

OCTOBER-DECEMBER 2024 SELF-INFLICTED INJURY UPDATE

North Carolina Emergency Department (ED) Visits for Self-Inflicted Injury, Oct-Dec 2024 Update

2,979 Self-inflicted injury ED visits from Oct-Dec 2024 compared to **2,984** from Oct-Dec 2023

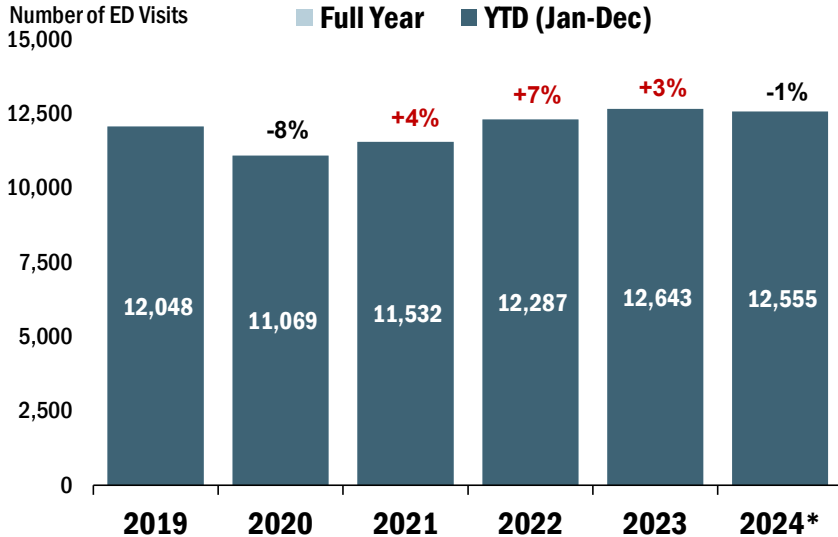
^Report is based on initial encounter ICD-10-CM self-inflicted injury codes. See the [CSTE Self-Harm Indicator](#) for comprehensive list of codes.

Note: Report is restricted to NC residents ages 10 and older and does not exclude visits resulting in death.

Data Source: NC DETECT, ED visits; data as of 02/13/2025

Total self-inflicted injury ED visits in 2024 decreased by 1% compared to 2023.

Self-Inflicted Injury ED Visits: 2019-2024*



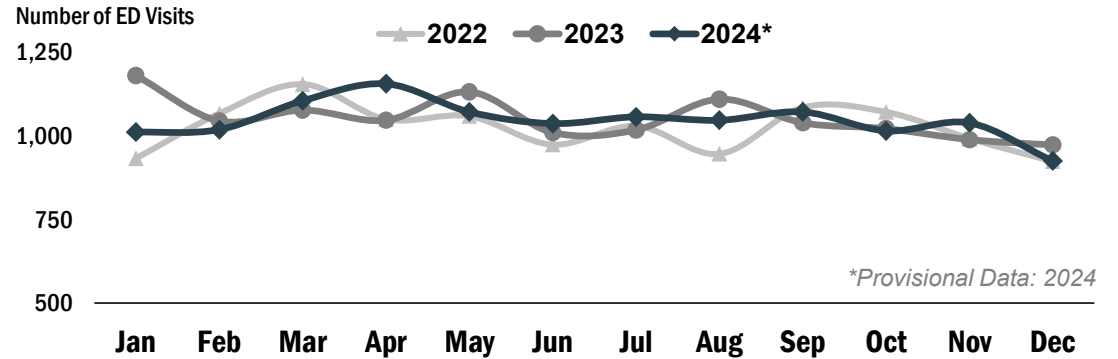
Note: There was an 18% decrease in overall ED utilization (for any cause) from 2019-2020. ED visits remained 11% lower in 2021 and 3% lower in 2022* compared to 2019.

