

JANUARY-MARCH 2022 SELF-INFLICTED INJURY UPDATE

North Carolina Emergency Department (ED) Visits for Self-Inflicted Injury, Jan-Mar 2022 Update

2,679 Self-inflicted injury ED visits from Jan-Mar 2022 compared to **2,773** from Jan-Mar 2021

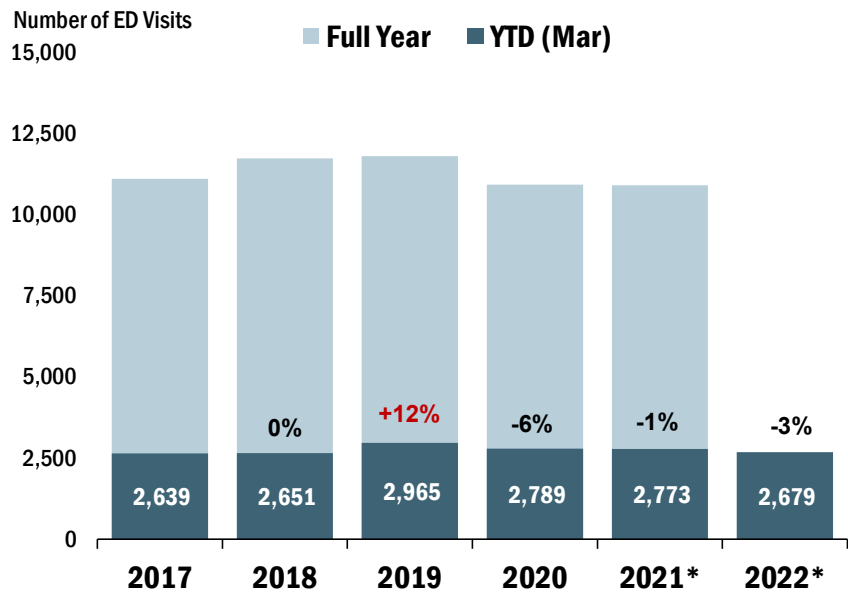
^Report is based on initial encounter ICD-10-CM self-inflicted injury codes. See the [CSTE Self-Harm Indicator](#) for comprehensive list of codes.

Note: Report is restricted to N.C. residents ages 10 and older and does not include visits resulting in death.

Data Source: NC DETECT, ED visits; data as of 07/13/2022

Total self-inflicted injury ED visits through March 2022 were similar to those in 2021.

