

The Opioid Crisis

FACT SHEET

March 2018

History and Severity of the Crisis

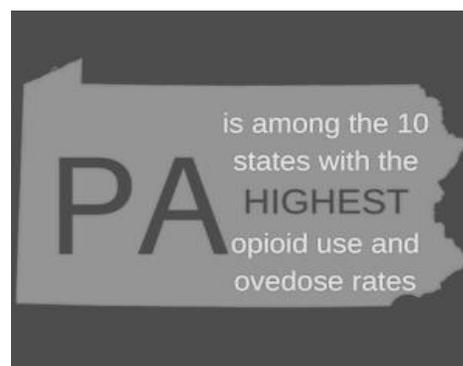
According to the National Institute on Drug Abuse:

In the late 1990s, pharmaceutical companies reassured the medical community that patients would not become addicted to prescription opioid pain relievers, and healthcare providers began to prescribe them at greater rates. This subsequently led to widespread diversion and the misuse of these medications before it became clear that these medications could indeed be highly addictive. Opioid overdose rates began to increase.

(<https://www.drugabuse.gov/drugs-abuse/opioids/opioid-overdose-crisis>)

Today, the National Institute on Drug Abuse estimates that approximately 115 people die every day in the United State due to opioid overdoses. Misuse of, and addiction to, prescription pain relievers, heroin, fentanyl, and other synthetic opioids is a public health crisis that costs the United States approximately \$78.5 billion per year.

The crisis has hit Pennsylvania particularly hard. The Pennsylvania Department of Drug and Alcohol Programs reports that “one in four families struggle with a substance abuse problem.”



Source: <https://www.overdosefreepa.pitt.edu/wp-content/uploads/2017/04/Overdose-.jpg>

Danger to Law Enforcement

Some opioids have harmful physical effects on bystanders. Synthetic opioids, such as fentanyl and carfentanyl, and drug cocktails with synthetic opioids, such as Gray Death, are significantly more potent than heroin or morphine. Even casual exposure to them via bare skin can be life-threatening.

The U.S. Department of Justice warns:

There is a significant threat to law enforcement personnel, and other first responders, who may come in contact with fentanyl and other fentanyl-related substances through routine law enforcement, emergency or life-saving activities. Since fentanyl can be ingested orally, inhaled through the nose or mouth, or absorbed through the skin or eyes, any substance suspected to contain fentanyl should be treated with extreme caution as exposure to a small amount can lead to significant health-related complications, respiratory depression, or death.

(https://www.dea.gov/druginfo/Fentanyl_BriefingGuideforFirstResponders_June2017.pdf)

As reported by PoliceOne.com, “Fentanyl is more potent than heroin and 100 times more potent than morphine, and it can be deadly when trace particles of the narcotic are accidentally inhaled. Both law enforcement personnel and K-9 units are at risk from accidental exposure ... As the usage crisis worsens, the potential for exposure among police and other first responders increases.”

(<https://www.policeone.com/police-products/Narcotics-Identification/articles/411224006-The-opioid-crisis-requires-a-new-approach-to-narcotics-field-testing/>)

Universal Precautions and Treatment

Use proper personal protective equipment (PPE) when taking samples or working around powdered substances. A proper PPE kit should include:

- Nitrile gloves
- N-95 dust masks
- Sturdy eye protection
- Paper coveralls – shoe covers
- Naloxone injector(s)

Universal precautions should be employed when dealing with the substance or anything that may have come in contact with it.

If exposure occurs:

- Seek **immediate** medical attention
- Remove the exposed individual from the contaminated environment (preferably to a location with fresh air)
- If they exhibit signs of overdose, immediately administer naloxone (by personnel trained in its use)
- Multiple doses of naloxone may be required, depending on the drug's purity and potency
- Where there has been any skin contact, wash the exposed area immediately with soap and water
- Do NOT use hand sanitizer, as the alcohol contained in it may increase the absorption of fentanyl through the skin

(Based on information from the U.S. Department of Justice)

Act 139 of 2014

The Opioid Overdose Reversal Act 139 of 2014 (also known as David's Law) "allows first responders (law enforcement, fire fighters, EMS) acting at the direction of a health care professional authorized to prescribe naloxone, to administer the drug to individuals experiencing an opioid overdose. The law also provides immunity from prosecution for those responding to and reporting overdoses."

http://www.ddap.pa.gov/overdose/Pages/Naloxone_Reversal.aspx

Additional Resources/Information

- **Pennsylvania County Resources:** <http://bit.ly/2BHppcs>
- **Act 139 Training for First Responders:** <http://bit.ly/2Caaetm>
- **Opioid Overdose Prevention Toolkit:** <http://bit.ly/2oeG6Em>
- **Overdose Free PA:** <http://bit.ly/2GuGipZ>
- **Get Naloxone Now:** <http://bit.ly/2FigmYm>

Recognizing Synthetic Opioids

Fentanyl-related substances may take the form of powder, pill, capsule, and liquid or may be found on blotter paper. In powder form, fentanyl may look similar to confectioner's sugar.

Gray Death, an illicit opioid combination that may include a variety of drugs, is so named because of its gray or ashen color.



Symptoms of Exposure

- Cardiac arrest
- Respiratory depression or arrest
- Drowsiness
- Sedation
- Disorientation
- Unresponsiveness
- Pinpoint pupils
- Clammy skin
- Bluish or purplish lips or fingernails
- Vomiting or gurgling

Onset of symptoms is usually within minutes of exposure.