



Naloxone and Managing Opioid Overdose

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What are Opioids?

- › Pain killers mainly
 - Hydromorphone – Dilaudid aka Dillys
 - Morphine
 - Codeine
- › Most famous street opioid is HEROIN!
 - Called “down or H or H-train” on the street
 - No longer in Ottawa
- › Now all FENTANYL and analogs
 - Used mainly in surgery to put you to sleep
 - Now the street supply is manufactured locally – no longer imported

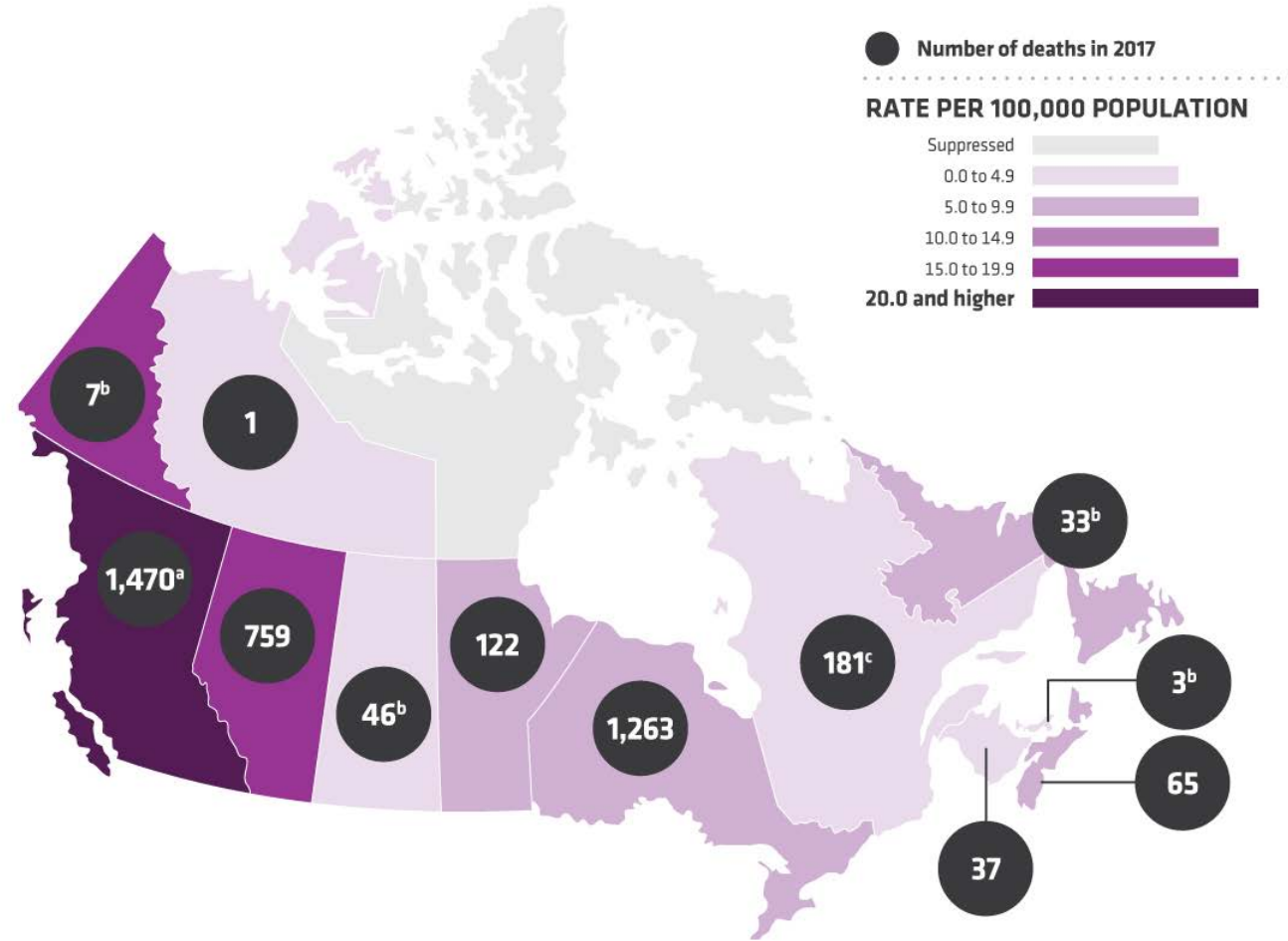




What is an opiate overdose?

