



The Sharps Shooter

August 23

TRIBAL MEDICINE

The Rise And Rise Of Ibogaine

"Annihilation"

Fentanyl Warning From The
Australian Federal Police
Association

Scotland's
Overdose Crisis

International
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Awareness Day



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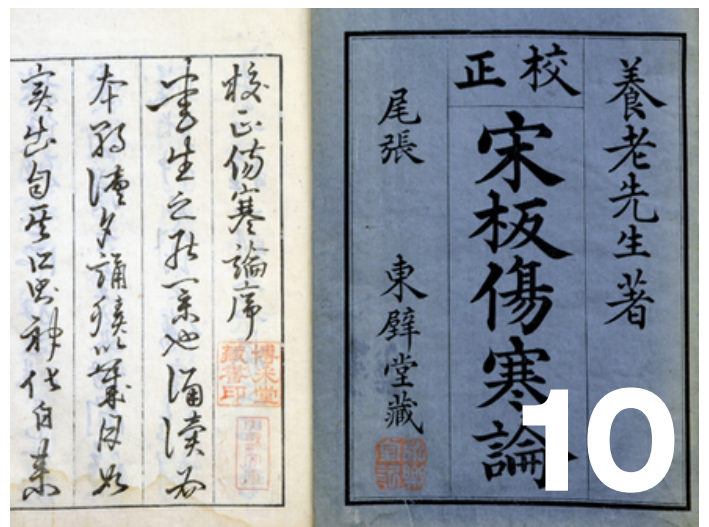
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Head of AFPA issues fentanyl warning

Padz Mahone

The head of the Australian Federal Police Association, Alex Caruana, has issued a blunt warning about fentanyl, stating that the drug could “annihilate Australian communities”.

In recent years, fentanyl has been increasingly linked to overdose deaths globally, and particularly in North America and Canada, where it has decimated drug-using communities.

Currently in the US, the National Center for Health Statistics estimates that more than 1,500 people per week die from taking some type of opioid, while The Centers for Disease Control and Prevention (CDC) report that over two thirds, 68%, of the nearly 110,000 drug overdose deaths in the United States in 2022, involved synthetic opioids, mainly fentanyl and fentanyl analogues.

Xylazine, a nonopioid sedative commonly known as “Tranq”, has been increasingly detected in fentanyl in the U.S, significantly increasing the risk of overdose.

The strength of fentanyl means multiple doses of naloxone may be needed to reverse an overdose, and to date, no antidote to Xylazine overdose has been identified.

The combination, known as “Tranq-Dope” has been detected in almost every American state, and accounts for a quarter of all fentanyl powder seized by the United States Drug Enforcement Administration (DEA).

In Australia, while far too many people die of drug overdose, mainly opioids, fentanyl has not been the killer it has been overseas, so far.

In the last four years, the Australian Federal Police has prevented 29 kilograms of fentanyl entering the drug supply. Increasing access to naloxone, (two) Supervised Injecting Rooms, and Opioid Substitution Therapy have helped to stall what many think is the inevitable growth of fentanyl use among people who use drugs in Australia, whether deliberate, or accidental use.

However, Caruana, says the threat of fentanyl is very real, “While 30kg doesn’t seem like a lot, that’s a lot of lethal doses out there that could have killed a lot of Australians,” he says. “If it was made in a backyard or a shoddy shed, that figure of lethal doses is likely to increase significantly.”



AFPA President Alex Caruana

‘It’s well known that when fentanyl powder becomes airborne, people react to it differently, Caruana explains. ‘You might only need to inhale a very small amount, for it to be lethal for you.’

Accidental fentanyl use is a growing concern among drug researchers and people who use drugs.

In 2021, Victorian Coroner Paresa Spanos called for the urgent implementation drug-checking services, following separate incidents that resulted in the deaths of five men who believed they were taking MDMA and/or magic mushrooms. In fact, what they had taken was a combination of two highly potent 'novel psychoactive substances' (NPS) – 25C-NBOMe and 4-Fluoroamphetamine (4-FA).

The Coroner Spanos' call is supported by the Royal Australian College of General Practitioners (RACGP).

