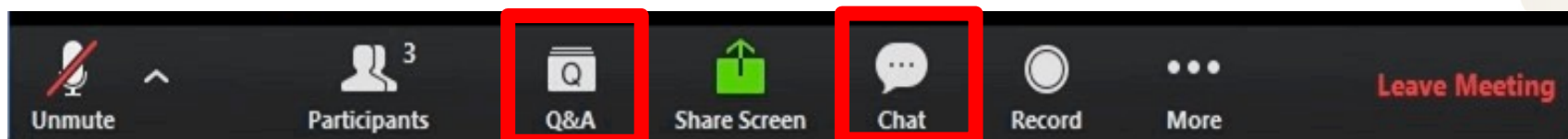


Enhancing Harm Reduction Services in Health Departments: Fentanyl Test Strips and Other Drug Checking Equipment

Tuesday, May 16 from 3-4pm ET

Housekeeping

- You will be muted automatically upon entry and for the duration of the webinar.
- This webinar is being recorded and will be archived for future viewing on the National Council's website.
- Please submit your questions using the Q&A box at the bottom of the screen.



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Today's Presenters



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Brad Finegood, MA, LMHC
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Seattle-King County Public Health



Amber Tejada
Director of Programs
Hepatitis Education Project



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Executive Director
Holler Harm Reduction



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Community Liaison
University of North Carolina Chapel Hill
Street Drug Analysis Lab

Agenda

- Welcoming remarks from the CDC
- Resource overview – *Enhancing Harm Reduction Services in Health Departments: Fentanyl Test Strips and Other Drug Checking Equipment*
- Presentations by experts in the field
- Q&A

Welcoming Remarks from the CDC



Rebecca Glover-Kudon, PhD, MSPH
Behavioral Scientist
Division of Overdose Prevention
National Center for Injury Prevention and Control

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Enhancing Harm Reduction Services in Health Departments

Fentanyl Test Strips and Other Drug Checking Equipment

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April 2023

-
- Provides an overview of drug checking equipment that can be implemented in harm reduction settings.
 - Describes key strategies that health departments and their community-based harm reduction partners can implement to provide drug checking services.
 - Informed by real-world experiences of 11 experts from the field representing 10 harm reduction organizations across 8 states, Washington, DC, and British Columbia, Canada.

Types of Drug Checking Equipment

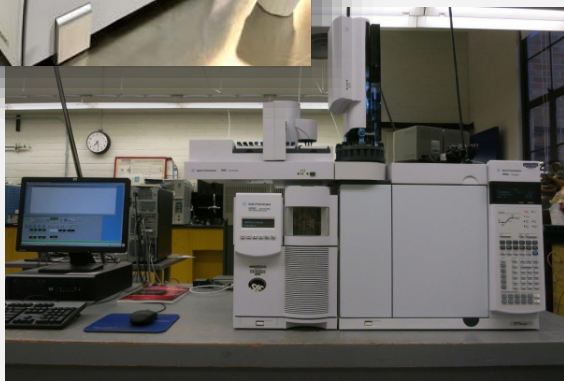


Table 1. Comparison of Drug Checking Equipment to Support Harm Reduction and Overdose Response.

	Average cost	Time required for results	Can be done in the field	Expertise/training needed to use	Substances that can be detected	Able to detect concentration of substance(s)	Can be used by harm reduction program participants themselves
Test strips (e.g., fentanyl, benzodiazepines, xylazine)	\$1-3 per strip (each strip can only be used once)	Minutes	Yes	None to minimal	Varied (see manufacturer for availability)	No	Yes
Fourier-transform infrared spectroscopy	>\$40,000 (machine, reference libraries and laptop)	Minutes	Yes	Advanced practice	Any	Yes	No
Gas chromatography mass spectrometry	>\$50,000 (machine, laboratory standards and dedicated staff)	Minutes to weeks	No	Extensive training	Any	Yes	No

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Strategies to Support Drug Checking Services in Harm Reduction

This brief is organized by **three key strategies** for health departments to implement and/or support their community-based partners to implement drug checking services.

1. Integrate fentanyl test strips in overdose education and naloxone distribution (OEND).
2. Partner with harm reduction organizations to provide drug checking services and education.
3. Implement effective data collection, interpretation and communication strategies.

