

ACUTE ALCOHOL / OTHER DRUG OVERDOSE: Don't Wait – Get Help!

When a teen or adult is suffering from acute alcohol poisoning as a result of drinking too much too quickly or mixing alcohol with other drugs, or has overdosed on drugs, his/her life may depend on your quick action!

How do you tell the difference between “drunk” and alcohol/drug poisoning?

Someone who has overdosed on alcohol or other drugs may show one or more of the following: snoring or gurgling breathing in someone who appears to be asleep; no response to shaking, to calling of his/her name or to pain; bluish lips, toenails or fingernails (caused by lack of oxygen;) cold, clammy or bluish skin (caused by poor circulation;) very slow and shallow breathing or no breathing at all; a pulse that is very slow, faint or absent; seizures (jerking movements or eyes rolling back;) or extreme confusion. The person may be suffering from alcohol or other drug poisoning if the person cannot be awakened, or if he/she vomits while passed out and does not wake up during or after vomiting. If the person is breathing slowly or irregularly - less than 8 breaths a minute or 10 seconds or more between any 2 breaths, ***the person is in serious trouble and needs immediate help!***

WHAT SHOULD YOU DO TO HELP?

- ◆ **FIRST - CALL 9-1-1 IMMEDIATELY.** Do not hesitate, don't try to diagnose the situation yourself, don't think about any legal or social ramifications; the person's life depends on your quick response! Call 911 and ask them to send an ambulance immediately. If you know or suspect that other drugs may have been taken, tell the ambulance personnel. Drugs or substances that may have been used should be sent to the emergency room with the person.
- ◆ Stay with or have someone stay with the person; if you must leave to call 911 try to return as quickly as possible. If there are no signs or suspicion of trauma or injury, gently turn an unconscious person on the side, one knee forward, hands and other leg outstretched. Loosen clothing that may impede breathing. If there may be trauma or injury, avoid moving the person.
- ◆ Watch his/her breathing closely. If he/she stops breathing, perform rescue breathing. If he/she has no pulse, perform CPR. If you don't know how, CALL FOR HELP and try to find someone who does know rescue techniques.
- ◆ If inhalants may have been involved, CAREFULLY remove bags or other paraphernalia that may provide vapors or impede breathing. (*Be careful to protect yourself and other bystanders from possibly inhaling fumes or vapors!*)

The American Association of Poison Control Centers (<http://www.1-800-222-1222.info/poisonHelp.asp>) has a national 24-hour toll-free hotline for poison emergencies: 1-800-222-1222. Calls are connected to the nearest certified regional poison center, which will provide information for problems involving poisoning. ***If someone may have overdosed, don't wait – CALL 911 IMMEDIATELY!***

DO NOT:

- ◆ ***Do not wait for things to get better or for the drug to wear off - call an ambulance!*** Every second lost increases the chance of permanent brain damage or death.
- ◆ Do not put the person into a bath tub – he/she could drown and it will not help. (However, if someone has overdosed on stimulants, especially “Ecstasy,” and his/her body feels very hot; you can use water-soaked cloths to cool him/her while waiting for the ambulance to arrive.)
- ◆ Do not try to make the person vomit—he/she might inhale the vomit and suffocate.
- ◆ Do not give coffee or anything by mouth - it will not wake up someone who has overdosed and may make him/her vomit.
- ◆ Do not inject or give stimulants to counter the effects of heroin or depressants.
- ◆ Do not inject saline or any other substances – it will not awaken a person who has overdosed.
- ◆ Do not leave the person alone except if necessary to summon help. Stay with him or her until help arrives.
- ◆ Be aware that the effects of “antidotes” such as nalcen or naltrexone usually do not last as long as the effects of depressant drugs such as heroin, and the effects of the overdose are likely to reoccur after the “antidote” effects have worn off. In some cases the “antidote” makes the situation worse. ***Obtain medical help – call an ambulance!***

Know that: Alcohol combined with other drugs accounts for about 30% of all drug overdose deaths.

