

What Happened to Overdoses and Service Response During the Covid-19 Epidemic?

The Public Health Problem

Interventions and treatments to prevent overdose were disrupted by the COVID-19 pandemic. This study examined how overdose deaths, toxicology, demographics, and service responses changed in one U.S. county during COVID.

Overdose deaths made up 28% of excess non-COVID deaths in the county during the pandemic. In the first month after COVID-19 arrived, deaths involving drugs rose 49%, with steep increases linked to alcohol (171%), heroin (108%), fentanyl (78%), and amphetamines (55%). Although rates later declined, overdose deaths remained 27% higher than pre-pandemic levels through 2021.

Background

The COVID-19 pandemic created global disruptions to health care, addiction treatment, and social services. These service gaps increased overdose risks but also led to local innovations such as take-home methadone and hotel housing programs.

What This Article Addresses

This study explores how a local community experienced and responded to a surge in overdose deaths during the early months of the COVID-19 pandemic.

The authors investigate which shifts in substance use and health services contributed to rising mortality—and how adaptations such as take-home medications and emergency housing may have helped mitigate harm.

What They Did *(Methods)*

The study analyzed monthly toxicology, demographic, and service data on 1,701 overdose deaths in Pinellas County, Florida, comparing pre-pandemic and pandemic periods over 36 months.

What They Discovered *(Findings)*



Overdose deaths drove excess mortality: They accounted for 28% of all non-COVID excess deaths in the county during the pandemic



Fatal overdoses spiked at the start of the pandemic: Deaths involving drugs, alcohol, heroin, fentanyl, and amphetamines rose sharply in the first month after COVID-19 arrived.



Service adaptations helped curb deaths: Though overdose rates stayed elevated, interventions like take-home methadone and emergency housing contributed to reduced mortality over time.

Opportunities for Action

The study findings highlight opportunities for:

Health care leaders and providers

- Recognize the need for rapid service shifts during crises to reduce overdose risk.
- Expand flexible treatment models like take-home methadone and telehealth.
- Strengthen emergency response capacity, including 911 transport and naloxone access.

Policymakers and payors

- Support regulations that allow flexible medication delivery and remote care.
- Fund local adaptations that maintain continuity of addiction and social services.
- Integrate overdose prevention into broader emergency preparedness policies.

Researchers

- Collaborate with communities to evaluate the impact of specific service adaptations.
- Identify causal links between service changes and overdose outcomes.
- Prioritize research on scalable, flexible interventions during public health emergencies.

Patients and families seeking recovery

- Be aware that crises like COVID-19 can increase overdose risk.
- Seek providers who offer flexible treatment options during emergencies.
- Advocate for policies and services that ensure continued access to care.