

Apparent Opioid and Stimulant Toxicity Deaths

Surveillance of Opioid- and
Stimulant-Related Harms in Canada



January 2016 to December 2020



**TO PROMOTE AND PROTECT THE HEALTH OF CANADIANS THROUGH LEADERSHIP,
PARTNERSHIP, INNOVATION AND ACTION IN PUBLIC HEALTH.**

—Public Health Agency of Canada

Prepared by the Substance-related Overdose and Mortality Surveillance Task Group (SOMS-TG)
of the Special Advisory Committee on the Epidemic of Opioid Overdoses (SAC)

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*Décès apparemment liés une intoxication aux opioïdes et aux stimulants
Surveillance des méfaits associés aux opioïdes et aux stimulants au Canada
Janvier 2016 à décembre 2020*

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Key Findings

Context

The COVID-19 outbreak is worsening the already deadly and ongoing public health crisis of opioid overdoses and death. It is having a tragic impact on people who use substances, their families, and communities across Canada. People who use substances, such as opioids, cocaine, and methamphetamine, are experiencing a number of increased risks, with several jurisdictions reporting higher rates of fatal overdoses and other harms.

These updates include available data on overdoses and deaths involving opioids and/or stimulants from January 2016 to December 2020, where available. Recognizing that harms related to opioids, stimulants, and other substances extend beyond overdoses (poisonings) and deaths, we continue to work with federal, provincial and territorial partners to build a broad understanding of harms and substances involved to better respond to the crisis. [Additional studies](#) can also help us plan and tailor actions to achieve better possible outcomes.

21,174 apparent opioid toxicity deaths between January 2016 and December 2020^{1,2}

- In 2020, 6,214 apparent opioid toxicity deaths occurred (approximately 17 deaths per day), of which 96% were accidental (unintentional).
- 1,766 apparent opioid toxicity deaths occurred between October and December 2020, similar to July to September (1,716). This number represents the highest quarterly count since national surveillance began in 2016. This number also represents a 100% increase from the same time frame in 2019 (885 deaths).
- Since the onset of the COVID-19 pandemic, 5,148 apparent opioid toxicity deaths occurred (April to December 2020), representing a 89% increase from the same time period in 2019 (2,722 deaths).
- A number of factors have likely contributed to a worsening of the overdose crisis, including the increasingly toxic drug supply, increased feelings of isolation, stress and anxiety and limited availability or accessibility of services for people who use drugs.

Western Canada most impacted yet increases observed across the country

- While Western Canada continues to be the most impacted region of the country since 2016, rates have increased in other Canadian regions, including in Ontario. However, several jurisdictions have observed record-breaking numbers in relation to impacts of the COVID-19 outbreak.
- Between January and December 2020, 85% of all opioid toxicity deaths occurred in British Columbia, Alberta or Ontario.

¹ Manitoba data from October 2019 to December 2020 were not available at the time of this update.

² National overall count from January 2016 to December 2020 includes deaths from British Columbia (2018 to 2020) and Quebec (2019 and 2020) related to all illicit drugs including, but not limited to opioids.



Most apparent opioid toxicity deaths among males and individuals aged 20 to 49 years

- Males accounted for the majority of accidental apparent opioid toxicity deaths (77%) from January to December 2020; for both males and females, the majority of deaths were among individuals aged 20 to 49 years.
- Individuals between 30 and 39 years accounted for a higher proportion of accidental opioid toxicity deaths where fentanyl (30%) was involved from January to December 2020.
- Among females, almost one third (30%) of accidental opioid toxicity deaths involved at least one pharmaceutical opioid³, compared to 16% among males.⁴

Fentanyl and fentanyl analogues continue to be major drivers of the crisis

- 82% of accidental apparent opioid toxicity deaths involved fentanyl in 2020.
- The majority of fentanyl detected in opioid toxicity deaths was non-pharmaceutical (99%).^{3,4}
- 84% of accidental apparent opioid toxicity deaths from January to December 2020 involved a non-pharmaceutical opioid.^{3,4}

Data on opioid and stimulant toxicity deaths based on six reporting provinces and territories

- Available information from six provinces and territories indicates the number of deaths involving stimulants from October to December 2020 remained high and is similar to the period from July to September. 98% of those deaths were accidental.
- Half (52%) of accidental opioid toxicity deaths in 2020 also involved a stimulant, reflecting the polysubstance nature of this crisis.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.

³ Opioids with a pharmaceutical origin refer to opioids that were manufactured by a pharmaceutical company and approved for medical purposes in humans. Pharmaceutical origin does not indicate how the opioids were obtained (e.g. through personal prescription or by other means).

⁴ Based on 2020 data on origin of opioids from deaths with completed investigations from six provinces.



- 68% of identified apparent stimulant toxicity deaths from January to December 2020 involved cocaine while 47% involved methamphetamines.
- 84% of apparent stimulant toxicity deaths also involved an opioid in 2020.
- Males accounted for the majority of accidental apparent stimulant toxicity deaths (77%) from January to December 2020; for males and females, the majority of deaths were among individuals aged 20 to 49 years.



This update is based on data submitted to the Public Health Agency of Canada on or before May 11, 2021. Due to differences in identifying and reporting cases, comparisons over time and between provinces and territories should be interpreted with caution. Refer to the [Technical notes](#) for more information.



Technical Notes

Definitions

Apparent opioid toxicity death (AOTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is an opioid, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Apparent stimulant toxicity death (ASTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is a stimulant, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Ongoing investigation: Coroners and medical examiners continue to collect information on how and why the death occurred. Data for ongoing investigations are considered preliminary and subject to change.

Completed investigation: Coroners and medical examiners have collected all available information on how and why a death occurred. The time required to complete an investigation and related administrative processes is case-dependent and can range from approximately three to twenty-four months.

Manner of death – Accident: Deaths with completed investigations where the coroner or medical examiner determined that the death was unintentional. This category also includes deaths with ongoing investigations where the manner of death was believed to be unintentional or had not been assigned at the time of reporting.

Manner of death – Suicide: Deaths with completed investigations where the coroner or medical examiner determined that the opioids were consumed with the intent to die. This category also includes deaths with ongoing investigations where suicide was believed to be the manner of death at the time of reporting.

Manner of death – Undetermined: Deaths with completed investigations where a specific manner of death (e.g. accident, suicide) could not be assigned based on available or competing information. For this manner of death category, provinces and territories report only completed investigations with the exception of British Columbia which also includes data from ongoing investigations.

Opioid origin – Pharmaceutical: Deaths with completed investigations where all opioids that directly contributed to death were manufactured by a pharmaceutical company and approved for medical purposes in humans. Pharmaceutical origin does not indicate how the opioids were obtained (e.g. through personal prescription or by other means).

Opioid origin – Non-pharmaceutical: Deaths with completed investigations where all opioids that directly contributed to the death were not manufactured by a pharmaceutical company or not approved for medical purposes in humans.

Opioid origin – Both pharmaceutical and non-pharmaceutical: Deaths with completed investigations where the opioids that directly contributed to the death were a combination of pharmaceutical and non-pharmaceutical opioids, without any opioids of undetermined origin.

Opioid origin – Undetermined: Deaths with completed investigations where, for one or more opioids that directly contributed to the death, it was not possible to determine whether the opioid was pharmaceutical or non-pharmaceutical.



How apparent opioid and stimulant toxicity deaths are counted

Counts or record-level information are provided by the provinces and territories that collect data from their respective offices of Chief Coroners or Chief Medical Examiners. Crude and age-adjusted rates are calculated using the most current population data from Statistics Canada. Age-adjusted rates used the 2016 Canadian population as a reference and direct standardization was applied.

Crude rates: summarize the situation within a region at a certain time period and have not been adjusted for existing differences by provincial and territorial age distributions (e.g. (number of deaths / population) x 100,000).

Age-adjusted rates: have been adjusted for existing differences by provincial and territorial age distributions using the 2016 Canadian population as a reference. These rates assume that all regions have the same age distributions and are useful when comparing between regions and over time.

The data provided by the provinces and territories can include deaths:

- with completed or ongoing investigations
- where manner of death is classified as accident, suicide, or undetermined

These data **do not** include deaths due to:

- the medical consequences of long-term substance use or overuse (for example, alcoholic cirrhosis)
- medical assistance in dying
- trauma where use of the substance(s) contributed to the circumstances of the injury that lead to the death, but was not directly involved in the death
- homicide

However, some provincial and territorial differences remain in the type of data reported and in the time periods for which data are available (refer to [Table A](#)).



Limitations of the data on apparent opioid and/or stimulant toxicity deaths

Data presented in this update should be interpreted with caution.

- This update is based on data submitted to the Public Health Agency of Canada on or before May 11, 2021. New or revised data reported after this date will be reflected in future updates.
- Data released by provinces and territories may differ due to the availability of updated data, differences in the type of data reported (e.g. manners of death), the use of alternate age groupings, differences in time periods presented and/or population estimates used for calculations, etc.
- As some data are based on ongoing investigations by coroners and medical examiners, they are considered preliminary and subject to change. The time required to complete an investigation and related administrative processes is case-dependent and can range from approximately three to twenty-four months.
- This update is based on data that do not specify how the opioids or stimulant were obtained (e.g. illegally or through personal prescription); the level of toxicity may differ depending on the opioid or stimulant (substance(s) involved, concentration, and dosage).
- Provincial and territorial differences in the death investigation process, death classification method, toxicology testing, and the manners of death reported may impact the interpretation and comparability of the data presented in this update over time and between provinces and territories.
- Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.
- National rates of apparent opioid toxicity deaths for 2020 exclude Manitoba.
- Quarterly totals for Canada may not equal the annual totals due to suppressed data for some provinces and territories with low number of deaths.
- Data on apparent stimulant toxicity deaths were only available from four to six provinces and territories depending on the year. Therefore, national numbers and rates are not provided in this update. Refer to [Table A](#) for more details.



Notes on provincial and territorial data

Due to differences in identifying and reporting cases, comparisons over time and between provinces and territories should be interpreted with caution.

General notes

1. Data reported by some provinces and territories do not include all manners of death (accident, suicide, undetermined) or stages of investigation (ongoing, completed); refer to [Table A](#) for more details.
2. Data presented will be updated quarterly, based on results of completed investigations.
3. Rates for provinces and territories with relatively smaller populations may change substantially with even slight changes in the number of deaths.
4. British Columbia data for 2016 and 2017 include deaths with completed investigations only. Overall numbers for British Columbia from 2018 to 2020 include deaths with ongoing investigations related to all illicit drugs, including but not limited to opioids and stimulants, used alone or in combination with prescribed/diverted medication.
5. Quebec data for 2016, 2017 and 2018 include deaths with completed investigations only; death investigations were underway for 2% in 2018. Available 2019 and 2020 data from Quebec include unintentional deaths with ongoing investigations related to all illicit drugs including, but not limited to, opioids and stimulants. Preliminary data for drug-related poisonings, for which toxicology information was available, indicate that 47% of deaths between January 2019 and December 2020 involved an opioid.
6. Data from Yukon include deaths with completed investigations only. In 2018, one apparent opioid toxicity death occurred in a different province following an overdose in Yukon. This death is included in the data from the jurisdiction where the death occurred and is not reported in the data from Yukon.
7. Data from Prince Edward Island include accidental deaths with completed investigations only. Only annual totals were available for 2016 data from Prince Edward Island; quarterly data for 2016 were not available at the time of this update.
8. In Ontario, apparent opioid toxicity death data were captured using an enhanced data collection tool by the Office of the Chief Coroner as of May 1, 2017. Prior to this time period, retrospective case information was collected using a different tool.
9. For Newfoundland and Labrador, data on apparent opioid toxicity deaths between January 2016 and December 2019 were based on the detection of opioids as indicated on the toxicological report. As of 2020, data include deaths where opioids directly contributed to the death.
10. Data from Nunavut were not included in national counts or percentages.
11. Manitoba data from October 2019 to December 2020 were not available at the time of this update.



