Lower your risk of dying from an overdose by carrying naloxone

- Tell people where you keep the naloxone
- Learn how to respond to an opioid overdose and share overdose training with friends
- Instructions for using naloxone (written) or bit.ly/Naloxone_Instructions
- Instructions for using naloxone (video) vimeo.com/357020563
- Find naloxone near you or bit.ly/Find_Naloxone

Lower your risk of having an overdose by testing your dose and not using alone

If you use pills or other drugs from the street, the internet, or a friend, you should assume they contain fentanyl. Fentanyl is 50-100x stronger than heroin. Overdose with fentanyl can be fast. If you use any drugs, set safer conditions when possible.

Start low and go slow:

- Use a small amount or tester. If you are using more than one drug, use one drug at a time or use less of each drug.

Use the buddy system:

- If you can, avoid using drugs alone and make sure someone near you has naloxone.
- Have a friend or someone you trust check on you (test, call, or come by)
- Use in a place where someone is more likely to find you if you need help
- Set an alarm or time that other people can hear and will respond to if you overdose
- Use a confidential service like neverusealone.com, by calling (800) 484-3732, or the Brave app

Medications for Opioid Use Disorder (MOUD)

Opioid use disorder (OUD) is a treatable, long-term medical condition. Medications for opioid use disorder are effective and are a part of recovery for many people. There are three medications approved to treat OUD. See below.

<table>
<thead>
<tr>
<th>Approved opioid treatment medications</th>
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<tbody>
<tr>
<td>Buprenorphine</td>
</tr>
<tr>
<td>Methadone</td>
</tr>
<tr>
<td>Naltrexone</td>
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</tbody>
</table>

How does it work?

- Buprenorphine manages cravings and withdrawal symptoms by binding to the opioid receptors
- Methadone manages cravings and withdrawal symptoms by binding to the opioid receptors
- Naltrexone is an opioid blocker, you won’t feel the opioids effects. Manages cravings for some people

Does it reduce harm and lower my risk of dying? Based on research that tracked outcomes in the real world

- Buprenorphine lowers risk of death by about 50%
- Methadone lowers risk of death by about 50%
- Naltrexone has not been shown to lower the risk of death

How long does it last and how do I take it?

- Buprenorphine lasts about 24 hours, usually taken by mouth (implant or injection possible)
- Methadone lasts about 24 hours, taken by mouth
- Naltrexone injection lasts for about 28 days. You can’t take any opioids for 7-10 days before starting

Where can I get it, and what is the process?

- Buprenorphine: Primary care, medical office, community program, and some OTPs
- Methadone: Only dispensed at opioid treatment programs (OTPs)
- Naltrexone: Prescribed and given by a medical provider and at some OTPs

Low barrier, same day start options available. Visits vary from daily to monthly and may require scheduled appointments depending on where you go.

Visits vary from weekly to monthly

Will I need counseling or drug testing?

- Buprenorphine: Most providers require urine drug testing, some require counseling
- Methadone: Requires regular urine drug testing and counseling
- Naltrexone: Some providers require urine drug testing and counseling

(Adapted from UW ADAP) To learn more about these medications, visit: learnabouttreatment.org/

Find medications near you at this website: warecoveryhelpline.org/moud-locator/ or call 1-866-789-1511.