

# Drug Checking in Pennsylvania

2025 ACDC Drug Checking Summit

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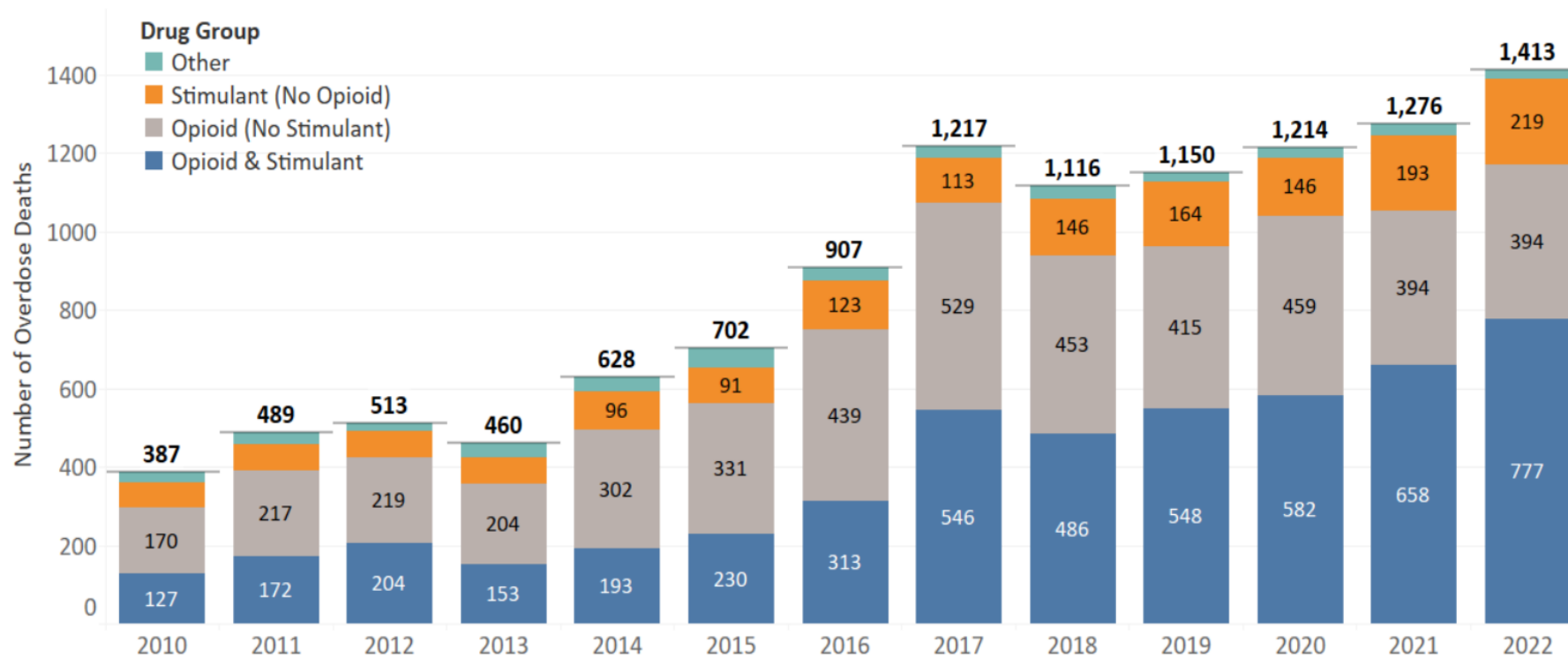


# DISCLOSURES

- I have no conflicts of interest to disclose.
- I am a scientist and employee of FRFF / CFSRE, a 501(c)(3) non-profit research facility.
- Our research programs receive funding from a variety of federal agencies including the National Institute of Justice (DOJ), National Institutes of Health, Centers for Disease Control and Prevention, Food and Drug Administration, and others.
  - The opinions, findings, conclusions and/or recommendations expressed in this presentation are those of the author(s) and do not necessarily represent the official position or policies of NIJ, NIH, CDC, or FDA.

