

DASHBOARD OF EMERGING DRUG HARMS - April 2018

Key clinical messages

1. Fentanyl & analogues: although number of UK deaths has decreased in the last 3 months, it is important to remain alert because of continued high fentanyl (and analogue) related death rate in other regions, particularly North America
2. Synthetic cannabinoids: most frequently reported drug to RIDR. Use in prisons remains problematic. Local alert issued in West Midlands re: adverse effects of 5F-ADB
3. Increasing concern about Xanax/alprazolam use, particularly in adolescents, although currently there is little firm data to draw conclusions.

Drug	Emerging harm/ risk factors/geographical area(s)	Sources/research/guidance
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SEDATIVES/DISSOCIATIVES

Heroin contaminated with fentanyl/ carfentanyl	<p>Around 60 drug-related UK deaths now linked to fentanyl or analogues since December 2016.¹</p> <p>Increasing diversification of fentanyl analogues in Europe with 16 new fentanyls provisionally notified since the start of 2016.²</p> <p>Important to distinguish between medicinal fentanyl and illicitly produced fentanyl and its analogues. There is some evidence of medicinal fentanyl (e.g. patches) leaking to illicit markets³, but the majority of fentanyl and analogues remains illicit.</p>	<p>¹ Alert issued through NHS Central Alerting System, 27 April. Now down-graded to routine. National Crime Agency report contains handling advice. UNODC manual (p. 15) reports risk of fentanyl toxicity via dermal absorption is 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> <p>³ Verbal report to PHE’s NPS Clinical Network</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)	Previous dashboards have reported increased illicit use of alprazolam (Xanax) among young people, often in conjunction with alcohol. Northern Ireland confirmed reports of increased “Xanax” misuse & overdose among adults, particularly heroin users. Scotland reflects same concerns; analysis of seizures reveals majority of pills contain alprazolam but concentration varies widely.	⁶ Verbal reports to PHE’s NPS Clinical Network
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-dimethylazetidide	Blood in stools and numbness in hands after taking orally - SE England ⁹	⁹ RIDR: one report relating to two 15 year-old females
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SYNTHETIC CANNABINOID RECEPTOR AGONISTS (SCRAS)

Synthetic cannabinoid receptor agonists (SCRAs)	<p>West Midlands issued alert following reports of “up to seven” deaths associated with “mamba” identified as 5F-ADB in the Birmingham area¹⁰</p> <p>Outbreak of severe bleeding in Illinois, USA, linked to use of synthetic cannabinoid products containing brodifacoum (rat poison)¹²</p>	<p>¹⁰ West Midlands Police report</p> <p>¹¹ Communication from EMCDDA Early Warning System</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 – young women ¹⁶	¹⁶ RIDR
Poppers/amyl nitrites	Reports relating to eye damage as result of using poppers in 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 . Use among YP may become more widespread as festival season approaches	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 2016/2017 • 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 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)

[Drug Wheel](#) provides a summary of NPS which fall into different psychoactive categories

[Project NEPTUNE](#) provides guidance on the clinical management of acute and chronic harms of club drugs and NPS.

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