Manner of death

12. Manner of death is assigned by the coroner or medical examiner during, or following an investigation. The data in this update include accidental, suicide and undetermined deaths.
13. Suicide data were unavailable from Alberta (2018 to 2020), Prince Edward Island and Nunavut.

Sex and age group

14. For most provinces and territories, data on the sex of the individual was based on biological characteristics or legal documentation.
15. Data on deaths where sex was categorized as “Other” were excluded from analyses by sex, but were included in overall analyses.
16. Due to rounding, percentages may not add to 100%.
17. For Ontario, from January 2016 to April 2017, data on the sex of the individual reflected the sex assigned at birth or was based on biological characteristics at the time of death; as of May 2017, the perceived or projected identity of the individual was reported.
18. Alberta uses data on the sex of the individual based on the medical examiner’s assessment, which is largely based on biological characteristics. In a small subset of cases where the individual was known to identify with a gender different than their biological sex, the medical examiner may indicate their identified gender.
19. Data on deaths where age group was categorized as “Unknown” were excluded from analyses by age group, but were included in overall analyses.

Fentanyl, fentanyl analogues, and non-fentanyl opioids

20. Refer to [Table B](#) below for details on opioids.
21. Prior to 2018, the percentage of deaths involving fentanyl and/or fentanyl analogues represented a single category. For data reported for 2018 to 2020, some provinces and territories did not report fentanyl analogue information or required additional information to differentiate fentanyl from fentanyl analogues until investigations are completed. Therefore, deaths involving fentanyl analogues may be included in the fentanyl percentages for some jurisdictions.
22. The sum of percentages by type of opioids may not add up to 100% because a death may involve more than one type of opioids.
23. Observed trends of accidental apparent opioid toxicity deaths involving fentanyl or fentanyl analogues should be interpreted with caution until additional data become available. In addition, changes to testing practices during the reporting period may affect observed trends.
24. Given provincial and territorial differences in death classification methods, the term “involving” includes deaths where the substance was either detected and/or directly contributed to the death. Substances can be detected through toxicology testing and may or may not have directly contributed to the death. Direct contribution to the death is based on investigation by coroner or medical examiner.



25. Available 2019 and 2020 data from Quebec on deaths related to drugs where toxicology information was available and fentanyl (or fentanyl analogues) was detected were used to approximate apparent opioid toxicity deaths involving fentanyl (or fentanyl analogues), among deaths where opioids were detected.
26. For Alberta and Ontario, only data on deaths with completed investigations, where relevant toxicology information was available, were included in percentages for fentanyl or fentanyl analogues.

Origin of opioid(s)

27. The origin of opioid(s) refers to whether the opioids that directly contributed to the death were pharmaceutical, non-pharmaceutical, both or undetermined.
28. Data on origin were only available for deaths with completed investigations from 2018 onward from between seven and eight provinces and territories, depending on the year. Completed investigations represented 96% of apparent opioid toxicity death investigations from these provinces and territories over that period; refer to [Table A](#) for more details.
29. Summary data and trends based on origin of opioid(s) should be interpreted with caution until additional data become available.
30. Origin categorization is based on toxicology results and scene evidence and does not indicate how the substances were prepared, their appearance, or how they were 'advertised'; nor should it be used to infer the timing or mode of consumption.
31. Pharmaceutical opioids also include those approved for use in humans in other countries, but not necessarily in Canada.
32. For the purposes of origin categorization, deaths involving fentanyl are categorized as "suspected non-pharmaceutical" when there is: 1) no evidence of a patch, vial, or other pharmaceutical formulation at the scene, or 2) no/unknown evidence of a prescription. These deaths are grouped with deaths involving non-pharmaceutical opioids.
33. Origin categorization represents the best estimate based on the information available and should be interpreted with caution.
34. Origin refers only to the opioid(s) involved in death and should not be used as an indication of prior use of opioids of the same or other origin.
35. British Columbia only reports opioid toxicity deaths involving any illicit opioids, resulting in a high proportion of non-pharmaceutical opioids. For that reason, data on origin of opioid from British Columbia were not included in the national proportions.



Cocaine, methamphetamine and other stimulants

36. Refer to [Table B](#) below for details on stimulants.
37. Amphetamine is a known metabolite of methamphetamine but can also be consumed separately and directly contribute to a toxicity death. Deaths where amphetamine (without methamphetamine) directly contributed to the death are reported under “other stimulants”. In situations where both methamphetamine and amphetamine were consumed separately, and both directly contributed to death, the death is reported under both methamphetamine and “other stimulants”.
38. Data on apparent stimulant toxicity deaths were available from between four and six provinces and territories, depending on the year from 2018 to 2020.
39. The sum of percentages by type of stimulant may not add up to 100% because a death may involve more than one type of stimulant.
40. For Ontario, only data on deaths with completed investigations, where relevant toxicology information was available, were included in percentages for cocaine, methamphetamine and other stimulants.
41. Data from Quebec on “other stimulants” include deaths involving methamphetamine.
42. For Alberta, only apparent opioid toxicity deaths with completed investigations are used in the numerator for percentage of deaths involving stimulants. As a result, these values may change when more investigations are completed.

Other psychoactive substances

43. Refer to [Table B](#) below for details on other psychoactive substances.
44. National-level percentages of accidental apparent opioid toxicity deaths involving other non-opioid substances do not include data from Nunavut as these data were not available.
45. For Alberta, only data on deaths with completed investigations and specific substances causing death listed on the death certificate were included in percentages of accidental apparent opioid toxicity deaths involving other non-opioid substances.
46. For Ontario, only data on deaths with completed investigations, where relevant toxicology information was available, were included in percentages of accidental apparent opioid toxicity deaths involving other non-opioid substances. Data for non-opioid substances from Ontario between January 2016 and April 2017 were based on their detection and do not include alcohol; as of May 1, 2017, data on non-opioid substances are based on their direct effects and include alcohol.



Data suppression

The suppression of data in this update is based on the preferences of individual provinces or territories to address concerns around releasing small numbers for their jurisdiction.

- Quebec suppressed counts less than five for deaths with ongoing investigations (2019 and 2020 data).
- Nova Scotia suppressed all counts for age group 0 to 19 years when stratified by sex.
- Prince Edward Island suppressed counts between one and four for quarterly data, and for any data related to sex or age distribution.
- Newfoundland and Labrador suppressed counts between one and four for quarterly data, and data related to substances involved and sex or age distribution.
- Yukon suppressed counts between one and four for data related to sex or age distribution.
- Nunavut suppressed all counts less than five.

In addition, suppression was applied in some instances where all data for a province or territory fell in a single category of a given table or figure.



Table A. Reporting periods, manners of death, and availability of opioid and stimulant data included in this update by province or territory

		BC	AB	SK	MB	ON	QC	NB	NS	PE	NL	YT	NT	NU
Available data on apparent toxicity deaths involving opioids as of May 11, 2021														
2016-17	January to December	✓ (C)	✓	✓ (C)	✓	✓	✓ (C)	✓	✓	✓ (C)	✓ (C)	✓ (C)	✓	✓
2018	January to December	✓	✓	✓ (C)	✓	✓	✓ (C)	✓	✓	✓ (C)	✓ (C)	✓ (C)	✓	✓
2019	January to December	✓	✓	✓ (C)	✓ (INC)	✓	✓	✓	✓	✓ (C)	✓ (C)	✓ (C)	✓	✓
2020	January to December	✓	✓	✓ (C)	n/a	✓	✓	✓	✓	✓ (C)	✓ (C)	✓ (C)	✓	✓
Available data on apparent toxicity deaths involving stimulants as of May 11, 2021														
2018	January to December	✓ (C)	n/a	✓ (C)	n/a	✓	✓ (C)	n/a	✓	n/a	n/a	n/a	n/a	n/a
2019	January to December	✓ (C)	n/a	✓ (C)	n/a	✓	n/a	n/a	✓	n/a	n/a	n/a	n/a	n/a
2020	January to December	✓ (C)	n/a	✓ (C)	n/a	✓	n/a	n/a	✓	n/a	✓ (C)	n/a	✓	n/a
Classification of deaths included in the reported data														
Accident	Completed investigations	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Ongoing investigations where manner of death was believed to be unintentional	✓	-	n/a	✓	-	✓	✓	✓	n/a	n/a	n/a	✓	n/a
	Ongoing investigations where manner of death had not been assigned at the time of reporting	-	✓	n/a	✓	✓	n/a	✓	✓	n/a	-	-	✓	n/a
Suicide	Completed investigations	✓	✓ (INC)	✓	✓	✓	✓	✓	✓	n/a	✓	✓	✓	✓
	Ongoing investigations where the manner of death was believed to be suicide	✓	n/a	n/a	✓	-	n/a	✓	✓	n/a	n/a	n/a	✓	n/a
Deaths with completed investigations and an undetermined manner of death		✓	✓	✓	✓	✓	✓	✓	✓	n/a	✓	✓	✓	✓
Available data on origin of the opioid(s)														
2018	January to December	✓	✓	✓	n/a	✓	n/a	✓	✓	n/a	✓	n/a	n/a	n/a
2019	January to December	✓	✓	✓	✓ (INC)	✓	n/a	✓	✓	n/a	✓	n/a	n/a	n/a
2020	January to December	✓	✓	✓	n/a	✓	n/a	✓	✓	n/a	✓	n/a	n/a	n/a

✓ These data have been reported by the province or territory and are reflected in this update, unless otherwise specified

(C) Data includes deaths with completed investigations only

(INC) Data was not available for the entire period

- The classification is not used in the province or territory

n/a Data were not available at the time of this publication

Table B. Types of opioids and stimulants

Category	Includes (but are not limited to):	
Fentanyl and fentanyl analogues	<ul style="list-style-type: none"> • 3-methylfentanyl • acetylfentanyl • acrylfentanyl • butyrylfentanyl • carfentanil • crotonyl fentanyl • cyclopropyl fentanyl 	<ul style="list-style-type: none"> • despropionyl-fentanyl • fentanyl • fluoroisobutyrylfentanyl (FIBF) • furanylfentanyl • methoxyacetylfentanyl • norfentanyl
Non-fentanyl opioids	<ul style="list-style-type: none"> • 2-methyl AP-237 • AH-7921 • AP-237 • buprenorphine • buprenorphine metabolites • codeine • desomorphine • dihydrocodeine • etodesnitazene • heroin • hydrocodone • hydromorphone • isopropyl-U-47700 • isotonitazene • loperamide 	<ul style="list-style-type: none"> • meperidine • methadone • metonitazene • mitragynine • monoacetylmorphine • morphine • MT-45 • normeperidine • oxycodone • tapentadol • tramadol • U-47700 • U-49900 • U-50488
Stimulants	<ul style="list-style-type: none"> • amphetamine • atomoxetine • catha • cocaine • dexamfetamine • ethylphenidate • lisdexamfetamine • MDA • MDMA 	<ul style="list-style-type: none"> • mephedrone • methamphetamine • methylphenidate • modafinil • pemoline • phentermine • pseudoephedrine • TFMP
Other psychoactive substances	<ul style="list-style-type: none"> • Alcohol • Benzodiazepines • Gabapentinoids • Ketamine • LSD 	<ul style="list-style-type: none"> • PCP • Psilocin • W-18 • Z-drugs



