

Trends in Death Associated With Abuse of Volatile Substances 1971-2007

Division of Community Health Sciences

M.E. Field-Smith B.K. Butland J.D. Ramsey H.R. Anderson

Report 22

July 2009

Published by: St George's, University of London Cranmer Terrace LONDON SW17 0RE

Telephone: 020 8725 2675

e-mail: icdp@sgul.ac.uk

This report is available on our website where previous reports can be found:

www.vsareport.org

John Ramsey is director of TICTAC Communications Ltd at St George's, University of London

ISBN 978 1 8981 8329 7

TABLE OF CONTENTS

		Page	2
INTRODUCTION	I	3	
ACKNOWLEDG	EMENTS	5	
KEY FINDINGS I	FOR 2007	6	
COMMENTARY		7	
BIBLIOGRAPHY	,	19	
STATISTICAL M	ETHODS	21	
Figure 1	Flow chart of collection and dissemination of data	22	
Figure 2	VSA Deaths by Year, All Ages: 1971 - 2007	23	
Figure 3	VSA Deaths by Year, All Ages: 1993 - 2007	24	
Table 1	Age Distribution of Deaths: 1971 - 2005, 2006 and 2007	25	
Figure 4	Age Distribution of Deaths: 1971 - 2006 and 2007	26	
Figure 5	Cumulative Distribution of Age at Death, All Ages: 1971 - 2006 and 2007	27	
Figure 6	Age Distribution of Deaths, All Age-groups: 1971 - 2007	28	
Table 2	Sex Distribution of Deaths: 1971 – 1997 and each year to 2007	29	
Figure 7	Sex Distribution of Deaths, by Age: 1983-2007	30	
Figure 8	VSA Mortality Rates, Ages 10-14, by Sex: 1998 - 2007	31	
Figure 9	VSA Mortality Rates, Ages 15-19, by Sex: 1998 - 2007	32	
Table 3	Number of Deaths in UK in 2007 for Age-groups 10-14 and 15 -19 years: All Causes, Traffic Accidents, Drug Misuse and VSA	33	
Table 4	Number of VSA deaths by Government Office Region (England) and Country: 1971 – 1997 and each year to 2007	34	
Table 5	Standardised Mortality Ratios (SMRs) by Govt Office Region (England) and Country, adjusted for Age and Sex: 1998 - 2007	35	
Figure 10	Map showing Standardised Mortality Ratios for each Govt Office Region (England) and Country, All Ages: 1998 - 2007	36	

Table 6	Substances Abused, All Ages: 1971 – 1997 and each year to 2007	37
Figure 11	Substances Associated with Fatal Abuse, All Ages: 1998 - 2007	38
Figure 12	Substances Associated with Fatal Abuse, under 18: 1998 - 2007	39
Table 7	Primary Substances Abused, All Ages: each year 1998 - 2007	40
Table 8	Product Abused by Substance: 1971 - 2007	41
Table 9	Product Abused by Substance: 2007	42
Table 10	Deaths Associated with Cigarette Lighter Refills: 1971 - 1997 and each year to 2007	43
Table 11	Methods of Administration of Primary Substances: 1971 - 2005, 2006 and 2007	44
Table 12	Methods of Administration for each Substance Group: 1971 - 2005, 2006 and 2007	45
Table 13	Principal Mechanism of Death, All Ages: each year 1998 - 2007	46
Figure 13	Principal Mechanism of Death, All Ages: 1998 - 2007	47
Figure 14	Place of Death: 2007	48
Figure 15	Place of Abuse: 2007	49
Figure 16	Place of Abuse, All Ages, by Sex: 1998 - 2007	50
Figure 17	Place of Abuse, All Ages: each year 1998 - 2007	51
Table 14	Place of Abuse, by Age-groups: 1998 - 2007	52
Table 15	Number of Suicides Associated with a Volatile Substance: 1983 – 2007	53
Figure 18	Age and Sex Distribution of Suicides: 1983 - 2007	54

INTRODUCTION

This is the twenty-second annual statistical summary of data on trends in deaths associated with the deliberate inhalation of volatile substances. Data for 2007 are included here for the first time, together with updated information for earlier years, so Report 22 supersedes all previous reports. There is necessarily a delay of more than twelve months between the end of a calendar year and publication of our annual report. This is to allow time for details to become available from HM Coroners and from the Office for National Statistics (ONS), and the General Register Offices for Scotland and Northern Ireland.

The terms "glue sniffing" and "solvent abuse", which were commonly used in connection with volatile substance abuse, have for some years been inadequate to describe the problem, hence our adoption of the term "volatile substance abuse". Another term widely used is "inhalant abuse". We define volatile substance abuse (VSA) as the deliberate inhalation of a volatile substance (gas, aerosol propellants, solvents in glue and other solvents) to achieve a change in mental state.

Our data set includes deaths from 1971 onwards, and our methods of data collection have been stable and systematic since 1983. For some analyses all deaths have been used. For examining some time trends only the period of stable data collection has been used (1983-2007), whilst for others only the most recent ten-year period has been included.

Details of statistical methods used in the analyses may be found on page 21.

Our information for England and Wales is provided from the following main sources: HM Coroners, Office for National Statistics, the Medical Toxicology Laboratory, Guy's and St Thomas' Hospital Trust, and press clippings agencies. For Scotland, information is supplied by the Crown Office and the General Register Office for Scotland. Details of Northern Ireland deaths are provided by the State Pathologist's Department, the Coroners Service for Northern Ireland, and the General Register Office for Northern Ireland. The Deputy Viscount in Jersey, HM Greffier in Guernsey, and the High Bailiff in the Isle of Man supply information for their areas.

Data on "all cause" mortality and population estimates are supplied by ONS, the General Register Office for Scotland and the Northern Ireland Statistics and Research Agency.

The criteria used for classifying deaths and details of how we collect the data may be found in some of the publications listed on page 19. Figure 1 shows the flow of collection and dissemination of data.

ACKNOWLEDGEMENTS

The register of Volatile Substance Abuse deaths is funded by the Department of Health.

This report is based upon earlier reports and we acknowledge the contribution made by previous members of the research study, particularly Jennifer Taylor and Martin Bland.

For England and Wales we wish to thank all HM Coroners and their staff who notify cases to us, the Office for National Statistics for providing death certificates, Peter Streete at the Medical Toxicology Laboratory, Guy's and St Thomas' NHS Foundation Trust and the British Aerosol Manufacturers' Association for giving us access to their information, and the Health and Safety Executive and the Railways Inspectorate for liaison over workplace deaths where necessary.

For Scotland, we wish to thank the Crown Office for providing information on Scottish deaths, and the General Register Office for Scotland for providing death certificates.

For Northern Ireland, we wish to thank the staff of the State Pathologist's Department for ascertainment, the General Register Office for Northern Ireland for death certificates, and the staff of the Coroners Service for Northern Ireland.

