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Prescription Opioids

Can be used to treat moderate-to-severe pain.
 Are often prescribed following surgery or injury, or for health conditions such as cancer.

Increased acceptance and use for the treatment of chronic, non-cancer pain, such as back pain or osteoarthritis, despite serious risks and the lack of evidence about their long-term effectiveness.

Anyone who takes prescription opioids can become addicted.

As many as **one in four** patients receiving long-term opioid therapy in a primary care setting struggles with opioid addiction.

Side Effect: Central Nervous System/Respiratory Depression & Potential Overdose

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Tips to Reduce Prescription Opioid Risks

<p>Talk to Your Doctor About nonopioid pain management options & addiction & overdose risks.</p> <p>Only Take Prescription Medicine That's Prescribed to You</p> <p>Don't Share Medications with Others</p> <p>Take Medicine as Prescribed</p> <p>Safely Store Medicine and Dispose of Unused or Expired Medicine</p>	<p>Talk w/ Your Loved One If you're concerned about opioid misuse or addiction, let them know that you care about them, be patient and open.</p> <p>Encourage Them to Get Help Help them look for treatment, offer to go with them to their first appointment.</p> <p>SAMHSA.GOV/FIND-HELP</p>
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Fentanyl 101

Used in clinical settings since 1968 post surgery or for pain management.

Illicit Fentanyl is the primary driver for the overdose health crisis today

Illicit Fentanyl is cheap to manufacture, components easy to acquire, and concentrated (small amount goes a long way).

Fentanyl via the street market comes in white, gray or tan powder form and can be injected, smoked or snorted. Since 2022, reports of fentanyl in a variety of colors in powder, pill, and block forms.

Has been found in other drugs like heroin, cocaine, meth & pressed pills.

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Street Drugs Laced with Fentanyl

"It's rare to find people who only overdose on cocaine or who only overdose on methamphetamines," said Dr. Nora Volkow, head of the National Institute of Drug Abuse. "Fentanyl is being used to lace the illicit drug market because it's very profitable."

6 out of 10 of the 115 Million Counterfeit Pills Seized by the DEA contained a lethal dose of Fentanyl

Fentanyl overdose is the No. 1 cause of death among Americans ages 18 to 45.

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Fentanyl Myth



You can overdose just by touching powdered fentanyl

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Fentanyl Myth Response



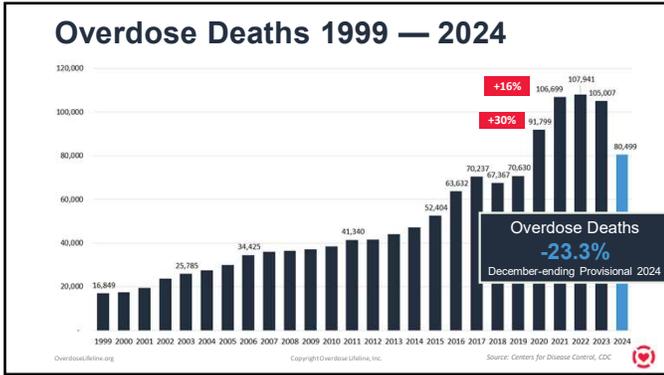
You cannot overdose simply by touching powdered fentanyl.

A common myth, but fentanyl must be introduced into the bloodstream or a mucus membrane for someone to feel the effects.

Dissolving the powder in a liquid does not change this property. Wet objects do not pose an increased risk for an overdose caused by casual exposure.

