Welcome to today’s Insight APSAD webinar.

We’ll be starting a little after 10am (QLD time).

- Use the chat icon for all questions and comments – select All panelists and attendees.
- If you are on a computer and Zoom enters full screen mode – you can press the escape button or visit “View Options” at the top of the screen to change the layout.
- If you are experiencing other problems or require further technical assistance call Zoom on 1800 768 027 – the webinar ID is 973-118-396-68.
- A pdf version of today’s presentation will be available soon in the chat window.
- A recording of this webinar will be available on our YouTube channel in the coming weeks.
This map attempts to represent the language, social or nation groups of Aboriginal Australia. It shows only the general locations of larger groupings of people which may include clans, dialects or individual languages in a group. It used published resources from 1988-1994 and is not intended to be exact, nor the boundaries fixed. It is not suitable for native title or other land claims. David R Horton (creator), © AIATSIS, 1996. No reproduction without permission. To purchase a print version visit: www.aiatsis.ashop.com.au/

We acknowledge the Traditional Owners of the land on which this event takes place and pay respect to Elders past, present and future.
Designer Benzodiazepines in Queensland: What’s in fake Xanax?

Karen Blakey, Forensic Chemistry, Queensland Health Forensic and Scientific Services
Designer Benzodiazepines

<table>
<thead>
<tr>
<th>Drug</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phenazepam</td>
<td>1</td>
</tr>
<tr>
<td>Flubromazepam</td>
<td>1</td>
</tr>
<tr>
<td>Clonazolam</td>
<td>2</td>
</tr>
<tr>
<td>Bromazolam</td>
<td>2</td>
</tr>
<tr>
<td>Pyrazolam</td>
<td>3</td>
</tr>
<tr>
<td>Adinazolam</td>
<td>3</td>
</tr>
<tr>
<td>Bromazepam</td>
<td>6</td>
</tr>
<tr>
<td>Clonazolam</td>
<td>7</td>
</tr>
<tr>
<td>Flubromazolam</td>
<td>8</td>
</tr>
<tr>
<td>Flualprazolam</td>
<td>63</td>
</tr>
<tr>
<td>Etizolam</td>
<td>107</td>
</tr>
</tbody>
</table>

Trend Report: Q2 2020

Toxicology
Seized Drug
Designer Benzodiazepines

- Designer Benzodiazepines / “Street” Benzos are a class of NPS
- Newly emerging compounds that are not legally available or not covered by legislation
- Pharmaceutical drug candidates, active metabolites and chemical modifications*
- Small modifications to chemical structure can result in large changes in pharmacology
- The presence of benzodiazepines in seized drugs is not unusual


- NPS → Other forms such as powders, liquids and tabs/blotters
Designer Benzodiazepines

- 6 Designer Benzos have been detected in Qld seizures

Phenazepam and cannabinomimetics sold as herbal highs in New Zealand

R. A. F. Couch and H. Madhavaram*

<table>
<thead>
<tr>
<th>Year</th>
<th>Phenazepam</th>
<th>Etizolam</th>
<th>Flubromazolam</th>
<th>Flubromazepam</th>
<th>Diclazepam</th>
<th>Flualprazolam</th>
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</thead>
<tbody>
<tr>
<td>2011</td>
<td>1</td>
<td></td>
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<td></td>
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<td>2012</td>
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<td>2014</td>
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<td>2015</td>
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<td>2016</td>
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<td>2018</td>
<td>1</td>
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<td></td>
<td>3</td>
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<tr>
<td>2019</td>
<td>1</td>
<td></td>
<td></td>
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</tbody>
</table>

Diclazepam
Chloro-diazepam
Investigated in 1960s by Hoffman-LaRoche
Never marketed
Reported as NPS in 2013
Designer Benzodiazepines

- 6 Designer Benzos have been detected in Qld seizures

**Flualprazolam**

Fluoro-alprazolam.

