Fentanyl, Addiction & Homelessness

What can we do?

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&

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Mini Med School - March 21, 2017

Intro

- Social determinants of health
- Trauma
- Addiction
- Opiates Heroin, fentanyl and derivatives
- Narcan
- Harm reduction
- Homelessness
- What can we do?

Social Determinants of Health

- Income
- Education
- Early childhood development
- Employment
- Age
- Race
- Gender
- Disability
- Social safety network

Trauma

- Why the pain?
- Physical abuse
- Sexual abuse
- Neglect
- PTSD
- Residential schools

Addiction

- Continuing any action that gives you pleasure despite adverse consequences.
- Drugs and alcohol
- Food
- Shopping
- Pornography
- Internet, Social Media and Gaming

Addiction

- Neurohormonal vs. Psychosocial
- Taking over the body's reward system
- Endorphins
- Dopamine

Opiates & Naloxone



B.C. paramedics concerned about misuse of naloxone

'A lot of the people with addictions are doing different things with those kits'

By Cory Correia, CBC News Posted: Mar 16, 2017 7:00 AM PT Last Updated: Mar 16, 2017 9:01 AM PT

B.C.'s remote work camps trying to 'get ahead' of the opioid crisis

Tree planting, oil and gas among industries pushing for greater naloxone training

By Jon Hernandez, CBC News Posted: Mar 15, 2017 7:47 PM PT | Last Updated: Mar 15, 2017 7:47 PM PT

Volunteers help save pregnant woman from overdose in DTES



Volunteers save pregnant woman from overdose



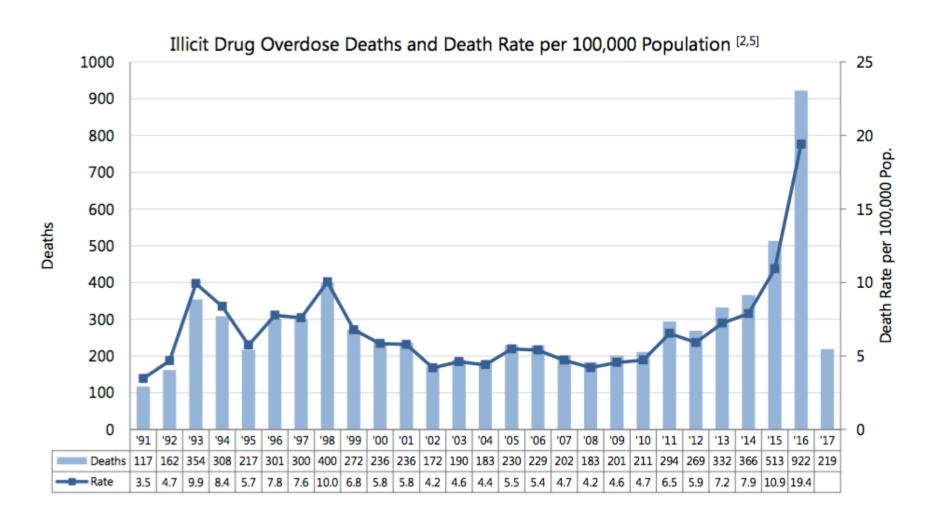
Video has emerged of a pregnant woman overdosing from injection drugs. Her life was saved by volunteers

Opinion: Naloxone not enough to address opioid crisis



Headlines in March 2017

Opioid-Related Deaths



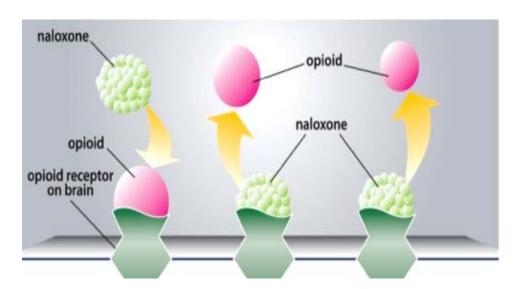
WHO

Community management of opioid overdose

Recommendation People likely to witness an opioid overdose should have access to naloxone and be instructed in its administration to enable them to use it for the emergency management of suspected opioid overdose. Strength of recommendation Very low to naloxone and be instructed in its administration to enable them to use it for the emergency management of suspected opioid



- Opioid blocker
- Approved in the US in 1971 (Narcan[®])
- Works against all opioids
 - Morphine, codeine, oxycodone, hydromorphone, fentanyl, heroin, fentanyl, carfentanil



- Has no effect if opioids are not present
- Will cause immediate withdrawal
 - Irritability, anger, fast heart beat, sweating, tremors, shivering, nausea/vomiting/diarrhea
- Can not be abused
- Does not increase risk-taking behaviour









- Dose: 0.4 mg (1 mL) x 1 dose
- Routes: IV, IM, nasal spray
- Onset:
 - IV: 2 min
 - IM: 3-5 min
 - Nasal spray: 8-13 min
- Duration: 30 min

