

Reemergence of Carfentanil: A Growing Threat in the U.S. Opioid Crisis

Taiwo Dolapo Oluyemo^{1*}, Bakare Ibraheem², Ruth Abioye³, Kemisola Kasali⁴, Mariam Olaitan Oladapo⁵

¹Department of Pharmaceutical Sciences, University of Maryland Eastern Shore, Princess Anne, Maryland, United States

²Department of Public Health, Cardiff University, United Kingdom

³Department of Public Health, University of Dundee, Scotland, United Kingdom

⁴Department of Health and Human Services, University of Arkansas at Little Rock, Little Rock, Arkansas, United States

⁵Department of Urban and Regional Planning, Obafemi Awolowo university, Ile Ife, Osun State, Nigeria.

*Corresponding Author

DOI: <https://doi.org/10.51244/IJRSI.2025.12030039>

Received: 05 February 2025; Accepted: 09 March 2025; Published: 06 April 2025

ROLE OF AUTHORS

All authors conceptualized and drafted the first and subsequent versions of this article. All authors read, revised the drafts and approved the final manuscript.

Carfentanyl, a highly potent synthetic opioid originally used as a tranquilizer for large animals, is re-emerging as a significant public health threat in the U.S.¹⁻³. The recent sevenfold increase in overdose deaths with carfentanil detected (from 29 in early 2023 to 238 in mid-2024) suggests a rapid resurgence. Unlike the 2016–2017 outbreak, which was localized and had low illegally manufactured fentanyl (IMF) co-detection rates (<25%), the current wave spans 37 states with 87% IMF co-detection, indicating a broader and more integrated presence in the illicit drug supply.⁴

While fentanyl has been a major driver of overdose deaths — accounting for a 4.86% increase in synthetic opioid fatalities from 71,238 in 2021 to 74,702 in 2023^{5,6} — carfentanyl poses an even greater risk due to its potency, being 100 times more potent than fentanyl and 10,000 times more than morphine^{7,8}. Due to its potency and low concentrations in biological samples, forensic detection of carfentanil relies on liquid chromatography-tandem mass spectrometry (LC-MS/MS), gas chromatography-mass spectrometry (GC-MS), and high-resolution mass spectrometry (HRMS)⁹. Blood, urine, and postmortem tissues are analyzed, as carfentanil metabolizes rapidly. With rising illegally manufactured fentanyls (IMFs), laboratory refine detection protocols to enhance accuracy and prevent misinterpretation.¹⁰

Carfentanyl's reappearance poses numerous challenges. Its potency makes it difficult to detect and regulate in the drug market, and users often unknowingly consume it when it is mixed with other substances^{9,11}. A dose as small as a grain of salt can be lethal, creating a heightened risk for overdose and overdose deaths¹⁰. Also, carfentanyl endangers first responders, who may unintentionally come into contact with the drug during emergencies¹², thus, highlighting the need for advanced protective measures and training for emergency personnel.

Moreover, the resurgence of carfentanyl could worsen the ongoing opioid crisis by adding to the already dangerous drug landscape – the opioid crisis/epidemic¹¹. The opioid crisis in the U.S. began in the 1990s with the widespread overprescription of opioid painkillers, driven by pharmaceutical claims of low addiction risk^{13,14}. This led to a rise in prescription opioid misuse, followed by tightened regulations, which pushed many users towards heroin. By the 2010s, the crisis escalated with the influx of illicitly manufactured synthetic opioids (IMFs), particularly fentanyl and its analogs such as carfentanil, which are far more potent and lethal. In recent years, the opioid crisis in the U.S. has shifted from prescription opioids to illicitly manufactured synthetic opioids, with fentanyl and its analogs particularly, carfentanyl, driving a surge in overdose deaths^{15–17}. As public awareness and enforcement efforts targeted fentanyl, drug traffickers might have begun turning to more potent alternatives including carfentanyl, which can be produced and transported in smaller quantities with far deadlier consequences¹⁸.

To address the growing threat of carfentanyl, surveillance of drug market must be strengthened, and coordination between law enforcement and public health agencies enhanced to disrupt supply chains and detect carfentanyl early. Naloxone, a life-saving antidote for opioid overdoses¹⁹, must be expanded, especially in high-risk areas, as reversing carfentanyl overdoses typically require higher doses^{20,21}. Education campaigns targeting drug users and the public about the risks of synthetic opioid contamination are necessary for promoting safer behaviors and overdose preparedness. Harm reduction programs, including syringe exchanges should be enhanced to promote safer drug use practices among people who inject drugs.

The re-emergence of carfentanyl has potential to worsen the U.S. opioid crisis and demands immediate and coordinated action to curtail its deadly impact in particular among the economically deprived rural communities²², where limited healthcare access, high unemployment, and social isolation heighten vulnerability²². These regions have higher overdose rates due to increased synthetic opioid infiltration and scarce addiction treatment resources²². Immediate, coordinated action is crucial to mitigate its deadly impact on these populations.

