DRUG

NFLIS-DRUG **2020** MIDYEAR REPORT

NFLIS

NATIONAL FORENSIC LABORATORY INFORMATION SYSTEM

U.S. DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
DIVERSION CONTROL DIVISION

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Notice of Decrease in Drug Reports

The total number of drugs reported to NFLIS for the NFLIS-Drug 2020 Midyear Report is substantially lower than the number reported in the previous year. As a result, readers will notice decreases in nearly all trends. The decrease in reports is likely due, in part, to the impacts of coronavirus disease (COVID-19) on drug availability within disrupted illicit markets and changes in law enforcement activities and laboratory caseloads, staffing, and operations. Specifically, several laboratories and laboratory systems alerted the NFLIS staff that operations were being suspended during March and April 2020 and that reduced numbers of laboratory staff would be working rotating or limited schedules. These impacts continued throughout the year. For example, one State laboratory system noted that it did not have any drug cases to work because it believed that law enforcement had reduced interactions with the public and did not expect any new data until May 2020.

Because of the decrease in reporting, readers are cautioned at this time to not compare the data from January through June 2020 with data from previous years. DEA will continue to explore the impacts of COVID-19 on reporting and would like to thank the participating and reporting NFLIS-Drug laboratories for their continued support and dedication to NFLIS, especially during the difficult times of the pandemic.

NFLIS

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DEA Synth-Opioids

Real-Time Communication Network

Special NFLIS Announcement

The partnership between NFLIS and the Real-Time Communication Synth-Opioids Network (Synth-Opioids) has resulted in a permanent NFLIS Synth-Opioids communication platform at https://synthopioids.nflis.deadiversion.usdoj.gov.

DEA is pleased to continue to work with our partners in the forensic communities to address the challenges associated with the rapid evolution of the illicit drug market. Those interested can visit the NFLIS Synth-Opioids website (linked above) and request an account. You will be asked to share your forensic discipline, affiliation, and curriculum vitae (CV) or résumé.

The new communication platform provides

- rapid dissemination of information;
- DEA emerging psychoactive drug alerts (for public and law enforcement use);
- reports on emerging drug trends and unknown substances;
- searchable and permanent storage of information, organized by category;
- sharing of data and methodologies to address analytical challenges and facilitate prompt detection and identification of emerging psychoactive substances;
- sharing of information on novel forms of drug submissions; and
- opportunities for scientific forensic surveys to gather information quickly.

Common Drug Names Used in This Publication

NFLIS Substance Name	Chemical Name
4F-MDMB-BUTICA	methyl 2-(1-(4-fluorobutyl)-1H-indole-3-carboxamido)-3,3-dimethylbutanoate
4F-MDMB-BUTINACA	methyl 2-(1-(4-fluorobutyl)-1H-indazole-3-carboxamido)-3,3-dimethylbutanoate
5F-ADB	methyl 2-(1-(5-fluoropentyl)-1H-indazole-3-carboxamido)-3,3-dimethylbutanoate
5F-EDMB-PINACA	ethyl 2-(1-(5-fluoropentyl)-1H-indazole-3-carboxamido)-3,3-dimethylbutanoate
5F-EMB-PICA	ethyl 2-(1-(5-fluoropentyl)-1H-indole-3-carboxamido)-3-methylbutanoate
5F-MDMB-PICA	methyl 2-(1-(5-fluoropentyl)-1H-indole-3-carboxamido)-3,3-dimethylbutanoate
ADB-FUBINACA	N-(1-amino-3,3-dimethyl-1-oxobutan-2-yl)-1-(4-fluorobenzyl)-1H-indazole-3-carboxamide
alpha-PHP	alpha-pyrrolidinohexanophenone
alpha-PiHP	alpha-pyrrolidinoisohexanophenone
ANPP	4-anilino-N-phenethyl-4-piperidine
BMDP	3,4-methylenedioxy-N-benzylcathinone
EMB-FUBINACA	ethyl 2-(1-(4-fluorobenzyl)-1H-indazole-3-carboxamido)-3-methylbutanoate
FUB-144	(1-(4-fluorobenzyl)-1H-indol-3-yl)(2,2,3,3-tetramethylcyclopropyl)methanone
FUB-AMB	methyl 2-(1-(4-fluorobenzyl)-1H-indazole-3-carboxamido)-3-methylbutanoate
MDA	3,4-methylenedioxyamphetamine
MDMA	3,4-methylenedioxymethamphetamine
MDMB-4en-PINACA	methyl 3,3-dimethyl-2-(1-(pent-4-en-1-yl)-1H-indazole-3-carboxamido)butanoate

Highlights

- From January 1, 2020, through June 30, 2020, an estimated 355,104 distinct drug cases were submitted to State and local laboratories in the United States and analyzed by September 30, 2020. From these cases, an estimated 612,426 drug reports were identified. The total number of drugs reported to the National Forensic Laboratory Information System (NFLIS) for the NFLIS-Drug 2020 Midyear Report is substantially lower than the number reported in the previous year. Please see the Notice of Decrease in Drug Reports on page ii.
- Methamphetamine was the most frequently identified drug (177,794 reports), followed by cannabis/THC (98,243 reports), cocaine (79,467 reports), fentanyl (49,284 reports), and heroin (46,476 reports). These five most frequently identified drugs accounted for approximately 74% of all drug reports.
- In the first half of 2020, methamphetamine accounted for 92% of identified phenethylamine reports, fentanyl accounted for 56% of identified narcotic analgesic reports, and alprazolam accounted for 42% of identified tranquilizer and depressant reports.
- Among identified synthetic cannabinoids, 5F-MDMB-PICA accounted for 30% of reports, while fluoro-MDMB-PICA, MDMB-4en-PINACA, and 4F-MDMB-BUTINACA accounted for another 36% of reports.
- Methamphetamine was the most frequently identified drug in the West (42%), Midwest (29%), and South (32%), while cocaine was the most frequently identified drug in the Northeast (22%).

Introduction

The National Forensic Laboratory Information System (NFLIS) is a program of the Drug Enforcement Administration (DEA), Diversion Control Division. NFLIS-Drug systematically collects drug identification results and associated information from drug cases submitted to and analyzed by Federal, State, and local forensic laboratories. These laboratories analyze controlled and noncontrolled substances secured in law enforcement operations across the country, making NFLIS-Drug an important resource in monitoring illicit drug use and trafficking, including the diversion of legally manufactured pharmaceuticals into illegal markets. NFLIS-Drug includes information on the specific substance and the characteristics of drug evidence, such as purity, quantity, and drug combinations. These data are used to support drug scheduling efforts and to inform drug policy and drug enforcement initiatives nationally and in local communities around the country.

NFLIS-Drug is a comprehensive information system that includes data from forensic laboratories that handle the Nation's drug analysis cases. The NFLIS-Drug participation rate, defined as the percentage of the national drug caseload represented by laboratories that have joined NFLIS, is currently more than 98%. NFLIS-Drug includes 50 State systems and 110 local or municipal laboratories/laboratory systems, representing a total of 286 individual laboratories. The NFLIS-Drug database also includes Federal data from DEA and U.S. Customs and Border Protection laboratories.

This publication presents the results of drug cases *submitted* to State and local laboratories from January 1, 2020, through June 30, 2020, that were *analyzed* by September 30, 2020. Data from Federal laboratories are also included in this publication. The data presented in this publication include *all* drugs mentioned in the laboratories' reported drug items.

Section 1 of this publication provides national and regional estimates for the 25 most frequently identified drugs, as well as national and regional trends for January through June of each year from 2006 through 2020. Section 2 presents estimates of specific drugs by drug category. Caution should be used when interpreting the estimates and trends for January through June 2020 because of the substantial decrease in reporting likely due to the impacts of COVID-19 (see the Notice of Decrease in Drug Reports on page ii). All estimates are based on the NEAR approach (National Estimates Based on All Reports). A detailed description of the methods used in preparing these estimates is provided in the current NFLIS Statistical Methodology publication at https://www.nflis.deadiversion.usdoj.gov/DesktopModules/ReportDownloads/Reports/NFLIS-2017-StatMethodology.pdf.

Appendix A presents national and regional trends for 2001 through the first half of 2020 for both semiannual reference periods (i.e., January through June and July through December) each year. Appendix B includes a list of NFLIS-Drug participating and reporting laboratories. The benefits and limitations of NFLIS-Drug are presented in Appendix C.

Participating Laboratories, by U.S. Census Region

Note: See Appendix B for a list of NFLIS-Drug participating and reporting forensic laboratories.

Section 1: National and Regional Estimates

This section presents national and regional estimates of drugs *submitted* to State and local laboratories from January 1, 2020, through June 30, 2020, that were *analyzed* by September 30, 2020 (see Table 1.1). National and regional drug estimates include *all* drug reports mentioned in laboratories' reported drug items. National drug case estimates are also presented (see Table 1.2). In addition, trends are presented for selected drugs for January through June of each year from 2006 through 2020.

The NEAR approach (National Estimates Based on All Reports) was used to produce estimates for the Nation and for the U.S. census regions. The NEAR approach uses all NFLIS-Drug reporting laboratories. A detailed description of the methods used in preparing these estimates is provided in the current NFLIS Statistical Methodology publication.

Table 1.1 *National and Regional Estimates for the 25 Most Frequently Identified Drugs*[1]
Estimated number and percentage of total drug reports submitted to laboratories from January 1, 2020, through June 30, 2020, and analyzed by September 30, 2020[2]

Drug	National		West		Midwest		Northeast		South	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Methamphetamine	177,794	29.03%	44,256	42.34%	41,665	28.55%	6,129	6.73%	85,744	31.66%
Cannabis/THC	98,243	16.04%	13,904	13.30%	21,273	14.58%	18,559	20.37%	44,507	16.43%
Cocaine	79,467	12.98%	6,287	6.01%	17,154	11.75%	20,276	22.26%	35,750	13.20%
Fentanyl	49,284	8.05%	5,560	5.32%	15,011	10.29%	14,140	15.52%	14,573	5.38%
Heroin	46,476	7.59%	13,230	12.66%	9,863	6.76%	9,556	10.49%	13,828	5.11%
Alprazolam	9,792	1.60%	1,452	1.39%	1,916	1.31%	1,044	1.15%	5,380	1.99%
Buprenorphine	8,638	1.41%	862	0.82%	1,954	1.34%	1,492	1.64%	4,330	1.60%
Oxycodone	8,331	1.36%	933	0.89%	1,888	1.29%	1,412	1.55%	4,096	1.51%
Eutylone	5,118	0.84%	14	0.01%	792	0.54%	323	0.35%	3,989	1.47%
Amphetamine	4,571	0.75%	426	0.41%	1,202	0.82%	583	0.64%	2,360	0.87%
Hydrocodone	4,529	0.74%	587	0.56%	1,059	0.73%	148	0.16%	2,736	1.01%
ANPP	4,458	0.73%	447	0.43%	1,145	0.78%	1,726	1.89%	1,140	0.42%
Tramadol	3,886	0.63%	233	0.22%	1,280	0.88%	873	0.96%	1,501	0.55%
Clonazepam	3,089	0.50%	240	0.23%	694	0.48%	433	0.48%	1,721	0.64%
MDMA	2,672	0.44%	830	0.79%	824	0.56%	201	0.22%	817	0.30%
Acetyl fentanyl	2,337	0.38%	26	0.03%	1,090	0.75%	621	0.68%	600	0.22%
Flualprazolam	2,327	0.38%	229	0.22%	886	0.61%	177	0.19%	1,034	0.38%
Psilocin/psilocibin	2,237	0.37%	756	0.72%	601	0.41%	209	0.23%	671	0.25%
5F-MDMB-PICA	2,177	0.36%	74	0.07%	429	0.29%	475	0.52%	1,200	0.44%
Naloxone	2,131	0.35%	132	0.13%	289	0.20%	331	0.36%	1,379	0.51%
Cannabidiol (CBD)	1,944	0.32%	262	0.25%	522	0.36%	129	0.14%	1,030	0.38%
Lysergic acid diethylamide (LSD)	1,941	0.32%	371	0.35%	717	0.49%	195	0.21%	658	0.24%
Phencyclidine (PCP)	1,705	0.28%	154	0.15%	327	0.22%	343	0.38%	881	0.33%
Etizolam	1,502	0.25%	197	0.19%	253	0.17%	89	0.10%	963	0.36%
Gabapentin	1,369	0.22%	78	0.07%	270	0.18%	248	0.27%	772	0.29%
Top 25 Total	526,018	85.89%	91,541	87.57%	123,104	84.35%	79,714	87.49%	231,659	85.53%
All Other Drug Reports	86,408	14.11%	12,995	12.43%	22,833	15.65%	11,393	12.51%	39,187	14.47%
Total Drug Reports[3]	612,426	100.00%	104,536	100.00%	145,937	100.00%	91,107	100.00%	270,846	100.00%

[1] *Sample n's and 95% confidence intervals for all estimates are available on request.*

[2] *For most drugs, the January through June 2020 estimate shows a substantial decrease likely due to the impacts of COVID-19 and should not be compared with previous years' estimates.*

[3] *Numbers and percentages may not sum to totals because of rounding.*

Table 1.2

National Case Estimates
Top 25 estimated number of drug-specific cases and their percentage of distinct cases, January 1, 2020, through June 30, 2020[1]

Drug	Number	Percent
Methamphetamine	139,148	39.19%
Cannabis/THC	73,951	20.83%
Cocaine	63,667	17.93%
Fentanyl	39,678	11.17%
Heroin	37,842	10.66%
Alprazolam	8,639	2.43%
Buprenorphine	7,659	2.16%
Oxycodone	6,928	1.95%
ANPP	4,167	1.17%
Hydrocodone	4,068	1.15%
Amphetamine	4,009	1.13%
Eutylone	3,547	1.00%
Tramadol	3,401	0.96%
Clonazepam	2,882	0.81%
MDMA	2,136	0.60%
Naloxone	2,031	0.57%
Flualprazolam	2,025	0.57%
Psilocin/psilocibin	1,993	0.56%
Acetyl fentanyl	1,935	0.54%
5F-MDMB-PICA	1,874	0.53%
Lysergic acid diethylamide (LSD)	1,773	0.50%
Phencyclidine (PCP)	1,572	0.44%
Cannabidiol (CBD)	1,496	0.42%
Etizolam	1,309	0.37%
Gabapentin	1,192	0.34%
Top 25 Total	418,923	117.97%
All Other Drugs	68,306	19.24%
Total All Drugs[2]	487,228	137.21%[3]

[1] *For most drugs, the January through June 2020 estimate shows a substantial decrease likely due to the impacts of COVID-19 and should not be compared with previous years' estimates.*

[2] *Numbers and percentages may not sum to totals because of rounding.*

[3] *Multiple drugs can be reported within a single case, so the cumulative percentage exceeds 100%. The estimated national total of distinct case percentages is based on 355,104 distinct cases submitted to State and local laboratories from January 1, 2020, through June 30, 2020, and analyzed by September 30, 2020.*

Drugs Reported by Federal Laboratories

The majority of drug reports presented in this section are from the eight U.S. Drug Enforcement Administration (DEA) laboratories. The data reflect results of substance evidence from drug seizures, undercover drug buys, and other evidence analyzed at DEA laboratories located across the country. DEA data include results for drug cases submitted by DEA agents, other Federal law enforcement agencies, and select local police agencies. Although DEA data capture both domestic and international drug cases, the results presented in this section describe only those drugs obtained within the United States. In addition to drug reports from DEA, reports from seven U.S. Customs and Border Protection (CBP) laboratories are also included.

