





LOCAL DRUG SAMPLE TESTING UPDATE

Legend:

(O) Opioids

(S) Stimulants

(B) Benzos (M) Starting Materials/

Byproducts

(A) Other

Active Cut

testRI is a two-year study to find out what is in the drug supply in Rhode Island and how changes to the supply are impacting people who use drugs in our community. We are testing used equipment, like pipes and syringes, that are collected from the community or donated by individuals or local organizations. Samples are tested using advanced confirmatory toxicology testing (LC-QTOF-MS).

Data below are from one Providence and one Warwick sample tested in May 2022.

*Data here only represent a sample of the local drug supply in Rhode Island. Because of that, the samples we have collected and tested may not represent the broader drug supply in the state. Samples are also not being tested in relation to overdose so outcomes from use, like overdose, are unknown.

Sample date & origin

Sold as (name or appearance):

May 2022 **Providence**



Crystal meth (clear crystals in baggie)

May 2022 Warwick



Crystal meth (clear crystals in baggie)

What we found:

*Methamphetamine was the primary substance found in the

Methamphetamine (S) 4-ethylamphetamine (S) N-ethylamphetamine (S) Pholedrine (S) Fentanyl (O) Para-fluorofentanyl (O)

Tramadol (O) Xylazine (A) Cocaine (S) Ketamine (A) Buprenorphine (A) Diphenhydramine

Acetylfentanyl (O)

Byproducts: Benzoylecgonine

Starting material/byproducts in fentanyl(s) production: 4-ANPP (M), phenethyl-4ANPP (M)

Why does this matter?

Methamphetamine (S)

See back page for more info about each substance.

The May 2022 Providence sample (sold as crystal meth) included fentanyl(s). Fentanyl exposure can increase the risk of drug overdose. The overdose risk increases in individuals who do not regularly use opioids and do not have tolerance.

Naloxone (Narcan) will work to treat overdose caused by fentanyl and fentanyl analog (para-fluorofentanyl). However, naloxone has not been documented to reverse the effects of xylazine.

Methamphetamine is a stimulant that can cause heart problems (e.g., heart attack, heart failure, fast heart rate), neurologic and psychiatric effects (e.g., hallucinations, psychosis, paranoia), and kidney and muscle injury.

The drug supply is volatile and variable. The mixing of drugs with or without the knowledge of people who are using drugs creates higher risk for overdose. It's important to use fentanyl test strips even when using stimulants to check for the presence of fentanyl.

For more info visit: https://preventoverdoseri.org/local-drug-supply/

What we found:

4-ethylamphetamine and N-ethylamphetamine are designer drugs with similar structure to amphetamine and have amphetamine-like effects and risk

Buprenorphine (Suboxone/Subutex) is used to treat opioid use disorder or withdrawal. It is less likely than other opioids to cause overdose or decreased breathing, but in individuals without regular opioid use, it can cause overdose in excess.

Cocaine is a stimulant that can cause elevated blood pressure and fast heart rate. In overdose it can cause heart problems, seizure, stroke, and muscle and/or kidney injury.

Diphenhydramine (Benadryl) is an allergy medication frequently found as a cutting agent in drugs. In small doses the risk from diphenhydramine is low.

Fentanyl is a highly potent opioid with high risk for overdose. In overdose it can cause problems with breathing and unresponsiveness.

Fentanyl analogs are drugs that are similar in chemical structure to fentanyl. Estimates of the potency of fentanyl analogs vary, but there is uncertainty because potency of illicitly manufactured fentanyl analogs is based on limited data and often has not been evaluated in humans. Deaths have been reported with exposure to the following fentanyl analogs: acetylfentanyl and para-flourafentanyl.

Ketamine is an anesthetic that is similar to PCP. Ketamine is often used for its hallucinogenic effects. Ketamine can cause hallucinations, confusion, abnormal behavior, nausea or vomiting, and hypertension. Depending on the dose, it can also cause breathing changes, sedation, abnormal heart rate, seizures or abnormal heart rhythm. Chronic use has been associated with bladder and urinary tract problems.

Methamphetamine is a stimulant. Risks include heart problems (e.g., abnormal heart rhythm or rate, heart attack, heart failure), high blood pressure, hallucinations, psychosis, and kidney and/or muscle injury.

Pholedrine is a stimulant with similar structure, effects, and risk profile as methamphetamine.

Tramadol is an opioid that is often prescribed for pain. Recently, it has been found as active cut in the drug supply. In addition to typical opioid effects, tramadol can sometimes cause seizures and/or hypoglycemia.

Xylazine is a veterinary sedative recently found in the drug supply. Xylazine is a long-acting and sedating medication, but it is not an opioid. Especially if combined with other sedating medications it can cause unresponsiveness, low blood pressure, a slowed heart rate, and decreased breathing. Xylazine use has been associated with skin ulcers and infection. Chronic use can also lead to dependence and a withdrawal syndrome that can cause irritability, anxiety, and dysphoria.

How to reduce risk

Because the drug supply is always changing, it can be hard to know what you are buying. Testing your drugs first with fentanyl test strips can be a good first step.

Having naloxone (Narcan) with you is always important so you can respond to an overdose. It is also important to try not to use alone so someone can help you if you experience an overdose.

Start slow and go slow. Using a little bit of your drug at a time can be helpful to test the strength and keep track of your doses.

Try to avoid mixing depressants or downers, like benzos, opioids, and alcohol when you use. Mixing these can increase your risk of an overdose.