An RACGP spokesperson, Dr Hester Wilson says, 'People using drugs, particularly opioid drugs such as heroin, are flying blind and risking their lives every day because no one can tell them whether what they are taking contains fentanyl.'

Dr Wilson warns, "If it does contain fentanyl, two milligrams can be lethal depending on the person's body size.'

There is little doubt among those who work with people who use drugs, that in coming years, fentanyl will factor in the Australian drug supply in a far bigger way than it has until now.

Whether we're ready for it or not is yet to be seen. Yet we must act now, or the tragic scenes in Philadelphia.



Many people who use fentanyl in the US have transitioned from injecting to smoking the drug

WHAT IS FENTANYL?

Fentanyl is a very strong narcotic pain medication that is prescribed for severe, disabling pain and pain after surgery. Fentanyl acts on the brain and central nervous system like other opioids such as morphine and heroin.

Fentanyl is about 100 times stronger than morphine and there is a small margin between the therapeutic dose and toxic dose. Therefore it is very easy to overdose on this drug.

Fentanyl acts very quickly inside the body and this fast action can cause you to stop breathing much quicker than other drugs and therefore has a much greater chance of overdose.

Some slang names for fentanyl are china girl, china white, dance fever, goodfella, murder 8, TNT and tango and cash.

HOW IS FENTANYL USED?

Prescribed fentanyl can be administered in many ways. In Australia, the most common form of fentanyl is prescribed as a patch which is applied to the skin. Other forms of fentanyl include lozenges and injections.

FENTANYL RELATED EMERGENCY

Always phone 000 (triple zero) for an ambulance and tell the operator that the person has overdosed (the police will usually not come unless the person dies or becomes violent). You should also:

- If the person is unconscious, put them on their side, in the recovery position;
- Stay with the person;
- Try not to panic;
- Check their breathing, clear their airway;

- Do mouth-to-mouth resuscitation if they stop breathing.
- Administer naloxone (Nyxoid®, Prenoxad®) if available and you have been instructed in how to use it. (You can get more information from your doctor or pharmacist.)

In the event of an overdose it is important that the patch be removed, if still on the skin.

Source: NSW Department Of Health

A Needle and Syringe Program (NSP or the exchange) worker can give you information, help you find services and make appointments for you.

To find a Needle and Syringe Program near you, search 'needle syringe program (and your locality)'.

The Australian Injecting and Illicit Drug Users League (AIVL) representing state and territory peer-based services, and can help you find support near you: <https://aivl.org.au/>

This psychoactive plant could save lives

Iboga plants smuggled out of Gabon provide most of the world's ibogaine, a drug that can help heal trauma and addiction. As the plant enters fair trade, officials hope regulation ensures equity and sustainability.

RACHEL NUWER

People in Gabon have used the psychoactive plant iboga for thousands of years—to evoke for ancestors and spirits, see themselves in past lives, and tap into their subconscious for personal growth and revelation.

Iboga creates a waking dream-like state in which people may encounter their ancestors or see themselves in past lives. They may be shown core truths about who they are or be visited by spirits.

In February, Lee White, Gabon's environment minister, issued an authorization making it legal to export iboga from Gabon, as well as the first psychoactive material to be traded under the [Nagoya Protocol](#), a supplementary agreement to the Convention on Biological Diversity that came into force in 2014.

The protocol aims to prevent cultural and natural exploitation by establishing benefits-sharing for the people and places from which genetic resources originate.

If all goes well, this will be the first of many harvests that make up a new fair trade iboga industry built on principles of equity, reciprocity, and sustainability. “At the same time addicts are healing themselves in the West, they will be supporting communities in Gabon,” says Yann Guignon, the French and Gabonese founder and co-director of [Blessings of the Forest](#), a nonprofit that's leading the fair trade iboga effort.

Ibogaine is sought increasingly outside Gabon for treating post-traumatic stress disorder, especially [among combat veterans](#). Meanwhile, scientists are still trying to understand how ibogaine helps people with substance use disorders break their addictions and skip the painful withdrawal process. If ibogaine does prevent relapses, it “may prove to be truly transformative for addiction medicine,” says Deborah Mash, an emeritus professor at the University of Miami and CEO of [DemeRx](#), a company working toward FDA approval of ibogaine.

