



Pharmaceutical
Society of Australia



Drug Overdose

A drug overdose means taking more of one drug, or combining more drugs, than your body can safely handle. Many drugs can cause harm if used wrongly. This includes prescription medicines, over-the-counter medicines, herbal or natural remedies, alcohol and illegal drugs.

The main drugs involved in overdoses are central nervous system depressants, stimulants and hallucinogens.

Depressant drugs

Depressants slow down the central nervous system. They include:

- Heroin (smack, H)
- Opioids (e.g., pethidine, morphine, codeine, methadone)
- Cannabis (marijuana, pot, dope)
- GHB (fantasy)
- Solvents and inhalants (glue)
- Barbiturates
- Benzodiazepines (benzos e.g., *Rohypnol*, *Valium*, *Serepax*)
- Alcohol (booze, grog).

Stimulant drugs

Stimulants speed up the central nervous system. They include:

- Amphetamines (speed, ice, shabu)
- Cocaine (coke, crack)
- Ecstasy (E, XTC, eccy)
- Slimming tablets (e.g., Duromine)
- Ephedrine
- Caffeine (e.g., coffee, tea, cola, energy drinks)
- Nicotine.

Hallucinogen drugs

Hallucinogens affect perception. They include:

- Ketamine (K, special K)
- LSD (trips, acid, microdots).

Who is at risk of overdose?

The risk of an accidental overdose is higher with illicit drugs, because it is impossible to be sure of the quality and strength of the product being used.

An overdose can happen just as easily to an experienced drug user as to an inexperienced user. In most cases of fatal overdose with drugs such as heroin, other drugs are found in the blood stream at the same time. While too much of one drug can cause death, the effects of a mixture of drugs (a drug 'cocktail') can be equally dangerous and unpredictable.

The same drug can affect different people in different ways, depending on:

- The tolerance of the user i.e. how sensitive their body is to the drug, and how often they've been using
- Physical and emotional condition of the user.
- The quantity of the drug taken
- The mix of drugs used
- The way the drugs are used e.g., injected, swallowed or inhaled.

Treating heroin/opioid overdose

If a person has overdosed with heroin or other opioids, an injection of naloxone can reverse the effects of the opioid immediately. Once the naloxone wears off (about 60 minutes) it is possible to slip back to the original overdose condition. Naloxone can be given by ambulance officers. Narcan is a brand name for naloxone.

Important

If someone has overdosed ('dropped'):

- Phone Emergency 000 for an ambulance
- Check that the person's airway is clear. If not, remove anything from the person's mouth and extend the neck to open the airway
- Check breathing. If the person is not breathing, start mouth-to-mouth resuscitation immediately
- Check circulation by feeling for a pulse in the person's neck
- If there is no pulse, start heart massage (CPR) immediately
- If airway, breathing and circulation are OK, put the person in the recovery position on their side
- Loosen any tight clothing that might restrict breathing
- Keep the person comfortably warm with blankets or a coat

- Stay with the person until professional help arrives
- Explain to the ambulance crew what has happened and what you have done. If you have the information, tell them what the person has taken and how long ago.

Note: If an ambulance comes, but is not needed, the casualty will not have to pay for it.

Warning

If a person has overdosed, DO NOT

- Put them in a bath – they might drown
- Inject them with salty water, speed or other stimulants
- Give them tea, coffee or alcohol or any other fluid
- Make them vomit
- Leave them alone 'to get over it'
- Try CPR if there is a pulse.

Self care and caring for others

For safety, use only legally manufactured and distributed drugs and use them only as directed and/or prescribed. If you choose to use drugs in other ways:

- Avoid combining drugs or combining drugs with alcohol
- Purchase from the same supplier
- Try a small dose first to test the drug strength and its effect on you
- Have other people around when you use, so help is near if needed. Tell someone what you are using
- If you are injecting for the first time or have not injected for a while, use a lower dose
- Always inject slowly
- Don't share injecting equipment
- Some drugs (e.g., ecstasy) can raise body temperature. If you are dancing or in a hot or crowded area, have cool-down breaks and sip water slowly and regularly
- Learn first-aid skills such as resuscitation (CPR) – others may need your help
- Join an ambulance fund. Police do not automatically come when an ambulance is called
- If somebody who has used drugs appears to fall asleep, but you cannot wake them up, they may have overdosed and be unconscious – call an ambulance immediately.

Your **Self Care** Pharmacist

Related fact cards

- *First Aid in the Home*
- *Methadone & Buprenorphine (website only – ask your pharmacist)*
- *Safer Injecting Practices (website only – ask your pharmacist)*

For more information

In an emergency phone 000 and ask for an ambulance. If using a mobile phone out of range, dial 112. This will connect even if there is no network coverage from your provider.

Lifeline – 24hr counselling service – phone 13 11 14.

Alcohol and Drug Information Services (ADIS)

	Australia-wide	State-wide
NSW	(02) 9361 8000	1800 422 599
QLD	(07) 3837 5989	1800 177 833
WA	(08) 9442 5000	1800 198 024
NT	(08) 89228399	1800 131 350
SA	(08) 83638618	1300 131 340
TAS		1800 811 994
VIC	1800 888 236	
ACT	(02) 6207 9977	

Australian Drug Foundation Drug Info Clearinghouse –

Counselling phone 1800 888 236; DrugInfo phone 1300 85 85 84 or website www.druginfo.adf.org.au.

Australian Injecting & Illicit Drug Users League – AIVL –

phone (02) 6279 1600 or website www.aivl.org.au

HEALTH/insite – website www.healthinsite.gov.au

Consumer Medicine Information (CMI) leaflets – your pharmacist can advise on availability.

NPS Medicines Line – phone 1300 888 763 Monday to Friday, 9am to 6pm EST.

The Poisons Information Centre – in case of poisoning phone 131 126 from anywhere in Australia.