

**Anyone Can
Become Addicted.
Anyone.**



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PAStop.org Family Toolkit



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Seeking Drug Misuse Treatment: Know What to Ask

Trying to identify the right treatment programs for a loved one can be a difficult process. The National Institute on Drug Abuse (NIDA) recommends asking the following questions when searching for a treatment program:

Q: Does the program use treatments backed by scientific evidence?

A: Effective Substance Use Disorder (SUD) treatments can include behavioral therapy, medications, or, ideally, their combination. Examples of evidence-supported behavioral therapies are cognitive behavioral therapy, motivational incentives, and motivational interviewing. Medications are an important part of treatment for many patients, especially when combined with behavioral therapies.

Q: Does the program tailor treatment to the needs of each patient?

A: No single treatment is right for everyone. The best treatment addresses a person's various needs, not just his or her drug misuse. For example, a patient may require other medical services, family therapy, parenting support, job training, and social and legal services. Because SUDs and other mental disorders often occur together, a person with one of these conditions should be assessed for the other. And when these problems co-occur, treatment should address both (or all conditions).

Q: Does the program adapt treatment as the patient's needs change?

A: Individual treatment and service plans must be assessed and modified as needed to meet changing needs. For most people, a continuing care approach provides the best results, with treatment level adapted to a person's changing needs.

Q: Is the duration of treatment sufficient?

A: Research tells us that most people with drug dependency need at least three months in treatment to really reduce or stop their drug misuse and that longer treatment times result in better outcomes. The best programs will measure progress and suggest plans for maintaining recovery.

Q: How do 12-step or similar recovery programs fit into drug treatment?

A: Although they are not professional treatment, self-help groups can complement and extend the effects of professional treatment.

Material adapted for PAStop from "Seeking Drug Abuse Treatment: Know What to Ask" by the National Institute on Drug Abuse.

Sponsored by the Commonwealth Prevention Alliance through funding made available by the Pennsylvania Commission on Crime and Delinquency (PCCD)

Facts About Opioid Overdose



How Does an Overdose Occur?

Opioid overdose can occur when a patient misunderstands the directions for use, accidentally takes an extra dose, or deliberately misuses a prescription opioid or an illicit drug such as heroin. Also at risk is the person who takes opioid medications prescribed for someone else, as is the individual who combines opioids — prescribed or illicit — with alcohol, certain other medications, and even some over-the-counter products that depress breathing, heart rate, and other functions of the central nervous system.

How to Avoid Opioid Overdose

- 1.** Take medicine only if it has been prescribed to you by your doctor.
- 2.** Do not take more medicine or take it more often than instructed.
- 3.** Call a doctor if your pain gets worse.
- 4.** Never mix pain medicines with alcohol, sleeping pills, or any illicit substance.
- 5.** Store your medicine in a safe place where children or pets cannot reach it.
- 6.** Learn the signs of overdose and how to use naloxone to keep it from becoming fatal.
- 7.** Teach your family and friends how to respond to an overdose.
- 8.** Dispose of unused medication properly.

What Is Naloxone?

Naloxone (Narcan) is an antidote to opioid overdose. It is an opioid antagonist that is used to reverse the effects of opioids. Naloxone works by blocking opiate receptor sites. It is not effective in treating overdoses of benzodiazepines (such as Valium, Xanax, or Klonopin), barbiturates (Seconal or Fiorinal), clonidine, Elavil, GHB, or ketamine. It also is not effective in treating overdoses of stimulants such as cocaine and amphetamines (including methamphetamine and Ecstasy). However, if opioids are taken in combination with other sedatives or stimulants, naloxone may be helpful.



Opioid Overdose Toolkit (continued)

Where Can I Get Naloxone?

In 2014, Pennsylvania made it legal for family and friends of opiate users to obtain naloxone prescriptions. Any physician can prescribe naloxone. Some counties (such as Allegheny County) have issued a standing order for naloxone which allows anyone to obtain it directly from a pharmacy without a prescription. Make sure to check with your pharmacist to see if he/she dispenses naloxone. Currently, most Pennsylvania pharmacies do not dispense naloxone, but the list of pharmacies who do is growing.

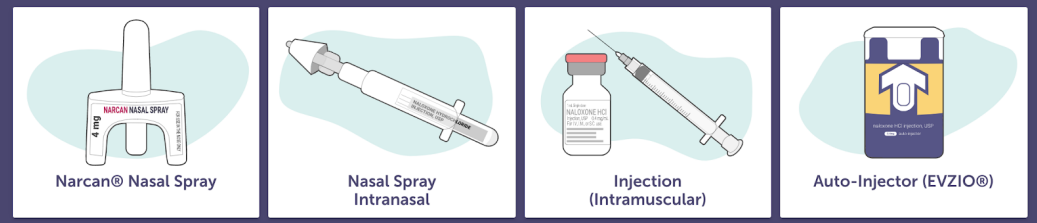
For more information about Naloxone availability in Pennsylvania, visit the Pennsylvania Department of Health website [HERE](#).



