

NEW MEXICO HEALTH ALERT NETWORK (HAN) ALERT

Emergence of Medetomidine in Illicit Drug Supply: Increased risk for overdose and severe withdrawal

March 13th, 2026

Summary Messages:

- The New Mexico Department of Health (NMDOH) is alerting healthcare providers, harm reduction providers, and public safety programs about the **emergence of medetomidine in the illicit drug supply** in New Mexico.
- **Medetomidine** is a potent long-acting veterinary alpha-2-adrenergic agonist sedative (similar to xylazine) and is **not approved for human use**. While medetomidine is not associated with serious skin wounds sometimes seen with xylazine, it produces a more powerful and prolonged sedative effect.
- Medetomidine is almost always found in combination with fentanyl and may cause prolonged sedation and severe withdrawal syndrome disproportionate to opioid withdrawal alone. If naloxone is administered during a suspected overdose, breathing may be restored but the patient might remain unconscious for up to two hours post-administration, and monitoring is required.
- National CDC and New Mexico surveillance data show that overdose deaths are primarily driven by illicit synthetic opioids, primarily fentanyl, in combination with other non-opioid sedatives and stimulants rather than by prescription opioids.
- Healthcare providers should consider possible medetomidine exposure when patients with overdoses do not fully respond after naloxone administration.

What is Medetomidine?

Medetomidine is a potent long-acting veterinary alpha-2-adrenergic agonist sedative (similar to xylazine) and is not approved for human use. Unlike xylazine, it is not associated with serious wounds, but its sedative effect exceeds both the strength and duration of that associated with xylazine. In human medicine, medetomidine is most similar to dexmedetomidine (Precedex[®]) and clonidine. It has been found in combination with fentanyl and other illicit substances such as xylazine and carfentanil, and in other jurisdictions in the U.S. including Chicago, NYC and Philadelphia, where it has contributed to overdose and life-threatening withdrawal.

Medetomidine in New Mexico

Medetomidine began showing up in drug samples in New Mexico starting in September of 2025. Crime lab and drug checking data continue to show the presence of medetomidine in fentanyl samples throughout the state.

Medetomidine findings, symptoms and management

Medetomidine is pharmacologically related to xylazine but is several hundred times **more potent** and is longer acting. It can be ingested orally, inhaled, smoked, snorted, or injected intramuscularly or intravenously. People poisoned by medetomidine may demonstrate the following:

- Central nervous system depression including extreme sedation
- Bradycardia (as low as 32 beats per minute)
- Low blood pressure
- Respiratory depression, especially when taken with opioids.
- Other reported effects include muscle twitching and feeling unusually cold While naloxone doesn't reverse the clinical effects of medetomidine, it should still be administered to anyone with respiratory depression due to frequency of opioid co-exposure.

Naloxone should be administered whenever an opioid overdose is suspected. The presence of sedatives such as medetomidine, xylazine, or benzodiazepine, may prevent a patient from regaining consciousness for up to a few hours after adequate breathing has been restored. Patients should be monitored until awake and stable.

Management of medetomidine effects should include supportive care including airway, respiratory and cardiovascular support, and providers should anticipate prolonged duration of clinical effects from suspected medetomidine overdoses.

Medetomidine Withdrawal:

Medetomidine use is associated with a severe withdrawal syndrome that may require hospitalization. Signs and symptoms associated with medetomidine withdrawal include:

- Fast heartbeat (more than 100 bpm)
- High blood pressure (above 180/100)
- Heavy sweating
- Shaking or twitching
- Anxiety, restlessness, and agitation
- Nausea and uncontrollable vomiting
- Chest pain
- Waxing and waning alertness

If there is concern for end-organ injury due to hypertension, administration of a short-acting anti-hypertensive medication may be appropriate.

Consider potential medetomidine toxicity for people who present with suspected opioid overdose and who experience prolonged sedation following naloxone administration. People who do not improve after standard opioid withdrawal treatment and continue to exhibit the signs and symptoms listed above may be experiencing medetomidine withdrawal syndrome.

Overdose response for field responders:

The primary cause of respiratory depression is still the opioid. Use naloxone to restore breathing. Since medetomidine's effects are not reversed by naloxone, sedation may continue for up to two hours. Opioid and medetomidine withdrawal may follow if the patient has established tolerance.

Additional resources for providers, including withdrawal management

- **Centers for Disease Control and Prevention:** Webinar: Medetomidine | Overdose Prevention | CDC [CDC Medetomidine Webinar for Clinicians](#)
 - **New York City Department of Health and Mental Hygiene 2025 Health Advisory #12: Poisoning by Medetomidine and Bromazolam in Suspected Opioid Overdose:** [han-advisory-12-medetomidine-bromazolam.pdf](#)
 - **New York City Department of Health and Mental Hygiene 2026 Health Advisory #2: Medetomidine Withdrawal:** [han-advisory-2-medetomidine-withdrawal.pdf](#)
 - **Center for Addiction Medicine and Policy, University of Pennsylvania School of Medicine:** Medetomidine – CAMP : [Medetomidine – CAMP](#)
 - **Emergency Medicine News: Toxicology Rounds Street Drug Update: Five Key Questions about Medetomidine** [Emergency Medicine News](#)
- Philadelphia department of Public health: Health Update Responding to overdose and withdrawal involving medetomidine, June 10th, 2025:** [PDPH-HAN-SUPHR-Medetomidine-UPDATE.pdf](#)
- Centers for Disease Control and Prevention “Morbidity and Mortality Weekly Report”: [Overdoses Involving Medetomidine Mixed with Opioids — Chicago, Illinois, May 2024 | MMWR](#)
- Centers for Disease Control and Prevention “Morbidity and Mortality Weekly Report”: [Notes from the Field: Severe Medetomidine Withdrawal Syndrome in Patients Using Illegally Manufactured Opioids — Pittsburgh, Pennsylvania, October 2024–March 2025](#)

New Mexico Health Alert Network: To register for the NM Health Alert Network, please visit the following site <https://nm.readyop.com/fs/4cjZ/10b2> Please register to begin receiving important health alerts, advisories, and updates.

Please Note that our system also utilizes text messaging to notify members of important health information. Due to FCC Regulation changes that are designed to decrease the amount of unwanted spam text messages sent each year to citizens, please save **(855) 596-1810** as the “**New Mexico Health Alert Network**” default phone number for your account used for text messages on the registered mobile device(s).