

Dead people never find recovery, so we need to learn how to better educate and equip peers who may still actively use or have a recurrence of use after periods of recovery.

Session 16

Narcan and Harm Reduction

Provides an introduction to opioids, how they work, how to educate our peers on being safe if they continue to use or have a recurrence of use and how to reverse an opioid overdose if it occurs by using rescue breathing and Narcan.

If you have watched the news or read a newspaper over the past couple of years, you have probably heard about the opioid crisis. We are in the midst of a drug poisoning pandemic, not an opioid crisis. We continue to see higher yearly totals for drug poisonings each year, driven by increases in methamphetamine, benzodiazepines, cocaine and opioids. We also don't tend to talk about why we lose more people a year from alcohol than we do other drugs yet we don't tend to talk about alcohol. (In 2017 we lost 88,000 people due to alcohol and 72,000 to other drugs.)

Why are deaths due to alcohol treated differently than deaths due to other drugs?

As Certified Peer Specialists we meet peers where they are at and we work with them to make better educated choices. If they choose to continue using, it is our duty to give them information that will support them making healthier choices and live longer. The key is keeping people alive, because dead people never find recovery.

Objectives

- Opioid Overdose Background
- Missouri's Changing Legal Landscape
- Harm Reduction
- Overdose Education

What Are Opioids?

Opiates are a class of drugs derived from the flowering opium poppy plant, such as morphine, heroin and codeine. Opioids are a broader class of drugs that include opiates and any other natural or synthetic substance that binds to the brain's opioid receptors. So opioids would include synthetic drugs such as methadone and fentanyl as well as opiates like heroin. A good way to remember the difference is to note that while all opiates are opioids, not all opioids are opiates. It is also important to remember that just because opiates are natural doesn't make them less harmful.

Opioids attach to receptors in the brain and then they send signals to the brain which cause the "opioid effect" to occur.

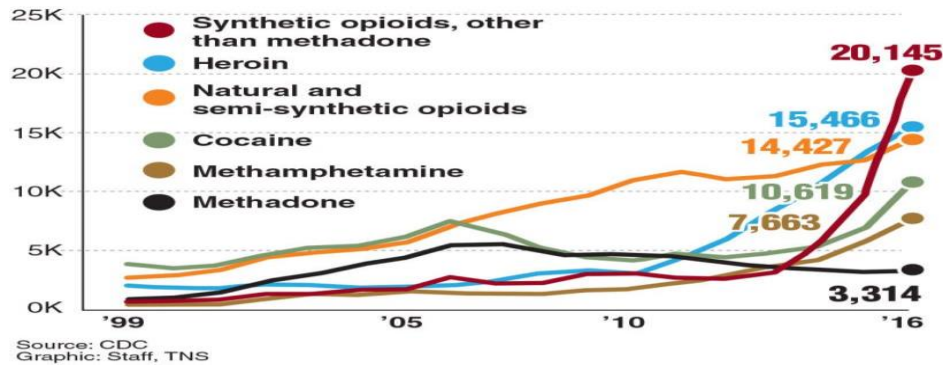
- Analgesic effect by blocking pain
- Euphoric effect due to flooding of brain's reward system with dopamine
- Respiratory depression

Landscape of the Problem

- Treatment admissions on the rise
- Hospital visits are increasing
- Overdose deaths are steadily increasing
- Heroin and fentanyl driving overdose rates
- Exponential increase in overdose deaths

U.S. drug overdose deaths

Among the more than 64,000 drug overdose deaths estimated in 2016, the sharpest increase occurred among deaths related to fentanyl and fentanyl analogs (synthetic opioids), more than 20,000 overdose deaths.



What Being Done Around the World to Address Deaths

Prevention	Psychopharmacology	Harm Reduction
Prescription Drug Monitoring	Expanded Access to Medication	Comprehensive User Engagement Sites
Urine Drug Screen		Syringe Access
Prescription Guidelines		Good Samaritan Laws
Behavioral Health Parity Laws		Increased Access to Overdose Education and Naloxone

Missouri’s Changing Legal Landscape

- **House Bill 2040, enacted August 28, 2014**
 - Distribution to first responders
 - First responder administration immunity
- **House Bill 1568, enacted August 28, 2016**
 - Pharmacy availability (without an outside prescription)
 - Pharmacist criminal and civil immunity
 - Third party access/right to possess
 - Any person administering naloxone in good faith and with reasonable care has criminal and civil immunity and is immune from any disciplinary action from his/her professional licensing board
 - Any person or organization acting under a standing order issued by someone who is authorized to prescribe naloxone may store and dispense naloxone if the person does not collect a fee

Missouri's Good Samaritan Law

- (RSMO 195.205) A person who, in good faith, seeks or obtains medical assistance for someone who is experiencing a drug or alcohol overdose or other medical emergency or a person experiencing a drug or alcohol overdose or other medical emergency who seeks medical assistance for himself or herself or is the subject of a good faith request shall not be
 - Arrested
 - Charged
 - Prosecuted
 - Convicted
 - Have property subject to civil asset forfeiture
- If the evidence ... was gained as a result of seeking or obtaining medical assistance.
- Covers Possession of a controlled substance, possession of paraphernalia, keeping or maintaining a public nuisance, alcohol sale to minor, possession of an altered ID, purchase or possession of alcohol by a minor, violating a restraining order and violating probation
- Doesn't cover outstanding warrants or "an offense other than an offense under subsection 2 of this section, whether the offense arises from the same circumstances as the seeking of medical assistance."

