labour Force Survey of March 2024 indicates that youth unemployment rose 1 percentage point in the month to 12.6 percent, the highest since September 2016, excluding 2020 and 2021 in the early days of the pandemic. The employment rate—the proportion of the population aged 15 and older who are employed—declined by 0.1 percentage points to 61.4 percent in March, the sixth consecutive monthly decrease. Employment among youth aged 15 to 24 fell by 1 percent, continuing a trend which has seen virtually no net employment growth among youth since December 2022. The youth employment rate fell to 55 percent, the lowest level since February 2012, excluding 2020 and 2021.

As the parasitic ruling class sucks up the country's wealth, it also knowingly destroys the prospects, lives and future of the working class it exploits. Public services at all levels of government are being cut to the bone, while the Trudeau Liberal government, with the enthusiastic backing of the trade unions and social democratic New Democratic Party, is spending tens of billions of dollars to wage a new world war for Canadian imperialism's global interests. The ongoing, and accelerating, opioid-death crisis is not just a public health emergency, it is a social crisis that demands a political solution. It is time to go beyond attempting to treat the symptoms only and eradicate the disease—the system of capitalist exploitation that produces the social misery and hopelessness fueling drug-related deaths.



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