

Take Home Naloxone to reduce Drug Related Deaths

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HM Government

From harm to hope

A 10-year drugs plan to cut crime and save lives

December 2021



Reduce Drug & Alcohol Related Harms

Reduce crime, health & social harms

Reduce Drug & Alcohol Related Deaths

Build a Treatment & Recovery System

Strengthen collaboration & partnership working

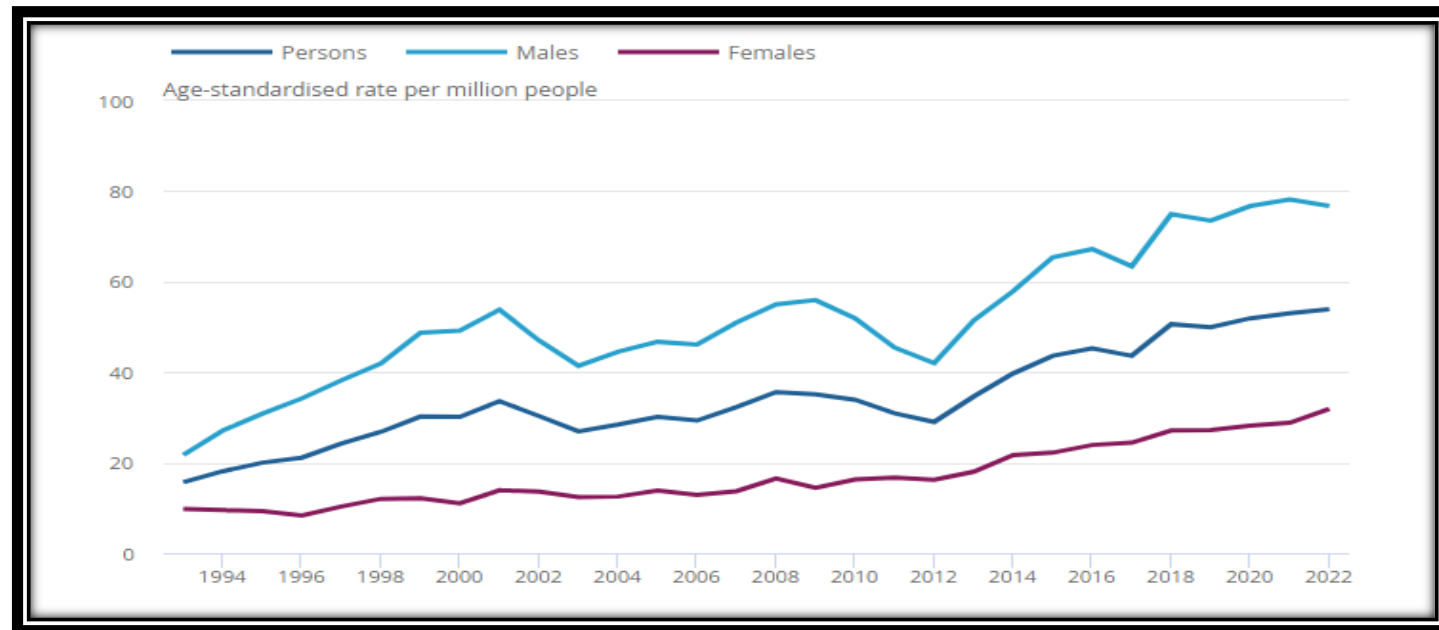
Get more people into specialist treatment

Improve recovery outcomes

UK Drug Related Deaths are at the highest level since recording began, increasing by over 60% in the past 10 years

The majority of DRD relate to accidental overdose of opioids, primarily heroin

[Deaths related to drug poisoning in England and Wales - Office for National Statistics \(ons.gov.uk\)](#)



Age-standardised mortality rates for deaths related to drug misuse, by sex, England and Wales, registered between 1993 and 2022 [Deaths related to drug poisoning in England and Wales - Office for National Statistics \(ons.gov.uk\)](#)

Drug Related Deaths

“Synthetic opioids are being seen more often in local drug markets and there are concerns that they may become much more prevalent”

OHID July 2023

[Guidance for local areas on planning to deal with potent synthetic opioids - GOV.UK \(www.gov.uk\)](#)

“We are highly alert to the threat from synthetic drugs”

Home Secretary James Cleverly -
March 2024

[More synthetic opioids banned to protect communities - GOV.UK \(www.gov.uk\)](#)

