Naloxone Training

- **Opioids are a class of drugs that include the illegal drug heroin, synthetic opioids such as fentanyl, and pain relievers available legally by prescription, such as oxycodone (OxyContin®), hydrocodone (Vicodin®), codeine, morphine, and many others.**
  - Kratom is a tropical tree (Mitragyna speciose) native to Southeast Asia, used traditionally to combat fatigue and improve work productivity among farm populations in Southeast Asia. FDA is concerned that kratom, which affects the same opioid brain receptors as morphine, appears to have properties that expose users to the risks of addiction, abuse, and dependence.
  - Synthetic opioids are substances that are synthesized in a laboratory and that act on the same targets in the brain as natural opioids (e.g., morphine and codeine) to produce analgesic (pain relief) effects. In the 1980s, DEA controlled several of these illicitly produced synthetic opioids such as fentanyl.

Kratom

Common Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Herbal Speedball, Biak-biak, Ketum, Kahuam, Thank, Thom	None	Fresh or dried leaves, powder, liquid, gum	Chewed (whole leaves); eaten (mixed in food or brewed as a tea); occasionally smoked	Not scheduled

Possible Health Effects	
Short-Term	Nause, dizziness, itching, sweating, dry mouth, constipation, increased urination, loss of appetite. Low doses: increased energy, sociability, alertness. High doses: sedation, euphoria, decreased pain.
Long - Term	Anorexia, weight loss, insomnia, skin darkening, dry mouth, frequent urination, constipation. Hallucinations with long-term use high doses in some users.

Synthetic Opiates

Common Names	Commercial Name	Common Forms	Common Ways Taken	DEA Schedule
Apace, China Girl, China Town, China White, Dance Fever, Goodfellas, Great Bear, He-Man, Poin, Tango & Cash	Fentanyl, Tramadol, Methadone, Carfentanil, U-47700	Powder, nasal sprays, eye drops, pills, patches, solutions for injection.	Injected, sniffed, swallowed, heated, inhaled.	Schedule I

Possible Health Effects	
Short Term	Relaxation, euphoria, pain relief, sedation, confusion, drowsiness, dizziness, nausea, vomiting, urinary retention, pupillary constriction, respiratory depression.
Long Term	Dependence, addiction, overdose, death.

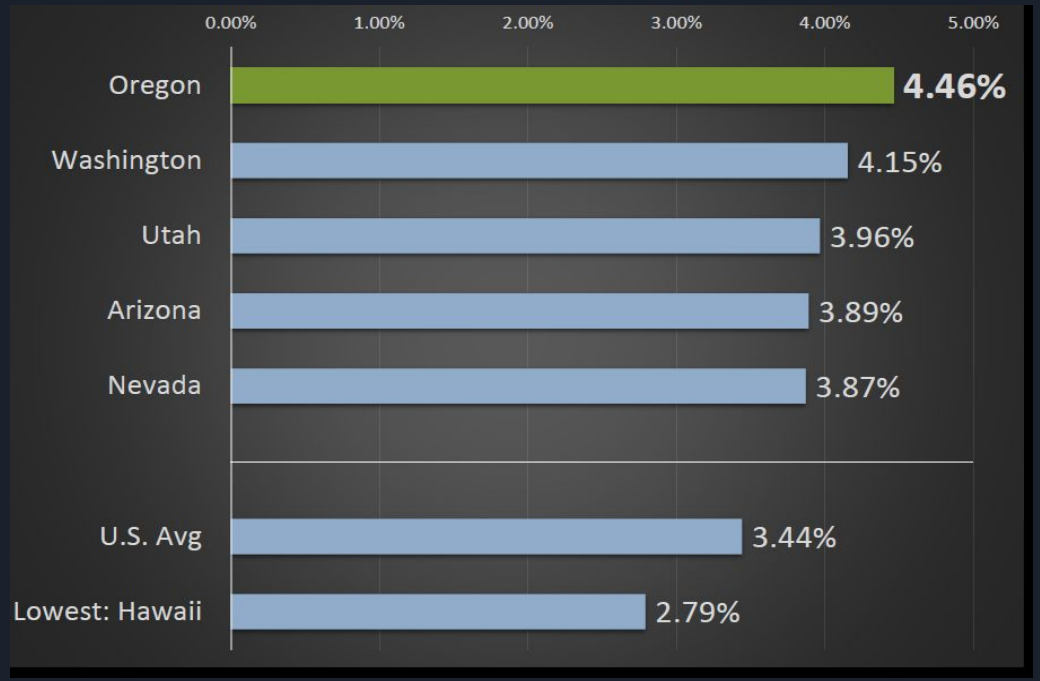
Rx Opioid Misuse Past Year,

NSDUH December 2021 Report (2019 - 2020, n=135,000, ages 12 and older) U.S. State Rankings

