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GET READY. GET TRAINED. **SAVE LIVES.**

COVID-19 Updates: Opioid Overdose and Naloxone Administration

January 2021

Agenda

- Introductions and Housekeeping
- Naloxone Training (incl. COVID-19 updates)
- Your Agency's Role
- Where do I get a naloxone kit?
- Drug-related Trends in the Nipissing and Parry Sound Districts
- COVID-19: Increase in Overdoses and Supporting Clients



Naloxone Training (incl. COVID-19 updates)

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What is an overdose? What is naloxone?

- An overdose happens when a person takes an amount of a drug, or combination of drugs, that is more than their body can handle
- As a result, the central nervous system is not able to control basic life functions, like breathing or body temperature, and the person may lose consciousness
- Both people new to taking drugs and people experienced with taking drugs can overdose
- Naloxone is a medication that can temporarily reverse an opioid overdose. It is safe and easy to use

What are opioids?

- Opioids include, but are not limited to, medications prescribed by doctors to treat pain
- Opioids might also be taken or used to get high
- Examples of opioids:
 - Codeine (Tylenol #1, #2, #3)
 - Oxycodone (Percocet, OxyNEO)
 - Hydromorphone (Dilaudid)
 - Meperidine (Demerol)
 - Methadone
 - Fentanyl (and analogues)
 - Heroin

Opioid overdose signs and symptoms

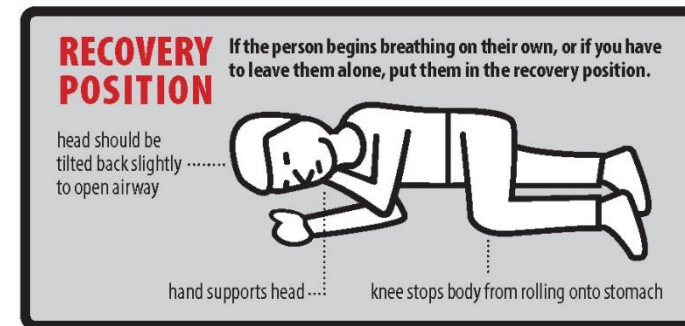
- Person can't be woken up
- Breathing is slow or has stopped
- Snoring or gurgling sounds
- Fingernails and lips turn blue or purple
- Pupils are tiny or eyes are rolled back
- Body is limp

Overdose response myths

Do Not	Risks
Put the person in a bath/cold water	Person could drown or go into shock
Induce vomiting	Could cause choking
Inject them with anything (saltwater, cocaine, milk) other than naloxone	Will not help and could cause more harm
Slap them too hard, kick them in the testicles, burn the bottom of their feet	Could cause serious harm
Let them sleep it off!	Person could stop breathing and die

5 steps to respond to an opioid overdose

STEP 1		SHOUT & SHAKE their name their shoulders
STEP 2		CALL 9-1-1 If unresponsive.
STEP 3		GIVE NALOXONE 1 spray into nostril or inject 1 vial or ampoule into arm or leg.
STEP 4		PERFORM RESCUE BREATHING AND/OR CHEST COMPRESSIONS
STEP 5		IS IT WORKING? If no improvement after 2-3 minutes, repeat steps 3 & 4. Stay with them.



SIGNS OF OPIOID OVERDOSE

- Person can't be woken up
- Breathing is slow or has stopped
- Snoring or gurgling sounds
- Fingernails and lips turn blue or purple
- Pupils are tiny or eyes are rolled back
- Body is limp

Step 1 – Shout and shake

Is the person responsive? Perhaps they are just sleeping.

- Stimulate with NOISE.
 - Shout their name
 - Say, “Hey, are you ok?”



- Stimulate with TOUCH.
 - Tell the person what you are doing before you touch them
 - “Hi... I’m just checking that you’re OK.”
 - Shake their shoulders
 - Rub your knuckles hard on their chest bone or under their nose
 - Pinch their ear lobe

Are they responding?

