

Overdose-Related Trends in Marion County, IN | 2019-2025

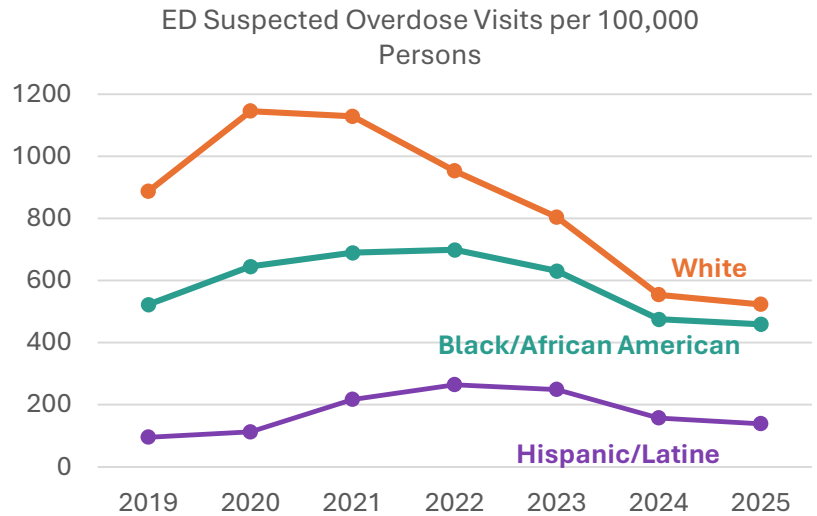
Suspected Non-Fatal Overdoses by Race and Ethnicity

Background: Emergency department (ED) data are collected through the Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE), as a tool for local health departments to detect health events seen in emergency departments. Overdose-related visits are flagged using keyword-based queries. Emergency medical service (EMS) data are collected through the National Emergency Medical Services Information System (NEMSIS) and provide a report where naloxone was administered during an EMS run. The data is used as a proxy for suspected overdoses. **Please note: Reports include all suspected overdoses, based on the patient's reporting, ICD-10 diagnosis codes, and other notes. There are no toxicology results to confirm the overdose or substance(s) listed.**

Emergency Department (ED) Visits

Key Points

- The rate of suspected overdoses seen in Marion County emergency departments is higher among **White** patients, reaching a peak in 2021 (1127.8 per 100,000 persons).
- From 2024-2025, there was a:
 - 5% decrease among **White** patients.
 - 3% decrease among **Black/African American** patients.
 - 11% decrease among **Hispanic/Latine** patients.

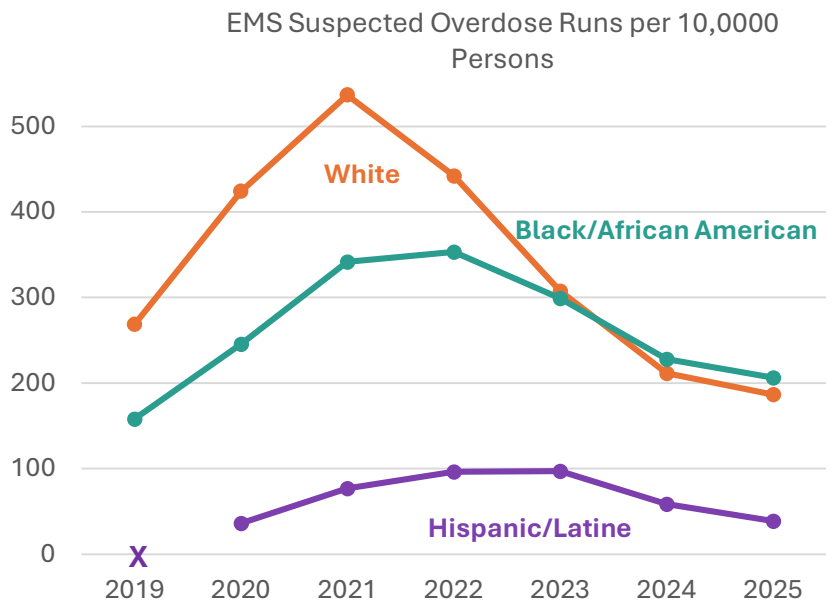


Created 03MAR2026, Marion County Public Health Department (epidemiology@marionhealth.org), Epidemiology DR6045. Source: Inductive Health ESSENCE

Emergency Medical Services (EMS) Runs

Key Points

- EMS runs for suspected overdose reached their highest rate at different times for each race/ethnicity: White patients had the highest rate in 2021. Black/African American had the highest rate in 2022. Hispanic/Latine saw the highest rate in 2023.
- Starting in 2022, the gap between White and Black/African American patients experiencing overdoses rates began to narrow.
- Unlike ED visits, the rate of suspected overdose EMS runs was **higher** among **Black/African American** patients in 2025 (206.4 per 100,00 persons).



