

OVERDOSE KNOWLEDGE AND PERCEPTIONS OF TAKE-HOME NALOXONE FOR PATIENTS WITH CHRONIC NON-CANCER PAIN

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Introduction and Aims: Take home naloxone is recommended in response to increasing pharmaceutical opioid-related mortality. As yet, no study has yet assessed attitudes to naloxone supply among people CNCP. The aims of this study were to assess knowledge of opioid overdose and attitudes towards naloxone supply for opioid reversal people with CNCP.

Design and Methods: Telephone interviews were conducted 208 participants from a prospective cohort of Australian adults prescribed opioids for CNCP. Knowledge of overdose symptoms and attitudes towards community supply of naloxone were assessed. Associations with overdose risk factors and naloxone supply eligibility criteria with attitudes towards naloxone were explored.

Results: One in ten reported ever experiencing opioid overdose symptoms. Participants correctly identified less than half of the overdose signs and symptoms. After receiving information on naloxone, most participants (60%), thought it was a 'good' or 'very good' idea. A minority of participants reported that they would be 'a little' (n = 21, 10%), or 'very' offended (n = 7, 3%) if their opioid prescriber offered them naloxone. Positive attitudes towards supply were associated with male gender [OR 1.96 (95%CI 1.09 – 3.50)], past year cannabis use, [OR 2.52 (95%CI 1.03-6.16)] and past year nicotine use [OR 2.11 (95% 1.14 – 3.91)].

Discussions and Conclusions: Most participants' had poor overdose knowledge, yet positive attitudes towards being offered naloxone. Findings suggest naloxone would be well received by those at higher risk of overdose.

Implications for Practice or Policy: Health professionals should not assume patients with CNCP understand the signs of opioid toxicity. Many pharmaceutical overdose deaths occur in the presence of others, and patients with CNCP are open to discussing naloxone, which should support the greater use of this, particularly where greater risk of opioid toxicity exists.

Implications for Translational Research: Cost implications of naloxone supply to a broader population people with lower overdose frequency needs to be explored. The lower levels of baseline knowledge about overdose in patients with CNCP compared to people who inject opioids has implications for translation of opioid overdose prevention interventions across contexts.

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