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THE ANTIDOTE

News and Notes from the Blue Ridge Poison Center

New Virginia Laws Aim to Reduce Poisonings, Overdoses, and Harmful Substance Use



Nearly 2,400 bills were introduced to the Virginia General Assembly this year. About half were passed, including several

news laws aimed at reducing overdoses and other poison exposures, including:

- Stronger rules for **kratom** and **7-OH** products.
- A crackdown on **medetomidine** and **tianeptine**, 2 dangerous drugs which have been appearing in the illicit drug supply.
- Increased enforcement on **vapes** and other nicotine products.
- A legal **cannabis** marketplace.

Together, these laws reflect growing concerns about substances that may appear harmless, but can carry serious health risks—including poisoning, dependence, and overdose. As these laws take effect, public health leaders hope they will reduce injury, prevent addiction, and ultimately save lives across the Commonwealth.

Read on for brief explanations, plus links to the full laws as written. (A list of ALL new laws can be [found here](#)).

Stronger Rules for Kratom and 7-OH Products

Kratom is an herbal extract made from the leaves of the *Mitragyna speciosa* tree native to Southeast Asia. It produces a mix of stimulant and opioid-like effects



Kratom capsules

in the body. It can be found as a powder, pills or capsules, or tea. Kratom may also be smoked or vaped. It is not U.S. Food and Drug Administration (FDA) approved as safe.

Kratom products claim to help with energy, pain relief, and mood. Some people use kratom to manage opioid cravings or withdrawal symptoms. However, kratom has raised concern among health professionals due to its potential for harm, dependence and withdrawal.

The Blue Ridge Poison Center's Director, Christopher Holstege, MD, helped lead [a study](#) showing kratom-

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POISON TRIVIA

TRUE or FALSE? If someone eats a poisonous mushroom, you should make them vomit immediately.

Answer on page 3



related calls to America's poison centers increased more than 1,200% between 2015 and 2025. During the same time period:

- Hospitalizations linked solely to kratom **increased by more than 1,150%**, from 43 in 2015 to 538 in 2025.
- Hospitalizations linked to kratom used alongside other substances, such as illegal drugs or antidepressants, **increased almost 1,300%**, from 40 to 549.
- There were **233 deaths** related to kratom.

Because kratom products are unregulated, buyers can't be certain of the strength or purity. Independent testing has shown that kratom products are often contaminated by heavy metals, other undisclosed drugs, or bacteria including salmonella. (Read this [FDA Report](#) for more information about kratom.)

Under the new law ([House Bill 360](#)):

- Kratom cannot be sold to anyone under age 21.
- Products must be kept behind the counter or in locked cases.
- Packaging must include the warning: "THIS MAY CAUSE DEPENDENCE AND OPIOID-LIKE WITHDRAWAL."

The new law also prohibits the sale or possession of *7-hydroxymitragynine*, commonly known as "7-OH," a synthetic compound made from kratom which is many times stronger than morphine. 7-OH is commonly sold in gas stations, vape shops, and online in the form of colorful tablets, liquid shots, powders, or gummies. Products promise to relieve pain, boost mood, reduce anxiety, and ease opioid withdrawal symptoms. 7-OH is not FDA approved.

Health agencies warn that 7-OH carries risks of addiction, dangerously slowed breathing, and other harmful side effects. Across the U.S., poison centers and emergency departments report numerous cases of serious illness, hospitalizations, and even deaths after using 7-OH. Read more about 7-OH in this [FDA report](#).

Crackdown on Medetomidine



Medetomidine is a potent veterinary tranquilizer and sedative, sometimes referred to by the street name "Rhino Tranq". It is not FDA-approved for human use. Medetomidine has increasingly been found as a contaminant in street drugs like fentanyl and heroin. Drug dealers add it to make the "high" stronger and last longer, often without the user's knowledge.

Medetomidine can significantly drop heart rate, blood pressure, and breathing. Regular use can lead to severe withdrawal symptoms. It is not an opioid, so overdose effects cannot be reversed with Naloxone.

For more information, see [this report](#) from the U.S. Centers for Disease Control and Prevention (CDC).

The new law ([House Bill 1103](#)) makes it:

- A felony to manufacture or distribute medetomidine for human use.
- A misdemeanor to knowingly possess it for that purpose.
- There are exceptions for legitimate veterinarian use.

Crackdown on Tianeptine



Tianeptine product sold as "Za Za"

Tianeptine is a synthetic drug that was originally developed in Europe to treat depression, but it is not approved as safe by FDA. Nevertheless, tianeptine is sold as a dietary supplement at convenience stores, gas stations, smoke shops, and online.

Frequently referred to as "gas station heroin,"

tianeptine is marketed to help with pain, decrease appetite and increase sexual performance. High doses of tianeptine mimic the effects of opioids, which can temporarily elevate mood. However, using tianeptine may lead to tolerance, severe addiction, and overdose. Adverse effects reported from tianeptine include severe sedation, seizures, loss of consciousness, rapid heartbeat, high blood pressure, and dangerously slowed breathing.

As with all unregulated products, contamination with undisclosed ingredients is common. For more information about tianeptine, read this [FDA report](#).

