Preliminary Results for August 2022

The Vancouver Island Drug Checking Project delivers drug checking services in Campbell River, the Comox Valley, Port Alberni, and Victoria, BC. Our service has been operating in partnership with SOLID Outreach, AVI Health and Community Services, Port Alberni Shelter Society, Vancouver Island Mental Health Society, Lantern Services, Dr. Chris Gill and the team at Vancouver Island University, and the Is-

land Health Authority. This free and confidential service provides information on composition of substances and harm reduction information.

#### **Highlighted findings:**

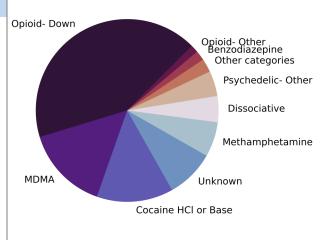
- The median fentanyl concentration found, across all expected drug categories, was 12.6%, with a maximum of over 80%
- Carfentanil was found in 7 samples (6 opioid-down, 1 expected benzodiazepine) with a median concentration of 0.30% and maximum concentration of 1.19%
- Benzodiazepines and/or etizolam were found in 55% of expected opioid-down samples
- The median concentration of bromazolam, the most common benzodiazepine found across all expected drug categories, was 2.5%, with a maximum of 64.7%
- Xylazine, a veterinary sedative, was found in 20 (8%) of expected opioid-down samples with a median concentration of 0.5% and a maximum concentration of 5.0%

Read our blog for further interpretations of our August data.

### What were people bringing to be tested?

Service users bring us a wide variety of substances that can be grouped into different drug classes. The table below aggregates the total number of samples we tested by their "expected" substance (i.e. the drug category reported by the service user). These data are visually represented in the pie chart below and are separated by collection location/method on the following page.

Expected substance	Number of Samples
Opioid Down (fentanyl and/or heroin)	246
Psychedelic (MDMA, MDA, LSD, 2C-B)	113
Cocaine (HCl or Base)	79
Methamphetamine	36
Dissociative (ketamine)	27
Benzodiazepine (alprazolam, diazepam, etizolam)	10
Other Opioids (Dilaudid, oxycodone)	8
Other (GHB, cannabinoids, "research chemicals")	14
Unknown/Missing	50



Samples Tested

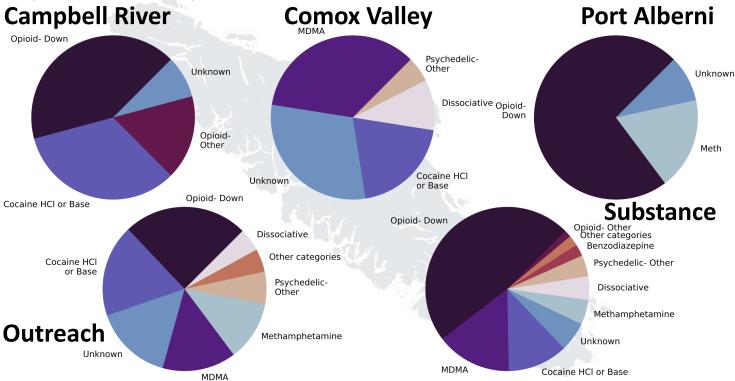
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2022

Preliminary Results for August 2022

### What were people bringing to be tested by service model?

The "expected substance" data presented on the front page of this document can be separated by sample collection location/method, where "Substance" samples are those brought directly to our Victoria storefront, "Campbell River", "Comox Valley", and "Port Alberni" are samples received through our distributed drug checking model, and "Outreach" samples are those collected at pop-up events (Phillips Brewing Backyard Implosion Explosion, Footwork Entertainment Summer Social, Plant Based Productions Plants 'N Animals , and Overdose Awareness Day), other supported housing sites, at overdose prevention and supervised consumption locations, through no contact drop-off envelopes, and via mail-in envelopes.

