

MISSOURI'S ANNUAL NALOXONE REPORT

ADDICTION SCIENCE TEAM
UNIVERSITY OF MISSOURI-ST. LOUIS,
MISSOURI INSTITUTE OF MENTAL HEALTH

A series of light blue wavy lines that flow from the left side of the page towards the center, partially overlapping the 'FY 25' text.

FY
25

TABLE OF CONTENTS

02	Letter from Leadership
03	A Note on Funding
04	Brief Summary
05	Naloxone by the Numbers: Distribution Data FY23 - FY25
06	Naloxone by the Numbers: Distribution through Partners
07	Naloxone by the Numbers: Number of Kits by Agency Type
08	Naloxone by the Numbers: Number of Kits by Naloxone Type
09	Naloxone by the Numbers: Number of Kits by Funding Source
10	Naloxone by the Numbers: Number of Kits Supplied by Funding Source
11	Naloxone by the Numbers: Number of Kits Supplied by County
13	Initiative Highlight: Mail-Based Naloxone
14	Initiative Highlight: Vending Machine Collaborations
15	Expanding Access: Distribution Efforts
17	Moments that Matter: Naloxone in Action
19	Trusted Partnership: Impact through Collaboration
21	Naloxone Types
25	Addiction Science Team

The University of Missouri-St. Louis, Missouri Institute of Mental Health (UMSL-MIMH) Addiction Science Team partners with the MO Department of Mental Health and the Department of Health and Senior Services to operate as a central hub for naloxone distribution across the state.

Funding for naloxone efforts are supported through the State Opioid Response (SOR) grant, Prevention Prescription Drug/Opioid Overdose-related Deaths (PDO/ENACT) grant, First Responders-Comprehensive Addiction and Recovery Act (FR-CARA/MO-CORPS) grants, and Opioid Settlement (NORTH*, NORTH* Responders, DOTS+mobile, DHSS Settlement) grants.

LETTER FROM LEADERSHIP

RACHEL WINOGRAD, PH.D., DIRECTOR OF ADDICTION SCIENCE
LAUREN GREEN, MSW, DIRECTOR OF OVERDOSE PREVENTION & COMMUNITY HEALTH
CASEY JOHNSON, MA, AANG, DIRECTOR OF SUPPLY DISTRIBUTION

Over the past two years, Missouri has made remarkable progress in overdose prevention. Opioid overdose deaths fell for the second consecutive year, down 36% statewide, and declined across all regions and racial groups. The decrease was greatest in the Central Region (down 57%!) and also in the St. Louis Metro (down 42%), where the overdose crisis has historically hit hardest. These declines offer a powerful glimpse of what progress can look like when efforts are sustained and focused.

These drastic decreases in opioid overdose deaths were undoubtedly made possible by Missouri's simultaneous dramatic increase in naloxone access. In FY25, the UMSL-MIMH Addiction Science Team distributed more than 639,000 naloxone kits—nearly 1.3 million doses and double the number from FY24—through partnerships with 1,502 organizations and 326 individuals across all 115 Missouri counties. This growth was driven by a combination of strategic funding and a rapidly expanding partner network, including 515 new entities that joined the effort this year.

Naloxone distribution efforts continued to evolve to meet communities and community members exactly where they are. Grassroots organizations and outreach teams remained the largest distributors statewide, playing a vital role in reaching people at highest risk. Vending machines and mail-based distribution helped expand low-barrier access, especially in regions with limited service infrastructure. A diverse supply of naloxone products—including 3mg and 4mg nasal naloxone as well as intramuscular formulations—allowed the program to both stretch resources and better match the needs and preferences of different people and groups.

The momentum in FY25 was made possible by the dedication of partners across the state: those who continue to show up, innovate, and lead with compassion. While no single factor can fully explain the decline in overdose deaths, expanding access to naloxone remains a cornerstone of Missouri's response and surely played a huge role. Naloxone saves lives—but it doesn't do anything if it's sitting on a shelf somewhere. It's the people who get it, carry it, distribute it, and use it who save real lives and make the real impact.

To everyone who has carried naloxone, shared it with someone in need, reversed an overdose, or survived one and chosen to help others—you are the heart of this work. Your actions, rooted in care and connection, are saving lives across Missouri. We see you, we thank you, and we're grateful you're out there!

A NOTE ON FUNDING

DMH/DHSS joint funded projects:

Opioid Settlement

This is a collaborative effort between the Missouri Department of Mental Health and the Missouri Department of Health and Senior Services. Funding for this effort is supported through Opioid Settlement dollars awarded to the state as part of the attorney general's settlement with opioid pharmaceutical distributors. This project aims to reduce overdose fatalities through increased overdose education training and saturation of naloxone across the state of Missouri specifically among the following sectors: substance use and mental health treatment providers, criminal justice settings, first responders, hospitals, housing providers, schools, federally qualified health centers, prevention organizations, local public health agencies, social service organizations, vending machines, and outreach and individual distribution.

DMH funded projects:

DOTS+MOBILE: The Drug Overdose Trust & Safety + Mobile

This is a project funded through the Missouri Department of Mental Health through opioid settlement dollars that empower first responders to reduce opioid overdose deaths through EMS field initiation of buprenorphine and naloxone distribution.

State Opioid Response (SOR)

This is a SAMHSA-funded grant, focused on prevention, treatment, and recovery from opioid use. Naloxone distribution through this effort targets grassroot community organizations, outreach, faith-based organizations, recovery community centers and recovery housing organizations.

Prescription Drug Overdose (PDO) — Expanding Naloxone Access and Community Treatment (ENACT)

This is a SAMHSA funded grant, focused on the expansion of mail-based naloxone distribution across Missouri as well as training and education.

