http://www.ricentral.com/coventry_courier/news/local_news/coventry-police-switch-to-one-step-narcan-od-reversal-kit/article_71074c20-5420-11e6-9e7c-f726b8405cac.html

Coventry police switch to one-step Narcan OD reversal kit

By KENDRA LEIGH MILLER Jul 30, 2016

COVENTRY — There's a new form of Narcan available, in a nasal spray, and so far the Coventry Police Department is the first in the state to use it, according to Coventry Police Department Captain Peter Zalabowski.

The Department was expecting their first shipment of this new nasal form Monday or Tuesday. Zalabowski said the form they have been using is the injection, which comes in a few parts and takes about 10 seconds to put together in order to inject it.

"You go to a scene, and it takes time and even if you have experience administering the injection, an injection is not error-poof and you have members of the family or others around you who are all upset and possibly yelling and crying while you're trying to do this," he said.

Coventry Police have been carrying the injection for about two years and along with the time it takes to administer, he said the glass vial is very fragile. The injection form holds two milligrams of the drug while the new nasal version holds four.

"You take it out of the package and use it, done" said the Captain. "How much opioid the person has consumed determines if they require a second dose but that person will still be transported to the hospital."

According to his information, in 2015, the Department used it eight times. So far, this year, it's been used twice.



"Whoever gets to the scene faster, police or fire, will dispense it," he said. "The injection costs \$70 apiece while the nasal spray is two for \$75 and the nasal spray is a lot safer for emergency personnel and it gets into the body's system right away."

He explained that opioid drugs include morphine, codeine, methadone, oxycodone and its various forms as well as illegal drugs such as heroin. He said some of the symptoms of an overdose include a lack of response to loud voices or shaking; fingernails and lips turning blue or purple; breathing is slow, shallow or irregular or has stopped; extremely small pupils and slow heartbeat and/or low blood pressure.

"Anyone can suffer from an overdose," he said, "it could be an elderly person who forgot they took their medication already and they take it again or it could be a child who gets into the medicine cabinet."

He said in 2015, there were 258 deaths in Rhode Island from overdoses, up from 239 in 2014. So far, this year it's 114 deaths. According to Sylvia Burwell, secretary of the U.S. Department of Health and Human Services, the opioid epidemic knows no boundaries.

"It touches lives in cities, rural counties and suburban neighborhoods across the country," she said. "That's why it's so important that we come together — both state and federal leaders — and take a coordinated and comprehensive approach to address this crisis."

Coventry Police Department Chief Colonel John MacDonald stresses a reminder about the Good Samaritan Overdose Prevention Act of 2016.

"Do not hesitate to call 911 if you have a friend or family member who you believe is overdosing. The reporting party and the patient are afforded immunity from prosecution under this law when they are seeking medical treatment for individuals suffering a drug overdose. Saving lives is the number one priority as we battle this public health crisis which continues its assault on our communities," he said.



On Monday, the opioid epidemic was the focus of discussion when Michael Botticelli, Director of National Drug Control Policy for the White House, stopped by The Providence Center's Anchor Recovery Community Center in Pawtucket to learn more about the success of AnchorED, an innovative intervention and recovery program that connects overdose patients in emergency departments with peer-to-peer recovery support, according to a press release from AnchorED.

"Reversing opioid overdoses with Naloxone is keeping people alive, but we can't stop there – we have to connect people with treatment after an overdose," Botticelli said. "AnchorEd is using an innovative approach that's bringing the community together to help people access treatment and reach recovery. By increasing access to evidence-based treatment options like medication-assisted treatment, we can save lives and help move Rhode Island – and our country – from crisis to recovery."

AnchorED is part of the statewide Anchor family of intervention and recovery programs run by The Providence Center. The program began in June of 2014 with grant funding from the Rhode Island Department of Behavioral Healthcare, Developmental Disabilities and Hospitals, the Rhode Island Department of Health, and a private donor. AnchorED is 100 percent managed and operated by individuals in recovery from substance use disorder.

"For a long time, it was 'treat and street'—you go to the ER, get patched up, then you're back out there with an untreated substance use disorder. Now, we have a chance to break that cycle by connecting with individuals at the moment they need it most, to educate and encourage them to get treatment," AnchorED coordinator George O'Toole said.

According to the press release, this year, 905 individuals have met with an AnchorED Peer Recovery Specialist in emergency departments after surviving an opioid overdose. Just over 82 percent of these people have engaged in recovery supports after discharge from the emergency department, and most of the survivors have followed up with the Anchor Recovery Community Center for recovery coaching, telephone recovery support, and referrals to medication-assisted treatment, detox or recovery housing.

