“The heart of the challenge is the possibility that things could be different: overdose is a public health problem that can be solved. Unlike many of the other leading causes of death, death from opioid overdose is almost entirely preventable, and preventable at a low cost. Opioids kill by depressing respiration, a slow mode of death that leaves plenty of time for effective medical intervention. Overdose is rapidly reversed by the administration of a safe and inexpensive drug called naloxone. Naloxone strips clean the brain’s opioid receptors and reverses the respiratory depression causing almost immediate withdrawal. A growing number of harm reduction organizations in the United States are offering overdose prevention programs that provide injection drug users with resuscitation training and take-home doses of naloxone.”

If anyone you know is at risk or knows someone at risk of overdose, please share our information.

EMAIL US AT VOLUNTEER@NCHRC.ORG FOR VOLUNTEER OPPORTUNITIES

CONTACT US
4024 Barrett Dr.
Suite 101
Raleigh NC 27609

2154 Wrightsville Ave.
Wilmington NC 28403

www.nchrc.org

1 Source: Burris, Scott; Beletsky, Leo; Castagna, Carolyn; Coyle, Casey; Crowe, Colin; and McLaughlin, Jennie Mauro, “Stopping an Invisible Epidemic: Legal Issues in the Provision of Naloxone to Prevent Opioid Overdose,” Drexel Law Review (Philadelphia, PA: Earle Mack School of Law, Spring 2009), Vol. 1, Number
RECOGNIZING AN OVERDOSE
- Unresponsive
- Lips turning blue or for darker complexions, greyish
- Deep gurgling noise “death-rattle”
- Vomiting
- Pulse is slow, erratic, or not there at all
- Breathing is slow, shallow, or not there at all
- Doesn’t respond to sternum rub

RISK FACTORS
- Low tolerance following recent incarceration or span of abstinence
- Quality - strength and/or unknown additions to the product
- Mixing with other substances - benzos, stimulants, or alcohol
- Compromised health due to infection or lack of sleep
- Mode of administration (snort/smoke/inject)

PREVENTION
- Test your supply
- Never use alone
- Only use one substance at a time and if mixing, use less of both
- Use a different method (instead of injecting, snort)
- Have naloxone (you can even prepare it just in case)
- Find a supplier you trust

911 GOOD SAMARITAN LAW
Under North Carolina law, you can call 911 for help during a drug overdose, and both the victim and the caller are protected from prosecution for the following:
- Possession of less than one gram of cocaine or heroin
- Underage drinking
- Possession of safer injection paraphernalia
- Violation of parole and probation

RESPONDING TO AN OVERDOSE

1. STERNUM RUB
Check to see if they’re responsive to pain by rubbing your knuckles up and down their sternum. You don’t have to press too hard, *test on yourself in your free time if questioning amount of pressure!

2. GIVENALOXONE
Take the top off the vial and stick the needle through the rubber stopper, drawing all fluid into the syringe. Inject into muscle; upper arm, thigh, or buttock.

3. CALL 911
The Good Samaritan law protects the caller and the victim! Nervous? You can say that your friend is not breathing, turning blue, and is unresponsive.

4. RESCUE BREATHING
Tilt their head back slightly, pinch their nose closed, and give one breath every 5 seconds.

KNOW THE LAWS!
NEVER USE ALONE
HAVE NALOXONE ON HAND

RECOVERY POSITION
If you have to leave the overdose victim to locate your phone or naloxone kit, roll them on their side with their mouth facing down to avoid choking on vomit.

OD MYTHS
THE FOLLOWING DOESN’T REVERSE AN OVERDOSE
- Putting them in a cold shower
- Inducing vomit
- Injecting them with a stimulant, saline, salt water, etc
- Slapping or kicking them
- Sleeping it off
- Ice cubes down the pants

MAKE SURE AFTERNALOXONE IS USED THAT THE PERSON IS NOT LEFT ALONE AND SEEKS MEDICAL CARE IF POSSIBLE, SINCE RE-OVERDOSE IS POSSIBLE AFTER NALOXONE WEARS OFF IN 30-90 MINUTES.