

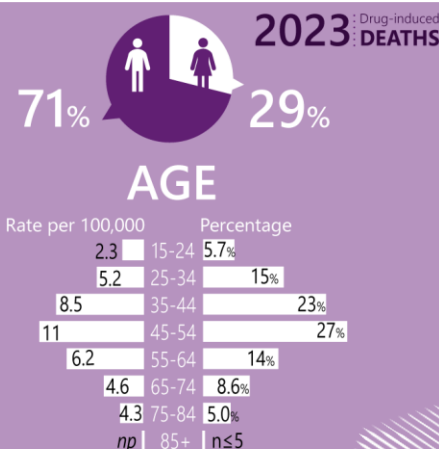
## New South Wales



### DRUG INVOLVEMENT

(deaths per 100,000 population)

2.7	Opioids
2.0	Antiepileptic, sedative-hypnotic and anti-parkinsonism drugs
1.6	Amphetamine-type stimulants
0.90	Antidepressants
0.55	Antipsychotics & neuroleptics
0.48	Cocaine
0.33	Non-opioid analgesics
(n<10)	Cannabinoids



There were 421 registered overdose and other drug-induced deaths (excluding alcohol and tobacco) in [New South Wales](#) in 2023, which is equivalent to 0.71% of all registered deaths in this jurisdiction.

The rate increased from 4.9 deaths per 100,000 people in 2004 to 7.8 deaths per 100,000 people in 2017, subsequently decreasing to 6.5 deaths per 100,000 people in 2021. The preliminary age-standardised rate of drug-induced deaths was 5.0 deaths per 100,000 people in 2023 ([Figure 1](#)). This was significantly lower than the 2022 estimate (5.8 deaths per 100,000 people), suggesting continuation of the downward trend. However, this conclusion should be caveated, as estimates for 2022 and 2023 are subject to revision and likely to increase ([Table A22](#)). Cause of death data for NSW may be particularly affected by the revisions process due to a higher proportion of coroner-certified deaths. As such, figures for NSW in the initial release may be underestimated and should be interpreted with caution ([Causes of Death, Australia methodology, 2023](#)).

### Sex



In 2023, males accounted for 71% (297 deaths) of drug-induced deaths. The rate of drug-induced deaths was also higher among males than females (7.3 versus 2.9 deaths per 100,000 people, respectively).

The rate in 2023 was not statistically significantly different from the rate in 2022 for males, but it was significantly lower for females (3.9 deaths per 100,000 people in 2022) ([Table A22](#)).

### Age

In 2023, drug-induced deaths were most common among the [45-54 age group](#) (27%, 112 deaths).

The rate was also highest in the 45-54 age group (11 deaths per 100,000 people), followed by the 35-44 and 55-64 age groups (8.5 and 6.2 deaths per 100,000 people, respectively).

Analyses indicated a significantly lower rate in 2023 compared to 2022 in the 55-64 age group ([Table A23](#)).

### Remoteness Area of Usual Residence

The greatest proportion of drug-induced deaths in 2023 was recorded among people residing in major city areas (75%, 314 deaths). The highest rate was observed among people in inner regional areas (5.6 deaths per 100,000 people), followed by major city areas (5.0 deaths per 100,000 people).

Analyses indicated a significantly lower rate in 2023 compared to 2022 in major city areas ([Table A24](#)).

### Intent of Drug Overdose Deaths

In 2023, 94% (397 deaths) of drug-induced deaths were due to overdose. Unintentional drug overdose accounted for 76% (302 deaths) and intentional drug overdose for 22% (86 deaths) of these deaths in 2023. This profile has been broadly consistent over time. The preliminary 2023 rate was significantly lower than the revised 2022 rate for unintentional deaths ([Table A25](#)).

## Place of Occurrence



In 2023, the location of the incident underlying death was coded as home for the majority (77%, 305 deaths) of drug overdose deaths.

