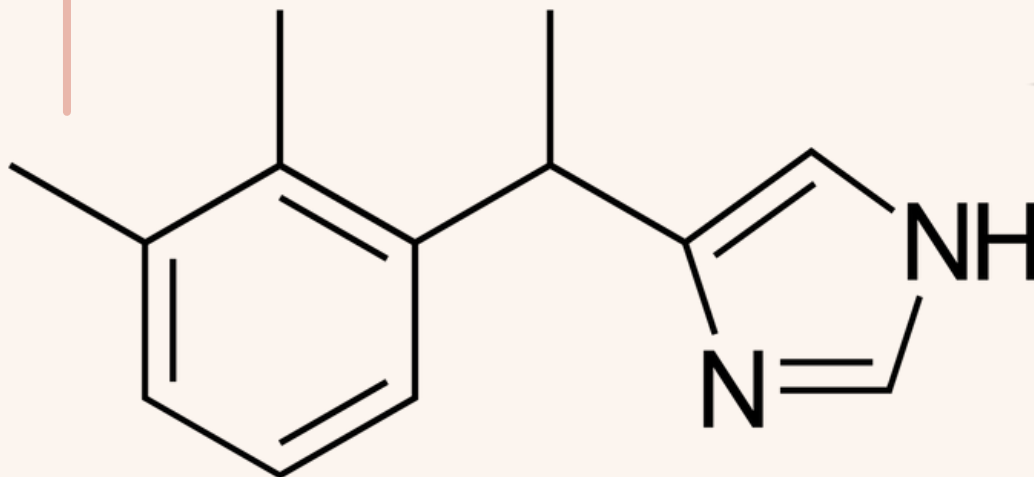


# medetomidine

what is it & why does it matter



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## The Basics

- A tranquilizer similar to xylazine
- Found in the Philly drug supply for the first time at the end of April 2024
- Clinical purposes:
  - induces sedation
  - an analgesic: **causes an inability to feel pain**
  - an anxiolytic: **causes a level of sedation associated with extreme relaxation but may not be awake & may not be able to respond**
  - **muscle relaxation**
- **At this time, all samples containing medetomidine also contained xylazine & fentanyl.**

## MEDETOMIDINE



# Similarities to xylazine aka tranq

- Medetomidine is an alpha 2 agonist
- Causes significant sedation
- Causes vasoconstriction
  - Will slow healing of wounds
- Causes respiratory depression
- Causes dry mouth
- Not approved for human use but unlike xylazine does have a version that is approved for use in humans known as dexmedetomidine






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# Differences between medetomidine & xylazine aka tranq

- Causes muscle twitches 
- Can cause hallucinations 
- Causes peripheral cyanosis - can turn skin colors, but person isn't truly cyanotic (without oxygen) 
- Medetomidine is **considered to be stronger than xylazine and has a longer duration of action which means that it lasts longer than xylazine.**
- Medetomidine causes **an increase in urination which leads to dehydration and an increase in overdose risk.**
- There is a form of medetomidine that is approved for use in humans known as dexmedetomidine aka precedex.
- **There are currently no testing strips to identify the presence of medetomidine in the drug supply.**

 **Symptoms not found with xylazine use**

## MEDETOMIDINE



# Adverse Effects

- Deep state of unconsciousness
- Respiratory depression
- Cardiac & Circulatory depression
- Dry mouth
- Dilated pupils
- Hypothermia-low body temperature
- Muscle spasms
- Low heart rate
- High blood pressure followed by prolonged low blood pressure
- Peripheral vasoconstriction - turns skin blue; can mask actual cyanosis (lack of oxygen within the body)



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## MEDETOMIDINE



# Responding to an overdose involving medetomidine

- Though medetomidine is not an opioid and will not respond to naloxone, it has been found in combination with fentanyl and therefore, **the use of naloxone is still recommended**
- **Rescue breathing is essential**
- **Utilize the rescue position**
- **Management of body temperature**
  - **use of cooling measures like wet paper towels**
- **Encourage hydration to reduce risk of kidney damage**

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## MEDETOMIDINE



# If you think there might be medetomidine in your supply, follow universal precautions!

1. ALWAYS CARRY NALOXONE
2. Try not to use alone
3. Start low & go slow. You can always do more but you can't do less.



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# medetomidine



- 01** Found in the Philly drug supply in April of 2024.
- 02** Similar to xylazine but has a longer duration of action.
- 03** Causes muscle twitches & hallucinations which can act as a red flag for the presence of medetomidine in your supply.
- 04** Hydration & managing body temperature as well as oxygenation are essential.
- 05** Follow universal precautions!

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# Find this helpful?



## Questions?



Let us know!

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