Department of
Mental Health &
Substance Abuse Services

The Overdose Crisis in Tennessee

What's Happening and How You Can Get Involved

Who We Are

The Sevier County Office of Alcohol and Drugs Programs is a department within the Sevier County Government and is a part of our County Mayors' Office. We provide prevention resources and education, connect people to resources, and reduce the barriers associated with finding recovery for those who are seeking it. We partner with the Tennessee Department of Mental Health and Substance Abuse Services, law enforcement, first responders, faith-based organizations, and community stakeholders to combat substance misuse within Sevier Co. and our Region.

Sevier County C.A.R.E.S. is a TDMHSAS funded coalition and a part of the Sevier County Office of Alcohol and Drug Programs. They are a group of volunteers and stakeholders who come together to further the mission of community wide prevention and create positive impact to improve the lives of our friends and neighbors.

Nicole Ogle

Director, Sevier County Office of Alcohol and Drug Programs/ Executive Director, Sevier County C.A.R.E.S.

Email: nogle@seviercountytn.org
Cell: 865-705-9617

With years of prevention expertise, Nicole oversees the Sevier County Office of Alcohol and Drug Programs with passion and integrity. Through collaboration with her team and community stakeholders, she brings to the table innovative ideas and evidence-based strategies to help improve the lives of Sevier Co. residents of all ages.

Marissa Valentine

Sevier County Regional Overdose Prevention Specialist

Region 2 South- Blount, Cocke, Hamblen, Jefferson, Loudon, Monroe, and Sevier Counties

Email: mvalentine@seviercountytn.org
Cell: 865-679-4506

My roles include facilitating classes for overdose prevention in a formal setting for agencies, groups and individuals. Providing tertiary prevention tools and connecting those seeking recovery to available community resources. I serve a diverse community including agencies, families, the faith community, individuals in recovery and those in active addiction.

Lori Patterson

Hybrid Lifeline Coordinator
Region 1- Sevier, Cocke & Hancock Counties

Email: lpatterson@seviercountytn.org
Cell: 865-507-0353

My roles include supporting low-income families in receipt of or eligible for either TANF or SNAP and will be eligible to receive support for substance abuse treatment and/or recovery services, reducing stigma related to the disease of addiction, and increasing community support for policies that provide for treatment and recovery services.

Jessica Matthews

Sevier County Prevention Coordinator
Serving Sevier County

Email: jmatthews@seviercountytn.org
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My role is to educate teens and adolescents on the dangers of substance misuse and the effects substances have on the body. I am available for community events, youth organizations, parent meetings, and school programs. We believe primary prevention is key to combating substance use disorders.

Laura Redden

Sevier County Drug Endangered Children Coordinator
Serving Sevier County

Email: lredden@seviercountytn.org
Cell: 865-469-3565

I provide resources for children who experience trauma to provide support during that time. This includes the Handle with Care program that informs the schools when children experience something life altering so that the schools can give extra attention to that child. I also connect families to resources around the community.

Overdose Crisis

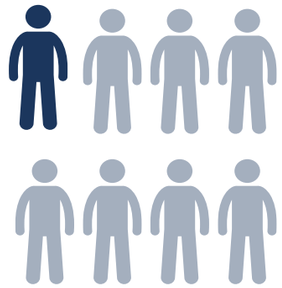
In 2020-2021, the more than **100,000 Americans** who died of a drug overdose would fill up Neyland Stadium.

