

# TORONTO DRUG ALERT

community care toolkit  
*April 2026*



# TORONTO DRUG ALERT



## community care toolkit April 2026

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**NOTE:** *This Toolkit was made in response to Toronto Public Health's April 7<sup>th</sup> Drug Alert.*

Toronto Drop-In Network acknowledges that our work takes place on the ancestral land of the Anishinabek, Chippewa, Haudenosaunee, and Wendat peoples; and most recently the Mississaugas of the Credit. We also acknowledge the lasting impacts of colonization and systemic oppression, particularly in the context of our work which is intrinsically tied to the land and our Treaty responsibilities as settlers and guests in Dish with One Spoon Territory.

TDIN recognizes the forced displacement and enslaved labour of African peoples from across the Atlantic Ocean. We recognize the ongoing impacts of Anti-Black racism and systemic inequities that Black communities continue to face in our city. We acknowledge and honor the cultural knowledge of Black and Indigenous communities and how it continues to shape our work.

TDIN acknowledges the significant losses that we continue to face as a community due to the ongoing drug toxicity crisis. This crisis is deeply rooted in systemic discrimination and intersecting forms of oppression under colonialism. We are committed to collective action that moves us toward a socially-just Toronto which is safe, healthy, and inclusive.

# TORONTO DRUG ALERT

## DRUG ALERT



April 7, 2026

## Increase in Drug-Related Deaths in Toronto

### Why are we sending this drug alert?

- There was an **increase in suspected opioid-overdose related deaths** attended by Toronto Paramedic Services between April 3 and 6, 2026.
  - Preliminary data show there were **5 suspected opioid overdose-related deaths between April 3 and 6**. In comparison, the average number of suspected opioid overdose-related deaths for four-day periods in the past 12 weeks was one.
  - Four of the fatal calls occurred within close proximity of each other in the downtown and midtown area.
  - All five fatal calls were indoors, and none occurred at a shelter setting.
- Additionally, Toronto Paramedic Services attended to a total of **74 suspected opioid overdose calls between April 3 and 6**, which is more than twice as high as the average number of calls for comparable Easter long-weekends in the previous three years.

*April 7, 2026*

Toronto Public Health released a Drug Alert outlining a significant increase in overdoses and drug-related deaths over the long-weekend.

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## From Toronto's Drug Checking Service's Latest Bi-Weekly Report

Toronto's Drug Checking Service is seeing an increase in the contamination and unpredictability of the unregulated opioid supply:

- 88% of the expected fentanyl samples contained veterinary tranquilizer medetomidine (a previously identified contaminate that can decrease level of consciousness)
- 46% of the expected fentanyl drug samples contained a combination of at least one high-potency opioid (most commonly fluorofentanyl), at least one benzodiazepine-related drug (most commonly desalkylgizapam), and medetomidine
- An increased presence of orphine opioids in the opioid supply - "new" non-fentanyl synthetic opioids
- The detection of a number of additional drugs circulating in the opioid supply, including etodezitramide (orphine opioid), methyltetrahydro furanyl fentanyl (fentanyl-related drug), methylclonazepam (benzodiazepine-related drug), and nefopam (Acupan)

Ontario's Drug Checking Community

**"New" opioids circulating in Ontario's unregulated opioid supply:  
Etodezitramide and cychlorphine**  
April 7, 2026

Ontario's Drug Checking Community and its flagship program, [Toronto's Drug Checking Service](#), are increasingly detecting a "new" family of non-fentanyl synthetic opioids in Ontario's unregulated opioid supply: "orphines" (also known as benzimidazol-2-ones or brorphine analogues). To date, orphines have been found in opioid samples collected in Toronto and Thunder Bay.

[Etodezitramide](#) was first detected by our analysis site member at the [Centre for Addiction and Mental Health](#) (Clinical Laboratory and Diagnostic Services) on March 25, 2026. Between March 25 and April 1, 2026, we found etodezitramide in one Percocet sample and one fentanyl sample. **To our knowledge, we are the first to detect and publicly share the presence of etodezitramide in Canada's unregulated drug supply.**

[Cychlorphine](#) was first detected by our analysis site member at the Centre for Addiction and Mental Health (Clinical Laboratory and Diagnostic Services) on September 12, 2025. Between September 12, 2025, and April 2, 2026, we found cychlorphine in 9 fake pharmaceutical opioid samples (including Percocet, hydromorphone (Dilaudid), and oxycodone (OxyContin)) and one fentanyl sample.