Appendix



Table 1a. Number and rate (per 100,000 population) of total apparent opioid toxicity deaths by province or territory, 2016 to 2020

Province or territory	2016			2017			2018		
	Number	Crude rate per 100,000 population	Age-adjusted rate per 100,000 population	Number	Crude rate per 100,000 population	Age-adjusted rate per 100,000 population	Number	Crude rate per 100,000 population	Age-adjusted rate per 100,000 population
BC	805	16.6	16.4	1,287	26.1	26.0	1,569	31.4	31.3
AB	602	14.3	13.8	744	17.5	17.0	805	18.7	18.3
SK	83	7.3	7.5	85	7.4	7.6	126	10.8	11.3
MB	88	6.7	6.8	106	7.9	8.1	93	6.9	7.0
ON	867	6.2	6.3	1,265	9.0	9.0	1,477	10.3	10.4
QC	258	3.1	3.1	281	3.4	3.4	208	2.5	2.5
NB	34	4.5	4.4	38	5.0	5.1	30	3.9	3.9
NS	53	5.6	5.7	64	6.7	6.9	54	5.6	5.8
PE	5	3.4	3.2	5	3.3	3.6	8	5.2	5.4
NL	18	3.4	3.6	33	6.2	6.5	12	2.3	2.3
YT	7	18.2	17.5	7	17.6	16.5	5	12.3	12.4
NT	5	11.2	12.2	1	2.2	1.9	2	4.4	3.8
NU	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	2,825	7.8	7.8	3,916	10.7	10.8	4,389	11.8	11.9



Province or territory	2019			2020		
	Number	Crude rate per 100,000 population	Age-adjusted rate per 100,000 population	Number	Crude rate per 100,000 population	Age-adjusted rate per 100,000 population
BC	1,013	20.0	19.9	1,738	33.9	33.9
AB	623	14.3	14.0	1,144	25.8	25.6
SK	117	10.0	10.6	230	19.5	20.4
MB	26	1.9	2.0	n/a	n/a	n/a
ON	1,517	10.4	10.5	2,425	16.4	16.6
QC	414	4.9	4.9	547	6.4	6.5
NB	35	4.5	4.6	38	4.9	5.1
NS	57	5.9	5.9	51	5.2	5.5
PE	5	3.2	3.3	8	5.0	5.1
NL	18	3.5	3.5	24	4.6	4.9
YT	4	9.8	10.1	6	14.5	14.6
NT	1	2.2	2.1	3	6.7	5.7
NU	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	3,830	10.2	10.3	6,214	17.0	17.2

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Includes deaths related to all illicit drugs including, but not limited to, opioids and stimulants.

Note(s):

Apparent opioid toxicity death (AOTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is an opioid, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

2019 data from Manitoba are based on January to September.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.



Table 1b. Number and rate (per 100,000 population) of total apparent stimulant toxicity deaths by province or territory, 2018 to 2020

Province or territory	2018			2019			2020		
	Number	Crude rate per 100,000 population	Age-adjusted rate per 100,000 population	Number	Crude rate per 100,000 population	Age-adjusted rate per 100,000 population	Number	Crude rate per 100,000 population	Age-adjusted rate per 100,000 population
BC	826	16.5	16.5	381	7.5	7.5	373	7.3	7.3
SK	83	7.1	7.4	95	8.1	8.3	163	13.8	14.3
ON	913	6.4	6.4	1,004	6.9	6.9	1,671	11.3	11.5
QC	162	1.9	2.0	n/a	n/a	n/a	n/a	n/a	n/a
NS	25	2.6	2.7	29	3.0	3.1	36	3.7	3.8
NL	n/a	n/a	n/a	n/a	n/a	n/a	10	1.9	2.2
NT	n/a	n/a	n/a	n/a	n/a	n/a	1	2.2	1.9

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Note(s):

Apparent stimulant toxicity death (ASTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is a stimulant, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.



Table 2a. Number and rate (per 100,000 population) of accidental apparent opioid toxicity deaths by province or territory, 2016 to 2020

Province or territory	2016			2017			2018		
	Number	Crude rate per 100,000 population	Age-adjusted rate per 100,000 population	Number	Crude rate per 100,000 population	Age-adjusted rate per 100,000 population	Number	Crude rate per 100,000 population	Age-adjusted rate per 100,000 population
BC	789	16.2	16.1	1,266	25.7	25.6	1,536	30.7	30.6
AB	547	13.0	12.4	683	16.1	15.4	799	18.6	18.2
SK	76	6.7	6.9	74	6.4	6.6	114	9.8	10.2
MB	61	4.6	4.7	87	6.5	6.6	78	5.8	5.8
ON	726	5.2	5.2	1,127	8.0	8.0	1,317	9.2	9.2
QC	173	2.1	2.1	187	2.3	2.3	147	1.8	1.8
NB	27	3.5	3.6	32	4.2	4.4	23	3.0	3.0
NS	40	4.2	4.4	58	6.1	6.3	49	5.1	5.3
PE	5	3.4	3.2	5	3.3	3.6	8	5.2	5.4
NL	13	2.5	2.6	23	4.4	4.7	10	1.9	1.9
YT	5	13.0	11.8	6	15.1	13.4	4	9.8	9.5
NT	4	9.0	10.3	1	2.2	1.9	2	4.4	3.8
NU	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	2,466	6.8	6.8	3,549	9.7	9.7	4,087	11.0	11.1



Province or territory	2019			2020		
	Number	Crude rate per 100,000 population	Age-adjusted rate per 100,000 population	Number	Crude rate per 100,000 population	Age-adjusted rate per 100,000 population
BC	963	19.0	18.9	1,671	32.6	32.6
AB	616	14.1	13.8	1,132	25.6	25.3
SK	109	9.3	9.9	219	18.5	19.4
MB	24	1.8	1.8	n/a	n/a	n/a
ON	1,397	9.6	9.6	2,316	15.7	15.8
QC	414	4.9	4.9	547	6.4	6.5
NB	27	3.5	3.5	31	4.0	4.1
NS	45	4.6	4.8	43	4.4	4.6
PE	5	3.2	3.3	8	5.0	5.1
NL	13	2.5	2.6	18	3.5	3.8
YT	4	9.8	10.1	6	14.5	14.6
NT	Suppr.	Suppr.	Suppr.	3	6.7	5.7
NU	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	3,617	9.6	9.7	5,994	16.4	16.6

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Includes deaths related to all illicit drugs including, but not limited to, opioids and stimulants.

Note(s):

Apparent opioid toxicity death (AOTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is an opioid, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

2019 data from Manitoba are based on January to September.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.

Table 2b. Number and rate (per 100,000 population) of accidental apparent stimulant toxicity deaths by province or territory, 2018 to 2020

Province or territory	2018			2019			2020		
	Number	Crude rate per 100,000 population	Age-adjusted rate per 100,000 population	Number	Crude rate per 100,000 population	Age-adjusted rate per 100,000 population	Number	Crude rate per 100,000 population	Age-adjusted rate per 100,000 population
BC	815	16.3	16.2	369	7.3	7.3	370	7.2	7.2
SK	76	6.5	6.7	93	7.9	8.2	160	13.5	14.1
ON	882	6.2	6.2	970	6.7	6.7	1,638	11.1	11.2
QC	144	1.7	1.7	n/a	n/a	n/a	n/a	n/a	n/a
NS	23	2.4	2.5	27	2.8	2.8	33	3.4	3.5
NL	n/a	n/a	n/a	n/a	n/a	n/a	10	1.9	2.2
NT	n/a	n/a	n/a	n/a	n/a	n/a	1	2.2	1.9

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Note(s):

Apparent stimulant toxicity death (ASTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is a stimulant, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.

Table 3a. Summary of apparent opioid toxicity deaths by manner of death, 2016 to 2020

Manner of death	2016		2017		2018		2019		2020	
	Count	% of annual	Count	% of annual	Count	% of annual	Count	% of annual	Count	% of annual
Total	2,825	100%	3,916	100%	4,389	100%	3,830	100%	6,214	100%
Accidental	2,466	87%	3,549	91%	4,087	93%	3,617	94%	5,994	96%
Suicide	264	9%	276	7%	218	5%	145	4%	105	2%
Undetermined	95	3%	91	2%	84	2%	68	2%	115	2%

Note(s):

Apparent opioid toxicity death (AOTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is an opioid, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.

Table 3b. Summary of apparent stimulant toxicity deaths by manner of death, 2018 to 2020

Manner of death	2018	2019	2020
Total	100%	100%	100%
Accidental	97%	97%	98%
Suicide	3%	2%	1%
Undetermined	1%	1%	1%

Note(s):

Apparent stimulant toxicity death (ASTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is a stimulant, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.



Table 4a. Summary of total apparent opioid toxicity deaths in Canada, 2016 to 2020

		2016	2017	2018	2019	2020
Total	Number	2,825	3,916	4,389	3,830	6,214
	Crude rate	7.8	10.7	11.8	10.2	17.0
	Age-adjusted rate	7.8	10.8	11.9	10.3	17.2
Percent by sex	Male	70%	74%	72%	72%	76%
	Female	30%	26%	28%	28%	24%
Percent by age group	0 to 19	2%	2%	2%	2%	2%
	20 to 29	18%	20%	20%	19%	18%
	30 to 39	27%	27%	27%	27%	27%
	40 to 49	21%	21%	21%	20%	23%
	50 to 59	23%	21%	21%	22%	21%
	60 or more	9%	9%	9%	10%	9%
Percent involving fentanyl		52%	69%	68%	55%	80%
Percent involving fentanyl analogues		n/a	n/a	9%	20%	10%
Percent involving non fentanyl opioids		59%	39%	46%	40%	31%
Percent involving stimulants		n/a	n/a	50%	46%	51%
Percent involving other psychoactive substances		68%	60%	44%	42%	39%

Note(s):

Apparent opioid toxicity death (AOTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is an opioid, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.

Table 4b. Summary of total apparent stimulant toxicity deaths in Canada (based on available information from four to six provinces and territories), 2018 to 2020

		2018	2019	2020
Percent by sex	Male	75%	74%	77%
	Female	25%	26%	23%
Percent by age group	0 to 19	2%	1%	2%
	20 to 29	17%	18%	17%
	30 to 39	26%	28%	28%
	40 to 49	23%	21%	24%
	50 to 59	24%	22%	22%
	60 or more	8%	9%	8%
Percent involving cocaine		70%	67%	68%
Percent involving methamphetamine		43%	44%	47%
Percent involving other stimulants		9%	7%	7%
Percent involving opioids		73%	76%	83%
Percent involving other psychoactive substances		30%	22%	21%

Note(s):

Apparent stimulant toxicity death (ASTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is a stimulant, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.

