

2021

>> Oregon Death with Dignity Act

2021 Data Summary

Oregon
Health
Authority
PUBLIC HEALTH DIVISION

Acknowledgments

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For more information, see: <http://www.healthoregon.org/dwd>.

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Executive summary

The Oregon Death with Dignity Act (DWDA) allows terminally ill Oregonians who meet specific qualifications to end their lives through voluntary self-administration of a lethal dose of medications prescribed by a physician for that purpose.

The Act requires the Oregon Health Authority (OHA) to collect information about the patients and physicians who participate in the Act and to publish an annual statistical report. In 2021, 383 people were reported to have received prescriptions under the DWDA. As of January 21, 2022, 238 people had died in 2021 from ingesting the prescribed medications, including 20 who had received prescriptions in previous years. Demographic characteristics of DWDA patients were similar to those of previous years: most patients were aged 65 years or older (81%) and white (95%). The most common diagnosis was cancer (61%), followed by neurological disease (15%) and heart disease (12%). OHA referred one physician to the Oregon Medical Board for failure to comply with DWDA reporting requirements.

Introduction

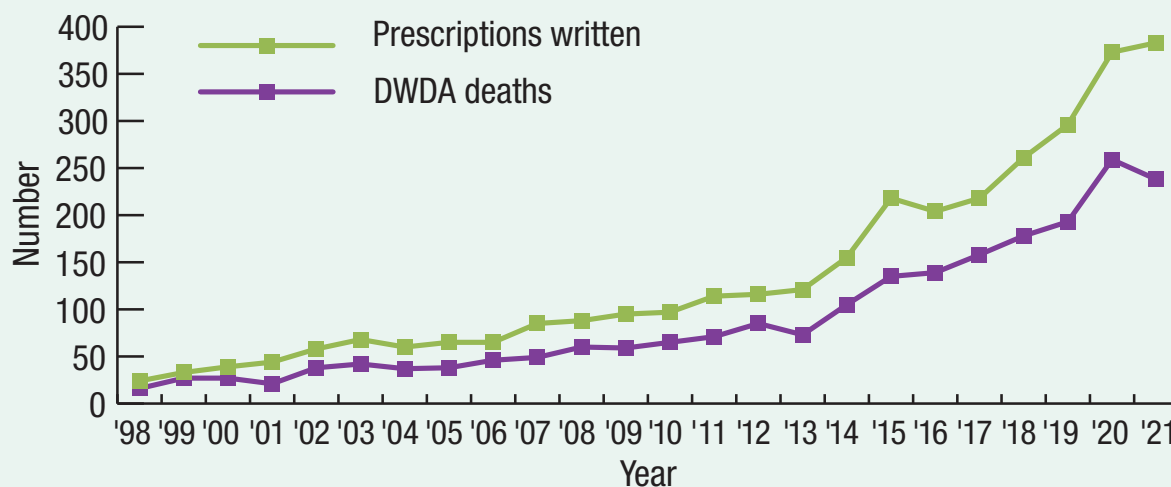
The Oregon Death with Dignity Act (DWDA) allows terminally ill Oregonians who meet specific qualifications to end their lives through voluntary self-administration of a lethal dose of medications prescribed by a physician for that purpose. The Act requires the Oregon Health Authority (OHA) to collect information about the patients and physicians who participate in the Act and to publish an annual statistical report.

The DWDA outlines specific patient requirements to participate. A patient must be 1) 18 years of age or older, 2) a resident of Oregon, 3) capable of making and communicating health care decisions to health care practitioners, and 4) diagnosed with a terminal illness that will lead to death within six months. The attending and consulting physicians must determine whether a patient meets these requirements and report that fact to OHA at the time a prescription is written. When OHA identifies any instance of noncompliance with the statutory requirements, it reports the instance to the appropriate licensing board.

Data presented in this summary, including the number of people for whom DWDA prescriptions were written (DWDA prescription recipients) and the resulting deaths from the ingestion of the medications (DWDA deaths), are based on required reporting forms and death certificates received by OHA as of January 21, 2022.

More information on the reporting process, required forms and annual reports is available at <http://www.healthoregon.org/dwd>.

Figure 1: DWDA prescription recipients and deaths*, by year, Oregon, 1998–2021



*As of January 21, 2022

See Table 2 for detailed information

Participation summary and trends

During 2021, 383 people received prescriptions for lethal doses of medications under the provisions of the Oregon DWDA, compared to 373 reported during 2020 (Figure 1). As of January 21, 2022, OHA had received reports of 238 people who died during 2021 from ingesting the medications prescribed under the DWDA, a decrease from 259 in 2020.

