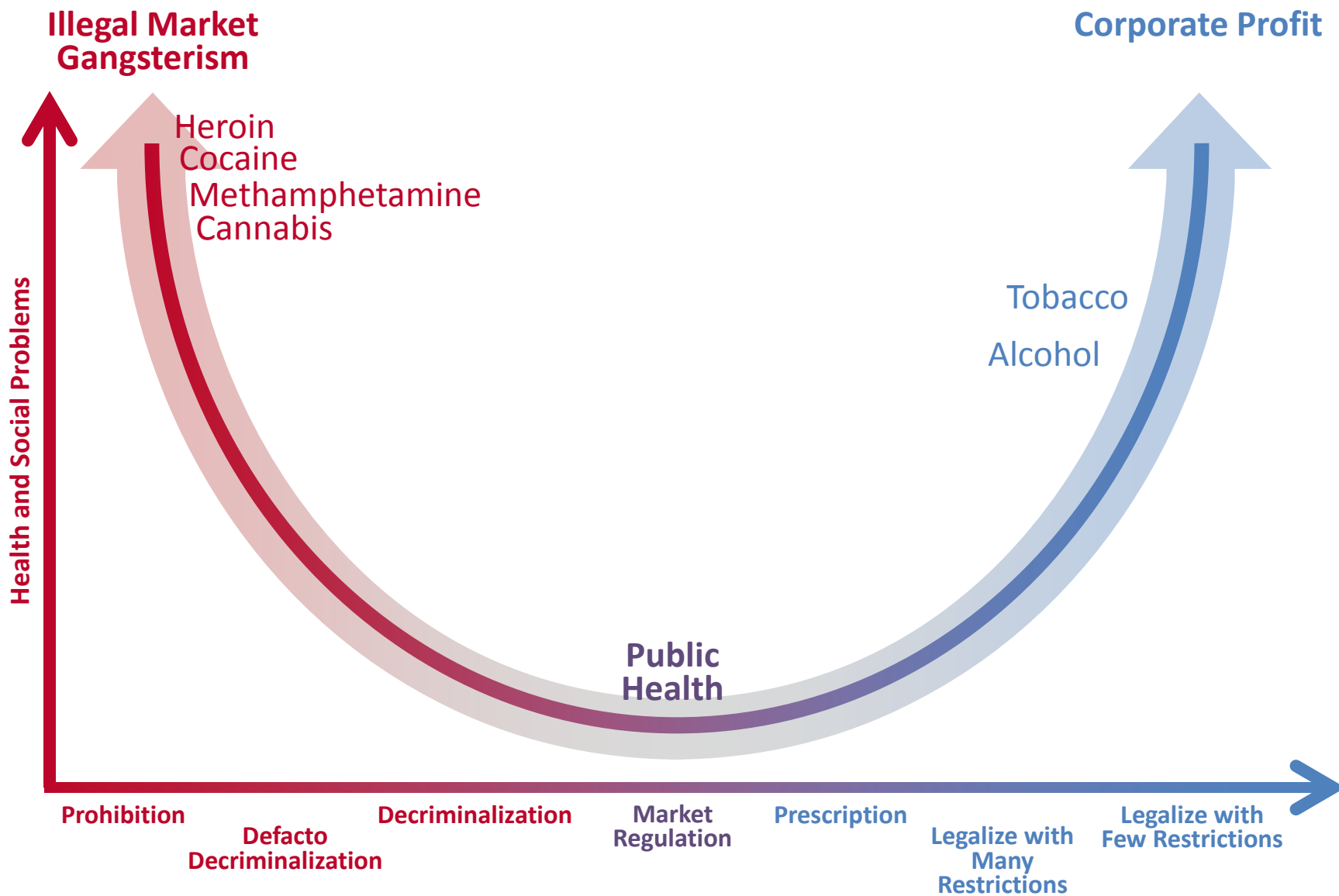


Dr. Reka Gustafson
