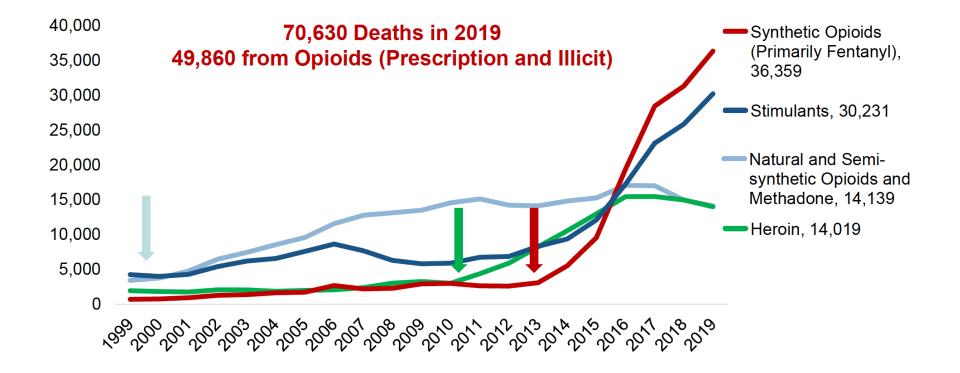
## Pharmacology of Fentanyl and Its Analogs: Implications for Treatment

## Sandra D Comer, PhD

Professor of Neurobiology Department of Psychiatry Columbia University New York State Psychiatric Institute

Public Policy Officer College on Problems of Drug Dependence

### **Evolution of Drivers of Overdose Deaths, All Ages** Analgesics $\rightarrow$ Heroin $\rightarrow$ Fentanyl $\rightarrow$ Stimulants



Source: The Multiple Cause of Death data are produced by the Division of Vital Statistics, National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention (CDC), United States Department of Health and Human Services (US DHHS).

#### (Volkow, 2021)

### **Increased Overdose Death Rates During COVID-19 Pandemic**

12-months Ending July 2020 Compared to 12-months Ending July 2019

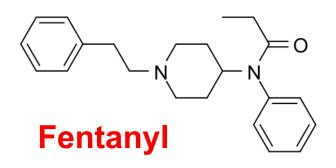
	ALL DRUGS	HEROIN	NAT & SEMI – SYNTHETIC	METHADONE	SYNTHETIC OPIOIDS	COCAINE	OTHER PSYCHO- STIMULANTS (mainly meth)
July 2019 *		14,793	12,203	2,875	33,704	15,031	14,941
March 2020*	75,687	14,145	12,349	2,837	40,756	17,465	18,033
July 2020*	86,001	14,427	13,259	3,315	50,122	19,542	20,406
July 2019-July 2020 Change	+24.2%	-2.5%	+8.7%	+15.3%	+48.7%	+30.0%	+36.6%



\*NCHS Provisional Drug Overdose Death Counts: https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm

(Volkow, 2021)

# What is fentanyl?



- Potent synthetic opioid that is currently approved by the FDA
- ✓ First used medically in the 1960's as a general anesthetic
- Now used as a transdermal patch, lollipop, dissolving tablet and nasal spray for management of chronic or breakthrough pain

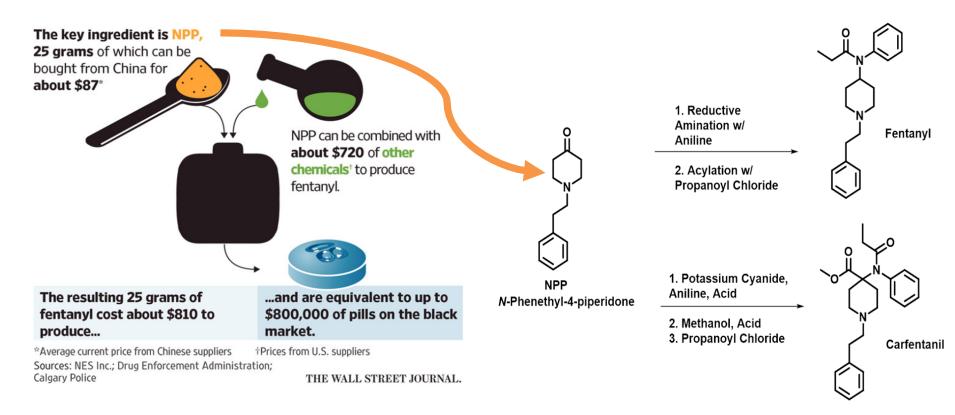
# But Pharmaceutical Fentanyl is Not Driving the Current Epidemic