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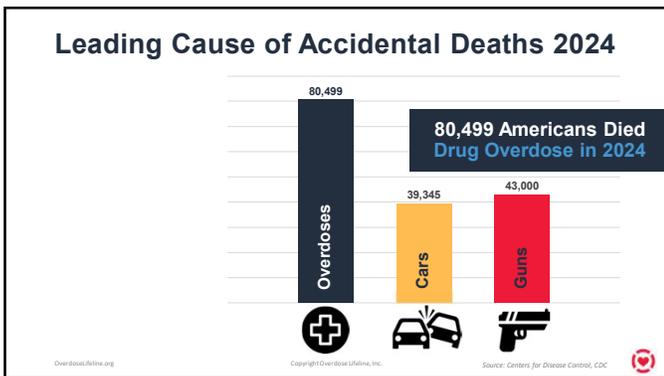
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Contributors to 2024 Decrease

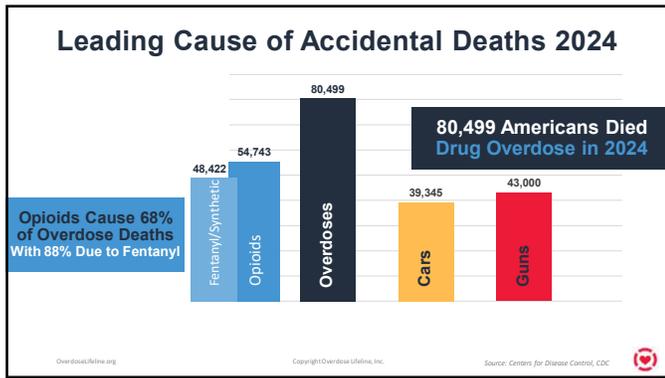
- Expanded Access to Naloxone and Harm Reduction
- Improved Access to Health Insurance and Medication for Opioid Use Disorder (MOUD)
- Shifts in the U.S. Drug Supply
- Coordinated efforts by U.S. law enforcement and international partners to disrupt fentanyl trafficking networks