DHSS Funded Project:

First Responder-Comprehensive Addiction and Recovery Acts Grant (FR-CARA) —

Coordinating Overdose Response Partnerships and Support (MO-CORPS)

This is a SAMHSA funded project focused on naloxone distribution to law enforcement officers and emergency responders.

BRIEF SUMMARY

In Fiscal Year 2025 (FY25) **July 1, 2024 to June 30, 2025**, the UMSL-MIMH Addiction Science Team distributed 639,157 naloxone kits across 1,502 unique partners and 326 individuals, in all 115 counties across Missouri.



639,157

naloxone kits
distributed



1,502

unique partners
received naloxone



326

individuals received
naloxone



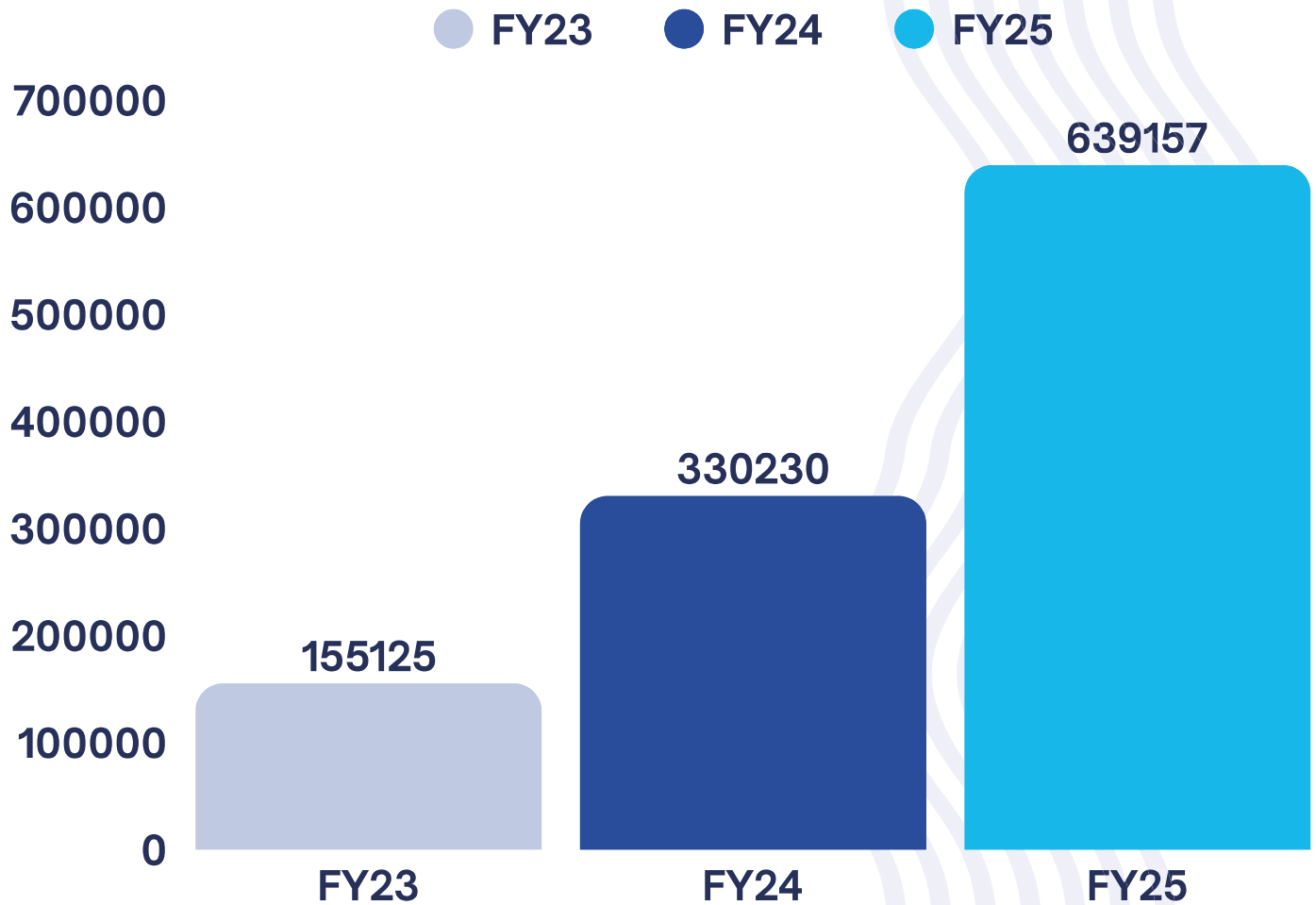
EVERY

county across Missouri
received naloxone

The UMSL-MIMH Addiction Science Team partners with the Missouri Department of Mental Health and the Department of Health and Senior Services to serve as a central hub for naloxone distribution across the state. These efforts are funded through multiple sources, including the State Opioid Response (SOR) grant, Prevention of Prescription Drug/Opioid Overdose-Related Deaths (PDO/ENACT) grant, First Responders–Comprehensive Addiction and Recovery Act (FR-CARA/MO-CORPS) grants, and Opioid Settlement (NORTH, NORTH* Responders, DOTS+mobile, DHSS Settlement) funds.*

NALOXONE BY THE NUMBERS

Naloxone Distributed FY23-FY25



- In FY25, naloxone distribution continued its positive momentum, making a significant impact on Missouri's overdose crisis, which have seen recent declines as efforts have expanded. With increased support from opioid settlement funds, the Addiction Science Team successfully forged new partnerships statewide, rapidly expanding naloxone access and availability.
- As a result, more people and communities than ever before—from St. Louis to Kirksville to Joplin, and everywhere in between—were equipped with this life-saving medication.