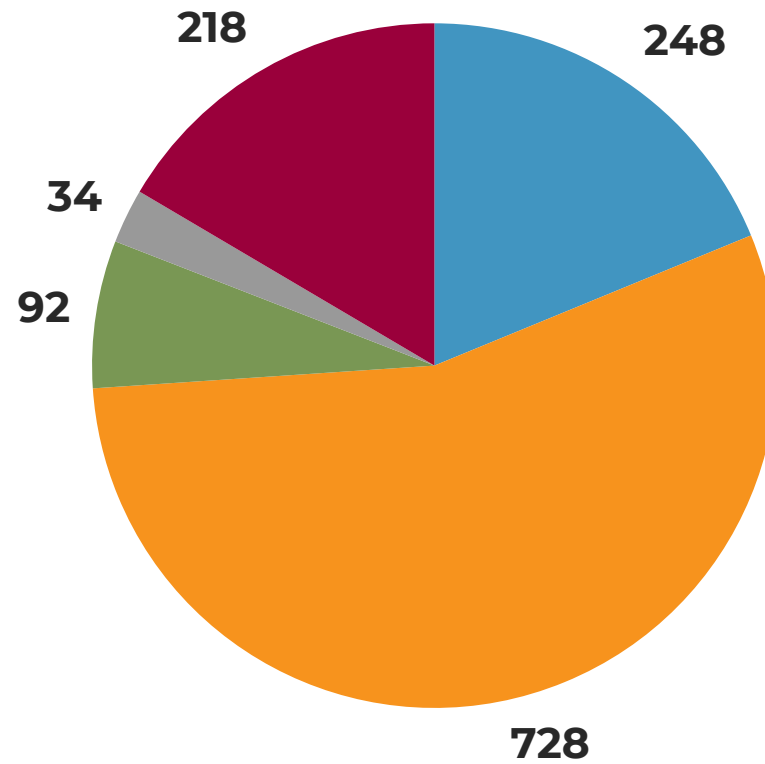
# RECREATIONAL DRUGS IN PHILADELPHIA

Number of Overdose Deaths  
by Drugs Involved, 2010 - 2022



# CFSRE DRUG CHECKING

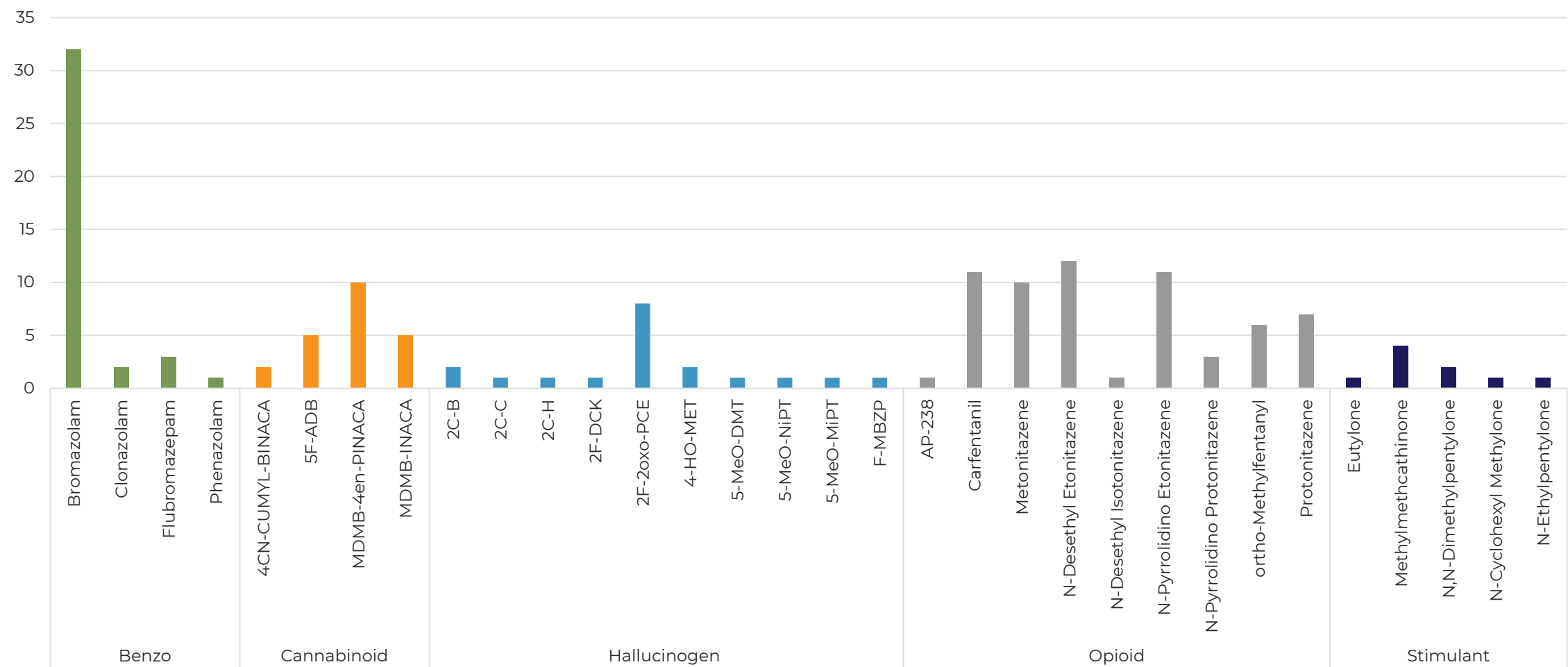
- 2023→2024
- 1,320 Samples
- Collected from community harm-reduction partners+PDPH



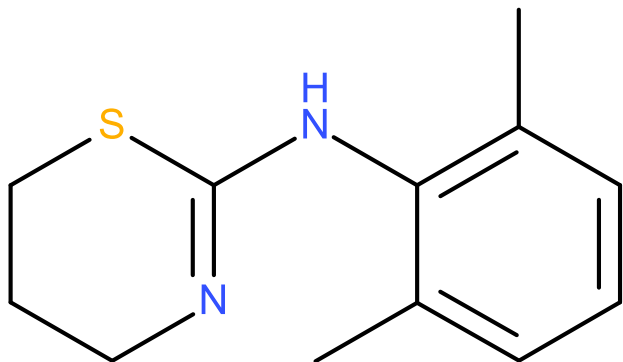
■ Cocaine ■ Fentanyl ■ Methamphetamine ■ Heroin ■ Other



# NPS IN PENNSYLVANIA (2024)



# XYLAZINE, “TRANQ”



October 2020

## Xylazine: A Toxic Adulterant Found in Illicit Street Drugs.



### PUBLIC HEALTH ALERT

Substance abuse treatment providers, clinicians, outreach workers, public health clinics, etc. need to be aware of the following information. Xylazine is commonly used as an adulterant in heroin. Xylazine is also frequently found in a combination with heroin and cocaine called a “speedball”. Adulteration of illicit drugs with xylazine has become a serious health concern for public health officials and drug users. The drug has been implicated as a cause, or contributing cause, of death in several cases both alone and in combination with other drugs. The most common side effects in humans associated with xylazine poisoning include bradycardia, respiratory and CNS depression, hypotension, and other changes in cardiac output. **CONCOMITANT use of xylazine with heroin, cocaine and/or both can result in synergistic effects that may increase the risk of an overdose and/or of death.**

### LOCAL NEWS

## Pennsylvania to make the animal sedative xylazine a controlled substance

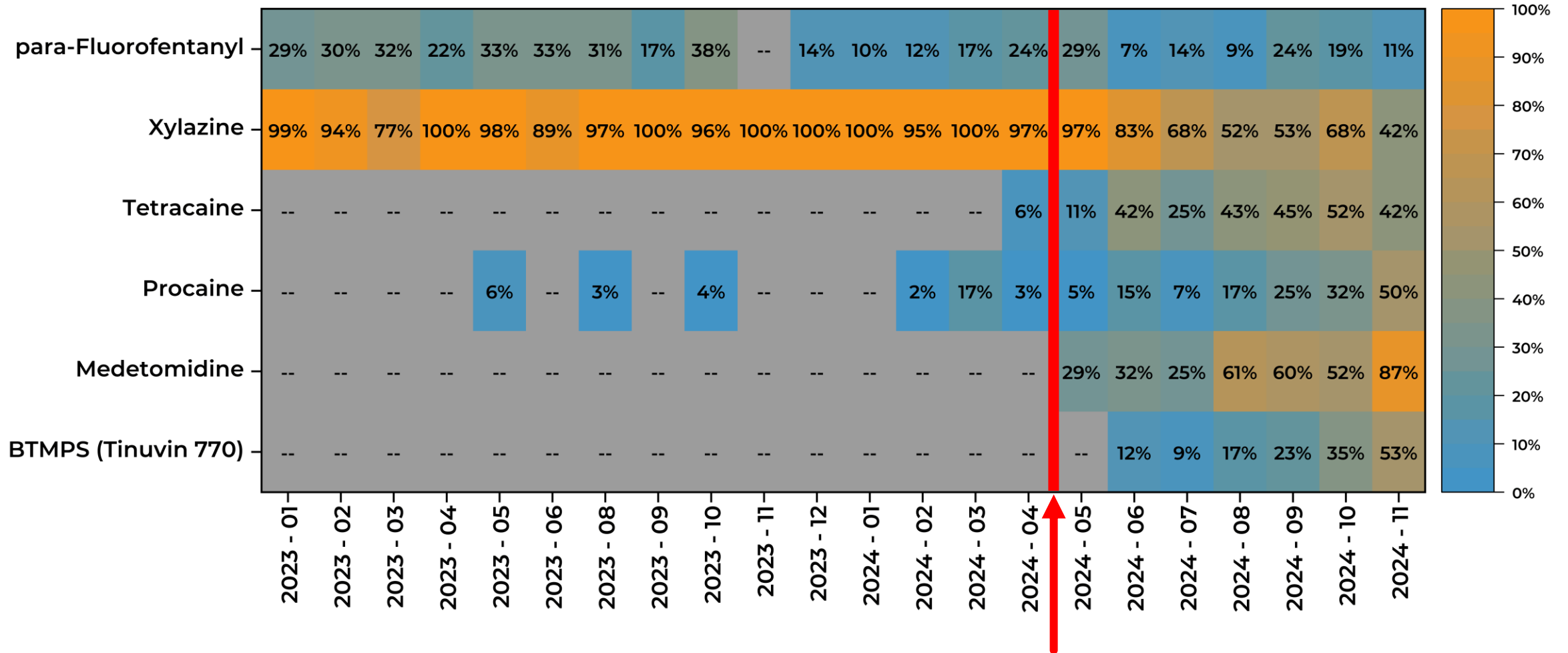
CBS NEWS  
PHILADELPHIA

By CBS News Philadelphia Staff, The Associated Press  
Updated on: May 9, 2024 / 10:10 PM EDT / CBS/AP