Table 5a. Number of total apparent opioid toxicity deaths by quarter and province or territory, January 2016 to December 2020

Province or territory	2016				2017				2018				2019				2020			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
BC	175	157	153	320	351	361	313	262	401	374	415	379	304	249	229	231	273	488	480	497
AB	137	140	159	166	162	182	183	217	194	206	210	195	161	188	149	125	159	310	344	331
SK	25	17	24	17	25	20	22	18	34	28	34	30	25	34	23	35	26	72	69	63
MB	18	20	17	33	34	34	19	19	21	17	24	31	10	10	6	n/a	n/a	n/a	n/a	n/a
ON	214	218	195	240	238	311	414	302	309	325	396	447	450	465	239	363	459	617	626	723
QC	66	64	68	60	66	79	68	68	54	50	42	62	119	83	103	109	116	148	167	116
NB	12	4	10	8	10	8	8	12	8	4	9	9	6	7	15	7	5	10	11	12
NS	17	14	17	5	19	17	13	15	15	18	10	11	14	18	13	12	9	12	10	20
PE	n/a	n/a	n/a	n/a	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NL	Suppr.	Suppr.	8	5	11	6	9	7	Suppr.	Suppr.	Suppr.	Suppr.	8	6	Suppr.	Suppr.	Suppr.	9	6	Suppr.
YT	0	2	2	3	4	0	1	2	0	0	3	2	1	0	0	3	2	0	3	1
NT	2	0	1	2	0	0	1	0	1	0	1	0	1	0	0	0	0	0	0	3
NU	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	666	636	654	859	920	1,018	1,051	922	1,037	1,022	1,144	1,166	1,099	1,060	777	885	1,049	1,666	1,716	1,766

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Includes deaths related to all illicit drugs including, but not limited to, opioids and stimulants.

Q1 = January to March; Q2 = April to June; Q3 = July to September; Q4 = October to December

Note(s):

Apparent opioid toxicity death (AOTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is an opioid, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.



Table 5b. Number of total apparent stimulant toxicity deaths by quarter and province or territory, January 2018 to December 2020

Province or territory	2018				2019				2020			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
BC	273	227	222	104	40	48	144	149	91	118	88	76
SK	23	23	18	19	23	31	18	23	21	50	43	49
ON	182	211	246	274	275	293	172	264	300	465	435	471
QC	36	47	49	30	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
NS	4	8	7	6	9	8	7	5	7	10	7	12
NL	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	Suppr.	6	0	Suppr.
NT	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	1	0	0	0

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Q1 = January to March; Q2 = April to June; Q3 = July to September; Q4 = October to December

Note(s):

Apparent stimulant toxicity death (ASTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is a stimulant, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.

Table 6a. Number of accidental apparent opioid toxicity deaths by quarter and province or territory, January 2016 to December 2020

Province or territory	2016				2017				2018				2019				2020			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
BC	169	157	147	316	347	356	305	258	399	365	402	370	290	238	213	222	261	470	461	479
AB	118	130	144	155	152	161	171	199	193	206	207	193	160	184	148	124	152	308	343	329
SK	25	14	22	15	22	17	19	16	31	25	30	28	23	33	22	31	24	67	67	61
MB	11	14	13	23	26	27	18	16	15	14	22	27	8	10	6	n/a	n/a	n/a	n/a	n/a
ON	174	180	174	198	191	276	380	280	262	293	361	401	415	439	215	328	435	592	590	699
QC	50	44	43	36	45	52	47	43	35	39	27	46	119	83	103	109	116	148	167	116
NB	11	3	6	7	8	6	7	11	7	4	5	7	5	6	11	5	4	9	8	10
NS	14	8	15	3	17	16	12	13	14	16	8	11	10	14	10	11	5	12	10	16
PE	n/a	n/a	n/a	n/a	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NL	Suppr.	Suppr.	Suppr.	Suppr.	7	Suppr.	7	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	5	Suppr.	Suppr.	Suppr.	Suppr.	8	Suppr.	Suppr.
YT	0	2	0	3	3	0	1	2	0	0	2	2	1	0	0	3	2	0	3	1
NT	1	0	1	2	0	0	1	0	1	0	1	0	Suppr.	Suppr.	Suppr.	Suppr.	0	0	0	3
NU	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	573	552	565	758	818	911	968	838	957	962	1,065	1,085	1,036	1,007	728	833	999	1,614	1,649	1,714

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Includes deaths related to all illicit drugs including, but not limited to, opioids and stimulants.

Q1 = January to March; Q2 = April to June; Q3 = July to September; Q4 = October to December

Note(s):

Apparent opioid toxicity death (AOTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is an opioid, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.



Table 6b. Number of accidental apparent stimulant toxicity deaths by quarter and province or territory, January 2018 to December 2020

Province or territory	2018				2019				2020			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
BC	272	226	215	102	35	47	141	146	89	118	87	76
SK	23	19	15	19	22	30	18	23	19	49	43	49
ON	179	205	236	262	266	283	166	255	293	455	424	466
QC	31	43	43	27	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
NS	4	7	6	6	9	8	6	4	5	10	7	11
NL	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	Suppr.	6	0	Suppr.
NT	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	1	0	0	0

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Q1 = January to March; Q2 = April to June; Q3 = July to September; Q4 = October to December

Note(s):

Apparent stimulant toxicity death (ASTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is a stimulant, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.

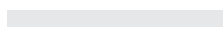


Table 7a. Sex distribution of accidental apparent opioid toxicity deaths by province or territory, 2016 to 2020

Province or territory	2016		2017		2018		2019		2020	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
BC	80%	20%	83%	17%	80%	20%	74%	26%	84%	16%
AB	73%	27%	76%	24%	74%	26%	74%	26%	77%	23%
SK	59%	41%	57%	43%	59%	41%	64%	36%	68%	32%
MB	61%	39%	67%	33%	55%	45%	67%	33%	n/a	n/a
ON	71%	29%	75%	25%	73%	27%	73%	27%	77%	23%
QC	69%	31%	68%	32%	63%	37%	76%	24%	75%	25%
NB	63%	37%	59%	41%	43%	57%	48%	52%	55%	45%
NS	78%	23%	71%	29%	67%	33%	71%	29%	70%	30%
PE	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NL	62%	38%	70%	30%	50%	50%	Suppr.	Suppr.	72%	28%
YT	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NT	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NU	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	74%	26%	77%	23%	74%	26%	73%	27%	77%	23%

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

 Includes deaths related to all illicit drugs including, but not limited to, opioids and stimulants.

Note(s):

Apparent opioid toxicity death (AOTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is an opioid, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

2019 data from Manitoba are based on January to September.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.



Table 7b. Sex distribution of accidental apparent stimulant toxicity deaths by province or territory, 2018 to 2020

Province or territory	2018		2019		2020	
	Male	Female	Male	Female	Male	Female
BC	79%	21%	73%	27%	83%	17%
SK	58%	42%	65%	35%	69%	31%
ON	74%	26%	74%	26%	77%	23%
QC	78%	22%	n/a	n/a	n/a	n/a
NS	74%	26%	85%	15%	82%	18%
NL	n/a	n/a	n/a	n/a	Suppr.	Suppr.
NT	n/a	n/a	n/a	n/a	Suppr.	Suppr.
Canada	76%	24%	74%	26%	77%	23%

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Note(s):

Apparent stimulant toxicity death (ASTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is a stimulant, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.

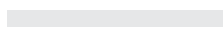


Table 8a. Crude rate (per 100,000 population) of accidental apparent opioid toxicity deaths by sex and province or territory, 2016 to 2020

Province or territory	2016		2017		2018		2019		2020	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
BC	26.4	6.3	42.9	8.8	33.5	8.0	13.1	4.4	14.9	2.7
AB	18.9	7.1	24.3	7.8	27.2	9.8	20.6	7.5	39.1	11.9
SK	7.9	5.5	7.2	5.6	11.4	8.1	11.8	6.7	24.9	12.1
MB	5.6	3.6	8.7	4.3	6.4	5.2	2.3	1.2	n/a	n/a
ON	7.5	3.0	12.1	4.0	13.6	5.0	14.1	5.2	24.3	7.3
QC	2.9	1.3	3.1	1.4	2.2	1.3	7.4	2.3	9.6	3.2
NB	4.5	2.6	5.0	3.4	2.6	3.3	3.4	3.6	4.4	3.5
NS	6.7	1.9	8.8	3.5	7.0	3.3	6.7	2.6	6.3	2.6
PE	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NL	3.0	1.9	6.1	2.6	1.9	1.9	Suppr.	Suppr.	5.1	1.9
YT	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NT	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NU	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	10.1	3.6	15.0	4.5	14.3	5.1	12.1	4.4	20.1	6.1

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

 Includes deaths related to all illicit drugs including, but not limited to, opioids and stimulants.

Note(s):

Apparent opioid toxicity death (AOTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is an opioid, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

2019 data from Manitoba are based on January to September.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.

Table 8b. Crude rate (per 100,000 population) of accidental apparent stimulant toxicity deaths by sex and province or territory, 2018 to 2020

Province or territory	2018		2019		2020	
	Male	Female	Male	Female	Male	Female
BC	26.1	6.7	10.8	3.9	12.1	2.5
SK	7.5	5.5	10.1	5.7	18.6	8.4
ON	9.2	3.2	10.0	3.4	17.2	5.1
QC	2.7	0.7	n/a	n/a	n/a	n/a
NS	3.6	1.2	4.8	0.8	5.6	1.2
NL	n/a	n/a	n/a	n/a	Suppr.	Suppr.
NT	n/a	n/a	n/a	n/a	Suppr.	Suppr.

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Note(s):

Apparent stimulant toxicity death (ASTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is a stimulant, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.



Table 9a. Age group distribution of accidental apparent opioid toxicity deaths by province or territory, 2016 to 2020

2016

Province or territory	Age group					
	0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
BC	3%	21%	28%	23%	21%	5%
AB	2%	21%	37%	18%	17%	5%
SK	0%	12%	45%	13%	21%	9%
MB	5%	30%	26%	16%	15%	8%
ON	2%	19%	24%	22%	25%	8%
QC	2%	13%	19%	25%	28%	12%
NB	0%	11%	22%	30%	26%	11%
NS	3%	20%	30%	13%	23%	13%
PE	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NL	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
YT	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NT	0%	50%	0%	0%	25%	25%
NU	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	2%	20%	28%	21%	22%	7%

2017

Province or territory	Age group					
	0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
BC	2%	19%	28%	23%	21%	7%
AB	3%	24%	32%	19%	17%	5%
SK	4%	28%	23%	20%	16%	8%
MB	0%	31%	32%	22%	7%	8%
ON	2%	21%	27%	22%	20%	8%
QC	2%	15%	25%	18%	27%	13%
NB	3%	22%	28%	19%	19%	9%
NS	5%	10%	26%	24%	29%	5%
PE	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NL	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
YT	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NT	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NU	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	2%	21%	28%	21%	20%	7%



2018

Province or territory	Age group					
	0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
BC	2%	19%	27%	22%	22%	8%
AB	2%	25%	30%	20%	18%	7%
SK	0%	24%	25%	20%	20%	11%
MB	0%	26%	28%	20%	20%	7%
ON	2%	20%	29%	22%	20%	7%
QC	1%	14%	28%	22%	23%	12%
NB	0%	9%	22%	22%	35%	13%
NS	2%	22%	24%	20%	18%	12%
PE	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NL	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
YT	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NT	50%	50%	0%	0%	0%	0%
NU	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	2%	21%	28%	21%	20%	8%

2019

Province or territory	Age group					
	0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
BC	3%	20%	29%	20%	20%	9%
AB	2%	23%	31%	21%	18%	6%
SK	1%	19%	23%	24%	28%	6%
MB	0%	21%	29%	17%	21%	13%
ON	2%	20%	29%	19%	22%	8%
QC	2%	14%	17%	23%	26%	17%
NB	0%	7%	30%	19%	22%	22%
NS	2%	16%	22%	27%	18%	16%
PE	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NL	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
YT	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NT	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NU	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	2%	20%	27%	20%	22%	9%

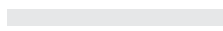


2020

Province or territory	Age group					
	0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
BC	1%	18%	25%	25%	22%	9%
AB	2%	20%	29%	23%	19%	7%
SK	3%	18%	28%	22%	19%	9%
MB	n/a	n/a	n/a	n/a	n/a	n/a
ON	1%	19%	29%	23%	20%	8%
QC	2%	13%	20%	22%	25%	17%
NB	0%	16%	19%	26%	26%	13%
NS	0%	23%	21%	35%	14%	7%
PE	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NL	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
YT	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NT	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NU	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	2%	18%	27%	23%	21%	9%

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

 Includes deaths related to all illicit drugs including, but not limited to, opioids and stimulants.