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Material adapted for PASTop from "Facts About Opioid Overdose" by SAMHSA. Sponsored by the Commonwealth Prevention Alliance through funding made available by the Pennsylvania Commission on Crime and Delinquency (PCCD)

Types of Naloxone



How to Dispose of Unused Medicines

There are Several Ways to Safely Dispose of Unused Medications:

- 1.** See if a drug take-back program is available in your community. There are medication drop boxes in many areas of the state for safe disposal. The PA Department of Drug and Alcohol Programs (DDAP) has a searchable database of take back locations [HERE](#).
- 2.** Check with your local Drug and Alcohol Agency or police department to see if there are any medication take-back programs in your area, such as the ones previously held by the DEA.
- 3.** Throw the drugs in the household trash only when following these steps:
 - Remove them from their original containers and mix them with an undesirable substance, such as used coffee grounds or kitty litter.
 - Place the mixture in a sealable bag, empty can, or other container to prevent the drug from leaking or breaking out of a garbage bag.

Other Tips Before Throwing Out a Medicine Container:

- Remove/scratch out all identifying information on the prescription label to make it unreadable.
 - Do not give your medicine to friends. A medicine that works for you could be dangerous for someone else.
 - When in doubt about proper disposal, talk to your pharmacist.
- 4.** Some medications can be disposed of safely by flushing down the toilet, but, it is important to know which ones.

If the drug labeling/patient information instructs you to flush the medication or if it appears on the FDA list, flush it. If the medication does not appear on the FDA's list and the drug labeling/patient information does not specifically instruct you to do so, do not flush it. Refer to the following link for further information: "[Flush List](#)"

Material adapted for PAStop from "How to Dispose of Unused Medicines" by the Food and Drug Administration. Sponsored by the Commonwealth Prevention Alliance through funding made available by the Pennsylvania Commission on Crime and Delinquency (PCCD)



Medication-Assisted Treatment For Opioid Dependency

- **Medication**
- **Counseling**
- **Support from Family & Friends**



Medication-assisted treatment is one way to help those with Opiate Misuse Disorder recover their lives. There are three equally important parts to this form of treatment: medication, counseling, and support from family and friends. These three parts work together to help people recover.

Treatment helps people move into healthy lifestyles – referred to as recovery.

Addiction Can Be Treated

Opioid Use Disorder can be treated.

Treatment helps people stop using the problem drug. It helps them get through withdrawal and cope with cravings. Treatment also helps them move away from other harmful behaviors, such as drinking alcohol or abusing other drugs. Just as important, treatment helps people address life issues they might have that are tied to the addiction, such as feelings of low self-worth, a bad situation at work or home, or spending time with people who use drugs. In short, treatment helps people move into healthy lifestyles – referred to as recovery. Treatment may include medication.

Medication

Medication-assisted treatment includes the use of medications for Opioid Use Disorder (MOUD) along with counseling and other support. Treatment that includes medication is often the best choice for opioid dependency.

If a person is opioid dependent, medication allows him or her to regain a normal state of mind, free of drug-induced highs and lows. It frees the person from thinking all the time about the drug. It can reduce problems of withdrawal and craving. These changes can give the person the chance to focus on the lifestyle changes that lead back to healthy living.

Taking medication for opioid dependency is like taking medication to control heart disease or diabetes. It is NOT the same as substituting one problem drug for another. Used properly, the medication does NOT create a new dependency. It helps people manage their dependency so that the benefits of recovery can be sustained.

There are three main choices for medication.

The most common medications used in treatment of substance use disorder are methadone and buprenorphine. Sometimes another medication, called naltrexone, is used. Cost varies for the different medications. This may need to be taken into account when considering treatment options.



Medication-Assisted Treatment For Opioid Dependency (continued)

Methadone and buprenorphine trick the brain into thinking it is still getting the opioid. The person taking the medication feels normal, not high, and withdrawal does not occur. Methadone and buprenorphine also reduce cravings.

Naltrexone helps overcome dependency in a different way. It blocks the effect of opioid drugs. This takes away the feeling of getting high if the drug is misused again. This feature makes naltrexone a viable option to help to prevent relapse (falling back into problem drug use).

Methadone to treat an SUD is dispensed only at specially licensed treatment centers. Buprenorphine and naltrexone are dispensed at treatment centers or prescribed by doctors.

Medication is matched to the person.

The right medication has been found when the person feels normal, has minor or no side effects, does not feel withdrawal, and has cravings under control.

Following directions is important, because taking the medication improperly can lead to overdose or death.

