

Emergency Measures for Opiate Overdose (EMOO)

Anthony Brown
BSN, PHN, RN, LPT, CATC III N, CAMF

Overdose

**YOU CAN
STOP
OVERDOSE
DEATH**

- ▶ In the time it takes for an overdose to become fatal, it is possible to reverse the respiratory depression and other effects of opioids through respiratory support and administration of the opioid antagonist naloxone.

Five Step Solution for First Responders



5 Steps

STEP 1:

**CALL FOR HELP (DIAL 911) Say:
AN OPIOID OVERDOSE NEEDS
IMMEDIATE MEDICAL
ATTENTION.**



How: 5 Steps

STEP 1:

An essential step is to get someone with medical expertise to see the patient as soon as possible, so if no emergency medical services (EMS) or other trained personnel are on the scene, dial 911 immediately. All you have to say is “Someone is not breathing.” Be sure to give a clear address and/or description of your location.

5 Steps

STEP 2:

**CHECK FOR SIGNS OF OPIOID
OVERDOSE**



5 Steps

STEP 2:

- ▶ Signs of **OVERDOSE**, which often results in death if not treated, include:
- ▶ Extreme sleepiness, inability to awaken verbally or upon sternal rub.
- ▶ Breathing problems that can range from slow to shallow breathing in a patient that cannot be awakened.
- ▶ Fingernails or lips turning blue/purple.
- ▶ Extremely small “pinpoint” pupils.
- ▶ Slow heartbeat and/or low blood pressure.

5 Steps

STEP 2:

- ▶ Signs of **OVERMEDICATION**, which may progress to overdose, include:
- ▶ Unusual sleepiness, drowsiness, or difficulty staying awake despite loud verbal stimulus or vigorous sternal rub.
- ▶ Mental confusion, slurred speech, intoxicated behavior.
- ▶ Slow or shallow breathing.
- ▶ Extremely small “pinpoint” pupils, although normal size pupils do not exclude opioid overdose. Slow heartbeat, low blood pressure.
- ▶ Difficulty waking the person from sleep.

5 Steps

STEP 3:

**SUPPORT THE PERSON'S
BREATHING**



5 Steps

STEP 3:

Ventilatory support is an important intervention and may be lifesaving on its own. Patients should be ventilated with oxygen prior to administration of naloxone. In situations where oxygen is not available, rescue breathing can be very effective in supporting respiration. Rescue breathing for adults involves the following steps:



5 Steps

STEP 3:

- ▶ Be sure the person's airway is clear (check that nothing inside the person's mouth or throat is blocking the airway).
- ▶ Place one hand on the person's chin, tilt the head back and pinch the nose closed.
- ▶ Place your mouth over the person's mouth to make a seal and give 2 slow breaths.
- ▶ The person's chest should rise (but not the stomach).
- ▶ Follow up with one breath every 5 seconds.

Clear the airway/ Rescue Breathing

- ▶ Rescue breathing is one of the most important steps in preventing an overdose death.
- ▶ It's important that the person's airway is clear so air can get into their lungs.
- ▶ Place the person on their back, place your hand under their neck and tilt their chin up. Check to see if there is anything in their mouth blocking their airway, such as gum, pills, patches, food, etc.. If so, remove it.





Chest Compressions/CPR

Chest compressions come first now

New cardiopulmonary-resuscitation guidelines show the importance of starting chest compressions immediately instead of opening the victim's airway and breathing into their mouth first.

CPR revised guidelines: Think C-A-B

COMPRESSIONS

Push at least 2 inches on adult breastbone, 100 times per minute, to move oxygenated blood to vital organs.



AIRWAY

Open the airway and check for breathing or blockage; watch for rise of chest, and listen for air movement.



BREATHING

Tilt chin back for the unobstructed passing of air; give two breaths, and resume chest compressions.



Note: Those untrained in CPR can simply do chest compressions until help arrives.

