Snuffing Out the Overdose: The Boston BLS Nasal Naloxone Program

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Boston EMS, Police and Fire
BEMS History

- In 1892, the City Hospital Ambulance Service transported its first patient.
- The Ambulance Service consisted of eleven horses and two ambulance carriages.
- Twelve men lived at the facility, and worked as "horsekeepers, shore men, and porters."
This is now...
Only in Boston!
Efficacy of Intranasal Naloxone as a Needleless Alternative for Treatment of Opioid Overdose in the Prehospital Setting

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Intranasal Administration of Naloxone by Paramedics

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Heroin and Boston EMS

- For 2003
- 716 Heroin Overdoses
  “patient encounters”
- 296 involve naloxone
  (Narcan ®)
BLS Nasal Narcan

- Inclusion Criteria
- Hypoventilation or respiratory arrest, RR less than 8
- Not in cardiac arrest
- Clear lung sounds
- Know or suspected opiate abuse, by history or evidence of drug materials
- 15 y.o and up
Administering Nasal Narcan

- Confirm indications
- Confirm patient has no exclusion criteria (nasal trauma/obstruction, sz, wheezing or rhonchi)
- Continue BLS airway support
Boston EMS BLS Nasal Naloxone

- From April 2005 to November 2009---456 patients
- Majority—heroin
- Minority—pharmaceuticals
Additional Results

- Post BLS Naloxone--315 with RR >8
- 23 patients agitated
- 7 patients vomited
- 1 possible aspiration
- 2 hypothermic
- 14 additionally identified as hypoglycemic
- Rapid Transport times
Summary

Used frequently by crews in high opiate areas

Response rate slower than IV, IM

Time to response up to 7 min, specially in those with apnea