Self-Inflicted Injury ED Visits: 2017-2022*

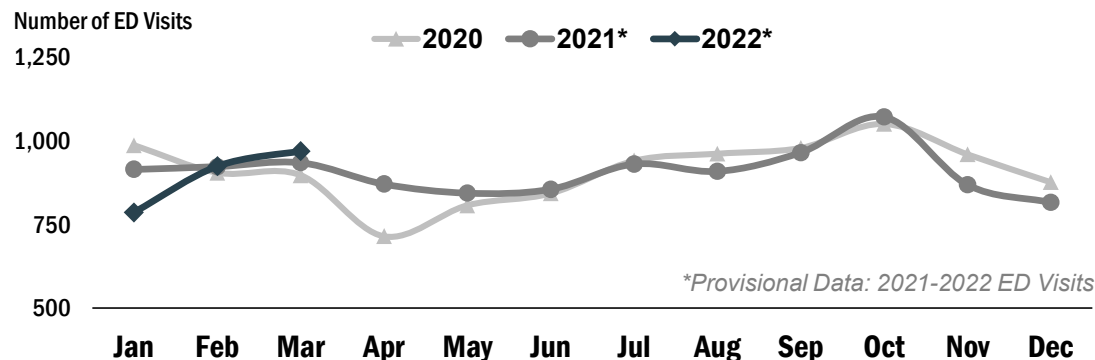


YTD: Year to Date

*Provisional Data: 2021-2022 ED Visits

Percent change: YTD total compared to YTD total of previous year

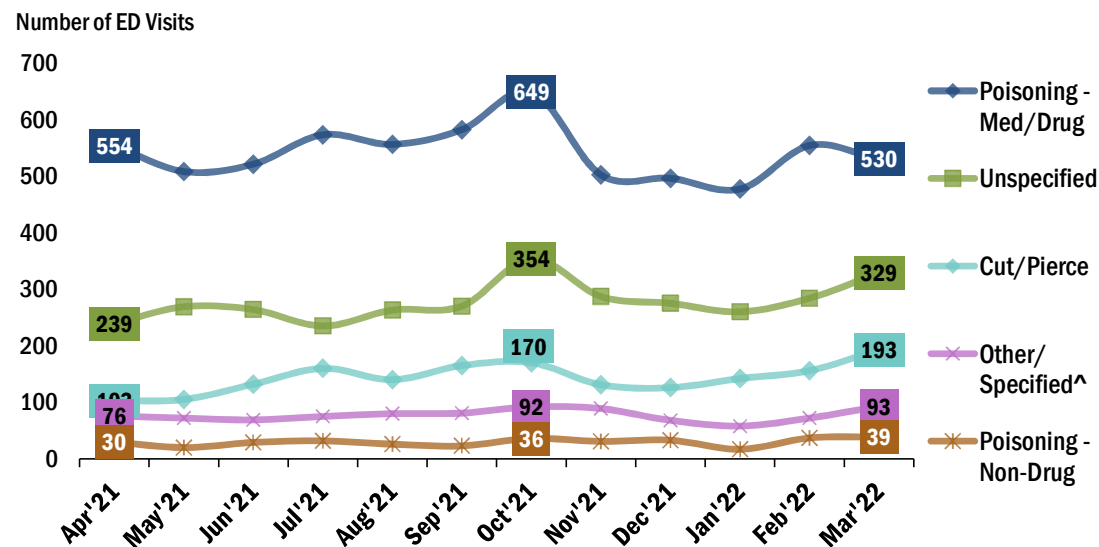
Self-Inflicted Injury ED Visits by Month: 2020-2022*



*Provisional Data: 2021-2022 ED Visits

Most self-inflicted injury ED visits during Jan-Mar 2022* were due to medication/drug poisoning (58.3%).

Last 12 Months of Self-Inflicted Injury ED Visits by Injury Mechanism: Apr 2021-Mar 2022*