## Drug Involvement

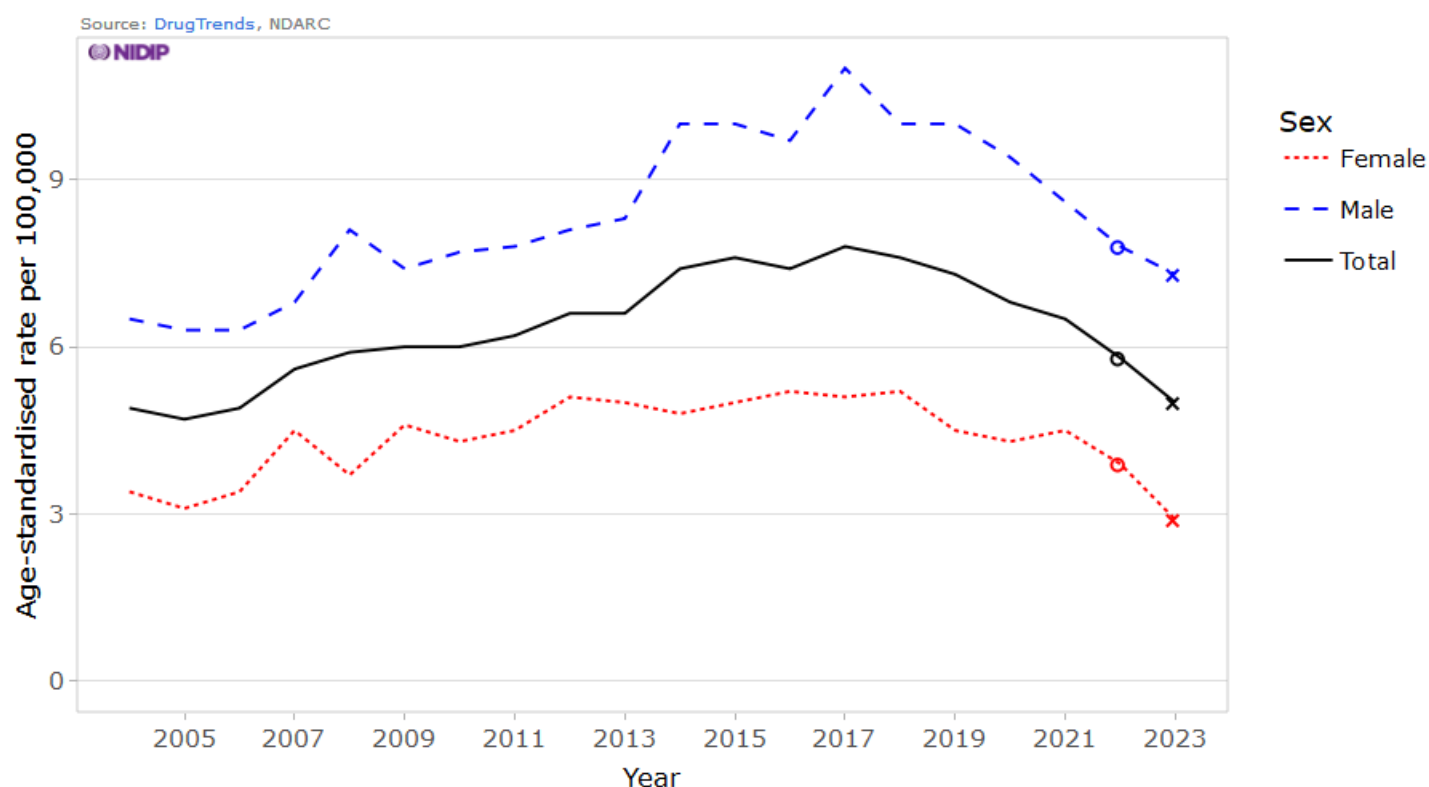
In New South Wales, the three [most common drug types](#) involved in drug overdose deaths in 2023 were:

