

# A GUIDE FOR SURVIVAL

TO LOCATE A NEEDLE-EXCHANGE PROGRAM, A SAFE-USE SITE, OR TO GET ANY INFORMATION RELATED TO SUBSTANCE USE OR TREATMENT: 1-866-332-2322 (Addiction Helpline) | www.stopods.ca | www.norquest.ca/staying-alive



# Resource Booklet

Safer Use

**Prevent Poisoning** 

**Self Care** 

Get Help

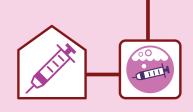
Reference List and Glossary

# Staying OPIOID MINE PHARMA REDUCTION









# **Supervised Consumption Sites**

These are places where you can use drugs in a monitored, clean environment and be protected from accidental opioid poisoning. If you are ready for a change, they can provide options: counseling, social work, and access to treatment.

### Calgary

Sheldon M. Chumir Health Centre

24 hours a day, 7 days a week 1213 - 4 Street SW (403) 955-6200

#### Grande Prairie

Northreach Supervised Consumption Services

10:00 AM – 10:00 PM, 7 Days a Week Rotary House

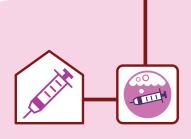
## Lethbridge

Mobile overdose prevention service (OPS) unit.

Outside the Lethbridge Stabilization Centre and Shelter, 802 - 2 Ave. N. 7 days a week from 8:00 AM to 4:00 AM

#### Red Deer

**Safe Harbour Society** (operated by Turning Point) 24 hours a day, 7 days a week 5246 - 53 Ave (403) 346-8858







#### **Edmonton**

#### **Boyle Street Community Services**

8:00 AM - 7:00 PM 10116 - 105 Ave (780) 424-4106

#### **Boyle McCauley Health Centre**

Monday – Thursday 8:30 AM – 7:30 PM Friday 8:30 AM – 3:30 PM Saturday 9:00 AM – 12:00 PM 10628 - 96 Street (780) 422-7333

#### **George Spady Centre**

8:00 PM - 8:00 AM 10015 - 105A Ave (780) 424-8335

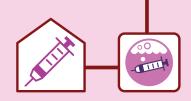
#### Royal Alexandra Hospital

In-patients only - 24 hours a day, 7 days a week 10240 Kingsway NW (780) 735-4111









# Methods Of Safer Use

## Swallowing:

- Slow release. You can take too much and overdose (opioid posioning) because you don't feel it right away.
- Can cause liver and stomach problems (like cancer, ulcers, and chronic heartburn).

### Smoking:

- Can damage lungs, or make asthma or allergies worse.
- Particles in the lungs increase risk of pneumonia.

## Snorting (rips or bumps):

- Can overdose by snorting high-dose prescription painkillers designed for time-release in the stomach. You get the entire dose at once.
- Particles in the lungs increase risk of pneumonia.
- Can have nosebleeds, loss of smell, problems swallowing.

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# Inserting (hooping - rectum or vagina):

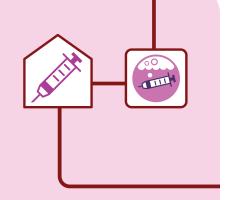
- Similar effects as snorting.
- Can cause infections and damage to surrounding areas, skin, muscles and nerves.

## Injecting (smashing):

- Sharing needles involves blood, which increases risk of Hep B, Hep C, HIV and other infections (including STIs).
- Grinding pills not meant for injecting can introduce particles into the bloodstream that can cause more damage (heart attack, stroke).
- Can develop skin and muscle infections.
- Direct route to bloodstream means higher risk of overdose.
- Can cause vein collapse, scarring, blood clots or unstoppable bleeding.



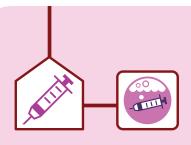




# **Use Sterile Supplies**

Re-using or sharing supplies puts you at risk of infection. Anything that comes in contact with your body while using can spread infections, not just needles but also pipes, cookers, vein ties, etc. You can get clean supplies from many places. There are vans that will come to you in many cities.

- Call the Addiction Helpline 1-866-332-2322 to find the closest supply distribution program.
- Purchase from a pharmacy or drug store.