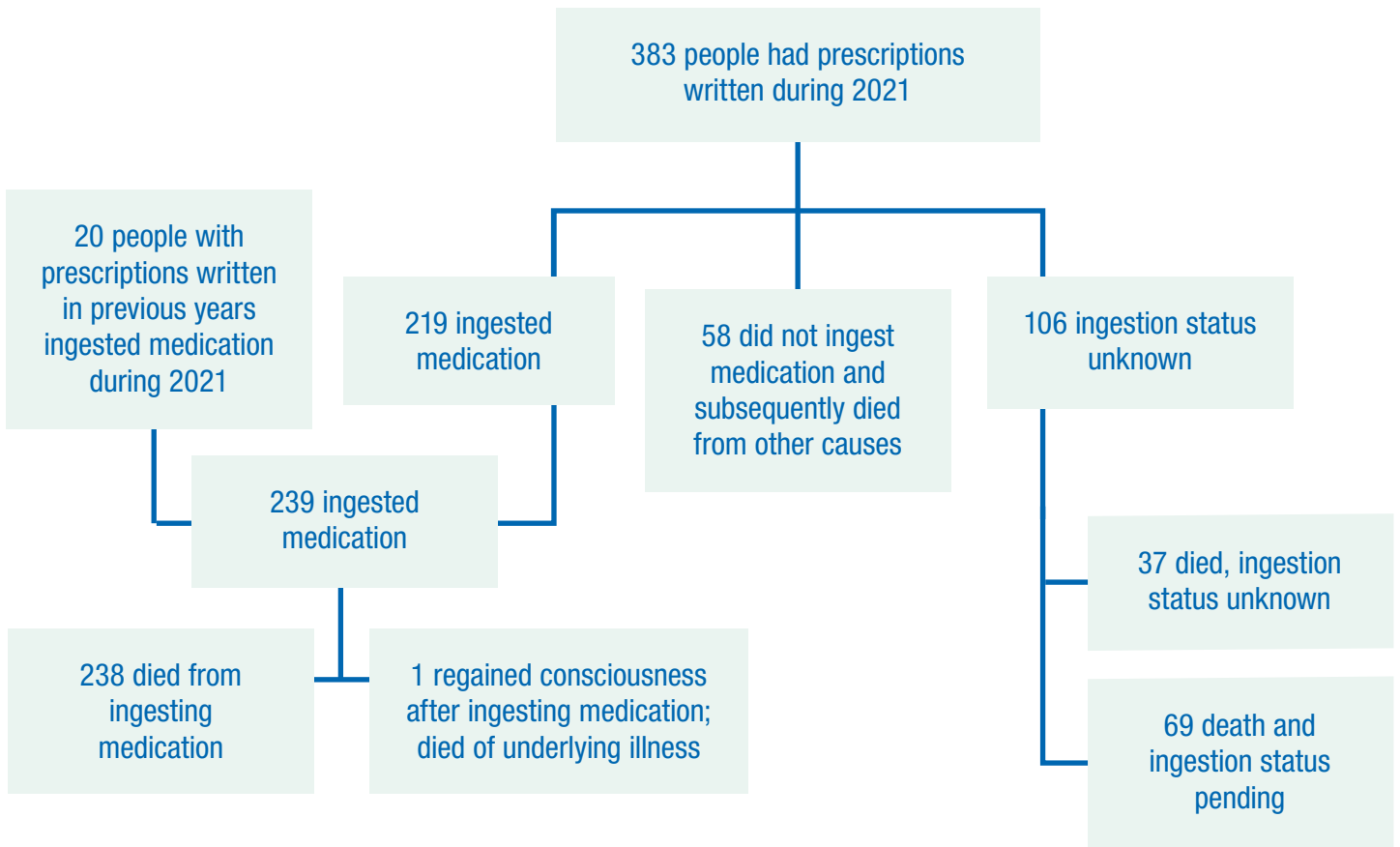
Since the law was passed in 1997, a total of 3,280 people have received prescriptions under the DWDA and 2,159 people (66%) have died from ingesting the medications. During 2021, DWDA deaths accounted for an estimated 0.59% of total deaths in Oregon.*

Figure 2 shows a summary of DWDA prescriptions written and medications ingested. Of the 383 patients for whom prescriptions were written during 2021, 219 (57%) ingested the medication; 218 died from ingesting the medication, and one patient ingested the medication but regained consciousness before dying from the underlying illness (and therefore is not counted as a DWDA death). An additional 58 (15%) did not take the medications and later died of other causes.