- Investigated in 1970s
- Never marketed
- Detection in blood specimens in US in 2018

![Bar chart showing the number of seizures per year for various designer benzos from 2011 to 2019. Flualprazolam had a significant increase in detections in 2018 and 2019.](image)
Etizolam

- Lollies
  - Mar 2019
  - Brisbane
- Mylan A4 Bottles
  - Apr 19
  - Brisbane
- White Tablets
  - May 2019
  - Rockhampton
- Kalma 2 Bottles
  - Jul 2019
  - Darling Downs
- Mylan A4 Bottles
  - Sep 2019
  - Gold Coast
- Kalma 2 Bottles
  - Oct 2019
  - Brisbane
- Kalma 2 Bottles
  - 2020
  - Brisbane
Product not registered in Australia. Visually consistent with Pfizer product Xanax stated to contain 2mg alprazolam.

Drugs Identified
- Alprazolam
- Flualprazolam
- Flualprazolam + Alprazolam
- Etizolam
- Etizolam + Doxepin
- Doxepin + 5-MeO-DBT (5-Methoxy-N,N-Dibutyltryptamine)
- Paracetamol or no drugs detected

Dosage Assessment
- 2.8 – 3.4mg alprazolam
- 1.7 – 2.0mg flualprazolam
- 0.8mg flualprazolam + 0.9mg alprazolam

Legitimate Pfizer Xanax XR Stated to contain 2mg alprazolam
Seized tablets.

Product not registered in Australia.
Visually consistent with Mylan product Alprazolam stated to contain 2mg alprazolam

Seized bottles.

COUNTERFEIT

GENUINE
Drugs Identified

- Etizolam
- Alprazolam and/or Etizolam + low cyproheptadine, amantadine, promethazine
- Etizolam + Alprazolam + Irgacure 907 (MMTMP) + Cyproheptadine
- Etizolam + Flubromazolam

Dosage Assessment

- 2.4 – 2.6mg etizolam + 1.3 – 1.4mg alprazolam
- 4.2 – 5.8mg etizolam + 1.7 – 1.8mg alprazolam
- 6.8 – 8.3mg etizolam
- 4.1 – 4.3mg etizolam + 0.2mg flubromazolam

Larger tablets ~0.5 gram

Seized tablets.

Product not registered in Australia.
Visually consistent with Mylan product
Alprazolam stated to contain 2mg alprazolam

IRGACURE 907 / CACCURE 907 / MMTMP / MTMP
First seen in QLD drug market in 2016
Industrial chemical used as a photoinitiator
Structural similarities to cathinone class
~highly modified cathinone
Seen in drug market overseas

MYLAN A4
Seized tablets.

Product not registered in Australia.

Seized bottles.

Legitimate Watson Diazepam Stated to contain 10mg diazepam

**Drugs Identified**

- Etizolam

**Dosage Assessment**

- 0.7 – 0.8mg Etizolam
Drugs Identified

- Alprazolam*
- Etizolam
- No drugs detected

Dosage Assessment

- 1.6 – 4.4mg etizolam
- 1.4 – 2.0mg alprazolam

* Analytical marker to differentiate between genuine and counterfeit tablets

Visually consistent with Kalma stated to contain 2mg alprazolam

Seized tablets.
Seized bottles.
Seized bottles.
**SANDOZ ALPRAZOLAM**

**Drugs Identified**
- Etizolam

~ 450 – 500mg tablet weight
Many online tips for spotting fakes...

**Dosage Assessment**
- 2.3 – 2.6mg etizolam
Similar % etizolam as other tablets, but larger tablet

Product not registered in Australia.
Visually consistent with Sandoz Alprazolam stated to contain 2mg alprazolam

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**DAVA/PAR ALPRAZOLAM**

**Drugs Identified**
- Clonazepam + Lidocaine

only 1 tablet seized “Green Hulks”

**MISLABELLING**

White powder labelled “VAL”
Tabs labelled “Valium”
Both contained diclazepam
Summary

- Increasing prevalence of designer benzodiazepines in Queensland, in particular as counterfeit pharmaceuticals
- Counterfeit pharmaceuticals seized in (sealed) packaging resembling legitimate products
- Variation between drug identified / dosage, even within one container
- Many counterfeit pharmaceuticals have dosages significantly higher than “expected” dose
- Counterfeit “benzo” pharmaceuticals may contain drugs other than benzodiazepines
- Etizolam and flualprazolam will come under international control via the Convention of Psychotropic Substances as of November 2020.

