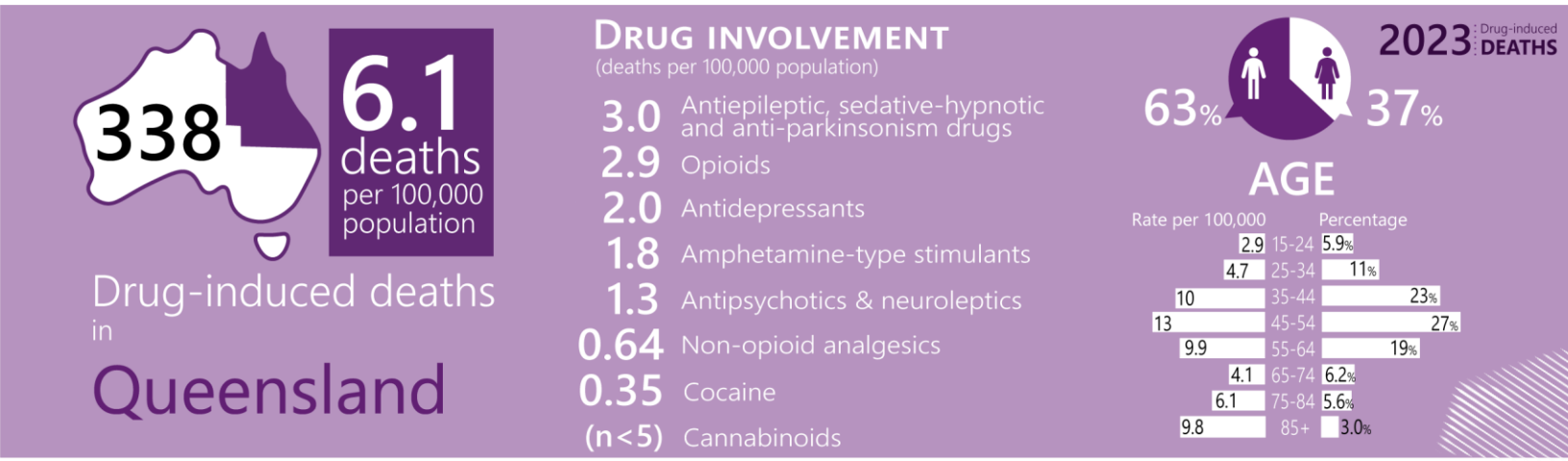
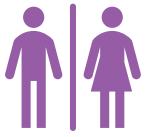
Queensland



There were 338 registered overdose and other drug-induced deaths (excluding alcohol and tobacco) in Queensland in 2023, which is equivalent to 0.92% of all registered deaths in this jurisdiction.

The population rate increased from 4.9 in 2004 to 8.5 in 2015, subsequently decreasing to 7.2 in 2021. The preliminary age-standardised rate of drug-induced deaths was 6.1 deaths per 100,000 people in 2023 (**Figure 1**). This rate was not significantly different from the revised rate for 2022 (6.3 deaths per 100,000 people), noting that estimates for 2022 and 2023 are subject to revision and may increase (Table A28).

Sex



In 2023, males accounted for 63% (212 deaths) of drug-induced deaths. The rate of drug-induced deaths was also higher among males than females (8.0 versus 4.4 deaths per 100,000 people, respectively). Analyses did not indicate a statistically significant difference between 2022 and 2023 in the estimated rates for males or females (Table A28).

Age

In 2023, drug-induced deaths were most common among the 45-54 age group (27%, 91 deaths).

The rate was also highest in the 45-54 age group (13 deaths per 100,000 people), followed by the 35-44, 55-64 and 85+ age groups (10, 9.9 and 9.8 deaths per 100,000 people, respectively).

Analyses did not indicate a statistically significant difference in the estimated rates between 2022 and 2023 for any age group (Table A29).

Remoteness Area of Usual Residence

The greatest proportion of drug-induced deaths in 2023 occurred among people residing in major city areas (64%, 217 deaths). The highest rate was observed among people in inner regional areas (6.5 deaths per 100,000 people), followed by outer regional areas (6.3 deaths per 100,000 people).