At the time of reporting, ingestion status was unknown for 106 patients prescribed DWDA medications in 2021. Of these, 37 patients died but follow up information is not yet available. For the remaining 69 patients, both death and ingestion status are not yet known (Figure 2). In all, nine patients (3.8%) outlived their prognosis (i.e., lived more than six months after their prescription).

* The percentage of total deaths is calculated using the total number of Oregon resident deaths in 2020 (40,226), the most recent year for which final death data are available.

Figure 2: Summary of DWDA prescriptions written and medications ingested in 2021, as of January 21, 2022



Patient characteristics

Table 1 shows the characteristics and end-of-life care for 2021 DWDA deaths, updated data for 2020 DWDA deaths, combined data for 1998–2019 DWDA deaths, and total DWDA deaths. Of the 238 DWDA deaths during 2021, most patients were aged 65 years or older (81%) and white (95%). The median age at death was 75 years. Forty-six percent of patients had at least a bachelor's degree.

Patients' underlying illnesses were similar to those of last year. The most common diagnosis was cancer (61%), followed by neurological disease (15%) and heart disease (12%).

Most patients died at home (95%), and most were enrolled in hospice care (98%). Excluding unknown cases, almost all patients (99%) had some form of health insurance. The percentage of patients with private insurance declined from 2020 (from 26% to 20%), while patients with Medicare or Medicaid insurance increased (from 74% to 79%).

As in previous years, the three most frequently reported end-of-life concerns were loss of autonomy (93%), decreasing ability to participate in activities that made life enjoyable (92%), and loss of dignity (68%).

DWDA process

A total of 133 physicians wrote 383 prescriptions during 2021 (1–47 prescriptions per physician; 77% of physicians wrote one or two prescriptions). The number of attending physicians has increased most years since 1998, and has increased at a higher rate since 2014 (Table 2). Just over half of attending and consulting physicians practiced in the Portland metropolitan area (53% and 51%, respectively), while just under 30% practiced in the other northwestern counties (Table 3). Two patients were referred for psychological or psychiatric evaluation. During 2021, OHA referred one physician to the Oregon Medical Board for failure to comply with DWDA reporting requirements.

Since 2020, the DWDA provides an exemption to the statutory waiting periods for patients expected to live fewer than 15 days after the time of their first oral request for medication. In 2021, 81 patients (21% of DWDA prescription recipients) were granted exemptions.

Prescribing physicians were present at time of death for 36 (15%) of the patients who ingested DWDA medications. Forty-one patients (17%) had other health care providers present, and volunteers were present for 43 deaths (18%). Data on time from ingestion to death are available for 155 DWDA deaths (65%) during 2021.[†] Among those patients, time from ingestion until death ranged from two minutes to 24 hours, with a median time of 32 minutes (Table 1).

The medications prescribed to DWDA patients are shown in Figure 3 below (see also Table 1). In 2021, 96% of DWDA ingestions involved one of two drug combinations: DDMA, consisting of diazepam, digoxin, morphine sulfate, and amitriptyline (57% of ingestions); or DDMA-Ph, consisting of DDMA with the addition of phenobarbital (39% of ingestions). Table 4 shows the duration from ingestion to death by medication prescribed for all known cases. Median time until death was shorter after DDMA-Ph (31 minutes) than after DDMA (45 minutes). All drug combinations have shown longer median times

[†] Includes all reports, not just those from licensed health care providers.

until death than the barbiturates, secobarbital and pentobarbital, which are no longer readily available.

