

**BREAKING NEWS**

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Since 1883

# OPIOID CRISIS

25,000 DEATHS  
THE LAST

OPIOID TRAINING:

**NALOXONE AND OVERDOSE BASICS**

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- This training is offered by the Florida Alcohol and Drug Abuse Association and JBS International. It is supported by funding from the Florida Department of Children and Families (DCF), Office of Substance Abuse and Mental Health (Contract #LD987) as part of its Substance Abuse and Mental Health Services Administration (SAMHSA) State Targeted Response to the Opioid Crisis (O-STR) grant efforts.



## PURPOSE OF THE OPIOID STR GRANT

The grant aims to address the opioid crisis by:

- ✓ Increasing access to treatment;
- ✓ Reducing unmet treatment need; and
- ✓ Reducing opioid overdose related deaths.

## MODULE LEARNING OBJECTIVES

Participants will:

- Describe the purpose of naloxone.
- Name two common examples of factors that can contribute to a person overdosing.
- List two methods of naloxone administration.

# OPIOID OVERDOSE EPIDEMIC

- The United States (US) is in the midst of an opioid overdose epidemic.
- The Centers for Disease Control and Prevention (CDC) reports overdose is now the leading cause of accidental death in the U.S., exceeding motor vehicle fatalities.

IN 2016...