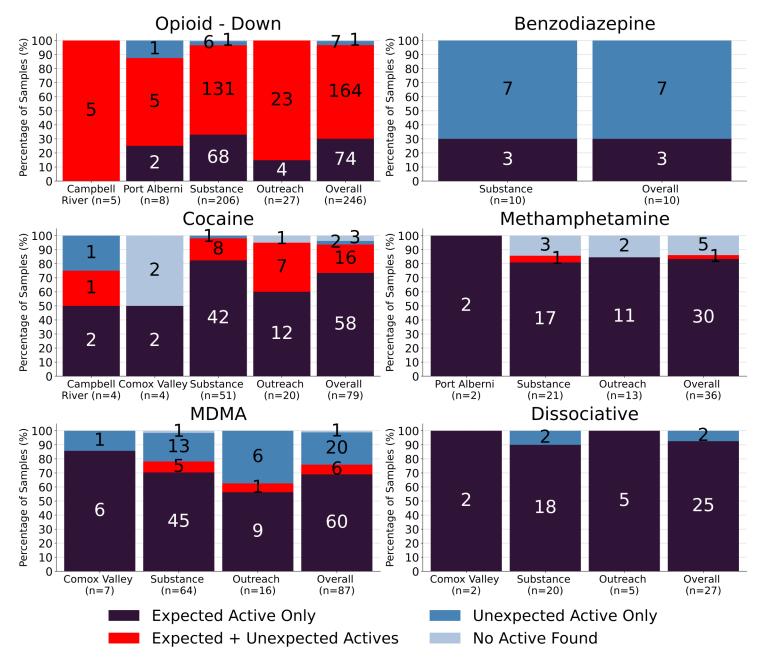


Expected substance	Campbell River	Comox Valley	Port Alberni	Substance	Outreach	Overall
Opioid Down (fentanyl and/or heroin)	5		8	206	27	246
Psychedelic (MDMA, MDA, LSD, 2C-B)		8		82	23	113
Cocaine (HCl or Base)	4	4		51	20	79
Methamphetamine			2	21	13	36
Dissociative (ketamine)		2		20	5	27
Benzodiazepine				10		10
Other Opioids (Dilaudid, oxycodone)	2			6		8
Other (GHB, "research chemicals")				9	5	14
Unknown/Missing	1	6	1	25	17	50
Total samples checked	12	20	11	430	110	583

Preliminary Results for August 2022

#### What did we find?

We tested each sample to determine what active ingredients, adulterants, and cutting agents were present. The majority of samples contained the expected active drug. However, we also detected a number of other notable components that may cause unexpected effects. The figures below illustrate the percentages and numbers of samples tested in each drug category, separated by collection location/method, color coded by their composition. **Dark Purple** regions group samples that were simply as expected with no other notable compounds detected, **Red** shows samples that contained the expected drug *and* were contaminated with an unexpected active, **Dark Blue** groups samples that only contained an unexpected active (the expected drug was not found), and **Light Blue** displays samples where no active compounds were detected.



Preliminary Results for August 2022

#### What did we find?

Expanding on the figures shown on the previous page, for each drug category and collection location/model, we list the number of samples that contained the expected active and/or other notable components

Opioid Down	Campbell River	Port Alberni	Substance	Outreach		Port Alberni
Expected Active Only		2	68	4	Unexpected Active(s) Only	1
Fentanyl		2	68	4	Acetylmorphine	
Expected* + Unexpected Active(s)	5	5	131	23	Bromazolam	
Fentanyl*	5	5	127	20	Cocaine HCl	
Heroin*			5	5	Flubromazepam	
5F-ADB			1		Methamphetamine	1
Acetylcodeine			5	4	Sufentanil	
Acetylfentanyl			5	3		
Acetylmorphine			4	4		
Benzodiazepine (undifferentiated) <sup>1</sup>	1	1	25	2		
Bromazolam	2	2	47	8		
Buprenorphine				2		
Carfentanil	2	1	2	1		
Cocaine Base			1			
DMT			1			
Etizolam	3	1	25	3		
Flualprazolam			7	1		
Flubromazepam		1	29	2		
Fluorofentanyl			42	1		
Hydromorphone			1	1		
Lidocaine			9	2	Data are preliminary. Th	ere were n
Methamphetamine			2	1	some samples. Instrume detect all ingredients ar	•
Morphine			2	2	tions may vary. Multiple	•
Procaine			1		sent in one sample and s	
Xylazine			20		in trace concentrations.  nent. <sup>1</sup> Benzodiazepine	

missing data for not be able to ty of interpretaces may be pres may be present d active component. <sup>1</sup>Benzodiazepine (undifferentiated) results are based on a positive benzo strip test and are unconfirmed by paper spray.

