Overdose Prevention

Overdose happens when a person takes more of a drug or combination of drugs than the body can handle. As a consequence, the central nervous system (CNS) is not able to control basic life functions. The person may pass out, stop breathing, have heart failure, or experience seizures. Other signs of overdose are slow or faint pulse, blurred vision, and excessive drooling. Overdose can be fatal, although in a majority of cases it is not. However, there are ways to prevent overdose from happening.

It is important to remember that anyone can overdose. First-time users, long-time users, old people, young people, and everyone in between are susceptible. There is no exact formula for determining how much of a certain drug, or combination of drugs, will lead to an overdose. The amount of a drug (or drug combination) that causes a person to overdose can fluctuate, so users should be advised that there is no such thing as a real “safe dose.”

Factors That Can Increase Overdose Risk

Tolerance
A person’s tolerance for a drug (or combination of drugs) can change for a variety of reasons. If a person has gained or lost weight, started taking new medications, is experiencing depression or exhaustion, or is beginning to use again after a period of abstinence. It is likely that a smaller dose than they previously used will get them high, and that the usual dose may cause overdose.

Mixing drugs
- Mixing drugs of the same class like opiates, pills, and alcohol (all depressants) together can be very dangerous and is one of the most common reasons for overdose. Mixing drugs also may increase the risk for passing out and vomiting, which can block a person’s airway if he or she chokes.
- Mixing drugs of different classes (i.e.: mixing stimulants and depressants) is also dangerous.
- Alcohol plays an important role in the majority of mixed substance overdoses and should not be discounted as a powerful sedative, especially when mixed with other depressants such as opiates and benzodiazepines. In addition, the dehydration caused by many stimulant drugs may be made much worse by consuming alcohol.
- There is great potential for interactions when mixing prescription drugs with street drugs because both illegal and legally prescribed drugs are very often metabolized by the same systems in the body.
- If prescribed the appropriate dose of methadone or buprenorphine by a doctor, patients in medication assisted drug treatment should not feel symptoms of withdrawal or extreme craving for street drugs and if street drugs are taken the patient is unlikely to experience a high. The use of street drugs or alcohol on top of methadone or buprenorphine increases overdose risk, especially with methadone, but patients in medication assisted drug treatment have a lower risk of opiate overdose death. Also, naltrexone (while it is being taken) protects against opiate overdose.
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**Accumulation**
Sometimes a person overdoses because she simply did too much in too short an amount of time. If the drugs (including alcohol) build up in the body faster than the body can metabolize them, this can lead to overdose. Especially in the cases of cocaine and long-lasting benzodiazepines, it is tempting to re-dose before the body is ready because the high often wears off before the drug is sufficiently cleared from the body.

**Past overdose events**
Recent research has shown that people who have overdosed in the past are at much greater risk of future overdose. If you have overdosed in the past, know that you may be at greater risk in the future.

**Health status**
Weakness due to recent illness, dehydration, or under-nutrition will likely make the body unable to handle the same dose as a healthy body. Overdose is more likely if the liver and/or kidneys are not working well.

**Inconsistent drug quality and potency**
There is no “quality control” for street drugs, so it is hard to tell what you are getting. Every time there is a new dealer or a new batch of drugs on the scene, the drug’s strength can change. Especially in areas where the drug scene is heavily policed or drug supply is inconsistent, it is likely that the strength and quality of the drugs available varies greatly from day to day. A person’s regular amount may lead to overdose if the drugs are unexpectedly strong.

**Using alone**
Using alone does not cause an overdose, but it does increase the chance that if a person does overdose, she will die because no one is around to help.

**Route of administration**
The route of drug administration determines how quickly the drug takes effect. You’re less likely to overdose from snorting or smoking drugs than injecting them.
Overdose Prevention

You are engaged in treatment at Epoch Counseling Center in order to develop skills to avoid substance use and cultivate your recovery. However, it is important to be prepared with an overdose prevention plan in case a relapse occurs. Below you will find several statements that may be included in your prevention plan, but not all of them will apply to everyone. Choose the ones that will be most helpful to you. Remember, the best way to prevent overdose is *ABSTINENCE*.

My Overdose Prevention Plan

I, ________________, have been given information about overdose and risk factors. I understand that abstinence is the only way to ensure that overdose doesn’t happen to me. However, in case I do relapse, I agree to take the following precautions to prevent overdose:

- I will consider that my tolerance may be lower after a period of abstinence and avoid using large amounts of opiates, benzodiazepines, and/or alcohol.
- I will avoid mixing drugs, particularly of the same class of drug, and will avoid mixing drugs and alcohol.
- I will avoid mixing medications prescribed by a doctor with street drugs.
- I will avoid abusing my prescription medication and only take them as prescribed.
- I will be cautious about where I get my drugs and aware that the strength of the drug may vary from dealer to dealer.
- I will avoid using alone in order to have someone around to help in case of an overdose.
- I will avoid using drugs by injection.
- If I relapse, I agree to inform my counselor and discuss possible changes in treatment in order to avoid future relapse.

In addition to those statements selected above, I agree to:

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Client Signature ___________________________ Date __________

Counselor Signature ___________________________ Date __________

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