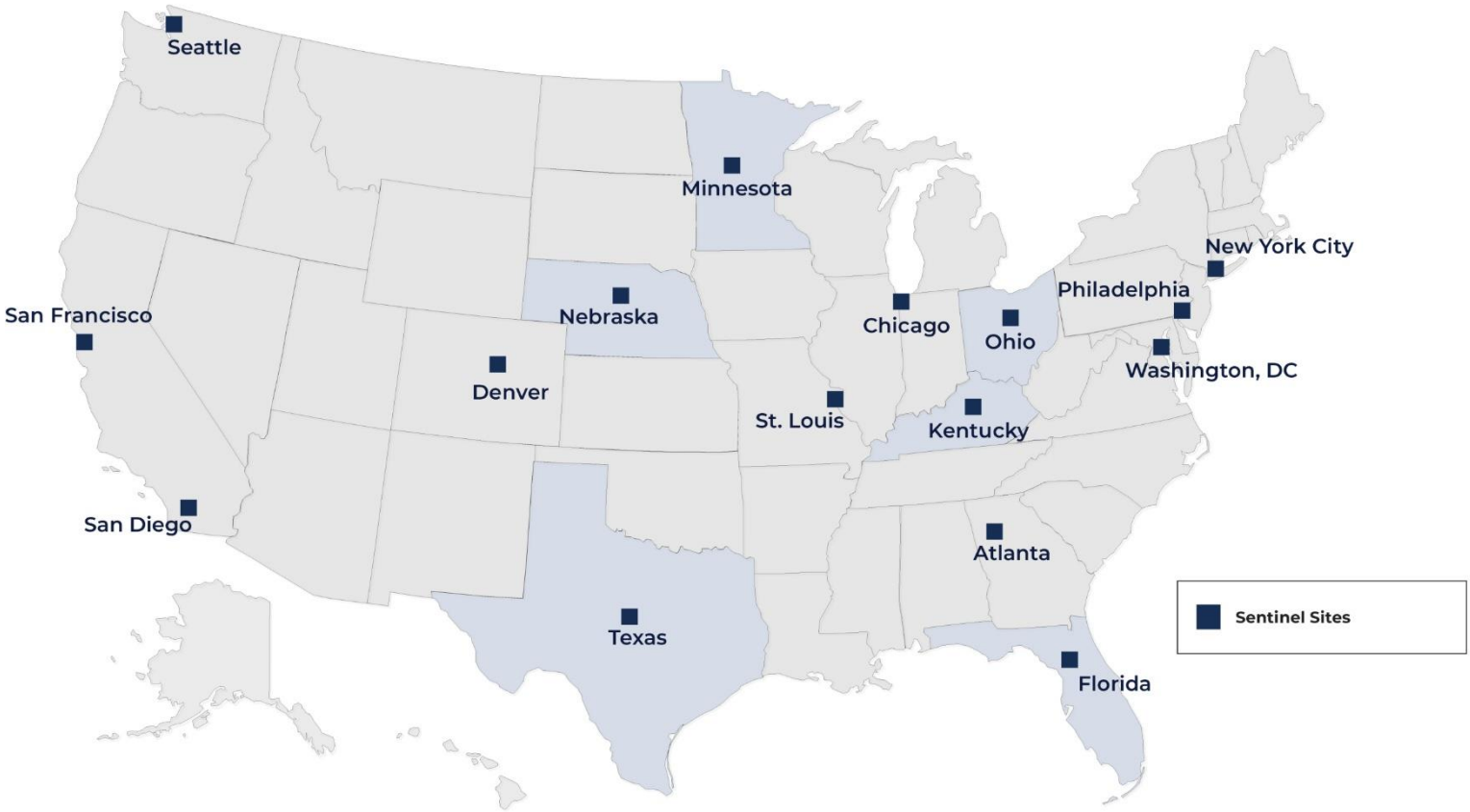
N·DEWS

NATIONAL DRUG EARLY WARNING SYSTEM

June 2025 – Sentinel Site Directors Report

Insight from NDEWS Sentinel Site Surveillance



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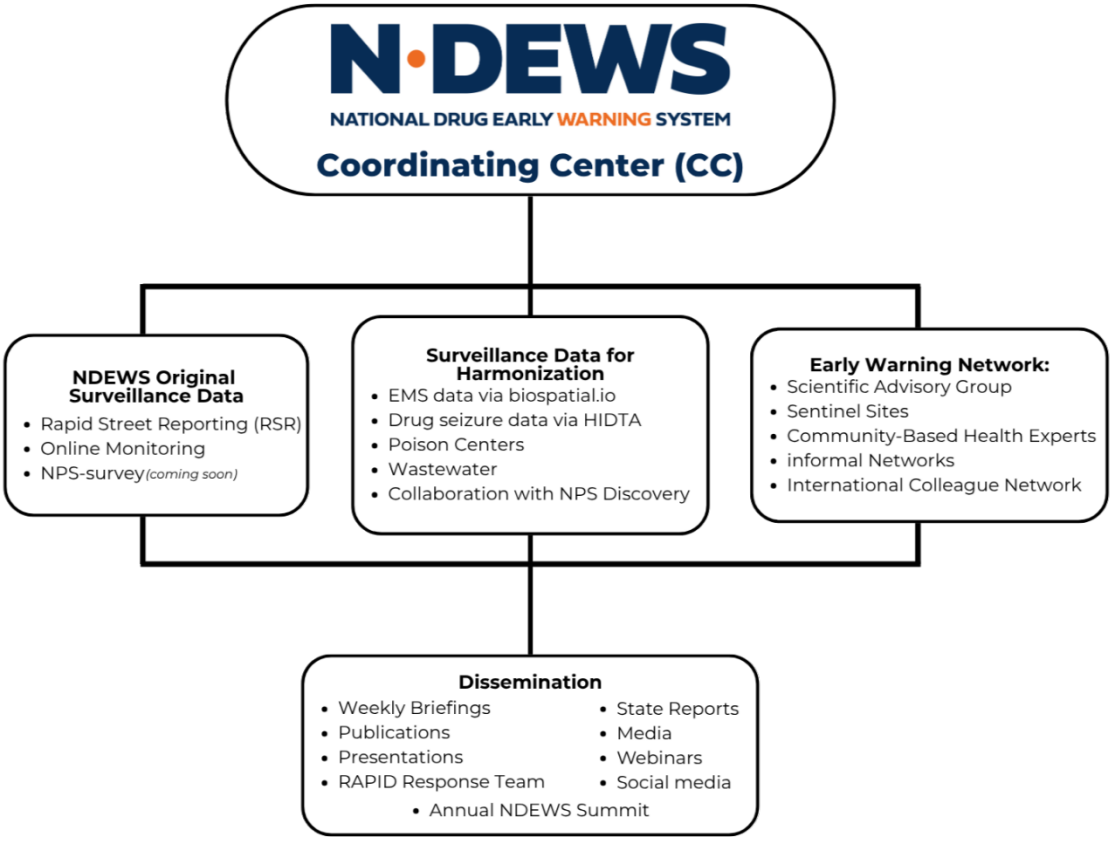
Coordinating Center (CC)

The National Drug Early Warning System (NDEWS) was first funded by the National Institute on Drug Abuse (NIDA) in 2014, as an expansion of its longstanding Community Epidemiology Workgroup (CEWG). Through July 2020, the first iteration of the NDEWS was overseen researchers at the University of Maryland's Center for Substance Abuse Research.

In April 2020, NIDA funded the second iteration of NDEWS as a Cooperative Agreement grant to the University of Florida, led by our research group from the University of Florida, NYU Langone Health, and Florida Atlantic University.

In 2024, our team submitted a competitive renewal to continue serving as the NDEWS Coordinating Center. This renewal was funded in March 2025, marking the third iteration of NDEWS, which continues to led by our research group comprised of scientists, students, and staff from the University of Florida, NYU Langone Health, and Florida Atlantic University.

NDEWS is funded by NIDA to the University of Florida (MPI: Cottler (contact), Co-Is: Goldberger, Nixon, Striley), NYU Langone Health (MPI: Palamar), and Florida Atlantic University (Co-I: Barenholtz). NDEWS provides the field with timely, salient, and valuable information on emerging substance use trends.



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NDEWS Weekly Briefing

