Epidemic Proportions: Strength, Epidemiology & Public Safety Threats of Carfentanil et al.

Drew Harrell, MD
Medical Director, Albuquerque Fire Department
Medical Director, Bernalillo Co. Sheriff’s Department
UNM EMS Medical Direction Consortium
Questions to consider…

1- Public health threat or Law Enforcement issue?

2- Changes to LEO standard operations? How should Fire/EMS approach this growing issue and be prepared to help?

3- What’s the solution!
Overdose cases spike in Louisville: 52 calls in 32 hours

By Ralph Ellis and Keith Allen, CNN

Updated 2:38 PM ET, Mon February 13, 2017
'He's blue': Louisville rattled by 151 overdoses in 4 days

By Sonia Moghe and Wayne Drash, CNN

Updated 1:53 PM ET, Tue February 14, 2017
Toxicology Rounds: Who Said the Opioid Crisis Couldn't Get Any Worse?

Gussow, Leon MD

Emergency Medicine News:
November 2016 - Volume 38 - Issue 11 - pp 1,29–30
doi: 10.1097/01.EEM.0000508281.75514.70
Toxicology Rounds
(U//DSEN) Figure 4: Number of Fentanyl Exhibits in NFLIS, 2004-2015

Source: DEA
What we are NOT talking about...

Fentanyl (legal)
But this...
(U//DSEN) Illicit Fentanyl and Fentanyl Precursor Flow Originating in China

1. Fentanyl in powder form and pill presses are shipped via mail services.
2. The powder fentanyl is processed and mixed with heroin, or sold as heroin, or pressed into pills and sold in the Canadian drug market.
3. Some fentanyl products are smuggled from Canada into the United States for sale, on a smaller scale.
4. The powder fentanyl is processed and mixed with heroin, or sold as heroin, or pressed into pills and sold in the United States drug market.
5. The powder fentanyl are cut and diluted for further smuggling, or pressed into counterfeit prescription pills.
6. Diluted powder fentanyl and counterfeit prescription pills containing fentanyl are smuggled from Mexico into the United States.
7. Precursors for manufacturing fentanyl are shipped via mail services.
8. Precursors are used to manufacture fentanyl in clandestine laboratories.
9. Precursors are smuggled across the Southwest border into Mexico to manufacture fentanyl.
10. Precursors are used to manufacture fentanyl in clandestine laboratories.

Source: DEA
*Arrows do not represent specific transportation routes.
Buy Furanylfentanyl online from Ching Labs:

Furanylfentanyl is an extremely potent opioid which is structurally related to the highly potent opioid analgesic fentanyl.
Carfentanil or carfentanyl is an analogue of the popular synthetic opioid analgesic fentanyl, and is one of the most potent opioids known.
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I NARCANNED
YOUR
HONOR STUDENT

GRAND CARAVAN
(U) Opioid Overdoses Caused by Counterfeit Xanax® Containing Fentanyl in Northern California

(U) This DEA Bulletin is based on preliminary reporting and may be subject to updating as additional information becomes available.

DEA-SFO-BUL-047-16
JANUARY 2016

(U) Event

(UI/DSEN) In October and November 2015, the San Francisco Health Department and departments in the surrounding area issued health advisories detailing the overdoses and deaths arising from the ingestion of Xanax® purchased off the street. Although toxicology reports are pending, initial analysis of the counterfeit Xanax® pills has determined that they were either laced with fentanyl or composed entirely of it.

(U) Significance

(UI/DSEN) Xanax® purchased on the street can contain adulterants or may consist entirely of other substances, yet be indistinguishable from the legitimate pharmaceutical product. Fentanyl is an extremely potent, short acting synthetic opioid. The San Francisco Department of Public Health notes that Fentanyl may be more difficult than other opiates to reverse with naloxone, a short acting opioid antagonist. Multiple doses have often been required to reverse overdoses.

(U) Details

(UI/DSEN) From October 15 - 17, 2015, three individuals were examined at San Francisco General Hospital after ingesting a pill inscribed and sold as Xanax®, which was purchased off the street. All three suffered an opioid
FENTANYL PILLS DISGUISED AS PRESCRIPTION OXYCODONE TABLETS IN TUCSON, ARIZONA
OFFICER SAFETY/SITUATIONAL AWARENESS

SITUATION: On September 7, 2016, the Arizona HIDTA Counter Narcotics Alliance (CNA) seized approximately 1,100 blue tablets imprinted with an “M” on one side and “30” on the opposite side of the tablet. The tablet imprints and color are consistent with pharmaceutically manufactured Oxycodone tablets. Investigative intelligence indicates the tablets originated in Mexico. The Tucson Police Department Crime Laboratory analysis of one tablet revealed the presence of Fentanyl and Acetaminophen. Intelligence indicates the price for a Fentanyl tablet is approximately $18.00 in the Tucson, Arizona area.

