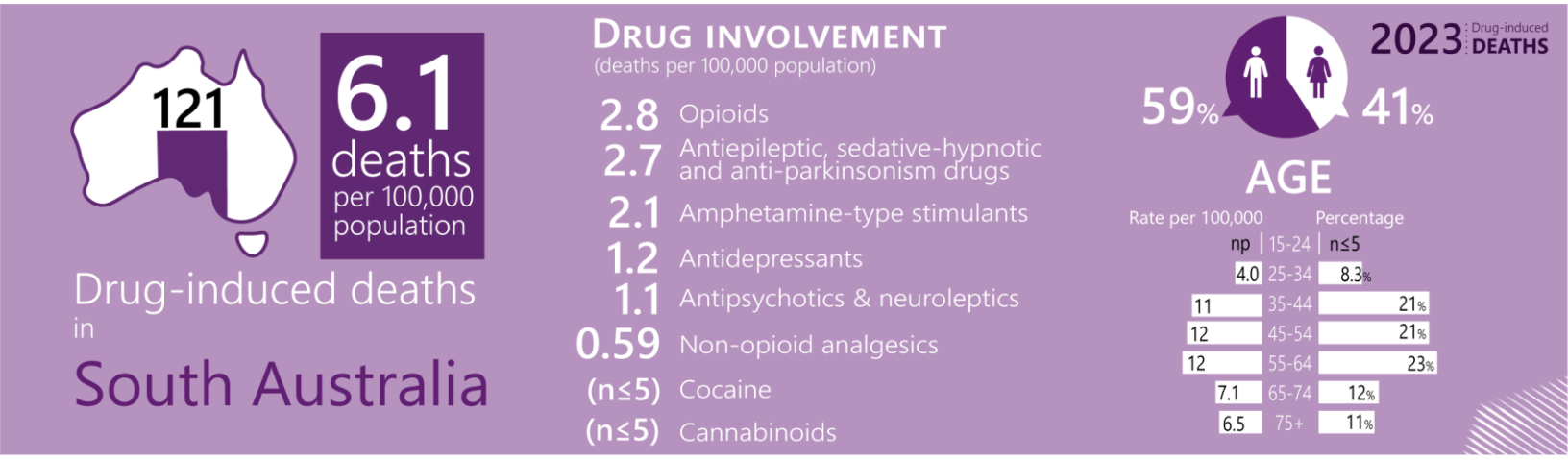
South Australia



There were 121 registered overdose and other drug-induced deaths (excluding alcohol and tobacco) in South Australia in 2023, which is equivalent to 0.78% of all registered deaths in this jurisdiction.

The rate fluctuated between 2004 and 2021. The highest rate was observed in 2009, reaching 8.8 deaths per 100,000 people. The preliminary age-standardised rate of drug-induced deaths in 2023 was 6.1 deaths per 100,000 people, significantly lower than the rate for 2022 (8.2 deaths per 100,000 people in 2022 (**Figure 1**) (Table A33), although noting these estimates subject to revision through which process they will likely increase.

Sex

In 2023, males accounted for 59% (71 deaths) of drug-induced deaths. The rate of drug-induced deaths was also higher among males than females (7.6 versus 4.7 deaths per 100,000 people, respectively). Analyses indicated a significantly lower rate in 2023 compared to 2022 for males, but the rates for females were not statistically different (Table A33).

Age

In 2023, drug-induced deaths were most common among the 55-64 age group (23%, 28 deaths).

The age-specific population rate was highest in 55-64 age group, followed by the 45-54 (12 deaths per 100,000 people, each).

Analyses did not indicate a statistically significant difference in the estimated rates between 2022 and 2023 for any age group (Table A34).

Remoteness Area of Usual Residence

In 2023, the greatest proportion of drug-induced deaths and the highest population rate occurred among people residing in major city areas (79%, 96 deaths, 6.4 deaths per 100,000 people).

Since 2009, South Australia has consistently recorded higher rates of drug-induced deaths in major city compared to regional and remote areas. However, in 2021, this trend reversed for the first time, with regional and remote areas experiencing a higher rate than major cities. This shift was short-lived, as the major city rate rose significantly in 2022, once again surpassing the regional and remote rate. Preliminary data suggests a significantly lower rate in major city areas for 2023 compared to 2022 (see Table A35).

Intent of Drug Overdose Deaths

In 2023, 98% (118 deaths) of drug-induced deaths were due to overdose. Unintentional drug overdose accounted for 67% (79 deaths) and intentional drug overdose for 26% (31 deaths) of these deaths in 2023. This has fluctuated over time. Although the rates of both unintentional and intentional drug overdose deaths were lower in 2023 compared to 2022, the differences were not statistically significant (Table A36).