Real-world Experiences and Examples

“

Most of the folks who say they're street opioid users, heroin users, already know about fentanyl, so they're teaching us about the changing drug market more than we're teaching them about what to do. It's the folks [who] are using meth and cocaine that we do a little bit more, 'Were you aware of this?' As we see shifts in the market, we're starting to see some xylazine here and lots of iso [synthetic opioid], so we make sure folks are aware that now you need eight boxes of Narcan, not two, and talk to folks about reversing an overdose for iso in pacing applications of Narcan and how to do that, and dispel the myth that you can overdose from somebody's breath."

- Tim Santamour, Director of Outreach and Networking, Florida Harm Reduction Collective

“

We provide as much information to facilitate people's safer drug use and personal harm reduction, rather than trying to alert people about all the dangerous drugs out there."

- Bruce Wallace, Co-lead, Vancouver Island Drug Checking Project



Example from the Field: Seattle-King County Public Health

Seattle-King County Public Health is in the process of implementing drug checking programs with two community-based harm reduction organizations using FTS and FTIR. As part of the FTIR technician training, the primary and volunteer drug checking technicians completed the BCCSU online training and are gaining practical experience by using the FTIR to test real samples for several months prior to program implementation. Samples are first collected from participants on an ad hoc basis, as the drug checking program has not yet been officially rolled out. The technicians then all practice and learn together, testing the same samples on each machine to compare whether each technician gets the same results. Being able to practice on the machines themselves and apply the learnings from the online training has been invaluable to the overall technician training process and ensuring that these technicians feel prepared to provide drug checking services to their participants once the program does go live.

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DRUG CHECKING!

Amber Tejada (she/her)
Hepatitis Education Project

Brad Finegood (he/his)
Seattle-King County Public Health



ACCORDING TO THE KING COUNTY OVERDOSE DEATH
DASHBOARD, THERE HAVE BEEN 401 OVERDOSE DEATHS
IN KING COUNTY AS OF 5/3/2022

Will we ever get safe supply?!?



CURIOUS WHAT IS IN YOUR DOPE?

Come get it tested!

DRUG CHECKING

MON-FRI

1pm - 5pm



Vancouver Island Drug Checking Project



Bruker Alpha II FTIR Spectrometer

- These machines are very expensive
- Have limitations
- Require extensive training

1 RED LINE = POSITIVE FOR FENTANYL



2 RED LINES = NEGATIVE FOR FENTANYL



HOLD THIS END

▲
Capillary action pulls the liquid
up the strip into the test area.

▲
DO NOT INSERT
ABOVE THIS LINE



Fentanyl Test Strips

- Less expensive
- Very ease to use
- Results in minutes
- Strips also available for benzos and xylazine



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The most disproportionately impacted communities in King County are:

- • People experiencing homelessness and people living in temporary or supportive housing
- • American Indian and Alaskan Native (non-Hispanic) and Black (non-Hispanic) residents
- • Communities located in Seattle and South King County

HEP
EDUCATION
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Drug Checking Partnerships