Figure 3: Medication used in DWDA ingestions, 2013-2021

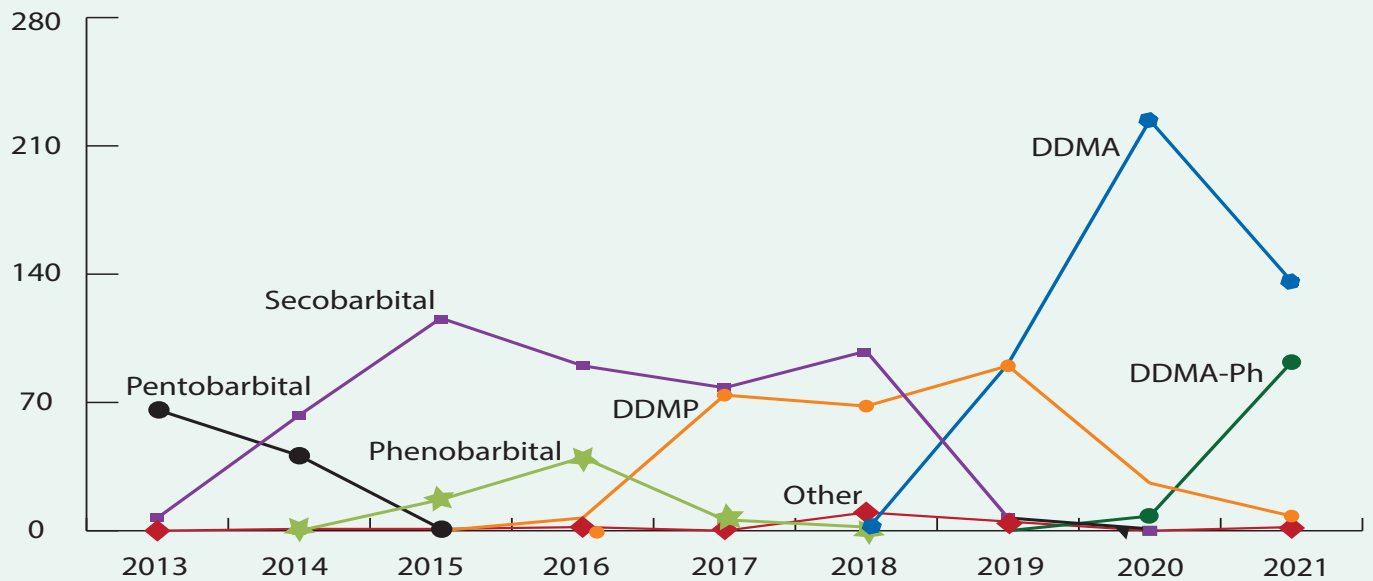


Table 1. Characteristics and end-of-life care of 2,159 DWDA patients who have died from ingesting a lethal dose of medication as of January 21, 2022, Oregon, 1998-2021

Characteristics	2021	2020	1998–2019	Total
	(N=238)	(N=259)	(N=1,662)	(N=2,159)
Sex	N (%)¹	N (%)¹	N (%)¹	N (%)¹
Male	133 (55.9)	131 (50.6)	881 (53.0)	1,145 (53.0)
Female	105 (44.1)	128 (49.4)	781 (47.0)	1,014 (47.0)
Age				
18–34	1 (0.4)	1 (0.4)	10 (0.6)	12 (0.6)
35–44	2 (0.8)	4 (1.5)	32 (1.9)	38 (1.8)
45–54	13 (5.5)	13 (5.0)	96 (5.8)	122 (5.7)
55–64	30 (12.6)	31 (12.0)	309 (18.6)	370 (17.1)
65–74	71 (29.8)	87 (33.6)	499 (30.0)	657 (30.4)
75–84	76 (31.9)	69 (26.6)	453 (27.3)	598 (27.7)
85+	45 (18.9)	54 (20.8)	263 (15.8)	362 (16.8)
Median years (range)	75 (28-101)	74 (33-99)	72 (25-102)	73 (25-102)
Race and ethnicity				
White	226 (95.0)	252 (97.3)	1,597 (96.4)	2,075 (96.3)
African American	0 (0.0)	0 (0.0)	1 (0.1)	1 (0.0)
American Indian	0 (0.0)	0 (0.0)	3 (0.2)	3 (0.1)
Asian	6 (2.5)	3 (1.2)	23 (1.4)	32 (1.5)
Pacific Islander	0 (0.0)	0 (0.0)	1 (0.1)	1 (0.0)
Other	0 (0.0)	1 (0.4)	5 (0.3)	6 (0.3)
Two or more races	0 (0.0)	1 (0.4)	7 (0.4)	8 (0.4)
Hispanic (any race)	6 (2.5)	2 (0.8)	20 (1.2)	28 (1.3)
Unknown	0	0	5	5
Marital status				
Married (including Registered Domestic Partner)	112 (47.5)	118 (45.6)	763 (46.2)	993 (46.2)
Widowed	46 (19.5)	62 (23.9)	361 (21.8)	469 (21.8)
Never married	21 (8.9)	20 (7.7)	138 (8.3)	179 (8.3)
Divorced	57 (24.2)	59 (22.8)	391 (23.7)	507 (23.6)
Unknown	2	0	9	11
Education				
8th grade or less	1 (0.4)	4 (1.5)	19 (1.2)	24 (1.1)
9th–12th grade, no diploma	7 (3.0)	9 (3.5)	70 (4.3)	86 (4.0)
High school graduate/GED	58 (24.7)	59 (22.8)	348 (21.1)	465 (21.7)
Some college	48 (20.4)	47 (18.1)	340 (20.7)	435 (20.3)
Associate degree	14 (6.0)	27 (10.4)	148 (9.0)	189 (8.8)
Bachelor's degree	56 (23.8)	57 (22.0)	403 (24.5)	516 (24.1)
Master's degree	32 (13.6)	38 (14.7)	194 (11.8)	264 (12.3)
Doctorate or professional degree	19 (8.1)	18 (6.9)	124 (7.5)	161 (7.5)
Unknown	3	0	16	19