- If the person responds to stimuli, keep an eye on them
 - Do not leave them alone in case the drugs they took have not fully taken effect – they could still overdose
- If the person does not respond to Step 1, proceed to Step 2, calling 911

Step 2 – Call 911

- If the person is unconscious, call 911
- Some dispatchers will ask if you need ambulance, fire or police
- After you call 911, continue **immediately** to Step 3, administering naloxone, while you wait for help to arrive
- Tell the first responders as much as you know about what drugs the person took and what you have done, like administering naloxone



Reluctance to call 911

- Many people who use drugs have had bad experiences in hospitals and emergency departments and may be reluctant to seek medical care
- Drug use is criminalized
 - Many people who use drugs have already been arrested and have had bad experiences with the police
 - They can be fearful of arrest
- In 2017, the Good Samaritan Drug Overdose Act was introduced

Good Samaritan Drug Overdose Act

See an overdose? Call 911 immediately.

Under Canada's *Good Samaritan Drug Overdose Act*, if you seek medical help for yourself or for someone else who has overdosed, neither of you will be charged for possessing or using drugs, nor will anyone else at the scene.

See the other side of this card to know exactly when the Good Samaritan law will and won't protect you against charges.

Police may not always know about the law's protections.

If you need legal help, call

1 (800) 668-8258 (toll-free) for Legal Aid Ontario or

1 (855) 947-5255 (toll-free) for Law Society Referral Service,
also online at <https://lsrs.lsuc.on.ca/lsrs>.

English and French versions available for
download from www.aidslaw.ca

The law <u>does</u> provide protection against charges for	The law <u>does not</u> provide protection against charges for
Possessing drugs for your own use	Selling illegal drugs (trafficking): Police may suspect this if you have a large amount of drugs, cash or items like scales, baggies, and debt lists
	Offences other than drug possession
Violating conditions of your parole, bail, probation or conditional sentence for a simple drug possession charge	Any outstanding arrest warrants
	Violating conditions of your parole, bail, probation or conditional sentence for an offence that is not simple possession

Endorsed by the Ontario Association of Chiefs of Police.

Disclaimer: This is legal information — not legal advice.
If you need legal advice, please consult a lawyer about your situation.

 The Law
Foundation
of Ontario

 Canadian
HIV/AIDS
Legal
Network

Réseau
juridique
canadien
VIH/sida

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COVID-19: Aerosol generating medical procedures (AGMP)

- Aerosol generating medical procedures (AGMPs) induce the production of aerosols of different sizes including droplet nuclei
- Early on during COVID-19 some people thought that nasal spray naloxone and chest compressions were AGMPs. This information was FALSE
- Nasal spray naloxone and chest compressions (alone) are NOT AGMPs

Slide adapted from: CATIE. (2020). COVID-19 infection prevention and control from harm reduction workers in Ontario [PowerPoint Slides] Retrieved from:
<https://www.catie.ca/en/webinars/covid-19-infection-prevention-and-control-harm-reduction-workers-ontario>

COVID-19: Personal protective equipment and naloxone administration

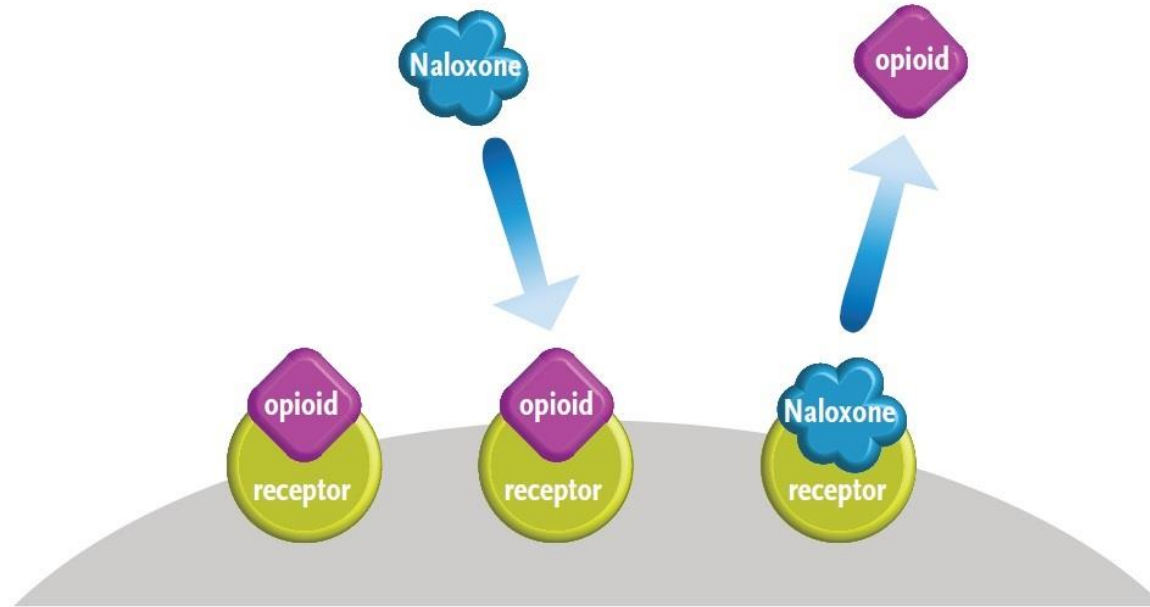
Health Care Workers	General Public
<ul style="list-style-type: none">• Surgical/procedure mask• Isolation gown• Gloves• Eye protection (goggles or face shield)	<ul style="list-style-type: none">• Disposable gloves• Mask or cloth to cover individual's face who is overdosing

