

DASHBOARD OF EMERGING DRUG HARMS - June 2018

Key clinical messages		
<p>1. Fentanyl &amp; 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;</p> <p>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;</p> <p>3. Increasing concern about Xanax/alprazolam use, particularly in adolescents, although currently there is little firm data to draw conclusions.</p>		
Drug	Emerging harm/ risk factors/geographical area(s)	Sources/research/guidance
SEDATIVES/DISSOCIATIVES		
Heroin contaminated with fentanyl/ carfentanyl	<p>Around 60 drug-related UK deaths now linked to illicit fentanyl or analogues since December 2016.<sup>1</sup></p> <p>Increasing diversification of fentanyl analogues in Europe with 25 (13 in the UK) new fentanyls provisionally notified since the start of 2016.<sup>2</sup></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 markets<sup>3</sup>, but the majority of fentanyl and analogues remains illicit.</p>	<p><sup>1</sup> Alert issued through NHS Central Alerting System, 27 April. Now down-graded to routine. <a href="#">National Crime Agency report</a> contains handling advice. <a href="#">UNODC manual</a> (p. 15) reports risk of fentanyl toxicity via dermal absorption is extremely low, refer to manual and <a href="#">PHE guidance</a> for info on basic personal protection.</p> <p>For community-based (including primary care) advice on Naloxone administration, see <a href="#">UK guidelines on clinical management of drug misuse</a>; for secondary care, see <a href="#">TOXBASE</a>.</p> <p><sup>2</sup> EMCDDA</p> <p><sup>3</sup> Verbal report to PHE's NPS Clinical Network</p>
Gabapentinoids	Potentially increased risk of acute overdose death when used with opioids <sup>3</sup>	<sup>3</sup> <a href="#">Addiction article May 2017</a>
Benzodiazepines  Alprazolam (Xanax)	<p>Benzodiazepines implicated in an increasing number of deaths. Geographically widespread<sup>5</sup></p> <p>Previous dashboards have reported increased illicit use of Xanax/alprazolam among young people, often in conjunction with alcohol and intelligence shows there has been a general increase in use and availability. Northern Ireland confirmed reports of increased "Xanax" misuse &amp; overdose among adults, particularly heroin users. Scotland reflects same concerns; analysis of seizures reveals majority of pills contain alprazolam but concentration varies widely and some tablets have been shown to be much stronger than indicated.<sup>6</sup></p>	<p><sup>5</sup> Drug-related deaths reports for Scotland, England &amp; Wales (links in 'Prevalence/Treatment Stats and Other Data' box on next page); Drug and Alcohol Monitoring and Information System (N. Ireland) – direct communication to RIDR</p> <p><sup>6</sup> Verbal reports to PHE's NPS Clinical Network</p> <p>Investigations continue to formally determine increased prevalence of use and harms.</p>
Volatile substances	4.8% of 11-15 year olds reported last-year use of glue, gas, aerosols, solvents <sup>8</sup>	<sup>8</sup> Highest proportion since 2006 <a href="#">Smoking, drinking and drug use among young people (2016)</a>
HALLUCINOGENS		
	N.A.	N.A.
SYNTHETIC CANNABINOID RECEPTOR AGONISTS (SCRAS)		
Synthetic cannabinoid receptor agonists (SCRAs)	West Midlands issued alert following reports of "up to seven" deaths with five deaths reported (but as yet unconfirmed by police) to be linked to the same batch of 5F-ADB in Birmingham area. <sup>10</sup>	<p><sup>10</sup> RIDR</p> <p>It is recommended to avoid use of the term "Spice" as it implies reference to a single identifiable substance. Spice is in fact a generic term for synthetic cannabinoids.</p>

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**STIMULANTS**

Pentylone/ N-Ethylpentylone	Sold as MDMA - cause nausea, vomiting, hypothermia, inability to sleep and agitation <sup>12</sup>	<sup>12</sup> Reported at summer festivals in 2017 and 2018
Cocaine & fentanyl	Evidence of cocaine mixed with fentanyl <sup>13</sup> appearing in USA, Canada & Ireland	<sup>13</sup> Lab reports for police reported to PHE NPS Clinical Network

**OTHER DRUGS**

DNP (slimming drug)	(2-4-dinitrophenol) 1 fatal overdose – young women <sup>16</sup>	<sup>16</sup> RIDR
Poppers/amyl nitrites	Reports relating to eye damage as result of using poppers in men who have sex with men <sup>17</sup>	<sup>17</sup> <a href="#">British Journal of Ophthalmology</a> <a href="#">Global Drug Survey in BMJ Open Ophthalmology</a>
Nitrous oxide	4% 11-15 year olds report use of nitrous oxide (not previously measured, but compared to 7.9% cannabis use) <sup>18</sup> . Use among YP may become more widespread as festival season approaches <sup>19, 20</sup>	<sup>18</sup> <a href="#">Smoking, drinking and drug use among young people (2016)</a> <sup>19</sup> <a href="#">Nitrous oxide – Information Sheet</a> <sup>20</sup> <a href="#">FRANK information on nitrous oxide</a>

**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.

**PREVALENCE/TREATMENT STATS AND OTHER DATA**

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| <ul style="list-style-type: none"> <li>• <a href="#">Crime Survey for England and Wales drug misuse</a> findings</li> <li>• NDTMS annual treatment statistics reports: <a href="#">Adults (NEW 2016/17)</a>; <a href="#">Young people</a>; <a href="#">Prisons</a></li> <li>• <a href="#">Smoking, drinking and drug use among young people – England 2016</a></li> </ul> | <ul style="list-style-type: none"> <li>• <a href="#">Deaths related to drug poisoning in England and Wales: 2017 registrations</a></li> <li>• <a href="#">Drug-related Deaths in Scotland in 2017 National Records of Scotland</a></li> <li>• <a href="#">European Drug Report 2018</a> (EMCDDA)</li> </ul> |
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