

FENTANYL OPENING REMARKS
JULY 27, 2006

GOOD MORNING AND THANK YOU FOR THE OPPORTUNITY TO OPEN THIS FORUM.

THIS GATHERING REPRESENTS AN IMPORTANT STEP TOWARD NOT ONLY REDUCING THE DEMAND FOR A LETHAL SUBSTANCE, BUT IT IS ALSO AN ACKNOWLEDGMENT OF OUR WILLINGNESS TO WORK TOGETHER IN PURSUIT OF THAT GOAL.

WE HAVE PEOPLE HERE TODAY FROM LAW ENFORCEMENT, TREATMENT, AND PREVENTION COMMUNITIES THROUGHOUT THE COUNTRY AND BASED ON WHAT WE'VE SINCE MID-APRIL, IT IS GOING TO TAKE ALL OF US TO FIGHT THIS BATTLE.

PEOPLE ARE DYING – BLACK AND WHITE, IN CITIES AND SUBURBS – WHILE DRUG DEALERS AND SUPPLIERS TURN A PROFIT.

THEY'VE DISCOVERED A NEW WAY TO MARKET THEIR PRODUCT, MUCH LIKE A SOFT DRINK MANUFACTURER MIGHT ADD A TWIST OF LEMON TO BOOST SALES.

THE PROBLEM WITH THE ADDED INGREDIENT THAT BRINGS US HERE TODAY IS THAT IT MAKES YOU STOP BREATHING.

I'D LIKE TO TAKE JUST A FEW MINUTES TO PROVIDE A REGIONAL PERSPECTIVE ON WHAT HAS BECOME A NATIONAL CRISIS.

DRUG ABUSERS ARE ALWAYS IN SEARCH OF THEIR NEXT HIGH AND THEY ARE WILLING TO RISK THEIR LIVES FOR IT.

MUCH LIKE THE COCAINE USER GRADUATES TO CRACK, THE HEROIN ADDICT ALSO WANTS SOMETHING THAT WILL GIVE HIM A BIGGER BANG AND HE IS FINDING IT, WHETHER HE REALIZES IT OR NOT, IN HEROIN SPIKED WITH FENTANYL.

THE BANG FENTANYL PROVIDES IS KILLING PEOPLE.

GETTING OUR HANDS ON ACCURATE STATISTICS IS PROBLEMATIC AND I WILL TALK MORE ABOUT THAT IN A MOMENT.

BUT WE DO KNOW THAT THE WEEK OF APRIL 14TH WAS THE TIPPING POINT FOR FENTANYL-RELATED HEROIN OVERDOSES, NOT ONLY HERE BUT IN CHICAGO AND DETROIT.

THE OUTBREAK OCCURRED ALMOST SIMULTANEOUSLY THROUGHOUT OUR AREA.

HOSPITALS IN PHILADELPHIA, SOUTH JERSEY, AND DELAWARE EXPERIENCED A DRAMATIC INCREASE IN OVERDOSE PATIENTS ARRIVING IN THEIR EMERGENCY ROOMS; AT TIMES DOZENS WITHIN THE SAME HOUR.

BY THE END OF MAY IN PHILADELPHIA, THE NUMBER OF FATAL OVERDOSES TOTALED FORTY.

AS OF JULY 20TH, THERE HAVE BEEN 60 CONFIRMED FENTANYL-RELATED DEATHS IN THE CITY OF PHILADELPHIA ALONE, WITH DOZENS MORE CASES PENDING TOXICOLOGY RESULTS.

CURRENT ESTIMATES INDICATE THAT THERE HAVE BEEN MORE THAN 170 DEATHS AND 300 NON-FATAL OVERDOSES IN PENNSYLVANIA, NEW JERSEY, AND DELAWARE SINCE APRIL.

THE SPIKE IN FENTANYL-RELATED DEATHS CORRESPONDS TO THE INCREASE IN OVERALL HEROIN ABUSE, WHICH CONTINUES TO PLAGUE BOTH URBAN AND SUBURBAN COMMUNITIES.

BUT WHAT WE FACE IN FENTANYL-LACED HEROIN IS A MORE POTENT POISON THAT HAS TRIGGERED WHAT WE

ESTIMATE IS TWO TO THREE TIMES AS MANY OVERDOSES THAN WE SEE IN A GIVEN YEAR WITH THE CONVENTIONAL ABUSE OF HEROIN.

EMERGENCY ROOM WORKERS AT VARIOUS HOSPITALS IN NEW JERSEY REPORT THAT THEY ARE SEEING FIVE TO SIX OVERDOSE CASES PER SHIFT.

SIMPLY, FENTANYL TURNS A SYRINGE INTO A LOADED GUN.

MOST OF THE FENTANYL WE ARE SEEING IS PRODUCED IN CLANDESTINE LABS.