The NDEWS Weekly Briefing curates emerging data and findings from across the Early Warning Network, which includes three core components: our Scientific Advisory Group (SAG), comprised of national experts and federal partners; our Sentinel Site Directors (SSD), who lead local surveillance in key geographic regions; and our Community-Based Health Experts, who provide on-the-ground insights from populations most impacted by drug trends. Together, these contributors generate timely, multidisciplinary and impactful information, ranging from local surveillance data to peer-reviewed research findings. These contributions inform all of our communities.

Click the button below or scan the QR-code to subscribe to the NDEWS Weekly Briefing. Please share the Briefing with your colleagues and network so we can make an even bigger impact.

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NDEWS Sentinel Site Directors Report, June 2025

Our Early Warning Network currently includes 16 sentinel sites, which provide us. Each month we send our Sentinel Site Directors (SSD) questions of interest to the field that are suggested by SSDs, our NDEWS team, or individuals reading our Weekly Briefing. SSDs inform us of signals of drug use in their local areas and in their state by providing us provide us with quantitative and qualitative data.

In June 2025, our SSD reported on heroin-related trends and other trends of note. Their responses are highlighted in the following report. We would like to thank our Sentinel Site Directors for their insight.

Recommended citation

National Drug Early Warning System (NDEWS). Sentinel Site Director Report – June (2025). Retrieved from https://ndews.org.

