MEU





LOCAL DRUG SAMPLE TESTING UPDATE

Legend:

(O) Opioids

(C) Cannabinoids (S) Stimulants

(A) Other Active Cut (H) Hallucinogen/

(B) Benzodiazepines

Dissociative

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 three samples collected in August in Providence. These samples were reported to be purchased over the internet.

*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

August 2023 **Internet Purchase**



Heroin (white powder) Heroin* (O) 6-monoacetylcodeine (O) 6-monoacetylmorphine (O)

Para-fluorofentanyl (O)

Fentanyl (O)

Papaverine (A) Codeine (O) Acetylfentanyl (O) Oxycodone (O)

August 2023 **Internet Purchase**



Tar Heroin (black and brown tar)

Heroin* (O) Fentanyl* (O) Codeine (O) Cocaine (S) Xylazine (A)

Papaverine (A) 6-monoacetylcodeine (O)

Noscapine (A)

6-monoacetylmorphine (O)

August 2023 **Internet Purchase**



Tar Heroin (capsule with light brown residue)

Heroin* (O) Papaverine (A) Codeine (O)

6-monoacetylcodeine (O) 6-monoacetylmorphine (O)

Why does this matter?

These samples were purchased on the internet by Rhode Island residents. All three samples were sold as heroin. While each sample contained heroin, two out of the three samples highlighted here had fentanyl and other opioids detected. One sample in addition to fentanyl also had small amounts of xylazine detected.

Naloxone will reverse the effects of heroin, fentanyl, fentanyl analogs, and other opioids, but will not reverse xylazine effects. However, xylazine has only been detected alongside opioids, like fentanyl, in samples tested in Rhode Island.

See back page for more info about each substance.

For more info visit: testri.org.

Why does this matter?

Give naloxone if you suspect an overdose. Combining multiple opioids with different onset and duration of effects can create challenges to determine a safe dose for an individual and can increase risk for adverse effects including overdose.

The drug supply is unpredictable and continuously changing. Drugs purchased on the internet may contain fentanyl or other unexpected substances.

What we found:

Acetylfentanyl is a fentanyl analog and is considered less potent than fentanyl. Acetylfentanyl can also be a byproduct in fentanyl synthesis. Acetylfentanyl has not been approved for pharmaceutical use and there have been no studies in humans on safety of use. In overdose, acetylfentanyl can cause sedation and decreased or stopped breathing.

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

Heroin (diacetylmorphine) is an opioid derived from the poppy plant. In overdose heroin can cause unresponsiveness, slowed or stopped breathing. Heroin is less potent than fentanyl. Potency is defined as the amount of drug (dose) needed to reach desired or therapeutic effect.

Common heroin impurities and products detected: 6-monoacetylmorphine (6-MAM or 6-AM) 6-monoacetylcodeine
Codeine
Papaverine
Noscapine

Oxycodone is an opioid. In overdose it can cause breathing problems and sedation or unresponsiveness.

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 wounds. 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.

