Conversation Starter: Patients, Family, and Caregivers

Naloxone: How to Save a Life With Naloxone



Naloxone can quickly restore normal breathing to a person whose breathing has slowed or stopped as a result of overdosing on opioid medications, heroin, or other drugs (e.g., cocaine, methamphetamine) that are mixed or laced with the opioid fentanyl.¹



Use the following examples to help you start a conversation with a clinician or pharmacist about how to obtain naloxone, when to use it, and where to find training on giving naloxone.

If naloxone was not provided with a prescribed opioid medication, is a prescription needed for naloxone?

Currently all 50 states and the District of Columbia allow pharmacists to dispense naloxone without a prescription.² If you believe someone you know may be at risk for an overdose, you can request naloxone. This may be someone who uses drugs or was prescribed an opioid medication. Clinicians and pharmacists play a critical role in ensuring patients receive naloxone—ask them!

Is special training required to give naloxone to someone who has overdosed?

Feeling confident about using naloxone can help put your mind at ease in an emergency. Three forms of naloxone products are available, nasal spray, injection, and auto-injection. Refer to the Substance Abuse and Mental Health Administration's (SAMHSA).

Opioid Overdose Prevention Toolkit to familiarize yourself with the differences and how to use them. In most states, anyone can go to a pharmacy or community-based program, to get trained to give/use naloxone, and receive naloxone without a special prescription.³ To learn about training on how to give naloxone, visit getnaloxonenow.org.

I want naloxone in case of an accidental overdose, but no one knows I take opioids. I'm concerned what people might think or be confused on how to use it. What should I tell them?

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Remember, naloxone is a safe medicine that can be given safely to people of all ages. If you give naloxone to a person who has not taken an opioid medicine, it will not hurt them.

Other than taking a high dosage of prescription opioids, are there other reasons a person might need to get or have naloxone available?

In short, yes. Anyone who uses opioids can overdose, but you are at higher risk if you:^{5,6}

- Have a history of overdose
- Are aged 65 years and older
- Have certain medical conditions such as chronic obstructive pulmonary disease (COPD) or obstructive sleep apnea which may increase their risk of overdose (regardless of opioid dose), or reduced kidney or liver function

"[I/My family member] was told one of the risks with opioid medications is they could cause their breathing to slow or stop. Do you mind if I ask you some questions about naloxone?"

- Have been prescribed benzodiazepines, in addition to opioids (regardless of opioid dose)
- · Are receiving treatment for opioid use disorder, such as methadone, buprenorphine, or naltrexone
- Are using illegal drugs such as heroin and/or stimulants, including methamphetamine and cocaine or
 pills purchased "on the street," which could potentially be contaminated with illicit synthetic opioids
 like fentanyl
- Have a non-opioid substance use disorder, report excessive alcohol use, or have a mental health disorder (regardless of opioid dose)
- Have a history of opioid use and were recently released from incarceration or other controlled settings where tolerance to opioids has been lost

If any of the above applies to you, a family member, or someone you know, talk to a clinician, pharmacist, or local health department for options in your community.

For more information and resources on naloxone, visit <u>cdc.gov/opioids/naloxone</u>, and for drug overdose prevention, visit <u>cdc.gov/drugoverdose</u>.

¹https://www.drugabuse.gov/drug-topics/opioids/opioid-overdose-reversal-naloxone-narcan-evzio

²https://www.cdc.gov/vitalsigns/naloxone/index.html

³https://www.hhs.gov/surgeongeneral/priorities/opioids-and-addiction/naloxone-advisory/index.html

⁵https://www.hhs.gov/opioids/sites/default/files/2018-12/naloxone-coprescribing-guidance.pdf

⁶https://www.cdc.gov/mmwr/volumes/65/rr/rr6501e1.htm?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fmmwr%2Fvolumes%2F65%2Frr%2Frr6501e1er.htm