We wish to thank the Deputy Viscount in Jersey, and HM Greffier in Guernsey whose assistance enables us to include information for the Channel Isles, and the High Bailiff and Coroner of Inquests for the Isle of Man.

John Corkery and Kapil Ahmed from the International Centre for Drug Policy (ICDP) at St George's, University of London assisted in the preparation of this report. The next report (No 23) will be produced by the ICDP, who have assumed responsibility for the VSA Mortality Project.

5

KEY FINDINGS FOR 2007

- There were 58 deaths associated with volatile substance abuse in 2007, compared with 51 deaths in 2006, bringing the total number of VSA deaths in the UK since 1971 to 2,308.
- Since 1992 there has been a significant fall in deaths, from an average of 76 per year in 1993-1999, to an average of 56 per year in 2000-2007.
- Among adults of 20 years and over there was an increase in 2007 to 48 deaths, the highest number recorded to date in this age-group.
- In under-18 year olds there were seven VSA deaths in 2007, a similar number to 2006 and 2005. Of these seven deaths, three were associated with butane cigarette lighter refills, the sale of which to under-18s is prohibited by legislation, and two were associated with aerosols.
- Gas fuels continue to be associated with the majority of deaths. In 2007, butane from all sources, including aerosol propellants, accounted for almost 80% of VSA deaths (46 of the 58 deaths).
- In 2007 there were three deaths (four in 2006) associated with the inhalation of nitrous oxide, which had been obtained for non-medical purposes.
- VSA deaths overall continue to be more common among males than females. In 2007, there were five times as many male as female deaths.
- Of the 58 deaths in 2007, nine were suicides in adults involving the inhalation of a volatile substance.

COMMENTARY

Mortality associated with the abuse of volatile substances (VSA) is related to many factors, including the chemical nature of the substance itself, the product containing it, the method of inhalation and the prevalence of abuse. We have been collecting data on deaths in a systematic way since 1983.

The purpose of this report is to monitor trends rather than to provide an exhaustive commentary. More detailed analyses of some of the data have been the subjects of separate papers. When looking at trends and mortality rates it is important to remember that they are subject to greater random variation when the numbers are small.

When further cases or additional data for previous years come to light they are added to the data set. Deaths can also be removed from the dataset if subsequent information puts them outside our criteria. Any important revisions are noted in our reports.

The dataset includes cases where there is no direct toxicological proof, but circumstantial evidence of varying grades suggests that these deaths were associated with volatile substance abuse. It also includes suicides where a volatile substance was inhaled. All such cases are coded accordingly so that they can be reviewed if necessary.

TRENDS IN TOTAL DEATHS PER YEAR

The total number of deaths between 1971 and 2007 was 2,308. During 2007 there were 58 deaths. Three deaths for 2006 and one for 2005 were added to the dataset, bringing the totals for those years to 51 and 46 respectively. Figure 2 gives the total number of deaths for each year.

Earlier reports included analyses of the monthly number of deaths before and after the Department of Health's advertising campaign of February 1992 aimed at parents. The final analyses (in Report 17) were based on data for England, Wales and Scotland (i.e. the areas that received the full campaign) between 1983 and 2002, thereby including an adequate 10-year period of follow-up. For under-18s deaths after the campaign fell significantly - by an estimated 62% from the number predicted by the underlying trend¹. The estimated fall of 19% among adults was not statistically significant². Since the campaign (Figure 3) there has been a further significant fall in the annual totals of all VSA deaths³, from an average of 76 per year in 1993-1999 to an average of 56 per year in 2000-2007.

United Kingdom legislation banning the sale of cigarette lighter refills to under 18 year olds came into effect in October 1999. The proportion of all VSA deaths in this age group has fallen: from 1983 until the 1992 campaign it was 60%, in the eight years between the campaign and the 1999 legislation it was 38%, and in the eight years from 2000 to 2007 it was 25%.

¹ P < 0.001 (95% CI: 50% to 71%)

² P = 0.10 (95% CI: -4% to 38%)

 $^{^{3}}$ test for linear trend in the square-root of yearly totals, P < 0.001; test for additional cubic pattern, P = 0.010

<u>AGE</u>

In 2007 the youngest person to die was aged 16 and the oldest (a suicide) was aged 79. Table 1 presents the age distribution of VSA deaths.

Changes in the age distribution are illustrated in several ways. Figure 4 shows a shift in the distribution of deaths towards higher ages, when 2007 is compared with the period 1971-2006. This shift is highly statistically significant⁴.

Figure 5 shows the cumulative distribution of age at death, again comparing 2007 with the period 1971-2006. This shows that in general the age of death was higher in 2007. For the period 1971-2006 the median age of death was 18 years (interquartile range 15-24 years), and for 2007 it was 31 (inter-quartile range 23-39 years).

Figure 6 shows trends over time in the number of deaths by age-group. This shows that the fall in deaths since 1990 was predominantly among young people. Among adults of 20 years and over there was a levelling rather than a fall, although in 2007 there was an increase to 48 deaths, which in this age-group is the highest number ever recorded.

<u>SEX</u>

Table 2 shows the sex distribution of deaths associated with volatile substances. In 2007 there were nearly five times as many male deaths as female deaths. Over the past ten years the majority (80%) of deaths for all ages has been in males. However in general the proportion of female deaths for all ages has risen since 1983, attributable mainly to a decline in the number of male deaths rather than an increase in the number of female deaths.

⁴ P < 0.001 (Mann-Whitney U test which includes all deaths)

Figure 7 shows the percentage of males and females among deaths in persons aged under 18, and in persons aged 18 years and over, for each year since 1983, the period over which data collection methods have been stable. For comparison, the mean percentages for 1983-2007 have also been included. Regression analysis showed that there was a significant rise in the proportion of females to males in those aged 18 and over⁵, but any increase in this proportion for those aged under 18⁶ failed to reach statistical significance, after adjustment for serial auto-correlation.

In 2007 there were seven deaths, only one of which was female, in the under-18 age-group. A survey of secondary schoolchildren aged 11-15 in England in 2007, carried out for the NHS Information Centre for health and social care found that 6% of boys and 7% of girls had sniffed volatile substances in the last year (Fuller, 2008); these percentages are slightly higher than in the previous sweep. The European School Survey Project on Alcohol and other Drugs (ESPAD) 2007, found that in the majority of countries surveyed there were no significant sex differences in lifetime inhalant use among 16-year olds, including the UK (Hibell et al, 2009). To take into account possible changes in the population at risk, Figures 8 and 9 show the mortality rates per million per year from 1998 to 2007, for the 10-14 and 15-19 age-groups by sex. In both age-groups the mortality rates for females are generally lower than those for males, although 2005 was an exception, as was 2006 for the 10-14 age group. It should be noted that the scales used for Figures 8 and 9 are different.

