

INFORMATION AND SUPPORT

A Needle and Syringe Program (NSP or the exchange) worker can give you information, help you find services and make appointments for you.

DirectLine

1800 888 236 • www.directline.org.au
24-hour. If you want to talk to someone about your drug use or find a support service.

Harm Reduction Victoria

(03) 9329 1500 • www.hrvic.org
Peer support and safer using information for people who use drugs. Coordinates the Drug Overdose Prevention/Peer Education (DOPE) program.

Better Health Channel

www.betterhealth.vic.gov.au
Health services and service directory.

Understand Ice

www.understandice.org.au

Medically supervised injecting room (MSIR)

9418 9800 • www.nrch.com.au
North Richmond Community Health
23 Lennox St, Richmond
Inject drugs in a safer health setting and get help from trained staff if you overdose.

Agency details:

SAFER
USING **06**

OVERDOSE

OVERDOSE

An Overdose (OD) means having too much of a drug, or a combination of drugs for your body to cope with.

An overdose will be different depending on the drug involved.

OPIOID OVERDOSE

Opioids like heroin, morphine, oxycodone and fentanyl slow the messages from your brain to your body.

If you take too much of these kinds of drugs or you have other drugs on board, the messages your brain sends to your body telling it to breathe can slow down.

Your breathing can become dangerously slow or stop altogether.

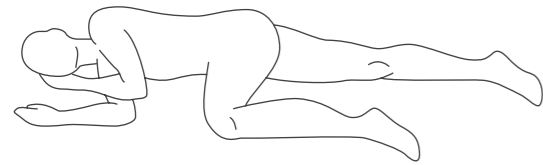
Signs of opioid overdose

– Unresponsive

- Snoring/gurgling noises
- Blue lips – if pale skinned
- Ashen look – if dark skinned
- Irregular/shallow breathing, OR
- No breathing at all
- Limp body and heavy nod
- Possible vomiting.

What to do

- **Call for help! 000.** The police do not routinely attend overdoses
- Put them in the recovery position, tilt their head back and ensure airway is clear – see diagram below
- If you have naloxone, use it (NOTE: with naloxone nasal spray, it's naloxone first then recovery position)
- If the person's heart is beating but they are not breathing, start rescue breathing – if you know how or are comfortable doing it (two slow breaths to start, and then one breath every five seconds)
- If their heart is stopped, start CPR – if trained or comfortable doing it
- Additional naloxone doses can be given every two to three minutes (every four minutes for pregnant women).



The recovery position

Naloxone

Naloxone is a type of medicine which temporarily reverses the effects of opioid overdose.

It lasts between 30 and 90 minutes, allowing the person to breathe again while the ambulance is on its way. One dose may not be enough for some opioid drugs, so if the person isn't breathing after two to three minutes, give them another dose if you have one. Naloxone is injected into a muscle in the upper arm or outer thigh or (nasal spray) sprayed up the person's nose.

It is legal to carry naloxone.

Naloxone wears off more quickly than some opioids. If someone is given naloxone they should not be left alone and should be discouraged from using any drugs for at least two hours. They might drop again!

Naloxone can be prescribed by a doctor and is also available directly from a pharmacist.

It is cheaper to get it on prescription. This will also allow you to speak to a doctor if you have any concerns about your health or drug use.

REDUCING RISK

Try not taking more than one drug at a time

Taking more than one drug can increase the risk of overdose and includes using on top of methadone. Taking opioid drugs with alcohol or benzos can slow your breathing and heart rate.

Try to use one drug at a time.

Learn about half-life

Some drugs have a long half-life. The half-life of a drug is the time it takes for the concentration of it in your body to be reduced by half. There are drugs you might have taken yesterday which could still cause you to drop if you have a hit today. Some benzos, including Diazepam (Valium) have a long half-life.

Be careful if you've had a break

If you've taken a break from using drugs (detox, rehab, jail, using less), your tolerance can drop quickly. Think about your tolerance – if you've had a break, test a small amount first.

Look after your health

Health problems make it harder for your body to deal with drugs. These include problems with your heart, lungs, kidney or liver. Infections and dehydration can also increase your risk.

Look after your health. Get a health check-up and act on any concerns.

Try to use in a familiar place, with others

If you overdose and no-one can get to you or no-one knows where you are you're more likely to die. Don't use alone. But if you do, tell someone you are about to use, and arrange to check in with them a few minutes later. **Think about where you're using. If you drop, will you be found?**

Supervised injecting

At the medically supervised injecting room (MSIR) in North Richmond, you can inject drugs in a safer health setting and get help from trained staff if you overdose. Most people who overdose at the MSIR only need oxygen because staff are there to help quickly. The MSIR is a free, confidential, non-judgemental service for adults. **Think about where you're using. Inject where you can get proper help if you overdose.**

Try snorting, smoking or swallowing instead of injecting

Injecting drugs increases your risk of overdose because less is needed to achieve the same effect. It's a lot harder to predict the dosage amount when injecting. **Consider other ways of taking drugs. If you do inject, test a small amount first.**

Be careful with pharmaceutical drugs

Some pharmaceuticals are a lot stronger than street drugs. It's riskier if you're using multiple drugs.

Try to use one drug at a time.

History of overdose

If you have overdosed in the past, you might have damage to your kidneys, liver or brain. This increases your risk of future overdose.

STIMULANT OVERDOSE

Stimulant drugs include speed, ice, cocaine and ecstasy.

Signs of a stimulant overdose include:

- Severe headaches
- Chest pain
- Unsteady walking
- Hot, flushed or very sweaty skin
- Rigid muscles or tremors, spasms, jerky movement of the limbs, and seizures
- Severe agitation or panic
- Difficulty breathing
- Confusion or disorientation.

DO

- Call 000 and stay with them
- Move them somewhere quiet or try to calm their surroundings
- Tell them that everything is going to be OK
- If they are overheating, loosen clothing and try to reduce their body temperature by putting icepacks or a cold, wet cloth at their neck and under their arms
- If they're still overheating put a wet towel with cold water and place over their body
- If the person is unconscious put them in the recovery position
- If they start to fit, move anything that might cause injury away from them.

DON'T

- Leave the person alone
- Try to bring them to a doctor or hospital yourself
- Call a doctor or hospital directly.