

Naloxone saves lives – a hands-on toolkit for policy makers and practitioners on how to set up and run naloxone programmes for overdose prevention upon release from prison and other custodial settings

**4th European Harm Reduction Conference
22nd November 2018 – Bucharest/Romania**



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Potential Conflicts of Interests

Traveling costs, honoraries:

Mundipharma, Gilead, Sanofi Aventis,

Thanks:

Dagmar Hedrich, EMCDDA , Lisbon/Portugal
Isabelle Giraudon, EMCDDA, Lisbon/Portugal
Kerstin Dettmer, akzept e.V., Berlin/Germany
Kirsten Horsburgh, SDF, Glasgow/Scotland,
and Michael Linnell

Content

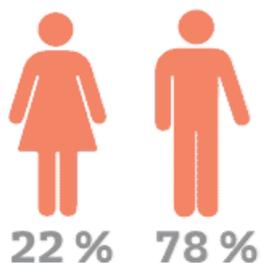
- Opioid use and Overdoses
- Overdose after Release from Prisons
- Guidelines, Comics, E-Learning Course
- Outlook

1. Drug-induced Deaths

Drug-induced deaths in Europe

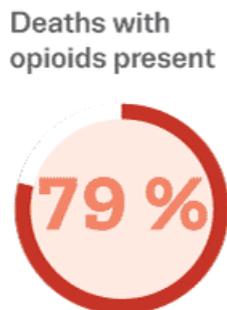
Drug-induced deaths

Characteristics



Mean age at death

38



Age at death

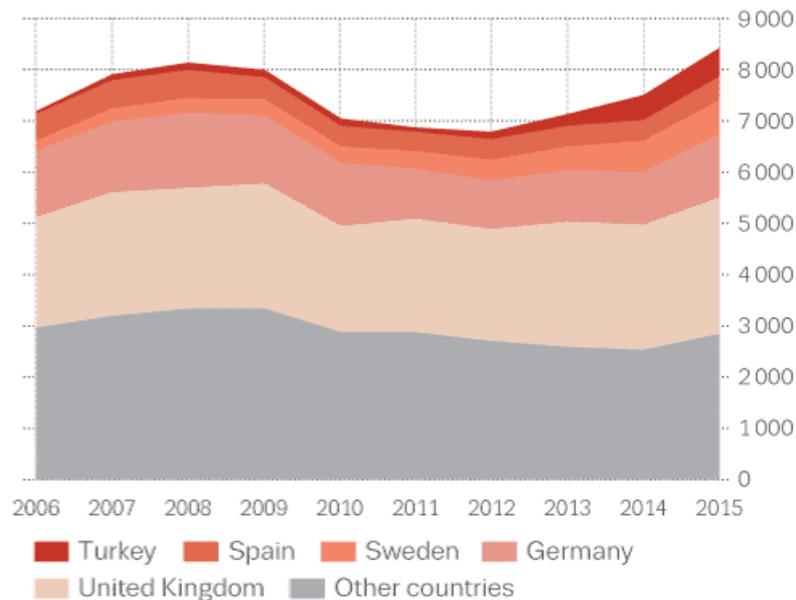


Number of deaths

7 585 EU

8 441 EU + 2

Trends in overdose deaths



Premature and preventable



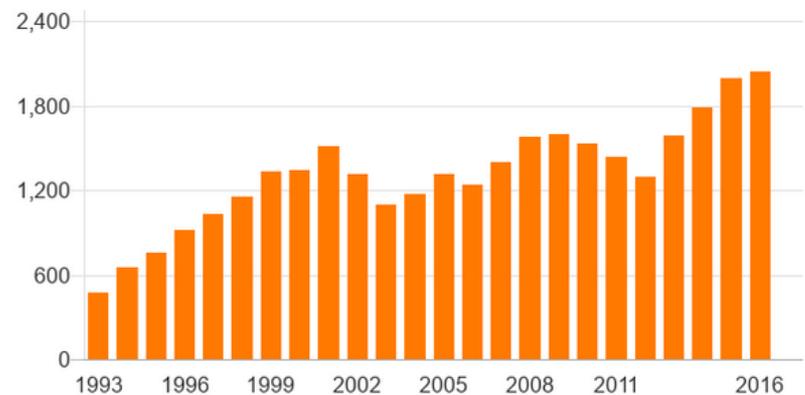
Number of drug-related deaths rising

- Latest data show rise to over 9,000 deaths
- (preliminary data for EU+2, *European Drug Report 2018* in press)
- Diverse populations at increased risk:
 - Large groups of poly-morbid ageing users
 - People released from treatment and prison