⁵ P < 0.001 (P < 0.001)

⁶ P = 0.038 (P < 0.085)

P values in brackets have been adjusted for serial auto-correlation.

DEATHS IN YOUNG PERSONS

Table 3 looks at the 10-14 and 15-19 year age-groups in the UK for 2007 and compares the numbers of deaths from VSA, from all causes, from transport accidents (TAs) and from drug misuse (defined as deaths where the underlying cause is poisoning, drug abuse or drug dependence and where any of the substances controlled under the Misuse of Drugs Act 1971 are involved). It should be noted that mortality data for all causes, transport accidents and drug misuse are for deaths **registered** in 2007.

In 2007 there were no VSA deaths in the 10-14 age-group, but at ages 15-19 years VSA accounted for 0.7% of deaths from all causes. In 2007, transport accidents which are by far the most frequent cause of death in these age-groups, accounted for 13.9% of all deaths at ages 10-14 years and 31.6% of all deaths at ages 15-19 years. Deaths associated with drug misuse accounted for 0.4% of all deaths in the 10-14 age group and 4.4% of all deaths in the 15-19 age-group.

Looking more closely at individual age data for England and Wales for 2000 to 2007, the ratio of VSA to drug misuse deaths appears to cross over between the ages of 15 and 16 years. In the 10-14 age-group there were 32 VSA deaths over the eight year period compared with 10 deaths related to drug misuse. In the same period at age 15 years there were 22 VSA deaths and 22 deaths related to drug misuse. At age 16 years there were 15 VSA deaths and 33 deaths related to drug misuse. It should be noted that all drug misuse death numbers are collated by registration year and that in England and Wales, VSA deaths coded to ICD 10: F18* (Mental and behavioural disorders due to volatile solvents) where an illicit drug is mentioned on the death record are also included in the drug-related deaths.

REGIONAL VARIATION

Table 4 shows the numbers of deaths by country and by Government Office Regions. Table 5 and Figure 10 give the Standardised Mortality Ratios (SMRs) for each region and country.

SMRs are used to compare the countries and regions taking account of any differences in the age and sex distribution of the population. The whole of the UK has an SMR = 100. Countries and regions where the SMR is greater than 100 have more deaths than expected and those where the SMR is less than 100 have fewer deaths than expected.

SMRs differed significantly across countries and Government Office Regions⁷. For the period 1998–2007 Northern Ireland had the highest SMR (178), and London had the lowest SMR (68). In general, there were more deaths than expected in Northern Ireland, the North East of England, Scotland and the East Midlands and fewer deaths than expected in the south and east of England.

SUBSTANCES ABUSED

We classify separately butane intended for fuel use and butane used as a propellant in aerosols. Almost all deaths were associated with only one volatile substance. In 5% of deaths from 1971-2007, two or more volatile substances were known to be involved. Table 6 and Figure 11 show the number of times each substance was associated with death and as all substances are included, the number of substances is greater than the number of deaths. Figure 12 gives the same information for under-18 year olds. The primary substance abused is shown in Table 7.

12

⁷ chi-squared = 56.53, 11d.f., P < 0.001

Over the period 1998 to 2007 there was a significant change in the proportions of the substances abused⁸. Table 7 shows that the absolute number of deaths associated with gas fuels rose from 28 in 2006 to 41 in 2007, halting the decline seen in recent years. The declines in gas fuel-related deaths,⁹ glue-related deaths,¹⁰ and aerosol-related deaths¹¹, over the ten-year period were all statistically significant.

PRODUCTS ABUSED

Within the broad substance categories a wide variety of products has been abused. Table 8 shows products abused by substance for 1971 to 2007. This also gives the type of products linked to deaths, showing them as percentages of substances used, rather than as percentages of the total number of deaths. Thus deaths can appear more than once in this table. Since 1971, butane gas lighter fuel has been associated with 81% of fatal abuses of gas fuel (38% of all substances fatally abused), deodorants and anti-perspirants with 46% of fatal abuses of gale (7% of all substances).

Table 9 gives the same information for 2007 alone. Butane gas lighter fuel was associated with 47% of all substances fatally abused. In addition, unspecified butane gas cans, some of which are likely to have been lighter fuel, accounted for another 10% of all substances.

Table 10 shows deaths associated with butane cigarette lighter refills. Among those aged under 18, there were three deaths in 2007, compared with two in both 2006 and 2005 and eight in 2004. Legislation which banned the sale of these items to under-18 year olds came

⁸ chi-squared = 25.16, 12 d.f., P = 0.014, "fire extinguishers", "others" and "not known" combined adjacent years combined; test based on Table 6.

 $^{^{9}}$ P = 0.01 (P = 0.009) (one death associated with more than one type of gas fuel only counted once)

 $^{^{10}}$ P < 0.001 (P < 0.001)

¹¹ P = 0.037 (P = 0.014)

P values in brackets have been adjusted for serial auto-correlation.

into effect in October 1999 (The Cigarette Lighter Refill (Safety) Regulations 1999). In this age-group the average number of deaths associated with lighter fuel fell from 17 per year (1992 to 1999) to 8 per year (2000 to 2007)¹². However the fall in deaths post October 1999 did not differ significantly from that predicted by the underlying trend¹³. Thus there is no firm evidence to suggest that the change in legislation was responsible for the fall.

Since 1995 there have been no deaths from text-correction fluid or pain-relief sprays and only one death from a fire extinguisher (involving an old product). There have been two deaths involving nail varnish, one in 1994 and one in 1995, and two involving nail varnish remover (acetone), one in 1995 and one in 2003.

In 2007 there were four deaths (6 in 2006) in adults associated with the inhalation of anaesthetic agents. Three involved nitrous oxide, supplied for non-medical use as cylinders or as caplets designed to be used with cream whipping devices, and were the result of asphyxiation. The supply, other than by a registered pharmacist, of nitrous oxide for inhalation is an offence under Section 52 of the Medicines Act 1968. The fourth death involved isoflurane, to which the deceased had access at his workplace. In addition there were three deaths associated with the inhalation of chloroform and two deaths associated with alkyl nitrites, so called "poppers". The supply of chloroform and one form of the alkyl nitrites, isobutyl nitrite, is now controlled by legislation, The Dangerous Substances and Preparations (Safety) Regulations 2006, which came into full effect in August 2007.

¹² chi-squared (with continuity correction) = 31.52,1 d.f., P < 0.001

¹³ The estimated fall of 12% (55% to 50%) from that predicted by the underlying trend was not statistically significant (P = 0.67).

In recent years there has been an increase in the number of suicides resulting from the inhalation of helium. This has coincided with the publication of a book and information on the Internet promoting helium for use in suicide. The cylinders of helium that can be used for this purpose are readily available from party balloon shops. The number of such deaths has been steadily rising since 1997 and there were seven in 2007. As the inhalation of helium does not fit with our definition of VSA (see page 3), these deaths have not been included in the dataset.

