

Ohioans to Stop Executions

Criminal Justice Issues and Prisoners' Rights

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[Hannah Kubbins](#) / December 11, 2017

Fentanyl drove another record year of overdose deaths in Ohio. Two states want to put the drugs potency to another use: capital punishment.

But Nebraska and Nevada face opposition from death penalty opponents as they push for the nations first fentanyl-assisted executions, The Washington Post reports.

In Ohio, health officials say an average of 11 people died each day of drug overdoses last year. Fatalities were driven in large part by the emergence of stronger drugs like fentanyl, a synthetic drug 50 times more powerful than heroin and up to 100 times more powerful than morphine.

More than half the overdose deaths in 2016 involved fentanyl, compared with 40 percent in 2015 and 20 percent in 2014.

And its not just being cut into heroin, but also cocaine and its easy to get, used legally to treat severe pain and in other medical situations.

Nebraska and Nevada prison officials wouldnt comment on why they want to use fentanyl, the Post reported. But its that ease of purchase that may be desirable, as other execution drugs have gotten harder to obtain.

We simply ordered (fentanyl) through our pharmaceutical distributor, just like every other medication we purchase, and it was delivered, Brooke Keast, a spokeswoman for the Nevada Department of Corrections, told the Post. Nothing out of the ordinary at all.

States that still have the death penalty have tried other cocktails of drugs with varying degrees of lethality. Ohio was among the states that tested midazolam, a sedative. Convicted rapist and murderer Dennis McGuire was Ohios first inmate to be executed with midazolam in a never-before-tried combination, in 2014. He repeatedly gasped and snorted during a 26-minute procedure, the states longest ever using lethal drugs.

John M. DiMuro, who helped create Nevadas fentanyl execution protocol while he was the states chief medical officer, said he based it on procedures common in open-heart surgery. His protocol calls for a three-drug combination that also includes Valium to sedate the inmate, and a paralytic just in case he continues breathing.

Critics say that try-it-and-see approach amounts to human experimentation.

Theres no medical or scientific basis for any of it, Joel Zivot, a professor of anesthesiology and surgery at Emory University, told the Post. Its just a series of attempts: obtain certain drugs, try them out on prisoners, and see if and how they die.

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