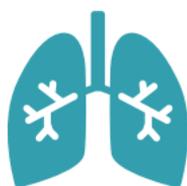


KNOW THE SIGNS OF AN OPIOID EMERGENCY

The following signs and symptoms indicate an opioid overdose emergency and highlight the need for administration of a reversal treatment while calling for medical assistance right away.



UNUSUAL SLEEPINESS OR UNRESPONSIVENESS



BREATHING WILL BE SLOW OR ABSENT



SLOW HEARTBEAT OR LOW BLOOD PRESSURE



SKIN FEELS COLD AND CLAMMY



PUPILS ARE TINY



NAILS AND LIPS ARE BLUE

**IN CASE OF
EMERGENCY
CALL 9-1-1**

If you suspect an opioid overdose, call 911 and get emergency medical assistance immediately.

BE AWARE, BE PREPARED

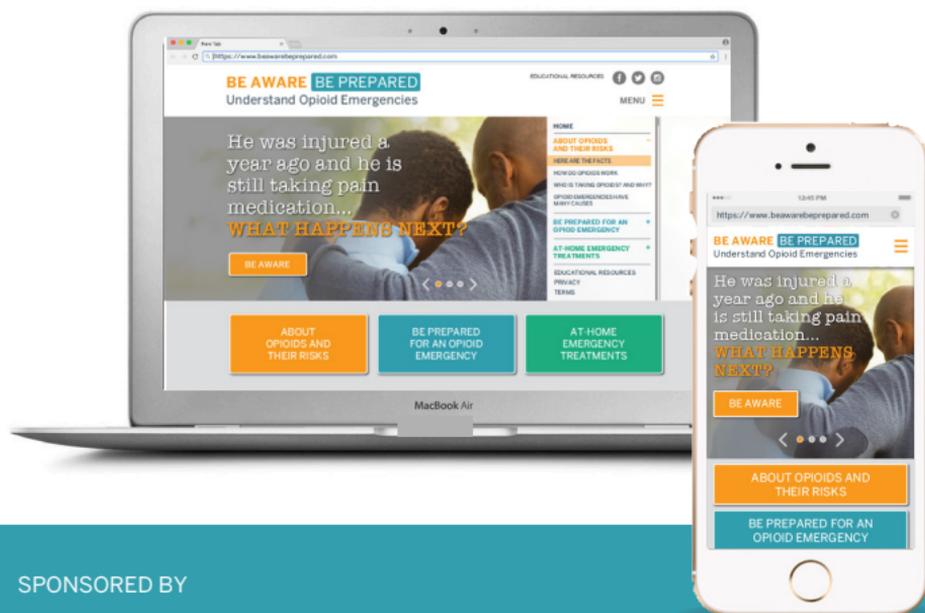
HELP START THE CONVERSATION AND LEARN MORE ABOUT EMERGENCY TREATMENT OPTIONS.

Talk to your healthcare provider or pharmacist about getting FDA-approved emergency treatment options for your home

- Go to [XXX.com](#) or call XXX-XXX-XXXX to get the Pharmacy Resources Form
- Learn more at [beawarebeprepared.com](#)

BE AWARE BE PREPARED

Understand Opioid Emergencies



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INSIDE...

THE SIGNS OF AN OPIOID EMERGENCY

ABOUT OPIOIDS AND THEIR RISKS

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AT-HOME EMERGENCY TREATMENTS

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He was injured
a year ago and
I'm concerned
that he's still
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**SHOULD I BE
WORRIED?**

**BE AWARE
ABOUT OPIOIDS
AND THEIR RISKS**

DID YOU KNOW?

~ 83% of opioid-related
deaths are **unintended or
accidental?**



See inside for more information

Her dose
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**WHAT CAN
I DO?**

TAKE ACTION

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Every **12.5 minutes**,
someone dies from **an opioid
overdose** in the United States.



See inside for more information

BE AWARE ABOUT OPIOIDS AND THEIR RISKS



THE FACTS

Prescription opioids are a class of powerful medications, prescribed by a healthcare provider to treat pain. While used for legitimate medical needs – including short- or sometimes long-term pain control, cough suppression, or to control severe diarrhea – prescription opioids are also sometimes used inappropriately for non-medical use.

It's important to understand that prescription opioids can be helpful to manage chronic pain, but they come with risks even when used appropriately. When used too frequently, inappropriately, or without a prescription.

In addition to prescribed opioids, there are also illegal opioid formulations. Although all formulations pose the risk for dependence or abuse, they do so to different degrees. The U.S. Drug Enforcement Agency (DEA) schedules opioids according to their acceptable medical use and potential for abuse or dependency.