Source: CDC/National Center for Health Statistics

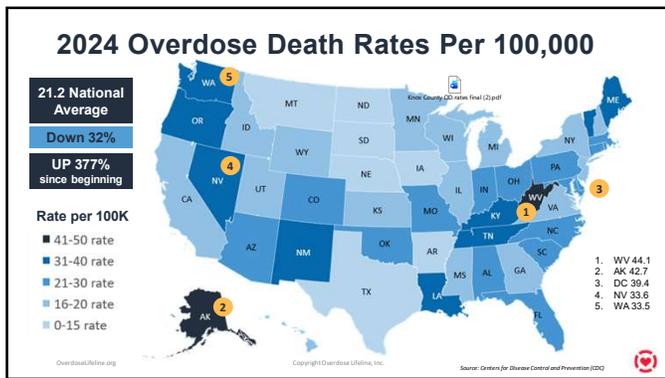
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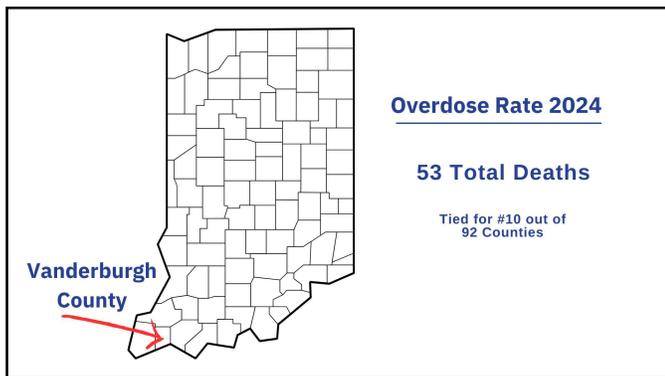
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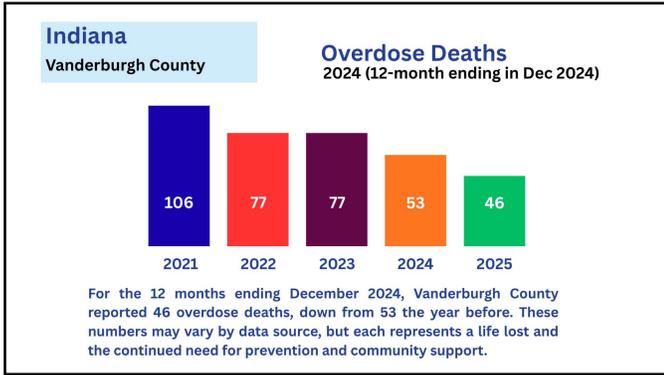
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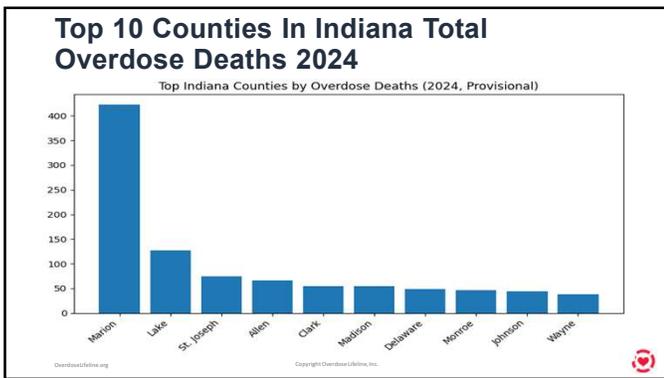
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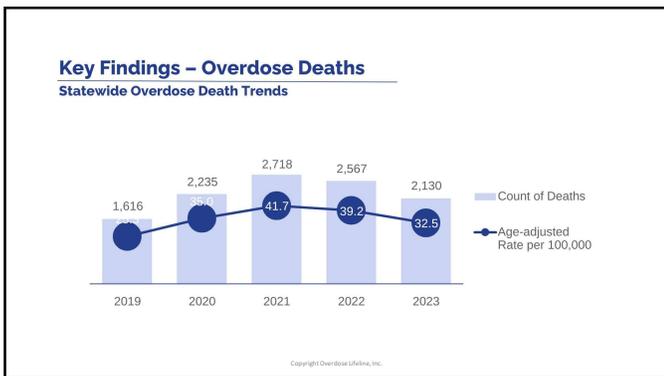
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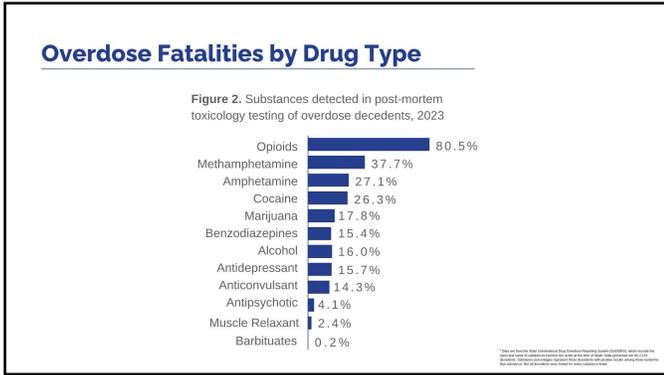
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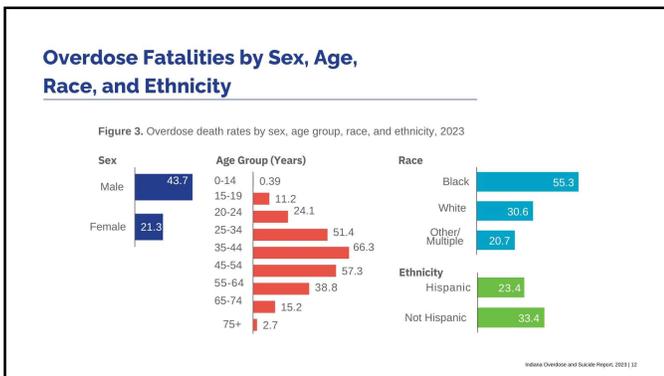
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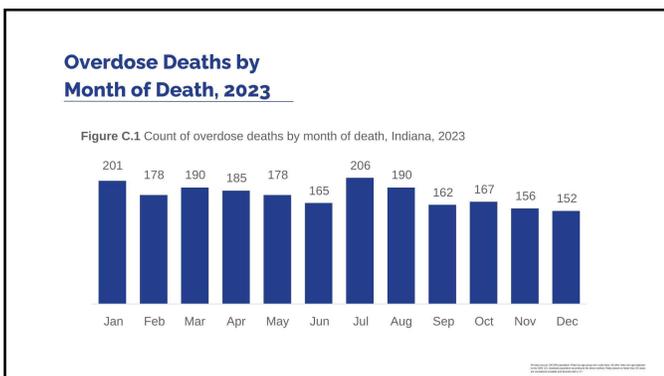
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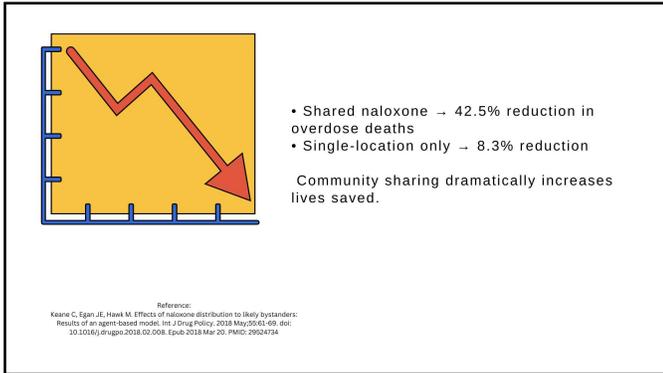
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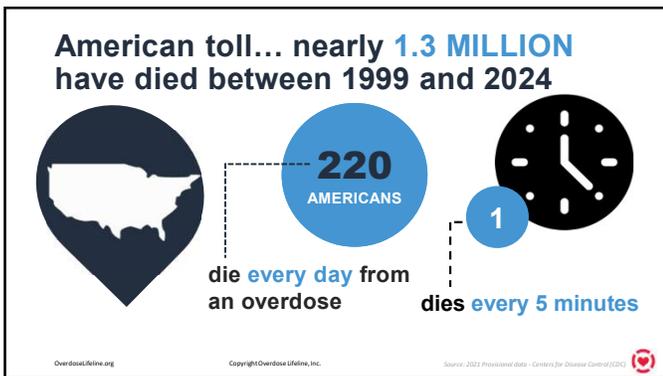
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Who is at Risk of an Opioid Overdose?