Most Frequently Reported Drugs by Federal Laboratories[1]
Number and percentage of drug reports submitted to laboratories from January 1, 2020, through June 30, 2020, and analyzed by September 30, 2020

Drug	Number	Percent
Methamphetamine	6,184	26.45%
Cocaine	2,585	11.06%
Fentanyl	2,214	9.47%
Heroin	1,979	8.47%
Cannabis/THC	682	2.92%
Tramadol	299	1.28%
Oxycodone	191	0.82%
Xylazine	183	0.78%
ANPP	172	0.74%
MDMA	170	0.73%
All Other Drug Reports	8,717	37.29%
Total Drug Reports[2]	23,376	100.00%

[1] *Federal drug reports in this table include 20,452 reports from DEA laboratories and 2,924 reports from CBP laboratories.*

[2] *Numbers and percentages may not sum to totals because of rounding.*

Drug Trends

The remainder of this section presents national and regional trends of selected drugs submitted to State and local laboratories from January 1 through June 30 and analyzed by September 30 of each year for the most recent 15 years (from 2006 through 2020). Figures 1.1 through 1.16 present national and regional trends for the following prescription drugs: fentanyl, alprazolam, buprenorphine, oxycodone, amphetamine, and hydrocodone. Trends for methamphetamine, cannabis/THC, cocaine, heroin, eutylone, and MDMA are also presented. National and regional trends for 2001 through the first half of 2020 for both semiannual reference periods (i.e., January through June and July through December) each year are presented in Appendix A. The total number of drugs reported to NFLIS for the NFLIS-Drug 2020 Midyear Report is substantially lower than the total number reported in the previous year. The decrease in reporting is likely due to the impacts of COVID-19 on drug availability and law enforcement and laboratory operations. As a result, comparisons of data from January through June 2020 with data from previous years are not presented.

National drug trends

Figure 1.1 National trend estimates for fentanyl, alprazolam, and buprenorphine, January–June 2006 to January–June 2020

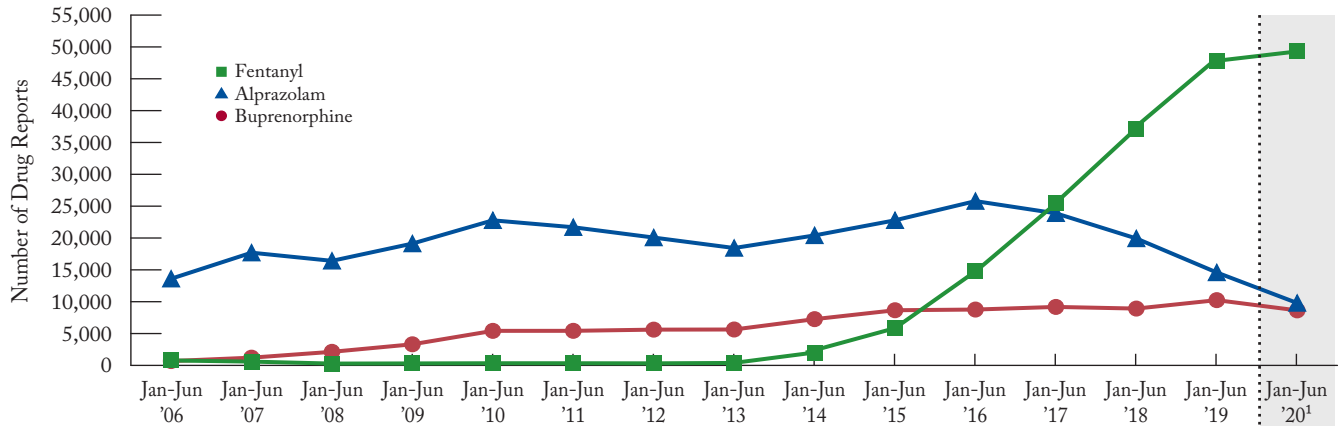
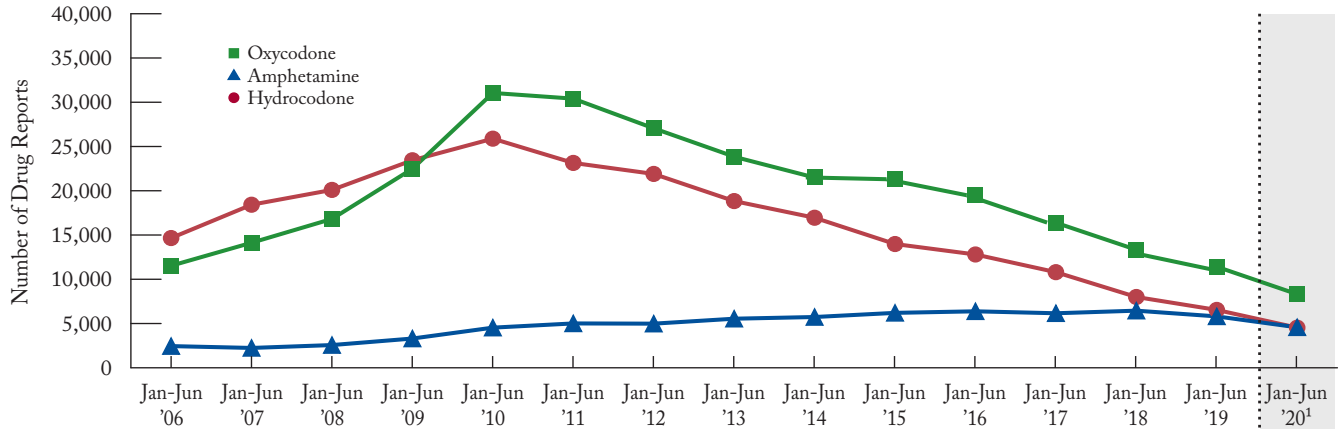


Figure 1.2 National trend estimates for oxycodone, amphetamine, and hydrocodone, January–June 2006 to January–June 2020



Note: Estimates are shown for the first half of each year from January to June 2006 through January to June 2020.

[1]For most drugs, the January through June 2020 estimate shows a substantial decrease likely due to the impacts of COVID-19. The shaded estimates should not be compared with previous years' estimates.

Figure 1.3 National trend estimates for methamphetamine, cannabis/THC, and cocaine, January–June 2006 to January–June 2020

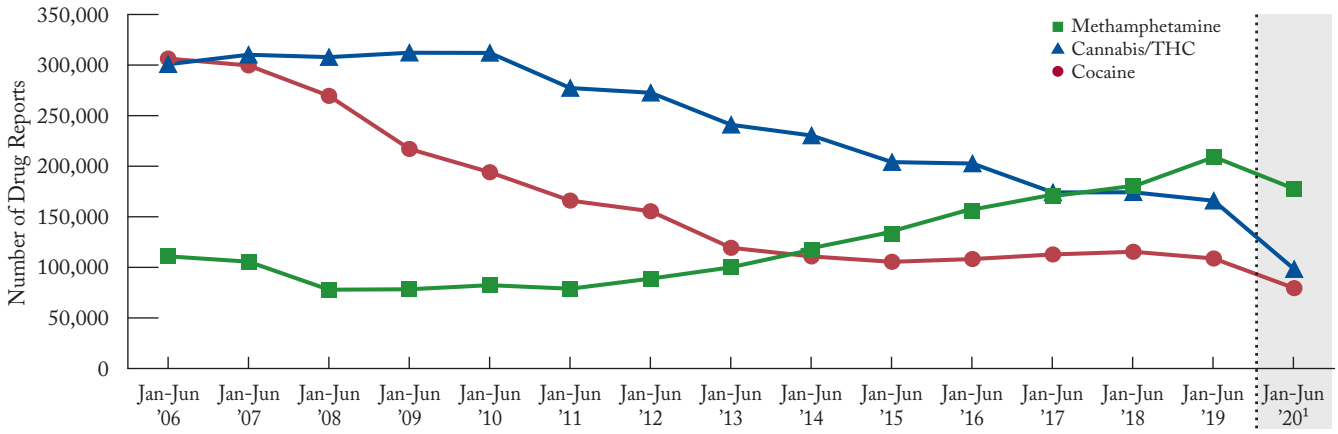
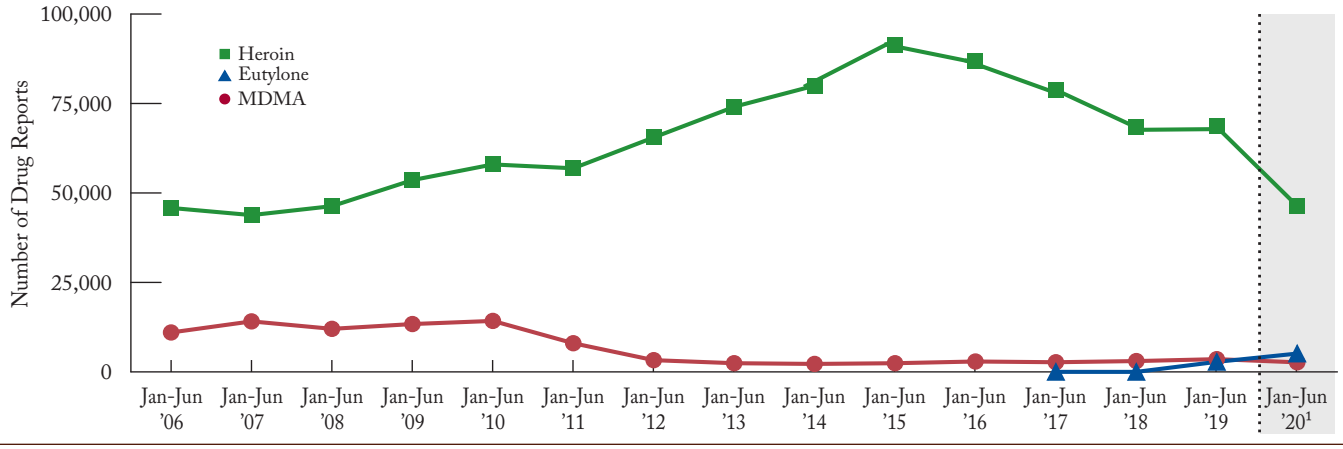


Figure 1.4 National trend estimates for heroin, eutylone, and MDMA, January–June 2006 to January–June 2020[2]



Note: Estimates are shown for the first half of each year from January to June 2006 through January to June 2020.

[1]For most drugs, the January through June 2020 estimate shows a substantial decrease likely due to the impacts of COVID-19. The shaded estimates should not be compared with previous years' estimates.

[2]Estimates are not available for eutylone for 2006 through 2016 because eutylone was first reported to NFLIS in the first half of 2017.


Brick of fentanyl

Figure 1.5 Regional trends in fentanyl reported per 100,000 persons aged 15 or older, January–June 2006 to January–June 2020

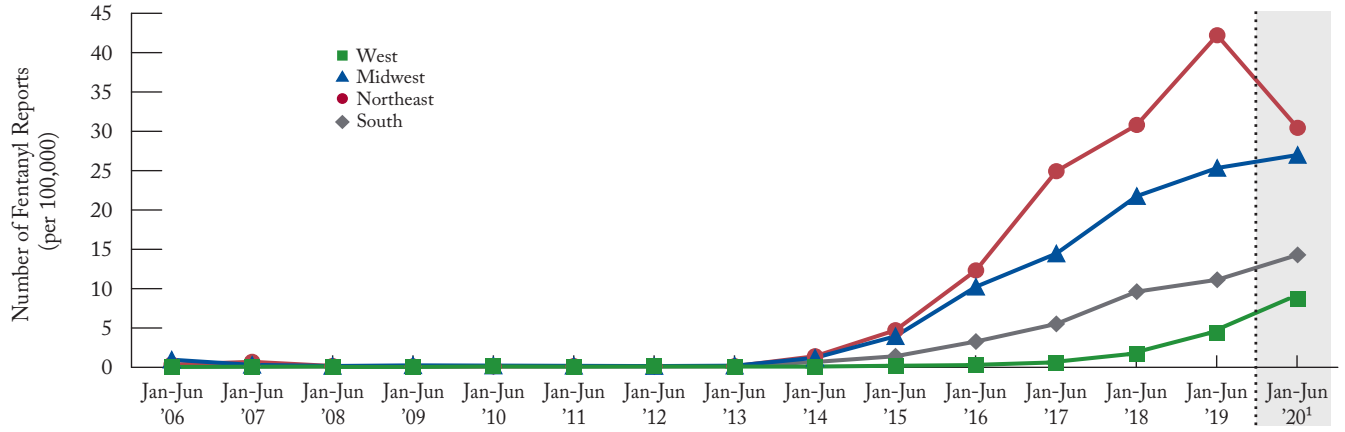


Figure 1.6 Regional trends in alprazolam reported per 100,000 persons aged 15 or older, January–June 2006 to January–June 2020