### Fentanyl Synthesis from NPP

#### **Criminal Chemistry**

Traffickers manufacturing fentanyl often purchase the key ingredient from China

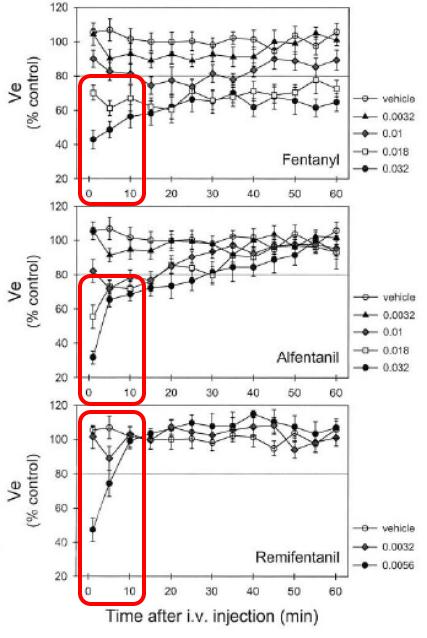




(Volkow, 2017)

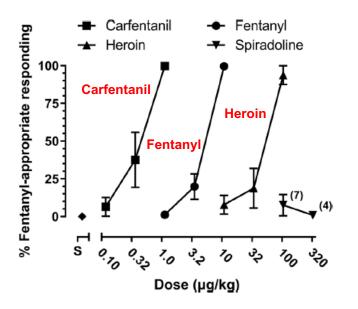
# How does fentanyl differ from heroin (morphine)?

Α	Mu Opioid Recepto	Mu Opioid Receptor (MOR) signaling				
	G-protein Analgesia morphine	fentanyl Beta-arrestin Respiratory depression				
	Morphine	Fentanyl				
	Little to no MOR internalization	MOR internalization				
	beta-arrestin 2 knockout (KO) mice No analgesic tolerance No locomotor sensitization Tolerance JNK-dependent	beta-arrestin-2 KO mice Tolerance not affected Locomotor sensitization not changed Tolerance JNK-independent				
Comer and	Tolerance is GRK3-independent	Tolerance is GRK3-dependent				
Cahill (2019)	RGS9-2 KO increases analgesia	RGS9-2 KO decreases analgesia				
	No ERK1/2 activation (via beta-arrestin-2)	ERK1/2 activation (via beta-arrestin-2)				
	Analgesic potency = 1	Equi-analgesic potency = 0.01* (i.e., fentanyl is ~100x more potent than morphine)				
	Less lipophilic	More lipophilic				
	Slow central nervous system (CNS) entry	Rapid CNS entry				



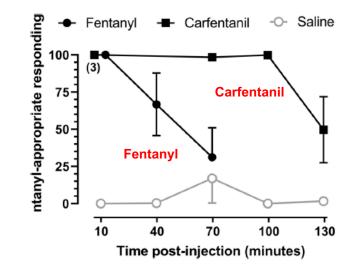
Fentanyl and its structural analogs can produce profound decreases in respiratory depression in monkeys.

Ko et al (2002) JPET 301: 698-704



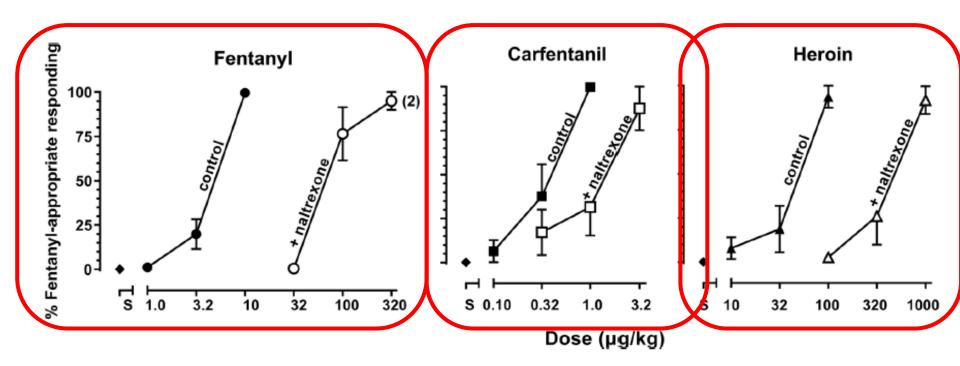
Fentanyl and carfentanil produce effects that are similar to heroin in rats

