

# Special Commission to Study and Make Recommendations on the Public Health and Safety Concerns Posed by the Proliferation of Xylazine

## (“Xylazine Commission”)

### *October 9, 2025 Meeting Notes*

#### Agenda

1. Welcome and attendance
2. Approve Minutes of the June 23, 2025 Public Meeting
3. Updates on the Commission and working groups
4. Public Comment
5. Next Steps and Discussion

#### Attendees *(listed alphabetically by last name after the Co-Chairs)*

Appointing Body	Name	Present?
House Chair of the Joint Committee on Mental Health, Substance Use and Recovery	State Representative <b>Mindy Domb</b> <i>(Co-Chair)</i>	Yes
Senate Chair of the Joint Committee on Mental Health, Substance Use and Recovery	State Senator <b>John Velis</b> <i>(Co-Chair)</i>	Yes
Secretary of the Executive Office of Health and Human Services (“EOHHS”) or designee	<b>Millie Bhatia</b> , MPH, Health Policy Manager, Office of EOHHS Undersecretary Kiame Mahaniah	Yes
Secretary of the Executive Office of Public Safety and Security (“EOPSS”) or designee	Undersecretary <b>Angela Davis</b> , EOPSS Undersecretary for Law Enforcement and Criminal Justice	Yes
Speaker of the House of Representatives	State Representative <b>Kate Donaghue</b>	Yes
Senate Minority Leader	<b>Ernie Gates</b> , President/CEO, Gates Healthcare Associates, Inc.	Yes
Massachusetts Veterinary Medical Association	<b>Matthew Hogan</b> , BVetMed, MS, MRCVS, DACLAM - Attending Veterinarian at McLean Hospital	Yes
Senate President	State Senator <b>John Keenan</b>	Yes
Bureau of Substance Addiction Services (“BSAS”)	<b>Simeon Kimmel</b> , MD, MA, Assistant Professor of Medicine, Boston University Chobanian and Avedisian School of Medicine and Boston Medical Center	Yes
Commissioner of the Department of Mental Health (“DMH”) or designee	<b>David McGarry</b> , MD, Medical Director, Worcester Recovery Center and Hospital Facility; Acting Medical Director, Office of Inpatient Management	Yes
Commissioner of the Department of Public Health (“DPH”) or designee	<b>Sarah Ruiz</b> , MSW, Deputy Director for Strategy and Community Health, DPH	Yes

Governor	<b>Kevin Simon</b> , MD, MPH, Pediatric Addiction Medicine Psychiatrist, Boston Children’s Hospital; Chief Behavioral Health Officer, City of Boston; Assistant Professor of Psychiatry, Harvard Medical School	Yes
House Minority Leader	State Representative <b>Steven George Xiarhos</b>	Yes

**1. Welcome and attendance**

**Chair Velis** called the meeting to order at 10:06am. **Chair Velis** asked **Jocelyn Schafer** to take attendance for the record; all Commission members were present for the meeting. **Chair Velis** and **Chair Domb** offered brief opening remarks, noting the continued prevalence of Xylazine and other drug contaminants in the Massachusetts drug supply stream, and thanking Commissioners for their participation.

**2. Approve Minutes of the June 23, 2025, Public Meeting**

**Chair Velis** motioned to approve the draft meeting minutes for the Commission’s previous public meeting on June 23, 2025, which had been shared with Commissioners prior to the meeting. **Commissioner Donaghue** seconded the motion, and the minutes were approved unanimously via voice vote. **Chair Velis** noted that the approved final meetings would be made available on the Commission’s website.

**3. Updates on the Commission and working groups**

**Chair Velis** shared a reminder about the Commission’s final reporting deadline, and shared updates regarding working groups for the Commission and which Commissioners are in which working group:

**Working Group #1**

Best practices to regulate and oversee the production and distribution of xylazine to ensure that it is used solely for its intended purpose as an animal tranquilizer administered by licensed veterinarians and not for human consumption **and** whether xylazine should be classified as a controlled substance and appropriate penalties for its illegal production and distribution, if any

- Members: Representative Steven Xiarhos, Deputy Director Sarah Ruiz, Matthew Hogan, and Ernie Gates

**Working Group #2**

The availability of effective outreach and treatment programs for patients who have been exposed to xylazine and ways to address any gaps in available programs and services

- Members: Senator John Velis, Representative Kate Donaghue, Undersecretary Angela Davis, Dr. Simeon Kimmel, and Dr. David McGarry

**Working Group #3**

Education and training for first responders, the medical community, the substance use treatment community, and people who use drugs

- Members: Representative Mindy Domb, Senator John Keenan, Dr. Kevin Simon, and Millie Bhatia

**Chair Velis** explained the goals for working groups and noted that Commission staff would be in touch following the meeting to schedule preliminary working group meetings, before the working group comes back before the whole Commission for working group presentations in December.

