Harm Reduction and Naloxone Training



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 We will be discussing some sensitive topics related to drug use, overdose, and treatment

 Please feel free to leave at anytime and we can connect later

Course Outline

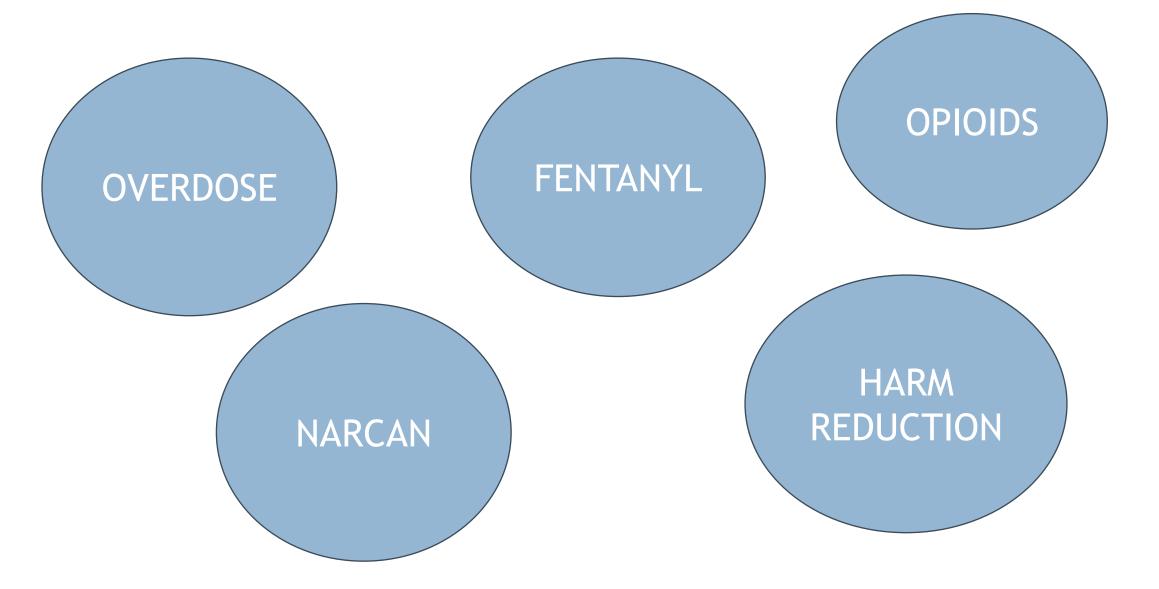
- Why do we need training?
 - Statistics
 - Real Stories
 - Ending the Stigma
- What do we need to learn about?
 - What is addiction and what is substance use disorder
 - What are opioids
 - What is fentanyl

 How do we address the opioid crisis and substance use disorder?

- Harm reduction
- Naloxone training
- Combat myths



What Do You Know?



Why Are You Here?