While [available literature](#) indicates some orphines are considered to be roughly as strong as fentanyl, [data not yet published](#) suggests cychlorphine is approximately 10 times stronger than fentanyl. The strength of etodezitramide is currently unknown. Orphines are the newest family of high-potency synthetic opioids to present in Canada's unregulated opioid supply, and evidence [of a larger trend that suggests when one group of opioids is scheduled or difficult to source \(e.g., nitazenes\), another – often more novel – will appear and replace it \(e.g., orphines\).](#)

Orphines are opioids, meaning naloxone should reverse their effects in an overdose situation. The risk of overdose may be further increased for people who use oxycodone (OxyContin), Percocet, or hydromorphone (Dilaudid), as compared to people who use fentanyl, because their opioid tolerance may be lower. In fentanyl samples, high-potency opioids are often found in combination, as well as with other central nervous and/or respiratory system depressants, potentially increasing the risk of overdose and complicating overdose response.

 **SIGN UP TO RECIEVE REPORTS  
AS THEY ARE PUBLISHED BY  
TORONTO'S DRUG CHECKING SERVICE**

# TORONTO DRUG ALERT

*what we're hearing in community*

**ONE OF TORONTO'S SHELTER SITES  
SAW 17 OVERDOSES IN ONE DAY  
ON SATURDAY, APRIL 4TH**

We're seeing a steady increase in overdoses in drop-in programs. We don't have the resources or staffing capacity to effectively respond to the increasingly complex overdoses we are seeing on a daily basis.

Oxygen administration is widely recognized as an important part of opioid poisoning response in overdose prevention settings, like Supervised Consumption Sites (SCSs). Another critical resource is Pulse Oximeters which measure a person's SpO2 (Peripheral Oxygen Saturation). Pulse oximeters are considered standard equipment in most SCSs. They are a valuable assessment and monitoring tool within opioid poisoning response (when providers are trained in their use).\*

The majority of drop-ins are not equipped with oxygen or pulse oximeters and don't have the necessary resources to respond to non-opioid overdoses (like medetomidine, xylazine, or other powerful non-opioid veterinary tranquilizer that **DO NOT** respond to Naloxone administration). Our dedicated and skilled frontline staff are doing their best to prevent and respond to overdoses, but the increase in overdoses is staggering.

\*[Oxygen Administration and Manual Ventilation in Opioid Poisoning Response Evidence Summary and Practice Implications, February 2025,](#)




**The forced closure of Supervised Consumption Sites will only exacerbate this**

# TORONTO DRUG ALERT

*we see you, we love you, we stand with you*

## RESOURCES FOR PEOPLE WHO USE DRUGS



**The Buddy System.** Try not to use alone. Buddy up with someone you trust and take turns spotting for each other. You can also call **The National Overdose Response Service (NORS)** which is a virtual safe consumption site available for all Canadians, 24 hours a day, 365 days a year. Their service is 100% confidential, anonymous and judgement free. Their only priority is to keep you safe while you use drugs. **Call or text NORS: 1-888-688-6677**

**Start Low and Go Slow.** This can include doing a small test dose first, avoid mixing substances, and slowly using afterwards based on the experience of your initial use.

**Carry Naloxone.** Everyone can carry Naloxone. IF you aren't trained to use it, someone else in the area might be trained. Having it there is better than having none on hand.

**Get Trained to Use Naloxone.** Naloxone can be picked up for **FREE** from your many pharmacies, drop-ins, and other Harm Reduction Program community agencies (see page 6 for service and supply finder maps). Free Naloxone training is also available online. It's a great idea to carry multiple doses of naloxone, as more than one dose is often needed in an opioid poisoning response.

**Get Your Drugs Checked Before Using.** Toronto Drug Checking Services are offered at six different locations throughout Toronto. Their service offers people who use drugs timely and detailed information on the contents of their drugs, helping them to make more informed decisions.

**Call 911 in an Overdose Situation.** Naloxone will not work on benzodiazepines or tranquilizers. Because these drug poisonings are medically complex, **call 9-1-1 right away**, still administer Naloxone and provide rescue breathing and CPR if needed, and stay with the person until help arrives.

**Use at a Supervised Consumption Site (SCS).**

This is a [list of Toronto's Supervised Consumption Sites](#)



**NOTE:** the Fred Victor and Moss Park sites will be forced to close by June 13<sup>th</sup>, 2026, due to the Ontario government's decision to end their funding.