NALOXONE BY THE NUMBERS

335,303

additional kits were
distributed in
FY25 vs FY24

515

additional partners,
consultants, or individuals
were supplied in
FY25 vs FY24

TOP NALOXONE DISTRIBUTORS:

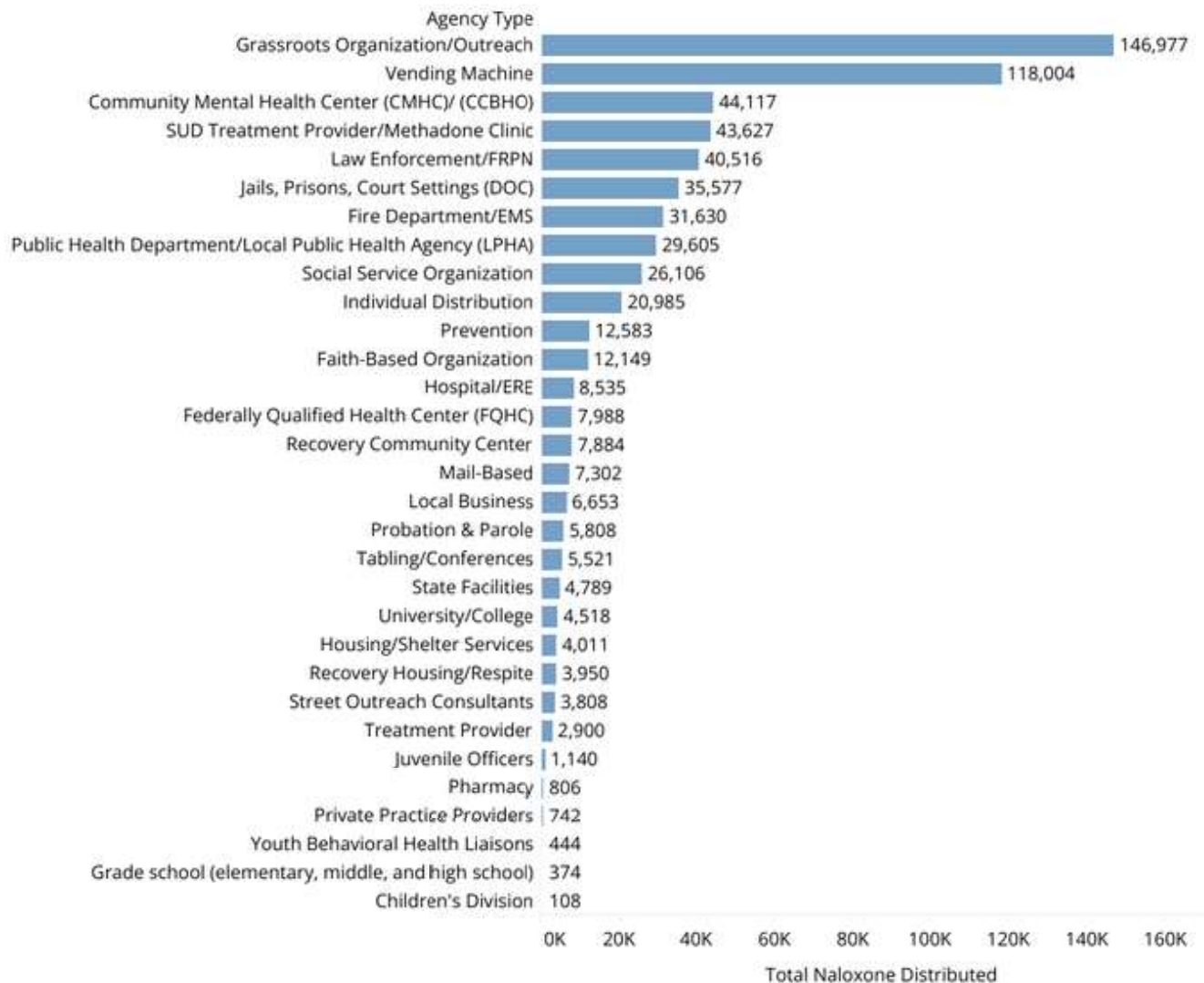
1. Confluence.....	56,744
2. Heartland Center for Behavioral Change.....	26,973
3. MO Network.....	26,536
4. St. Louis County Department of Public Health.....	22,020
5. AIDS Projects of the Ozarks	15,612
6. Assisted Recovery Communities of America.....	14,672
7. PreventED.....	12,111
8. City of St. Louis Department of Health.....	12,000
9. Ozark Center.....	7,008
10. ReDiscover.....	6,768

The Addiction Science Team continues to work through strong partnerships with organizations across the state of Missouri. This collaboration is essential to increasing access to naloxone and other overdose prevention resources for a safer and healthier Missouri.

Thank you to all of our partners.

