

RESPONDING TO
OPIOIDS
IN MISSOURI



MISSOURI DEPARTMENT OF
HEALTH &
SENIOR SERVICES

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Background Information

The opioid epidemic impacts families, communities and health care systems. It affects all genders, races, socio-economic backgrounds and many age groups in rural and urban Missouri.

The Missouri Department of Health and Senior Services aims to improve health literacy related to opioids. This publication was created to help communities and individuals understand and use information to make informed health-related decisions for themselves and others.

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This zine was inspired by the [Health Literacy + The Opioid Crisis](#) zine created for Maine library workers in 2019.

Thank you for reading!



Scan to view the *Responding to Opioids in Missouri* zine digitally.



MISSOURI DEPARTMENT OF
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Person-Centered Language and Stigma

Person-centered language is all about **putting the person first** and recognizing their unique experiences. This approach avoids stereotypes and biases by focusing on the individual rather than their condition or circumstances.

Stigma includes any negative beliefs, stereotypes or judgements about a group of people. Negative attitudes and insensitive language can prevent people from seeking health care and other resources. Using person-centered language is more helpful and caring because it **avoids judgment**.



Person-Centered Language

Instead of	Replace With	Because
<p>Addicts, junkies</p> <p>Former drug addicts, clean</p> <p>Sober</p> <p>Relapse</p> <p>Alcoholics</p> <p>Risk factor, risky behavior</p>	<p>People who use drugs (PWUD), people with Substance Use Disorder (SUD)</p> <p>People who used to use drugs, people in recovery, substance-free, abstinent</p> <p>Well, healthy, in recovery</p> <p>Return to use</p> <p>People with Alcohol Use Disorder (AUD)</p> <p>Potential, vulnerability</p>	<p>These terms honor the belief of many clinicians and people with substance use disorder that recovery is an ongoing and variable process</p>
<p>Drug abuse, addiction, habit</p> <p>Abuse</p> <p>Medication assisted treatment</p>	<p>Substance use, drug use, Substance Use Disorder (SUD), Opioid Use Disorder (OUD)</p> <p>Use, misuse</p> <p>Medication for Opioid Use Disorder (MOUD), Long-term recovery</p>	<p>These terms reduce the stigmatizing misconception that prevents people from accessing treatment</p>
<p>Drug-addicted infant, addicted baby, born addicted</p>	<p>Infant with Neonatal Abstinence Syndrome (NAS)</p>	<p>Despite any dependence that may be present, infants are not capable of compulsive substance use despite negative consequences that define addiction</p>

What are Opioids?

Opioids are used to reduce pain. When used as prescribed, they ease pain effectively. Common opioids include:

Oxycontin

Morphine

Fentanyl

Vicodin

Heroin

Opioids, even with a doctor's oversight, carry potential for misuse. Using prescribed drugs regularly can raise tolerance and dependency. This might lead to needing increased doses more often.

At high doses, opioids can make breathing difficult. Misusing opioids can result in an overdose which can be fatal. Overdosing is more likely in people who:

- Take opioids for the first time.
- Use multiple substances.
- Use a substance they do not know contains opioids.
- Have breathing-related health issues.
- Use opioids while alone.
- Resume use after an extended period of abstinence.
- Use opioids by injection.

What is Fentanyl?

Fentanyl is a powerful synthetic opioid that is **50 times stronger** than heroin and **100 times stronger** than morphine. It is available in prescription form for pain relief, but fentanyl is also made illegally.

What do I need to know about fentanyl?

Fentanyl and other synthetic opioids are the most common drugs involved in overdose deaths. Illegal fentanyl comes in many forms like powder, pills, eye drops and nasal sprays.

Illegal fentanyl is often mixed with other drugs, such as cocaine, heroin and meth. This is especially dangerous because people are often unaware that fentanyl is present. Non-regulated drugs, or drugs not prescribed by a licensed pharmacy, could contain a lethal dose of fentanyl.

Fentanyl test strips (FTS) are small strips of paper that can be used to detect the presence of fentanyl. Taking a few minutes to test your drugs can be lifesaving.



How do Opioids Work?



