Toronto's Drug Checking Service

Results from 102 samples checked

April 5 – 18, 2025

As a result of Ontario's Community Care and Recovery Act, we have observed a 50% reduction in samples collected during the first 15 days of April (as compared to the first 15 days of March). The closure of five supervised consumption sites where our drug checking service was offered has limited access to our program – preventing people from making informed decisions related to their substance use, as well as our ability to monitor the unregulated drug supply and share the most timely and accessible information about what's circulating and anticipated harms. We are actively rebuilding our program and thank you for your patience and ongoing support while we do so.

Key findings¹

- One of the expected² fentanyl samples³ was known to be associated with an overdose it contained four high-potency opioids⁴ (an opioid considered to be as strong as or stronger than fentanyl), combined with benzodiazepine-related drugs and a veterinary tranquilizer
- 54% of the expected² fentanyl samples³ contained multiple high-potency opioids⁴, including <u>fentanyl</u>, <u>fluorofentanyl</u>, a <u>methylfentanyl-related drug</u>, and/or <u>protodesnitazene</u>
- 54% of the expected² fentanyl samples³ **contained fluorofentanyl** (at this time, we believe parafluorofentanyl is circulating, which is considered to be as strong as fentanyl)
- 54% of the expected² fentanyl samples³ contained a veterinary tranquilizer 35% contained <u>xylazine</u> and 30% contained <u>medetomidine</u>
- 43% of the expected² fentanyl samples³ contained a benzodiazepine-related drug, namely, <u>ethylbromazolam</u>, <u>desalkylgidazepam</u>, <u>bromazolam</u>, <u>desalkylflurazepam</u>, <u>diazepam</u> (Valium)</u>, and/or <u>nordiazepam</u>
- 19% of the expected² fentanyl samples³ contained a methylfentanyl-related drug (at this time, we believe ortho-methylfentanyl is circulating, which is considered to be as strong as fentanyl)
- 8% of the expected² fentanyl samples³ **contained a nitazene opioid**, namely, protodesnitazene (considered to be as strong as fentanyl)
- 19% of the expected² fentanyl samples³ **did not contain fentanyl** most of these samples instead contained fluorofentanyl, some contained a methylfentanyl-related drug and/or protodesnitazene

Amount of drugs found in expected ² fentanyl drug samples ⁴ :			
In 23 expected ² fentanyl drug samples ⁵ :			
0.8%	was the average amount⁶ of fentanyl found	0.4 - 1.5%	was the range⁷ of fentanyl found in half of the drug samples ⁵
In 15 expected ² fentanyl drug samples ⁵ :			
1.0%	was the average amount⁶ of fluorofentanyl found	0.2 - 1.7%	was the range⁷ of fluorofentanyl found in half of the drug samples ⁵
In 5 expected ² fentanyl drug samples ⁵ :			
1.5%	was the average amount ⁶ of methylfentanyl-related drugs found	0.5 – 5.2%	was the range⁷ of methylfentanyl- related drugs found in half of the drug samples ⁵
In 7 expected ² fentanyl drug samples ⁵ :			
0.7%	was the average amount ⁶ of medetomidine found	0.2 – 1.1%	was the range⁷ of medetomidine found in half of the drug samples ⁵
In 9 expected ² fentanyl drug samples ⁵ :			
0.3%	was the average amount⁶ of xylazine found	0.3 – 2.4%	was the range⁷ of xylazine found in half of the drug samples ⁵
In 3 expected ² fentanyl drug samples ⁵ :			
2.1%	was the average amount⁶ of bromazolam found	1.6 - 3.7%	was the range⁷ of bromazolam found in half of the drug samples ⁵

Expected fentanyl drug samples

- 81% (26) of the expected² fentanyl drug samples⁵ contained fentanyl and other drugs, including:
 - o 96% (25) contained caffeine
 - 62% (16) contained at least one additional high-potency opioid⁴:
 - 50% (13) contained fluorofentanyl (!)
 - 15% (4) contained a methylfentanyl-related drug (!)
 - 50% (13) contained a veterinary tranquilizer:
 - 31% (8) contained xylazine (!)
 - 23% (6) contained medetomidine (!)
 - o 38% (10) contained at least one benzodiazepine-related drug:
 - 15% (4) contained desalkylgidazepam (!)
 - 15% (4) contained ethylbromazolam (!)
 - 8% (2) contained bromazolam (!)

- 4% (1) contained nordiazepam (!)
- o 8% (2) contained phenacetin (!)

Unexpected noteworthy drugs found in other expected drug samples

- 15% (10) of the remaining drug samples⁵, meaning drug samples⁵ that weren't expected² to be fentanyl,
 contained an unexpected noteworthy drug, including:
 - 100% (1) of expected² crack cocaine drug samples⁵ contained phenacetin (!)
 - 50% (3) of expected² cocaine drug samples⁵ contained phenacetin (!)
 - **Two expected**² heroin drug samples⁵ that <u>did not contain</u>⁹ heroin contained carfentanil (!), fentanyl (!), fluorofentanyl (!), and desalkylgidazepam (!)
 - **Two expected**² heroin drug samples⁵ that <u>did not contain</u>⁹ heroin contained fluorofentanyl (!), protodesnitazene (!), and medetomidine (!)
 - One expected² cocaine drug sample⁵ that <u>did not contain</u>⁹ cocaine contained xylazine (!)
 - One expected² alprazolam (Xanax) drug sample⁵ that <u>did not contain</u>⁹ alprazolam contained fentanyl (!), fluorofentanyl (!), medetomidine (!), and phenacetin (!)