Rx opioids

Oregon Ranks 1st

Percent of population (teens & adults) reporting past year Rx opioid misuse



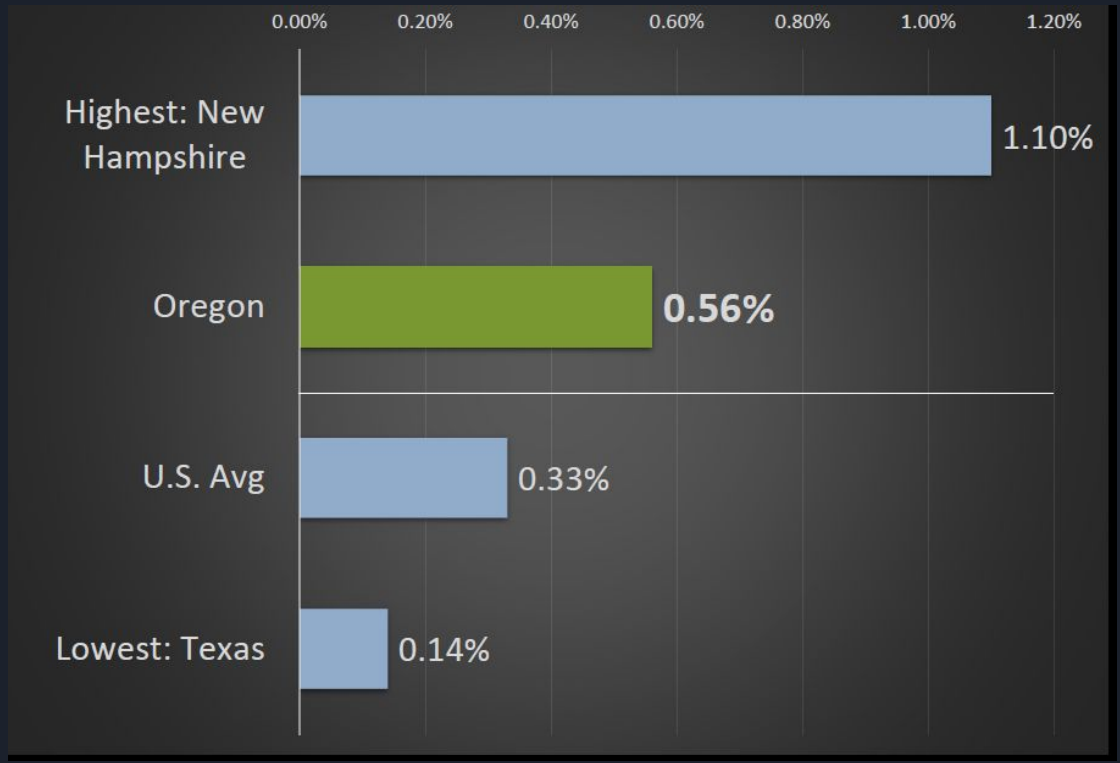
Heroin Use in the Past Year

NSDUH December 2021 Report (2019-2020, n=1350,000, ages 18 and older) U.S. State Rankings

