### 2023 Naloxone Update

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Director of Pharmacy Public Health Programs

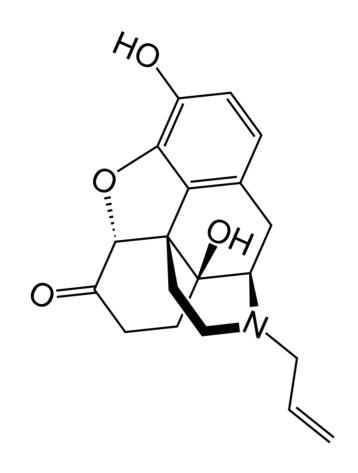
Kentucky Pharmacy Education & Research Foundation

### Objectives

- Learn a brief history of naloxone as well as the currently available formulations, including OTC
- Learn about the opioid antagonist nalmefene
- Be able to dispel some myths regarding fentanyl
- Understand what fentanyl strips are and how they work as a harm reduction tool
- Learn about changes to 201 KAR 2:360 and how it might be used to help your institution distribute more naloxone to high-risk individuals
- Learn about the Kentucky Naloxone Copay Program and how your institution might be able to use it to assist your patients.

#### Naloxone

- Patented in 1961 and first approved for use in humans in 1971
- Naloxone is a non-selective, competitive opioid receptor antagonist
- Mean serum half life is 30-81 minutes
- No known maximum dose
- No known drug interactions
- No known disease interactions
- Usually takes at least 1-2 minutes or longer to begin working



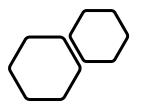
#### Naloxone 0.4mg and 2mg/2ml injection



• In the mid 2000s a mucosal atomization device was developed to provide the first (non-FDA approved) nasal delivery mechanism for naloxone. The atomizer was attached to the prefilled syringe using the Luer Lock system.

 Historically available as either a 0.4mg / ml IM/IV injection vial or ampoule as well as a 2mg / 2ml prefilled IM/IV syringe





### NARCAN® 4mg (naloxone HCL) Nasal Spray



- First FDA approved nasal delivery formulation of naloxone in 2015
- Packaged as two (2) single dose nasal sprays.
- Multiple generic formulations of the 4mg nasal spray now available.
- Approved to go over the counter (OTC) in the spring of 2023 and is currently available OTC at retail locations everywhere.



# NARCAN® 4mg OTC (naloxone HCL) Nasal Spray



- Same formulation as Rx Narcan
- Rx Narcan no longer available, however it will be found in circulation
- KY Medicaid is still covering the OTC formulation for patients once per month at no cost.
- OTC formulation is covered under the KY State Naloxone Prescription Copay Program
- MSRP is \$44.99 (May see locally higher prices)
- At least one generic OTC product has been approved and will arrive by Q1 24

### NARCAN® Storage and Handling

- Store NARCAN® at room temperature between 59°F to 77°F (or for short periods of time between 39°F to 104°F).
- It is best practice to not freeze NARCAN®, however the manufacturer has frozen and thawed it multiple times in testing and the product is still effective.
- Keep NARCAN® in its box until ready to use and protect from sunlight.
- Replace NARCAN® before the expiration date on the box.

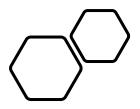
### NARCAN® Info and Safety Considerations

- NARCAN® is safe to use in infants, children, adults and seniors as well as pets.
- A patient does not have to be breathing for NARCAN® to work.
- No known drug interactions.
- No significant side effect profile
  - Dizziness
  - Tiredness
  - Flushing
  - Irritability
- Side effects may be related to withdrawal of opioids from the system as opposed to the NARCAN® itself.