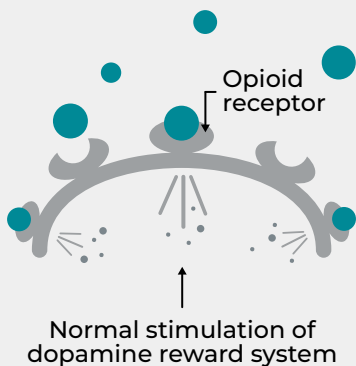
Picture a lock and key. To open the lock, a key is necessary. Opioids trigger receptors like keys fitting into locks.

When opioids get in the bloodstream, they attach to nerve cell receptors in the body. Like keys opening a lock, opioids start chemical reactions in the brain. These reactions turn off pain signals and turn on pleasure signals. Pain and pleasure are two of the strongest motivators for behavior, putting people who use opioids at a higher potential for misuse and, in some, Opioid Use Disorder.

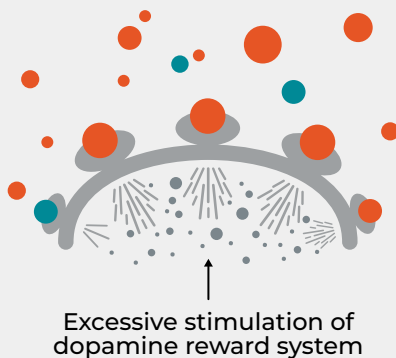
How Opioids Affect the Brain

● Endorphin ● Opioid

Normal Brain



Brain on Opioids



Opioids in the Body

Many factors influence the strength or potency of an opioid. One factor is how an opioid enters the body.

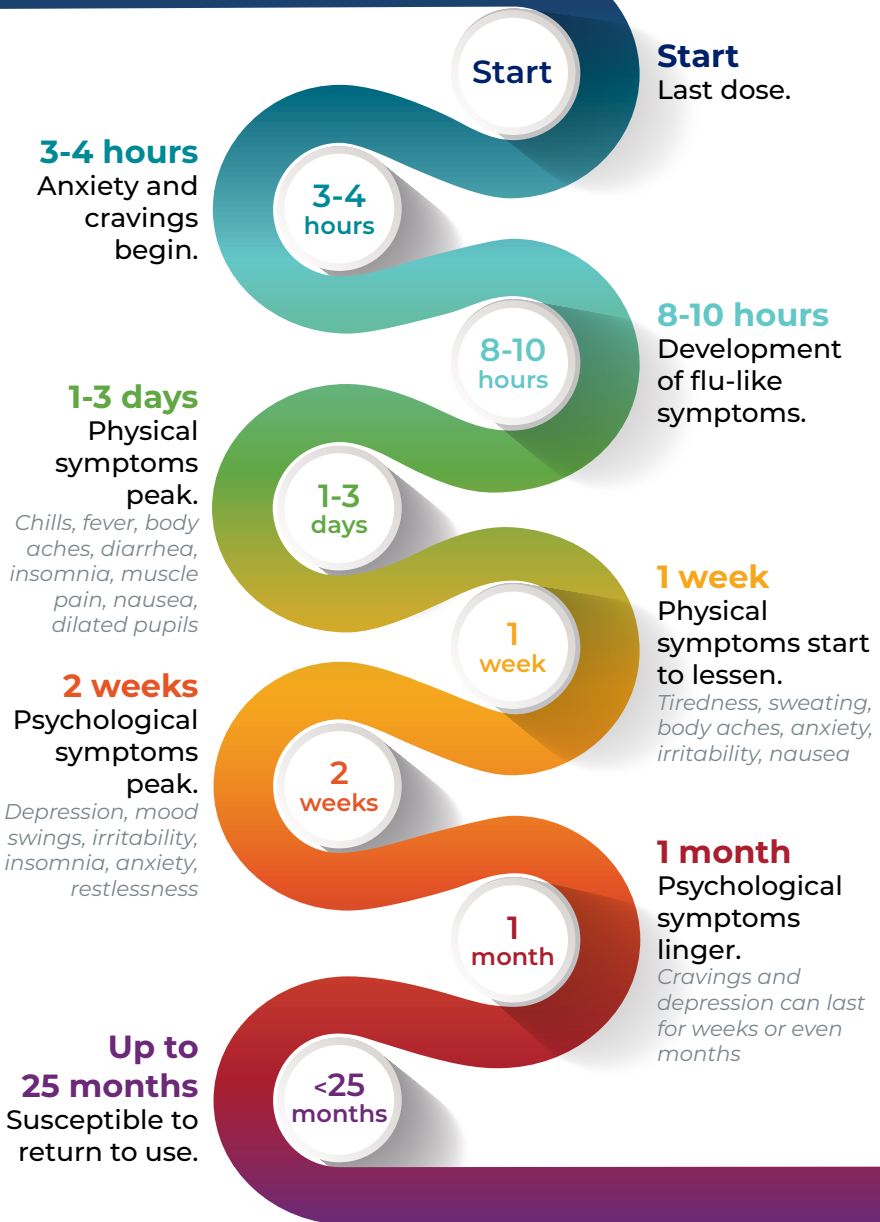
There are many routes used to administer an opioid. Two of the most common ways to take opioids are by mouth and by injection. Opioids taken by injection have a higher potency than those taken by mouth, because they enter the bloodstream immediately. They travel through the blood directly to organs like the brain where they take effect.

