What are synthetic opioids?

The term “synthetic opioids” refers to a class of substances that researchers know to be opiates, or for newer, less researched drugs, agree have opiate-like effects. Like the substances they mimic, such as codeine and morphine, synthetic opioids provide pain relief and sedation. This includes those with approved medical purposes, like fentanyl, and those without, like U-47700 (sometimes known as “pink”), carfentanil and acetyl-fentanyl (fentanyl analogues), and AH-7921. Fentanyl – the most well-known and researched in its class – has been used for years to treat those suffering from chronic pain. Recently, however, fentanyl and other synthetic opioids have been showing up in heroin.

Example Phrasing
“Fentanyl falls under a class of drugs known as synthetic opioids. It is often prescribed to patients dealing with chronic pain, and is a safe and effective pain killer if taken under the careful direction of a doctor.”

What risks are associated with synthetic opioid use?

Synthetic opioids can cause constipation, nausea, and respiratory depression, which can lead to overdose. This is more likely when they are combined with alcohol, benzodiazepines, or cocaine. Additionally, synthetic opioids tend to be highly potent (potency refers to the amount of a drug required to produce a given effect; the higher the potency the smaller the amount of drug where it is active in the body). When taken unknowingly, and with a less potent substance like heroin, the risk of overdose increases significantly. In 2015 there were 9,580 known deaths related to synthetic opioids. These occurred primarily in the eastern United States, where heroin adulterated with fentanyl is more common.

Example Phrasing
“A young man was hospitalized after overdosing on heroin that had been cut with fentanyl. Fentanyl, a synthetic opioid, is often used to cut heroin in an effort to provide users with a cheap, yet strong product.”

Why is heroin being cut with fentanyl and other synthetic opioids?

It’s because of prohibition that there is a profit-driven incentive to provide cheap, strong drugs to meet the demand for street heroin. Fentanyl and other synthetic opioids have proven to be attractive cutting agents: they are inexpensive to produce, and their often-strong sedative properties can be seen as strengthening a batch of heroin. It’s not the case that synthetic opioids are cut into heroin by street level dealers, but rather by those higher up on the supply chain. Due to a somewhat sophisticated manufacturing process, this happens in clandestine labs, usually outside the U.S.

Example Phrasing
“Fentanyl, a comparatively inexpensive and highly potent synthetic opioid, is often used to cut heroin in an effort to provide users with a cheap, yet strong product.”
How prevalent are overdoses due to synthetic opioids?

As of 2016, overdoses from synthetic opioids are on the rise. Overall drug overdose deaths have been on the rise for the past two decades. Most are from either heroin use or the misuse of prescription opioids, however, in a one year time span (2014-2015) there was a 73% increase in fatal overdoses involving synthetic opioids, primarily with fentanyl. As heroin and other opioid use continue to rise, incentive remains strong to adulterate these drugs with cheap and powerful imitators like fentanyl and other synthetic opioids, which may lead to more overdoses.

EXAMPLE PHRASING
“Fatal overdoses from fentanyl and other synthetic opioids are currently on the rise in the United States. There is a strong need for common sense public health policies that can effectively address this growing problem.”

What can be done to prevent these risks?

Appropriate health-oriented measures would be far more effective in preventing risks than criminalization. Many of the alternative strategies for minimizing harm from synthetic opioids apply to general opioid use as well. They include:

1. Expand access to naloxone
   Naloxone is an easily administered medication used to reverse the effects of an opioid, or synthetic opioid, overdose. It has saved tens of thousands of lives across the country, and studies have shown that its availability does not increase drug use. Increasing funding for community-based organizations that provide naloxone, reclassifying naloxone as an over-the-counter medication, and providing insurance coverage for naloxone are just some ways this life-saving medication can get into more hands.

2. Establish supervised injection facilities (SIFs)
   SIFs are legally sanctioned facilities where people can consume pre-obtained drugs under the supervision of trained staff. In addition to providing sterile equipment and access to care staff, SIFs serve as a point of engagement to refer people to treatment and other social services. Not a single overdose death has occurred at any of the nearly 100 SIFs currently operating worldwide.

3. Provide comprehensive drug education
   This should alert people to the risks of synthetic opioids as well as provide strategies to reduce potential harms if they choose to use.

4. Provide free public, community-level access to drug checking services
   Technology exists to test heroin and opioid products for the presence of riskier synthetic opioids, but it remains mostly unavailable to the United States public. Making these services publicly available through community outreach services would prevent many deaths, as well as allow for real-time tracking of local drug trends.

EXAMPLE PHRASING
“Drug policy experts stress that minimizing harm from synthetic opioids must include health-oriented measures such as expanding access to the life-saving naloxone and establishing supervised injection facilities (SIFs). SIFs provide a safe, supervised space for those who choose to use, as well as connect them to health care, rehab programs, counseling, and more.”

Endnotes

4. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3008773/

For more information, please see:
www.drugpolicy.org/drug-facts
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