Note(s):

Apparent opioid toxicity death (AOTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is an opioid, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

2019 data from Manitoba are based on January to September.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.

Table 9b. Age group distribution of accidental apparent stimulant toxicity deaths by province or territory, 2018 to 2020

2018

Province or territory	Age group					
	0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
BC	1%	17%	26%	23%	25%	9%
SK	1%	20%	33%	28%	13%	5%
ON	1%	17%	29%	24%	22%	7%
QC	2%	17%	15%	22%	30%	15%
NS	4%	35%	22%	13%	22%	4%
NL	n/a	n/a	n/a	n/a	n/a	n/a
NT	n/a	n/a	n/a	n/a	n/a	n/a
Canada	1%	17%	26%	23%	24%	8%

2019

Province or territory	Age group					
	0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
BC	2%	18%	26%	22%	22%	10%
SK	1%	22%	37%	19%	16%	5%
ON	1%	18%	28%	21%	23%	8%
QC	n/a	n/a	n/a	n/a	n/a	n/a
NS	4%	15%	26%	19%	19%	19%
NL	n/a	n/a	n/a	n/a	n/a	n/a
NT	n/a	n/a	n/a	n/a	n/a	n/a
Canada	1%	18%	28%	21%	22%	9%



2020

Province or territory	Age group					
	0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
BC	1%	16%	25%	26%	23%	9%
SK	3%	18%	34%	21%	18%	6%
ON	1%	17%	29%	24%	22%	7%
QC	n/a	n/a	n/a	n/a	n/a	n/a
NS	6%	21%	18%	21%	21%	12%
NL	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NT	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	1%	17%	28%	24%	22%	8%

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Note(s):

Apparent stimulant toxicity death (ASTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is a stimulant, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.

Table 10a. Percentage of accidental apparent opioid toxicity deaths by specific type of opioids involved in the death, by province or territory, 2016 to 2020

Province or territory	2016			2017			2018			2019			2020		
	Fent.	Analog.	Non-fent.	Fent.	Analog.	Non-fent.	Fent.	Analog.	Non-fent.	Fent.	Analog.	Non-fent.	Fent.	Analog.	Non-fent.
BC	80%	3%	55%	91%	11%	29%	93%	5%	38%	88%	11%	34%	91%	35%	22%
AB	63%	n/a	37%	81%	n/a	19%	71%	20%	28%	77%	10%	30%	88%	9%	19%
SK	11%	n/a	89%	20%	n/a	80%	41%	4%	68%	37%	11%	71%	61%	54%	52%
MB	46%	n/a	54%	51%	n/a	49%	38%	n/a	62%	58%	n/a	42%	n/a	n/a	n/a
ON	45%	n/a	55%	69%	n/a	31%	70%	9%	44%	57%	35%	36%	88%	2%	24%
QC	23%	n/a	88%	27%	n/a	93%	18%	4%	95%	10%	1%	37%	30%	3%	84%
NB	15%	n/a	93%	22%	n/a	91%	4%	n/a	100%	19%	n/a	89%	10%	n/a	90%
NS	18%	n/a	83%	10%	n/a	90%	16%	8%	96%	9%	2%	96%	23%	7%	86%
PE	20%	n/a	80%	0%	n/a	100%	13%	n/a	88%	0%	n/a	100%	50%	0%	50%
NL	Suppr.	n/a	92%	26%	n/a	74%	0%	n/a	100%	Suppr.	n/a	85%	Suppr.	Suppr.	78%
YT	80%	n/a	20%	83%	n/a	17%	100%	n/a	0%	75%	n/a	25%	67%	0%	17%
NT	25%	n/a	75%	0%	n/a	100%	0%	n/a	100%	Suppr.	Suppr.	Suppr.	100%	Suppr.	Suppr.
NU	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	57%	n/a	55%	73%	n/a	35%	72%	10%	43%	57%	21%	38%	82%	10%	29%

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Includes deaths related to all illicit drugs including, but not limited to, opioids and stimulants.

Fent. = Fentanyl; Analog. = Fentanyl analogues; Non-fent. = Non-fentanyl opioids

Note(s):

Apparent opioid toxicity death (AOTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is an opioid, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

2019 data from Manitoba are based on January to September.

Until investigations are completed, some provinces and territories report fentanyl information only or report data on fentanyl and fentanyl analogues together. Therefore, some deaths involving fentanyl analogues may be included in the fentanyl percentages.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.



Table 10b. Percentage of accidental apparent stimulant toxicity deaths by specific type of stimulants involved in the death, by province or territory, 2018 to 2020

Province or territory	2018			2019			2020		
	Cocaine	Meth	Other stimulants	Cocaine	Meth	Other stimulants	Cocaine	Meth	Other stimulants
BC	68%	50%	3%	63%	51%	4%	63%	57%	5%
SK	51%	54%	14%	25%	77%	9%	33%	71%	5%
ON	75%	36%	8%	73%	39%	7%	73%	44%	6%
QC	62%	n/a	38%	n/a	n/a	n/a	n/a	n/a	n/a
NS	91%	13%	9%	67%	33%	15%	82%	0%	24%
NL	n/a	n/a	n/a	n/a	n/a	n/a	Suppr.	Suppr.	60%
NT	n/a	n/a	n/a	n/a	n/a	n/a	Suppr.	Suppr.	Suppr.
Canada	70%	43%	8%	67%	44%	6%	68%	47%	6%

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Meth Methamphetamine

Note(s):

Apparent stimulant toxicity death (ASTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is a stimulant, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.



Table 11a. Percentage of accidental apparent opioid toxicity deaths where stimulants were also involved in the death, by province or territory, 2018 to 2020

Province or territory	Year		
	2018	2019	2020
BC	72%	74%	73%
AB	57%	60%	58%
SK	44%	50%	62%
ON	48%	52%	59%
QC	n/a	n/a	n/a
NS	31%	38%	37%
NL	n/a	n/a	44%
NT	n/a	n/a	0%
Canada	53%	48%	52%

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Note(s):

Apparent opioid toxicity death (AOTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is an opioid, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.

Table 11b. Percentage of accidental apparent stimulant toxicity deaths where opioids were also involved in the death, by province or territory, 2018 to 2020

Province or territory	Year		
	2018	2019	2020
BC	91%	89%	89%
SK	66%	58%	84%
ON	71%	75%	83%
QC	n/a	n/a	n/a
NS	65%	63%	48%
NL	n/a	n/a	80%
NT	n/a	n/a	0%
Canada	74%	77%	84%

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Note(s):

Apparent stimulant toxicity death (ASTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is a stimulant, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.



Table 12a. Percentage of accidental apparent opioid toxicity death involving other psychoactive substances by province or territory, 2016 to 2020

Province or territory	Year				
	2016	2017	2018	2019	2020
BC	31%	33%	35%	42%	44%
AB	65%	72%	73%	77%	82%
SK	95%	91%	43%	52%	48%
MB	95%	99%	51%	79%	n/a
ON	93%	66%	23%	20%	17%
QC	80%	82%	89%	41%	43%
NB	85%	94%	91%	96%	87%
NS	90%	83%	84%	84%	81%
PE	100%	100%	88%	100%	88%
NL	100%	91%	100%	100%	44%
YT	100%	100%	100%	75%	0%
NT	75%	100%	100%	Suppr.	33%
NU	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	66%	59%	43%	41%	39%

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Note(s):

Apparent opioid toxicity death (AOTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is an opioid, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.

Table 12b. Percentage of accidental apparent stimulant toxicity death involving other psychoactive substances by province or territory, 2018 to 2020

Province or territory	Year		
	2018	2019	2020
BC	32%	38%	39%
SK	42%	39%	39%
ON	15%	13%	13%
QC	86%	n/a	n/a
NS	65%	59%	58%
NL	n/a	n/a	Suppr.
NT	n/a	n/a	0%
Canada	29%	22%	20%

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Note(s):

Apparent stimulant toxicity death (ASTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is a stimulant, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.



Table 13. Percentage of accidental opioid toxicity deaths by origin of opioid(s) involved in the death, by province or territory, 2018 to 2020

2018

Province or territory	Origin			
	Pharmaceutical only	Non-pharmaceutical only*	Both	Undetermined
BC	0%	62%	0%	38%
AB	16%	78%	1%	5%
SK	58%	35%	4%	3%
MB	n/a	n/a	n/a	n/a
ON	23%	65%	9%	3%
QC	n/a	n/a	n/a	n/a
NB	96%	0%	4%	0%
NS	85%	6%	8%	0%
PE	n/a	n/a	n/a	n/a
NL	100%	0%	0%	0%
YT	n/a	n/a	n/a	n/a
NT	n/a	n/a	n/a	n/a
NU	Suppr.	Suppr.	Suppr.	Suppr.
Canada	25%	66%	6%	3%

2019

Province or territory	Origin			
	Pharmaceutical only	Non-pharmaceutical only*	Both	Undetermined
BC	0%	66%	0%	34%
AB	16%	77%	0%	7%
SK	59%	31%	5%	5%
MB	50%	50%	0%	0%
ON	18%	68%	11%	2%
QC	n/a	n/a	n/a	n/a
NB	81%	11%	4%	4%
NS	93%	5%	2%	0%
PE	n/a	n/a	n/a	n/a
NL	77%	23%	0%	0%
YT	n/a	n/a	n/a	n/a
NT	n/a	n/a	n/a	n/a
NU	Suppr.	Suppr.	Suppr.	Suppr.
Canada	22%	67%	7%	3%



2020

Province or territory	Origin			
	Pharmaceutical only	Non-pharmaceutical only*	Both	Undetermined
BC	0%	78%	0%	22%
AB	9%	84%	1%	6%
SK	29%	54%	9%	8%
MB	n/a	n/a	n/a	n/a
ON	10%	78%	10%	2%
QC	n/a	n/a	n/a	n/a
NB	79%	11%	0%	11%
NS	79%	13%	8%	0%
PE	n/a	n/a	n/a	n/a
NL	Suppr.	Suppr.	Suppr.	Suppr.
YT	n/a	n/a	n/a	n/a
NT	n/a	n/a	n/a	n/a
NU	Suppr.	Suppr.	Suppr.	Suppr.
Canada	12%	77%	7%	3%

* Includes deaths with suspected non-pharmaceutical fentanyl alone or with any other non-pharmaceutical opioid(s)

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Note(s):

Apparent opioid toxicity death (AOTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is an opioid, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

2019 data from Manitoba are based on January to September.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.

