The Heroin/Opioid Epidemic

Heroin is an opioid drug made from morphine, a natural substance from the Asian opium poppy plant. Heroin can be a white or brown powder, or a black sticky substance known as black tar heroin. Other common names for heroin include dope, horse, junk, smack, mud, black pearl, skag, brown sugar or H. Synthetic opioids like Fentanyl, are 50-100 times more potent and small doses can be fatal. Some people mix it with other drugs or alcohol, which may result in overdose or death. Heroin can be taken by injection, smoked or snorted to avoid track marks.

The rise in heroin use is due to the use of prescription opioid pain killers such as Oxycontin®, Vicodin®, and Demerol® and the assumption that prescription pain relievers are less addictive than illicit drugs. Many individuals turn to heroin because it is cheaper and easier to obtain than prescription opioids. As one of the most addictive substances, the severity of withdrawal and the affects it has on the brain make it very difficult to recover.

This epidemic has not only put our communities and children at risk, it has made our workplaces more dangerous. Whether having to clean up needlesticks and other contaminated paraphernalia, or helping someone who is overdosing, employers must examine the hazards and implement plans to keep workers safe and healthy.

**Signs of Use**
- dry mouth
- flushed skin
- constricted pupils
- heaviness in arms/legs
- fading in and out
- nodding off suddenly
- depression
- memory loss
- needle marks/bruises
- paraphernalia (burnt spoons, lighters, rubber tubes, syringes, tin foil, baggies, pipes,)
- itching
- nausea/vomiting
- behavioral changes
- financial issues
- bloodshot eyes
- sudden weight loss
- paranoia
- slurred speech
- shortness of breath
- drowsiness
- coma
- delirium
- constipated bowels
- low blood pressure
- in/out of conciousness

**Other Health Risks**
- HIV/AIDS
- hepatitis
- kidney failure
- collapsed veins
- death from overdose
- suicide
- brain damage
- sexual dysfunction
- heart problems
- liver disease
- abscesses
- miscarriage
- shallow breathing
- dry mouth
- tongue discoloration
- very small pupils
- slow pulse
- bluish nails/lips
- drowsiness
- coma
- delirium
- constipated bowels
- low blood pressure

**Signs of Overdose**
- dry mouth
- flushed skin
- constricted pupils
- heaviness in arms/legs
- fading in and out
- nodding off suddenly
- depression
- memory loss
- needle marks/bruises
- paraphernalia (burnt spoons, lighters, rubber tubes, syringes, tin foil, baggies, pipes,)

**Overdosing**
The rate of heroin and opioid related overdose deaths has nearly quadrupled since 2002. In 2013, more than 8,200 people overdosed and died. Naloxone is a medicine that can treat an opioid overdose when given right away. It works by rapidly binding to opioid receptors and blocking the effects of heroin and other opioid drugs. Naloxone is available as an injectable (needle) solution, a hand-held auto-injector (EVZIO®), and a nasal spray (NARCAN® Nasal Spray). Friends, family, and others in the community can be trained to use the auto-injector and nasal spray versions of naloxone to save someone who is overdosing.

**Trained laypersons administering these two versions in good faith are immune from criminal prosecution and civil liability in New York.**

**If Someone is Overdosing**
1. Shake them and shout at them to wake up.
2. If no response, conduct a sternal rub by grinding your knuckles into their chest bone for 5 to 10 seconds.
3. If they are in a confined area, like a bathroom stall, try to quickly move them to an open area.
4. If the person still does not respond, administer naloxone, move back from the person and call 911.
5. If you need to leave to call 911 or to get naloxone, leave the person in the rescue position, lying on their left side with their top arm and top leg crossed over their body.
6. Tell the 911 dispatcher “I think someone has overdosed” and follow dispatch instructions.


For more information please visit: www.cseany.org/osh
CSEA has been winning the fight for safe and healthy working conditions for over 100 years, yet there is more to be done. Hazards old and new— from Asbestos to Zika—remain a threat to workers every day. CSEA will not back down from the fight and nothing is more important than saving lives and keeping workers free from injury. Your help is needed now more than ever. The life you save could be YOUR OWN.

Save a life—NEVER QUIT!