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For Immediate Release

Mon County QRT provides lifeline with naloxone training and distribution

MORGANTOWN, WV, Dec. 7, 2020 — Members of the Monongalia County Quick Response Team (QRT) have had a direct impact in providing the community with life-saving training and treatment in the form of naloxone, which reverses the effects of an opioid overdose.

“It’s a great resource to keep people alive, until they’re ready to do something for themselves and make that change,” said Russell Wyatt of WV Sober Living, a peer recovery coach (PRC) and a member of the Monongalia County QRT.

Wyatt recalled a training session at the Morgantown Public Library that directly led to a life being saved. “We received a phone call the next day stating how an employee was able to save somebody.”

Wyatt himself has also had personal experience in helping overdose victims. In one instance, he was able to save an individual’s life in September by having naloxone on hand and the proper training to administer it.

“Naloxone is really important to get to people in danger of opioid overdose,” Wyatt said. “It gives them a second chance, and time for first responders to get to them.”

Also known by its brand name, Narcan, naloxone has been receiving wider distribution in Monongalia County, which, like many parts of West Virginia, has been experiencing an epidemic in substance misuse, including opioids.

The Monongalia County QRT is a collaboration among first responders, public health, peer recovery coaches (PRCs) and other health care and private partners dedicated to providing immediate and longer-term help to those struggling with substance abuse. Funded by grants awarded to Monongalia County Health Department, the QRT meets weekly to discuss strategies for getting treatment and services to individuals who need it.

Reports of individuals who overdose are sent to a Dropbox account that is compliant with the Health Insurance Portability and Accountability Act (HIPAA), and the PRCs then attempt to reach them within

24-72 hours to connect them to treatment and services. As Wyatt noted, sometimes this takes time, and in the meantime, naloxone can help save lives.

“Giving out naloxone can often wedge open the door a little and start the conversation between an individual with substance use disorder and a peer recovery coach or medical provider,” agreed Joe Klass, MCHD Threat Preparedness specialist.

Klass heads up MCHD’s training sessions in how to administer naloxone, which is usually given to a patient in the form of a nasal spray. Once administered, naloxone can provide bystanders and first responders the time to transport individuals to emergency care.

Along with members of the Monongalia County QRT and WV Sober Living, Klass has trained more than 500 people to administer naloxone over the past year and a half, he added.

Nasal spray naloxone has made the potentially life-saving drug more accessible. Training sessions focus on recognizing an overdose, contacting emergency services and administering the drug. Most members of the QRT have received naloxone training.

“Peer recovery coaches are often the boots on the ground as far as providing resources and recovery services to those with substance misuse issues, and they can strategically distribute naloxone to individuals who need it,” Klass explained.

Naloxone, Klass noted, will get an individual to begin breathing again following an opioid overdose.

“Naloxone is a very safe drug, so we teach that if someone is unconscious, they do not appear to be breathing or are not breathing well, and you think for whatever reason it was caused by an opioid, you should go ahead and give naloxone and call 911,” Klass said. “If it turns out the person was having another type of medical emergency, the naloxone won’t hurt them.”

MCHD training sessions normally take 30-45 minutes, including some hands-on practice. Due to COVID-19, the health department is currently offering more virtual training sessions, but small socially-distanced classes are still available.

All licensed EMS agencies in West Virginia carry naloxone in their ambulances and response vehicles. John Hitchens, chief of EMS Operations at Star City Fire & EMS as well as a Monongalia County QRT member, said he has been administering naloxone to patients for 18 years, the same amount of time he has been a paramedic in West Virginia.

“When I began my career, only paramedics would administer naloxone,” Hitchens said. “With the advent, and ultimate inclusion, of the atomizer to West Virginia State Protocols, EMTs could administer this lifesaving drug.”

An atomizer is a component on the naloxone device that turns the liquid into an aerosol so can be absorbed in the nose. Prior to this, naloxone was administered via an injection, which required more technical skill.

Hitchens noted that according to Star City Fire & EMS data, naloxone use rose by 29% from 2019 to now, with almost one more month of 2020 to go.

“This can be directly attributed to the increase in opioid-related emergencies in Monongalia County,” Hitchens said.

However, he noted, the fact that the Monongalia County QRT has been distributing it and providing training has also boosted the presence of naloxone in the area.

Most recently, Hitchens was on a call in November in which naloxone was successfully administered to an individual who had overdosed.

“Due to the presence of drug paraphernalia, no other contributing factors could be determined, so naloxone was administered,” he said. The patient was revived, which meant the naloxone worked. Unfortunately, “the patient ultimately passed related to other medical conditions. But this was a successful administration of naloxone.”

The nasal spray is also available over the counter or through a prescription at most pharmacies.

In Monongalia County, anyone can get naloxone at a pharmacy using one of two standing orders. One was written by Dr. Lee B. Smith, MCHD executive director and county health officer; and the other by Dr. Ayne Amjad, commissioner for the West Virginia Department of Health and Human Resources, Bureau for Public Health and West Virginia State Health Officer.

Both standing orders can be downloaded from MCHD’s website at monchd.org/mon-co-qrt.html. However, that’s not what Michael LeMasters, pharmacist at Pierpont Landing Pharmacy in Morgantown, is accustomed to seeing. LeMasters, a member of the Monongalia County QRT, provides medication-assisted treatment (MAT), which helps enrolled patients in the process of recovery from opioid use disorder.

“I don’t see a large volume of patients asking for it,” LeMasters said. “For the majority of the patients, we end up getting it in their hands. We identify someone via their prescription record or if it’s a new patient from a MAT program and the physician didn’t co-prescribe it.”

Then, he said, nine out of 10 MAT patients do get naloxone, and LeMasters can download Dr. Smith’s standing order to fill the prescription. Outside of Monongalia County, Dr. Amjad’s standing order can be used.

At Pierpont Landing Pharmacy, naloxone, in the form of Narcan, is readily available. Several factors, including type of insurance, insurance formularies or private pay, can impact the final cost of Narcan. Individuals, who might intend to have naloxone used on themselves or who might be getting it for friends, family members or even a potential stranger, are then counseled on how to administer it.

This includes instructions to call 911, as well as the risk associated with not calling 911.

“The golden rule is to call 911,” LeMasters said. “This should be done immediately. A 911 operator can be a coach and help keep the person calm. It can be a very stressful event, so it’s good to have a 911 operator as back-up.”

LeMasters is happy with the feedback he’s received from two patients who were provided naloxone: “They came in and said, ‘Thank you. It worked. It saved someone’s life.’”

To schedule an appointment for naloxone training, email Klass at Joseph.L.Klass@wv.gov.

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