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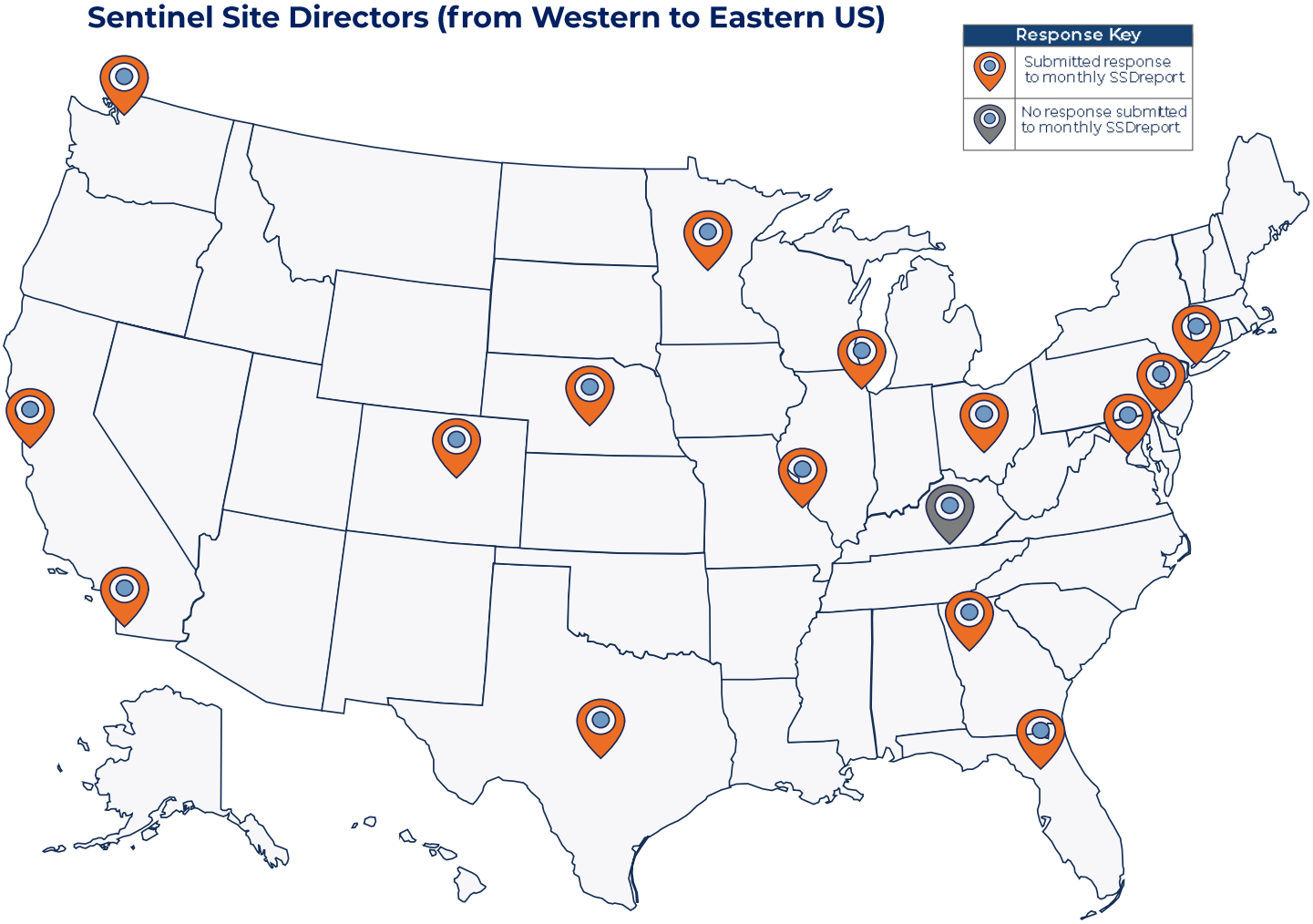
Sentinel Site Directors (from Western to Eastern US)



Western US region

Seattle, WA: Caleb Banta-Green, PhD, MPH, MSW & Jason Williams, PhD

San Francisco, CA: Phillip Coffin, MD, MIA

San Diego, CA: Annick Bórquez, PhD

Denver, CO: Tyler Coyle, MD

Midwestern US region

Nebraska: Patrick Habecker, PhD

Minnesota: Nate Wright PhD, MPH

St. Louis, MO: Heidi Israel, PhD, FNP, LCSW, CCRG

Chicago, IL: Mary Mackesy-Amiti, PhD

Ohio: Kelley Kampman, PhD

Southern US region

Texas: Dayong Lee, PhD

Kentucky: Peter Rock, MPH

Atlanta, GA: Matt Myers, MS, MPA

Florida: Bruce Goldberger, PhD

Northeastern US region

Philadelphia, PA: Jeanmarie Perrone, MD

New York City, NY: Ellenie Tuazon, MPH

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In May 2025, we published Issue 231 of the NDEWS Weekly Briefing, in which we decided to explore the possibility of a new signal related to an increase in heroin use. In that week's NDEWS Special Report highlighted EMS encounters for nonfatal heroin-related overdoses in the US July 1, 2024 - April 30, 2025. While overall encounters declined nationally, Western states reported a slight increase in heroin use, which contrasts with steady declines in Central and Eastern states. This emerging data is also supported by the Millennium Health Signals Report Vol. 7, published in February 2025, which found heroin detection among fentanyl-positive samples rose 28% in Western states (18% nationally) from 2023 to 2024. The alert from the NDEWS Web Monitoring Team discussed adverse effects and regional variations in availability of heroin. We asked our Sentinel Sites to provide their insight on heroin-related trends.