There was no clear historical trend observed in the rate of drug-induced deaths for major city versus regional and remote areas of Queensland. The 2023 rates were comparable to the rates observed in 2022 (Table A30).

Intent of Drug Overdose Deaths

In 2023, 97% (329 deaths) of drug-induced deaths were due to overdose. Unintentional drug overdose accounted for 57% (186 deaths) and intentional drug overdose for 37% (121 deaths) of these deaths in 2023. This profile was broadly consistent over time. Comparison of preliminary rates did not suggest a significant change between 2022 and 2023 (Table A31).

Place of Occurrence

In 2023, the location of the incident underlying death was coded as home for the majority (78%, 258 deaths) of drug overdose deaths.

Drug Involvement

In Queensland, the three most common drug types involved in drug overdose deaths in 2023 were:

- **antiepileptic, sedative-hypnotic and anti-parkinsonism drugs** (3.0 deaths per 100,000 people, 165 deaths),
- **opioids** (2.9 deaths per 100,000 people, 161 deaths)
- **antidepressants** (2.0 deaths per 100,000 people, 111 deaths) (**Figure 2**).

Compared to 2022, the estimated rates of drug overdose deaths in Queensland were significantly lower in 2023 for opioids (by 19%) and antiepileptic, sedative-hypnotic and antiparkinsonism drugs (by 20%), noting that these estimates are subject to revision and may increase (Table A32).

Figure 1. Age-standardised rate per 100,000 people of drug-induced deaths, by sex, Queensland, 2004-2023

