What are opioids

Opioids are chemicals that act in the brain to relieve pain, often used to suppress cough, treat addiction, and provide comfort. After prolonged use of opioids, increasing amounts are needed for the same effects. Opioids are often misused resulting in danger. Common opioids include:

- Heroin (Smack, Junk)
- Codeine (combo meds e.g. Tylenol No. 3)
- Fentanyl (Duragesic Patch)
- Oxymorphone (Opana)
- Oxycodone (Percocet, Roxicodone)
- Meperidine (Demerol)
- Hydromorphone (Dilaudid)
- Methadone, Morphine (MS Contin, Kadian)
- Hydrocodone (Norco, Vicodin)

Who is at high risk for opioid overdose

- Individuals using care from multiple doctors, not following instructions about prescription use
- Have prescription for methadone, buprenorphine, or high dose opioids
- Initiating or ending opioid maintenance therapy
- History of overdose, recreational users of prescription opioids, IV drug users
- Recently discharged from detoxification programs or recently released from prison
- Mixing Drugs: Alcohol, antidepressants, sedative / hypnotics, stimulants
- Currently taking benzodiazepines (e.g. Ativan®, Klonopin®, Valium®, Xanax®)
- Elderly clients using opioids for pain or patients using pain relieving patches incorrectly
- Taking more than maximum daily dose of acetaminophen containing opioids

Recognition

- Slow or irregular breathing, snoring or gurgling sounds
- Having a bluish color of the skin, nails or lips (lack of oxygen)
- Not responsive when shaken
- Cold clammy sweaty skin, small pupils

Response

A. Is victim responding to you?
   - Give them a gentle shake, yell their name
   - Do a sternal rub: Make a fist and rub the breastbone with your knuckles
   - Any response? Are they breathing?

B. Call 911 for help
   - Say “someone is unresponsive and not breathing”
   - Give clear address and location
   - If the victim needs to be left alone to call 911, place him/her in recovery position

Recovery position

1. Turn to one side, place hand against chin
2. Bend knee against floor
3. Tilt head back, lift chin to open up the airway

References available upon request
C. Give Naloxone

Step 1. Lay the person on their back to receive a dose of NARCAN Nasal Spray.

Step 2. Remove NARCAN Nasal Spray from the box. Peel back the tab with the circle to open the NARCAN Nasal Spray.

Step 3. Hold the NARCAN Nasal Spray with your thumb on the bottom of the plunger and your first and middle fingers on either side of the nozzle.

Step 4. Tilt the person’s head back and provide support under the neck with your hand. Gently insert the tip of the nozzle into one nostril until your fingers on either side of the nozzle are against the bottom of the person’s nose.

Step 5. Press the plunger firmly to give the dose of NARCAN Nasal Spray.

Step 6. Remove the NARCAN Nasal Spray from the nostril after giving the dose.

D. Give rescue breaths if not breathing as shown below. Give 2nd dose of naloxone, if no response in 2-3 minutes using a new naloxone nasal spray in the other nostril. Follow 911 dispatcher instructions

Rescue breathing
- Roll the person onto their back
- Make sure their mouth is clear (no chewing gum, food or vomit)
- Tilt head back, lift chin, pinch nose
- Give 2 breaths to start and then 1 breath every 5 seconds. Chest should rise

E. After naloxone
- Stay until help arrives to provide support & make sure the overdose does not come back
- Remind the person that naloxone will wear off in about 30-90 minutes

Preventing overdose
- Do not mix alcohol, benzodiazepines, pain medications, heroin or methadone - can cause your breathing and heart to stop working
- Take medications as directed. Never open opioid capsules, cut or fold patches; chew, crush, or dissolve opioid tablets
- Know the difference between immediate release and extended release medications
- Empower yourself, learn how to do rescue breathing and get naloxone

YouTube Narcan training

How to Use Narcan with the DOPE Project - YouTube  https://www.youtube.com/watch?v=bUtYpbdUSus

References available upon request