heroin

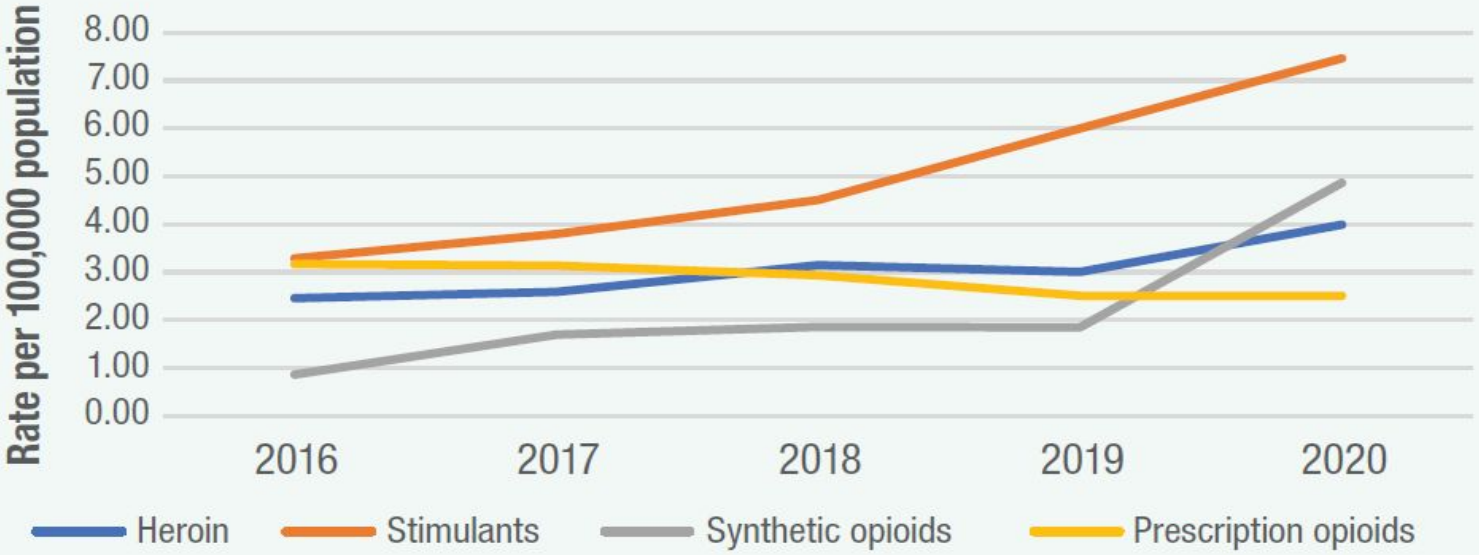
Oregon Ranks 11th

Percent of population (adults) reporting past year heroin use.



Overdose Deaths in Oregon

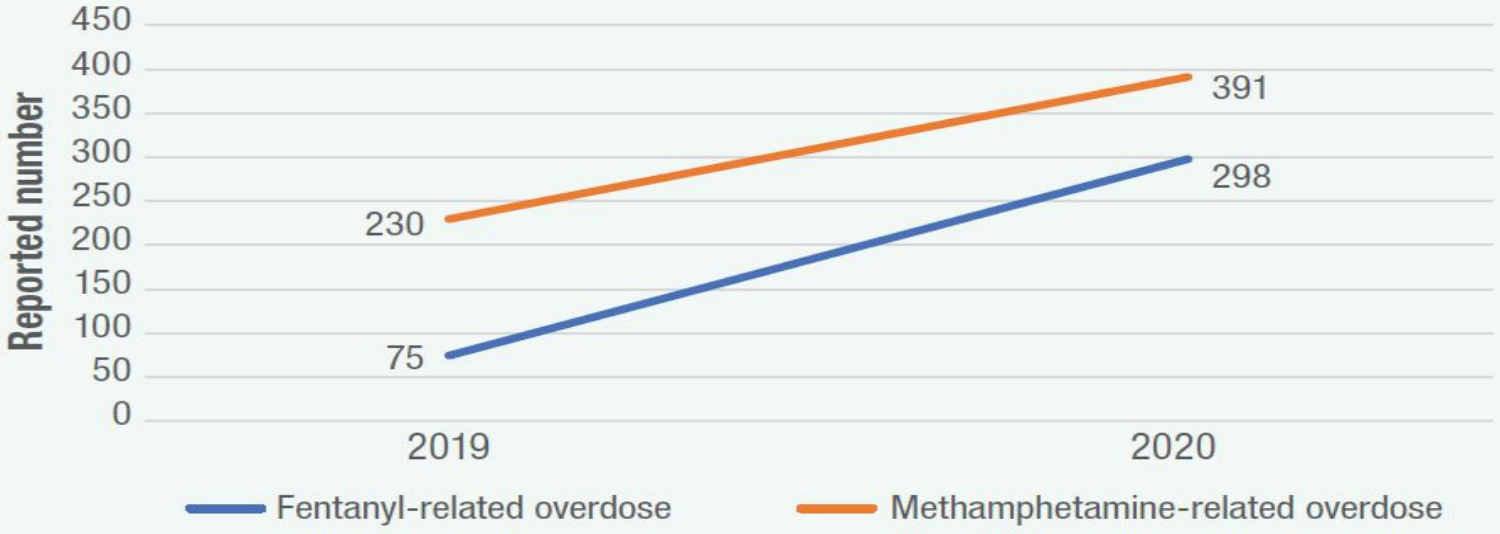
Figure 1: Unintentional drug overdose death rate, Oregon, 2016–2020 (1)



