



## THE ALLIED PUBLIC RISK NEWSLETTER

### ALTERNATIVE MARKETS | DEDICATED TO PUBLIC ENTITY

#### *The Opioid Crisis and the Use of Narcan*



### **The Overdose Epidemic**

The US over-prescribes drugs. In 2016, the US population represented five percent of the world's population and accounted for over 80% of the world's drug prescriptions.

Drug overdoses are a national epidemic. On average, in the US, 52,000 people die annually from drug overdoses. Opioids, both prescription painkillers and illegal drugs such as heroin and fentanyl, are responsible for most of these deaths – over 33,000 in 2015. Opioids also cause hundreds of thousands of non-fatal overdoses annually.

### **How do Opiates and Opioids Work?**

Opioid chemicals occur naturally in the body. (Endorphins are an opioid chemical.) Opioid receptors exist on cells in the brain and throughout the body. Opioids work by attaching to specific receptors in the brain, spinal cord and gastrointestinal tract.

The brain and the spinal cord are the central nervous system of the body. The central nervous system acts as the “control center” of the body, controlling vital functions like heartbeat, blood pressure and breathing.

According to the National Institute on Drug Abuse, opioids, when taken in a large single dose, cause severe respiratory depression that can lead to death. In effect, an opioid overdose causes a person to stop breathing and thereby suffocate.

## Overdose Treatment



Narcan (naloxone) is an opioid antagonist which effectively blocks the life-threatening effects of an opioid overdose. Narcan is injected into a muscle, under the skin, or into a vein through an IV. Because the opioid crisis is so pervasive, and because Narcan is so effective, most public agencies now provide Narcan to their first responders.

However, Narcan is a prescription drug and all states generally prohibit the prescription of medications to anyone other than the person to whom it will be administered. As such, we have been asked if our policy will respond to claims resulting from the utilization of Narcan by employed first responders.

Fortunately, at the urging of many community and medical associations, all states have removed some of the legal barriers to accessing and administering Narcan. (See website: [www.networkforphl.org](http://www.networkforphl.org) for a listing of laws by state.)

As always, the facts of the individual claim dictate coverage, but in light of the statutory immunities afforded first responders using Narcan, and the fact that the drug was administered in the course and scope of their employment, our policy would respond to any claims resulting from the administration of Narcan.

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