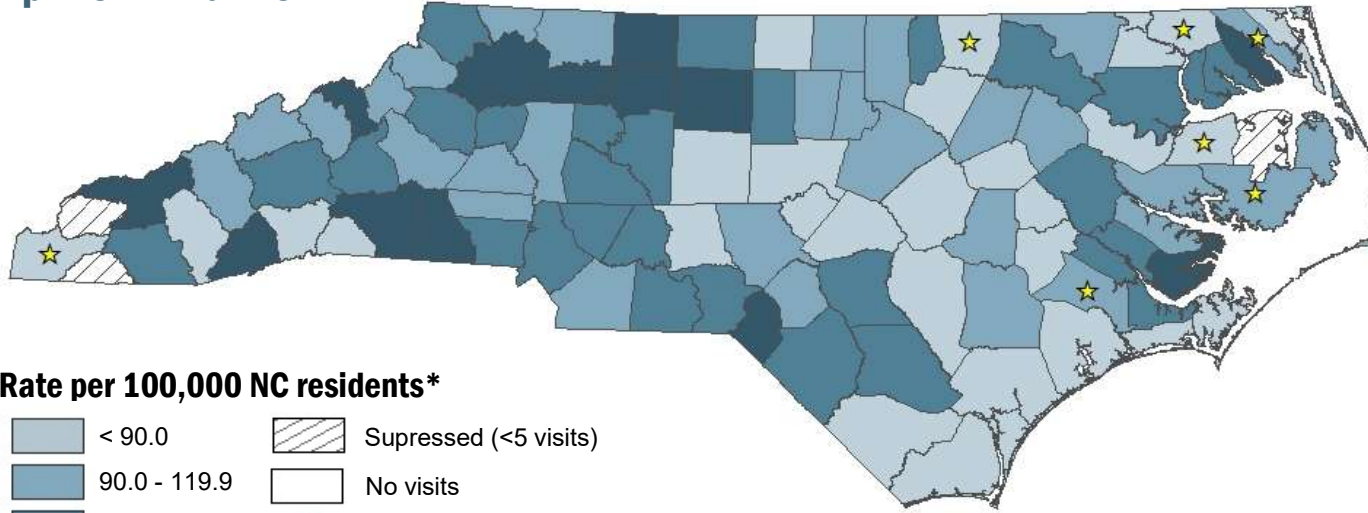


Injury mechanisms shown are not mutually exclusive and do not sum to the total number of self-inflicted injuries. For more information, see the IVPB [Injury Surveillance Technical Notes](#) Document.

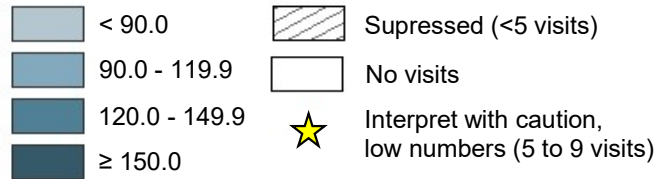
^Other specified includes suffocation (12%), fire/burn (10%), and firearm (4%); no additional detail was available for 65% of suicides with a code for other specified mechanism.

*Provisional Data: 2021-2022 ED Visits

Last 12 Months Self-Inflicted Injury ED Visit Rates by County of Residence: Apr 2021-Mar 2022*



Rate per 100,000 NC residents*



*Provisional Data: 2021-2022 ED Visits

Highest County Self-Inflicted Injury ED Visit Rates from the Last 12 Months, ≥10 visits: Apr 2021-Mar 2022*

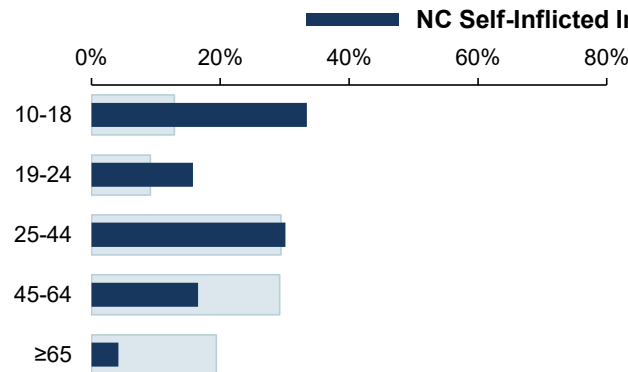
County	Count	Rate per 100,000†
Mitchell	25	185.8
Rutherford	109	181.4
Forsyth	569	168.5
Pasquotank	60	168.4
Surry	70	164.2
Wilson	54	163.6
Scotland	49	162.5
Pamlico	19	161.3
Yancey	15	161.0
Guilford	745	156.3
Cleveland	136	155.7
Transylvania	57	153.4
Statewide	10,811	115.5

†Please note that rates are calculated using the most recent 12 months of data and 2020 population estimates. Counties listed in "Highest Monthly Rates of Self-Inflicted Injury^ ED visits" table will likely change each quarter.

Quarterly Demographics of Self-Inflicted Injury ED Visits Compared to Overall NC Population Estimates

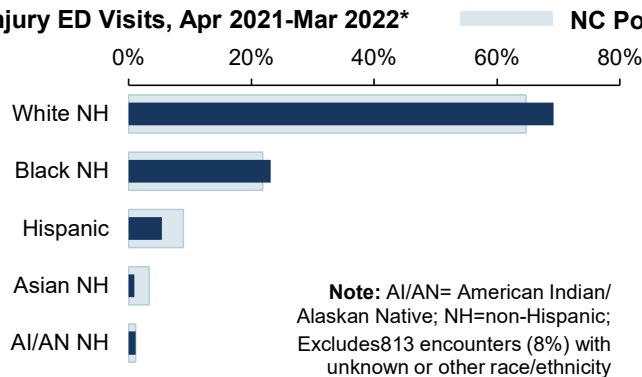
Most visits occurred among those ages 10-18 (33%) despite them making up only 13% of the population.