- ◆ Alcohol in combination with depressant drugs (such as narcotics, barbiturates or benzodiazepines) is especially dangerous, as the depressant effects of the alcohol and the depressant drug potentiate each other.
- ◆ Alcohol in combination with marijuana/cannabis can increase the potential for alcohol toxicity by reducing the incidence of vomiting and thus increasing alcohol absorption.
- ◆ Alcohol in combination with cocaine produces “cocaethylene,” which has a longer duration of action in the brain and is more toxic to the brain, heart, liver and possibly other organs than either drug alone, and more potentially lethal.

Remember that:

- ◆ Blood alcohol levels often *continue to increase* for at least an hour or more after the person stops drinking and may rise even after the person has passed out as the alcohol in the person’s stomach becomes absorbed into his or her blood stream.
- ◆ Do not assume you know what drug may have been taken or the strength of that drug:
 - ◆ Drugs such as GHB can be slipped into an alcoholic or non-alcoholic drink without the awareness or consent of the person whose drink it is, and can cause overdose, illness or death.
 - ◆ The actual content of “street drugs” can not be known for certain. Strengths may vary and the drug may be adulterated with other substances, or may consist of substances other than what the user believes is in the drug. Drug testing “kits” test for the presence of a certain drug such as “Ecstasy” (MDMA) but they do not rule out the presence of other substances.
- ◆ People whose usual level of drug tolerance is reduced, e.g. people who have been abstinent for a period of time due to recovery, treatment, prison, hospitalization etc., are at higher risk for overdose.

Signs of overdose or adverse effects from other drugs:

- ◆ Cannabis: marijuana, hashish: Can occasionally trigger panic attacks, paranoia or schizophrenia-like reactions, requiring professional help. When used with alcohol, can increase the potential for alcohol toxicity.
- ◆ Cocaine, crack cocaine: Can cause a sudden increase in heart rate, blood pressure and breathing; seizures, strokes, irregular pulse, chest pain or heart attack, and death. Overdose can produce confusion, dizziness, panic attacks and irregular breathing with short breathes followed by deep gasps. Aftereffects can include depression, agitation, anxiety and paranoia.
- ◆ Depressants: barbiturates, some tranquilizers: Overdose can cause sedation, slow pulse and breathing rate, low blood pressure, seizures, coma, death.
- ◆ Ecstasy (MDMA): Overdose can cause hyperventilation, overheating, unconsciousness, and death, especially if the “ecstasy” was adulterated with other substances, which is usually unknown.
- ◆ GHB: Overdose can cause vomiting, convulsions, respiratory failure, unconsciousness, coma and death.
- ◆ Hallucinogens: LSD, psilocybin, “mushrooms”: Can cause numbness, weakness, psychosis, delusions, panic attacks, paranoia and schizophrenia-like symptoms that require professional help. “Wrong” mushrooms may result in poisoning, with diarrhea, vomiting, cramps, breathing difficulties, unconsciousness and death.
- ◆ Inhalants: Can cause wheezing, suffocation, loss of motor control, excitability, dazed or drunk-appearing behavior, brain damage, coma, irregular pulse, cardiac arrest, and sudden death. A chemical breath odor may be noticed. Caution: inhalant abusers under the influence may be very excitable, impulsive and sometimes violent. Fright can cause sudden heart failure or arrhythmias.
- ◆ Ketamine: Overdose can cause nausea, vomiting, delirium, heavy slurring of speech, fast heart rate, or temporary and sometimes near-total paralysis, including respiratory paralysis and death.
- ◆ Narcotics: heroin, others: Overdose signs include slow or erratic breathing, tiny pupils, semi-consciousness with little or no response. Lips and skin may become blue tinged. Coma and death can follow.
- ◆ “Poppers” (amyl, butyl or isobutyl nitrate): Can cause low blood pressure, collapse and death. Poisonous if swallowed.
- ◆ Stimulants: methamphetamine, amphetamines, “speed”: Can cause loss of coordination, rapid or irregular heart beat, seizures, heart attack, stroke, collapse, and death from overdose. Can cause violent or psychotic behavior.