



Opioid Overdoses & Naloxone for Lay Rescuers

Since 2016, thousands of Canadians have died as a result of opioid-related overdoses, with the majority being accidental (96% in 2020). In 2017 the Government of Canada declared opioid-related deaths as a public health crisis and has taken a harm reduction approach to help combat the problem which includes :

- Approval of additional safe-injection sites,
- Passing the Good Samaritan Drug Overdose Act,
- Improving access to naloxone,
- Encouraging medication-assisted treatment, and
- Public education initiatives.

Opioids are psychoactive substances that affect the mental processes of the user and induce euphoria (the feeling of being 'high'), creating the potential for improper use. Opioids produce a morphine-like effect and are frequently prescribed for pain relief. Common examples of opioids include morphine, hydrocodone, oxycodone, codeine, and fentanyl which are marketed under names such as Vicodin®, OxyContin® and Percocet®.

Opioids such as fentanyl and carfentanyl are particularly dangerous as they have a very rapid onset and can be fatal in very small amounts.

Overdose is a risk to everyone using opioids: those taking prescribed opioids for pain management (accidental overdose), youth (experimentation) and people who use illegally produced opioids.

Naloxone* has successfully reversed thousands of opioid overdoses across Canada and is safe for use on all ages as it only affects individuals with opioids in their system.

Signs and Symptoms of an Opioid Overdose

A responsive victim can exhibit a variety of signs and symptoms (e.g. difficulty walking, talking, staying awake, dizziness and confusion) that can be common to a variety of other medical conditions, especially if the history is not known. Rescuers need to be concerned when an opioid overdose results in respiratory or cardiac arrest and should look for the following signs:

- Extreme drowsiness or unconsciousness
- Slow, irregular or absent breathing
- Pale, cold and clammy skin with blue lips or nails
- Constricted or very small pupils (may not be present if victim has taken multiple drugs)

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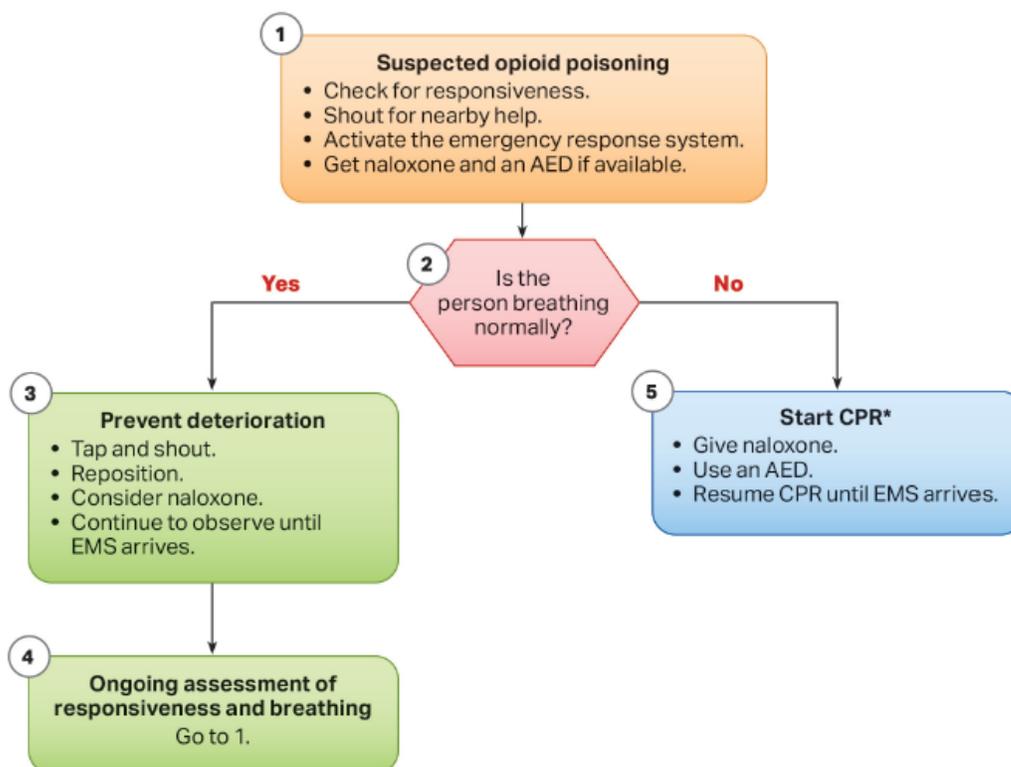
Lay Rescuer Treatment of an Opioid Overdose

In line with the 2020 AHA guidelines:

1. If possible, determine the history of the incident (as reported by bystanders or evidence of drug use as the scene) and assess the scene for hazards.
2. EMS activated at earliest possible moment.
3. Assess breathing
 - If breathing is present and effective, a trained responder can immediately administer naloxone.
 - If breathing is absent or abnormal, immediately start CPR. A trained responder can administer naloxone while the first rescuer performs CPR.

The *Good Samaritan Drug Overdose Act* applies to anyone seeking emergency services during an overdose, including witnesses, bystanders, rescuers and the person experiencing an overdose. It is designed to encourage Canadians to save a life during an overdose situation and protects the person who seeks help, whether they stay or leave from the scene before help arrives.

Opioid-Associated Emergency for Lay Responders Algorithm



*For adult and adolescent victims, responders should perform compressions and rescue breaths for opioid-associated emergencies if they are trained and perform Hands-Only CPR if not trained to perform rescue breaths. For infants and children, CPR should include compressions with rescue breaths.

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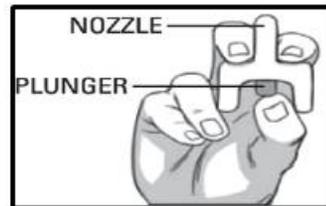
Administration of Naloxone Nasal Spray

1. Follow the manufacturer's instructions on the packaging.
2. Do not remove or test the nasal spray until ready to use, each spray has 1 dose and does not need to be primed.

3. Lay the person on their back.
Remove the nasal spray from the box, peel back the tab with the circle to open the nasal spray.



4. Hold the nasal spray with your thumb on the bottom of the red plunger and your first and middle fingers on either side of the nozzle.



5. Tilt the person's head back and provide support under the neck with your hand. Gently insert the tip of the nozzle into one clear nostril until your fingers on either side of the nozzle are against the bottom of the person's nose.



6. Press the red plunger firmly to give the dose of nasal spray.
7. Remove the nasal spray from the nostril after giving the dose and put the used nasal spray back into the box.
8. Place person into the recovery position and monitor breathing.
If the person is not breathing or breathing effectively, start or resume CPR.

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