Opioids dominant but increasingly diverse:

- Misuse of prescription opioids
- Role of new synthetic opioids?
- Variation in coverage of preventive interventions

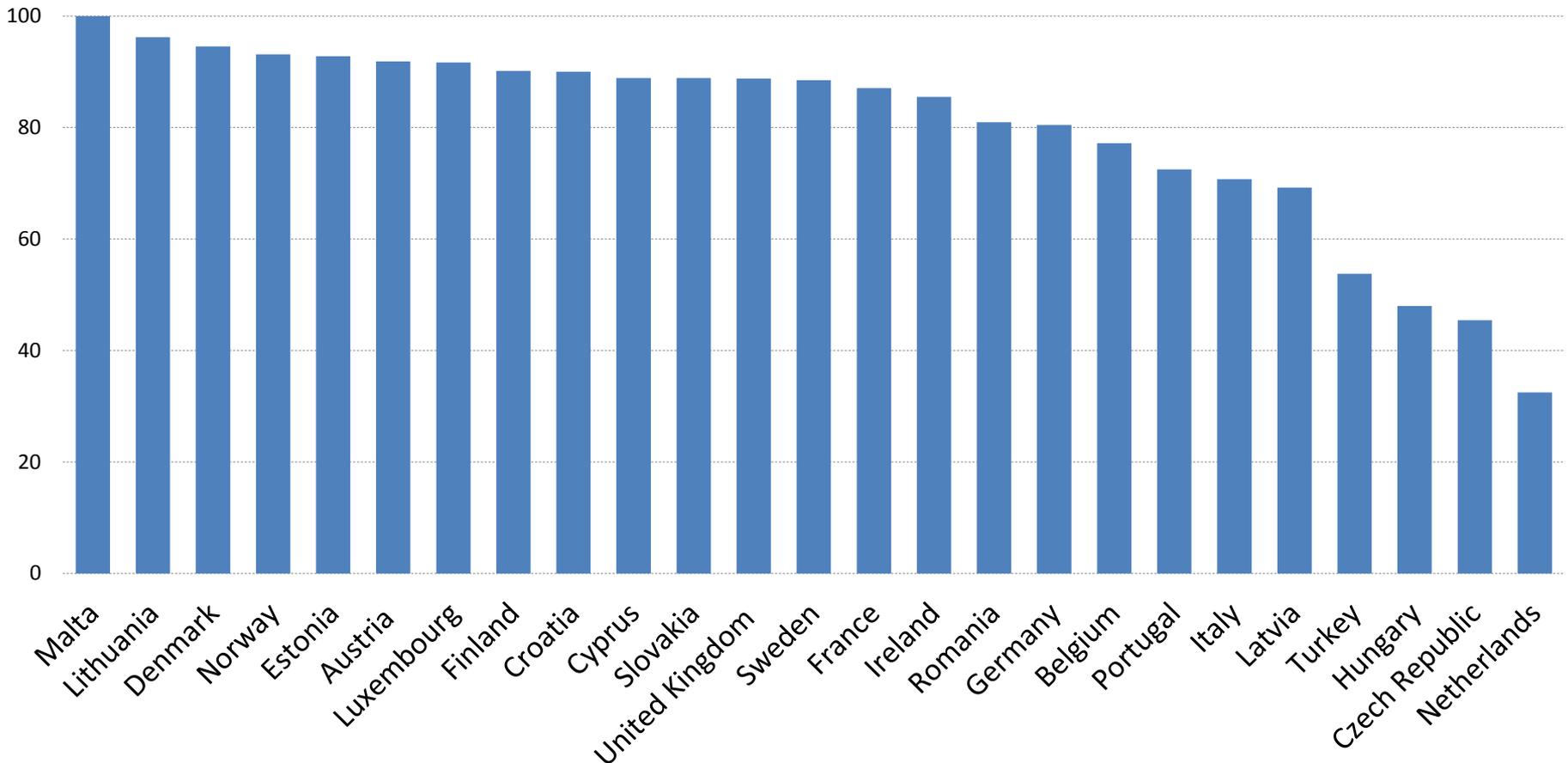
National Trend England & Wales:



Source: Office for National Statistics (Figures for England and Wales)



Percent of drug-induced deaths involving opioids

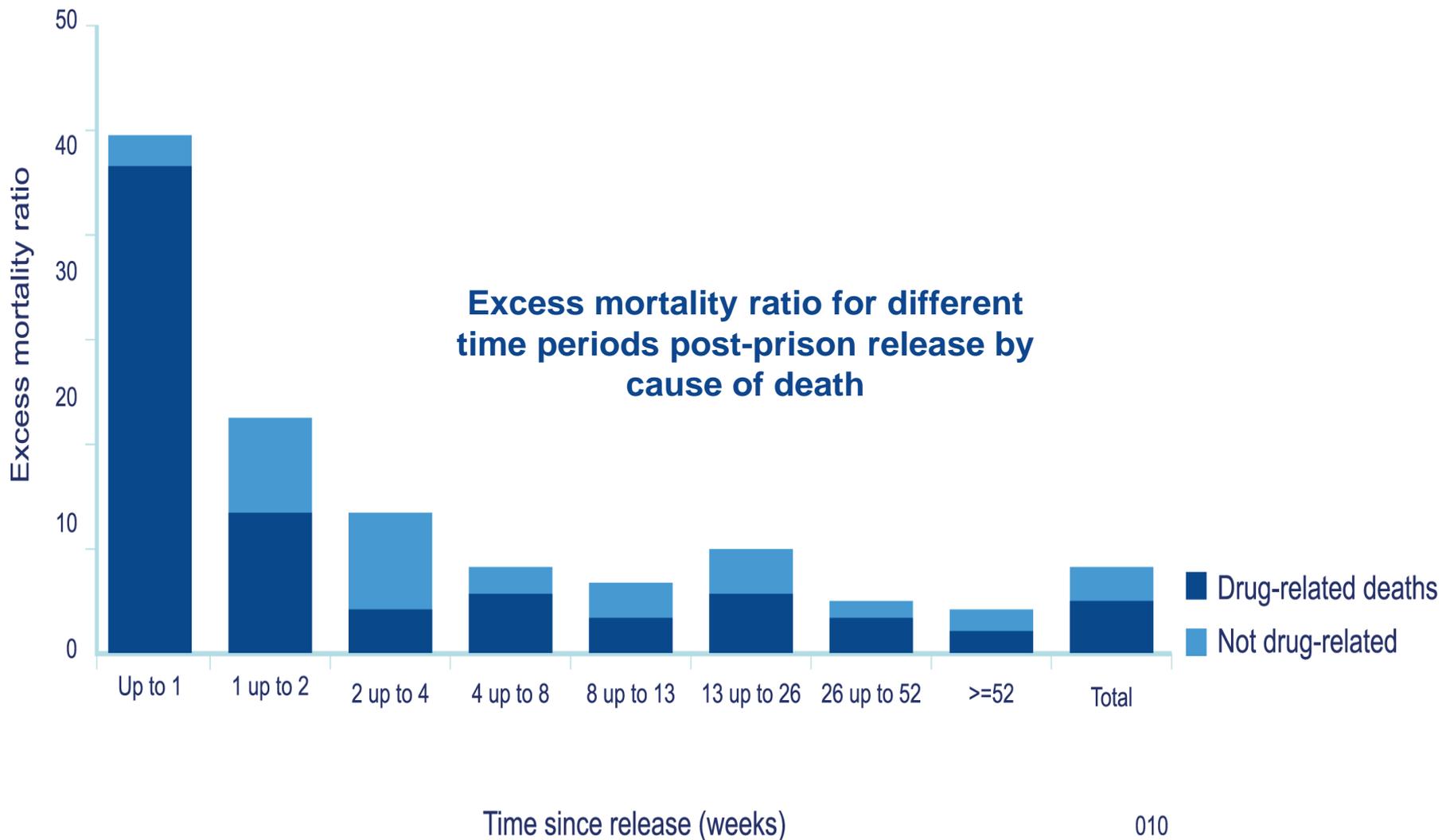


Source: EDR 2017

5 countries with no data. 14/25 data based on General mortality registers

2. Drug-related Death (DRD) after release from prisons Epidemiology and interventions

<https://harmreduction.eu/projects/my1st48h>



Adapted from Singleton N, Pendry E, Taylor C, et al. (2003): Drug-related mortality among newly released prisoners. London: *Home Office Research, Development and Statistics Directorate* (Report No. 187).

High mortality after release from prisons

- England/Wales (first week): X 29 (M) X 69 (F)
- Denmark (first two weeks): X 62 (M/F).
- France (first year): X 24 (M 15-34); X 274 (M 35-54)
- Ireland: Comparison of drug-related deaths (DRD) with and without prison experience:
 - 28% of DRD one week after release
 - 18 % of DRD one month after release

Interventions to reduce opioid-related deaths

Reducing fatal outcome of overdose

Supervised drug consumption

Immediate first-aid in drug emergencies

Take-home naloxone programmes

Improved bystander response

Reducing risk of overdose

Retention in opioid substitution treatment

