Responding to an Opioid Overdose Using NALOXONE

V1.0.2 Beta





What is Naloxone?

 Naloxone (also called Narcan) is the antidote that reverses an opioid overdose. It has been used in ambulances and hospitals for decades to reverse overdose. It's legal and has been approved by the Food and Drug Administration (FDA). It works by neutralizing the opioids in your system and helping you breathe again. Naloxone only works if a person has opioids in their system; the medication doesn't work on other drugs. You can't get high from it. It is a safe and effective tool for saving lives.

(Source: projectlazarus.org/patients-families/what-naloxone)



What Drugs Will Naloxone Work On?

- In the event of an overdose Naloxone will work on all of the following opiate/ opioid substances:
 - Heroin
 - Morphine
 - Codeine
 - Methadone

- Oxycodone
 - OxyContin
 - Percodan
 - Percocet
- Hydrocodone
 - Vicodin
- Fentanyl
- Hydromorphone
 - Dilaudid



What is an Opioid Overdose?

An overdose occurs when the body has more drugs in its system than it can handle, resulting in potentially life threatening dysfunction.

During an opioid overdose there are so many opioids or a combination of opioids and other drugs in the body that the victim becomes unresponsive to stimulation and/or breathing becomes inadequate.



Risk Factors for an Opioid Overdose

- **Tolerance:** With daily use of opioids, the body develops tolerance; which means individuals have to use an increasing amount of drug to get the same effect. Because of tolerance, a daily opioid user can use a quantity of opioids that would overdose an opioid-naïve individual or someone without the same level of tolerance.
- Risk of Overdose increases after a period of abstinence such as:
 - Incarceration
 - Hospitalization
 - Detoxification or Drug Treatment
 - Stopping on their own



Risk Factors for an Opioid Overdose (Cont.)

- **Mixing Drugs:** All sedating medications carry overdose risks of their own; however, when drugs are combined, the risk is substantially increased because the drugs typically use different mechanisms in the body to create sedation.
- **Drug Purity:** There is no regulation on the quality or strength of opioids bought on the street. A bag of heroin, for instance, can vary a lot in purity. If someone is used to street heroin that is only 18% heroin and then buys a bag that is 44% heroin, using one bag of the new heroin is like doing more than two bags of the previous heroin.



Risk Factors for an Opioid Overdose (Cont.)

- **Drug Administration:** There are many ways to use drugs, including swallowing, snorting, smoking, and intramuscular or intravenous injection. Those methods that deliver the drug more quickly to the brain, such as smoking and intravenous injection, create a higher risk for overdose.
- Previous Nonfatal Overdose: Previously experiencing an overdose increases the risk of dying from an overdose in the future. This is because people who have previously overdosed may have drug use patterns that continue to put them at risk for an overdose in the future.



Risk Factors for an Opioid Overdose (Cont.)

 Using Alone: when an individual uses opioids alone, there is no one around to help him or her during an overdose.
Without help from someone who can respond an overdose is more likely to become fatal.

Signs of Opioid Overdose

- **□** Unresponsive
- **□**Unconscious
- ■Shallow breathing with rate less than 10 breaths per minute or not breathing at all
- ☐Blue or gray face, especially fingernails and lips
- □Loud, uneven snoring or gurgling noises

Steps in Response to Opioid Overdose

Check the person for Responsiveness
Call 911 (Very Important!!!!)
Perform Rescue Breathing (if they are not breathing)
Give Naloxone (Narcan) if they are breathing but unresponsive
When the overdose has been reversed advise the person <u>not to</u> use opioids for at least 12 hours. Administering naloxone may
induce withdrawal symptoms immediately following an overdose reversal. If the person uses more opioids to stave off these symptoms they are at high risk of overdosing again because the opioids which caused them to overdose are still in their system.
Place them in the Recovery Position if you have to leave them (roll them onto their side)

Check the person for Responsiveness

- ☐ Check for a response: call their name and shake them
- Check for a pain response: rub hard up and down on the victim's sternum with your knuckles
- ☐ If you can't reach the sternum, try pinching them
- ☐ IF NO RESPONSE:
 - CALL 911 (Very Important!!!!)



CALL 911 (Very Important!!!!)