Source: Oregon Vital Records (Deaths), Center for Health Statistics, OHA

Fentanyl and Methamphetamine-Related Overdose Rates

Figure 4: Number of fentanyl- and methamphetamine-related deaths by year, Oregon, 2019–2020



Source: Oregon State Medical Examiner 2020 and 2021 annual reports

Harm reduction

- **Harm reduction** is a set of practical strategies and ideas aimed at **reducing** negative consequences associated with drug use. ... **Harm reduction** incorporates a spectrum of strategies from safer use, to managed use to abstinence to meet drug users “where they're at,” addressing conditions of use along with the use itself.
- Harmreduction.org


The logic of opposing harm reduction...
If I just take the life jackets out that should make people boat more safely...
Even better they might stop boating altogether.

EXAMPLES OF HARM REDUCTION IN OTHER AREAS

SUN SCREEN

SEAT BELTS

SPEED LIMITS

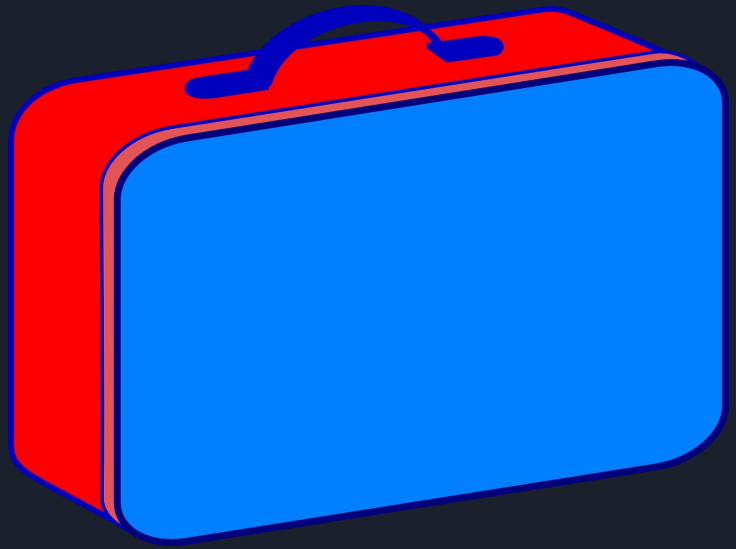
BIRTH CONTROL

CIGARETTE FILTERS

Nalox Boxes

Each box can hold up to narcan kits and placed throughout the school.

Can hold two narcan spray packages, two CPR masks, and educational materials.



Why is Harm Reduction Important

Naloxone - a harm reduction strategy

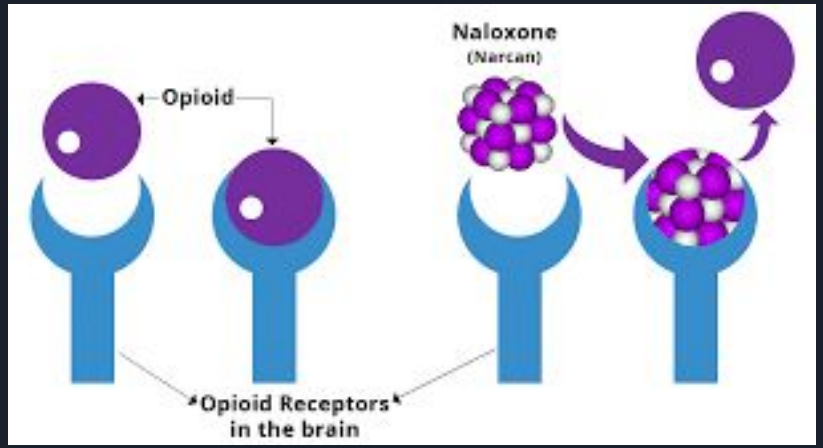
Naloxone is used as a harm reduction strategy. This means that it is not a strategy to stop the use of specific drugs. It is used to reduce the immediate dangers associated with an overdose; such as accidental death.