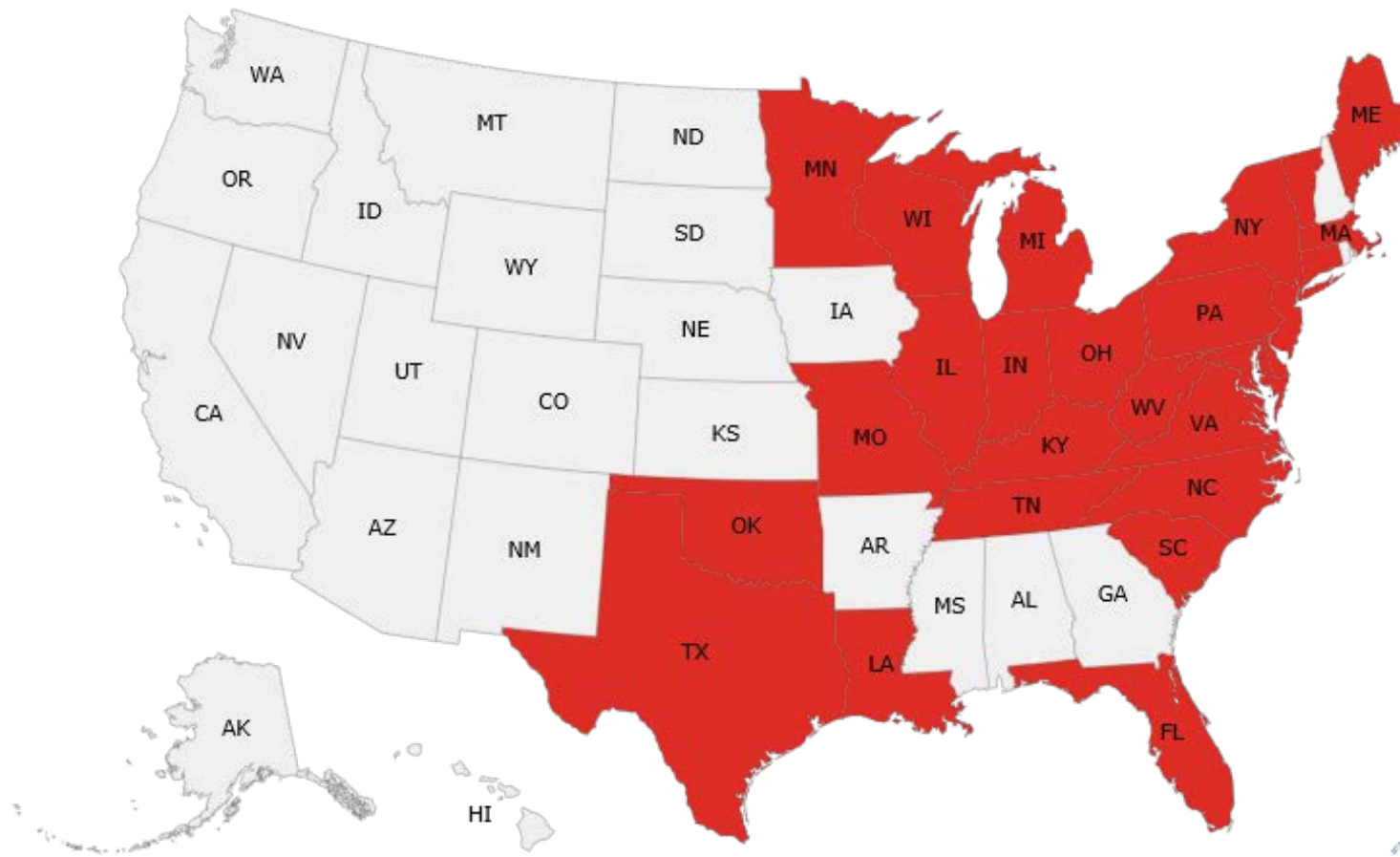


**116**

People died every day  
from opioid-related  
drug overdoses

## OPIOID OVERDOSE EPIDEMIC

- In 2016, opioids (including prescription opioids) killed more than 42,000 people in the United States -- more than any year on record; 40 percent of all opioid overdose deaths involve a prescription opioid.
- Between 2015 and 2016, Florida experienced a 46.3 percent increase in overdose deaths per 100,000 people.
- Opioids were identified as either the cause of death, or were present in the deceased's system in 5,725 cases. That's 1,483 more incidences than 2015.



FLORIDA IS  
AMONG THE  
STATES WITH THE  
MOST OPIOID  
OVERDOSES.

## HOW DOES OPIOID OVERDOSE OCCUR?

Opioid overdose can occur when a person:

- Took an opioid as directed, but the prescriber miscalculated the opioid dose, or an error was made by the dispensing pharmacist.
- Misunderstood the prescriber's directions for use, or forgot they took a dose, and accidentally took too much.
- Deliberately misused a prescription opioid, or an illicit drug such as heroin.
- Mixed opioids with alcohol, over-the-counter drugs, or other medications (especially sedative hypnotic agents, commonly called "depressants" like Ativan, Valium, and Xanax) that slow down or "depress" the activity of the brain (causing sedation, respiratory depression, and overdose).



# OVERDOSE HIGH RISK FACTORS

- Completing mandatory opioid detoxification or abstinent for a period of time (and presumably with reduced opioid tolerance and high risk of relapse to opioid use)
- Recently released from incarceration and who have a history of opioid use disorder (and presumably have reduced opioid tolerance and high risk of relapse to opioid use)
- Discharged from emergency medical care following opioid intoxication or poisoning (overdose)
- NOTE: These individuals (and others at high risk for opioid overdose) should be engaged in intensive overdose prevention interventions.

## OVERDOSE HIGH RISK FACTORS

- Nearly one-in-five chronic pain patients receiving prescription opioids had experienced an overdose, and more than half engaged in high-risk behaviors; (e.g., combining opioids with alcohol).

Date \_\_\_\_\_

Name \_\_\_\_\_

... PRACTICE CLINIC

Rx

DOB \_\_\_\_\_

Opioids

At Risk Patient?