Medical Health Officer
Vancouver



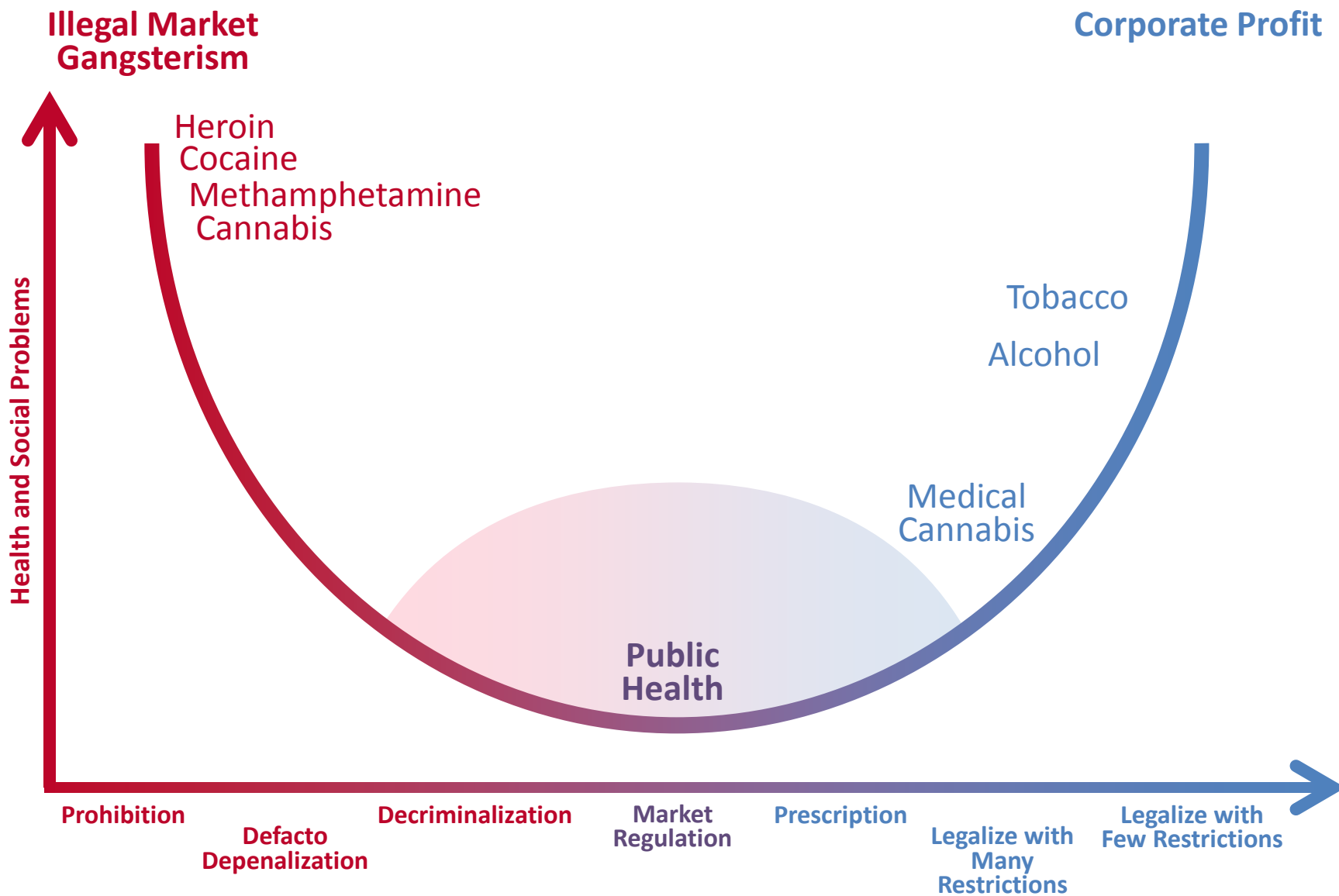