# TORONTO DRUG ALERT

*responding to an overdose*

## 5 STEP OVERDOSE RESPONSE

STEP **1**  **SHOUT & SHAKE**  
their name

STEP **2**  **CALL 911**  
if unresponsive

STEP **3**  **ADMINISTER NALOXONE**  
1 spray into a nostril and/or  
1 ampule into arm or leg

STEP **4**  **START CPR**  
Perform rescue breathing and/or chest compressions

STEP **5**  **IS IT WORKING?**  
If NO improvement in 2-3 minutes repeat steps 3 & 4

## STAY WITH THE PERSON

Clean your hands after providing care



During overdose response. Stay up to date with your COVID-19 and flu vaccines.

 **TORONTO** Public Health

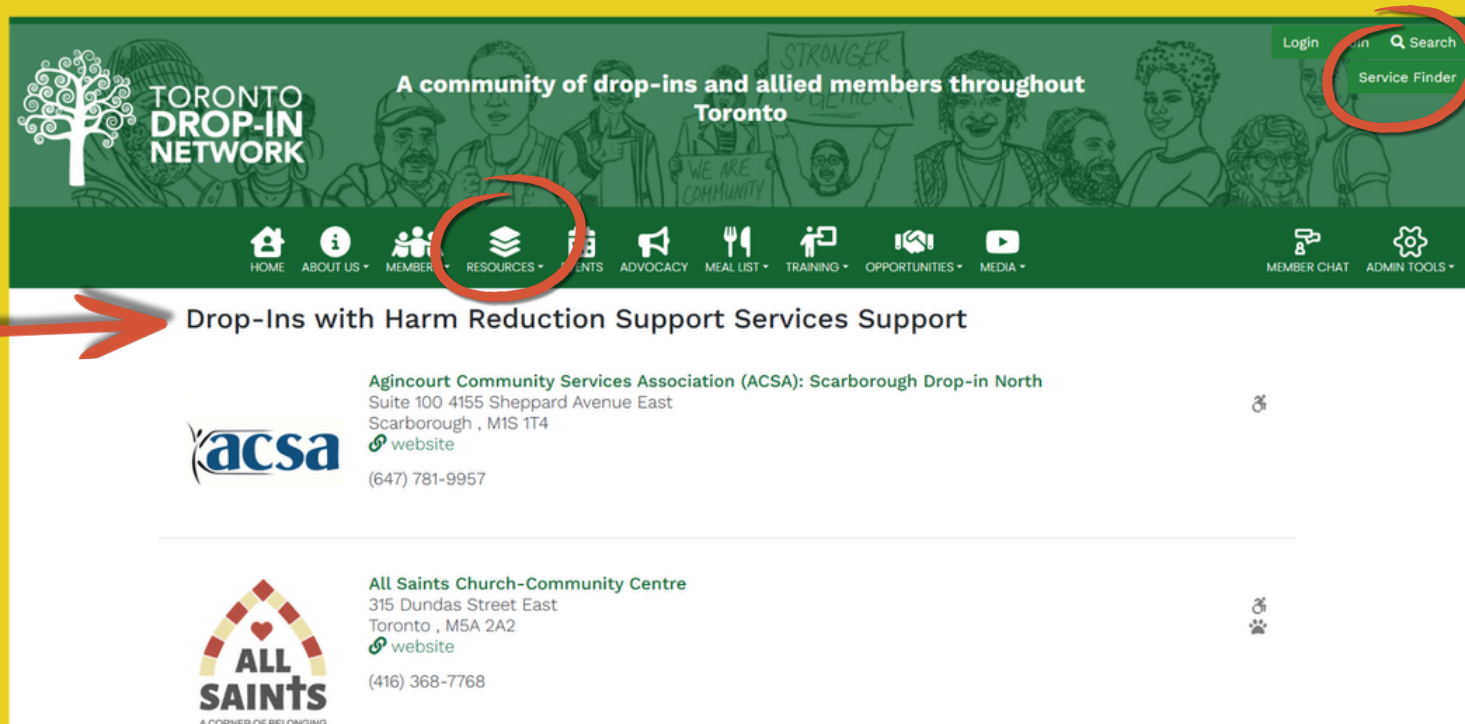
# TORONTO DRUG ALERT

## *community resources*

### **TDIN WEBSITE: Drop-ins & Harm Reduction Resources**

If you are looking to connect with community and services, like **Harm Reduction Supplies & Supports**, there is a service finder on the TDIN website: [www.tdin.ca/service-finder](http://www.tdin.ca/service-finder)

