

# How to Educate Your Patients About Overdose Prevention

## Introduction

Drug overdose deaths, the vast majority of which involve opioids, continue to rise in the US. Health care providers should be able to identify patients at particularly high risk for overdose, know how to mitigate risk using harm reduction strategies, and educate patients to recognize and quickly treat overdose. (See “Opioid Overdose Overview Fact Sheet for Patients.”)

## Risk Factors for Overdose

Certain patient characteristics are associated with a particularly elevated risk of overdose; monitor these patients as closely as possible. Some risk factors are “static” and do not change, including:

- Prior history of overdose
- History of high dose or quantity of use
- Chronic medical illnesses that impact lung, liver, or kidney function

Other risk factors, called “dynamic,” are changeable. Discuss these dynamic factors with your patients, determine which ones pose the most risk, and counsel them on harm reduction strategies that can lower the risk of fatal overdose:

Dynamic Overdose Risk Factor	Harm Reduction Strategy
Loss of opioid tolerance	<ul style="list-style-type: none"><li>• Use less after a period of abstinence, even a few days</li><li>• Start with a tester dose</li><li>• Use intranasally over intravenously</li></ul>
Mixing drugs	<ul style="list-style-type: none"><li>• Use one drug at a time</li><li>• If mixing, use opioid first</li></ul>
High potency	<ul style="list-style-type: none"><li>• Keep a consistent dealer</li><li>• Talk to others who have used from same batch</li><li>• If a new drug source, start with a small tester dose</li><li>• Test each new batch of drugs for fentanyl using fentanyl test strips</li></ul>
Using alone	<ul style="list-style-type: none"><li>• Don't use alone</li><li>• Tell people if you are going to use alone</li><li>• Call the Never Use Alone hotline: (877) 696-1996</li></ul>

## How to Recognize an Opioid Overdose

Patients do not give naloxone to themselves when they are overdosing! It is essential that your patients know how to recognize an overdose and know how to respond. That way, they can teach their friends and family what to look out for and what to do in case they overdose. Signs of overdose include:

- Slow or absent breathing
- Not responsive to sternal rub
- Blue or grayish coloration of lips, fingernails, or skin
- Signs of obstructed airway (wheezing, snoring, gurgling)
- Pinpoint pupils
- Thready or weak pulse
- Cold or clammy skin

## Overdose Response

Teach your patients the following steps to follow in case an overdose is suspected. They can pass this information along to friends and family, and also tell them where they keep their naloxone.

1. *Assess for signs of overdose:* Attempt to arouse patient with sternal rub. If that is not effective, move on to the next step.
2. *Call 911:* Say “Someone is unresponsive and not breathing.” Give clear address and location.
3. *Administer naloxone or nalmefene:* If the patient does not respond to a single dose in the first two or three minutes, administer another dose into the other nostril. Doses can be repeated every two to three minutes until arrival of EMS.
4. *Support ABCs:* Assess for presence of pulse and respirations.
  - If no pulse or respirations, deliver CPR.
  - If pulse is present but no respirations, deliver rescue breathing.
  - Whenever the patient is left on their own, place in the rescue position in order to avoid aspiration. The patient should be on their side, hand under head, supported with elbow and knee.
5. *Monitor response:* Provide supportive care until EMS arrives. If the patient awakens, ensure that they do not use more opioids. Never leave the patient alone.