- This data describes seizures over a period of time in Queensland
  - Drug and dosage is likely to vary over time and in different areas
References

- Andrew McAuley, The Role of Etizolam in Scottish-Related Deaths, Glasgow Caledonian University
- Q2 Trend Report Benzodiazepines, Alex J. Krotulski, Amanda L.A. Mohr, and Barry K. Logan, at the Center for Forensic Science Research and Education (CFSRE)
- EMCDDA, The misuse of benzodiazepines among high-risk opioid users in Europe, Updated 14.11.18
- World Health Organisation, Critical Review Report Flualprazolam, October 2019
What’s in Fake Xanax? Designer benzodiazepines in Forensic Toxicology specimens

Andrew Griffiths
Forensic Toxicology

Coroner

Approx. 2200 coronial cases received a year for toxicological analysis (blood, vitreous humor, urine, liver etc).

Queensland Police

Approx. 2400. Alcohol and drugs in blood of drivers cases (impaired or involved in an accident).

Drugs in oral fluid (14,000).
Toxicological analysis involved in criminal cases.
Why Benzos?

Uses
Major therapeutic uses are for the treatment of anxiety, insomnia and as a muscle relaxant.

(Side) Effects
Sedation, impaired motor coordination, dizziness, slurred speech, blurry vision, disinhibition, delirium, vertigo, mood swings, and euphoria can occur, as well as hostile or erratic behaviour in some instances (paradoxical effects).

Coadministration
Often taken with other drugs.
Why Mimic Alprazolam?

- Schedule 8 drug
- Short half-life
- Rapid onset of effects
- High potency
- Uniquely has some actions on dopamine receptors in the part of the brain responsible for behaviour, decision making, motivation and reward.
- Users find the effects of alprazolam preferable to other benzos
- Harsher withdrawal effects

Alprazolam has a high abuse liability.
Detections in Queensland
(Number of cases)

Phenazepam (1)

Nimetazepam (1)

Diclazepam (8)

Flubromazepam (2)

Etizolam (115)

Flualprazolam (23)

Flubromazolam (8)
Etizolam detections increased markedly in last two years

More potent benzos flualprazolam and flubromazolam very common in 2020

Flubromazolam always present with etizolam

Others detected
- Flubromazepam (2)
- Phenazepam (1)
- Nimetazepam (1)
Potency of newer benzodiazepines

- Alprazolam – 0.5 to 1.5 mg, up to 4mg/day in divided doses
- Etizolam – similar or slightly higher potency to alprazolam
- Flualprazolam and Diclazepam – stronger
- Flubromazolam – even more potent
- All of these usually taken with other drugs

From Zawilska & Wojcieszak
Neurotoxicology 73 (2019) 8–16
– dosage reported by users
Poly Drug Use

- **OTHER BENZODIAZEPINES**: 49.3%
- **CANNABIS**: 47.1%
- **AMPHETAMINES**: 41.2%
- **OPIOIDS**: 16.2%
- **ALCOHOL ***: 16.2%
- **COCAINE**: 13.2%
- **NO OTHER DRUGS**: 7.4%

* Some cases not analysed for alcohol if negative roadside test returned

Enhanced adverse effects
Case Studies
Impaired or motor accident involved drivers

Case 1
- Etizolam: 0.11 mg/L
- Alprazolam: 0.07 mg/L
- MDMA: 0.51 mg/L
- MDA: 0.04 mg/L
- Benzoylecgonine: 0.22 mg/L
- Paracetamol: 10 mg/L
- Tramadol: 0.01 mg/L
- THC: 0.014 mg/L
- Pregabalin: 1.5 mg/L

Case 2
- Etizolam: 0.11 mg/L
- Flubromazolam: 0.003 mg/L
- Carisoprodol: 6 mg/L
- Meprobamate: 9 mg/L
- Varenicline: <0.01 mg/L
### Case Studies