[IPAC Recommendations for Use of Personal Protective Equipment for Care of Individuals Suspect or Confirmed COVID-19](#) [Public Health Ontario]

Step 3 – Give naloxone

- Naloxone is a non-addictive, non-psychoactive drug that blocks the effects of opioids on the body
 - Does not create a “high”
- Temporarily reverses the effect of an opioid overdose
 - Works quickly (less than 5 minutes); wears off quickly (30-45 minutes)
 - There is no effect if naloxone is given to a person who has not used opioids
 - If unsure, administer
- Has been used by EMS routinely for over 40 years
- Two forms available in Ontario – nasal spray and injectable

How naloxone works



The brain's opioid receptors have a higher affinity for naloxone than for opioids. When naloxone is administered, it displaces opioids that are attached to the receptors, reversing opioid overdose.

Contents of nasal naloxone kit

- 2 doses of nasal spray naloxone (inside a sealed package)
- 1 pair of non-latex gloves
- 1 breathing barrier
- 1 bilingual instructional insert
- 2 identifier cards (1 English & 1 French) showing that the person has received training in naloxone use, and the expiry date of the naloxone



**Store at room
temperature between
15°C to 25°C**

Protect from light

Check expiry dates

**LET OTHERS KNOW
WHERE YOU STORE
YOUR KIT(S)**

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Nasal spray naloxone

- Nasal spray naloxone is also known by the brand name “Narcan”
- Administered into the nostril; does not require breathing to be absorbed across the mucosal lining



Source: Adapt Pharma Canada, 2017; Ontario Ministry of Health and Long-Term Care, 2018

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How to administer nasal naloxone

- Lay the person on their back, wipe the nose clear if necessary and keep the head tilted backwards slightly with one hand



Do not touch the plunger until the device is in the person's nostril, otherwise you may accidentally trigger the spray.

Injectable naloxone kit

- 2 ampoules of naloxone
- 2 ampoule snappers
- 2 syringes
- 2 alcohol swabs
- 1 pair of non-latex gloves
- 1 breathing barrier
- 1 bilingual instructional insert
- Training date card