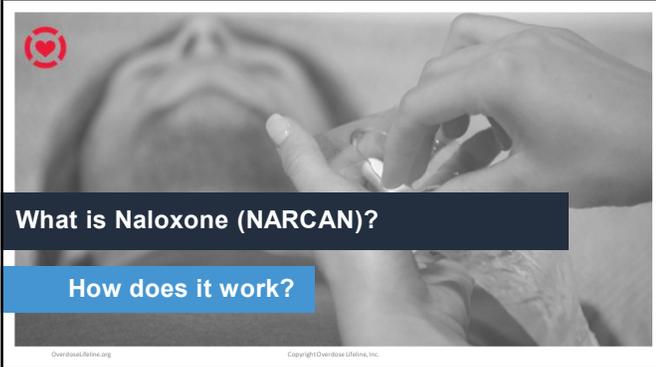
! Any pill from the street or from social media will carry a high counterfeit risk and likely to contain fentanyl.

History of past overdoses	Elderly people prescribed opioids
Use opioids for non-medical reasons	Children who accidentally take opioids
Use opioids prescribed to others	Anyone on high doses of opioids, even if taking medications as prescribed
Take opioids more than/more often than prescribed	Using pain-reliever patches incorrectly
Former opioid users recently released from prison or treatment >> lowered tolerance	Opioids w/ other respiratory depressants (alcohol, benzodiazepines)
When snorting or injecting the opioid	Opioids w/ chronic lung disease or sleep apnea

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What is Naloxone (NARCAN)?

How does it work?

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Harm reduction is designed to **reduce the harmful consequences** associated with various human behaviors, both legal and illegal.

