

Xylazine (“Tranq”) is in Indiana

What you need to know



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Xylazine is being mixed with street drugs and users may not be aware.

Xylazine is not an opioid. It is a very strong sedative used in veterinary medicine that is **not approved for human use**. (Opioids are a group of drugs that include heroin and prescription medications like oxycodone, morphine, fentanyl, and methadone).

Xylazine is being added to street drugs and is **often found in combination with fentanyl** (a powerful synthetic opioid). It has increasingly been detected in overdose deaths.

Xylazine may be added to street drugs to extend the effects of fentanyl. Not everyone who uses fentanyl is intentionally seeking out xylazine. In some cases, people are not aware that xylazine is in the drugs they are buying and using.

The main effect of xylazine is heavy sedation, so the person who has overdosed will likely be unresponsive. When xylazine is found in combination with fentanyl, the signs and symptoms can include blue/grayish skin, slowed breathing, and slowed heart rate.

Naloxone, also known as Narcan, will not reverse a xylazine overdose. However, because xylazine is almost always found in combination with opioids, including fentanyl, **naloxone should still be administered whenever an opioid overdose is suspected**.

Xylazine is associated with severe wounds that spread and worsen quickly. The wounds occur regardless of how people use: smoking, snorting, or injecting. People should seek urgent medical attention if they exhibit extreme pain, fever, chills, if the wound turns black, if the wound has a foul odor, or if they experience bone/tissue tenderness.



People who use xylazine heavily and frequently are at risk of withdrawal. Xylazine withdrawal is often marked by irritability, anxiety, and uneasiness.

How do you know if you used xylazine? People report losing track of large amounts of time and not remembering what happened to them. Community members say seeing someone on “tranq” is like seeing someone walk around like a zombie. People who regularly use opioids report being unable to work or stay awake when using xylazine, even passing out before they are in a safe space.

Aarons’ Law protects individuals who assist in drug-related overdose emergencies. [Learn more.](#)

Naloxone Administration Steps

1. Get Their Attention

Firmly rub your knuckles up and down the middle of the person's chest. Check to see if the person is breathing and has a pulse. If a person doesn't arouse from stimulation, then...



2. Call 9-1-1

Tell them your location and the person's symptoms.



3. Give Naloxone (Narcan)

If the person is not breathing, give naloxone.

- Remove device from the package.
- Place tip of nozzle in their nostril until your finger touches the bottom of the person's nose.
- Press the plunger firmly to release the dose into the nose.
- Give a second dose if breathing is not restored within 2-3 minutes.



4. Support Breathing

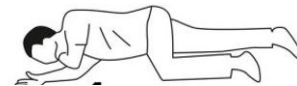
Provide rescue breathing until the person is breathing on their own (at least 10-12 breaths per minute).

- Lay the person on their back.
- Tilt the chin back. Clear airway.
- Pinch the person's nose closed and cover their mouth with your mouth.
- Blow 2 regular breaths, then give 1 breath every 5 seconds.
- Do chest compressions if you are trained in CPR.



5. Recovery Position

Roll the person on their side with hand supporting head and bench knee supporting their body from rolling over.



6. Care For The Person

Stay with the person until medical help arrives. If the person is unable to move on their own, rotate them to the opposite side in the recovery position every hour and keep their skin as clean as possible.



For additional information on drug overdose:

<https://www.in.gov/health/overdose-prevention/>