**Store at room
temperature between
15°C to 30°C**

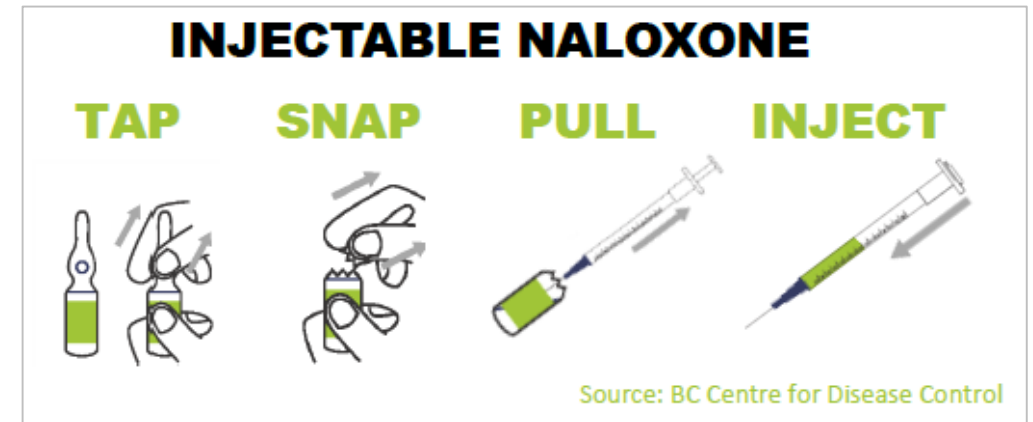
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**LET OTHERS KNOW
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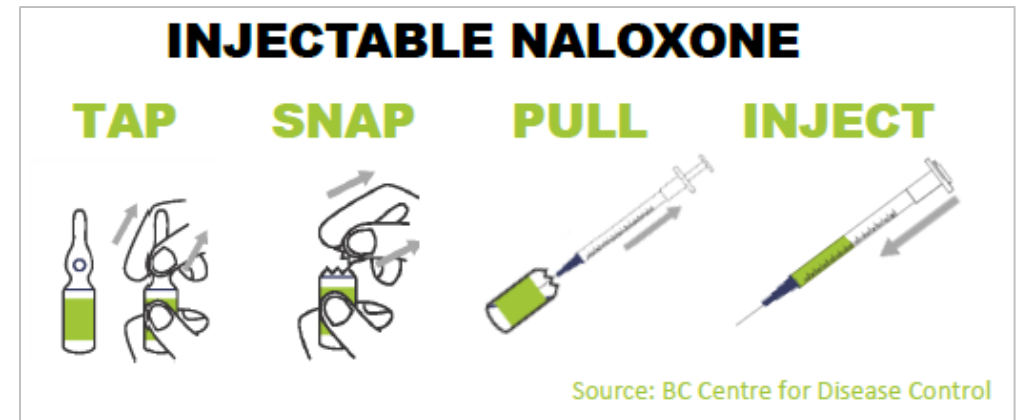
How to administer injectable naloxone

- Grasp the top (narrow end) and bottom end with the thumb and forefinger of each hand
 - Use snapper or alcohol pad to grasp
- Swirl or tap the ampoule so the liquid falls into bottom
- Snap open the ampoule away from you
- Remove a syringe from its packaging and remove the cap
- Insert the needle into the ampoule and pull the syringe plunger up to draw up the naloxone
- Turn the syringe, needle pointing up, and lightly tap the syringe, then slowly push plunger to expel air bubbles
 - A little bit of air is not harmful



How to administer injectable naloxone

- If able to, wipe the skin with an alcohol swab
- Insert the needle, at a 90 degree angle, into:
 - The large muscle of the thigh, or
 - Upper arm (muscle below the shoulder)
 - You can inject through their clothing if you need to
- Push the plunger down and inject all of the naloxone
- Dispose of the needle/syringe and ampoule in a plastic, puncture proof container like a sharps container or a water bottle
- Note the time or start a timer on your phone.
 - You will want to know how long it has been in case another dose is needed



COVID-19: Additional considerations for administering naloxone

- In many cases individuals in the public administering naloxone:
 - Know the health status of the individual overdosing
 - Have already been in close contact with the individual overdosing
- Naloxone takes 2-3 minutes to take effect
 - Step back after administering naloxone (i.e., physical distance oneself)
 - Use a mask or cloth to cover the mouth of the person who is overdosing
 - Tilt the person's head to the side
- Avoid touching your face
- Everyone has a choice to administer
 - Life and death situation



How to check for breathing

- If the person does not respond to shaking and shouting, check their breathing.
 - Is their chest and/or stomach rising and falling?
 - Place the back of your hand over their mouth; can you feel their breath?
 - Hold the glass screen of your mobile phone over their mouth; does it fog up?
- If the person is breathing, put the person in the recovery position and keep monitoring them until they are more alert.
 - The recovery position will keep their airway clear and open.
 - It will also prevent them from choking if they vomit.

Step 4 – Perform rescue breathing and / or chest compressions

- Depending on whether or not the person is breathing, and your training and comfort level, put the person in the recovery position or perform rescue breathing and/or chest compressions



Recovery position

If breathing:

Recovery position

RECOVERY POSITION

Figure 1: Kneel by the person. Raise the arm closest to you and place the arm out at a 90 degree angle to the body.

