

NHSGGC Drug harms briefing: Contamination of the crack cocaine supply



Audience

This briefing note is being issued to services for people who use drugs in Greater Glasgow and Clyde. It contains important information that should be conveyed to staff of those services, and via them to people who use drugs and their friends and families.

It provides an update to the previous briefing note issued on 12 September 2025.

Situation

NHS Greater Glasgow and Clyde (NHSGGC) and Glasgow City Alcohol and Drugs Partnership (ADP) are aware of several recent drug harms incidents in Glasgow City involving individuals who have experienced severe harmful effects after consuming drugs intended as crack cocaine.

In many instances these effects have included loss of consciousness and respiratory depression (impaired breathing), and in some instances the individuals have experienced vomiting or seizure-like activity. Some (but not all) of the cases have responded well to the administration of naloxone. Sadly, there have been three recent suspected drug deaths and several people have been admitted to intensive care, potentially in connection with this situation.

At present, these reports seem to be concentrated in the northern part of Glasgow city centre, though some reports have come from other parts of the city.

Assessment

Although crack cocaine can itself cause severe harms, the features described above are unusual for crack cocaine. This has given rise to concern that the incidents may be caused by contamination of the crack cocaine supply.

We now have evidence that at least some of the incidents are linked to the presence of a synthetic cannabinoid ('Spice') in drugs being sold and consumed as crack cocaine. However we cannot at this stage rule out the possible presence of one or more other contaminants which could also be involved.

Synthetic cannabinoids are not the same as natural cannabis. They are manufactured chemicals, often many times stronger, with unpredictable and sometimes extreme effects. They can cause severe harms such as rapid sedation, agitation, confusion, vomiting, seizures, unconsciousness and death. Because synthetic cannabinoids are unpredictable and difficult to dose, there is no safe way to advise on their use.

The drug supply in Glasgow, and across Scotland, is volatile and unpredictable. Contents and strength can change rapidly from place to place and from one day to the next.

Actions to take

1. Make your staff aware of this briefing note and provide it to them.
2. Use every available opportunity to make those at risk aware of the key points overleaf and ways to ways to reduce risk.
3. Encourage ALL people who use drugs (not just people who consume heroin or other opioids) and their friends and family to keep a supply of naloxone to hand and to use it if a person overdoses. Services and service users can access naloxone (and training in naloxone use) via this link: [Naloxone](#)

[Explained — Stop The Deaths](#). You can also contact your local Alcohol and Drug Recovery Services (ADRS) team if you need help with accessing naloxone. Community pharmacies hold supplies of naloxone which can be accessed during an emergency.

4. Consider making the attached leaflet available to your service users and placing information about measures to reduce the risk of overdose in prominent locations in your service. Useful resources can be found here: [Stop The Deaths](#).
5. If someone you are working with experiences unusual effects from their drugs, encourage and support them to submit a sample to WEDINOS for testing: [WEDINOS - Welsh Emerging Drugs & Identification of Novel Substances Project](#). Information about the effects experienced and the sample barcode should be sent by email to mhead@ggc.scot.nhs.uk so that we can track the results. Please also use this email address if you need any information or advice about helping service users to submit samples to WEDINOS.
6. Please inform your ADP coordinator (or your service manager) and email mhead@ggc.scot.nhs.uk if you:
 - Observe or become aware of anyone becoming severely unwell after consuming drugs intended as crack cocaine, or
 - Have any other information that you think is relevant and would like to share.

Key information for people who use drugs in Greater Glasgow and Clyde

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There have been a number of recent reports from Glasgow City of people becoming severely unwell after taking drugs they believed to be crack cocaine. Reports describe vomiting, seizures, sudden loss of consciousness and collapse, and a number of recent suspected drug deaths may also be connected with this situation.

There is evidence that at least some of these cases have been caused by contamination of the crack cocaine supply with synthetic cannabinoids ('Spice'), although other contaminants may also be involved.

Synthetic cannabinoids are very unpredictable and difficult to dose accurately. Even the smallest quantities can lead to severe harms such as seizures, loss of consciousness and death.

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Urgent advice

- **Avoid using** drugs sold as crack cocaine at this time. Recent harms have been directly linked to these products, and the risk of severe harm is high.
- If people do continue to use:
 - **Avoid unfamiliar supplies** of drugs, and start with a small amount.
 - **Do not use when you are alone.** Always make sure you are with someone who can help if you become unwell.
 - **Avoid combining or mixing** drugs, since that greatly increases the risk of overdose. When taking drugs, be especially careful if you already have drugs on board.
- **Keep naloxone nearby, and use it.** While it does not reverse the effects of crack cocaine or synthetic cannabinoids, it should still always be given if someone is unresponsive as other drugs may also have been taken, either intentionally or without them knowing. Naloxone is available from Alcohol and Drug Recovery Services, injecting equipment outlets and participating community pharmacies.
- **If someone becomes unconscious, has a seizure, or experiences difficulty breathing, dial 999 immediately.** While waiting for help to arrive, place the person in the recovery position (on their side) to reduce the risk of choking.