

Drug-related deaths – EMCDDA definition

Conceptual issues about “drug-related deaths”

Drug-related death is a difficult concept. The concept refers generally to deaths happening shortly after drug consumption (“directly related deaths”, “overdoses”, “poisonings” or “drug-induced deaths”). Most statistics refer to these deaths, which are usually recorded through General Mortality Registries or Special Registries (Forensic or Police).

Also deaths indirectly related to drug use (Aids, accidents, suicides, violence...) should also be taken into account, although their estimation require different methodologies and data sources. The EMCDDA Report CT.00.RTX.22 presents an example of methodology to estimate the total burden of mortality related to drug use (Annex 1, pages 47 to 53).

The EMCDDA definition of drug-related deaths

The EMCDDA definition of drug-related death in the Key Indicator “Drug-related deaths and mortality among drug users” refers to those deaths that are caused directly by the consumption of drugs of abuse. These deaths occur generally shortly after the consumption of the substance(s).

In operative terms the cases are selected as follows:

(1) The preferred method to estimate the number of deaths is to extract cases from existing General Mortality Registries according to the following criteria,

- based on the WHO International Classification of Diseases, 9th edition -ICD-9-

Cases will be counted when their underlying cause of death was drugs psychoses, drug dependence, nondependent drug abuse, accidental poisoning, suicide and self-inflicted poisoning, and poisoning with undetermined intent.

Cases will be included when the death was due to a standard list of specific drugs: opiates, cocaine, amphetamines and derivates, cannabis, and hallucinogens.

The precise ICD-9 codes to be selected are the following:

Category of drug-related death	Selected ICD-9 code(s)
Drug psychoses	292
Drug dependence	304.0, 304.2-9
Nondependent drug abuse	305.2-3, 305.5-7, 305.9
Accidental drug poisoning	E850.0, E850.8 ¹⁾ , E854.1-2, E855.2, and E858.8 ¹⁾
Suicide and self-inflicted drug poisoning	E950.0 ¹⁾ , E950.4 ¹⁾
Drug poisoning undetermined intent	E980.0 ¹⁾ , E980.4 ¹⁾

¹⁾In combination with N-codes (N965.0, and/or N968.5, and/or N969.6, and/or N969.7

This selection was agreed by the EMCDDA Expert Group on Drug-related deaths. It was called “**Selection B**”.

- based on the WHO International Classification of Diseases, 10th edition -ICD-10-

Case will be counted when their underlying cause of death was mental and behavioural disorders due to psychoactive substance use (see list of substances below) or poisoning accidental, intentional or undetermined intent (see list of substances below)

- Harmful use, dependence, and other mental and behavioural disorders due to:
 - opioids (F11)
 - cannabinoids (F12)
 - cocaine (F14)
 - other stimulants (F15)
 - hallucinogens (F16)
 - multiple drug use (F19)
- Accidental poisoning (X41, X42), intentional poisoning (X61, X62), or poisoning by undetermined intent (Y11, Y12) by:
 - opium (T40.0),
 - heroin (T40.1),
 - other opioids (T40.2),
 - methadone (T40.3),
 - other synthetic narcotics (T40.4),
 - cocaine (T40.5),
 - other and unspecified narcotics (T40.6),
 - cannabis (T40.7), lysergide (T40.8),
 - other and unspecified psychodysleptics (T40.9),
 - psychostimulants (T43.6)

The T-codes are to be selected in combination with the respective X-codes and Y-codes.

Underlying cause of death	Selected ICD-10 code(s)
Disorders	F11-F12, F14-F16, and F19
Accidental poisoning	X42 ¹⁾ , X41 ²⁾
Intentional poisoning	X62 ¹⁾ , X61 ²⁾
Poisoning undetermined intent	Y12 ¹⁾ , Y11 ²⁾

¹⁾ in combination with the T-codes: T40.0-9, ²⁾ in combination with T code: T43.6.

WHO International Statistical Classification of Diseases and Related health problems (ICD-9 and ICD-10) see: [WHO's International Statistical Classification of Diseases and Related Health Problems \(ICD-9 and ICD-10\)](#)

(2) An alternative method is to estimate the number of deaths by extracting cases from existing Special Registers (Forensic or police registries). The method based on the Special Registries will be applied in countries where the preferred method cannot be implemented, but also will be used whenever possible as a backup estimate for the General Mortality Registries.

Cases will be counted when the death was due to poisoning by accident, suicide, homicide, or undetermined intent.

Cases will be included when the death was due to opiates, amphetamines, cocaine (or crack), cannabis, hallucinogens, solvents, or synthetic designer drugs like amphetamine derivatives.

The precise groups of deaths are the following:

Category of drug-related death	Selected groups
Poisoning by accident, suicide, homicide, or undetermined intent	Opiates only (excluding methadone only)
	Methadone only
	Poly-substances including opiates
	Poly-substances excluding opiates
	Unspecified/unknown

- "poly-substances" should include at least one of the above mentioned substances
- "unspecified/unknown" will be included when it is assumed to include one of the above mentioned substances

This selection was agreed by the EMCDDA group of experts. It was called "**Selection D**".