



Department of  
**Mental Health &  
Substance Abuse Services**

# The Overdose Crisis in Tennessee What's Happening and How You Can Get Involved

# Overdose Crisis



In 2020-2021, the more than **100,000 Americans** who died of a drug overdose would fill up Neyland Stadium.

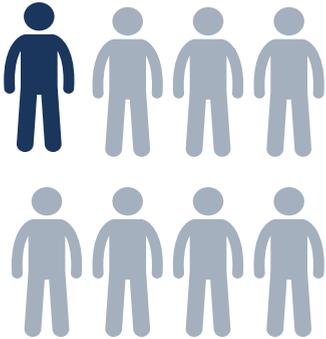


From 2012-2022, the more than **23,000 Tennesseans** who died of a drug overdose would more than fill up FedEx Forum, home of the Memphis Grizzlies.

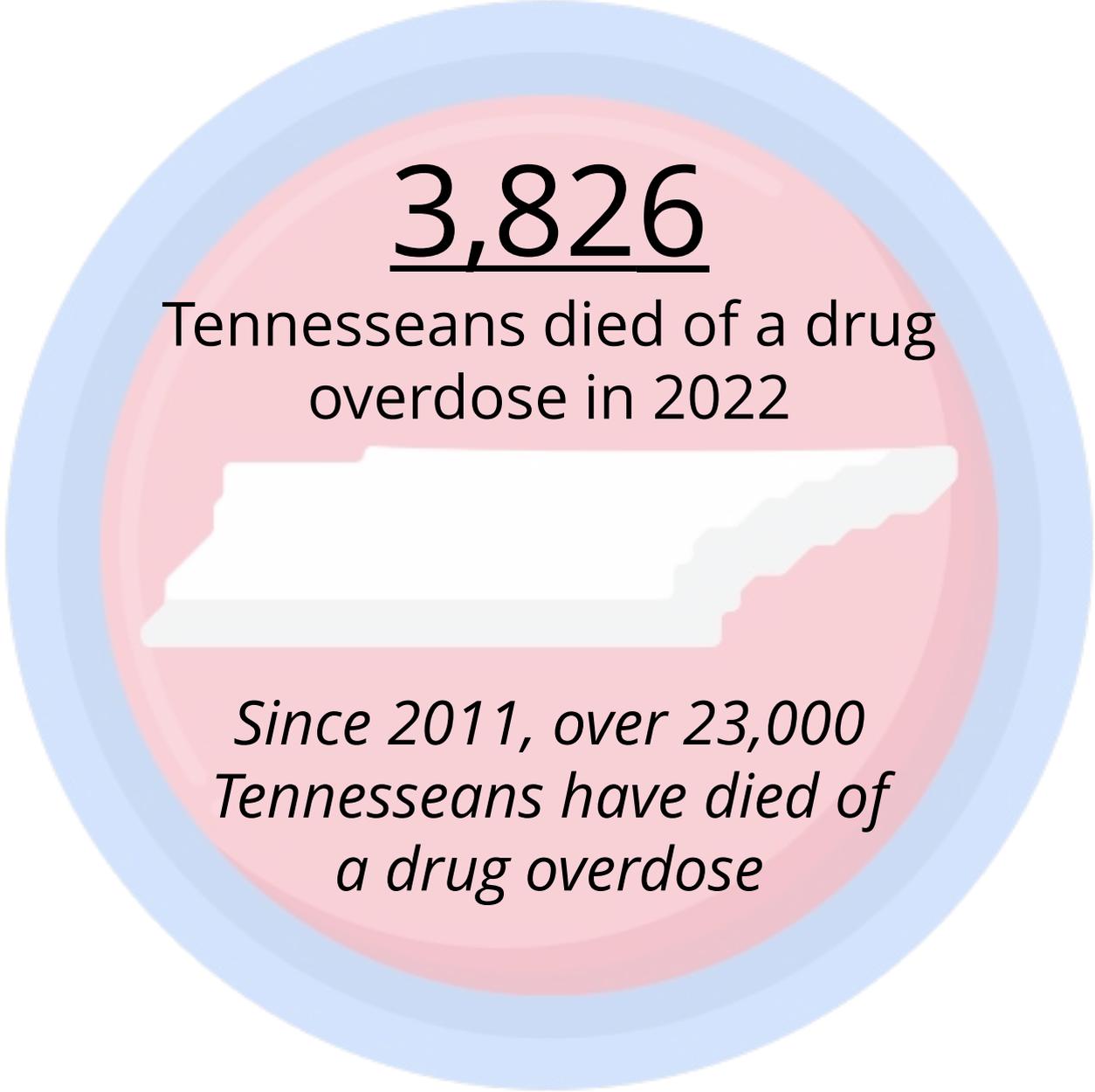
Source: CDC, TN Dept of Health

# Substance Use in Tennessee

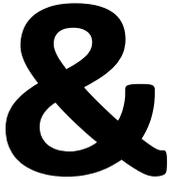
In 2021, 1 in 8  
Tennesseans



ages 18+ reported  
illicit drug use in the  
past month



Substance use can  
affect  
ANY Tennessean

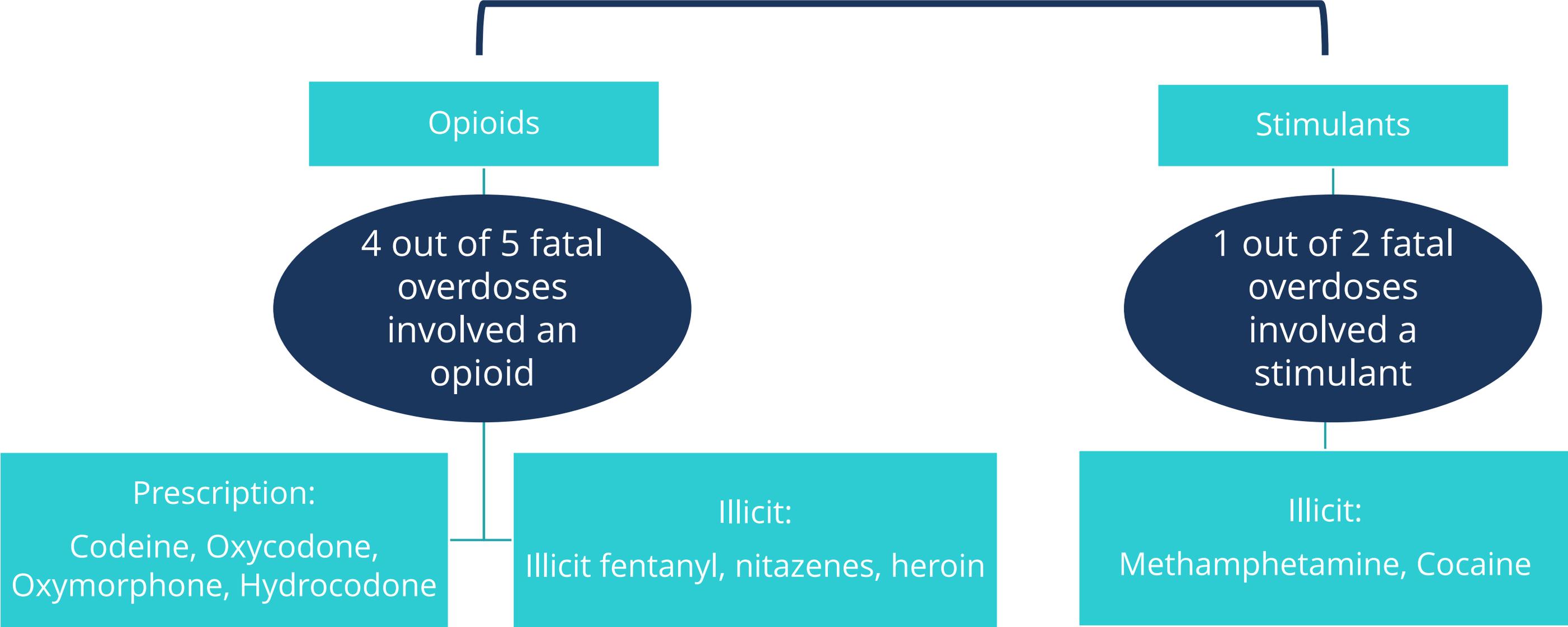


**EVERYONE**  
can make a  
difference

Sources: 2021 National Survey on Drug Use and Health (NSDUH);  
2021 Tennessee Drug Overdose Deaths Report (TN Dept of Health)

# Substances Commonly Involved in Overdoses

*In 2021, 2 out of 5 fatal overdose deaths involved both an opioid and a stimulant.*



Source: TN Dept of Health

# Fentanyl

- Fentanyl is a very strong, lab made opioid.
- Fentanyl is commonly mixed with other substances such as cocaine, meth, heroin, benzodiazepines
  - Very few documented/confirmed cases of fentanyl in vapes or marijuana nationwide.
- The increase in fentanyl-involved overdoses/overdose deaths is linked with **illicit fentanyl** (not medical fentanyl from the pharmacy)
- Fentanyl and its analogs **cannot pass through your skin** in casual exposure, even if dissolved in liquid.