Included in the overall number of 58 deaths in 2007 were three involving the combined use of both volatile substances and drugs; it was not possible to say for certain which was responsible. Methadone was implicated in two of these cases, and an illicit drug in the third.

METHOD OF ADMINISTRATION

Methods of administration of volatile substances are shown in Table 11, and Table 12 gives this information by substance. The predominant method of abuse of butane lighter refills is believed to be by discharge directly into the mouth. In the absence of evidence to the contrary, lighter fuel abuse has been coded to this method. The most common method of abuse for aerosols has been by spraying through a cloth, and for glues has been by inhalation of the fumes or vapours from plastic bags.

MECHANISM OF DEATH

VSA causes death either as a result of a direct toxic mechanism or as a result of an indirect mechanism (such as asphyxia, inhalation of stomach contents or trauma). Where there is a possibility of an indirect mechanism this is given priority, otherwise the death is recorded as due to "direct toxic effects". Asphyxia resulting from other methods of administration, as well as by plastic bag, is now included in the data, resulting in a slight change to earlier numbers.

Table 13 and Figure 13 show the numbers of deaths due to each mechanism. The majority of deaths (70% overall and 76% in 2007) are due to direct toxic effects. The proportion of trauma deaths, which were more common with the abuse of glue, has decreased significantly¹⁴, from an average of 8% (1998-2002) to an average of 3% (2003-2007). In recent years there has been an overall increase in the proportion of deaths associated with asphyxiation, normally due to the inhalation of the volatile substance via a plastic bag or mask. In 2007 three of the nine such deaths were suicides.

PREVIOUS HISTORY OF SOLVENT ABUSE

In 2007, for 37 of the 58 VSA deaths (64%), there was evidence of a previous history of solvent abuse. For the remaining 36% there was no evidence of previous volatile substance abuse, or the history was unknown. However, an absence of evidence should not lead to the assumption that death occurred on the first occasion, as this fact is often difficult to establish.

¹⁴ Chi-squared with Yates' correction = 6.04, d.f. = 1, P = 0.014 (unknowns included)

PLACE OF DEATH AND FATAL ABUSE

Figure 14 shows the place of death. For 2007, 62% of deaths occurred at the home of the deceased or a friend, and 22% of deaths were recorded as having occurred in hospital.

Figure 15 shows where the fatal abuse took place. In 2007 the most common place for abuse remained the abuser's home (72%), with a further 9% of abuses in the home of a friend. In 14% of the deaths the substance was abused in a public place such as a park, shopping centre or the street.

Figure 16 shows the place of abuse by sex for the period 1998 - 2007. There was no significant difference between the sexes in the place of abuse¹⁵.

Figure 17 shows the place where the substance was abused for each year from 1998 to 2007. Year to year variation in the proportion of those fatally abusing at either their home, or the home of a friend, was not statistically significant¹⁶, although there was strong evidence of an increasing trend in this proportion over time¹⁷.

The relationship between age and place of abuse is shown in Table 14. Looking at the last ten years, the most common place of fatal abuse was the person's home or the home of a friend, especially for those aged 18 and over.

¹⁵ chi-squared = 6.07, 3 d.f., P = 0.11, combining "workplace", "school/institution" and "other" and excluding "unknowns".

¹⁶ chi-squared = 13.98, 9 d.f., P = 0.15, ("unknowns" excluded).

¹⁷ P = 0.002 (P < 0.001), P value in brackets has been adjusted for serial auto-correlation ("unknowns" excluded).

SUICIDES

Information since 1983 on deaths associated with the inhalation of a volatile substance where there was an inquest verdict of suicide is again provided in this report with the proviso that, as the coding protocol has changed over time, it is possible that in some years not all such suicides were included in the dataset. It is sometimes difficult to establish for suicides, particularly where no note is left, what influence the inhalation of a volatile substance had on the actions of the deceased. The use of a volatile substance in combination with a plastic bag over the head often results in death by asphyxiation, which may be the intended result.

Table 15 gives the frequency and median age at death by year, and Figure 18 shows the age and sex distribution. In 2007 there were nine suicide deaths associated with the inhalation of a volatile substance, which was similar to the levels in 2005 and 2006 but higher than in earlier years, bringing the total since 1983 to 118. To put these figures into perspective, it is worth mentioning that the total number of suicides (including deaths of undetermined intent) recorded in the UK from 1991 - 2007 by ONS was approximately 203,000 with a male to female ratio of 3:1 (ONS, 2009).

For suicides associated with the inhalation of a volatile substance, the median age increased significantly over the period 1983 to 2007¹⁸. For all VSA deaths since 1983, the male/female ratio was 5.4:1, but the difference in the sex ratio between the suicides and other VSA deaths was not statistically significant¹⁹.

¹⁸ Kendall's tau-b = 0.54, P < 0.001 ¹⁹ Fisher's exact test: P = 0.19

BIBLIOGRAPHY

Advisory Council on the Misuse of Drugs. Volatile Substance Abuse. 1995. London: HMSO.

Anderson HR. 'Increase in deaths from deliberate inhalation of fuel gases and pressurised aerosols'. *British Medical Journal* 1990; **301**(6742):41.

Anderson HR, Bloor K, MacNair RS, Ramsey J. 'Recent trends in mortality associated with the abuse of volatile substances in the UK'. *British Medical Journal (Clinical Research Edition)* 1986; **293**(6560):1472-3.

Anderson HR, Dick B, MacNair RS, Palmer JC, Ramsey JD. 'An investigation of 140 deaths associated with volatile substance abuse in the United Kingdom (1971-81). *Human Toxicology* 1982; **1**(3):207-21.

Anderson HR, MacNair RS, Ramsey JD. 'Deaths from the abuse of volatile substances: a national epidemiological study'. *British Medical Journal (Clinical Research Edition)* 1985; **290**(6464):304-7.

Bland JM. and Taylor J: 'Deaths due to volatile substance misuse are greatly underestimated (letter)' *British Medical Journal* 1998; **316**(7125):146.

Chadwick O, Anderson HR, Bland JM, Ramsey J. Solvent abuse: a population-based neuropsychological study. 1991. New York: Springer-Verlag.

Esmail A, Anderson HR, Ramsey JD, Taylor J, Pottier A. 'Controlling deaths from volatile substance abuse in under 18s: the effects of legislation'. *British Medical Journal* 1992; **305**(6855):692.

Esmail A, Warburton B, Bland JM, Anderson HR. and Ramsey J. 'Regional variations in deaths from volatile solvent abuse in Great Britain'. *Addiction* 1997; **92**(12):1765-71.

Flanagan RJ, Ruprah M, Meredith TJ, Ramsey JD. 'An introduction to the clinical toxicology of volatile substances'. *Drug Safety* 1990; **5**(5):359-83.