HOLLER
HARM
REDUCTION

NORTH CAROLINA SURVIVORS UNION



Opioid Data Lab



NORTH CAROLINA SURVIVORS UNION

NCSU
THE COMMUNITY VOICE



UNC

Opioid Data Lab

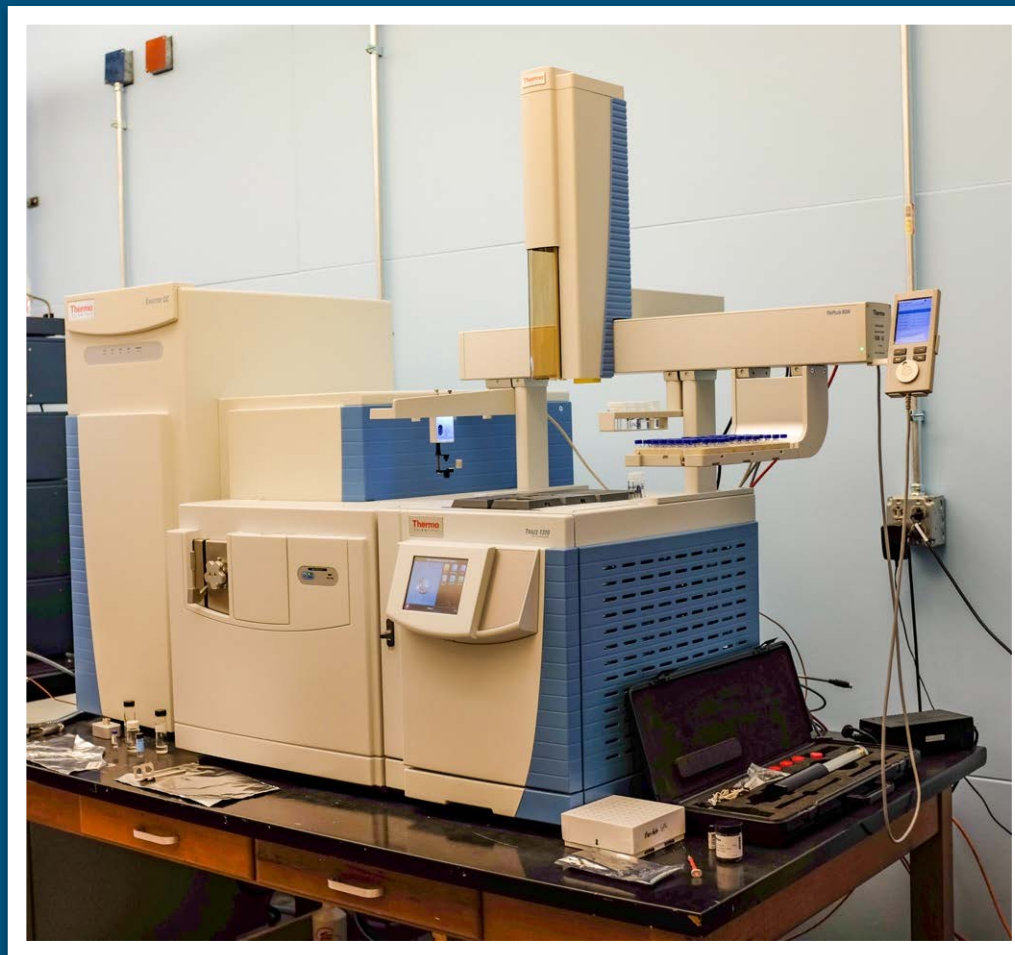


	Fentanyl Test Strips (FTS)	Fourier-Transform Infrared Spectroscopy (FTIR)	Gas Chromatography-Mass Spectrometry (GCMS)
What does it tell us?	Presence/absence of fentanyl	Presence of thousands of different substances, including fentanyl	Chemical formulation confirmation of opioids, byproducts, and fillers
Benefits	Inexpensive, easy to use, quick turnaround for testing	Comprehensive range of substances, quick turnaround for testing	Extremely wide range of substance detection, much more sensitive analysis.
Limitations	Testing is limited to fentanyl detection, false positives	Reliability of results, FTIR machine is expensive but has little to no ongoing costs once purchased, requires training of the operator	Expensive, not as timely
What does it look like?			<p>Source: UNC Mass Spec Lab</p>

FTIR



GCMS



What are the benefits of drug checking?

FTIR and GCMS are necessary tools to **expand our knowledge** beyond what fentanyl test strips tell us.

Studies have shown that drug checking encourages **safer drug use practices**.^{1,2}

People can adjust drug use behaviors, make informed decisions about their health, and implement other harm reduction practices.

1. Peiper N, et al. Fentanyl test strips as an opioid overdose prevention strategy: findings from a syringe services program in the Southeastern United States. *Int J Drug Policy*. 2019;63:122-128.
2. Measham F. City checking: Piloting the UK's first community-based drug safety testing (drug checking) service in 2 city centres. *Br J Clin Pharmacol*. 2020;86(3):420-428.

Public Health Drug Checking

At the individual level, drug checking is a **service**.

At the community level, drug checking helps to **monitor the drug supply**.


The approach is **centered in public health and harm reduction**.

ACCEPTED MANUSCRIPT

Drug Checking for Novel Insights into the Unregulated Drug Supply


Nabarun Dasgupta , Mary C Figgatt


American Journal of Epidemiology, kwab233, <https://doi.org/10.1093/aje/kwab233>

Published: 15 September 2021 **Article history** 





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Abstract

Tobias et al. (*Am J Epidemiol.* XXXX;XXX(XX):XXXX–XXXX) present a novel analysis of time trends in fentanyl concentrations in the unregulated drug supply in British Columbia, Canada. The pre-existing knowledge about unregulated drugs had previously come from law enforcement seizures and post-mortem toxicology. As both of these data sources are subject to selection bias, large scale drug checking programs are poised to be a crucial component of the public health response to the unrelenting increase in overdose in North America. As programs expand, we offer two guiding principles. First, the

