

From the Chief Medical Officer
Dr Michael McBride



Department of
**Health, Social Services
and Public Safety**

www.dhsspsni.gov.uk

AN ROINN

**Sláinte, Seirbhísí Sóisialta
agus Sábháilteachta Poiblí**

MÄNNYSTRIE O

**Poustie, Resydènter Heisin
an Fowk Siccar**

URGENT COMMUNICATION

HSS(MD)32/2010

Chief Executives, Public Health Agency/Health & Social
Care Board/ HSC Trusts/NIAS
Executive Medical Dir/Dir of Public Health, Public Health
Agency
(for onward distribution to relevant health protection staff)

Director of Nursing, Public Health Agency
GP Medical Advisers, Health & Social Care Board
All General Practitioners
(for onward distribution to practice staff)

GP Locums
Family Practitioner Service Leads, HSC Board
(for cascade to GP Out of Hours services)

Medical Directors HSC Trusts
(for onward cascade to:
Staff in A&E Departments and
Services dealing with drug misuse)

Nursing Directors, HSC Trusts
(for onward distribution to all Community Nurses)

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Stormont Estate
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Your Ref:
Our Ref: HSS(MD)32/2010

Date: 16 August 2010

Dear Colleague

SEVERE REACTIONS TO IVORY WAVE LEGAL HIGH

I am writing to you to highlight both a cluster of admissions to Accident and Emergency Departments in Scotland associated with a legal high branded as *Ivory Wave*, and also a 5 further cases presenting to A&E in Bournemouth and Poole, again associated with *Ivory Wave*.

Presently no single active ingredient has been associated with *Ivory Wave*, although a substance branded as such was added to the TICTAC database in 2009. This database is managed by St. George's Hospital, University of London and is used for the visual identification of drugs, primarily tablets and capsules, and substances that may resemble drugs. On this database the active ingredients of *Ivory Wave* were identified as MDPV (Methylenedioxypropylvalerone) and Lidocaine. Other reported ingredients include *Volatile Organic Compounds (VOCs)* and some anecdotal reporting that the recently banned cathinone substances mephedrone and Naphyrone are being "rebranded" as *Ivory Wave*.

The severity of the symptoms exhibited in these cases is unusual and may give cause for concern. Such symptoms may include:

- Grand mal seizures
- Agitation
- Hallucinations
- Delusions
- Possible cardiac toxicity
- A significant rise in creatinine kinase,
- High temperature
- High blood pressure (although blood pressure levels may show significant variation both high and low); and
- Tachycardia

Specifically the purpose of this letter is to ask you to circulate as appropriate this information to relevant clinical services. Also, to help build a more accurate picture, please notify any A&E admissions, clusters of cases or additional intelligence that has been associated with *Ivory wave* – or indeed to any other so-called legal high - to HDPB@dhsspsni.gov.uk. Other previously reported substances have included *Benzo fury*; *Jamaican Bubbles*; *NRG-1*, *NRG-zone*, *Ivory Coast* or *Purple Wave*.

Yours sincerely



Dr M McBride
Chief Medical Officer

cc: Dr Ian McMaster
Mr Rob Phipps
Mr Gary Maxwell
Ms Clare Baxter
Dr Michael Mawhinney

This letter is available at www.dhsspsni.gov.uk and also on the DHSSPS Extranet which can be accessed directly at <http://extranet.dhsspsni.gov.uk> or by going through the HPSS Web at <http://www.n-i.nhs.uk> and clicking on DHSSPS.