REFERENCES

1. In Response to NYC Health Report “Carfentanil and Medetomidine in the NYC Drug Supply,” Rep. Ritchie Torres Pushes DEA and CDC for Clarity and Answers - Torres. Accessed March 8, 2025. <https://ritchietorres.house.gov/posts/in-response-to-nyc-health-report-carfentanil-and-medetomidine-in-the-nyc-drug-supply-rep-ritchie-torres-pushes-dea-and-cdc-for-clarity-and-answers>
2. AG Yost Hosts Drug Dropoff Day in Montgomery County - Ohio Attorney General Dave Yost. Accessed March 8, 2025. <https://www.ohioattorneygeneral.gov/Media/News-Releases/January-2025/AG-Yost-Hosts-Drug-Dropoff-Day-in-Montgomery-Count>
3. O'Donnell J. Notes from the Field: Overdose Deaths with Carfentanil and Other Fentanyl Analogs Detected — 10 States, July 2016–June 2017. *MMWR Morb Mortal Wkly Rep.* 2018;67. doi:10.15585/mmwr.mm6727a4
4. Tanz LJ, Stewart A, Gladden RM, Ko JY, Owens L, O'Donnell J. Detection of Illegally Manufactured Fentanyls and Carfentanil in Drug Overdose Deaths — United States, 2021–2024. *MMWR Morb Mortal Wkly Rep.* 2024;73(48):1099-1105. doi:10.15585/mmwr.mm7348a2
5. U.S. Overdose Deaths In 2021 Increased Half as Much as in 2020 - But Are Still Up 15%. May 11, 2022. Accessed March 8, 2025. https://www.cdc.gov/nchs/pressroom/nchs_press_releases/2022/202205.htm
6. Spencer M, Miniño A, Warner M. Drug Overdose Deaths in the United States, 2001–2021. National Center for Health Statistics (U.S.); 2022. doi:10.15620/cdc:122556
7. Zawilska JB, Kuczyńska K, Kosmal W, Markiewicz K, Adamowicz P. Carfentanil – from an animal anesthetic to a deadly illicit drug. *Forensic Science International.* 2021;320:110715. doi:10.1016/j.forsciint.2021.110715
8. Suzuki J, El-Haddad S. A review: Fentanyl and non-pharmaceutical fentanyls. *Drug and Alcohol Dependence.* 2017;171:107-116. doi:10.1016/j.drugalcdep.2016.11.033

9. O'Donnell JK. Deaths Involving Fentanyl, Fentanyl Analogs, and U-47700 — 10 States, July–December 2016. *MMWR Morb Mortal Wkly Rep.* 2017;66. doi:10.15585/mmwr.mm6643e1
10. Rab E, Flanagan RJ, Hudson S. Detection of fentanyl and fentanyl analogues in biological samples using liquid chromatography–high resolution mass spectrometry. *Forensic Science International.* 2019;300:13-18. doi:10.1016/j.forsciint.2019.04.008
11. Noble C, Papsun DM, Diaz S, Logan BK. Detection of two potent synthetic opioids carfentanil and 3-methylfentanyl in forensic investigations during a four-year period 2017–2020. *Emerging Trends in Drugs, Addictions, and Health.* 2021;1:100022. doi:10.1016/j.etdah.2021.100022
12. Zawilska JB, Kuczyńska K, Kosmal W, Markiewicz K, Adamowicz P. Carfentanil – from an animal anesthetic to a deadly illicit drug. *Forensic Science International.* 2021;320:110715. doi:10.1016/j.forsciint.2021.110715
13. Ciccarone D. The triple wave epidemic: Supply and demand drivers of the US opioid overdose crisis. *International Journal of Drug Policy.* 2019;71:183-188. doi:10.1016/j.drugpo.2019.01.010
14. CDC. Understanding the Opioid Overdose Epidemic. Overdose Prevention. November 1, 2024. Accessed March 8, 2025. <https://www.cdc.gov/overdose-prevention/about/understanding-the-opioid-overdose-epidemic.html>
15. Rawson RA, Erath TG, Clark HW. The fourth wave of the overdose crisis: Examining the prominent role of psychomotor stimulants with and without fentanyl. *Preventive Medicine.* 2023;176:107625. doi:10.1016/j.ypmed.2023.107625
16. Ciccarone D. The rise of illicit fentanyl, stimulants and the fourth wave of the opioid overdose crisis. *Current Opinion in Psychiatry.* 2021;34(4):344-350. doi:10.1097/YCO.0000000000000717
17. Ciccarone D. The rise of illicit fentanyl, stimulants and the fourth wave of the opioid overdose crisis. *Current Opinion in Psychiatry.* 2021;34(4):344-350. doi:10.1097/YCO.0000000000000717
18. Eastern District of Kentucky | Lexington Man Sentenced for Trafficking in Fentanyl and Carfentanil | United States Department of Justice. January 27, 2025. Accessed March 8, 2025. <https://www.justice.gov/usao-edky/pr/lexington-man-sentenced-trafficking-fentanyl-and-carfentanil>
19. Miller NM, Waterhouse-Bradley B, Campbell C, Shorter GW. How do naloxone-based interventions work to reduce overdose deaths: a realist review. *Harm Reduct J.* 2022;19(1):18. doi:10.1186/s12954-022-00599-4
20. Feasel MG, Moran TS, Cheng BC, Averick S. Are carfentanil and acrylfentanyl naloxone resistant? *Front Psychiatry.* 2024;15:1359851. doi:10.3389/fpsy.2024.1359851
21. Faul M, Lurie P, Kinsman JM, Dailey MW, Crabaugh C, Sasser SM. Multiple Naloxone Administrations Among Emergency Medical Service Providers is Increasing. *Prehospital Emergency Care.* 2017;21(4):411-419. doi:10.1080/10903127.2017.1315203
22. Keyes KM, Cerdá M, Brady JE, Havens JR, Galea S. Understanding the Rural–Urban Differences in Nonmedical Prescription Opioid Use and Abuse in the United States. *Am J Public Health.* 2014;104(2):e52-e59. doi:10.2105/AJPH.2013.301709