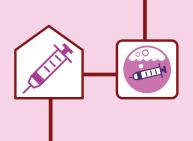
- Use the buddy system. If there is a problem, you can help each other and get help.
- Be careful when changing routes (like injecting when you are used to smoking). You might not be able to handle the same amount.
- Use in a familiar environment and avoid rushing.
- Know your source and ask around. Make sure you know what you are getting and how strong it is.
- Do a small amount. You can always do more, you cannot do less.
- Avoid mixing drugs.
- Use less and go slow if it has it been a while. Were you in jail or detox? Many people overdose when starting again because their tolerance is low. In the first 2 weeks after release, people are 56 times more likely to die from overdose. People are also 29 times more likely to die between week 2 and 4 after release.\*
- Be familiar with signs and symptoms of poisoning.
- Carry a naloxone kit and access help.
- Know community supports and resources.

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\*based on a study done in Ontario corrections for people incarcerated in 2000.





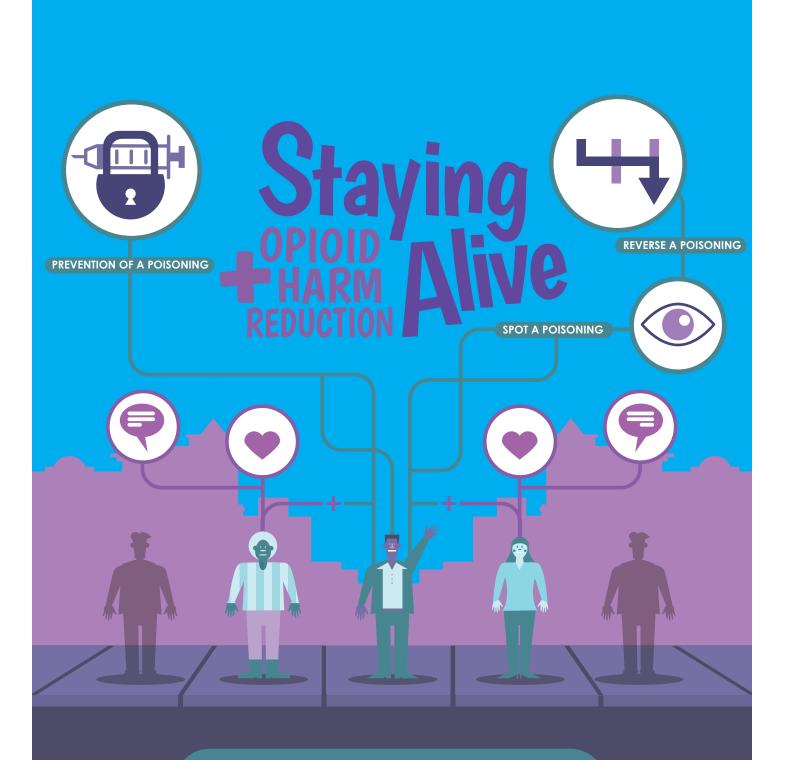


# Tips

- Be careful if you have liver problems or Hep C. It's harder for your body to get rid of drugs and it's easier to overdose.
- Know the risks of mixing drugs. You are more likely to overdose if you use more than one downer at a time or mix downers with alcohol.
- Avoid speedballs (using uppers and downers together). Uppers cause your body to use more oxygen, and depressants reduce your breathing rate. This is a dangerous combination.
- Naloxone is a medication that reduces the effects of an overdose from opioids (heroin, methadone, morphine, fentanyl, etc). Have a kit with you, and get instructions on how to use it.



# Staving Opioid Alive REDUCTION Alive



Prevent Poisoning



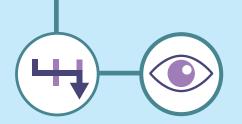






# Signs of Opioid Poisoning

- Breathing very slowly or not at all.
- Unresponsive (can't wake them).
- Difficulty walking, talking, or staying awake.
- Limp body.
- Pale face.
- Cold and damp skin.
- Blue lips or nails.
- Gurgling or snoring sounds.
- Choking or throwing up.
- Narrow (constricted) pupils.
- Stiff body or seizure-like movement.







# Good Samaritan Drug Overdose Act

The Good Samaritan Drug Overdose Act provides some legal protection for people who call 911 for help, if you are experiencing an overdose or helping someone who is. You are protected from:

- Charges for possession of a controlled substance
- Breach of conditions regarding simple possession:
  - Pre-trial (bail) release.
  - Probation.
  - Conditional sentences.
  - Parole.

