

Take Home Naloxone: Frequently Asked Questions

What is naloxone?

Naloxone, or Narcan®, is an antidote to opioid overdose. Taking too much of opioid drugs (such as morphine, heroin, methadone, oxycodone, and fentanyl) can make breathing slow down or stop. Naloxone reverses this, restoring normal breathing and consciousness. Giving naloxone can prevent death or brain damage from lack of oxygen during an opioid overdose. It does **not** work for non-opioid overdoses (such as those caused by cocaine, ecstasy, GHB or alcohol). However, if an overdose involves multiple substances, including opioids, naloxone helps by temporarily removing the opioid from the equation.

How does naloxone work?

Both naloxone and opioids bind to the same sites in the brain, and these sites affect breathing. However, naloxone binds more tightly than the opioids, knocking the opioids off the receptors and restoring breathing (see picture). Naloxone acts fast (usually within 5 minutes), and the protective effect lasts for 30 to 90 minutes. The body will have broken down some of the opioids over time, but naloxone does not destroy the opioids. Therefore if large doses, strong opioids (e.g., fentanyl), or long-acting opioids (e.g., methadone) are involved, or the individual has liver damage, another dose of naloxone may be needed. For this reason, each Take Home Naloxone Kit contains two doses of naloxone. **It is always important to call 911 when someone overdoses.**

Can naloxone be harmful or be misused?

Naloxone has been used in Canada for over 40 years and is on the World Health Organization List of Essential Medicines. Naloxone blocks the effects of opioids in the brain. It cannot get a person high and does not encourage opioid use. While naloxone is a very safe drug, it may cause individuals dependent on opioids to go into withdrawal. However, the small doses found in the Take Home Naloxone Kits minimize this risk.

Are there risks associated with using naloxone?

Some individuals may experience a hypersensitivity to Naloxone. Naloxone may cause opioid withdrawal in those with opioid dependence. Withdrawal symptoms include pain, high blood pressure, sweating, anxiety and irritability. In addition, it can be unsettling to come out of an overdose unaware of what has happened. Finally, individuals with health conditions (related to heart, liver, respiratory system, etc.) and/or those who have taken other substances could require additional medical attention. For these reasons, **calling 911 is an important part of the overdose response.**

What does overdose education and naloxone training involve?

Participants are taught how to reduce overdose risk, recognize different types of overdose (i.e., stimulant, depressant), and respond appropriately. Appropriate response to an opioid overdose includes calling 911, performing rescue breathing, placing someone in the recovery position (especially if you have to leave them, or if breathing has been restored), and administering naloxone. These skills are not a substitute for professional medical care, but can help keep someone alive until an ambulance arrives.

Do you need to be a medical professional to recognize opioid overdose and administer naloxone?

Research and experience show, with basic training the general public can recognize an overdose and administer naloxone just as well as a medical professional. Furthermore, overdose prevention programs are empowering. They give peers, friends, and families of people who use drugs the chance to save a life, and send a clear message to those who use drugs that their lives matter. However, the availability of Take Home Naloxone does not replace the need for emergency care or minimize the importance of calling 911.

If people who use drugs are given naloxone, will they continue “using”, and use more drugs?

Research has shown that having naloxone available does not increase risk-taking behaviour, or cause people to use more opioids. The goal of distributing naloxone and offering training in recognizing and responding to overdose is to **prevent death and reduce brain injury or brain damage**. It also encourages individuals to seek treatment as an important component in addressing opioid misuse.

Why is it important to stay with an individual after giving them naloxone?

Some longer acting opioids (such as methadone) may last longer in the body than naloxone, so an overdose could return. To make it less likely that an overdose will return, it is important to make sure that the individual knows not to take more drugs for several hours. In addition, you may need to tell them what happened, as they may be confused. Finally, it is important to tell paramedics and/or other medical professionals everything you know about the situation so that they can provide the best treatment.

Where can I find more information?

Visit www.saskatchewan.ca/addictions for up-to-date information and resources.

If you or your client requires more information, please contact your local Regional Health Authority Addictions/Mental Health Services office or doctor. To locate addictions/mental health services near you:

- visit www.saskatchewan.ca/addictions
- check the green pages of your phone book for your local health region’s services;
- visit HealthLine Online at healthlineonline.ca; or
- contact HealthLine at 811 and ask to speak to an addictions or mental health counsellor.



NOTE: This material is for information only and should not replace information from a doctor, addictions or mental health counsellor, or other health care provider.

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