ED Visits by Age Group



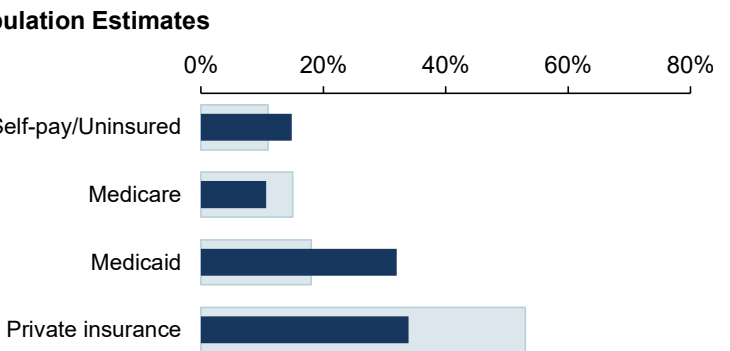
Most visits were among non-Hispanic (NH) white residents (69%) followed by NH Black residents (23%).

ED Visits by Race/Ethnicity



Most visits occurred among those with private insurance (34%) followed by those with Medicaid (32%).

ED Visits by Insurance Coverage

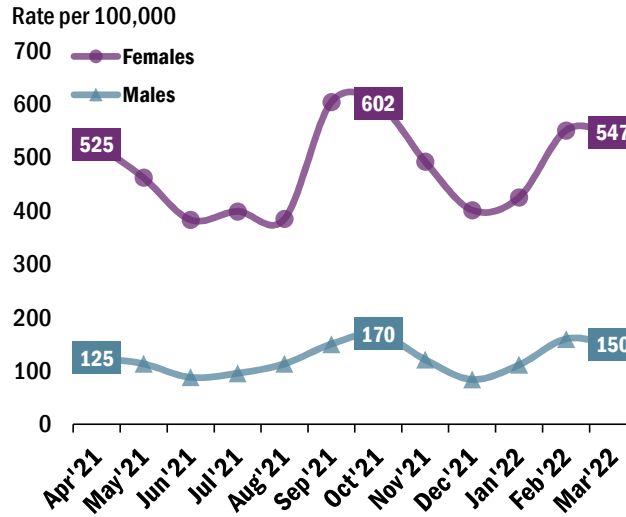


*Provisional Data: 2021-2022 ED Visits

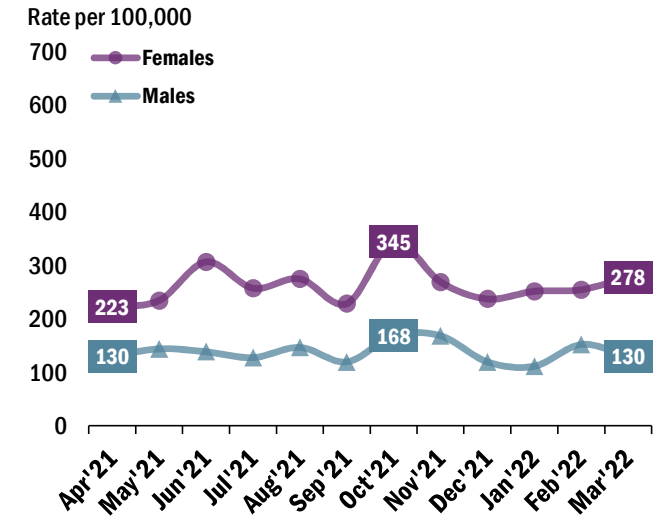
Rates of self-inflicted injury ED visits from Jan-Mar 2022* were highest among females ages 10-18 (507.7 per 100,000) followed by females ages 19-24 (261.6 per 100,000).

Among males, rates of self-inflicted injury ED visits were highest among those ages 10-18 (140.6 per 100,000).