- › Opioids are substances that act on opioid receptors to produce morphine-like effects. Opioids are most often used medically to relieve pain
- › Opiate overdoses
 - mu receptors in brain and spinal cord saturated by opioid → depressed breathing → hypoxia → brain death
 - 3-5 mins to die!!!

The Opioid Problem is Getting Worse!



a Includes deaths related to all illicit drugs including, but not limited to, opioids.

b Includes deaths with completed investigations only.

c Includes deaths related to all illicit drugs including, but not limited to, opioids, from July to December only. This number is expected to rise.



The Opioid Problem is Getting Worse!

- › 4000 Canadians lost their lives in 2017
 - Increase of 34% over 2016
- › Accidental overdoses deaths caused by fentanyl increased by 81% in 2017
- › 17 Canadians per day were hospitalized for opioid poisoning
 - Increase of 16% over 2016
- › Opioid dispensing by pharmacies **DECREASED** by 10% over 2016
 - Now more street use



What are the signs?

Physical signs

- › ↓ level of consciousness
- › Pinpoint pupils – “Pinnies”
- › Deep snorting or gurgling sounds
- › Blue lips or fingernails
- › Limp body
- › Vomiting
- › Shaking – neurological response
-“Funky chicken”

Vital signs

- › ↓ respiratory rate
- › ↓ heart rate
- › ↓ blood pressure
- › ↓ O2 saturation





Risk Factors for Opioid Overdose

› Patient factors

- Loss of tolerance / no tolerance (cocaine vs fentanyl)
- Other medical problems—asthma
- Previous overdose – any substance
- Using alone

› Drug factors

- Potency – drug are stronger than ever
- Contaminants – cant trust your drug dealer
- Routes of administration – vaping, injecting, chem sex
- Polysubstance use – drinking with drugs



What is Naloxone?

- › Brand name is Narcan (Narcan Kit)
- › Opiate antagonist
 - Does not clear the drug, it temporarily replaces the drug at the receptor site
- › Reverses the effects of opiate overdose
- › 4mg nasal spray
- › Takes ~2-4 minutes to work



Nasal Naloxone

- › Higher amounts of naloxone available for bloodstream and lasts longer as compared to injectable
 - More risk of side effects as compared to injectable
- › One spray per dose – given every 3 mins in alternating nostrils
- › People don't have to be breathing well for it to work!





Is it safe?

YES!

- › Will have NO effect on someone who has not taken opiate drugs
- › Only contraindicated in people with allergy to Naloxone
- › Pregnancy is NOT a contraindication

Effects of Naloxone

- › Naloxone can cause mild to severe withdrawal symptoms in opiate dependent users
 - Agitation
 - Anxiety
 - Muscle aches
 - Pain
 - Sweating
 - Nausea
 - Vomiting
- › Duration of effect ~ 1 hour
 - Strong opioids last longer so clients may slip back into OD
 - **Call 911-Always go to hospital**





Procedure

1. Assess (shake and shout)
2. You **MUST** Call 911
3. Naloxone (Nasal or Injectable)
4. Chest compressions
5. Is it working
 1. No – Naloxone again (3-5 mins later)
 2. Yes – continue chest compressions and wait for EMS



Getting Naloxone

- › Free for everyone from Ontario pharmacies
 - ID no longer required but preferred
- › Criteria
 - Currently using an opioid
 - › Street or prescription
 - Past user of opioids at risk for returning to use
 - A family member or friend of someone at risk of opioid overdose
- › Initial kits vs replacement kits
 - Can get one or two kits
 - Injectable and **nasal spray** both available for free
- › Schedule II
 - Over the counter, not self selection



Naloxone : Why Pharmacy?

- › Ideal point of access
- › 56.1% who died of overdose filled a prescription for opioids in that month
- › Quick training – no appointment or planning
- › ***We have supplies and training – maybe uggghhh!***



Questions?

Ask not why the addiction.....
but why the pain?