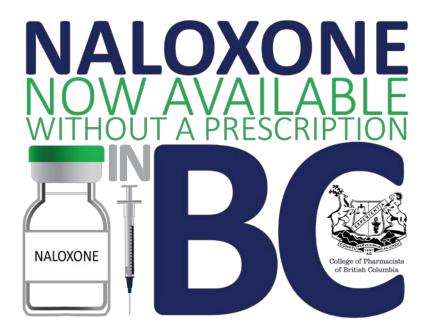
Pharmacy



Take Home Kit



- Non-prescription since March 2016
- Can be sold by any retailer
- Not covered by PharmaCare



Take Home Naloxone Program

- Started in August 2012
- Kits free for at-risk individuals or friends/family
- 10-15 min of education required
- Available at:
 - Primary Care Clinic
 - Riverstone Detox
 - Public Health
 - Needle exchange



BC Take Home Naloxone Program

	Sept - Dec 2012	2013	2014	2015	2016	2017*	Total
Sites Enrolled (Active)	6	27	6 4	1.7	295	83	492
Kits Distributed	107	618	1,199	3,393	22,003	6,835	34,276**
THN Kits administration events***	5	3 6	126	428	4,236	1,596	6,427

^{*}to March 19th, 2017

^{***}based on kit refills for reason: used on self or other for to reverse an overdose







^{**109} dispensation records missing date



- 3 x 1 mL naloxone ampoules
- 3 x 3 mL 25G 1" syringes
- Breathing mask
- Gloves

- Alcohol swabs
- Instructions
- SAVE ME steps



What is naloxone and why do you need it?

Naloxone is an antidote to opioid overdose. Taking too much of opioid drugs (like morphine, oxycodone, methadone, heroin, or fentanyl) can slow down or stop breathing. Naloxone restores normal breathing and consciousness within 1 to 5 minutes of injection. Giving naloxone can prevent death or brain damage from lack of oxygen during an opioid overdose. Naloxone can be injected through clothing into the big muscle of the thigh, arm or buttocks.

Signs of Opioid Overdose







Breathing will be slow or absent



Choking, gurgling





Overdose is a medical emergency - CALL 9-1-1 | Tell attendant: Person is not responsive and not breathing.

HealthLink BC: 8-1-1

BC Drug & Poison Information Centre: 1-800-567-8911

SAVE ME Protocol

Follow the SAVE ME steps below to respond.



If the person must be left unattended at any time, put them in the recovery position.



Unresponsive? CALL 911



1 breath every 5 seconds

Ventilate **E**valuate



Muscular Injection Evaluate

How to Give Breaths



Tilt head back to open the airway



Pinch nose. Cover mouth with mask or clothing



Give 1 breath every 5 seconds

Breathing can slow down during an overdose but the heart is probably still beating - Give breaths to keep them alive

How to Use Naloxone



Tap ampoule to send all liquid to the

> from you to snap open the ampoule.









College of Pharmacists





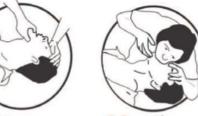








Unresponsive? CALL 911



Ventilate 1 breath every 5 seconds



Evaluate



Muscular Injection
1 mL of naloxone

Continue to provide breaths until the person is breathing on their own



2nd dose? If no response after

If no response after 3-5 minutes give another injection



WORKING

Member Login: PEEP | DOAP | HRSS

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Search site

NALOXONE | FENTANYL | SUPPLIES | E-ZINE | FIND A HARM REDUCTION SITE



Naloxone

PREVENTING OVERDOSES SAVING LIVES

Naloxone is a medication that reverses the effects of an overdose from opioids (e.g. heroin, methadone, morphine). BC has developed a Take Home Naloxone (THN) Program to help save lives. This site will help you learn more about THN programs and how the BC THN program can be part of your community.

UNDERSTANDING THN

General Information about the Take Home Naloxone Program

- Background Information
- Naloxone: Frequently Asked Questions
- Overdose Prevention Training and Kits



NALOXONE RESOURCES

BC THN IN THE NEWS

Naloxone, fentanyl antidote, available in take-home kit that's saved hundreds of lives

www.towardtheheart.com

Harm Reduction

- Practical strategies to reduce negative consequences
- Abandons the moral argument
- Benefits user and society

Harm Reduction

- Needle exchange
- Crack pipes
- Condoms
- Supervised consumption sites
- Opiate substitution methadone, suboxone, hydromorphone, heroin

Homelessness

- Increase in 2016
- Housing prices
- Government cuts social housing, mental health, addictions
- Crime
- Significant costs RCMP, EHS, Healthcare, cleanup

Homelessness

- Housing
- Mental illness
- Trauma
- Addiction
- Drugs as coping mechanisms

What can we do?

- Government
- Fraser Health
- Organizations
- Individuals

Government

- Federal
- Provincial
- Municipal Chilliwack Homelessness Action Plan, Cooperation and Facilitation

Fraser Health

- Mental Health funding
- Addictions treatment
- Supervised Consumption Site
- Opiate substitution
- ER overcrowding

Organization

- Salvation Army
- Ruth and Naomi's
- Cyrus Centre
- Chilliwack Community Services
- Religious and Charitable Organizations

Individuals

- Make your voice heard
- Volunteer
- Be kind
- Speak up

Questions?

 Thanks to the Chilliwack Division of Family Practice, City of Chilliwack, Cultural Centre and those in attendance.