Does take-home naloxone program participation result in the use of naloxone at witnessed overdoses: findings from a cohort study of the implementation of the UNODC-WHO Stop Overdose Safely Initiative in Kazakhstan, Kyrgyzstan, Tajikistan and Ukraine.

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### **Background:**

Take-home naloxone (THN) is a recommended strategy for preventing opioid overdose mortality, but most research on THN has been undertaken in high income countries. We sought to examine whether implementation of a THN intervention developed as part of the UNODC-WHO Stop Overdose Safely (S-O-S) project in four countries low-to-middle income countries, Kazakhstan, Kyrgyzstan, Tajikistan and Ukraine results in the use of project-issued THN at 90% of witnessed overdoses.

#### Methods:

An observational prospective cohort study of a sample of S-O-S project participants followed up six months after completing S-O-S study training. Primary outcome was use of naloxone at a witnessed overdose during the follow-up period.

## **Results:**

1646 S-O-S project participants were recruited into the study, 1125 of whom reported a history of injecting drug use. 1388/1646 (84%) completed follow up interviews six months after training. 479/1388 (34.5%) reported having witnessed an overdose since baseline and 89.1% (95% CI = 86.0-91.6) of these participants reported using naloxone at their most recently witnessed overdose. This figure varied from 82.4% in Ukraine to 100% in Tajikistan but did not vary according to participant characteristics such as age and sex.

### **Conclusion:**

Implementation of the S-O-S project in four low-to-middle income countries results in the reported use of THN in line with expected targets. Although this figure varied between countries it was generally higher than found in previous studies. THN implementation is particularly important in countries where emergency medical responses to opioid overdose may be lacking and/or compromised.

# Disclosure of Interest Statement: See example below:

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