

Uninsured Opioid Users Admitted to Medication-Assisted Treatment (MAT) Program in Palm Beach County, Florida, Found to Be Using Many Drugs in Addition to Opioids

Submitting Site: The Recovery Research Network (TRRN) (Palm Beach, Florida)

Contacts: Richard Gustin, PhD (TRRN), richard.gustin@trrn.org
Eric D. Wish, PhD (NDEWS, UMCP), ewish@umd.edu

Background

TRRN, an outpatient treatment program, has been subcontracted by The Recovery Research Network Foundation, a recipient of a federal State Targeted Response to the Opioid Crisis (STR) grant, to extend medication-assisted treatment (MAT) to uninsured patients. The grant is implemented by the Florida Department of Children and Families and locally managed by the Southeast Florida Behavioral Health Network.

Methods

TRRN routinely collects urine specimens from patients at intake and tests them for 14 drugs, including fentanyl, using on-site rapid tests, and wanted to obtain results for other synthetic drugs that are not detected by their tests. TRRN submitted 23 specimens collected between October 2017 and January 2018 from uninsured opioid users who agreed to participate in MAT as part of a comprehensive treatment regimen under their STR grant. See *DOTS Bulletin*, Issue 1, for a detailed description of the DOTS pilot study methodology and limitations (<https://go.umd.edu/ndews-dots>).

Sample Characteristics

The 23 specimens came from persons between the ages of 22 and 61 years old, with half being 35 or older. The majority of the specimens came from males (61%) and persons identified as White (91%). All persons presented voluntarily to outpatient treatment.

DOTS Drug Test Results

All specimens contained more than one substance, 91% contained five or more substances, and 35% contained ten or more (see drugs detected table on page 2). As would be expected in an MAT patient population, opioids were frequently detected, including morphine (83%), fentanyl (83%), tramadol (35%), and hydromorphone (35%). Other fentanyl analogs were detected in 43% of the specimens; more than half (53%) of the specimens that contained fentanyl also contained one or more other fentanyl analogs. Moreover, the antihistamine diphenhydramine, a drug sometimes used as a heroin adulterant or to reduce related side effects, was found in more than 60% of the specimens. To protect the identity of the persons who submitted specimens, individual diphenhydramine results are not provided in the drugs detected table. Marijuana (43%), cocaine (43%), and methamphetamine (35%) were also among the other drugs detected. No synthetic cannabinoids were detected.

Implications

Even though synthetic cannabinoids were not detected in this group of patients, many fentanyl analogs and other opioids were found. In addition, according to TRRN staff, the presence of antihistamines in multiple specimens suggests their “use for mitigating withdrawal prior to presenting voluntarily to outpatient treatment.” The large number of nonopioid drugs detected underscores the complexity of treating these persons using opioid-focused MAT. These persons will likely need “ongoing, long-term education and interventions” that can address their extensive drug-using behaviors.

THE DRUG OUTBREAK TESTING SERVICE (DOTS) PILOT STUDY

DOTS tests up to 20 urine specimens for 240 drugs, without cost to the submitting site, to help identify emerging drugs for epidemiologic purposes.

To become a DOTS site or for more information:

ndewsdots@umd.edu

DOTS Bulletins are available at: <https://go.umd.edu/ndews-dots>

Drugs or Drug Metabolites Detected by DOTS Laboratory Urinalyses

(N = 23 urine specimens submitted to DOTS by The Recovery Research Network, Palm Beach, Florida)

Specimen	Common Drugs				Pharmaceutical Nonopioid Drugs														Nonfentanyl Opioids							Fentanyl				Other Drugs																
	THC (marijuana)	Benzoyllecgonine (cocaine)	Methamphetamine	PCP	Anti-histamines			Benzodiazepines					Anti-depressants			Quinine	Dextromethorphan	Loperamide	Gabapentin	Naloxone	Haloperidol	Cyclobenzaprine	Morphine	Codeine	6-Acetylmorphine (heroin)	Tramadol	Hydromorphone	Oxycodone	Hydrocodone	Buprenorphine/Norbuprenorphine	Methadone/EDDP	Fentanyl/Norfentanyl	Methoxyacetyl fentanyl	Cyclopropyl fentanyl	Carfentanil	Acetyl fentanyl/Acetyl NorFentanyl	4-ANPP (Despropionyl fentanyl)	3,4,5-trimethoxycocaine	α-PVP	mCPP^						
					Diphenhydramine	Cetirizine	Hydroxyzine	Alprazolam/α-Hydroxyalprazolam	7-Aminoclonazepam	Lorazepam	Oxazepam	Temazepam	Desvenlafaxine/Desmethylvenlafaxine	Venlafaxine	Trazodone^																															
1	✓		✓	✓	*								✓	✓		✓					✓	✓	✓							✓	✓	✓			✓											
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3		✓	✓		*		✓	✓						✓		✓					✓	✓	✓					✓	✓	✓																
4	✓		✓		*	✓	✓			✓	✓	✓		✓	✓	✓					✓	✓	✓					✓	✓	✓																
5	✓	✓			*									✓	✓						✓	✓	✓				✓	✓	✓																	
6			✓		*		✓							✓	✓						✓	✓	✓					✓	✓	✓																
7		✓			*									✓	✓						✓	✓	✓						✓	✓	✓															
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9	✓				*		✓							✓	✓						✓	✓	✓					✓	✓	✓						✓										
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23					*									✓	✓						✓	✓	✓						✓	✓	✓															
Total Positive:	10	10	8	4	*	1	1	3	2	2	1	1	1	1	1	1	1	1	1	14	4	3	2	2	1	1	19	12	6	8	8	3	2	2	1	7	4	19	6	3	2	2	1	2	1	1

*To protect the identity of persons who submitted specimens, results are not provided for drugs that 1) are not routinely tested for by the submitting site and 2) test positive by a high percentage of the specimens.

^Trazodone is an antidepressant whose major active metabolite is mCPP. It is not possible to determine definitively whether the presence of mCPP was due to Trazodone use or whether mCPP was taken on its own.

Note: Specimens were collected by The Recovery Research Network from uninsured opioid users admitted to medication-assisted treatment (MAT) between October 2017 and January 2018.

Source: Drug Outbreak Testing Service (DOTS), National Drug Early Warning System (NDEWS) Coordinating Center, Center for Substance Abuse Research, University of Maryland, College Park, July 2018.