“The common wholesale price of cocaine and heroin decreased across the UK & Europe. In the year to December 2022, heroin and cocaine prices dropped by 30%. Consistent with substantial quantities of the drugs being widely available & easily accessible”

[National Strategic Assessment \(NSA\) Campaign 2023 - Drugs - National Crime Agency](#)

Synthetic Opioids+ Emerging Trends

Fentanyl – not considered an issue locally

Xylazines – Local prevalence unknown, found across UK, not just in Heroin

Nitazenes (100-1,000x strength of Morphine)

Confirmed in deaths in Derbyshire,

Confirmed across UK & Ireland

Confirmed in heroin, “pharmaceutical” benzo, opiates, antihistamines, vapes, herbal substances.

Internet Sourced Substances

Novel Benzodiazepines – e.g., bromazolam, alprazolam

Everything is now available!

Synthetic Cannabinoids (SCRA)

Spice & Mamba & Vapes

True prevalence, National & Local, remains unknown



ONS - Deaths related to drug poisoning in England and Wales: 2022 registrations

- **Total 4,907**
- **of which 3,127 were identified as “drug misuse”**
- **and 2,261 involved an opiate**
- **Drug Poisonings – also include suicides and accidental overdoses**
- **Drug Misuse Deaths (within overall drug poisonings) Definitions:**
 - **The underlying cause is drug abuse or drug dependence, or**
 - **Any of the substances controlled under the Misuse of Drugs Act 1971 are involved**
 - **Includes acute drug misuse deaths e.g., DVT and septicaemia**
 - **Does not include e.g., accidents under the influence, anaphylaxis**

[Source: Deaths related to drug poisoning in England and Wales - Office for National Statistics \(ons.gov.uk\)](https://ons.gov.uk)

Data source: [Deaths related to drug poisoning by local authority, England and Wales - Office for National Statistics \(ons.gov.uk\)](https://ons.gov.uk)



Deaths related to drug misuse - number of deaths and age-standardised mortality rate.

Deaths registered between 2020 and 2022:

Area	Deaths	Rate ¹	Reliability	Lower Confidence Limit ²	Upper Confidence Limit ²
England	8,582	5.2		5.1	5.3
East Midlands	672	4.8		4.4	5.2
DERBY CITY	56	7.4		5.6	9.7
DERBYSHIRE:	165	7.3		6.2	8.4
Amber Valley	20	5.7		3.5	8.8
Bolsover	23	10.3		6.5	15.5
Chesterfield	37	12.2		8.6	16.9
Derbyshire Dales	9				
Erewash	21	6.4		4.0	9.8
High Peak	18	7.2	u	4.2	11.4
North East Derbyshire	23	8.0		5.0	12.1
South Derbyshire	14	4.5	u	2.4	7.5



- These latest rates per 100,000 population indicate that both Derby City and Derbyshire admin county have a rate significantly higher than that of England and the East Midlands region.
- At a district/borough level only Chesterfield and Bolsover have a rate significantly higher than England and the East Midlands.

Comparisons: rates per 100K England 5.2, East Midlands 4.8, Derby City 7.4, Derbyshire 7.3, Bolsover 10.3, Chesterfield 12.2

Notes: Rates are not calculated for number of deaths less than 10, and for numbers between 10-19 the rate is considered 'unreliable,' (u)

Drug Misuse Numbers 2013-2022

Deaths related to drug poisoning in England and Wales - Office for National Statistics (ons.gov.uk)

	2022	2021	2020	2019	2018	2017	2016	2015	2014	2013
EAST MIDLANDS	237	237	198	166	178	173	132	134	133	134
Derby	22	15	19	14	13	10	15	10	12	20
Nottinghamshire	29	20	21	17	27	20	22	18	22	24
Nottingham	17	19	9	20	13	8	7	7	11	8
Derbyshire	56	62	47	41	35	38	23	35	26	23
Derbyshire % of East Mids total	23.6	26.2	23.7	24.7	19.7	22.0	17.4	26.1	19.6	17.2



Our Strategy to reduce Drug Related Deaths

1. Drug (& Alcohol) Related Death – Real Time Surveillance & Review
2. Support those most at risk
3. **Increase the provision of Naloxone and Harm Reduction & Overdose Prevention Education.**
4. Increasing access to Substance Use Treatment, all routes, i.e., health, social care, criminal justice, EMAS, ED
5. Local Dug Information System (LDIS) Derby & Derbyshire Drug Alert Group.
6. Near Miss system, Non-Fatal Overdose, EMAS & Hospitals