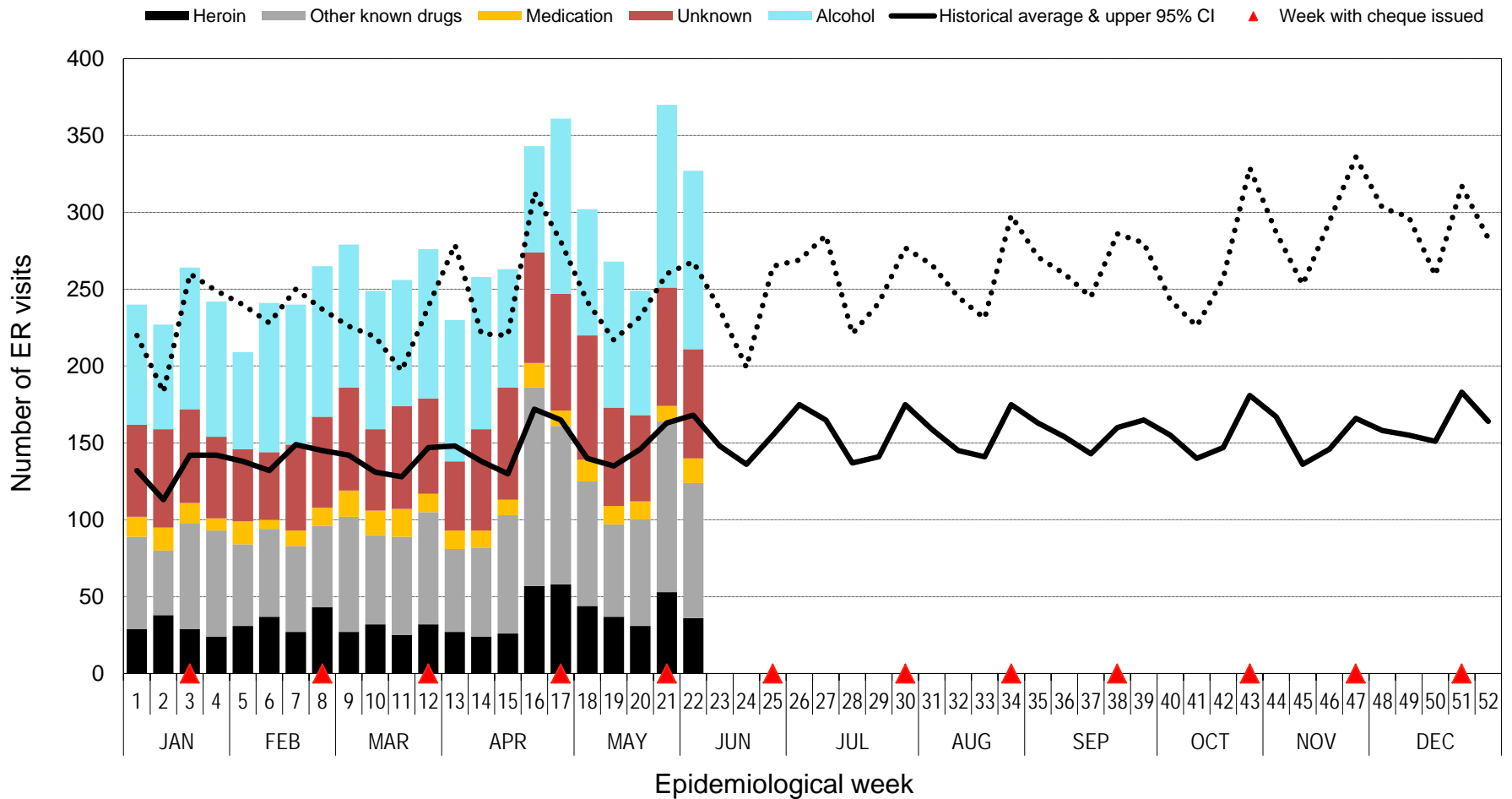