HOWEVER, IT IS REASONABLE TO ASSUME AND EVEN ANTICIPATE THAT WE WILL BEGIN TO SEE AN INCREASE IN THE ABUSE OF PRESCRIPTION-GRADE FENTANYL, AS WE SAW WITH OXYCONTIN A FEW YEARS AGO.

FENTANYL PRESENTS A NEW CHALLENGE TO LAW ENFORCEMENT, NOT THE LEAST OF WHICH IS FINDING ITS

SOURCE.

THROUGH OUR USE OF HIDTA, WE HAVE BEEN ABLE TO EFFECTIVELY COLLECT AND ANALYZE DATA IN REAL TIME.

BEGINNING ON APRIL 19TH IN HARRISBURG, THERE WERE FIVE HEROIN OVERDOSES IN A 48-HOUR PERIOD. IT WAS ONLY WHEN THAT DATA WAS FUNNELED THROUGH HIDTA, WHICH IN TURN CONTACTED OTHER JURISDICTIONS THAT ALSO REPORTED A SPIKE, THAT WERE ABLE TO START GATHERING CRITICAL INFORMATION.

THE INFORMATION SHARING AND COLLABORATION AMONG LAW ENFORCEMENT IS BETTER, PERHAPS THAN IT HAS EVER BEEN IN OUR REGION.

AND THE FACT THAT WE ARE HERE TODAY SPEAKS TO OUR ABILITY AND DESIRE TO WORK TOGETHER ON THIS ISSUE.

BUT THIS CRISIS WILL NOT BE SOLVED BY LAW ENFORCEMENT ALONE.

THE SECOND SOMEONE COLLAPSES FROM AN OVERDOSE,
VITAL INFORMATION IS BEING GENERATED.

HOW THAT INFORMATION IS GATHERED, PROCESSED,
ANALYZED, AND EVENTUALLY ACTED ON MUST BE A TEAM
EFFORT.

INFORMATION IS COMING FROM A VARIETY OF SOURCES –
HOSPITALS, TREATMENT FACILITIES, MEDICAL EXAMINERS, –
AND WE NEED TO LOOK FOR NEW AND MORE EFFICIENT WAYS
TO EXPEDITE THE SHARING OF THAT DATA SO WE CAN
ANALYZE IT, GET IT TO D.E.A., AND LET THEM LEAD THE
INVESTIGATIONS.

THE ABILITY OF THE ENFORCEMENT, TREATMENT, AND
PREVENTION COMMUNITIES TO WORK IN CONCERT
IS WHAT WILL ULTIMATELY DETERMINE HOW EFFECTIVE WE
ARE IN RESPONDING TO THIS PROBLEM.

A LITTLE MORE THAN A MONTH AGO, WE HELD A HIDTA

MEETING AND TALKED ABOUT IDENTIFYING WAYS THAT WE CAN USE REGIONAL INTELLIGENCE GATHERING TO TRACK THESE CASES BACK TO THE DEALERS AND SUPPLIERS.

THANKS TO MANY OF THE PEOPLE IN THIS ROOM, WE ARE MAKING PROGRESS.

BUT THE LAW ENFORCEMENT RESPONSE MUST BE PART OF A BROADER STRATEGY TO ADDRESS THIS PUBLIC HEALTH THREAT.

FOLLOWING THAT HIRTA MEETING LAST MONTH, WE HELD A PRESS CONFERENCE, WHICH WAS DESIGNED TO SERVE AS A WARNING TO POTENTIAL USERS THAT THE BEST WAY TO AVOID THE RISKS ASSOCIATED WITH FENTANYL IS TO RESIST THE INITIAL USE OF HEROIN AND OTHER CONTROLLED SUBSTANCES.

DELIVERING THAT MESSAGE IS AN ONGOING CHALLENGE.

A RECENT ARTICLE IN THE PHILADELPHIA INQUIRER QUOTED AN ANONYMOUS HEROIN ABUSER WHO SAID, AND I'M PARAPHRASING, "DOPE ISN'T WHAT IT USED TO BE. PEOPLE ARE TRYING TO FIND THE FENTANYL BECAUSE IT MESSES YOU UP."

THIS IS WHAT WE ARE UP AGAINST AND IF WE ARE GOING TO HAVE ANY HOPE OF SAVING THAT YOUNG MAN'S LIFE, WE MUST RESPOND TO THE CALL – A CALL TO UNPRECEDENTED COOPERATION AND PARTICIPATION.

THERE IS NO ALTERNATIVE BECAUSE ULTIMATELY, FAILURE WILL BE MEASURED NOT BY INVESTIGATORS OR EVEN HEALTHCARE PROVIDERS BUT BY MEDICAL EXAMINERS.

I WANT TO THANK ALL OF AGAIN FOR THE OPPORTUNITY TO BE WITH YOU TODAY AND I HOPE WE LEAVE HERE WITH THE CONFIDENCE THAT WE CAN WORK TOGETHER AND MAKE AN IMPACT.