

Support for overdose-reversing drug low, but can be bolstered with right messages

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While most Americans do not support policies designed to increase distribution of naloxone - a medication that reverses the effects of a drug overdose - certain types of educational messages about its lifesaving benefits may bolster support for its use, new Johns Hopkins Bloomberg School of Public Health research suggests.

In a report published July 1 in the journal *PLOS ONE*, the researchers say that combining educational messages about naloxone with sympathetic narratives about people who could have been saved had the drug been available could be key to increasing support for wider availability of the medication.

With the skyrocketing increase in prescription drug use and abuse over the past decade, the researchers say it is imperative to find ways to combat the epidemic. One strategy is the increased availability of prescription-only naloxone to combat overdose. Naloxone, when taken in a short window after overdose, reverses the depression of the central nervous and respiratory systems caused by an excessive quantity of opioid painkillers.

Between 1999 and 2013, the number of people dying from a [drug overdose](#) involving prescription pain medications in the U.S. more than quadrupled, from 4,030 in 1999 to 16,235 in 2013 - that's more than 44 deaths a day. According to a report by the Centers for Disease Control and Prevention, between 1996 and 2010, more than 50,000 people in the U.S. were trained to administer naloxone, resulting in more than 10,000

reported overdose reversals. Naloxone is administered as an injection or nasal spray and is not itself an addictive drug.

"Naloxone is an extraordinarily effective treatment and has been proven to save lives," says the study's leader Colleen L. Barry, PhD, MPP, an associate professor in the Department of Health Policy and Management at the Bloomberg School. "Despite this, stigma toward people with [drug addiction](#) has kept naloxone from becoming an accepted and widely used tool to combat [overdose deaths](#). We are stuck in a pattern of believing that drug addiction is a moral failing rather than a chronic health condition that can be managed with treatment and so we aren't taking important steps to save lives."

A common misperception that impedes strategies to increase access to naloxone - for instance, a doctor prescribing it along with opioids - is that it only encourages increasingly dangerous drug use, but research has suggested that opioid use may actually diminish after a brush with death. Proponents say that risks associated with naloxone use are minimal and that first responders like police or even family members with no medical training can learn to administer it safely.

Other barriers to its widespread use include legal concerns - people who witness an overdose may not call for medical attention or administer naloxone because they fear they will be prosecuted for using drugs themselves.

For the study, Barry and her colleagues surveyed 1,598 adults about their beliefs about naloxone between Sept. 18 and Oct. 13, 2014. The participants were randomly assigned to one of six groups: People who were only asked about their support for naloxone distribution policies, but were provided with no educational information about the drug; those who received simple factual information; those who received factual information plus information refuting some of the common stereotypes

and criticisms of its use; those who heard a sympathetic narrative story about a woman whose daughter became addicted to prescription painkillers after a car crash and then died of an overdose from which naloxone could have saved her; those who heard the sympathetic narrative plus received the factual information; and those who heard all three messages.

Nearly two-thirds of those who received no information at all about naloxone said they support training first responders to use naloxone, but just one-quarter said they supported providing it to friends and families of people with drug addiction. More and more police departments have started having officers carry the drug with them on the job. Only about half supported the passage of laws to protect people who call for medical help for an overdose, 42 percent supported passing laws to protect people from prosecution if they administer naloxone and fewer than 40 percent supported increased spending to improve addiction screening and treatment.

People who were given factual information about naloxone, including the scope of the prescription pain medication overdose crisis and how naloxone works, did support policies to bolster its use at significantly higher levels than those receiving no information, but the largest increase in support for naloxone distribution policies came from people who heard the sympathetic narrative about the family whose daughter overdosed along with the factual information. Nearly two-thirds of those survey participants said they supported providing naloxone to friends and family of drug users, with similar numbers supporting the passage of laws to protect people who call for medical help during an [overdose](#) and those who administer the drug.

"By providing hard facts and humanizing the story of addiction, we found we were able to convince people to support [naloxone](#) distribution policies," Barry says. "These two pieces of information together can be

very powerful. This tells us that to get support for effective treatment, we really need to address the stigma and stereotypes associated with [drug](#) abuse.

More information: "Messaging to increase public support for naloxone distribution policies in the United States: results from a randomized survey experiment" *PLOS ONE*, 2015.

Provided by Johns Hopkins University Bloomberg School of Public Health

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