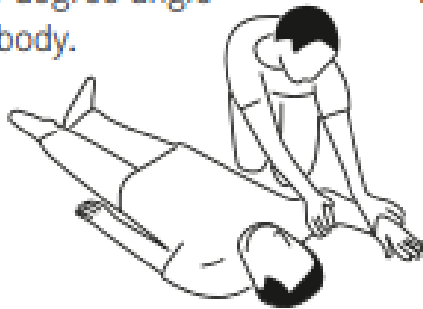


Figure 2: Place the other hand under their head against their cheek, to support their head.

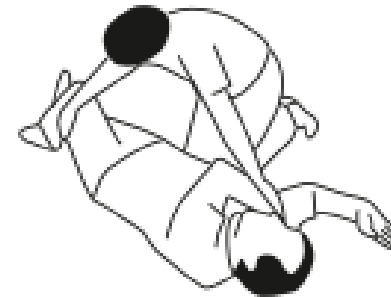
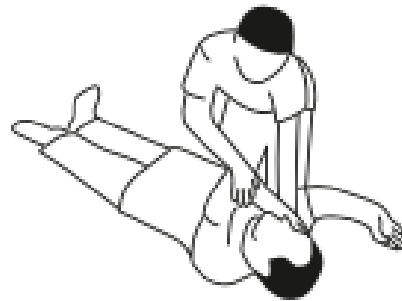
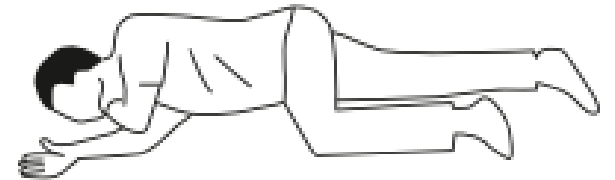


Figure 3: Lift the leg furthest away from you and place their foot on the floor.

Figure 4: Using their knee as a lever gently pull the person onto their side, towards you.

Tilt the head back and ensure airway is open and clear.

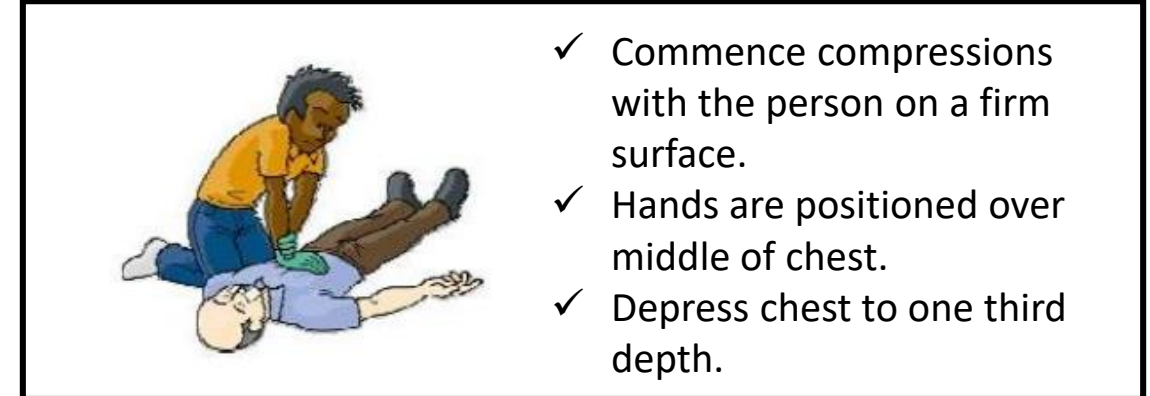
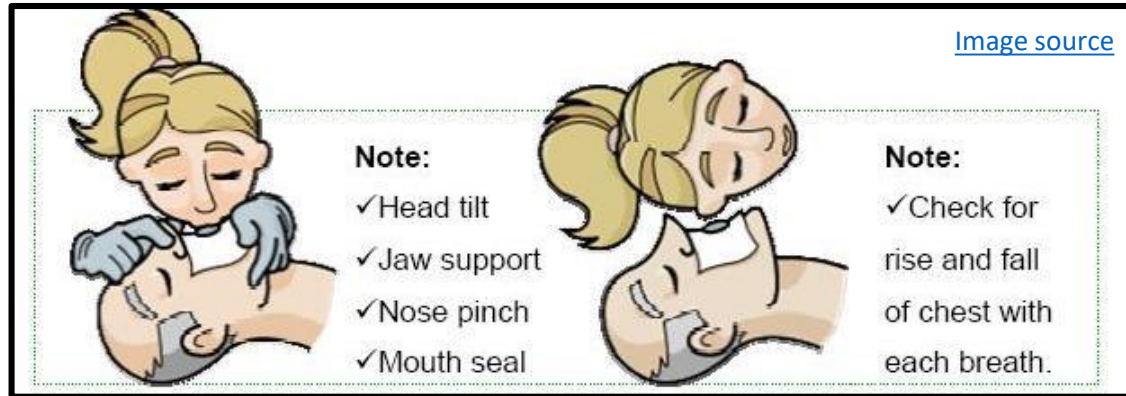