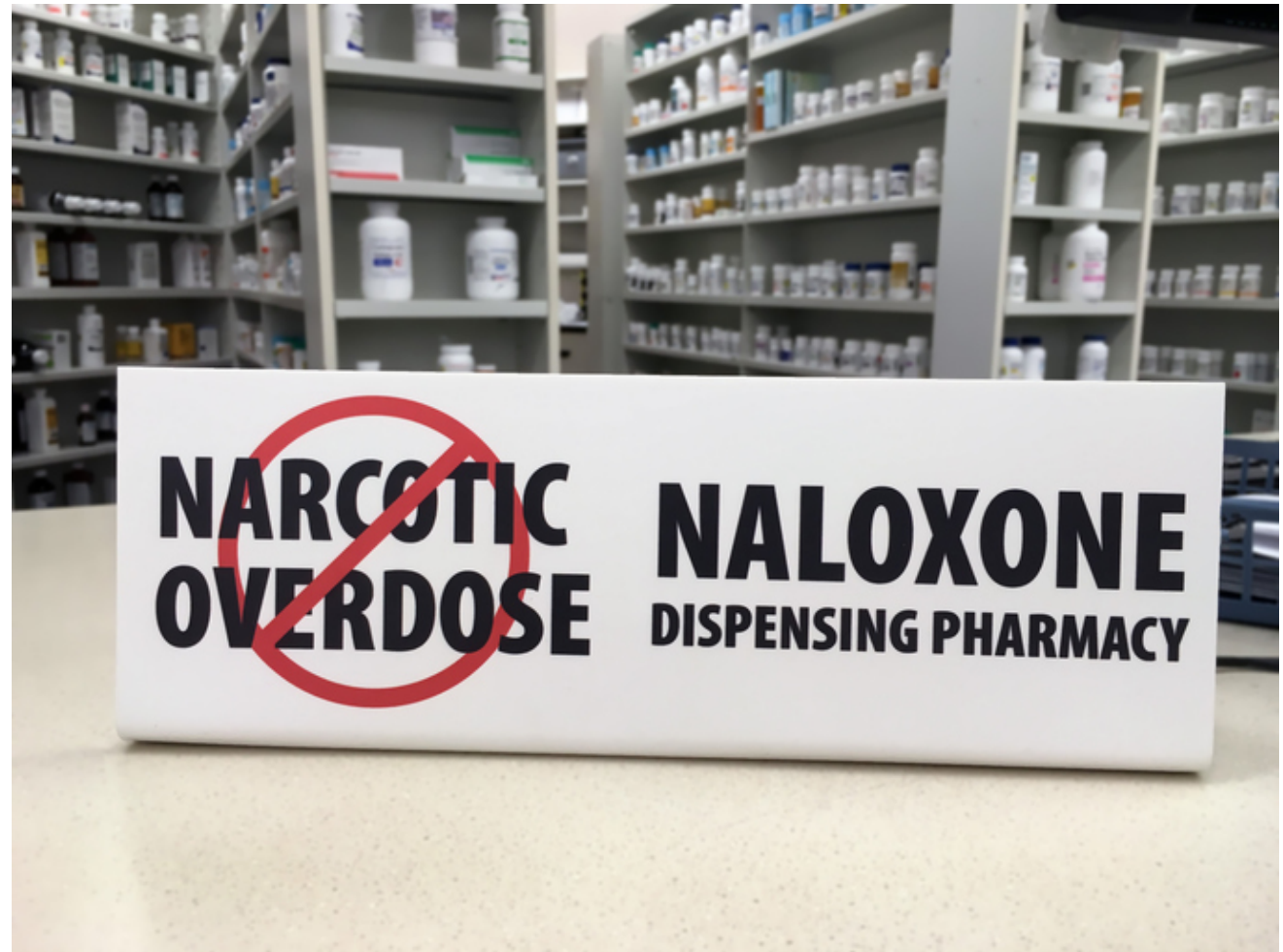
Opioids

Discuss Risks

and Benefits

# WHAT IS NALOXONE?

- Naloxone is a medication designed to rapidly *reverse* opioid overdose.
- It can very quickly restore normal respiration to a person whose breathing has slowed or stopped as a result of overdosing with heroin or prescription opioid pain medications.