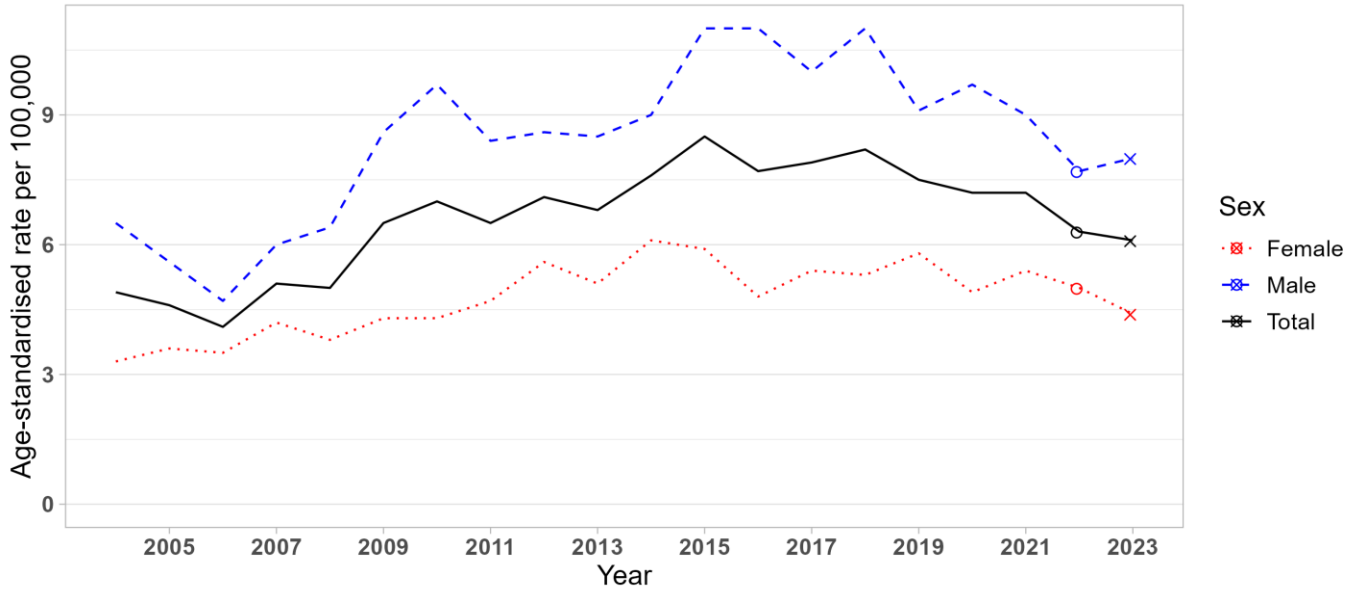
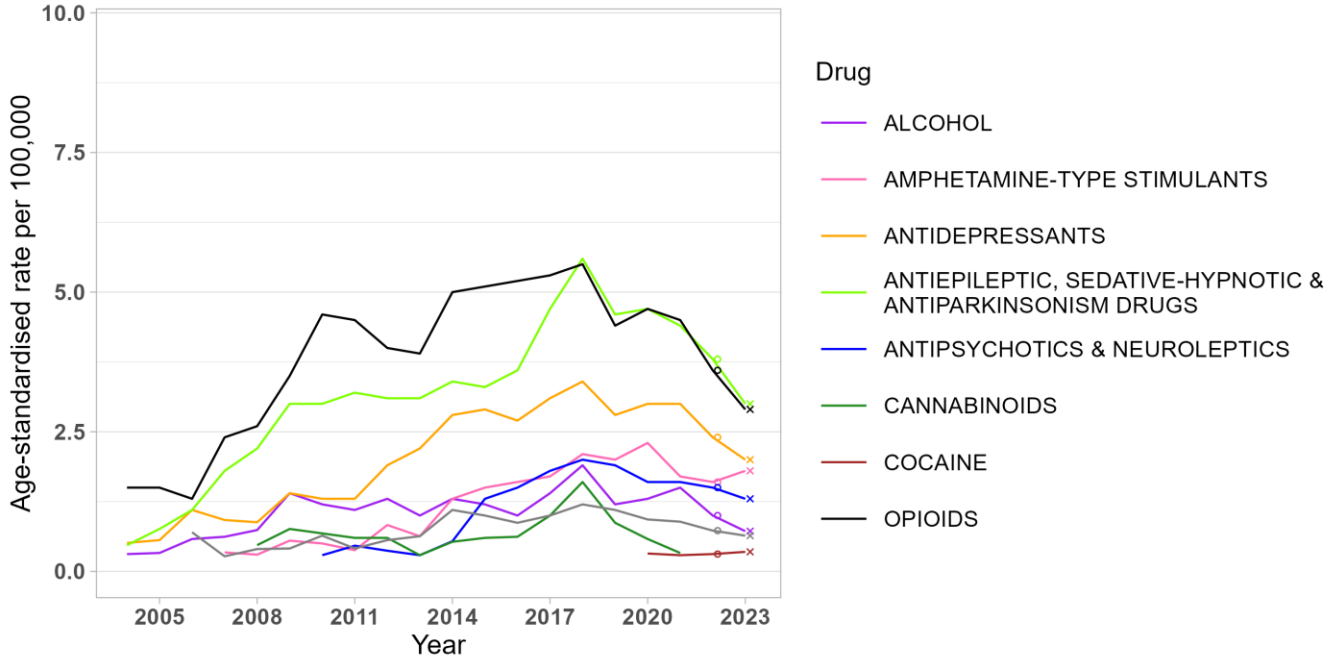


Figure 2. Age-standardised rate per 100,000 people of drug overdose deaths, by drug class, Queensland, 2004-2023



Note: Deaths where conditions related to alcohol or tobacco comprised the underlying cause of death are not captured here.
Causes of death data for 2022 and 2023 are not final and thus are subject to further revision. The symbol 'o' indicates revised estimates and 'x' preliminary estimates. Age-standardised rates were not calculated if the number of deaths was less than or equal to 10 (please refer to our methods document for details). Suppressed data are visible as gaps in the data series.