Sunscreen	Bike Helmets	Vaccines
Bug Spray	Condoms	Nicotine Gum / Patch
Automotive Harm Reduction	Opioid Harm Reduction	
Seat Belts	Naloxone – Overdose Reversal Drug	
Car Seats	Fentanyl Test Strips	
Air Bags	Medications for Opioid Use Disorder MOUD	
Designated Drivers	Methadone, Buprenorphine, Naltrexone	
	Syringe Distribution Programs	

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**Naloxone (NARCAN)
Opioid Overdose Reversal Medication**

FDA Approved	Does Not Work on Other Overdoses	Used By Paramedics 40+ Years
Restores Breathing	Onset: 2-3 Minutes	Duration: 30-90 Minutes Re-overdose Risk
Cannot Be Misused Not Psychoactive	NOT suboxone or naltrexone (Vivitrol), which are MOUD medications	

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What is naloxone (NARCAN)?

 <p>Naloxone is an opioid antidote (antagonist) that reverses an opioid overdose.</p> <p>EASY + EFFECTIVE</p>	 <p>During an opioid overdose, the respiratory and central nervous systems are depressed. Breathing slows or stops.</p>	 <p>Naloxone blocks the effects of opioids and reverses an overdose. Allowing a person to breathe normally.</p>	 <p>Naloxone is safe for people of all ages (infants to elderly). Has no side effects. Will not harm a person if opioids are absent.</p> <p>COMPLETELY SAFE</p>
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What is naloxone (NARCAN)?

Naloxone Saves Lives

It is the same concept as CPR, AED's, EpiPens.
It mitigates the damage caused by a negative reaction in the body.

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Overdose Prevention Tips

For People Who Use Drugs

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Overdose Prevention Tips for People Who Use Drugs

Mixing Drugs	Use 1 Drug at a Time. Reduce Amount of Every Drug. Avoid Mixing Alcohol & Opioids. Friend Who Knows What Drugs Used/Can Respond.
Tolerance	Use less if you have taken a break or haven't used for a while. Go slow. Do a tester shot. Use a different method (snort instead of inject.)
Test it	Knowing what's in drugs can help with the decision of how much and how best to use them.

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Overdose Prevention Tips for People Who Use Drugs

Have Naloxone

Mixing Drugs	Use 1 Drug at a Time. Reduce Amount of Every Drug. Avoid Mixing Alcohol & Opioids. Friend Who Knows What Drugs Used/Can Respond.
Tolerance	Use less if you have taken a break or haven't used for a while. Go slow. Do a tester shot. Use a different method (snort instead of inject.)
Test it	Knowing what's in drugs can help with the decision of how much and how best to use them.
Quality	Try to Buy from the Same Dealer. Know the pills you are taking and be careful when switching types of opioids.
Using Alone	Fix w/ a Friend. Develop a plan w/ friends or partners. Leave door unlocked or slightly ajar. Have someone check on you.
Modes of Administration	Be mindful that injecting and smoking can increase risk. Consider snorting, when using alone or decreased tolerance.

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Fentanyl Test Strips (FTS)

A harm reduction tool to prevent overdoses

- An easy to use and low-cost method for detecting fentanyl.
- Allow a person using drugs to take the proper steps to prevent an overdose.
- Used to test drugs (cocaine, heroin, methamphetamine, etc.) and drug forms (pills, powder, and injectables) for traces of fentanyl and its analogs.

