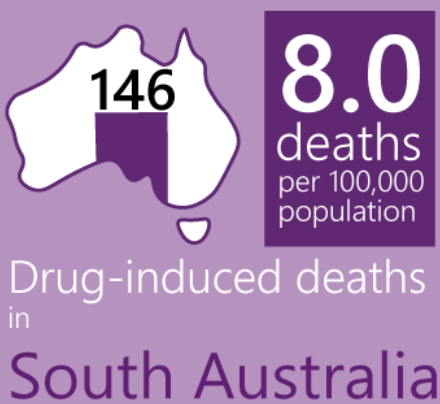


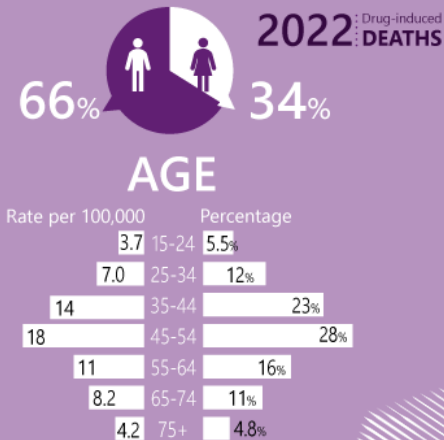
## South Australia



### DRUG INVOLVEMENT

(deaths per 100,000 population)

- 4.1 Opioids
- 2.6 Antiepileptic, sedative-hypnotic and anti-parkinsonism drugs
- 2.4 Amphetamine-type stimulants
- 1.4 Antidepressants
- 1.4 Antipsychotics & neuroleptics
- 1.2 Non-opioid analgesics
- (n≤5) Cocaine
- (n≤5) Cannabinoids



There were 146 registered overdose and other drug-induced deaths (excluding alcohol and tobacco) in [South Australia](#) in 2022, which is equivalent to 0.94% of all registered deaths in this jurisdiction.

The rate fluctuated between 2003 and 2020. The highest rate was observed in 2017, reaching 8.3 deaths per 100,000 people. The preliminary age-standardised rate of drug-induced deaths in 2022 was 8.0 deaths per 100,000 people (7.0 deaths per 100,000 people in 2021) ([Figure 1](#)). Estimates for 2021 to 2022 are subject to revision and may increase (Table A33).

### Sex



In 2022, [males](#) accounted for 66% (97 deaths) of drug-induced deaths. The rate of drug-induced deaths was also higher among males than females (11 versus 5.2 deaths per 100,000 people, respectively). Analyses did not indicate a statistically significant difference between 2021 and 2022 in the estimated rates for males or females (Table A33).

### Age



In 2022, drug-induced deaths were most common among the [45-54 age group](#) (28%, 41 deaths).

The age specific population rate was also highest in the 45-54 age group (18 deaths per 100,000 people).

Analyses did not indicate a statistically significant difference in the estimated rates between 2021 and 2022 for any age group (Table A34).

### Remoteness Area of Usual Residence

In 2022, the greatest proportion of drug-induced deaths and the highest population rate occurred among people residing in major city areas (79%, 115 deaths, 8.3 deaths per 100,000 people).

South Australia has shown a pattern since 2009 of consistently higher rates of drug-induced deaths major city versus regional and remote areas. However, for the first time in 2021, the rate in regional and remote areas was higher than in major city areas, but this was reversed back in 2022 (Table A35).

### Intent of Drug Overdose Deaths

In 2022, 96% (140 deaths) of drug-induced deaths were due to overdose. Unintentional drug overdose accounted for 68% (95 deaths) and intentional drug overdose for 29% (40 deaths) of these deaths in 2022. This has fluctuated over time. Analyses indicated a significantly higher rate in 2022 compared to 2021 in unintentional drug overdose (Table A36).

### Place of Occurrence



In 2022, the location of the incident underlying death was coded as home for the majority (76%, 107 deaths) of drug overdose deaths.

### Drug Involvement

In South Australia, the three [most common drug types](#) involved in drug overdose deaths in 2022 were:

