



Opioids, Overdose and Naloxone Administration

Highlights & Key Concepts

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Summary Ideas:

Opioids, a class of narcotic drugs, relieve pain and slow down central nervous system function.

- Opioids used for medical purposes include fentanyl, hydromorphone, methadone, and oxycodone.
- Some opioids may also be used illicitly by people with a substance use disorder.

Safe supply and harm reduction principles are some ways to prevent overdose deaths.

- Illicit use of fentanyl is contributing to an increase in deaths from drug overdose, along with polysubstance use.
- Fentanyl testing strips can be used to determine if drugs have been mixed or cut with fentanyl.

Naloxone can save lives by treating opioid overdoses.

- Naloxone is a medication that can save lives by reversing the effects of an opioid overdose.
- NARCAN® Nasal Spray is a form of Naloxone and can be given in multiple doses if necessary.

Questions & Responses:

Q1	<i>How does overdose prevention align with harm reduction principles?</i>
A1	Harm reduction encourages people who use substances to adopt the safest approach possible. Since illicit fentanyl is now in many of the drugs that are being sold on the street, all substance users should be prepared to respond to an opioid overdose at any time. If someone is using a substance not obtained at a pharmacy or cannabis dispensary, there is a strong possibility that fentanyl will be present, even if the substance is not an opioid. Naloxone will reverse the effects of a fentanyl overdose and is therefore an important harm reduction tool.
Q2	<i>How do racial justice and health inequity issues intersect with opioid use and service approaches?</i>
A2	The way the U.S. approached the crack cocaine epidemic of the 1980s is much different than how it is approaching the current drug poisoning epidemic. The criminal-legal approach of the 1980s and 1990s imprisoned tens of thousands of people of color for

	great lengths of time for substance use. In contrast, the average opioid user portrayed in the media today is often white, and substance use is being approached from a more medical perspective, with more money and resources devoted towards treatment and harm reduction. The U.S. could have and should have taken a more medical approach to cocaine use in the 1980s as well. Despite the predominantly white portrayal of opioid users in the media, opioid use does impact communities of color. No community is immune to negative consequences associated with opioid use.
Q3	<i>How does a person’s mental health affect their vulnerability to opioid use?</i>
A3	Opioids are not only a physical painkiller; some people would report that they are also an effective emotional painkiller. For those with serious mental health issues or those who have a history of trauma, opioids can be a way of addressing and relieving that emotional pain.
Q4	<i>Are there any approaches to substance use treatment or overdose prevention on the horizon that you find encouraging?</i>
A4	Canada has a focus on safe supply. Safe supply is simply when the government or other able organization steps in and provides a regulated and controlled substance to a person who needs it. Countries in Europe have been providing safe supply by offering prescription heroin for many years. Switzerland, a very conservative country, has been offering medicalized heroin since 1994. Here in Washington State, we’re seeing a great increase in low-barrier buprenorphine prescribing. We are making headway, but there is a lot more work we still need to do.
Q7	<i>How is the new federal guidance regarding purchase of fentanyl strips being rolled out?</i>
A7	Federal funds are now allowed to be used for the purchase of fentanyl testing strips. Agencies should talk directly with their federal funders regarding the logistics of how that guidance will be rolled out. Read the CDC’s press release from April 7, 2021, regarding this new guidance: Federal Grantees May Now Use Funds to Purchase Fentanyl Test Strips.
Q5	<i>What are the signs of an opioid overdose?</i>
A5	Signs of an opioid overdose include blue lips (or ashy white lips on a person of color), blue fingernails, struggling to breathe or no breathing, and unresponsiveness to external stimuli.
Q6	<i>Is the “nod” that opioid users experience also seen in people using other types of substances?</i>
A6	The “nod” that some opioid users experience is like a short, 10- or 15-second nap or loss of consciousness. Typically, the nod is only seen with some form of opioid use, though people who are using alcohol or sedatives could possibly experience this as well.
Q8	<i>How has the Standing Order to Dispense Naloxone changed Naloxone access in Washington State?</i>
A8	Washington State’s Standing Order to Dispense Naloxone was enacted in 2019. That standing order acts as a prescription by allowing anyone to go and obtain a Naloxone kit from a pharmacy if they do not have a primary care provider to write them a prescription. The standing order also allows agencies without a medical provider on site to receive and distribute Naloxone. This has greatly increased access to Naloxone.

Q9	<i>What is NARCAN, and how is it administered?</i>
A9	<p>NARCAN® Nasal Spray is the nasal spray form of Naloxone. Stopoverdose.org has some great resources explaining the steps for NARCAN administration.</p> <ul style="list-style-type: none"> • WA State Overdose Prevention and Response Training Video (also available in Spanish) • Opioid overdose brochure from Alcohol & Drug Abuse Institute (ADAI)
Q10	<i>Is it okay to use expired NARCAN if nothing else is available?</i>
A10	Yes. Studies have shown that if you keep NARCAN (and other forms of Naloxone) stored properly, it can possibly be viable for up to 30 years post-expiration. However, it is strongly encouraged that you go and obtain a new Naloxone kit within its expiration date before your current kit expires, and to use the newer kit first when responding to an overdose.
Q11	<i>How many doses are in one NARCAN spray device?</i>
A11	There is a single dose of NARCAN in one spray device. NARCAN kits obtained from a pharmacy or syringe service program will contain 2 doses.
Q12	<i>Is it ever okay to give multiple Naloxone doses to a person who is overdosing?</i>
A12	Yes; however, wait 3 minutes before administering the second dose, and wait 3 additional minutes in between each additional dose. Give as many doses as needed.
Q13	<i>What path or key moment led you to your current position?</i>
A13	I [Sean Hemmerle] worked for several years at a company exchange where I distributed many Naloxone kits. Thinking of my own personal story, and others' stories in which Naloxone kits saved their lives, was very empowering.

Resources:

- [Terms to Use and Avoid When Talking About Addiction](#)
- [Stopoverdose.org](#)
- [Never Use Alone, an overdose prevention phone line](#)
- [International Overdose Awareness Day](#)
- [North American Syringe Exchange Network](#)
- [Self-paced, online course: "Supporting Recovery from Opioid Use"](#)
- [American Red Cross CPR Steps](#)
- SAMHSA report, ["The Opioid Crisis and the Black/ African American Population: An Urgent Issue"](#)
- [The National Harm Reduction Coalition's Principles of Harm Reduction](#)
- [View the Northwest MHTTC's Harm Reduction 101 recorded webinar](#)

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