**Substance** 

6

1

1

2 1

2

### Vancouver Island

### **Drug Checking Project**

Preliminary Results for August 2022

Cocaine (HCI or Base)	Campbell River	Comox Valley	Substance	Outreach
Expected Active Only	2	2	42	12
Cocaine Base			4	1
Cocaine HCl	2	2	38	11
Expected* + Unexpected Active(s)	1		8	7
Cocaine Base*	1		2	
Cocaine HCI*			6	7
Acetaminophen			1	
Benzocaine			4	
Levamisole			3	4
Lidocaine				2
Methamphetamine			1	
Phenacetin	1		3	3
Procaine			1	
Unexpected Active(s) Only	1		1	
Fentanyl	1			
Oxycodone			1	
Methamphetamine	1			

Methamphetamine	Port Alberni	Substance	Outreach
Expected Active Only	2	17	11
Methamphetamine	2	17	11
Expected* + Unexpected Active(s)		1	
Methamphetamine*		1	
Bromazolam		1	
Fentanyl		1	
Dissociativos	Comox	Substance	Outreach

Dissociatives	Comox Valley	Substance	Outreach		
Expected Active Only	2	18	5		
Ketamine	2	18	5		
Unexpected Active(s) Only		2			
Diazepam		1			
MDMA	1				
Rolicyclidine		1			

Opioid Other	Campbell River	Substance
Expected Active Only	2	4
Hydromorphone		2
Oxycodone + Acetaminophen	2	2
Unexpected Active(s) Only		1
Acetylcodeine		1
Acetylmorphine		1
Heroin		1
Benzodiazepine (Undifferentiated) <sup>1</sup>		1
Lidocaine		1

Data are preliminary. There were missing data for some samples. Instruments may not be able to detect all ingredients and certainty of interpretations may vary. Multiple substances may be present in one sample and substances may be present in trace concentrations. \*Expected active component. ¹Benzodiazepine (undifferentiated) results are based on a positive benzo strip test and are unconfirmed by paper spray.

Preliminary Results for August 2022

Psychedelics	Comox Valley	Substance	Outreach
Expected Active Only	6	60	13
2C-B		4	2
4-AcO-DMT		1	
4-HO-DET		1	
5-MeO-DiPT		1	
LSD		8	1
MDA	1	4	
MDMA	5	41	9
Psilocybin			1
Expected*+ Unexpected		5	1
Active(s)			_
MDA		5	1
MDMA*		5	1
Unexpected Active(s) Only	1	14	8
5-MeO-MALT			2
Cathinone		1	
(Undifferentiated)		-	
Cocaine HCl		1	
Ketamine		2	
MDA	1	11	4
MDMA		1	1
Methamphetamine			1

Benzodiazepines	Substance
Expected Active Only	3
Alprazolam	1
Bromazolam	1
Lorazepam	1
Unexpected Active(s) Only	7
Benzocaine	1
Carfentanil	1
Etizolam	2
Fentanyl	1
Flualprazolam	2
Flubromazepam	2
Lorazepam	1

Other	Substance	Outreach
Expected Active Only	6	2
6-APB		1
Amphetamine	1	
GHB	2	1
Sildenafil	2	
Tadalafil	1	
Unexpected Active(s) Only	3	1
2-FMA		1
5-MAPB		1
Bromazolam	2	
Fentanyl	2	
Mescaline	1	
Methamphetamine	2	

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Preliminary Results for August 2022

Unknown/Missing	Comox Valley	Port Alberni	Substance	Outreach
Unexpected Active(s) Only	5	1	16	15
2C-B				1
4-HO-MET				1
Acetylcodeine				1
Acetylmorphine				1
Adinazolam			1	
Benzodiazepine (undifferentiated) <sup>1</sup>			1	
Bromazolam			1	1
Cocaine Base			1	
Cocaine HCl	1	1	1	3
Diazepam			1	
Diphenhydramine			1	
DMT	2			
Ethylphenidate			1	
Etizolam			3	1
Fentanyl			6	6
Flubromazepam			1	
Fluorofentanyl			2	
Heroin				1
Hydromorphone			2	4
Ketamine			1	
Methamphetamine			1	
MDA	1			1
MDMA	1		1	1
Morphine			2	3

Data are preliminary. There were missing data for some samples. Instruments may not be able to detect all ingredients and certainty of interpretations may vary. Multiple substances may be present in one sample and substances may be present in trace concentrations. \*Expected active component. ¹Benzodiazepine (undifferentiated) results are based on a positive benzo strip test and are unconfirmed by paper spray.