From 2012-2021, the more than **19,000 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

3,814

Tennesseans died of a drug overdose in 2021

Since 2011, over 19,000 Tennesseans have died of a drug overdose

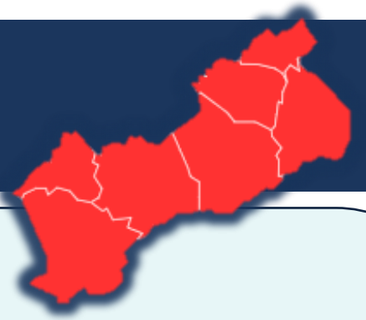
Substance use can affect ANY Tennessean

&

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)

Region 2S Data



Fatal Drug Overdoses in Region 2S in 2021: 328

Opioids*

229 Fentanyl Involved

21 Heroin Involved

69 Pain Reliever Involved

Stimulants*

21 Cocaine Involved

139 Psychostimulant Involved

Multiple Substances*

127 Opioid(s) and Stimulant(s) Involved

40 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

94,894

patients received opioids for pain in 2022

approximately

1 in 5

region residents

Nonfatal Overdoses: Emergency Dept

1,456

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

TN

Overdose Crisis

- While use of illicit drugs in older adults is much lower than among other adults, it is currently increasing. ~NIH
- The rate of drug overdose deaths involving synthetic opioids other than methadone (such as fentanyl, fentanyl analogs, and tramadol) increased by 53% from 2019 to 2020 among adults aged 65 and over. ~CDC, 2022
- Some older adults may take substances to cope with big life changes such as retirement, grief and loss, declining health, or a change in living situation. ~NIH
- Providers may confuse symptoms of substance use with other symptoms of aging, which could include chronic health conditions or reactions to stressful, life-changing events. ~NIH

Overdose Crisis

- Older adults are often more susceptible to the effects of drugs, because as the body ages, it often cannot absorb and break down drugs and alcohol as easily as it once did. ~NIH

- Older adults are more likely to unintentionally misuse medicines by forgetting to take their medicine, taking it too often, or taking the wrong amount. ~NIH

