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# Naloxone: Another Shot at Life

By Bradley Sylvester

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I remember I was just about to prepare for bed when I heard the faint but distinct screech of the sirens in the distance. A few steps towards the window and my suspicions were confirmed as I was cascaded in blue and red light. An ambulance and two cop cars were flying down my usually quiet suburban street in Upton Massachusetts at an alarming speed. My parents and I scurried outside into the cold night air to investigate the strange scene.

The convoy had stopped just down the street. Right outside a house I recognized. It was the place where an old friend of mine lived.

Let's call him Mark.

As my parents and I watched, EMTs rushed into the house. We could hear a woman crying. A few minutes later the EMTs reemerged carrying what appeared to be Mark lying unconscious in a stretcher. My parents and the small group of neighbors that had gathered nervously talked amongst themselves for a while before retreating back inside. I was silent.

I knew almost immediately it was a heroin overdose.

I had first met Mark years earlier when we were just kids in middle school. We were the same age and had similar interests and quickly developed a friendship and since we lived on the same street we ended up hanging out quite a bit. We played video games and built forts in the woods and did all the things that young boys do.

Our friendship began to deteriorate when we entered high school. I ended up going to a private school a few towns over while Mark attended the local public high school. Mark and I saw less and less of each other and every time we did we both seemed to have changed in some subtle but definitive way. Mark began associating with the wrong crowd and became more and more embellished in the more nefarious elements of our small town. He began using drugs and

what started out as a little pot turned into a lot of pot which eventually turned into cocaine and prescription drugs. At some point Mark began using heroin.

Looking back, it's always been hard for me to understand. It didn't make any sense. Mark was a normal kid from a good family. He grew up in a regular old boring town. We had two stoplights and one bar. This sort of thing just wasn't supposed to happen here. He wasn't poor or from an abusive home or any of those other things that are so often associated with drug addiction. Yet by our senior year of high school Mark was using frequently.

The harsh reality is that today Mark's story is not an uncommon one. We are currently in the midst of the worst opioid epidemic our nation has ever seen. Decades of over prescription coupled with a massive influx of synthetic opioids like Fentanyl have dramatically increased the supply and demand of opioids. Addiction often begins with the opioid based prescription painkiller drugs such as OxyContin and Percocet which themselves are highly addictive and can be obtained legally. Once the prescription runs out, these drugs are hard to find and expensive leaving many looking for an alternative. They soon learn that it is much cheaper and easier to get heroin or a synthetic opioid on the street, and the potency is just as good as, and often stronger than, the original prescription drugs. According to the U.S. Department of Health and Human Services it's estimated that over 2 million Americans have opioid problems as of 2016, and this number has almost certainly grown since<sup>1</sup>. In that year alone, 42,249 people died from overdosing on opioids with 15,469 of those from heroin. Drug overdose are now the leading cause of death for Americans under 50. As one analyst put it, "Overdoses killed more people last year than guns or car accidents, and are doing so at a pace faster than the H.I.V. epidemic at its

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<sup>1</sup> Secretary, HHS Office of the, and Assistant Secretary of Public Affairs (ASPA). "About the U.S. Opioid Epidemic." HHS.gov, US Department of Health and Human Services, 12 Feb. 2018, [www.hhs.gov/opioids/about-the-epidemic/index.html](http://www.hhs.gov/opioids/about-the-epidemic/index.html).

peak<sup>2</sup>.” Perhaps equally as concerning is the fact that the opioid addiction is prevalent in every part of the country. The magnitude and extensiveness of the epidemic when fully realized is simply staggering. It is killing literally tens of thousands of people every year from all over the country.

And the death rates would be significantly higher if it wasn't for one thing:

Naloxone.

Better known by its brand name Narcan, Naloxone is a medication referred to as an “opioid antagonist” which is used to reverse the effects of an opioid overdose<sup>3</sup>. When administered correctly it is highly effective. According to one study, as many as 93% of those who received Naloxone after an overdose survived<sup>4</sup>. Naloxone's well-documented lifesaving ability has led to a full endorsement by the CDC and today most EMTs and police are trained to carry and administer the drug<sup>5</sup>. There are no complete statistics on just how many lives Naloxone has saved but it is indisputably in the tens of thousands range. One CDC report suggests that Naloxone reversed more than 10,000 overdoses between 1996 and 2010<sup>6</sup>. Another report states that as of 2015 as many as 27,000 people had been saved in part due to the proliferation of Naloxone within the public<sup>7</sup>. Today several groups including the CDC have been pushing for the drug to be more accessible to the public so that friends and family members of opioid users will

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<sup>2</sup> Katz, Josh. “Short Answers to Hard Questions About the Opioid Crisis.” The New York Times, The New York Times, 3 Aug. 2017, [www.nytimes.com/interactive/2017/08/03/upshot/opioid-drug-overdose-epidemic.html](http://www.nytimes.com/interactive/2017/08/03/upshot/opioid-drug-overdose-epidemic.html).

<sup>3</sup> “Understanding Naloxone.” Harm Reduction Coalition, [harmreduction.org/issues/overdose-prevention/overview/overdose-basics/understanding-naloxone/](http://harmreduction.org/issues/overdose-prevention/overview/overdose-basics/understanding-naloxone/).