Characteristics	2021		2020		1998–2019		Total	
	(N=238)		(N=259)		(N=1,662)		(N=2,159)	
Residence county/region²								
Multnomah	54	(22.7)	53	(20.5)	361	(21.9)	468	(21.8)
Deschutes	26	(10.9)	16	(6.2)	69	(4.2)	111	(5.2)
Lane	26	(10.9)	27	(10.5)	180	(10.9)	233	(10.8)
Clackamas	20	(8.4)	22	(8.5)	170	(10.3)	212	(9.9)
Washington	17	(7.1)	25	(9.7)	168	(10.2)	210	(9.8)
Jackson	12	(5.0)	23	(8.9)	110	(6.7)	145	(6.8)
Marion	10	(4.2)	17	(6.6)	168	(10.2)	195	(9.1)
Other northwest counties	44	(18.5)	47	(18.2)	246	(14.9)	337	(15.7)
Southern Oregon	19	(8.0)	20	(7.8)	124	(7.5)	163	(7.6)
Central Oregon / Columbia Gorge	6	(2.5)	4	(1.6)	27	(1.6)	37	(1.7)
Eastern Oregon	4	(1.7)	4	(1.6)	29	(1.8)	37	(1.7)
Unknown	0		1		10		11	
End-of-life care								
Hospice								
Enrolled	232	(97.5)	245	(94.6)	1,468	(90.2)	1,945	(91.5)
Not enrolled	6	(2.5)	14	(5.4)	160	(9.8)	180	(8.5)
Unknown	0		0		34		34	
Insurance								
Private	36	(20.6)	56	(26.3)	712	(47.1)	804	(42.3)
Medicare, Medicaid or Other Governmental	138	(78.9)	157	(73.7)	781	(51.7)	1,076	(56.7)
None	1	(0.6)	0	(0.0)	18	(1.2)	19	(1.0)
Unknown	63		46		151		260	
Underlying illness								
Cancer	146	(61.3)	172	(66.4)	1,248	(75.1)	1,566	(72.5)
Lip, oral cavity, and pharynx	3	(1.3)	7	(2.7)	34	(2.0)	44	(2.0)
Digestive organs	33	(13.9)	44	(17.0)	334	(20.1)	411	(19.0)
<i>Pancreas</i>	8	(3.4)	14	(5.4)	111	(6.7)	133	(6.2)
<i>Colon</i>	7	(2.9)	6	(2.3)	92	(5.5)	105	(4.9)
<i>Other digestive organs</i>	18	(7.6)	24	(9.3)	131	(7.9)	173	(8.0)
Respiratory and intrathoracic organs	23	(9.7)	35	(13.5)	268	(16.1)	326	(15.1)
<i>Lung and bronchus</i>	22	(9.2)	33	(12.7)	251	(15.1)	306	(14.2)
<i>Other respiratory and intrathoracic organs</i>	1	(0.4)	2	(0.8)	17	(1.0)	20	(0.9)
Melanoma and other skin	5	(2.1)	4	(1.5)	40	(2.4)	49	(2.3)
Mesothelial and soft tissue	6	(2.5)	3	(1.2)	31	(1.9)	40	(1.9)
Breast	12	(5.0)	15	(5.8)	114	(6.9)	141	(6.5)
Female genital organs	12	(5.0)	17	(6.6)	89	(5.4)	118	(5.5)
Prostate	16	(6.7)	13	(5.0)	76	(4.6)	105	(4.9)
Urinary tract	7	(2.9)	8	(3.1)	46	(2.8)	61	(2.8)

