



Statewide Overdose Prevention Workgroup  
Overdose Prevention Fact Sheet  
2014

- **In Connecticut one person dies every day**, on average, from a drug related overdose. (CDC 2010: 372 drug-induced deaths, does not include alcohol-induced deaths). There were 2,231 opioid-involved deaths from 1997 to 2007. Nationwide, 18- to 24-year-olds are more likely to die from drug overdoses, primarily from prescription pain relievers, than from motor vehicle accidents.
- **Narcan™ (generic name Naloxone) is an opiate antidote.** Opiates include heroin as well as prescription opiates like morphine, codeine, OxyContin, methadone and Vicodin. Narcan is a prescription medicine that blocks the effects of opiates. It cannot be abused or used to get a person high. If given to a person who has not taken opiates it will not have any effect on them.
- According to the Office of National Drug Control Policy, **four out of five heroin users start** by developing an addiction to prescription opioid painkillers.
- **Heroin isn't the only cause for opioid overdose.** People with chronic pain with legitimate prescriptions may turn to heroin as a cheaper, more accessible option. Children may accidentally ingest prescription medications. Young people going to parties and experimenting may ingest unknown substances. **Opioid overdose occurs across age, gender, ethnic, and geographic strata, and in those using it medically and non-medically** (Journal of the American Medical Association Nov 14, 2012: 308(18): 1863-4.)
- In **October 2012, CT law (PA 12-159) allowed prescribers** (physicians, surgeons, PAs, APRNs, dentists and podiatrists) to prescribe, dispense or administer Naloxone to treat or prevent an opioid overdose. This is important because people who are overdosing cannot administer Naloxone to themselves. This provides parents, family members and friends and others peace of mind if someone they care about overdose.
- The National Association of Drug Diversion Investigators, the Office of National Drug Control Policy, the US Conference of Mayors, the AMA, WHO, ASAM, CDC, and the American Public Health Association are **urging wider access to Naloxone.**
- There are **highly successful Naloxone distribution programs** in Massachusetts and Rhode Island. Massachusetts has a model program in the Northeast where Emergency Medical Technicians (EMTs), police and firefighters are trained in administering Naloxone when responding to an overdose. Rhode Island and Massachusetts both have programs where people can obtain Narcan at participating pharmacies through a standing order from a medical provider or a collaborative agreement.

For more information, contact:  
Shawn M. Lang, Director of Public Policy, AIDS CT  
[slang@aids-ct.org](mailto:slang@aids-ct.org), 860.247.2437 X319