NALOXONE BY THE NUMBERS

NUMBER OF KITS BY AGENCY TYPE

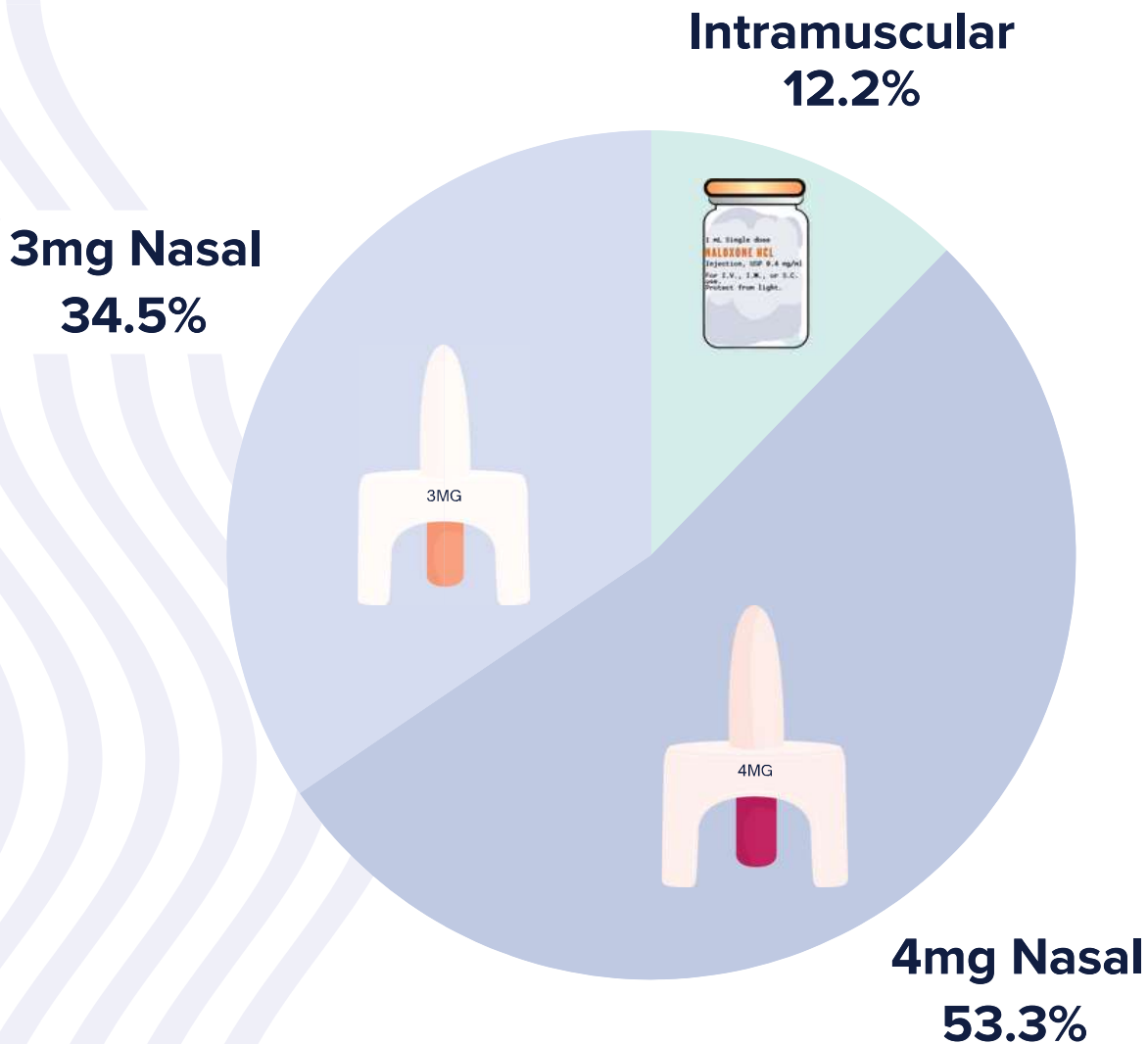


In FY25, the Addiction Science Team continued distributing naloxone to a wide range of organizations while cultivating and strengthening relationships across Missouri's public health landscape. Grassroots organizations remained the primary recipients, reflecting their vital role in community-based overdose prevention efforts.

Many new vending machine programs were introduced across Missouri in the last fiscal year, providing low-barrier, community-based access points for naloxone and other resources. Their implementation increased community naloxone access.

NALOXONE BY THE NUMBERS

NUMBER OF KITS BY NALOXONE TYPE



- Nasal naloxone distribution included Narcan (22.6%), Padagis (29.9%), RiVive (34.1%), and Teva (1.2%). Offering a range of brands allowed the Addiction Science Team to distribute naloxone from multiple supply streams while meeting the specific needs and preferences of partner agencies and the communities they serve.
- Intramuscular naloxone continued to be distributed across both rural and urban communities in Missouri, accounting for more than one in ten naloxone devices distributed. Providing both intramuscular and nasal formulations allows professionals and community members to choose the type, or combination of brands, that best fits their needs and context.

