**Naloxone**

# It takes 5 minutes to empower your patients with a safety plan

**You might save their life**

**For more information, search ‘naloxone’ at my.psa.org.au OR nps.org.au**

## Why should I talk about naloxone?


##### In Australia, prescribed opioids contribute to 75 hospitalisations and 2 deaths per day.

Research shows that **most** patients prescribed opioids for pain would appreciate or expect to receive information about opioid safety and naloxone

If approached sensitively, it can be a great tool for building trust and rapport

**Naloxone is an easy add-on when discussing opioid safety**

1. **Start the conversation**

*“Can I talk to you about a medicine called* naloxone?

*It is available over the counter and we* recommend that anyone taking strong opioids keeps it in the home.”

## Which patients should I talk to about naloxone?

**Anybody who takes strong prescription opioids** will benefit from keeping naloxone in the home **in case of emergency**.

##### All patients prescribed opioids should know that naloxone is available.

Patients are *most* at risk if they:

**Also take other psychoactive medicines** *(e.g. benzodiazepines, gabapentinoids, other psychiatric medicine)*

**Have comorbidites that would increase their risk**

*(e.g. respiratory conditions like COPD,*

*renal or liver impairment)*

## Key counselling points

#### Refer to the patient leaflet for more information

**PREPARE**

* *Make a safety plan and discuss with family, friends, or a carer*

**PREVENT**

* *Know how to reduce your risk*

### RESPOND

* *Keep naloxone in the home*
* *Recognise the signs and symptoms*
* *In an emergency: administer naloxone and call an ambulance*

*Naloxone is available with a script, OTC,* or free from participating pharmacies

### Discuss opioid risks Language is important!

###### The term ‘overdose’ is often misunderstood.

* Say ‘severe reaction’ (avoid ‘overdose’) OR
* Define ‘overdose’ *before* you label it

*“The most severe reactions to opioids are loss of* consciousness and difficulty breathing, which (in a worst case scenario) can cause death.

*This is sometimes called an ‘overdose’, but it can* happen even if you take your normal prescribed dose”

### Offer naloxone as part of a safety plan Normalise naloxone:

###### Liken it to a fire extinguisher, first aid kit, or EpiPen

*“Keeping naloxone is like having a fire* extinguisher: we hope you’ll never need it, but it’simportant to have in your home just in case”

### Reassure that this is just a precaution

###### This advice applies to everyone

*”Sometimes severe reactions happen even* when you’re doing everything right.

*That’s why we encourage everyone to take this* home ‘just in case’.

*Having an opioid safety plan can protect you* and your family”

 