What is naloxone

Naloxone is a safe medication that can be used to reverse the effects of an opioid overdose. If someone has taken too much of an opioid - like oxycodone, heroin, or fentanyl - they may stop breathing and become unconscious. Naloxone can restore breathing within 2-5 minutes and bring them back to life.

How does naloxone work?

Naloxone replaces opioids on the brain receptors that are telling the body to stop breathing. Naloxone will stay active in the body for up to 90 minutes, but opioids can stay active for longer, which could cause the person to stop breathing again. Once an overdose has been reversed with naloxone, it is important to make sure the person receives follow-up care from emergency medical services. Naloxone does not reverse the effects of any other substances in the system, like alcohol, stimulants, or other pharmaceuticals like benzodiazepines.



What does naloxone look like?

Naloxone comes in two forms: nasal spray and injectable. The naloxone nasal spray is familiarly known by the brand NARCAN and is sprayed directly into the nose where it is absorbed and can take effect in 2- minutes. Injectable naloxone is injected directly into muscle and can take effect in 2- minutes. If the first dose of naloxone doesn't start the person breathing again within 2 minutes, it is safe to give a second dose.

Responding to an overdose with naloxone

Step 1 Recognize an Opioid Overdose

Someone who is experiencing an opioid overdose will have slow or irregular (gurgling) breathing, or may not be breathing at all. Some other symptoms to look out for include: blue or purple fingernails and lips pale or clammy skin, and unresponsive to voice or touch.

If you are unsure if the person is just unconscious, administer a sternal rub by making a fist and rubbing your knuckles firmly along the person's sternal bone. This is painful enough to wake a sleeping or unconscious person, but will not be able to reverse an opioid overdose.

Responding to an overdose with naloxone

<u>Step 2 Administer naloxone</u>

The first and most important thing to do is administer naloxone.

You can also call for Emergency Medical Services at the same time, so that they are on the way while you are giving the person naloxone.

Start a timer or count to 2 minutes while administering rescue breathing i you are able. If the person is not responding on their own after 2 minutes, you can give them another dose of injectable or nasal naloxone. Naloxone takes about 2- minutes to take effect, and more than one dose may be necessary if the person has ingested fentanyl.

Responding to an overdose with naloxone

Step 4 Rescue Breathing

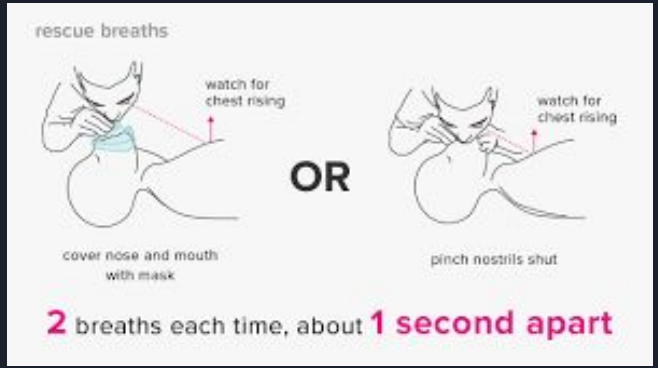
While you are waiting for the naloxone to take effect, administer Rescue Breathing to support respiration. If you are CPR trained, you can also begin CPR at this time.

You can use a face shield while performing rescue breathing, although this will not prevent the transmission of respiratory viruses like COVID-19.

Continue giving breaths every 5 seconds, before administering another dose of naloxone if necessary.

Once the person is breathing on their own again, you can move them into the Recovery Position (Step 5).