Characteristics	2021		2020		1998–2019		Total	
	(N=238)		(N=259)		(N=1,662)		(N=2,159)	
Eye, brain, central nervous system	4	(1.7)	5	(1.9)	54	(3.2)	63	(2.9)
<i>Brain</i>	4	(1.7)	4	(1.5)	49	(2.9)	57	(2.6)
<i>Eye and central nervous system</i>	0	(0.0)	1	(0.4)	5	(0.3)	6	(0.3)
Thyroid and other endocrine	1	(0.4)	0	(0.0)	7	(0.4)	8	(0.4)
Ill-defined, secondary, and unspecified sites	5	(2.1)	6	(2.3)	44	(2.6)	55	(2.5)
Lymphoma and leukemia	16	(6.7)	10	(3.9)	76	(4.6)	102	(4.7)
Other cancers	3	(1.3)	5	(1.9)	35	(2.1)	43	(2.0)
Neurological disease	35	(14.7)	21	(8.1)	186	(11.2)	242	(11.2)
Amyotrophic lateral sclerosis	22	(9.2)	11	(4.2)	135	(8.1)	168	(7.8)
Other neurological disease	13	(5.5)	10	(3.9)	51	(3.1)	74	(3.4)
Heart/circulatory disease	29	(12.2)	29	(11.2)	76	(4.6)	134	(6.2)
Respiratory disease [e.g., COPD]	15	(6.3)	17	(6.6)	91	(5.5)	123	(5.7)
Endocrine/metabolic disease [e.g., diabetes]	5	(2.1)	6	(2.3)	13	(0.8)	24	(1.1)
Gastrointestinal disease [e.g., liver disease]	1	(0.4)	5	(1.9)	12	(0.7)	18	(0.8)
Infectious disease [e.g., HIV/AIDS]	0	(0.0)	1	(0.4)	13	(0.8)	14	(0.6)
Other illnesses³	7	(2.9)	8	(3.1)	23	(1.4)	38	(1.8)
DWDA process								
Outlived 6-month prognosis	9	(3.8)	8	(3.1)	69	(4.2)	86	(4.0)
Referred for psychiatric evaluation	2	(0.8)	3	(1.2)	66	(4.0)	71	(3.3)
Patient informed family of decision ⁴	221	(95.7)	246	(97.2)	1,485	(95.7)	1,952	(95.9)
Patient died at								
Home (patient, family or friend)	226	(95.0)	239	(92.3)	1,534	(92.6)	1,999	(92.8)
Assisted living or foster care facility	11	(4.6)	15	(5.8)	77	(4.6)	103	(4.8)
Nursing home	1	(0.4)	0	(0.0)	18	(1.1)	19	(0.9)
Hospital	0	(0.0)	0	(0.0)	4	(0.2)	4	(0.2)
Hospice facility	0	(0.0)	0	(0.0)	3	(0.2)	3	(0.1)
Other	0	(0.0)	5	(1.9)	20	(1.2)	25	(1.2)
Unknown	0		0		6		6	
Lethal medication⁵								
DDMA	136	(57.1)	224	(86.5)	91	(5.5)	451	(20.9)
DDMA-Ph	92	(38.7)	8	(3.1)	0	(0.0)	100	(4.6)
DDMP-2	7	(2.9)	26	(10.0)	168	(10.1)	201	(9.3)
DDMP-1	1	(0.4)	0	(0.0)	71	(4.3)	72	(3.3)
Secobarbital	0	(0.0)	1	(0.4)	859	(51.7)	860	(39.8)
Phenobarbital	0	(0.0)	0	(0.0)	65	(3.9)	65	(3.0)
Pentobarbital	0	(0.0)	0	(0.0)	386	(23.2)	386	(17.9)
Other	2	(0.8)	0	(0.0)	22	(1.3)	24	(1.1)