**4. Public Comment**

At 10:15am, **Chair Velis** explained the process for public comment, and introduced the first speaker:

**Dr. Traci Green**

*Principal Investigator & Director, Opioid Policy Research Collaborative. Brandeis University*

**Dr. Green** shared findings on five recent studies on xylazine's impact and efforts to address, including:

- Increased amputations in Philadelphia linked to xylazine.
- Community harm reduction efforts and withdrawal challenges.
- Importance of early wound identification and care.
- Drug checking as a harm reduction tool.
- Engagement with incarcerated individuals and drug suppliers to better inform members of the public and spread Xylazine test strips.

**Dr. Green** noted that there are increasing reports of Xylazine wounds burning, and that may be because Xylazine is actually acidic. She noted that while not currently a pursued strategy, changing the pH level of Xylazine could be an avenue to pursue if this indeed the case.

Throughout her remarks, **Dr. Green** emphasized the need for low barrier wound care and housing, the risks of overregulation, and shared support for legislation expanding access to Medications for Opioid Use Disorder (MOUD) as well as other overdose prevention measures.

*Questions for Dr. Green*

**Chair Velis** thanked Dr. Green for her participation and noted that prevalence of drug contamination throughout the drug supply as a whole.

**Chair Domb** highlighted the importance of training and education and asked whether Dr. Green would be willing to engage with the working group focused on that topic. Dr. Green responded that she welcomed the opportunity.

**Chair Velis** asked about diluting Xylazine and how to go about it. Dr. Green responded that “buffs” can be introduced to dilute substance, similar to how drug users teach each other about how to cut substances themselves to reduce risks.

**Commissioner Donaghue** asked about people having to advocate for themselves in order to get treatment for their withdrawal symptoms. Dr. Green responded that people can selfcare, but it is also important for them to remember to check in with a wound care nurse every once in a while.

**Commissioner Ruiz** asked about current conversations as it relates to working with suppliers. Dr. Green noted that that it would be great back the clock and talk about how supplies get into the drug stream. She stressed that talking about the makeup of Xylazine, harm reduction efforts, and community supports, should all be a part of the conversation.

**Chair Velis** highlighted the importance of drug supply education efforts in carceral settings. Dr. Green noted that while there is often low participation from inmates about going to harm reduction programs, a high percentage of inmates want access to test strips.

**Commissioner Simon** noted challenges that can come with effectively pursuing public education efforts with drug distributors, especially when it comes to balancing legal ramifications.

**Commissioner Kimmel** asked what Dr. Green has noticed about gaps in environments where wounds can adequately be treated. Dr. Green stressed that the priority should be reducing exposure to xylazine wherever and however we can in order to best treat people.

**Commissioner Gates** noted that in the pharmaceutical world, veterinary medicines like Xylazine are less understood.

**Commissioner Hogan** shared that usage of Xylazine as a sedative has gone considerably down in veterinary care, and that the drug is not frequently stocked or supplied in the veterinary community anymore.

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**Tehya Johnson**

*Associate Medical Director of Harm Reduction Team, Boston Health Care for the Homeless Harm Reduction Program*

Questions for Tehya Johnson

**Director Johnson** shared information regarding the Harm Reduction Program at Boston Health Care for the Homeless, including experiences on dealing with persons exposed to Xylazine and efforts to treat. Director Johnson addressed:

- Overdose response involving xylazine (need for low-dose naloxone and oxygen support). Dr. Johnson highlighted how responses differ from other overdose protocols.
- Importance of early and consistent wound care across all care levels. Dr. Johnson noted the difficulty in treating chronic wounds and shared that patients often have to leave treatment in order to receive care for complex wounds.
- Empowering patients with wound care knowledge and supplies.
- Need for expanded drug checking and inclusion of people who use drugs in intervention design.

**Commissioner Ruiz** highlighted the challenging need for medical care in this space when it comes to wounds. Director Johnson agreed, noting that wounds only get better if they are appropriately treated and cared for.

**Chair Domb** thanked Director Johnson for her expertise in these areas and noted that the working group focused on training may reach out to her.

**Chair Velis** noted Director Johnson’s “boots-on-the-ground” perspective and thanked her for her participation.

**Commissioner Donaghue** highlighted potential gaps in reimbursement from MassHealth for treatment and care services. **Commissioner Ruiz** agreed that support for coverage needs to be worked on and noted the complexity of these types of reimbursements with administrative challenges.

**5. Next Steps and Discussion**

Following the conclusion of public comment, **Chair Velis** thanked both speakers and Commissioners for their participation. **Chair Velis** shared reminders regarding the timeline for future Commission meetings, including December 11, 2025, for Working Group Presentations, February 9, 2026, for Draft Report View, and March 9, 2026, for Final Report Approval.

Chair Velis noted that Commissioners should look out for an email from Commission staff about scheduling working group meetings and working on presentations.

At 11:30am, **Commissioner Keenan** moved to **ADJOURN** the meeting and **Chair Domb** seconded. The meeting adjourned.