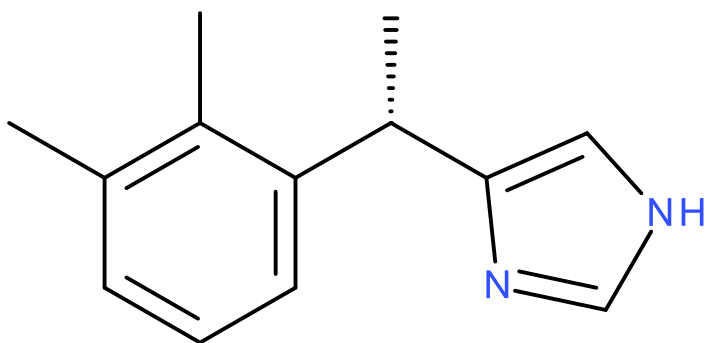
## Positivity of Selected Adulterants in Fentanyl Samples in Philadelphia Area

Identified Substance



Xylazine scheduled in PA

# MEDETOMIDINE (DOMITOR®), “DEX”



- ~200x more potent than xylazine
- First detected in fentanyl samples from Maryland in 2022
- Dexmedetomidine used in sedation/intubation

**PURPOSE:** The objective of this announcement is to notify public health, harm reduction, first responders, clinicians, medical examiners and coroners, forensic and clinical laboratories, and all other related communities about new information surrounding the emergent adulterant: **medetomidine** (also referred to as dexmedetomidine).

**BACKGROUND:** Medetomidine is an alpha-2 agonist, belonging to the same family of drugs as xylazine and dexmedetomidine. Medetomidine is synthetically manufactured and exists in two enantiomeric forms: **dexmedetomidine** and **levomedetomidine**, the former being active and potent. Dexmedetomidine is approved for use in humans and is administered in hospital, while different forms of medetomidine are available for use in veterinary medicine. The effects of **medetomidine** can include sedation, anxiolysis, muscle relaxation, anxiolysis, bradycardia, hypotension, hyperglycemia, and hallucinations. Duration of action is noted to be longer for medetomidine relative to xylazine.

**SUMMARY:** Medetomidine is the latest CNS depressant to appear as an adulterant alongside fentanyl in the recreational drug supply. Recent mass overdose outbreaks in Philadelphia, Pittsburgh, and Chicago have all been associated with fentanyl or heroin drug products containing medetomidine, as well xylazine and/or other substances. In cases where medetomidine ingestion is suspected or confirmed, severe adverse effects have been noted, including **heightened sedation and profound bradycardia**.

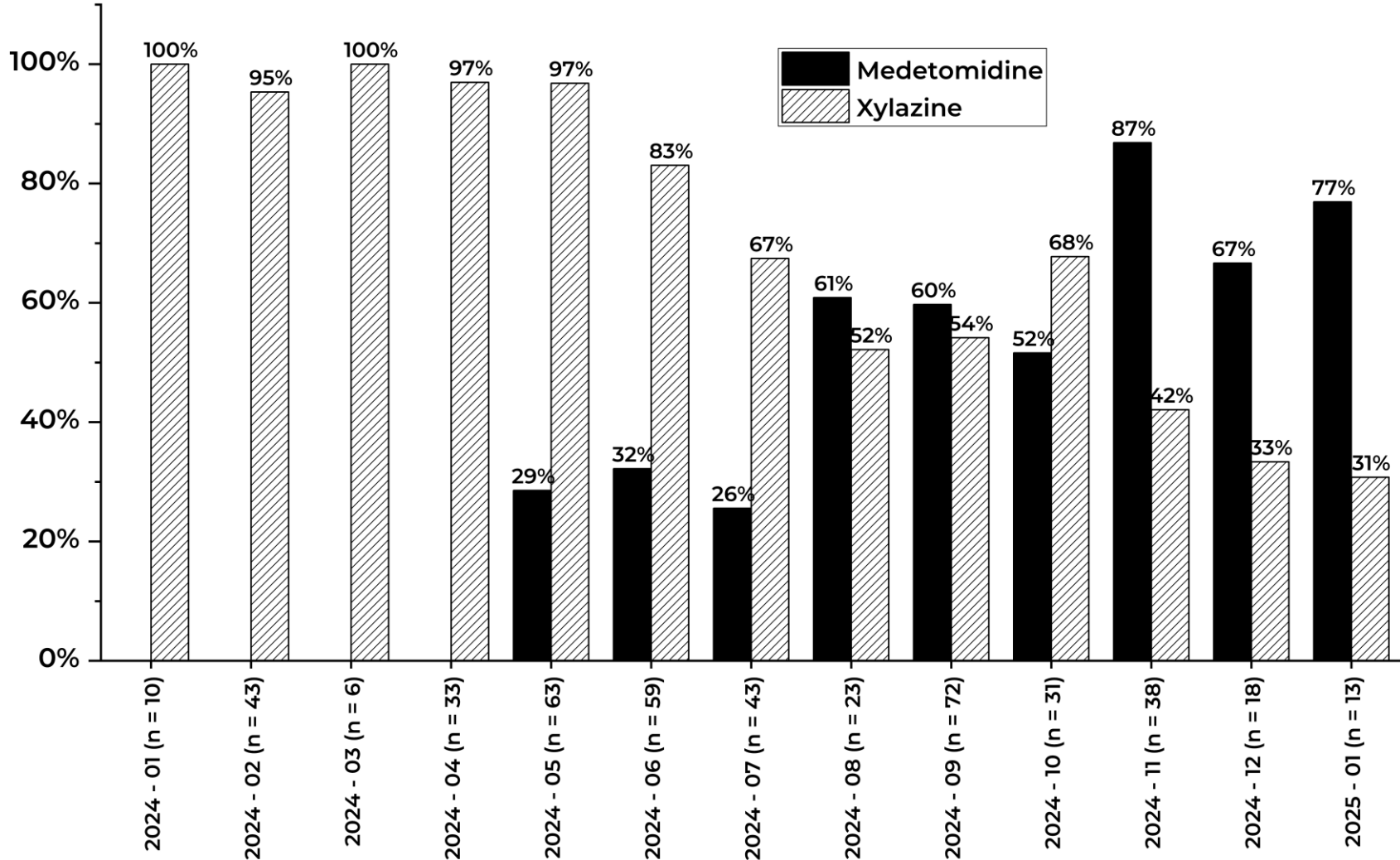
TIMEFRAME	DESCRIPTION OF MEDETOMIDINE IDENTIFICATIONS AND OVERDOSE EVENTS
Late 2022	Medetomidine begins appearing more regularly in the Maryland drug supply, following its first detection in July 2022. Medetomidine is commonly identified alongside fentanyl, xylazine, and other substances.
Mid-to-Late 2023	Medetomidine is sporadically identified in toxicology specimens collected from patients presenting to emergency departments after suspected opioid overdose (confirmed to not be administered). Overdose events originated from Missouri, Colorado, Pennsylvania, California, and Maryland. Medetomidine is commonly detected with fentanyl.
January 2024	An alert is issued out of Toronto, ON, about the emergence of medetomidine in the drug supply. This is followed by increased positivity in subsequent weeks and months, as medetomidine is found alongside fentanyl in suspected opioid products and commonly in combination with xylazine and other substances.
Early 2024	Medetomidine detections increase in drug materials and toxicology specimens originating from western Canada, including Vancouver, BC, commonly alongside fentanyl and other opioids.
Late April 2024	Medetomidine first appears in drug products in Philadelphia, PA, causing a large scale outbreak of overdoses and adverse events. Medetomidine is identified alongside fentanyl and xylazine.
Early May 2024	Medetomidine first appears in drug products in Pittsburgh, PA, causing a large scale outbreak of overdoses and adverse events. Medetomidine is identified alongside fentanyl and xylazine.
Early May 2024	Medetomidine first appears in drug products in Chicago, IL, causing a large scale outbreak of overdoses and adverse events. Medetomidine is identified alongside fentanyl and xylazine, or alongside heroin without xylazine.