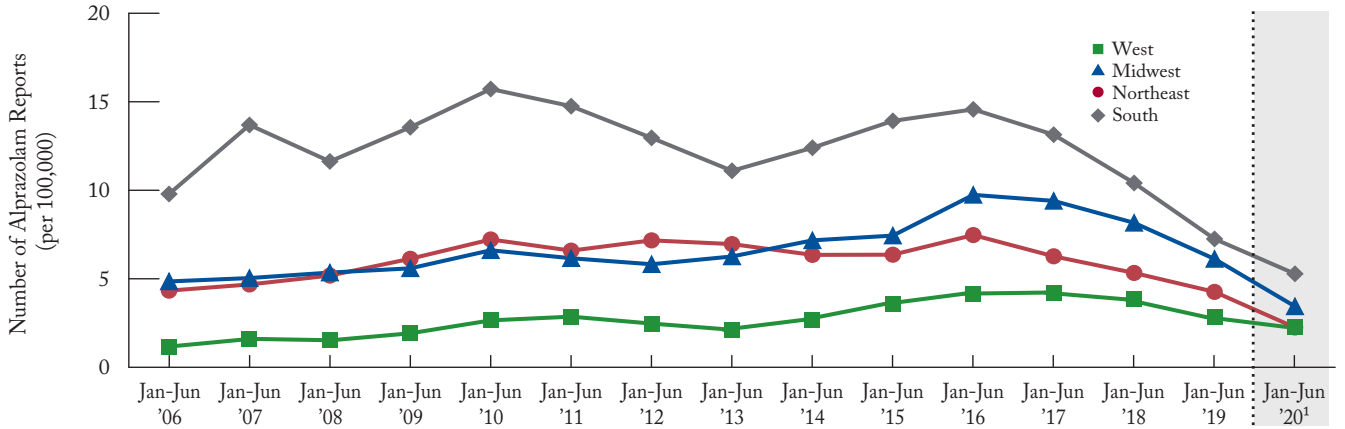
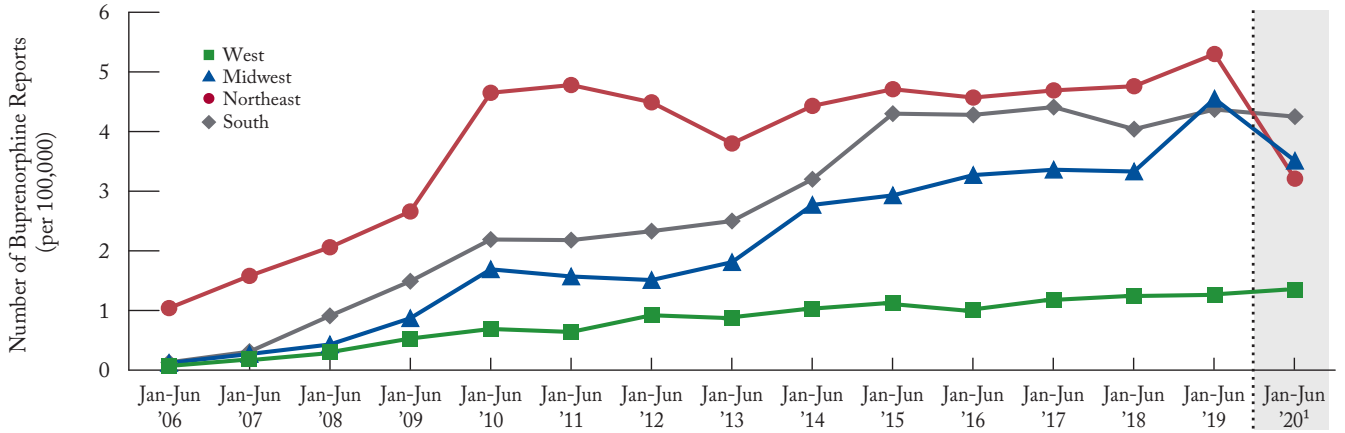


Figure 1.7 Regional trends in buprenorphine reported per 100,000 persons aged 15 or older, January–June 2006 to January–June 2020



Note: Estimates are shown for the first half of each year from January to June 2006 through January to June 2020. U.S. Census 2020 population data by age were not available for this publication. Population data for 2020 were imputed.

[1]For most drugs, the January through June 2020 estimate shows a substantial decrease likely due to the impacts of COVID-19. The shaded estimates should not be compared with previous years' estimates.

Figure 1.8 Regional trends in oxycodone reported per 100,000 persons aged 15 or older, January–June 2006 to January–June 2020

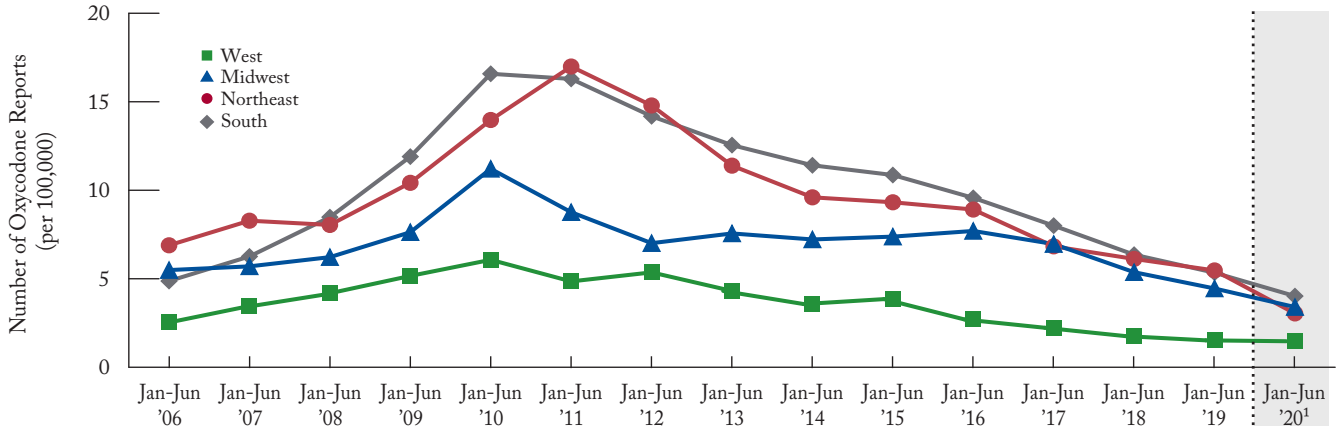


Figure 1.9 Regional trends in amphetamine reported per 100,000 persons aged 15 or older, January–June 2006 to January–June 2020

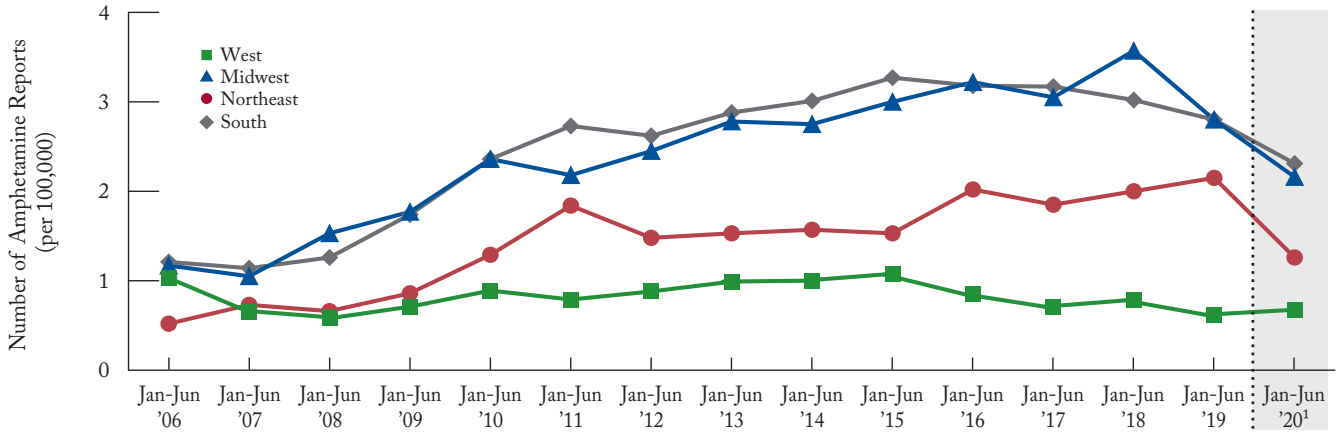
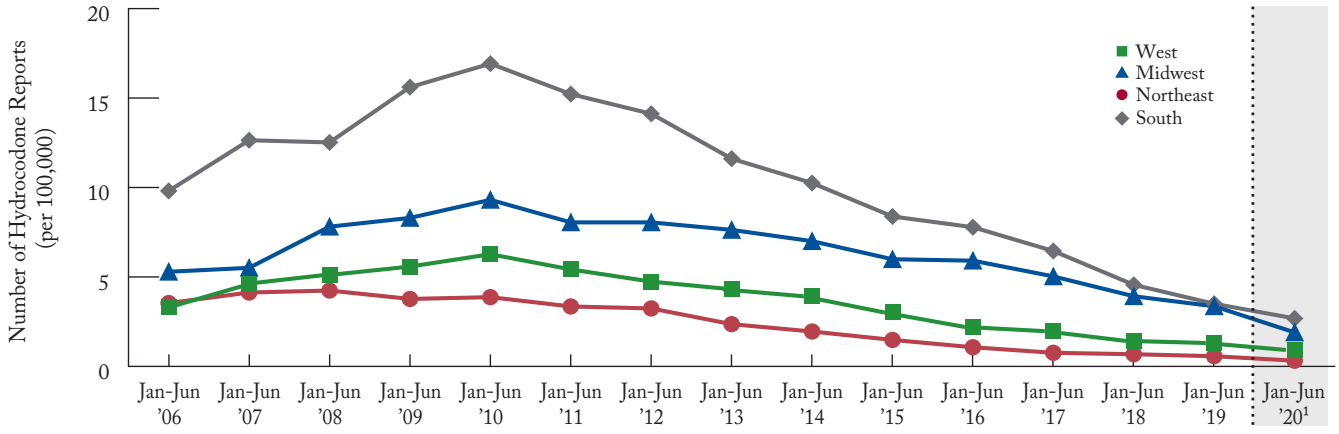


Figure 1.10 Regional trends in hydrocodone reported per 100,000 persons aged 15 or older, January–June 2006 to January–June 2020



Note: Estimates are shown for the first half of each year from January to June 2006 through January to June 2020. U.S. Census 2020 population data by age were not available for this publication. Population data for 2020 were imputed.

[1]For most drugs, the January through June 2020 estimate shows a substantial decrease likely due to the impacts of COVID-19. The shaded estimates should not be compared with previous years' estimates.

Figure 1.11 Regional trends in methamphetamine reported per 100,000 persons aged 15 or older, January–June 2006 to January–June 2020

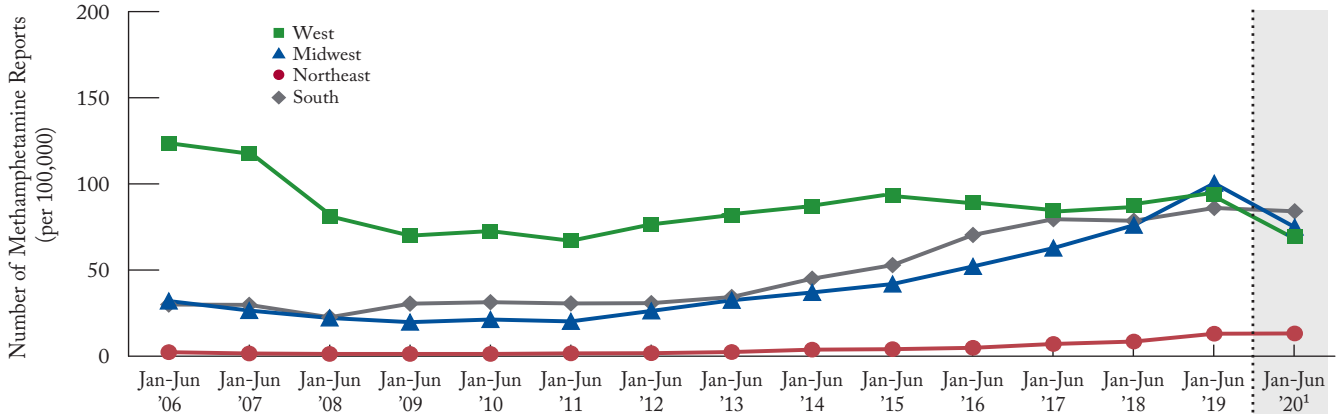


Figure 1.12 Regional trends in cannabis/THC reported per 100,000 persons aged 15 or older, January–June 2006 to January–June 2020

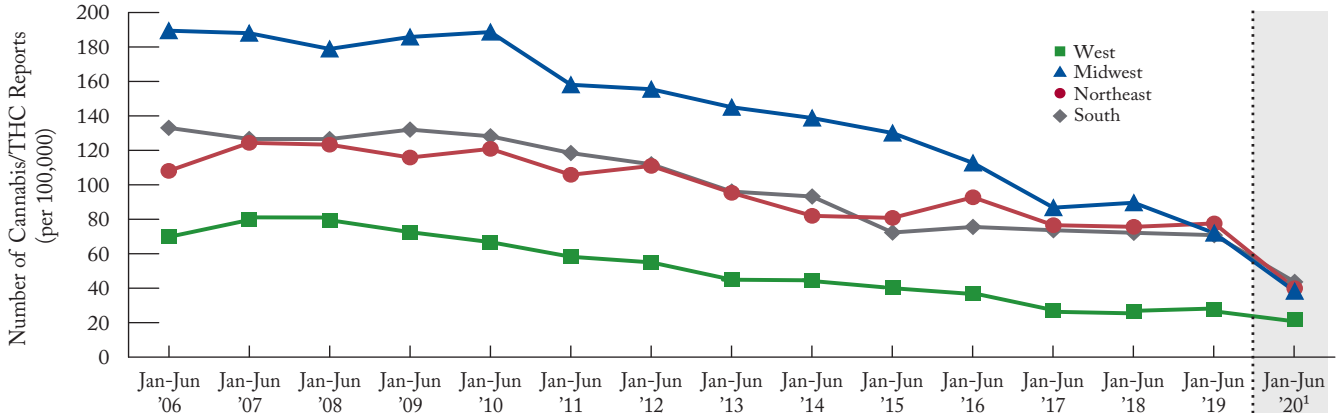
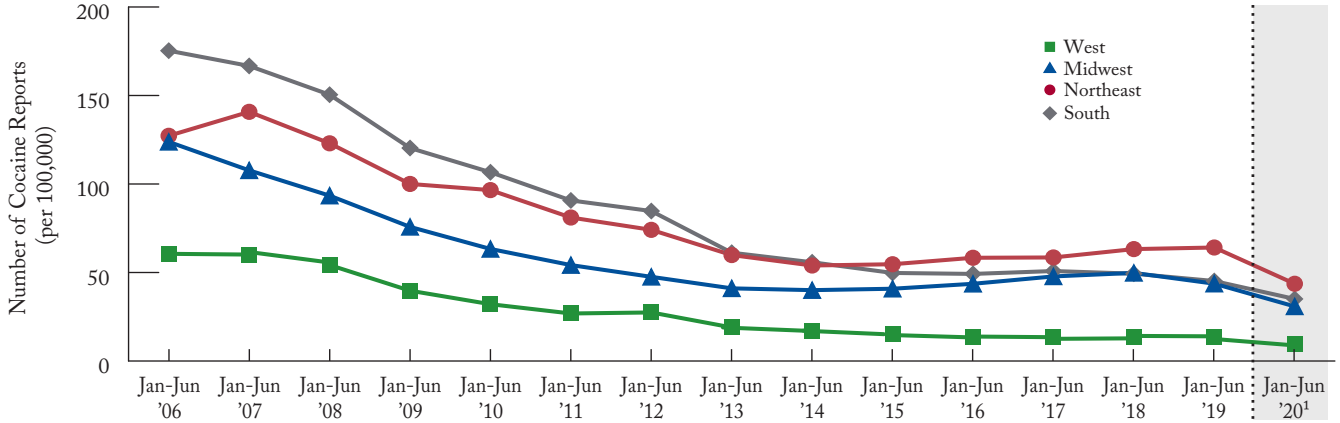


Figure 1.13 Regional trends in cocaine reported per 100,000 persons aged 15 or older, January–June 2006 to January–June 2020



Note: Estimates are shown for the first half of each year from January to June 2006 through January to June 2020. U.S. Census 2020 population data by age were not available for this publication. Population data for 2020 were imputed.