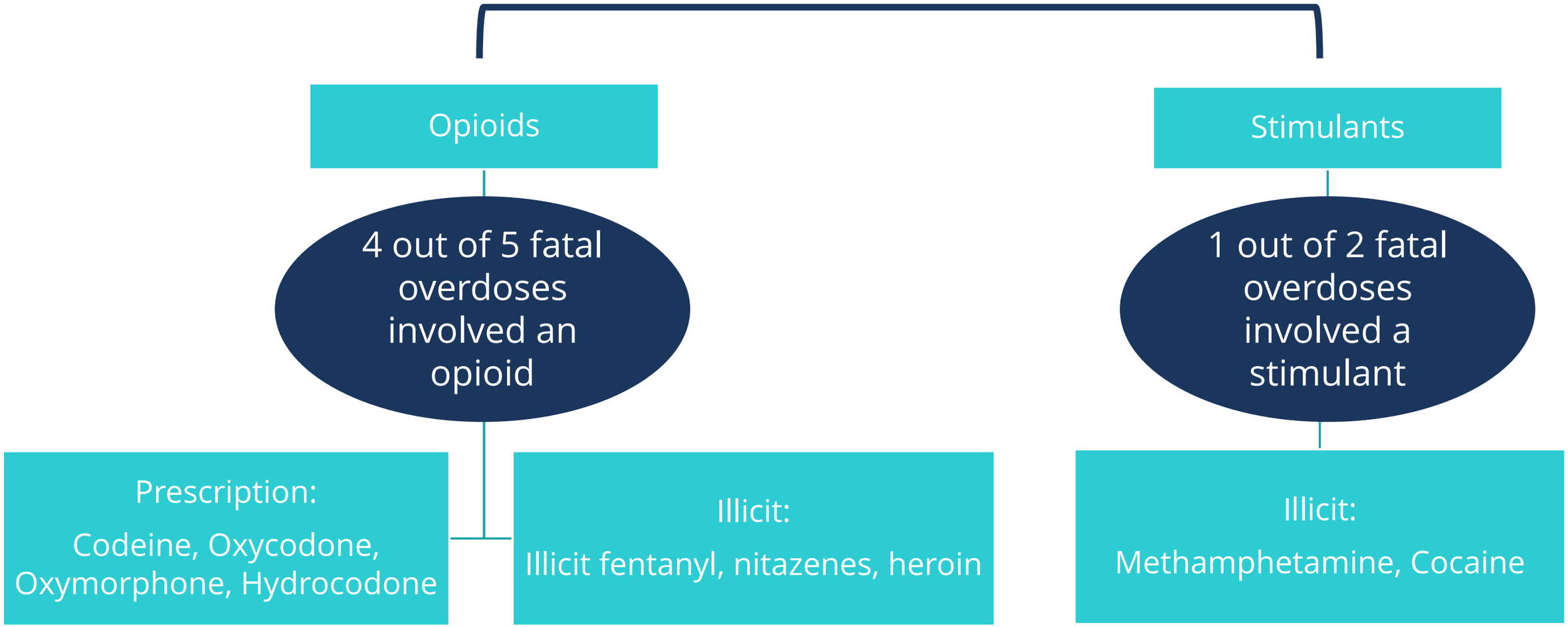
Overdose Crisis

What can you do to protect someone you care about?

- Seek assistance from their physician or a pharmacist to explain the risks for the prescription/over the counter medications and vitamins they take.
- Conduct regular counts of medications on hand.
- Dispose of unused or expired medications properly.
- Store medications in a safe place preferably locked.
- If needed, supervise your loved one when they take their medications.
- Learn how to recognize an overdose and keep naloxone on hand for an accidental overdose.

Substances Commonly Involved in Overdoses

In 2021, 2 out 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

Emerging Opioid Trend: Nitazenes

- Very powerful synthetic (lab made) opioid
- Not included in standard toxicology tests so likely <u>unreported</u>
- Most common nitazenes
  - Metonitazene (similar potency to fentanyl)
  - Isotonitazene
  - Protonitazene
  - Etonitazene

  } Much more potent than fentanyl
- 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: Xylazine

- Xylazine, a veterinary tranquilizer (not opioid or stimulant) can contribute to an overdose.
- Xylazine contributes to slow heart rate and low blood pressure.
- Xylazine is known to contribute to severe wounds and soft tissue infections that may need medical attention.

Emerging Trend: Xylazine

- Though xylazine does not respond to naloxone, **always give naloxone in case of suspected overdose** since an opioid may be involved. Additional medical treatment may be needed.

For the most recent information about xylazine: tn.gov/behavioral-health/emerging

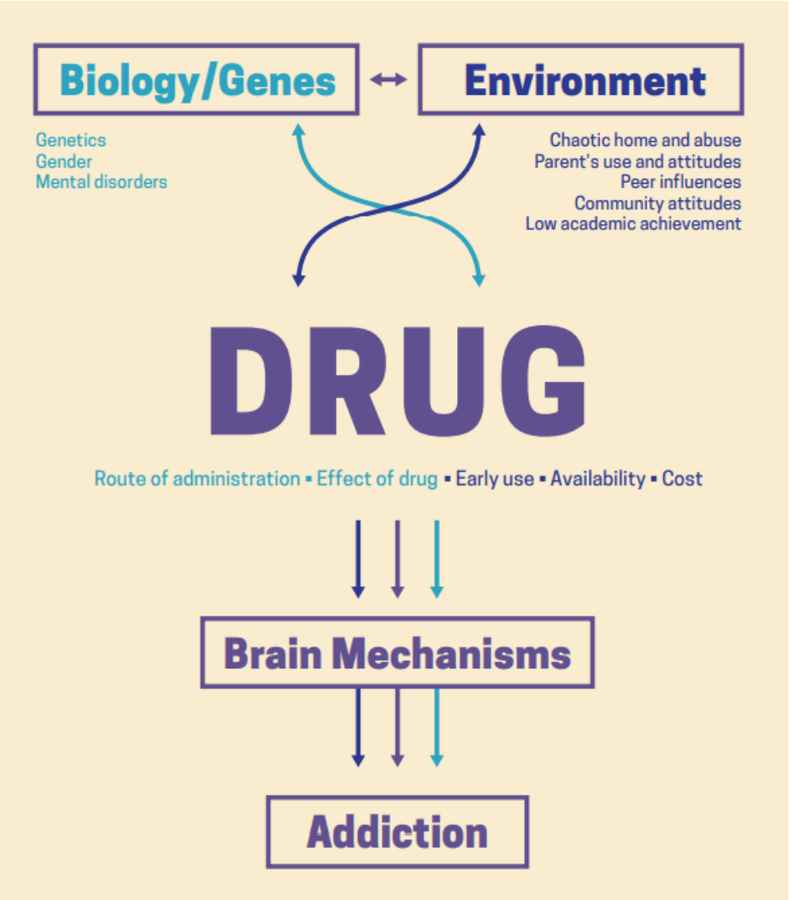
Top Substances Identified with Xylazine in TN*