Brand names include *Tianaa*, *Zaza*, *Neptune's Fix*, *Pegasus*, and more. Products may be sold as shot-sized liquid bottles, blister packs of pills, or powders.

Under the new law ([Senate Bill 106](#)):

- A valid prescription is required for any sale or distribution of tianeptine.
- Retailers face penalties of at least \$2,500 for selling tianeptine without a prescription.

Increased Enforcement on Vapes and Nicotine



Despite a ban on flavored vape products, which are proven to attract youth; and a law requiring purchasers to be at least age 21; youth nicotine use is sharply rising. To

address this problem, Virginia strengthened enforcement of vape and tobacco laws.

The new law ([Senate Bill 620](#)) states:

- Retail oversight and licensing will now be handled by Virginia ABC.
- Stores must comply with stricter product registration requirements.
- Undercover compliance checks must occur regularly to prevent sales to people under 21.

Note: some requirements of the new law won't go into effect until October 1, 2026.

Legal Cannabis Marketplace



Currently in Virginia, the only legal way to purchase cannabis is from a licensed medical dispensary with a prescription. However, unregulated cannabis products are sold illegally in smoke shops, convenience stores, and online. This includes

products which contain lab-made psychoactive compounds derived from hemp, such as *Delta-8*. As with all unregulated products, contamination with harmful, undisclosed ingredients is common. There is no official oversight to ensure quality or safety. Visits to hospital emergency departments and calls to U.S. Poison Centers about unregulated cannabis products have been on the rise.

The Governor originally vetoed a bill to establish a cannabis marketplace. But last-minute compromises resulted in an agreement to create a legal adult-use retail cannabis market through the budget process. Recreational dispensary sales are officially scheduled to begin on July 1, 2027 with the following regulations:

Market Structure and Operations

- Sets a maximum of 350 retail cannabis establishment licenses statewide.
- Increases personal adult possession limits from 1 ounce to 2 ounces.
- Implements a state cannabis tax starting at 6%, which will increase to 8% after July 1, 2029.
- Transfers regulatory control of intoxicating hemp-derived products to the Cannabis Control Authority to close previous loopholes.
- To protect children, the law prohibits cartoon advertisements, animal/fruit/human-shaped products, and requires child-safe packaging.
- Grants local governments zoning powers and the ability to regulate local operational hours and rules

For more information, please see this [press release](#) from the Governor's Office.

Wild Mushrooms: Foragers and Parents Beware



Check out [The Claudius Project: Poisonous Mushrooms in Virginia](#), a joint effort by the Va Master Naturalists Program and the UVA Div. of Medical Toxicology.

Plentiful summer rain means wild MUSHROOMS. Right now in central and southwest Virginia they are cropping up everywhere. Foraging, photographing, and identifying wild mushrooms are popular hobbies for outdoor enthusiasts. Some varieties are edible and delicious. But some varieties can make you very sick. Some are deadly. There is even a species of mushroom that will only make you sick if you eat it and also drink alcohol. The differences between wild mushroom species may be so subtle, even an

experienced *mycologist* (mushroom scientist) can make a mistake. Foragers—beware. ***When in doubt, it is best not to eat what you have picked.***

Children are particularly at risk. They may not understand the difference between wild and store-bought mushrooms. Watch young children closely when outdoors. Tell older children that they should never pick and eat any plants, berries, or mushrooms they find growing wild outdoors without expert adult supervision.

Symptoms of mushroom poisoning may be delayed by hours or even days after eating, when the toxins have begun to attack the liver or other organs. Certain species can cause hallucinations, dizziness, drowsiness, dilated pupils, or muscle spasms. Other species cause severe vomiting, diarrhea, and sharp abdominal pain. The most dangerous species found in Virginia belong to the *Amanita* genus; even one bite can be life-threatening.

There are many myths about poisonous mushrooms.

MYTH: *Poisonous mushrooms always have bright, flashy colors.*

TRUTH: Some poisonous mushrooms are white or bland in color.

MYTH: *Poisonous mushrooms taste terrible.*

TRUTH: It is reported that some taste very good.

MYTH: *Snails, insects, or other animals won't eat poisonous mushrooms.*

TRUTH: The poisonous compounds in mushrooms don't affect all animals, including people, the same way.

MYTH: *A poisonous mushroom will be safe to eat if you cook it enough.*

TRUTH: Neither cooking, canning, freezing, or drying will make a poisonous mushroom safe to eat.

If you believe someone may have eaten an unsafe mushroom, contact the Blue Ridge Poison Center for guidance: 1-800-222-1222. Do not wait for symptoms to develop.



POISON TRIVIA ANSWER: False. Making someone vomit after swallowing a poisonous mushroom—or anything harmful—will not prevent them from getting sick. In fact, it could make things much worse. Instead, call the Blue Ridge Poison Center right away at 1-800-222-1222. We will tell you exactly what to do.

The [Blue Ridge Poison Center](#) is part of University of Virginia Health. Other funding sources include the [Virginia Department of Health](#) and [HRSA](#). We are accredited by [America's Poison Centers](#). Proudly serving the Commonwealth since 1978. [Join the mailing list](#) to receive this quarterly newsletter.