- ☐ Tell them the person isn't breathing or is having trouble breathing, this makes the call a priority
- ☐ Describe exactly where the person is located

Rescue Breathing

- ☐ If you are alone with the victim, start rescue breathing and then go get the Naloxone after you have given a few breaths
- ☐ Head tilt/chin lift
- □ Look, listen and feel to see if chest rises/falls
- ☐ Give 2 normal size breaths
- ☐ Then one breath every 5 seconds
- ☐ Breathe for victim until they respond to the Naloxone or Ambulance (EMS) arrives.



Lets review the information ONE MORE TIME...

Responding to an Overdose

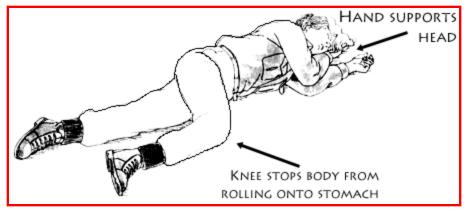
"Are you alright? You ok?" No response try a STERNUM RUB Call 9-1-1 Give the person AIR using rescue breathing Give 2 or 3 breaths and set-up the Naloxone Spray the Naloxone Continue rescue breathing Spray second dose if necessary Continue rescue breathing

When the overdose has been reversed advise the person not to use opioids for at least

12 hours or their overdose may return.

If an OD Happens...





4. Recovery Position

Overdose Prevention Using Nasal Naloxone

- Simple device, medication and nasal spray
- Naloxone is a pure opiate antagonist
- No physiological effect other than blocking opiates
- No adverse reactions
- No potential for abuse or potential for OD





OD Prevention Kit

Contents of Intramuscular/Nasal Overdose Prevention Kits:

- (2) Naloxone Hydrochloride 2mL single-use Luer-Lock prefilled syringes
- (2) sterile alcohol prep pads
- (1) face shield (for CPR rescue breathing)
- (1) nasal atomizer
- (1) pair latex gloves
- (1) instruction card in English and Spanish



Pre and Post Training: Quiz



PRE-TRAINING QUIZ 1) What can increase your risk of having an overdose? (choose best answer) a) mixing drugs b) mixing drugs and alcohol c) using after a period of non-use d) all of the above 2) Which of the following is not a sign of an opioid overdose? a) person unable to be woken up b) not breathing at all or breathing very slowly c) turning blue/purple around lips and fingertips g) increased energy, wanting to exercise 3) Is it essential that you call 911 for all overdoses? a) Yesb) No 4) Does naloxone work for a cocaine overdose? a) Yesb) No 5) How many doses of naloxone should you administer for an opioid overdose? a) 10 doses b) 1 dose initially, possibly 2 6) Why must you stay and support the person that overdosed? (choose best answer) a) Naloxone may wear off and overdose may return b) may need to give a 2nd dose of naloxone c) provide important information to EMS d) a person's health and other drugs can make OD's complicated e) all of the above 7) How many mL's (1 mL= 1 ampoule) of naloxone do you administer for each dose? a) 4 mg/mL c) 10 mg/mL b) 1 mg/mL d) 0.4 mg/mL

Adopted from: towardtheheart.com-Harm Reduction Program, 2015

8) How long does it take for naloxone to start

working once given IM (intramuscularly)?

9) How long does the effect of naloxone last

a) 10 min b) 1-5 min c) 20 min

before it starts to wear off?

a) 15 min b) 30 min c) 3 hours



POST-TRAINING QUIZ

1) What can increase your risk of having an overdose? (choose best answer) a) mixing drugs b) mixing drugs and alcohol c) using after a period of non-use

2) Which of the following is not a sign of an opioid overdose?

a) person unable to be woken up b) not breathing at all or breathing very slowly c) turning blue/purple around lips and fingertips d) increased energy, wanting to exercise

3) Is it essential that you call 911 for all overdoses?

a) Yes b) No

d) all of the above

4) Does naloxone work for a cocaine overdose? a) Yes b) No

5) How many doses of naloxone should you administer for an opioid overdose? a) 10 doses

b) 1 dose initially, possibly 2 c) 1 dose

6) Why must you stay and support the person that overdosed? (choose best answer)

a) Naloxone may wear off and overdose may return b) may need to give a 2nd dose of naloxone c) provide important information to EMS d) a person's health and other drugs can make OD's complicated e) all of the above

7) How many mL's (1 mL= 1 ampoule) of naloxone do you administer for each dose?

a) 4 mg/mL c) 10 mg/mL b) 1 mg/mL d) 0.4 mg/mL

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The End

Prevent Overdose, Save Lives