Support those most at risk

DRD risk characteristics >70% cases

- **Prescription meds:** Opioid Substitution Therapy (but risk increase x 3.37 if off OST), antidepressant, antipsychotic, pain, sleep
- **Poly Sub Use:** > 3 substances: **alcohol, benzodiazepines, prescribed opioids, cannabinoids, cocaine, crack, solvents, synthetic opioids**
- **Length of Substance Use history:** > 10 years
- **Age:** >35
- **Health Issues Physical:** cardiac, respiratory (Asthma, COPD), liver, kidneys
- **Co-occurring Mental Health Condition:** any!
- **60% of DRD used & died alone**

Catriona Matheson 2024 - Professor in Substance Use, University of Stirling
Independent Consultant Drug Related Death, Aberdeen City Alcohol and Drug Partnership



Increasing access to Substance Use Treatment

Derbyshire County

- Call: 01246 206514

More information and referral methods:

- [Derbyshire Recovery Partnership :: Derbyshire Healthcare NHS Foundation Trust \(derbyshirehealthcareft.nhs.uk\)](http://derbyshirehealthcareft.nhs.uk)
- [Self referral :: Derbyshire Healthcare NHS Foundation Trust \(derbyshirerecoverypartnership.co.uk\)](http://derbyshirerecoverypartnership.co.uk)
- [Professional referral :: Derbyshire Healthcare NHS Foundation Trust \(derbyshirerecoverypartnership.co.uk\)](http://derbyshirerecoverypartnership.co.uk)

Derby City

- Call [0300 790 0265](tel:03007900265)
- Drop in at St Andrew's House in Derby
- Website - [Derby Drug and Alcohol Recovery Service :: Derbyshire Healthcare NHS Foundation Trust](http://derbydrugandalcoholrecovery.nhs.uk)

Local Drug Information System



Drug Alert Group
DERBY & DERBYSHIRE

Why?

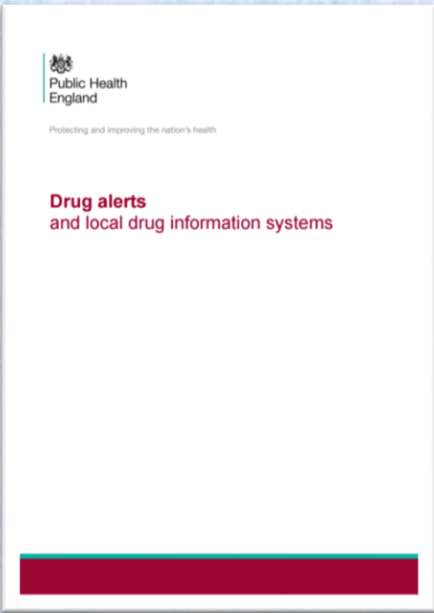
- **Do we ever really know what is in an illicit substance?**
- “fake pills, a “white powder”, “dodgy vape”, “herbal mixture”
- Unregulated products vary by strength, substance, & additives
- Any illicit drug can be risky, but some are riskier than others.
- Consequences can be devastating, people can become ill, hospitalised, and even die.
- **Sharing warnings feels like the right thing to do, but which should we share?**
- **Sharing some warnings can do more harm than good**, can even advertise the substance and make it more likely to be used!
- The Derbyshire **Local Drug Information System** gives you the confidence that the alert you receive has been considered by experts and is safe to share.



Public Health
England

Protecting and improving the nation's health

Drug alerts
and local drug information systems



Local Drug Information System

Derby & Derbyshire Drug Alert Group DDDAG

- Public Health Derby & Derbyshire
- Derbyshire Police
- City & County Substance Use Specialists
- Hospitals & Community Health & Education
- Adult & Young People services represented

The Panel considers all concerns within 48 hours, using a nationally set criteria

Distributed via
Professional
Information
Network

National / Regional / Local

Concerns
Received

Expert Panel
reviews
concerns

Trusted alerts
are issued



Drug Alert Group
DERBY & DERBYSHIRE



Drug Alert Group

DERBY & DERBYSHIRE

- 1. If you have concerns about a potential substance – report it here: Visit the LDIS online form**
- 2. If you would like to join the Professional’s Information Network to receive DDDAG alerts, email David.Henstock@derbyshire.gov.uk or Nicola.Jordan@Derby.gov.uk**
- 3. If you receive an alert that does not originate with DDDAG, do not circulate, but do forward it to drugsupport@derbyshire.police.uk**
- 4. Each D&DDAG alert will have clear instructions about what to do, if you receive an alert review the actions and forward on as directed in the alert**



Drug Alert Group
DERBY & DERBYSHIRE

Naloxone

Naloxone = emergency medicine

Antidote for an overdose (OD) caused by opioids, e.g. heroin, methadone, morphine, fentanyl etc.