Reduce drug use and injecting

Overdose risk assessments

In treatment facilities and prisons

Overdose awareness

Knowledge of risk and safer use

Reducing vulnerability

Outreach and low-threshold services

Accessible services

Enabling environment

Removing barriers to service provision

Empowerment of drug users

Enabling drug users to protect themselves

Public health approach

Recognition of wider impact



Naloxone-on-Release

Guidelines for naloxone provision upon release from prison and other custodial settings

Naloxone à la sortie de prison

Recommandations pour la mise à disposition de la naloxone à la sortie de prison et des autres lieux de privation de liberté



This project is co-funded by the European Union under the Justice Programme.

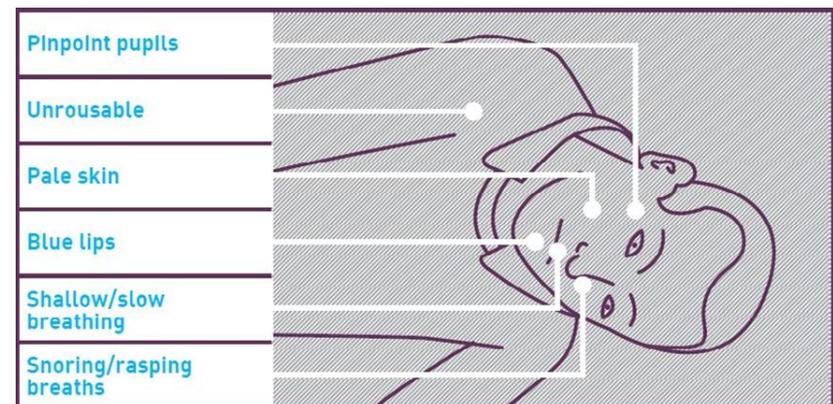


Ce projet est co-financé par l'Union Européenne dans le cadre du programme Just

Available in English and French, soon in German, Czech

High mortality after release from prisons

- ...
- The Scottish Model
- Implementation Guidance
- Naloxone Training
- Top Ten Tips for Naloxone Programmes
- Implementation Checklist
- ...



Naloxone into the hands of those most likely to witness an overdose!

