

COMMUNITY DRUG ALERT

October 22, 2024

Five suspected overdose/drug poisoning related deaths from October 11 - October 21


- From October 11 to October 21, there were 5 suspected drug-related deaths.
- It is respiratory illness season. Respiratory illnesses and infections such as COVID-19, influenza, and respiratory syncytial virus (RSV) can affect breathing and may increase risk of overdose. Go slow and use less when sick. "Downers" or drugs with sedative properties cause breathing to slow down so there may be increased risk of overdose death.
- The Kitchener CTS Drug Checking Program found high potency Fentanyl, Para-fluorofentanyl, Oxazepam, Flubromazolam AKA "Liquid Xanax", Fentanyl Analogues, Medetomidine/dexmedetomidine, Bromazolam in samples over the last week.
- Oxazepam is a benzodiazepine-related drug with a slow onset that can slow or stop breathing, especially if an opioid or alcohol was recently used. Oxazepam is known as a slow "creeper" because the risk of overdose may not happen right away but could happen later.
- Naloxone does not reverse the effects of non-opioid substances such as Oxazepam, Flubromazolam, Dexmedetomidine, and Bromazolam. Naloxone should still be given in suspected overdoses.
- While a connection between the substances identified and the suspected drug overdose/poisoning related deaths is not known, the 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.

Get a Naloxone Kit	Get Alerts	Get Support
<p>Naloxone kits and harm reduction supplies are free and available for pickup across Waterloo Region.</p> <p>For pickup at public health or a community partner location, visit regionofwaterloo.ca/harmreduction or call 519-575-4400.</p> <p>For other locations in Waterloo Region and across Ontario, visit Ontario.ca/naloxone.</p>	<p>Follow us on Twitter for community drug alert updates: @DrugStrategyWR.</p> <p>To sign up to receive alerts, visit https://subscription.waterlooregiondrugstrategy.ca/Subscribe or scan the QR code with a mobile device.</p> 	<p>Call Here 24/7 for addiction, mental health, and crisis services anytime for support.</p> <p>1-844-437-3247 1-844-HERE247 here247.ca.</p>

Detected Substances from the Drug Checking Program – Key Information

Fentanyl

- A highly potent opioid, 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 in the unregulated drug supply increases the risk of an overdose/ drug poisoning. Overdoses may require **more naloxone than expected**

Para-fluorofentanyl

- A very strong fentanyl-related drug considered to be stronger than fentanyl.
- Using strong opioids increases the risk of an overdose/drug poisoning and may need more naloxone to wake up individuals.

Oxazepam

- A benzodiazepine-related drug that may be used to treat anxiety and symptoms of alcohol withdrawal.
- Oxazepam can slow or stop breathing, especially if an opioid or alcohol was recently used.
- An overdose of oxazepam can be fatal, especially if taken with alcohol, opioids, or other drugs that cause drowsiness or slow breathing.
- Oxazepam is known as a slow "creeper" because the risk of overdose may not happen right away but could happen later.
- Taking opioids in combination with benzodiazepine-related drugs increases the risk of an overdose/ drug poisoning and death.
- Naloxone cannot reverse the sedative effects of non-opioid substances such as Oxazepam. Continue to give naloxone in suspected overdoses. When possible, provide oxygen as well.

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)

Medetomidine/dexmedetomidine

- Anesthetic drugs that are stronger than xylazine. These drugs last longer and the person may not wake up for a long time.
- 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 was found in combination with Fentanyl. When used with strong 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.
- Naloxone cannot reverse the sedative effects of non-opioid substances such as Medetomidine/dexmedetomidine. Continue to give naloxone in suspected overdoses. When possible, give oxygen as well.

Bromazolam

- A strong benzodiazepine-related drug.
- Using opioids in combination with benzodiazepine-related drugs increases the risk of an overdose/ drug poisoning and death.
- Give naloxone to reverse the effects of opioid overdose. Naloxone cannot reverse the sedative effects of non-opioid substances such as Bromazolam. When possible, give oxygen as part of the overdose response.
- If there is an opioid and benzodiazepine-related overdose/drug poisoning, the person may not wake up for a long time. If possible, stay with the person until they wake up or help arrives.
- Benzodiazepine effects can include the following:
 - Blackouts, memory loss, drowsiness and sedation: the person may feel very sleepy and slip in and out of consciousness.
 - Slurred speech, impaired balance, grogginess and/or movement control.
 - Slow breathing

Drug checking is available at the Kitchener CTS site, for more information please visit:

<https://sanguen.com/drug-checking-program/>

Media Request Inquiries:

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