NALOXONE BY THE NUMBERS

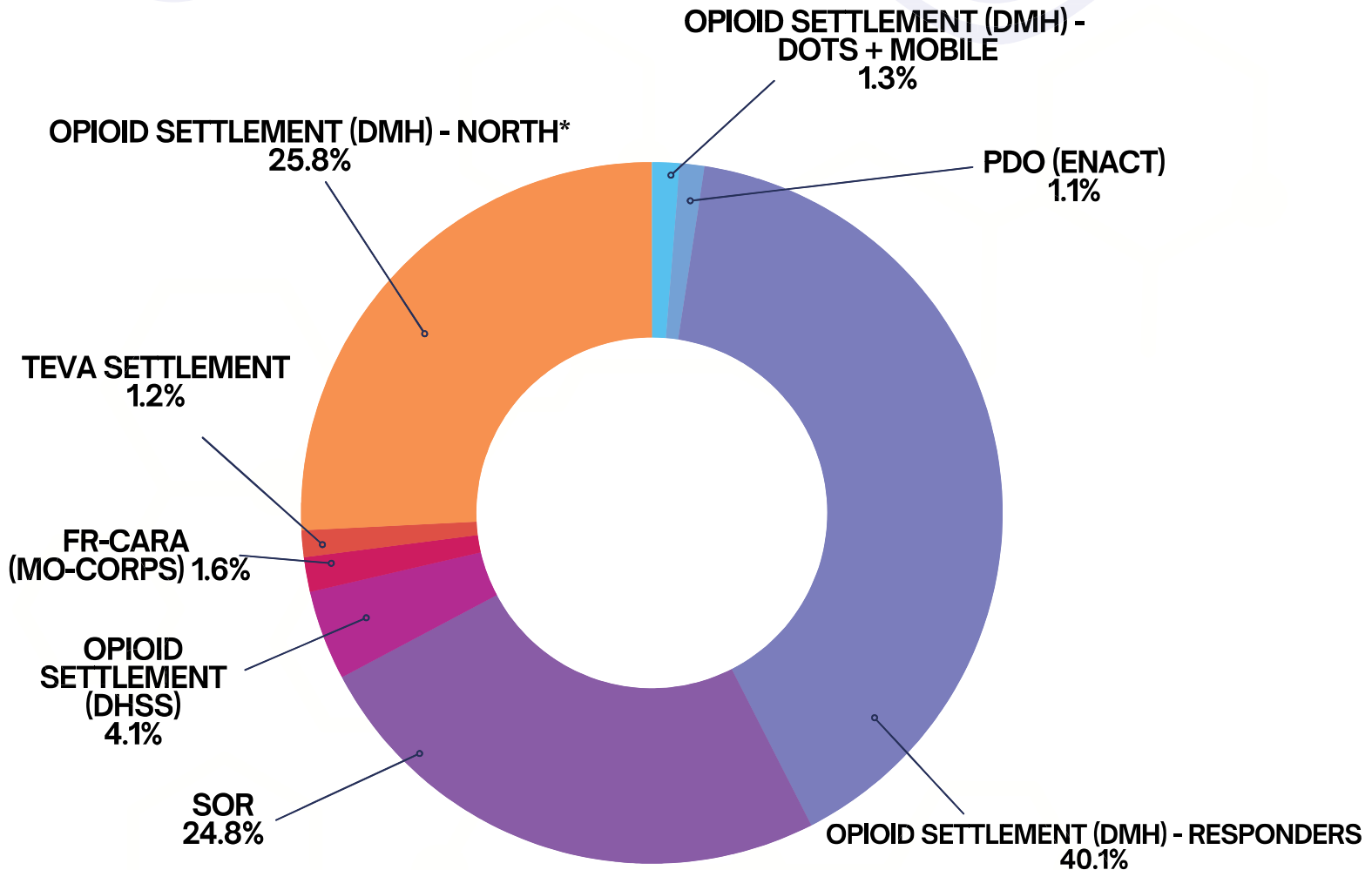
NUMBER OF KITS BY FUNDING SOURCE

Grant	Kits
Opioid Settlement (DMH) - Responders	256,189
Opioid Settlement (DMH) - NORTH	164,866
SOR	158,197
Opioid Settlement (DHSS)	26,443
FR-CARA (MO-CORPS)	10,224
Opioid Settlement (DMH) DOTS + MOBILE	8,097
Teva Settlement	7,843
PDO (ENACT)	7,298

NALOXONE BY THE NUMBERS



OF KITS SUPPLIED BY FUNDING SOURCE



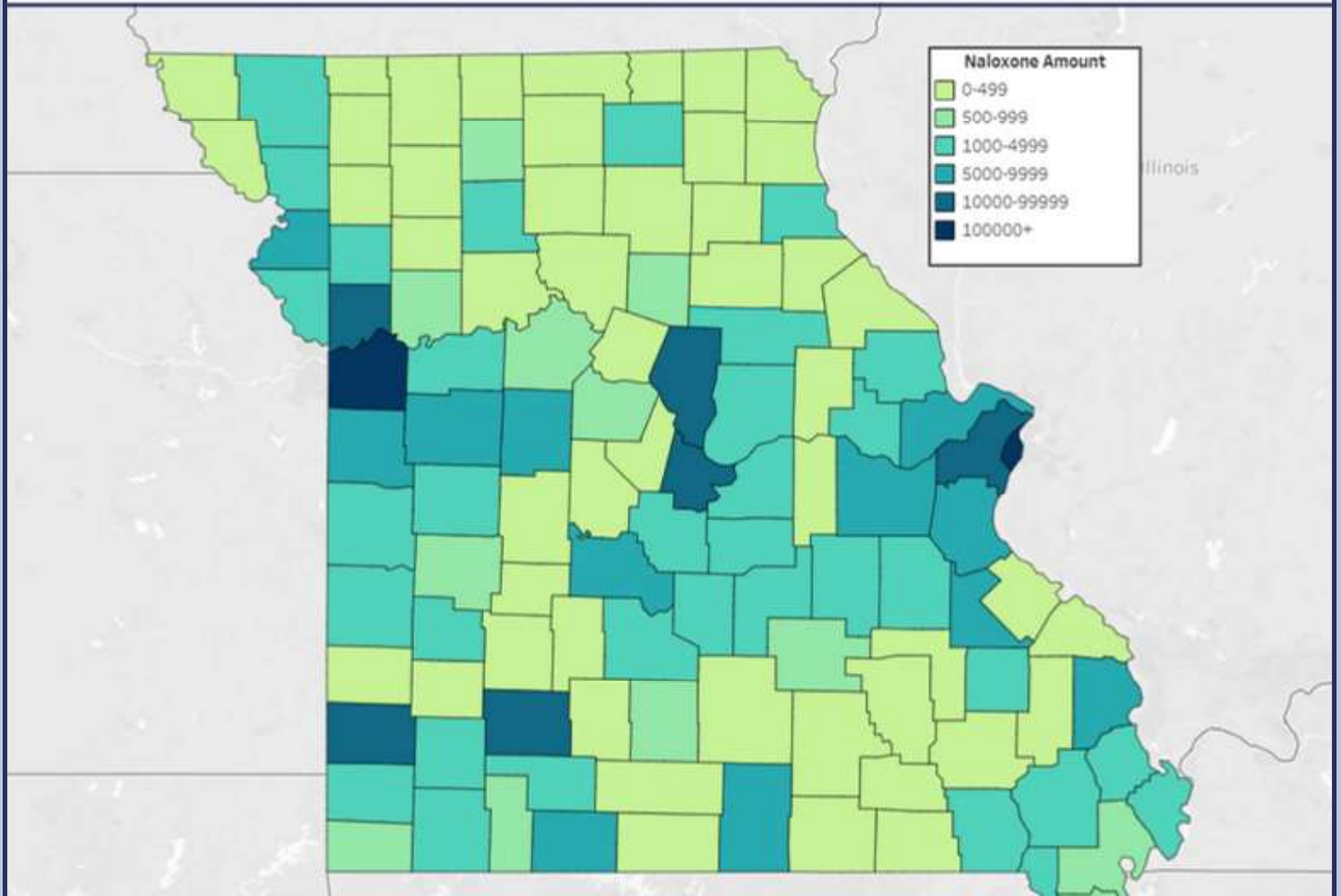
- State Opioid Settlement funds across DMH and DHSS led the way, supplying 71.3% of all naloxone kits distributed in FY25.
- The State Opioid Response (SOR) grant was the next largest contributor, providing nearly a quarter of total kits and underscoring the continued importance of federal support.
- A mix of smaller sources—including FR-CARA (MO-CORPS), Teva Settlement, and PDO (ENACT)—helped fill gaps and expand reach, demonstrating the value of diverse and flexible funding streams.