*As little as 2mg of fentanyl  
can be deadly*

92% of news  
stories contained  
misinformation  
about fentanyl  
exposure

Source: American College of Medical Toxicology, American Academy of Clinical Toxicology; International Journal of Drug Policy, 2020

# West (grand region) Data

## Fatal Drug Overdoses in TN West Grand Region in 2022: 769

### Opioids

578

Fentanyl\*  
Involved

21

Heroin\*  
Involved

104

Pain Reliever\*  
Involved

### Stimulants

421

All Stimulants

### Multiple Substances

335

Opioid(s) and  
Stimulant(s)  
Involved

123

Opioid(s) and  
Benzodiazepine(s)  
Involved

\*Because an overdose may involve multiple substances, individual substance categories may not add up to the total of all drug overdose deaths.

### Prescriptions for Pain

258,329

patients received opioids  
for pain in 2022

approximately

1 in 6

county residents



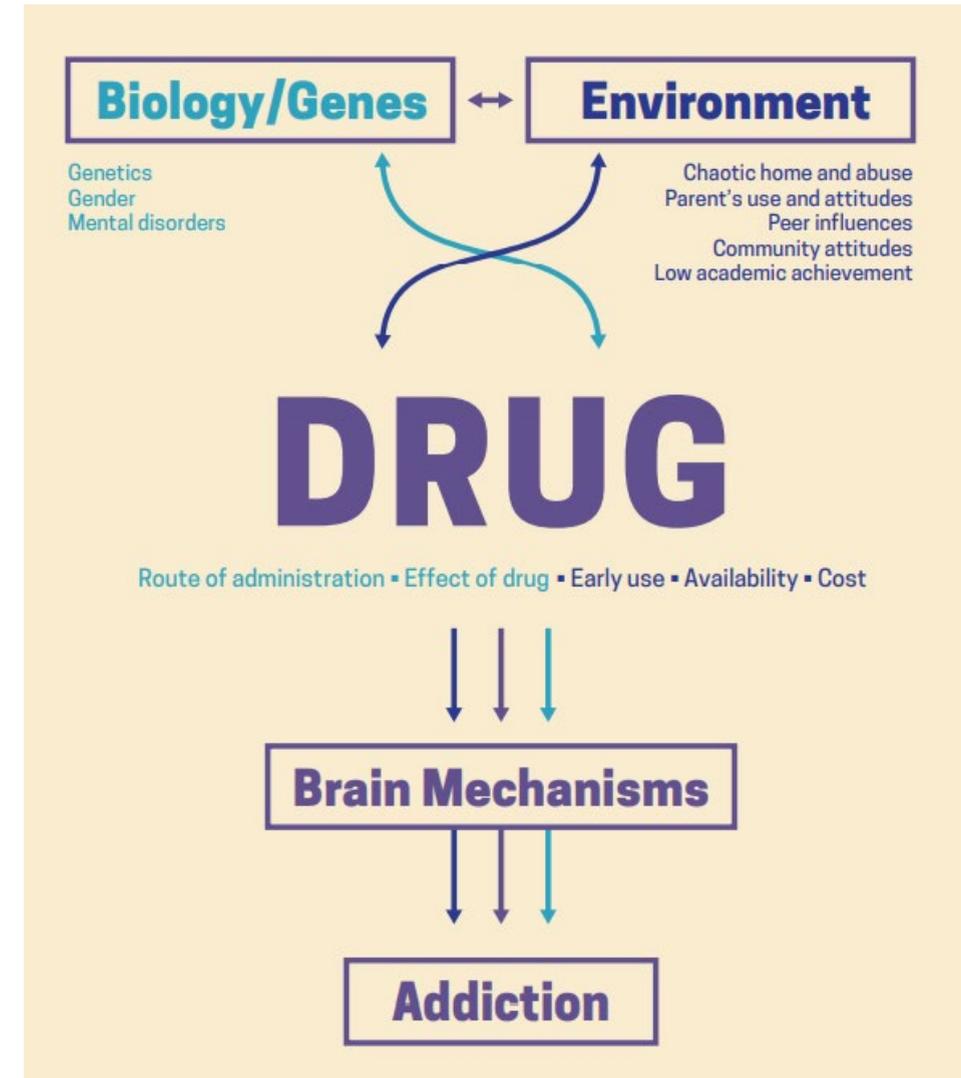
### Nonfatal Overdoses: Emergency Dept

4,719

nonfatal drug overdoses were treated in  
an outpatient setting in 2021. Outpatient  
visits primarily include **emergency  
department** visits.

