



# LOCAL DRUG SAMPLE TESTING UPDATE

Legend: (O) Opioids (B) Benzos (S) Stimulants (C) Cannabinoids (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 two samples collected from Central Falls in July.

\*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):

## What we found:

\* indicated substances that make up most of a sample

July 2022  
Central Falls



**Fentanyl (baggie)**

- Tramadol\* (O)
- Lidocaine\* (A)
- Fentanyl (O)
- Acetaminophen (A)
- Cocaine(S)
- O-desmethyltramadol (O)
- Para-fluorofentanyl (O)
- Acetylfentanyl (O)
- Xylazine (A)
- Caffeine (A)
- Diphenhydramine (A)
- Methadone (O)
- Methamphetamine (S)
- Acrylfentanyl (O)

July 2022  
Central Falls



**Crystal meth (baggie with crystals)**

- Methamphetamine\*(S)
- Cocaine\*(S)
- Fentanyl (O)
- Lidocaine (A)
- Para-fluorofentanyl (O)
- Xylazine (A)
- Tramadol (O)

## Why does this matter?

The drug supply is volatile and continuously changing. The mixing of drugs with or without the knowledge of people who are using drugs creates higher risk for overdose.

The July 2022 Central Falls sample (reported to be sold as crystal meth) included fentanyl. 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 will work to treat fentanyl, fentanyl analog, and other opioid overdose. Naloxone will not reverse xylazine effects.

See back page for more info about each substance.  
 For more info visit: <https://preventoverdoseri.org/local-drug-supply/>

## What we found:

**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.

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

**Fentanyl analogs (para-fluorofentanyl, acetylfentanyl, acrylfentanyl)** 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 fentanyl analogs.

**Lidocaine** is a local anesthetic/numbing agent (e.g., used in dentist offices and for topical pain relief). Lidocaine is a common cut in drugs. At standard doses it is safe, but in very high doses can cause heart problems and/or seizures.

**Methadone** is an opioid used to treat opioid use disorder and pain. In overdose it can cause problems with breathing and unresponsiveness. It can also cause abnormal heart rhythms at high doses.

**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. O-desmethyltramadol is an opioid and the main active metabolite of tramadol. In addition to typical opioid effects it can sometimes cause seizures and/or hypoglycemia.

**Tramadol** is an opioid that is often prescribed for pain. Recently, it has been found as an 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. 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.

For more information about all substances found visit [PreventOverdoseRI.org/local-drug-supply/](https://PreventOverdoseRI.org/local-drug-supply/)

## 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.

