

**Poisoning Deaths Attributed to Prescription Drugs
Montana Residents, 2003 - 2012**

Death certificates have limited ability to identify deaths attributed specifically to prescription drugs. Many death certificates are completed without information from a toxicological screen or an autopsy. Thus, the available statistics may result in an undercount. This report measures the frequency of poisoning-deaths attributed to prescription drugs using a method similar to that described in a recent CDC publication,¹ which includes some over-the-counter and illegal drugs. Illegal drugs have been excluded from the data below so these numbers are not identical to those found in the annual Vital Statistics Reports, which include poisoning deaths attributed to illegal drugs. Poisoning deaths may involve more than one substance. The method used avoids double counting deaths resulting from use of multiple substances.

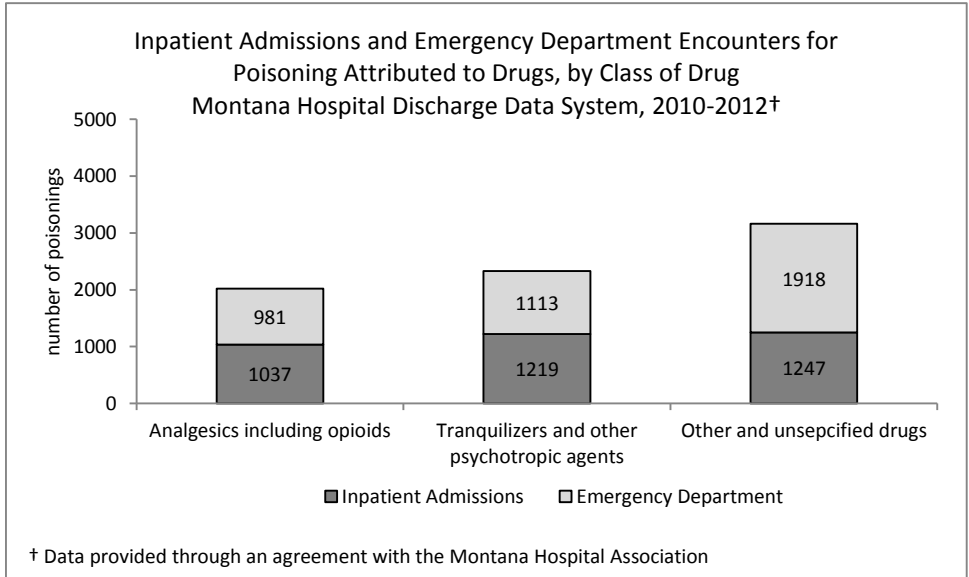
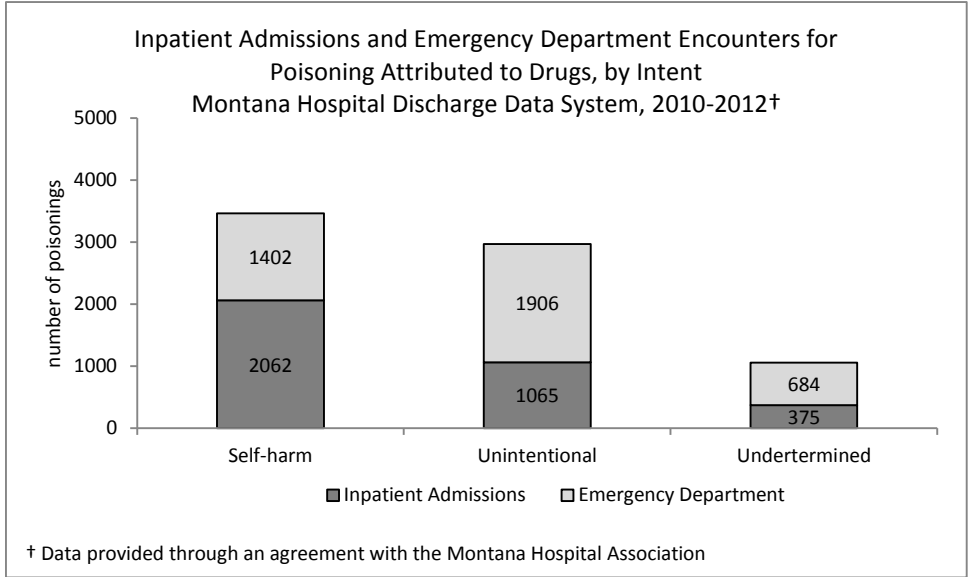
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YEAR OF DEATH	TOTAL	UNDETERMINED			
		ACCIDENTS	SUICIDE	HOMICIDE	INTENT
2003	86	40	17	1	28
2004	92	50	23	0	19
2005	90	51	23	0	16
2006	86	45	23	1	17
2007	117	67	29	0	21
2008	128	90	27	0	11
2009	139	91	30	0	18
2010	115	60	32	0	23
2011	135	86	21	0	28
2012	109	72	19	0	18

¹ Overdoses of Prescription Opioid Pain Relievers and Other Drugs Among Women—United States, 1999-2010. Morbidity and Mortality Weekly Report, 62(26):537-542. July 5, 2013. <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6226a3.htm>

**Hospital Admissions and Emergency Department Encounters Attributed to Poisoning by Prescription Drugs
Montana Residents, 2010 – 2012¹**

We defined an inpatient admission or emergency department encounter to be due to drug poisoning by ICD-9-CM codes for external cause of injury due to drug overdose (ICD-9-CM: E850-E858, E950.0–E950.5, E962.0, E980.0–E980.5) in any field.^{2,3} ICD-9 codes provide limited ability to identify drugs by type (analgesics including opioids, tranquilizers and other psychotropic agents, and other and unspecified).



¹ The Montana Hospital Discharge Data System (MHDDS) receives annual de-identified hospital discharge data sets through a Memorandum of Agreement with the Montana Hospital Association. Most hospitals in Montana participate in voluntary reporting from their Uniform Billing forms, version 2004. The MHDDS receives information on more than 90% of inpatients admissions in the states. It does not receive data on outpatient procedures at this time.