

## OPIOID OVERDOSE PREVENTION: WHAT YOU NEED TO KNOW

You have been prescribed an opioid pain medication by your doctor. While effective for controlling pain, it can also be dangerous if used improperly. This handout provides information you need to know to stay safe.

### WHAT ARE OPIOIDS?

Opioids are medications used to control moderate to severe pain. They include morphine, codeine, OxyContin, Percocet, Darvon, Vicodin, and most other prescription pain medications, as well as heroin and methadone.

### WHY CAN TAKING OPIOIDS BE RISKY?

Opioids can cause drowsiness and a decrease in breathing rate. If a person takes more than the prescribed dose of an opioid, or mixes opioids with other medications, street drugs, or alcohol, their breathing may slow to a dangerous level and lead to overdose. Ask your pharmacist before taking any other prescription or over-the-counter medications with opioids. Do NOT drink alcohol while taking opioids.

### SIGNS OF OVERDOSE

- unconscious or unresponsive (no response to shouting or shaking)
- pale or blue lips, face and fingertips (from lack of oxygen)
- slow, shallow or raspy breathing or no breathing
- pinpoint pupils

### WHAT TO DO IN CASE OF OVERDOSE

1. check for signs of overdose
2. try to wake the person by calling their name, shaking them, or causing pain by rubbing your knuckles over their sternum (breastbone) → if this works, get them up and walking around → call 911
3. if no response, check their breathing by listening for breath sounds and seeing if their chest rises
4. if no breath → call 911 and begin rescue breathing (see RESCUE BREATHING)

**OVERDOSE IS AN EMERGENCY! CALL 911! IT MAY BE THE ONLY WAY TO SAVE THE PERSON'S LIFE!**

### RESCUE BREATHING

**Rescue breathing** means you are **breathing for someone unable to breathe** on his or her own. If someone is not breathing or only breathing a few times per minute, you must start rescue breathing **immediately**.

1. Place the person on their back with head tilted back and chin lifted (1 hand on forehead and 1 under their chin).
2. Pinch their nose shut and breathe into their mouth 2 times (normal breaths).
3. Check to make sure their chest is rising. If not, lift chin a little higher and be sure nose is pinched shut.
4. Give 1 slow breath every 5 seconds (count: 1-1,000, 2-1,000, 3-1,000, 4-1,000. Take a breath after 4-1,000 and give another breath on 5-1,000).
5. Continue for 12 breaths (1 minute) and recheck breathing.
6. If still no breathing, give Naloxone (see HOW TO USE NALOXONE). If the person starts to wake up, get them up and walking around.
7. If still no response, give another dose of Naloxone and continue rescue breathing until the person responds or until EMS arrives.



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Harm Reduction Coalition

## WHAT IS NALOXONE?

Naloxone is a prescription drug that reverses the effects of opioid overdose by blocking the opioid's action on the brain and restoring breathing. Naloxone's only purpose is to reverse overdose; it is not a "recreational" drug and does not cause a "high". The use of Naloxone, in combination with rescue breathing, can save a life.

## HOW TO USE NALOXONE

1. Pull off the long yellow top of syringe.
2. Open the white spray top and screw it slowly onto the top of the syringe.
3. Pop-off the red or purple cap on the medicine vial and the yellow cap on the base of the syringe and gently screw the glass vial into the plastic syringe until you feel slight resistance (about 3 turns). Naloxone will start to spray out of the syringe - STOP!
4. Place the spray top in the nostril of the overdosing person.
5. Push quickly on the glass vial (pushing slowly will prevent the liquid from misting correctly) and squirt half of the liquid up the person's nose.
6. Place the spray top in the other nostril and squirt what's left in the vial up the person's nose.
7. If the person doesn't respond, do another 1-2 minutes of rescue breathing.
8. Repeat the steps with the second box of Naloxone.
9. **Naloxone may only last for about 1 hour.** When it wears off the person may overdose again from the drug still in their system. Stay with them - you may have to give more Naloxone.
10. Although the low dose suggested here usually will not cause severe withdrawal symptoms, they are possible, and may include sweating, nausea/vomiting, shaking, and agitation. **Do not let the person use more drugs.**



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## RECOVERY POSITION

The **recovery position** is used if a person is unconscious, vomiting, or in danger of choking on vomit or saliva. Place the person on their side, with legs bent, and head resting on the arm on the floor. The recovery position lets fluid drain from the person's mouth so they do not choke. **Place the person in the recovery position whenever you are not doing rescue breathing.**



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