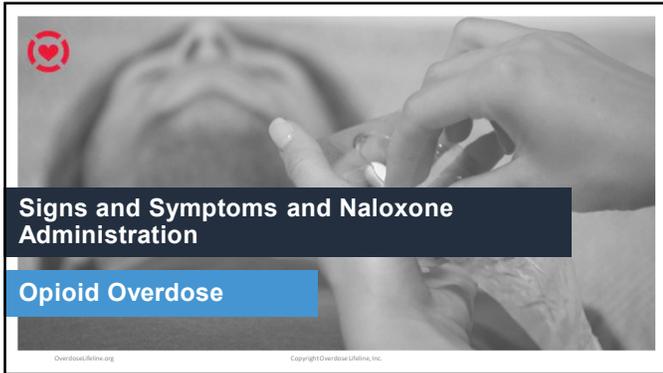


Image: Ohio State University

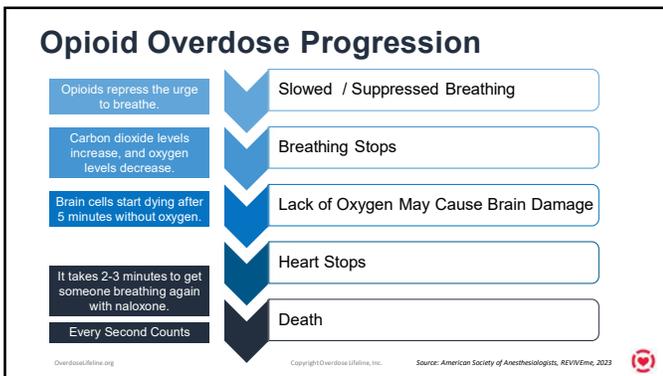
They do not measure how much fentanyl is contained in a drug sample nor does it measure the potency of the supply.

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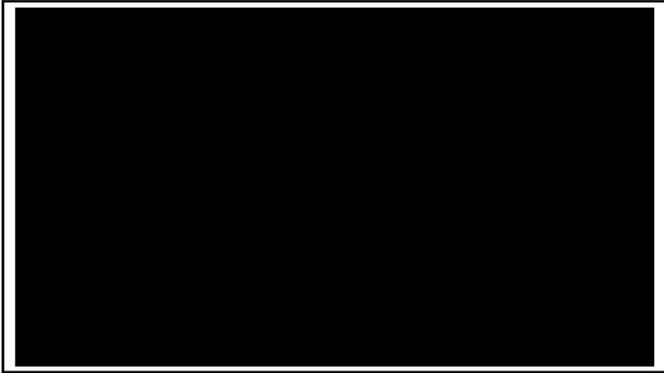
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- Opioid Overdose Signs / Symptoms**
- May Be Unresponsive. No Response to a Sternal Rub.
 - Can't Be Awakened. Can't Talk.
 - Body May Feel Limp.
 - Skin May Be Cold and Clammy.
 - Blue or Purple Lips or Fingernails.
 - Vomiting, Gurgling, or Choking Noises.
 - Slow Breath, Respiration, or Heartbeat.

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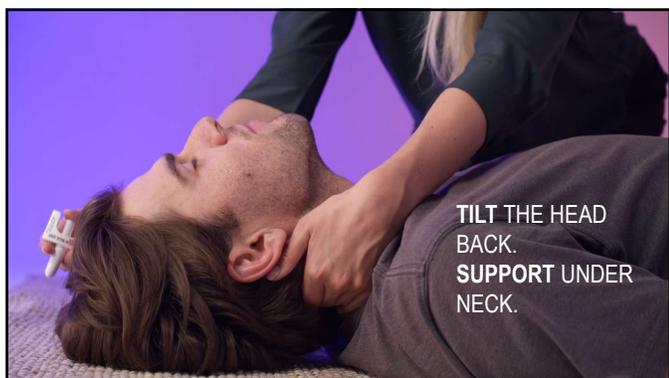
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The person does not need to be breathing for naloxone to be effective.

After administering naloxone CPR and Rescue Breathing may be given if you are trained / certified.

If there is no response after 2-3 minutes additional doses can be administered every 2-3 minutes, switching nostrils, until help arrives.

Step-by-Step instructions inside the naloxone package.

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Post Administration

Allow some space and closely monitor

Individual may begin to wake-up	Pupils may begin to dilate (get larger)	Respirations may begin to increase	Individual may feel disoriented, scared, or nauseated
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There is Minimal Possibility of Combativeness as the Individual Comes Around
Based on a 4 mg or lower intranasal or .4 mg/ml intramuscular chances are remote

Higher dose naloxone can send individuals into precipitated withdrawal and may cause worse withdrawal symptoms (vomiting, combativeness, lethargy, etc.).

