



Utah Suicide Toxicology Report Fiscal Year 2010

UAC 26-4-28 Report to the Legislature

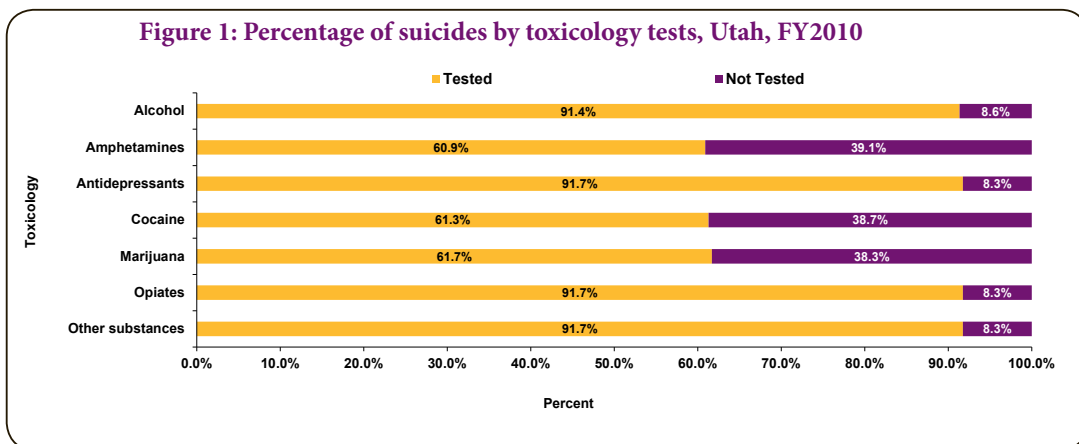
Introduction

As a requirement of UAC 26-4-8, the Utah Department of Health is required to report “the types of substances found present in the samples taken from the body of a person who is suspected to have died as a result of suicide or assisted suicide.”

Toxicology Results

In fiscal year 2010 (July 2009 through June 2010) there were 510 suicides.¹ Toxicology tests were conducted in 99.8% (n=509) of suicides. Toxicology tests are not conducted for all suicides. For example, based on the likelihood of illicit drugs being present, as determined by investigation and medical history, tests for illicit drugs may not be conducted.

Tests for other substances, opiates, and antidepressants were conducted for 91.7% of suicides. Tests for alcohol were conducted for 91.4% of suicides. Tests for marijuana were conducted for 61.7% of suicides and tests for amphetamines and cocaine were conducted for approximately 61.0% of suicides (Figure 1).



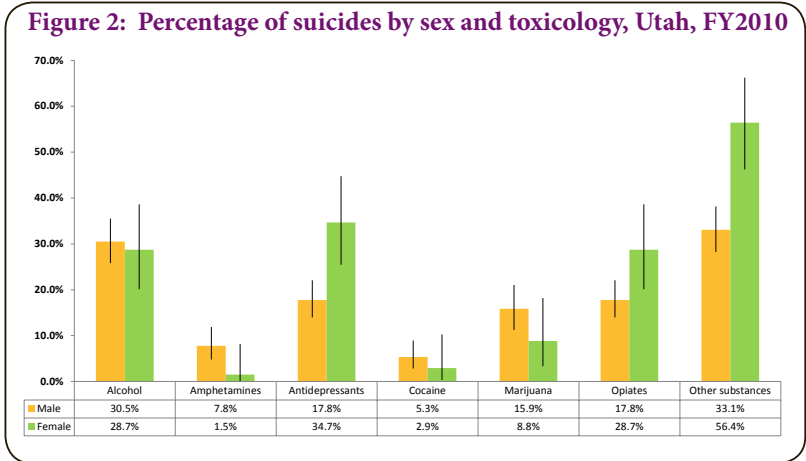
The most common drug found in victims who died from suicide was other substances (38.1%) (Table 1). This category includes over-the-counter medications and benzodiazepines, such as anti-anxiety medications and muscle relaxants. The least common drug found was cocaine (4.8%) (Table 1).

Table 1: Summary of suicide toxicology test results, Utah, FY2010

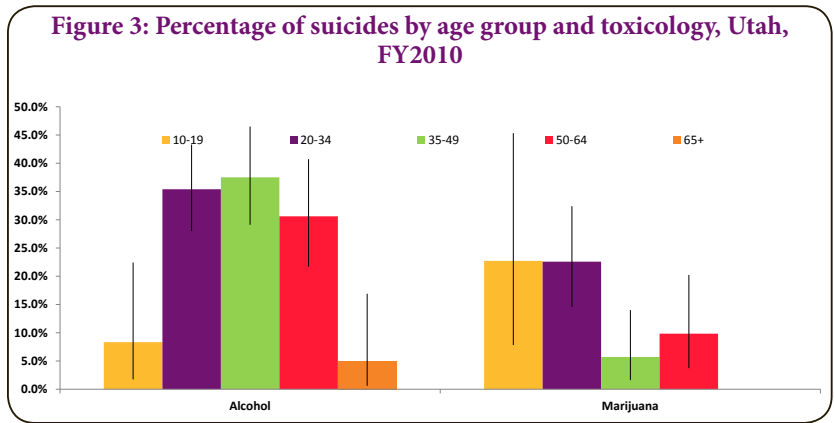
Toxicology	Screened	Present	Percent
Other substances	467	178	38.1%
Alcohol	465	140	30.1%
Antidepressants	467	100	21.4%
Opiates	467	94	20.1%
Marijuana	314	45	14.3%
Amphetamines	310	20	6.5%
Cocaine	312	15	4.8%

Of those who tested positive for alcohol, the average Blood Alcohol Concentration percent (BAC) was almost two times (0.15%) the legal limit. The legal BAC for Utah is 0.08%.

Females were significantly more likely to test positive for antidepressants and other substances compared to males (Figure 2).



Persons ages 20 to 34, 35 to 49, and 50-64 were significantly more likely to test positive for alcohol compared to persons ages 10 to 19 and 65 years and older. Persons ages 35 to 49 were significantly less likely to test positive for marijuana compared to persons ages 20 to 34 (Figure 3). There were no significant differences in age groups for amphetamines, antidepressants, cocaine, opiates, and other substances.



Last updated: January 30, 2013

References

¹Data are from the Utah Violent Death Reporting System (UTVDRS). UTVDRS is an initiative of the U.S. Centers for Disease Control and Prevention (CDC) to systematically collect violent death data from death certificates, medical examiner records, police reports, crime lab records, and supplemental homicide reports on suicides, homicides, deaths of undetermined intent, unintentional firearm-related deaths, and deaths due to legal intervention.

Our Mission...

Is to protect the public's health through preventing avoidable illness, injury, disability, and premature death; assuring access to affordable, quality health care; and promoting healthy lifestyles.

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