

# Monitoring for novel synthetic opioids and other psychoactive substances within Australia's Supervised Injecting Facilities

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## Background

- The increasing **overdose deaths from fentanyl** and analogues in North America has led to expansion of drug checking, and other harm reduction responses
- Concerns exist about the emergence of fentanyl and other novel synthetic opioids, often sold as heroin, in the Australian drug market
- Supervised Injecting Facilities provide one key setting for drug checking and overdose monitoring
- This study aimed to (1) **monitor unintentional fentanyl consumption** amongst people who use heroin in Australia, (2) understand if novel synthetic opioids were causing overdoses in Australia, and (3) **establish testing and other harm reduction responses** in partnership with consumers and other stakeholders

## Methods & Results

- Participants were recruited from the two Supervised Injecting Facilities in Australia: the Medically Supervised Injecting Centre (MSIC Sydney) and the Medically Supervised Injecting Room (MSIR Melbourne).

### 1. Testing urine samples with Fentanyl Test Strips

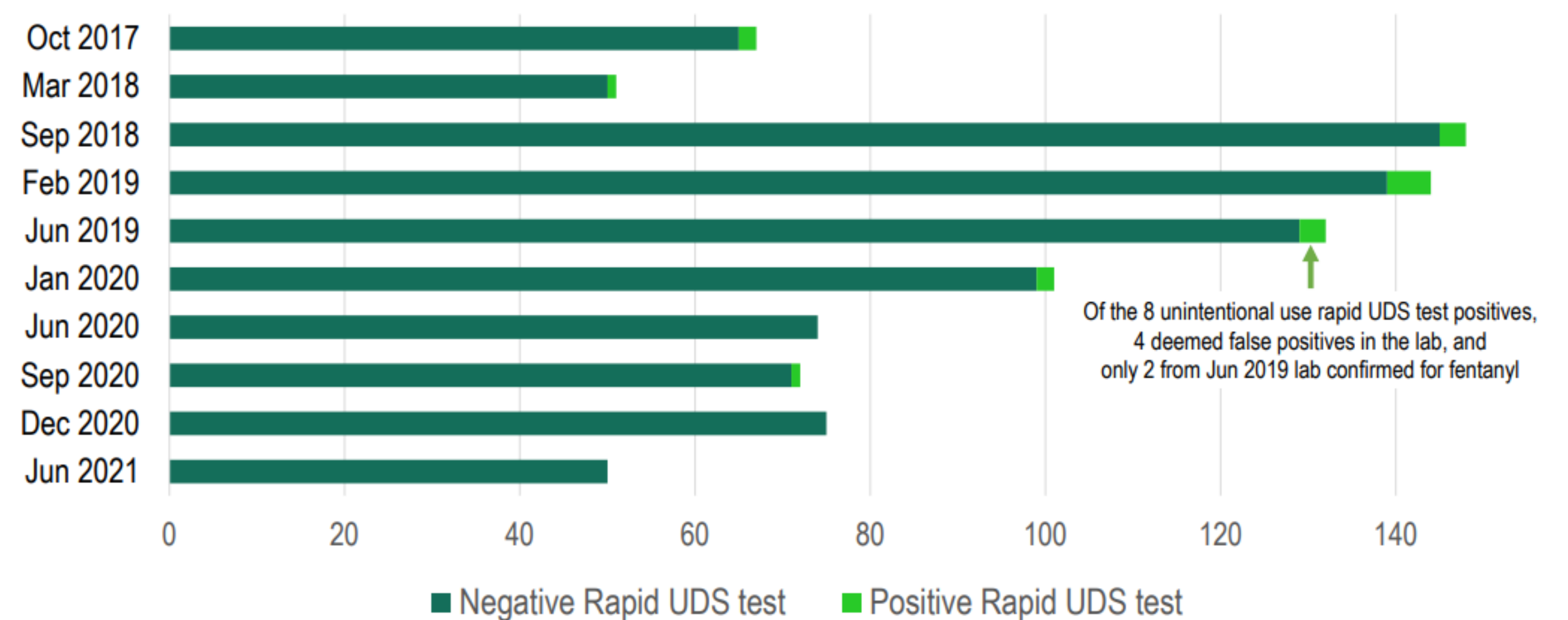


#### Methods

Rapid Urine Drug Screens (UDS) with Fentanyl Test Strips (FTS) paired with surveys (n=911 people who used heroin in the past 2 days from 2017-21), with laboratory analysis of samples that tested positive using FTS and control samples

#### Results

- 17 positive (9 self-reported fentanyl use, 8 unexpected by participants)
- Confirmatory lab analysis was conducted on 6 of the 8 unexpected samples, with 4 deemed to be false positives, and 2 confirmed the presence of fentanyl
- This was the first confirmation of unintended use of fentanyl type substances in this cohort.