Source: American Heart Association

The Associated Press

- ▶ New guidelines from the AHA suggest that chest compressions can be helpful in an overdose situation (in addition to a cardiac event).
- ▶ If person knows chest compressions or feels comfortable performing them, they cannot hurt, can only help.
- ▶ HOWEVER: It is not your role to teach chest compressions during a 5–10 minute training, but do not discourage it.
- ▶ This is a gray area of overdose response where there is not a lot of research but and a fair amount of disagreement.

5 Steps

STEP 4:

ADMINISTER NALOXONE



- ▶ How to Use NARCAN[®] Nasal Spray
- ▶ **PEEL** back the package to remove the device.
- ▶ **PLACE** the tip of the nozzle in either nostril until your fingers touch the bottom of the patient's nose.
- ▶ **PRESS** the plunger firmly to release the dose into the patient's nose.





5 Steps

STEP 4:

- ▶ Opioid-naïve patients may be given starting doses of up to 2 mg without concern for triggering withdrawal symptoms depending on the route of administration.
- ▶ The intramuscular route of administration for naloxone may be suitable for patients with suspected opioid use disorder because it provides a slower onset of action and a prolonged duration of effect, which may minimize rapid onset of withdrawal symptoms.

5 Steps

STEP 4:

ADMINISTER NALOXONE

DURATION OF EFFECT

5 Steps

STEP 4:

- ▶ The duration of effect of naloxone is 30 to 90 minutes depending on dose and route of administration, and overdose symptoms. The goal of naloxone therapy should be to restore adequate spontaneous breathing, but not necessarily complete arousal. Syringe and a mucosal atomizer device to enable intranasal delivery require the user to be trained on how to assemble all of the materials and administer the naloxone to the victim.

Using Narcan:

- ▶ Administer one dose intramuscularly into the upper arm, thigh (auto-injector) or nasally, one half in each nostril.
- ▶ Start Rescue Breathing
- ▶ Narcan should work in about 1–3 minutes, if it doesn't work in 3 minutes or so give 2nd dose
- ▶ OD could come back, stay with the person or transfer care to EMS.

New NARCAN product



Image: Matthew Rakob

5 Steps

STEP 5:

**MONITOR THE PERSON'S
RESPONSE**



5 Steps

STEP 5:

- ▶ All patients should be monitored for recurrence of signs and symptoms of opioid toxicity for at least 4 hours from the last dose of naloxone or discontinuation of the naloxone infusion. Patients who have overdoses on long-acting opioids should have more prolonged monitoring.




5 Steps

STEP 5:

- ▶ Most patients respond by returning to spontaneous breathing. The response generally occurs within 3 to 5 minutes of naloxone administration. (Continue rescue breathing while waiting for the naloxone to take effect.) Naloxone will continue to work for 30 to 90 minutes, but after that time, overdose symptoms may return. Therefore, it is essential to get the person to an emergency department or other source of medical care as quickly as possible, even if he or she revives after the initial dose of naloxone and seems to feel better.

The Wake-Up:

- ▶ People wake up from an overdose differently.
 - ▶ Violent reactions to waking up from an overdose are rare, and associated with being given too much naloxone, or waking up in disorienting environments (ER, first responders/police presence, etc)
 - ▶ Often, the person does not realize that they had overdosed, keep them calm and explain what happened.
 - ▶ Make sure they do not try to ingest more of any drug.
- 

After-care and Support

- ▶ Naloxone only lasts between 30 - 90 minutes in the blood.
- ▶ It is very important that someone stay with the person and wait out the risk period just in case another dose of naloxone is necessary.
- ▶ Naloxone can cause uncomfortable withdrawal feelings since it blocks the action of opioids in the brain.
- ▶ Long-acting opioids present the greatest risk of “re-sedation” or a return of the overdose, so it is important to get further assistance for the person if they have taken any long-acting opioid (like methadone) or to watch them for a while after the wake up.