### RiVive™ Naloxone Nasal Spray 3mg



- Produced by Harm Reduction Therapeutics (HRT), a 501(c)(3) nonprofit pharmaceutical company.
- HRT aims to provide nasal naloxone as close to manufacturer cost as possible with a stated goal that:
  - "No company, entity, or individual will profit from sales of RiVive™"
- No plans at this time to make available via retail outlets.
- Per HRT, price will be \$36 per two-dose unit
- Should be available Q4 2023 or Q1 2024



### KLOXXADO® (naloxone HCl) 8 mg Nasal Spray

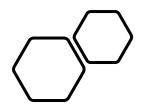
 KLOXXADO® was the first "high" dose naloxone product on the market with 8 mg of naloxone compared to 4 mg in NARCAN®

 KLOXXADO® is administered nasally exactly the same way as NARCAN®



### KLOXXADO® Storage and Handling

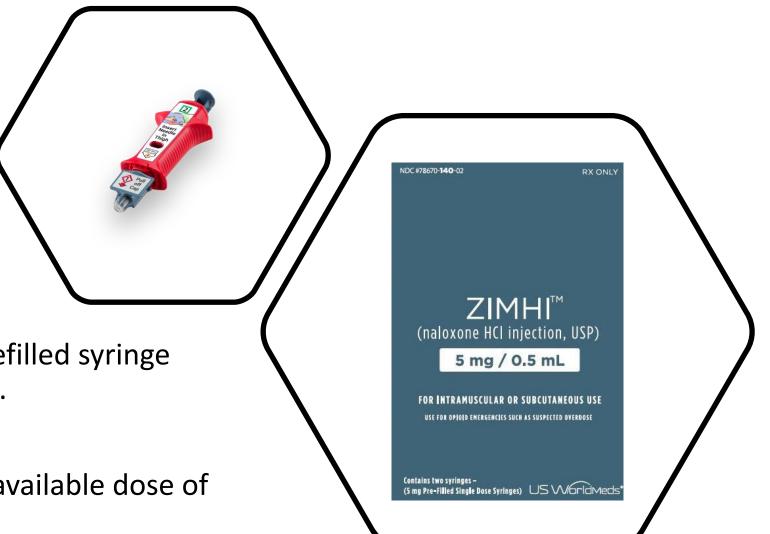
- Store KLOXXADO® at room temperature between 59°F to 77°F
- KLOXXADO® may be stored for short periods between 39°F to 104°F. Do not store above 104°F
- Do not freeze KLOXXADO®
- Keep KLOXXADO® in its box until ready to use. Protect from light.
- Replace KLOXXADO® before the expiration date on the box.



# ZIMHI® (naloxone HCl injection)

• ZIMHI® is naloxone in a prefilled syringe for intramuscular injection.

 ZIMHI® offers the highest available dose of naloxone at 5 mg/ 0.5 mL



#### ZIMHI® Administration



**PRESS** 

PRESS needle into outer thigh after twisting off needle cap



**PUSH** 

PUSH plunger to inject until it clicks and hold for 2 seconds before removing needle



**PULL** 

PULL the safety guard over the needle using one hand, with fingers behind the needle

### ZIMHI® Administration (cont'd)

**PLACE** 

PLACE the used syringe back into its blue case and close it

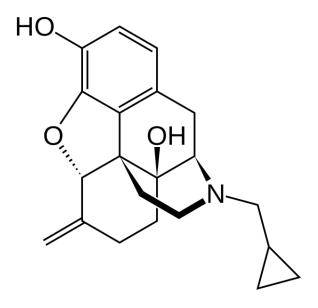


### ZIMHI® Storage and Handling

- Store ZIMHI in the outer case provided
- Store at controlled room temperature 68°F to 77°
- Do not refrigerate
- Protect from light, extreme heat, and freezing
- Prior to a medical emergency (during storage), periodically visually inspect ZIMHI through the viewing window on the device. If the solution is a yellow or brown color, cloudy, or contains particles, replace ZIMHI

#### Nalmefene

- Derivative of naltrexone, first reported in 1975
- Nalmefene is an opioid antagonist (like naloxone) used for the reversal of opioid drug effects
- First approved as an injectable product in 1995 and sold under the brand Revex. This product was discontinued by the manufacturer around 2008
- February 2022 the FDA approved Purdue Pharma's Nalmefene hydrochloride injection for medical use
- Serum half life of nearly 11 hours with the ability to reverse opioid intoxication for up to 8 hours



### Opvee® Nalmefene Nasal Spray 2.7mg



- On May 22, 2023, the FDA approved prescription nalmefene in a nasal delivery device similar to naloxone.
- Opvee® 2.7mg / 0.1ml nasal spray will be available in Q4 of 2023 or Q1 of 2024.

