

DASHBOARD OF EMERGING DRUG HARMS - December 2017

Key clinical messages

1. Fentanyl & analogues: continued concern about emerging harm including death. Guidelines available for clinicians on managing staff exposure to synthetic opioids.
2. Synthetic cannabinoids: use in prisons remains problematic. New forms of SCRAS reported including crystalline forms.
3. 2016/17 adult drug treatment data (NDTMS) show reduction in presentation for help with NPS and club drugs, with the exception of ketamine which is increasing.

Drug	Emerging harm/ risk factors/geographical area(s)	Sources/research/guidance
SEDATIVES/DISSOCIATIVES		
Heroin contaminated with fentanyl/ carfentanyl	<p>Around 80 drug-related UK deaths linked to fentanyl or analogues since December 2016.¹</p> <p>Majority of deaths identified among heroin users in Yorkshire & Humber</p> <p>Increasing diversification of fentanyl analogues in Europe with 16 new fentanyls provisionally notified since the start of 2016.²</p>	<p>¹ Alert issued through NHS Central Alerting System, 27 April. Now down-graded to routine. See National Crime Agency report and PHE blog for more details. Handling advice can be found in UNODC manual (p. 15) which reports risk of fentanyl toxicity via dermal absorption as extremely low – refer to manual for info on basic personal protection.</p> <p>For community-based (inc primary care) advice on Naloxone administration see UK guidelines on clinical management of drug misuse; for secondary care see TOXBASE</p> <p>² EMCDDA</p>
Gabapentinoids	Potentially increased risk of acute overdose death when used with opioids ³	³ Addiction article May 2017
Ketamine	The number of people presenting for treatment who report ketamine use has risen by 25% in context of a general reduction in use of NPS & club drugs reported to NDTMS ⁴	⁴ Adult substance misuse statistics from the National Drug Treatment Monitoring System (NDTMS) 1 April 2016 to 31 March 2017
Benzodiazepines	Benzodiazepines implicated in an increasing number of deaths. Geographically widespread ⁵	⁵ Drug-related deaths reports for Scotland, England & Wales (links in yellow box on next page); Drug and Alcohol Monitoring and Information System (N. Ireland) – direct communication to RIDR
Alprazolam (Xanax)	Tranquilliser use among young people has trebled (from 0.3% to 0.9%) in the last year ⁶ . Since May 2017, reports of widespread use of Xanax among young people, often co-ingested with alcohol, sometimes leading to hospitalisation ⁷	⁶ Smoking, drinking and drug use among young people (2016) ⁷ Wiltshire police report ; Drink & Drug News article
Volatile substances	4.8% of 11-15 year olds reported last-year use of glue, gas, aerosols, solvents ⁸	⁸ Highest proportion since 2006 Smoking, drinking and drug use among young people (2016)
HALLUCINOGENS		
Lysergic acid 2,4-dimethylazetidine	Blood in stools and numbness in hands after taking orally - SE England ⁹	⁹ RIDR: one report relating to two 15 year-old females
SYNTHETIC CANNABINOID RECEPTOR AGONISTS (SCRAS)		
Synthetic cannabinoid receptor agonists (SCRAS)	<p>In first seven months of RIDR, a total of 115 (46%) reports related to harms caused by SCRAS among prisoners and street homeless¹⁰</p> <p>Reports received from more than one source of crystalline SCRAS, sometimes sold as MDMA¹¹ - may increase risk of adverse reactions because likely to be strong doses; added risk if sold as MDMA</p>	<p>¹⁰ RIDR</p> <p>FEWS: Analysis of 400 collected samples from 20 prisons:</p> <ul style="list-style-type: none"> • 67% drugs were NPS, 99% of which were SCRAS • 19 different SCRAS detected - 5F AKB-48 was the most detected drug (13% of samples) <p>¹¹ PHE Alerts; PH Wales</p>

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STIMULANTS

Pentylone/ N-Ethylpentylone	Sold as MDMA - cause nausea, vomiting, hypothermia, inability to sleep and agitation ¹²	¹² Reported at summer festivals (Kendal Calling and V Festival " Anonymous " logo pills with pentylone)
Cocaine & fentanyl	Limited evidence emerging of cocaine mixed with fentanyl ¹³ USA & Ireland	¹³ Lab reports for police reported to PHE NPS Clinical Network
Red Ferrari (MDMA)	Rhabdomyolysis ¹⁴	¹⁴ RIDR: 2 cases. Biological sample in one case showed cocaine & diazepam metabolites only – no evidence of MDMA ingestion
DOB	(bromo-2,5-dimethoxyamphetamine or brolamfetamine) Atrial fibrillation - NW England ¹⁵	¹⁵ RIDR: 1 case. 18 year old male took 2.5 tabs. Required medication to reverse effects

OTHER DRUGS

DNP (slimming drug)	(2-4-dinitrophenol) 1 fatal overdose ¹⁶ – young women	¹⁶ RIDR
Poppers/amyl nitrites	Reports relating to eye damage as result of using poppers – men who have sex with men ¹⁷	¹⁷ British Journal of Ophthalmology Global Drug Survey in BMJ Open Ophthalmology
Nitrous oxide	4% 11-15 year olds report use of nitrous oxide (not previously measured, but compared to 7.9% cannabis use) ¹⁸	¹⁸ Smoking, drinking and drug use among young people (2016)

PREVALENCE/TREATMENT STATS AND OTHER DATA

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| <ul style="list-style-type: none"> • Crime Survey for England and Wales drug misuse findings • NDTMS annual treatment statistics reports: Adults (NEW 2016/17); Young people; Prisons • Smoking, drinking and drug use among young people – England 2016 | <ul style="list-style-type: none"> • Deaths related to drug poisoning in England and Wales: 2016 registrations • Drug-related Deaths in Scotland in 2016 National Records of Scotland • NPS at Crew Annual Report 20162017 • European Drug Report 2017 (EMCDDA) |
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CLINICAL ADVICE/UPDATES

Chemical makeup of NPS varies widely - treat acute presentations based on symptoms at clinical presentation. NPIS [Toxbase](#) has a symptom search function useful if drug not known. Always ask about the use of other drugs and alcohol as poly-substance use is common and may influence clinical presentation. If the actual substance taken is not known, consider treating according to broad psychoactive effect (e.g. stimulant, sedative, hallucinogen). [Drugs Wheel](#) provides a summary of the psychoactive categories into which different NPS fall.

[Project NEPTUNE](#) provides guidance on the clinical management of acute and chronic harms of club drugs and NPS, along with recently-published [e-learning modules](#) for clinicians & other practitioners.

Updated [Drug misuse and dependence: UK guidelines on clinical management](#) contain some information on the clinical management of those seeking treatment for NPS use.

Drug treatment staff can use transferable skills in dealing with longer term issues within broad drug categories as above (sedatives/dissociatives; stimulants, hallucinogens, cannabinoids). For more details, see PHE's [NPS toolkit for substance misuse commissioners](#) and [NPS in Prisons – a toolkit for prison staff](#)

[Spice briefing commissioned by Manchester Health and Care Commissioning](#) - provides info on chemical make-up, effects and treatment