# ABUSE POTENTIAL OF NALOXONE

NALOXONE DOES NOT HAVE  
THE POTENTIAL FOR ABUSE. IT  
SIMPLY REVERSES THE EFFECTS  
OF OPIOID OVERDOSE.

## HOW NALOXONE IS ADMINISTERED

Naloxone is a “rescue drug” that has been approved by the Food and Drug Administration (FDA).

It can be administered in a number of ways that make it possible for a lay person to use.

Naloxone can be administered by injection, or through a nasal spray.

## PRE-PACKAGED INTRA-NASAL SPRAY



- NARCAN® intra-nasal spray is a pre-filled, needle-free device that requires no assembly. It is sprayed into one nostril while the person experiencing an overdose lies on their back.

## PRE-PACKAGED INTRA-NASAL SPRAY

- NARCAN<sup>®</sup> Nasal Spray allows for naloxone to be sprayed into the nose.
- Depending on the state you live in, friends, family members, and others in the community may give the auto-injector and nasal spray formulation of naloxone to someone who has overdosed.



NDC 67457-292-02

# Naloxone Hydrochloride Injection, USP

0.4 mg/mL

For Intravenous, Intramuscular or  
Subcutaneous Use

 Mylan

Rx only

10 x 1 mL Single-Dose Vials



## INJECTABLE (PROFESSIONAL TRAINING REQUIRED)

GENERIC BRANDS OF  
INJECTABLE NALOXONE VIALS  
ARE OFFERED BY A VARIETY OF  
COMPANIES.





## THE EVZIO AUTO-INJECTOR

- The Evzio auto-injector can deliver a dose of naloxone through clothing, (if necessary), when placed on the outer thigh. Once activated, the device provides verbal instructions to the user and describes how to deliver the medication, (similar to automated defibrillators).
- It can be used by family members or caregivers to treat a person that is known or suspected to have had an opioid overdose.

## WHAT DOSE CAN BE PROVIDED?

- The dose varies depending on the formulation, and sometimes more than one dose is needed to help the person start breathing again (especially if fentanyl or carfentanil was involved).
- Fentanyl is a powerful synthetic opioid pain reliever similar to morphine. It is 40-50 times more potent than heroin, and 50-100 times more potent than morphine.
- Carfentanil, a tranquilizing agent for elephants and other large mammals, is a synthetic opioid 100 times more potent than fentanyl, and 10,000 times more potent than morphine.

## NALOXONE SIDE EFFECTS

- Naloxone is an extremely safe medication that only has a noticeable effect in people with opioids in their systems.
- Naloxone can (but does not always) cause withdrawal symptoms which may be uncomfortable, but are not life-threatening. On the other hand, opioid overdose is extremely life-threatening.
- Withdrawal symptoms may include headache, changes in blood pressure, rapid heart rate, sweating, nausea, vomiting, and tremors.

## GOOD SAMARITAN LAWS

- Florida's "911 Good Samaritan Act" (passed in 2012) protects a person who seeks medical assistance in good faith for an individual experiencing a drug-related overdose from charge, prosecution, or other penalties for possession of a controlled substance if the evidence against them was obtained as a result of the person's seeking medical assistance for an overdose victim. The same immunity applies to the victim.
- In 2015, the Emergency Treatment and Recovery Act, was passed. It expands access to naloxone in two ways -- it permits medical professionals who are permitted to prescribe drugs to prescribe and dispense naloxone to a patient or a family member, friend, or other person who has contact with a person at risk of opioid overdose; and it also permits those medical professionals to administer naloxone in an emergency.

## SIGNS OF OVERDOSE, A LIFE-THREATENING EMERGENCY

- The face is extremely pale and/or clammy to the touch.
- The body is limp.
- Fingernails or lips have a blue or purple cast.
- The person is vomiting or making gurgling noises.
- He or she cannot be awakened from sleep or is unable to speak.
- Breathing is very slow or stopped.
- The heartbeat is very slow or stopped.

