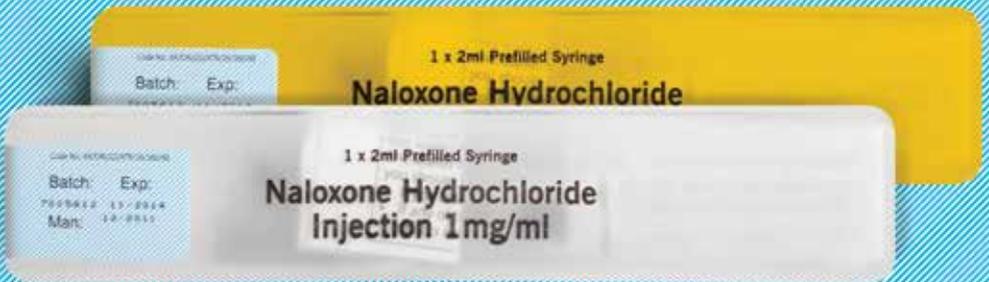


NALOXONE CAN BE A LIFESAVER



Naloxone is a drug which can temporarily reverse the effects of opioid (heroin/methadone) overdose. In an overdose state, **it can be a lifesaver**

**SAVE
SOME
NALOXONE**

WHAT TO DO IF SOMEONE HAS OVERDOSED

SIGNS & SYMPTOMS

Pinpoint pupils

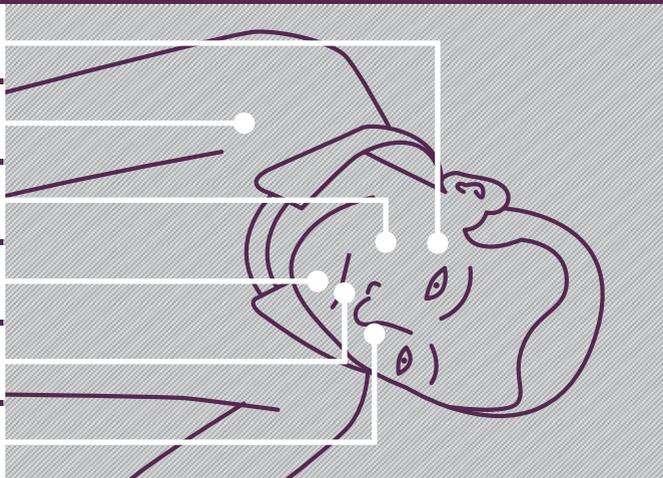
Unrousable

Pale skin

Blue lips

Shallow/slow
breathing

Snoring/rasping
breaths



- 1/ Try to wake the person up/get a response by **shaking** their **shoulders** and **shouting** "open your eyes" or "wake up".
- 2/ If they don't wake/respond, make sure you **open their airway**, by gently tilting their head back and opening their mouth. Look, listen and feel for signs of breathing for 10 seconds.
- 3/ If you see/hear/feel breathing during this 10 seconds put them in the recovery position. If you have **naloxone** available, assemble the kit, then inject 0.4mls by pushing the plunger to the first black line marked on the barrel into the upper, outer thigh (at a 90° angle to the surface of the skin). Inject straight through clothes. Return the kit to its box, set it aside (in case it's needed later). **Phone 999, ask for an ambulance.**
- 4/ If they are not breathing, **phone 999** and ask for an ambulance right away. Explain where the person is, and that they are unconscious and not breathing.
- 5/ Start chest compressions. With the heel of the hand in the **centre** of the chest, give **30 compressions** followed by **2 rescue breaths**. This is called 1 cycle of CPR.
- 6/ If **naloxone** is available – assemble the kit, then inject 0.4mls by pushing the plunger to the first black line marked on the barrel, into the upper, outer thigh muscle. Inject straight through clothing. Return the kit to its box, set it aside (in case it's needed later).
- 7/ Continue with chest compressions /rescue breaths and give 3 more cycles. Inject **naloxone** again. Continue giving 3 cycles of **CPR** and **naloxone**.

RECOVERY POSITION



Say 'hi'



Support my face



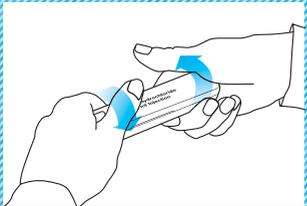
Lift my leg



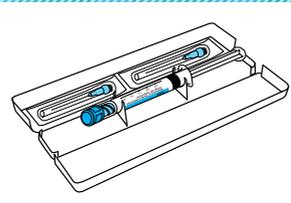
Roll me over

HOW TO SET UP A NALOXONE KIT

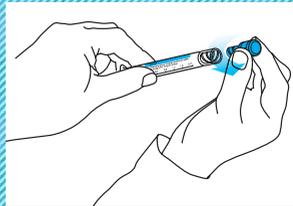
At time of writing, naloxone kits in Scotland will have red tamper evident tape on each end of the pack. This must be removed prior to the following steps.