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Rescue breaths and/or chest compressions

If not breathing (prior to COVID-19):



- 30 compressions for every 2 rescue breaths
- 100 to 120 compressions per minute

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Chest compressions

If not breathing (during COVID-19):



Chest compressions and/or the
recovery position are
RECOMMENDED



Rescue breaths are **NOT**
RECOMMENDED at this time

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Step 5 – Is it working?

- Continue performing rescue breathing and/or chest compressions after administering naloxone, if necessary
- Naloxone usually starts working in 2-3 minutes. After this time, check their breathing again
- If the person is not responding, administer a second dose.
 - Use the other nostril if administering nasal spray
- You can keep repeating doses as necessary, if you have access to additional doses
- Continue rescue breathing and/or chest compressions until the person becomes alert or until help arrives



If naloxone is NOT working

- Reasons a person may not respond to naloxone:
 - The person is not under the influence of opioids
 - Administering naloxone will not harm them
 - There could be another serious medical issue
 - A higher dose of naloxone is needed
 - Some fentanyl analogues require additional doses of naloxone
- 911 should already have been called regardless

After an overdose

When naloxone starts working the individual may:

- Wake up suddenly or slowly
- Experience mild to severe withdrawal symptoms
 - They may feel sick or be sweating; they may also throw up or soil themselves.
 - Explain that these symptoms will go away as the naloxone wears off (30-90 minutes)
- Want to use more drugs
 - Explain that taking more drugs will be a waste as the naloxone will block any more drugs' effects
 - It can also further increase the risk of overdosing again

Caring for someone after an overdose

- Provide emotional support and reassurance, and explain what has happened
- Monitor and prepare in case they lose consciousness again as the naloxone wears off
 - Let them know more naloxone may need to be given if that happens
- If paramedics were not called, suggest a trip to the hospital for further observation
- Check in with a friend or colleague if you need to debrief afterwards. Self-care is important
- Wash your hands with soap and water or use an alcohol-based hand sanitizer

Preventing opioid overdose

Key principles for preventing opioid overdose:

- Do not use alone
- Be aware of your tolerance
- Avoid mixing drugs
- Know the quality of your drug(s)

Don't use alone

If you overdose alone, no one will be able to help you.

Prevention:

- Fix with a friend
- Call someone to let them know you are about to use
- Set up call or text check-ins
- Leave your door unlocked

Be aware of your tolerance

A person's ability to withstand the effects of a drug

- Develops over time
- Can be affected by: age; weight; health; stress; situation
- Can rapidly decrease when they have taken a break from using either street or prescription drugs
 - E.g., time in prison; drug treatment programs; hospital stays

Prevention:

- Use less drugs when tolerance may be lower
- Use small amounts to test your tolerance
- Use by smoking, snorting or swallowing instead of injecting

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Avoid mixing drugs and substances

Many overdose deaths occur when multiple and different types of drugs have been taken.

Prevention:

- Avoid mixing drugs
 - Especially depressants like benzodiazepines, other opioids and alcohol
- Try to use only one drug at a time
- If you are mixing, use less of each drug

Know the quality of your drug(s)

Drug quality is unpredictable. Illegal drugs are unregulated; therefore, their purity and strength can be different with each batch, even from the same dealer.

Prevention:

- Know your dealer; try to stick to the same source
 - Ask if they have a new supply
 - Ask others if they have tried a particular batch
- Does the drug look, smell or taste different?
- Access drug checking kits or services if you are able
- Try a small dose to start (start slow)

Your Agency's Role


What is your role in the ONP?