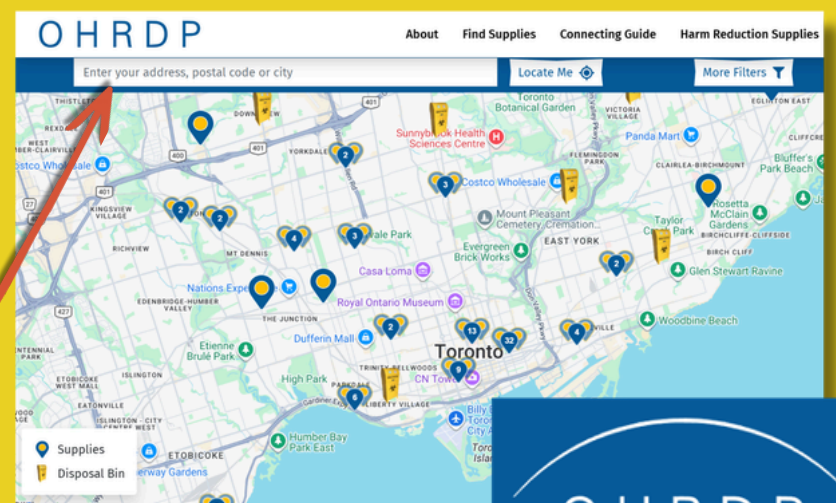
You can use the Search Bar, the Service Finder page, or go to the Members dropdown menu and access information about each individual drop-in and the services they provide.



### **OHRDP: Harm Reduction Supplies Finder**






To find Harm Reduction Supplies near you, OHRDP has a service finder map. Enter your city or postal code and a map with Harm Reduction Supplies and Disposal Bins will generate.

If you don't have a physical address, you can search using the address of your local drop-in or shelter.



# TORONTO DRUG ALERT

## SUPERVISED CONSUMPTION SITES IN TORONTO

Location	Hours
 <p><b>Fred Victor*</b> 139 Jarvis St. (Queen Street East/Jarvis Street) Phone: 416-644-3081</p>	<p>Monday, 8 a.m. to 10 p.m. <i>last call</i> Tuesday to Sunday, 7:30 a.m. to 7 p.m. <i>last call</i></p>
 <p><b>Street Health</b> 338 Dundas St. E. (Dundas Street East/Sherbourne Street) Phone: 416-921-8668</p>	<p>Monday, 9:30 a.m. to 4:30 p.m. Tuesday, 11 a.m. to 4:30 p.m. Wednesday, 9:30 a.m. to 4:30 p.m. Thursday, 9:30 a.m. to 4:30 p.m. Friday, 9:30 a.m. to 4:30 p.m.</p>
 <p><b>Casey House</b> 119 Isabella St. (Isabella/Jarvis Street) Phone: 416-962-7600 Currently accepting new clients <i>Note: For use by Casey House patients only</i></p>	<p>Monday to Friday, 10 a.m. to 8 p.m. (last entry at 7 p.m.)</p>
 <p><b>Moss Park Consumption and Treatment Services*</b> 134 Sherbourne St (Sherbourne St./Queen St. East) 416-546-3771</p>	<p>Monday to Friday, 10 a.m. – 10 p.m. (last call typically 1 hour before close)</p>
 <p><b>Kensington Market Overdose Prevention Site</b> 260 Augusta Ave (College St./Spadina Ave) Phone 416.925.2103 x2626</p>	<p>Sunday to Friday, 8 a.m. to 2 p.m.</p>

**NOTE: the Fred Victor and Moss Park sites will be forced to close by June 13<sup>th</sup>, 2026, due to the Ontario government's decision to end their funding.**

You can contact your MPP to let them know that the decision to close these sites is not in the best interest of people in your community. Go to page 13 of this tool kit or visit **TDIN's March 2026 Community Care Toolkit** for more information.



# TORONTO DRUG ALERT



## TORONTO'S DRUG CHECKING SERVICE

We cannot stress enough how important their work is, both the drug checking service and their bi-weekly reports. Here are some quick links to their many resources and reports:

- [Tips & Help](#)
- [Drug Dictionary](#)
- [Resources](#)
- [Reports](#)
- [What's in Toronto's drug supply? Graphs](#)
- [Drug Information](#)

## OHRDP RESOURCE ON MEDETOMIDINE



The Ontario Harm Reduction Distribution Program (OHRDP) has compiled a comprehensive resource on Medetomidine.

