"Reversing" an Overdose - Law Enforcement and Narcan

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Given the alarming frequency with which law enforcement finds itself as the First Responder in a drug overdose situation, and with the continued abuse of heroin and OxyContin across all social and economic lines, it is not surprising that there has been a hue and cry for all first responders, including police, to carry Naloxone (also known as Narcan or Evzio in its commercially available forms) to "reverse" an overdose. If you are considering outfitting yourself, or those who work for you, with this tool, there are a few things you should know to help protect your municipality, your officers, and the public.

What is Narcan (Naloxone)?

Naloxone is an opioid antagonist. It blocks opioids, like those found in heroin and OxyContin, from attaching to opioid receptors in the brain. The opioids are then excreted in the urine. If you have ever seen Narcan at work, its effects are often almost instantaneous, and quite dramatic. An overdose victim may go from being barely able to keep their head up (or unconscious) to quite alert, and often agitated. Interestingly, but not really surprisingly if you think about it, addicts may go quite quickly into withdrawal symptoms when their drug of choice is removed by Narcan. Anyone who is administered Narcan needs to be constantly monitored, and subsequent doses are often called for.

Who Shouldn't Be Administered Narcan?

A person who has previously had an adverse reaction to Narcan should not be administered the drug. The signs of an adverse reaction include trouble breathing, hives, or swelling of the face, throat, lips or tongue. Narcan can be used on children, and is even used on infants at birth. Its long term effects on pregnant women, however, have not been thoroughly studied.

Can You Overdose on Narcan?

The answer appears to differ, depending upon who you ask. First of all, since Narcan reverses the effects of opioids, it is unlikely to gain popularity as a drug of choice. It is also given in doses small enough that a law enforcement officer is unlikely to administer an overdose, unless the patient has received multiple doses prior to your arrival (something definitely worth checking, as there is a push to get Narcan to as many drug users and their caretakers as possible). Even at repeated, higher doses, according to literature reviewed on the subject, the instance of adverse reactions was minimal. There is also a fair amount of literature out there that will tell you that it is "impossible" to "overdose" on Narcan. That may be technically accurate, again depending on who you ask, but the bottom line is Narcan should not be given to an individual who has had a previous adverse reaction to it, and effort should be made to ascertain whether your patient received a dose or doses prior to your arrival.

Is It Legal for Law Enforcement to Administer Narcan in Pennsylvania?

Not yet, but it probably will be soon. There is a bill before Pennsylvania's House of Representatives (HB 2090) that would legalize the life-saving measure, which has the backing of many in the law enforcement and emergency medical communities. Similar legislative efforts are underway in many states and, even where a

prescription is necessary, there is a strong push to train as many folks as possible in its use, and get the Narcan to first responders, addicts and caregivers, as quickly as possible. The federal government is also involved, with Attorney General Eric Holder recently lending his voice to the effort, in a presentation before the Police Executive Research Forum. There is also federal legislation in the pipeline that would allow the use of Narcan by all first responders.

Are Other Police Departments Using Narcan? Are we "Good Samaritans" Under the Law?

There are several studies going on, and Police Departments in numerous municipalities have successfully utilized the drug. For example, in Quincy Massachusetts, officers administering the drug successfully reversed overdose effects in 211 out of 221 patients. Pennsylvania's Good Samaritan statute does provide an officer protection, as it states:

Any person, including an emergency response provider, whether or not trained to practice medicine, who in good faith renders emergency care, treatment, first aid or rescue at the scene of an emergency event or crime, or who moves the person receiving such care, first aid or rescue to a hospital or other place of medical care, shall not be liable for any civil damages as a result of rendering such care, except in any act or omission intentionally designed to harm or any grossly negligent acts or omissions which result in harm to the person receiving emergency care or being moved to a hospital or other place of medical care.

I have deliberately highlighted the language that carves out the exception to the protection provided by the Act. Where an officer is "grossly negligent" in acting or failing to act, they can still be liable for harm. Such gross negligence could

perhaps be found where an officer administers Narcan to an individual they know had a previous adverse reaction, where they administer additional dosage to someone they know has already received more than the recommended level prior to their arrival, or if they fail to seek additional medical help once an individual is revived. As anyone who has seen such a person rise like Lazarus from the dead knows, the crash that can follow once Narcan wears off, is equally dramatic. An overdose victim and their family and friends need to be told that the overdose can return when this occurs. Similarly, a hard core addict, revived by Narcan, who then experiences withdrawal symptoms, may attempt to overcome the Narcan effects by taking additional opioids as soon as you leave. It is not hard to imagine an allegation that an officer who does not warn of these eventualities, could be subject to suit. While such a suit may not be successful, best to document any refusal of medical care, thoroughly, and to strongly urge further evaluation and observation.

What Do I Do Next?

Offer your support to House Bill 2090, or its federal counterpart, and then arrange for training for your officers, once the legislation becomes law. An addition to your policy to cover the new tool, along with language about the dangers of failing to follow up at a hospital and be observed for twenty-four hours, is also a must. Narcan has the potential to save a lot of lives, but there is no reason for police officers to be exposed to lawsuits for the effort. Train your troops, create and enforce your policy, and don't be afraid to contact risk management or legal counsel with any questions.

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