#### **EXTRA**

www.canada.ca/en/healthcanada/services/substance-use/ problematic-prescription-drug-use/ opioids/about-good-samaritan-drugoverdose-act.html

## You are NOT protected from:

- Outstanding warrants.
- Production or trafficking of controlled substances.
- Any other crime.

If you can't stay, put the person in the recovery position and call 911. Write down what you know on a piece of paper:

- What drugs they took.
- What time it is.
- If you gave Naloxone and how many doses.
- Put the person into the recovery position.









# **Reverse Poisoning**

Naloxone reverses the effects of an opioid overdose. Naloxone kits are free.

#### If you are in jail:

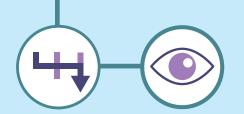
Request AHS to provide a kit in your property (at least 2 weeks prior to your anticipated release).

### If you are out:

You can find a list of pharmacies and walk-in clinics that carry Naloxone kits here:

• www.albertahealthservices.ca/info/Page15586.aspx

Call the Addiction Helpline **1-866-332-2322** to find the closest Community Based Naloxone Program.



# Staying OPIOID Alive REDUCTION Alive



# Recovery Position

- 1. Kneel beside the person and straighten their arms and legs.
- 2. Fold the arm closest to you over their chest.
- 3. Place the other arm at a right angle to their body.
- 4. Get the leg closest to you and bend the knee.
- **5.** Support the person's head and neck, then take the bent knee closest to you and gently roll the person away from you.
- **6.** Adjust the upper leg, so both the hip and knee are bent at right angles. Ensure the person is steady and cannot roll.
- 7. Tilt the head back and make sure the airways are clear and open.









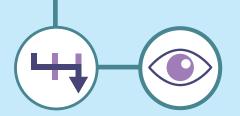


# How To Use Injectable Naloxone

#### Each kit comes with 3 doses

- 1. Swirl the ampoule (vial) in a circular motion to gather liquid at the base.
- 2. Snap the ampoule away from your body.
- 3. Uncap the syringe.
- 4. Draw up all the liquid.
- 5. Push the air out of the syringe. A small amount of air won't matter.
- 6. Hold the syringe like a dart at a 90° angle.
- 7. Inject into a large muscle: thigh, upper arm, butt. Go through clothing if you need to.
- **8.** Push the syringe down until you hear a click. The needle will withdraw into the syringe.
- **9.** Wait 3 minutes, continue rescue breathing. Do they need another dose? Wait 5 minutes between each dose.
- **10.** When they wake up, tell them what happened. They might be confused, angry, or have withdrawal symptoms.

**Watch a video:** www.youtube.com/watch?v=t46iWKxTpUM www.youtube.com/watch?v=HYz\_rKEtT9Q&feature=youtu.be



# Staying OPIOID Alive REDUCTION Alive



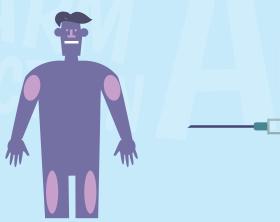
1. Remove cap from Naloxone vial and uncover the needle



2. Insert needle through rubber plug with vial upside down. Pull back on plunger and take up 1 ml.



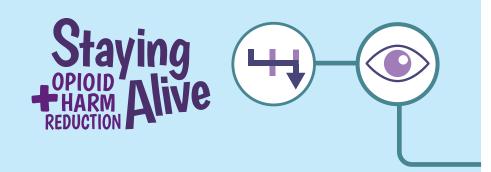
3. Inject 1 ml of Naloxone into an upper arm or thigh muscle.