- There are often several hours between the overdose and the death
- The person is likely to have had a previous non-fatal overdose
- A combination of drugs have been taken
- Witnesses are present
- The person is an older (35-44 yrs) drug user with a long history of problematic drug use
- The person is not in treatment, but in a large number of cases has been in treatment within 6 months prior to their death

Procedures and methods

- Training often delivered 6 weeks prior to liberation, in combination with other pre-re-lease programmes
- Release Day: THN-Kit is provided
- Staff Training
- Peer Education =>

Prison Peer Education THN - delivered by prisoners (1/3)

- Promote the training for trainers well in advance
- Provide a named member of staff as the regular contact for all peers
- Provide regular support sessions and progress meetings with peers
- Have all staff involved at the beginning of setting up a programme, i.e. prison staff, health staff etc.
- Incentivise the training for prisoners
- Allow all prisoners to apply for a place on the programme

Prison Peer Education THN - delivered by prisoners (2/3)

- Promote brief interventions to deliver training (10-15 minutes)
- Have an internal communication strategy i.e. Prison magazine, radio, TV Channel.
- Recruit long term prisoners, who will be around for a while
- Engage prisoners who may already have a reputation or influence in the pris- on estate (they are your motivators to other prisoners for the programme to be successful)

Prison Peer Education THN - delivered by prisoners (3/3)

- Proper recognition for individuals who are involved in delivering training, should be celebrated and encouraged
- Create naloxone posts for prisoners as their prison job
- Ensure peer educators have a clear structure to provide details of prisoners
- trained to the staff who will place the naloxone in their belongings

Top Ten Tips for Naloxone Programmes

(1/6)

1. Make 'training' brief

A quick ten minute conversation is enough to provide someone with the basic skills to save a life. Never underestimate the potential outcome of a brief intervention!

2. Don't tell someone to come back at a later date, just get it done!

Opportunistic conversations while you have the person there in front of you can be the difference between life and death. You don't know if you'll ever see this person again, make sure they're equipped!

Top Ten Tips for Naloxone Programmes (2/6)

3. Make sure the training and supply happens in the same place

Your programme will be much more successful if you can physically hand over the naloxone after the training. Adding in additional steps may mean many people do not end up with a supply.

4. Involve peers!

Peers have instant credibility among the target group and hugely enhance the rate of distribution, particularly when they are also enabled to make the supplies.

Top Ten Tips for Naloxone Programmes

(3/6)

5. If someone refuses naloxone from you, you're doing something wrong. Change your message.

The key part of any programme is about relationships. If you can show someone that you genuinely care about whether they (or their friends) live or die, then no-one will refuse the offer of naloxone from you.

6. Be creative, don't expect people to come to you

Outreach! Go to where the people are, or the services they frequent, and don't rely on an appointment-based programme.

Top Ten Tips for Naloxone Programmes (4/6)

7. Prioritise the supply to people who use drugs

People who use drugs are most likely to witness an overdose. This should always be where the most effort is placed

Top Ten Tips for Naloxone Programmes (5/6)

8. Make sure everyone on opioid agonist treatment has a supply

Everyone you see on OAT should automatically be receiving a supply. You are providing a powerful opiate, you should also provide the antidote. (Yes, treatment is a protective factor but this is about ensuring coverage and makes sense for it to be normalised in this way).

9. Prioritise, normalise and standardise in all drug services

The biggest risk of death for your client group is accidental and preventable overdose

Top Ten Tips for Naloxone Programmes (6/6)

10. Always encourage and support people to talk about their experience of using THN

If someone has used naloxone to save a life - congratulate them! This may also have been a traumatic experience and they may need some support. It's also an opportunity for a training refresher and of course a re-supply of naloxone.

