NALOXONE FOR OPIOID OVERDOSE

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University of Tennessee 2016
“I need your help to fight overdose!”
POINTS OF CLARIFICATION

• Naloxone/Narcan
  • The same substance
  • Naloxone is the generic

• Good Samaritan/Medical Amnesty
  • A policy that stipulates when a person calls for medical treatment for themselves or others, they do so without fear of repercussions
  • In the case of student policy for medical amnesty, no educational sanctions
WHAT NALOXONE ISN’T

• A medication that encourages drug use
  • Forces opioid users into withdrawal symptoms

• An expensive product
  • Most commercial insurance covers the cost
  • Behind the counter costs are reasonable*

• A final solution to the opioid epidemic
  • Must have changes in prescribing trends and treatment option
Myths, misconceptions
Gottlieb, Miranda Eve, 5/2/2016

Gottlieb, Miranda Eve, 5/26/2016
Drug overdose is the leading cause of accidental death in the US, with 47,055 lethal drug overdoses in 2014.

Opioids are driving the death rate with 18,893 overdose deaths related to prescription pain relievers, and 10,574 overdose deaths related to heroin in 2014.

Citation at bottom needed
Gottlieb, Miranda Eve, 5/26/2016
Parents refuse to bury truth about son's heroin overdose death

Police investigating after USC student is found dead in apartment near campus

A University of Georgia student overdosed on heroin at the Sigma Pi fraternity house on South Milledge Avenue in Athens, police said.

Police investigating death of Vanderbilt student at dorm
WHAT ARE THE SIGNS OF 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 stopping the breathing.
citation needed
Gottlieb, Miranda Eve, 5/26/2016
WHAT IS NALOXONE?

• An analgesic blocker
• Opioid antagonist
• Prevents exogenous opioid molecules from binding to receptors in the brain
  • 3 kinds of receptors
    • μ
    • δ
    • K
• In unbinding the opioid molecule, the body is pushed into withdrawal
  • Endogenous endorphins do not bind while naloxone is present
VISUAL SIGNS

- Blue skin tinge
- Body very limp
- Face very pale
AUDIAL SIGNS

- Snoring
- Gurgling
- Slow breathing
PHYSICAL SIGNS

- No or slow pulse
- Vomit
- Unresponsive
RESPONDING

- Assess and stimulate
- Call for help
- Rescue breathing
- Naloxone
ADMINISTERING NALOXONE

• 0.4 – 2 mg per dose
• If there is no response after a total of 10 mg of Naloxone has been given, the person may be suffering from opioid overdose
• Critical to have 2 doses of naloxone on hand*

United Nations Office on Drugs and Crime: Opioid Overdose Prevention and Management
Overdose Recovery Position

1. tilt head back, lift chin to open airway
2. turn to one side, place hand against chin
3. bend knee against floor
4. tilt head back, check breathing
5. call emergency and wait till it arrives
VARIATIONS OF NALOXONE
Intranasal

Naloxone Hydrochloride

Rx Only

Luer-Lock Prefilled Syringe

NALOXONE HYDROCHLORIDE
(INJ., USP.
(1 mg/mL)

2 mg per 2 mL

For Intravenous, Intramuscular, or Subcutaneous Use as a Narcotic Antagonist
WHAT INCREASES OVERDOSE RISK?
INCREASING RISK

• Mixing drugs
  • Benzodiazepine, alcohol and cocaine especially

• **Changes in tolerance**
  • Following periods of abstinence

• Physical health
  • Heart health, organ weakness, breathing problems

• Variation in strength and consistency of unregulated drugs
POPULATIONS OF INTEREST

• People ages 18-24
• Formerly incarcerated
• People in recovery
  • Size of recovery community on campuses?
• Veterans
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GETTING NALOXONE ON CAMPUS
WHO SHOULD CARRY NALOXONE?

• Police Departments
• First Responders
• Counseling Centers
• Campus Wellness/Health
• Substance Abuse Counselors*
• Campus Pharmacy
• Resident Assistants
• Individuals!
**Campus Police Departments Carrying Naloxone by State**

- Texas
- Ohio
- North Carolina
- New York
- New Jersey
- Massachusetts
- Indiana
- Georgia

List incomplete and insufficient- source North Carolina Harm Reduction Coalition
Discussion Questions

1. Do you know what your state policy on naloxone is?
2. Is there a state policy on Good Samaritan or Medical Amnesty?
3. Has your student code of conduct addressed Good Samaritan?
4. Does your health center leadership discuss overdose?
5. Are there police/first responders carrying naloxone on campus?
ACTION NEEDED
CAMPUS WIDE EVALUATION

• Institutional and state policies
• Vulnerable populations on campus
• Potential partners for programming
• Current initiatives for overdose
• Risk management
• Student code of conduct
GME6

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STATE POLICY ANALYSIS

- Existing laws
- Legislative allies
- Previous & proposed legislation
- Model language

Drug Policy Alliance
Number of states with great laws... 2... 3
Gottlieb, Miranda Eve, 5/29/2016
• Identify who to train and equip with naloxone
• Ensure there is funding/ access for campus and individuals
• Consider a fresh approach to opioid use, dependence and overdose
• Create lines of communication between campus resources
STRAATEGIC INITIATIVE ON CAMPUS

- Campus police
- Resident assistants
- Health and wellness staff
- Pharmacy
- Outreach initiatives
  - Football/ sporting events
  - Campus tabling
  - Messaging to parents
  - Community interaction
LEVERAGING EXISTING PARTNERS

• Campus groups
  • Students for Sensible Drug Policy

• Local harm reduction organizations
  • Community activists

• Public health offices
  • Naloxone distribution or syringe exchange centers

• Family members/ friends of overdose victims
FURTHER CONSIDERATIONS

• Should a student need to be revived by naloxone, what is the student conduct follow up?
  • Classes/follow up on substance use and misuse

• What are the legalities surrounding Resident Assistants/others using naloxone on another student?
  • Talk with your General Counsel
WHO SHOULD TACKLE THIS INITIATIVE?
RESOURCES

- North Carolina Harm Reduction Coalition
- Project Lazarus
- Georgia Overdose Prevention
- Students for Sensible Drug Policy
- Harm Reduction Coalition
- Drug Policy Alliance
- White House Fact Sheet
Other questions, comments, suggestions, please e-mail me!

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