#### Coronial case (age 20)

**Rapid toxicology testing**

<table>
<thead>
<tr>
<th>Drug</th>
<th>Level (mg/kg)</th>
<th>Drug</th>
<th>Level (mg/kg)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol</td>
<td>Not Detected</td>
<td>Tramadol</td>
<td>0.06</td>
</tr>
<tr>
<td>Diazepam</td>
<td>0.3</td>
<td>O-desmethyltramadol</td>
<td>0.03</td>
</tr>
<tr>
<td>Nordiazepam</td>
<td>~0.1</td>
<td>Topiramate</td>
<td>2</td>
</tr>
<tr>
<td>Temazepam</td>
<td>&lt; 0.02</td>
<td>Venlafaxine</td>
<td>0.29</td>
</tr>
<tr>
<td>7-Aminoclonazepam</td>
<td>0.02</td>
<td>O-Desmethylvenlafaxine</td>
<td>0.86</td>
</tr>
<tr>
<td><strong>Alprazolam</strong></td>
<td><strong>0.04</strong></td>
<td><strong>Etizolam</strong></td>
<td><strong>0.03</strong></td>
</tr>
<tr>
<td>Codeine</td>
<td>0.53</td>
<td>THC</td>
<td>0.005</td>
</tr>
<tr>
<td>Paracetamol</td>
<td>18</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Case Studies

- **Coronial case (age 19).**

<table>
<thead>
<tr>
<th>Drug</th>
<th>Level (mg/kg)</th>
<th>Drug</th>
<th>Level (mg/kg)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amphetamine</td>
<td>0.6</td>
<td>Methamphetamine</td>
<td>0.01</td>
</tr>
<tr>
<td>Clonazepam</td>
<td>0.03</td>
<td>7-aminoclonazepam</td>
<td>1.8</td>
</tr>
<tr>
<td>Sertraline</td>
<td>0.11</td>
<td>Desmethylsertraline</td>
<td>0.23</td>
</tr>
<tr>
<td>Olanzapine</td>
<td>0.11</td>
<td>Boldenone</td>
<td>Detected</td>
</tr>
<tr>
<td><strong>Diclazepam</strong></td>
<td>~ 0.01</td>
<td>Lorimetazepam</td>
<td>~ 0.01</td>
</tr>
<tr>
<td>Delorazepam</td>
<td>~ 0.1</td>
<td>Lorazepam</td>
<td>0.4</td>
</tr>
<tr>
<td>Etizolam</td>
<td>0.98</td>
<td>Alcohol</td>
<td>Not detected</td>
</tr>
</tbody>
</table>
Etizolam detections


Nielsen and McAuley Drug and Alcohol Review (2020)
DOI: 10.1111/dar.13052
Flubromazolam

In Queensland

Average age of drivers = 23
Flubromazolam = 2 – 30 ng/mL
Etizolam = <10 – 2500 ng/mL

From: Rohrig et al Journal of Analytical Toxicology (2020)1–6
# Flualprazolam Cases

**Impaired or motor accident involved drivers**

**Case 3**

<table>
<thead>
<tr>
<th>Drug</th>
<th>Concentration (mg/L)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flualprazolam</td>
<td>0.02</td>
</tr>
<tr>
<td>Alprazolam</td>
<td>0.01</td>
</tr>
<tr>
<td>Methylamphetamine</td>
<td>0.10</td>
</tr>
<tr>
<td>Amphetamine</td>
<td>0.01</td>
</tr>
<tr>
<td>THC</td>
<td>0.020</td>
</tr>
<tr>
<td>Buprenorphine</td>
<td>0.002</td>
</tr>
<tr>
<td>Atenolol</td>
<td>0.10</td>
</tr>
</tbody>
</table>

**Cases 4 to 8 (No other drugs detected)**

<table>
<thead>
<tr>
<th>Drug</th>
<th>Concentration (mg/L)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flualprazolam</td>
<td>Detected (first case)</td>
</tr>
<tr>
<td>Flualprazolam</td>
<td>0.06</td>
</tr>
<tr>
<td>Flualprazolam</td>
<td>0.04</td>
</tr>
<tr>
<td>Flualprazolam</td>
<td>0.03</td>
</tr>
<tr>
<td>Flualprazolam</td>
<td>0.02</td>
</tr>
</tbody>
</table>
Flualprazolam involvement in deaths