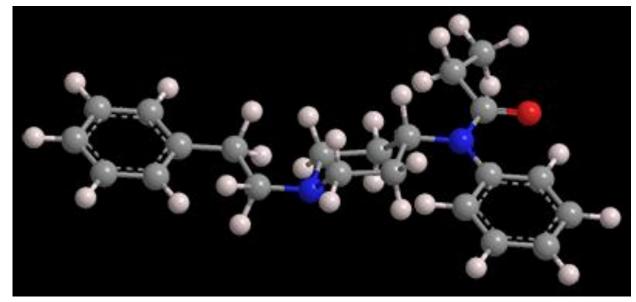
### Nalmefene Safety Considerations

 The most common adverse reactions reported with nalmefene injection were nausea, vomiting, tachycardia, hypertension, postoperative pain, fever, and dizziness

 Nalmefene, like all opioid antagonists, can cause acute withdrawal symptoms

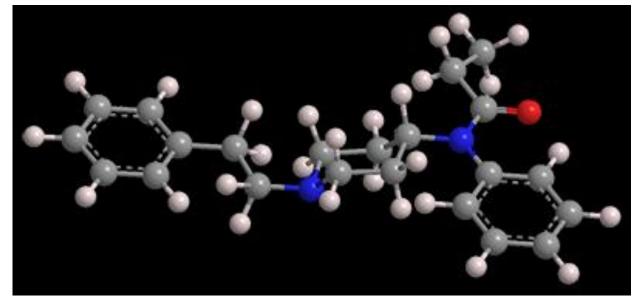
 Nalmefene is contraindicated in patients with known hypersensitivities to the product

- Fentanyl is a potent synthetic opioid.
  - It is up to 50 times stronger than heroin and 100 times stronger than morphine.



**American Chemical Society** 

- There are two types:
  - Pharmaceutical fentanyl
  - Unregulated fentanyl



**American Chemical Society** 

- Pharmaceutical fentanyl
  - Generic
  - •Sublimaze®
  - Duragesic<sup>®</sup>
  - •Actiq®



MMM - Medical, Marketing, & Media







Pfizer Hospital US



- Fentanyl is routinely administered in hospitals and by EMS to treat pain.
  - The usual starting dose is 50-100 micrograms or 0.05-0.1 milligrams.
  - The estimated lethal dose of fentanyl for a person with no tolerance is 2 milligrams (2000 micrograms) administered intravenously.



MMM - Medical, Marketing, & Media







Pfizer Hospital US



# Unregulated fentanyl

- includes fentanyl and fentanyl analogs
- and is found in many different forms.



RTI International



The Wall Street Journal





DEA DEA

### What is unregulated fentanyl?

- In powdered form, it looks like many other drugs.
  - Unregulated fentanyl may be added to
    - heroin
    - methamphetamine
    - cocaine





The Wall Street Journa





### What is unregulated fentanyl?

- Unregulated fentanyl may be pressed into counterfeit pills that look like
  - prescription opioids
    - generic oxycodone
      - M-30s
    - benzodiazepines
      - Xanax

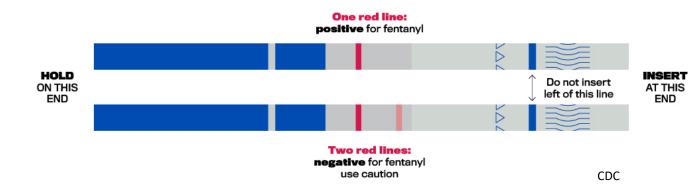


### What is unregulated fentanyl?

- It is impossible to tell if a substance contains fentanyl by appearance, taste, or smell.
  - Fentanyl test strips are the best way to detect fentanyl outside of a laboratory.



Stephen Crocker/Brown University

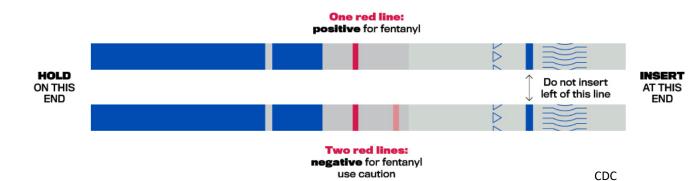


### What are fentanyl test strips?

- Fentanyl test strips (FTS) can detect the presence of fentanyl in powders and pills.
  - FTS work quickly results typically appear in five minutes.
  - FTS may not detect all fentanyl analogs.
  - FTS do not detect non-opioids such as xylazine.
  - A positive result is an opportunity for a person who uses drugs to avoid or use less of that substance.



