

AAFS POSITION STATEMENT

For the reasons contained in the AAFS Synthetic Opioid Ad Hoc Committee Report dated July 13, 2017, the American Academy of Forensic Sciences recommends that first responders and forensic service providers involved in the investigation and or handling of suspected synthetic opioids ensure ready access to naloxone as an antidote to inadvertent opioid overdose.

Implementation of naloxone at the worksite should address the following considerations:

1. Naloxone is readily available at the service location
2. Naloxone is accessible to the personnel who may witness an inadvertent opioid exposure or overdose.
3. Personnel are trained to recognize the symptoms of opioid overdose, and to effectively administer naloxone.
4. Naloxone is part of a comprehensive first aid and emergency response plan.

AAFS SYNTHETIC OPIOID AD HOC COMMITTEE REPORT – NALOXONE

July 13, 2017

The American Academy of Forensic Sciences recommends that first responders and forensic service providers involved in the investigation and or handling of suspected synthetic opioids ensure ready access to naloxone as an antidote to inadvertent opioid overdose. To be most effective, naloxone must be available at the forensic service location and to the personnel who may witness an inadvertent opioid exposure or overdose. Forensic service providers and first responders must also ensure that personnel are trained to recognize the symptoms of opioid overdose, and to effectively administer naloxone as part of a comprehensive first-aid and emergency response plan.

Background

Synthetic opioid is a generic term given to a group of synthetic chemicals that bind to opioid receptors in the body and produce narcotic effects. Synthetic opioids depress the central nervous system, and exposure to synthetic opioids can cause respiratory depression, unconsciousness, and death. It is important to note that synthetic opioids can cause respiratory depression at relatively low doses, and symptoms of exposure or overdose may occur rapidly after inadvertent contact with a residual amount of material, such as with an airborne dust or particles on a surface.

Potential Risks

The recent and wide-spread emergence of highly potent synthetic opioids presents a new and enhanced risk to the health and safety of forensic personnel and first responders, particularly personnel handling evidence and performing examinations in the areas of death investigation, seized drug analysis, and toxicology. The toxicity of these compounds, some of which can be as much as 10,000 times more potent than morphine, has resulted in many agencies adopting increased safety measures including

engineering and administrative controls, and personal protective equipment. However, numerous recent situations involving opioid exposure of first responders and laboratory personnel have been reported. In response to these reports, the United States Drug Enforcement Administration has published a fentanyl briefing guide for first responders.ⁱ

Exposure of forensic personnel to synthetic opioids may occur by inhalation of airborne particles or dusts, inadvertent ingestion, or through skin absorption. Symptoms of exposure can occur rapidly, often within minutes of inhalation or ingestion. The victim and potential rescuers may be unaware that the symptoms are the result of a synthetic opioid exposure and may attribute them to other causes. When overdose symptoms are observed, prompt action to administer naloxone greatly increases the probability of survival.ⁱⁱ

Naloxone is a safe, effective, low cost antidote that can reverse the potentially fatal effects of an opioid overdose if administered in time.ⁱⁱⁱ Naloxone is a mu-opioid receptor antagonist and works by displacing opioids from receptor sites to reverse acute opioid toxicity.^{iv} The Food and Drug Administration has approved naloxone delivery devices that require minimal training for successful use.^v

ⁱ Drug Enforcement Administration. (2017, June). Fentanyl: A Briefing Guide for First Responders. Retrieved from DEA Website: https://www.dea.gov/druginfo/Fentanyl_BriefingGuideforFirstResponders_June2017.pdf

ⁱⁱ Substance Abuse and Mental Health Services Administration (SAMSHA). (2016). SAMSHA Opioid Overdose Prevention Toolkit. Retrieved June 1, 2017, from SAMSHA Publications Web site: <https://store.samhsa.gov/product/Opioid-Overdose-Prevention-Toolkit-Updated-2016/All-New-Products/SMA16-4742>

ⁱⁱⁱ Centers for Disease Control and Prevention (CDC). (n.d.). Overdose Prevention. Retrieved June 5, 2017, from CDC Web site: <https://www.cdc.gov/drugoverdose/opioids/odprevention.html>

^{iv} American Society of Addiction Medicine. (2016, October 8). Use of Naloxone for the Prevention of Opioid Overdose Deaths. Retrieved May 26, 2017, from ASAM Web site: <https://www.asam.org/docs/default-source/public-policy-statements/use-of-naloxone-for-the-prevention-of-opioid-overdose-deaths-final.pdf?sfvrsn=4>

^v National Institute on Drug Abuse (NIDA). (n.d.). Naloxone for Opioid Overdose: Life-Saving Science. Retrieved May 26, 2017, from NIDA Web site: <https://www.drugabuse.gov/publications/naloxone-opioid-overdose-life-saving-science/naloxone-opioid-overdose-life-saving-science>