Navigating Communication



- Very rural environment that was choosing to engage with a more urban service
- Documented disregard for substance use related laws in our community
 - Utilizing trickle down communication -
Epidemiologists/Chemists to
CBO organizers to Peer
Distributors/Participants





Drug Checking in Practice

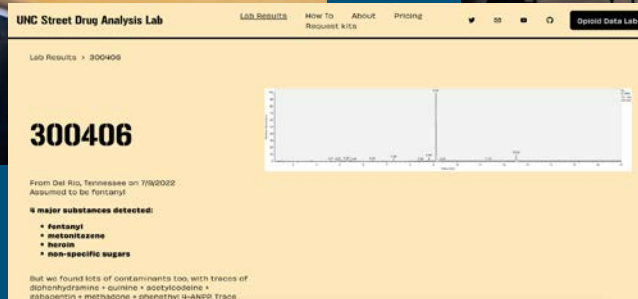
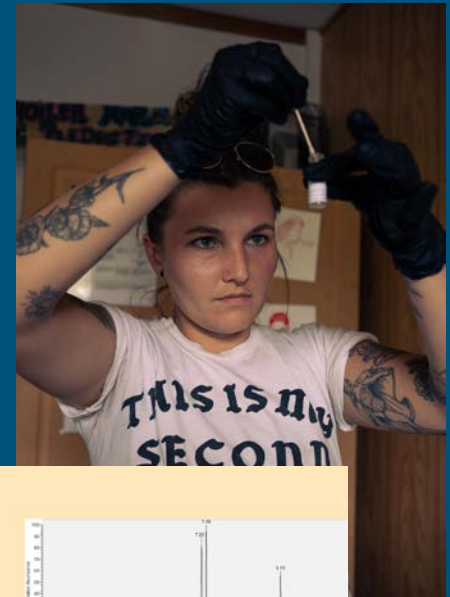
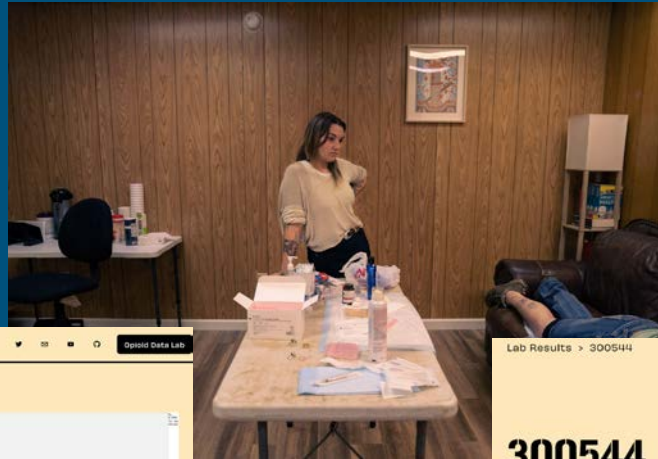
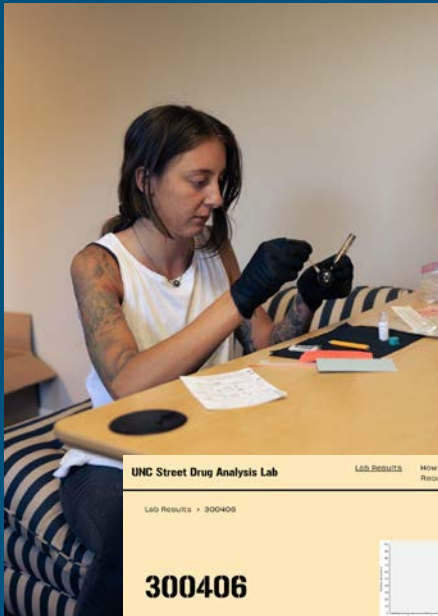
- Leading through lived experience of drug use and science
- Aligning the science with community needs
- Incorporating new technologies and repurposing existing ones
- Emphasizing and promoting individual autonomy and anonymity
- Building connections
- Sharing information about drug checking technology and drug supply additives/cuts

Voices of PWUD in Services

- This wouldn't work if our participants weren't interested
- Peer Distribution
 - HHR has a peer distribution program where participants are hired as staff to provide distro within their social networks
 - We walked through the idea with distro staff and got their input, heard their concerns and why they wanted services
 - All staff were trained in sample collection. We initially used samples provided by peer distro staff to test drive programming
 - Once our staff felt comfortable, we could roll out to larger participant pool
- Anonymity was a key factor and major concern