Opioids taken by mouth are first processed by the liver before they take effect in the body. This means that a lower amount of the drug is active when it reaches the brain and other organs.

To read more about opioids go to: [CDC.gov/opioids](https://www.cdc.gov/opioids).



Opioid Withdrawal



Information from [Steve Rummler Hope Network](#).

What is an Opioid Overdose?

Opioid overdoses happen when the body gets flooded with opioids. The person who has overdosed can become unresponsive and experience breathing problems, causing a drop in their oxygen levels. When the heart and brain do not have enough oxygen, it can cause unconsciousness and death.

Tolerance to opioids can change based on how recently they have been used. This means that even if the body used to be able to handle a certain amount of opioids, it may now react more strongly to it.

If you have chronic health issues and take multiple medications, it is important to be even more cautious. Mixing any drugs can be dangerous, but it's especially dangerous to mix drugs that can slow down breathing. Drugs that slow breathing, such as alcohol, benzodiazepines and xylazine, increase the chance of overdosing.

What Does an Overdose Look Like?

SIGNS OF **AN** **OPIOID** **OVERDOSE**



**Lighter skin turns
bluish purple and
darker skin turns
grayish or ashen**



**Loss of
consciousness**



**Fingernails and
lips turn blue or
purplish black**



**Choking sounds, or
a snore-like gurgling
noise (sometimes called
the “death rattle”)**



**Face is very pale
or clammy**



**Lack of responsiveness
or being unable to be
woken up by others**



Vomiting



**Breathing is very slow
and shallow, erratic
or has stopped**



Body is very limp



**Pulse (heartbeat)
is slow, erratic or
completely gone**

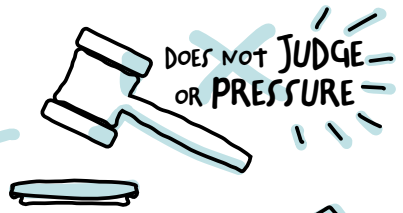
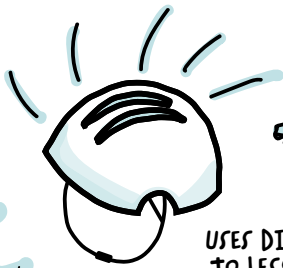
What is Harm Reduction?

Harm reduction involves strategies to help people who use drugs stay safe and healthy. The goal is to prevent dangerous drug overdoses and the spread of diseases. It also helps improve a person's physical, mental and social well-being.

Harm reduction provides access to health care services and equips individuals with tools and information to make positive changes in their lives.



We use harm reduction strategies every day.



