Xylazine Wounds And People Who Inject Drugs



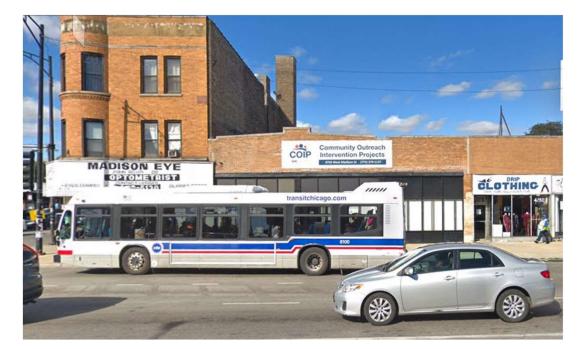






Content Development

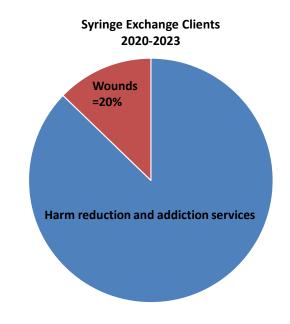
- Training developed in partnership with the Community Outreach Intervention Projects (COIP)
- Providing healthcare, rehabilitative, and harm reduction services for people who use drugs (PWUD)





Intro

- PWID are at increased risk for skin and soft tissue infections (SSTI's) as well as acute and chronic wounds
- Prevalence of chronic wounds in PWID can be as high as 20%
- Wounds are not SSTI's and do not benefit from treatment with systemic or topical antibiotics unless an infection is present
- Most wounds are chronically colonized with bacteria and benefit from debridement, careful dressing selection, and mitigation of causative factors





Substances Used for Injection

- Heroin
- Pharmaceuticals: Oxycodone, hydrocodone, hydromorphone, dextroamphetamine, xylazine, fentanyl
- Cocaine: Base (powder) and Hydrochloride salt (rock)
- Methamphetamine
- Combinations of opiates and stimulants (speedball/snowball)



Where People Inject

Anywhere there is venous access:

Upper/lower extremities

Hands, feet, digits

Neck/ external jugular

Groin/ femoral vein





Image courtesy of CATIE.CA harm reduction education service

Intro to Injection Related Wounds

" It cooked up different. Usually, it is pale yellow but this time it looked like Coca-Cola. It felt like shooting battery acid. The next day all the skin started dying off." — Wound Client



Etiology of Injection Related SSTI

- Introduction of infectious agents subcutaneously and intravenously
- Poor hygiene practices leading to inoculation with skin flora
- Contaminants within illicit substance
- Cytotoxic effects of substance injected (Xylazine)
- Sharing of injection equipment/reusing paraphernalia²







Etiology of Injection Related Wounds

- An abscess which was self treated and drained gives rise to a chronic wound
- Missed injection of heroin/fentanyl is extravasated into the subcutaneous tissues
- Acidic/cytotoxic substances destroy surrounding tissues when not diluted through intravenous injection
- Vasoconstrictive substances such as cocaine and methamphetamine are extravasated and cause local tissue hypoxia
- Many wounds have mixed etiology



Goldberg, 2023

Risk Factors

- Whether injection site was cleaned prior to use
- As the number of daily injections increases so does the incidence of SSTI and wounds
- Using multiple sites for injection
- Lower extremity injection associated with greater risk of SSTI/wounds⁹
- Injecting into wound





Wound Injection Ulceration

- When venous access becomes too difficult to obtain, PWID may resort to subcutaneous and intramuscular injecting
- PWID may also use a chronic wound for injection/drug delivery
- Healing wound beds have a robust blood supply=quick drug absorption
- Important to assess as wound injection can be a risk factor in up to half of PWID with chronic wounds



Houck & Ganti, 2019



- Xylazine (Tranq) is a central a2-adrenergic agonist
- Reduces release of norepinephrine and dopamine in the central nervous system
- Results in sedation, muscle relaxation, respiratory depression, hypotension
- First reported used as an adulterant in heroin supply within Puerto Rico early 2000's¹⁷



"anestesia de caballo"



" I have the most meticulous injection technique you have ever seen. I always have clean rigs, and never share or reuse.