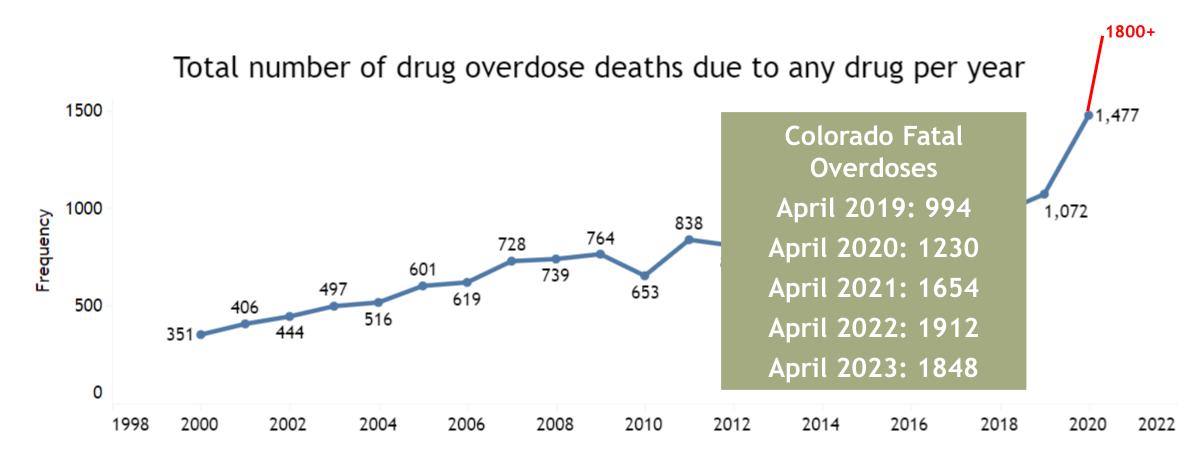
#1 killer for people age 18-45

US tops **1 Million** overdose deaths since 1999 during the opioid epidemic

2022 - over 100,000 deaths







https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm



More Numbers

A fatal overdose in Colorado occurs every:



53 Overdose deaths in Weld in 2020 WELD 36 deaths = ages 15 -24 years

Overdose deaths in Weld in 2021

100

Hospital Admissions for Overdose Ages 15 - 24 years largest group at 28.2%

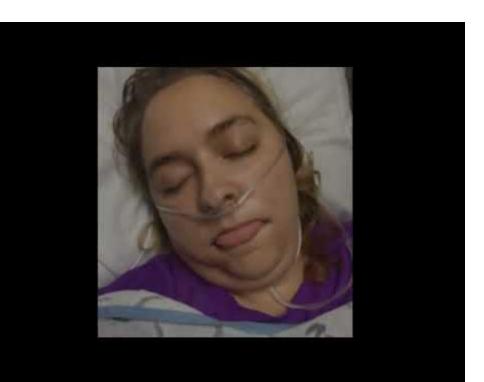
> Weld County experienced a 47% Increase in Overdose Deaths from 2020 to 2021



https://cdphe.colorado.gov/overdose-prevention

Beyond the Numbers: Echoes of the opioid epidemic

 <u>https://corxconsor</u> <u>tium.org/projects/</u> <u>beyond-the-</u> <u>numbers-echoes-</u> <u>of-the-opioid-</u> <u>epidemic/</u>



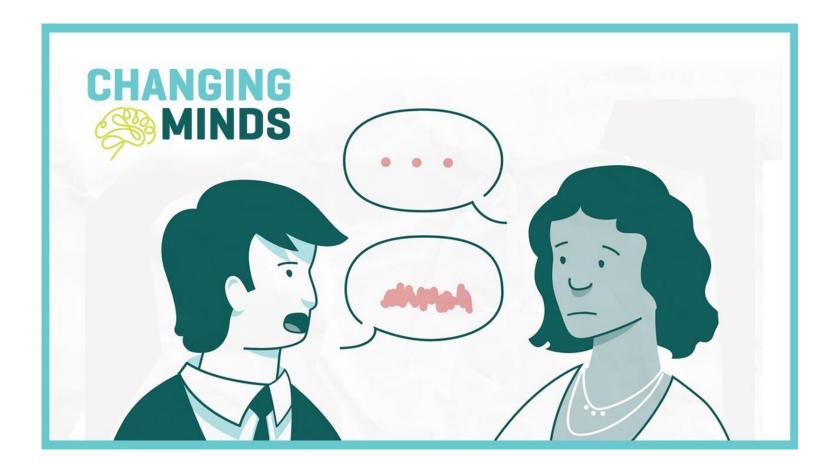


Stigma is a mark of disgrace that sets a person apart from others. When a person is labelled by their illness they are no longer seen as an individual but as part of a stereotyped group. Negative attitudes and beliefs toward this group create prejudice which leads to negative actions and discrimination.

- Western Australia Department of Health



What is Addiction and Substance Use Disorder?





What if?

