RETHINKING 'WITHDRAWAL' AFTER AN OVERDOSE REVERSAL

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ThINC3 Naloxone Conference, Oslo, Norway September 2023

DECLARATIONS & ACKNOWLEDGEMENTS

<u>Declarations:</u> In the last three years, I have secured research funding from Mundipharma Research Ltd & Camurus AB, and received honoraria from Indivior & Camurus AB for presentations

<u>Acknowledgements:</u> This presentation is based on 4 papers arising from 3 studies conducted between 1997 & 2020

- Funders: Scottish Office; Australian Research Council; US National Institute on Drug Abuse (NIDA)
- Principal Investigators: Professor Neil McKeganey; Professor Suzanne Fraser; Professor Sandy Comer
- All study participants, co-investigators & co-authors

BACKSTORY

- Qualitative study of non-fatal overdose conducted in Scotland (1997-1999)
- People seemed terrified of naloxone
- At this time, John Strang was advocating for takehome naloxone in England & internationally
- In 2013, I moved to the National Addiction Centre to work with John Strang
- John argued that we need a better understanding of how people experience emergency naloxone to inform dosing
- So, I retrieved the 1990's data to look at it again...



Location: Scotland

• Date: 1997-1999

200 qualitative interviews

153/200 participants had personally overdosed

Nearly all had witnessed an overdose





RESEARCH REPORT

doi:10.1111/add.130

Naloxone—does over-antagonism matter? Evidence of iatrogenic harm after emergency treatment of heroin/opioid overdose

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ABSTRACT

Aim To analyse drug users' views and experiences of naloxone during emergency resuscitation after illicit opiate over dose to identify (i) any evidence of harm caused by excessive naloxone dosing ('over-antagonism'); and (ii) implication for the medical administration of naloxone within contemporary emergency settings. Design Re-analysis of a large qualitative data set comprising 70 face-to-face interviews conducted within a few hours of heroin/opioid overdose occurring.

PAPER 1: KEY FINDINGS

- Few participants knew naloxone by its generic or trade name
- Nearly all understood street terms, e.g. 'the jag', 'adrenaline', or 'the reverse', or recognized naloxone from the researcher's description
- Participants described feeling 'horrible' or unwell, & reported acute withdrawal symptoms post naloxone administration
- Participants reported going 'mad' or 'crazy' or losing their temper & becoming aggressive or violent because of withdrawal symptoms
- Participants frequently reported that they had discharged themselves to find & use more drugs after naloxone administration

- Negative reactions (including anger & acute withdrawal syndrome) are widely reported following overdose reversal with naloxone
- Negative reactions following overdose reversal with naloxone can result in medical self-discharge, additional use of substances & potential risk of death

Location: Australia

Date: 2017-2018

28 qualitative interviews

All participants used opioids

 All participants had administered take-home naloxone ADDICTION RESEARCH & THEORY 2020, VOL. 28, NO. 1, 29–37 https://doi.org/10.1080/16066359.2019.1571193



ORIGINAL ARTICLE



Conflict and communication: managing the multiple affordances of take-home naloxone administration events in Australia

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ABSTRACT

Opioid overdose is a growing issue in Australia. Programs to provide opioid consumers with 'takehome' naloxone to reverse overdose exist internationally and in some Australian cities, but uptake remains inconsistent. As an opioid antagonist, naloxone has the capacity to stimulate distressing withdrawal symptoms. These sensations are shaped by complex factors – including the quantity and intervals of the capacity of the constant of the capacity of the capacit

ARTICLE HISTORY

Received 15 August 2018 Revised 17 December 2018 Accepted 21 December 2018

KEYWORDS

PAPER 2: KEY FINDINGS

- Participants expressed concerns about, & described experiences of, conflict during take-home naloxone administration
- Participants also identified positive interactions which emerged during & after revival with take-home naloxone
- Participants reported using specific techniques to reduce the likelihood of conflict & to increase positive responses during naloxone administration:
 - i. Titrating the dose of naloxone
 - ii. Communicating with a person who had overdosed

- Negative reactions following overdose reversal with naloxone are not inevitable
- Anger (with the associated risk of conflict) following overdose reversal with naloxone can potentially be managed by dose titration & good communication with the person who has overdosed

Location: New York

Date: 2016-2018

- 46 qualitative interviews with people who used opioids
- All participants had administered naloxone (some on multiple occasions)

International Journal of Drug Policy 79 (2020) 102751



Contents lists available at ScienceDirect

International Journal of Drug Policy

journal homepage: www.elsevier.com/locate/drugpo



Research Paper

Opioid overdose reversals using naloxone in New York City by people who use opioids: Implications for public health and overdose harm reduction approaches from a qualitative study



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PAPER 3: KEY FINDINGS

- People who use opioids identified three outcomes following a successful opioid overdose reversal with intramuscular or intranasal naloxone:
 - i. 'rage'
 - ii. 'withdrawal symptoms'
 - iii. 'not rage, not withdrawal'
- Rage and withdrawal symptoms did not always occur together
- When rage and withdrawal symptoms did occur together, they did not always follow the same sequential order

 Withdrawal symptoms & rage following naloxone administration may be unrelated phenomena

Location: New York

Date: 2014-2019

- RCT of overdose education & naloxone prescribing to people with opioid use disorder & qualitative interviews with trial participants who responded to an overdose
- Analyses of 47 overdose events
- Naloxone had been administered at all events

Journal of Substance Abuse Treatment 117 (2020) 108099



Contents lists available at ScienceDirect

Journal of Substance Abuse Treatment





Factors associated with withdrawal symptoms and anger among people resuscitated from an opioid overdose by take-home naloxone: Exploratory mixed methods analysis



Joanne Neale^{a,b,c,*}, Nicola J. Kalk^{a,c}, Stephen Parkin^a, Caral Brown^a, Laura Brandt^d, Aimee N.C. Campbell^d, Felipe Castillo^d, Jermaine D. Jones^d, John Strang^{a,c,1}, Sandra D. Comer^{d,1}

ARTICLEINFO

ABSTRACT

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PAPER 4: KEY FINDINGS

- Anger & aggression following naloxone administration for opioid overdose do not seem to be associated with withdrawal symptoms
- Withdrawal symptoms are potentially associated with receiving more than one dose of naloxone
- People who had overdosed were significantly more likely to display anger if the person resuscitating them criticized, berated or chastised them during resuscitation
- People were significantly less likely to display anger if the person resuscitating them communicated positively with them

- Withdrawal symptoms & anger following naloxone administration may be unrelated
- Withdrawal following overdose reversal with naloxone can potentially be managed by dose titration
- Anger following overdose reversal with naloxone can potentially be managed by good communication with the person who has overdosed

SUMMARY AND CONCLUSIONS

- Negative reactions are widely reported following overdose reversal with naloxone
- These negative reactions can result in medical self-discharge, additional use of substances & potential risk of death
- Negative reactions following overdose reversal with naloxone are not inevitable
- Contrary to common assumptions, withdrawal symptoms & anger following naloxone administration may be unrelated
- Withdrawal following overdose reversal with naloxone can potentially be managed by dose titration
- Anger following overdose reversal with naloxone can potentially be managed by good communication with the person who has overdosed
- Take-home naloxone programmes may be strengthened by including training in how to titrate naloxone dosage & adopt a positive communication style when administering naloxone

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Thank you

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