

Maine EMS Substance Use Disorder Response: Opioid Response in Maine



1

Maine Opioid Crisis

- o Since 2010, almost 4,600 Mainers have died from a opioid-related overdose
- o Data at EMS shows opioid overdoses in 2023 may exceed 2022; on average 1 person a day dies from an opioid-related overdose in Maine
- o Complexity in opioid drug supply



2

Substance Use Disorder Response Programming

- o Naloxone Leave Behind Program Initiative began December 2021
- o Standard of Care Protocol Update December 2023
- o Naloxone Leave Behind Efficacy:
 - Rate of Mortality when Naloxone is left behind: Less than 1%
 - Rate of Mortality when Naloxone is NOT left behind: 4.7%
- o Why Dispense Naloxone? What's in the future of Maine EMS SUD Programming?

3

Substance Use Disorder Response Programming

Naloxone Leave Behind Kits

-Naloxone can be acquired from your Tier 1 Distributer at:

<https://getmainenalozone.org/ems/>

Connecting with local OPTIONS Liaisons

-<https://knowyouroptions.me/>



4

Maine EMS SUD Response Program Team

Please reach out to the SUD Team at Maine EMS with any questions at :

EMS.SUD@maine.gov

5

SAVING MANNY
THE
NARCAN WAY



Overdose recognition, and response with Narcan administration



6

COVERED IN THIS TRAINING

- WHAT IS HARM REDUCTION AND WHAT DOES IT HAVE TO DO WITH NARCAN?
- BRIEF INTRODUCTION TO OPIOIDS
- OVERDOSE RISK FACTORS
- RECOGNITION OF AN OVERDOSE
- SAFE AND EFFECTIVE RESPONSE TO AN OVERDOSE
- EMERGENCY NARCAN KITS
- NARCAN IN MAINE: GOOD SAMARITAN
- STORAGE / EXPIRATION DATES


7

HARM REDUCTION (WHAT IS IT?)

HARM REDUCTION IS A SET OF PRACTICAL STRATEGIES AND IDEAS AIMED AT REDUCING NEGATIVE CONSEQUENCES.

HARM REDUCTION IS ALSO A MOVEMENT FOR SOCIAL JUSTICE BUILT ON A BELIEF IN, AND RESPECT FOR, THE RIGHTS OF PEOPLE WHO USE DRUGS.

~NATIONAL HARM REDUCTION COALITION

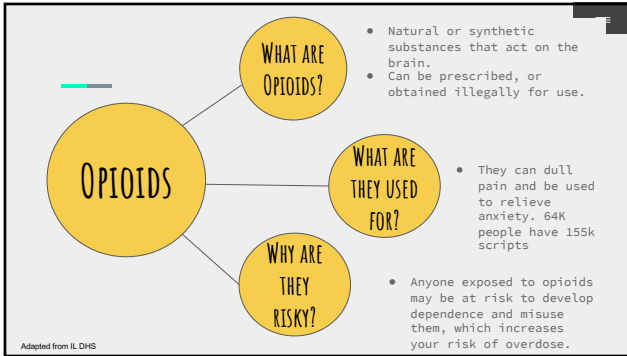


8

HARM REDUCTION IN COMMON ACTIVITIES

<u>Activity</u>	<u>Harm Reduction Strategy</u>
Cooking in your kitchen	Having a fire extinguisher
Riding a bicycle	Wearing a helmet
Having sex	Using a condom
Using tobacco	Nicotine replacement (patches, gum)
Drinking alcohol	Having a designated driver
Use drugs	Don't use alone and have Narcan on hand

9



10

Common Opioids	GENERIC NAME	COMMON NAME
	Morphine	MSContin, Kadian, Embeda, Avinza
	Codeine	Tylenol with Codeine, TyCo, Tylenol #3
	Hydrocodone	Vicodin, Lorcet, Lortab, Norco, Zohydro
	Oxycodone	Percocet, OxyContin, Percodan
	Heroin	-----
	Hydromorphone	Dilaudid
	Oxymorphone	Opana
	Neperidine	Demerol
	Buprenorphine	Suboxone, Subutex, Zubsolv, Butrans
	Fentanyl	Duragesic
	Methadone	Dolophine, Methadose
	Tramadol	Ultram, Conzia

11

WHAT IS AN OVERDOSE?

- ❖ A toxic amount of a drug in a person's system
 - > Too much was taken
 - > Substances were mixed, causing an adverse reaction.
- ❖ Can happen unintentionally
- ❖ Can cause a person's breathing to slow down and possibly stop altogether. This can lead to brain damage and death.

