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CRIME

'People are going to start losing limbs': Animal 'tranq' is reshaping RI's drug landscape



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Key Points

Drug users are often not aware they are taking xylazine

Many RI hospitals, and the Medical Examiner's Office, don't test for the drug

It can cause horrific physical side effects for users

Round, gray divots speckle Amy Treglia's forearms, as if someone had cruelly held burning cigarettes to the 45-year-old's skin until the flesh melted away. In some spots, scabs creep at the edges, evidence that not long ago the wounds were fresh and raw.

Treglia began noticing lesions sprouting, widening and worsening on her arms, legs and elsewhere this summer. She had no idea about the cause.

"This is what would happen the second I'd shoot up. The other pinpricks would turn green. Neon green," Treglia said recently as she examined scars on her arms, indentations that feel slightly rough to the touch.

Tara Dorsey, a court support coordinator with Project Weber/RENEW, clued her in — xylazine, a tranquilizer and muscle relaxant used by veterinarians, had probably been mixed in with a drug Treglia thought was fentanyl.

"I couldn't figure out why it was burning," Treglia said. "It felt like gasoline running through your veins. It eats you from the inside out."

More on xylazine: 'Enormous problems:' Animal sedative found in local drug supply increases overdose risk

Xylazine is making itself known in Rhode Island's drug supply

Xylazine is on the upswing in the Rhode Island drug supply, and it's catching people like Treglia off guard for its ability to cause stubborn, scaly wounds and to knock them out for hours on end.

"I'd wake up with a knot on my head. I'd be like, 'Where did my day go?'" said Treglia, who recently secured a bed at a sober house and is six-plus weeks clean, as apparent by her clear hazel eyes.

Strange bumps and bruises had appeared after long blackouts. Tiny pinpricks and ingrown hairs transformed into festering wounds. Treglia experienced agonizing withdrawal, with horrible stomach pains and retching until bile alone remained.

She and her dealer couldn't figure out what was going wrong. He bought a new batch. She tried cooking it; she tried not cooking it.

She forced herself to stand up while using to avoid blacking out, vowing to herself that "We're not going out."

"I never thought I'd be scared of something," Treglia said. "It's that scary."

Treglia decided she'd had enough and admitted herself to Butler Hospital, she said.

"I said whatever this animal is, I don't want no part of it," Treglia said.

More: Fighting to prevent overdoses in pregnant women, new moms: What's working in New England

What is xylazine and what are its side effects?

Approved by the Food and Drug Administration in the 1960s for use by veterinarians, xylazine acts as a long-acting sedative and painkiller for animals, particularly large mammals like horses and cattle.

It's a long-acting central nervous system depressant that can cause people to go into a prolonged stupor, especially when combined with other sedating medications, such as

opiates. It can cause low blood pressure, a slowed heart rate and decreased breathing and has been associated with skin lesions and infections.

With increasing frequency, xylazine is appearing in the drug supply across the country as a cutting agent mixed with heroin and illicit fentanyl. Known as "tranq" or "tranq dope" in some quarters, xylazine has hit Philadelphia hard. There, people report darkened, dying skin from wounds brought on by the sedative, and limbs having to be amputated due to untreated abscesses.

A nurse from Philadelphia recently spoke with Project Weber/RENEW staff in Rhode Island about what to look out for, how to treat wounds, and ways to safeguard the community.

"It kind of eats away at the skin. It's awful," said Matt Elliott, the Kennedy Plaza coordinator with Project Weber/RENEW.

People who encounter the drug, like Treglia, are thrown off by its effect. They don't know what's hit them.

"It really messes people up when they do take it," Elliott said. "They are very hard to wake up, and when they do, they can still be pretty messed up."

More: Fentanyl is driving overdoses in RI. That's why they hand out Narcan in Kennedy Plaza.

Many users don't know they are being exposed to xylazine, study says

The drug's true prevalence is not yet known, as health care providers and researchers scramble to study its impact, given an ever-changing drug supply. Few emergency rooms or medical examiners currently test for it, according to Traci Green, co-director of Rhode Island Hospital's Center of Biomedical Research Excellence on Opioids and Overdose.

Rhode Island Hospital, however, includes xylazine in its drug screen, Green said.

A study there found xylazine in biological samples of non-fatal overdoses after advanced toxicology testing was performed on blood and urine collected during the emergency room visits with patient consent, according to Dr. Rachel Wightman, a professor of emergency medicine at Alpert Medical School of Brown University.

The testing showed that xylazine was always found with illicit fentanyl, though none of the participants reported known exposure to xylazine, said Wightman, who led the study in

collaboration with Dr. Adina Badea, toxicology laboratory director at the hospital.

In addition, a two-year drug testing study released last year by testRI (Toxicological and Ethnographic Drug Surveillance Testing Rhode Island) revealed that 44% of the 90 samples of street drugs sold as fentanyl, cocaine or methamphetamine contained xylazine.

According to researchers with testRI, for which Wightman is a principal investigator, the findings highlight the unpredictability of the drug supply and the reality that people may not know what they are taking, thus increasing the risk of overdose.

The state Department of Health is working with testRI to share those findings with primary care and behavioral health providers, people who use drugs, local harm-reduction organizations, peer recovery support specialists and the general public, according to spokesman Joseph Wendelken.

Still, much remains unknown.

“How much is in there is the big question,” Green said. “Because we don’t know the safe dose, any presence is not good. Is it a little or a lot that causes the abscesses? We don’t know the answers. ... If we can get a better handle on the dosing, we can keep people safe.”