Only applies to deaths with completed investigations.



Table 14a. Number of accidental apparent opioid toxicity deaths by sex and age group, by province or territory, 2018 to 2020

2018

Province or territory	Sex	Age group					
		0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
BC	Female	4	39	59	41	42	17
	Male	18	156	224	182	189	61
AB	Female	9	51	55	46	36	12
	Male	6	146	181	112	105	40
SK	Female	0	11	12	8	13	3
	Male	0	16	16	15	10	10
MB	Female	n/a	n/a	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a	n/a	n/a
ON	Female	7	77	104	74	66	31
	Male	14	185	277	216	200	66
QC	Female	0	5	9	13	16	11
	Male	1	15	32	20	18	7
NB	Female	0	2	3	1	5	2
	Male	0	0	2	4	3	1
NS	Female	Suppr.	3	5	4	1	2
	Male	Suppr.	8	7	6	8	4
PE	Female	n/a	n/a	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a	n/a	n/a
NL	Female	n/a	n/a	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a	n/a	n/a
YT	Female	n/a	n/a	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a	n/a	n/a
NT	Female	n/a	n/a	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a	n/a	n/a
NU	Female	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Male	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	Female	20	188	247	187	179	78
	Male	39	526	739	555	533	189



Province or territory	Sex	Age group					
		0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
BC	Female	8	21	32	21	26	5
	Male	4	66	96	67	64	33
AB	Female	7	40	44	28	33	10
	Male	6	99	145	100	79	25
SK	Female	0	8	7	12	11	1
	Male	1	13	18	14	19	5
MB	Female	n/a	n/a	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a	n/a	n/a
ON	Female	6	76	112	68	100	21
	Male	15	210	295	203	207	84
QC	Female	Suppr.	11	20	23	32	Suppr.
	Male	Suppr.	46	52	72	77	Suppr.
NB	Female	0	1	4	1	5	3
	Male	0	1	4	4	1	3
NS	Female	Suppr.	0	4	3	3	3
	Male	Suppr.	7	6	9	5	4
PE	Female	n/a	n/a	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a	n/a	n/a
NL	Female	n/a	n/a	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a	n/a	n/a
YT	Female	n/a	n/a	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a	n/a	n/a
NT	Female	n/a	n/a	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a	n/a	n/a
NU	Female	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Male	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	Female	21	157	223	156	210	43
	Male	26	442	616	469	452	154

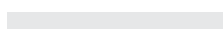


2020

Province or territory	Sex	Age group					
		0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
BC	Female	2	14	19	19	11	6
	Male	3	67	91	93	87	36
AB	Female	7	59	69	69	47	10
	Male	16	169	259	194	169	64
SK	Female	4	14	16	15	15	7
	Male	3	26	46	33	27	13
MB	Female	n/a	n/a	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a	n/a	n/a
ON	Female	10	102	165	128	97	42
	Male	23	329	511	402	371	136
QC	Female	Suppr.	20	32	29	30	Suppr.
	Male	Suppr.	52	79	93	107	Suppr.
NB	Female	0	3	4	3	2	2
	Male	0	2	2	5	6	2
NS	Female	Suppr.	2	3	5	1	2
	Male	Suppr.	8	6	10	5	1
PE	Female	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Male	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NL	Female	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Male	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
YT	Female	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Male	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NT	Female	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Male	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NU	Female	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Male	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	Female	23	214	308	268	203	69
	Male	45	653	994	830	772	252

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

 Includes deaths related to all illicit drugs including, but not limited to, opioids and stimulants.

Note(s):

Apparent opioid toxicity death (AOTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is an opioid, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

2019 data from Manitoba are based on January to September.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.

Table 14b. Number of accidental apparent stimulant toxicity deaths by sex and age group, by province or territory, 2018 to 2020

2018

Province or territory	Sex	Age group					
		0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
BC	Female	2	28	53	36	39	11
	Male	10	107	155	150	163	61
SK	Female	1	5	11	9	6	0
	Male	0	10	14	12	4	4
ON	Female	4	53	71	49	45	10
	Male	8	98	183	161	152	48
QC	Female	0	9	5	10	6	1
	Male	3	16	16	21	37	20
NS	Female	Suppr.	2	2	1	0	0
	Male	Suppr.	6	3	2	5	1
NL	Female	n/a	n/a	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a	n/a	n/a
NT	Female	n/a	n/a	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a	n/a	n/a

2019

Province or territory	Sex	Age group					
		0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
BC	Female	5	19	24	21	23	7
	Male	1	48	72	60	60	29
SK	Female	0	10	13	5	4	1
	Male	1	10	21	13	11	4
ON	Female	3	47	78	54	59	7
	Male	10	124	197	154	162	75
QC	Female	n/a	n/a	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a	n/a	n/a
NS	Female	Suppr.	0	3	1	0	0
	Male	Suppr.	4	4	4	5	5
NL	Female	n/a	n/a	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a	n/a	n/a
NT	Female	n/a	n/a	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a	n/a	n/a



2020

Province or territory	Sex	Age group					
		0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
BC	Female	2	13	18	14	11	6
	Male	3	47	74	81	74	27
SK	Female	2	14	13	10	9	1
	Male	2	15	42	24	20	8
ON	Female	7	63	130	93	70	21
	Male	15	208	342	296	294	99
QC	Female	n/a	n/a	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a	n/a	n/a
NS	Female	Suppr.	2	1	1	0	1
	Male	Suppr.	5	5	6	7	3
NL	Female	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Male	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NT	Female	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Male	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Note(s):

Apparent stimulant toxicity death (ASTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is a stimulant, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.

Table 15a. Percentage of accidental apparent opioid toxicity deaths by type of opioids and sex, by province or territory, 2018 to 2020

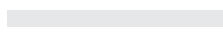
Province or territory	Type of opioids	2018		2019		2020	
		Male	Female	Male	Female	Male	Female
BC	Fentanyl	80%	20%	75%	25%	85%	15%
	Fentanyl analogues	89%	11%	82%	18%	84%	16%
	Non-fentanyl opioids	75%	25%	68%	32%	80%	20%
AB	Fentanyl	78%	22%	77%	23%	79%	21%
	Fentanyl analogues	78%	22%	75%	25%	81%	19%
	Non-fentanyl opioids	61%	39%	66%	34%	66%	34%
SK	Fentanyl	68%	32%	70%	30%	75%	25%
	Fentanyl analogues	Suppr.	Suppr.	67%	33%	78%	22%
	Non-fentanyl opioids	54%	46%	62%	38%	60%	40%
MB	Fentanyl	n/a	n/a	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a	n/a	n/a
ON	Fentanyl	75%	25%	75%	25%	79%	21%
	Fentanyl analogues	76%	24%	77%	23%	82%	18%
	Non-fentanyl opioids	70%	30%	63%	37%	68%	32%
QC	Fentanyl	80%	20%	70%	30%	70%	30%
	Fentanyl analogues	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Non-fentanyl opioids	61%	39%	72%	28%	66%	34%
NB	Fentanyl	Suppr.	Suppr.	80%	20%	67%	33%
	Fentanyl analogues	n/a	n/a	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	43%	57%	46%	54%	52%	48%
NS	Fentanyl	75%	25%	75%	25%	80%	20%
	Fentanyl analogues	75%	25%	Suppr.	Suppr.	Suppr.	Suppr.
	Non-fentanyl opioids	68%	32%	70%	30%	68%	32%
PE	Fentanyl	n/a	n/a	n/a	n/a	Suppr.	Suppr.
	Fentanyl analogues	n/a	n/a	n/a	n/a	Suppr.	Suppr.
	Non-fentanyl opioids	n/a	n/a	n/a	n/a	Suppr.	Suppr.



Province or territory	Type of opioids	2018		2019		2020	
		Male	Female	Male	Female	Male	Female
NL	Fentanyl	n/a	n/a	n/a	n/a	Suppr.	Suppr.
	Fentanyl analogues	n/a	n/a	n/a	n/a	Suppr.	Suppr.
	Non-fentanyl opioids	n/a	n/a	n/a	n/a	Suppr.	Suppr.
YT	Fentanyl	n/a	n/a	n/a	n/a	Suppr.	Suppr.
	Fentanyl analogues	n/a	n/a	n/a	n/a	Suppr.	Suppr.
	Non-fentanyl opioids	n/a	n/a	n/a	n/a	Suppr.	Suppr.
NT	Fentanyl	n/a	n/a	n/a	n/a	Suppr.	Suppr.
	Fentanyl analogues	n/a	n/a	n/a	n/a	Suppr.	Suppr.
	Non-fentanyl opioids	n/a	n/a	n/a	n/a	Suppr.	Suppr.
NU	Fentanyl	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Fentanyl analogues	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Non-fentanyl opioids	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	Fentanyl	77%	23%	75%	25%	79%	21%
	Fentanyl analogues	79%	21%	77%	23%	82%	18%
	Non-fentanyl opioids	68%	32%	65%	35%	67%	33%

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

 Includes deaths related to all illicit drugs including, but not limited to, opioids and stimulants.

Note(s):

Apparent opioid toxicity death (AOTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is an opioid, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

2019 data from Manitoba are based on January to September.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.



Table 15b. Percentage of accidental apparent stimulant toxicity deaths by type of stimulants and sex, by province or territory, 2018 to 2020

Province or territory	Type of stimulants	2018		2019		2020	
		Male	Female	Male	Female	Male	Female
BC	Cocaine	78%	22%	74%	26%	84%	16%
	Methamphetamine	78%	22%	73%	27%	82%	18%
	Other stimulants	88%	12%	69%	31%	70%	30%
SK	Cocaine	67%	33%	83%	17%	68%	32%
	Methamphetamine	51%	49%	58%	42%	70%	30%
	Other stimulants	45%	55%	63%	38%	63%	38%
ON	Cocaine	73%	27%	75%	25%	76%	24%
	Methamphetamine	73%	27%	72%	28%	76%	24%
	Other stimulants	79%	21%	64%	36%	70%	30%
QC	Cocaine	81%	19%	n/a	n/a	n/a	n/a
	Methamphetamine	n/a	n/a	n/a	n/a	n/a	n/a
	Other stimulants	75%	25%	n/a	n/a	n/a	n/a
NS	Cocaine	71%	29%	89%	11%	81%	19%
	Methamphetamine	67%	33%	89%	11%	0%	0%
	Other stimulants	Suppr.	Suppr.	75%	25%	75%	25%
NL	Cocaine	n/a	n/a	n/a	n/a	Suppr.	Suppr.
	Methamphetamine	n/a	n/a	n/a	n/a	Suppr.	Suppr.
	Other stimulants	n/a	n/a	n/a	n/a	Suppr.	Suppr.
NT	Cocaine	n/a	n/a	n/a	n/a	Suppr.	Suppr.
	Methamphetamine	n/a	n/a	n/a	n/a	Suppr.	Suppr.
	Other stimulants	n/a	n/a	n/a	n/a	Suppr.	Suppr.
Canada	Cocaine	75%	25%	75%	25%	77%	23%
	Methamphetamine	74%	26%	71%	29%	76%	24%
	Other stimulants	77%	23%	65%	35%	70%	30%

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Note(s):

Apparent stimulant toxicity death (ASTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is a stimulant, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.



