

**Main Messages:**

- On June 5, 2017, Governor Doug Ducey declared a public health state of emergency to address the increase in Arizonans overdosing and dying from opioid drugs. This declaration was accompanied by an enhanced surveillance advisory, which requires reporting of certain opioid-related events.
- Under the Governor’s enhanced surveillance advisory, healthcare providers, emergency medical services, and law enforcement must report every suspected opioid overdose to the Arizona Department of Health Services.
- This data will allow the county and state health officials, service providers, and the community to better understand the burden of opioid overdoses on hospitals, emergency services, communities and families and will provide additional information to help better target ways to reduce this burden.
- If a mother uses opioids while pregnant, the baby may be born with symptoms of withdrawal. This condition is called neonatal abstinence syndrome (NAS). The symptoms can be mild or sometimes require treatment in the hospital. After treatment, a baby may need extra care for weeks. Neonatal abstinence syndrome is also a reportable condition under the Enhanced Surveillance Advisory.
- Naloxone, also known as Narcan®, is a drug to treat the effects of opioids and can save the life of someone overdosing on opioids. The enhanced surveillance also allows us to track how many times naloxone has been dispensed by a pharmacist or given to someone who may be suffering from an opioid overdose.

**Additional Information:**

- Initially the numbers are being reported as “possible opioid overdose”. Reporting is based on the symptoms the patients had when seen by emergency medical services, healthcare providers, or law enforcement. Based on their best professional judgment and experience, they report if they suspect someone overdosed on opioids. Until there are laboratory test results, though, it cannot be guaranteed that the overdose was from opioids.
- The Arizona Department of Health Services is collecting more information about possible opioid overdose to determine if opioids were responsible for the overdose.
- The data posted on the [ADHS Opioid Epidemic webpage](#) shows possible opioid overdoses reported on or after June 15, 2017. Any possible opioid overdoses that happened before that day would not be included in the enhanced surveillance data.
- Some opioid overdoses may not be reported yet because reporting just started on June 15, 2017. Many healthcare providers, emergency medical services, and law enforcement are learning how to report, so there may be some delays in reporting. For this reason, we expect to

see an increase in the number of events reported each week. As a result, an increase in numbers will not necessarily mean there is an increase in opioid-related events.

- Neonatal abstinence syndrome can occur when pregnant women are taking medication under the supervision of a healthcare professional or when they have taken an opioid or other drugs.
- Babies with neonatal abstinence syndrome show symptoms of drug withdrawal. Some may have to stay in the hospital longer for treatment. Neonatal abstinence syndrome treatment can last from 1 week to 6 months. Even after medical treatment is over, babies may need extra care and attention for weeks or months.
- *Naloxone Dispensing* is when a pharmacist provides a package and/or “kit” of naloxone/Narcan® to someone for them to have and keep for their use in an emergency (or in case a friend or family members needs it). Pharmacists may also dispense naloxone to certain community-based organizations so that the organizations can then provide the kits to people who may need them. ADHS’s [standing order](#) allows pharmacists to *dispense* naloxone to any individual in Arizona.
- *Naloxone/Narcan® administration* is the act of getting a medication (in this case naloxone) into a person's blood stream.
- Depending on the packaging, naloxone/Narcan® can be administered in one of three ways:
  - (1) Via a mist sprayed into a person's nose;
  - (2) Via an injection directly into a person’s muscle usually in the top of their upper thigh or in the muscular portion of their upper arm or shoulder;
  - (3) Via a needle that has been placed into a person’s vein, usually on the inside of their arm.

The first two methods (#1 and #2) are the most common for the out-of-hospital setting. ADHS’s [standing order](#) allows any individual to purchase naloxone/Narcan® from any pharmacy in Arizona. It is important to read and follow the instructions provided with the naloxone so that you know how to use it. The third method (#3) is for certified/licensed healthcare professionals.