

## **HSE Press Release:**

### **New HSE 'Naloxone Administration by Addiction & Homeless Service Providers in Ireland: 2018-2020' Drug Insight Report 2 examines the Provision and Use of Naloxone**

Today, 15<sup>th</sup> June 2022, the National Social Inclusion Office has launched the second instalment of their Drug Insights Report Series – '*Naloxone Administration by Addiction & Homeless Service Providers in Ireland: 2018-2020.*'

The aim of the report is to provide an assessment of the impact of the provision of naloxone, and training to addiction and homeless services. The study reviewed data collected by Addiction & Homeless Service Providers for each incident where naloxone was administered from 2018-2020, and uses cost benefit analysis calculations to demonstrate the return on the investment in the Naloxone Programme over the last number of years.

#### **Prof Eamon Keenan, HSE's National Clinical Lead-Addiction Services says:**

*'From a health perspective, it is recognised that the increased availability of training and the provision of naloxone in the community, has potential to reduce drug-related deaths among a population who use opioid drugs. This report has highlighted this fact and continued investment will benefit individuals and their families.'*

*'We have identified a need to improve research, expand provision and engage with stakeholders in relation to naloxone and this is particularly relevant if we observe what is happening in relation to the emergence of synthetic opioids, which carry additional overdose risks, in parts of Europe and North America.'*

#### **Yvonne O'Neill, National Director, Community Operations, HSE says:**

*'This is a programme that fundamentally saves lives, while also producing savings for the state. We look forward to continuing the work of the programme in the coming years and thank the authors of the report for this valuable contribution to the literature in this area.'*

#### **Dr David Evans, Research and Data Officer, Addiction Services, HSE says:**

*'Over the three-year period, naloxone was administered on 569 occasions in overdose situations. Using international literature on survival outcomes, it is estimated that this has resulted in saving at least 22 lives. In reality, these 22 individuals and their families have been given another chance at life.'*

The Naloxone Programme has become an important element in Health Service Executive's (HSE) implementation of the harm reduction approach advocated by our National Drug and Alcohol Strategy '*Reducing Harm, Supporting Recovery: A health-led response to drug and alcohol use in Ireland.*' The increased provision and development of naloxone use in Ireland is centralised around minimizing, '*the harms caused by the use and misuse of substances and promote rehabilitation and recovery,*' in line with Strategic Action 2.2.30, to '*continue to target a reduction in drug-related deaths and non-fatal overdoses.*'

As recommended in the report, the development of the Naloxone Programme will be focussed on ensuring that all those individuals who have been administered naloxone are signposted to relevant treatment services to ensure that their ongoing health needs are addressed. This aligns with Strategic Implementation Group 3 (announced by the Department of Health in 2022), and its' goal to, '*develop integrated care pathways for high risk drug users to achieve better health outcomes*'.

This report aligns with recommendations proposed in *Drug-related Deaths in Ireland: Key Patterns and Trends 2008-2017*, the first NSIO Drug Insights Report, launched last year, which recognises

that; *'naloxone availability for opioid users should be prioritised and its impact monitored on an ongoing basis.'*

The report recognises that The Naloxone Programme should continue to be resourced and expanded to achieve a stronger geographical spread given the demonstrated lifesaving benefits in Ireland.

For information and support in relation to substance use go to [www.drugs.ie](http://www.drugs.ie) or call the HSE Drug and Alcohol Helpline on 1800 459 459 Monday – Friday 9:30 am – 5:30 pm.

ENDS

Notes for Editors:

Download Report and Infographic here: [Naloxone Administration by Addiction & Homeless Service Providers in Ireland: 2018-2020' Drug Insight Report 2](#)

Download: [Drug Insights Report 1, Drug-related Deaths in Ireland: Key Patterns and Trends 2008-2017](#)

Download: [Report of the Emerging Drug Trends and Drug Checking Working Group 2021](#)

Download: [National Drug and Alcohol Strategy](#)

***The report states the following recommendations to help enhance and further develop the programme:***

1. The Naloxone Programme should continue to be resourced and expanded to achieve a stronger geographical spread given the demonstrated lifesaving benefits.
2. The need for gender specific initiatives in terms of overdose prevention and treatment needs further recognition and wider implementation.
3. Ensure that all those individuals who have been administered naloxone are 'signposted' to relevant treatment services to ensure that their ongoing health needs are addressed.
4. Reimbursement of intramuscular naloxone by the PCRS, in line with the National Centre for Pharmacoeconomics, Ireland (NCPE) would merit consideration.
5. Ambulance services should be called in all instances where naloxone is administered. This should be a target set for all service providers and should be reviewed annually and this recommendation should be incorporated into training.
6. The training programme should be reviewed yearly to ensure that the course content is up to date with developments in drug trends, in particular any emergence of synthetic opioids that may influence naloxone requirements. In addition, a refresher training programme should be developed to facilitate skill retention. This should contain practical examples and utilise both face-to-face and remote options to expand the provision of training.
7. Naloxone training and distribution to PWUD should include other potential bystanders, such as; family members, close friends and members of An Garda Síochána.
8. A specific drug education programme for PWUD on overdose risks, in particular polydrug use, should be developed.

9. The process of recording naloxone administrations should be streamlined to facilitate data analysis and to ensure that all naloxone administrations are recorded. Consideration should be given to redesigning the form and developing a secure mobile 'App' or online submission system, in line with GDPR.

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