- You go to the hospital with chest pain and are diagnosed as having a heart attack...
 - Told it's "your fault" because of your "choices"
 - Denied treatment because you "did it to yourself"
 - Given a list of cardiologists and Cath Labs to call
 - Only given aspirin if you agree to go to counseling
 - Kicked out of the hospital for more chest pain





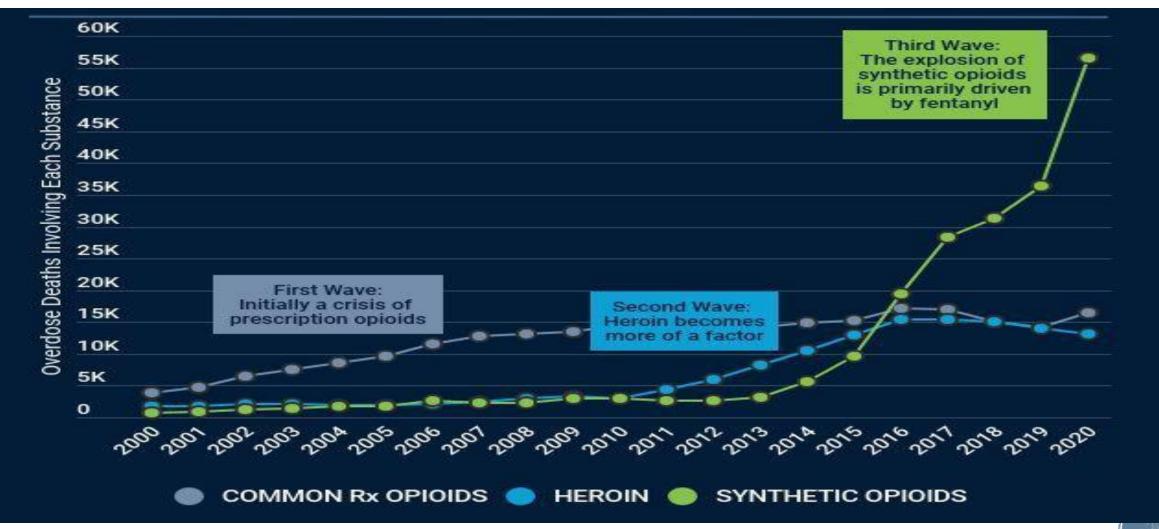
Language Matters



SAFEProject

Robert D Ashford et al., Drug and Alcohol Dependence (2018)

The Opioid Wave



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What are Opioids?

Opioids can be:

- Natural or synthetic
- Prescription medications or illegal drugs
- Pills, capsules, powder, dermal patches, or liquid
- Swallowed, smoked, snorted, or injected

The Limbic System

Opioids can create feelings of pleasure, relaxation and contentment The Brainstem

Opioids can slow breathing, stop coughing and reduce feelings of pain Opioid use changes the amount and sensitivity of dopamine receptors

Users to need a continuous supply of opioids to feel "normal." <u>Changing Minds</u>

The Spinal Cord

Opioids decrease feelings of pain, even after serious injuries



Generic Name	Brand Name	
Oxycodone	Oxycontin [®] , Percocet [®] , Roxicodone [®]	
Oxymorphone	Opana®	
Hydrocodone	Vicodin [®] , Lorcet [®] , Zohydro [®] , Zortab [®]	
Hydromorphone	Dilaudid®	
Morphine		1
Meperidene	Demerol®	2
Codeine	Tylenol® 3 & 4	
Buprenorphine	Suboxone [®] , Subutex [®] , Zubsolv [®]	
Methadone		
Fentanyl	Duragesic [®]	









Illicitly manufactured <u>fentanyl</u> (IMF)

- Counterfeit Pills (Opioids, Stimulants, Benzo)
- Powder form looks like heroin, cocaine, meth
- 100x more potent than morphine
- 50x more potent than heroin

Illicit Fentanyl

Lethal Dose: 2 mg (5 grains of salt)





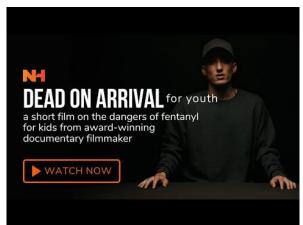




66% of all OD deaths



6 out of every 10 pills contain a potentially lethal dose











Factors Increasing Overdose Risk

Reduced tolerance (following detoxification, release from incarceration, cessation of treatment)

