



Harm Reduction and Naloxone

What is harm reduction?

- Harm reduction refers to services, programs, and policies that aim to reduce the harms associated with drug use without requiring an individual to stop using the substances.
- Harm reduction benefits individuals and communities through an evidence-based approach.
- Harm reduction is one pillar of the Canadian drugs and substances strategy, accompanied by prevention, treatment, and enforcement. See www.mldncdas.com for information about the Middlesex-London Community Drug and Alcohol Strategy.

What are opioids?

- Drugs primarily used to treat pain but may also induce euphoria (a high), this gives them the potential to be misused
- Can be prescribed or produced and acquired illegally
- Opioids include:
 - Fentanyl
 - Codeine
 - Morphine
 - Oxycodone
 - Hydromorphone
 - Heroin
 - Methadone
 - Buprenorphine

What is an overdose?

- An opioid overdose occurs when an individual takes more opioids than their body can handle
- Opioids affect the part of the brain that controls breathing. An overdose can cause breathing to slow which can lead to unconsciousness and death.

Who is at risk?

Anyone using prescribed or street opioids is at risk for overdose, whether they are a first time user or long time user. Certain factors increase the risk:

- Taking prescription opioids at higher doses than recommended
- Taking opioids with alcohol or other sedatives
- Injecting opioids
- Using more than you are used to or a drug that you aren't used to
- Using opioids after a period of not using (hospital stay, incarceration, treatment, etc.)
- Certain other health conditions such as liver, kidney, or breathing conditions

The strength and type of street opioids are unknown. This makes them unpredictable and increases risk of overdose.

Signs of Opioid Overdose

- Difficulty talking, walking, and/or staying awake
- Weak, slow, or no breathing
- Deep snoring or gurgling sounds
- Loss of consciousness, extreme drowsiness
- Fingernails and/or lips are blue or grey
- Very small pinpoint pupils
- Cold clammy skin
- Unresponsive to stimuli (shouting, shaking)

What is naloxone?

- A medication that **temporarily** reverses an opioid overdose
- Binds to opioid receptors in the brain to remove the opioids from these receptors and reverse their effect on the body
- Stays active in the body for 20 to 90 minutes, the effects of most opioids last longer than this
- This temporary reversal gives individuals time to seek emergency medical help
- Naloxone is safe for all ages, does not cause dependence, and only works if there are opioids in the body. It will not reverse the effects of non-opioid drugs.

Types of Naloxone

1. Naloxone nasal spray

- Sprayed into the nose, works in 2-3 minutes

2. Naloxone injection

- Injected into a muscle such as the arm or thigh, works in 2-3 minutes



Where can I get naloxone?

- Naloxone is available for free at most pharmacies and some community organizations in Ontario, no prescription or health card required
- You are eligible for a free kit if you are at risk of opioid overdose, you are a person able to help someone at risk of opioid overdose (i.e., family, friend, etc.), you are a client of a needle exchange program, Hepatitis C program, or consumption and treatment service

Naloxone kit locations: <https://www.ontario.ca/page/where-get-free-naloxone-kit>

Overdose Response

Step 1: Shake and Shout

Try to wake them up by shouting their name and shaking their shoulders.

Step 2: Call 9-1-1

An overdose is **always an emergency**. Calling 9-1-1 right away is extremely important to ensure further help arrives because naloxone is temporary.

Speak clearly and calmly. Tell the dispatcher the individual is unresponsive, not breathing, and where you are (address, room number, nearest intersection or landmark if outside). If possible, have someone watch for an ambulance.

Step 3: Administer naloxone

Spray the nasal spray into the individual's nostril or inject 1 dose into the individual's muscle. Follow the directions in your naloxone kit.



Step 4: CPR

Provide rescue breathing and chest compressions if you have been trained.



(manseok_Kim, 2020)

Step 5: Assess – Is it working?

Have they started to breathe on their own? If there is no improvement in 2-3 minutes, provide another dose of naloxone and continue CPR. Stay with the person until EMS arrives.

Be prepared that naloxone may cause mild to severe withdrawal symptoms. They may wake up suddenly or slowly and they may be disoriented, anxious, and/or agitated.
When EMS arrives, tell them how much naloxone you have given.

Recovery Position

If the individual starts to breathe on their own but remains unconscious or if you need to leave them alone, place the person in the recovery position.

1. Lay them on their side
2. Support their head with their upper hand and ensure airway is clear
3. Bend upper knee to prevent them from rolling onto their stomach



([Image of recovery position], n.d.)

Good Samaritan Drug Overdose Act

- The Act became law on May 4, 2017.
- Aim is to encourage people to call 911 for emergency medical help during an overdose and reduce fear of police arriving at overdoses.
- Provides some legal protection for certain offences (i.e., drug possession) for people experiencing or responding to an overdose whether they stay or leave the scene before help arrives.
- Does not provide protection against more serious offences.

Reduce the Risk of Overdose

- Don't use drugs alone. If you will be using alone, NORRS is an overdose prevention hotline providing support through calls, texts, and an app to keep people safe (<https://www.nors.ca/>).
- Know how much you can take.
- Start small first to check the strength, especially if using a new drug, a drug from a new dealer, or if you are starting to use after a period of not using, even if you only stopped for a few days.
- Avoid mixing drugs, including with alcohol. If you mix, use one at a time and smaller amounts of each drug.
- Have a naloxone kit nearby and know how to use it.

Thank you!

For further information, please call 519-
663-5317.



References

Government of Canada. (2018, August 13). *Pillars of the Canadian drugs and substances strategy*. <https://www.canada.ca/en/health-canada/services/publications/healthy-living/pillars-canadian-drugs-substances-strategy.html>

Government of Canada. (2021, November 23). *About the Good Samaritan Drug Overdose Act*. <https://www.canada.ca/en/health-canada/services/opioids/about-good-samaritan-drug-overdose-act.html>

Government of Canada. (2023, July 25). *Opioids*. <https://www.canada.ca/en/health-canada/services/opioids.html>

Government of Canada. (2023, September 5). *Naloxone*. <https://www.canada.ca/en/health-canada/services/opioids/naloxone.html>

Government of Canada. (2023, September 5). *Opioid overdose*. <https://www.canada.ca/en/health-canada/services/opioids/overdose.html>

[Image of recovery position]. (n.d.). Government of Canada. <https://www.canada.ca/en/public-health/services/publications/healthy-living/hey-are-you-ok-poster.html>

NEXT Distro. (2021). *Narcan* [Photograph]. Unsplash. <https://unsplash.com/photos/a-package-of-masala-spot-sitting-on-top-of-a-white-table-yqlvjiFewcM>

manseok_Kim. (2020). *Cpr, cardiopulmonary resuscitation, rescue image* [Photograph]. Pixabay. <https://pixabay.com/photos/cpr-cardiopulmonary-resuscitation-5805345/>

Middlesex-London Health Unit. (2023). [Image of naloxone kit] [Photograph].

Toronto. (n.d.). *How to prevent and respond to overdose*. <https://www.toronto.ca/community-people/health-wellness-care/health-programs-advice/overdose-prevention-and-response/drug-use-services-and-supports/>