**• GEOGRAPHICAL DISTRIBUTION OF MEDETOMIDINE EMERGENCE**

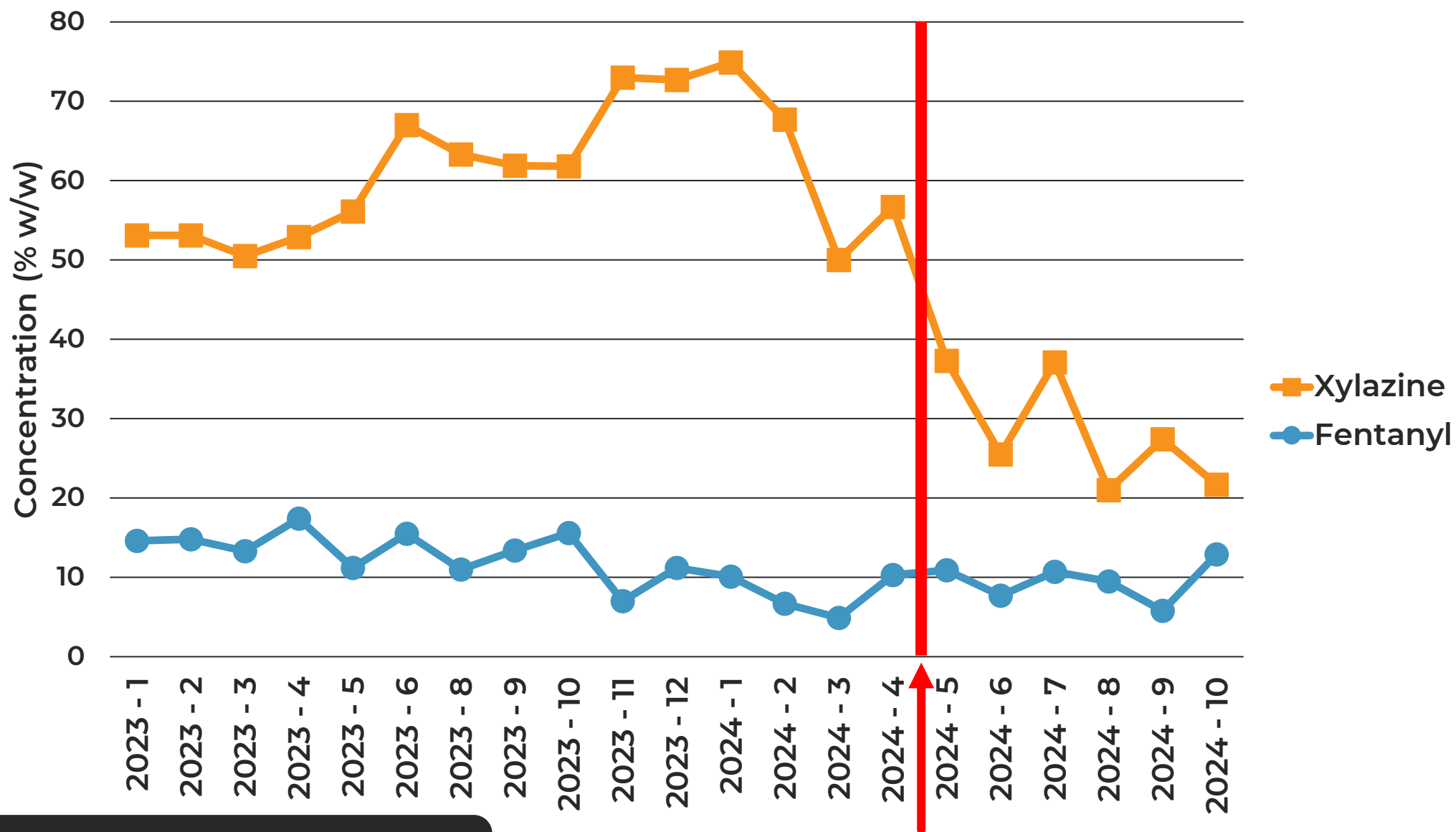
Medetomidine has been identified across several states in the U.S. and Canada, and is recently being observed in severe overdose outbreaks in major metropolitan areas (as marked).