NALOXONE BY THE NUMBERS



OF KITS SUPPLIED BY COUNTY

Naloxone Distributed by County Fiscal Year 2025



- Naloxone distribution reached every county in Missouri during the last fiscal year. Outreach efforts, both internal and external, make it possible to grow partnerships in each community that make Missouri whole.
- *Tip: You can scan the QR code and interact with the online map by selecting a county directly on the map or by choosing a county name on the table on the right.*



<https://qrco.de/bgJJJaF>

NALOXONE BY THE NUMBERS



OF KITS SUPPLIED BY COUNTY

FY 2025 TOTAL: **639,157**

Adair County	2,302	Dallas County	82	Livingston County	2,975	Randolph County	635
Andrew County	1,236	Daviess County	24	Macon County	140	Ray County	750
Atchison County	334	DeKalb County	252	Madison County	1,648	Reynolds County	132
Audrain County	2,000	Dent County	866	Maries County	1,003	Ripley County	182
Barry County	3,083	Douglas County	314	Marion County	2,882	St. Charles County	5,969
Barton County	436	Dunklin County	1,993	McDonald County	932	St. Clair County	906
Bates County	4,730	Franklin County	6,348	Mercer County	48	St. Genevieve County	332
Benton County	371	Gasconade County	394	Miller County	1,072	St. Francois County	6,690
Bollinger County	222	Gentry County	284	Mississippi County	2,124	St. Louis County	85,882
Boone County	13,440	Greene County	42,422	Moniteau County	480	St. Louis City County	100,882
Buchanan County	8,798	Grundy County	516	Monroe County	148	Saline County	588
Butler County	2,556	Harrison County	354	Montgomery County	282	Schuyler County	294
Caldwell County	49	Henry County	3,211	Morgan County	432	Scotland County	47
Callaway County	2,742	Hickory County	26	New Madrid County	599	Scott County	1,761
Camden County	6,255	Holt County	132	Newton County	1,365	Shannon County	161
Cape Girardeau County	7,193	Howard County	153	Nodaway County	1,782	Shelby County	64
Carroll County	56	Howell County	6,016	Oregon County	45	Stoddard County	1,566
Carter County	222	Iron County	256	Osage County	2,666	Stone County	886
Cass County	6,760	Jackson County	166,568	Ozark County	88	Sullivan County	208
Cedar County	1,090	Jasper County	14,399	Pemiscot County	524	Taney County	5,544
Chariton County	4	Jefferson County	9,748	Perry County	290	Texas County	366
Christian County	1,810	Johnson County	7,169	Pettis County	6,690	Vernon County	1,483
Clark County	300	Knox County	168	Phelps County	4,049	Warren County	1,542
Clay County	17,617	Laclede County	1,964	Pike County	224	Washington County	1,436
Clinton County	2,188	Lafayette County	3,830	Platte County	2,431	Wayne County	82
Cole County	18,620	Lawrence County	2,419	Polk County	44	Webster County	377
Cooper County	926	Lewis County	190	Pulaski County	2,662	Worth County	44
Crawford County	2,392	Lincoln County	3,643	Putnam County	156	Wright County	716
Dade County	208	Linn County	36	Ralls County	134		

INITIATIVE HIGHLIGHT

MAIL-BASED NALOXONE



The Addiction Science Team continues to collaborate with regional (MoNetwork) and national (NEXT Distro) leaders in mail-based naloxone distribution. These partnerships ensure that populations across Missouri can access life-saving medication regardless of geographic location, physical abilities, or local availability.

7,302

In FY25, we distributed 7,302 naloxone kits statewide through these collaborations.

40.6%

NEXT Distro reported that 40.6% of recipients indicated they could not afford naloxone and would not have been able to obtain it without this mail-based service

- Additionally, many respondents highlighted **challenges in reaching local access points due to disabilities and transportation issues.**



NEXT Distro
STAY ALIVE, STAY SAFE.



[HTTPS://WWW.NEXTDISTRO.ORG/](https://www.nextdistro.org/)

[HTTPS://WWW.MONETWORK.ORG/](https://www.monetwork.org/)

INITIATIVE HIGHLIGHT

VENDING MACHINE COLLABORATIONS

- Vending Machine access allows residents across Missouri to access naloxone any time of the day, in their local areas, and at facilities that have public health professionals who can offer further assistance, if needed.



- In FY25, the Addiction Science Team collaborated with organizations around the state to supply naloxone vending machine programs with 118,004 boxes of naloxone.



EXPANDING ACCESS: DISTRIBUTION EFFORTS

We provide overdose education and naloxone to every client with a substance use disorder during our orientation to services at the time of admission, following any reported accidental overdose, at high-risk time periods (release from jail, hospitalization, and upon request following use of their current supply). In addition, we have held multiple Overdose Awareness Events, including several at schools following overdoses, in which overdose education and naloxone were provided.



- COMPASS HEALTH

The Clay County Public Health Center (CCPHC) started the naloxone distribution program in August 2023 with one vending machine placed in the lobby of the health center. The program was scaled up with two additional machines in March 2024.