[1]For most drugs, the January through June 2020 estimate shows a substantial decrease likely due to the impacts of COVID-19. The shaded estimates should not be compared with previous years' estimates.

Figure 1.14 Regional trends in heroin reported per 100,000 persons aged 15 or older, January–June 2006 to January–June 2020

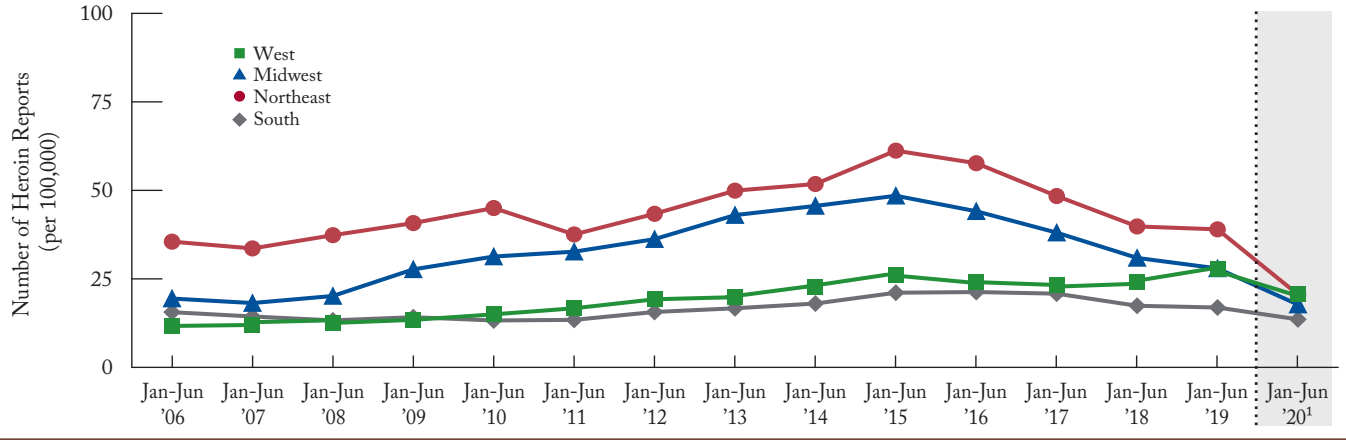


Figure 1.15 Regional trends in eutylone reported per 100,000 persons aged 15 or older, January–June 2006 to January–June 2020[2]

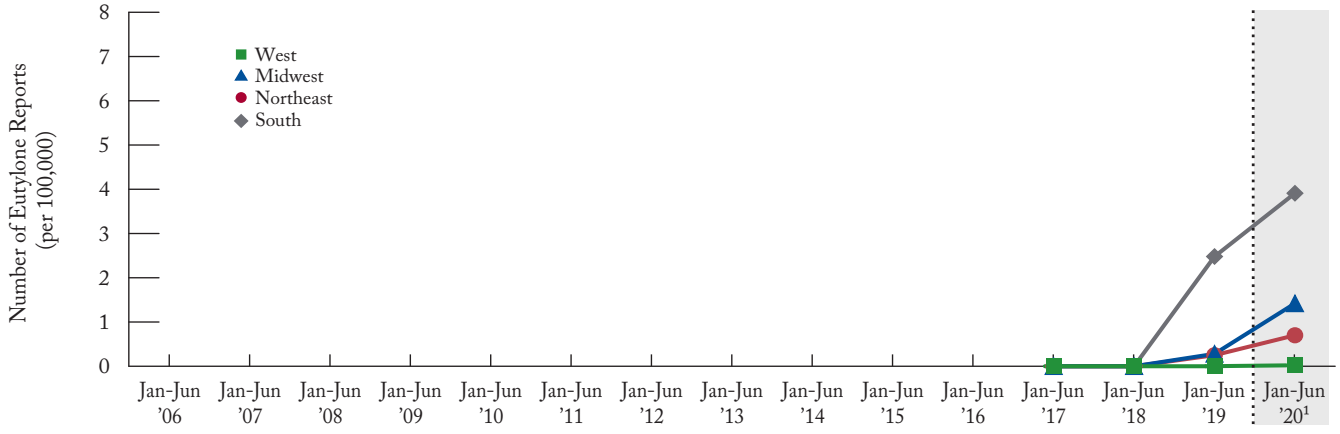
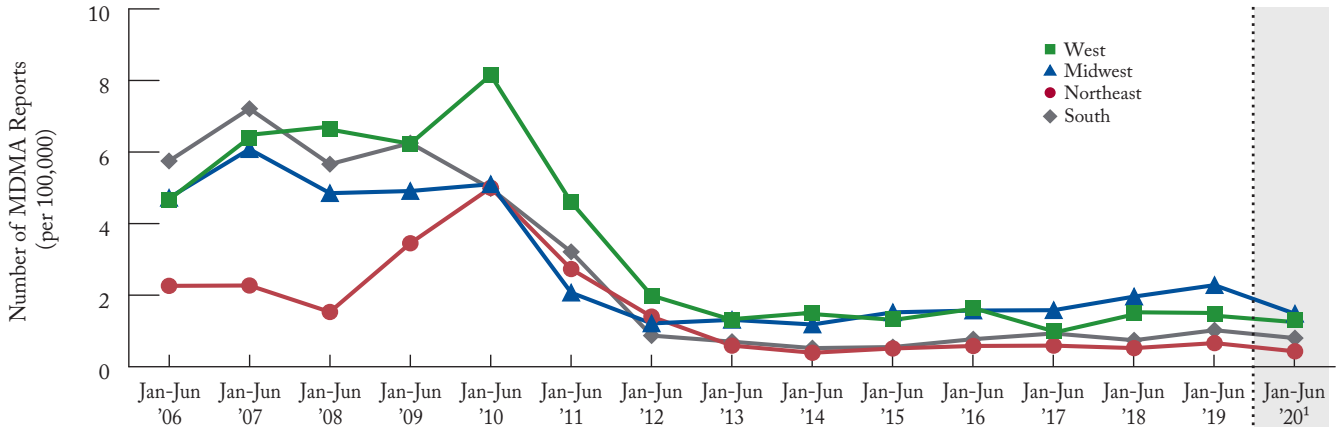


Figure 1.16 Regional trends in MDMA reported per 100,000 persons aged 15 or older, January–June 2006 to January–June 2020



Note: Estimates are shown for the first half of each year from January to June 2006 through January to June 2020. U.S. Census 2020 population data by age were not available for this publication. Population data for 2020 were imputed.

[1] *For most drugs, the January through June 2020 estimate shows a substantial decrease likely due to the impacts of COVID-19. The shaded estimates should not be compared with previous years' estimates.*

[2] *Estimates are not available for eutylone for 2006 through 2016 because eutylone was first reported to NFLIS in 2017.*

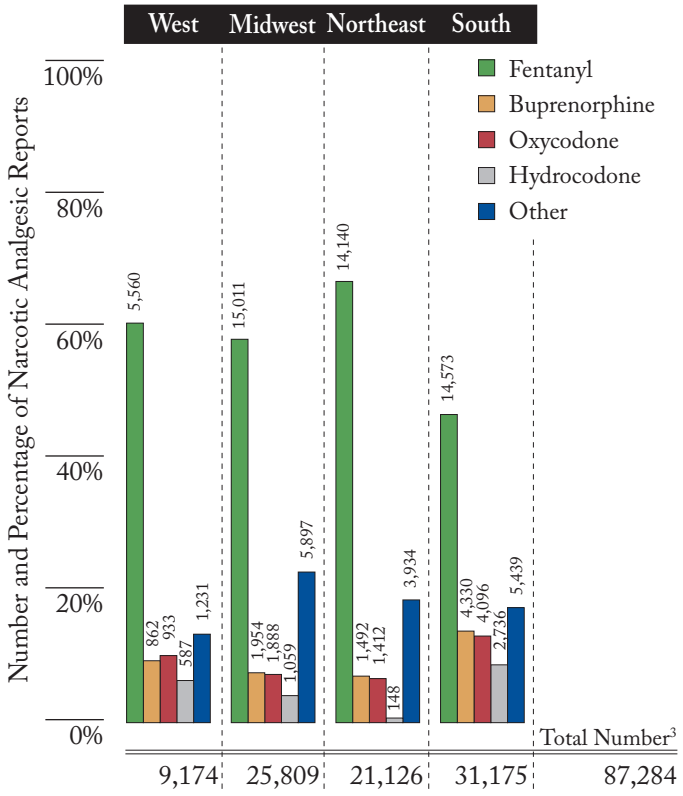
Section 2: Major Drug Categories

This section presents estimates of reports of specific drugs by major drug category using the NEAR approach. All drugs mentioned in laboratories' drug items are included in the counts. Drug categories presented in this section include narcotic analgesics, tranquilizers and depressants, anabolic steroids, phenethylamines, and synthetic cannabinoids. A total of 612,426 drug reports were submitted to State and local laboratories from January 1, 2020, through June 30, 2020, and analyzed by September 30, 2020.

Table 2.1 *NARCOTIC ANALGESICS*
Number and percentage of narcotic analgesic reports in the United States, January 2020–June 2020[1]

Narcotic Analgesic Reports	Number	Percent
Fentanyl	49,284	56.46%
Buprenorphine	8,638	9.90%
Oxycodone	8,331	9.54%
Hydrocodone	4,529	5.19%
ANPP[2]	4,458	5.11%
Tramadol	3,886	4.45%
Acetyl fentanyl	2,337	2.68%
Morphine	1,241	1.42%
Carfentanil	1,210	1.39%
Methadone	717	0.82%
Codeine	708	0.81%
Hydromorphone	564	0.65%
Valeryl fentanyl	319	0.37%
Oxymorphone	169	0.19%
Mitragynine	129	0.15%
Other narcotic analgesics	766	0.88%
Total Narcotic Analgesic Reports[3]	87,284	100.00%
Total Drug Reports	612,426	

Figure 2.1 Distribution of narcotic analgesic reports within region, January 2020–June 2020[1]



[1] *Includes drug reports submitted to laboratories from January 1, 2020, through June 30, 2020, that were analyzed by September 30, 2020. For most drugs, the January through June 2020 estimate shows a substantial decrease likely due to the impacts of COVID-19 and should not be compared with previous years' estimates.*

[2] *Because of the interest in fentanyl and fentanyl-related compounds, ANPP, an immediate precursor of fentanyl and not a narcotic analgesic, is shown in this table.*

[3] *Numbers and percentages may not sum to totals because of rounding.*

Table 2.2 *TRANQUILIZERS AND DEPRESSANTS*

Number and percentage of tranquilizer and depressant reports in the United States, January 2020–June 2020[1]

Tranquilizer and Depressant Reports	Number	Percent
Alprazolam	9,792	41.74%
Clonazepam	3,089	13.17%
Flualprazolam	2,327	9.92%
Phencyclidine (PCP)	1,705	7.27%
Etizolam	1,502	6.40%
Diazepam	984	4.19%
Ketamine	863	3.68%
Clonazolam	627	2.67%
Lorazepam	516	2.20%
Carisoprodol	396	1.69%
Zolpidem	302	1.29%
Cyclobenzaprine	220	0.94%
Hydroxyzine	176	0.75%
Adinazolam	167	0.71%
Flubromazolam	130	0.56%
Other tranquilizers and depressants	662	2.82%
Total Tranquilizer and Depressant Reports[2]	23,458	100.00%
Total Drug Reports	612,426	

Figure 2.2 Distribution of tranquilizer and depressant reports within region, January 2020–June 2020[1]

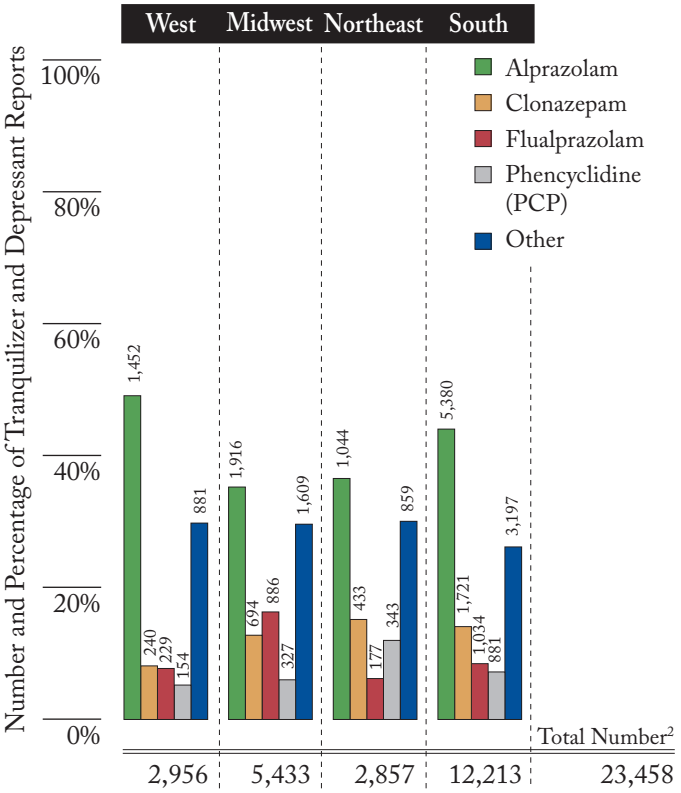
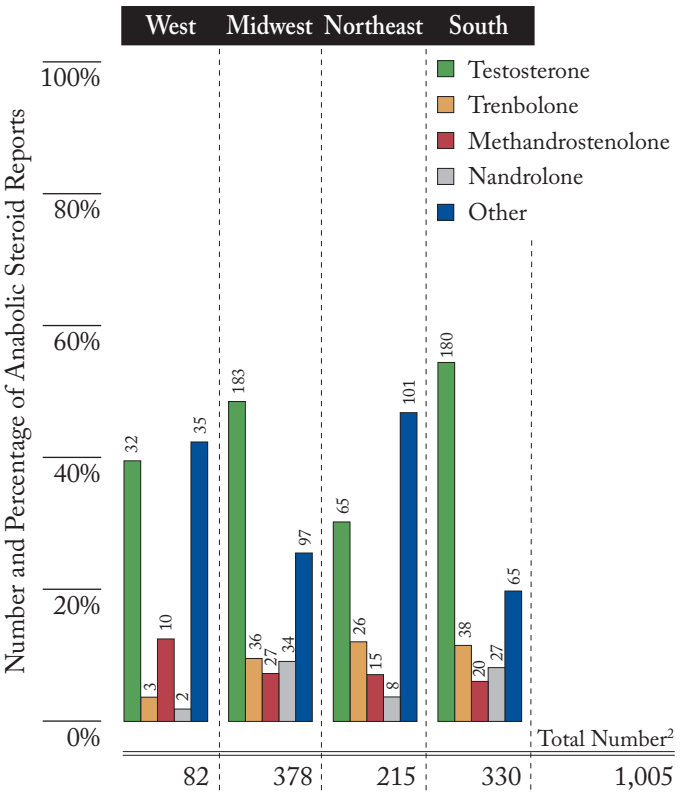