Fuller, E. (ed.) *Drug use, smoking and drinking among young people in England in 2007.* NHS Information Centre for health and social care. July 2008. Available at: <u>http://www.ic.nhs.uk/webfiles/publications/sdd07/SDD%20Main%20report%2007%20%2808</u> <u>%29-Standard.pdf</u> Accessed on 16 July 2009.

Hibell, B., Guttormsson, U., Ahlström, S., Balakireva, O., Bjarnason, T., Kokkevi, A. and Kraus, L. (eds.). *The 2007 ESPAD Report: Substance Use Among Students in 35 European Countries. 26 March 2009.* The Swedish Council for Information on Alcohol and other Drugs (CAN); The European Monitoring Centre for Drugs and Drug Addiction (EMCDDA); Council of Europe, Co-operation Group to Combat Drug Abuse and Illicit Trafficking in Drugs (Pompidou Group).Available at:

http://www.espad.org/documents/Espad/ESPAD_reports/2007/The_2007_ESPAD_Report-FULL_090617.pdf Accessed on 16 July 2009.

Ives R. and Tasker T. *Volatile substance abuse: a report on survey evidence*. 1999. London. Health Education Authority.

National Institute of Drug Abuse. *NIDA Research Monograph 148. Epidemiology of Inhalant Abuse: An International Perspective.* 1995. National Institute of Drug Abuse. US Government Printing Office. Available at:

http://drugabuse.gov/pdf/monographs/148.pdf. Accessed on 16 July 2009.

Office for National Statistics (2009). Suicide rates in the UK 1991-2007. Available at: <u>http://www.statistics.gov.uk/downloads/theme_health/Suicide-rates-in-the-UK.xls</u> Accessed on 16 July 2009.

Ramsey J, Anderson HR, Bloor K, Flanagan RJ. 'An introduction to the practice, prevalence and chemical toxicology of volatile substance abuse'. *Human Toxicology* 1989 **8**(4):261-9.

Ramsey JD, Anderson HR, Field-Smith ME, Butland BK: 'Deaths from misuse of anaesthetics (letter)'. *The Pharmaceutical Journal* 2005; **275**(7364): 251

Ramsey JD, Anderson, HR, Taylor J, Flanagan RJ. Volatile substance abuse (solvent abuse). *Proceedings of the International Symposium on Forensic Toxicology, June 15-19, 1992. US Department of Justice, Federal Bureau of Investigation.*

Taylor JC, Bland JM, Anderson HR: 'Authors overestimated number of teenagers dying from misusing volatile substances (letter)'. *British Medical Journal* 1998; **316**(7127):312.

STATISTICAL METHODS listed by footnote number

Statistical modelling was performed using STATA v9 and v10 (StatCorp LP, 4905 Lakeway Drive, College Station, TX-77845, USA, 1984-2008 : www.stata.com).

Footnote

- 3. Orthogonal polynomial Poisson regression was used to test for trend in log(yearly totals).
- 5-6. P values in brackets have been adjusted for serial autocorrelation in the residuals up to and including lag 2 using the Newey-West variance estimator.
- 9-11 Ordinary least squares regression was used to test for linear trend in the square root of yearly totals. P values in brackets have been adjusted for serial autocorrelation in the residuals up to and including lag 2 using the Newey-West variance estimator.
- 13 A Poisson regression model was used. This model was based on log monthly deaths 1983-2007 and included step changes for the 1992 advertising campaign and the 1999 legislation, linear and quadratic time trends and a simple sinusoidal component (wavelength 12 months) to adjust for periodicity.
- 17 Ordinary least squares regression was used to test for linear trend in proportions. P value in brackets has been adjusted for serial autocorrelation in the residuals up to and including lag 2 using the Newey-West variance estimator.







	1971-	2005	20	06	20	07	TOT	AL	CUMUL	ATIVE
AGE	No.	%	No.	%	No.	%	No.	%	No.	%
7	2	0.1	0	0.0	0	0.0	2	0.1	2	0.1
9	2	0.1	0	0.0	0	0.0	2	0.1	4	0.2
10	4	0.2	0	0.0	0	0.0	4	0.2	8	0.3
11	9	0.4	0	0.0	0	0.0	9	0.4	17	0.7
12	32	1.5	0	0.0	0	0.0	32	1.4	49	2.1
13	72	3.3	0	0.0	0	0.0	72	3.1	121	5.2
14	187	8.5	1	2.0	0	0.0	188	8.1	309	13.4
15	277	12.6	3	5.9	0	0.0	280	12.1	589	25.5
16	272	12.4	1	2.0	4	6.9	277	12.0	866	37.5
17	216	9.8	2	3.9	3	5.2	221	9.6	1087	47.1
18	170	7.7	3	5.9	2	3.4	175	7.6	1262	54.7
19	115	5.2	1	2.0	1	1.7	117	5.1	1379	59.7
20-24	344	15.6	4	7.8	8	13.8	356	15.4	1735	75.2
25-34	291	13.2	17	33.3	15	25.9	323	14.0	2058	89.2
35-44	108	4.9	10	19.6	17	29.3	135	5.8	2193	95.0
45-54	55	2.5	6	11.8	5	8.6	66	2.9	2259	97.9
55-64	30	1.4	2	3.9	0	0.0	32	1.4	2291	99.3
65-74	10	0.5	1	2.0	1	1.7	12	0.5	2303	99.8
75 & over	3	0.1	0	0.0	2	3.4	5	0.2	2308	100.0
TOTAL	2199	100.0	51	100.0	58	100.0	2308	100.0		

Age Distribution of Deaths 1971-2005, 2006 and 2007







28

	YEAR											
SEX	71-97	98	99	00	01	02	03	04	05	06	07	TOTAL
Male %	1481 <i>87.0</i>	69 86.3	67 89.3	54 81.8	49 77.8	49 75.4	39 72.2	38 80.9	35 76.1	38 74.5	48 82.8	1967 <i>85.2</i>
Female %	222 13.0	11 13.8	8 10.7	12 18.2	14 22.2	16 <i>24.6</i>	15 27.8	9 19.1	11 23.9	13 25.5	10 <i>17.2</i>	341 1 <i>4</i> .8
TOTAL	1703	80	75	66	63	65	54	47	46	51	58	2308

Sex Distribution of Deaths 1971- 1997 and each year to 2007







Numbers of Deaths in UK in 2007 for Age Groups 10-14 and 15-19 years All Causes, Transport Accidents, Drug Misuse and VSA

	Age	es 10-14	Ages 15-19			
CAUSE OF DEATH	No.	% No. of all cause deaths		% of all cause deaths		
All causes*						
Male	270	56.0	979	69.8		
Female	212	44.0	423	30.2		
TOTAL	482	100.0	1402	100.0		
Transport Accidents*						
Male	48	17.8	337	34.4		
Female	19	9.0	106	25.1		
TOTAL	67	13.9	443	31.6		
Drug misuse-related*						
TOTAL	2	0.4	61	4.4		
Volatile Substance Abuse						
Male	0	0.0	8	0.8		
Female	0	0.0	2	0.5		
TOTAL	0	0.0	10	0.7		