# Addiction

**Addiction** is a treatable, chronic medical disease involving complex interactions among brain circuits, genetics, and the environment, and an individual's life experiences.



Source: American Medical Association; NIDA

# Reducing Stigma

Experiencing stigma can reduce a person's willingness to seek treatment, take other actions to reduce harm, or ask for help

*Using person-first language and non stigmatizing language is one way you can reduce the stigma of addiction and support people with substance use disorder in your community.*

Say this	Not that
Person with a substance use disorder Person who uses drugs	Not addict or junkie
Not using substances	Not clean
Person living in recovery	Not ex-addict

Source: National Institute on Drug Abuse

# Overdoses

- When a toxic amount of a drug or a combination of drug overwhelms the body
- Different symptoms for different kinds of substances/drugs
- Always call 911, even if naloxone has been used.
- By learning what to look for and how to respond, you can be ready to save a life!
  - Group and individual trainings are available!

# Opioid Overdoses: Signs and Symptoms

Opioid overdoses can happen slowly, over the course of several hours or more quickly, particularly if fentanyl is involved.

## Signs an Opioid Overdose MAY Occur

- Small pupils
- Nodding Out
- Slurred Speech
- Scratching a lot

\*\*Still responds to outside stimulus \*\*

## Signs of an opioid overdose include:

- Unresponsive to stimulus (unconscious)
- Breathing is very slow and shallow, erratic or has stopped
- Pulse is slow, erratic or undetectable
- Choking sounds/snore-like gurgling noise
- Vomiting
- Body is limp
- Changes in skin color/fingernails
  - Lighter skin: turns bluish purple
  - Darker skin: turns grayish or ashen

# Stimulant Overdoses: Signs and Symptoms

Stimulant overdose can result in both physical and psychological symptoms.

## Physical Symptoms

- Nausea or Vomiting
- Passing out
- Chest pain
- Irregular breathing
- Convulsions
- Limb jerking or rigidity
- Tremors
- Feeling paralyzed while awake
- Unable to sleep
- Rapidly increasing temperature/fever
- Large pupils

## Psychological Symptoms

- Extreme anxiety
- Panic
- Paranoia
- Hallucinations
- Agitation
- Irritability/Aggressiveness
- Hyperawareness of surroundings

# Responding to an Overdose: Naloxone

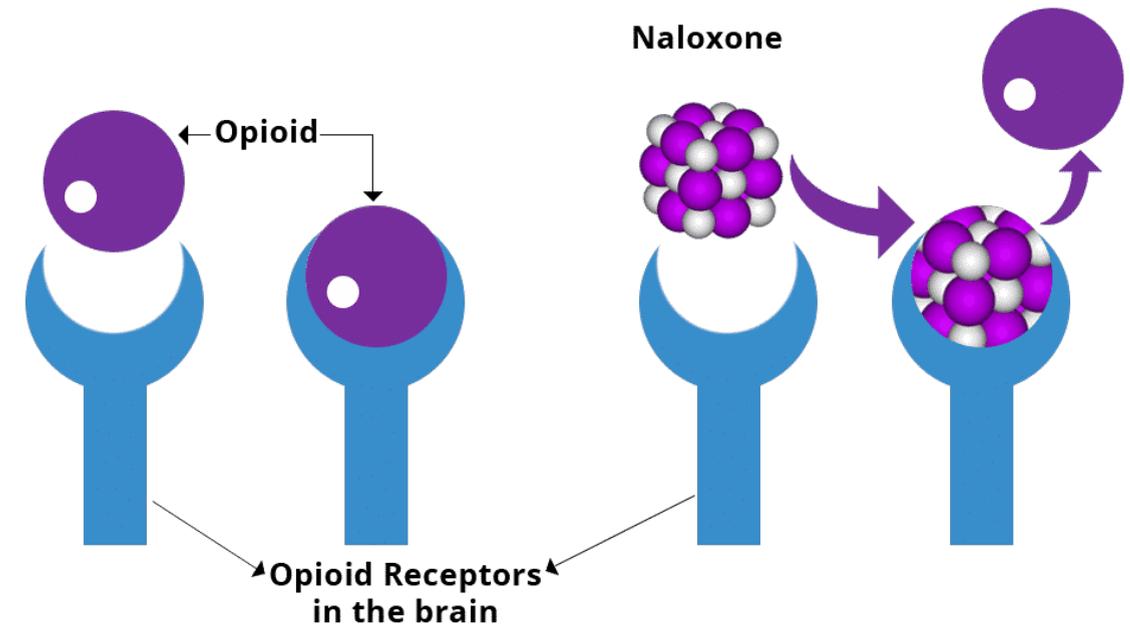
Administering naloxone is the **most common and effective** way to reverse an opioid overdose