Table 2.3 *ANABOLIC STEROIDS*

Number and percentage of anabolic steroid reports in the United States, January 2020–June 2020[1]

Anabolic Steroid Reports	Number	Percent
Testosterone	460	45.83%
Trenbolone	103	10.27%
Methandrostenolone	73	7.27%
Nandrolone	71	7.05%
Stanozolol	54	5.39%
Boldenone	40	4.00%
Oxandrolone	39	3.93%
Oxymetholone	35	3.52%
Mesterolone	22	2.20%
Drostanolone	17	1.72%
Methenolone	10	0.95%
Methasterone	9	0.90%
Dehydrochloromethyltestosterone	7	0.70%
Fluoxymesterone	6	0.60%
Mestanolone	5	0.50%
Other anabolic steroids	52	5.18%
Total Anabolic Steroid Reports[2]	1,005	100.00%
Total Drug Reports	612,426	

Figure 2.3 Distribution of anabolic steroid reports within region, January 2020–June 2020[1]



[1] *Includes drug reports submitted to laboratories from January 1, 2020, through June 30, 2020, that were analyzed by September 30, 2020. For most drugs, the January through June 2020 estimate shows a substantial decrease likely due to the impacts of COVID-19 and should not be compared with previous years' estimates.*

[2] *Numbers and percentages may not sum to totals because of rounding.*

Table 2.4 *PHENETHYLAMINES*

Number and percentage of phenethylamine reports in the United States, January 2020–June 2020[1]

Phenethylamine Reports	Number	Percent
Methamphetamine	177,794	91.69%
Eutylone	5,118	2.64%
Amphetamine	4,571	2.36%
MDMA	2,672	1.38%
Benzphetamine	424	0.22%
Lisdexamfetamine	416	0.21%
MDA	383	0.20%
BMDP	246	0.13%
alpha-PiHP	245	0.13%
N-Ethylpentylone	195	0.10%
Phentermine	157	0.08%
alpha-PHP	101	0.05%
N-Butylpentylone	78	0.04%
Ethylone	71	0.04%
Butylpentylone	55	0.03%
Other phenethylamines	1,390	0.72%
Total Phenethylamine Reports[2]	193,917	100.00%
Total Drug Reports	612,426	

Figure 2.4 Distribution of phenethylamine reports within region, January 2020–June 2020[1]

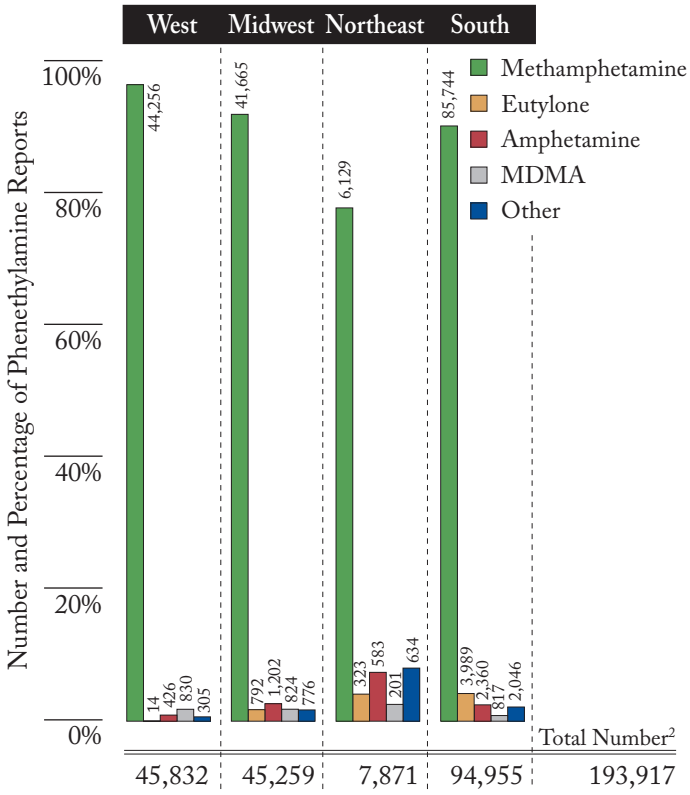
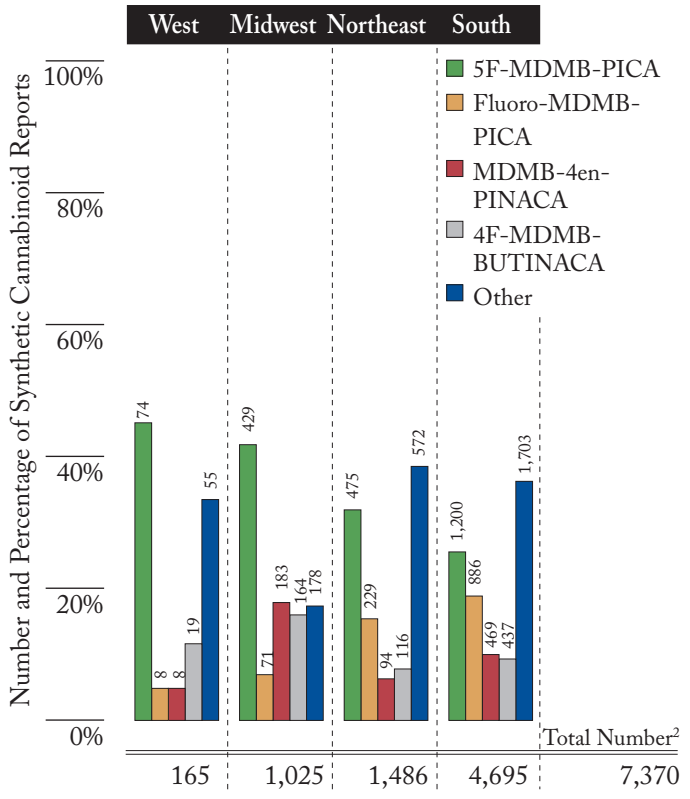


Table 2.5 *SYNTHETIC CANNABINOIDS*

Number and percentage of synthetic cannabinoid reports in the United States, January 2020–June 2020[1]

Synthetic Cannabinoid Reports	Number	Percent
5F-MDMB-PICA	2,177	29.55%
Fluoro-MDMB-PICA	1,194	16.20%
MDMB-4en-PINACA	754	10.23%
4F-MDMB-BUTINACA	737	9.99%
Fluoro-MDMB-BUTINACA	219	2.97%
5F-ADB	105	1.43%
FUB-AMB	82	1.11%
FUB-144	72	0.98%
Fluoro-EMB-PICA	68	0.92%
5F-EDMB-PINACA	56	0.76%
5F-EMB-PICA	41	0.56%
Fluoro-MDMB-BUTICA	24	0.33%
4F-MDMB-BUTICA	24	0.32%
EMB-FUBINACA	22	0.30%
ADB-FUBINACA	21	0.28%
Other synthetic cannabinoids	1,775	24.09%
Total Synthetic Cannabinoid Reports[2]	7,370	100.00%
Total Drug Reports	612,426	

Figure 2.5 Distribution of synthetic cannabinoid reports within region, January 2020–June 2020[1]



[1] *Includes drug reports submitted to laboratories from January 1, 2020, through June 30, 2020, that were analyzed by September 30, 2020. For most drugs, the January through June 2020 estimate shows a substantial decrease likely due to the impacts of COVID-19 and should not be compared with previous years' estimates.*

[2] *Numbers and percentages may not sum to totals because of rounding.*

Appendix A LONG-TERM TREND GRAPHS

Figure A.1 National trend estimates for fentanyl, alprazolam, and buprenorphine, January 2001–June 2020[1]

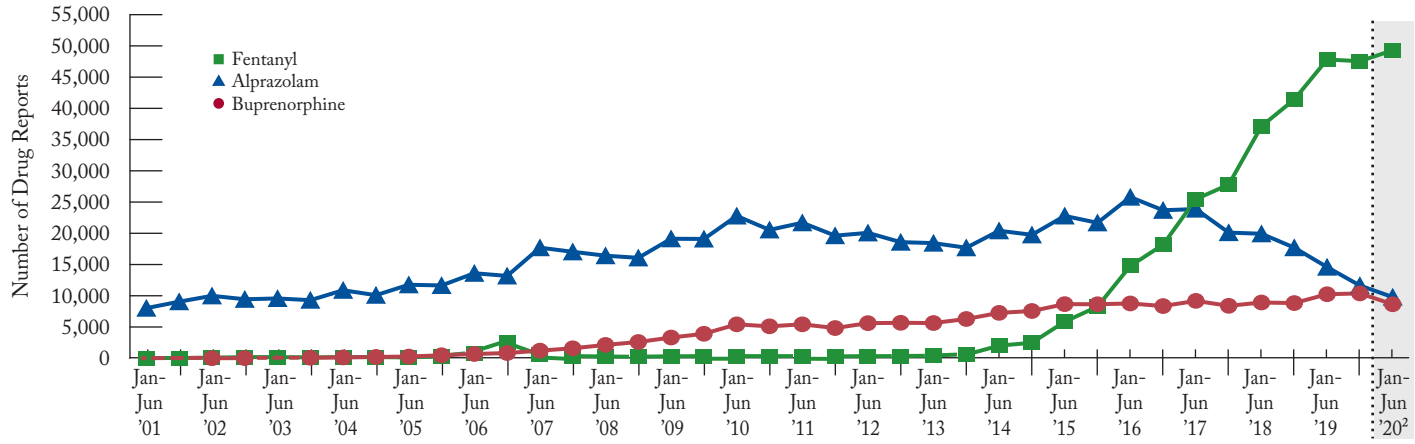


Figure A.2 National trend estimates for oxycodone, amphetamine, and hydrocodone, January 2001–June 2020

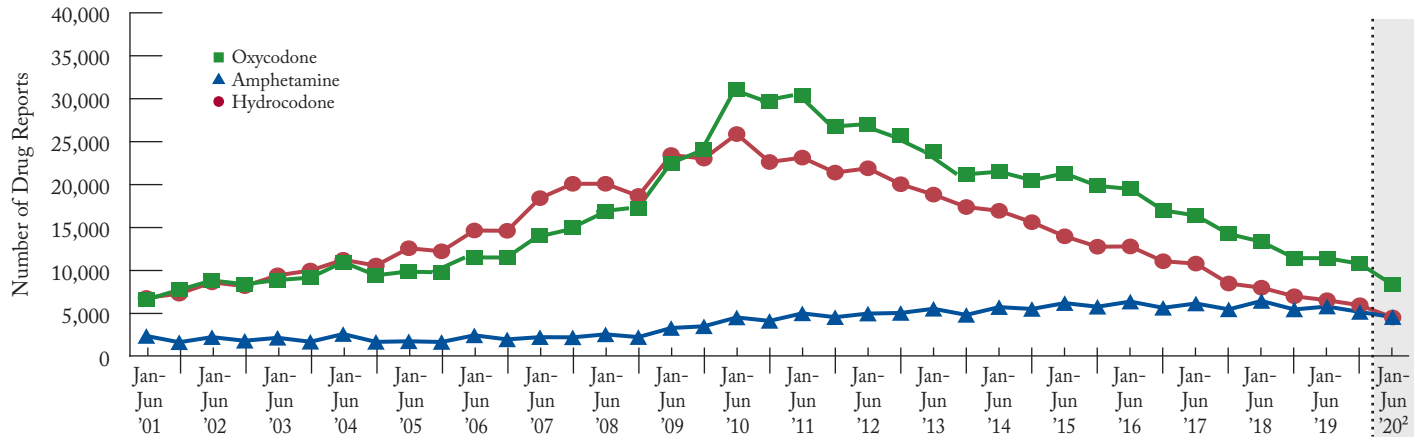
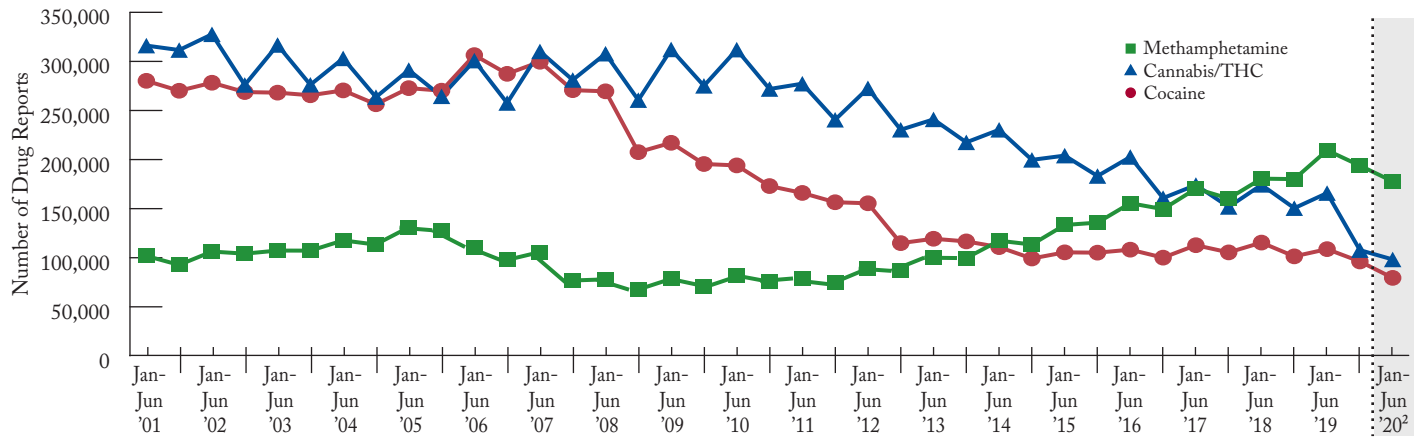


Figure A.3 National trend estimates for methamphetamine, cannabis/THC, and cocaine, January 2001–June 2020



Note: Estimates are shown in half-year increments for each year from January to June 2001 through January to June 2020.