Drinking alcohol or using other drugs while taking an opioid (benzodiazepines, cocaine, meth, marijuana)

Injection drug use

Purchasing from the black market

Using different strains/sources of drugs (majority of all drugs contaminated with fentanyl)

Poor physical health

Opioids + benzodiazepines = 10x chance of an overdose (opioids + anti- anxiety drugs and sedatives)

Depression or other psychiatric illness

History of substance use disorder

History of prior overdose

IT BEGINS WITH HARM REDUCTION



Opioid Overdose Prevention Tips

- Keep medicine in a safe place, like a locked cabinet.
- Properly dispose of expired or unwanted medications.
- Only take medicine prescribed for you and only as directed
- Do not share prescription drugs with others.
- Do not use opioids alone.

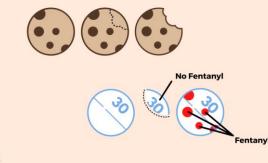
- Check with your doctor before taking opioids if you have breathing problems.
- Do not mix pain medication with other drugs, including alcohol.
- Make an overdose prevention plan. Share it with someone you trust to give you naloxone if needed.



Fentanyl Testing Strips



The Chocolate Chip Cookie Effect



Fentanyl test strips ('FTS') are a form of inexpensive drug testing technology that was originally developed for urinalysis, but which have been shown to be effective at detecting the presence of fentanyl and fentanyl-analogs in drug samples prior to ingestion.





Peer Recovery

 Peer support workers are people who have been successful in the recovery process who help others experiencing similar situations.

 Through shared understanding, respect, and mutual empowerment, peer support workers help people become and stay engaged in the recovery process and reduce the likelihood of relapse.





RECOVERY SUPPORT GROUPS





- Medication assisted treatment (MAT) is an evidence-based treatment for addiction. MAT does not provide a cure for addiction/ dependence.
- It allows the individual to live a functional life with the assistance of medication, counseling, and behavioral health services.
- Medication gives you the opportunity to "level the playing field" biochemically, so you can create the important psychological, emotional, and social tools necessary to sustain long term recovery.
- The use of medications speaks to our evolved understanding of the science of addiction - which understands addiction as a chronic relapsing brain disease.

Medication Assisted Treatment (MAT)

SUBOXONE/BUPRENOPHINE

- Used to treat opioid addiction
- prevents cravings and makes withdrawal from opioids feel less intense

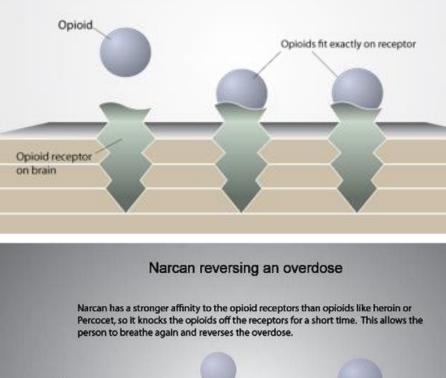
VIVITROL/NALTREXONE

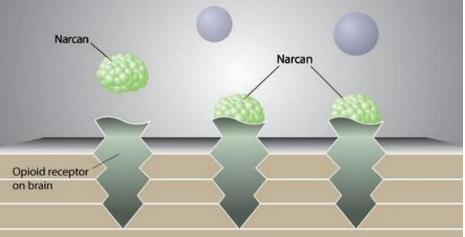
- Used to treat opioid and/or alcohol addiction
- Naltrexone is a monthly injectable medication that is useful for the treatment of opioid addiction and alcohol addiction



What is an opioid overdose ?

The brain has many, many receptors for opioids. An overdose occurs when too much of any opioid, like heroin or Oxycontin, fits in too many receptors slowing and then stoping the breathing.