But behind the mounting stories of lives changed and saved lurks an uncomfortable truth: Most iboga and ibogaine used by clinics around the world originates from plants poached from Gabon's forests and smuggled out of Cameroon.

“We know that iboga leaves Gabon to be sold on the internet,” says Natacha Nssi Bengone, a deputy director general at Gabon's Ministry of Waters and Forests, the Sea, and the Environment. “This is done without agreement from Gabon.”

According to Max Ondo, head of the social department at Conservation Justice, a non-profit group focused on ending illegal wildlife trade in Gabon, Cameroonians are the main iboga traffickers.

They buy an iboga tree for “something like \$16,” Ondo says, and back in Cameroon, they sell the roots “for more online to Europeans or Americans.”

While ibogaine “does save lives,” says Kirran Ahmad, a psychedelic research clinician at Imperial College London who’s in charge of ensuring mutual benefit between Gabon and the West at Blessings of the Forest, what’s usually missing from the Western experience of the drug is the “narrative of what’s happening in Gabon. Gabon is where slaves were extracted from, and to me, this is another extractive process that’s going on with iboga.”

What hangs in the balance, according to Denis Massande, president of the Association for the Development of the Culture of the Pygmy Peoples of Gabon, are the rights of Gabon’s Indigenous communities and the future of a key piece of cultural and ecological heritage.

“We’ve never refused to share iboga with other people,” Massande says. “But now that this commerce of iboga is known across the world, if there is no regulation put in place, iboga will disappear.”



A Gabonese man dances in a Bwiti ceremony in Libreville PHOTOGRAPH BY STEEVE JORDAN, AFP/GETTY IMAGES

The new fair trade iboga program is meant to address this problem by offering a legal, sustainable alternative. The effort is not without critics, however, and it’s yet to be seen whether practitioners and clinics abroad will support the program by choosing fair trade iboga rather than continuing to buy cheaper, most likely poached product online.

Nature’s pharmacopeia

Archaeological evidence from traces of charcoal discovered in a cave in Gabon indicates that Indigenous people there have been using iboga for at least 2,000 years. Legend has it that somewhere along the way, Babongo Pygmies stumbled upon iboga’s psychoactive effects after observing animals consuming the plant. Pygmies shared what they learned with Bantu people, who make up the majority of Gabon’s population today.



A “banana ceremony,” also called Maminengobe ceremony, in the Missoko-Ngonde ritual in Mandilou village, Gabon. The Missoko- Ngonde ritual is from south Gabon. Misso means eyes, and Ngonde means moon. In the banana ceremony, iboga is combined with plantain banana, honey, and clay, among other ingredients, to accelerate the iboga experience. During the ceremony, participants eat a banana in a few minutes while intense music, made with a mouth-bow called “Mongongo,” percussion, and other instruments are played. | Photo by Laurent Sazy

In the West, French and Swiss pharmacologists isolated ibogaine from iboga roots in 1901, and soon, pharmacies in France were marketing ibogaine tablets for treating a range of maladies and for assisting with “greater than normal physical or mental efforts by healthy individuals.” In the 1960s, a handful of psychiatrists in Chile and the U.S. began using ibogaine as a therapeutic agent, and the drug’s ability to quash addiction came to light a year later when Howard Lotsof, a New York City native, found that it relieved him of his desire to use heroin, without any symptoms of withdrawal.

The U.S. banned all use and virtually all study of ibogaine in 1970 under the newly created Controlled Substances Act, and a number of other countries have bans, especially in Europe. In South Africa, New Zealand, and Brazil’s São Paulo state, ibogaine is a prescription medication; in most other places, it falls into a legal grey zone—not explicitly approved for medical use but not expressly forbidden, either.

The patchwork of global legislation has led to an explosion of ibogaine-related medical tourism, with 80 to 100 iboga providers—primarily in Mexico, Brazil, Costa Rica, Colombia, and South Africa—serving mostly North Americans and Europeans who often pay \$5,000 to \$15,000 for a single therapeutic session.