Place of Occurrence

In 2023, the location of the incident underlying death was coded as home for the majority (81%, 96 deaths) of drug overdose deaths.

Drug Involvement

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

- **opioids** (2.8 deaths per 100,000 people, 56 deaths,
- **antiepileptic, sedative-hypnotic and anti-parkinsonism drugs** (2.7 deaths per 100,000 people, 52 deaths),
- **amphetamine-type stimulants** 2.1 deaths per 100,000 people, 38 deaths) (**Figure 2**).

Comparison of estimated rates of drug overdose deaths in South Australia identified a significantly lower rate of deaths involving opioids in 2023 compared to 2022 (by 36%), noting that both these estimates are subject to revision and may increase (Table A37).

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

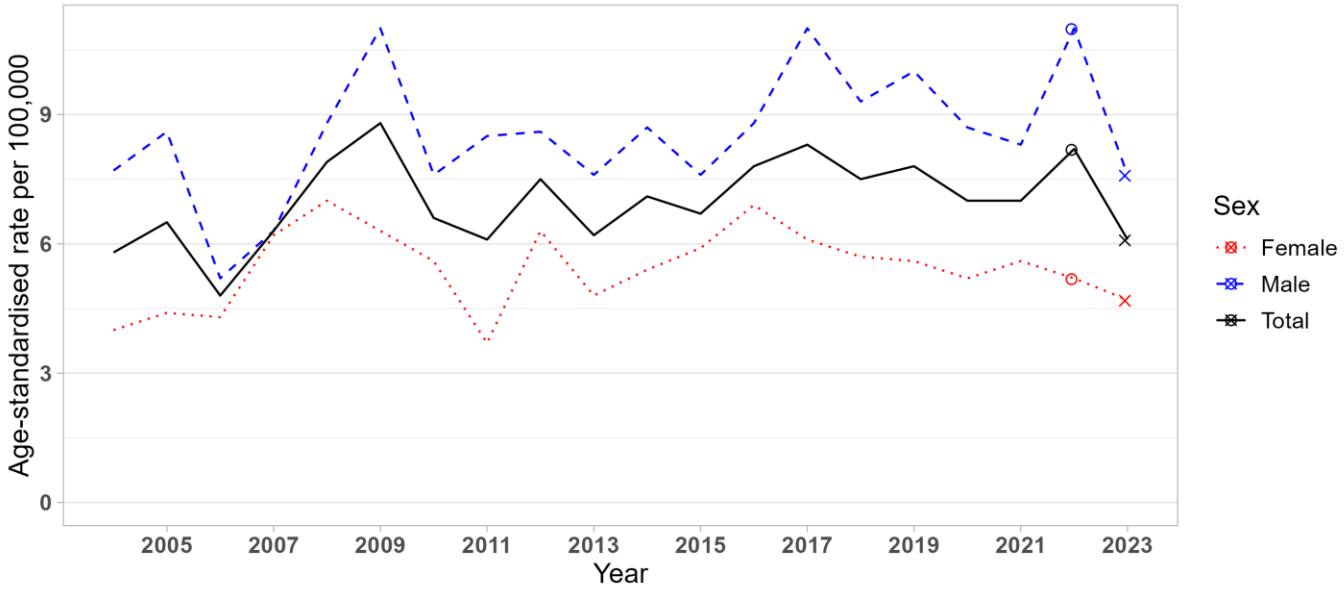
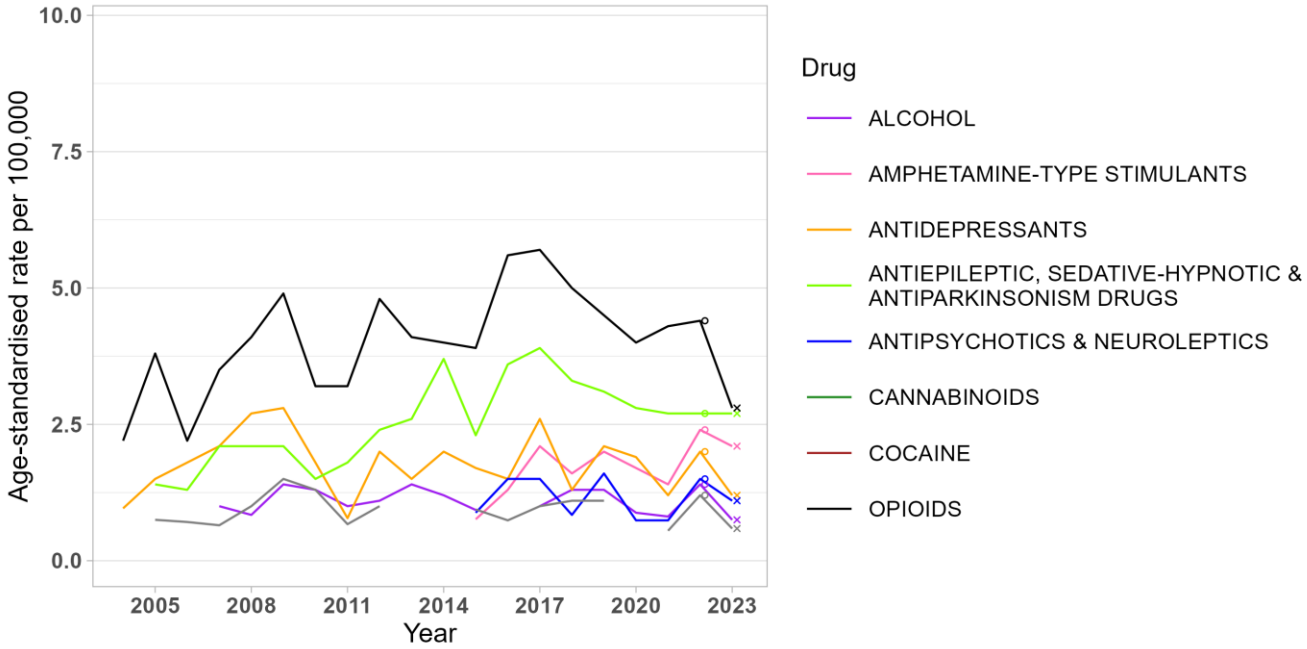