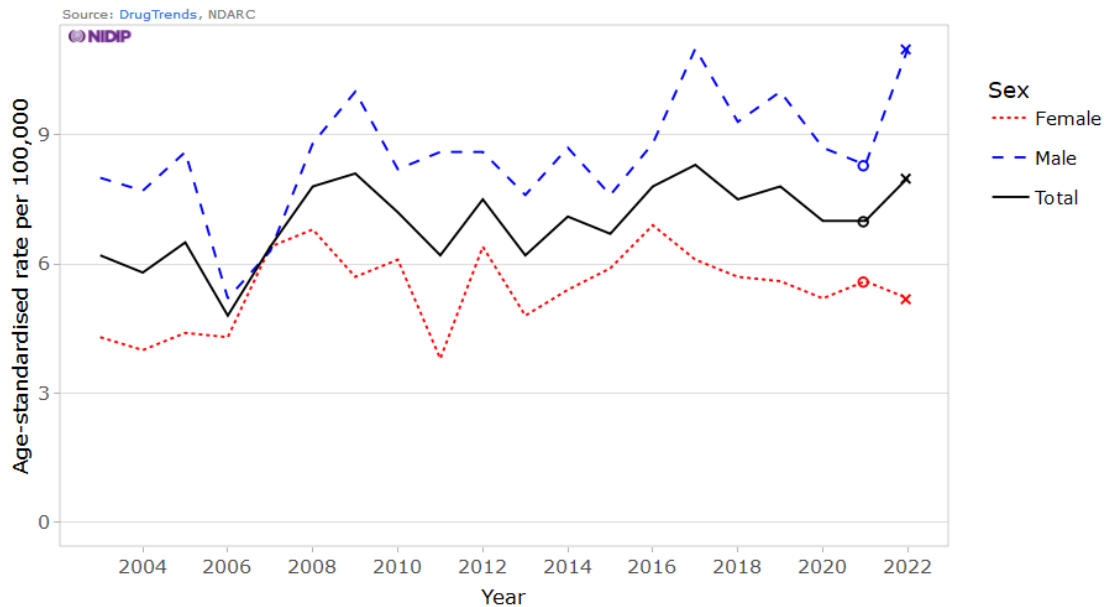
- [opioids](#) (4.1 deaths per 100,000 people, 75 deaths,

- antiepileptic, sedative-hypnotic and anti-parkinsonism drugs (2.6 deaths per 100,000 people, 46 deaths),
- amphetamine-type stimulants (2.4 deaths per 100,000 people, 41 deaths) (Figure 2).

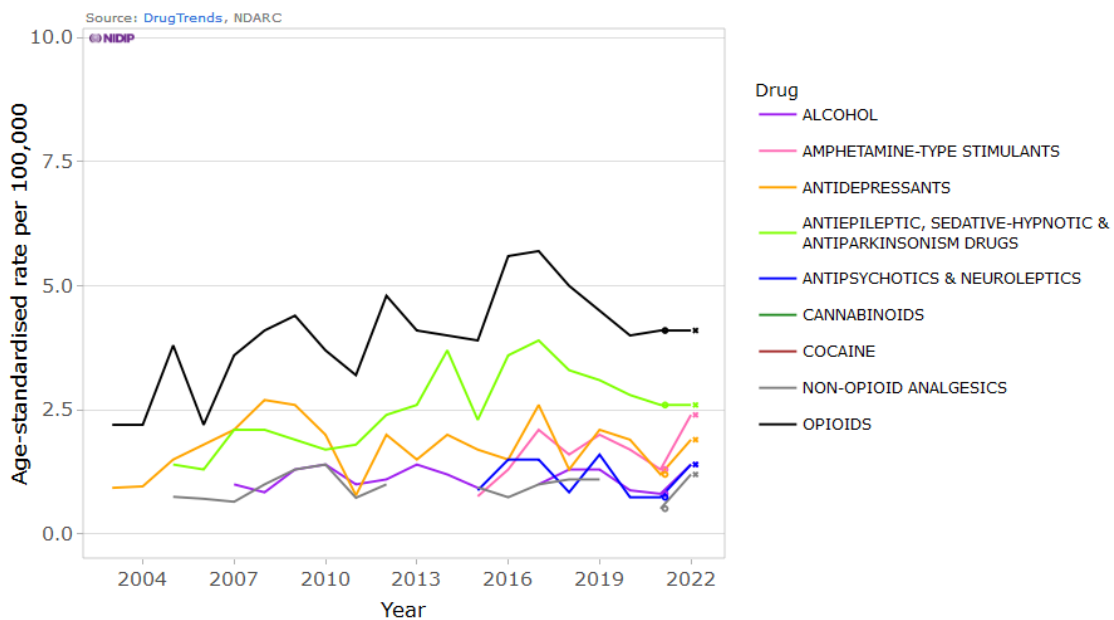
deaths involving amphetamine-type stimulants in 2022 as compared to 2021 (by 78%; 2.4 versus 1.3 deaths per 100,000 people), and non-opioid analgesics (by 138%; 1.2 versus 0.51 per 100,000 people) noting that estimates for 2021 and 2022 are subject to revision and may increase (Table A37).