# Percentage of Fentanyl Samples Testing Positive for Xylazine and/or Medetomidine in the Philadelphia, PA Area



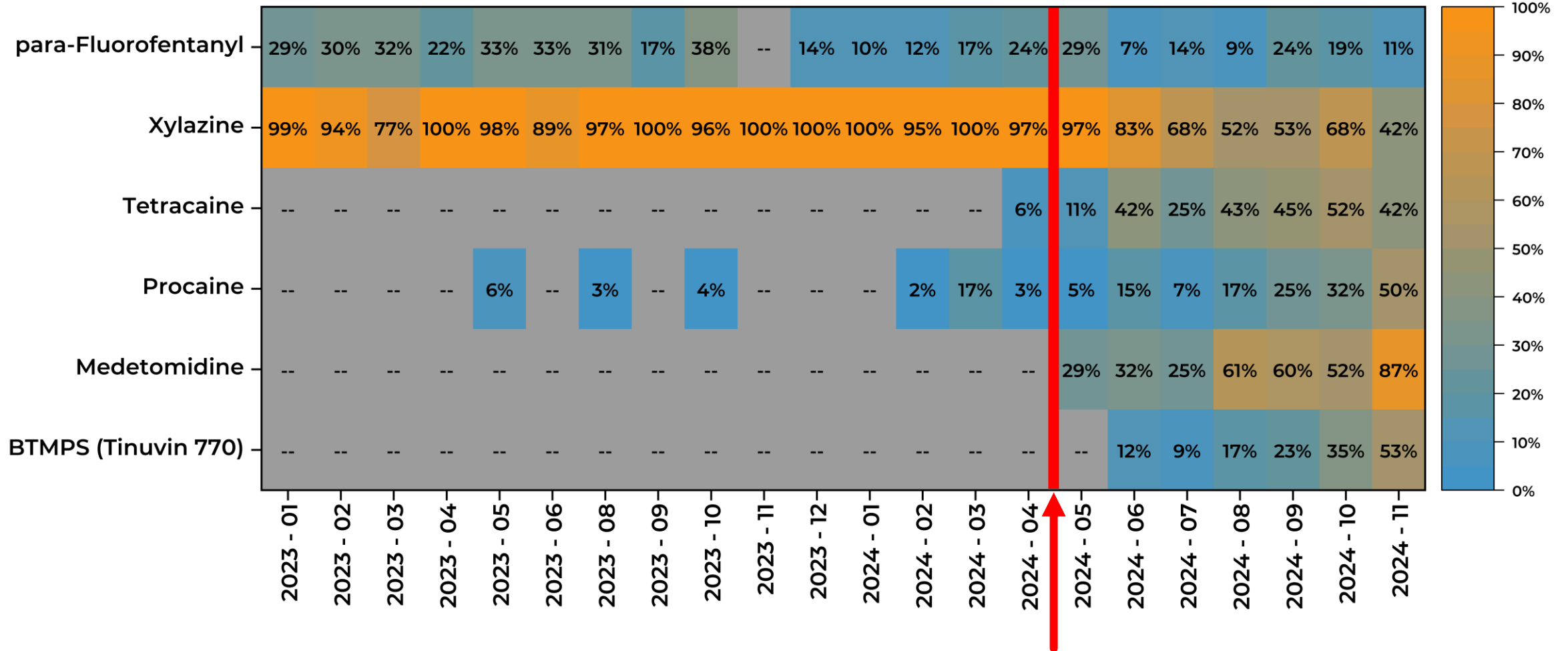
## Fentanyl and Xylazine Concentration



Xylazine scheduled in PA

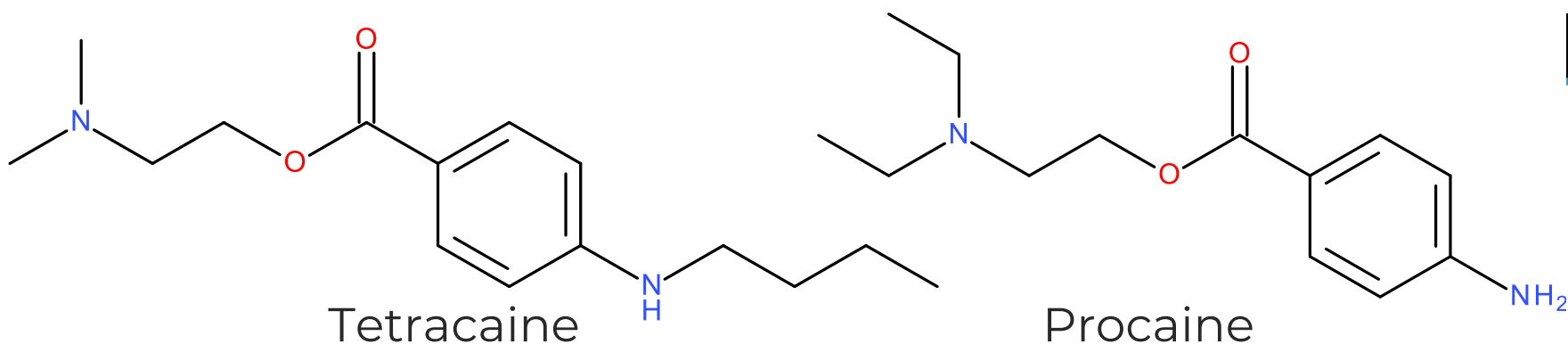
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Identified Substance



Xylazine scheduled in PA

# TETRACAINE AND PROCAINE



- Local anesthetics
- May reduce pain when injecting or snorting
- May cause methemoglobinemia in large doses



**Procaine**  
99%+ Pure  
Safe Customs Clearance

**Lidocaine**

**100% Safe Delivery Li  
Lidocaine Powder**

**US\$30.00-70.00**  
1 kg (MOQ)

**Product Details**

Customization: A

Certification: C

Model No.: 5

[Contact Supplier](#)

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**June 2023**

**Local Anesthetics (Lidocaine and other 'Caines):  
Toxic Adulterants Found in Illicit Street Drugs**

**Toxic Adulterant Alert**

*Substance use disorder treatment providers, clinicians, outreach workers, and public health agencies should be aware of the following information.* Lidocaine, like the other local anesthetics (LA) discussed in this report, is a synthetic compound useful in medical procedures as an anesthetic, usually available as an over-the-counter (OTC) topical cream, transdermal patch, or injectable solution administered in a medical procedure. The numbing sensation is caused by the blockade of neuronal sodium channels, thus reducing the transmission of pain signals. Because local anesthetics produce a numbing sensation, they may be added in minor amounts to reduce the discomfort involved with injecting or snorting drugs. While lidocaine is the LA most frequently combined with illicit drugs, other LA compounds that could be added to drug samples include benzocaine, procaine, tetracaine, mepivacaine, and bupivacaine.

Cocaine is a naturally-occurring alkaloid that is extracted and purified from the leaf of the coca plant. Unlike lidocaine, cocaine is a stimulant, which is used for its euphoric properties. The data reviewed for this report, from both toxicological samples as well as from seized drug samples, shows that lidocaine was the most frequently observed LA adulterant. Furthermore, lidocaine was coexistent most often with cocaine samples. It is speculated that lidocaine is added to cocaine (and other drugs) either to simply add mass, to enhance the euphoric effect, or to relieve the physical pain associated with injections. In a moderate dose lidocaine may enhance the stimulant effects of cocaine, as it has been observed to produce synergistic effects in rats when combined with cocaine<sup>1</sup>, however is not clear if the effect would similarly translate to humans or if other LAs would have similar properties. Nevertheless, the combination of cocaine and LAs is dangerous due to the increased toxicity<sup>2</sup>, which can lead to seizures, bradycardia, hypotension, myocardial depression, and cardiac arrhythmias<sup>3</sup>.