Preliminary Results for August 2022

### Quantification

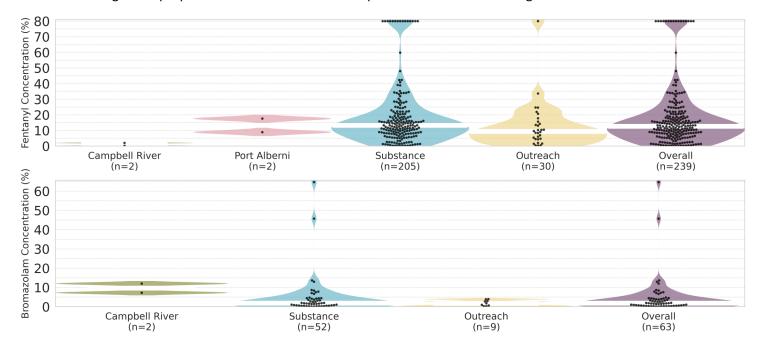
Using paper spray mass spectrometry (PS-MS) data, we were able to quantify low concentration compounds. These aggregate values are *inclusive* to all expected drug categories in which the active drugs are found. Weight percentage is reported below.

Substance	# Quant.	Median	Min	Max
Fentanyl	239	12.6%	0.1%	>80%*
Bromazolam	63	1.8%	0.1%	64.7%
Fluorofentanyl	45	1.9%	0.2%	71.1%
Etizolam	36	0.7%	0.1%	>25%*
Flubromazepam	36	2.7%	0.2%	>80%*
Xylazine	20	0.5%	0.1%	5.0%
Acetylmorphine	11	4.5%	0.1%	31.6%
Heroin	12	>80%*	13.1%	>80%*
Carfentanil	7	0.30%	0.04%	1.19%

<sup>\*</sup>There is a maximum concentration limit that the PS-MS can quantify for each compound of interest. If a sample contains a higher percentage of a compound than the PS-MS's limits, then only the upper limit will be reported. For example, the upper limit of reporting for etizolam on the PS-MS is 25% - any sample containing more than 25% etizolam will be flagged as ">25%".

### **Distribution of Fentanyl and Bromazolam Concentrations**

The concentrations of fentanyl and bromazolm for every sample quantified, separated by collection location/model, are illustrated below to highlight the variability in the unregulated drug market. **Black Dots** are individual samples, **White Lines** mark the median concentration of the fentanyl/bromazolam positive samples checked, and the width of the colored regions is proportional to the number of samples in a concentration range.



Preliminary Results for August 2022

The Vancouver Island Drug Checking Project is based out of the University of Victoria and operates community-wide drug checking services within Campbell River, the Comox Valley, Port Alberni, and Victoria, BC. We are continuing to offer drug checking services in response to the dual public health emergencies, and exploring new ways to better reach those who may benefit from this service. We have partnered with Dr. Chris Gill and the team at Vancouver Island University to improve detection and reporting using their methods for the paper spray - mass spectrometer.

See the blog portion of our website to view our more detailed interpretations of our reports.

Our project respectfully acknowledges that we work as visitors on the traditional territory of the Lkwungen (Songhees), Wyomilth (Esquimalt), and WSÁNEĆ (Saanich) peoples of the Coast Salish Nation. We also acknowledge the inextricable links between research, colonization and racism against Indigenous peoples, which continue to this day. Ending the violence faced by people who use substances and the overdose crisis cannot be achieved without facing the legacy through which we have come to be in this territory.

#### For more information please visit: substance.uvic.ca

#### We gratefully acknowledge our partners and funders on this project

#### **Our Partners**



AVI Health and Community Services

BC Ministry of Health

BC Ministry of Mental Health and Addictions

BC Support Vancouver Island Centre

Canadian Institute for Substance Use Research



IBM Canada



Lantern Services

PerkinElmer Inc

ProSpect Scientific





Vancouver Island University



#### **Our Funders**







Natural Sciences and Engineering Research Council



Canadian Institutes of Health Research



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