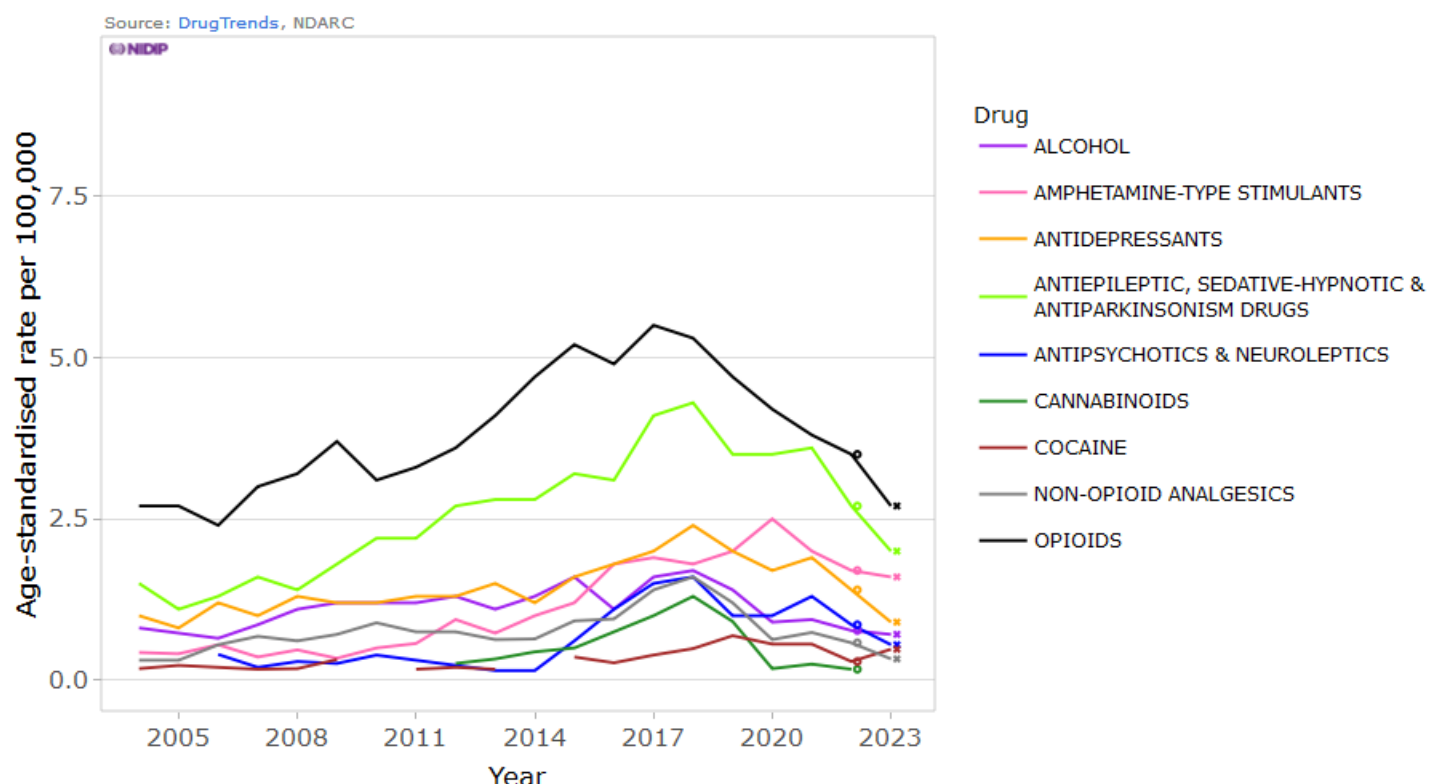
- **opioids** (2.7 deaths per 100,000 people, 223 deaths),
- **antiepileptic, sedative-hypnotic and anti-parkinsonism drugs** (2.0 deaths per 100,000 people, 164 deaths), and

- **amphetamine-type stimulants** (1.6 deaths per 100,000 people, 125 deaths) ([Figure 2](#)).