Stephen Crocker/Brown University



### What are fentanyl test strips?

- In 2023, KY House Bill 353 was passed
- Prior to passage, fentanyl test strips were considered drug paraphernalia and thus illegal to possess or use.
- House Bill 353 decriminalized fentanyl test strips and they are now available to purchase online and have shipped to Kentucky residents.
- Many local health departments and harm reduction organizations are also making them available to individuals that use drugs.

#### Fentanyl can be deadly to people who use drugs.

- When people use drugs, they specifically choose routes of administration to ensure that the substances enter the blood and brain.
  - People using fentanyl overdose when they are intentionally
    - injecting,
    - snorting,
    - or smoking fentanyl,
  - but *not* routinely when handling or preparing the drug.



mckesson.com



filtermag.org



KUOW.org

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PMCID: PMC5711758 PMID: 28842825

ACMT and AACT Position Statement: Preventing Occupational Fentanyl and Fentanyl Analog Exposure to Emergency Responders

Michael J. Moss, <sup>1</sup> Brandon J. Warrick, <sup>2</sup> Lewis S. Nelson, <sup>3</sup> Charles A. McKay, <sup>4</sup> Pierre-André Dubé, <sup>5</sup> Sophie Gosselin, <sup>6</sup> Robert B. Palmer, <sup>7</sup> and Andrew I. Stolbach<sup>008</sup>

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The position of the American College of Medical Toxicology (ACMT) and American Academy of Clinical Toxicology (AACT), is as follows:

Fentanyl and its analogs are potent opioid receptor agonists, but the risk of clinically significant exposure to emergency responders is extremely low. To date, we have not seen reports of emergency responders developing signs or symptoms consistent with opioid toxicity from incidental contact with opioids. Incidental dermal absorption is unlikely to cause opioid toxicity. For routine handling of drug, nitrile gloves provide sufficient dermal protection. In exceptional circumstances where there are drug particles or droplets suspended in the air, an N95 respirator provides sufficient protection. Workers who may encounter fentanyl or fentanyl analogs should be trained to recognize the signs and symptoms of opioid intoxication, have naloxone readily available, and be trained to administer naloxone and provide active medical assistance. In the unlikely event of poisoning, naloxone should be administered to those with objective signs of hypoventilation or a depressed level of consciousness, and not for vague concerns such as dizziness or anxiety. In the absence of prolonged hypoxia, no persistent effects are expected following fentanyl or fentanyl analog exposures. Those with small subclinical exposures and those who awaken normally following naloxone administration will not experience long-term effects. While individual practitioners may differ, these are the positions of American College of Medical Toxicology and American Academy of Clinical Toxicology at the time written, after a review of the issue and scientific literature.

In 2018, The American College of Medical Toxicology (ACMT) and American Academy of Clinical Toxicology (AACT) released a position paper stating that

"the risk of clinically significant exposure to emergency responders is extremely low."

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## Skin absorption is "unlikely to cause toxicity."

- If a person covered both palms with fentanyl patches it would take 14 minutes for that person to receive 100 micrograms of fentanyl.
- This is just 1/20<sup>th</sup> of the lethal dose of 2 mg.



View the paper **HERE**.

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Inhalation can cause exposure if drug particles are suspended in the air.

This unlikely to occur

through casual contact

with a person who has overdosed,

but can happen

in factories where fentanyl is produced.