**4.** If no reaction in 3 minutes, give second dose.





# Responding To An Opioid Poisoning With Naloxone

#### 1. Look for Signs of Opioid Overdose.

- Slow breathing
- Unresponsive
- Pale face
- Lips or nail appear blue
- Gurgling or snorting sound
- Choking or vomiting
- Cold and clammy skin
- Constricted pupils
- Seizure-like movement or rigid posture
- If you see any of these signs, go to step 2 and call 911 immediately

#### 2. Check for response.

- Speak loudly.
- Rub fist hand on middle of chest
- If no response call 911 and go to step 3

#### 3. Are they breathing? Is chest rising and falling?

No - Start rescue breathing

Yes - Put in recovery positions

#### 4. Prepare Naloxone.

#### 5. Inject Naloxone.

- Inject needle into thigh (preferred) or shoulder
- Push the plunger hard until you hear a click
- Safety syringe will pull back needle when plunger is fully depressed
- Naloxone can be injected through clothing

#### 6. Repeat.

- Continue Rescue Breathing
- Repeat steps 3 to 5 until help arrives
- If they wake up, remain calm and explain that help is on the way





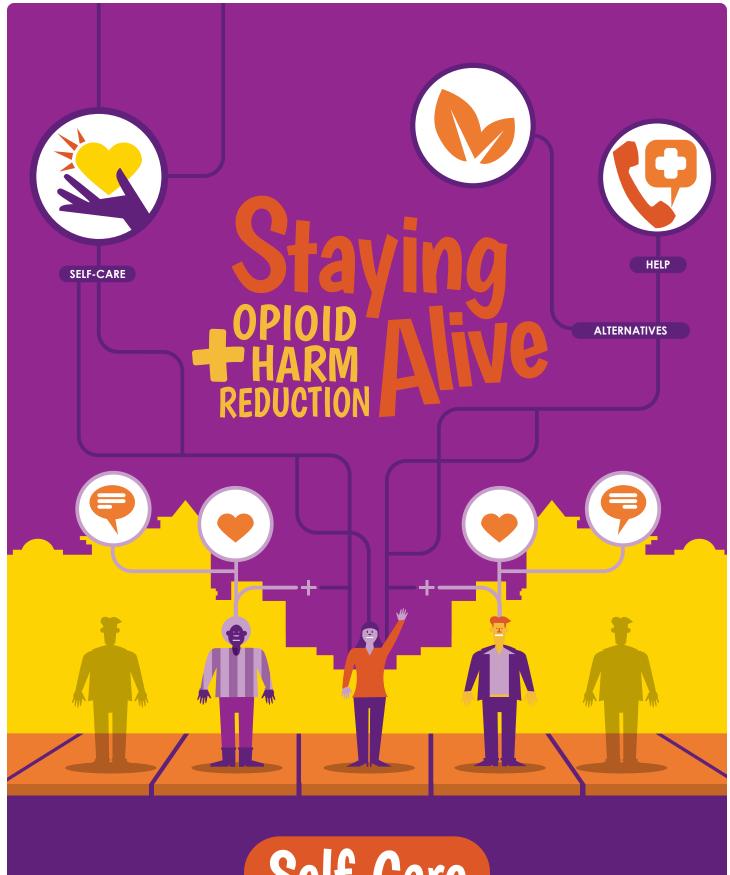


# Rescue Breathing

- 1. Check if they're breathing.
- 2. Make sure there is nothing in their mouth.
- 4. Tilt their head back and lift their chin up.
- 5. Put mask on mouth (Mask comes with Naloxone kit).
- 6. Pinch and seal nostrils.
- 7. Give 1 rescue breath every 5 seconds for 2 minutes (about 24 breaths).



