

'THIS IS, WITHOUT A DOUBT, A PUBLIC HEALTH EMERGENCY'

NURSE SHARES FRIGHTENING REALITY OF OPIOID USE DURING CRIME STOPPERS WEBINAR

DAVID LEA
dlea@metroland.com

As the region reels from a surge of suspected overdoses, Crime Stoppers of Halton held a virtual presentation on local opioid use and what can be done to help those struggling with addiction.

The webinar — held in partnership with Halton police and the Canadian Mental Health Association (CMHA) — took place March 23 and was hosted by Danny Sud, a registered nurse with CMHA Halton specializing in addiction and mental health.

Sud said that between January 2016 and September 2018 there were 10,300 opioid-related deaths in Canada.

In Halton last year there were 241 suspected overdoses, 38 of which were fatal.

The same day, Sud held his presentation, Halton police took to social media and reported that since the beginning of March they have responded to approximately 23 suspected overdoses, five being fatal.

The registered nurse also pointed out that someone who survives an opioid overdose can be left with significant brain injuries if not revived quickly enough.

"This is, without a doubt, a public health emergency," said Sud.

In an effort to help his audience understand opioid addiction, Sud discussed some of the reasons people have so much difficulty quitting once hooked.

One reason involves the



Metroland file photo

Opioid use was discussed during a Crime Stoppers of Halton presentation.

brain's production of dopamine, a chemical messenger that lets someone do things like regulate their emotions, manage stress and feel pleasure and happiness.

Sud said that when someone takes an opioid, the pleasure centres of the brain produce two to 10 times more dopamine than normal.

"You feel great, you feel very euphoric, very elated," said Sud.

The downside, he said, is that after abusing opioids for only a short time the body stops producing dopamine on its own, which leaves the user almost completely dependent on opioids to produce dopamine and keep them from feeling horrible.

Worse still, Sud noted, is that after someone stops taking opioids it can take their brain two years to get back to the point where it is sufficiently producing dopamine on its own.

Heavy opioid users can also expect to experience withdrawal symptoms, which range from nausea and vomiting to abdominal cramps and muscle aches and pains.

Sud said these symptoms start within six to 24 hours of stopping opioid use and peak in intensity on the third day.

Withdrawal from opioids is not life-threatening, Sud said.

However, there are risks

to pregnant women and a risk of suicide for some, particularly if the withdrawal is sudden, untreated or forced.

"The withdrawal is so uncomfortable the individual may decide to die by suicide rather than to go through that process," said Sud.

"So, it is so important that individuals that are in the early stages of withdrawal really have the right supports around them, so they do not die by suicide or experience a relapse."

It was also pointed out that people going through withdrawal are at high risk of overdosing if they use again.

Sud said the body rapidly loses the tolerance it has built up once that regular opioid use stops.

He said this tolerance drop can start after as little as a few hours and what that means is someone who takes an opioid at the amount they are used to after a couple days of taking nothing may have an accidental overdose.

Sud said it is essential when supporting someone who has abstained from opioids for a period to advise them to put some measures in place to keep themselves safe if they think they are going to have a relapse.

Halton police have said some of these precautions include: not using alone, going slow when using, knowing the signs of an overdose and carrying naloxone.

When it comes to getting off opioids, Sud said substitution therapy via methadone or suboxone is best.

He said quitting cold turkey seldom works in his experience.

For more information visit <https://www.halton-police.ca/en/staying-safe/overdose-awareness.aspx>.

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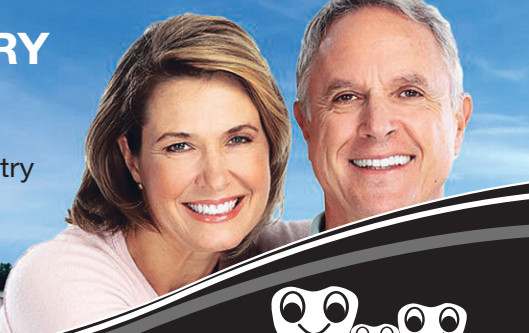
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