

## Naloxone works!



Written by Dr Judith Yates

A young man followed me into the hostel reception area, smartly dressed in his best suit and tie. Looking at his carefully combed hair, I thought he must have come from a day in Court so I was surprised when he waved a shiny new naloxone kit in the air and the reception staff gave a cheer. Robert looked surprised but pleased: I doubt he was accustomed to such praise. I was told that the previous night he had saved the life of a fellow resident: "The man had stopped breathing. His waking up was like a miracle".

Robert had dressed that morning in his Sunday best, proud about what he had done and had just returned from his treatment provider with a new replacement kit. The person he had helped to rescue was now recovering in hospital, and it was clear that the rescuer had also been through a life-changing event.

It was a cold day just before Christmas in December 2013. I was visiting the Birmingham hostel with my bag full of naloxone kits. I am a GP, and normally I take care to follow rules and regulations, but as I will explain this was not a routine visit.

At that time we were the only city in England with a policy to get naloxone kits to everyone who used drugs. We had by that month handed out more than 1000 kits, but strangely we were not allowed by the then UK regulations to supply them directly to hostel staff to keep with their first aid kits

My visit to that hostel was part of my scheme, as a GP trying to reduce drug related deaths, to make sure naloxone kits were available in the places where they might be needed and where some might be used in the dangerous pre-Christmas and New Year season. In England at that time naloxone was treated as a "prescription only" medication, so could only be supplied to a person who was at risk of an opiate overdose and strictly kits could not be given directly to hostel staff.

This was a crazy rule for naloxone, which can save lives only if it is in the right place at the right time. Because of these regulations, when someone overdosed and lost consciousness, staff were left running around the hostel trying to find a resident who might have naloxone, while at the same time anxiously waiting for the arrival of paramedics. Precious minutes in attempting to save life were lost.

We had already found that the kits we handed out to people who used drugs were not usually used to treat the person for whom they were prescribed, but more frequently were used by somebody else, to save the life of a completely unrelated person. To make sure kits were always available when needed, though not yet strictly in line with the rules, I made kits available to several hostels that winter.

Two years later in October 2015, following a long period of campaigning, the law was changed in the UK to allow kits, as well as training in the management of overdose, to be given directly to anybody who might find themselves first on the scene, including family, friends, hostel workers and anybody else who might be able to help. Even more usefully, the changes removed the need for a nurse to see everybody before kits were dispensed, or for a prescriber's signature to be obtained for each distributed kit. The kits can now be handed out directly by a trained drug worker.

The man I met in the hostel three years ago has been joined as a life-saver by many other members of our local drug using population as well as by family members, friends and support workers, who are all proud to have the training and the tools to help keep people safe. We now have more than 3000 kits out in the community and many will be used this winter.

The UK Office of National Statistics reported this month that in England and Wales, "Deaths involving heroin and/or morphine doubled in the last 3 years to 1,201 in 2015, and are now the highest on record". In contrast, in Birmingham, in the two years since that day in 2013, the number of people who have died of opiate overdose has fallen, against the rising national trend.

You might think there would be no longer any need for me to do the same this Christmas, delivering naloxone kits to places where they might be needed, as policies and guidelines are all in place, but amazingly there are still many parts of England where kits are not provided. I find it hard to understand why despite the evidence there are still some people and even some commissioners of drug treatment services who question the value of provision of these life saving kits. They not only reduce the number of drug related deaths but also by reviving people quickly, can reduce the damage to the brain and other organs, which can follow non-lethal overdose.

In the same way that seat belts cannot prevent all road traffic accident deaths, so naloxone can never be the only answer to prevent overdose deaths, but it is certainly a powerful tool. Though England now has policies and guidelines in place, energy and perseverance are still needed in this country and around the world to get these cost effective kits out of the cupboards and into the communities where they can be used to be part of the solution. Nobody needs to die from a heroin overdose.