[1] A dashed trend line indicates that estimates did not meet the criteria for precision or reliability. See the current NFLIS Statistical Methodology publication for a more detailed description of the methods used in preparing these estimates.

[2] For most drugs, the January through June 2020 estimate shows a substantial decrease likely due to the impacts of COVID-19. The shaded estimates should not be compared with previous years' estimates.

Figure A.4 National trend estimates for heroin, eutylone, and MDMA, January 2001–June 2020[1]

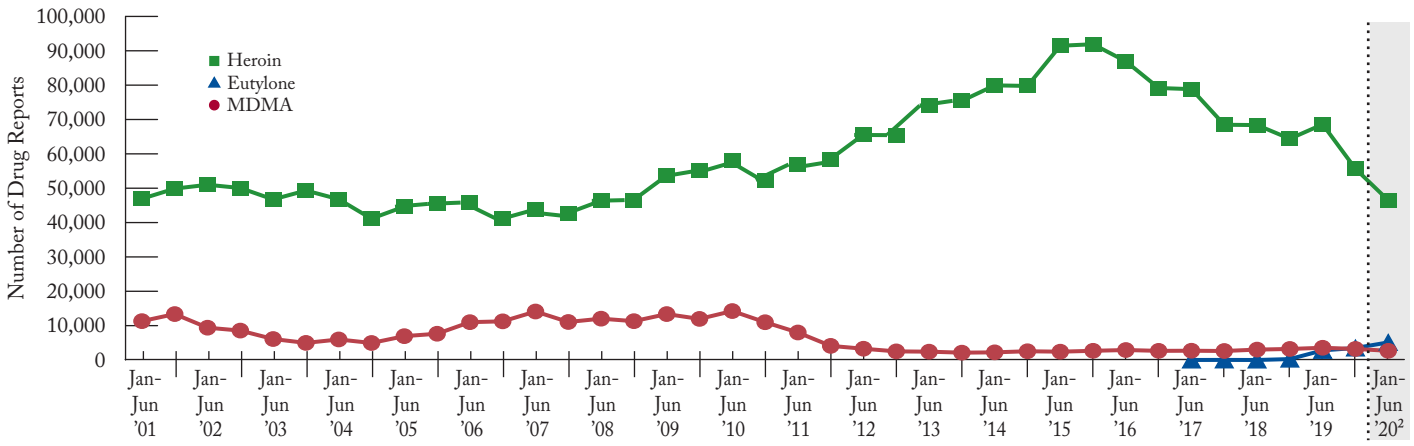


Figure A.5 Regional trends in fentanyl reported per 100,000 persons aged 15 or older, January 2001–June 2020[3]

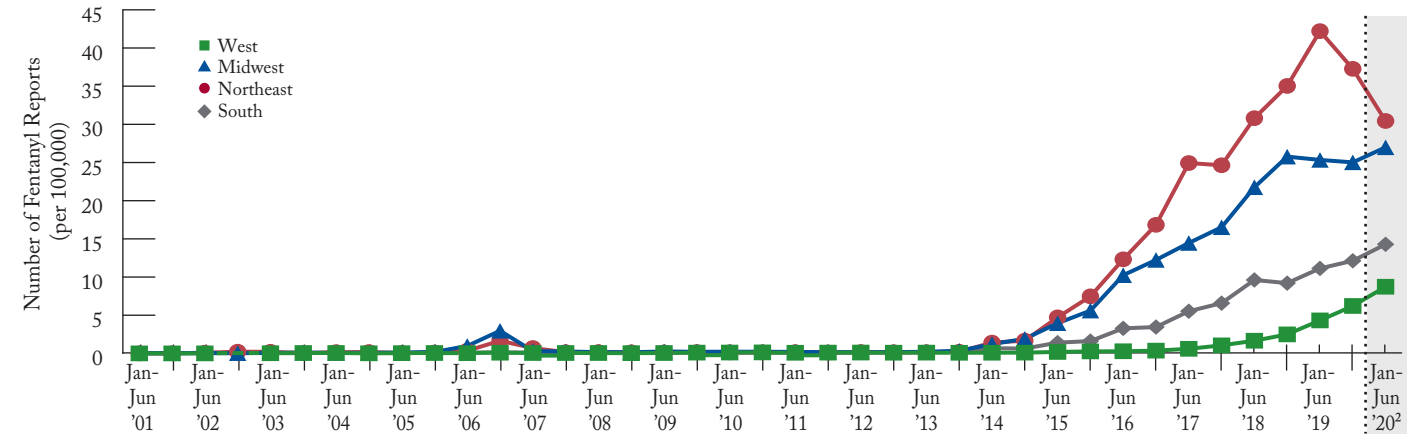
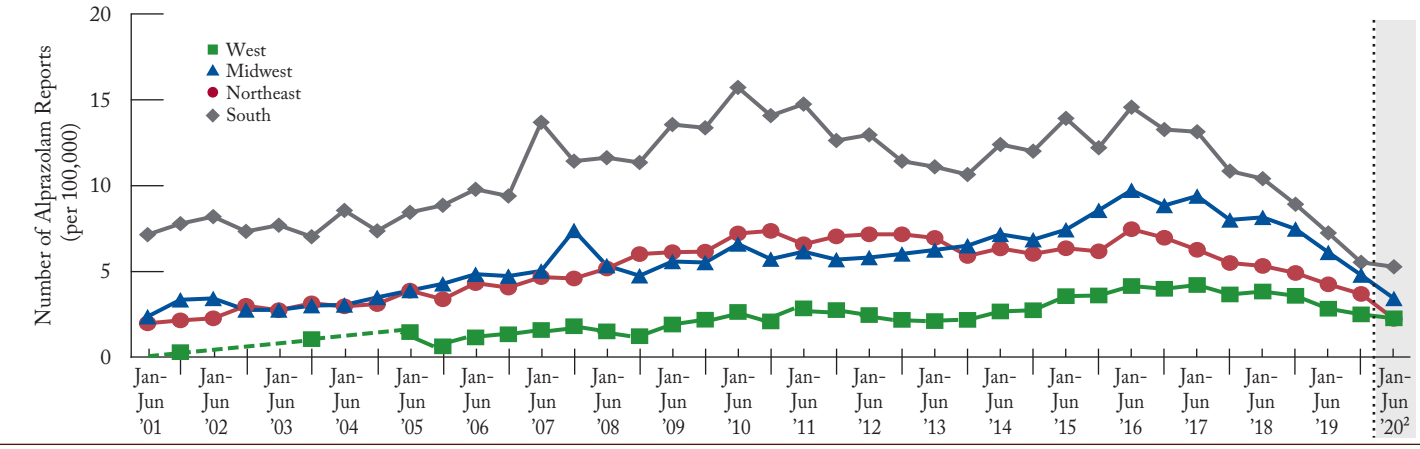


Figure A.6 Regional trends in alprazolam reported per 100,000 persons aged 15 or older, January 2001–June 2020[3]



Note: Estimates are shown in half-year increments for each year from January to June 2001 through January to June 2020. U.S. Census 2020 population data by age were not available for this publication. Population data for 2020 were imputed.

[1] Estimates are not available for eutylone for 2006 through 2016 because eutylone was first reported to NFLIS in the first half of 2017.

[2] For most drugs, the January through June 2020 estimate shows a substantial decrease likely due to the impacts of COVID-19. The shaded estimates should not be compared with previous years' estimates.

[3] A dashed trend line indicates that estimates did not meet the criteria for precision or reliability. See the current NFLIS Statistical Methodology publication for a more detailed description of the methods used in preparing these estimates.

Figure A.7 Regional trends in buprenorphine reported per 100,000 persons aged 15 or older, January 2001–June 2020[1]

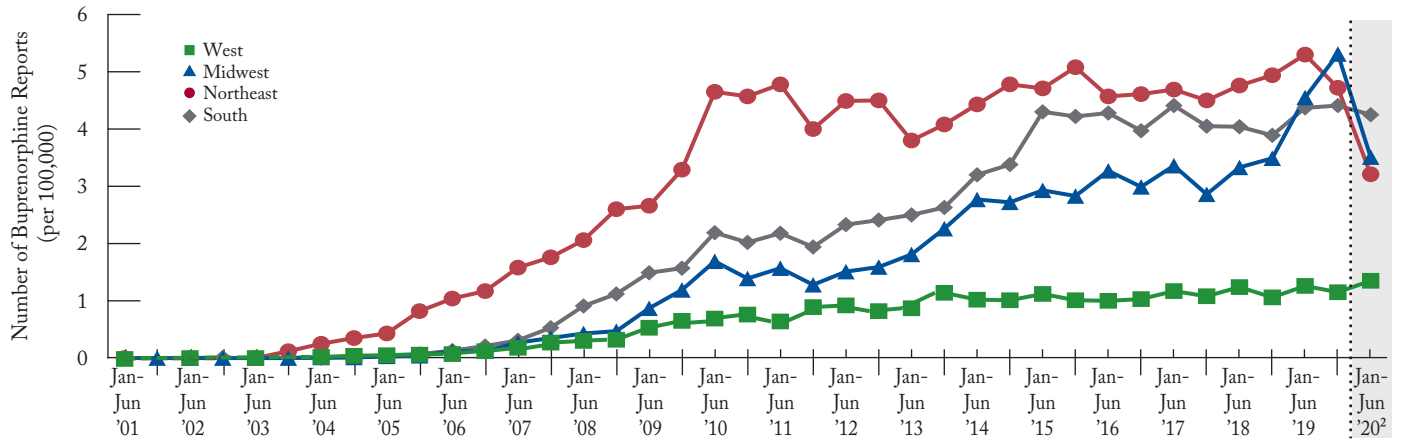


Figure A.8 Regional trends in oxycodone reported per 100,000 persons aged 15 or older, January 2001–June 2020[1]

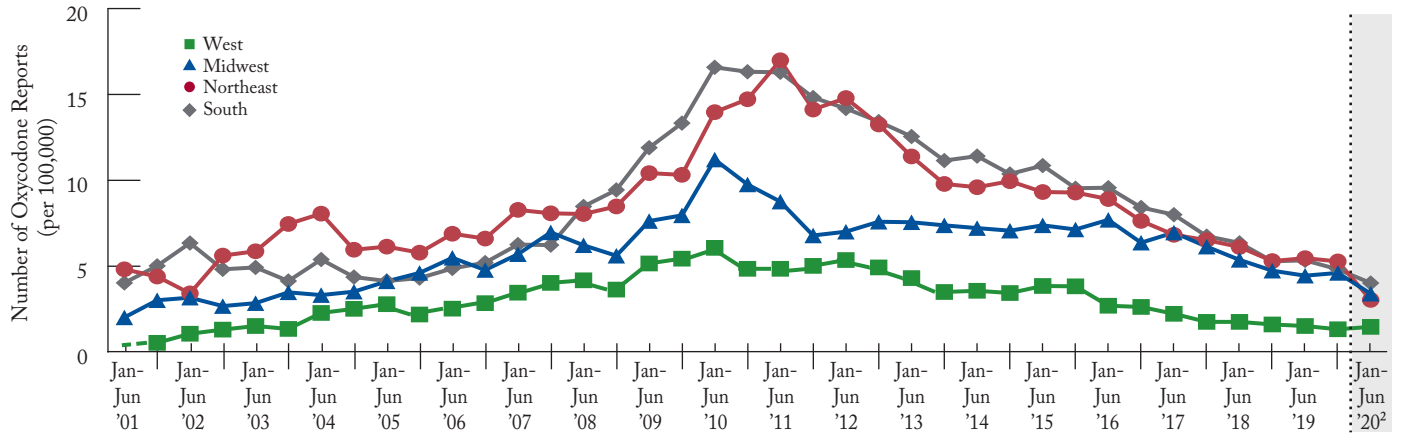
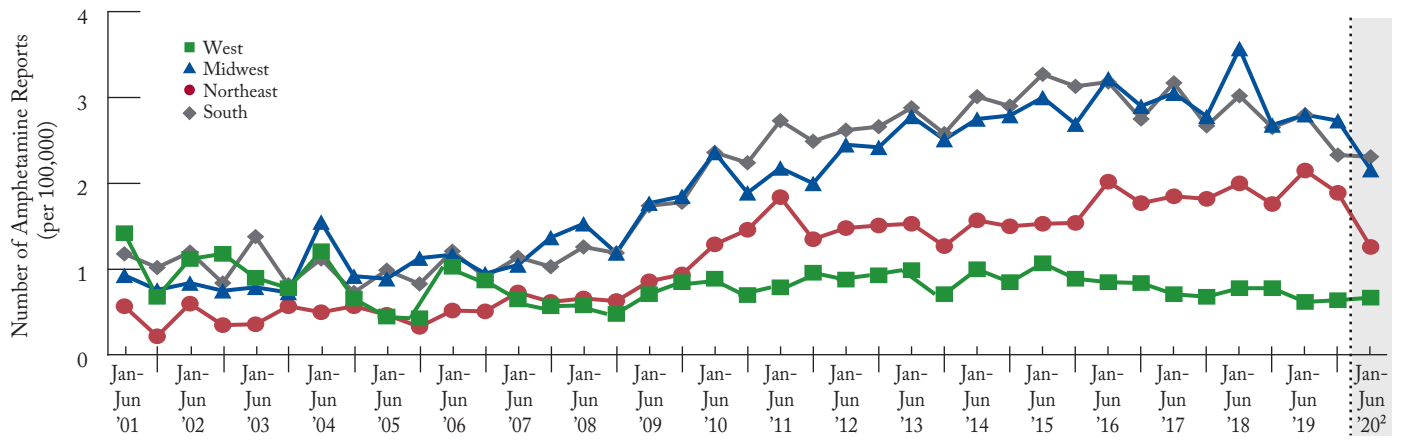


Figure A.9 Regional trends in amphetamine reported per 100,000 persons aged 15 or older, January 2001–June 2020



Note: Estimates are shown in half-year increments for each year from January to June 2001 through January to June 2020. U.S. Census 2020 population data by age were not available for this publication. Population data for 2020 were imputed.

[1] A dashed trend line indicates that estimates did not meet the criteria for precision or reliability. See the current NFLIS Statistical Methodology publication for a more detailed description of the methods used in preparing these estimates.

[2] For most drugs, the January through June 2020 estimate shows a substantial decrease likely due to the impacts of COVID-19. The shaded estimates should not be compared with previous years' estimates.

