



# Insights into Xylazine and Other Emerging Drug Supply Issues

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# Zoom Webinar Logistics

- Only panelists and hosts can share video and audio.
- Please enter your comments and questions in the chat and Q&A.
- Be respectful and curious.

# Outline

- The new, “messy” drug supply
  - What are these new substances and why are they in the drug supply?
- How often are we seeing these new substances in the drug supply based on Community Based Drug Checking?
  - What is the Community Based Drug Checking Network
  - Data from CDCN- Overall, xylazine, BTMPS
- Example from CDCN site about Xylazine testing and client conversations
- Drug related wounds
  - What are they, why do they happen, why are they serious
  - What are Xylazine associated wounds looking like and how are they treated
- Q & A

# The new, “messy” drug supply

- Major long-term shift from plant-based drugs to synthetic drugs
- Recent acceleration in new drugs and “adulterants” entering the market
- “Adulterants” can may be:
  - Bulking agent/cut
  - Other related drug to mimic effect
  - Other drug to extend or balance/counteract the effect of main drug
  - Present for an unknown reason
- Adulterants may be biologically neutral or potentially dangerous



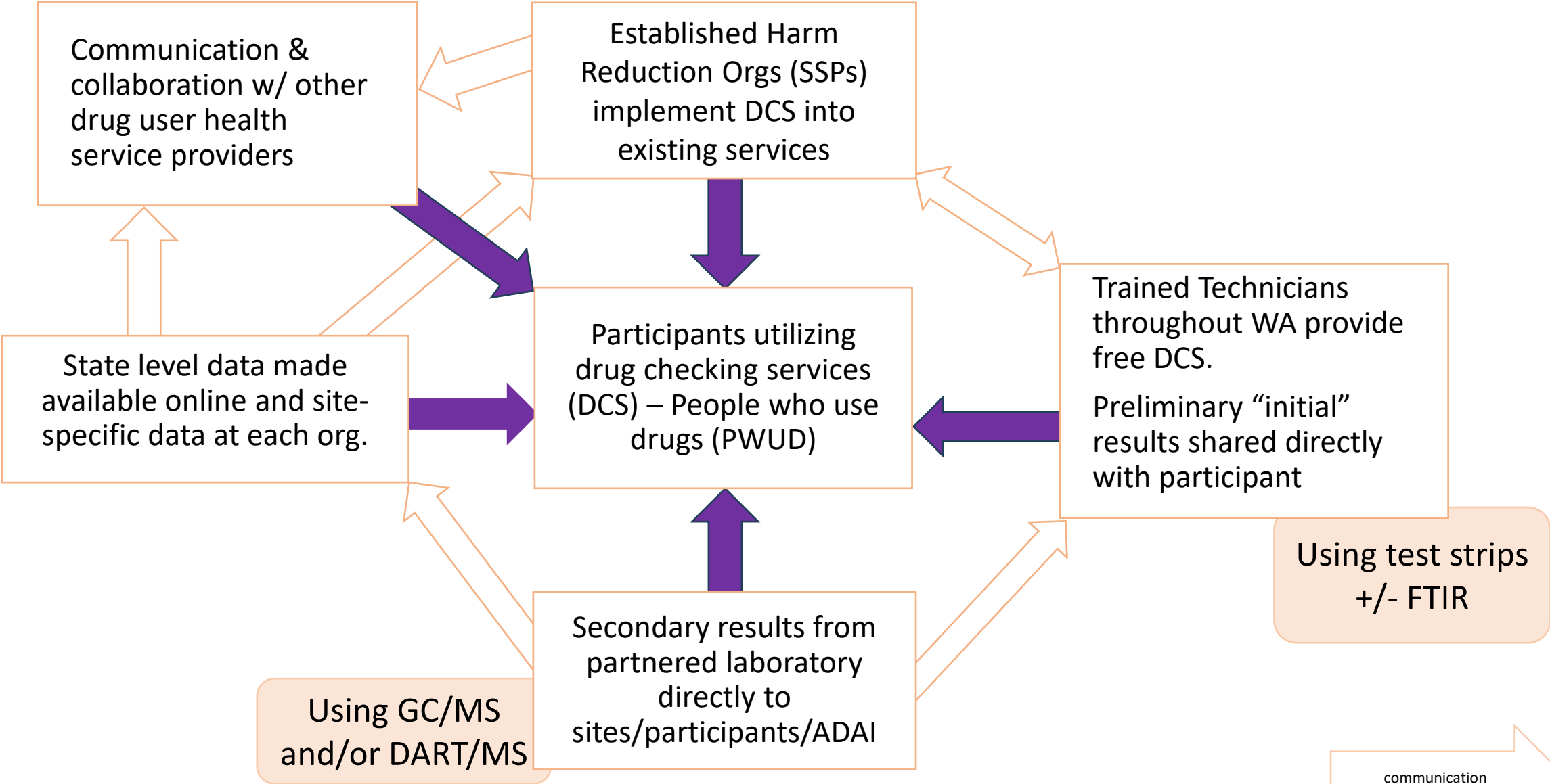
# Community Drug Checking Network

An approach to providing better informed, coordinated and compassionate wrap-around care for people who use drugs, through a network of dedicated experts utilizing multiple chemical analysis tools and resources to provide people who use drugs and community stakeholders with often vital and novel information on the drug supply.

- **7 “full” sites**
  - Includes onsite immunoassay test strips (fentanyl, xylazine and benzodiazepine) and FTIR machine
  - Samples sent to an outside lab for secondary testing
- **2 “lite” sites** (so far)
  - Immunoassay test strips (fentanyl, xylazine, benzodiazepine, and methamphetamine)
  - Samples sent to an outside lab for secondary testing



# Community Network



communication



An interactive flyer replica, originally conceptualized and created by a CDCN technician.

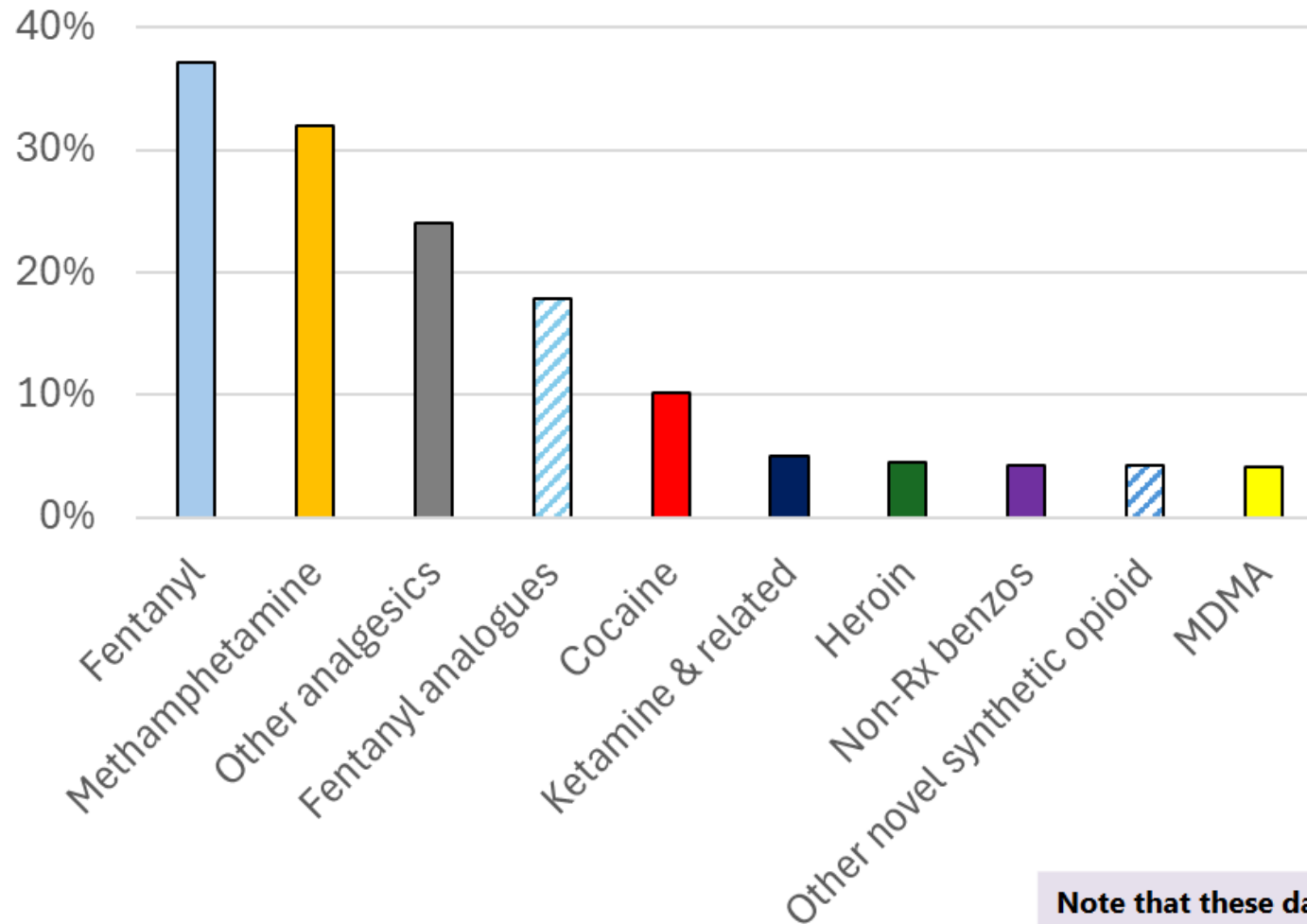
Creative approach to:

