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From: Ron Kirschner, MD, Medical Director
To: ALL HEALTH CARE PROFESSIONALS
Subject: Dropping the N bomb
Date: 4/7/17

- 25I-NBOMe, 25C-NBOMe, and 25B-NBOMe are designer drugs with an N-methoxybenzyl group added to amphetamine-like stimulants from the 2C family. They are Schedule I controlled substances under the Federal Controlled Substances Act.
- Despite their controlled status these drugs are often obtained through the internet where they may be sold as “research chemicals” that are “not for human consumption”.
- Compared to other stimulants, these agents have more serotonergic effects (so are more hallucinogenic), and much higher potency.
- Due to their high potency, doses of 100-240 mcg are thought to be common among abusers (Gee).
- NBOMe may be sold as a powder, a liquid solution, or as postage stamp-sized squares of blotter paper infused with a solution and then dried. These products may be labelled as LSD, N-Bomb, Smiles, or other street names (Gussow).
- Clinical effects may include tachycardia, hypertension, hyperthermia, hallucinations, agitated delirium, and rhabdomyolysis. Fatalities have been reported.
- There is no specific antidote. Treatment is supportive care which may include active cooling if hyperthermic, aggressive benzodiazepine sedation, IV fluids, and airway support as needed.
- NBOMe is not detected by standard urine drug of abuse screens.
- Urine or blood levels may be ordered through specialized reference laboratories such as NMS Labs. However, results would not be available in real time, and are unlikely to change management.

References

DEA, 25I-NBOMe, 25C-MBOMe, and 25B-MBOMe, www.deadiversion.usdoj.gov/drug_chem_info/nbome.pdf
Gee P. Case series: toxicity from 25B-NBOMe – a cluster of N-bomb cases. *Clin Toxicol* 2016; 54: 141-146.
Gussow L. What every EP should know about the N-BOMB. *Emergency Medicine News*, September 2015.

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