Fentanyl/Acetaminophen tablets disguised as pharmaceutically manufactured Oxycodone tablets

Photographs: Tucson Police Department

OFFICER SAFETY: As a reminder, Fentanyl can be fatal if swallowed, inhaled or absorbed through the skin. If Fentanyl comes in contact with the skin, it can enter the body through the inadvertent touching of the mouth, nose, or other mucous membranes. Fentanyl can be lethal at very low exposure levels with doses as small as 250 micrograms leading to overdose and death.
FENTANYL / CARFENTANIL ALERT FOR CANINE HANDLERS

On October 27, 2016, the Broward Sheriff’s Office Detection Canine Unit assisted DEA, HSI, and the Lauderhill Police Department with the execution of a narcotics search warrant. The subject of the investigation was suspected in sale of Heroin and Heroin potentially laced with Fentanyl. It was believed that the supplier of the Fentanyl had been arrested some weeks prior to the execution of the warrant and the presence of Fentanyl was unlikely.
Tablets containing Fentanyl – Do the Math!

EMCDDA: 2mg is fatal.

Avg. tablet weight: 106mg
Avg. purity ~1.7%

Each tablet has: ~1.8mg fentanyl hydrochloride

Or... 1,800 Micrograms!!!
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DEA Minimum safety precautions

- Personal Protective Equipment (PPE): Evidence exhibits should be handled, processed, received, transferred and delivered while employing at a minimum a chemical resistant suit, respirator, nitrile gloves and eye protection, when contact with any suspected fentanyl related substance is a possibility.

- The PPE described should only be used when evidence is located and/or received in small amounts and can easily be contained and sealed, NOT where there is loose powder and/or gross contamination. A “Level A” protective suit should be utilized in areas with gross contamination; clandestine laboratory enforcement personnel are “Level A” certified and should be consulted in these instances.
I grabbed the bag and I closed it up,

Don’t fear it, but RESPECT it!
Fentanyl: Preventing Occupational Exposure to Emergency Responders
DEPARTMENT MEMORANDUM:

DATE: OCTOBER 27, 2016

TO: ALL SPECIAL OPERATIONS UNITS (SWAT, K9, ERT, CNT)

FROM: SHERIFF MANUEL GONZALES III

SUBJECT: UNIVERSAL PRECAUTIONS FOR SPECIAL OPERATIONS IN POSSIBLE FENTYNAL ENVIRONMENTS

The Sheriff’s Office has received information in regards to Fentanyl and Carfentil overdoses occurring in our state. According to the Drug Enforcement Administration (DEA) these synthetic drugs are being “cut” with Heroin and also being pressed into pills to avoid detection and are being trafficked as Oxycodone.
BCSO Overdose Response with Naloxone

1. Determine Unresponsiveness
   No breathing or No normal breathing

2. Advise Dispatch and
   Send second unit for Naloxone Kit

3. Initiate BCSO CPR protocol
   Retrieve or request AED

4. Have second unit administer
   First vial of Naloxone

5. If unresponsiveness continues
   Administer second vial of Naloxone

6. Continue CPR until EMS takes over
   Or the subject starts to move

7. Hand off to EMS
   For assessment and follow up
NEW MEXICO DEPARTMENT OF HEALTH
Administrative Manual

Chapter

ADMINISTRATION

EFFECTIVE:

REVISED: 4/13/9 draft

Policy

NALOXONE DISTRIBUTION POLICY

I. PURPOSE:

This New Mexico Department of Health (NMDOH) policy establishes guidelines for the dispensing of Naloxone through NMDOH Public Health Offices (PHO) and Contractors in order to reduce fatal opioid overdose as stated in Chapter 24, Article 23, Sections 24-23-1 and 24-23-2, NMSA 1978, and 7.32.7.1 through 7.32.13 NMAC, 9/13/2001.
Solutions...
Questions to consider…

1- Public health threat or Law Enforcement issue?

2- Changes to LEO standard operations? How should Fire/EMS approach this growing issue and be prepared to help?

3- What’s the solution!
But one final thing ...
Gathering of Eagles
FIRE RESCUE
TRAINING & SAFETY DIVISION

Courtesy of Palm Beach County Fire Rescue
Thank You

- dharrell@cabq.gov
- ajharrell@salud.unm.edu
It’s not “just another OD”

Kathleen Schrank, MD, FACEP, FACP
City of Miami & Key Biscayne Fire Rescue
“Rescue 6 to JMH...”

- 40 y.o. male found unresponsive at home by his brother, GCS 8, pinpoint pupils, improving with Narcan and IVF

- **ED**: Alert, cussing, screaming with back and leg pain
- No sx/sx trauma, can’t/won’t move legs
- Later RLE fine, LLE zero
- More Hx: Last seen normal MANY hours ago, found hanging over edge of bed, legs twisted under him
Labs:

- Venous pH 6.98, BE-17, lactic acid 4.7
- K+ 8.6
- Creat 4, PO4 14, uric acid 15, Ca 6.5, gap 33
- CPK >300,000
- Urine red, U/A blood high, no RBC

DDx LLE:

- Trauma : fx vs crush vs SCI vs compartment syndrome
- Rhabdo
- Plexopathy
“Rescue 5 to JMH....”

- 28 year old male opiate OD
- ED: RLE pain and swelling
- Crush/compartment syndrome
  - Fasciotomies
  - Later amputation
- Rhabdo, renal failure, dialysis
Compartment Syndrome & Fasciotomies

- Catastrophic diagnosis