1. Fentanyl
2. Methamphetamine
3. Delta-9 THC
4. Cocaine
5. Alprazolam

** TDH, Death records 2020-2021*

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
- 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 of an opioid Impairment include:

- 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

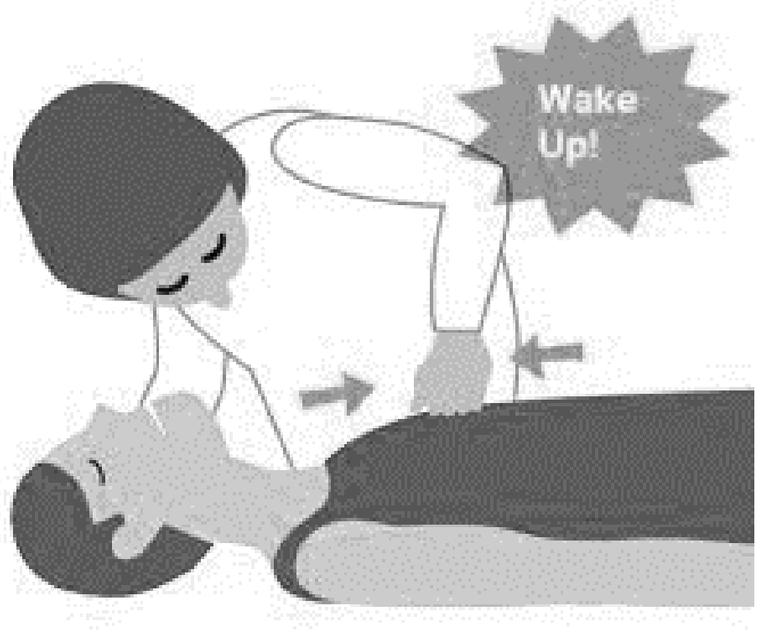
Psychological Symptoms

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

Responding to an 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.

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

Place and hold the tip of the nozzle in either nostril until your fingers touch the bottom of the recipient'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)

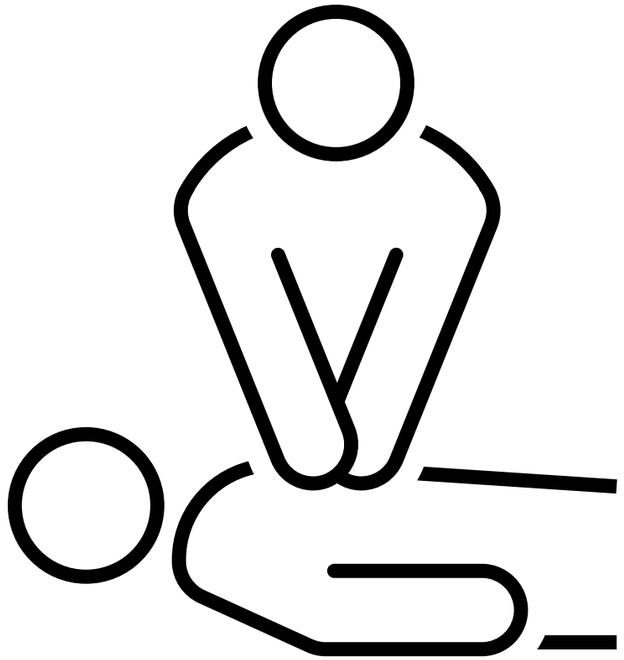
Steps 2 and 3 can occur in the reverse order, depending on which can be achieved more quickly.