# Staving OPIOID Alive HARM FEDUCTION



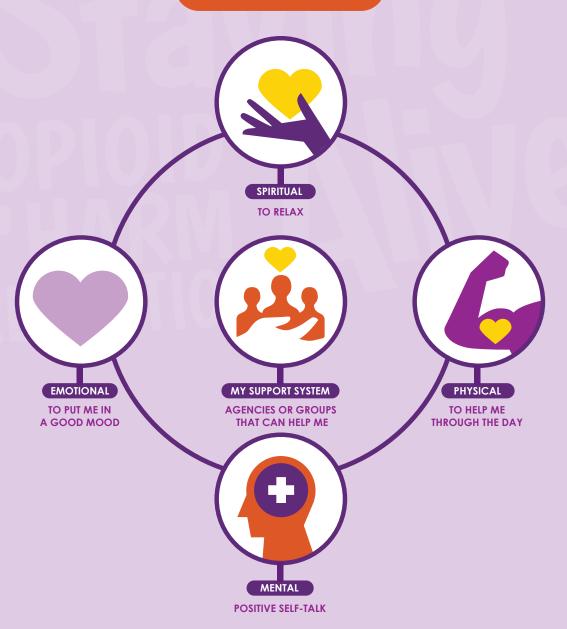
Self-Care



# Staying OPIOID Alive REDUCTION Alive



# Self-Care Plan



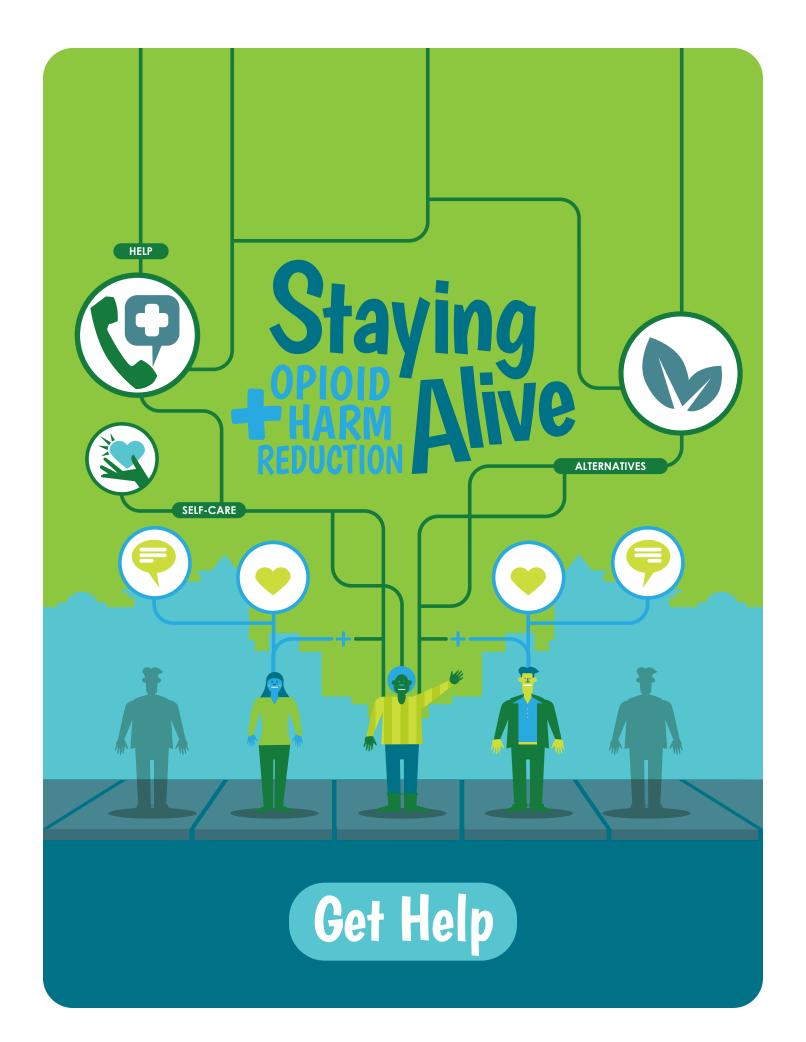


Who to avoid:

What to avoid:

Staying
OPIOID Alive
REDUCTION

# Staying OPIOID Alive REDUCTION AIVE









# **Opioid Dependency Programs**

Methadone or suboxone replaces the use of other opioids. These drugs can stabilize you, prevent withdrawal symptoms, and help you have a healthy life. These are outpatient programs (you don't have to stay in a hospital or treatment centre).

#### Available in:

• Bonnyville: (780) 826-8034

• Calgary: (403) 297-5118

• Cardston: (403) 653-5283

• Edmonton: (780) 422-1302

• Fort MacMurray: (780) 793-8300

• Grande Prairie: (780) 833-4991

• High Prairie: (780) 536-2136

• Lethbridge: (403) 942-3003

• Medicine Hat: (403) 504-1874

• Red Deer: (403) 309-3652

#### **Additional Clinics:**

www.cpsa.ca/physician-prescribingpractices/methadone-program/ methadone-clinics-alberta/

AHS Virtual Opioid Dependency Program - Toll Free **1-844-383-7688** Monday to Sunday 8:00 AM – 8:00 PM

Call the Addiction Helpline 1-866-332-2322 for information.

**Visit** www.albertahealthservices.ca/services/odp.aspx for a list of programs.







# **Residential Treatment Options**

There are a lot of residential (live-in) programs available in all regions of Alberta. They range from detox programs (that help you during withdrawal) to specialized programs based on your drug of choice. They can be specific to youth, women, Indigenous peoples, and more.