Figure 5. Number of ED visits related to overdose* by substance type and epidemiological week. Vancouver Coastal Health, 2017 compared to historical average and 95% confidence limits†



*Overdose related visits are monitored through ICD-9/10 codes and keywords search where the substance-specific terms are indicated in presenting complaint, discharge diagnosis, nature of injury and mechanism of injury.

†Includes data since 2008.

Source: PHSU Emergency Department Visits Database from CareCast System (Richmond Hospital, UBC Hospital, Vancouver General Hospital), Eclipsys System (Mount Saint Joseph Hospital, St. Paul's Hospital) and McKesson System (Lions Gate Hospital, Pemberton Health Centre, Squamish General Hospital, Whistler Health Care Centre).

Prepared by: Vancouver Coastal Health, Public Health Surveillance Unit.

BC Children's Hospital ED

BCCH sends PHSU all possible OD/poisoning ingestion visits

- From April 1, 2016 – April 26, 2017: **218 visits** reported

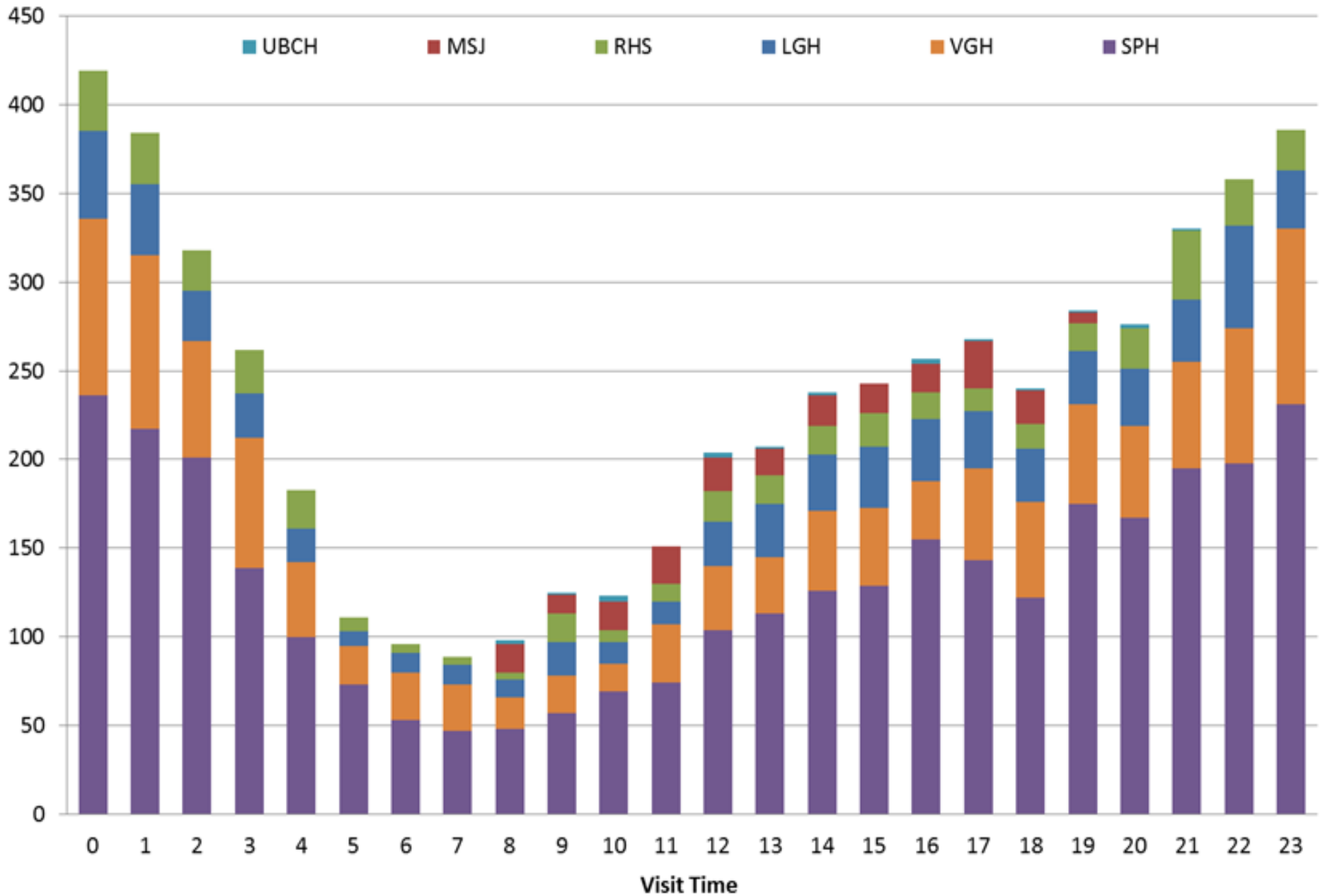
- Substances:

Alcohol (83) (38%)	Medication (81)	Marijuana (19)
Chemical (7)	MDMA (4)	Heroin (2)
Fentanyl (1)	Methamphetamine (3)	Cocaine (2)
Oxycontin (1)	Other Opioid (2)	Unknown (17)

- Age range: **10-17 years**, average age: 15 years
- Gender: **67% female**

Data source: VCH PHSU BCCH ED Surveillance, updated May 9, 2017.

**Number of Alcohol Intoxications
Presenting at VCH Urban Emergency Departments, 2016-2017 YTD**



Why the store-in-a store?

- No increase in outlet density since geographic limits will still apply
- Protecting youth:
 - Adherence to age restrictions easier to enforce
 - Less exposure to images of alcohol to youth
 - No need to exclude under-age clerks from check-out or other work in a grocery store
- No risk of expansion into cheaper imported brands of wine if trade complaints succeed.
- No risk of food promotions linked to alcohol purchase.