

### **Unintentional Drug Overdose Deaths Reach Historic High Second Year in a Row: Fentanyl Cut Heroin a Likely Major Contributor**

The availability of heroin has increased during the past six months in every region with the exception of Toledo. Participants consistently attributed the increase in heroin use to the reformulation of popular prescription opioids, such as OxyContin®, which has made some prescription opioids more difficult to abuse, and the crushable pills increasingly more expensive and more difficult to obtain. Participants throughout OSAM regions also cited dealers switching from other drug sales to the more profitable sale of heroin, along with cocaine users switching to heroin due to the poor quality of cocaine.

In the Toledo region, while participants and community professionals noted that the high availability of heroin has remained the same during the past six months, they reported an increase in heroin overdose deaths. In addition, respondents in Cleveland and Dayton regions reported an increase in overdose rates.

In June 2013, The OSAM Network reported on the increasing number of heroin overdoses statewide. In April 2014, the Ohio Department of Health published 2012 Ohio Drug Overdose Data wherein it reported that unintentional drug overdose deaths rose again by 8.4 percent from a previous all-time high of 1,765 deaths in 2011 to the new all-time high of 1,914 deaths in 2012; and of overdose deaths in 2012, greater than two-thirds were associated with any opiate (66.5%)

(<http://www.healthyohioprogram.org/vipp/data/rx-data>).

In data obtained by the OSAM Network, the Montgomery County Coroner's Office confirmed 63 fentanyl-related overdose deaths in four months, October 28, 2013, through February 23, 2014. OSAM participants have named fentanyl as a cut (adulterate) for heroin since the 2010 restart of the OSAM Network. Table 1 indicates reports by OSAM region of fentanyl cut heroin.

**Table 1. Participant Report of Fentanyl Cut Heroin\***

Region	Jan-11	Jun-11	Jan-12	Jun-12	Jan-13	Jun-13	Jan-14
Akron/Canton		✓		✓		✓	✓
Athens		✓	✓		✓		
Cincinnati		✓			✓	✓	
Cleveland		✓	✓	✓	✓	✓	✓
Columbus	✓				✓		
Dayton							✓
Toledo	✓	✓	✓	✓	✓	✓	✓
Youngstown		✓					✓

\* The symbol ✓ indicates participant report of fentanyl as a suspected cut for heroin.

Until this current OSAM reporting cycle of June 2013-January 2014, OSAM had been unable to validate participant observations through data triangulation. Note: crime labs generally test for the presence of heroin in suspected heroin samples and do not typically examine the constituent parts of heroin samples.

**January 2011:** Participants stated: "They [dealers] cut it [heroin] with fentanyl, and it's a deadly combination; They [heroin users] have been dropping like flies [overdosing]." Available heroin was "very pure" according to crime labs, but benzocaine (local anesthetic) and metamizole (analgesic and antipyretic) were noted as occasionally used cutting agents.

**June 2011:** Participants reported that there had been fentanyl cut heroin in the previous six months, with several reports of users dying as a result. The coroner's office in Cincinnati saw a higher number of heroin-related deaths, but none were found with evidence of fentanyl. It was suspected that the heroin supply might have increased in potency, leading to more dire consequences for the user. Hamilton County Crime Lab reported diphenhydramine (antihistamine) as commonly used to cut heroin.

**January 2012:** Several participants supplied details on the common perception that heroin was cut with fentanyl. Despite this perception, law enforcement stated that laboratory analyses had shown an increase in purity. The BCI Richfield Crime Lab cited caffeine and diphenhydramine as commonly used to cut heroin.

**June 2012:** In Cleveland, one trend echoed across multiple interview sessions: participants reported more cases of gray-, blue- or purple-colored heroin that they speculated to contain fentanyl. Law enforcement officers were unsure if the gray variety of heroin did indeed contain fentanyl. In Toledo, participants consistently continued to report that “china white” heroin was a heroin/fentanyl mix. However, treatment providers reported that while users report that they’ve used a combination of heroin and fentanyl, these users did not screen positive for fentanyl on urine drug screens.