NARCAN (naloxone)



 Naloxone knocks opioids off opioid receptors and binds to receptors for a short time

 This blocks the opioids' effects, quickly restoring breathing



INTRANASAL





AUTO INTRAMUSCULAR









NARCAN (Naloxone)

- Intranasal 4mg
- Wears off in 30-90 minutes
- No significant side effects
- No potential for misuse or getting high
- Safe for children, pregnant women, and pets
- Only effective in reversing opioid overdoses
- Storage/Expiration
- Carrying Narcan





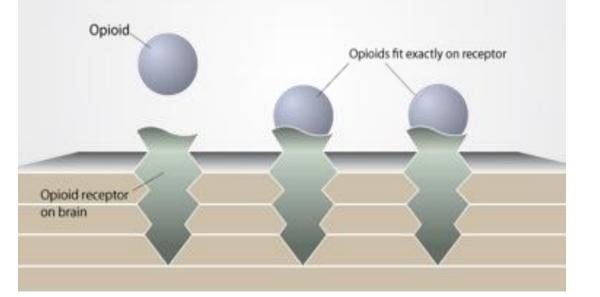


An opioid overdose happens when too much of the drug **overwhelms the brain** and **interrupts the body's natural drive to breathe**.

An opioid overdose induces respiratory depression that can lead to anoxic or hypoxic brain injury— essentially it cuts off oxygen to the brain.

What is an opioid overdose ?

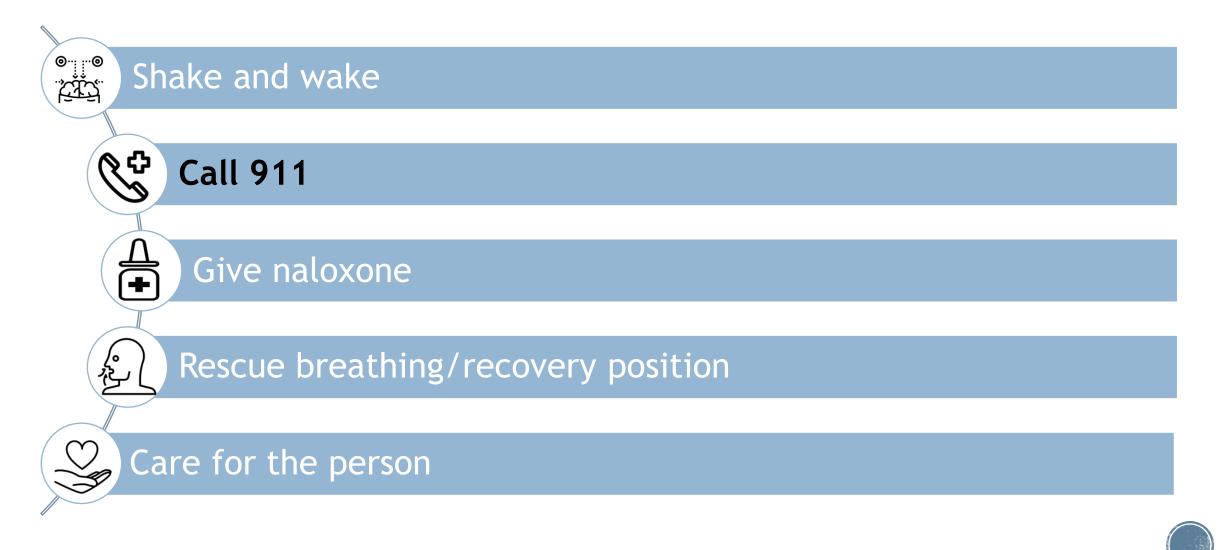
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What happens during an opioid overdose?