What is Naloxone/Narcan

- Naloxone is not the same as Naltrexone
- Has transitioned from the hospital to EMS to laypersons through Missouri legislation
- Binds to opioid receptors in the brain, replacing opioid molecules and restoring breathing
- Takes effect and reverses overdose in under 3 minutes
- Can bring on withdrawal symptoms
- Shorter acting than opioids
- Does not have a euphoric effect

Types of Naloxone

- Injectable (*intramuscular or IM*)
- Auto-injectable
 - EVZIO® is a prefilled to inject naloxone quickly into the outer thigh. Once activated, the device provides verbal instruction to the user describing how to deliver the medication like defibrillators
- Prepackaged Nasal Spray
 - NARCAN® Nasal Spray is a prefilled, needle-free device that requires no assembly and is sprayed into one nostril

The Overdose-Treatment Paradox (O’neill, 2016)

- The Paradox
 - Engagement in treatment
 - Individuals eliminate/reduce drug use = decreases risk
 - Lowers tolerance = increases risk

Harm Reduction Tips

- Never use alone
- Stagger your use
- Never use behind a locked door
- Start low, go slow
- Always have naloxone and make sure everyone knows how to use it

How Can You Tell if Someone’s Overdosing

- Deep snoring or gurgling (death rattle)
- Blue or grayish skin – usually fingertips and lips begin to darken first
- Cold, sweaty or clammy skin
- Heavy Nod
- Will not respond to stimulation
- Breathing is very slow, irregular or has stopped/faint pulse
- Small “pinpoint” pupils

Overdose Risk Factors

- Previous overdose
- History of substance misuse
- Previous suicide attempt
- Access to prescription medication
- Witnessed a family member overdose
- High prescription opioid dose and/or sustained action
- Period of abstinence = Decreased Tolerance (incarceration, detox, rehab, etc)

What to Do If Someone Overdoses

1. Check to see if airway is obstructed
2. Give two rescue breaths
3. Administer naloxone
4. Give one rescue breath
5. Call 911
6. Continue rescue breathing for 2-3 minutes (1 breath every 5-7 seconds)
7. Give 2nd dose of naloxone if they are not revived

If they start to come to or you have to leave them for any reason put them into rescue position

Report all overdoses at www.mohopeproject.org/ODreport

Having a conversation with your peer

- Use the time with the peer as an opportunity to:
 - Have the overdose education and naloxone conversation
 - Acknowledge the peer's struggle with substance use
 - Discuss harm reduction approach
 - Highlight naloxone as a way to keep peer alive
 - Emphasize this as standard practice; not a personal judgment

Group Activity: Your instructor will now help you divide into pairs or teams. In this activity you will roleplay the harm reduction conversation with your peer, using the above example to guide that conversation.

Free at one of the twelve Recovery Community Centers in Missouri

- ▶ Healing House Kansas City 112 N Elmwood Ave Kansas City, MO 64123 (816) 768-8005 healinghousekc.org/rcc/
- ▶ The Pier Recovery Community Center 204 E Market St Warrensburg, MO 64093 (660) 429-2222 recoverylighthouse.org
- ▶ Beacon of Hope Recovery Community Center 910 W Main St Sedalia, MO 64093 (660) 827-4357 recoverylighthouse.org
- ▶ The Reentry Opportunity Center (The ROC) 2108 Paris Rd Columbia, MO 65202 607-9372 comoroc.org
- ▶ The ROCC (Recovery Outreach Community Center) 1402 S Main St Joplin, MO 64801 (417) 552-0412 roccjoplin.com
- ▶ Landmark Recovery Center 204 Metro Dr Jefferson City, MO 65109 (573) 635-3065 landmarkrecoveryjcmo.com
- ▶ Springfield Recovery Community Center 1925 E Bennett St, Suite J Springfield, MO 65804 (417) 368-0852 betterlifeinrecovery.com/srcc
- ▶ We Do Recover Community Center 715 Broadway St. Cape Girardeau, MO 63701 (573) 803-0234 gibson-center.com/services/we-dorecover-community-center/
- ▶ We Do Recover Community Center (Sikeston) 901 S Kingshighway Sikeston, MO 63801 (573) 475-9108 gibson-center.com/services/we-dorecover-community-center/
- ▶ LIFE Recovery Community Center 4145 Kennerly Ave St. Louis, MO 63113 (314) 802-2696
- ▶ St. Louis Empowerment Center 907 Dock St. St. Louis, MO 63147 (314) 652-6100 dbsaempowerment.org
- ▶ MoNetwork 4022 S Broadway St. Louis, MO 63118 (844) 732-3587 monetwork.org