Naloxone reverses the effects of opioids by binding to the opioid receptors more powerfully than opioids

Naloxone knocks the opioid off the receptors temporarily so that breathing can be restored **(30-90 mins)**

Naloxone results in a person going into ***temporary withdrawal***

It is ***not possible to overdose*** on naloxone



Naloxone restores breathing, but other symptoms **caused by stimulants** and/or **tranquilizers** will not be affected by naloxone and need to be treated by medical professionals, **so call 911 as soon as you suspect an overdose.**

# Storing Naloxone

- To be effective, naloxone should be stored
  - In blister pack until ready to use (intranasal)
  - At room temperature (between 68 to 77 degrees F)
    - Avoid temperature extremes (Do not store in a car)
  - Protected from light
    - Avoid extreme temperatures
- Monitor expiration date
  - 24-36 month shelf life depending on product
  - Printed on blister pack (intranasal)
  - Contact ROPS if nearing expiration date

# Responding to an Opioid Overdose: Step 1

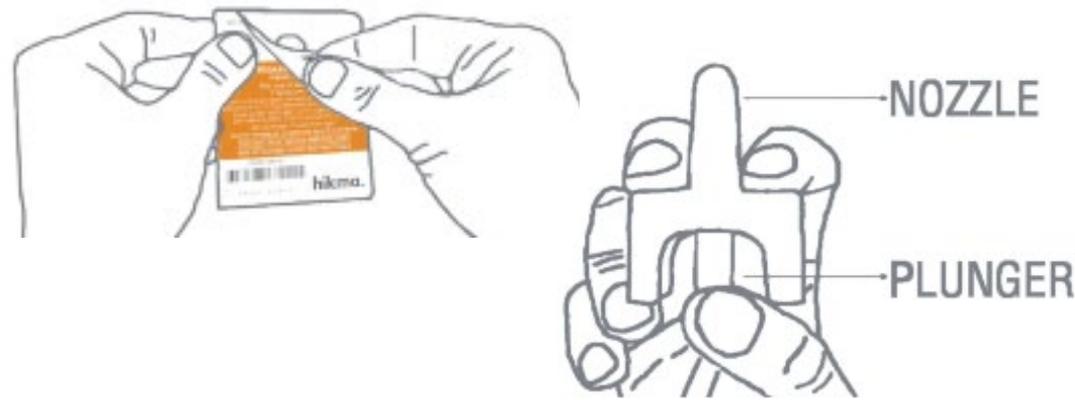
## Try to Maintain Responsiveness

- Call the person's name
- Shake the person gently
- Utilize the "sternum rub"
  - Make a fist
  - Use the middle joints of your fingers (not the knuckles)
  - Firmly rub the center of the person's chest to wake them up



# Responding to an Opioid Overdose: Step 2

## Administer Naloxone

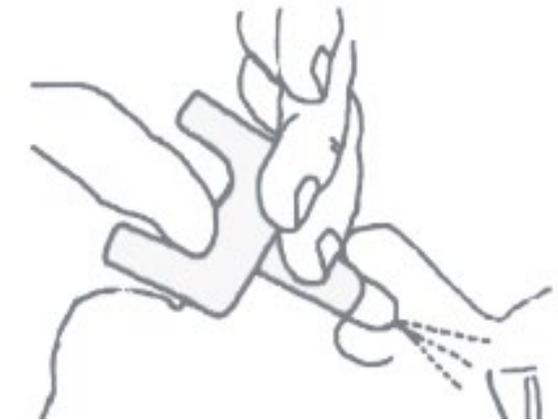


**Peel** back the pack to remove device. **Hold** device with your thumb on the bottom of the plunger and two fingers on the nozzle.

