

# The Need for Standardized Opioid Overdose Education and Naloxone Distribution: It Takes a Community

Category: Oral Presentation

## Abstract Body

Opioid overdoses accounted for more than 75.4% of all drug overdose deaths in the U.S. from April 2020 to April 2021. Opioid overdose education and naloxone distribution programs are harm reduction strategies that help decrease the number of overdose deaths by educating people at risk for overdose and bystanders on how to prevent, recognize, and respond to an overdose. Operation Naloxone is one such program, designed to combat the opioid crisis by reducing unmet treatment needs and opioid overdose-related deaths through prevention and education. This study compares the efficacy of Operation Naloxone in health professions students versus women recovering from substance use disorders.

An exploratory study was conducted at University of Texas Health San Antonio with students from multiple health profession programs (n=166), and Alpha Home, a sober living home for women recovering from substance-use disorder (n=56). Validated pre- and post-training surveys included 9 correct-answer content questions on opioid overdose and naloxone administration, and Likert-scale comfort questions on participants' ability to identify and respond to overdoses. Survey data was analyzed via a Wilcoxon signed rank test. Upon completion of the training, participants received Narcan nasal spray.

In the students, mean knowledge assessment scores increased 20.0%, from 4.37 to 6.17 out of 9 (p-value <0.0001). Pre-training, 19.4% of students felt confident in their ability to identify opioid overdoses and 12.9% were confident in their ability to respond effectively. Post-training, confidence levels rose to 95.2% (p<0.0001) and 95.2% (p-value <0.0001), respectively.

In the patients, mean knowledge assessment scores increased 17.8%, from 3.07 to 4.68 out of 9 (p-value <0.001). Pre-training, 16.1% of patients felt confident in their ability to identify opioid overdoses and 14.3% were confident in their ability to respond effectively. Post-training, confidence levels rose to 46.4% (p-value <0.05) and 42.9% (p-value = 0.19), respectively.

Our results demonstrate a significant improvement in knowledge and confidence about opioid overdoses among both populations, even despite vast differences in participants' learning styles and medical literacy. The similarity in mean differences justifies that standardized education on opioid overdose presentation and response can, and should, be expanded beyond medical trainees and into the community.

### Key Words

- Equity, Diversity, Inclusion issues
- Education
- Opioids/Opiates
- Prevention/Harm Reduction
- Stigma

### Learning Objective # 1

Recognize the need to expand access of opioid overdose education and naloxone distribution to individuals from various socioeconomic backgrounds.

### Learning Objective # 2

Consider the impact of a standardized training on knowledge regarding opioid overdose and response in different types of learners

### Reference # 1

Drug overdose deaths in the U.S. top 100,000 annually. Centers for Disease Control and Prevention.

[https://www.cdc.gov/nchs/pressroom/nchs\\_press\\_releases/2021/20211117.htm](https://www.cdc.gov/nchs/pressroom/nchs_press_releases/2021/20211117.htm). Published November 17, 2021.

### Reference # 2

Walley AY, Xuan Z, Hackman HH, et al. Opioid overdose rates and implementation of overdose education and nasal naloxone distribution in Massachusetts: Interrupted time series analysis. *BMJ*. 2013;346(jan30 5).

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