**Table 1: Positivity in CFSRE's Seized Drug Testing and Sample Count, Total and by US State (2016 - 2021; n = 2151)**

Compound	Total (Positivity)	State									
		CA	DC	FL	IL	KY	NH	OH	PA	TX	VT
Benzocaine	104 (4.8%)	1.7%	2.2%	10.0%	2.2%	9.6%	5.0%	5.3%	0.0%	0.0%	9.6%
Lidocaine	660 (30.7%)	45.5%	53.3%	58.5%	15.5%	20.0%	45.0%	32.4%	34.0%	4.0%	36.4%
Procaine	156 (7.3%)	1.7%	13.0%	8.0%	1.5%	6.0%	9.0%	6.2%	10.6%	2.2%	22.0%
<b>Total Samples</b>	<b>2151</b>	<b>176</b>	<b>92</b>	<b>200</b>	<b>406</b>	<b>250</b>	<b>200</b>	<b>225</b>	<b>146</b>	<b>274</b>	<b>250</b>

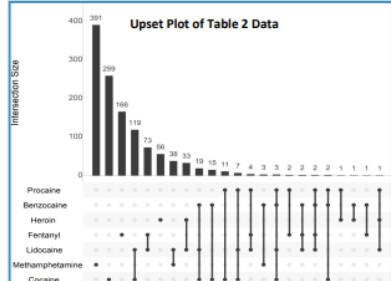
Procaine is identified less frequently in forensic samples than lidocaine; this is the case for both toxicology samples and drug materials. Procaine's lower prevalence in the illicit drug market may be due the greater use of lidocaine than procaine in clinical practice, though that is not to suggest that the source of lidocaine in illicit drug is necessarily from diverted medical products. Procaine has a shorter duration of action compared to lidocaine. It may be that the longer duration of action for lidocaine leads to its favor as an adulterant, though that was not examined as part of this report.

Benzocaine, is most commonly available in the medical market as a topical product. Benzocaine is occasionally observed as an adulterant in combination with illicit drugs, albeit to a lesser extent than lidocaine. In large doses benzocaine can cause **methemoglobinemia**<sup>4</sup>, which reduces the delivery of oxygen to vital organs by changing the function of hemoglobin.

Among samples tested by CFSRE, other LAs such as tetracaine, mepivacaine, prilocaine, and bupivacaine are rarely (or never) encountered in combination with illicit drugs.

**Table 2: Occurrences of drugs in combination with LA compounds in CFSRE's Seized Drug Testing in the US (2016 - 2021; n = 2151)**

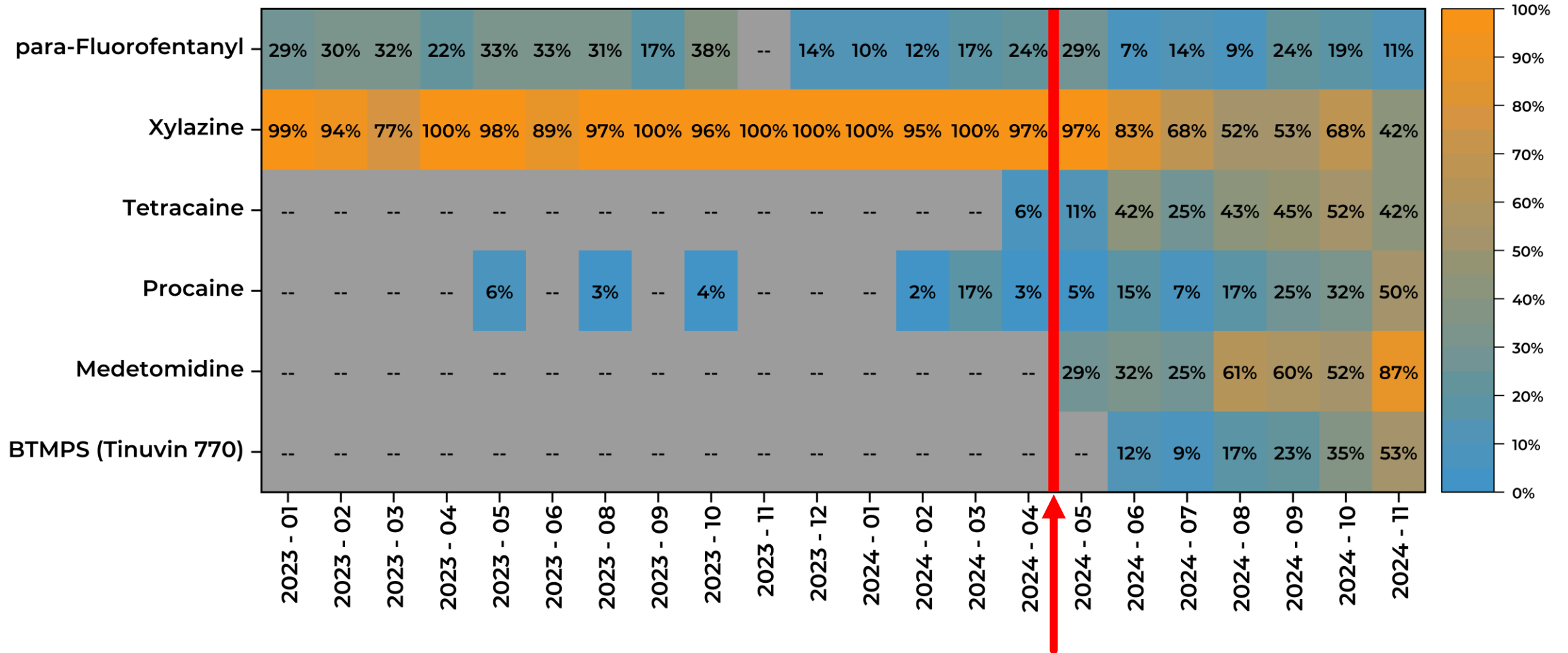
Combination	Observations
Cocaine without LA	259
Cocaine, Lidocaine	119
Cocaine, Benzocaine, Lidocaine	19
Cocaine, Benzocaine	15
Cocaine, Procaine	11
Cocaine, Lidocaine, Procaine	7
Cocaine, Benzocaine, Lidocaine, Procaine	3
Cocaine, Benzocaine, Procaine	2
Fentanyl without LA	166
Fentanyl, Lidocaine	73
Fentanyl, Lidocaine, Procaine	4
Fentanyl, Benzocaine, Lidocaine	2
Fentanyl, Benzocaine, Lidocaine, Procaine	2
Fentanyl, Procaine	2
Fentanyl, Benzocaine	1
Heroin without LA	56
Heroin, Lidocaine	33
Heroin, Benzocaine	1
Heroin, Lidocaine, Procaine	1
Heroin, Procaine	1
Methamphetamine without LA	391
Methamphetamine, Lidocaine	38
Methamphetamine, Benzocaine	3