## SIGNS OF OVERMEDICATION (CAN PROGRESS TO OVERDOSE)

- Unusual sleepiness or drowsiness.
- Mental confusion, slurred speech, or intoxicated behavior.
- Slow or shallow breathing.
- Extremely small “pinpoint” pupils.
- Slow heartbeat or low blood pressure.
- Difficulty in being awakened from sleep

Two handouts that cover: 1. Signs of Overdose and Overmedication; and 2. Essential Steps for First Responders are available with this training module.

## SAMHSA OPIOID OVERDOSE RESOURCE

- The Substance Abuse and Mental Health Services Administration has developed the Opioid Overdose Prevention Toolkit (<http://store.samhsa.gov/product/Opioid-Overdose-Prevention-Toolkit-Updated-2016/SMA16-4742>)

## SAMHSA Opioid Overdose Prevention TOOLKIT:

Facts for Community Members

Five Essential Steps for First Responders

Information for Prescribers

Safety Advice for Patients & Family Members

Recovering From Opioid Overdose



Can be downloaded from:

<https://www.asahq.org/whensecondscount/wp-content/uploads/2017/12/Opioid-Overdose-Card.pdf>

## OPIOID OVERDOSE RESUSCITATION

### Symptoms of an overdose:

1. Slow and shallow breathing.
2. Very sleepy and unable to talk, or unconscious.
3. Skin color is blue or grayish, with dark lips and fingernails.
4. Snoring or gurgling sounds.

### If there are symptoms of an overdose:

1. Lightly tap, shake, and shout at the person to get a response. If there is still no response, rub knuckles on the breast bone.
2. If the person responds, keep them awake.
3. Call 911.

### If you get little or no response:

1. Call 911.\*
2. If their breathing is shallow or non-existent, or if the skin color is blue or grayish, with dark lips and fingernails, perform mouth-to-mouth rescue breathing by tilting head back and lifting up chin until mouth opens, clearing airway. Give two quick breaths to start and then a strong breath every 5 seconds.
3. If the person no longer has a heartbeat (pulse), continue to perform rescue breathing. Perform CPR by pushing hard on the chest bone at a rate of 100 times per minute.
4. Stay with the person. If you have to leave the person alone or vomiting occurs, place the person in the recovery position - on their side, hand supporting the head, mouth facing downward, and leg on the floor to keep the person from rolling onto stomach.

*\*If you have access to naloxone (also called Narcan® - a medication that can rapidly reverse the overdose of opioids), administer it according to the package instructions, in addition to calling 911.*



Perform mouth-to-mouth rescue breathing.



Perform chest compressions.



Place the person in the recovery position.

If you or a family member is facing a substance abuse or mental health issue, call the Substance Abuse and Mental Health Services Administration at 1-800-662-HELP (4357).

American Society of Anesthesiologists® 



# NALOXONE (NARCAN®) KITS



- Non-profit organizations that are willing to hand out naloxone kits directly to people at risk of overdose and their friends/families can contact Amanda Muller at DCF to obtain kits at no cost. Her contact information is:

Amanda Muller

DCF Overdose Prevention Coordinator

[Amanda.Muller@myFLfamilies.com](mailto:Amanda.Muller@myFLfamilies.com)

850-717-4431

## FOR QUESTIONS, OR FOR ADDITIONAL INFORMATION

For additional opioid training modules:

- [FADAA.org](https://www.fadaa.org)

For additional information about Florida's opioid treatment options, or other DCF opioid information:

Walter Castle LCSW, MCAP

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Florida Department of Children and Families

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Tallahassee, FL 32399

Office: (850) 717-4277

Email: [walter.castle@myflfamilies.com](mailto:walter.castle@myflfamilies.com)

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