How xylazine use has swept across the United States

The national scope of overdose deaths linked to xylazine is unknown, but research shows overdose deaths linked to xylazine have spread west across the United States over the last decade, according to the National Institute on Drug Abuse. The largest impact has been seen in the Northeast, where xylazine was involved in 19% of all drug overdose deaths in Maryland in 2021 and 10% in Connecticut in 2020.

“It’s a double whammy. You can die from an overdose. You can die from infection,” Dorsey, of Project Weber/RENEW, said.

The state Department of Health is working to add xylazine to drug screening panels at the Medical Examiner’s Office, but it is not part of the testing regime at this point, Wendelken said. Consequently, the state’s information doesn't indicate whether xylazine is a contributor to accidental overdose deaths at a time when fatal overdoses hit a record of 435 in 2021.

A downward spiral: 'It consumes everything in my mind'

Treglia developed substance use disorder in her 20s after being prescribed painkillers following a car accident. A former boyfriend soon introduced her to heroin.

Treglia said she spiraled last summer on a quest for fentanyl. She sold her house and lived in hotel rooms, where she says she used drugs alone.

“I went through a disgusting amount of money in four months,” Treglia said.

It was during that time that she first noticed sores developing on her skin. She realized she was losing time due to blackouts during which her body would stiffen and contort into positions that left her cramped, sometimes with circulation in her limbs blocked.

The aftereffects crept into her psyche. Chronic xylazine use can lead to dependence and a withdrawal syndrome that can cause irritability, anxiety and unease.

“It gets into your mental unbelievable. It consumes everything in my mind,” Treglia said. “You have to get more and more to make it feel better.”

Why xylazine poses an even greater threat to the homeless

Xylazine presents particular concerns for the unhoused community. Long sedations leave people vulnerable to sexual assault, other violence and theft, not to mention the dangers posed by the elements.

“Being heavily sedated for people who are vulnerable anyway is a problem,” said Michelle McKenzie, the director of Preventing Overdose and Naloxone Intervention (PONI).

Dr. Josiah “Jody” Rich told of a client who recently awoke shaken to find his pockets emptied.

“People, if they’re homeless, they’re extremely vulnerable,” said Rich, an addiction specialist at Miriam Hospital and Brown University’s Alpert Medical School.

Advocates urge greater caution with drug use because of possible contamination

Advocates are spreading the word that people should be extra cautious if using drugs, given the uncertainty of the supply.

“What I tell somebody still using is to be very careful. Don’t use as much as usual and never use alone,” Project Weber/RENEW’s Elliott said.

Rhode Island State Police Lt. Derek Melfi said xylazine is increasingly being found in drugs seized by law enforcement, always as a cutting agent aimed at boosting profits. He theorized that the long-acting xylazine was being used to perhaps enhance the effects of fentanyl.

“It all comes down to money,” Melfi said.

He cautioned that young adults purchasing counterfeit pills they believe are Adderall or Percocet could unknowingly ingest xylazine with unintended, and unknown, consequences.

“You’ve got to understand what you’re taking,” Melfi said.

How can you help someone who appears to be overdosing?

Public health officials emphasize, too, the need to act fast to restore breathing when encountering a person who is believed to be overdosing.

First call 911, and then administer naloxone while applying chest compressions and breaths. Because xylazine is a sedative that doesn’t respond to naloxone, the person overdosing might not exhibit the “pop up” and more immediate response seen with opioids alone.

“Rescue breaths are still needed,” said Tom Joyce, director of East Bay Recovery Center and co-chair of the Governor’s Overdose Prevention and Intervention Task Force.

Advocates advise administering naloxone every two minutes if needed, while continuing to work to restore breathing with compressions and breaths.

Once breathing is restored, even if the person remains sedated, place them in the recovery position — on their side with a hand supporting their head and a knee bent to prevent rolling onto their stomach — and stop administering naloxone. The position will help them breathe as they wait for first responders to arrive.

Advocates also urge people to seek treatment for wounds and to practice good hygiene by using clean needles and other sterile materials. A test strip that can alert people on the spot to the presence of xylazine in a drug sample is in development.

There isn’t an approved antidote for xylazine overdose in humans, but often the approach entails treating the opioid use disorder, advocates said.

“The withdrawal symptoms would need to be alleviated, and then [the health care provider would] treat the underlying opioid use disorder,” Green said.

Green would like to see rescue workers, the police and other public health officials have protocols ready to deal with wound care, as well as safe places for heavily sedated people to be located until they regain consciousness.

“It’s in everyone’s best interest,” Green said.

Sid Wordell, executive director of the Rhode Island Police Chiefs Association, said he was unaware of any specific police protocols in regards to xylazine.

Likewise, the Providence Fire Department doesn’t know when responding to an overdose call if xylazine is in the mix, Capt. Thomas Stegnicki said.

“We’re not treating it any differently,” he said.

'I don't want anyone to go through this'

Typically, an overdose victim will respond to naloxone, but Stegnicki said he’s seen the dosing amount increase from 0.4 milligrams to 2 mg and up to 10 mg through the years. If the individual doesn’t respond, it is left to the hospital to determine what health concern is in play.

“Normally, you get some response with Narcan,” Stegnicki said, referring to the brand-name for naloxone.

Amy Treglia agreed to share her story as a warning to others that xylazine has made its way into drugs in Rhode Island. People are just beginning to talk about it on the streets, she said.

“I don’t want anyone to go through this,” said Treglia, who is now on methadone. “Xylazine is the crack of cocaine. This is really going to do some damage. People are going to start losing limbs.”

