Background:
Naloxone is a medication that reverses the effects of opioids and plays an important role in mediating the potential harms associated with opioid overdose (including death) for people who use drugs (PWUD). People who use opioids have a 50-70% lifetime risk of having an overdose and are more likely to be a bystander at an overdose (1).

What is Opioid Overdose?
Opioids can be both derived from the opium poppy (morphine, heroin) or synthetic analogues like fentanyl, they all have similar effects in the body. Opioids can reduce the respiratory drive and a person experiencing an opioid overdose is characterized by slowed or stopped breathing, pinpoint pupils and a loss of consciousness. The lack of oxygen in the brain can lead to cardiac arrest, brain injury and without intervention, death (2).

How Does Naloxone Work?
Naloxone works to temporarily block the opiate receptors in the body and to reverse the dangerous effects of overdose on the respiratory system and the brain. Naloxone can be administered by multiple routes in the body. Naloxone available in the community is either via injectable (into a muscle or skin) or intranasal (given via the nose) (1).

Is Naloxone Safe?
Naloxone is extremely safe; it does not interact with substances in the body other than opioids. It carries no risk from use and zero potential for abuse, although high doses may lead to the development of opioid withdrawal symptoms such as vomiting, muscle cramps and agitation (1).

Who Should Have Naloxone?
Both the World Health Organization (WHO) and the EU Action Plan on Drugs strongly recommends that all people who are likely to witness a drug overdose have access to naloxone. This includes all PWUD and their friends and family members in addition to all people who work with the public such as emergency workers, police, harm reduction and community outreach workers. Populations more vulnerable to fatal overdose (PWUD being released from prison or hospitals) should also receive naloxone (1,3).

What is Take-Home Naloxone (THN)?
Programmes that combine training on overdose risk and management with the distribution of naloxone are called “take-home” naloxone programs (THN). These programs are evidence-based, cost-effective and have been shown to reduce overdose mortality (3).
How is (THN) used in Europe?

Take-home naloxone (THN) is available in 14 countries in Europe.

While some countries in Europe have implemented THN programs, there are still existing barriers such as legal restrictions on whom can inject it (restricted to medical or harm reduction providers), prescription requirements, lack of reimbursement by health insurance, or requirements to have completed mandatory training (also can be limited to medical providers) (4).

References


What scale is required to achieve effects?

According to a modelling study (5), the distribution of naloxone to 30 % of heroin users may lead to a reduction in overdose deaths of about 6.6 %.

Another studies published in The Lancet (6) suggests that the number of kits distributed should be about 20 times the number of opioid-related deaths in a country.

Key Strategies to Increase Naloxone in the Community

- **Change legislation to allow for naloxone to be handled by non-medical staff**
  
  Low-barrier community distribution of naloxone (such as peer-to-peer) is an evidence-based strategy to reducing overdose and crucial to preventing unnecessary deaths.

- **Community training on overdose reversal for all who are likely to witness an overdose**
  
  Empower PWUD and their family and friends to stop overdose by promoting low-barrier naloxone training via harm reduction centers and community outreach.

- **Repeal requirements for naloxone to be prescription-only**
  
  Naloxone should be available in pharmacies, at harm reduction centers or via online distribution without a prescription to bring more of this life-saving medication to the community. Those with a prescription should have this medication reimbursed by insurance.

- **Expand Take-Home Naloxone (THN) programs on a national scale**
  
  National health leaders should take note of regional THN pilot programs, to increase availability of low-barrier naloxone on a national scale for success in reducing fatal overdoses in their country.