Comparison of estimated rates of drug overdose deaths in South Australia identified a significantly higher rate of

**Figure 1.** Age-standardised rate per 100,000 people of drug-induced deaths, by sex, South Australia, 2003-2022



**Figure 2.** Age-standardised rate per 100,000 people of drug overdose deaths, by drug class, South Australia, 2003-2022



Note: Deaths where conditions related to alcohol or tobacco comprised the underlying cause of death are not captured here. Causes of death data for 2021 and 2022 are not final and thus are subject to further revision. The symbol 'o' indicates revised estimates and 'x' preliminary estimates. Age-standardised rates were not calculated if the number of deaths was less than or equal to 10 (please refer to our [methods document](#) for details). Suppressed data are visible as gaps in the data series.

**Table A33. Age-standardised rate per 100,000 people of drug-induced deaths in South Australia in 2021 and 2022, and average percent change (APC) for difference between 2022 and 2021 (with 95% confidence intervals), by sex**

Sex	Rate in 2021	Rate in 2022	APC for 2022 vs 2021
Female	5.6 (4.2, 7.4)	5.2 (3.8, 6.9)	-8.4 (-38.7, 36.9)
Male	8.3 (6.5, 10.5)	11 (9, 13)	31 (-4, 78)
Total	7.0 (5.8, 8.3)	8.0 (6.7, 9.4)	15 (-10, 47)

Note: Deaths where conditions related to alcohol or tobacco comprised the underlying cause of death are not captured here. Causes of death data for 2021 and 2022 are preliminary and thus are subject to further revision. 95% confidence intervals for the age-standardised rate and average percent change are shown in brackets. Please refer to our [methods](#) document on 'Presentation of results' for interpretation of average percent change. Please also refer to our [methods](#) document on 'Data source' and 'Coding of deaths' for details on the data used.

**Table A34. Crude rate per 100,000 people of drug-induced deaths in South Australia in 2021 and 2022, and average percent change (APC) for difference between 2022 and 2021 (with 95% confidence intervals), by age**

Age	Rate in 2021	Rate in 2022	APC for 2022 vs 2021
15-64	9.5 (7.8, 11.4)	11 (9, 13)	13 (-13, 48)
15-24	3.3 (1.3, 6.8)	3.7 (1.6, 7.3)	13 (-64, 266)
25-34	7.9 (4.7, 12.3)	7.0 (4.1, 11.1)	-11 (-57, 80)
35-44	9.6 (6.0, 14.5)	14 (10, 20)	47 (-17, 165)
45-54	15 (11, 22)	18 (13, 25)	17 (-27, 90)
55-64	11 (7, 16)	11 (7, 16)	-4.1 (-47.5, 75.1)
65-74	3.6 (1.4, 7.4)	8.2 (4.7, 13.3)	127 (-12, 553)
75-84	7.2 (3.1, 14.2)	–	–
85+	–	–	–

Note: Deaths where conditions related to alcohol or tobacco comprised the underlying cause of death are not captured here. Causes of death data for 2021 and 2022 are preliminary and thus are subject to further revision. 95% confidence intervals for the crude rate and average percent change are shown in brackets. Please refer to our [methods](#) document on 'Presentation of results' for interpretation of average percent change. The estimates for the 0-14 years age group are not presented due to sensitivity of the data. Please also refer to our [methods](#) document on 'Data source' and 'Coding of deaths' for details on the data used.

**Table A35. Age-standardised rate per 100,000 people of drug-induced deaths in South Australia in 2021 and 2022, and average percent change (APC) for difference between 2022 and 2021 (with 95% confidence intervals), by remoteness area**

Remoteness	Rate in 2021	Rate in 2022	APC for 2022 vs 2021
Major Cities	6.6 (5.3, 8.1)	8.3 (6.9, 10.0)	26 (-5, 66)
Regional and Remote	7.6 (5.1, 10.8)	6.7 (4.4, 9.7)	-11 (-47, 50)

Note: Deaths where conditions related to alcohol or tobacco comprised the underlying cause of death are not captured here. Causes of death data for 2021 and 2022 are preliminary and thus are subject to further revision. 95% confidence intervals for the age-standardised rate and average percent change are shown in brackets. Please refer to our [methods](#) document on 'Presentation of results' for interpretation of average percent change. Please also refer to our [methods](#) document on 'Data source' and 'Coding of deaths' for details on the data used.

