COMMUNITY DRUG ALERT
July 5, 2024
Increase in overdose/drug poisonings

- From June 28 to July 4, there was an increased number of reported overdoses/ drug poisonings, with 41 reported cases, and 4 suspected drug-related deaths.
- The unregulated drug supply is unpredictable and unexpected reactions may occur.
- The Kitchener CTS Drug Checking Program has detected samples of Flubromazolam AKA “Liquid Xanax”, Xylazine, Fentanyl Analogues, Medetomidine/dexmedetomidine, Bromazolam. While a connection between the substances identified and the reported drug overdoses/poisonings is not known, details on these substances are included for your information.

IF SOMEONE OVERDOSES:
1. Call 911.
2. Administer naloxone if an opioid drug poisoning is suspected.
3. Perform rescue breathing and/or chest compressions.
4. Do not give any other substance(s) because this can make the overdose/drug poisoning worse.
5. If no improvements, continue to give naloxone 2-3 minutes apart until paramedics arrive.
6. If you have to leave the person unattended, put them in the recovery position.

IF USING SUBSTANCES:
- Never use substances alone. If using with a friend, do not use at the exact same time or use the National Overdose Response Service (NORS) at 1-888-688-6677.
- Try a small amount first and use less drugs when your tolerance may be lower.
- Avoid mixing substances – do not use other downers (e.g. benzos, alcohol, and other opioids).
- Have naloxone ready and know how to use it.
- Use at the Consumption & Treatment Services (CTS) site at 150 Duke Street West (Open 7 days a week, 9am-9pm, 8:30pm last call). Drug checking services are also available at the CTS site. Visit https://sanguen.com/drug-checking-program/
- Anyone who is involved in an overdose/drug poisoning including the person needing help and anyone at the scene is protected from simple possession charges if you call 911 by the Good Samaritan Drug Overdose Act.

RESOURCES

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<tr>
<th>Get a Naloxone Kit</th>
<th>Get Alerts</th>
<th>Get Support</th>
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<tr>
<td>Naloxone kits and harm reduction supplies are free and available for pickup across Waterloo Region.</td>
<td>Follow us on Twitter for community drug alert updates: @DrugStrategyWR.</td>
<td>Call Here 24/7 for addiction, mental health, and crisis services anytime for support.</td>
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<td>For pickup at public health or a community partner location, visit regionofwaterloo.ca/harmreduction or call 519-575-4400.</td>
<td>To sign up to receive alerts, visit <a href="https://subscription.waterlooregiondrugstrategy.ca/Subscribe">https://subscription.waterlooregiondrugstrategy.ca/Subscribe</a> or scan the QR code with a mobile device.</td>
<td>1-844-437-3247</td>
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<td>For other locations in Waterloo Region and across Ontario, visit Ontario.ca/naloxone.</td>
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<td>1-844-HERE247</td>
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<td>here247.ca.</td>
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Detected Substances from the Drug Checking Program – Key Information
Fentanyl
- A highly potent opioid, considered up to 50 times stronger than heroin and 100 times stronger than morphine. Fentanyl is the opioid of choice for many people who use opioids. Since the unregulated drug supply is unpredictable, a person may want to use fentanyl but it could be laced with something else or could be stronger.
- Naloxone can temporarily reverse the effects of an opioid overdose/ drug poisoning.

Fentanyl Analogues
- The continued presence of new high-potency opioids increases the risk of an overdose/ drug poisoning and may require more naloxone than expected to rouse individuals.

Flubromazolam, AKA “Liquid Xanax”
- A highly potent benzodiazepine (benzo).
- The effects of Flubromazolam can result in sedation. This means that the person may not wake up for an extended amount of time. If possible, stay with the person until they wake up or help arrives.
- Flubromazolam can result in memory loss. Sedation and memory loss may last more than 24 hours.
- The effects of Flubromazolam can have multiple "peaks". The effects may feel like they start to weaken but then can "peak" and feel stronger again later.
- Because Flubromazolam lasts in the body for a long time, using multiple times can cause it to build up in the body, increasing the risk of experiencing a drug poisoning.
- Harmful effects of Flubromazolam include:
  - Severe and prolonged sedation
  - Slow breathing
  - Low blood pressure
  - Memory loss
  - Difficulty in following and responding in a conversation, loss of muscle control in arms and legs, sleep paralysis, visual disturbances, heart palpitations (feeling like your heart is beating fast or fluttering)

Xylazine
- A veterinary medication used on animals for sedation, muscle relaxation, and pain relief.
- The presence of opioids in combination with Xylazine increases the risk of an overdose/ drug poisoning and death. Naloxone should still be used to reverse the effects of opioids, but naloxone cannot reverse the effects of Xylazine.
- In the event of an opioid and Xylazine overdose/drug poisoning, the effects of Xylazine might maintain sedation for a longer period of time. This means that the person may not wake up for an extended amount of time. If possible, stay with the person until they wake up or help arrives.
- Xylazine can produce significant harmful effects such as:
  - Shallow or slow breathing.
  - Low blood pressure and decreased heart rate.
  - Blurred vision, disorientation, dizziness, drowsiness, difficulty moving, slurred speech and fatigue.
  - Death.
- Xylazine can cause skin ulcers or wounds with possible infection, even if Xylazine is smoked or snorted. Xylazine wounds can take months or years to heal, and may not heal without medical care.

Medetomidine/dexmedetomidine
Anesthetic drugs considered to be more potent than xylazine (longer acting and producing greater sedation).

Medetomidine is a tranquilizer approved only for use on animals. Dexmedetomidine is approved for use on humans in addition to animals for sedation and pain relief.

Medetomidine/Dexmedetomidine has been detected in combination with Fentanyl. When used in combination with high-potency opioids the risk of dangerous suppression of vitals (i.e. slowing down of breathing, blood pressure, heart rate) is increased, which can present as extreme drowsiness and sedation. • In the event of an opioid and Medetomidine/Dexmedetomidine overdose/drug poisoning, naloxone will only work to reverse the effects of the opioid and not the sedation caused by Medetomidine/Dexmedetomidine. When possible, provide oxygen as part of the overdose response.

Bromazolam

• A highly potent, benzodiazepine-related drug.
• The presence of opioids in combination with benzodiazepine-related drugs increases the risk of an overdose/ drug poisoning and death. Naloxone should still be used to reverse the effects of opioids, but naloxone cannot reverse the effects of benzodiazepines.
• In the event of an opioid and benzodiazepine-related overdose/drug poisoning, the effects of the benzodiazepine may maintain sedation for a longer period of time. This means that the person may not wake up for an extended amount of time. If possible, stay with the person until they wake up or help arrives.
• Benzodiazepine effects can include the following:
  o Blackouts, memory loss, drowsiness and sedation: the person may feel very sleepy and slip in and out of consciousness.
  o Slurred speech, impaired balance, gogginess and/or movement control.
  o Slow breathing.

Drug checking is available at the Kitchener CTS site, for more information please visit: https://sanguen.com/drug-checking-program/

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