- Increase interest in and engagement with DCS
- An interactive moments for health/harm reduction messaging and drug checking topics

With the most significant take away being that you can't necessarily assume/guess the composition of any given drug sample by relying on your senses (smell, touch, look .. taste)



## WA State drug checking network samples



- Data from "full sites" based upon GCMS secondary drug testing
- These are cumulative data from Q3 2022-Q3 2024

**Note that these data are not representative of WA State's drug supply overall because the samples are self-selected by participants and come from a small number of locations.**

## Xylazine

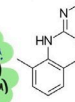
- A veterinary tranquilizer
- Arrived on East coast first
- Has become a major contaminant in fentanyl on east coast
- West coast/WA arrived later, has not become a common
- Can exacerbate overdoses and cause wounds (to be discussed)

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PREPARED BY  
NMHRC  
January 2023  
FACTS ON  
XYLAZINE

### OTHER NAMES

- TRANQ <sup>of fentanyl</sup>
- Anased (brand)
- Rompun (brand)



### WHAT IS XYLAZINE?

Xylazine is **NOT** an opioid - it's a Deep Sedative often used in Veterinary Medicine.

### MAJOR CONCERNS:

- Missed Shots can turn into SCARY ulcers that are hard to heal.
- Wounds can occur on or away from the injection site.
- Xylazine is **NOT** an opioid, therefore Naloxone alone may not be enough. **Rescue Breathing is EXTREMELY vital to overdose response!**

**ALWAYS CARRY NALOXONE!**

### HARM REDUX TIPS

- NEVER USE ALONE!
- Take turns using if you're in a group
- SWITCH up route of Administration: try smoking to get a more gradual high.

Rescue breathe

6TH ST HOURS  
117 6TH STREET, BY HERRA ALLEY

Harm Reduction Center  
Monday to Friday  
11 am to 7 pm

ONE RESCUE  
5 seconds

MOBILE SITE HOURS

### SUPPLIES XYLAZINE :

& naran  
HEALTHCARE  
what is that?!

### XYLAZINE

What you need to know

Xylazine, also known as "tranq" or "zombie drug", is an animal tranquilizer that is becoming an increasingly common filler in opioids.

#### EFFECTS

Xylazine is a sedative that induces a heavy sedation that can cause its users to blackout. These effects last longer than those of opioids, so people often come to with an immediate urge to use again.

#### WITHDRAWAL

Tranq's potency causes especially intense and often debilitating withdrawal symptoms.

#### SEVERE WOUNDS

The use of drugs cut with xylazine can cause severe wounds that may result in amputation in extreme cases. These wounds often appear at injection sites, but they can affect any part of the body. If you see wounds developing, seek medical attention.

#### RESISTANT TO NALOXONE

Because xylazine is not an opioid, it is resistant to naloxone. When someone overdoses on an opioid that is cut with tranq, administer naloxone. If the person begins breathing but remains unconscious, do not administer naloxone again.

#### WHAT SHOULD YOU DO?

Never use alone. Start low, go slow. **AND ALWAYS CARRY NALOXONE!**

#### RESOURCES

Never Use Alone  
English hotline: 800-484-3731  
Spanish hotline: 800-928-5530

The Brave App  
Download in the app store.