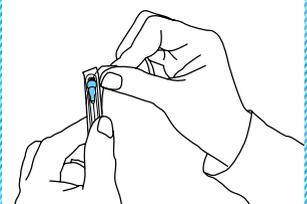
1/ Twist the outer plastic box to break the tamper evident seals and open.



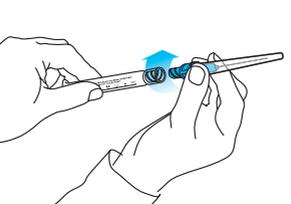
2/ The box contains 1 syringe of naloxone and two needles.



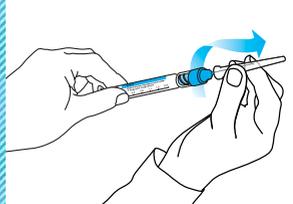
3/ Unscrew the clear plastic top from the syringe.



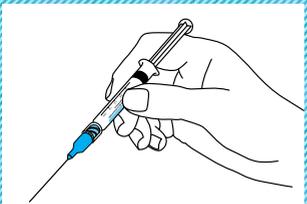
4/ Peel back the backing paper from the needle packet and remove the needle in its protective sheath.



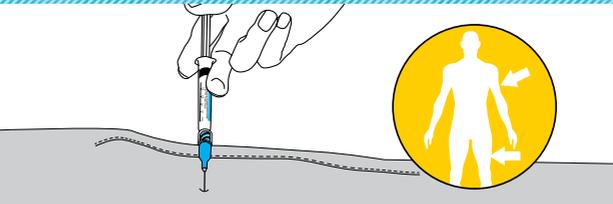
5/ With the needle still in its sheath, screw the blue fitting on to the syringe.



6/ Gently twist the needle sheath and remove it from the syringe.



7/ To inject someone who has overdosed, hold the syringe like a pen.



8/ Insert the needle into the patient's outer thigh or upper arm, through clothing if necessary, and inject first dose (0.4ml) at a 90° angle. Withdraw the needle and syringe after each dose.

THE FACTS

DEPRESSANTS / HEROIN / DIAZEPAM / ALCOHOL / METHADONE

Mixing downers like heroin, benzos (e.g. diazepam) and alcohol can kill you, especially if you take other medications like methadone. Some of these downer drugs can stay in your system for many hours, sometimes days, so it's very easy to think you're not mixing them.

LOWERED TOLERANCE

You're at greater risk of overdosing if your tolerance is lowered. It may be lowered when:

- Just out of prison, rehab or hospital.
- You've been using less.

You may be at risk of dying by overdose if you use combinations of the drugs mentioned above – even small amounts of each drug mixed together can kill you.

HOW TO HELP

THE CASUALTY MIGHT NOT HAVE MUCH TIME

Make sure that you are calm and where you are is not too noisy.

Dial 999 and ask for an ambulance. Tell the call handler the **location** (where the casualty is and any landmarks that might make it easier for the crew to find them). Tell the call handler the status of the casualty, for example if they are:

- **UNCONSCIOUS:** They don't stir when you shout/shake them
- **UNCONSCIOUS AND NOT BREATHING:** They are 'lifeless' - won't wake up and you can't see, hear or feel breathing for at least 10 seconds

You may be asked what happened. If you don't know or are not sure, tell the call handler that.

If you know what the person has taken, it may be helpful to tell the call handler. If you prefer not to say, **don't let that stop you from phoning an ambulance.**

OVER 80% OF CASUALTIES ARE ALREADY DEAD BY THE TIME AN AMBULANCE ARRIVES. THAT IS WHY IT IS IMPORTANT TO CALL THE AMBULANCE EARLY.

THE ROLE OF THE POLICE

Most of the time in Scotland, the police will be notified about and **may** attend the scene. **Remember**, in some areas, the police may be the first to arrive at the scene and will provide vital first-aid assistance. If the casualty is still alive **it is their duty** to do all they can to help preserve life.

This is because the police, like the ambulance service, **see saving lives as their priority.**

It is not a priority for the police to seek the prosecution of any individual suffering an overdose or any person helping them.

**MAKE THE CALL
SAVE A LIFE**

**FOR FURTHER
INFORMATION
ABOUT HOW YOU
CAN ACCESS
FREE NALOXONE
TRAINING
AND YOUR
OWN SUPPLY
CONTACT:**