Table 16a. Percentage of accidental apparent opioid toxicity deaths by type of opioids and age group, by province or territory, 2018 to 2020

2018

Province or territory	Type of opioids	Age group					
		0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
BC	Fentanyl	2%	19%	28%	22%	22%	7%
	Fentanyl analogues	9%	23%	30%	13%	19%	6%
	Non-fentanyl opioids	2%	16%	25%	20%	27%	10%
AB	Fentanyl	2%	27%	34%	19%	14%	4%
	Fentanyl analogues	3%	27%	32%	19%	15%	4%
	Non-fentanyl opioids	1%	15%	22%	21%	29%	12%
SK	Fentanyl	0%	30%	36%	19%	13%	2%
	Fentanyl analogues	0%	40%	60%	0%	0%	0%
	Non-fentanyl opioids	0%	19%	18%	21%	26%	17%
MB	Fentanyl	n/a	n/a	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a	n/a	n/a
ON	Fentanyl	1%	22%	33%	22%	18%	4%
	Fentanyl analogues	2%	27%	35%	22%	14%	1%
	Non-fentanyl opioids	2%	16%	25%	23%	23%	12%
QC	Fentanyl	0%	12%	36%	20%	20%	12%
	Fentanyl analogues	0%	33%	33%	0%	33%	0%
	Non-fentanyl opioids	0%	14%	27%	22%	24%	13%
NB	Fentanyl	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Fentanyl analogues	n/a	n/a	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	0%	9%	22%	22%	35%	13%
NS	Fentanyl	13%	25%	25%	25%	13%	0%
	Fentanyl analogues	0%	75%	0%	25%	0%	0%
	Non-fentanyl opioids	0%	21%	26%	21%	19%	13%
PE	Fentanyl	n/a	n/a	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a	n/a	n/a



Province or territory	Type of opioids	Age group					
		0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
NL	Fentanyl	n/a	n/a	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a	n/a	n/a
YT	Fentanyl	n/a	n/a	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a	n/a	n/a
NT	Fentanyl	n/a	n/a	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a	n/a	n/a
NU	Fentanyl	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Fentanyl analogues	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Non-fentanyl opioids	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	Fentanyl	2%	22%	31%	21%	19%	5%
	Fentanyl analogues	4%	27%	33%	19%	15%	3%
	Non-fentanyl opioids	1%	16%	24%	22%	25%	12%



Province or territory	Type of opioids	Age group					
		0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
BC	Fentanyl	2%	20%	31%	19%	20%	8%
	Fentanyl analogues	4%	20%	24%	22%	20%	8%
	Non-fentanyl opioids	2%	15%	21%	23%	26%	13%
AB	Fentanyl	2%	25%	34%	20%	15%	3%
	Fentanyl analogues	6%	22%	24%	24%	17%	6%
	Non-fentanyl opioids	2%	14%	24%	23%	26%	10%
SK	Fentanyl	3%	25%	43%	15%	13%	3%
	Fentanyl analogues	0%	33%	42%	8%	17%	0%
	Non-fentanyl opioids	0%	17%	13%	27%	35%	8%
MB	Fentanyl	n/a	n/a	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a	n/a	n/a
ON	Fentanyl	1%	25%	32%	20%	17%	5%
	Fentanyl analogues	1%	21%	31%	20%	21%	7%
	Non-fentanyl opioids	2%	15%	23%	19%	30%	12%
QC	Fentanyl	Suppr.	26%	14%	30%	16%	Suppr.
	Fentanyl analogues	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Non-fentanyl opioids	Suppr.	13%	19%	28%	23%	Suppr.
NB	Fentanyl	0%	0%	60%	40%	0%	0%
	Fentanyl analogues	n/a	n/a	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	0%	8%	25%	17%	25%	25%
NS	Fentanyl	0%	50%	0%	25%	25%	0%
	Fentanyl analogues	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Non-fentanyl opioids	2%	14%	23%	26%	19%	16%
PE	Fentanyl	n/a	n/a	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a	n/a	n/a



Province or territory	Type of opioids	Age group					
		0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
NL	Fentanyl	n/a	n/a	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a	n/a	n/a
YT	Fentanyl	n/a	n/a	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a	n/a	n/a
NT	Fentanyl	n/a	n/a	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a	n/a	n/a
NU	Fentanyl	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Fentanyl analogues	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Non-fentanyl opioids	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	Fentanyl	2%	24%	32%	20%	17%	5%
	Fentanyl analogues	2%	21%	30%	20%	20%	7%
	Non-fentanyl opioids	1%	15%	22%	22%	28%	12%



2020

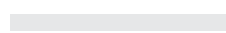
Province or territory	Type of opioids	Age group					
		0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
BC	Fentanyl	1%	18%	25%	25%	21%	9%
	Fentanyl analogues	2%	11%	29%	31%	18%	8%
	Non-fentanyl opioids	0%	15%	18%	21%	27%	18%
AB	Fentanyl	2%	19%	32%	23%	18%	6%
	Fentanyl analogues	1%	10%	33%	31%	21%	4%
	Non-fentanyl opioids	2%	16%	24%	21%	26%	11%
SK	Fentanyl	3%	23%	34%	23%	14%	2%
	Fentanyl analogues	3%	20%	38%	22%	14%	3%
	Non-fentanyl opioids	3%	14%	21%	20%	27%	15%
MB	Fentanyl	n/a	n/a	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a	n/a	n/a
ON	Fentanyl	1%	20%	30%	23%	20%	6%
	Fentanyl analogues	0%	16%	29%	18%	26%	11%
	Non-fentanyl opioids	1%	14%	24%	22%	25%	13%
QC	Fentanyl	Suppr.	16%	27%	29%	17%	Suppr.
	Fentanyl analogues	Suppr.	Suppr.	Suppr.	63%	Suppr.	Suppr.
	Non-fentanyl opioids	3%	16%	23%	19%	22%	18%
NB	Fentanyl	0%	33%	33%	33%	0%	0%
	Fentanyl analogues	n/a	n/a	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	0%	11%	19%	26%	30%	15%
NS	Fentanyl	0%	30%	40%	0%	10%	20%
	Fentanyl analogues	0%	33%	33%	0%	33%	0%
	Non-fentanyl opioids	0%	22%	16%	41%	16%	5%
PE	Fentanyl	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Fentanyl analogues	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Non-fentanyl opioids	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.



Province or territory	Type of opioids	Age group					
		0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
NL	Fentanyl	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Fentanyl analogues	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Non-fentanyl opioids	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
YT	Fentanyl	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Fentanyl analogues	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Non-fentanyl opioids	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NT	Fentanyl	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Fentanyl analogues	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Non-fentanyl opioids	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NU	Fentanyl	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Fentanyl analogues	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Non-fentanyl opioids	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	Fentanyl	2%	19%	30%	23%	19%	6%
	Fentanyl analogues	2%	14%	32%	28%	18%	6%
	Non-fentanyl opioids	1%	15%	23%	22%	25%	14%

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

 Includes deaths related to all illicit drugs including, but not limited to, opioids and stimulants.

Note(s):

Apparent opioid toxicity death (AOTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is an opioid, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.



Table 16b. Percentage of accidental apparent stimulant toxicity deaths by type of stimulants and age group, by province or territory, 2018 to 2020

2018

Province or territory	Type of opioids	Age group					
		0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
BC	Cocaine	0%	15%	25%	23%	26%	9%
	Methamphetamine	1%	17%	28%	24%	21%	8%
	Other stimulants	15%	38%	31%	0%	12%	4%
SK	Cocaine	3%	26%	23%	26%	13%	10%
	Methamphetamine	0%	20%	39%	27%	12%	2%
	Other stimulants	0%	18%	9%	45%	27%	0%
ON	Cocaine	2%	16%	28%	24%	24%	7%
	Methamphetamine	1%	19%	33%	25%	18%	4%
	Other stimulants	6%	21%	29%	17%	19%	9%
QC	Cocaine	1%	18%	15%	18%	34%	15%
	Methamphetamine	n/a	n/a	n/a	n/a	n/a	n/a
	Other stimulants	4%	16%	15%	27%	24%	15%
NS	Cocaine	4%	33%	19%	14%	24%	5%
	Methamphetamine	5%	33%	19%	14%	24%	5%
	Other stimulants	0%	50%	50%	0%	0%	0%
NL	Cocaine	n/a	n/a	n/a	n/a	n/a	n/a
	Methamphetamine	n/a	n/a	n/a	n/a	n/a	n/a
	Other stimulants	n/a	n/a	n/a	n/a	n/a	n/a
NT	Cocaine	n/a	n/a	n/a	n/a	n/a	n/a
	Methamphetamine	n/a	n/a	n/a	n/a	n/a	n/a
	Other stimulants	n/a	n/a	n/a	n/a	n/a	n/a
Canada	Cocaine	1%	17%	26%	23%	25%	8%
	Methamphetamine	1%	18%	31%	24%	19%	6%
	Other stimulants	6%	22%	23%	20%	20%	9%



Province or territory	Type of opioids	Age group					
		0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
BC	Cocaine	1%	19%	24%	20%	25%	12%
	Methamphetamine	2%	18%	28%	23%	23%	7%
	Other stimulants	0%	54%	15%	23%	8%	0%
SK	Cocaine	0%	13%	48%	22%	13%	4%
	Methamphetamine	1%	24%	36%	18%	15%	6%
	Other stimulants	0%	13%	50%	13%	25%	0%
ON	Cocaine	1%	16%	28%	21%	23%	9%
	Methamphetamine	1%	20%	30%	22%	22%	5%
	Other stimulants	5%	28%	19%	22%	19%	8%
QC	Cocaine	n/a	n/a	n/a	n/a	n/a	n/a
	Methamphetamine	n/a	n/a	n/a	n/a	n/a	n/a
	Other stimulants	n/a	n/a	n/a	n/a	n/a	n/a
NS	Cocaine	0%	17%	22%	22%	22%	17%
	Methamphetamine	0%	33%	22%	11%	11%	22%
	Other stimulants	25%	0%	25%	50%	0%	0%
NL	Cocaine	n/a	n/a	n/a	n/a	n/a	n/a
	Methamphetamine	n/a	n/a	n/a	n/a	n/a	n/a
	Other stimulants	n/a	n/a	n/a	n/a	n/a	n/a
NT	Cocaine	n/a	n/a	n/a	n/a	n/a	n/a
	Methamphetamine	n/a	n/a	n/a	n/a	n/a	n/a
	Other stimulants	n/a	n/a	n/a	n/a	n/a	n/a
Canada	Cocaine	1%	17%	28%	21%	23%	10%
	Methamphetamine	1%	20%	30%	22%	21%	6%
	Other stimulants	4%	29%	21%	22%	17%	6%



2020

Province or territory	Type of opioids	Age group					
		0 to 19	20 to 29	30 to 39	40 to 49	50 to 59	60 or more
BC	Cocaine	0%	17%	23%	26%	25%	9%
	Methamphetamine	1%	16%	27%	27%	21%	8%
	Other stimulants	10%	50%	15%	20%	5%	0%
SK	Cocaine	0%	19%	26%	23%	25%	8%
	Methamphetamine	4%	19%	39%	19%	15%	4%
	Other stimulants	0%	25%	13%	13%	38%	13%
ON	Cocaine	1%	16%	26%	24%	24%	9%
	Methamphetamine	2%	18%	32%	23%	21%	4%
	Other stimulants	9%	19%	29%	22%	18%	3%
QC	Cocaine	n/a	n/a	n/a	n/a	n/a	n/a
	Methamphetamine	n/a	n/a	n/a	n/a	n/a	n/a
	Other stimulants	n/a	n/a	n/a	n/a	n/a	n/a
NS	Cocaine	0%	22%	19%	22%	22%	15%
	Methamphetamine	0%	0%	0%	0%	0%	0%
	Other stimulants	25%	25%	13%	13%	25%	0%
NL	Cocaine	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Methamphetamine	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Other stimulants	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
NT	Cocaine	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Methamphetamine	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
	Other stimulants	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.	Suppr.
Canada	Cocaine	1%	16%	26%	25%	24%	9%
	Methamphetamine	2%	17%	32%	24%	20%	5%
	Other stimulants	9%	25%	25%	20%	18%	3%

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Note(s):

Apparent stimulant toxicity death (ASTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is a stimulant, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.



