

<b>Prescribing Protocol</b>	
<b>Title</b>	Take-home naloxone under the Opioid Overdose Response and Take Home Naloxone (ORTHN) intervention (Nyxoid® or Prenoxad®)
<b>Areas where Protocol/ Guideline applicable</b>	District – Outpatient and Community-based services (e.g. Drug and Alcohol, Kirketon Road Centre, Medically Supervised Injecting Centre)
<b>Areas where Protocol/ Guideline not applicable</b>	Inpatient areas, 'on-site' administration by clinicians within healthcare facilities
<b>Authorised Prescribers</b>	Medical Officers, Nurse Practitioners Under the NSW Health <a href="#">ORTHN Policy</a> , take home naloxone can be supplied to patients as part of an intervention by an appropriately trained and credentialed health worker without a pharmacist or medical officer being present
<b>Indication for use</b>	Emergency treatment for known or suspected opioid overdose , with respiratory and/or central nervous system depression <b>*Supply restricted to non-admitted patients at risk of opioid overdose</b>
<b>Clinical condition</b>	Non-admitted patients/clients at risk of opioid overdose, assessed as engaged in recent opioid use or at significant risk of future opioid use Potential witnesses to an opioid overdose
<b>Contra-indications</b>	Hypersensitivity to naloxone or any excipients
<b>Precautions</b>	<ul style="list-style-type: none"> <li>• Take home naloxone products are not a substitute for emergency medical care and cannot replace intravenous injection of naloxone</li> <li>• Patients and/or their carers must receive full counselling and written information on the use of the take home naloxone product.</li> <li>• <b>Opioid withdrawal syndrome:</b> naloxone administration can lead to a rapid opioid reversal and acute withdrawal syndrome. Patients receiving opioids for the relief of chronic pain may experience pain and opioid withdrawal symptoms when Nyxoid® or Prenoxad® is administered.</li> <li>• <b>Paediatrics:</b> absorption may be erratic or delayed. For supply under the NSW Health <a href="#">ORTHN Policy</a>, clients must be 16 years and over.</li> <li>• Use in Pregnancy (Category B1) and breastfeeding</li> <li>• Reversal of respiratory depression by partial agonists or mixes agonists/antagonists (e.g. buprenorphine) may be incomplete</li> <li>• Patients who receive Nyxoid® or Prenoxad® should not drive or operate machinery or engage in other activities demanding physical or mental exertion for at least 24 hours.</li> </ul>
<b>Place in Therapy</b>	First line
<b>Dosage</b>	Nyxoid® nasal spray: 1.8 mg (1 nasal spray) administered into one nostril Prenoxad® 2mg/2mL intramuscular injection: 0.4mg (0.4mL) Further doses may be given every 2 to 3 minutes if needed until emergency care is available.
<b>Important Drug Interactions</b>	Naloxone reverses the analgesic and other effects of opioid agonist analgesics, and may precipitate acute withdrawal symptoms if used concurrently with these medicines in physically dependent patients.

<p><b>Administration instructions</b></p>	<p><b>Nyxoid® nasal spray</b>                  Each device contains only one dose and is ready for use. <i>It must not be primed or tested before administration.</i>                  Insert Nyxoid® device nozzle into nostril. Press firmly on the plunger until it clicks to give the dose. If no response after 2 to 3 minutes readminister into other nostril from a new Nyxoid® device. If more naloxone is available administer further doses every 2 to 3 minutes until person recovers or emergency care is available.</p> <p><b>Prenoxad® intramuscular injection</b>                  Give 0.4mL of Prenoxad® Injection (to first black line on syringe) into the outer thigh or upper arm muscle. If the patient does not respond, repeat dose (to next black line on syringe) every 2 to 3 minutes until person recovers or emergency services are available.</p>
<p><b>Monitoring requirements</b></p>	<p>The effect of some opioids can be longer than the effect of naloxone, which can lead to reoccurrence of respiratory depression. Once patient has responded, patients and their carers should be advised to continue to monitor closely for CNS and respiratory depression until emergency care arrives. Further doses of naloxone may be required.</p> <p>Ongoing monitoring should be attended to by the emergency care team and will depend on the specific medication(s) taken. As well as continued monitoring CNS and respiratory depression, cardiac monitoring, neurological examinations and monitoring for serotonin toxicity may be required.</p>
<p><b>Management of complications</b></p>	<p>Naloxone is NOT a substitute for emergency medical care. If an opioid overdose is suspected, emergency medical assistance should be called immediately.</p> <p><u>Opioid withdrawal syndrome:</u> Receiving naloxone can lead to a rapid reversal of the opioid effect which can cause an acute withdrawal syndrome (body aches, diarrhoea, tachycardia, fever, runny nose, sneezing, piloerection, sweating, yawning, nausea or vomiting, nervousness, restlessness or irritability, shivering or trembling, abdominal cramps, weakness and increased blood pressure). If these signs and symptoms, occur, no further Nyxoid® or Prenoxad® should be given.</p> <p>Patients who are receiving opioids for the relief of chronic pain may experience pain and opioid withdrawal symptoms when Nyxoid® or Prenoxad® is administered.</p>
<p><b>Basis of Protocol</b></p>	<p><a href="#">Nyxoid Product Information</a>, last updated 18 September 2018  <a href="#">Nyxoid Consumer Medicine Information</a>, updated September 2018  <a href="#">Prenoxad Product Information</a> last updated 11 December 2012  <a href="#">Prenoxad Consumer Medicines Information</a> updated January 2018  <a href="#">Consumer Information Sheet - Prenoxad®</a> - NSW Ministry of health 2019  <a href="#">Consumer Information Sheet – Nyxoid®</a> - NSW Ministry of health 2019  <a href="#">NSW Health PD2019_036</a> Opioid Overdose Response &amp; Take Home Naloxone Policy</p>
<p><b>Groups consulted in development of this protocol</b></p>	<p>Kirketon Road Centre                  Prof Nick Lintzeris, Director, SESLHD Drug &amp; Alcohol Services                  Man Cho Leung, Senior Pharmacist, SESLHD Drug &amp; Alcohol Services                  Amy Minett, Acting Quality Use of Medicines Lead Pharmacist</p>

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**Response and Take Home Naloxone (ORTHN)**  
**intervention (Nyxoid® or Prenoxad®)**



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<b>GOVERNANCE</b>	
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Chairperson, QUM Committee	Dr Jo Karnaghan
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