Overdoses > severe respiratory depression & hypoxia > if untreated > brain damage or Drug Related Death (DRD)

Naloxone blocks the effects of opioids and reverses the respiratory depression

Widespread use across hospital, emergency and ambulance services since the 1970s. Well understood, many thousands of lives saved

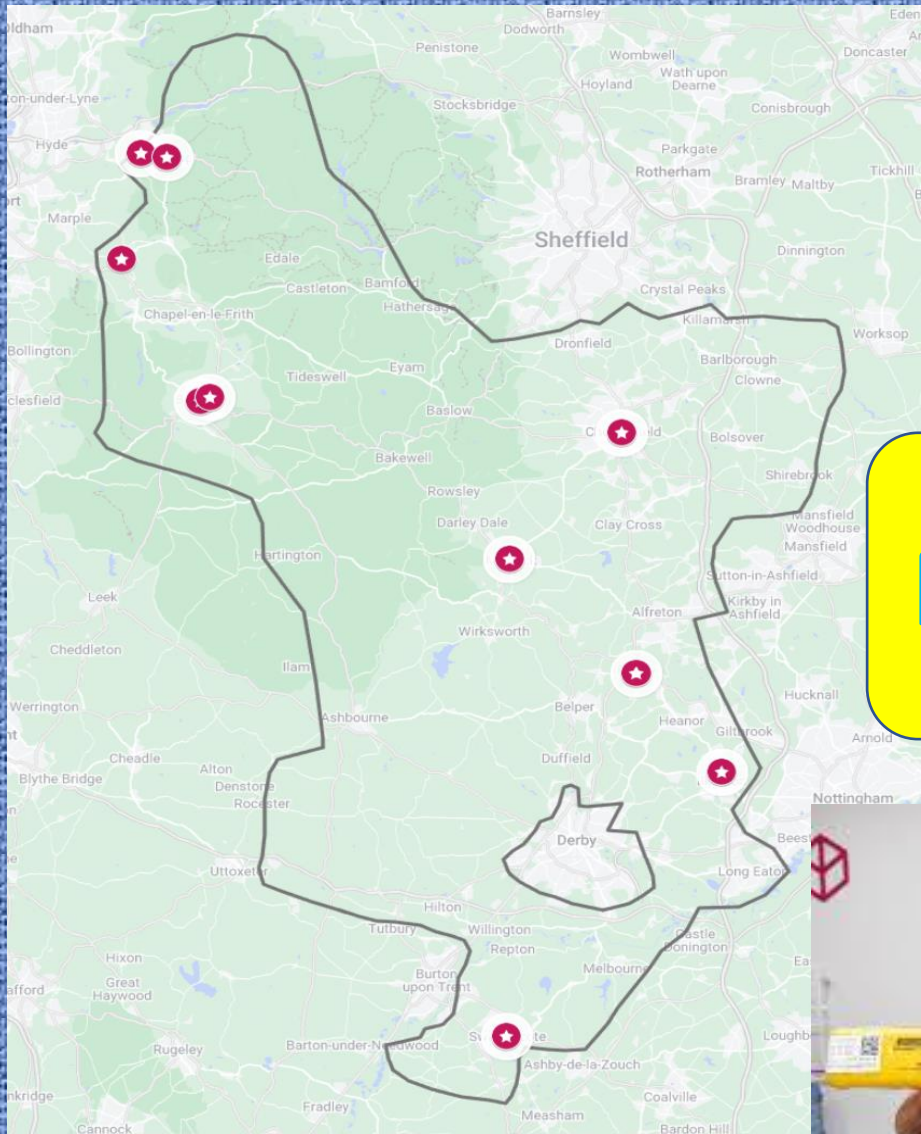
Take Home Naloxone - THN

Evidenced based way to reduce DRD

Provided to those at risk of overdose or encountering overdose

Anyone can carry it – especially useful for family, friends, and some occupations