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Sentinel Site Report, June 2025: What heroin-related trends have you observed locally?

Nebraska: Patrick Habecker, PhD

Heroin use remains rare in our survey cohort of people who use drugs. Since January, 5.6% respondents said they used heroin in the past 6 months, typically using it less than once a month or about once a week. When asked about local heroin availability, or availability of heroin without fentanyl, ~44% of cohort members reporting being unsure as to how or where to source heroin, while 11% said it was easy to get heroin without fentanyl, and 17% said it was easy to get heroin.

Minnesota: Nate Wright, PhD, MPH

Both heroin-involved drug overdose deaths and suspected heroin-involved nonfatal overdoses, have been infrequently reported through the first half of 2025. Heroin is suspected and/or detected in a small proportion of substance-related hospital visits (>5%) based on data from our biosurveillance program.

Ohio: Kelley Kampman, PhD

Between 2024 - Q1 of 2025, heroin was the most commonly reported substance injected among clients of the Ohio Data Collection Consortium's Syringe Services Program (SSP), ~45% of respondents reported injecting heroin in the last 30 days. Fentanyl is more common than heroin in Ohio, according to the Ohio Department of Health and the Ohio Bureau of Criminal Investigation. It is unclear if SSP clients are injecting heroin, or if they are referring to "heroin," meaning fentanyl or other opioids sold as "heroin." The Ohio Substance Abuse Monitoring (OSAM) Network 2024 report highlights that respondents continue to report low availability of heroin and high availability of fentanyl. Official overdose death reporting for this year shows that heroin accounted for 2% of unintentional drug overdose deaths and is expected to remain low.

Seattle, WA: Caleb Banta-Green, PhD, MPH, MSW & Jason Williams, PhD

Per quarter ~13-20 state-wide drug checking samples that are sold or obtained as heroin are received, representing a decline in prevalence. Fatal overdoses involving heroin have also declined state-wide, from 5.2 per 100K in 2020 to 0.4 in 2024. The most recent weekly report from the King County Medical Examiner noted 9 fatal overdoses attributed to heroin this year thus far.

Chicago, IL: Mary Mackesy-Amiti, PhD

Data from the Cook County medical examiner shows an increase in the presence of heroin in opioid-involved fatal overdoses. Fentanyl remains present in about 90% of opioid-involved overdose deaths, but heroin detection increased from 17% in Q1 of 2024 31% in Q1 of 2025.

New York City, NY: Ellenie Tuazon, MPH

The proportion of unintentional overdose deaths in NYC involving heroin has declined. In 2020, 47% of unintentional overdose deaths involved heroin. In 2023, 29% of overdose deaths involved heroin. 2024 and 2025 data is provisional.

Philadelphia, PA: Jeanmarie Perrone, MD

Have not heard specifics about heroin in the area.

Denver, CO: Tyler Coyle, MD

Provisional numbers from the Vital Statistics Program of the Colorado Department of Public Health and Environment report 0 fatal overdoses involving heroin (alone) thus far for 2025, but 7 fatal overdoses involving heroin in combination with other substances. Between April 2024 - April 2025, Colorado's Syndromic Surveillance Dashboard reported 21 nonfatal overdoses involving heroin resulting in ED Visits.

Washington, DC: Lisa Wiederlight, MPP

According to the National Drug Strategy, between 2019-2024, national seizures of heroin fell 70% while seizures of fentanyl sharply increased by 451%. This can be partially attributed to fentanyl polydrug mixtures becoming more common. Overdose deaths attributed to fentanyl continue to far exceed those from heroin in the Washington/Baltimore High Intensity Drug Trafficking Area (HIDTA), which is potentially due to underreporting as polydrug use increases.

Kentucky: Peter Rock, MPH

No response submitted.

San Francisco, CA: Phillip Coffin, MD, MIA

Heroin has been involved in 14 of 311 (4.5%) acute toxicity deaths thus far in 2025. A small proportion of people who use non-prescribed opioids use heroin. Black tar heroin is rarely mixed with fentanyl; fentanyl adulteration is more likely to be seen when heroin is in powder form. This "separation" in the markets of heroin and fentanyl is common in Western states, and while this tends to prevent fentanyl toxicity among people who use heroin, fentanyl products are more likely to be sold as stimulants, resulting in higher rates of overdoses among those intending to use a stimulant due to unintentional fentanyl exposure.

Atlanta, GA: Matt Myers, MS, MPA

Heroin is nearly non-existent in the local drug supply based on sized drug data. Between March - May 2025, there were less than 15 heroin cases, compared to 315 fentanyl cases. All of the heroin cases were unadulterated, meaning the samples tested positive for heroin only.