Responding to an Opioid Overdose



Signs of an Opioid Overdose



Blue lips or nails



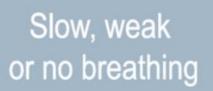
Dizziness and confusion



Can't be woken up



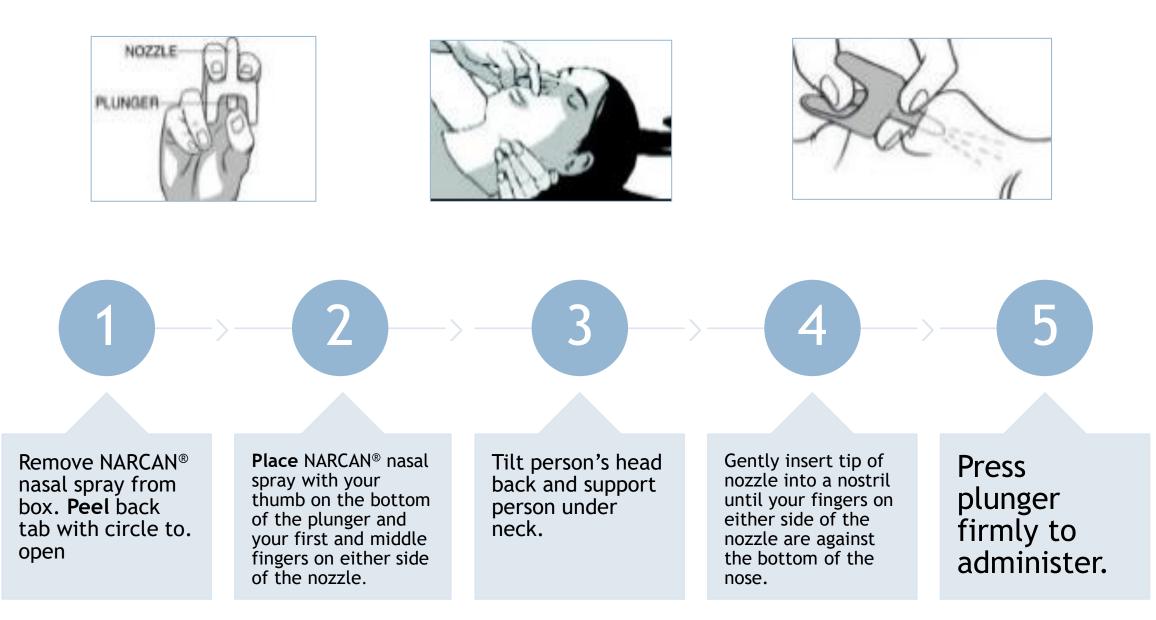
Choking, gurgling or snoring sounds



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Drowsiness or difficulty staying awake







Allow 2 to 3 minutes for the naloxone to work. Continue resuscitation, as necessary. If breathing is not restored after 2 or 3 minutes, give **another dose** of naloxone. Continue resuscitation, as necessary.

Stay with the person and provide care as directed until medical help arrives.

The Recovery Position

Keep the Airway Clear



Stay with person. If you must leave them alone at any point, or if they are unconscious, put them in this position to keep airway clear and prevent choking.



After receiving naloxone, a person may:
Feel physically ill or vomit
Feel withdrawal symptoms

unpleasant but not life-threatening

Become agitated and upset
Have a seizure (this is rare)
Overdose again

AFTERCARE

"Sit up when

you're ready. You're safe. I've

got you, I'm glad

you're alive."

"Hi friend, my name is [...]. I just had to give you naloxone. I'm sorry you don'tfeel good."

Upon awakening, patient may be in opioid withdrawal:

- •Agitation or combativeness, or severe depression
- Nausea/vomiting
- •Chills
- •Sweating
- Body achesDiarrhea
- •Goosebumps
- •Changes in blood pressure (usually

increase)

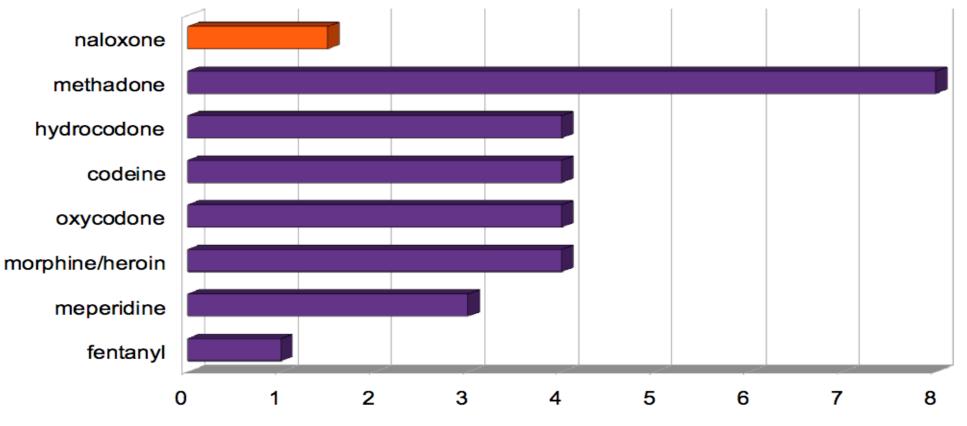
Disoriented

Tell the person about the overdose and use of naloxone:

- •Emphasize importance of NOT using to combat withdrawal symptoms
- •Ensure they have medical care immediately



Why Successful Reversals Need Ongoing Medical Observation



Duration of Action (hours)

Duration of action of naloxone compared with common opioids

Brenner GM, Stevens CW. Pharmacology. Philadelphia, PA: Saunders/Elsevier; 2010. **Graphic: courtesy of NOPE-RI**





Exposure?

 Overdose by contact has been a persistent myth about fentanyl

 Fentanyl is only dangerous when it enters the bloodstream — by ingesting, snorting it, injecting.

 The American College of Medical Toxicology published a position statement finding that "it is very unlikely that small, unintentional skin exposures to tablets or powder would cause significant opioid toxicity



igure 1. Hand and Wrist Visibly Soiled with Fentanyl. Note: Larger liquid volumes appear more visible, bever learly full surface area was exposed. Arrow show the brasion.

GOOD SAMARITAN LAW



A person is immune from arrest and prosecution for an offense if they:

- Report in good faith an emergency event to a law enforcement officer, to the 911 system, or to a medical provider
- \checkmark Remain at the scene
- ✓ Identify themself and cooperate
- ✓ Offense arises from the same course of events from which the emergency drug or alcohol overdose event arose

2022 Fentanyl Bill:

There is no immunity from arrest and prosecution for an individual who experiences or reports an overdose event and is found by law enforcement to be in possession of 4 grams or less of Fentanyl.

Signed May 2023– revised language sent to Governor for signature to increase immunity protection

Resources

Rise Above Colorado
One Pill Can Kill

Just Think Twice

Safe Project

Harm Reduction

Opi Rescue

Colorado
 Consortium

Get Smart
 About Drugs

Natural High

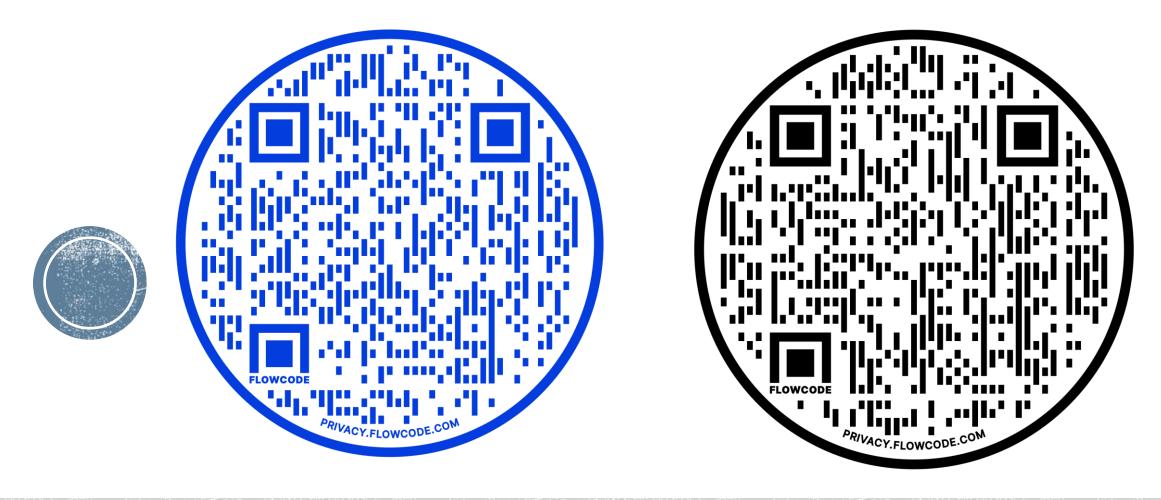
Connect Effect



Post Survey







RESOURCES and SLIDES