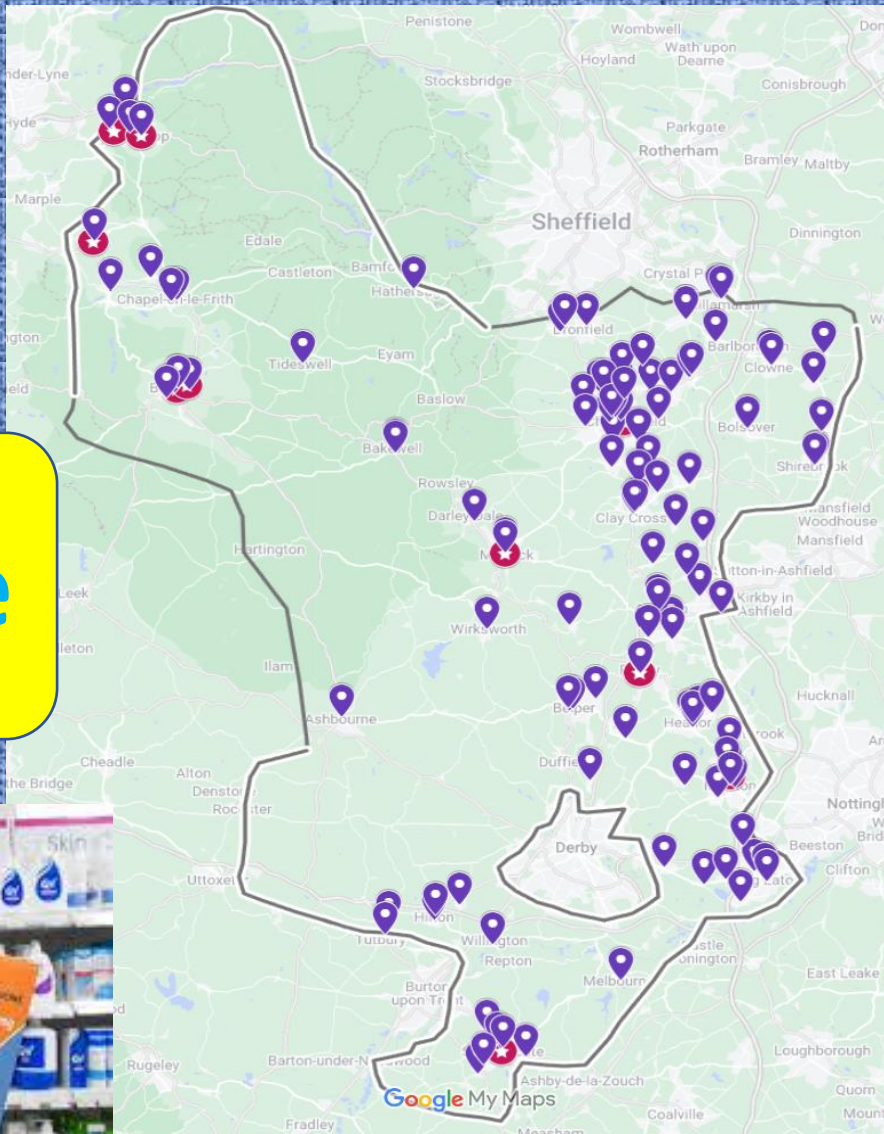
Used as an emergency response to an overdose, whilst waiting for emergency services to arrive



**SAVE
SOME
NALOXONE**

**NALOXONE
AVAILABLE HERE**

Naloxone



CONTROLLED

Take Home Naloxone via Community Pharmacy

Primary target groups

- Anyone accessing opioid replacement or needle exchange – offer at every visit?
- Anyone at risk of encountering an overdose
- Can be supplied to anyone 18 or over, at risk

Exclusions

- Under 18 – direct to CYP drug services [01773 303646](tel:01773303646) derbyshire@cgl.org.uk.