The Marie H. Martinez Health Resource Center  
(formerly known as Tom Woodall Urgent Care)  
NOW LOCKED AT 3055 Stevenson

6th Street Harm Reduction Center  
**HARM REDUCTION NURSE AVAILABLE:**  
Monday-Friday 11 am to 7 pm, at the Harm Reduction Center

**MAT (Medication-Assisted Treatment)**  
Levothyroxine & Support  
Tuesdays & Thursdays 11-1 pm, at the Harm Reduction Center

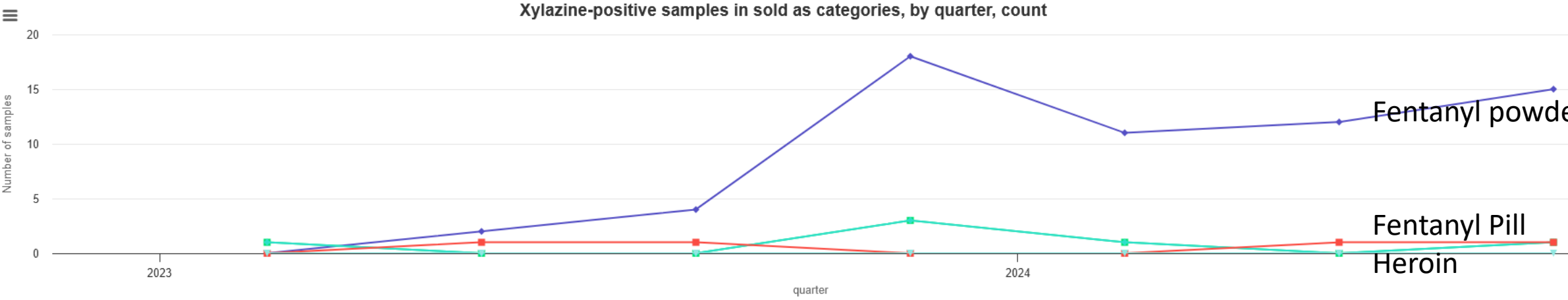
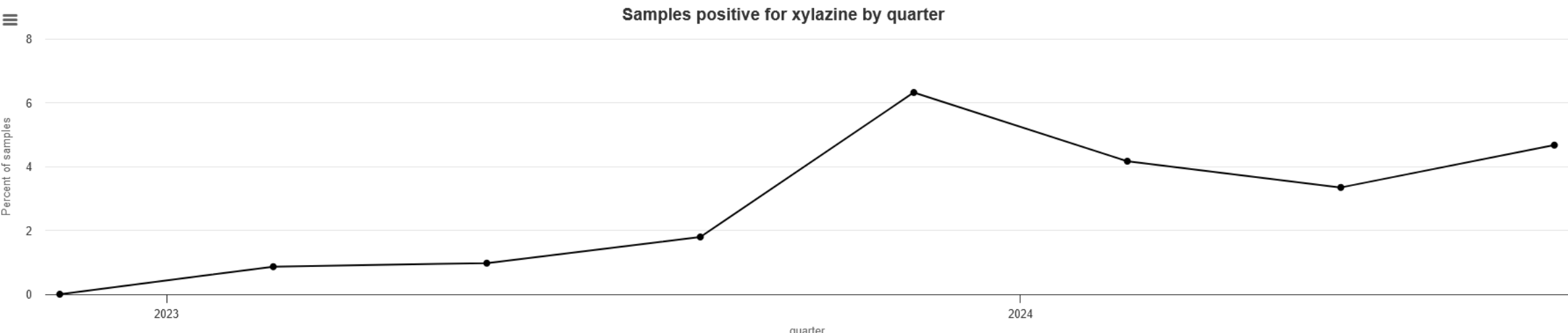
Xylazine is a veterinary anesthetic used to sedate animals of all sizes during surgery and other procedures. While xylazine is not FDA approved for use in humans, people have used it on their own and alongside opioids like heroin and fentanyl for over 20 years.

**You have been called: tranq, zomb, horse tranquilizer.**

Xylazine is **NOT** currently known or suspected to be an ingredient in the San Francisco drug supply.

HARM REDUCTION SAVES LIVES!