Figure A.10 Regional trends in hydrocodone reported per 100,000 persons aged 15 or older, January 2001–June 2020

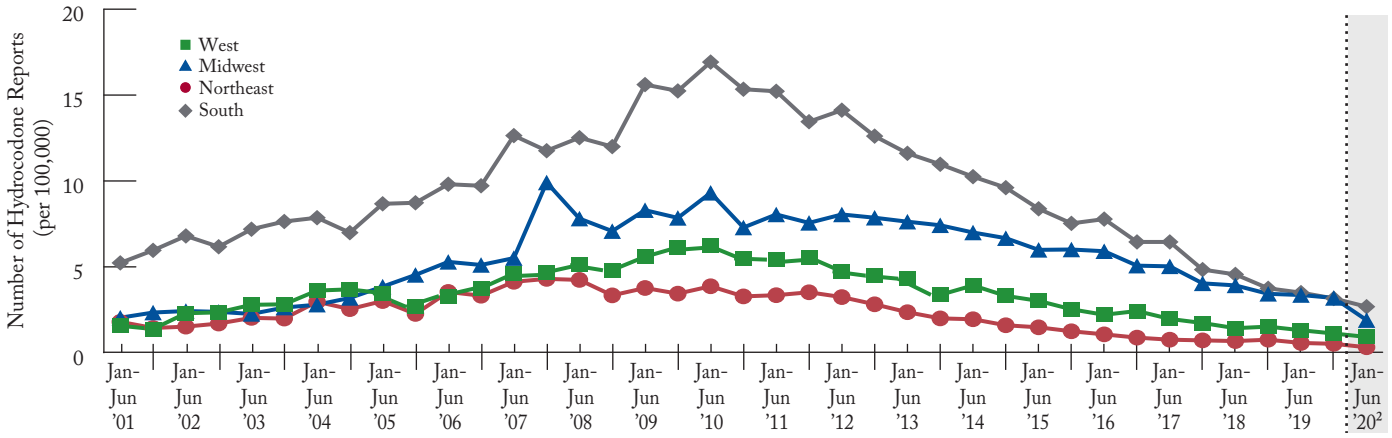


Figure A.11 Regional trends in methamphetamine reported per 100,000 persons aged 15 or older, January 2001–June 2020[1]

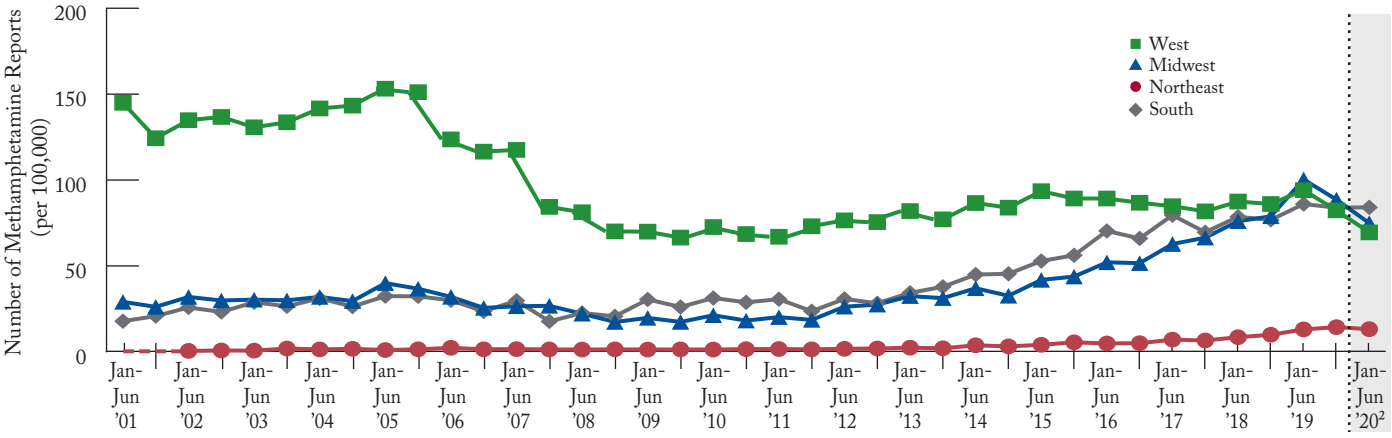
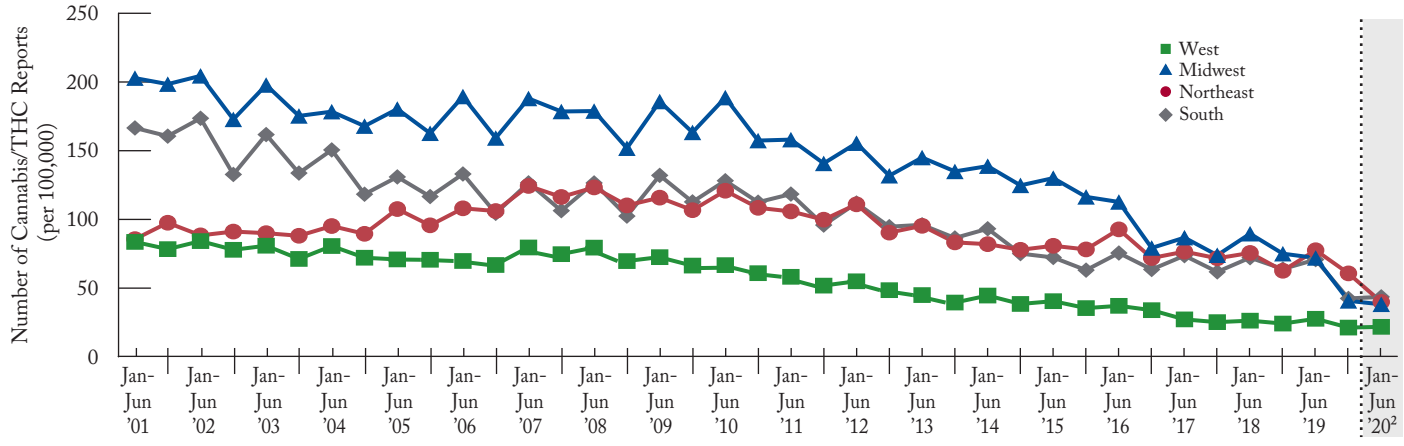


Figure A.12 Regional trends in cannabis/THC reported per 100,000 persons aged 15 or older, January 2001–June 2020



Note: Estimates are shown in half-year increments for each year from January to June 2001 through January to June 2020. U.S. Census 2020 population data by age were not available for this publication. Population data for 2020 were imputed.

[1] A dashed trend line indicates that estimates did not meet the criteria for precision or reliability. See the current NFLIS Statistical Methodology publication for a more detailed description of the methods used in preparing these estimates.

[2] For most drugs, the January through June 2020 estimate shows a substantial decrease likely due to the impacts of COVID-19. The shaded estimates should not be compared with previous years' estimates.

Figure A.13 Regional trends in cocaine reported per 100,000 persons aged 15 or older, January 2001–June 2020

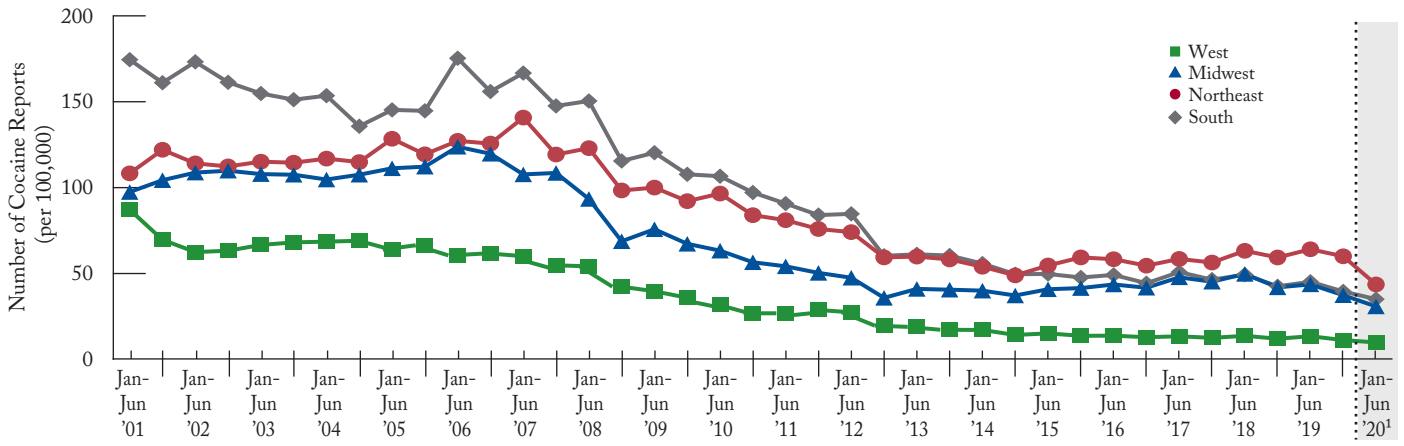


Figure A.14 Regional trends in heroin reported per 100,000 persons aged 15 or older, January 2001–June 2020

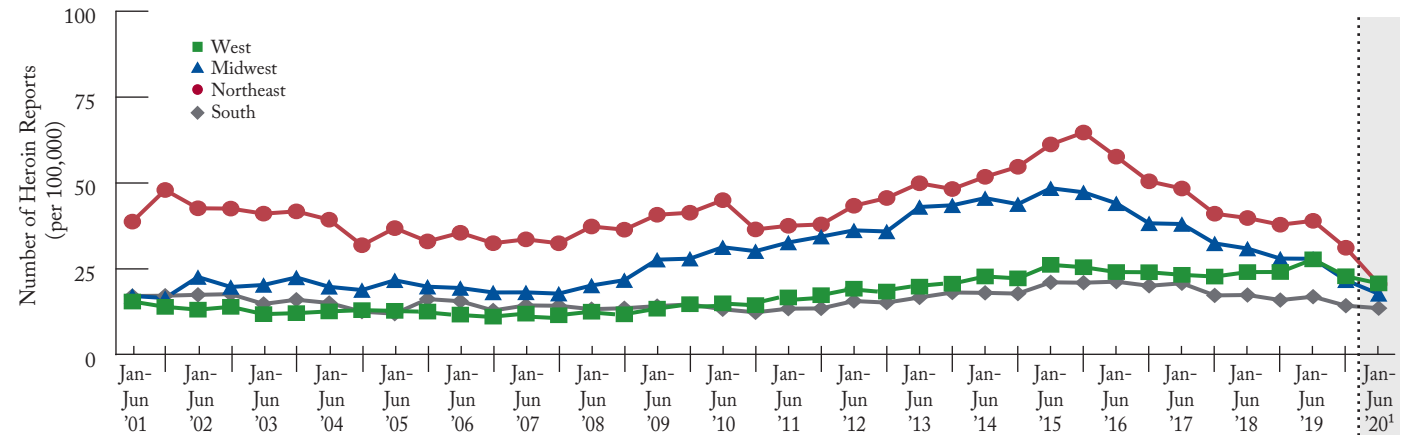
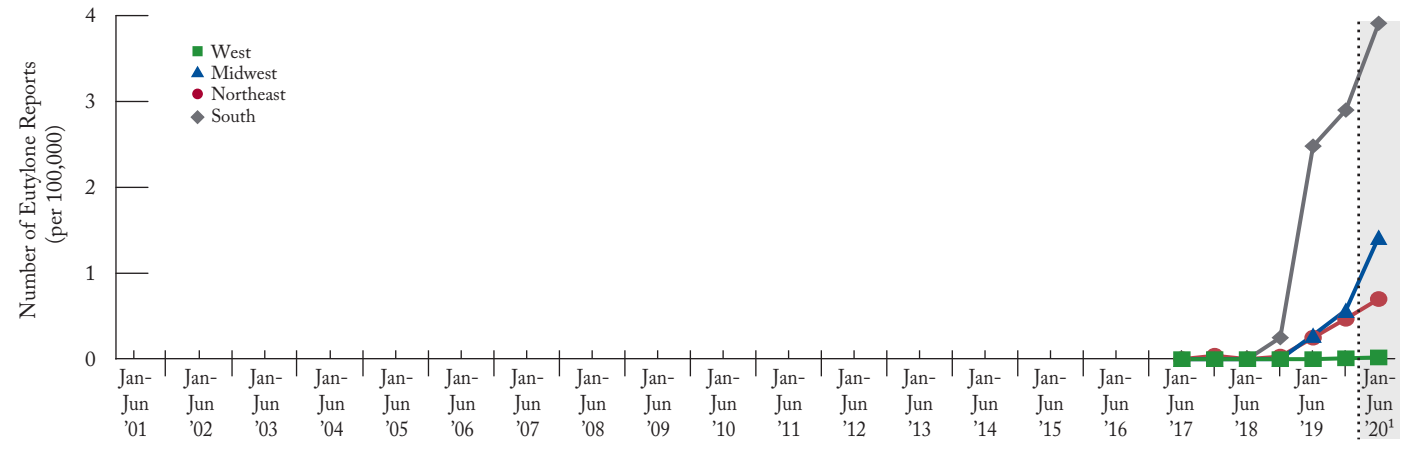


Figure A.15 Regional trends in eutylone reported per 100,000 persons aged 15 or older, January 2001–June 2020[2]

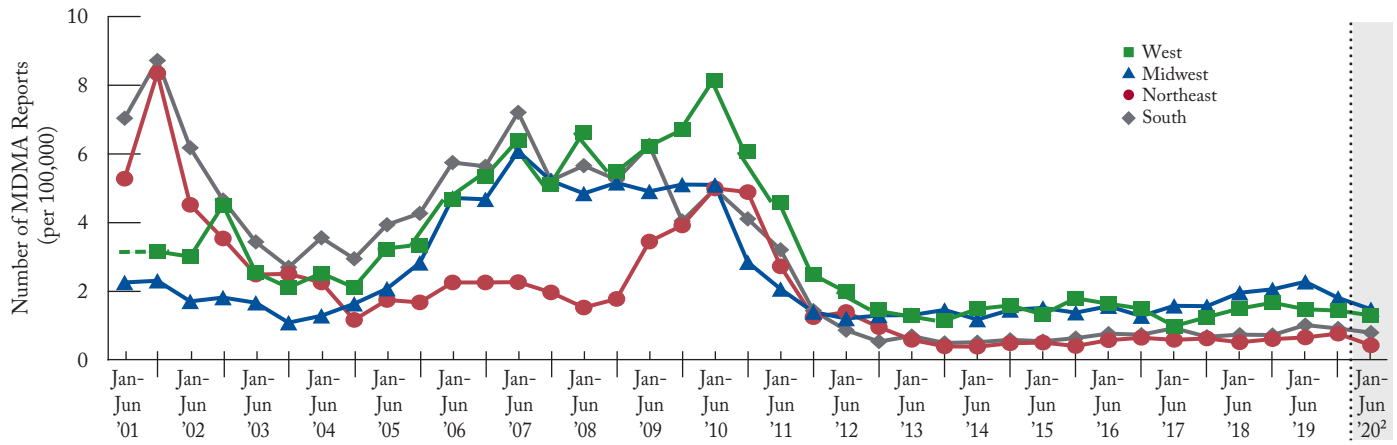


Note: Estimates are shown in half-year increments for each year from January to June 2001 through January to June 2020. U.S. Census 2020 population data by age were not available for this publication. Population data for 2020 were imputed.