YTD: Year to Date

*Provisional Data: 2024

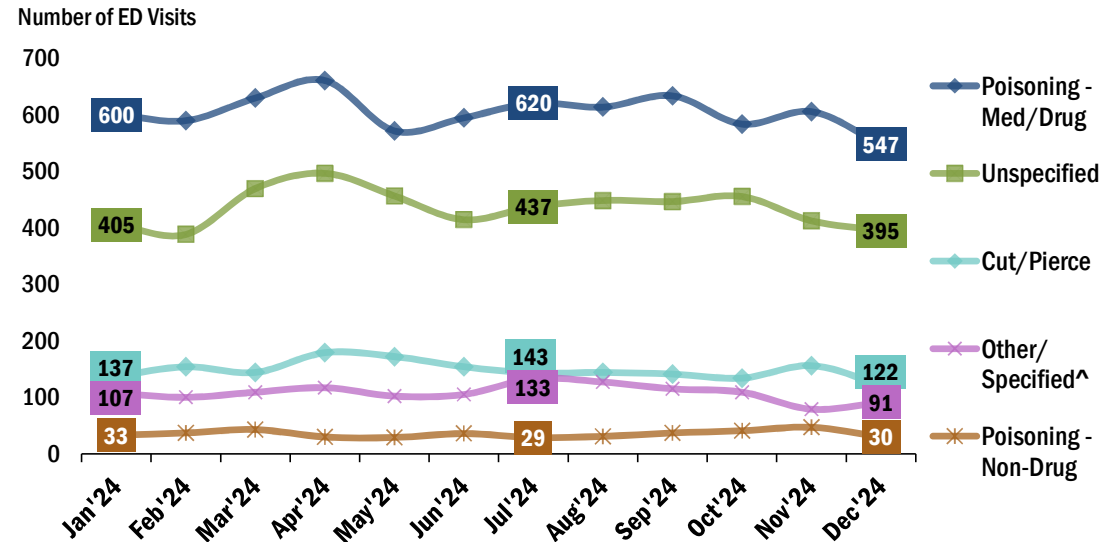
Percent change: YTD total compared to YTD total of previous year

Self-Inflicted Injury ED Visits by Month: 2022-2024*



Most self-inflicted injury ED visits during Oct-Dec 2024* were due to medication/drug poisoning (58.2%).

Last 12 Months of Self-Inflicted Injury ED Visits by Injury Mechanism: Jan 2024-Dec 2024*