Thanks to funding from the Clay County Opioid Settlement Fund, as of July 2025, five new machines are now available.



**- CLAY COUNTY PUBLIC
HEALTH CENTER**

Every Kansas City Public Library location has naloxone available and free to the public. Three locations have special designated bins for distribution that were provided by Cornerstones of Care through a grant. Other locations have them available for pickup at service points. As an urban library, we must adjust and add resources based on the needs of our patrons.



- KANSAS CITY PUBLIC LIBRARY

When Boone Health originally launched its Naloxone Take Home Kit program, the kits were only distributed out of the emergency department. Over the past year we have had the opportunity to grow our program to include additional departments in our health system to continue reaching each of the patients we serve.

To expand beyond our patients and ensure we were providing resources to our community we began stocking the kits on our community wellness bus.



- BOONE HEALTH

EXPANDING ACCESS: DISTRIBUTION EFFORTS

Our naloxone vending machines have become our most utilized distribution method, currently deployed at six strategic locations across our service region. These free and anonymous machines are placed in high-traffic community areas, allowing 24/7 access to naloxone, Deterra drug deactivation and disposal bags, and Fentanyl test strips — without stigma or barriers.



- CENTRAL OZARKS MEDICAL CENTERS

We distribute naloxone through multiple channels: at our Recovery Community Center, during street outreach three days a week, at community events, through partner organizations, and by stocking our publicly accessible naloxone boxes throughout the community every week. We've been stopped while refilling these boxes and told, more than once, that "this box saved a life."



- MoNetwork

For nearly three years we have been seeding our community with naloxone in the form of leave behind kits. We have targeted all overdose calls, even if the substance is not opioids. Additionally, we have free, open to the public, access points where the community can come and collect naloxone, as well as resources and fentanyl test strips.



- RAYTOWN FIRE DEPARTMENT

We keep naloxone kits stocked at our front desk, which are available on a walk-in basis or through online requests at jcph.org/opioids. We also offer free training and supply delivery to community organizations like transitional living centers, churches, and teen centers. By far, though, we distribute the most naloxone through our satellite access points.

As of July 2025, we operate 17 access points in our jurisdiction. These range from countertop naloxone stands at local businesses, to pole-mounted dispensers in parking lots, to porchboxes outside of fire stations and health clinics.



- JACKSON COUNTY HEALTH
DEPARTMENT

MOMENTS THAT MATTER: NALOXONE IN ACTION

A community partner shared that someone accessed one of our rural naloxone vending machines and used the naloxone to successfully reverse an overdose at a local event. Because of that intervention, the individual was later connected to COMC's MAT program and is now receiving ongoing care and support. This story powerfully illustrates how timely access to naloxone can bridge the gap between crisis and care; especially in rural areas where stigma or distance might otherwise be a barrier.

- CENTRAL OZARKS MEDICAL CENTERS



In the past year, we've distributed thousands of doses — many of which have been used to reverse overdoses in real time. Our participants regularly return to tell us, "That naloxone you gave me saved someone's life." It's a reminder that this work isn't just important — it's urgent, and every kit is a chance for another tomorrow.

- MONETWORK



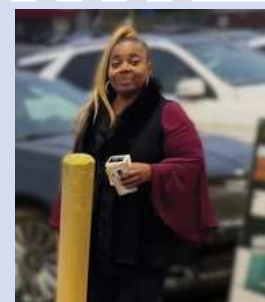
I provided a leave behind kit to a young girl four times. Each time she would text me and tell me that I saved her life because she was given naloxone that I provided. Each time I would engage her on recovery services. Each time she said she was not ready, until the last time. The fourth time I started my text conversation in the same manner, asking her if we can help get her to services. She said no once again, but this time she said no [because] she had been on Suboxone for about five days and was doing well. She connected to resources using what was provided to her in the kits. It affirmed that everyone can find recovery and that a 20 year old girl and so many others can find recovery if you judge less, care more, and understand that everyone's recovery looks different.

- RAYTOWN FIRE DEPARTMENT



I gave naloxone to a stranger at the gas station and later ran into them again in the future only for them to share they used the naloxone on their brother and were able to bring him back!

- PASTOR PAM



MOMENTS THAT MATTER: NALOXONE IN ACTION

After witnessing an overdose happen at an event earlier in the evening, a patron came to our table to thank us for showing her how to recognize an overdose and how to administer naloxone. Our services that we provided were able to save the life of her friend. Even a single life saved makes our efforts worth it.



- RAVESAFE KC

On one occasion, our custodian noticed someone on the floor in a restroom stall. They notified the nearest staff member who sent out an alert of an unresponsive person. Three staff members saw the alert and grabbed naloxone on their way to the location. The staff were able to triage between calling 911, administering naloxone, and providing CPR. After nine minutes of CPR and three doses of naloxone, paramedics arrived and took over. Within a few more minutes, the person was responsive and taken to the hospital alive. The staff who responded were checked on by their peers and given support from library leadership. This is one example of several overdoses that staff have been able to reverse since we began carrying naloxone.

- KANSAS CITY PUBLIC LIBRARY

In December 2023, a HappyBottoms delivery staff who works with many families where drug addiction is present took a few NARCAN from a CCPHC distribution box and brought them to the families of those she works with. She delivered one to a grandmother caring for her grandkids due to drug abuse by the parents. The next visit the grandmother told her she gave the NARCAN to the parents of the kids. The dad OD'd and the mom saved his life with the NARCAN. She was appreciative.

- CLAY COUNTY HEALTH DEPARTMENT



TRUSTED PARTNERSHIP: IMPACT THROUGH COLLABORATION

The biggest impact of our partnership with you is the number of lives that we have been able to save.... In short, THANK YOU MIMH and all that you have done in your work towards ending this epidemic and saving the lives of so many! We look forward to our continued partnership!

