

Naloxone

Narcan, Kloxxado, RiVive, Zimhi, Evzio (discontinued), an emergency medicine that reverses an opioid overdose

Naloxone restarts breathing during an opioid overdose. Keeping it nearby is one of the simplest ways to save a life.

WHAT IT TREATS

Opioid overdose

HOW YOU TAKE IT

Spray into one nostril

WHEN IT WORKS

2 to 3 minutes

HABIT FORMING

No, harmless if wrong

✔ This medicine carries **no special FDA safety warning** of that kind.

WHAT THIS MEDICINE DOES

- **Naloxone** knocks opioids off the part of the brain that controls breathing, so someone who stopped breathing starts again.
- You can buy the nasal spray **without a prescription** at most pharmacies, and many health departments give it out free.
- It only works on opioids. If you are wrong about what happened, it will not hurt the person, so give it anyway.
- Keep it where you would keep a fire extinguisher: easy to reach, and known to everyone in the house.

HOW TO TAKE IT

- Signs of overdose: cannot be woken, breathing slow or stopped, gurgling or snoring, blue or gray lips, tiny pupils.
- Try to wake them. Shout their name, then rub your knuckles hard on their breastbone. No response means act now.
- Call **911** first or have someone else call, then peel open the spray, put the tip in one nostril, and press the plunger firmly.
- If nothing changes in **2 to 3 minutes**, give a second dose in the other nostril. More than one dose is often needed.
- While you wait, give rescue breaths if you know how, or roll them onto their side so they cannot choke on vomit.

WHAT TO EXPECT

- Most people start breathing again within **2 to 3 minutes**. They may be confused, upset, or angry when they wake up.
- Naloxone wears off in about **30 to 90 minutes**, and many opioids last much longer. They can stop breathing again.
- That is why **911** still matters even if they wake up fully. Stay with them until help arrives, every single time.
- Fentanyl often needs more than one dose. Having a second device on hand is not overkill, it is realistic.
- Most states protect people who call for help during an overdose. Fear of trouble should never stop you from calling.

COMMON SIDE EFFECTS

- It can throw someone into sudden withdrawal. That feels awful, but withdrawal itself is not dangerous and it will pass.
- Nausea, vomiting, sweating, shaking, body aches, and a runny nose are the usual withdrawal signs after a reversal.
- They may wake up frightened, agitated, or angry at you. Speak calmly, explain what happened, and keep your distance if needed.
- A fast heartbeat, high blood pressure, or a headache can follow. These usually settle as the withdrawal eases.
- Do not give opioids to ease the withdrawal. That is how people stop breathing a second time once the naloxone fades.
- The nasal spray can leave the nose dry, stinging, or stuffy for a while. That is expected and needs nothing.

CALL YOUR PRESCRIBER OR GET HELP RIGHT AWAY IF

- Always call **911**, even if the person wakes up and says they are fine.
- Call **911** again if breathing slows once more after they seemed to recover.
- Get emergency help for a seizure, chest pain, or a heartbeat that will not settle.
- Call **988** if the overdose followed thoughts of ending their life or yours.

WHAT TO AVOID

- Do not leave the person alone, not even to fetch something. Breathing can stop again while your back is turned.
- Do not put them in a cold shower, slap them, or try to make them vomit. None of that works and it can harm them.
- Do not wait to see if they sleep it off. Minutes without oxygen cause brain damage that naloxone cannot undo.
- Do not store it in a hot car or a freezer. Extreme temperatures ruin it, so keep it at ordinary room temperature.
- Check the expiration date a couple of times a year and replace it, the same way you would smoke alarm batteries.

STOPPING IT SAFELY

- There is nothing to stop. Replace the device after you use one, and get a fresh one when the date passes.
- Show everyone in your home where it is and how to use it. In a real overdose you may be the one who is unconscious.
- Pharmacies, health departments, and many community programs give it out free. Cost should never be the reason to go without.
- For free, confidential help finding treatment or supplies, call SAMHSA at **1-800-662-4357**, any hour of the day.

QUESTIONS TO ASK

- How many doses should I keep on hand at home or in my bag?
- Can you show me exactly how to use this device before I go?
- Where can I pick up free naloxone in my neighborhood?
- What should I do while I am waiting for the ambulance?

Where this information comes from

MedlinePlus. (2023). *Naloxone injection*. National Library of Medicine. <https://medlineplus.gov/druginfo/meds/a612022.html>

MedlinePlus. (2023). *Naloxone nasal spray*. National Library of Medicine. <https://medlineplus.gov/druginfo/meds/a616003.html>

MedlinePlus. (n.d.). *Opioid overdose*. National Library of Medicine. <https://medlineplus.gov/opioidoverdose.html>

National Institute on Drug Abuse. (n.d.). *Naloxone DrugFacts*. <https://nida.nih.gov/publications/drugfacts/naloxone>

National Library of Medicine. (n.d.). *DailyMed*. <https://dailymed.nlm.nih.gov/dailymed/>

Substance Abuse and Mental Health Services Administration. (n.d.). *National Helpline*. <https://www.samhsa.gov/find-help/national-helpline>

NOTE

Sources are listed in APA 7th edition style. This handout is general information about a medicine, not medical advice, and it does not replace the instructions from your own prescriber or pharmacist. Never start, change, or stop a medicine on your own. If you think you are having a serious reaction, call your prescriber; if you cannot breathe, cannot stay awake, or are thinking of harming yourself, call 911 or 988 right away.