San Diego, CA: Annick Bórquez, PhD

Of the 904 drug-related deaths that occurred in San Diego in 2024, 3 were identified as involving heroin. Between January – June 2025, 2 out of 274 drug-related deaths have involved heroin. All 5 deaths involved polydrug mixtures that included heroin. The proportion of heroin-involved deaths in 2025 is higher than last year thus far, but the numbers are so small that differences cannot be determined at this time. Insights from the Harm Reduction Coalition San Diego and Drug Checking LA highlight that although heroin is available in San Diego, the vast majority choose to use fentanyl given its higher potency, lower cost and higher availability.

Florida: Bruce Goldberger, PhD

The prevalence of heroin in decedents has been trending downward since 2017 (>1,000 occurrences in 2017 to <200 occurrences in 2023). The local supply of heroin has been replaced by illicitly manufactured fentanyl.

Texas: Dayong Lee, PhD

There were no heroin positive toxicology cases seen by the Houston Forensic Science Center (HFSC) between 2024-now. The Houston High Intensity Drug Trafficking Areas (HIDTA) 2026 report further highlights the low prevalence of heroin use locally, noting its use as being "less frequently than other major illicit drug types... Among opioids/opiates, heroin is less popular than opioid pills in most areas". The report additionally notes that heroin was not reported by treatment providers as a primary drug for which patients are entering care, this is partially due to a significant shift from heroin to use of opioid pills (including counterfeit pills containing fentanyl) in recent years as the primary drug of choice among opioid use treatment patients. Accidental drug-related deaths involving heroin in Harris County (Houston area) has continued to decrease since peaking in 2020. In 2024, there 62 deaths in Harris County involving heroin, 41 (66%) also involved fentanyl.

St. Louis, MO: Heidi Israel, PhD, FNP, LCSW, CCRG

Fatal and nonfatal overdose trend data from the Missouri Department of Health and Senior Services (DHSS), heroin use is more prevalent in rural counties. State level data shows heroin overdoses and ER visits declining since 2019 (including in rural counties). Low-levels of heroin use continue to be reflected in 2024-2025 medical examiner data (which skews more urban), including low levels of heroin-involved polydrug mixtures. Treatment admission data remains low for heroin as well. While heroin prevalence has declined, methamphetamine is seen at higher levels than the previous year.

Response Key	
	Submitted response to monthly SSD report
	No response submitted to monthly SSD report

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Sentinel Site Report; June 2025: Trends related to heroin

Responses from Sentinel Sites in the Western region of the US on heroin-related trends

Seattle, WA: Caleb Banta-Green, PhD, MPH, MSW & Jason Williams, PhD – Heroin has largely disappeared from Washington state. Per quarter, ~13-20 state-wide drug checking, samples that are sold or obtained as heroin are received, representing a decline in prevalence. Fatal overdoses involving heroin have also declined state-wide, from 5.2 per 100K in 2020 to 0.4 in 2024. In King County, there were 172 fatal heroin-related overdoses in 2020, compared to 25 in 2024. 22 (88%) of the fatal overdoses in 2024, involved at least one other drug, led by methamphetamine (60%), followed by fentanyl (56%), and then cocaine (40%). The most recent weekly report from the King County Medical Examiner noted 9 fatal overdoses attributed to heroin this year thus far. Per quarter, we receive ~13-20 drug samples state-wide that are sold or obtained as heroin, representing an ever-shrinking share of dug checking samples. Fatal overdoses involving heroin have also declined state-wide, from 5.2 per 100K in 2020 to 0.4 in 2024.

In the last 18 months of the 100 samples brought into drug checking sites state-wide that were sold or obtained as heroin, 80 tested positive for heroin only (of major drug categories analyzed), 5 contained no heroin at all (2 tested positive for fentanyl only and 1 positive for cocaine only). The most common combination where another drug was present, was the co-detection of fentanyl (8 samples). Impurities are common (papaverine, etc.) but they are excluded in analyzing co-detection in drug checking samples.

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San Francisco, CA: Phillip Coffin, MD, MIA – Heroin is rare in San Francisco, involved in just 14 of 311 acute toxicity deaths thus far in 2025. A very small proportion of people who use non-prescribed opioids use heroin. “Black tar” is the most commonly identified form of heroin on the West Coast, including in San Franciso. Black tar heroin is rarely mixed with fentanyl, fentanyl adulteration is more likely to be seen when heroin is in powder form, which is the more common form found in the Eastern US. This "separation" in the markets of heroin and fentanyl is common in Western states. While this tends to prevent fentanyl toxicity among people who use heroin, fentanyl products are more likely to be sold as stimulants, resulting in high rates of fentanyl overdose from unintentional use of the drug when intending to use a stimulant.

San Diego, CA: Annick Bórquez, PhD – Between January – June 2025, 2 out of 274 drug-related deaths have involved heroin, both deaths also involved methamphetamine. Of the 904 drug-related deaths that occurred in San Diego in 2024, 3 were identified as involving heroin. While heroin was detected, all three 3 deaths involved polydrug mixtures - in addition to heroin, 1 involved fentanyl and methamphetamine, another involved methamphetamine and the last involved morphine and diphenhydramine). The proportion of heroin-involved deaths in 2025 is higher than last year thus far, but the numbers are so small that differences cannot be determined at this time.