Estimates of the number of people outside Gabon who have tried ibogaine since the 1960s vary from 10,000 to 40,000, but it’s estimated that this figure has skyrocketed massively since then.

Indeed, within days of joining an ibogaine-themed Facebook group, a user messaged me offering “top quality iboga products” for \$800 per half-pound. I could use the iboga, the user said, to treat “all type[s] of addiction, healing, depression, stress and psychological issues,” as well as for “spiritual sacrament.” “My iboga comes from Gabon,” the user added, trying to clinch the sale.



Delphine Minko nee Akoumanlo, a Bwiti master of ceremonies

PHOTOGRAPH BY RACHEL NUWER



Fang ritual initiation with two girls in Libreville. After ingesting iboga, the girls lay down outside the temple with a Meylan leaf close to their head, intended to give visions. | Photo by Laurent Sazy



Kit Chapman

How traditional remedies become lifesaving drugs

In 1967, the People's Liberation Army of China began a top-secret program to support soldiers fighting in the Vietnam war. The North Vietnamese troops were jungle fighters and were losing thousands of troops to malaria, a mosquito-borne parasite that had become resistant to most drugs. The Chinese programme, code named Project 523, aimed to find a cure.

At first, the mission was unsuccessful, screening more than 240,000 compounds to try to find a cure. Then, one of the investigators, the chemist Tu Youyou, decided to look at old Chinese folk remedies. In a book from 340 AD, she found a story about an old folk remedy containing the plant *Artemisia annua* – known as qinghao – used for 'intermittent fevers', one of the symptoms of malaria. Using her chemical expertise, Youyou realised the recipe was wrong – boiling the herb would destroy the active ingredient – but it set her on the right path. In 1979, she published her results, revealing a new antimalarial drug to the world: artemisinin.

Medicinal plants have been used around the world for centuries and continue to be used today; there are around 26,000 plant species with a documented medical use and some cultures rely on them heavily. In more conventional medicine, it's estimated that somewhere between 40% and 70% of all medicines in use today come from traditional or folk remedies, says Colin Wright, a researcher specialising in pharmacognosy (medicines from plants) at the University of Bradford. It all depends, he says, on what you mean by 'come from'. 'Some drugs extracted directly from plants have been used traditionally. Good examples include morphine and codeine from the opium poppy, quinine from Cinchona bark and galantamine, from daffodils and snowdrops.' But even more stem indirectly from modifying these so-called natural products.

Prize-winning science

'Artemisinin could be a good example here,' Colin says. 'Initially, an extract of the plant was found to be active against malaria in mice and this led to isolation [of the compound] in China. For political reasons, it took some time before that information became available in the West – not helped by the fact that Western scientists did not believe Chinese scientists could have discovered a potent antimalarial drug!' The Americans confirmed the Chinese work was genuine and that artemisinin was a powerful weapon in the fight against one of the deadliest diseases in history.

Scotland's Rocketing Drug Deaths

Helen McArdle

Soaring drug deaths in Scotland have emerged as one of the country's starkest tragedies and biggest public health controversies over the past decade.

What's happened to drug deaths?

Between 1996 and 2013, there was a steady rise in yearly drug misuse deaths in Scotland from 244 to 527. This accelerated dramatically over the past decade, however, reaching a peak of 1,339 in 2020. In 2021 – the most recent year for which statistics are available – the death toll dipped very slightly, to 1,330.

How does Scotland compare to UK and internationally?

In 2020, Scotland had a drug misuse death rate in of 245 per million people compared to 50 per million in England, 47 per million in Wales, and 96 per million in Northern Ireland.

In 2020, Scotland's drug death rate was by far the highest in Europe: 327 per million compared to 85 per million in Norway, the second highest.

Globally, Scotland was second only to the United States, which recorded 277 drug deaths per million people (all age groups) in 2020.

What drugs are implicated?

In 2021, 84% of drug misuse deaths involved opiates or opioids (such as heroin, morphine and methadone).

