Fact Sheet: Clinicians

When to Offer Naloxone to Patients

Only 1 naloxone prescription is dispensed for every 70 high-dose opioid prescriptions. As a healthcare professional, you play a critical role in ensuring patients receive naloxone.¹

Offer naloxone to all patients prescribed opioids, particularly to patients who are at an increased risk for opioid overdose. In addition, offer naloxone to a patient’s family and caregivers and direct them to resources that will teach them how to administer naloxone.

Three forms of naloxone products are available: nasal spray, injection, and auto-injection. Refer to the Substance Abuse and Mental Health Administration’s (SAMHSA) Opioid Overdose Prevention Toolkit to educate patients, caregivers, and the community about the benefits of having naloxone readily available, the different forms and how to use them. For example, if household members, including children, or other close contacts accidentally ingest or experience an opioid overdose having naloxone nearby is critical. Helping people identify places that dispense naloxone can increase the number of people who carry it.

Far too little naloxone is being dispensed in the United States.¹

- In 2018, rural counties had the lowest dispensing rates and were nearly 3 times more likely to be low-dispensing counties compared to metropolitan counties.

- Primary care clinicians wrote only 1.5 naloxone prescriptions per 100 high-dose opioid prescriptions—a marker for opioid overdose risk.

- Over half of naloxone prescriptions required a copay.

Dispensing naloxone in areas hardest hit by the opioid overdose epidemic can increase the number of lives saved and the opportunity to link people to treatment.¹

Visit Prescribe to Prevent for resources about prescribing naloxone in primary care settings.

LEARN MORE: cdc.gov/opioids/naloxone
Some situations and conditions may make an opioid overdose more likely. The following factors increase risk of opioid overdose:\(^2\)

- A history of overdose
- Patients with sleep-disordered breathing
- Patients taking benzodiazepines with opioids
- Patients at risk of returning to a high dose for which they have lost tolerance (e.g., patients undergoing tapering or recently released from prison)
- Patients taking higher dosages of opioids (e.g., ≥50 MME/day)
- A history of substance use disorder

For more information and resources on naloxone, visit [cdc.gov/opioids/naloxone](https://www.cdc.gov/opioids/naloxone), and for drug overdose prevention, visit [cdc.gov/drugoverdose](https://www.cdc.gov/drugoverdose).

\(^1\)https://www.cdc.gov/vitalsigns/naloxone/index.html
\(^2\)https://www.cdc.gov/mmwr/volumes/71/rr/rr7103a1.htm?s_cid=rr7103a1_w