While the majority of opioids are Schedule II drugs (i.e., medically acceptable when prescribed but with a high potential for abuse and/or dependency), some are Schedule I (No currently accepted medical use and a high potential for abuse). Schedule II prescription opioids include morphine, codeine, methadone, and oxycodone; Schedule I opioids include heroin.

Recognizing which medicines are opioids is an important step to prevent opioid emergencies! See a full list of brand and generic opioids available in the U.S. at www.xxxxxxxx/xxx/xxx//xL.com

HOW OPIOIDS WORK

Opioids attach to proteins (aka, *receptors*) in the brain, spinal cord, and gut. This produces a range of effects that include the release of chemical messengers to the brain, resulting in pain relief.

In addition to relieving pain, opioids can also cause life-threatening side effects, which include:

- 1) **slowed (suppressed) breathing;**
- 2) **low pulse; and**
- 3) **low blood pressure.**

These effects can start as quickly as 5 to 10 minutes after taking an opioid and, depending on whether opioids are taken by mouth, via a skin patch, or by injection, can peak within 30 minutes to an hour.

In 2017, more than 244M prescriptions were written and filled for opioids.



+244M
prescriptions

WHO'S TAKING OPIOIDS? AND WHY?

Opioids are commonly prescribed for acute, transient (i.e., short-term) injuries. However, they are also often prescribed for patients suffering from chronic, long-term pain; with increased dosing over time. Although many patients find themselves relying on opioid medications for pain relief, some grow dependent on them even though their underlying pain has gone away. Others may have borrowed an opioid prescription from a friend or family member to self-treat their pain or relieve anxiety or depression.



It is important to note that the use of opioids without a prescription is considered "illicit use," and may include "street drugs" like heroin, fentanyl, and carfentanil, all of which are significantly more potent than prescription-grade agents.

WORLD HEALTH ORGANIZATION RESOURCES

The World Health Organization (WHO) states that "people dependent on opioids are most likely to suffer an overdose." This includes people who use prescription opioids, people who use higher doses of prescription opioids, and people who use opioids in combination with certain other drugs.

However, any household that contains opioids may be at-risk. Knowing the risks and who's at risk, along with the steps to take in the event of an emergency, may mean the difference between life and death.

OPIOID OVERDOSE EMERGENCIES ARE MOST OFTEN ACCIDENTAL

There are many reasons for opioid overdose emergencies and most often, they are accidental and unintentional. In fact, opioid overdose emergencies can even occur when opioids are used as directed. Those at highest risk take moderate to high doses; consume certain other sedating medications or alcohol; have a history of substance abuse; and children, other family, friends and loved ones who have access to unlocked or unsecured prescription opioids. **For example:**

- > **Do you have a senior partner (65+) who is taking multiple medications, including sedatives or muscle relaxants, that can interact with opioids?**
- > **Has a loved one recently served time in prison and gone through forced treatment withdrawal?**
- > **Do you have children with ready access to the medicine cabinet?**
- > **Do you have a sibling with a mental health disorder, such as depression or anxiety?**

The bottom line is that anyone who uses opioids for pain control or for recreational purposes is at risk for an opioid emergency.

BE PREPARED FOR AN OPIOID EMERGENCY



HOW DOES AN OPIOID EMERGENCY OCCUR?

An opioid overdose emergency occurs when just enough opioid molecules overwhelm the brain and blocks the body's drive to breathe.

Signs of this life-threatening event include slow or shallow breathing, slowed heartbeat and weak pulse, a loss of consciousness, and pale, blue or cold skin.



Every second counts, especially if a person stops breathing – without sufficient oxygen, brain damage may occur within 4 minutes, and death can occur as soon as 4 to 6 minutes later. That's why it's critical to know the signs of an opioid overdose emergency.

EMERGENCY TREATMENT OPTIONS

Opioid emergency-related deaths can often be prevented if a person receives emergency medical care and timely administration of an opioid overdose emergency treatment. For years, treatments that quickly reverse the effects of an opioid overdose and help restore breathing have only been available in medical and hospital settings for use by trained personnel.

However, consumers are now able to purchase FDA-approved emergency treatments directly from the pharmacy, and many insurance plans cover them at a relatively low cost.

Go to www.URLHERE.com to download the Pharmacy Resources Form to help and learn more about emergency treatment.



Their role as an overdose reversal agent is critical, which is why the U.S. Surgeon General has promoted and reinforced consumer use of opioid emergency treatments in his first advisory in 13 years, emphasizing to anyone who may come in contact with a person overdosing to have an opioid emergency treatment on hand and within reach.

Risk of fatal overdose in children under 10 is more than **doubled (~2.5 times)** when an opioid is in their home.



AT-HOME EMERGENCY TREATMENTS



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Flip to the inside for more information

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