**Table A36. Age-standardised rate per 100,000 people of overdose deaths in South Australia in 2021 and 2022, and average percent change (APC) for difference between 2022 and 2021 (with 95% confidence intervals), by intent**

Intent	Rate in 2021	Rate in 2022	APC for 2022 vs 2021
Unintentional	4.0 (3.1, 5.1)	5.5 (4.4, 6.7)	37 (0, 86)*
Intentional	1.9 (1.3, 2.6)	2.0 (1.4, 2.8)	8.2 (-31.9, 71.9)

Note: Deaths where conditions related to alcohol or tobacco comprised the underlying cause of death are not captured here. Causes of death data for 2021 and 2022 are preliminary and thus are subject to further revision. 95% confidence intervals for the age-standardised rate and average percent change are shown in brackets. Please refer to our [methods](#) document on 'Presentation of results' for interpretation of average percent change. Please also refer to our [methods](#) document on 'Data source' and 'Coding of deaths' for details on the data used. \* Indicates a statistically significant change

**Table A37. Age-standardised rate per 100,000 people of overdose deaths in South Australia in 2021 and 2022, and average percent change (APC) for difference between 2022 and 2021 (with 95% confidence intervals), by drugs involved**

Drug	Rate in 2021	Rate in 2022	APC for 2022 vs 2021
Opioids	4.1 (3.2, 5.1)	4.1 (3.2, 5.2)	1.5 (-26.8, 40.9)
Antiepileptic, sedative-hypnotic & antiparkinsonism drugs	2.6 (1.9, 3.5)	2.6 (1.9, 3.5)	0.47 (-33.44, 51.66)
Amphetamine-type stimulants	1.3 (0.8, 2.0)	2.4 (1.7, 3.2)	78 (6, 199)*
Antidepressants	1.2 (0.8, 1.8)	1.9 (1.3, 2.7)	58 (-7, 169)
Alcohol	0.81 (0.45, 1.35)	1.4 (0.9, 2.1)	78 (-7, 240)
Antipsychotics & neuroleptics	0.74 (0.38, 1.29)	1.4 (0.9, 2.1)	86 (-8, 277)
Non-opioid analgesics	0.51 (0.24, 0.93)	1.2 (0.8, 1.9)	138 (13, 404)*
Cannabinoids	–	–	–
Cocaine	–	–	–

Note: Deaths where conditions related to alcohol or tobacco comprised the underlying cause of death are not captured here. Causes of death data for 2021 and 2022 are preliminary and thus are subject to further revision. 95% confidence intervals for the age-standardised rate and average percent change (APC) are shown in brackets. Please refer to our [methods](#) document on 'Presentation of results' for interpretation of average percent change. Please also refer to our [methods](#) document on 'Data source' and 'Coding of deaths' for details on the data used. \* Indicates a statistically significant change

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Please note that as with all statistical reports, there is the potential for minor revisions to data in this report. Please refer to the online version at [Drug Trends](#).

Please contact the Drug Trends team with any queries regarding this publication: [drugtrends@unsw.edu.au](mailto:drugtrends@unsw.edu.au).

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## Data source

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We acknowledge the traditional custodians of the land on which the work for this report was undertaken. We pay respect to Elders past, present, and emerging.

## Related Links

- For the full report on trends in overdose and other drug-induced deaths in Australia go to: <http://www.unsw.edu.au/research/ndarc/resources/trends-drug-induced-deaths-australia-2003-2022>
- For interactive data visualisations accompanying this report, go to: [https://drugtrends.shinyapps.io/Deaths\\_2022](https://drugtrends.shinyapps.io/Deaths_2022)
- For full details of the methods underpinning this report, go to: [www.unsw.edu.au/research/ndarc/resources/trends-drug-induced-deaths-australia-2003-2022](http://www.unsw.edu.au/research/ndarc/resources/trends-drug-induced-deaths-australia-2003-2022)
- For other Drug Trends publications on drug-related hospitalisations and drug-induced deaths in Australia, go to: [National Illicit Drug Indicators Project \(NIDIP\) \(unsw.edu.au\)](http://www.unsw.edu.au/research/ndarc/resources/trends-drug-induced-deaths-australia-2003-2022)
- For more information on NDARC research, go to: [National Drug & Alcohol Research Centre | Medicine & Health - UNSW Sydney](http://www.unsw.edu.au/research/ndarc/resources/trends-drug-induced-deaths-australia-2003-2022)
- For more information about the ABS, go to: <http://www.abs.gov.au>
- For more information on ICD coding go to: <http://www.who.int/classifications/icd/en/>
- For more information on the Remoteness Areas Structure within the Australian Statistical Geography Standard (ASGS), go to: <https://www.abs.gov.au/ausstats/abs@.nsf/mf/1270.0.55.005>
- For more research from the Drug Trends program and to subscribe to our newsletter, go to: [Drug trends | National Drug & Alcohol Research Centre - UNSW Sydney](http://www.unsw.edu.au/research/ndarc/resources/trends-drug-induced-deaths-australia-2003-2022)
- For details on the collection, organisation and interpretation of NCIS data, go to: <https://www.ncis.org.au/about-the-data/explanatory-notes/>
- For statistics about case closure statistics in NCIS, go to: <https://www.ncis.org.au/about-the-data/operational-statistics/>