

Naloxone Kits

Information Sheet for Nunavut Health Care Professionals

Naloxone Kits are available in Nunavut for anyone who requests them. The suggested recipients include:

- 1) People currently using opioids who are at risk of overdose. This may include, but is not limited to:
 - People with a history of opioid intoxication or overdose, or who may have a history of substance abuse or nonmedical opioid use;
 - People taking methadone or buprenorphine for opioid use disorder;
 - People taking 50 mg or more of morphine or its equivalent per day, or a long-acting opioid;
 - People taking an opioid and who also smoke; have a respiratory illness (e.g., COPD, sleep apnea, asthma); have renal, hepatic, or heart disease; have HIV; use alcohol, or take a benzodiazepine, sedative, or antidepressant.
- 2) Past opioid users who are at risk of returning to opioid use and overdose; and
- 3) Any person who is a family member, friend or other person in a position to assist a person at risk of overdose from opioids.

Naloxone Kits contain:

- 1) 2 ampoules of Naloxone 0.4 mg/mL
- 2) 2 x 3 mL VanishPoint 25G 1" syringes
- 3) 2 alcohol swabs
- 4) 2 ampoule breakers
- 5) 2 pairs of nitrile gloves
- 7) A one-way rescue breathing mask
- 7) Instruction sheet on how and when to administer naloxone

Where are the Naloxone Kits available?

- Iqaluit: Public Health and the Qikiqtani General Hospital (QGH) Emergency Department and Clinics.
- Communities: Health Centres.

Who can dispense a Naloxone Kit?

- Iqaluit: Registered Nurses working at QGH or Public Health on the instruction of a physician or NP.
- Communities: Community Health Nurses (CHNs)
 - The treatment code for Naloxone in the Nunavut Formulary was changed from code D to code A.
 - Additionally, it is noted that dispensing a Naloxone Kit does not require assessment of the patient, however, training on proper use is required.

Where are the Naloxone Kits ordered from?

Government of Nunavut Regional Pharmacies (QGH, Rankin Inlet and Cambridge Bay).

What documentation is required when a Naloxone Kit is dispensed?

The one-page “*Naloxone Kit Dispensing Record*” is to be completed by the nurse dispensing the Naloxone Kit and faxed to the QGH Pharmacy.

Note: The name of the person receiving the kit is not to be indicated on this form, nor is it required to be indicated in the patient's chart that a kit was obtained.

What is naloxone?

Naloxone, or Narcan®, is an antidote to opioid overdose. Taking too much of opioid drugs (e.g., 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 (e.g., 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 is naloxone given?

By intramuscular injection. It can be injected through clothing into the muscle of the upper arm, upper leg, or buttock. The dose is 1 mL = 0.4 mg naloxone.

When should naloxone be administered?

Respiratory and/or central nervous system depression in a situation where opioids may be present.

- Naloxone should be given if the patient is excessively sleepy and cannot be roused with a loud voice or sternal rub.
- Other indications include slow, shallow, or no respirations, or pinpoint pupils in a patient who is difficult to rouse.
- Other signs of overdose include blue or purple fingernails or lips.
- The patient may also have a slow heartbeat and/or low blood pressure.

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. 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. So, 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. It is recommended to use two doses of naloxone, and it is always important to seek medical help when someone overdoses.

Can naloxone be harmful or be abused?

Naloxone does nothing in someone that has not taken opioids. Naloxone 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.

Are there risks associated with using naloxone?

The only contraindication to naloxone is hypersensitivity. Naloxone may cause opioid withdrawal in those with opioid dependence. Withdrawal symptoms include pain, high blood pressure, sweating, agitation and irritability. In addition, it can be unsettling to come out of an overdose unaware of what has happened.

What information should be reviewed with the person requesting the Naloxone Kit?

Review the contents of the kit, the information on the pamphlet and the following:

How to Respond to an Opioid Overdose		
1	UNRESPONSIVE?	<ul style="list-style-type: none"> • Stimulate with noise (shout, use their name). • Touch (sternal rub), remember, tell person what you are doing before you touch them.
2	CALL FOR MEDICAL HELP (Health Centre or Hospital)	<ul style="list-style-type: none"> • Put person in the recovery position if you have to leave them alone.
3	CLEAR AIRWAY & VENTILATE	<ul style="list-style-type: none"> • Clear airway (removing anything from their mouth), tilt head, lift chin • Pinch nose and give 2 breaths. • Continue 1 breath every 5 seconds until person is breathing again.
4	GIVE 1 st DOSE	<ul style="list-style-type: none"> • Tap ampoule to send all liquid to the bottom. Push top away from you to snap open the ampoule (may use ampoule breaker). • Pull plunger to draw up liquid. • Inject into large muscle (thigh, upper arm, or buttock). • Inject at 90°, push plunger until you hear a click (needle will retract).
5	EVALUATE & GIVE 2 nd DOSE IF NEEDED	<ul style="list-style-type: none"> • Continue to give breaths until they respond (are breathing again on their own). • <u>After 5 minutes, if still unresponsive, give a 2nd dose of naloxone.</u> • Continue breaths until the person is breathing on their own or until medical help arrives.
6	AFTERCARE	<ul style="list-style-type: none"> • Naloxone wears off in 20-90 minutes. • Person will not remember for at least 2 hours and do NOT allow them to take more opioids (could overdose again). • Stay with person until medical assistance arrives.

How should the Naloxone Kits be stored?

At room temperature and protected from light. As with all medications, the naloxone kit should be safely stored away from children, but in a location that can be easily found in an emergency. Patients should be aware of the expiry date of their naloxone so that it may be replaced before it expires.

Where can I learn more?

- 1) The College of Pharmacists of British Columbia has various resources and videos available at:
<https://www.bcpharmacists.org/naloxone>
- 2) The Ontario Pharmacists Association has various resources as well at the following link:
<https://opatoday.com/naloxone/>