**Do NOT prime the device.**



**Place** and hold the tip of the nozzle in either nostril until your fingers touch the bottom of the recipient's nose.



**Press** the plunger firmly to release the dose into the person's nose.

# Responding to an Opioid Overdose: Step 3

## Dial 911

- Stay with person until emergency medical services arrive
- Tell 911:
  - Address/location
  - Whether or not breathing has slowed or stopped
  - How much Naloxone you administered (if any)
  - What substances the person took (if you know)

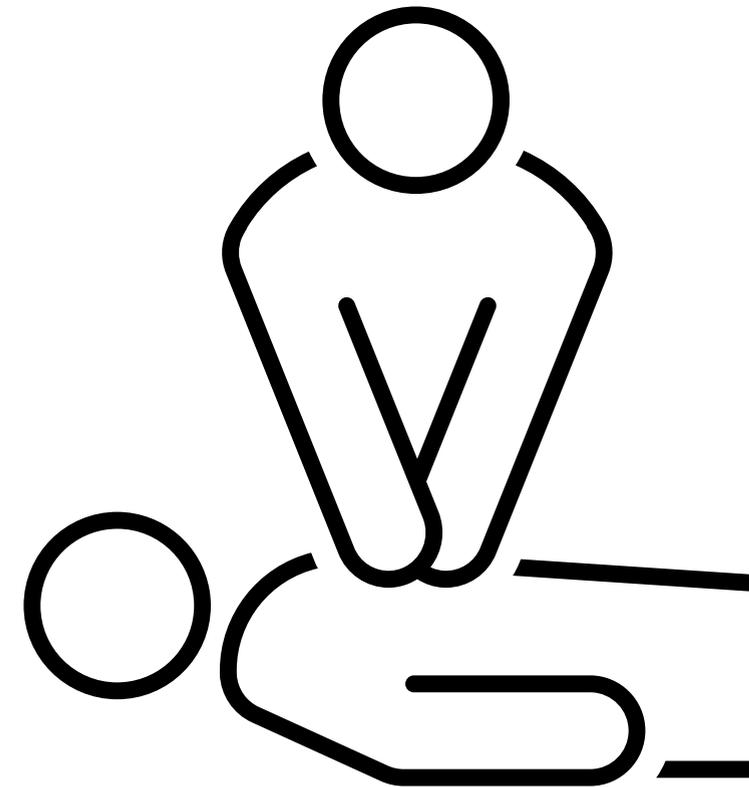
***\*Steps 2 and 3 can occur in the reverse order, depending on which can be achieved more quickly.\****

# Responding to an Opioid Overdose: Step 4

## Administer Chest Compressions/ CPR

\*\*\*Chest compressions/CPR should only be done if certified or as instructed by 911 operator!

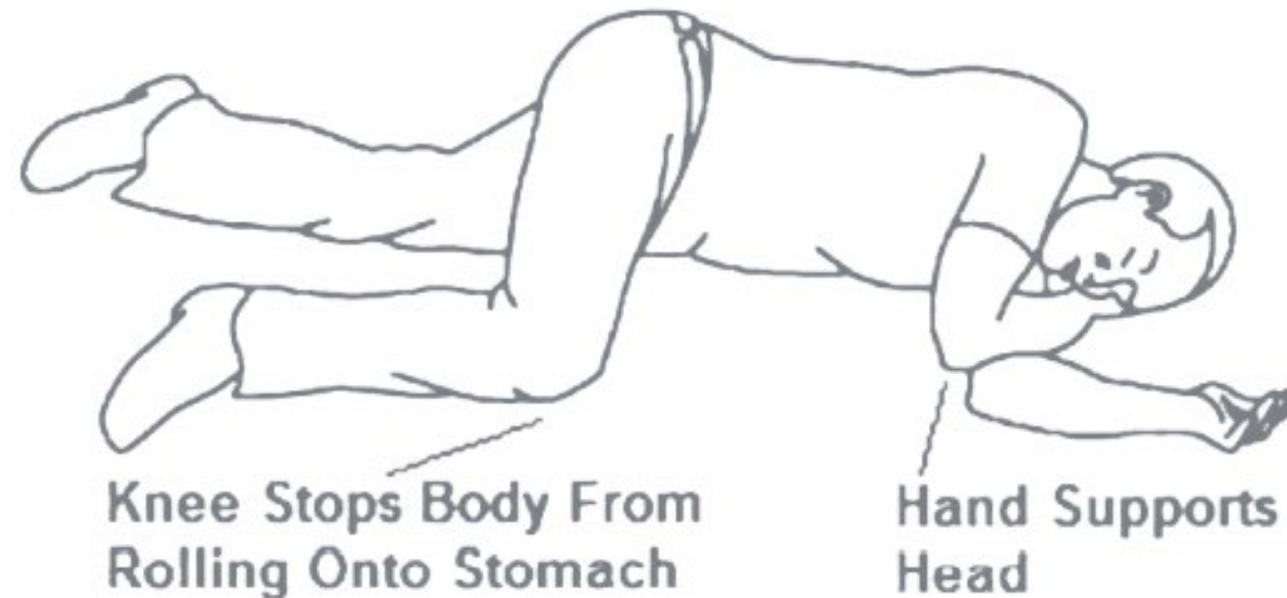
*If instructed to give CPR, and you do not feel comfortable giving “rescue breaths,” chest compression-only CPR is better than no CPR.*