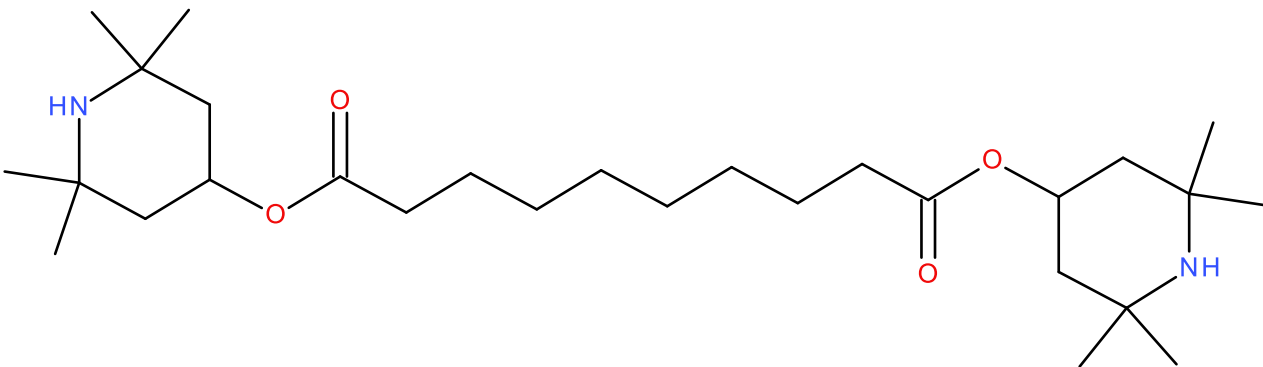
## Positivity of Selected Adulterants in Fentanyl Samples in Philadelphia Area

Identified Substance



Xylazine scheduled in PA

# BTMPS (TINUVIN 770)



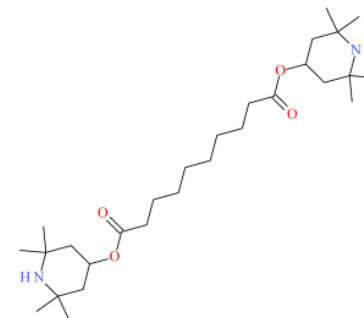
- bis(2,2,6,6-tetramethyl-4-piperidyl) sebacate
- Used commercially as a light-stabilizing additive for plastics
  - Manufacturer studies suggest very low overdose risk (1975-76)
  - Oral LD50 of 3.7 g/kg
- An active L-type  $\text{Ca}^{2+}$ -channel blocker
- Non-competitive antagonist at nicotinic ACH receptors
- Demonstrated cardiotoxicity in rats

NPS Discovery — New Drug Monograph

2024



## BTMPS



### NPS SUBCLASS

Miscellaneous

### REPORT DATE

September 3, 2024

### SAMPLE RECEIVED

June 12, 2024

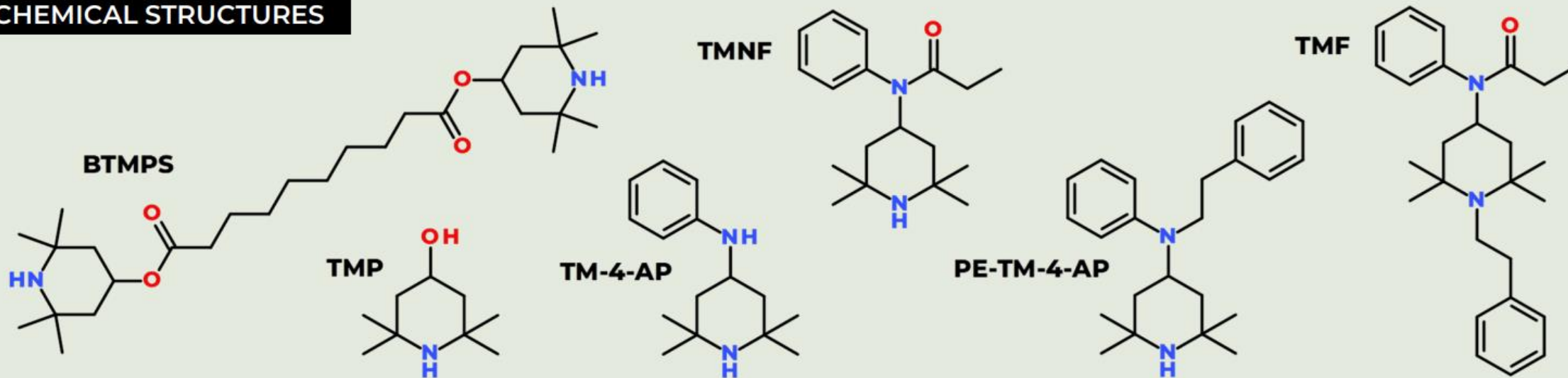
### SAMPLE TYPE

Drug Material

Preferred Name	BTMPS		
Synonyms	Bis[2,2,6,6-tetramethyl-4-piperidyl] sebacate, Tinuvin 770, T770, HALS770		
Formal Name	Bis[2,2,6,6-tetramethyl-4-piperidyl] decanedioate		
InChI Key	XITRBUPOXXBIJN-UHFFFAOYSA-N		
CAS Number	52829-07-9		
Chemical Formula	$\text{C}_{28}\text{H}_{52}\text{N}_2\text{O}_4$		
Molecular Weight	480.7		
Molecular Ion [M <sup>+</sup> ]	480		
Exact Mass [M+H] <sup>+</sup>	481.4000	Exact Mass [M+2H] <sup>2+</sup>	241.2036