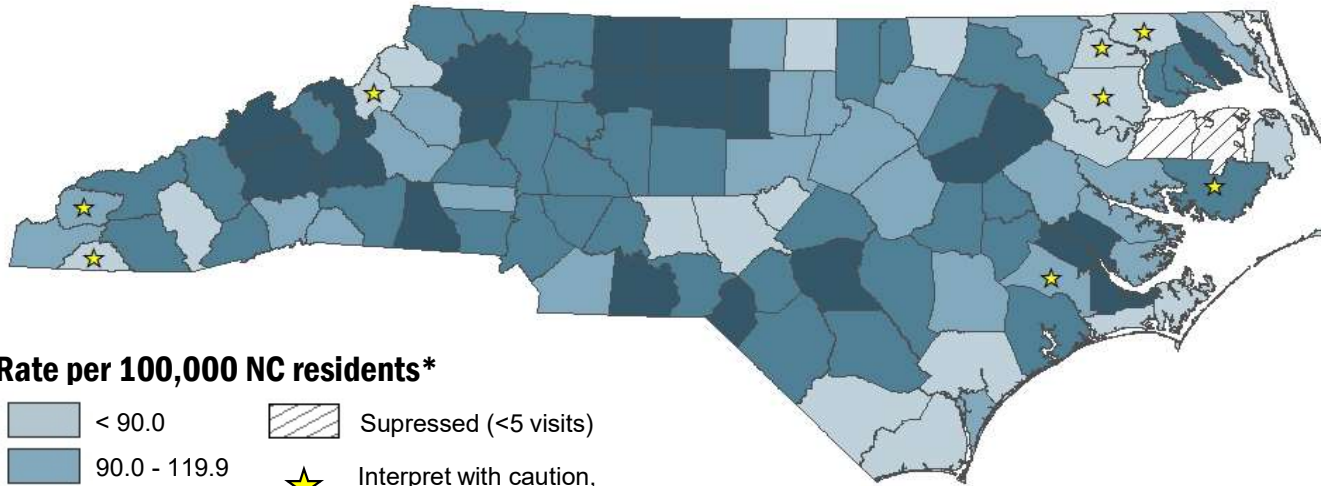


Injury mechanisms shown are not mutually exclusive and do not sum to the total number of self-inflicted injuries. For more information, see the IVPB [Injury Surveillance Technical Notes](#) Document.

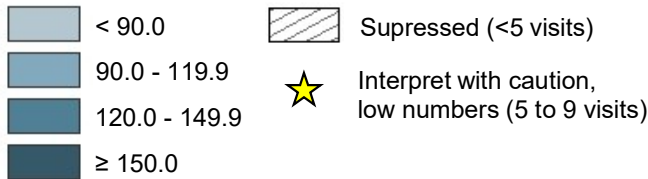
^Other specified includes fire/burn (10%), suffocation (8%), and firearm (6%); no additional detail was available for 66% of self-inflicted injuries with a code for other specified mechanism.

*Provisional Data: 2024

Last 12 Months Self-Inflicted Injury ED Visit Rates by County of Residence: Jan 2024-Dec 2024*



Rate per 100,000 NC residents*



*Provisional Data: 2024

Highest County Self-Inflicted Injury ED Visit Rates from the Last 12 Months, ≥10 visits: Jan 2024-Dec 2024*

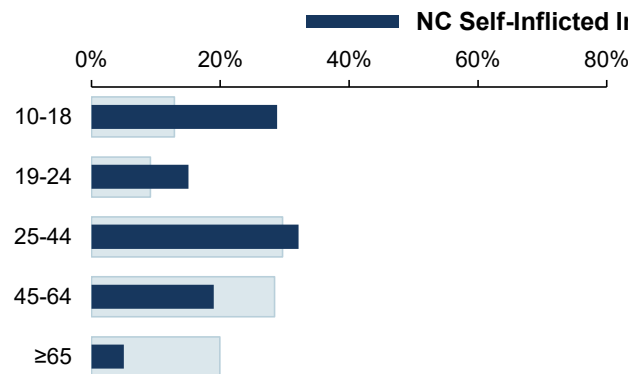
| County | Count | Rate per 100,000† |
|------------------|---------------|-------------------|
| Anson | 52 | 266.9 |
| McDowell | 93 | 229.5 |
| Alexander | 73 | 222.5 |
| Edgecombe | 91 | 211.9 |
| Scotland | 62 | 205.9 |
| Buncombe | 498 | 198.8 |
| Wilson | 133 | 191.4 |
| Forsyth | 664 | 191.4 |
| Cumberland | 542 | 187.4 |
| Pasquotank | 66 | 179.7 |
| Madison | 35 | 174.1 |
| Guilford | 835 | 171.6 |
| Statewide | 12,555 | 130.9 |

†Please note that rates are calculated using the most recent 12 months of data and 2023 US Census 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

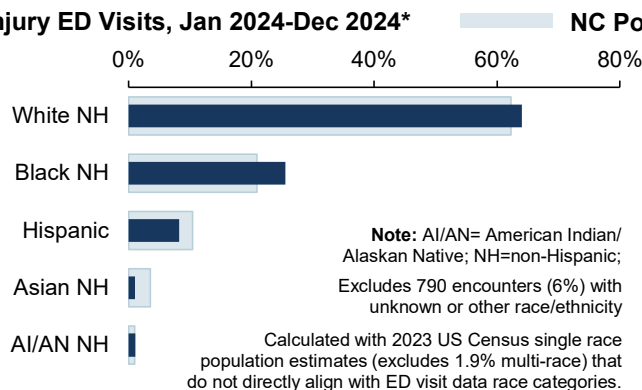
Most visits occurred among those ages 25-44 (32%) despite them making up only 30% of the population.