On the Ground Results



Challenges

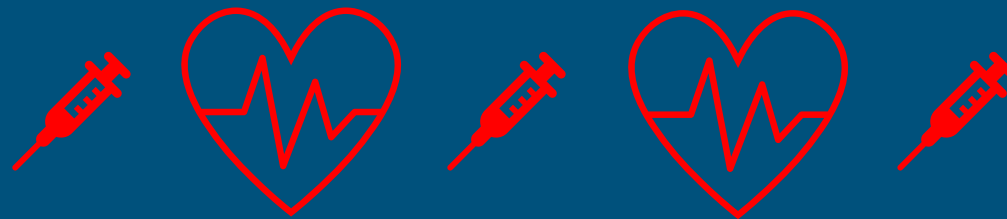
- Technology
- Reading results

Opportunities

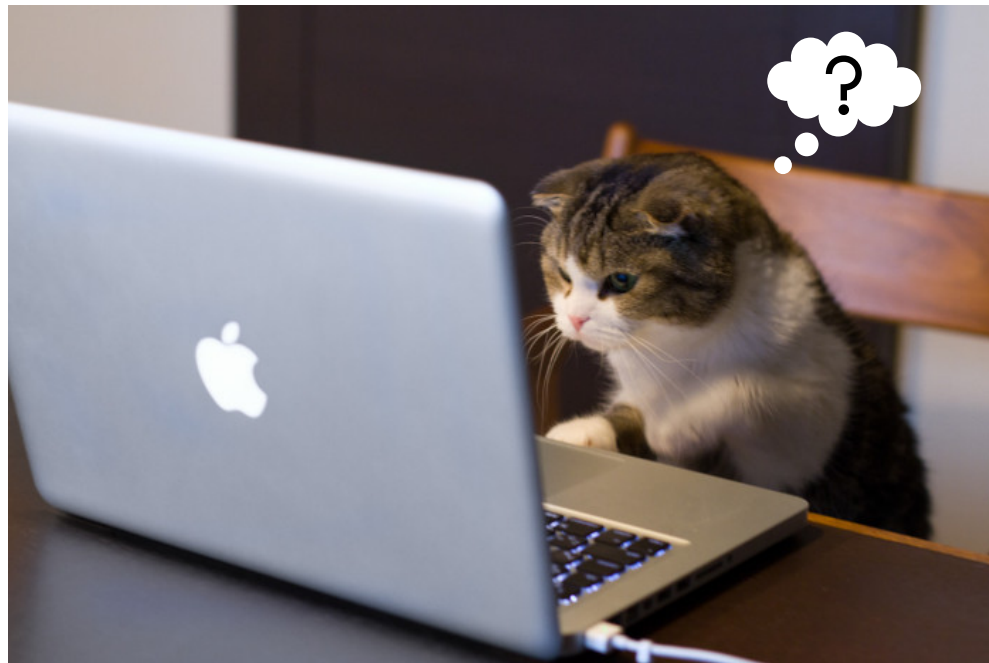
- Informed services
- Increased advocacy
- Experiences informed results
- Witnessing benefits in real time

Questions? Comments?

- You can reach Ainsley and Colin at Ainsley@hollerharmreduction.org and cwm@unc.edu, respectively.
- We're happy to answer any further questions you may have! Thanks!



Questions?



For more information, please check out our website

<https://www.thenationalcouncil.org/program/tools-for-overdose-prevention/>

Additional Resources

- National Council:
 - Enhancing Harm Reduction Services in Health Departments: Harm Reduction Vending Machines (coming soon!)
 - [Overdose Response and Linkage to Care: A Roadmap for Health Departments](#)
 - [Guidance on Handling the Increasing Prevalence of Drugs Adulterated or Laced with Fentanyl](#)
- NASTAD:
 - Fentanyl Test Strips: Updates from the Field ([webinar](#))
 - Advanced Technology Drug Checking Services ([webinar](#))
- [UNC Street Drug Analysis Lab](#)
- [StreetCheck: Community Drug Checking](#)
- Alliance for Collaborative Drug Checking
- [British Columbia Centre on Substance Use](#) (BCCSU)
- [National Harm Reduction TA Center](#) (CDC)

Thank You!

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<https://www.surveymonkey.com/r/fentanylteststripswebinar>