Table A28. Age-standardised rate per 100,000 people of drug-induced deaths in Queensland in 2022 and 2023, and average percent change (APC) for difference between 2023 and 2022 (with 95% confidence intervals), by sex

Sex	Rate in 2022	Rate in 2023	APC for 2023 vs 2022
Female	5.0 (4.2, 5.9)	4.4 (3.6, 5.2)	-12 (-31, 12)
Male	7.7 (6.7, 8.9)	8.0 (6.9, 9.1)	3.2 (-15.1, 25.6)
Total	6.3 (5.6, 7.0)	6.1 (5.5, 6.8)	-2.9 (-16.6, 13.2)

Note: Deaths where conditions related to alcohol or tobacco comprised the underlying cause of death are not captured here. Causes of death data for 2022 and 2023 are preliminary and thus are subject to further revision. 95% confidence intervals for the age-standardised rate and average percent change are shown in brackets. Please refer to our methods document on 'Presentation of results' for interpretation of average percent change. Please also refer to our methods document on 'Data source' and 'Coding of deaths' for details on the data used.

Table A29. Crude rate per 100,000 people of drug-induced deaths in Queensland in 2022 and 2023, and average percent change (APC) for difference between 2023 and 2022 (with 95% confidence intervals), by age

Age	Rate in 2022	Rate in 2023	APC for 2023 vs 2022
15-64	8.3 (7.4, 9.3)	8.1 (7.2, 9.1)	-2.3 (-17.4, 15.5)
15-24	3.0 (1.8, 4.6)	2.9 (1.7, 4.4)	-4.5 (-51.2, 87.1)
25-34	7.3 (5.4, 9.5)	4.7 (3.3, 6.5)	-35 (-59, 1)
35-44	10 (8, 13)	10 (8, 13)	0.70 (-27.77, 40.47)
45-54	13 (10, 16)	13 (11, 16)	1.3 (-25.2, 37.2)
55-64	7.8 (5.8, 10.3)	9.9 (7.6, 12.7)	27 (-14, 89)
65-74	4.7 (3.0, 7.1)	4.1 (2.5, 6.2)	-14 (-55, 61)
75-84	4.5 (2.4, 7.6)	6.1 (3.7, 9.6)	38 (-35, 204)
85+	13 (7, 22)	9.8 (4.7, 18.0)	-25 (-71, 84)

Note: Deaths where conditions related to alcohol or tobacco comprised the underlying cause of death are not captured here. Causes of death data for 2022 and 2023 are preliminary and thus are subject to further revision. 95% confidence intervals for the crude rate and average percent change are shown in brackets. Please refer to our methods document on 'Presentation of results' for interpretation of average percent change. The estimates for the 0-14 years age group are not presented due to sensitivity of the data. Please also refer to our methods document on 'Data source' and 'Coding of deaths' for details on the data used.

Table A30. Age-standardised rate per 100,000 people of drug-induced deaths in Queensland in 2022 and 2023, and average percent change (APC) for difference between 2023 and 2022 (with 95% confidence intervals), by remoteness area

Remoteness	Rate in 2022	Rate in 2023	APC for 2023 vs 2022
Major Cities	6.8 (5.9, 7.7)	6.0 (5.3, 6.9)	-11 (-26, 8)
Regional and Remote	5.3 (4.3, 6.5)	6.4 (5.3, 7.7)	20 (-9, 58)

Note: Deaths where conditions related to alcohol or tobacco comprised the underlying cause of death are not captured here. Causes of death data for 2022 and 2023 are preliminary and thus are subject to further revision. 95% confidence intervals for the age-standardised rate and average percent change are shown in brackets. Please refer to our methods document on 'Presentation of results' for interpretation of average percent change. Please also refer to our methods document on 'Data source' and 'Coding of deaths' for details on the data used.

Table A31. Age-standardised rate per 100,000 people of overdose deaths in Queensland in 2022 and 2023, and average percent change (APC) for difference between 2023 and 2022 (with 95% confidence intervals), by intent

Intent	Rate in 2022	Rate in 2023	APC for 2023 vs 2022
Unintentional	3.7 (3.2, 4.2)	3.5 (3.0, 4.1)	-4.5 (-22.1, 17.0)
Intentional	2.2 (1.8, 2.6)	2.1 (1.7, 2.5)	-5.6 (-27.0, 21.9)

Note: Deaths where conditions related to alcohol or tobacco comprised the underlying cause of death are not captured here. Causes of death data for 2022 and 2023 are preliminary and thus are subject to further revision. 95% confidence intervals for the age-standardised rate and average percent

change are shown in brackets. Please refer to our methods document on 'Presentation of results' for interpretation of average percent change. Please also refer to our methods document on 'Data source' and 'Coding of deaths' for details on the data used.