Based on insights from the Harm Reduction Coalition San Diego and Drug Checking LA, while it is possible to get heroin in San Diego, the vast majority choose to use fentanyl given its higher potency, lower cost and higher availability. There appears to be a "social stratification" among those who use opioids, with those who use heroin actively choosing to avoid fentanyl. They explained that a one-week interruption in heroin availability will lead to a switch to permanent fentanyl use, given the steep increase in tolerance associated with fentanyl. It becomes physically, financially and emotionally difficult to return to heroin use. The local heroin supply is also less consistent and potentially less sustainable. While some reported being able to switch back to heroin when a shift occurred in the fentanyl supply in fall 2024, resulting in decreased potency and availability of fentanyl, most reverted back to fentanyl when it became available again.

From drug checking results in San Diego between 2023-2025, 6 samples contained heroin and 155 contained fentanyl. Population-level inferences cannot be made from drug checking data, as it fully depends on participation (i.e. specific groups) and motivations for testing drugs (e.g. bad experience with their drugs).

Drug Checking LA also shared that in East Los Angeles, about half of the heroin samples contain fentanyl, typically in small quantities, and that it is still possible to find black tar heroin in Los Angeles.

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From an ongoing NIDA-funded cohort clinical trial among people who use opioids and/or methamphetamine is San Diego (MI-CHANCE), which started recruiting participants in March 2025, 53 out of 261 (20%) participants reported heroin use (by itself) in the past 6 months (versus 48% reporting fentanyl use (by itself)).

Denver, CO: Tyler Coyle, MD – Drug overdose deaths involving heroin, alone or in combination with other substances: Colorado residents, 2020-2025 (PROVISIONAL).

Year	Heroin in Combination with Other Substances	Heroin Alone
2020	171	49
2021	155	34
2022	53	9
2023	28	8
2024	25	5
2025	7	0

Source: Vital Statistics Program, Colorado Department of Public Health and Environment

Colorado Hospital Association - Discharge/Nonfatal Overdose Data:

2023 - 46 ED Visits associated with heroin overdose

2024 - 46 ED Visits associated with heroin overdose

Source: CHA

CDPHE Syndromic Surveillance Dashboard for Nonfatal Overdose ED Visits

April 2024 - April 2025: 21 drug overdose ED Visits involving heroin

Source: CDPHE Syndromic Surveillance Dashboard

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Responses from Sentinel Sites in the Midwest region of the US on heroin-related trends

Nebraska: Patrick Habecker, PhD – Heroin use remains rare in our survey cohort of people who use drugs. Since January, 5.6% respondents said they used heroin in the past 6 months, typically using it less than once a month or about once a week. When asked about local heroin availability, or availability of heroin without fentanyl, ~44% of cohort members reporting being unsure as to how or where to source heroin, while 11% said it was easy to get heroin without fentanyl, and 17% said it was easy to get heroin.

Minnesota: Nate Wright PhD, MPH – Both heroin-involved drug overdose deaths and suspected heroin-involved nonfatal overdoses, have been infrequently reported through the first half of 2025. Heroin is suspected and/or detected in a small proportion of substance-related hospital visits (>5%) based on data from our biosurveillance program.

St. Louis, MO: Heidi Israel, PhD, FNP, LCSW, CCRG – Fatal and nonfatal overdose trend data from the Missouri Department of Health and Senior Services (DHSS), heroin use is more prevalent in rural counties. State level data shows heroin overdoses and ER visits declining since 2019 (including in rural counties). Low-levels of heroin use continue to be reflected in 2024-2025 medical examiner data (which skews more urban), including low levels of heroin-involved polydrug mixtures. Treatment admission data remains low for heroin as well. While heroin prevalence has declined, methamphetamine is seen at higher levels than the previous year, when fentanyl was the most prevalent drug, including fentanyl in combination of cocaine and methamphetamine. Fentanyl is still primary drug of admission but has decreased over last few years with methamphetamine and cocaine (to a lesser degree) increasing.

Chicago, IL: Mary Mackesy-Amiti, PhD – Data from the Cook County medical examiner shows an increase in the presence of heroin in opioid-involved fatal overdoses. Fentanyl remains present in about 90% of opioid-involved overdose deaths, but heroin detection increased from 17% in Q1 of 2024 31% in Q1 of 2025.

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Ohio: Kelley Kampman, PhD – Between 2024 - Q1 of 2025, heroin was the most commonly reported substance injected among clients of the Ohio Data Collection Consortium's Syringe Services Program (SSP), ~45% of respondents reported injecting heroin in the last 30 days. Fentanyl is more common than heroin in Ohio, according to the Ohio Department of Health and the Ohio Bureau of Criminal Investigation. It is unclear if SSP clients are injecting heroin, or if they are referring to "heroin," meaning fentanyl or other opioids sold as "heroin."

