PUBLIC HEALTH ADVISORY

To: All Healthcare Providers  
From: Lisa B. Hernandez, MD, MPH, Health Officer, County of Santa Cruz  
Date: May 2, 2016  
Subject: Overdoses and deaths due to counterfeit drugs contaminated with fentanyl

CURRENT SITUATION
California Department of Public Health (CDPH) recently issued a statewide Drug Overdose Health Alert in response to an increased number of overdoses and deaths reported by Sacramento County and anecdotal reports of similar overdoses in other counties.

Since late March, Sacramento County has reported 52 overdoses of illicitly obtained drugs, including 12 deaths. Contra Costa County reported 10 overdoses and Santa Clara County reported two overdose deaths. Many of these overdoses and deaths were the result of consumption of pills that strongly resembled the prescription opioid drug Norco (hydrocodone/acetaminophen) but actually contained an undetermined amount of fentanyl, a powerful synthetic opiate analgesic much more potent than morphine and heroin.

BACKGROUND
In November 2015, Santa Cruz County Health Services Agency (HSA) issued a Public Health Alert regarding two overdose deaths likely linked to consuming fentanyl-contaminated street Xanax. At the time, other Bay Area counties also experienced similar overdoses related to street Xanax possibly laced with fentanyl. San Francisco recently reported verified fentanyl-containing counterfeit pills of oxycodone, Xanax, and Norco.

Fentanyl is an extremely potent, short-acting opioid that can cause overdose and death. Although pharmaceutical fentanyl can be diverted for misuse, most cases of fentanyl-related morbidity and mortality have been linked to illicitly manufactured fentanyl and fentanyl analogs, collectively referred to as non-pharmaceutical fentanyl (NPF). NPF is sold via illicit drug markets for its heroin-like effect and often mixed with heroin and/or cocaine as a combination product – with or without the user’s knowledge – to increase its euphoric effects. Counterfeit street drugs may contain other toxic chemicals or have varying levels of fentanyl in each batch. Even pills produced in the same batch may have widely varying levels of fentanyl, some of them lethal.
**ACTIONS REQUESTED OF ALL CLINICIANS**

To enhance our understanding of the magnitude of severe adverse outcomes due to use of illicitly obtained fentanyl in California, CDPH and HSA are requesting all healthcare facilities to:

1) Voluntarily report suspected and confirmed fentanyl overdose cases to HSA’s Communicable Disease Unit (CDU) for reporting to CDPH. The information you submit will be used solely for public health surveillance.
   - *If your facility already reports by CalREDIE*, report the suspected or confirmed “Fentanyl Overdose” case via CalREDIE as you normally would for a reportable infectious disease.
   - *If your facility does not use CalREDIE*, submit a Confidential Morbidity Report (CMR) to Communicable Disease Unit to FAX # 831-454-5049 as you normally would for a reportable infectious disease.
     
     CMR: [https://www.cdph.ca.gov/pubsforms/forms/CtrldForms/cdph110a.pdf](https://www.cdph.ca.gov/pubsforms/forms/CtrldForms/cdph110a.pdf)

     The reports should include:
     a. Name
     b. Age/Date of birth
     c. Gender
     d. Address of residence

2) Perform a drug screening test on cases of suspected opioid overdose.
   a. If the test is negative for opioids, consider testing for fentanyl as it is not always detectable on screening tests.
   b. If a subsequent test (e.g. ELISA) is positive for fentanyl, a gas chromatography-mass spectrometry (GC/MS) confirmatory test should be performed to confirm or rule out fentanyl and its analogs, including acetyl fentanyl.
   c. For more details: [http://emergency.cdc.gov/han/han00350.asp](http://emergency.cdc.gov/han/han00350.asp)

3) Treat suspected opioid overdoses according to standard protocols. Ensure that emergency departments have adequate naloxone (Narcan) available. Be aware that naloxone is effective in reversing the effects of fentanyl; however, we have reports that it may take repeated doses of naloxone over several hours to adequately treat fentanyl overdose.

4) Ensure patients with opioid use disorder have naloxone by prescribing naloxone directly or referring patients to Janus of Santa Cruz ([www.janussc.org](http://www.janussc.org)) for naloxone kits. Consider providing naloxone to others who use opioids or might witness an opioid overdose. Family members and friends of persons who use opioids are often very concerned, and could be the right person to keep naloxone supply on hand.

5) Refer patients with opioid use disorder to treatment (County of Santa Cruz Health Services Agency Alcohol and Drug Abuse Services 831-454-4050 or Janus of Santa Cruz 831-425-0112). Warn patients with a history of opioid use and/or substance abuse about the risks of purchasing street pills. Fentanyl is colorless and odorless and cannot be readily detected without laboratory analysis. See attached bulletin for patients and high risk groups.

Please contact the Communicable Disease Unit at [831-454-4114](tel:831-454-4114) with any questions on reporting.
**ADDITIONAL RESOURCES**

CDC MMWR: Counterfeit Norco Poisoning Outbreak – San Francisco Bay Area, California, March 25 -April 5, 2016 (4/29/2016): [http://www.cdc.gov/mmwr/volumes/65/wr/mm6516e1.htm](http://www.cdc.gov/mmwr/volumes/65/wr/mm6516e1.htm)

CDPH Issues Health Alert to Stop Fentanyl-Related Deaths (4/8/2016): [https://www.cdph.ca.gov/Pages/NR16-020.aspx](https://www.cdph.ca.gov/Pages/NR16-020.aspx)


CDC Health Advisory Increases in Fentanyl Drug Confiscations and Fentanyl-related Overdose Fatalities (10/26/2015) [http://emergency.cdc.gov/han/han00384.asp](http://emergency.cdc.gov/han/han00384.asp)


CDC Health Advisory Recommendations for Laboratory Testing for Acetyl Fentanyl and Patient Evaluation and Treatment for Overdose with Synthetic Opioid (6/20/2013) [http://emergency.cdc.gov/han/han00350.asp](http://emergency.cdc.gov/han/han00350.asp)

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**Health Alert:** conveys the highest level of importance; warrants immediate action or attention.

**Health Advisory:** provides important information for a specific incident or situation; may not require immediate action.

**Health Update:** provides updated information regarding an incident or situation; unlikely to require immediate action.