# WA State CDCN Data



These data are based upon secondary lab testing results

Over the past 2 years, among the 75 samples positive for xylazine 96% were fentanyl

Summer 2024- xylazine detected in

- 10% of fentanyl powder
- 1% of M30/fentanyl pills
- 1 of 12 heroin samples (small number)

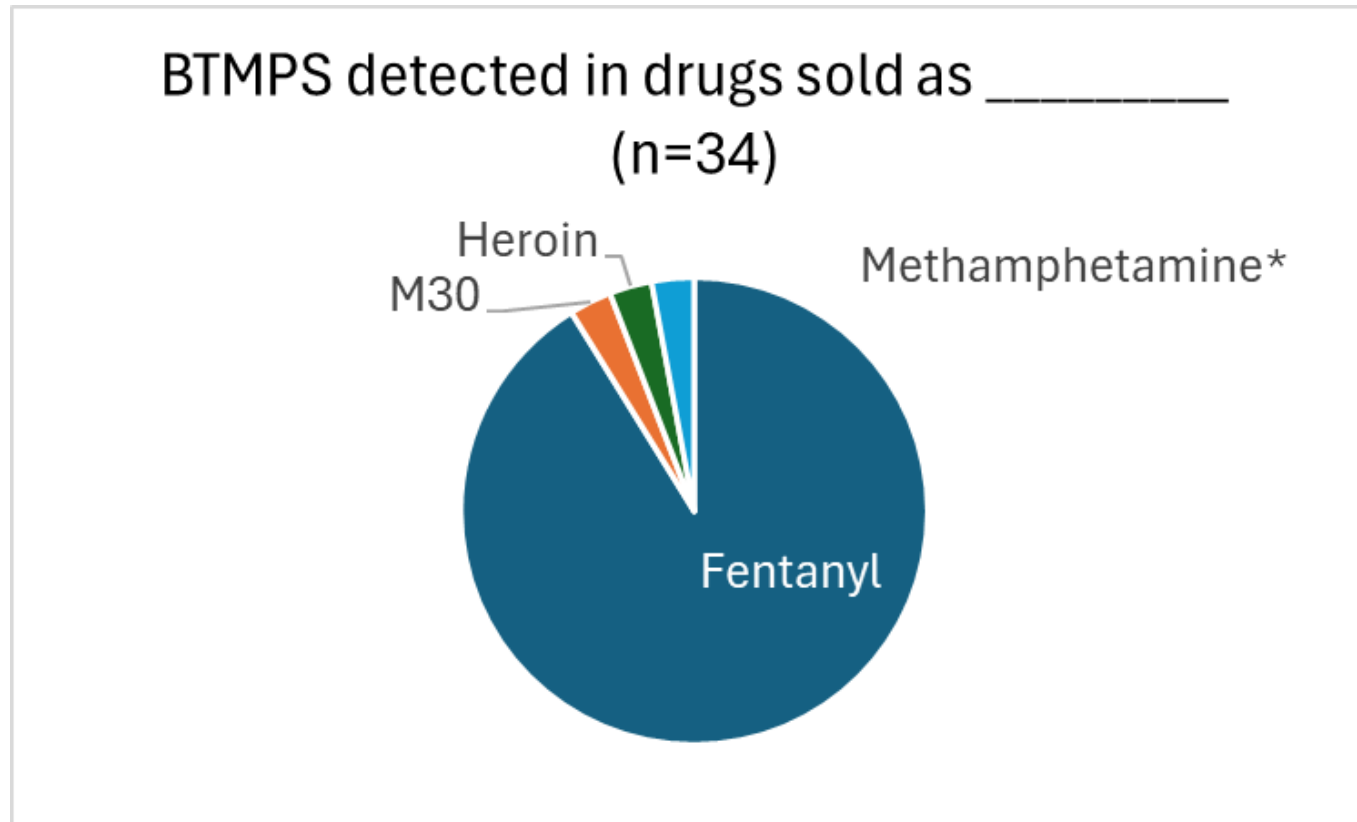
# BTMPS = Bis(2,2,6,6-tetramethyl-4-piperidyl) sebacate

- In June 2024 BTMPS was first detected in the unregulated drug supply nationally in community drug testing programs, most commonly in products sold as and containing fentanyl.
- BTMPS is an industrial chemical with no approved use in humans
- The effects of the substance and why it might be in the drug supply are not well understood.

- Community Drug Checking Network sites with FTIR can often detect BTMPS onsite.
- If possible, people who use drugs should get them tested regularly.
- People having a serious health issue possibly related to their fentanyl or other drug use should consider seeing a medical provider and share information about BTMPS with them.

