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TITLE OF ABSTRACT: Emergency Services provision of Take Home Naloxone to people at risk of opiate overdose: Perspectives of potential recipients – a qualitative study.

Introduction. UK clinical guidelines recommend that provision of Take Home Naloxone (THN) to heroin and other opiate users can reduce mortality and morbidity in this population. Emergency departments (ED) and ambulance staff could provide ideal opportunities for THN distribution, due to regular encounters with patients experiencing opiate overdose. As part of a wider feasibility study for emergency service provision of THN, we explored people who use opiate perspectives on feasibility and acceptability of THN, based on previous knowledge and experience of overdose.

Methods We conducted qualitative, semi-structured interviews with a sample (n=26) of people who use opiates attending drug treatment outpatient clinic or third sector drug organisation in three UK cities. We analysed data using thematic analysis.

Results Respondents had significant experience of overdose (experienced personally, or witnessed) and high awareness and understanding of overdose management, including personal experience of THN use. Respondents identified some barriers to THN provision at the time of overdose, e.g. reluctance to engage with health professionals at the time of opiate withdrawal but overall were highly supportive of increased access to THN. Service users perceived THN as an acceptable and easy to use intervention, valuing provision of THN via ambulance or ED staff in addition to community provision. THN training and provision gave respondents a sense of self-agency and empowerment and an opportunity to potentially save the lives of others. Respondents wanted more opportunities for friends and family to also undergo training and receive the THN kits.

Conclusion People who access services for their opiate use support increased provision of THN from a wider variety of providers including ED and ambulance staff but also extending to other community support services. Extending THN provision to peers and family of people at risk of overdose could also offer additional opportunities to improve outcomes from opiate overdose events.