# PATIENT HANDOUT: HOW TO USE NALOXONE

# What are opioids?

Opioids are generally used to **treat pain** and include both prescription painkillers and heroin.

# What is an opioid emergency or overdose?

Opioids can cause a person's **breathing to slow or even stop**—this is considered an overdose. **All opioids put people at risk**.

### What is naloxone?

Naloxone temporarily **blocks the effects** of opioids, and can reverse overdose. Naloxone only works if **opioids** are in the body and has no effects on alcohol or other drugs. It takes **2-5 minutes** to start working, and may require more than one dose. The effects of naloxone last for between **30-90 minutes**.

Naloxone may cause an opioid dependent person to go into **withdrawal** (e.g. *nausea*, *vomiting*, *agitation*, *muscle aches*). These symptoms **will go away** as the naloxone wears off.

# Signs of an opioid emergency or overdose:

- A person is unresponsive and won't wake up even if you shake them or say their name loudly
   Try to wake the person by vigorously rubbing knuckles up and down the front of their rib cage (sternal rub)
- Breathing slows or even stops
- Lips and/or fingernails turn blue, pale or gray

# **IN CASE OF OVERDOSE:**

**1** Call 911

Follow dispatcher instructions.

**2** Give naloxone.

See reverse for instructions. If no reaction in 3 minutes, give second dose.

3 After naloxone

Stay with the person for 3 hours (as long as you can) or until help arrives. Make sure the person **does not take more opioids** even if they don't feel well. **If the person is still unresponsive**, lay them on their side, wait for help.

If you know how, do rescue breathing and/or CPR See reverse for instructions or follow 911 dispatcher instructions.



# **Opioids include:**

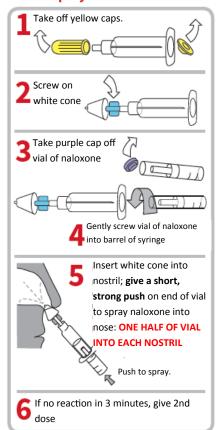
GENERIC	BRAND NAME
Hydrocodone	Vicodin, Lorcet, Lortab, Norco, Zohydro
Oxycodone	Percocet, OxyContin, Roxicodone, Percodan
Morphine	MSContin, Kadian, Embeda, Avinza
Codeine	Tylenol with Codeine, TyCo, Tylenol #3
Fentanyl	Duragesic
Hydromorphone	Dilaudid
Oxymorphone	Opana
Meperidine	Demerol
Methadone	Dolophine, Methadose
Buprenorphine	Suboxone, Subutex, Zubsolv, Bunavail, Butrans
	Butrans Jeroin

Heroin

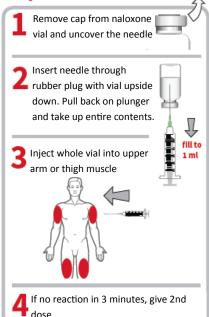
It is important to **share this information** with family and friends. Create a plan of action so others are prepared to respond in case of emergency. Tell people **where your naloxone is** so it is easily accessible in case of emergency.

# Administering naloxone:

#### Nasal spray naloxone



### Injectable naloxone



#### Auto-injector

The naloxone auto-injector is FDA approved for use by anyone in the community. It contains a speaker that provides instructions to inject naloxone into the outer thigh, through clothing if needed.

### **REDUCE RISK**

## Certain factors can increase risk of opioid emergency or overdose:

- Changes in tolerance (how much of the drug your body can handle)
  Resuming opioid use after a period of abstinence and changing medicines can increase risk.
- Mixing other drugs or medications —such as alcohol, benzodiazepines (e.g. Xanax® or Valium®), or cocaine—with opioids can increase risk of overdose.
- Taking opioids by yourself increases the chance that if anything happens, you will not get help.

#### Resuscitation

- If you are trained in CPR you may do this.
- If you only know rescue breathing or chest compressions do one of those
- Follow the instructions of the 911 dispatcher

## When to get a refill

### Please get a refill if:

- One of more doses of naloxone are used
- Naloxone or any piece of the applicator is lost or damaged
- Naloxone is nearing expiration date or is expired

If possible, store naloxone at room temperature, away from direct light.



www.harmreduction.org