Figure 2. Age-standardised rate per 100,000 people of drug overdose deaths, by drug class, South Australia, 2004-2023



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 A33. Age-standardised rate per 100,000 people of drug-induced deaths in South Australia 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	5.2 (3.8, 6.9)	4.7 (3.5, 6.3)	-8.1 (-39.0, 38.4)
Male	11 (9, 14)	7.6 (5.9, 9.6)	-33 (-51, -8)*
Total	8.2 (6.9, 9.6)	6.1 (5.1, 7.4)	-25 (-41, -4)*

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. * Indicates a statistically significant difference.

Table A34. Crude rate per 100,000 people of drug-induced deaths in South Australia 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	11 (9, 13)	8.0 (6.5, 9.8)	-27 (-45, -4)*
15-24	3.7 (1.6, 7.3)	NA (NA, NA)	–
25-34	7.0 (4.1, 11.1)	4.0 (1.9, 7.3)	-43 (-77, 31)
35-44	15 (10, 21)	11 (7, 16)	-28 (-58, 23)
45-54	19 (13, 25)	12 (8, 17)	-38 (-63, 4)
55-64	11 (7, 16)	12 (8, 18)	17 (-35, 110)
65-74	8.2 (4.7, 13.3)	7.1 (3.9, 11.9)	-13 (-61, 89)
75-84	NA (NA, NA)	NA (NA, NA)	–
85+	NA (NA, NA)	16 (7, 32)	–

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. * Indicates a statistically significant difference.

Table A35. Age-standardised rate per 100,000 people of drug-induced deaths in South Australia 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	8.6 (7.1, 10.3)	6.4 (5.1, 7.8)	-26 (-44, -2)*
Regional and Remote	6.7 (4.4, 9.7)	5.3 (3.2, 8.1)	-22 (-56, 39)

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. * Indicates a statistically significant difference.

Table A36. Age-standardised rate per 100,000 people of overdose deaths in South Australia 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	5.6 (4.5, 6.9)	4.3 (3.4, 5.3)	-24 (-44, 3)
Intentional	2.1 (1.5, 2.8)	1.4 (1.0, 2.1)	-30 (-57, 13)

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 A37. Age-standardised rate per 100,000 people of overdose deaths in South Australia 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
Opioids	4.4 (3.5, 5.5)	2.8 (2.1, 3.7)	-36 (-55, -9)*
Antiepileptic, sedative-hypnotic & antiparkinsonism drugs	2.7 (2.0, 3.6)	2.7 (2.0, 3.6)	0.45 (-32.91, 50.39)
Amphetamine-type stimulants	2.4 (1.7, 3.3)	2.1 (1.5, 2.9)	-13 (-44, 36)
Antidepressants	2.0 (1.4, 2.7)	1.2 (0.8, 1.8)	-37 (-63, 5)
Antipsychotics & neuroleptics	1.5 (0.9, 2.2)	1.1 (0.6, 1.7)	-27 (-60, 33)
Alcohol	1.4 (0.9, 2.1)	0.75 (0.41, 1.26)	-48 (-73, 1)
Non-opioid analgesics	1.2 (0.7, 1.9)	0.59 (0.30, 1.06)	-51 (-76, 1)
Cannabinoids	NA (NA, NA)	NA (NA, NA)	–
Cocaine	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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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/