

Overdose prevention and naloxone rescue among family members of people who use opioids

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Family members are often the ones who administer naloxone during an opioid overdose and should be considered as part of the larger response to help curb fatal overdoses. These findings, published online in *Drug and Alcohol Review*, demonstrate the important role that educating family members about overdoses and how to obtain and administer naloxone could play an important role in helping decrease the number of fatal opioid overdoses.

The retrospective study, led by researchers at Boston Medical Center (BMC), used data from the Massachusetts Department Public Health (MDPH) Overdose Education and Naloxone Distribution (OEND) program, a state-sponsored program that helps community-based organizations provide overdose education and naloxone rescue kits to community members. The researchers analyzed data from 2008 to 2015 in order to identify characteristics of [family members](#) who received naloxone and where they received it, as well as when they encountered a rescue attempt. They used surveys that were completed at time of OEND enrollment and when a naloxone kit was refilled.

During the period studied, 27 percent (n=10,883/40,801) of OEND enrollees were family members of active opioid users, which is a higher percentage than seen in other national studies. Family members were responsible for 20 percent of all rescue attempts, and of the 860 attempts by family members, 173 were rescue attempts of other family members while the remaining 673 rescue attempts were of friends, strangers, partners and clients.

"This data indicates that regardless of the scenario, those who are trained will use naloxone when necessary, making [family](#) members of [opioid](#)

[users](#) a key player in responding to overdoses," said Sarah Bagley, MD, director of the Catalyst Clinic at BMC and the study's corresponding author. "We need to expand outreach to educate them about overdose prevention, teach them how to administer naloxone, and make sure they have access to it."

In addition, they found that those who used substances often received OEND at HIV prevention programs, such as syringe access programs, while those without a personal history of use often received training and naloxone at community meetings.

"This study confirms that the Commonwealth's efforts to increase outreach, education, and training on [overdose](#) prevention and naloxone use can pay real dividends," said Public Health Commissioner Monica Bharel, MD, MPH. "The more people who carry [naloxone](#) and know how to use it the more lives that can be saved."

More information: Sarah M. Bagley et al. Expanding access to naloxone for family members: The Massachusetts experience, *Drug and Alcohol Review* (2017). [DOI: 10.1111/dar.12551](https://doi.org/10.1111/dar.12551)

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