- Store naloxone in a safe place
- Offer naloxone kits to clients who use opioids or who are friends/family of people who use opioids
- If they want a kit, complete naloxone training with them. Check the training checklist or postcard for guidance
- Enter their information into spreadsheet/chart
- Have them complete Prescription Identifier Card
- If client comes back with used/expired kits, provide them with one more kit and complete spreadsheet again (no need to retrain)

Ordering

- Naloxone orders can be placed at:
<https://forms.myhealthunit.ca/Naloxone-Ordering-Form/Naloxone-Ordering-Form>
- Your agency can order intranasal kits, intranasal refills (just the replacement medication) or injectable kits (if you would like to do this more training would be needed)
- Naloxone orders can be placed at any time and typically take 1-3 days to get ready
- Orders can be picked-up at the Health Unit in North Bay (345 Oak Street West) or Parry Sound (70 Joseph Street)
- When your order is ready for pick-up someone will connect with you to let you know

Reporting

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O
1	 <p>North Bay Parry Sound District Health Unit Bureau de santé du District de North Bay Parry Sound</p>	<p>possible, select an option from the drop down list. Please submit this file electronically to Katharine O'Connell at the North Bay Parry Sound District Health Unit on January 8, April 9, July 6, and October 8. If you have any questions about this form or about the naloxone program, please contact Katharine O'Connell at katharine.oconnell@healthunit.ca or at 705-474-1400 ex 5233.</p>													
2															
3															
4															
5	Client Number	Example	1	2	3	4	5	6	7	8	9	10	11	12	13
6	1. Date of Visit (yyyy/mm/dd)	29/06/20													
7	2. Client Frequency	New													
8	3. Client Type	Person who uses													
9	4. Gender	Female													
10	5. Age	24													
11	6. Client Residence	West Nipissing													
12	7. Since your last visit, have you seen or experienced an opioid overdose?	Yes													
13	8. What type of naloxone was administered?	Intra-nasal spray													
14	9. How many single doses of naloxone were administered for each overdose you witnessed and/or were involved in?	1													
15	10. How many double doses of naloxone were administered for each overdose you witnessed and/or were involved in?	0													
16	11. How many times were three doses of naloxone administered for each overdose you witnessed and/or were involved in?	1													
17	12. How many times were four doses of naloxone administered for each overdose you witnessed and/or were involved in?	0													
18	13. How many times were five doses of naloxone administered for each overdose you witnessed and/or were involved in?	1													
19	14. How many times was 911 called for the overdoses you witnessed and/or were involved in?	0													
		<div> Tracking Form Descriptors and Notes Quarterly Totals Dropdown Options + </div>													

Remember....

- Carry your naloxone kit with you at all times
- Store naloxone at room temperature and away from light
 - Leave the spray in the container your kit comes in
 - Don't leave it in a car on really hot or really cold days
- Check the expiry date on your naloxone regularly!
- Encourage other people you know to carry naloxone
- Seek support if you have been involved in an overdose
- Report naloxone statistics naloxone kit and get it replaced

Where do I get a naloxone kit?

Where do I get a naloxone kit?

Find free naloxone kit locations:

www.ontario.ca/page/get-naloxone-kits-free

Call **1-866-532-3161** Monday to Friday 8:30 a.m. to 5p.m.

[Home](#) > [Health and wellness](#) > [Addiction and mental health](#) > [Opioids](#)

Where to get a free naloxone kit


Check our map of locations where you can get naloxone kits and training on how to use them.

This page is not for emergencies. If you are with someone who has overdosed, call 911 immediately.

Search the map to find the closest pharmacy* or community organization where you can pick up a [naloxone kit](#).

*Not all pharmacies carry naloxone kits. Call ahead to check if your pharmacy has naloxone kits in stock. You can also ask the pharmacist any questions you might have.

Enter a city, address or complete postal code:



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Drug-related Trends in the Nipissing and Parry Sound Districts

Opioid-related overdoses in the Nipissing and Parry Sound districts

FATAL OVERDOSES ARE ON THE RISE.

In 2019 there were **18 deaths related to opioids** among residents of Nipissing and Parry Sound districts.