**January 2013:** Some participants were convinced that in some cases “china white” heroin was dried and crushed fentanyl being sold as heroin. The BCI Richfield Crime Lab reported that there were not a lot of cutting agents in the heroin cases they process.

**June 2013:** There was considerable debate concerning the use of fentanyl as a cutting agent. Some participants continued to believe that heroin was being cut with fentanyl. Others believed there was no use of fentanyl in current heroin and that users were purchasing potent heroin. A participant stated, “I’ve heard of it [heroin] cut with fentanyl. It’s killing people.” After extensive scrutiny into this claim, a staff member of a medical examiner’s office stated, “There’s no fentanyl in heroin because the prep [scraping the gel out of fentanyl patches] on that is a lot. We were targeting heroin for a while because we thought it might have fentanyl coming through, but we didn’t see anything.”

**January 2014:** Participants in Akron-Canton, Cleveland, Dayton, Toledo and Youngstown believed potent heroin to be cut with fentanyl. Law enforcement reported that fentanyl is being removed from fentanyl patches and used to cut heroin. An officer stated, “That’s how a lot of them are ending up in the coroner’s office. People aren’t understanding the purity [of heroin] and mix it with other drugs.” In a press release, the Montgomery County Coroner’s Office disclosed that heroin cut with fentanyl is being sold by drug dealers ([www.mcoho.org/government/coroner/newsdetail1139.html](http://www.mcoho.org/government/coroner/newsdetail1139.html)). Media reported: Two batches of heroin lead to over 20 people overdosing in Lorain County during one weekend; the police confirmed that one of the batches was actually 100 percent fentanyl sold as heroin; three individuals died from that incident ([www.fox8.com](http://www.fox8.com), Nov. 11, 2013, and [www.newsnet5.com](http://www.newsnet5.com), Nov. 19, 2013). The Cuyahoga County Medical Examiner (ME) warned that fentanyl laced heroin had been detected in Cuyahoga County; the ME called the discovery a public-health threat and highlighted that authorities across the country have also logged deaths attributable to fentanyl cut heroin ([www.cleveland.com](http://www.cleveland.com), March 5, 2014).

In an April 2, 2014, statement to the US House of Representatives, Committee on Appropriations, Subcommittee on Commerce, Justice, Science and Related Agencies, an administrator with the Drug Enforcement Administration reported, “Fatal and non-fatal heroin overdoses are increasing in several metropolitan areas, with some cities, such as Providence, Philadelphia, Chicago, **Cleveland**, and Minneapolis/St. Paul, reporting overdoses due to heroin tainted with fentanyl or fentanyl being sold as heroin.

**Fentanyl is approximately 50 times stronger than heroin and can cause even experienced users to overdose”** (<http://www.justice.gov/dea/pr/speeches-testimony/2014t/040214t.pdf>).

Participants throughout OSAM regions reported that heroin is cut with dissolvable powders such as aspirin, baby laxatives, baby formula, baking soda, bath salts, benzodiazepines, cement, as well as with Coca-Cola® and other dark sodas, cocaine, cocoa, coffee, brown sugar, dietary supplements, drywall, eye liner, fentanyl, Kool-Aid®, lactose, Lanacane®, melatonin, methadone, Miami Ice (a “head shop” product sold as room and carpet deodorizer), oil (type unspecified), paint, piano wax, powdered sugar, prescription opioids, procaine (local anesthetic), Ramen Noodle® soup flavoring, shoe polish, Similac®, sleep aids, sweeteners, syrup, tea, vinegar and vitamins.

A participant stated, “It’s scary. You never know what you’re gonna get [mixed in with heroin].”

Participants and community professionals described typical users of heroin as white, aged teens to 30s (males and females) with individuals of all socioeconomic statuses represented.

## HEROIN OVERDOSE CAN BE REVERSED.

**Project DAWN (Deaths Avoided With Naloxone), sponsored by the Ohio Department of Health, provides free naloxone (opiate antidote) kits to opiate users** (<http://bit.ly/projectdawn>).



Ohio Substance Abuse  
Monitoring Network

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