St George's, University of London

* Deaths registered in 2007

Sources of data for deaths from all causes, from transport accidents and from drug misuse:

England and Wales:	Office for National Statistics
Scotland:	General Register Office for Scotland
Northern Ireland:	Northern Ireland Statistics and Research Agency

Number of VSA Deaths by Government Office Region (England) and Country: 1971-1997 and each year to 2007

REGION or						YE	AR					
COUNTRY	71-97	98	99	00	01	02	03	04	05	06	07	TOTAL
ENGLAND:												
North East	105	7	7	3	3	6	4	1	2	2	3	143
North West	222	16	6	10	4	4	5	6	1	3	2	279
Yorkshire/Humber	164	4	5	5	10	7	4	6	4	4	5	218
East Midlands	105	10	6	5	9	5	3	7	6	4	6	166
West Midlands	150	6	7	7	5	10	5	3	3	5	7	208
East	108	5	4	7	5	2	4	4	4	5	5	153
London	209	6	7	4	6	2	8	6	8	4	5	265
South East	173	7	4	7	4	10	8	5	7	5	7	237
South West	98	3	8	4	3	5	1	3	1	2	3	131
TOTAL ENGLAND	1334	64	54	52	49	51	42	41	36	34	43	1800
WALES	68	3	7	1	1	5	1	4	1	5	2	98
SCOTLAND	232	10	8	9	9	8	6	1	4	9	10	306
N.IRELAND	61	3	6	2	4	1	5	1	5	3	3	94
CHANNEL ISLANDS	6	0	0	1	0	0	0	0	0	0	0	7
ISLE OF MAN	2	0	0	1	0	0	0	0	0	0	0	3
TOTAL UK	1703	80	75	66	63	65	54	47	46	51	58	2308

Standardised Mortality Ratios for Government Office Region (England) and Country, adjusted for Age and Sex: 1998 - 2007

	Dea	ths		95% confidence
REGION or COUNTRY	Observed	Expected	SMR	interval
ENGLAND: North East North West Yorkshire & the Humber East Midlands West Midlands East London South East South West	38 57 54 61 58 45 56 64 33	25.6 68.6 51.0 42.6 53.6 53.4 82.7 80.1 47.8	149 83 106 143 108 84 68 80 69	105 to 204 63 to 108 79 to 138 110 to 184 82 to 140 61 to 113 51 to 88 62 to 102 48 to 97
TOTAL ENGLAND	466	505.3	92	84 to 101
WALES SCOTLAND NORTHERN IRELAND	30 74 33	28.6 50.6 18.5	105 146 178	71 to 150 115 to 184 123 to 250
WHOLE OF UK*	603	603	100	

Crude Mortality Rates	Males	Females	Both
per million population per year	1.70	0.39	1.01

St George's, University of London

*Channel Isles and Isle of Man are not included

Sources of population data (Average of census updated mid-year estimates for 2002 and 2003):England and Wales:Office for National StatisticsScotland:General Register Office for ScotlandNorthern Ireland:Northern Ireland Statistics and Research Agency

Note: Expected deaths may not add up exactly due to rounding



			YEAR										
SUBSTANCE		71-97	98	99	00	01	02	03	04	05	06	07	TOTAL
GAS FUELS	No.	737	58	50	38	47	46	38	33	29	28	42	1146
	%	40.9	69.9	66.7	56.7	72.3	70.8	69.1	68.8	63.0	54.9	67.7	<i>47.4</i>
AEROSOLS	No.	336	9	10	13	13	10	6	5	8	7	6	423
	%	18.6	10.8	13.3	<i>19.4</i>	20.0	<i>15.4</i>	10.9	10.4	17.4	13.7	9.7	17.5
GLUES	No.	316	7	5	7	4	3	4	5	2	1	1	355
	%	17.5	8.4	6.7	10.4	6.2	<i>4.6</i>	7.3	10.4	4.3	2.0	1.6	1 <i>4.7</i>
FIRE EXTINGUISHER	No.	57	0	1	0	0	0	0	0	0	0	0	58
	%	3.2	0.0	1.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2.4
OTHER	No.	345	8	9	8	1	6	7	5	7	15	12	423
	%	19.1	9.6	12.0	11.9	1.5	9.2	12.7	10.4	15.2	29.4	19.4	17.5
NOT KNOWN	No.	11	1	0	1	0	0	0	0	0	0	1	14
	%	0.6	1.2	0.0	1.5	0.0	0.0	0.0	0.0	0.0	0.0	1.6	<i>0.6</i>
TOTAL	No.	1802	83	75	67	65	65	55	48	46	51	62	2419
	%	<i>100</i>	100	100	100	100	100	100	100	100	100	100	<i>100</i>

Substances Abused All ages: 1971-1997 and each year to 2007 n=2419

St George's, University of London

Note: All substances associated with a death are included in this table, so numbers of substances are greater than numbers of deaths.





Primary Substances Abused All Ages: each year 1998 to 2007 n=605

			YEAR										
SUBSTANCE		98	99	00	01	02	03	04	05	06	07	TOTAL	
GAS FUELS	No.	57	50	38	46	46	38	33	29	28	41	406	
	%	71.3	66.7	57.6	73.0	70.8	70.4	70.2	63.0	54.9	70.7	67.1	
		0	10	40	10	10	-		0	-	-	00	
AEROSOLS	NO.	8 10 0	12.2	10 7	10.0	10 15 A	03	4 8 5	0 17 /	/ 127	2 86	82 136	
	70	10.0	13.5	19.1	19.0	13.4	9.0	0.0	17.4	13.7	0.0	73.0	
GLUES	No.	7	5	6	4	3	4	5	2	1	0	37	
	%	8.8	6.7	9.1	6.3	4.6	7.4	10.6	4.3	2.0	0.0	6.1	
FIRE EXTINGUISHER	No.	0	1	0	0	0	0	0	0	0	0	1	
	%	0.0	1.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.2	
		7	0	0	4	<u> </u>	7	-	7	45	44	70	
OTHER	NO.	00	12.0	0 12 1	16	02	120	5 10 6	1 15 2	20.4	10.0	12.6	
	70	0.0	12.0	12.1	1.0	9.2	13.0	10.0	10.Z	29.4	19.0	12.0	
NOT KNOWN	No.	1	0	1	0	0	0	0	0	0	1	3	
	%	1.3	0.0	1.5	0.0	0.0	0.0	0.0	0.0	0.0	1.7	0.5	
TOTAL	No.	80	75	66	63	65	54	47	46	51	58	605	

