

# COMMUNITY DRUG ALERT

**38 suspected overdoses/ drug poisonings and 2 suspected drug-related deaths in Waterloo Region from May 27 to May 31**

Issued: June 1, 2026

Expires: June 15, 2026

- Sanguen's Drug Checking Program found:
  - **Fentanyl with high amounts of non-opioids (medetomidine and benzodiazepines) and opioids (carfentanil and nitazenes).**
  - **Fentanyl with a new non-opioid, Nefopam.** Nefopam is a non-opioid pain-relieving drug, which can cause some sedation. It is currently not approved for use in Canada.
  - **Meth mixed with Xylazine.** If someone is very sleepy or hard to wake after using crystal meth, xylazine may mixed in. Do not use more meth — this can increase overdose risk.

There are reports of:

- **People on the nod.**
  - Stay with anyone on the nod and watch for signs of an overdose
- **Complex overdoses.**
  - **Deep sleepiness (on the nod, heavily sedated) and a very low heart rate. These are signs to go to the hospital.**
  - **Additional doses of naloxone may be needed.** Give doses every 2-3 minutes until breathing returns to normal.
  - Perform rescue breathing or give oxygen if you can.
- **Complex withdrawal. Signs to go to the hospital:**
  - Throwing up a lot
  - Chest pain
  - Going in and out of awareness
  - Very high heart rate and blood pressure

**IF SOMEONE OVERDOSES:** Call 911. Give naloxone. Stay with them until help arrives.

## STAY SAFER:

- Start low and go slow.
- Don't use drugs alone.
- Use around a trusted person and take turns so one person can help if an overdose happens.
- Use the **National Overdose Response Service (NORS) at 1-888-688-6677.**
- Test your drugs at Sanguen (226-789-1719).
- Carry naloxone and know how to use it.
- Avoid mixing drugs – use one drug at a time.

### Get a Naloxone Kit



For locations to get free naloxone and harm reduction supplies, scan the QR code, visit [regionofwaterloo.ca/harmreduction](https://regionofwaterloo.ca/harmreduction), or call 519-575-440

### Get Support

[HART Hub Waterloo Region](#) is available for anyone experiencing homelessness and housing instability who is interested in support/ change around their addiction. 519-745-4404 x213

# Drugs found through Sanguen Health Centre's Drug Checking Program

## XYLAZINE FOUND IN METH

### Xylazine

- **What is it?** A strong sedative. Not an opioid.
- **Concerns:**
  - If someone is very sleepy or hard to wake after using crystal meth, xylazine may be in it.
  - Do not use more meth even if sleepy — this can increase overdose risk.
- **Effects:** can happen minutes after taking the drug and last many hours depending on the dose and other drugs mixed in.
  - Deep sleepiness (on the nod, heavily sedated).
  - Passing out. People may be hard to wake up for a long time.
  - Slow breathing, heart rate, and blood pressure.
  - Blackouts and memory loss.
  - Confusion (disorientation) and dizziness.
  - Skin sores (wounds) that may get worse and last a long time. This can happen if Xylazine is injected, smoked, swallowed, or snorted. Get medical help if you have any sores.

## DRUGS FOUND IN FENTANYL

**People who use unregulated (street) fentanyl may be at greater risk. Opioids, tranquilizers, or benzodiazepine mixed with any of these drugs increases risk for overdose/ drug poisoning because their dangerous effects become stronger when they are together.**

### Nefopam

- **What is it?** A pain reliever. Not an opioid.
- **Effects:**
  - Drowsiness and dizziness.
  - Nausea and vomiting.
  - Excessive sweating, agitation, fast heart rate.
  - At high doses: difficulty peeing, hallucinations, confusion, seizures.

### Medetomidine

- **What is it?** [A strong sedative](#), like xylazine but much stronger. Not an opioid.
- **Effects:** Last a long time (90 minutes or several hours).
  - Deep sleepiness (on the nod, heavily sedated).
  - Passing out. People may be hard to wake up.
  - Slow breathing, heart rate, and blood pressure.
  - May cause hallucinations or confusion.
  - Dizziness, nausea, vomiting.
- **Medetomidine Withdrawal:** Can start quickly and be very serious. **Signs to go to the hospital:**
  - can't stop throwing up.
  - chest pain.
  - going in and out of awareness

### Benzodiazepine ("benzo")

- **What is it?** A strong sedative. Not an opioid.
- **Effects:**
  - Deep sleepiness (on the nod, heavily sedated).
  - Passing out. People may be hard to wake up.
  - Slow breathing, heart rate, and blood pressure.
  - Blackouts (memory loss).

## Carfentanil

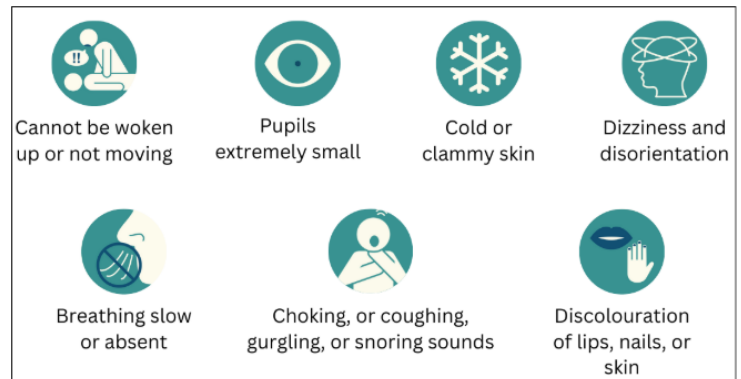
- **What is it?** A strong unregulated opioid, stronger than fentanyl.
- **Effects**
  - Deep sleepiness (on the nod, heavily sedated).
  - Passing out. People may be hard to wake up.
  - Slow breathing, heart rate, and blood pressure.
  - Very low or no pulse.

## Nitazenes

- **What is it?** A very strong unregulated opioid. Test your drugs with Nitazene test strips. A positive result could mean Nitazenes are in your drugs.
- **Effects:**
  - Deep sleepiness (on the nod, heavily sedated).
  - Passing out. People may be hard to wake up.
  - Slow breathing, heart rate, and blood pressure.
  - Very low or no pulse.

## What to do:

- Stay with anyone on the nod and watch for [signs of an overdose](#).
- Follow the [5 steps to respond to an opioid overdose](#):
  1. **Shout** their name and shake their shoulders.
  2. **Call 911** if they won't wake up or if breathing is very slow or not at all.
  3. **Give naloxone.**
    - Nitazenes are opioids. Naloxone will work on nitazenes.
    - Nefopam, Medetomidine, Benzodiazepines, and Xylazine are not opioids. Naloxone cannot stop the effects of nefopam, medetomidine, benzodiazepines and xylazine. Give naloxone because it will work on opioids that may be mixed in the drugs.
  4. Check that the person is breathing regularly. They may not wake up right away. **Perform rescue breathing or give oxygen** if you can.
  5. Additional doses of naloxone may be needed. Give another dose every 2-3 minutes until breathing is back to normal.
- If they are very sedated (sleepy) but still breathing, encourage them to keep breathing.
- Stay with them until help arrives.



Scan the QR code to [sign up](#) to get community drug alerts for Waterloo Region to your inbox.



The unregulated drug supply is highly toxic. We don't know if the drugs found by the Drug Checking Program are the same ones involved in the suspected overdoses.

Media Request Inquiries: Audrey Ready Holt, [AReadyHolt@regionofwaterloo.ca](mailto:AReadyHolt@regionofwaterloo.ca)