

# Opioid deaths 1999 to 2015 may be dramatically underestimated

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(HealthDay)—States may be greatly underestimating the effect of opioid-

related overdose deaths because of incomplete cause-of-death reporting, according to a study recently published in *Public Health Reports*.

Jeanine M. Buchanich, Ph.D., from the University of Pittsburgh, and colleagues used data from the Mortality Multiple Cause Micro-Data Files to identify unintentional drug [overdose deaths](#) and contributory drug-specific T codes. Using the proportion of opioid-related [overdose](#) deaths to all overdose deaths, the authors estimated the proportion of unspecified overdose deaths that might be attributed to opioids. These reallocated opioid-related deaths for each state and year (1999 to 2015) were added to already reported deaths to determine their potential effect on total opioid-related deaths.

The researchers found that over the study period, 438,607 people died from unintentional drug overdoses. Over this time frame, opioid-related overdose deaths rose 401 percent, non-opioid-related overdose deaths rose 150 percent, and unspecified overdose deaths rose 220 percent. In Alabama, Indiana, Louisiana, Mississippi, and Pennsylvania, more than one in three unintentional overdose deaths were coded as unspecified (35 percent). The authors reallocation resulted in more than 70,000 unspecified overdose deaths being reclassified as potential additional opioid-related overdose deaths.

"Incomplete [death](#) certificate reporting hampers the efforts of lawmakers, treatment specialists, and public health officials," Buchanich said in a statement. "And the large differences we found between states in the completeness of opioid-related overdose mortality reporting makes it more difficult to identify geographic regions most at risk."

**More information:** [Abstract/Full Text \(subscription or payment may be required\)](#)

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