# BTMPS data

Data presented here are for samples initially coded as not suspected of being cross-contaminated

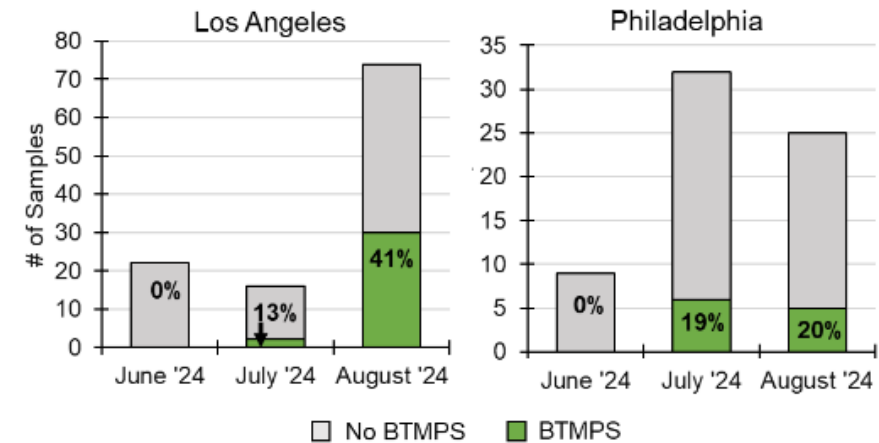


These data are based upon secondary lab testing results

# Emergence of BTMPS

- Similar to LA and Philly, BTMPS was first seen in WA State in July 2024
- CDCN were the first to report BTMPS
- The % of samples positive for BTMPS increased between July and September in WA State

**Figure 1.** Number and percentage of tested samples sold as fentanyl that contained BTMPS in Los Angeles (left) and Philadelphia (right) between June 2024 and August 2024.



**Rapid emergence of UV stabilizer Bis(2,2,6,6-tetramethyl-4-piperidyl) sebacate (BTMPS) in the illicit fentanyl supply across the United States in July-August 2024: Results from drug and drug paraphernalia testing**

Chelsea L. Shover, Morgan E. Godvin, Meghan Appley, Elise M. Pyfrom, Fernando Montero Castrillo, Karli Hochstatter, Talia Nadel, Neil Garg, Adam Koncsol, Joseph R. Friedman, Caitlin A. Molina, Ruby Romero, Brendan Harshberger, Jordan Spoliansky, Sarah Laurel, Elham Jalayer, Juan Ruelas, John Gonzales, Soma Snakeoil, Sonya Guerra, Oscar Arellano, Candace Winstead, Margaret Rybak, Joanna Champney, Brent Waninger, Edward Sisco

doi: <https://doi.org/10.1101/2024.09.13.24313643>

**This article is a preprint and has not been peer-reviewed [what does this mean?]. It reports new medical research that has yet to be evaluated and so should not be used to guide clinical practice.**



➤ **Checking Samples for Xylazine:**

- Test strips

- Which ones do you use? How well do they seem to work for xylazine? (false positive/negative)

- FTIR

- How is the FTIR at detecting xylazine, in your experience? (5% detection limit)

➤ **Where (in what sample/drug type) do we tend to see xylazine?**

➤ **An example of a conversation during point-of-care testing:**

- How did you relay positive results

- Questions the participant asked?

- How has your messaging changed/improved over time?

- Tips for other harm reduction service providers?

Carrie Reinhart & Molly Bosch

Public Health-Seattle & King County  
Street Medicine Team

# xylazine wounds

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# characteristics



# basic wound care

clean

moist

covered

repeat

*monitor over time*



There was no place to go. Where do I go to clean it? It was dirty. Lucky it didn't get infected.

**Finding enough love for yourself to do it.**

I made friends with a guy at the Chevron – I clean the bathroom and get to clean my wounds.