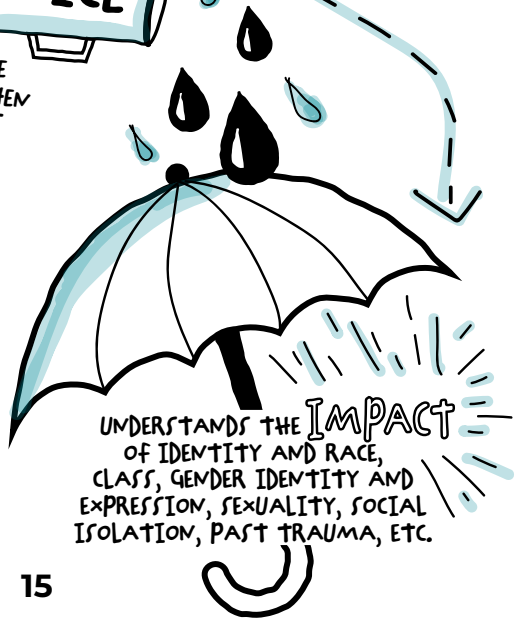
WHAT IS HARM REDUCTION?



OF IMPACTED PEOPLE
AND COMMUNITIES WHEN
CREATING PROGRAMS
AND POLICIES



MEETS PEOPLE
WHERE
THEY
ARE



Adapted from
Laura Chow
Reeve, *Radical
Roadmaps.*

Basic Harm Reduction Principles

Adapted from the Harm Reduction Coalition's [Principles of Harm Reduction](#).

Harm reduction accepts that drug use is part of our world and works to minimize the harmful effects of drug use.

Harm reduction measures the success of interventions and policies by how they improve quality of life and well-being. This does not necessarily involve cessation of all drug use.

Drug use is complex and includes a range of behaviors from severe abuse to total abstinence. Harm reduction acknowledges that some ways of using drugs are safer than others.

Harm reduction calls for access to non-judgmental and non-coercive services and resources for PWUD.

PWUD or people who have used drugs should have a real voice in the creation of programs and policies that apply to them.

Inequities like poverty, class and racism affect how people deal with drug-related harm.

PWUD are the primary agents of reducing drug-related harm. Harm reduction empowers PWUD to support each other in strategies that work for them.

Harm reduction doesn't minimize or ignore the real and tragic harm and danger related to drug use.

Everyday Harm Reduction Example

Adapted from the Harm Reduction Coalition's [Principles of Harm Reduction](#).



Harm reduction improves communities and benefits everyone, not just those who are directly impacted!

What is Naloxone?

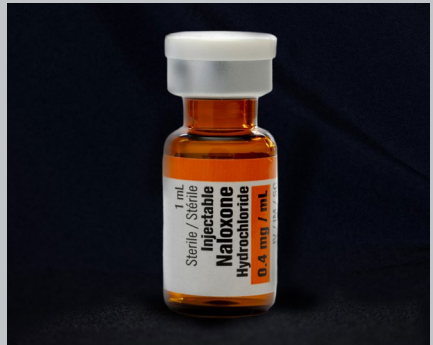
Naloxone (generic name), also known by the brand name NARCAN[®], begins reversing opioid effects as soon as it is used. It works against opioids and synthetic opioids, which can save someone from an overdose.

Giving naloxone to someone overdosing can be chaotic. The body reacts strongly, sometimes causing sudden severe withdrawal symptoms. This can lead to intense discomfort and confusion.

Naloxone's effects wear off quickly. If drugs remain in their system, another overdose may occur. Having enough naloxone and education on how to administer naloxone is vital.



Nasal Spray



Injectable

NARCAN is a registered trademark of Emergent Operations Ireland Limited.

How to Administer Naloxone

Responding to an **OVERDOSE**

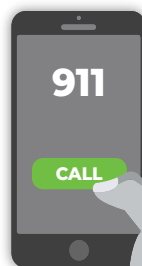


Try to Wake Them up

- Shake them and shout.
- If they do not respond, grind your knuckles into their breast bone for ten seconds.



Call for Help



Did you know? The Good Samaritan Law prevents you and the person who overdosed from being charged with drug possession.

Administer Naloxone

- Peel back the tab with the circle to open it.
- Do not prime or test the spray.
- Tilt their head back, insert the nozzle fully inside the nostril and press the plunger to dispense the contents of the product entirely.
- Additional doses can be given every two to three minutes until they are responsive.



Rescue Breathing

- If they are not breathing, you can begin giving rescue breaths.
- With the head back and the nose pinched, breathe into their mouth.
- Start with two breaths, then do one breath every five seconds.
- If necessary, and you are trained to do so, perform CPR.
- Keep going until help arrives.