Characteristics	2021		2020		1998–2019		Total	
	(N=238)		(N=259)		(N=1,662)		(N=2,159)	
End-of-life concerns⁶								
Losing autonomy	222	(93.3)	241	(93.1)	1,499	(90.2)	1,962	(90.9)
Less able to engage in activities making life enjoyable	219	(92.0)	244	(94.2)	1,484	(89.3)	1,947	(90.2)
Loss of dignity ⁷	162	(68.1)	188	(72.6)	1,132	(73.8)	1,482	(73.0)
Burden on family, friends/caregivers	129	(54.2)	139	(53.7)	775	(46.6)	1,043	(48.3)
Losing control of bodily functions	112	(47.1)	101	(39.0)	730	(43.9)	943	(43.7)
Inadequate pain control, or concern about it	64	(26.9)	87	(33.6)	443	(26.7)	594	(27.5)
Financial implications of treatment	20	(8.4)	17	(6.6)	71	(4.3)	108	(5.0)
Health care provider present (collected since 2001)	(N=238)		(N=259)		(N=1,590)		(N=2,087)	
When medication was ingested								
Prescribing physician	45		30		257		332	
Other provider, prescribing physician not present	36		60		373		469	
Volunteer	46		46		56		148	
No provider or volunteer	32		36		130		198	
<i>Unknown</i>	79		87		774		940	
At time of death								
Prescribing physician	36	(15.1)	30	(11.6)	235	(15.0)	301	(14.6)
Other provider, prescribing physician not present	41	(17.2)	56	(21.6)	383	(24.4)	480	(23.3)
Volunteer	43	(18.1)	46	(17.8)	65	(4.1)	154	(7.5)
No provider or volunteer	118	(49.6)	127	(49.0)	884	(56.4)	1,129	(54.7)
<i>Unknown</i>	0		0		23		23	
Complications⁸	(N=238)		(N=259)		(N=1,662)		(N=2,159)	
Difficulty ingesting/regurgitated	5		3		30		38	
Seizures	0		1		2		3	
Other	1		1		15		17	
None	69		69		708		846	
<i>Unknown</i>	163		185		907		1,255	
Other outcomes								
Regained consciousness after ingesting DWDA medications	1		0		8		9	
Timing of DWDA event								
Duration (weeks) of patient-physician relationship								
Median	5		9		12		11	
Range	0 - 940		0 - 1085		0 - 2138		0 - 2138	
<i>Patients with information available</i>	236		252		1,651		2,139	
<i>Patients with information unknown</i>	2		7		11		20	

Characteristics	2021	2020	1998–2019	Total
	(N=238)	(N=259)	(N=1,662)	(N=2,159)
Duration (days) between first request and death				
Median	30	34	47	43
Range	1 - 1095	0 - 1080	14 - 1503	0 - 1503
<i>Patients with information available</i>	236	257	1,662	2,155
<i>Patients with information unknown</i>	2	2	0	4
Duration (minutes) between ingestion and unconsciousness				
Median	5	5	5	5
Range	1 - 45	1 - 45	1 - 240	1 - 240
<i>Patients with information available</i>	146	130	875	1,151
<i>Patients with information unknown</i>	92	129	787	1,008
Duration (minutes) between ingestion and death				
Median	32	50	30	30
Range	2min-24hrs	6min-8hrs	1min-104hrs	1min-104hrs
<i>Patients with information available</i>	155	143	900	1,198
<i>Patients with information unknown</i>	83	116	762	961

- 1 Unknowns are excluded when calculating percentages.
- 2 **Other northwest counties:** Benton, Clatsop, Columbia, Lincoln, Linn, Polk, Tillamook, and Yamhill.
Southern: Coos, Curry, Douglas, Josephine, Klamath, and Lake.
Central/Columbia Gorge: Crook, Gilliam, Hood River, Jefferson, Sherman, Wasco, and Wheeler.
Eastern: Baker, Grant, Harney, Malheur, Morrow, Umatilla, Union, and Wallowa.
- 3 Includes deaths due to anorexia, arthritis, arteritis, blood disease, complications from a fall, hernia, kidney failure, medical care complications, musculoskeletal system disorders, sclerosis, and stenosis.
- 4 First recorded in 2001. Since then, 84 patients (4.0%) have chosen not to inform their families, and 35 patients (1.7%) have had no family to inform. Information is unknown for 18 patients.
- 5 **DDMA** is a combination of diazepam, digoxin, morphine sulfate, and amitriptyline.
DDMP-Ph is a combination of diazepam, digoxin, morphine sulfate, amitriptyline, and phenobarbital
DDMP is a combination of diazepam, digoxin, morphine sulfate, and propranolol. DDMP-1 contains 10g of morphine sulfate; DDMP-2 contains 15g.
Phenobarbital is dispensed as a combination of phenobarbital, chloral hydrate, and morphine sulfate.
- 6 Affirmative answers only (“Don’t know” included in negative answers). Categories are not mutually exclusive.
- 7 First asked in 2003. Data available for 2,030 patients.
- 8 Information about complications is reported only when a physician or another health care provider is present at the time of death.

