Healthy People. Healthy Communities.

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

PUBLIC HEALTH ORDER No. 2023-10-25

WHEREAS, Xylazine [2(2,6-dimethyl phenylamine)-4-H-5,6-dihydro-1, 3-thiazine hydrochloride (trade and other names: Rompun, Sedazine, AnaSed)] was developed by Bayer Pharmaceuticals in 1962 and later approved by the U.S. Food and Drug Administration (FDA) in 1972 for use in veterinary medicine as a sedative and analgesic; and

WHEREAS, nationally and in South Carolina, trends in overdose patients' toxicology lab results indicate increasing Xylazine use by humans, despite there being no legitimate use for the drug by humans and it only being approved by the FDA for use in veterinary medicine, with some users intentionally consuming Xylazine in combination with drugs of abuse, such as illicit fentanyl and heroin, to strengthen those drugs' effects, while other users unintentionally consume Xylazine, unaware that it is sometimes added to illicit opioids or stimulants as an adulterant; and

WHEREAS, side effects associated with human consumption of Xylazine include dry mouth, drowsiness, hypotension, bradycardia (slow heart beat), hyperglycemia (high blood sugar), hypothermia (low body temperature), coma, respiratory depression, heart rhythm abnormalities, and potentially death; and

WHEREAS, individuals who repeatedly inject Xylazine or drug mixtures with Xylazine can develop soft tissue damage that can lead to acute and/or chronic wounds, necrotic tissue, and may result in significant debridement and even amputation, with these wounds occurring anywhere on the body, not necessarily at the site of injection; and

WHEREAS, Xylazine's presence has been reported in forensic toxicology casework since the 1980s, among drug users in Puerto Rico since the early 2000s, and in reports of increased use in Philadelphia and New York City beginning in 2006 and 2007, respectively; and

WHEREAS, the U.S. Drug Enforcement Administration (DEA) reports an increased prevalence of Xylazine beyond the Northeast markets, increasing next in the South, followed by the Midwest and then the West with DEA laboratories now showing Xylazine use in all four census regions and with the South showing the largest percent increase in forensic lab samples between 2020 and 2021; and

WHEREAS, the South Carolina Department of Health and Environmental Control's (DHEC) Division of Biostatistics also reports a 379% increase in Xylazine-involved deaths in South Carolina between 2020 and 2021 and growing, with an almost 100% increase from 2021 to 2022 and continued elevation of Xylazine-involved deaths in 2023 (based off provisional data for 2022 and 2023); and

WHEREAS, increases in the availability of Xylazine in the drug supply, profit by drug traffickers, and increases in its illicit use make Xylazine's potential for abuse substantial; and

WHEREAS, because Xylazine is not an opioid, its effects are not reversed by the opioid antagonist, naloxone, reversal agents used in veterinary medicine are not known to be safe and/or effective in humans, and the FDA recommends against their use in people; and

WHEREAS, continued increases in repeated use of Xylazine by drug users will lead to not only an increase in fatal and nonfatal overdoses but will also result in an increase in severe wounds, requiring significant medical care, which will be a functional and financial burden on the healthcare system, and the lack of approved pharmaceutical treatment for withdrawal from Xylazine makes treatment of those who repeatedly use it significantly more challenging; and

WHEREAS, DHEC is invested with all the rights and charged with all the duties pertaining to organizations of like character and is the sole advisor of the state in all questions involving the protection of public health within its limits (S.C. Code Ann. § 44-1-110); and

WHEREAS, whenever DHEC's Board of Health learns of a case of a reportable illness or health condition, an unusual cluster, or a suspicious event that it reasonably believes has the potential to cause a public health emergency, it is authorized to notify the appropriate public safety authority, tribal authorities, and federal health and public safety authorities (S.C. Code Ann. § 44-1-80(B)(1)); and

WHEREAS, DHEC shall have, upon request, full access to the medical records, tumor registries, and other special disease record systems maintained by physicians, hospitals and other health facilities as necessary to investigate the causes, character, and means of preventing the spread of a qualifying health event or public health emergency (S.C. Code Ann.§ 44-1-80(B)(3)); and

WHEREAS, DHEC may make separate orders and rules to meet any emergency not provided for by general rules and regulations, for the purpose of suppressing nuisances dangerous to the public health and communicable, contagious and infectious diseases and other danger to the public life and health (S.C. Code Ann. § 44-1-140); and

WHEREAS, the collection of information regarding the prevalence of illicit Xylazine use and the health outcomes of those individuals who have taken Xylazine, either knowingly or unknowingly, is necessary for DHEC's critical decision-making, including decisions regarding allocation of resources, messaging, and further public health action.

NOW, THEREFORE, IT IS HEREBY ORDERED, pursuant to Section 44-1-140 of the South Carolina Code of Laws, and beginning on Monday, November 27, 2023, all physicians and healthcare practitioners, all healthcare institutions, facilities and providers, all designated reporting coordinators, and all laboratories in or out of South Carolina and who test specimens from patients who reside in the state, shall report to DHEC the following:

1. Within three business days, all laboratory-confirmed Xylazine positive test results and any associated metabolites.
2. Reports should include patient name, patient date of birth, patient address, lab test facility, lab test name, specimen collection date, specimen type, accession number, test result date, lab test status, lab test name and test results. Reports should also include patient race and patient gender, if available.

Reports must be made using Electronic Lab Reporting (ELR) or the South Carolina Infectious Disease and Outbreak Network (SCIONx), accessible at https://apps.dhec.sc.gov/Health/SCIAPPS/Public/SCIONxInfo.

Facilities that are not already submitting results to DHEC via ELR or SCIONx should contact MUHELPDESK@dhec.sc.gov to inquire about ELR submission, or SCIONHELP@dhec.sc.gov to inquire about SCIONx and other reporting options.

IT IS FURTHER ORDERED, pursuant to Section 44-1-150 of the South Carolina Code of Laws, that any person or facility that violates this Order is subject to a civil penalty not to exceed one thousand dollars ($1,000.00) a day for each violation.

This Order is effective beginning on Monday, November 27, 2023, and shall remain in effect unless otherwise modified, amended, or rescinded by subsequent order.

AND IT IS SO ORDERED.

L. Brannon Traxler, MD, MPH
Director of Public Health
South Carolina Department of Health and Environmental Control

10/25/2023
Date