

Use with caution Metonitazene

The compound Metonitazene has a high potency as an analgesic, similar to etonitazene, which was first discovered in 1957. When administered centrally, metonitazene has 100 times the potency of morphine, but when given orally, it only has about 10 times the potency. However, it is important to note that this does not mean that this drug is without its downsides.

While there is no definite link between Metonitazene and addiction, its presence in drugs has increased public health concerns. The compound first appeared in the recreational drug supply in mid-2020 and is rapidly spreading into death investigation casework. Liquid chromatography tandem quadrupole mass spectrometry was used to screen for the presence of metonitazene, and quantazene was determined by the same method.

After Kelly Beitz and Anthony Moaf were arrested, police turned the case over to a federal task force. This task force investigated the case and linked Moaf to the fatal overdose of Beitz. Moaf was arrested and died in jail on May 18.

Its effects are similar to other opioids, including heroin and fentanyl. When abused, it may cause euphoria and sleepiness. But unlike fentanyl and heroin, metonitazene has high-risk of abuse. In addition to being dangerous, it may also cause respiratory depression and vomiting. Therefore, metonitazene is best used in moderation.

The substance metonitazene is banned for the United States under 21 U.S.C. 811(h)(3). The CSA prohibits uncontrolled manufacturing, distribution, research, reverse distribution, and abuse of this substance. Its medicinal uses in the United States remain unknown. So, the DEA has not determined what the uses are for Metonitazene. If there are any, these chemicals will be listed in Schedule I of the CSA.

When deciding whether a substance should be listed as a schedule I drug, the Administrator must consider three factors: the substance's history and current pattern of abuse; its scope and duration; and the risk to public health. Metonitazene is currently classified as a Schedule I drug. Its abuse must include diversion from legitimate channels as well as illegal importation. The substance may also be dangerous to the public.

In addition to [metonitazene](#), other drugs containing this substance can cause serious health consequences. Some of the most common examples include deaths resulting from para-fluorofentanyl and metonitazene. Both drugs have a high rate of unintended overdose deaths in the United States. But these statistics are not representative of the effects of Metonitazene on human health. This is an unscientific analysis based on a small sample.