Implementation Checklist

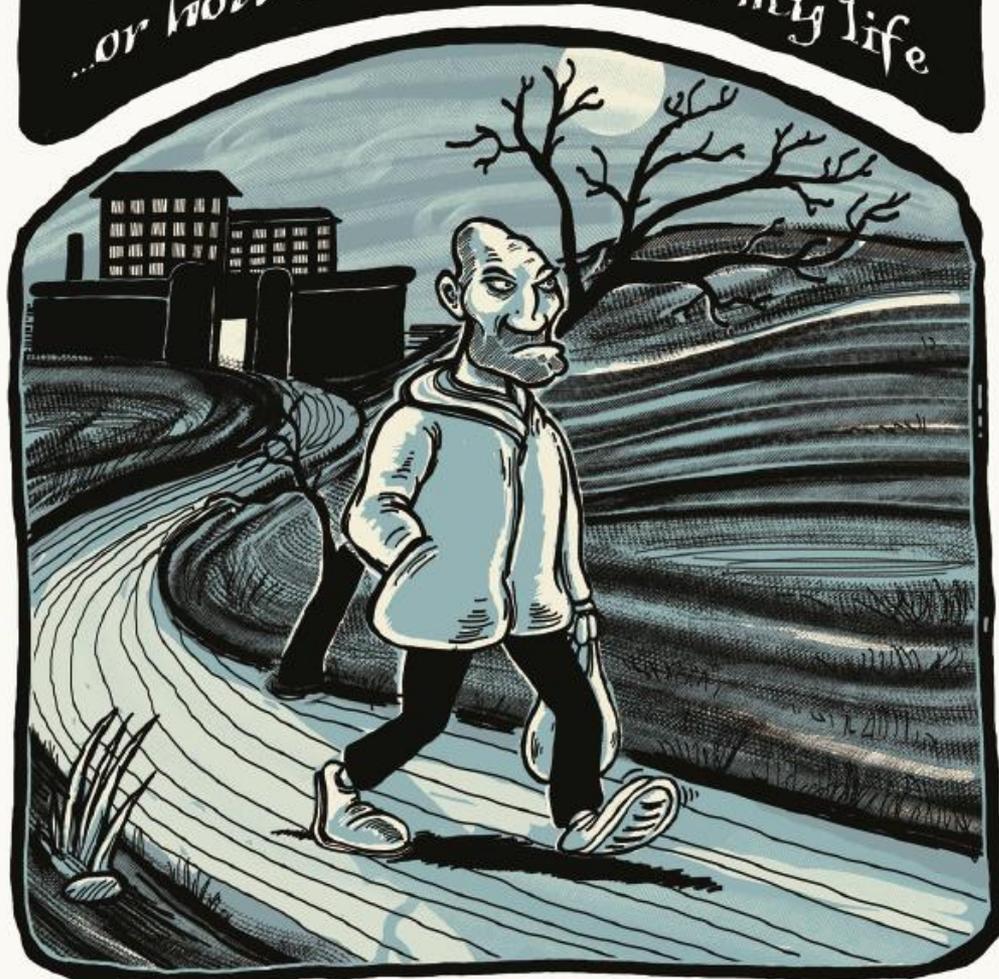
Policy makers

- Legal situation investigated
- Able to proceed legally
- Project lead identified
- Key partners identified
- Key partners contacted
- Working group established
- Funding stream confirmed
- Suitable product identified
- Data collection model developed
- Supply mechanisms confirmed
- Master trainer identified
- Training plan devised
- Peer education model developed
- Materials produced
- Communication strategy in place
- Training for trainers delivered
- Plan to monitor programme in place

Practitioners

- Naloxone lead identified
- Peer involvement lead identified
- Standard operating procedures in place
- Paperwork for monitoring in place
- Materials available
- Staff training plan in place
- Staff trained as trainers
- Prisoners identified for peer education
- Prisoners trained as peer educators
- Training rolled out to people likely to witness an overdose

My First
48 HOURS OUT
...or how Naloxone saved my life



Naloxone provision upon release from prison and other custodial settings

In the first 48 hours
after leaving prison,
you are at the
highest risk of an...



OVERDOSE



Naloxone is an antidote to an
OPIOID OVERDOSE



2 Hours Later...

Maybe just ONCE...



After a break from using, your tolerance to HEROIN drops. The same dose that used to sort you out could now lead to an overdose.

Using alcohol or depressant drugs like diazepam at the same time increases risk.



To reduce risk. Use a small, test dose Try smoking instead of injecting.

