Boston Public Health Commission

Xylazine Public Health Advisory, November 2022

Boston Public Health Commission (BPHC) alerts the community and service providers about the presence of xylazine in the local drug supply.

On November 8 the US Food and Drug Administration released a warning to healthcare providers about the risks of patient exposure to xylazine, a non-opioid veterinary tranquilizer. Xylazine has been detected in an increasing number of street drug samples analyzed in Massachusetts. Xylazine can contribute to oversedation and increases the risk of overdose, especially when combined with opioids. Healthcare providers should be aware of the increasing prevalence of xylazine in the street drug supply and how to prevent, recognize, and respond to an overdose when xylazine may be involved. Additionally, healthcare providers should understand how xylazine causes medical harms and creates complications during substance use disorder (SUD) treatment.

Epidemiology

Following an initial surge seen in 2021, Massachusetts Drug Supply Data Stream (MADDS) continues to detect xylazine in the street supply, primarily in drugs sold as heroin, dope, or fentanyl. About 21% of samples from Eastern Massachusetts tested positive for xylazine between January to June 15, 2022. From November 2021 to November 2022, 116 drug samples were tested from Boston that contained heroin, fentanyl, or other opioids. 29% of these samples contained xylazine.

Health Risks

<u>Xylazine</u> is a long-acting tranquilizer which can cause unresponsiveness and loss of consciousness. With large doses xylazine depresses breathing, slows heart rate, and induces low blood pressure. There is an increased risk for overdose and death when xylazine is found in combination with other sedating drugs like opioids. Although naloxone can treat an opioid overdose, it does not affect xylazine. **Always administer naloxone during suspected overdose events and call 911**. Give rescue breaths and monitor the individual until help arrives. Keep in mind that someone might begin breathing on their own again before they regain consciousness if xylazine is present. If the person is breathing on their own, continue to monitor their breathing and refrain from administering additional naloxone unless they stop breathing again. If you need to leave them for any reason, put them on their side in the recovery position.

Due to sedation people may sustain serious injuries from falls and it is not uncommon for individuals to lose consciousness while still standing. Sedation can also lead to people staying in one position for long periods of time, which restricts blood flow to body parts risking kidney,

muscle and nerve damage. Additionally, injecting xylazine may increase risk of skin ulcers at the injection site and around other cuts. Skin ulcers from xylazine may quickly lead to infection and necrosis. Users have reported that ulcers may also appear on the body where no injection use has taken place.

<u>Per the FDA</u>, withdrawal symptoms such as severe anxiety or agitation can occur when usual doses of the drug are decreased or discontinued. These withdrawal symptoms may discourage a patient from seeking out treatment for concurrent opioid use disorder (OUD).

Responding to Xylazine

Detecting xylazine – Xylazine <u>appears as a brown or white powder</u>. Providers should be mindful that xylazine cannot be detected by routine toxicology tests. The BPHC-run harm reduction program AHOPE has the capacity to test drug samples for the presence of xylazine using a spectrometer.

Preventing overdose from xylazine – BPHC advises people who use drugs to not use alone. Taking turns when using can prevent simultaneous overdose. In the event of an overdose, call 911, administer naloxone, give rescue breaths, and monitor until breathing resumes, even if the person remains unresponsive. Community members can pick up naloxone from local pharmacies without a prescription, or by scheduling an <u>overdose prevention training with the Boston Public Health Commission</u>. People who use drugs and their loved ones can access naloxone through programs listed on the <u>MADPH website</u>. Eligible programs may apply for <u>discounted naloxone</u> through the State. If someone is over sedated, put them on their side in the recovery position, make sure their airway is clear, and monitor their breathing.

Preventing and treating skin infections – People who inject drugs are recommended to use a new, sterile syringe and clean the site with an alcohol swab before every injection to prevent infection. Monitor injection sites and other cuts or scratches and seek medical attention in case of abscesses or skin ulcers. Rotate injection sites to prevent vein damage and reduce the risk of infection. Consider taking a break from injecting by switching to sniffing or smoking instead. Contact a healthcare provider or <u>Boston Health Care for the Homeless</u> for help with abscesses and wound care. Call 911 for any emergencies.

Managing withdrawal symptoms – <u>Health care professionals serving</u> patients who use opioids should monitor patients for withdrawal symptoms not managed by traditional OUD treatments, as this may indicate xylazine withdrawal.

BPHC urges the community and service providers to share this advisory and discuss the harms of xylazine and how to respond.

If someone you know needs services for substance use disorder you can call 311 in Boston.