Payments

- Derbyshire: £250 for sign up, plus £13 for each transaction [Substance Misuse Services – Derbyshire LPC \(cpderbyshire.org.uk\)](#)

Recording

- Via PharmOutcomes: Name/Initials, Date of Birth, Address / Post Code, Gender

Take Home Naloxone Types & Training

- Pharmacy Staff Training - 1 hour online, keep a record of staff attending
 - [Home | SMMGP e-Learning \(ap-elearning.org.uk\)](#)
 - THN Supply company will provide additional education as needed
- Intramuscular, “**Prenoxad**” pre-filled syringe - each kit contains 5 doses
 - Product specific training and information can be found here: [Prenoxad Injection](#)
- Intranasal, **Nyxoid** 1.8mg nasal spray - each kit contains 2 doses
 - Product specific training and information can be found here: [Nyxoid 1.8 mg nasal spray, solution in a single-dose container - Summary of Product Characteristics \(SmPC\) - \(emc\) \(medicines.org.uk\)](#)
- Intranasal, i.e., “**Pebble**” 1.26mg nasal spray – each kit contains 2 doses
 - Product specific training and information can be found here: [Naloxone 1.26mg Nasal Spray | How to respond to an opioid overdose by using Naloxone](#)

Take Home Naloxone

How to use

- If you think someone has overdosed – try to wake them
- Call an ambulance / shout for help
- Give CPR if you know how - rescue breaths
- Put the casualty in the recovery position
- Give Naloxone
 - Prenoxad - IM open the pack, put the needle on and give one dose into a muscle, through clothes if necessary!
 - Intranasal (Nyxoid or Pebble) open the pack and squirt one dose up a nostril
- After 2-3 minutes if no response give another dose
 - Prenoxad 5 doses per syringe
 - Nyxoid / Pebble 2 doses – alternate nostrils
- Stay with the person until the ambulance arrives
- Short half life – risk of later overdose



Knowledge required by the THN recipients

1. how to identify and respond to an overdose

- Their breathing or heartbeat slows or stops.
- Changes to facial colour, becoming extremely pale and/or feels clammy to the touch
- They cannot be woken or are unable to speak
- Their fingernails or lips have a purple or blue colour.
- They start vomiting, making gurgling noises, an overdose can often be mistaken for snoring.

2. Understand the common factors that increase overdose risk

- use of substance by injecting,
- unpredictable and variable strength / potency of drugs,
- using multiple substances at the same time (including alcohol and prescribed medications),
- being physically unwell, and
- loss of tolerance (after a break or reduced use for a period of time).

Knowledge required by the THN recipients

3. how to store, carry, and administer THN in the preparation form issued,

- Know how to administer THN (depending on the type of kit issued)
- Understand the possible side effects of THN, including withdrawal.
- Understand the safe storage requirements of THN, stressing the importance of carrying the THN supply with them
- Know how to open the THN pack and not to do so except for emergency use.
- Know how to dispose of unwanted, expired or used packs and how to source replacements.

4. understand the actions to take if witnessing a suspected opioid overdose, including:

- Ensure personal safety first.
- How to support the overdose casualty until emergency services arrive.
- Place the casualty in the recovery position, if breathing,
- Place the casualty on their back and commence CPR if not breathing.

5. Understand the importance of calling 999 for an emergency ambulance

- Naloxone has a shorter half-life (and thus duration of action) than most opioids,
- This means that the casualty may again become oversedated after the naloxone wears off, as such emergency service review and intervention is always recommended

Basic Harm Reduction Advice

- **Treatment is protective – and easy to access!** Refer them if they consent
- **Don't use drugs alone**
- **Be careful after a break** – tolerance can change very quickly and your old amount could be much more dangerous after not using even if it's only been a few days
- **Don't inject drugs** – if you do inject use a small amount first especially if it's a new batch
- **Don't mix drugs** – especially sedating drugs such as heroin, methadone, pregabalin, benzos, alcohol, etc, Be careful what you get off the internet
- **Carry naloxone – and know how to use it**, always call an ambulance if you use naloxone
- **Look out for your mates** - many people report they thought their friend was only snoring just before they died.
- **If in doubt call an ambulance!**

Want to know more?



Derbyshire Addictions Advice Service (DAAS)

Promoting Positive Change

01246 206514

Mon - Fri: 9AM - 5PM

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The DAAS Training Team

Offer Training on:

- Alcohol Awareness
- Substance (Drug) Awareness
- Addiction and Interventions in Substance Use
- Derbyshire Recovery Partnership: Service Talk

Offer training tailored to your needs. Virtually attend team meetings to explain what Derbyshire Recovery Partnership provides and how to refer.

[01246 206 514](tel:01246206514)

[The DAAS Training Team - Derbyshire Addictions Advice Service](#)