Xylazine is on the rise in fentanyl & heroin

- Since initial reporting by MADDS in March 2021, the veterinary sedative xylazine continues to be detected in a substantial number of samples sold as fentanyl and heroin throughout Massachusetts.* In 2021, 31% of 398 opioid samples tested statewide contained xylazine. As of June 15, xylazine was detected in 28% of 263 opioid samples tested in 2022 (see graph).

- Most samples with xylazine contained fentanyl and were sold as dope/heroin. The amount of xylazine found in samples sold as dope/heroin varied, but an increasing number have xylazine as a large component.

- Samples tested from January to June 15, 2022 show that xylazine is more often found in drugs sold as heroin/dope/fentanyl in areas of Western Massachusetts than in Eastern Massachusetts (42% vs 21% of opioid samples).

- Samples containing xylazine include counterfeit pain pills, brown and white powder residue in bags, and cookers or cottons used for injection.

- In 2021, 7 of 131 samples found to contain xylazine (5%) were associated with a fatal or nonfatal overdose that also involved fentanyl.

Xylazine is a health hazard

- Xylazine is a long-acting, sedating medication, being found in opioids. Use experiences noted “made me sleep weird”; “put me out for 6 hours”; “very strong”; “made me pass out and I woke with vomit on me”, “skin on fire, teeth felt like they were going to fall out”, and “causing holes (ulcers) where injected”.

- Xylazine can cause unresponsiveness or decreased consciousness, low blood sugar, low blood pressure, slowed heart rate, and reduced breathing. Because xylazine is often found in combination with other sedating drugs like opioids, there is an increased risk for overdose or death.

- Using xylazine may increase risk of skin ulcers at the injection site and around other cuts. Skin ulcers from xylazine may quickly lead to infection or necrosis.

- People may sustain serious injuries if oversedated and unresponsive for long periods. Falls; hypothermia or heat-related emergencies if using outside; and damage to muscles, nerves, and kidneys can result if blood flow is restricted to a part of the body for a long time.

Harm reduction and risk of overdose

- The drug supply is unpredictable. It is safer to use when other people are present or can check on you frequently. People using together should take turns to prevent simultaneous overdose.

- In case of overdose, administer naloxone, give rescue breaths, and monitor until breathing resumes, even if the person remains unresponsive. You can get naloxone at harm reduction programs and retail pharmacies without a prescription. If someone is oversedated, put them in the recovery position, make sure their airway is clear, and monitor their breathing.

- Use a sterile syringe and clean the site with an alcohol swab before every injection. 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 not injecting or switching to sniffing or smoking instead.

- Contact a local harm reduction program for help with abscess or wound care, more advice on safer use, safer use supplies, fentanyl test strips, and drug checking with MADDS.

* All samples were provided by harm reduction programs or donated by police departments for MADDS testing. MADDS is a state-funded collaboration between Brandeis University researchers, the Massachusetts Department of Public Health, various town police departments, and local harm reduction agencies. Contact us at maddsbrandeis@gmail.com.