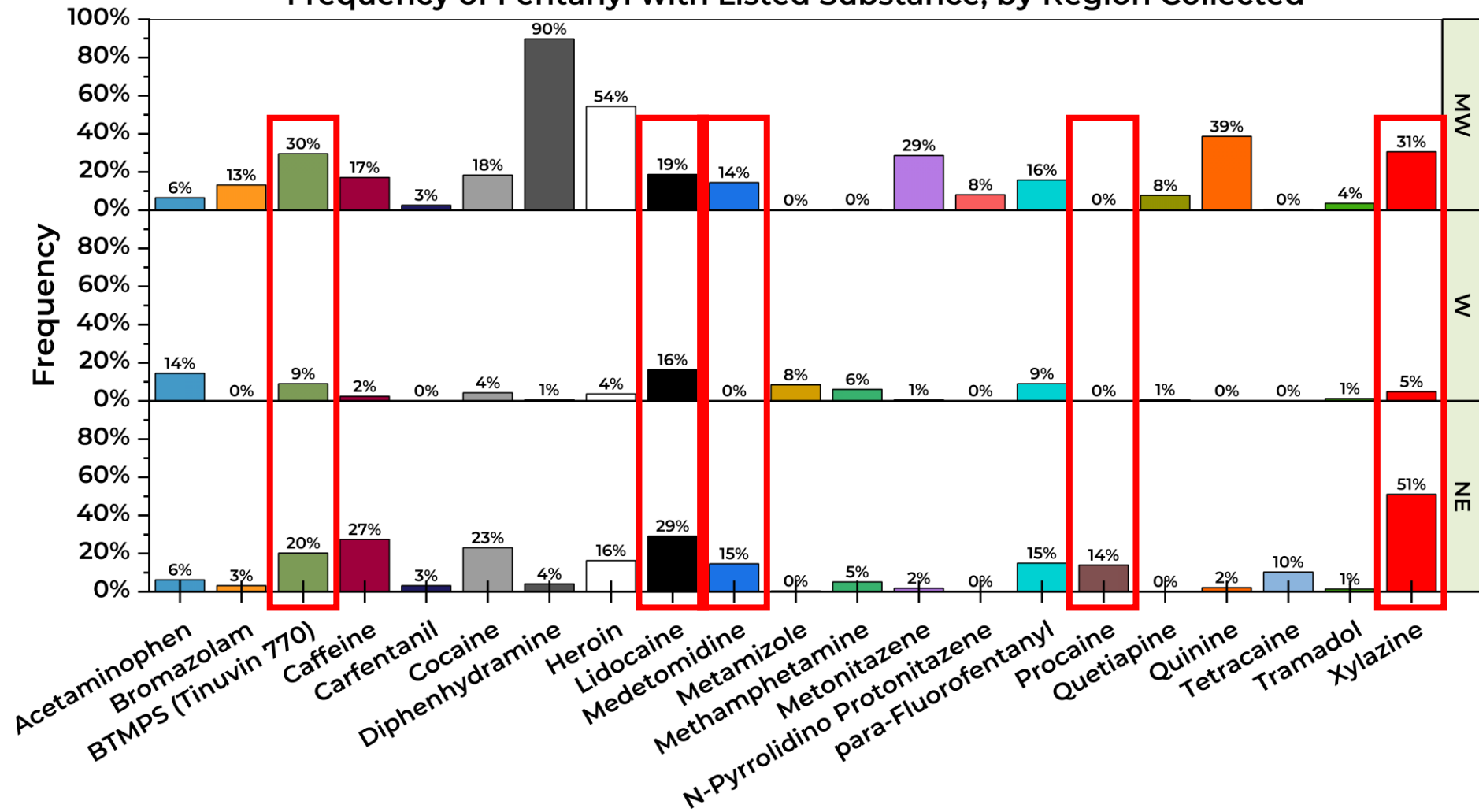
# BTMPS (TINUVIN 770)

## CHEMICAL STRUCTURES



- BTMPS used to produce fentanyl precursors/intermediates
- Synthesis based around tetramethyl-4-piperidinol (TMP)
- Potency of tetramethylfentanyl (TMF) is unknown

Frequency of Fentanyl with Listed Substance, by Region Collected



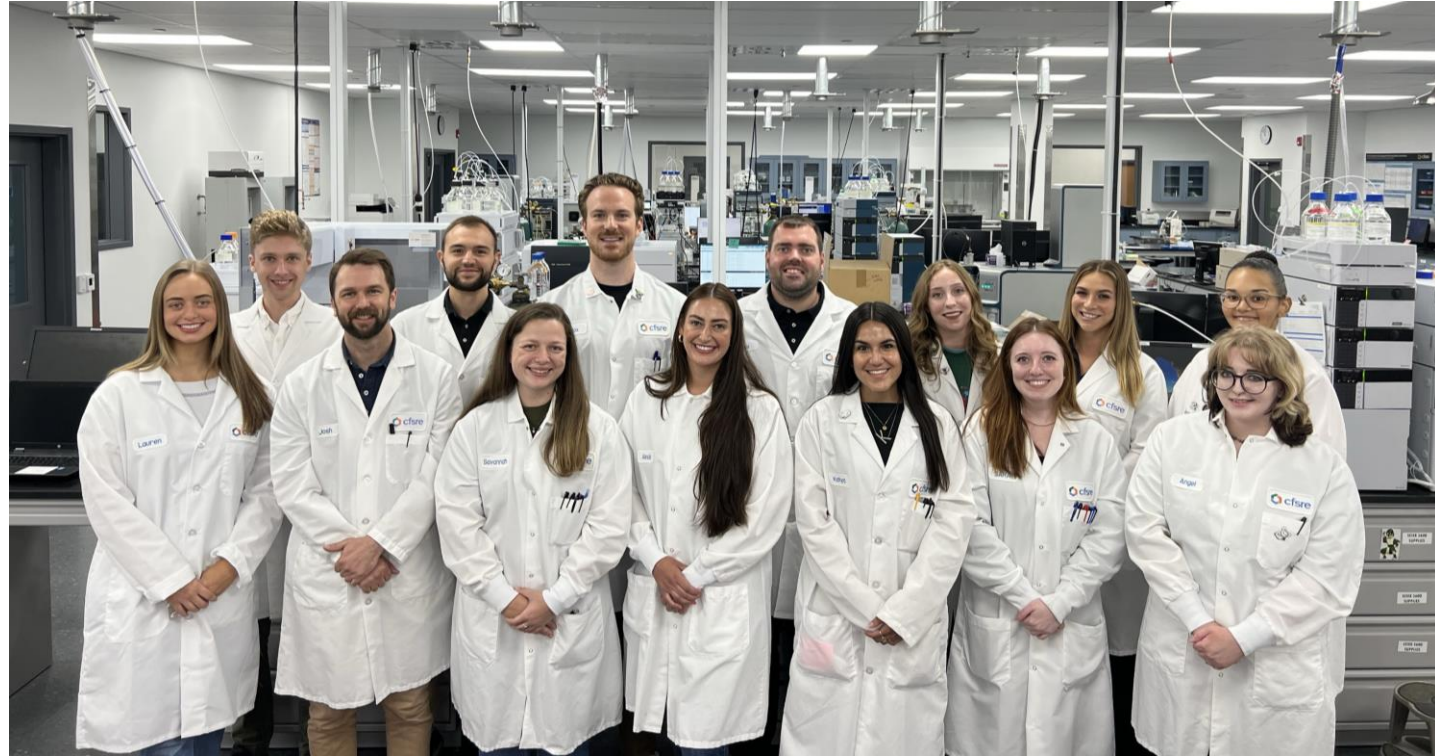


# WHAT'S HAPPENING?

- People using fentanyl remaining sedated even after administering Narcan<sup>1</sup>
- More severe presentations of withdrawal owing to Medetomidine's potency<sup>1,2</sup>
- 90% of opioid OD presentations in Philadelphia EDs resulting in ICU admission
  - 23% of those are intubated
- Unclear whether medetomidine causes wounds like those associated with xylazine use<sup>1,3</sup>
- Negative reactions to BTMPS (foul smell/taste)<sup>4</sup>
  - Increased concern among PWUD over adulteration in fentanyl supply

# ACKNOWLEDGEMENTS

- NPS Discovery Team
  - Dr. Josh DeBord
  - Dr. Alex Krotulski
  - Dr. Barry Logan
  - Alexis Quinter
  - Angel McDowell
  - Nicholas Khorozov
  - John Beer





THANK YOU!



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