Comparison of preliminary estimates of drug overdose deaths in New South Wales indicated significantly lower rates in 2023 as compared to 2022 for drug overdose deaths involving opioids (by 22%), antiepileptic, sedative-hypnotic and antiparkinsonism drugs (by 27%), antidepressants (by 34%), antipsychotics and neuroleptics (by 36%); and non-opioid analgesics (by 43%). Estimates for 2022 and 2023 are subject to revision and may increase (Table A26).

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



**Figure 2.** Age-standardised rate per 100,000 people of drug overdose deaths, by drug class, New South Wales, 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 A22.** Age-standardised rate per 100,000 people of drug-induced deaths in New South Wales 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	3.9 (3.4, 4.6)	2.9 (2.4, 3.4)	-28 (-43, -8)*
Male	7.8 (6.9, 8.7)	7.3 (6.5, 8.1)	-6.7 (-20.5, 9.6)
Total	5.8 (5.3, 6.4)	5.0 (4.6, 5.6)	-14 (-25, -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. \* Indicates a statistically significant difference.

**Table A23.** Crude rate per 100,000 people of drug-induced deaths in New South Wales 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	7.9 (7.2, 8.7)	6.6 (5.9, 7.3)	-17 (-28, -4)*
15-24	2.3 (1.5, 3.5)	2.3 (1.5, 3.4)	-1.3 (-46.6, 83.0)
25-34	5.7 (4.4, 7.2)	5.2 (4.0, 6.6)	-8.6 (-36.3, 31.2)
35-44	10 (8, 12)	8.5 (6.9, 10.4)	-17 (-37, 10)
45-54	13 (10, 15)	11 (9, 13)	-12 (-33, 14)

55-64	9.0 (7.2, 11.1)	6.2 (4.7, 8.0)	-31 (-52, -3)*
65-74	4.8 (3.4, 6.6)	4.6 (3.2, 6.3)	-4.0 (-41.0, 56.2)
75-84	2.6 (1.3, 4.5)	4.3 (2.7, 6.6)	67 (-21, 273)
85+	4.9 (2.2, 9.3)	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 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 A24 Age-standardised rate per 100,000 people of drug-induced deaths in New South Wales 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	7.9 (7.2, 8.7)	6.6 (5.9, 7.3)	-17 (-28, -4)*
Regional and Remote	2.3 (1.5, 3.5)	2.3 (1.5, 3.4)	-1.3 (-46.6, 83.0)

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 A25. Age-standardised rate per 100,000 people of overdose deaths in New South Wales 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	4.4 (3.9, 4.9)	3.7 (3.3, 4.2)	-15 (-27, -1)*
Intentional	1.2 (1.0, 1.5)	0.95 (0.76, 1.18)	-20 (-40, 6)

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 A26. Age-standardised rate per 100,000 people of overdose deaths in New South Wales 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	3.5 (3.1, 3.9)	2.7 (2.3, 3.1)	-22 (-35, -7)*
Antiepileptic, sedative-hypnotic & antiparkinsonism drugs	2.7 (2.4, 3.1)	2.0 (1.7, 2.3)	-27 (-41, -11)*
Amphetamine-type stimulants	1.7 (1.4, 2.0)	1.6 (1.3, 1.9)	-7.5 (-27.6, 18.1)
Antidepressants	1.4 (1.1, 1.6)	0.90 (0.71, 1.13)	-34 (-50, -11)*
Alcohol	0.77 (0.59, 0.99)	0.71 (0.54, 0.91)	-8.2 (-36.0, 31.5)
Antipsychotics & neuroleptics	0.86 (0.67, 1.09)	0.55 (0.40, 0.74)	-36 (-56, -6)*
Cocaine	0.29 (0.18, 0.44)	0.48 (0.34, 0.66)	64 (-3, 178)
Non-opioid analgesics	0.58 (0.43, 0.77)	0.33 (0.22, 0.48)	-43 (-64, -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 (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](mailto:drugtrends@unsw.edu.au).

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## Data source

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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](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/>