

## **Saving Lives During an Epidemic**

By Susan McNaughton ~ October 2015

The heroin epidemic has reached crisis levels in our communities across our nation, and it also reaches into our community corrections centers (CCCs).

Realizing that our center staff faced the potential of dealing with heroin overdoses, and also realizing that time is of the essence when it comes to saving the life of such a person, DOC officials in May 2015 made the decision to provide each DOC-run center with Naloxone and required each contracted center to do the same. All CCC employees completed their web-based training that focused on the administration of the drug, and by May 26, the drug was in place at each center and was ready for use.

The placement of the life-saving medication in our centers is vital to helping offenders as they transition home from prison. Ninety percent of DOC offenders go home, and many have a variety of issues they have to overcome to be successful in that transition. Keeping them alive should they overdose on heroin is important. Many are still trying to overcome their addictions, and sometimes they slip up and take the drug while they are living in our centers. Should any of them overdose, we now have given this important tool to our staff.

"I liken it to the movement a few decades ago when people were working to place artificial external defibrillators (AEDs) everywhere," DOC Secretary John Wetzel said. "Today no one bats an eye when they see AEDs everywhere. They are vital in saving lives. So is this medication and its placement in our centers, where some people who are vulnerable to their addictions live while they return home from prison. It is simply the right thing to do."

Wetzel also pointed out that naloxone can be obtained by citizens from certain national drug store chains. In September, CVS announced that it was stocking naloxone on the shelves in stores in Pennsylvania and 11 other states. A prescription is not necessary. In 2014, a law allowed PA police officers, emergency response personnel and firefighters to carry the medication. Gov. Tom Wolf, also in September, encouraged all school districts to obtain the medication.

"This shows the seriousness of this epidemic," Wetzel said. "We need to place this medication everywhere that it can be used, and that includes our half-way houses."

Naloxone, also known as Narcan, is a medication that is used to reverse the effects of opioids especially in overdose. It is administered through the nose and works within several minutes. Sometimes multiple doses are required to prevent a fatal overdose. After its use, emergency follow-up care is required at a hospital.

At what cost to taxpayers?

The DOC pays its pharmacy contractor just more than \$33 for each 2mg/ml syringe that is used as a spray and another \$8.40 for each nasal atomizer.

"How can you put a price on saving someone's life," Wetzel asked. "To pay less than \$42 to save someone... that's well worth the expense."

To date, five offenders' lives were saved throughout the DOC's community corrections system thanks to the availability of the medication.

Within the past six months and as recent as in September, ADAPPT community corrections contract facility experienced two inmate overdoses that required the use of Naloxone.

Operations Manager/Security Director Christopher Lynn was there for both cases, but speaks mostly about the most-recent incident.

Center employees, while conducting routine security checks of the center, found a female resident lying on the floor.

"She had a bluish tint to her skin and was barely breathing and barely had a pulse," he said.

Christopher said she looked exactly how the computer-based training said a victim would look.

Christopher immediately jumped into action without even thinking. He took the syringe and the nasal atomizer out of their individual sterilized wrappers and immediately gave her the initial dose.

"She was on her side, so a lot of it came back out of her nose," he said.

Staff worked to reposition the resident and tilted her head back in order to administer a second dose of ½ of the syringe amount in each nostril.

"You could hear her trying to swallow," he said.

By the time the second dose was administered, EMT and police had arrived. After the second dose, she still was not coming around and a third dose was required and administered by the EMTs.

"After the third dose, you could feel her irregular heart beat become regular and her breathing improved," Chris said. "Eventually she became combative, because that's one of the things that happens with overdose patients when you give them this medication. But you realize that it's just their body's reaction, they aren't trying to assault you."

She was then immediately taken to the hospital for further treatment.

After treatment, the resident did return to the center and then was immediately sent to rehab for treatment. However, Christopher was able to ask her some questions. He said that she said she was scared and that she admitted to using heroin.

What advice would Chris give to anyone facing this type of situation?

"It is scary, but you have to remember that residents are people who have families," he said. "Don't second guess yourself. Do the training and then when faced with the situation just go with it... Don't think."

Christopher said the best advice he got from the EMT was this, "The drug won't hurt them, so just give it. You could save someone's life."

Christopher, who is from the Frackville, Pa., area and has several family members who work for the DOC, has worked in community corrections for five years, starting as a security monitor on second shift at Min-Sec Hazleton. He serves as the security director now at ADAPPT, which is located in Reading, Pa.

Another account of using the medication is provided to us by Harrisburg CCC Monitor Stephanie Pitts, who is the first DOC CCC employee on record as having provided the medication. Here is her account of that incident:

"On July 7, while working the metal detector, I was alerted by two offenders that there was a resident that was turning blue and unresponsive. After responding to the room, I found the offender, who was lying in a top bunk, not responsive and appeared to not be breathing.

After calling control and requesting staff assistance to the room, I checked his pulse which was almost non-existent, and he was making gurgling sounds. He was immediately carried off of the top bunk to the floor for safety precautions.

Recognizing the symptoms as a possible heroin overdose from training, I then quickly administered 2mg of Naloxone Hydrochloride into the offender's nostrils -- (1mg in each nostril). After administering the Naloxone, the offender began to get color back to his face and his pulse was getting stronger. Shortly after, EMS arrived and administered another dose of Naloxone. Once the second dose was given by the paramedics, the offender opened his eyes and began to vomit, becoming somewhat alert. He was then transported to the hospital where he stayed for three days before being released."

Pitts recalls that one of the paramedics mentioned to her that had the medication not been given when it was the offender would not have survived.

"That shows the importance of the medication," Pitts said. "Quick response and teamwork, along with Naloxone is what saved this offender's life. Had it not been for my coworkers responding quickly to assist, I'm not sure the outcome would have been the same."

Pitts, who has been a monitor at the center since May 2011, says that when it comes to someone's life at stake, you do what you can to help them.

"It's a scary situation to be a part of, but you do what you can in the moment and don't second guess yourself," she said.

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