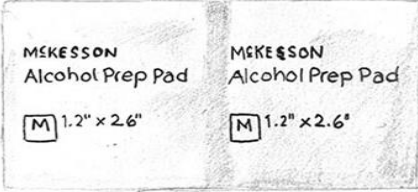
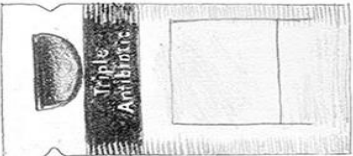
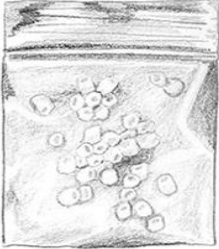
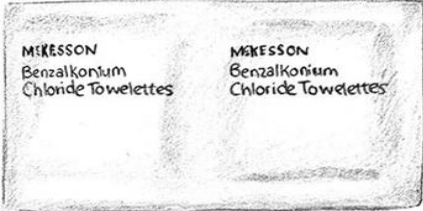
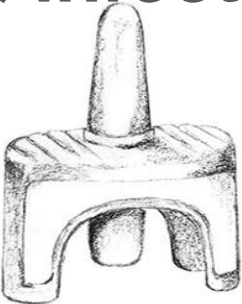
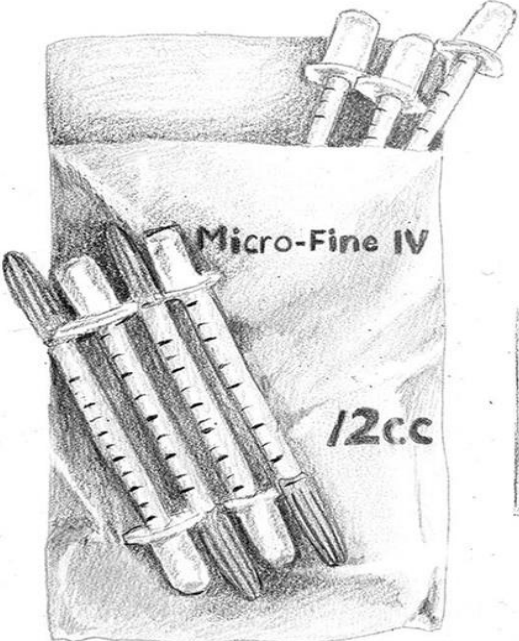
I had a friend who got shot and we needed supplies – ended up stealing from Walgreens.

They treat the homeless differently too. You go in there with a wound.... Doctors don't want to deal with you. It's too bad. That's why a lot of us are reluctant to go.



supplies for  
self care

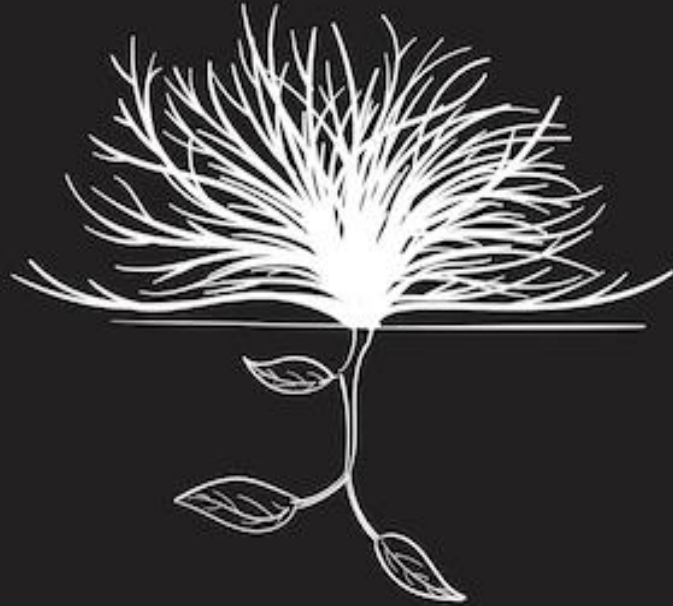
# preventing wounds & infections





thank you!

thank you!



[kingcounty.gov/wou](https://kingcounty.gov/woundcare)  
[ndcare](https://kingcounty.gov/woundcare)

# Summary

- The drug supply is highly volatile and will likely continue to be
- It's not possible to know what is in drugs based on appearance
- Drug checking is providing a vital service to:
  - People who use drugs, including connection to other harm reduction, health care, and other support services
  - Health care/public health/communities
- Drug related wounds can be serious & need proper medical care. Wound care kits for self-care are important.
- Kind care providers who are non-judgmental are critical to people being willing to seek and return for care.
- Low barrier settings and care models can increase accessibility.

## Center for **C**ommunity-**E**ngaged **D**rug **E**ducation, **E**pidemiology and **R**esearch (CEDEER)

- <https://adai.uw.edu/cedeer/>
- WA State DCS data - <https://adai.uw.edu/WAdata/DrugChecking/>
- ADAI BTMPS Drug Brief <https://adai.uw.edu/wastatedrugbrief-202409/>

## University of North Carolina at Chapel Hill

- <https://opioiddatalab.ghost.io/>

## Xylazine handout from Public Health-Seattle & King County

- <https://kingcounty.gov/depts/health/overdose-prevention/~media/depts/health/overdose/documents/xylazine-facts.ashx>