ED Visits by Age Group



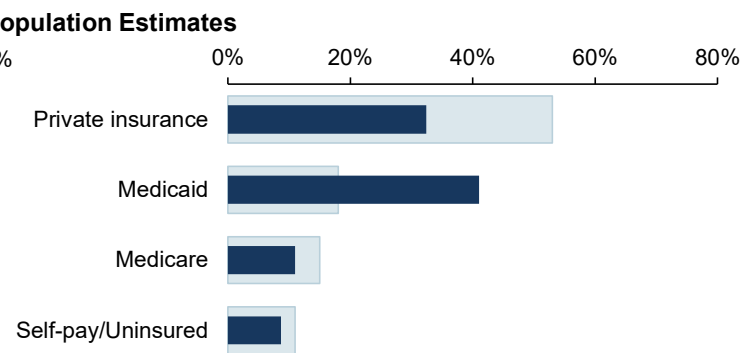
Most visits were among non-Hispanic (NH) White residents (64%) followed by NH Black residents (26%).

ED Visits by Race/Ethnicity



Most visits occurred among those with Medicaid (41%) followed by those with private insurance (32%).

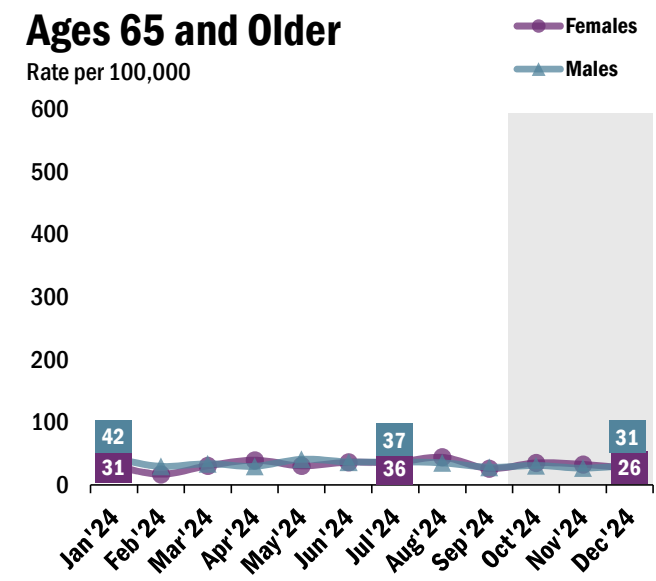
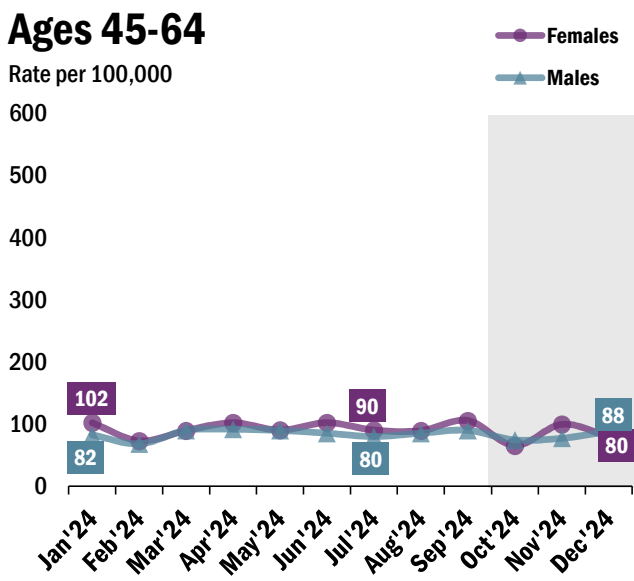
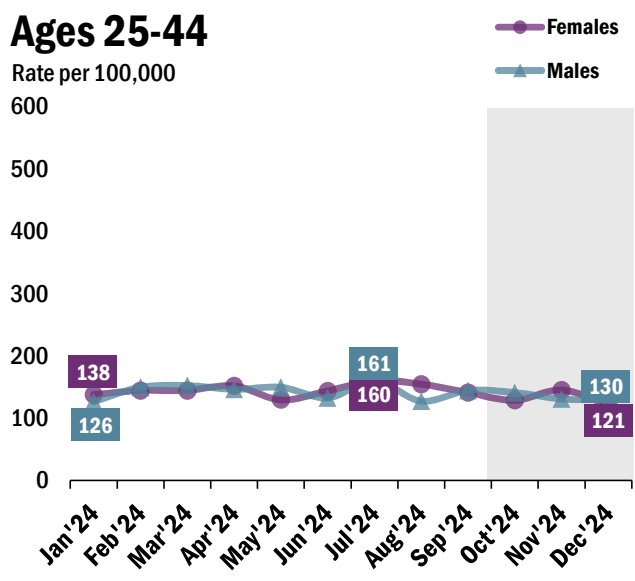
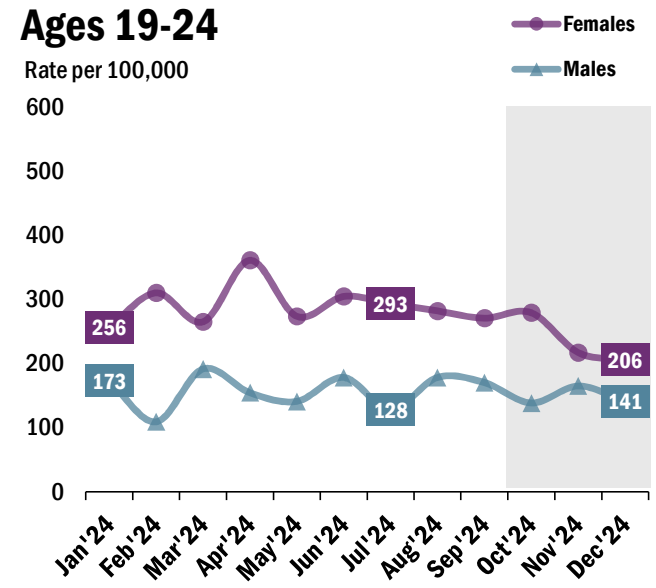