You can click on the image to the right to read the full PDF, or visit the TDIN website: [www.tdin.ca/resource?id=869](http://www.tdin.ca/resource?id=869)



### Let's Talk Medetomidine Information for Harm Reduction Workers

Medetomidine was first detected in Ontario's unregulated fentanyl supply in December 2023 by [Toronto's Drug Checking Service](#). By December 2025, they found that medetomidine was in over 80% of fentanyl samples in Toronto. **It continues to be reported with increasing frequency throughout Ontario in the unregulated opioid supply.**

#### What is Medetomidine?

- Medetomidine (meh-deh-TOH-mih-deen) is a veterinary sedative not approved or safe for human use.
- It is similar to xylazine but more potent, with longer-lasting effects.
- Medetomidine can cause longer-lasting sedation, with unusual or harder-to-recognize symptoms and **severe withdrawal**.
- Treating medetomidine overdose or withdrawal can be complicated and may require emergency medical attention and monitoring.
- Unless an individual is using a drug checking service or drug test strips, they will not know when they might be exposed to medetomidine.

#### Effects of Medetomidine on the Body

- Very low heart rate and low blood pressure (may cause falling, fainting, lightheadedness).
- Prolonged and deep sedation (that may continue after naloxone has been given).
- Confusion or delirium may occur, and in some cases, people may experience changes in perception such as hallucinations.
- Constrict pupils.

#### Important!

**Medetomidine can cause serious complications in the body. It can severely affect the kidneys, heart, brain, and can cause death. Medetomidine exposure may require urgent medical care that can not be managed outside a hospital.**

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## **ACAS BIPOC HARM REDUCTION PROGRAM**

The ACAS BIPOC Harm Reduction Program, co-ordinated by Justin Anantawan, focuses on educating the ACAS community about harm reduction, substance use and addiction and building capacity for East and South East Asian folks to talk about substance use, decrease drug stigma and find solutions to problems linked to drug stigma and harmful government policies, like the current toxic drug crisis. This program works in collaboration with the BIPOC Harm Reduction Alliance which is made up of ACAS, Center for Spanish Speaking People, Alliance for South Asian AIDS Prevention, Black Coalition for AIDS Prevention and Africans in Partnership against AIDS.

for information about their work visit: <https://acas.org/programs/bipoc-harm-reduction-program/>



## **BLACK CAP HARM REDUCTION PROGRAM**

Black CAP's Harm Reduction Program delivers adult and youth harm reduction workshops on substance use and abuse related issues, the criminal justice system, mixing drug dealing with substance use, and abuse and dependence. It holds a bi-monthly Harm Reduction Drop-in for ACB substance users to share their thoughts and ideas in discussions on topics that affect our community such as racism, oppression and the excessive use of force by police. They partner with Toronto Public Health and other stakeholders to deliver special events such as Snowfest and Sunfest, during this event we distribute hundreds of beverages and food items to those members of our community members who are street involved, marginalized and who also may be homeless. We also use this opportunity to conduct surveys within ACB substance using community in order to understand how to serve our community better. They work with agencies to build Harm Reduction Policies and train staff teams on Harm Reduction. They act as a distribution site to Toronto Public Health for the distribution of Safer Inhalation and Injection equipment kits and other resources through weekly outreach in a number of neighbourhoods (downtown, Scarborough, Rexdale, etc.)



To request a workshop, one-on-one session or to invite the Harm Reduction team to do outreach at your event please [click here](#).

# TORONTO DRUG ALERT



## TORONTO INDIGENOUS HARM REDUCTION

Toronto Indigenous Harm Reduction (TIHR) emerged in April 2020 during the first wave of the COVID19. pandemic in response to a massive shutdown of frontline services & a lack of basic needs for Indigenous houseless folks in the city of Toronto.

They are doing critical frontline work in community. Follow and support their work: [www.torontoindigenoushr.com/about](http://www.torontoindigenoushr.com/about)

If you are able, please consider making a donation to support their work: [www.torontoindigenoushr.com/donate](http://www.torontoindigenoushr.com/donate)



## TORONTO HARM REDUCTION ADVOCACY COLLECTIVE

They are a collective of harm reduction workers, People Who Use Drugs, and Allies organizing to protect harm reduction and fight for drug user liberation. Harm reduction services are under attack throughout the province at the hand of Doug Ford's reckless policies. These policies are not based in evidence and directly go against the recommendations of the Board of Health and front-line healthcare workers. The upcoming closure of Toronto's Safe Consumption Sites, Safer supply programs, and needle exchange will put lives at risk and lead to a greater burden on our health care systems.

