

What you can do to avoid overdose:

- ✓ Start with a tiny amount, 'taste the hit' first
- ✓ Avoid injecting drugs, and always use clean equipment if you do
- ✓ Stick to a regular supplier & ask them about purity
- ✓ Always use with other people who can call 999 or 112 in an emergency
- ✓ Have a Prenoxad / Naloxone pen ready
- ✓ Don't mix with other 'downers' (alcohol, G, methadone, benzos)
- ✓ Attend first aid training – available free via your local drug service (see overleaf)
- ✓ Ask for your Prenoxad / Naloxone today, from your local drug service. It's free and services will train you and your loved ones on how to use it
- ✓ Access treatment for support with cutting down or staying safe



Leaflet produced by the Pavilions Health Promotion Team

Useful Telephone Numbers & Websites

Brighton & Hove:

Pavilions Adult drug and alcohol service offers non-judgmental support & advice to anyone using any substance. They offer 1-2-1 support and group work.

Ring: 01273 731900

Visit: www.pavilions.org.uk



RU-OK? Young people's drug and alcohol service for under 18s whose lives are affected by substance misuse.

Ring: 01273 293 966

Visit: www.socialsubcultural.com/ruok/



St John Ambulance Offers First

Aid for Overdose courses

Ring: 01273 371522 or 371540

Visit: www.sja.org.uk



Saving Lives

Your essential guide to spotting, managing and preventing an opiate overdose

Overdose Prevention



Signs of an Overdose:

- Lethargy and slurred speech
- Drowsiness and disorientation
- Face is pale and clammy
- Blue lips and fingernails
- Pin point pupils (not in everyone)
- Person is not responding to noise or touch
- Breathing is slow and shallow
- Choking sounds, or a snore-like gurgling noise

If someone overdoses (ODs):

1. Stay calm and **call an ambulance**
2. Make sure the person is safely lying down on a flat surface
3. Check their airway is clear of blockages and tilt their head back. Listen for breath for up to 10 seconds

IF THEY ARE NOT BREATHING:

1. Call 999 or 112.
2. Start CPR (Cardio Pulmonary Resuscitation): Kneel beside them, tilt their head back, and push down on the middle of their chest, by about 5 cm (2 inches), hard and fast, 30 times, using both hands and keeping your elbows locked. Then give 2 rescue breaths mouth to mouth while pinching their nose closed, ensuring their head is tilted back.
3. Inject 0.4 ml of Prenoxad as a first dose (to first black line of the syringe) into a large muscle (thigh, buttock, or upper arm).
4. If they are still not breathing, give 3 more cycles of 30 chest compressions then 2 rescue breaths and inject another 0.4 ml of Prenoxad.
5. Carry on CPR till emergency services arrive.

IF THEY ARE BREATHING:

1. Put them in the Recovery Position



2. Administer 0.4 ml of Prenoxad as a first dose (to first black line of the syringe) into a large muscle (thigh, buttock, or upper arm). Wait 1 min and repeat if necessary.
3. Then dial 999 or 112 and ask for an ambulance. Give as much details as possible about what happened and where you are.
4. Check every couple of minutes that they are continuing to breathe.
5. Encourage the person to go to A&E: Prenoxad does not stay long in the body; the risk of 'going over' or overdosing again is very high, so make sure the person affected gets medical attention.
6. Tell them to avoid 'top up' use of opiates, alcohol or benzos because the previous drugs are still in the system.

The police will only attend the emergency if:

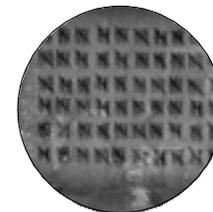
- The address is already known by emergency services
- They are worried about children or vulnerable adults at the address
- Someone has died at the address

Who is most at risk?

Anyone who mixes their drugs – mixing can be fatal, especially if using opiates such as heroin and methadone and combining with other 'downers' such as alcohol, benzos or G



Anyone who has had a break – a break from drugs means that tolerance is lowered. If a person has recently been in prison, hospital, rehab, or in recovery then they are more likely to OD.



Anyone who uses street heroin – heroin varies in strength. Opiates depress the central nervous system (slow down breathing and affects brain function).



Anyone with physical health problems – especially breathing problems such as asthma, shortness of breath or heart issues.



People feeling low or depressed – having received bad news, had an argument with a friend or partner or just feeling unhappy.



Long term users – as they often get complacent and forget simple safety measures. Older users might have health conditions that add to the risks.