

SAVING A LIFE IN THE FACE OF OPIOID POISONING

THE PROBLEM: OPIOID POISONING

- Opioids are a class of drugs that act on opioid receptors in the brain and body to reduce the perception of pain.^{1,2,3}
- Opioids include prescription medications (e.g., morphine, oxycodone, hydromorphone, methadone, fentanyl) as well as illegally produced or obtained substances.^{1,2,3}
- Opioids at high doses, or when combined with other substances, can cause opioid poisoning and death.^{1,2,3}
- Opioids also affect receptors that control breathing; reduced breathing and therefore reduced oxygen can lead to unconsciousness, coma, and death if untreated.^{1,2,3}
- In Canada, opioid-related deaths have increased substantially since 2016, representing a major public health crisis.⁴

In Canada, between January 2016 & June 2025:

53,308 apparent opioid toxicity deaths reported⁴

50,558 opioid-related poisoning hospitalizations reported⁴

208,615 opioid-related poisoning emergency room visits reported⁴

OPIOID POISONING AFFECTS EVERYONE

- Prescription opioids are widely used for pain management in Canada, increasing the risk of unintended exposure in households and communities.⁵
- 21,567,730 opioid prescriptions were dispensed in Canada in 2024; approximately **1 in 9** people in Canada received at least one prescription for opioids from a community pharmacy for pain relief in 2024 - that's over 4.4 million people.⁵
- National surveillance data show persistently high rates of opioid-related deaths across multiple provinces, affecting people of all ages and backgrounds.⁴
- In British Columbia the leading cause of death for people aged 10 to 59 is poisoning from unregulated drugs.⁶

21,456,730

opioid prescriptions were dispensed in Canada in 2024

Young people are not immune:

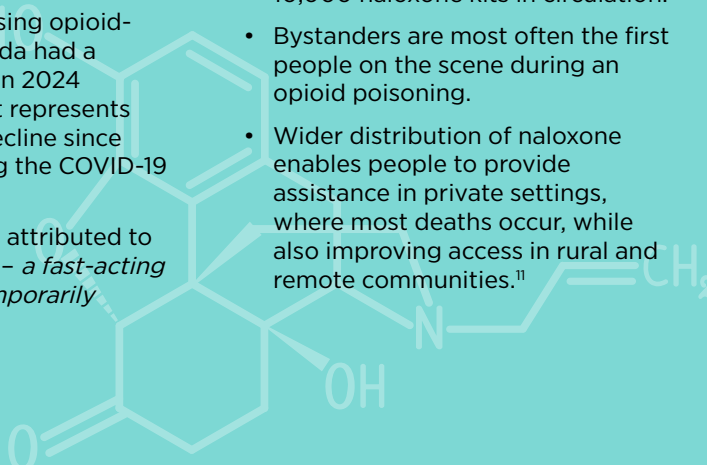
- A 2024-2025 Health Canada study on the prevalence of substance use among post-secondary students found that 15 percent of students reported using opioid pain relievers in the past 12 months.⁷
- Rates of opioid-related deaths among Ontario teens and young adults tripled from 2014-2021 and hospital emergency department visits related to opioid use quadrupled over the same period.⁸

NALOXONE SAVES LIVES

- When breathing stops after an opioid poisoning, brain damage can occur in as little as 4 minutes, and death can occur within 4 - 6 minutes.⁹
- Timely administration of naloxone can restore breathing and reduce the risk of brain injury and death following opioid poisoning.¹⁰
- After years of increasing opioid-related deaths, Canada had a notable 17% decline in 2024 compared to 2023. It represents the first sustained decline since deaths surged during the COVID-19 pandemic.¹¹
- This decline is partly attributed to the use of **naloxone** - a fast-acting medication, that temporarily reverses the effects of opioid poisoning by displacing opioid drugs from their receptors.¹¹
- Regions in Canada that distributed more kits experienced larger declines in deaths.^{11,12}
- Recent Alberta study showed a 23.9% reduction in deaths for every 10,000 naloxone kits in circulation.¹³
- Bystanders are most often the first people on the scene during an opioid poisoning.
- Wider distribution of naloxone enables people to provide assistance in private settings, where most deaths occur, while also improving access in rural and remote communities.¹¹

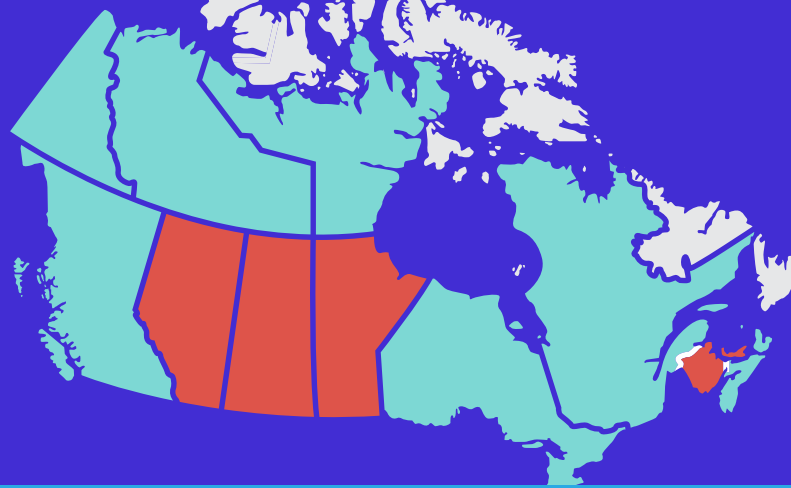
NALOXONE NASAL SPRAY IS THE PREFERRED OPTION FOR ADMINISTRATION BY BYSTANDERS

- Naloxone comes in two forms: Intranasal naloxone is administered as a spray into the nostril, while injectable naloxone is drawn into a syringe and injected into a muscle; both can be repeated if breathing does not improve.¹⁰
- Studies from the USA and Australia show that nasal naloxone is preferred by bystanders and non-medical first responders because it is easy to use, needle-free, requires no assembly, and can be quickly given in high-stress overdose situations.¹⁴
- In an Alberta pilot, participants reported that intranasal naloxone was easier to prepare compared with injectable naloxone. It was also easier and faster to administer, particularly for community and allied responders.¹³



A CALL TO ACTION: GREATER ACCESS TO NASAL NALOXONE IS NEEDED AND KNOW HOW TO USE IT

Need for Nasal Naloxone Availability – broadly available and accessible for individuals from pharmacies for bystander use in ON, QC, NS, NWT, Yukon, Nunavut, BC and not covered in AB, MB, SK, NB, PEI.



WHAT YOU CAN DO:

1. Having a naloxone kit on hand can mean you are ready to save a life.
2. Know the symptoms of opioid poisoning such as: **Slow, shallow/ stopped breathing or gurgling/choking sounds, person doesn't respond when shaken, "tiny black dot" sized pupils, pale/cold skin, vomiting, limp body, and slow or absent pulse.**^{1,3}
3. Know how to use naloxone.

INSTRUCTION VIDEOS:



Nasal naloxone

<https://www.youtube.com/shorts/QqB4RdHGO2A>



Nasal naloxone and IM naloxone

<https://www.youtube.com/watch?v=6cVMupA4als>

WHAT TO DO AN AN OPIOID POISONING EMERGENCY:¹⁵

1. Check the person for breathing and responsiveness
2. Call 9-1-1.
3. Begin CPR if the person is not breathing.
4. Administer naloxone if available.
5. Monitor and repeat naloxone after 2-5 minutes if there's no improvement.
6. Stay with the person until help arrives.
7. Place the person in the recovery position (rolling onto side) when breathing resumes.

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