Naloxone storage & integrity feedback

From Sarah Ruiz (MA DPH): There are some differences with how our first responder communities are storing the naloxone – in the cab, in a jump kit, in a hard-sided box of its own. In the cab is the most temperature controlled (because that is where the people are) and that has been sufficient.

From Alex Walley (MA naloxone pilot Medical Dir): Squad cars are running or are inside almost full time

From Eric Garcia (Espanola, NM PD): This is a concern for us, after several surveys were conducted by my office and field officers it appears the best financial response was to purchase a secure container that would dampen the heat or the cold. Now of course to purchase a miniature fridge/heating element for each unit was not financially sound so I opted for the research and found that the “Pelican 1030 Micro Case Series” was the best option and is able to comply with our Naloxone Temperature Storage requirements.

Even though the purchase was made for the storage devices we’re still evaluating their ability to keep the Naloxone secure, in addition we also have to use simple common sense and recommend our staff that if it’s in the winter store the Pelican case in the glove box for extra protection or simply take it in the home and secure it with your duty weapon, if it’s in the heat of the summer place the Pelican case in a shaded area or if it’s going to exceed a certain temp take it inside and again secure it with your duty weapon etc.... these are only a few recommendations from my office but appear to have worked.

From Dan Wermeling (U of KY School of Pharm & AntiOp, Inc): You can do a degradation study, like we do in development, to examine stability of drug with elevated temp. Someone would have to get supplies of the materials and develop and HPLC assay. Then store under controlled conditions and pull samples over time to see the degradation rate.

EMS gives lorazepam injection 6 months in their ambulances instead of the 2 years that is typical. Given the OD problem and some of the police reports they may turn over the naloxone quickly enough anyway. In your group, I would look at the turnover and restock or redispense rates.

Recommendations:

1) At 6 months post implementation, assess both the proportion of time patrol units are running and temperature controlled as well as naloxone rescue kit restock rates and decide if:
   a. additional storage units like a Pelican box is necessary and/or
   b. a shorter deployment period (6 months?) than the expiration date for the naloxone doses is warranted.

2) Depending on analysis & research capacity, testing the naloxone integrity under field conditions would be a considerable contribution to the literature, particularly as increasing first responder capacity to respond to opioid overdoses with naloxone is part of the current federal administration’s agenda.