Table 17. Percentage of accidental opioid toxicity deaths by type of opioids and origin, by province or territory, 2018 to 2020

2018

Province or territory	Type of opioids	Origin			
		Pharmaceutical only	Non-pharmaceutical only	Both	Undetermined
BC	Fentanyl	0%	100%	0%	0%
	Fentanyl analogues	0%	100%	0%	0%
	Non-fentanyl opioids	0%	0%	0%	100%
AB	Fentanyl	0%	100%	0%	0%
	Fentanyl analogues	0%	100%	0%	0%
	Non-fentanyl opioids	56%	22%	4%	18%
SK	Fentanyl	13%	87%	0%	0%
	Fentanyl analogues	0%	100%	0%	0%
	Non-fentanyl opioids	87%	9%	0%	4%
MB	Fentanyl	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a
ON	Fentanyl	3%	97%	0%	0%
	Fentanyl analogues	0%	100%	0%	0%
	Non-fentanyl opioids	65%	23%	5%	6%
QC	Fentanyl	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a
NB	Fentanyl	0%	100%	0%	0%
	Fentanyl analogues	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	100%	0%	0%	0%
NS	Fentanyl	14%	86%	0%	0%
	Fentanyl analogues	0%	100%	0%	0%
	Non-fentanyl opioids	94%	2%	4%	0%
PE	Fentanyl	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a
NL	Fentanyl	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a
YT	Fentanyl	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a
NT	Fentanyl	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a
NU	Fentanyl	Suppr.	Suppr.	Suppr.	Suppr.
	Fentanyl analogues	Suppr.	Suppr.	Suppr.	Suppr.
	Non-fentanyl opioids	Suppr.	Suppr.	Suppr.	Suppr.
Canada	Fentanyl	2%	98%	0%	0%
	Fentanyl analogues	0%	100%	0%	0%
	Non-fentanyl opioids	67%	20%	4%	8%



Province or territory	Type of opioids	Origin			
		Pharmaceutical only	Non-pharmaceutical only	Both	Undetermined
BC	Fentanyl	0%	100%	0%	0%
	Fentanyl analogues	0%	100%	0%	0%
	Non-fentanyl opioids	0%	0%	0%	100%
AB	Fentanyl	0%	100%	0%	0%
	Fentanyl analogues	0%	100%	0%	0%
	Non-fentanyl opioids	53%	24%	2%	21%
SK	Fentanyl	5%	95%	0%	0%
	Fentanyl analogues	0%	100%	0%	0%
	Non-fentanyl opioids	89%	4%	0%	7%
MB	Fentanyl	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a
ON	Fentanyl	3%	97%	0%	0%
	Fentanyl analogues	0%	100%	0%	0%
	Non-fentanyl opioids	74%	16%	4%	6%
QC	Fentanyl	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a
NB	Fentanyl	20%	80%	0%	0%
	Fentanyl analogues	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	92%	4%	0%	4%
NS	Fentanyl	33%	67%	0%	0%
	Fentanyl analogues	0%	100%	0%	0%
	Non-fentanyl opioids	100%	0%	0%	0%
PE	Fentanyl	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a
NL	Fentanyl	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a
YT	Fentanyl	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a
NT	Fentanyl	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a
NU	Fentanyl	Suppr.	Suppr.	Suppr.	Suppr.
	Fentanyl analogues	Suppr.	Suppr.	Suppr.	Suppr.
	Non-fentanyl opioids	Suppr.	Suppr.	Suppr.	Suppr.
Canada	Fentanyl	2%	98%	0%	0%
	Fentanyl analogues	0%	100%	0%	0%
	Non-fentanyl opioids	72%	16%	3%	9%



2020

Province or territory	Type of opioids	Origin			
		Pharmaceutical only	Non-pharmaceutical only	Both	Undetermined
BC	Fentanyl	0%	100%	0%	0%
	Fentanyl analogues	0%	100%	0%	0%
	Non-fentanyl opioids	0%	0%	0%	100%
AB	Fentanyl	0%	100%	0%	0%
	Fentanyl analogues	0%	100%	0%	0%
	Non-fentanyl opioids	45%	19%	5%	31%
SK	Fentanyl	1%	99%	0%	0%
	Fentanyl analogues	0%	100%	0%	0%
	Non-fentanyl opioids	76%	6%	2%	16%
MB	Fentanyl	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a
ON	Fentanyl	1%	99%	0%	0%
	Fentanyl analogues	0%	100%	0%	0%
	Non-fentanyl opioids	77%	12%	4%	7%
QC	Fentanyl	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a
NB	Fentanyl	0%	100%	0%	0%
	Fentanyl analogues	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	88%	0%	0%	12%
NS	Fentanyl	20%	80%	0%	0%
	Fentanyl analogues	0%	100%	0%	0%
	Non-fentanyl opioids	100%	0%	0%	0%
PE	Fentanyl	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a



Province or territory	Type of opioids	Origin			
		Pharmaceutical only	Non-pharmaceutical only	Both	Undetermined
NL	Fentanyl	Suppr.	Suppr.	Suppr.	Suppr.
	Fentanyl analogues	Suppr.	Suppr.	Suppr.	Suppr.
	Non-fentanyl opioids	Suppr.	Suppr.	Suppr.	Suppr.
YT	Fentanyl	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a
NT	Fentanyl	n/a	n/a	n/a	n/a
	Fentanyl analogues	n/a	n/a	n/a	n/a
	Non-fentanyl opioids	n/a	n/a	n/a	n/a
NU	Fentanyl	Suppr.	Suppr.	Suppr.	Suppr.
	Fentanyl analogues	Suppr.	Suppr.	Suppr.	Suppr.
	Non-fentanyl opioids	Suppr.	Suppr.	Suppr.	Suppr.
Canada	Fentanyl	1%	99%	0%	0%
	Fentanyl analogues	0%	100%	0%	0%
	Non-fentanyl opioids	72%	12%	3%	13%

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Note(s):

Apparent opioid toxicity death (AOTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is an opioid, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.

Only applies to deaths with completed investigations.



Table 18. Percentage of accidental opioid toxicity deaths by sex and origin, by province or territory, 2018 to 2020

2018

Province or territory	Sex	Origin			
		Pharmaceutical only	Non-pharmaceutical only*	Both	Undetermined
BC	Female	0%	52%	0%	48%
	Male	0%	64%	0%	36%
AB	Female	28%	65%	1%	7%
	Male	11%	83%	1%	4%
SK	Female	77%	17%	4%	2%
	Male	45%	48%	4%	3%
MB	Female	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a
ON	Female	31%	59%	6%	3%
	Male	20%	67%	10%	3%
QC	Female	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a
NB	Female	100%	0%	0%	0%
	Male	90%	0%	10%	0%
NS	Female	81%	6%	13%	0%
	Male	88%	6%	6%	0%
PE	Female	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a
NL	Female	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a
YT	Female	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a
NT	Female	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a
NU	Female	Suppr.	Suppr.	Suppr.	Suppr.
	Male	Suppr.	Suppr.	Suppr.	Suppr.
Canada	Female	36%	55%	5%	4%
	Male	20%	70%	7%	3%



2019

Province or territory	Sex	Origin			
		Pharmaceutical only	Non-pharmaceutical only*	Both	Undetermined
BC	Female	0%	57%	0%	43%
	Male	0%	69%	0%	31%
AB	Female	24%	66%	0%	11%
	Male	13%	81%	1%	5%
SK	Female	69%	26%	3%	3%
	Male	53%	35%	6%	6%
MB	Female	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a
ON	Female	29%	57%	10%	4%
	Male	14%	73%	11%	2%
QC	Female	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a
NB	Female	100%	0%	0%	0%
	Male	62%	23%	8%	8%
NS	Female	100%	0%	0%	0%
	Male	90%	6%	3%	0%
PE	Female	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a
NL	Female	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a
YT	Female	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a
NT	Female	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a
NU	Female	Suppr.	Suppr.	Suppr.	Suppr.
	Male	Suppr.	Suppr.	Suppr.	Suppr.
Canada	Female	33%	55%	6%	5%
	Male	18%	72%	8%	3%

Province or territory	Sex	Origin			
		Pharmaceutical only	Non-pharmaceutical only*	Both	Undetermined
BC	Female	0%	72%	0%	28%
	Male	0%	79%	0%	21%
AB	Female	16%	75%	1%	7%
	Male	6%	87%	1%	6%
SK	Female	44%	37%	10%	9%
	Male	22%	62%	9%	7%
MB	Female	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a
ON	Female	17%	68%	12%	2%
	Male	8%	81%	9%	2%
QC	Female	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a
NB	Female	69%	8%	0%	23%
	Male	87%	13%	0%	0%
NS	Female	100%	0%	0%	0%
	Male	70%	19%	11%	0%
PE	Female	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a
NL	Female	Suppr.	Suppr.	Suppr.	Suppr.
	Male	Suppr.	Suppr.	Suppr.	Suppr.
YT	Female	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a
NT	Female	n/a	n/a	n/a	n/a
	Male	n/a	n/a	n/a	n/a
NU	Female	Suppr.	Suppr.	Suppr.	Suppr.
	Male	Suppr.	Suppr.	Suppr.	Suppr.
Canada	Female	21%	66%	9%	4%
	Male	9%	81%	7%	3%

* Includes deaths with suspected non-pharmaceutical fentanyl alone or with any other non-pharmaceutical opioid(s)

Suppressed (Suppr.) Data may be suppressed in provinces or territories with low numbers of cases.

Not available (n/a) Data were not available at the time of this publication.

Note(s):

Apparent opioid toxicity death (AOTD): A death caused by intoxication/toxicity (poisoning) resulting from substance use, where one or more of the substances is an opioid, regardless of how it was obtained (e.g. illegally or through personal prescription). Other substances may also be involved.

Data on apparent opioid toxicity deaths and stimulant toxicity deaths are not mutually exclusive. A high proportion of deaths involving a stimulant also involved an opioid. Adding up those numbers would result in an overestimation of the burden of opioids and stimulants.

Only applies to deaths with completed investigations.