<sup>4</sup> Kounang, Nadia. “Naloxone Reverses 93% of Overdoses.” CNN, Cable News Network, 30 Oct. 2017, [www.cnn.com/2017/10/30/health/naloxone-reversal-success-study/index.html](http://www.cnn.com/2017/10/30/health/naloxone-reversal-success-study/index.html).

<sup>5</sup> “Opioid Overdose.” Centers for Disease Control and Prevention, Centers for Disease Control and Prevention, 29 Aug. 2017, [www.cdc.gov/drugoverdose/prevention/reverse-od.html](http://www.cdc.gov/drugoverdose/prevention/reverse-od.html).

<sup>6</sup> “Community-Based Opioid Overdose Prevention Programs Providing Naloxone - United States, 2010.” Centers for Disease Control and Prevention, Centers for Disease Control and Prevention, 17 Feb. 2012, [www.cdc.gov/mmwr/preview/mmwrhtml/mm6106a1.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6106a1.htm).

<sup>7</sup> “Opioid Overdose Prevention Programs Providing Naloxone to Laypersons - United States, 2014.” Centers for Disease Control and Prevention, Centers for Disease Control and Prevention, 19 June 2015, [www.cdc.gov/mmwr/preview/mmwrhtml/mm6423a2.htm?s\\_cid=mm6423a2\\_e](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6423a2.htm?s_cid=mm6423a2_e).

be able to quickly administer it in the case of an overdose. The fact of the matter is that Naloxone has saved countless lives and given opioid users who would otherwise be dead, another shot at life.

Yet not everyone is onboard. There has been some pushback against the use of Naloxone from those who believe it will only serve to further embolden drug users. It significantly reduces the likelihood of death, which amounts to lowering the overall total risk of taking drugs like heroin, which in turn convinces more people to continue their drug use. Or so their logic goes. Some of these people have opposed legislation that would make Naloxone more accessible to the public. One of the most vocal opponents to expanding access to Naloxone is Maine Governor Paul LePage. LePage has consistently opposed legislation that would allow teenagers to have access and training on how to administer Naloxone. In 2016, he wrote in a letter to the Maine Legislature, “Naloxone does not truly save lives; it merely extends them until the next overdose....creating a situation where an addict has a heroin needle in one hand and a shot of naloxone in the other produces a sense of normalcy and security around heroin use that serves only to perpetuate the cycle of addiction<sup>8</sup>.” LePage is not alone either. One op-ed that received a lot of attention titled *‘Victim’ narrative enables addicts* railed against the idea that Naloxone is the answer to the opioid epidemic; “What social policy is advanced by subsidizing recklessness? Why do we excuse and enable addiction<sup>9</sup>?”

However at the heart of this opposition from LePage and others is a fundamental misunderstanding of addiction. Those who are addicted to opioids often can’t think rationally. In

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<sup>8</sup> Miller, Kevin. “LePage Vetoes Bill Aimed at Increasing Access to Overdose Antidote.” Press Herald, 6 Dec. 2016, [www.pressherald.com/2016/04/20/lepage-vetoes-bill-aimed-at-increasing-access-to-heroin-anti-overdose-drug/?rel=related](http://www.pressherald.com/2016/04/20/lepage-vetoes-bill-aimed-at-increasing-access-to-heroin-anti-overdose-drug/?rel=related)

<sup>9</sup> Kunst Jr., John M. “Opinion: ‘Victim’ Narrative Enables Addicts.” Cincinnati.com, Cincinnati, 26 Feb. 2016, [www.cincinnati.com/story/opinion/contributors/2016/02/26/opinion-victim-narrative-enables-addicts/80995986/](http://www.cincinnati.com/story/opinion/contributors/2016/02/26/opinion-victim-narrative-enables-addicts/80995986/).

other words, they are not themselves. More importantly however, their criticisms seem to completely miss the human element at play here. These are human beings. We must find compassion for them, drug addicts or not, because that is what ethical people do and that is what morality demands of us. Of course these people have made mistakes, huge mistakes, but does that mean they deserve to die? Absolutely not. Opposing Naloxone, or accessibility to it, is essentially a death sentence to thousands of Americans. We cannot simply let them die.

I feel strongly about the issue because I have witnessed the power of a second chance.

Mark was on the cusp of death that cold night four years ago. He is only alive today because the EMTs which responded to the emergency were equipped with Naloxone. Mark would go to rehab and battle drug addiction for some time after this, but I am happy to say that today he is drug free. To me, this is all the evidence I have ever needed to determine which side of this “ethical dilemma” I stand on. Indeed human beings are flawed but they are also capable of powerful change and we would all do well to remember that. Change is possible. People can overcome incredible things and Mark is a living example of that. An addict can never recover if they’re dead. As long as they are alive there is always hope and therefore it is our moral imperative to make sure Naloxone is accessible to all. Of course Naloxone didn’t end Mark’s addiction or resolve the underlying issues of it. It did however give him another chance to do that himself. Naloxone ultimately gave him another shot at life.

And in the end, that shot was more important than all the rest.