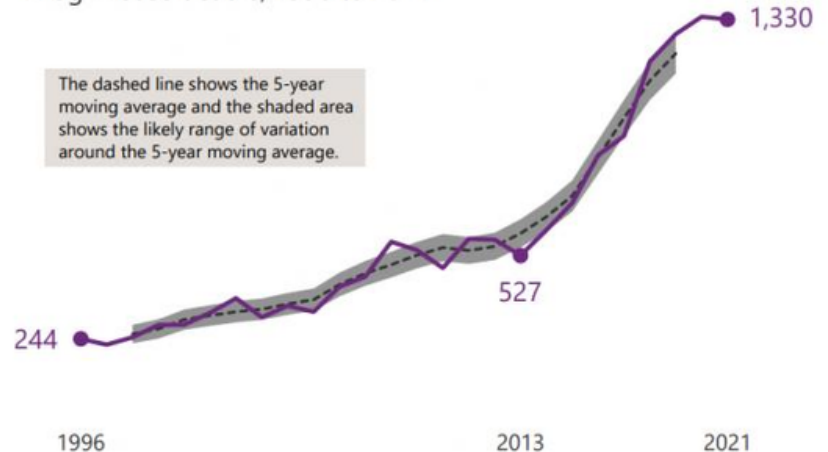
So-called "street benzos" (illegal supplies of benzodiazepines such as diazepam or etizolam) were also a growing problem. In 2021, they were involved in 918 drug deaths compared to 191 in 2015.

More recently regulators have been flagging concerns over the growing trade in ultra-strong synthetic opioids, called nitazenes.

In January, Public Health Scotland warned that the drugs – sometimes being missold in the form of counterfeit oxycodone tablets – "pose a substantial risk of overdose, hospitalisation and death".

Previously almost all heroin consumed in Europe came from Afghanistan, but a Taliban-imposed ban on poppy growing has also sparked fears that the market will be flooded with fentanyl instead – a synthetic opioid which is roughly 50 times stronger than natural heroin.

Drug misuse deaths, 1996 to 2021



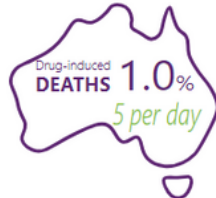
Overdose and Other Drug-Induced Deaths in Australia, 2021

This represents the latest Australia-wide data available

Data are from the Cause of Death Unit Record File (COD URF) collated by the Australian Bureau of Statistics (ABS). **The ABS undertakes a revision process for coroner-certified deaths over a 3-year period. Accordingly, data for 2020 and 2021 are classified as 'revised' and 'preliminary revised' respectively but are not final and will be subject to revision.**



Preliminary estimates indicate that there were 1,788 drug-induced deaths in 2021 (excluding deaths caused by alcohol and tobacco).



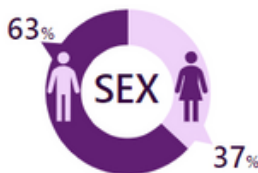
There were five drug-induced deaths per day among Australians, which is 1.0% of all registered deaths in Australia in 2021.



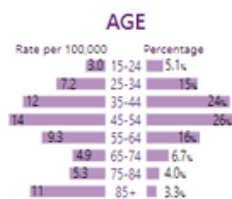
The national preliminary revised rate of drug-induced deaths in 2021 was lower than the revised rate in 2020; these rates are likely to further increase with data revisions.



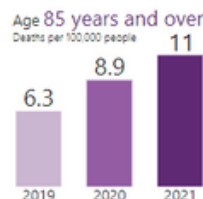
The 2020 and 2021 quarterly rates were similar to or lower than the corresponding 2019 estimates.



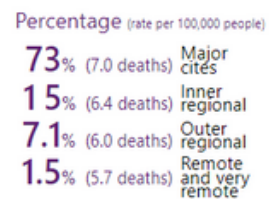
More than three in five drug-induced deaths occurred among males.



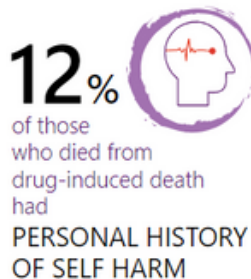
Overdose and other drug-induced deaths were most common among 45-54 and 35-44 year olds.