Project DAWN (Deaths Avoided with Naloxone), which is operated by the Ohio Department of Health, remains the largest local harm reduction program aimed at curbing overdose deaths from heroin and other opioids, through providing free opioid overdose education and free naloxone. The program distributes supplies through numerous settings including EDs, SSPs, local health departments, street outreach and vending machines, among others.

The Ohio Substance Abuse Monitoring (OSAM) Network 2024 report highlights that respondents continue to report low availability of heroin and high availability of fentanyl. Respondents include consumers, law enforcement, and treatment providers.

Official overdose death reporting for Ohio shows that heroin accounted for only 2% of unintentional drug overdose deaths through the beginning of 2024 and is expected to remain low. Fentanyl remains the most common drug involved in unintentional drug overdoses in Ohio. 2025 reports from the Cuyahoga County Medical Examiner (Cleveland area) show that drug overdoses due to heroin remain low compared to fentanyl and cocaine.

Overall, there does not appear to be any emerging trends regarding heroin use in Ohio. Heroin availability remains low compared to methamphetamines, cocaine, and fentanyl.

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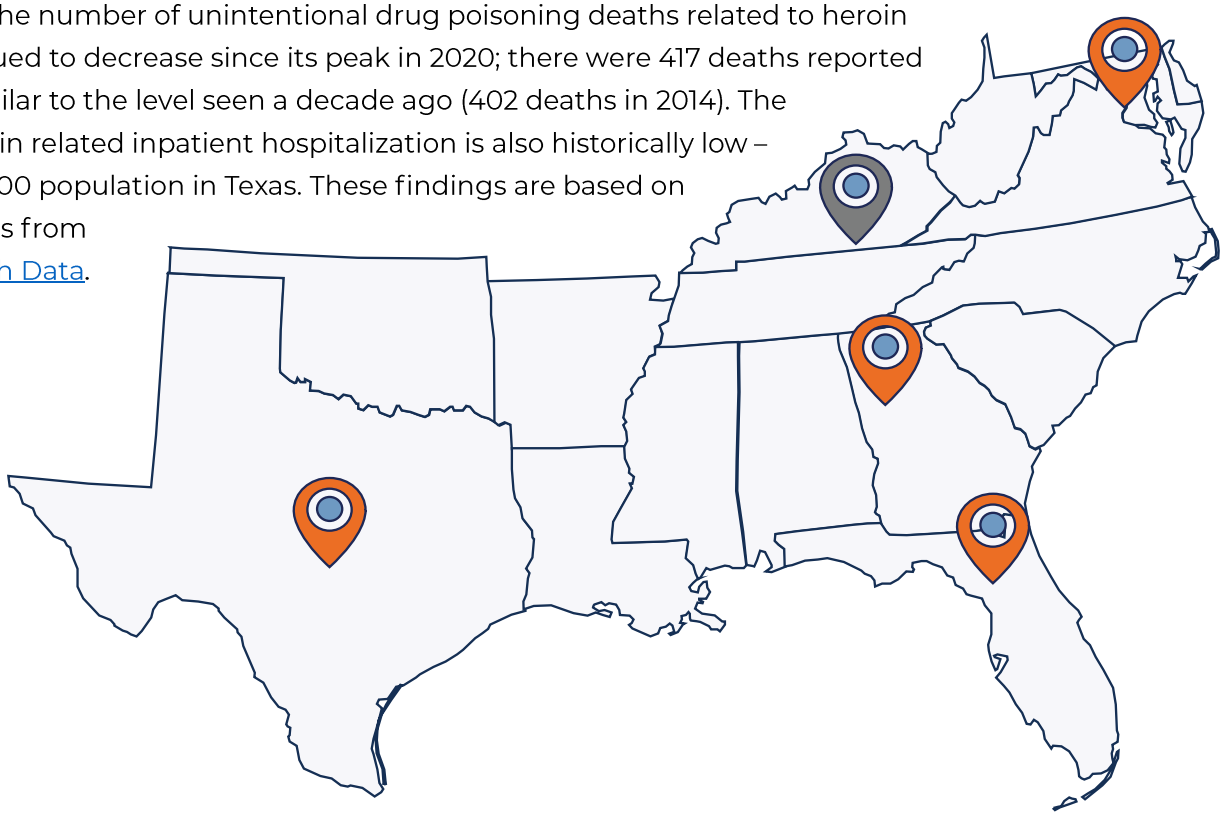
Responses from Sentinel Sites in the Southern region of the US on heroin-related trends

Texas: Dayong Lee, PhD – 2024-2025 data from the Houston Forensic Science Center (HFSC) toxicology cases, revealed no case positive for 6-acetylmorphine or morphine (two of the key metabolites of heroin). Heroin related incidents reported to Houton Fire Department represented 2-3% of the total incident calls – e.g., 567 calls out of 28,972 calls in 2023.