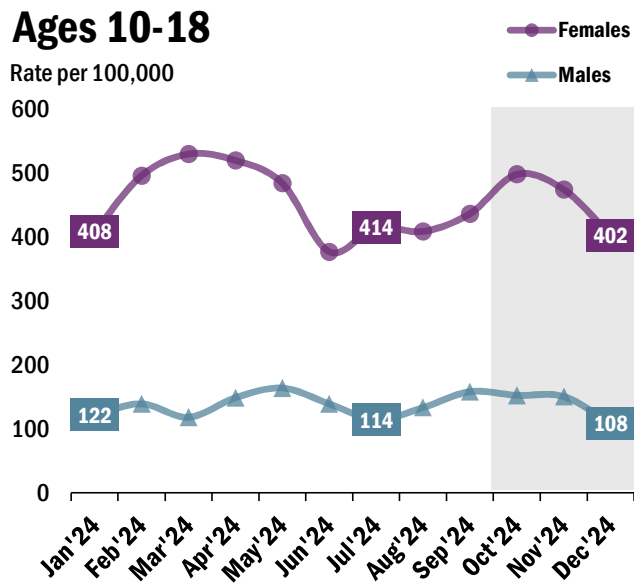
ED Visits by Insurance Coverage



*Provisional Data: 2024

Rates of self-inflicted injury ED visits from Oct-Dec 2024* were highest among females ages 10-18 (458.0 per 100,000) followed by females ages 19-24 (233.8 per 100,000).

Among males, rates of self-inflicted injury ED visits were highest among those ages 19-24 (148.0 per 100,000).



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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