### 2. Lab testing overdose equipment



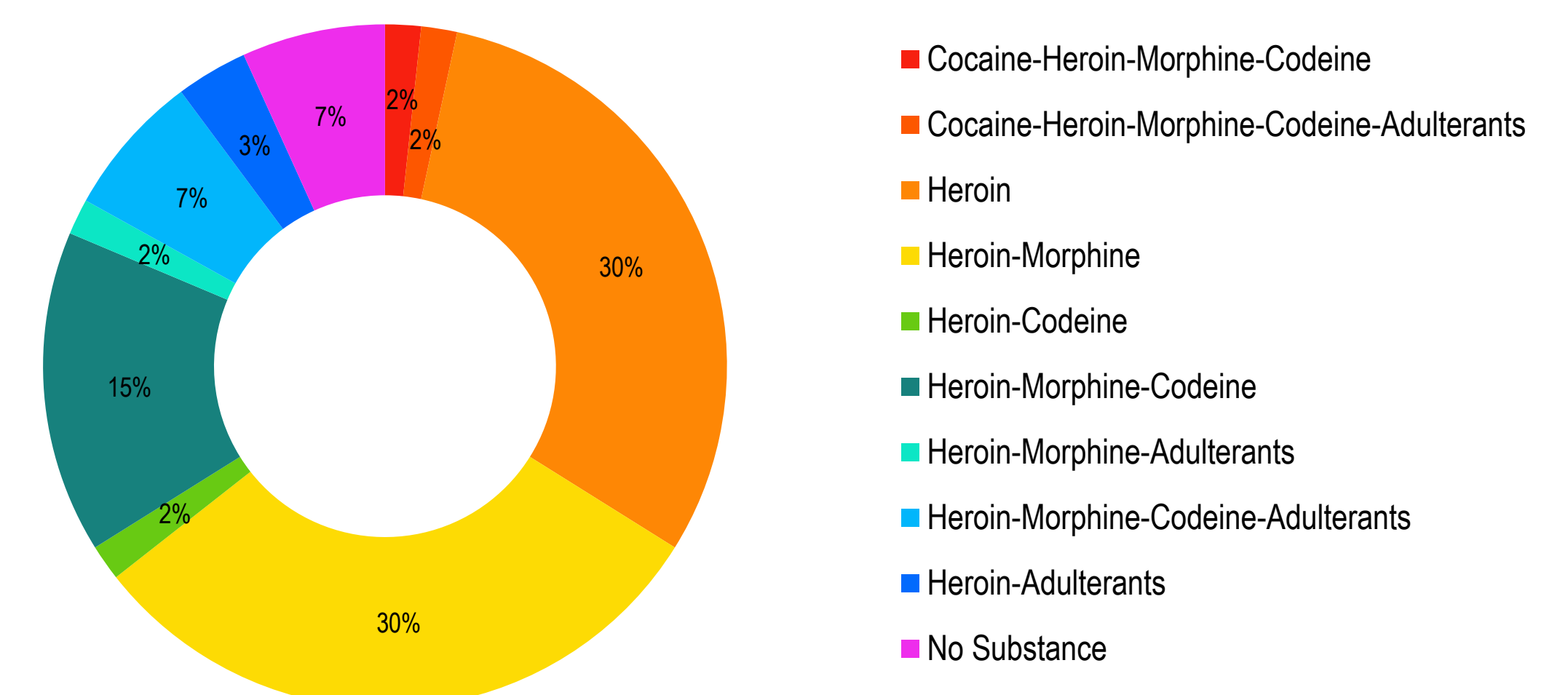
#### Methods

Injecting equipment associated with opioid overdoses sent to lab to test what drugs were involved. A total of 59 overdose events at MSIC + MSIR were represented through 137 pieces of injecting equipment.

#### Results

- Fentanyl and other NPS were not identified** in injecting equipment from overdoses
- Almost all (93%) overdoses involved heroin with related alkaloids and common adulterants

Drugs Identified in Overdoses (n = 59) from Testing Discarded Injecting Equipment



### 3. Drug checking with Fentanyl Test Strips



#### Methods

- Drug checking at with FTS with laboratory confirmation (n=34 at a single SIF)
- Test wash in spoon after drawing up injection (before/after injecting)
- One page survey on experience of drug checking

#### Results

- Initially research approvals → limited demand
- Changed procedures to reimburse participants (\$10) → increased but still limited demand
  - More support for drug testing if completed **after rather than before drug use** (p= 0.025).
  - 2 positive samples** sent for lab confirmation → **both false positives** (N.B. False positives common in urine testing also, in addition to results being misread)

### 4. Expert Workshops



#### Methods

Two workshops with key experts (n = 21, including SIF staff, content experts and people with lived experience) to understand how results from methods 1-3 may inform future testing within the supervised injecting facilities.

#### Results

- Workshop participants felt routine monitoring for FTS may have limited value currently (i.e. while there was infrequent evidence of fentanyl in the market), until there is a significant change in overdose rates, or other signals to warrant testing.
- Discussions from the online workshops were used to develop a fentanyl monitoring and response plan, defining signals to upscale testing, testing approaches and communication pathways

## Discussion

- We found limited evidence of unintentional fentanyl use amongst people who regularly inject heroin → there appears to be very little fentanyl in the Australian drug market at present
- Quick, cost-effective onsite fentanyl testing is feasible – but **false positive results may limit value and undermine confidence in testing results.**
- Confirmatory testing**, and education for staff and consumers about the causes of false positives with FTS is needed
- The role of *routine* monitoring for fentanyl is unclear in the current low-fentanyl context
- A process to rapidly upscale targeted testing and harm reduction responses, should signals of increased fentanyl prevalence in the Australian heroin market emerge, was developed through this work