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Medication action
 Following administration —

For individuals who have developed a physical dependence to opioids, Naloxone often leads to withdrawal symptoms, which can be distressing but they are not life threatening.

Symptoms may include chills, excessive sweating, fever, intense pain sensations, nausea, muscle cramping, anxiety, and a racing heart.

- Give the person some space.
- Avoid physical contact, even a light touch can be painful during withdrawal.
- Comfort the person and explain what just happened.
- If police or emergency responders are present, let the individual know they are there to help and reassure them that they are not in trouble.

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General Naloxone Information

- Making naloxone available **does NOT** encourage people to use more
- Naloxone **acts as a bridge** between the call to 911 and when help arrives
- Naloxone has **no effect** on persons not experiencing an opioid overdose
- A **repeat dose** may be administered if no response in 2-3 minutes
- !** Naloxone lasts approximately 60 minutes. The half-life of an opioid may be much longer – **risk of re-overdosing**, stressing the importance of calling 911.
- Storage: Do not expose to **extreme temperatures** (hot/cold)
- Packaging displays expiration date

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Frequently Asked Questions 

Can you administer naloxone if you don't know what drug(s)/medication(s) the person took?

Yes. Naloxone will not cause harm if it is given for a different type of overdose (e.g., stimulant, alcohol).

Once an overdose has occurred, how much time is there to administer the naloxone?

This is a case-by-case basis. Naloxone should be administered at any time an overdose is suspected. Naloxone reverses the effects of an overdose, respiratory distress, which will eventually lead to decreased oxygen and possible subsequent heart attack.

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Frequently Asked Questions 

My naloxone is expired, is it OK to use?
Yes. In the event of an overdose, administer any naloxone available. Studies show naloxone's stability remains at a usable standard even after multiple years of storage. While it may become less effective over time, research indicates that it does not cause harm if used past its expiration date.

My naloxone was exposed to extreme heat/cold, is it OK to use?
Yes. In the event of an overdose, administer any naloxone available. Studies show that it is stable even when not stored in perfect conditions, such as when individuals carry naloxone with them or have a kit in a vehicle. Naloxone has been shown to be stable when frozen and thawed between the temperatures of -4 to 39°F or at high temperatures of 176°F.

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Frequently Asked Questions 

Do I need to give more naloxone for a fentanyl overdose?
 Giving more than one dose of naloxone and using higher dose products may not be necessary when responding to a known fentanyl overdose.

An overdose may appear to need additional doses if other sedating drugs are present in the person's body, such as alcohol, benzodiazepines, or xylazine; however, rapidly giving more naloxone or using a stronger, more concentrated opioid reversal medication will not necessarily speed up the reversal process and it may increase the withdrawal severity.

Multiple studies have found that despite the presence of fentanyl, more doses were not associated with improved outcomes.

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Frequently Asked Questions 

Do higher dosage naloxone save more lives?
 While one may think a higher dose will reverse an overdose better, multiple studies comparing higher dose naloxone nasal spray (8mg) to lower dose (4mg) showed no significant difference in survival or in the number of doses administered to reverse the overdose.

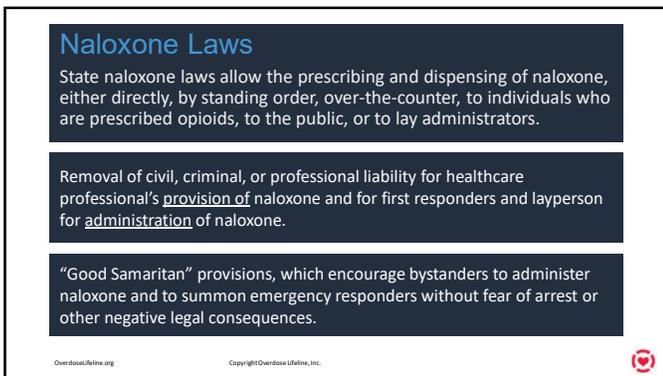
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