Not sure what some of these substances are? View our drug dictionary: www.drugchecking.community/drug-dictionary/

Notes

1 Our key findings for the specified time period are based on results from both drugs and used drug equipment. There are limitations associated with including results from used drug equipment samples in unregulated drug market monitoring for a specified time period. Drug equipment – like cookers – are often re-used. The mass spectrometry technologies we use are so sensitive that very trace amounts of substances may be found. This means that when equipment is re-used, substances from past use may be found and included in results for the sample that is being checked. This can compromise the accuracy of drug market monitoring for a specified time period. For example, the substance was found in the used equipment sample but, if the equipment was re-used, is that substance circulating in the supply now or when the equipment was previously used. This is less of an issue for drug samples, which is why we prefer to rely on results from drug samples for time period-specific unregulated drug market monitoring. However, it is not always possible for a service user to submit a drug sample. We do the best we can with the samples we have access to.

2 | **Expected (drug)**: When a sample is submitted to be checked, the drug that sample was bought or got as is recorded. We call it the "expected drug". Knowing the expected drug helps us tailor our harm reduction advice. It also helps us understand contamination to drugs rather than combinations of drugs (e.g., fentanyl was found in a heroin sample rather than fentanyl and heroin were found together).

3 | **Samples**: Includes both drugs and used drug equipment. Drugs could be a small amount of powder, crystals, rocks, blotter, or liquid, or a crushed bit of a pill. Used equipment could be a used cooker or filter, or leftover liquid from a syringe. For more information, view our <u>terms of service</u>.

4 | High-potency opioids: We classify an opioid "high-potency" if it is considered to be as strong as or stronger than fentanyl.

5 | Drug samples: Could be a small amount of powder, crystals, rocks, blotter, or liquid, or a crushed bit of a pill.

6 | Average amount: We arrange the amounts of a substance found as a proportion of the total fentanyl drug sample from smallest to largest, determine the median (i.e., the middle number), and use that number as the "average". For more information, view our <u>amount of drugs found graph</u>.

7 | **Range**: Known as the interquartile range, represents the middle 50% of the amounts of a substance found as a proportion of the total fentanyl drug sample. For more information, view our **amount of drugs found graph**.

8 | Reporting similar substances together: These substances have a very similar chemical structure, and it is not currently possible for Toronto's Drug Checking Service to differentiate between them. For this reason, we report these substances together. For more information, view our <u>drug dictionary</u>.

9 | Drug samples that unexpectedly contain noteworthy drugs and not the expected drug: Our reports highlight unexpected noteworthy drugs found in all checked drug samples. When noteworthy drugs are found unexpectedly in a drug sample and the expected drug is not present, we flag it but are hesitant to consider it contamination of the expected drug. Instead, we assume there is an issue with the expected drug: the person who sold or provided the drugs accidentally mixed up their drugs, the service user accidentally mixed up their drugs, or the expected drug was recorded incorrectly during sample collection. These samples require special consideration.

10 | **High-potency opioid contamination**: Based on the information we have about this sample, we are reporting it as contaminated with a high-potency opioid. However, it is very unusual that our program finds high-potency opioids unexpectedly in samples expected to be stimulants, psychedelics, and depressants, and these samples always require special consideration. There is increasing consensus in the drug checking community that the unexpected presence of high-potency opioids in other drug types is the product of accidental cross contamination rather than intentional adulteration. Cross contamination may result from poorly cleaned scales, storing drugs together (e.g., storing LSD in a baggie that was originally used for storing cocaine), or using drug equipment with different batches of drugs.

(!) | Unexpected noteworthy drug: "Noteworthy drugs" are drugs that (i) are linked to overdose or other adverse effects, (ii) are highly potent or related to highly potent drugs, or (iii) may not be desired by some service users. Noteworthy drugs are flagged when they are unexpectedly found in checked samples.

About Toronto's Drug Checking Service: <u>Toronto's Drug Checking Service</u> is a free and anonymous community-based public health service that aims to reduce the harms associated with substance use and, specifically, to prevent overdose by offering people who use drugs timely and detailed information on the contents of their drugs. Beyond educating individual service users, results for all samples are combined and analyzed to perform unregulated drug market monitoring, then translated and <u>publicly</u> <u>disseminated every other week</u> to communicate unregulated drug market trends and drug education to those who cannot directly access the service, as well as to inform care for people who use drugs, advocacy, policy, and research.

<u>Participating collection sites</u>: Casey House | Parkdale Queen West Community Health Centre (Parkdale and Queen West sites) | Regent Park Community Health Centre | South Riverdale Community Health Centre (KeepSix and Moss Park sites) | Street Health | The Neighbourhood Group (Kensington Market Overdose Prevention Site) | The Works at Toronto Public Health | Toronto Shelter and Support Services (Seaton House Overdose Prevention Site)

<u>Participating analysis sites</u>: Centre for Addiction and Mental Health (Clinical Laboratory and Diagnostic Services) | St. Michael's Hospital (Department of Laboratory Medicine and Drug Checking Unit)

Toronto's Drug Checking Service is coordinated by a small central team that operates from within the Drug Checking Unit at St. Michael's Hospital. The central team is also responsible for conducting unregulated drug market monitoring and developing and disseminating relevant drug information.

Our work is only possible because people who use drugs access our service and directly contribute to our understanding of the unregulated drug supply. We thank the community of people who use drugs throughout Toronto for their trust and leadership.

(website) www.drugchecking.community | (email) hello@drugchecking.community | (IG) @drugchecking