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!

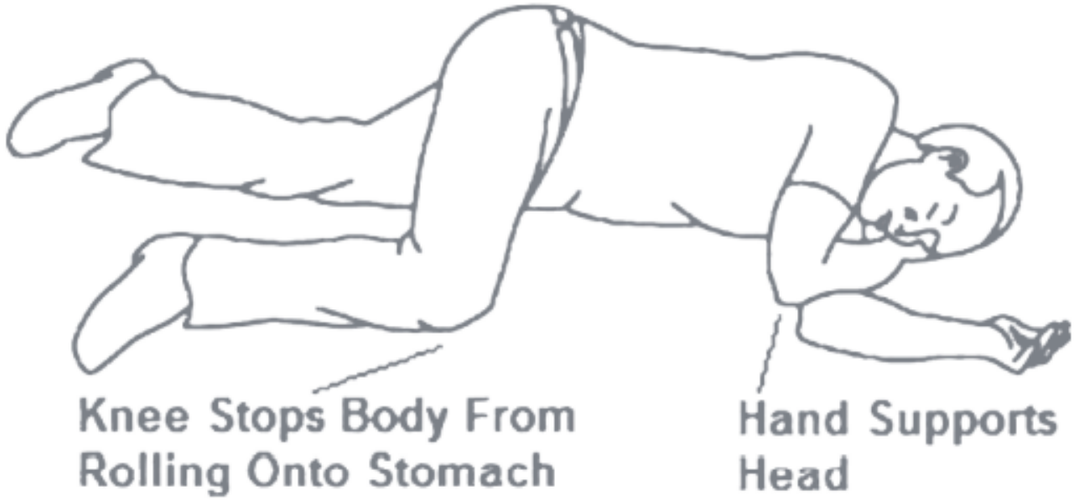
***If instructed to give CPR**, and you do not feel comfortable giving "rescue breaths," chest compression-only CPR is better than no CPR.*



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 <u>does not</u> work. The medication has to get to the brain and start to work.

Community Resources: Treatment and Recovery Services

The **TN REDLINE** is a 24/7/365 resource for substance abuse treatment referrals. Anyone can call or text for confidential referrals.

TN RECOVER

Text **SAVE** to **30678**

The **TN Recover App** is available for people in recovery from substance use disorder or for people looking for more information on substance misuse prevention. The free app is available for Apple and Android.

findhelpnowtn.org

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

The **Crisis Line** is a 24/7/365 resource for mental health crisis. You will be connected to a trained crisis counselor. Available by phone or text.

988 SUICIDE & CRISIS LIFELINE

Community Resources: First Responder Crisis Lines

Safe Call Now: (206) 459-3020 or 1-877-230-6060 This confidential, comprehensive, 24-hour crisis referral service is for all public safety employees, all emergency services personnel and their family members nationwide.

Fire/EMS Helpine: 1-888-731-FIRE (3473) Confidential and 24-hour, the Fire/EMS Helpline was created for first responders by members of the fire service. This program is specifically designed to meet the unique needs of firefighters, EMTs, rescue personnel and their families.

Copline: 1-800-267-5463 This resource is a confidential, 24-hour law enforcement officer hotline manned by retired law enforcement officers trained in active listening.

Additional Resources:

- Tn Dept 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

Department Contact Information

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What can YOU do in YOUR community

Community Involvement

-Join your Prevention Coalition
-Know about/share community resources
-Find support for yourself if someone you love uses substances
-Participate in Fentanyl Awareness Day (May) and International Overdose Awareness Day (Aug 31) events

Keep learning

-Take a training on ACEs, suicide prevention, mental health first aid or other, related topic.
- Schedule a training for your workplace, church, community group

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)