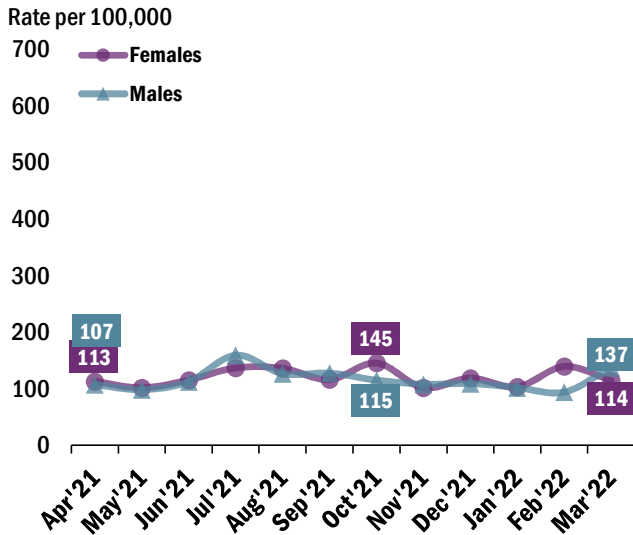
Ages 10-18



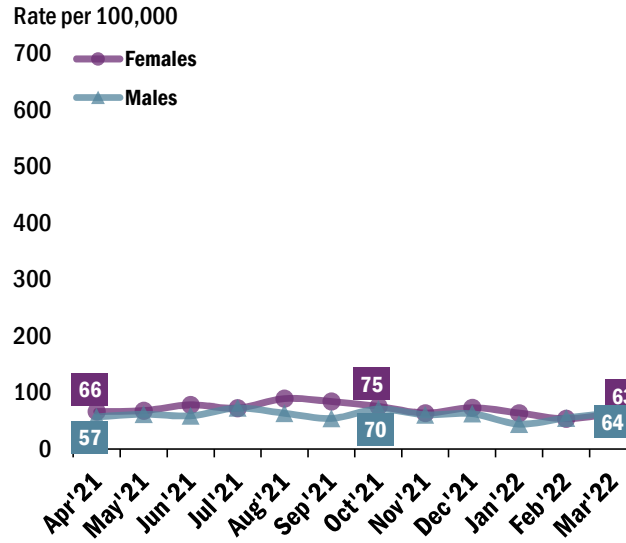
Ages 19-24



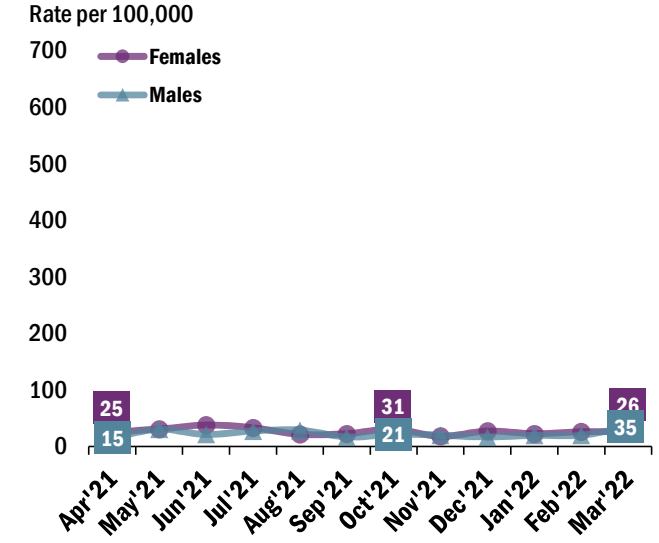
Ages 25-44



Ages 45-64



Ages 65 and Older



Data Sources: ED Data-NC DETECT is North Carolina's statewide syndromic surveillance system. ED visit data from NC DETECT are provisional and should not be considered final. For training on NC DETECT, contact ising@ad.unc.edu; **Population Data**-National Center for Health Statistics; **Insurance coverage Data**-Kaiser Family Foundation estimates based on the Census Bureau's American Community Survey, 2008-2017, www.kff.org/other/state-indicator/total-population. Self-pay ED visits are compared to the uninsured overall population estimate category.

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*Provisional Data: 2021-2022 ED Visits



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**
Division of Public Health