 In this situation over three hours of exposure is required for a person to receive 100 micrograms of fentanyl – 1/20<sup>th</sup> of a lethal dose.



dollar bills













school, causing employee to overdose September 11, 2022 | 3:54pm | Updated

The §an Diego Union-Tribune

'I'm not going to let you die': Deputy collapses after handling suspected fentanyl



Woman hospitalized after touching dollar bill she

believes contained fentanyl

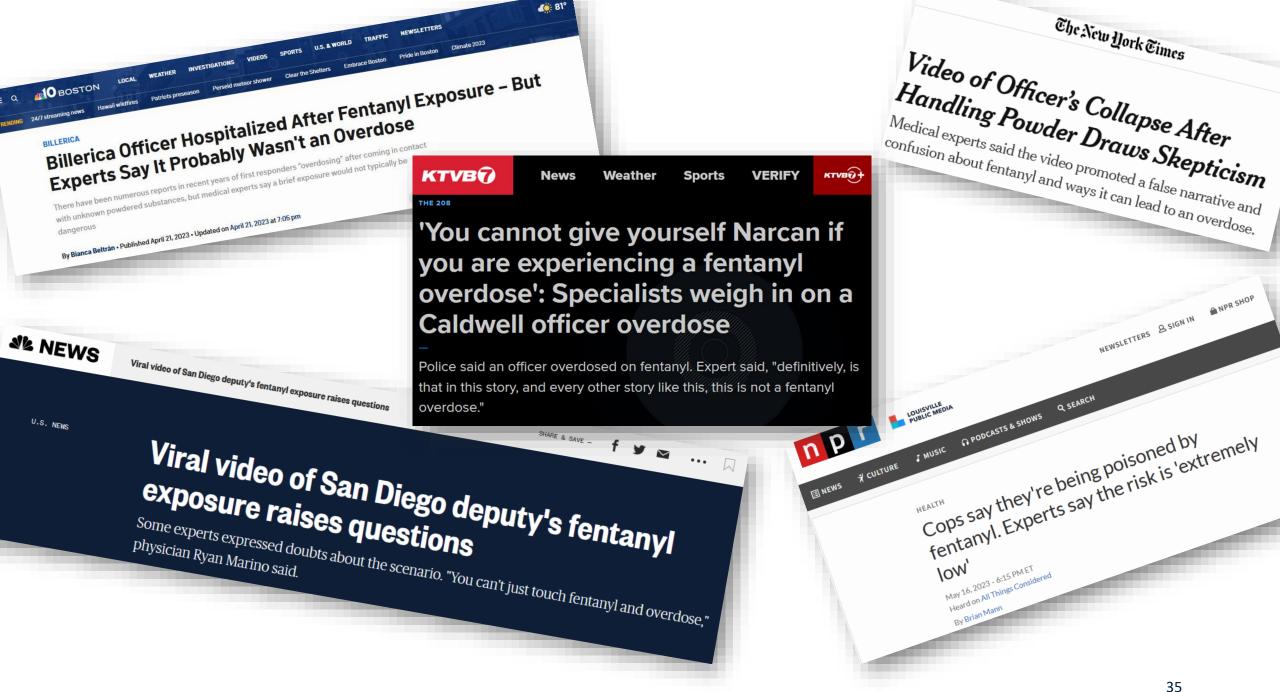


**NEW HAMPSHIRE** 

Officer Recalls Falling III to Fentanyl Exposure

By Katherine Underwood • Published June 15, 2017 • Updated on June 15, 2017 at





## 201 KAR 002:030, 201 KAR 002:360 and 201 KAR 002:460

- March of 2023, the Kentucky Board of Pharmacy approved an amendment to 201 KAR 002:030, 201 KAR 002:360 and 201 KAR 002:460
- Functionally the amendment allows a pharmacist to supply naloxone to an emergency department to be dispensed per protocol to an individual while also allowing the pharmacist one pharmacy business day to review the dispensing record.
  - This effectively removes legal barriers to hospital emergency departments dispensing take home naloxone to someone that might present to the ED when time with the patient is often short due to patients leaving AMA.
- Full text can be found at pharmacy.ky.gov, under the Statutes and Regulations section, at the bottom of the page under Recently Effective Regulations and Amendments or by scanning this QR code:

### Kentucky Naloxone Copay Assistance Program

- The Kentucky Opioid Response Effort (KORE) grant has a copay assistance program for naloxone at outpatient / retail pharmacies
- Program can be used to bill the copay of commercial insurance plans or for uninsured / cash patients.
- For OTC Narcan, the program can serve as a coupon if the insurance does not cover the product.
- Maximum benefit paid is \$45



Details can be found at <a href="http://www.kphanet.org/copay">http://www.kphanet.org/copay</a> or scan the QR Code:



#### References

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