Wait for Help

- Continue rescue breaths or CPR until help arrives.
- Stay with them. If you must leave, turn them on their side to prevent choking.
- If they wake up, explain what happened.



Naloxone and Overdose Training Resources

Training provides many benefits for individuals and organizations, including:

- Providing naloxone to distribute to communities.
- Asking questions in a non-judgmental environment.
- Learning firsthand from someone who has administered naloxone.
- Allowing for open conversation about thoughts, fears, anxieties and unknowns.

Training opportunities in Missouri:

The Missouri Department of Health and Senior Services

- [Five-module online training](#)

Expanding Naloxone Access and Community Trainings (ENACT)

- [Virtual trainings \(registration required\)](#)

University of Missouri - St. Louis

- [Overdose Education and Naloxone Distribution \(OEND\) training](#)
- [MIMH Addiction Science Team, trainings by audience type](#)

Need Naloxone?

In Missouri, you can buy naloxone at pharmacies with or without a prescription. Your doctor can prescribe it. Naloxone is available at public health departments and various community centers. It is legal to carry and will not be taken by police. Here are some ways to get naloxone:



[GetMissouriNaloxone.com](https://www.getmissourinaloxone.com)



[NextDistro.org](https://www.nextdistro.org)

Naloxone Map

Find naloxone at an organization near you:



[NoMOWeaths.org](https://www.nomoweaths.org)

Opioid Safer Use

There are steps people can take to help protect themselves from infection and overdose.

Additional safer use information available [here](#).



Do not use alone.

If you do, use where someone is likely to find you if you overdose and place naloxone near you.

Never Use Alone Hotline:
877-696-1996
NeverUseAlone.com



Test for fentanyl.

When possible, use a fentanyl test strip to test your drug supply before use.

Order fentanyl test strips:
TestMissouriDrugs.com/fts-requests



Take turns using.

When using with others, use about 30 minutes apart so someone is alert enough to give naloxone or call 911.



Start with a smaller amount.

A supply might be mixed with other drugs. It could contain fentanyl, which can be deadly. Starting small could save your life.



Protect from hepatitis and HIV.

Avoid sharing or reusing needles or any other items, including cotton, cookers, ties or water.

Free safer use kits:

Condoms.fyi/safeuse-kits.php



Clean the injection site.

Use warm, soapy water or an alcohol swab before using to reduce infections of the skin, blood and other organs.

Wound care:

NASTAD.org/resources/wound-care-medical-triage-people-who-use-drugs-and-programs-serve-them



Clean with bleach.

It is not safe to reuse syringes. If using new materials is not an option, flushing syringes with cold, clean water, then disinfecting with bleach for two minutes and flushing again with cold, clean water can protect against infection.



Dispose safely.

Protect others by putting used items in a syringe disposal or a strong container with a secure top, like an empty laundry detergent bottle.

Sharps disposal resources:

SafeNeedleDisposal.org



Rest, eat and hydrate.

Your health impacts how your body can respond to overdose and overamping. Be sure to rest, eat and hydrate.



Go slow.

Tolerance can go down after not using for a few days. You never know how strong a new batch is.

The Good Samaritan Law

Missouri's "Good Samaritan" law is designed to save lives by encouraging people to seek emergency medical help if they experience or witness a drug or alcohol overdose or other medical emergency. Under this law, the person who seeks medical help and the person experiencing the medical emergency will be protected from minor drug and alcohol violations.



This law provides immunity from:

- Possession of a controlled substance ([RSMO 579.015](#)).
- Possession of drug paraphernalia ([RSMO 579.074](#)).
- Possession of an imitation controlled substance ([RSMO 579.078](#)).
- Keeping or maintaining a public nuisance ([RSMO 579.105](#)).
- Sale of alcohol to a minor ([RSMO 311.310](#)).
- Possession of an altered ID ([RSMO 311.320](#)).
- Purchase or possession of alcohol by a minor ([RSMO 311.325](#)).
- Violation of a restraining order.
- Violation of probation or parole.



Visit Time2ActMissouri.com. Read more specifics and limitations on [page 25](#).



View the law on
Revisor.Mo.Gov

Don't run, Call 911

Here are the steps to take when calling 911:



Give a detailed and specific description of the address.