The 85 and over age group was the only age group where both 2020 and 2021 estimated rates were higher than the 2019 rate; these rates are likely to further increase with data revisions.



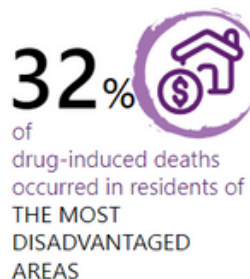
The majority of deaths occurred in major cities however the rate of deaths was similar in major cities and inner regional areas.



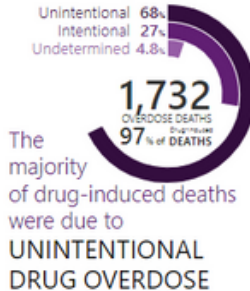
12% of those who died from drug-induced death had PERSONAL HISTORY OF SELF HARM



76% of all drug-induced deaths occurred at HOME



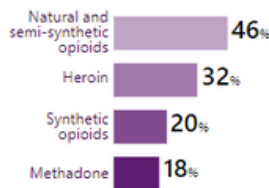
32% of drug-induced deaths occurred in residents of THE MOST DISADVANTAGED AREAS



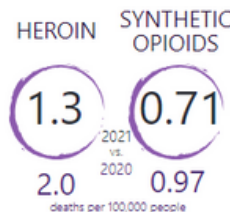
The majority of drug-induced deaths were due to UNINTENTIONAL DRUG OVERDOSE

- 58% Opioids
- 54% Antiepileptic, sedative-hypnotic and anti-parkinsonism
- 32% Antidepressants
- 26% Amphetamine-type stimulants
- 21% Antipsychotics and neuroleptics
- 16% Alcohol

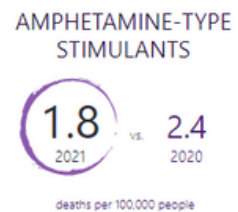
Opioids were the most commonly identified substances involved in drug overdose deaths.



Natural and semi-synthetic opioids (e.g., morphine, oxycodone) was the most commonly identified opioid type in opioid overdose deaths.



Estimated rate of overdose deaths involving opioids in 2021 was lower compared to 2020, which was particularly evident for deaths involving heroin and synthetic opioids.



The rate of drug overdose deaths involving amphetamine-type stimulants was lower in 2021 compared to the peak recorded in 2020.

AUGUST 31

INTERNATIONAL OVERDOSE AWARENESS DAY



END OVERDOSE

International Overdose Awareness Day was initiated in 2001 by Sally J Finn at The Salvation Army in St Kilda, Melbourne.

Since 2001, many community members as well as government and non-government organisations have held events to raise awareness and commemorate those who have been lost to drug overdose.

International Overdose Awareness Day is the world's largest annual campaign to end overdose, remember without stigma those who have died and acknowledge the grief of the family and friends left behind.

The campaign raises awareness of overdose, which is one of the world's worst public health crises, and stimulates action and discussion about evidence-based overdose prevention and drug policy.

The campaign also acknowledges the profound grief felt by families and friends whose loved ones have died or suffered permanent injury from a drug overdose.

International Overdose Awareness Day spreads the message about the tragedy of drug overdose death and that drug overdose is preventable.

In 2022, There were 810 registered events in 39 countries.

Events included: candlelight vigils; mass public demonstrations; distribution of Narcan and fentanyl test strips; even water balloon fights.

Participants in 2022 included friends and family members of people touched by overdose; organisations in: Bangladesh, South Africa and Zimbabwe; governments in the US, Canada, India, Australia, New Zealand and the UK.

IF YOU ARE LOOKING FOR AN EVENT, HOLDING AN EVENT, OR WANT MORE INFORMATION:

WWW.OVERDOSEDAY.COM

THIS IS MORE
IMPORTANT
THAN EVER

#iOAO2023

 International Overdose
Awareness Day
31 August

Help end overdose today

TIME TO
REMEMBER.
TIME TO **ACT.**

31 AUGUST
INTERNATIONAL
OVERDOSE
AWARENESS DAY



**International Overdose
Awareness Day**

31 August