Looking for a safe place to detox? Phone or go to a supervised consumption site. They will provide you with the best place in your area. If there is no supervised consumption site where you are, call the Addiction Helpline **1-866-332-2322**.

#### Residential Treatment Programs:

www.alberta.ca/assets/documents/ health-licensed-residential-addictiontreatment-service-providers.pdf







# Call For Help On The Phone

Addiction Helpline: 1-866-332-2322

Mental Health Helpline: 1-877-303-2642

#### **Distress lines**

Edmonton: (780) 482-4357

Calgary: (403) 266-1601

Rural: 1-800-232-7288

Family Violence Information line: 310-1818

Health Link: 811







# **Get Help Online**

**DrugSafe.ca** AHS website on substances (focusing on Alcohol, Cannabis, Meth, and Opioids) www.albertahealthservices.ca/info/page12491.aspx

www.ahs.ca/naloxone

#### **Check Out:**

www.na.org/meetingsearch to find a Narcotics Anonymous meeting near you

Visit Alberta's Virtual Opioid Dependency Program **www.ahs.ca/odp** for online assistance, especially if you are in a rural area or need confidential support.

#### Extra:

www.informalberta.ca/public/common/initializeDirectoryList.do







# Get Help In Person

Every supervised consumption site and needle distribution program has supports that will help you. If you do not want to talk to someone online or on the phone, go to one of those places for assistance.

#### Phone a friend:

1.	<u> </u>
2.	
5.	







# Change Plan Quick Reference Card

op	5 reasons for change
1.	
2.	
3.	
4.	
5.	
	Emergency Plan
	HADNA HALLEN DA
1.	Leave the situation.
2.	Go somewhere safe, such as:
3.	Take a few deep breaths and try to relax.
_	. All I
:me	ergency Numbers
3.	



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# Street Slang Glossary

**Chasing the dragon:** a method of inhalation of heroin, where heroin base is heated on aluminum foil and vapors are inhaled into the lungs

**Dilly:** Dilaudid, hydromorphone, an opioid agonist of abuse, denoted as Dilly-2,-4,-8 (depending on dose)

**Doctoring:** the act of assisted injection, where an individual will administer an injection for another person, usually because they are unable to self-inject due to lack of knowledge, skill, or practice.

Fix: injecting drugs aka crank, hit, slam

**Flag:** the act of aspirating (pulling back) with syringe plunger when injecting intravenously to confirm vein place

**Flailing:** dyskinetic\* movement that results from illicit drug use (\* abnormality or impairment of voluntary movement)

Flap: packaging of street drugs into a small envelope folded from a small paper square

**Flashback:** the small trickle or return of blood that will enter the barrel of the syringe when the vein is punctured (occurs prior to "flagging" and a good indication to flag to confirm placement) aka **register** 

Heroin: diacetyl morphine, aka down, H, smack, dope, horse, China White, apple sauce, junk, antifreeze, brown sugar, dope, golden girls, skag, smack, tar (in dark paste form), Al Capone, Amelia, Aunt Hazel, bad seed, ball, Batman, cotton candy, Doogie, ghost, hard candy, heaven, Jack, kaka water, Lady H, Mexican dirt, Mother pearl, rush hour, skid, red devil, thunder, tiger, white, Chiva

**Kadian:** 100 mg morphine capsule (aka morphine grey)

**M-Eslon:** morphine extra-strength long-acting

Methadone aka juice, meth



# Street Slang Glossary

Paper: a flap containing a drug, sometimes denoted by cost or mass as in 10-paper (\$10 value)

**Peelers:** tablets with an enteric coating (for sustained or extended release effect) that need to be peeled off before crushing for diverted use

Point: unit of sale for heroin, where 1 point = 0.1 gram

Rig: syringe or barrel and needle used to injection aka harpoon, dart,

Screwball: combination of heroin and crystal meth

**Speedball**: combination of CNS depressant (usually heroin) with a CNS stimulant (usually cocaine, and sometimes crystal meth)

**Spitball:** packaging of street drugs into a small ball of plastic knotted at the top; knot is to be trimmed with scissors to access drug for use

V-Tens: 10 mg Valium tablets

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