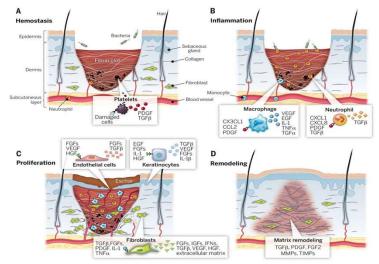
I find a vein, get a register, draw back fresh blood, and make sure the whole hit goes into the vein.

But when I remove the needle, even that little bit of residue left is enough to form a small ulcer and that's why I have all these wounds. "

- Wound Client



- a2-adrenergic receptors also found in peripheral tissues but a1 are more prevalent
- a1 agonism results in vasoconstriction
- Postulated that xylazine causes injection site tissue hypoxia and skin necrosis through local a1 agonism
- Wounds can occur independent of injection site and have been reported in those insufflating heroin



Reproduced from: Sun BK, Siprashvili Z, Khavari PA. Advances in skin grafting and treatment of cutaneous wounds. Science 2014; 346:941.





What Can be done?

- Clean injection supplies/syringes
- Decrease practice of injection (Insufflation, smoking, rectal administration of opioids)
- Xylazine test strips
- Keep a small formulary of wound care supplies (gauze, vaseline, absorptive dressings)

Get People into treatment MOUD- Buprenorphine/Methadone!





Photo from 2022 Malayala et al.

Have a Wound?

Mile Square Health Center 1220 S Wood Chicago, Illinois 60608 Substance Use Disorder Integrative Care Clinic

Access Line 312.355.5771

Buprenorphine (Suboxone) Methadone (Family Guidance) Alcohol Use Disorder Treatment











References

¹Abavare L., Abavare C. Wound Botulism Resulting from Heroin Abuse: Can You Recognize It? Journal of Emerg Nursing. 2012;38(3):301-303. doi:10.1016/j.jen.2011.01.014 ²Bruneau, J., Roy, É., Arruda, N., Zang, G., & Jutras-Aswad, D. (2012). The rising prevalence of prescription opioid injection and its association with hepatitis C incidence among street-drug users. Addiction, 107(7), 1318-1327. doi:10.1111/j.1360-0443.2012.03803.x ³Ciccarone, D., Unick, G. J., Cohen, J. K., Mars, S. G., & Rosenblum, D. (2016). Nationwide increase in hospitalizations for heroin-related soft tissue infections: Associations with structural market conditions. Drug and Alcohol Dependence, 163, 126-133, doi:10.1016/i.drugalcdep.2016.04.009 ⁴Cranendonk D.R., Lavrijsen A..P.M., Prins J.M., Wiersinga W.J., Cellulitis: Current insights into pathophysiology and clinical management. Netherlands Journal of Medicine. 2017;75(9):366-378. ⁵Dunbar N.M., Harruff R.C. Necrotizing fasciitis: Manifestations, microbiology and connection with black tar heroin. Journal Forensic Science. 2007;52(4):920-923. doi:10.1111/j.1556-4029.2007.00452.x ⁶Dunleavy K, Munro A, Roy K, et al. Association between harm reduction intervention uptake and skin and soft tissue infections among people who inject drugs. Drug Alcohol Depend. 2017;174:91-97. doi:10.1016/j.drugalcdep.2017.01.020 ⁷Fink, D. S., Lindsay, S. P., Slymen, D. J., Kral, A. H., & Bluthenthal, R. N. (2013). Abscess and self-treatment among injection drug users at four california syringe exchanges and their surrounding communities. Substance Use & Misuse, 48(7), 523-531. doi:10.3109/10826084.2013.787094 ⁸Gonzales Y., Tucker R.D, Frazee B. View from the front lines: An emergency medicine perspective on clostridial infections in injection drug users. Anaerobe. 2014;30:108-115. doi:10.1016/j.anaerobe.2014.09.005 ⁹Hope, V. D., Hickman, M., Parry, J. V., & Ncube, F. (2013;2014;). Factors associated with recent symptoms of an injection site infection or injury among people who inject drugs in three english cities. International Journal of Drug Policy, 25(2), 303-307. doi:10.1016/j.drugpo.2013.11.012 ¹⁰Goldberg, C. (n.d.). Abscess. Medpics.Ucsd.edu. Retrieved June 21, 2023, from https://medpics.ucsd.edu/index.cfm?curpage=image&course=clinImg&mode=browse&lesson=114&img=19542613-5965http://dx.doi.org/10.31487/j.SCR.2021.02.12 UNIVERSITY OF