If the person is still not breathing and/or has no pulse after receiving naloxone and rescue breathing, they need emergency medical care. Call 9-1-1 immediately if you have not done so already.



Responding to an overdose with naloxone

Step 5 Recovery Position

Once the person is breathing on their own again, put the person in the Recovery Position so that their airway is clear and they won't check on their own vomit if they get sick. Roll the person on to one of their sides, place on arm under the head to pillow the head and keep the face turned to the side, and support the body weight with a bend knee so the legs are in the shape of the number 4.

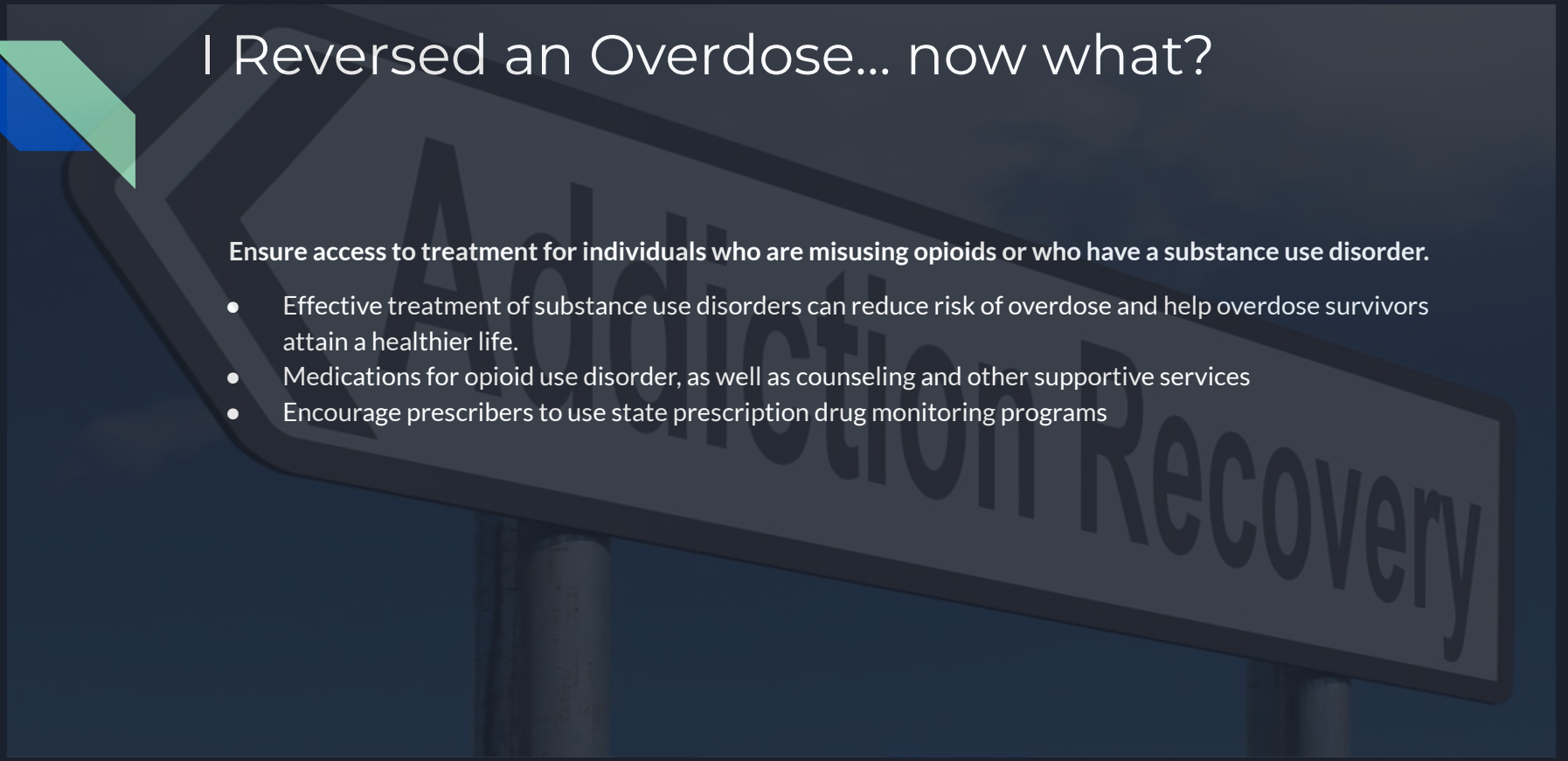
Responding to an overdose with naloxone

Step 6 Aftercare

Waking up from an overdose can be traumatizing, and the person may seem scared or confused, especially if you are not someone they know. As they start to wake up, give them a little bit of space and gently welcome them back into consciousness. You can try to engage them by saying **“Hi, my name is [YOUR NAME], and I just had to give you Narcan. I’m sorry you’re not feeling great. Sit up when you’re ready. You’re safe, and I’m glad you’re alive.”**

Once the person is breathing and conscious again, the naloxone will continue to work for 30-90 minutes. After the naloxone wears off the person could experience an overdose again. If a loved one or trusted companion is able to stay with them, this can help to make sure an overdose doesn’t happen again, or if it does, someone is able to re-administer naloxone. If the person is experiencing other medical complications, they should seek medical care and attention.

I Reversed an Overdose… now what?



Ensure access to treatment for individuals who are misusing opioids or who have a substance use disorder.

- Effective treatment of substance use disorders can reduce risk of overdose and help overdose survivors attain a healthier life.
- Medications for opioid use disorder, as well as counseling and other supportive services
- Encourage prescribers to use state prescription drug monitoring programs

Medicated Assisted Treatment

MEDICATIONS	BRAND NAMES	TYPE	EFFECTS	ROUTE OF ADMINISTRATION	FOR WHOM	SIDE EFFECTS
Injectable Naltrexone	Vivitrol	Antagonist	Blocks the pleasurable effects of opiates to reduce the likelihood of relapse & opiate overdose	Intramuscular injection once monthly	For patients that may struggle to remember to take a daily medication	Nausea, headache, weakness, injection site reactions