Follow them on Instagram for info on how to join the Collective @hac\_toronto  
If you are able, please consider donating to their [GoFundMe](#)



## TORONTO HOMELESSNESS MEMORIAL: ONLINE MEMORIAL LIST AND IN-PERSON MONTHLY MEMORIALS

Held on the **second Tuesdays of each month**, the Homeless memorial is a space for all of us to gather to remember our friends, family, neighbours, and strangers who died while homeless in Toronto or due to having been homeless in Toronto.

Join in-person at the south doors of Church of the Holy Trinity at 12 PM or online on [Trinity CommUNITY Hub's Instagram](#). These live streams can be viewed even if you don't have an Instagram account.



**NOTE:** Not all people who use drugs are unhoused. Not all folks who are unhoused use drugs. As our community is in mourning, we have found that connecting with folks in-person to grieve has been critical of our collective well-being.

# TORONTO DRUG ALERT

*community calls to action*

## READ, SIGN & SHARE THE PETITIONS

**HARM  
REDUCTION  
ADVOCACY  
COLLECTIVE**

[Fund Ontario's Supervised Consumption Sites Now MPP Letter Campaign](#)



[Progress Toronto Online Petition: Tell Ford to Restore Access to Overdose Prevention](#)

## CONTACT YOUR MPP

On the [Ontario Legislative Assembly's website](#), you will find your MPP's email address, phone number, Constituency Office (Office in your community), and Legislative Office (Office at Queen's Park). These are all ways that you can contact your MPP as an individual or as a group. You could work with a small group of community members, neighbours, drop-in program participants, co-workers, friends or found families to share your needs/concerns/stories as a community.

You could also invite your MPP to come visit your drop-in program for a tour and to connect with frontline staff and program participants in-person or virtually.



[For more info on how to find your MPP, Check out our March Community Care Toolkit](#)

# TORONTO DRUG ALERT

*community calls to action*



HAPPENING  
THIS  
WEEKEND!

***we hope to see you there!!!***



Hosted by the Toronto Harm Reduction Advocacy Collective,  
Toronto Overdose Prevention Society, & CUPE 5399

# TORONTO DRUG ALERT



community care toolkit

April 2026

## FIND A DROP-IN

If you are looking to connect with community and services, like Harm Reduction Supplies & Supports, there is a service finder on the TDIN website: [www.tdin.ca/service-finder](http://www.tdin.ca/service-finder)

You can use the Search Bar, the Service Finder page, or go to the Members dropdown menu and access information about each individual drop-in and the services they provide.



## FIND US ONLINE



[torontodropinnetwork](https://www.instagram.com/torontodropinnetwork)



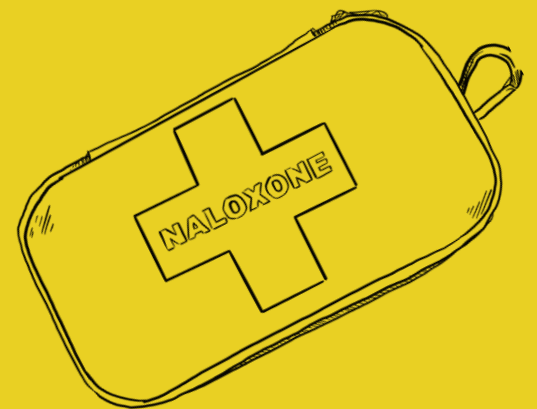
[@torontodropinnetwork](https://www.tiktok.com/@torontodropinnetwork)



[TDIN](https://www.facebook.com/TDIN)



[@torontodrop-innetwork24](https://www.youtube.com/@torontodrop-innetwork24)



## DROP US A LINE

Melanie Joy, Executive Lead [manager@tdin.ca](mailto:manager@tdin.ca) | 416-824-4172

Marianne Kozinets, Training and Engagement Coordinator [engage@tdin.ca](mailto:engage@tdin.ca) | 647-464-1733

Anne Ndirangu, Member Support Coordinator [support@tdin.ca](mailto:support@tdin.ca) | 647-883-3843

Bea Marie, Social Media and Website Admin Support [tdinsocial@tngcs.org](mailto:tdinsocial@tngcs.org)