# Responding to an Opioid Overdose: Step 5

## Place individual in Recovery Position

- This position will help prevent the person from potentially inhaling vomit



# Responding to an Opioid Overdose: Step 6

- Wait 2-3 minutes.  
*It may be helpful to set a timer on your phone or have a bystander set a timer.*
- After 2-3 minutes, if the person is still not breathing and EMS has not arrived, you can give another dose in the other nostril.
- Continue waiting 2-3 minutes and giving another dose until EMS arrives OR person starts breathing again.



*Giving doses faster does not work. The medication has to get to the brain and start to work.*

# Responding to an Opioid Overdose: Step 7

## Stay with Individual and Observe until EMS Arrives

- Provide comfort to the individual
- May have no memory of overdosing
- Help them remain calm
- Provide comfort as naloxone can trigger opioid withdrawal symptoms

### Common Symptoms of Opioid Withdrawal

- Erratic or violent behavior
- Projectile vomit
- Severe musculoskeletal pain
- Have cardiovascular event (pre existing condition/stimulant involved)

# Emerging Opioid Trend: Nitazenes

- Very powerful synthetic (lab made) opioid
- Not included in standard toxicology tests so likely unreported
- Most common nitazenes
  - Metonitazene (similar potency to fentanyl)
  - Isotonitazene
  - Protonitazene
  - Etonitazene
- Responds to naloxone but may take more doses

**52 deaths**

In Tennessee from  
2019-2021  
involved nitazines

**100%**

Of these deaths also  
involved multiple  
substances such as  
fentanyl and/or meth

# Emerging Trend: Other Substances

- Overdoses may also be caused or contributed by other substances that are not opioids or stimulants.
- Xylazine is an emerging substance in Tennessee
  - Used as a veterinary tranquilizer
  - Does not respond to naloxone
  - Commonly found with other substances including fentanyl, methamphetamine, cocaine and benzodiazepines (such as Xanax)

# People do recover!

○ It takes time for the brain to heal from substance use.

○ Relapse is a chemical process in the brain, not a moral failing.

○ There are many paths that people use to find and maintain recovery



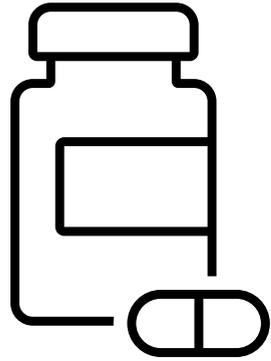
Many Regional Overdose Prevention Specialists (ROPS) are in recovery and are giving back to their community. Pictured here is 150+ year of recovery!

Source: NIDA

# Regional Overdose Prevention Specialists

- Free presentation to your work, community group, church/religious organization, ANYONE
  - Includes more in-depth information on the overdose crisis in Tennessee, science of addiction, how to recognize/respond to an overdose, how to get involved in substance use/overdose prevention
- Provide training and naloxone (when eligible) to groups and individuals
- Connect people to prevention, treatment and recovery resources
- Provide naloxone and fentanyl test strips to eligible individuals
  - Individuals at high risk without other means of access (such as insurance)

# What can YOU do in YOUR community



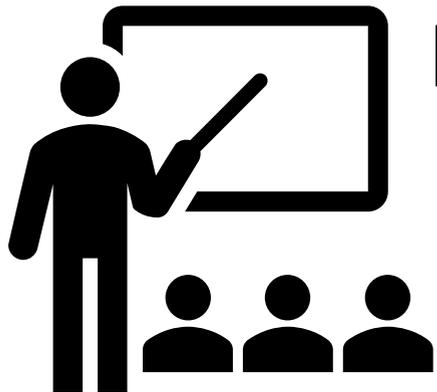
## Medication Safety

- Lock up medications
- Properly dispose of unused medications
- Participate in Drug Take Back Day (April/Oct)