### But carfentanil produces longer lasting effects than fentanyl



Flynn and France (2021) Drug and Alcohol Dependence 221: 108599

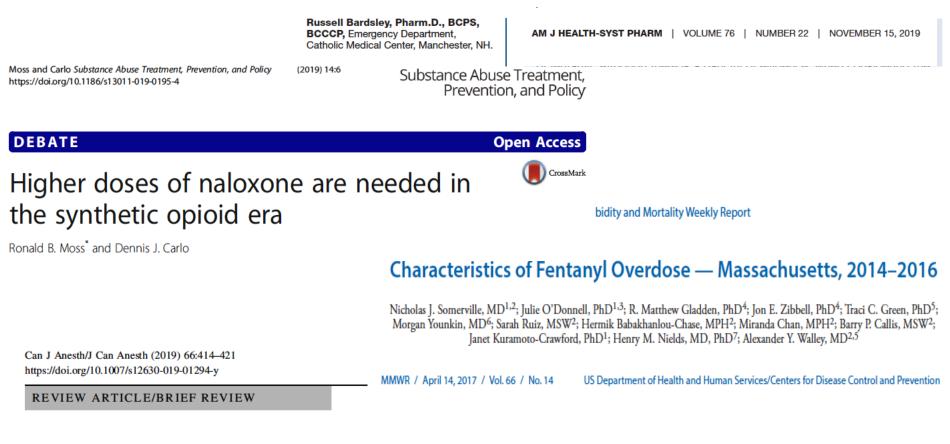
### Although naltrexone antagonizes fentanyl and heroin to a similar extent, it is less effective against carfentanil.



Flynn and France (2021) Drug and Alcohol Dependence 221: 108599

But what about naloxone for reversing fentanyl-related overdose?

# Higher naloxone dosing may be required for opioid overdose



Carfentanil: a narrative review of its pharmacology and public health concerns

Carfentanil: étude narrative de sa pharmacologie et problématiques de santé publique

Jessica L. S. Leen, MD · David N. Juurlink, MD, PhD

1521-0103/371/2/453–475\$35.00 THE JOURNAL OF PHARMACOLOGY AND EXPERIMENTAL THERAPEUTICS U.S. Government work not protected by U.S. copyright https://doi.org/10.1124/jpet.119.258566 J Pharmacol Exp Ther 371:453–475, November 2019

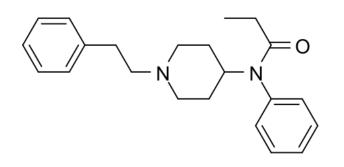
#### Special Section on The Opioid Crisis

### Noradrenergic Mechanisms in Fentanyl-Mediated Rapid Death Explain Failure of Naloxone in the Opioid Crisis

Randy Torralva and Aaron Janowsky

CODA Inc., Research Department, Portland, Oregon (R.T.); Research Service, VA Portland Health Care System, Portland, Oregon (R.T., A.J.); and Department of Psychiatry, Oregon Health & Science University, Portland, Oregon (R.T., A.J.) Received April 2, 2019; accepted September 3, 2019

# What can we conclude so far?



- ✓ Fentanyl is potent, has a rapid onset of action, and is short acting
- ✓ Naltrexone is effective in preventing the fentanyl-induced responses but is less effective against carfentanil
- ✓ Naloxone appears to be less effective against fentanyl overdose

### **MOUD for Fentanyl**

- Limited data on methadone or buprenorphine or naltrexone on fentanyl associated OUD
- Methadone maintenance therapy (MMT) is effective in fentanyl OUD.
  - Retrospective study in RI showed that 6 months of MMT protected against death and promoted abstinence, but relapse rates were high (<u>Stone, et al., 2018</u>).
  - Repeated exposure to fentanyl common while in MMT, but no deaths for those who remained in treatment, 4 deaths in those who left treatment (<u>Stone, et al. 2020</u>).
- Buprenorphine is effective in fentanyl OUD (<u>Wakeman, et al., 2019</u>).

Harder to initiate patients on buprenorphine

# Some hurdles...

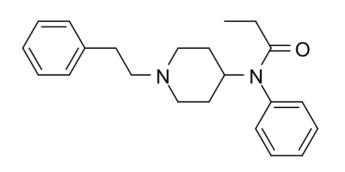
The American Journal on Addictions, 30: 83–87, 2021 © 2020 American Academy of Addiction Psychiatry ISSN: 1055-0496 print / 1521-0391 online DOI: 10.1111/ajad.13069

### Method for Successfully Inducting Individuals Who Use Illicit Fentanyl Onto Buprenorphine/Naloxone

Denis Antoine, MD, Andrew S. Huhn, PhD, MBA<sup>(D)</sup>, Eric C. Strain, MD, Gavin Turner, BS, Jasmyne Jardot, BA, Alexis S. Hammond, MD, PhD, Kelly E. Dunn, PhD, MBA

Department of Psychiatry and Behavioral Sciences, Johns Hopkins University School of Medicine, Baltimore, Maryland

# **Unanswered Questions**



- How well do methadone, buprenorphine, and naltrexone work for treating OUD in patients using fentanyl? What about the analogs?
- How do we most effectively transition patients from fentanyl to these treatment medications?
- How do we most effectively manage fentanyl-related overdoses?