12

RISK FACTORS OF OPIOID OVERDOSE

- Taking high doses of opioids daily
- Mixing opioids with substances
- Taking an opiate for the first time
- Taking more than prescribed
- Previous overdose
- Taking illegal opioids
- Using alone
- Reduced tolerance
- Pre Existing conditions
 - Over the age of 65
 - Sleep apnea, asthma, emphysema
 - Kidney disease

13

Really High	vs	Overdosing
Muscles become relaxed		Pale clammy skin
Speech is slow or slurred		Breathing is infrequent or has stopped
Sleepy looking		Deep snoring or gurgling (death rattle)
Responsive to shouting, ear lobe pinch, or sternal rub		Not responsive to any stimuli
Normal skin tone		Blue lips and/or fingertips

SIGNS AND SYMPTOMS OF A PERSON OVERDOSING.
DIFFERENT THAN THOSE WHO ARE HIGH.

14

NARCAN
Or Naloxone

NARCAN nasal NALOXONE nasal SPRAY 4mg/0.5mL

15

NARCAN: WHAT IS IT?

- Non-addictive
- Used since the 70's by paramedics
- Only effective with opioids
- Takes between 2-3 mins to work
- Wears off in 30-90 min's which is likely sooner than the opioid will wear off.
- Can be used on people across the lifespan.

Opioids on the brain: attaches to the receptors and activates it.

Naloxone on the brain: attaches to the receptors without activating it.

16

RESPONDING TO AN OVERDOSE: SAVE A LIFE!

When in doubt - call.
Don't wait to call 911 or your local emergency number for medical help. Seconds count.

CALL 9-1-1

17

STEP-BY-STEP GUIDE FOR RESPONDING TO AN OVERDOSE

1. Check for signs of responsiveness, check for pulse or breathing, perform a sternum rub
2. If no response, call 911 (check the time if you think of it)
3. Position the person flat on their back
4. Tilt their head back
5. Hold Narcan between your pointer and middle finger with your thumb on the plunger
6. Insert into nostril until your fingers touch the tip of their nose
7. Push the plunger as far as it goes to administer the full dose
8. Place the person in recovery position,
9. Administer Narcan every 2-3 min's (put back in their back, administer next dose, then in the recovery position until the person wakes up, help arrives or your run out of Narcan)
10. If the person is not breathing / has no pulse, and you are trained and comfortable, perform CPR (chest compressions).

18

WHAT NOT TO DO

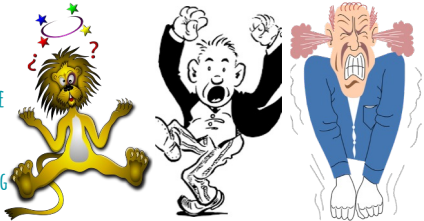
Put them in a cold bath or shower
Put anything else in their body besides
Naloxone/Narcan



19

PLAN FOR:

- CONFUSION
- AGITATION / IRRITABLE
- COMBATIVE / AGGRESSIVE
- NAUSEOUS / VOMITING



20

WHAT YOU CAN DO:

- CALMLY EXPLAIN YOU ADMINISTERED NARCAN AS THEY OVERDOSED AND HELP IS ON THE WAY.
- ENCOURAGE THEM TO WAIT UNTIL EMS ARRIVES FOR FURTHER MEDICAL ATTENTION.
- PENDING WHAT THEY HAD FOR SUBSTANCES, THEY COULD GO BACK INTO AN OVERDOSE SITUATION. REMEMBER, NARCAN WEARS OFF FASTER THAN OPIOIDS.
- LET EMS PROVIDERS KNOW YOU ADMINISTERED NARCAN AND HOW MANY DOSES YOU PROVIDED.




21

STIGMA REDUCTION

WATCH YOUR THOUGHTS
THEY BECOME YOUR WORDS
WHICH BECOME YOUR ACTIONS

SUBSTANCE USE DISORDER IS NOT A MORAL FAILING, OR A MATTER OF RIGHT VS WRONG. IT'S NOT A JUDGEMENT WE NEED TO BE MAKING AGAINST ANYONE. WE MUST AVOID SHAME, GUILT, AND STIGMA.



22

NARCAN LAWS IN MAINE


LD-329, Sec 1-17 A MRSA 1111-13:
Exemption from criminal liability for reporting a drug-related medical emergency

Signed, May 23, 2019, Updated and in effect on August 8, 2022

Title 14: COURT PROCEDURE -- CIVIL
Part 1: GENERAL PROVISIONS
Chapter 7: DEFENSES GENERALLY

§164. Immunity from civil liability

This was initially signed into law in 1969, with the last update in 1977.



23

STORAGE & EXPIRATION


Store at room temperature (between 12-77 degrees)

Protect from light

OK to freeze, make sure it has thawed prior to use

Expired is ok. It may not be as effective but any amount is better than none.

Keep on hand at all times



24



25