Overdose Risk Factors & Prevention

Opioids include both illicit fentanyl and heroin as well as prescription medications used to treat pain such as morphine, codeine, methadone, oxycodone (Oxycontin, Percodan, Percocet), hydrocodone (Vicodin, Lortab, Norco), fentanyl (Duragesic, Fentora), hydromorphone (Dilaudid, Exalgo), and buprenorphine (Subutex, Suboxone). The following are some common risk factors for opioid overdose as well as some prevention strategies:

Mixing Drugs

Many overdoses occur when people mix heroin or prescription opioids with alcohol and/or benzodiazepines. Alcohol and benzodiazepines (Xanax, Klonopin, Ativan and Valium) are particularly dangerous because, like opioids, these substances impact an individual's ability to breathe. Avoid mixing opioids with other drugs or alcohol. If prescribed an opioid and a benzodiazepine by a prescriber, take only as directed.

Tolerance

Tolerance is your body's ability to process a drug. Tolerance changes over time so that you may need more of a drug to feel its effects. Tolerance can decrease rapidly when someone has taken a break from using an opioid. When someone loses tolerance and then takes an opioid again, they are at-risk for an overdose, even if they take an amount that caused them no problem in the past. If you are using opioids after a period of abstinence, start at a lower dose.

Physical Health

Your physical health impacts your body's ability to manage opioids. Since opioids can impair your ability to breathe, if you have asthma or other breathing problems you are at higher risk for an overdose. Individuals with liver (hepatitis), kidney problems, and those who are HIV-positive are also at an increased risk of an overdose.

Previous Overdose

A person who has experienced a nonfatal overdose in the past has an increased risk of a fatal overdose in the future. To prevent a fatal overdose, teach your family and friends how to recognize and respond to an overdose.

How do I know if someone is overdosing?

If someone takes more opioids than their body can handle, they can pass out, stop breathing, and die. An opioid overdose can take minutes or even hours to occur.

A person who is experiencing an overdose may have the following symptoms:

- Slow breathing (less than 1 breath every 5 seconds) or no breathing.
- · Vomiting.
- Face is pale and clammy.
- Blue lips, fingernails, or toenails.
- Slow, erratic, or no pulse.
- Snoring or gurgling noises while asleep or nodding out.
- No response when you yell the person's name or rub the middle of their chest with your knuckles.

An overdose is a MEDICAL EMERGENCY!
Call 9-1-1 immediately



www.pharmacy.ohio.gov

Overdose Recognition and Response Guide



A GUIDE FOR PATIENTS AND CAREGIVERS

State of Ohio Board of Pharmacy

Steven W. Schierholt Executive Director

What is naloxone?

Naloxone (Narcan) is a prescription medication that can reverse an overdose that is caused by an opioid drug. When administered during an overdose, naloxone blocks the effects of opioids on the brain and restores breathing. It can be given as an injection into a muscle or as a nasal spray.

Naloxone has no potential for abuse. If it is given to a person who is not experiencing an opioid overdose, it is harmless. If naloxone is administered to a person who is experiencing an opioid overdose, it will produce withdrawal symptoms. Naloxone does not reverse overdoses that are caused by non-opioid drugs.

IMPORTANT: Naloxone should be stored at room temperature and away from light. Naloxone can freeze at low temperatures. If this happens, the medication may not work as intended.

Where to Get Help



Ohio Department of Mental Health and Addiction Services Treatment Referral Line (8am-6pm M-F) 1-877-275-6364

RecoveryOhio - How to Get Help www.pharmacy.ohio.gov/GetHelp

Substance Abuse & Mental Health Services Administration Treatment Locator

https://findtreatment.gov/

How to respond to an overdose

- **1.** Try to wake the person up by yelling their name and rubbing the middle of their chest with your knuckles (sternum rub).
- **2.** Call 9-1-1. Indicate the person has stopped breathing or is struggling to breathe.
- **3.** Make sure nothing is in the person's mouth that could be blocking their breathing. If breathing has stopped or is very slow, begin rescue breathing.

4. Give Rescue Breathing

Step 1: Tilt their head back, lift chin, pinch nose shut.

Step 2: Give 1 slow breath every 5 seconds. Blow enough air into their lungs to make their chest rise.

- **5.** Use naloxone and continue rescue breathing at one breath every 5 seconds.
- **6.** If the person begins to breathe on their own, put them on their side so they do not choke on their vomit. Continue to monitor their breathing and perform rescue breathing if respirations are below 10 breaths a minute. If vomiting occurs, manually clear their mouth and nose.
- **7.** If the person does not respond by waking up, to voice or touch, or start breathing normally within 2-3 minutes, another dose of naloxone should be given.
- 8. Stay with the person until EMS arrives.

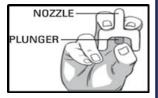
*Please be advised that there are other naloxone formulations available. Ohio law requires patients to be trained on the formulation of naloxone being dispensed. Pharmacists must provide supplemental training materials if dispensing a formulation of naloxone not listed in this brochure.

How to give naloxone*:

NARCAN™ (4MG) and Kloxxado™ (8MG) Nasal Spray

1. Peel back the tab to open the nasal spray.

2. Hold the device with your thumb on the bottom of the plunger and your first and middle fingers on either side of the nozzle. Do not apply



any pressure until you are ready to give the dose.

- **3.** Tilt the person's head back and provide support under the neck with your hand. Gently insert the tip of the nozzle into one nostril until your fingers on either side of the nozzle are against the bottom of the person's nose.
- **4.** Press the plunger firmly to give the dose of the medication. Remove the device from the nostril after giving the dose.
- **5.** If the person is unresponsive after 2 to 3 minutes, give an additional dose in the other nostril.

For a copy of the manufacturer's instructions visit: www.pharmacy.ohio.gov/NARnasal (NARCAN) www.pharmacy.ohio.gov/KLOnasal (Kloxxado)

ZIMHI™ (Naloxone HCI) Injection

- **1.** Press needle into outer thigh after twisting off needle cap.
- 2. Push the plunger until it clicks and hold for 2 seconds before removing the needle. The correct dose has been given if the plunger has been pushed all the way down and blocks part of the solution window. It is normal for most of the medicine to remain in the syringe after the dose has been injected.
- **3.** Pull the safety guard down using one hand with fingers behind the needle. Do this right after you give the injection.
- **4.** Place the used syringe into the blue case and close it. If the person is unresponsive after 2 to 3 minutes, give an additional dose using a new device.

For a copy of the manufacturer's instructions visit: www.pharmacy.ohio.gov/ZIMinject