The Houston High Intensity Drug Trafficking Areas (HIDTA) 2026 report further highlights the low prevalence of heroin use in the Houston area, noting "heroin is used less frequently than other major illicit drug types . . . in the Houston HIDTA. Among opioids/opiates, heroin is less popular than opioid pills in most areas" (page 24). The report additionally notes that heroin was not reported by treatment providers as the primary drug for which patients are entering care, this is partially due to a significant shift from heroin to use of opioid pills (including counterfeit pills containing fentanyl) in recent years as the primary drug of choice among opioid use treatment patients. The percentage of accidental drug-related deaths involving heroin in Harris County (Houston area) also has continued to decline from 21% in 2021, to 15% in 2022, to 10% in 2023 and 7% (62 of 942) in 2024. Of these 62 deaths in Harris County involving heroin in 2024, 41 (66%) also involved fentanyl.

Statewide the number of unintentional drug poisoning deaths related to heroin also continued to decrease since its peak in 2020; there were 417 deaths reported in 2023, similar to the level seen a decade ago (402 deaths in 2014). The rate of heroin related inpatient hospitalization is also historically low – 1.1 per 100,000 population in Texas. These findings are based on the statistics from Texas Health Data.



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Kentucky: Peter Rock, MPH– No response submitted.

Atlanta, GA: Matt Myers, MS, MPA – Heroin is nearly non-existent in the local drug supply based on sized drug data. For drug seizure data from March - May 2025, there were less than 15 heroin cases, compared to 315 fentanyl cases. All of the heroin cases were unadulterated, meaning the samples tested positive for heroin only.

Florida: Bruce Goldberger, PhD – The prevalence of heroin in decedents has been trending downward since 2017 (>1,000 occurrences in 2017 to <200 occurrences in 2023). The local supply of heroin has been replaced by illicitly manufactured fentanyl.

Washington, DC: Lisa Wiederlight, MPP – According to the National Drug Strategy, between 2019-2024, national seizures of heroin fell 70% while seizures of fentanyl sharply increased by 451%. This can be partially attributed to fentanyl polydrug mixtures becoming more common. Overdose deaths attributed to fentanyl continue to far exceed those from heroin in the Washington/Baltimore High Intensity Drug Trafficking Area (HIDTA), which is potentially due to underreporting as polydrug use increases.

Responses from Sentinel Sites in the Northeastern region of the US on heroin-related trends

New York City, NY: Ellenie Tuazon, MPH – The proportion of unintentional overdose deaths in NYC involving heroin has declined. In 2020, 47% of unintentional overdose deaths involved heroin. In 2023, 29% of overdose deaths involved heroin. 2024 and 2025 data is provisional.

Philadelphia, PA: Jeanmarie Perrone, MD – Have not heard specifics about heroin in the area.

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June 2025 Sentinel Site Report: Other Trends

Responses from Sentinel Sites in the Western region of the US on other trends

Seattle, WA: Caleb Banta-Green, PhD, MPH, MSW & Jason Williams, PhD – Deaths are still mostly fentanyl, mostly polysubstance. EMS and ED visits in the county have picked up in 2025 after declining for much of 2024. While not back to peak (2023) levels, note that there are more resources in the community to divert a given overdose from either EMS or ED. Fatal overdoses hit a trough in late September/early October and have similarly returned to near 2023 (and early 2024) levels. In drug checking, we are starting to see the first influx of medetomidine.

San Francisco, CA: Phillip Coffin, MD, MIA – Acute toxicity deaths declined in 2024, but are on track for a substantial increase again in 2025.

San Diego, CA: Annick Bórquez, PhD – Medetomidine presence has been confirmed in San Diego, with one fentanyl sample sent for confirmatory testing by HRCSD to the UNC lab found positive for medetomidine. Drug Checking LA also reported identifying medetomidine in San Diego.

Read more about medetomidine here + learn more about where you can find them here

Denver, CO: Tyler Coyle, MD – Information Regarding Emerging Substances and Adulterants in the Drug Supply Associated with Overdose Deaths:

Year	Carfentanil	Nitazenes	Xylazine
2022	0	7	4
2023	<3	4	8
2024	5	4	17
2025	<3	0	0


ARTICLE
Evaluating the Sensitivity, Selectivity, and Cross-Reactivity of Lateral Flow Immunoassay Xylazine Test Strips

Source: Vital Statistics Program, Colorado Department of Public Health and Environment (N.B.: 3-4 month data lag)

Read more about xylazine test strips here + learn more about where you can find them here + read more about nitazene test strips here + learn more about where you can find them here

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Responses from Sentinel Sites in the Mid-West region of the US on other trends

St. Louis, MO: Heidi Israel, PhD, FNP, LCSW, CCRG – Rarely is there a single drug reported in the ME data and most ER overdoses involve more than one substance. We cannot ignore the effect of alcohol on top of these psychoactive substances and the CNS depression that is involved with its use that may push the individual's capacity to metabolically manage the poly substances detected.

Responses from Sentinel Sites in the Northeastern region of the US on other trends

Philadelphia, PA: Jeanmarie Perrone, MD – ED visits for withdrawal are increasing in Philadelphia due to medetomidine detection in the local fentanyl supply.

Responses from Sentinel Sites in the Southern region of the US on other trends

Florida: Bruce Goldberger, PhD – Recent reports of Iso-PV8, *N*-isopropyl butylone, MDMA, and ketamine in seized drug data.

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