Buprenorphine	Buprenex, Belbuca, Butrans, Probuphine, Subutex	Mixed Agonist-Antagonist	Prevents opiate withdrawal & cravings with its agonistic effects, also blocking against opiate overdose through its antagonist action	Orally - take daily or transdermally (skin patch) - worn daily	For patients with low liklihood of misuse potential	Headache, dizziness, trouble sleeping, tingling sensation
Buprenorphine + Naloxone	Suboxone, Zubsolv, Bunavil	Mixed Agonist-Antagonist	Prevents opiate withdrawal & cravings with its agonistic effects, also blocking against opiate overdose through its antagonist action. The added naloxone decreases the misuse potential	Orally - sublingual tablets or films taken daily	For patients with opioid use disorder with access to an office-based licensed prescriber. Misuse potential	Constipation, dizziness, drowsiness, headache
Methadone	Dolophine, Methadose	Agonist	Prevents opiate withdrawal and cravings, but at prescribed doses, does not create opiate-like effects	Orally - taken daily, administered by a SAMSHA certified treatment program or clinic	For patients with the proximity & availability to attend a clinic daily. Misuse potential	Sleep problems, anxiety, restlessness, dry mouth, nausea, decreased sex drive
Naloxone	Narcan	Antagonist	Counters the effects of an opiate overdose	Injection or oral spray - administered only during an overdose emergency	For opiate users during an overdose	Chest pain, shortness of breath, nausea, headache, anxiety, confusion

Summary

- Opioids are prescription medications used to treat pain such as morphine, codeine, methadone, oxycodone, fentanyl, as well as illegal drugs such as heroin, and illicit potent opioids such fentanyl.
- Harm reduction saves lives and is:
  - Meeting the person where they are
  - Non-Judgemental
  - Supportive
  - Accepting
- Ensure ready access to naloxone
- Evaluate for signs of opioid overdose
- Call 911 for help
- Administer Naloxone
- Support the person’s breathing
- Monitor the person’s response
- Access to treatment


QUESTIONS

Slide Resources / References

DEA.gov

Oregon Vital Records (deaths), Center for Health Statistics, OHA

Oregon State Medical Examiner 2020 and 2021 annual reports

Narcan.com

MHACBO.org

ADF.org.au

SAMSHA.gov

Rural Communities Opioid Response Program