Flualprazolam in Queensland

No. Cases = 23
All in last 6 months
Mostly drivers
Concentrations 3 - 60 ng/mL

<table>
<thead>
<tr>
<th>Sample</th>
<th>Flualprazolam ng/g</th>
<th>Cause of death</th>
<th>Manner of death</th>
<th>Other relevant findings (μg/g in femoral blood, unless stated otherwise)</th>
</tr>
</thead>
<tbody>
<tr>
<td>S1</td>
<td>4.2</td>
<td>Fatal poisoning by flualprazolam, venlafaxine and pregabalin</td>
<td>Accident</td>
<td>Venlafaxine (1.3), O-desmethyl venlafaxine (0.45), pregabalin (16)</td>
</tr>
<tr>
<td>S2</td>
<td>18</td>
<td>Fatal poisoning by methadone and flualprazolam</td>
<td>Accident</td>
<td>Methadone (0.15)</td>
</tr>
<tr>
<td>S3</td>
<td>9.7</td>
<td>Fatal poisoning by alimemazine</td>
<td>Accident</td>
<td>Alimemazine (5.0), desmethyl alimemazine (1.3)</td>
</tr>
<tr>
<td>S4</td>
<td>17</td>
<td>Fatal poisoning by buprenorphine, flualprazolam and ethanol</td>
<td>Accident</td>
<td>Ethanol (0.67 % in urine, 1.33 %), buprenorphine (2.8 ng/g, 0.09 μg/ml urine)</td>
</tr>
<tr>
<td>S5</td>
<td>33</td>
<td>Ischemic cardiomyopathy caused by flualprazolam and N-ethyl-3-fluoroamphetamine intake</td>
<td>Accident</td>
<td>N-ethyl-3-fluoroamphetamine (present), 3-fluoroamphetamine (present)</td>
</tr>
<tr>
<td>S6</td>
<td>28</td>
<td>Fatal poisoning by flualprazolam, mirtazapine and venlafaxine</td>
<td>Suicide</td>
<td>Mirtazapine (0.20), desmethyl mirtazapine (0.10), venlafaxine (0.52), desmethyl venlafaxine (0.83)</td>
</tr>
<tr>
<td>S7</td>
<td>19</td>
<td>Fatal poisoning by flualprazolam</td>
<td>Accident</td>
<td>COHb (76%)</td>
</tr>
<tr>
<td>S8</td>
<td>20</td>
<td>Fatal poisoning by carbon monoxide</td>
<td>Suicide</td>
<td>-</td>
</tr>
<tr>
<td>S9</td>
<td>23</td>
<td>Bronchopneumonia</td>
<td>Natural</td>
<td>-</td>
</tr>
<tr>
<td>S10</td>
<td>3</td>
<td>Brain injury due to trauma from falling</td>
<td>Unclear</td>
<td>-</td>
</tr>
<tr>
<td>S11</td>
<td>5</td>
<td>Coronary arteriosclerosis</td>
<td>Accident</td>
<td>Morphine (0.34), 6-monoacetyl morphine (0.006), codeine (0.03), buprenorphine (2.6 ng/g, 0.19 μg/ml urine), norbuprenorphine (3.9 ng/g, 0.09 μg/ml urine), pregabalin (21)</td>
</tr>
<tr>
<td>S12</td>
<td>45</td>
<td>Fatal poisoning by heroin together with buprenorphine and pregabalin</td>
<td>Accident</td>
<td>Amphetamine (1.7), MDMA (1.7), MDA (0.08), oxycodone (0.1), morphine (0.04)</td>
</tr>
<tr>
<td>S13</td>
<td>7.8</td>
<td>Drug-related death</td>
<td>Not reported</td>
<td>Buprenorphine (0.8 ng/g, 0.09 μg/ml urine)</td>
</tr>
<tr>
<td>S14</td>
<td>20</td>
<td>Fatal poisoning by buprenorphine</td>
<td>Accident</td>
<td>Loperamide (0.06)</td>
</tr>
<tr>
<td>S15</td>
<td>16</td>
<td>Bronchopneumonia</td>
<td>Natural</td>
<td>Tramadol (8.5), O-desmethyl tramadol (0.43)</td>
</tr>
<tr>
<td>S16</td>
<td>14</td>
<td>Fatal poisoning by loperamide</td>
<td>Accidental</td>
<td>Loperamide (0.17)</td>
</tr>
<tr>
<td>S17</td>
<td>7.6</td>
<td>Fatal poisoning by loperamide</td>
<td>Unclear</td>
<td>-</td>
</tr>
<tr>
<td>S18</td>
<td>13</td>
<td>Fatal poisoning by loperamide</td>
<td>Unclear</td>
<td>-</td>
</tr>
<tr>
<td>S19</td>
<td>21</td>
<td>Fatal poisoning by flualprazolam</td>
<td>Accidental</td>
<td>-</td>
</tr>
<tr>
<td>S20</td>
<td>20</td>
<td>Myocardial infarction</td>
<td>Natural</td>
<td>Buprenorphine (0.9 ng/g, 0.04 μg/ml urine), norbuprenorphine (0.2 ng/g)</td>
</tr>
<tr>
<td>S21</td>
<td>11</td>
<td>Fatal poisoning by buprenorphine and flualprazolam</td>
<td>Accident</td>
<td>Buprenorphine (9.0 ng/g, 0.23 μg/ml urine), norbuprenorphine (0.9 ng/g, 0.19 μg/ml urine), alimemazine (31 ng/g, &gt; 1 μg/ml urine), desmethyl alimemazine (1.8)</td>
</tr>
<tr>
<td>S22</td>
<td>36</td>
<td>Fatal poisoning by buprenorphine and alimemazine</td>
<td>Accident</td>
<td>-</td>
</tr>
<tr>
<td>S23</td>
<td>5.8</td>
<td>Brain injury due to trauma from falling</td>
<td>Suicide</td>
<td>-</td>
</tr>
</tbody>
</table>