[1] *For most drugs, the January through June 2020 estimate shows a substantial decrease likely due to the impacts of COVID-19. The shaded estimates should not be compared with previous years' estimates.*

[2] *Estimates are not available for eutylone for 2006 through 2016 because eutylone was first reported to NFLIS in the first half of 2017.*

Figure A.16 Regional trends in MDMA reported per 100,000 persons aged 15 or older, January 2001–June 2020[1]



Note: Estimates are shown in half-year increments for each year from January to June 2001 through January to June 2020. U.S. Census 2020 population data by age were not available for this publication. Population data for 2020 were imputed.

[1] *A dashed trend line indicates that estimates did not meet the criteria for precision or reliability. See the current NFLIS Statistical Methodology publication for a more detailed description of the methods used in preparing these estimates.*

[2] *For most drugs, the January through June 2020 estimate shows a substantial decrease likely due to the impacts of COVID-19. The shaded estimates should not be compared with previous years' estimates.*

Appendix B

NFLIS-Drug Participating and Reporting Forensic Laboratories

State	Lab Type	Laboratory Name	Reporting
AK	State	Alaska Department of Public Safety	
AL	State	Alabama Department of Forensic Sciences (5 sites)	✓
AR	State	Arkansas State Crime Laboratory (3 sites)	✓
AZ	State	Arizona Department of Public Safety, Scientific Analysis Bureau (4 sites)	✓
	Local	Mesa Police Department	✓
	Local	Phoenix Police Department	✓
	Local	Scottsdale Police Department	✓
	Local	Tucson Police Department Crime Laboratory	✓
CA	State	California Department of Justice (10 sites)	✓
	Local	Alameda County Sheriff's Office Crime Laboratory (San Leandro)	✓
	Local	Contra Costa County Sheriff's Office (Martinez)	✓
	Local	Fresno County Sheriff's Forensic Laboratory	✓
	Local	Kern County District Attorney's Office (Bakersfield)	✓
	Local	Long Beach Police Department	✓
	Local	Los Angeles County Sheriff's Department (4 sites)	✓
	Local	Los Angeles Police Department	✓
	Local	Oakland Police Department Crime Laboratory	✓
	Local	Orange County Sheriff's Department (Santa Ana)	✓
	Local	Sacramento County District Attorney's Office	✓
	Local	San Bernardino County Sheriff's Department	✓
	Local	San Diego County Sheriff's Department	✓
	Local	San Diego Police Department	✓
	Local	San Francisco Police Department*	✓
	Local	San Mateo County Sheriff's Office (San Mateo)	✓
	Local	Santa Clara District Attorney's Office (San Jose)	✓
	Local	Solano County District Attorney, Bureau of Forensic Services	✓
	Local	Ventura County Sheriff's Department	✓
CO	State	Colorado Bureau of Investigation (4 sites)	✓
	Local	Colorado Springs Police Department	✓
	Local	Denver Police Department Crime Laboratory	✓
	Local	Jefferson County Sheriff's Office (Golden)	
	Local	Unified Metropolitan Forensic Crime Laboratory (Englewood)	✓
CT	State	Connecticut Department of Public Safety	✓
DE	State	Chief Medical Examiner's Office	
FL	State	Florida Department of Law Enforcement (5 sites)	✓
	Local	Broward County Sheriff's Office (Fort Lauderdale)	✓
	Local	Indian River Crime Laboratory (Fort Pierce)	✓
	Local	Manatee County Sheriff's Office (Bradenton)	✓
	Local	Miami-Dade Police Department Crime Laboratory	✓
	Local	Palm Beach County Sheriff's Office Crime Laboratory (West Palm Beach)	✓
	Local	Pinellas County Forensic Laboratory (Largo)	✓
	Local	Sarasota County Sheriff's Office	✓
GA	State	Georgia State Bureau of Investigation (6 sites)	✓
HI	Local	Honolulu Police Department	✓
IA	State	Iowa Division of Criminal Investigations	✓
ID	State	Idaho State Police (3 sites)	✓
	Local	Ada County Sheriff's Office Forensic Lab (Boise)	
IL	State	Illinois State Police (6 sites)	✓
	Local	DuPage County Forensic Science Center (Wheaton)	✓
	Local	Northern Illinois Police Crime Laboratory (Chicago)	✓
IN	State	Indiana State Police Laboratory (4 sites)	✓
	Local	Indianapolis-Marion County Forensic Laboratory (Indianapolis)	✓
KS	State	Kansas Bureau of Investigation (3 sites)	✓
	Local	Johnson County Sheriff's Office (Mission)	✓
	Local	Sedgwick County Regional Forensic Science Center (Wichita)	✓
KY	State	Kentucky State Police (6 sites)	✓
LA	State	Louisiana State Police	✓
	Local	Acadiana Criminalistics Laboratory (New Iberia)	✓
	Local	Jefferson Parish Sheriff's Office (Metairie)	✓
	Local	New Orleans Police Department Crime Laboratory	
	Local	North Louisiana Criminalistics Laboratory System (3 sites)	✓
	Local	Southwest Louisiana Criminalistics Laboratory (Lake Charles)	✓
	Local	St. Tammany Parish Sheriff's Office Crime Laboratory (Slidell)	✓
MA	State	Massachusetts State Police	✓
	Local	University of Massachusetts Medical School (Worcester)	✓
MD	State	Maryland State Police Forensic Sciences Division (3 sites)	✓
	Local	Anne Arundel County Police Department (Millersville)	✓
	Local	Baltimore City Police Department	✓
	Local	Baltimore County Police Department (Towson)	✓
	Local	Montgomery County Police Department Crime Laboratory (Rockville)	✓
	Local	Prince George's County Police Department (Landover)	
ME	State	Maine Department of Health and Human Services	✓
MI	State	Michigan State Police (8 sites)	✓
	Local	Oakland County Sheriff's Office Forensic Science Laboratory (Pontiac)	✓
MN	State	Minnesota Bureau of Criminal Apprehension (2 sites)	✓
	Local	Midwest Regional Forensic Laboratory (Andover)	
MO	State	Missouri State Highway Patrol (9 sites)	✓
	Local	KCMO Regional Crime Laboratory (Kansas City)	✓
	Local	St. Charles County Police Department Criminalistics Laboratory (O'Fallon)	✓
	Local	St. Louis County Police Department Crime Laboratory (Clayton)	✓
	Local	St. Louis Police Department	✓
MS	State	Mississippi Department of Public Safety (4 sites)	✓
	Local	Jackson Police Department Crime Laboratory	✓
	Local	Tupelo Police Department	✓
MT	State	Montana Forensic Science Division	✓
NC	State	North Carolina State Bureau of Investigation (3 sites)	✓
	Local	Charlotte-Mecklenburg Police Department	✓
	Local	Raleigh/Wake City-County Bureau of Identification	✓
ND	State	North Dakota Crime Laboratory Division	✓
NE	State	Nebraska State Patrol Criminalistics Laboratory	✓
NH	State	New Hampshire State Police Forensic Laboratory	✓
NJ	State	New Jersey State Police (4 sites)	✓
	Local	Burlington County Forensic Laboratory (Mt. Holly)	✓
	Local	Cape May County Prosecutor's Office	✓
	Local	Hudson County Prosecutor's Office (Jersey City)	
	Local	Ocean County Sheriff's Department (Toms River)	✓
	Local	Union County Prosecutor's Office (Westfield)	✓
NM	State	New Mexico Department of Public Safety (3 sites)	✓
	Local	Albuquerque Police Department	✓
NV	Local	Henderson City Crime Laboratory	✓
	Local	Las Vegas Metropolitan Police Crime Laboratory	✓
	Local	Washoe County Sheriff's Office Crime Laboratory (Reno)	✓
NY	State	New York State Police (4 sites)	✓
	Local	Erie County Central Police Services Laboratory (Buffalo)	✓
	Local	Nassau County Office of Medical Examiner (East Meadow)	✓
	Local	New York City Police Department Crime Laboratory**	✓
	Local	Niagara County Sheriff's Office Forensic Laboratory (Lockport)	✓
	Local	Onondaga County Center for Forensic Sciences (Syracuse)	✓
	Local	Suffolk County Crime Laboratory (Hauppauge)	✓
	Local	Westchester County Forensic Sciences Laboratory (Valhalla)	✓
	Local	Yonkers Police Department Forensic Science Laboratory	✓
OH	State	Ohio Bureau of Criminal Identification & Investigation (4 sites)	✓
	State	Ohio State Highway Patrol	✓
	Local	Canton-Stark County Crime Laboratory (Canton)	✓
	Local	Columbus Police Department	✓
	Local	Cuyahoga County Regional Forensic Science Laboratory (Cleveland)	✓
	Local	Hamilton County Coroner's Office (Cincinnati)	✓
	Local	Lake County Regional Forensic Laboratory (Painesville)	✓
	Local	Lorain County Crime Laboratory (Elyria)	✓
	Local	Mansfield Police Department	✓
	Local	Miami Valley Regional Crime Laboratory (Dayton)	✓
	Local	Newark Police Department Forensic Services	
	Local	Toledo Police Forensic Laboratory	✓
OK	State	Oklahoma State Bureau of Investigation (4 sites)	✓
	Local	Oklahoma City Police Department Laboratory Services Division	
	Local	Tulsa Police Department Forensic Laboratory	✓
OR	State	Oregon State Police Forensic Services Division (5 sites)	✓
PA	State	Pennsylvania State Police Crime Laboratory (6 sites)	✓
	Local	Allegheny Office of the Medical Examiner Forensic Laboratory (Pittsburgh)	✓
	Local	Philadelphia Police Department Forensic Science Laboratory	✓
RI	State	Rhode Island Forensic Sciences Laboratory	✓
SC	State	South Carolina Law Enforcement Division	✓
	Local	Anderson/Oconee Regional Forensics Laboratory	✓
	Local	Charleston Police Department	✓
	Local	Richland County Sheriff's Department Forensic Sciences Laboratory (Columbia)	✓
	Local	Spartanburg Police Department	✓
SD	State	South Dakota Department of Public Health Laboratory	
	Local	Rapid City Police Department	✓
TN	State	Tennessee Bureau of Investigation (3 sites)	✓
	Local	Metro Nashville Police Department (Madison)	
TX	State	Texas Department of Public Safety (13 sites)	✓
	Local	Austin Police Department	✓
	Local	Bexar County Criminal Investigations Laboratory (San Antonio)	✓
	Local	Brazoria County Sheriff's Office Crime Laboratory (Angleton)	✓
	Local	Dallas Institute of Forensic Sciences	✓
	Local	Fort Worth Police Department Criminalistics Laboratory	
	Local	Harris County Institute of Forensic Sciences Crime Laboratory (Houston)	✓
	Local	Houston Forensic Science Center	✓
	Local	Jefferson County Sheriff's Regional Crime Laboratory (Beaumont)	✓
UT	State	Utah Department of Public Safety (3 sites)	✓
VA	State	Virginia Department of Forensic Science (4 sites)	✓
VT	State	Vermont Forensic Laboratory	✓
WA	State	Washington State Patrol (6 sites)	✓
WI	State	Wisconsin Department of Justice (3 sites)	✓
	Local	Kenosha County Division of Health Services	✓
WV	State	West Virginia State Police	✓
WY	State	Wyoming State Crime Laboratory	✓
PR	Territory	Institute of Forensic Science of Puerto Rico Criminalistics Laboratory (3 sites)	

This list identifies laboratories that are participating in and reporting to NFLIS-Drug as of March 12, 2021.

*This laboratory is not currently conducting drug chemistry analyses. Cases for the agencies it serves are being analyzed via contracts or agreements with other laboratories.

**The New York City Police Department Crime Laboratory currently reports summary data.

Appendix C NFLIS-Drug Benefits and Limitations

Benefits

The systematic collection and analysis of drug identification data aid our understanding of the Nation's illicit drug problem. NFLIS-Drug serves as a resource for supporting drug scheduling policy and drug enforcement initiatives nationally and in specific communities around the country.

Specifically, NFLIS-Drug helps the drug control community achieve its mission by

- providing detailed information on the prevalence and types of controlled substances secured in law enforcement operations;
- identifying variations in controlled and noncontrolled substances at the national, State, and local levels;
- identifying emerging drug problems and changes in drug availability in a timely fashion;
- monitoring the diversion of legitimately marketed drugs into illicit channels;
- providing information on the characteristics of drugs, including quantity, purity, and drug combinations; and
- supplementing information from other drug sources, including the National Survey on Drug Use and Health (NSDUH) and the Monitoring the Future (MTF) study.

NFLIS-Drug is an opportunity for State and local laboratories to participate in a useful, high-visibility initiative. Participating laboratories regularly receive reports that summarize national and regional data. In addition, the Data Query System (DQS) is a secure website that allows NFLIS-Drug participants—including State and local laboratories, the DEA, and other Federal drug control agencies—to run customized queries on the NFLIS-Drug data.

Limitations

NFLIS-Drug has limitations that must be considered when interpreting findings generated from the database.

- Currently, NFLIS-Drug includes data from Federal, State, and local forensic laboratories. Federal data are shown separately in this publication. Efforts are under way to enroll additional Federal laboratories.
- NFLIS-Drug includes drug chemistry results from completed analyses only. Drug evidence secured by law enforcement but not analyzed by laboratories is not included in the database.
- National and regional estimates may be subject to variation associated with sample estimates, including nonresponse bias.
- State and local policies related to the enforcement and prosecution of specific drugs may affect drug evidence submissions to laboratories for analysis.
- Laboratory policies and procedures for handling drug evidence vary. Some laboratories analyze all evidence submitted to them, whereas others analyze only selected case items. Many laboratories do not analyze drug evidence if the criminal case was dismissed from court or if no defendant could be linked to the case.
- Laboratories vary with respect to the records they maintain. For example, some laboratories' automated records include the weight of the sample selected for analysis (e.g., the weight of one of five bags of powder), whereas others record total weight.

Public Domain Notice

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