



Much of Heroin Supply Adulterated with Fentanyl



OSAM-o-Gram

Ohio Substance Abuse Monitoring Network

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UPDATE

Since its June 2014 publication of the **OSAM-O-Gram** *Unintentional Drug Overdose Deaths Reach Historic High Second Year in a Row: Fentanyl-Cut Heroin a Likely Major Contributor*, the OSAM Network has continued to track an increase in fentanyl-cut heroin. Table 1 indicates reports by OSAM region of fentanyl-cut heroin over time. The Summit County Medical Examiner's Office has confirmed greater than 100 fentanyl-heroin overdose deaths so far this year; 4-5 deaths per week in Summit County alone (www.wkyc.com, Aug. 24, 2015).

Table 1. Participant Report of Fentanyl-Cut Heroin*

Region	January 2011	June 2011	January 2012	June 2012	January 2013	June 2013	January 2014	June 2014	January 2015	June 2015
Akron-Canton		+		+		+	+	+	+	+
Athens		+	+		+			+	+	
Cincinnati		+			+	+		+	+	+
Cleveland		+	+	+	+	+	+	+	+	+
Columbus	+				+			+	+	+
Dayton							+	+	+	+
Toledo	+	+	+	+	+	+	+	+	+	+
Youngstown		+					+	+	+	+

*The symbol '+' indicates participant report of fentanyl as a suspected cut for heroin

June 2015 - Users, treatment providers and law enforcement from across Ohio reported that much of the heroin supply is adulterated with fentanyl and that fentanyl is often sold as heroin. Law enforcement in Stark County reported that in one case of an overdose, their crime lab reported that the substance that was thought to be heroin was actually acetyl fentanyl (a designer drug never licensed for medical use); reportedly, it was five times more potent than heroin and was purchased by the dealer over the Internet from Hong Kong.

Several law enforcement agencies throughout Ohio reported purchasing heroin undercover only to discover through lab testing that the heroin specimen was actually fentanyl. When buying white powdered heroin, Youngstown users believed five out of 10 times that what they purchased was fentanyl rather than heroin. In addition, BCI crime labs reported that they have processed a lot of fentanyl-heroin mix and even straight fentanyl samples submitted as suspected heroin during the past six months. Much of the fentanyl found in heroin reportedly comes from clandestine labs and is not diverted pharmacy-grade fentanyl.

"Blue Drop" - Most users reported gray, pink or white powdered heroin as the most potent and desirable types because these types are often cut with fentanyl. However, participants in the Dayton region reported the presence of a type of fentanyl-heroin mix called "blue drop." A law enforcement professional noted, "Blue drop with fentanyl, that just come through. We had a few people test for that." A treatment provider reported, "Well, they called it 'blue drop' here because they (dealers) were dying the drug blue." A user said, "Blue drop is killing people."

This past May, Ohio media outlets reported on a blue-drop heroin epidemic in Marion (Marion County), which resulted in two deaths and 30 overdoses in a one-week period (www.nbc4i.com, May 28, 2015). Police reported that the deadly heroin had a blue color, a high concentration of fentanyl and came from Chicago. Media warned that blue-drop heroin had also popped up in other Ohio cities, including Dayton (Montgomery County) and Portsmouth (Scioto County).

Reportedly, the danger of using fentanyl-cut heroin is well understood by users, but most users expressed seeking it out despite their understanding of the overdose danger. Several users shared stories of friends who died using fentanyl-cut heroin. A Cleveland participant said, *"This girl I was using with, she overdosed and died and I called her dealer right then and there and told him I wanted some of that (stuff) that she just OD'd on ... dude thought I was crazy but he brought it over and it knocked me out ... that was some good (stuff)."* Many participants and treatment providers have shared similar stories of users seeking heroin linked to overdose deaths.

Lives can be saved with naloxone.

Naloxone, a medication which functions as an opiate antidote in reversing heroin overdose, is becoming increasingly more available throughout Ohio. With the passage of HB 170, signed into law by Gov. John Kasich in March 2014, first responders (including family members) are immune from criminal prosecution for administering naloxone. Many law enforcement agencies and EMS companies now carry naloxone. More recently, Gov. Kasich signed HB 4, which expands access to naloxone by permitting pharmacists to dispense without a prescription when authorized by a physician or a board of health, making the life-saving drug available directly at the pharmacy.

A 2011 review of drug overdose deaths from Scioto County found that 87 percent of decedents were not alone at the time of their death, with predominantly adult family members or significant others present when they died (*Scioto County Poison Death Review*, 2011, Ohio Department of Health).

Most overdoses are witnessed, and the provision of naloxone can enable these witnesses to respond in a safe and effective manner (Ohio Department of Health, Project DAWN Background Document, <http://www.healthy.ohio.gov/vipp/drug/ProjectDAWN.aspx>).

Project DAWN (Deaths Avoided with Naloxone), sponsored by the Ohio Department of Health, is open to the public and provides no-cost training and protocol for naloxone programs. The project has expanded from a few sites in a couple of counties in 2013 to several sites in 24 counties spanning every region of Ohio. For a current list of Project DAWN sites visit: <http://www.healthy.ohio.gov/vipp/drug/ProjectDAWN.aspx>.



In addition, Project DAWN has partnered with the state's six psychiatric hospitals operated by the Ohio Department of Mental Health and Addiction Services (OhioMHAS) to provide, upon discharge, a naloxone prescription to those who had a diagnosis of opioid/opiate addiction when admitted for treatment. Likewise, Cuyahoga County Project DAWN has partnered with the Cuyahoga County Sheriff's Office to provide a naloxone kit upon jail release to those identified as at-risk for opiate overdose.

Through the most recent SFY 16-17 state budget, OhioMHAS is releasing \$500,000 per year to county health departments so naloxone can be made available to local law enforcement, emergency personnel and first responders.

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