## Community Involvement

- Schedule a training for your workplace, church, community groups, etc.
- Join your local Prevention Coalition
- Know about/share community resources
- Find support for yourself if someone you love uses substances
- Participate in Awareness Campaigns
  - Day of Hope (March 10<sup>th</sup>)
  - Fentanyl Awareness Day (May 9<sup>th</sup>)
  - International Overdose Awareness Day (August 31<sup>st</sup>)
  - Recovery Month (September)



## Keep learning

- Take a training on ACEs, suicide prevention, mental health first aid, or other related topics

# Additional Resources

- **Melesa Lassiter BSN, RN, ROPS**

- (731) 819-7603
- [rops@wcpcoalition.org](mailto:rops@wcpcoalition.org)
- Region 6N

- **Jennifer Watkins M.S.ED; BS (Psych) BA, ROPS**

- (731) 223-9310
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- Region 6N

**TN**  **RECOVER**  
Text **SAVE** to **30678**



Call or text for  
addiction  
resources



**Online. In Real-Time. Find Help Now.**

Find substance misuse treatment providers available in near real-time based on the type of treatment you need, the type of payment and insurance options you require, and your current location at [FindHelpNowTN.org](http://FindHelpNowTN.org)

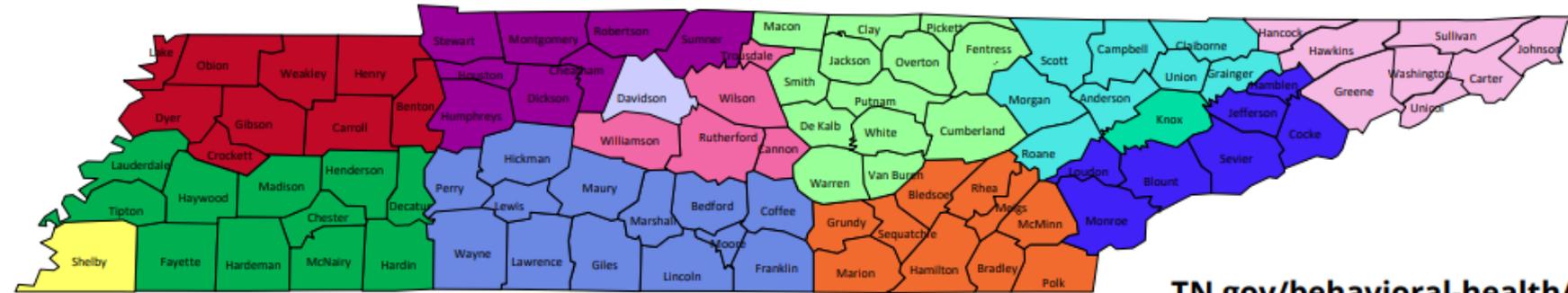


Call or text for  
mental health,  
crisis, and  
suicide  
prevention

# Additional Resources:

- TN Department of Health
- Center for Disease Control and Prevention
- National Survey on Drug Use and Health
- American College of Medical Toxicology/American Academy of Clinical Toxicology
- International Journal of Drug Policy
- American Medical Association
- National Institute on Drug Abuse

# ROPS Map



Regional Overdose Prevention Specialists-ROPS

[TN.gov/behavioral-health/rops](http://TN.gov/behavioral-health/rops)

To find the ROPS for your area, contact me or visit [www.tn.gov/behavioral-health/ROPS](http://www.tn.gov/behavioral-health/ROPS)



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# Thank you for coming!



REGIONAL  
OVERDOSE  
PREVENTION  
SPECIALISTS

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For updated trends and information  
<https://poplme.co/hash/rn0j8RUd/1/share>



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**TN REDLINE**   
**1.800.889.9789**  
**CALL OR TEXT** 

**988**  
SUICIDE  
& CRISIS  
LIFELINE

**TN RECOVER**  
Text **SAVE** to **30678**  
**App Available**

Call or text for mental health, crisis and suicide prevention

To find the ROPS for your area, contact me or visit [www.tn.gov/behavioral-health/ROPS](http://www.tn.gov/behavioral-health/ROPS)



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