Table 2. Number of DWDA prescription recipients, DWDA deaths, and attending physicians, 1998-2021

Year	Prescription recipients	DWDA deaths	Attending physicians
1998	24	16	n/a
1999	33	27	n/a
2000	39	27	22
2001	44	21	33
2002	58	38	33
2003	68	42	42
2004	60	37	40
2005	65	38	40
2006	65	46	41
2007	85	49	46
2008	88	60	60
2009	95	59	64
2010	97	65	59
2011	114	71	62
2012	116	85	62
2013	121	73	62
2014	155	105	83
2015	218	135	106
2016	204	139	101
2017	218	158	92
2018	261	178	108
2019	296	193	113
2020	373	259	142
2021	383	238	133
Total	3,280	2,159	

Table 3. Primary location of practice, DWDA physicians, 2021

Region ²	Attending physicians		Consulting physicians	
	N	(%) ¹	N	(%) ¹
Metro counties (Clackamas, Multnomah, Washington)	70	(52.6)	100	(51.0)
Northwest Oregon (excludes metro counties)	38	(28.6)	57	(29.1)
Southern Oregon	18	(13.5)	26	(13.3)
Central Oregon / Columbia Gorge	4	(3.0)	11	(5.6)
Eastern Oregon	3	(2.3)	2	(1.0)
<i>Unknown</i>	<i>0</i>		<i>2</i>	

1 Unknowns are excluded when calculating percentages.

- 2 **Northwest Oregon:** Benton, Clatsop, Columbia, Lane, Lincoln, Linn, Marion, Polk, Tillamook, and Yamhill.
Southern Oregon: Coos, Curry, Douglas, Jackson, Josephine, Klamath, and Lake.
Central / Columbia Gorge: Crook, Deschutes, Gilliam, Hood River, Jefferson, Sherman, Wasco and Wheeler.
Eastern Oregon: Baker, Grant, Harney, Malheur, Morrow, Umatilla, Union and Wallowa.

Table 4. Duration between ingestion and death, DWDA deaths, 2001–2021

Drug(%)	Total	Unknown duration	Known duration	<1hr	1– 6 hours	>6 hours	Median (minutes)	Mean (minutes)	Range	Regained consciousness ⁶
Secobarbital ¹	792	403	389 (100.0)	293 (75.3)	69 (17.7)	27 (6.9)	25	137	2min - 83 hrs	5
DDMA ²	451	166	285 (100.0)	166 (58.2)	114 (40.0)	5 (1.8)	45	74	1min - 19 hrs	1
Pentobarbital ¹	384	156	228 (100.0)	188 (82.5)	31 (13.6)	9 (3.9)	20	97	1min - 104 hrs	0
DDMP-2 ³	201	96	105 (100.0)	46 (43.8)	36 (34.3)	23 (21.9)	85	254	2min - 47 hrs	2
DDMA-Ph ⁴	100	34	66 (100.0)	46 (69.7)	19 (28.8)	1 (1.5)	31	58	5min - 7 hrs	0
DDMP-1 ³	72	47	25 (100.0)	12 (48.0)	7 (28.0)	6 (24.0)	77	223	10min - 21 hrs	0
Phenobarbital ⁵	65	43	22 (100.0)	4 (18.2)	13 (59.1)	5 (22.7)	73	439	20min - 72 hrs	0
Other	24	6	18 (100.0)	7 (38.9)	8 (44.4)	3 (16.7)	71	237	10min - 24 hrs	1
TOTAL	2,089	951	1,138 (100.0)	762 (67.0)	297 (26.1)	79 (6.9)	30	129	1min - 104 hrs	9

1 Pentobarbital has been unavailable for DWDA use since 2015; secobarbital since 2019.

2 DDMA is a combination of diazepam, digoxin, morphine sulfate, and amitriptyline.

3 DDMP is a combination of diazepam, digoxin, morphine sulfate, and propranolol. DDMP-1 contains 10g of morphine sulfate; DDMP-2 contains 15g.

4 DDMA-Ph is a combination of diazepam, digoxin, morphine sulfate, amitriptyline, and phenobarbital.

5 Phenobarbital is dispensed as a combination of phenobarbital, chloral hydrate, and morphine sulfate.

6 Patients who regained consciousness after ingestion are not considered DWDA deaths, and are not included in the other columns in this table.

NOTE: Table includes all reported durations, not just those from licensed providers. Complete information not available before 2001. Unknown values are excluded when calculating percentages.



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