People can safely take treatment medication as long as needed— for months, a year, several years, even for life. Sometimes people feel that they no longer need the medication and would like to stop taking it. Use of methadone and buprenorphine must be stopped gradually to prevent withdrawal. Stopping naltrexone does not cause withdrawal. Plans to stop taking a medication should ALWAYS be discussed with a doctor.

Counseling

Counseling can provide encouragement and motivation to stick to treatment. It can teach coping skills and how to prevent relapse. And it can help people learn how to make healthy decisions, handle setbacks and stress, and move forward with their lives.

In group counseling, people connect with others in treatment and make new friends who don't use drugs. They can get these benefits from support groups, too. These are informal meetings of people facing similar challenges.

Support from Family and Friends

It is extremely hard to initiate and work the recovery process alone. Support from family and friends can help a person make the decision to enter treatment and stick with it.

Material adapted for PAStop from "Medication-Assisted Treatment for Opioid Addiction: Facts for Families and Friends" by the Substance Abuse and Mental Health Services Administration (SAMHSA). Sponsored by the Commonwealth Prevention Alliance through funding made available by the Pennsylvania Commission on Crime and Delinquency (PCCD)

Naloxone for Community Members in Pennsylvania

Q: What is Naloxone?

A: Naloxone (also known by brand names Narcan and Evzio) is the medication historically used in hospitals and ambulances to reverse opioid overdose and keep people alive. Opioids are pain medications (like Vicodin, OxyContin, morphine, methadone, fentanyl, Percocet, Opana) and heroin.

Naloxone is only effective for opioid overdoses. It cannot reverse an overdose from alcohol, benzodiazepines, cocaine, or other drugs if opioids are not present. But since most overdose deaths involve opioids, it is an important rescue medication.

Naloxone is very safe. Giving naloxone to someone who has not taken opioids will not harm them, so it is routinely used whenever overdose is suspected.

Q: What does Naloxone Look Like?

A: Naloxone is available in four common formulations.

Injectable

This type is the least expensive and is easy to use, but involves a syringe injection.



ADAPT Nasal

This is an easier-to-assemble intranasal formulation.

IMS Intranasal

This type does not require a needle, but is a little more complicated to assemble.



Auto-Injector

This auto-injector is easy to administer and is durable, but can be expensive if your insurance doesn't cover it.

Note that the use of any naloxone formulation can cause the overdose victim to experience opioid withdrawal symptoms. These are usually not serious health concerns.

Q: Who Can Access Naloxone?

A: In Pennsylvania, naloxone is available by prescription to anyone who uses opioids themselves and also to “bystanders,” A bystander is a person in a position to assist a person having an opioid overdose. That includes friends or family members of opioid users, people who work in places with public restrooms, Uber drivers—basically, anyone.



Naloxone for Community Members in Pennsylvania (continued)

Q: **How Can Naloxone Be Obtained?**

A: Naloxone is a prescription medication, but many states have passed laws making it available by a “standing order” prescription. This is much like getting a vaccine at a pharmacy: it is still “prescribed,” but you don’t have to see your doctor first in order to get it.

In Pennsylvania, the state Physician General has written a standing order that any pharmacy can use, so you should be able to go into any pharmacy and pay for naloxone yourself or have it billed to your insurance.

Pharmacies: Not all pharmacies carry naloxone or take part in the standing order. Call your local pharmacist and ask them if they have it before you go. If the pharmacy doesn’t have it in stock, they may be willing to order it.

Insurance: Many insurance carriers, including Medical Assistance, cover naloxone. However, be aware that insurance reimbursement may be different depending on which type of formulation you receive (e.g., injectable, intranasal). Your insurance reimbursement may also differ according to who the naloxone is intended for—you or another person. Your insurance benefits manager can explain these reimbursement differences.

The Bottom Line: The law that allows bystanders to obtain naloxone in Pennsylvania (Act 139 of 2014) is relatively new, which means that some pharmacies and insurance carriers may not be up to speed. Not all Pennsylvanians are able to obtain naloxone smoothly, a fact that is changing as providers and payers become more familiar with the law.

Q: **What Are Other Ways to Get Naloxone?**

A: Some community organizations supply naloxone at no cost to people who may need it, including:

Prevention Point Pittsburgh: [LINK](#)
Prevention Point Philadelphia: [LINK](#)

Training and More Information

Anyone interested in obtaining naloxone should learn how to use it. Simple trainings are available on-line at no cost.

Visit **Prescribe to Prevent:** [LINK](#)

For more information about naloxone or overdose prevention in Pennsylvania, contact your Single County Authority agency: [LINK](#)

Online information is also available at:

- GetNaloxoneNow.org
- [The PA Department of Drug & Alcohol Programs](#)