If you do use, make sure you use clean works to avoid Hepatitis & HIV

Signs of an overdose

- * Breathing problems
- * Making gurgling sound
- * Pale skin with blue lips
- * No response to noise or touch
- * Pin point pupils



If you use alone there is nobody to help you

Don't waste time doing things that don't work!

Don't inflict pain



Don't give them any other drugs e.g. Stimulants



Don't put them in bath or shower.



Don't walk them around



Don't fuck off & leave them on their own



STAY WITH THEM!

E-Learning Course on THN

(soon available, see: <https://harmreduction.eu/>)



Contact

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www.isff.info

www.naloxoninfo.de

References

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- EU Drugs Strategy 2013-2020. Available online: <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex%3A52012XG1229%2801%29>
- EU Action Plan on Drugs. Available online: <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A52017XG0705%2801%29>



Websites und

- [Harm Reduction Coalition](#)

In the Overdose Prevention section of their website they have a great selection of documents covering: News and Updates, Overview of Overdose, Tools and Best Practice Information, and Policy and Advocacy documents.

- [COPE Australia](#)

Community Overdose Prevention and Education (COPE) is a community-based opioid overdose prevention initiative funded by the Victorian Government. COPE provides training and support to primary health and community organisation staff. These trained staff will provide education to individuals who may be opioid users or potential overdose witnesses, such as a family member or friend.

- [Understanding the risks of mixing medications & street drugs](#)

- [AMA Webinars](#)

The American Medical Association has resources available about Prescription Opioid Overdose and Public Health Responses.

- [Ontario Harm Reduction Distribution Program: Naloxone Program](#)

This website contains information relative to the Ontario Provincial Naloxone Program: naloxone order forms, staff training resources, and client educational resources. It also has a comprehensive Community-Based Naloxone Distribution Guidance Document.

- [Overdose Prevention Alliance](#)

This website offers different manuals and tools for the implementation of a community-based overdose prevention program. It offers links to existing programs and legal resources. It can help you locate the program nearest you.

- [Breathe \(the overdose game\)](#)

This website presents the "Breathe" game which is an instructional and entertaining way to learn, understand and try to respond to an overdose before it happens.

- [EHRN: Training on Overdose Prevention & Response](#)

The Eurasian Harm Reduction Network (EHRN) is a regional network with a mission to promote humane, evidence-based harm reduction approaches to drug use, with the aim of improving health and protecting human rights at the individual, community, and societal level.

- [Naloxone.Org.UK](#)

Here is a comprehensive website about naloxone. It includes updates about the National Naloxone Program in Scotland and N-ALIVE, a large prison-based research trial providing overdose and naloxone education to individuals being released. Links at the bottom of the page include a naloxone finder, external resources, and law/policy information.

- [Project Lazarus](#)

Community-based Overdose Prevention from North Carolina and the Community Care Chronic Pain Initiative.

- [SPHERE](#)

Useful downloadable resources including posters to engage with different audiences about overdose. Includes tools for drug and alcohol treatment providers to incorporate overdose into relapse prevention and discharge planning, conversation starters and an Opioid Overdose Prevention Card Game.

...Videos

- **Videos:**
- The Chicago Recovery Alliance:
 - <http://www.anypositivechange.org/menu.html>
- Training Videos:
 - <http://www.naloxoneinfo.org/run-program/training-videos>
- **Ohio Attorney General:**
 - <https://www.youtube.com/watch?v=m9wgPiuCtGI>
 - Using Injectable Naloxone to Reverse Opiate Overdose / [MultcoHealthPresents](#)
 - <https://www.youtube.com/watch?v=wsN0ijLnK2k>
- Michel Geier, PharmD
 - <https://www.youtube.com/watch?v=mA1-YkKqCzY>
- Naloxone nasal spray demonstration
 - <https://www.youtube.com/watch?v=Jis6NIZMV2c>
 - [BmoreHealthy](#)
 - <https://www.youtube.com/watch?v=YyDdMdLvdBc>
- Naloxone Instructional Video / [Healthy Communities of the Capital Area](#)
 - <https://www.youtube.com/watch?v=NLo25AQNyeM>