5 Steps – Recap

1. CALL FOR HELP (DIAL 911) Say: AN OPIOID OVERDOSE NEEDS IMMEDIATE MEDICAL ATTENTION.
2. CHECK FOR SIGNS OF OPIOID OVERDOSE
3. SUPPORT THE PERSON'S BREATHING
4. ADMINISTER NALOXONE
5. MONITOR THE PERSON'S RESPONSE



Naloxone (Narcan®)

- * Opioid antagonist (“blocker”) which reverses opioid overdose
- * Can be administered intravenously, intramuscularly, subcutaneously or intranasally
- * **Only works for about 30-90 minutes**
- * Causes sudden withdrawal in the opioid dependent person – an unpleasant experience
- * Doesn’t get a person “high” and is not addictive
- * **Has no effect if an opioid is not present**

NALOXONE NONRESPONDERS



Non Responders

- ▶ If a patient does not respond to naloxone, an alternative explanation for the clinical symptoms should be considered. The most likely explanation is that the person is not overdosing on an opioid but rather some other substance or may even be experiencing a non-overdose medical emergency.
- ▶ A possible explanation to consider is that the individual has overdosed on buprenorphine, a long-acting opioid partial agonist. Because buprenorphine has a higher affinity for the opioid receptors than do other opioids, naloxone may not be effective at reversing the effects of buprenorphine-induced opioid overdose.

Do's and Don'ts

- ▶ DO support the person's breathing by administering oxygen or performing rescue breathing.
- ▶ DO administer naloxone.
- ▶ DO put the person in the "recovery position" on the side, if he or she is breathing independently.
- ▶ DO stay with the person and keep him/her warm.

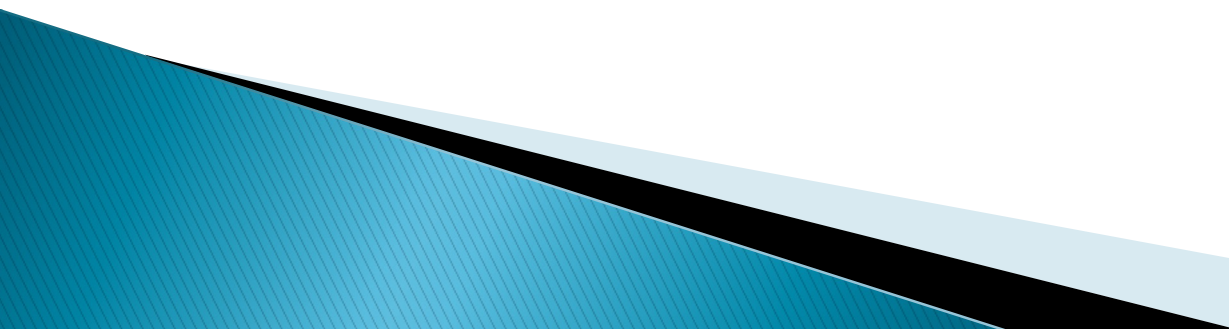


Do's and Don'ts



- ▶ DON'T slap or try to forcefully stimulate the person—it will only cause further injury. If you are unable to wake the person by shouting, rubbing your knuckles on the sternum (center of the chest or rib cage), or light pinching, he or she may be unconscious.
- ▶ DON'T put the person into a cold bath or shower. This increases the risk of falling, drowning, or going into shock.
- ▶ DON'T inject the person with any substance (saltwater, milk, “speed,” heroin, etc.). The only safe and appropriate treatment is naloxone.
- ▶ DON'T try to make the person vomit drugs that he or she may have swallowed. Choking or inhaling vomit into the lungs can cause a fatal injury.

Some last details....

- Protect Narcan from direct sunlight and extreme temperatures (59 to 86 degrees).
 - Check the expiration date regularly.
 - AB 635 Overdose Treatment Act, in effect as of January 2014 protects carriers, distributors and users of narcan
- 

Life Matters