Product Abused by Substance: 1971 - 2007 n = 2419

PRODUCT	No.	% of Substance Group	% of all Substances		
GAS FUELS					
Lighter fuel	930	81.2	38.4		
Butane gas cans	42	3.7	1.7		
Domestic gas (bottled)	111	9.7	4.6		
Propane gas cylinder	36	3.1	1.5		
Acetylene	3	0.3	0.1		
Unspecified butane	24	2.1	1.0		
TOTAL for GAS FUELS	1146	100.0	47.4		
AEROSOLS					
Deodorant / Antiperspirant	195	46.1	8.1		
Pain relief spray	63	14.9	2.6		
Air freshener	53	12.5	2.2		
Hair spray	30	7.1	1.2		
Cleaning fluids	17	4.0	0.7		
Insect spray	8	1.9	0.3		
Paint spray	8	1.9	0.3		
Aerosol glue	2	0.5	0.1		
Other aerosols	47	11.1	1.9		
TOTAL for AEROSOLS	423	100.0	17.5		
GLUES					
Contact adhesives	167	47.0	6.9		
Bicycle tyre repair glue	10	2.8	0.4		
Model glue	3	0.8	0.1		
Other glues	175	49.3	7.2		
TOTAL for GLUES	355	100.0	14.7		
OTHER					
Typewriter correction fluid	113	26.7	4.7		
Chloroform	38	9.0	1.6		
Dry cleaning fluids/plaster remover	38	9.0	1.6		
Petrol	38	9.0	1.6		
Paint thinners/brush cleaner	15	3.5	0.6		
Domestic cleaning fluids	16	3.8	0.7		
Industrial solvents/degreasers	16	3.8	0.7		
Anaesthetic agents	48	11.3	2.0		
Carbon tetrachloride	11	2.6	0.5		
Paint strippers	6	1.4	0.2		
Alkvl nitrites	16	3.8	0.7		
Refrigerant gases	5	1.2	0.2		
Brake cleaner	3	0.7	0.1		
Ether	6	1.4	0.2		
Benzene	1	0.2	0.0		
Petroleum spirits (excl. petrol)	2	0.5	0.1		
Miscellaneous products	51	12.1	2.1		
TOTAL for OTHER	423	100.0	17.5		
Fire Extinguishers	58	100.0	2.4		
Substance not known	14	100.0	0.6		

PRODUCT	No.	% of Substance Group	% of all Substances		
GAS FUELS					
Lighter fuel	29	69.0	46.8		
Butane gas cans	6	14.3	9.7		
Domestic gas (bottled)	2	4.8	3.2		
Propane gas cylinder	5	11.9	8.1		
Unspecified butane	0	0.0	0.0		
TOTAL for GAS FUELS	42	100.0	67.7		
AEROSOLS					
Deodorant / Antiperspirant	5	83.3	8.1		
Air freshener	0	0.0	0.0		
Hair Spray	0	0.0	0.0		
Insect spray	1	16.7	1.6		
TOTAL for AEROSOLS	6	100.0	9.7		
GLUES					
Contact adhesives	0	0.0	0.0		
Unspecified glues	1	100.0	1.6		
TOTAL for GLUES	1	100.0	1.6		
OTHER					
Chloroform	3	25.0	4.8		
Anaesthetic agents:					
Nitrous Oxide	3	25.0	4.8		
Isoflurane	1	8.3	1.6		
Alkyl nitrites	2	16.7	3.2		
Petrol	1	8.3	1.6		
Miscellaneous	2	16.7	3.2		
TOTAL for OTHER	12	100.0	19.4		
Substance not known	1		1.6		

Product Abused by Substance: 2007 n = 62

St George's, University of London

Note: All substances associated with a death are included in this table, so the number of products is greater than the number of deaths

Deaths Associated with Cigarette Lighter Refills* 1971-1997 and each year to 2007 n = 923

Under 18 years

						Year						
Age/Sex	71-97	98	99	00	01	02	03	04	05	06	07	TOTAL
Male	305	13	15	7	12	13	4	6	1	2	2	380
Female	56	3	0	1	3	2	2	2	1	0	1	71
Total	361	16	15	8	15	15	6	8	2	2	3	451
%	39.0	61.5	60.0	47.1	60.0	62.5	60.0	61.5	25.0	28.6	42.9	41.5
All VSA Deaths	925	26	25	17	25	24	10	13	8	7	7	1087

The Cigarette Lighter Refill (Safety) Regulations came into effect in October 1999

18 years and over

		Year										
Age/Sex	71-97	98	99	00	01	02	03	04	05	06	07	TOTAL
Male	216	23	25	19	17	16	17	14	11	12	16	386
Female	32	4	3	6	7	6	6	3	3	8	8	86
Total	248	27	28	25	24	22	23	17	14	20	24	472
%	31.9	-3.2	57.1	61.0	52.2	55.0	76.7	45.9	42.4	46.5	47.1	38.7
All VSA Deaths	778	-845	49	41	46	40	30	37	33	43	51	1221

All Ages

	Year											
Age/Sex	71-97	98	99	00	01	02	03	04	05	06	07	TOTAL
Male	521	36	40	26	29	29	21	20	12	14	18	766
Female	88	7	3	7	10	8	8	5	4	8	9	157
Total	609	43	43	33	39	37	29	25	16	22	27	923
%	35.8	53.8	57.3	50.0	61.9	56.9	53.7	53.2	34.8	43.1	46.6	40.0
All VSA Deaths	1703	80	75	66	63	65	54	47	46	51	58	2308

St George's, University of London

* Deaths associated with disposable cigarette lighters are not included in this table.

	1971-	2005	200	06	20)7	TOTAL		
METHOD	No.	%	No.	%	No.	%	No.	%	
Directly into mouth	700	31.8	27	52.9	31	53.4	758	32.8	
Sniffed from container	158	7.2	2	3.9	3	5.2	163	7.1	
Sniffed from cloth or sleeve	215	9.8	4	7.8	2	3.4	221	9.6	
Sniffed from plastic bag	297	13.5	1	2.0	0	0.0	298	12.9	
Plastic bag over head	260	11.8	13	25.5	15	25.9	288	12.5	
Mask or padding over face	61	2.8	3	5.9	6	10.3	70	3.0	
Other	24	1.1	0	0.0	0	0.0	24	1.0	
Not known	484	22.0	1	2.0	1	1.7	486	21.1	
TOTAL	2199	100.0	51	100.0	58	100.0	2308	100.0	