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*Low data counts are suppressed.

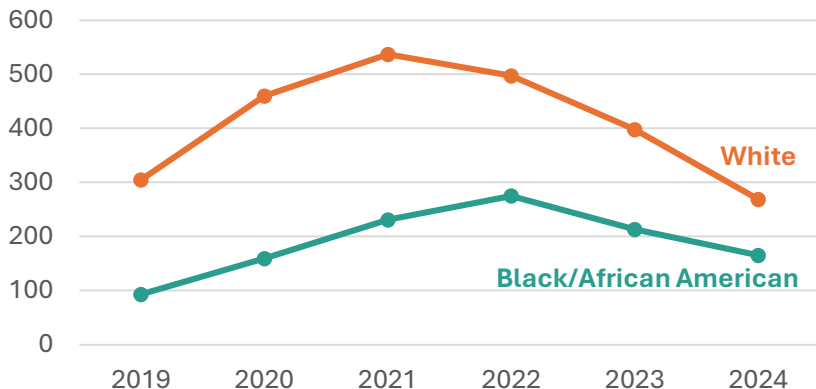
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Drug Intoxication Deaths by Race and Ethnicity

Background: This report is created in coordination between the Marion County Public Health Department (MCPHD) and the Marion County Coroner's Office (MCCO). All data in this report was collected and provided by the MCCO.

Counts of Accidental Drug Intoxication Deaths

Accidental Drug Intoxication Deaths by Race & Ethnicity (2019-2024)



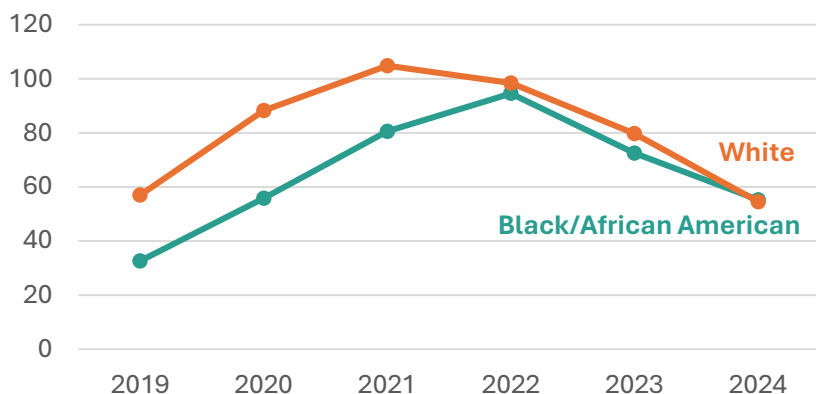
Created 03MAR2026, Marion County Public Health Department (epidemiology@marionhealth.org), Epidemiology DR6045. Source: Marion County Coroner's Office

Key Points

- From 2019-2024, the number of accidental drug intoxication deaths among the White population has **decreased by 8%**, but the number of deaths among the Black/African American population has **increased by 77%**.
- When strictly looking at the number of deaths during this timeframe, more White individuals have consistently died due to accidental drug intoxication deaths than Black/African American individuals.

Rates of Accidental Drug Intoxication Deaths

Accidental Drug Intoxication Deaths per 100,000 Persons by Race & Ethnicity (2019-2024)



Created 03MAR2026, Marion County Public Health Department (epidemiology@marionhealth.org), Epidemiology DR6045. Source: Marion County Coroner's Office

Key Points

- When counts are converted into rates by accounting for county population data, the data tells a bit of a different story.
- The overdose death rate for White individuals has **continued to decline** since 2021 and is now **4% lower** than the rate in 2019
- However, the rate for Black/African American individuals is still **69% higher** than the rate in 2019 and slightly **surpassed** the rate of White

Disclaimer: This report was supported by the Centers for Disease Control and Prevention (CDC) of the U.S. Department of Health and Human Services (HHS) as part of Overdose Data to Action: LOCAL (CDC-RFA-CE-23-0003). The contents are those of the authors and do not necessarily represent the official views of, nor an endorsement by, CDC/HHS or the U.S. Government.