Describe what you see. Use words such as “not breathing, turning blue, unconscious, non-responsive,” etc.



The police may arrive before the paramedics. If possible, stay with the individual until the paramedics arrive.

When the paramedics arrive, let them know if you administered naloxone.



Try to stay calm, answer questions and follow instructions.

To receive the protections under the Good Samaritan law, a person must actively seek medical assistance for an overdose or other medical emergency (i.e., call 911, or otherwise seek help). Under this law, the person who seeks assistance and the person who experiences the overdose or medical emergency may not be arrested, charged, prosecuted, convicted or have their property subject to civil asset forfeiture under any of these statutes.

This limited immunity does **not** provide immunity from any other crimes, including distribution of a controlled substance, manufacturing of drugs, active warrants or any other crime.

This law also requires police officers who respond to a drug or alcohol overdose to provide appropriate treatment-related resources.

Community Engagement

Community engagement events can be a great opportunity to better understand how the opioids affect your community.

Here are some questions to ask yourself during the event planning process. These questions may help create a more inclusive and accessible event with meaningful involvement from your community.

- Do the **title and description** clearly explain the event? Are the title and description inviting?
- Do the **images** on the event materials feel welcoming?
- Do the **date and time** reflect the availability of the intended audience? For example, evenings, lunch time, weekends, etc.
- Is the **location** accessible to the community of focus? Will they be comfortable there?
- Is the **community of focus** involved in the event planning process?
- Will the event **compensate participants** for their time and contributions? Food, gift cards or other incentives can motivate people to attend.

Overdose FAQs

Can I overdose on prescription opioids?

Yes, you can overdose on prescription opioids. They have a high risk of addiction and overdose, especially with long-term use.

What increases the potential for an overdose?

Return to use, solo use, mixing substances, previous overdose, existing health issues, how the drug is used and drug potency all contribute to the chance of overdosing.

Can a person overdose again after naloxone has been given?

Yes, depending on the amount and type of opioid used. Naloxone lasts 30-90 minutes. After that time, the person could fall back into an overdose. This is why it is important to seek medical attention after administering naloxone.

Will I hurt someone by administering naloxone if they are not overdosing?

No. Naloxone will not have an effect on someone who is not overdosing.

How long does it take for naloxone to work?

Naloxone does not work instantly. It may take between three and five minutes for someone to begin breathing again. Others may regain consciousness faster.

Reflection Questions

- Is naloxone **accessible** to your community? Do people feel comfortable using it?
- What steps should be taken to **administer naloxone**?
- Are **trainings** offered where people feel comfortable asking questions?
- Is there a priority on supporting the **health and wellbeing** of people who use drugs in your community?
- How can you enhance the use of **person-centered language** in your community?



Resources

Opioids and naloxone: health literacy

- Centers for Disease Control and Prevention: [Opioids](#)
- Harm Reduction Coalition: [Recognizing Opioid Overdose](#)
- MedlinePlus: [Naloxone Injection](#)
- MedlinePlus: [Opioid Overdose](#)
- MedlinePlus: [How Naloxone Saves Lives](#)
- Mayo Clinic: [What Exactly are Opioids?](#)

National: harm reduction and recovery

- [Harm Reduction Coalition](#)
- [North America Syringe Exchange Network \(NASEN\)](#)
- Substance Abuse and Mental Health Services Administration (SAMHSA) [Behavioral Health Treatment Services Locator](#)
- U.S. Department of Health and Human Services (HHS) [Overdose Prevention Strategy](#)

Missouri-specific: harm reduction and recovery

- [The Missouri Department of Mental Health](#)
- [The Missouri Department of Health and Senior Services](#)
- [Time2ActMissouri.com](#)
- SAMHSA Helpline: 1-800-662-4357
- [NoMODeaths.org](#)
- [RecoveryFriendlyMO.com](#)

988 and Mental Health

Mental health issues can affect anybody. If you or someone you know is struggling or in crisis, help is available. Call or text **988** or chat at 988lifeline.org.

988 offers **24/7 access** to trained crisis counselors who can help people experiencing mental health-related distress without judgment.

That could be:

- Thoughts of suicide.
- Mental health or substance use crises.
- Emotional distress.
- Other [reasons to connect](#).





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