**Flualprazolam: Report of an Outbreak of a New Psychoactive Substance in Adolescents**

Adam Blumenberg, MD, MA, Adrienne Hughes, MD, Andrew Reckers, BA, Ross Ellison, BS, Roy Geron, PhD

**TABLE 1 Clinical and Laboratory Characteristics of Patients Intoxicated With Flualprazolam**

<table>
<thead>
<tr>
<th>Patient No.</th>
<th>Age</th>
<th>Sex</th>
<th>Clinical Presentation at Emergency Department</th>
<th>Urine Immunoassay for Drugs of Abuse</th>
<th>Flualprazolam Concentration (LC-QTOF/MS)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>16</td>
<td>Male</td>
<td>Lethargy and slurred speech</td>
<td>Positive for benzodiazepines and cannabinoids</td>
<td>Urine: 72.1 ng/mL</td>
</tr>
<tr>
<td>2</td>
<td>15</td>
<td>Male</td>
<td>Asymptomatic</td>
<td>Not obtained</td>
<td>Blood: 14.6 ng/mL</td>
</tr>
<tr>
<td>3</td>
<td>16</td>
<td>Male</td>
<td>CNS depression, slurred speech, and mild respiratory depression unresponsive to 0.4-mg intravenous naloxone</td>
<td>Positive for benzodiazepines</td>
<td>Urine: 19.4 ng/mL Blood: 14.6 ng/mL</td>
</tr>
<tr>
<td>4</td>
<td>16</td>
<td>Female</td>
<td>Lethargy and slurred speech</td>
<td>Positive for benzodiazepines</td>
<td>Urine: 3.0 ng/mL</td>
</tr>
<tr>
<td>5</td>
<td>14</td>
<td>Male</td>
<td>Lethargy and confusion</td>
<td>Positive for benzodiazepines</td>
<td>Not obtained</td>
</tr>
<tr>
<td>6</td>
<td>14</td>
<td>Male</td>
<td>Asymptomatic</td>
<td>Positive for benzodiazepines</td>
<td>Not obtained</td>
</tr>
</tbody>
</table>
Collaboration with Princess Alexandra Hospital and the Clinical Forensic Medicine Unit

- Collect and correlate clinical and toxicological data from hospital emergency patients displaying severe and unusual symptoms
- Analysis of biological specimens by Forensic Toxicology, monitoring for any drugs of interest with potential identification of novel psychoactive drugs
- Correlation of clinical effects with drugs identified and impact of emergency treatment
- Warnings to clinicians and the public of any new drugs identified
- Aim to enter the pilot phase in 2020
Conclusions

• Seven different illicit benzodiazepines detected in Queensland toxicology cases since 2015
• Etizolam most frequently detected and use is increasing
• More potent benzos on the rise
• Poly-drug use is common particularly other benzodiazepines
• Use by young adults seems to be prevalent
• Synthetic Benzos have been identified in all parts of Queensland
• Information sharing can help increase testing capabilities.
Thanks for joining us today!

Next Week.... **Wednesday 5th August 2020**

Empowering Strong Families and Trauma Informed Care

Leigh-Anne Pokino

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