Methods of Administration of Primary Substances 1971-2005, 2006 and 2007

Methods of Administration for each Substance Group 1971- 2005, 2006 and 2007

	1971- 2005 2006			200)7	TOTAL		
METHOD	No.	%	No.	%	No.	%	No.	%
GAS FUELS								
Directly into mouth	630	59.4	22	78.6	30	/3.2	682	60.4
Sniffed from container	31	2.9	0	0.0	0	0.0	31	2.7
Sniffed from cloth or sleeve	13	1.2	0	0.0	1	2.4	14	1.2
Sniffed from plastic bag	42	4.0	0	0.0	0	0.0	42	3.7
Plastic bag over head	120	11.3	5	17.9	10	24.4	135	12.0
Mask or padding over face	22	2.1	1	3.6	0	0.0	23	2.0
Other	10	0.9	0	0.0	0	0.0	10	0.9
Not known	192	18.1	0	0.0	0	0.0	192	17.0
TOTAL for GAS FUELS	1060	100.0	28	100.0	41	100.0	1129	100.0
AEROSOLS								
Directly into mouth	46	12.3	4	57.1	1	20.0	51	13.2
Sniffed from container	15	4.0	0	0.0	0	0.0	15	3.9
Sniffed from cloth or sleeve	97	25.9	2	28.6	1	20.0	100	25.9
Sniffed from plastic bag	68	18.2	1	14.3	0	0.0	69	17.9
Plastic bag over head	40	10.7	0	0.0	3	60.0	43	11.1
Mask or padding over face	10	2.7	0	0.0	0	0.0	10	2.6
Other	2	0.5	0	0.0	0	0.0	2	0.5
Not known	96	25.7	0	0.0	0	0.0	96	24.9
TOTAL for AEROSOLS	374	100.0	7	100.0	5	100.0	386	100.0
GLUES							_	
Directly into mouth	7	2.1	0	0.0	0	0.0	7	2.1
Sniffed from container	21	6.4	0	0.0	0	0.0	21	6.4
Sniffed from cloth or sleeve	3	0.9	0	0.0	0	0.0	3	0.9
Sniffed from plastic bag	149	45.6	0	0.0	0	0.0	149	45.4
Plastic bag over head	52	15.9	0	0.0	0	0.0	52	15.9
Mask or padding over face	7	2.1	0	0.0	0	0.0	7	2.1
Other	1	0.3	0	0.0	0	0.0	1	0.3
	87	26.6	1	100.0	0	0.0	88	26.8
TOTAL for GLUES	327	100.0	1	100.0	0		328	100.0
OTHER *								
Directly into mouth	17	3.9	1	6.7	0	0.0	18	3.9
Sniffed from container	91	20.8	2	13.3	3	25.0	96	20.6
Sniffed from cloth or sleeve	102	23.3	2	13.3	0	0.0	104	22.4
Sniffed from plastic bag	38	8.7	0	0.0	0	0.0	38	8.2
Plastic bag over head	48	11.0	8	53.3	2	16.7	58	12.5
Mask or padding over face	22	5.0	2	13.3	6	50.0	30	6.5
Other	11	2.5	0	0.0	0	0.0	11	2.4
Not known	109	24.9	0	0.0	1	8.3	110	23.7
TOTAL for OTHER	438	100.0	15	100.0	12	100.0	465	100.0

St George's, University of London

 * "OTHER" includes fire extinguishers and substance not known

Principal Mechanism of Death
All ages: Each year 1998-2007

		YEAR										
MECHANISM		98	99	00	01	02	03	04	05	06	07	TOTAL
DIRECT	No.	55	51	40	48	44	43	32	30	38	44	425
TOXIC EFFECTS	%	68.8	68.0	60.6	76.2	67.7	79.6	68.1	65.2	74.5	75.9	70.2
INHALATION	No.	7	8	6	10	9	6	5	3	1	2	57
of VOMIT	%	8.8	10.7	9.1	15.9	13.8	11.1	10.6	6.5	2.0	3.4	9.4
		_		-		-	_		-			6-
ASPHYXIA	No.	5	6	8	2	6	2	9	8	11	10	67
mainly plastic bag	%	6.3	8.0	12.1	3.2	9.2	3.7	19.1	17.4	21.6	17.2	11.1
		-										
TRAUMA	No.	8	6	9	3	3	1	1	4	1	1	37
	%	10.0	8.0	13.6	4.8	4.6	1.9	2.1	8.7	2.0	1.7	6.1
OTHER	No.	1	0	1	0	0	0	0	1	0	1	4
	%	1.3	0.0	1.5	0.0	0.0	0.0	0.0	2.2	0.0	1.7	0.7
NOT KNOWN	No.	4	4	2	0	3	2	0	0	0	0	15
	%	5.0	5.3	3.0	0.0	4.6	3.7	0.0	0.0	0.0	0.0	2.5
TOTAL	No.	80	75	66	63	65	54	47	46	51	58	605
	%	100	100	100	100	100	100	100	100	100	100	100











AGE GROUP	•	Home	Home of Friend	Public Place	Institution/ Workplace	Other/ Not Known	Total No	Total %
Under 10	No. %	1 <i>50.0</i>	0 0.0	1 50.0	0 0.0	0 0.0	2	0.3
10 - 14	No. %	18 <i>41.9</i>	3 7.0	21 48.8	0 0.0	1 2.3	43	7.1
15 - 19	No. %	95 52.8	20 11.1	51 28.3	9 5.0	5 2.8	180	29.8
20 - 24	No. %	66 73.3	8 8.9	12 13.3	1 1.1	3 3.3	90	14.9
25 - 44	No. %	176 76.5	9 3.9	34 1 <i>4.8</i>	4 1.7	7 3.0	230	38.0
45 +	No. %	51 85.0	1 1.7	3 5.0	3 5.0	2 3.3	60	9.9
TOTAL	No. %	407 67.3	41 6.8	122 20.2	17 2.8	18 3.0	605	100.0
Under 18	No %	76 46.9	17 10.5	61 37.7	5 3.1	3 1.9	162	26.8
18 and over	No %	331 74.7	24 5.4	61 13.8	12 2.7	15 3. <i>4</i>	443	73.2

Place of Abuse by Age-groups 1998 - 2007

				% of	Median age
YEAR	Male	Female	Total	VSA Deaths	at death
1983	5	0	5	6.1	18
1984	3	0	3	3.5	40
1985	3	0	3	2.6	18
1986	7	1	8	7.8	20
1987	2	0	2	1.7	18
1988	1	0	1	0.7	55
1989	3	0	3	2.7	37
1990	1	0	1	0.7	23
1991	5	0	5	4.1	20
1992	5	1	6	7.1	23
1993	4	0	4	5.1	27
1994	1	0	1	1.5	27
1995	7	0	7	9.1	28
1996	4	2	6	7.7	35
1997	5	1	6	7.7	30
1998	3	0	3	3.8	34
1999	6	0	6	8.0	56
2000	3	0	3	4.5	38
2001	4	0	4	6.3	42
2002	4	2	6	9.2	48
2003	3	1	4	7.4	45
2004	3	0	3	6.4	53
2005	6	3	9	19.6	36
2006	8	2	10	19.6	42
2007	9	0	9	15.5	46
Total Suicides	105	13	118	5.6	34

Number of Suicides Associated with a Volatile Substance 1983 - 2007