Table A32. Age-standardised rate per 100,000 people of overdose deaths in Queensland in 2022 and 2023, and average percent change (APC) for difference between 2023 and 2022 (with 95% confidence intervals), by drugs involved

Drug	Rate in 2022	Rate in 2023	APC for 2023 vs 2022
Antiepileptic, sedative-hypnotic & antiparkinsonism drugs	3.8 (3.2, 4.3)	3.0 (2.6, 3.5)	-20 (-35, -1)*
Opioids	3.6 (3.1, 4.2)	2.9 (2.5, 3.4)	-19 (-35, -0)*
Antidepressants	2.4 (2.0, 2.9)	2.0 (1.6, 2.4)	-18 (-37, 6)
Amphetamine-type stimulants	1.6 (1.2, 2.0)	1.8 (1.4, 2.2)	12 (-18, 51)
Antipsychotics & neuroleptics	1.5 (1.2, 1.8)	1.3 (1.0, 1.6)	-12 (-36, 23)
Alcohol	1.0 (0.8, 1.3)	0.72 (0.51, 0.98)	-29 (-53, 7)
Non-opioid analgesics	0.73 (0.52, 0.99)	0.64 (0.45, 0.89)	-12 (-44, 39)
Cocaine	0.31 (0.17, 0.51)	0.35 (0.21, 0.55)	14 (-43, 127)
Cannabinoids	NA (NA, NA)	NA (NA, NA)	–

Note: Deaths where conditions related to alcohol or tobacco comprised the underlying cause of death are not captured here. Causes of death data for 2022 and 2023 are preliminary and thus are subject to further revision. 95% confidence intervals for the age-standardised rate and average percent change (APC) are shown in brackets. Please refer to our methods document on 'Presentation of results' for interpretation of average percent change. Please also refer to our methods document on 'Data source' and 'Coding of deaths' for details on the data used. * Indicates a statistically significant difference.

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Please note that as with all statistical reports, there is the potential for minor revisions to data in this report. Please refer to the online version at Drug Trends.

Please contact the Drug Trends team with any queries regarding this publication: drugtrends@unsw.edu.au.

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We acknowledge the traditional custodians of the land on which the work for this report was undertaken. We pay respect to Elders past, present, and emerging.

Related Links

- For interactive data visualisations accompanying this report, go to: https://drugtrends.shinyapps.io/deaths_2023
- For full details of the methods underpinning this report, go to: http://www.unsw.edu.au/research/ndarc/resources/trends-drug-induced-deaths-australia-2004-2023
- For other Drug Trends publications on drug-related hospitalisations and drug-induced deaths in Australia, go to: National Illicit Drug Indicators Project (NIDIP) (unsw.edu.au)
- For more information on NDARC research, go to: National Drug & Alcohol Research Centre | Medicine & Health - UNSW Sydney
- For more information about the ABS, go to: http://www.abs.gov.au
- For more information on ICD coding go to: http://www.who.int/classifications/icd/en/
- For more information on the Remoteness Areas Structure within the Australian Statistical Geography Standard (ASGS), go to: https://www.abs.gov.au/ausstats/abs@.nsf/mf/1270.0.55.005
- For more research from the Drug Trends program and to subscribe to our newsletter, go to: Drug trends | National Drug & Alcohol Research Centre - UNSW Sydney
- For details on the collection, organisation and interpretation of NCIS data, go to: https://www.ncis.org.au/about-the-data/explanatory-notes/
- For statistics about case closure statistics in NCIS, go to: https://www.ncis.org.au/about-the-data/operational-statistics/