Opioid-related emergency department visits in the Nipissing and Parry Sound districts

OPIOID-RELATED EMERGENCY DEPARTMENT VISITS IN NIPISSING AND PARRY SOUND DISTRICTS




2018



2019

Nipissing and Parry Sound District Overdose Reporting System



North Bay Parry Sound District
Health Unit
Bureau de santé
du district de North Bay-Parry Sound

[Public Health Services](#)[Health Topics](#)[Health Professionals and Partners](#)[Community Data and Reports](#)[About Us](#)

We are collecting information through this form to understand overdoses and negative drug reactions in our community. This information will allow us to identify if there is a tainted or potent drug supply or an increase in overdoses so that we can respond and reduce drug-related deaths or harms. Please provide as much information as possible. If your client does not feel comfortable answering a question, or you didn't get the chance to ask them some questions, fill in as much information as you know. In a situation where more than one person had an overdose or negative drug reaction, please submit a separate form for each person. If you have any questions about this form, please contact Auburn Larose at auburn.larose@healthunit.ca or 705-474-1400 ext 5501.

1. Name of the person completing this form:

2. Organization/agency of the service provider completing this form:

Other (if you chose 'other' above, specify here):

3. What is the age of the person who had a negative reaction or overdose? If you don't know the age of the person please enter an approximate age.

4. Is this a known age, or an approximate age?

☐ Known age

☐ Approximate age

5. What is the gender of the person?

☐ Male

COVID-19: Increase in Overdoses and Supporting Clients

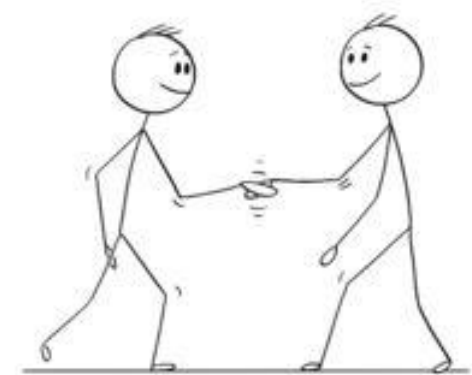
Why are we seeing an increase in overdoses during COVID-19?

- There are many reasons why individuals who use drugs might be at greater risk of withdrawal and/or overdose during the COVID-19 pandemic. These include (but are not limited to):
 - Scarcer drug market
 - Drug market is more toxic
 - Substitution with other drugs
 - Loss of income
 - Closures or changes in services as well as limited intake at services
 - Sourcing of drugs daily
 - Increase in social isolation

Slide adapted from: Canadian Observatory on Homelessness. (2020). Harm reduction policies and interventions during COVID-19 [PowerPoint Slides]. Retrieved from: Slides not yet available.

What are local agencies doing to address overdoses?

- Past work
- Current work
 - Safe Supply and harm reduction advocacy work
 - Expansion of naloxone distribution and training
 - Awareness campaigns
 - Community awareness events
 - Addressing barriers to accessing services
 - After-hours outreach
 - Community collaboration



What can you do to help?

- Knowledge and awareness
- Understanding of community resources
- Advocacy and support
- Compassion and encouragement

COVID-19: Information and resources

- COVID-19 information and resources
 - <https://www.myhealthunit.ca/en/health-topics/coronavirus.asp>
- Substance use information and resources
 - <https://www.myhealthunit.ca/en/health-topics/substance-use-and-covid-19.asp>
- Mental health information and resources
 - <https://www.myhealthunit.ca/en/health-topics/protecting-your-mental-health.asp>

Thank You!

Any questions?

Katharine O'Connell

Community Health Promoter

North Bay Parry Sound District

Health Unit

Katharine.oconnell@healthunit.ca

705-474-1400 ext. 5322

References

- Canadian Centre on Substance Use and Addiction. (2020). COVID-19 and cannabis: How to reduce your risk. Retrieved from: <https://ccsa.ca/sites/default/files/2020-04/CCSA-COVID-19-and-Cannabis-Reduce-Risks-Infographics-2020-en.pdf>
- Canadian Centre on Substance Use and Addiction, Health Canada and Mental Health Commission of Canada. (2020). Managing stress, anxiety and substance use during COVID-19: A resource for health-care providers. Retrieved from: <https://www.ccsa.ca/sites/default/files/2020-04/CCSA-COVID-19-Stress-Anxiety-and-Substance-Use-Health-Care-Providers-Infographic-2020-en.pdf>
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