- COMPASS HEALTH

MIMH is an incredible partner in all of our work. Not only do they quickly ship naloxone when we need it, they also offer free training and technical assistance, something that has come in handy this past year! I have really appreciated the new resources MIMH has put out recently - the guide to types of naloxone has been helpful in educating partners on what we offer and the reasoning behind that. I am always sending folks to MIMH for webinars on topics like stimulant use and MOUD. And on top of everything else, Esmarie is a beacon of positivity in my inbox every month!

- JACKSON COUNTY PUBLIC HEALTH

Your team's partnership has been invaluable. Through training, technical assistance, and naloxone supply, you've made it possible for us to maintain consistent distribution even during high-demand periods. You've also provided space for us to connect with other organizations doing this work, strengthening the overdose prevention network across the state. Beyond naloxone, your support with supplies, bags, and bus passes has made it possible for us to meet our participants' day-to-day needs — ensuring they not only have life-saving tools but also the practical resources that help them stay connected to care and community. We're proud to stand alongside you in this life-saving work.

- MONETWORK

TRUSTED PARTNERSHIP: IMPACT THROUGH COLLABORATION

UMSL-MIMH has been a rock and the foundation behind the recent trends in Missouri that show reductions in opioid related death. It is precisely why the Missouri EMS Association viewed them as worthy of their community service award for 2025.

- RAYTOWN FIRE DEPARTMENT

The UMSL-MIMH Addiction Science Team has been instrumental in supporting our naloxone distribution as we expanded to include vending machines. Their technical assistance, guidance on reporting and best practices, and consistent support have allowed us to scale our efforts thoughtfully and compliantly. We're proud of the progress made and grateful for the collaboration that continues to push this work forward.

- CENTRAL OZARKS MEDICAL CENTERS

The Addi Sci team is deep in studying, analyzing, and publicly sharing overdose data, staying up to date on best practices for overdose prevention, and helping promote health behaviors rooted in evidence. This provides the platform for open conversation and engagement with people that need or don't usually have access to this information.

- PASTOR PAMELA PAUL

UMSL-MIMH Addiction Science Team supplied CCPHC with Narcan kits and resources and fentanyl test strips for our Naloxone distribution program. They provided an Overdose Education and Naloxone Distribution (OEND) training before the launch of our program to equip our staff with the tools and resources needed to be successful. They have been a great partner to increase availability and access to naloxone in Clay County to reduce opioid overdose deaths.

- CLAY COUNTY HEALTH DEPARTMENT

NALOXONE TYPES



4 mg Nasal Naloxone

Narcan is the nasal naloxone spray most commonly recognized. While 4 mg is the original prescription strength dosage, when naloxone became available over-the-counter in 2024, many 4 mg generics entered the market, such as Padagis, Amneal, and Teva (shown here). The Addiction Science Team supplies Narcan, Padagis, and Teva 4 mg nasal naloxone sprays.

3 mg Nasal Naloxone

RiVive 3 mg nasal naloxone spray is a compassionate dose naloxone product. RiVive is strong enough to save lives with the lowest dose of over-the-counter nasal naloxone available in the United States, and it reduces the risk of precipitated withdrawal. It's also manufactured by the only 501(c)(3) non-profit pharmaceutical company that manufactures naloxone and is available through the Addiction Science Team.



Intramuscular (IM) Naloxone

The vials of injectable naloxone that the Addiction Science Team supplies are 0.4mg/1ml, which means there is 0.4mg of naloxone suspended in 1ml of fluid. This is 1/10th the amount of naloxone in Narcan and generics by Padagis and Teva which contain 4 mgs of Naloxone in 0.1ml of fluid. IM naloxone is also considered a compassionate dose naloxone product and is often preferred by people who use drugs because of it's ability to be titrated.



NALOXONE TYPES

TYPE & DOSAGE

IM NALOXONE



0.4MG/1ML

BENEFITS

- Lowest dose needed
- Least withdrawal symptoms
- Ability to titrate doses
- Often preferred by people who use drugs
- Higher bioavailability than nasal naloxone
- Adaptable kits (as many doses as requested)
- Inexpensive
- Preparing the injection creates a natural pause between dosing, decreasing the chance of excessive administration of naloxone
- Available through an ethical low-barrier distribution source

CHALLENGES

- IM kits require multiple components and assembly
- Stigma and paraphernalia laws can make carrying injectable medication riskier for people who use drugs
- Requires more training for individuals new to IM naloxone vs nasal
- Provider bias and misinformation re: injectable form of naloxone
- Vials are glass and can be subject to breakage
- Lack of access to safe disposal of syringes
- Can feel clinical or medical and be intimidating to laypersons

NASAL NALOXONE



3 MG

- Pre-packaged and labeled kits
- No assembly required
- Easy to use with little instruction
- Compassionate dose
- Less of a chance of causing problematic, precipitated withdrawal that can complicate overdose reversal
- Less stigma than IM naloxone
- Available through ethical low-barrier, harm reduction-informed distribution source

- High cost per 2 dose box
- Cost prohibitive for scaling to saturation
- Participant preference for IM
- Newer nasal naloxone on the market; unfamiliarity
- Cannot titrate, less autonomy
- Opportunity for excessive administration
- Plastic applicator can be subject to breakage or other damage

- *Naloxone is an over-the-counter medication that can be administered as a nasal spray or by intramuscular injection and is effective in rapidly reversing an overdose from opioids. Naloxone can be administered by anyone and is the standard treatment for opioid overdose.*
- *The ideal dose of naloxone is one that restores breathing without inducing withdrawal.*

NALOXONE TYPES

TYPE & DOSAGE

NASAL NALOXONE

- NARCAN



4 MG

BENEFITS

- Pre-packaged and labeled kits
- No assembly required
- Most commonly recognized
- Easy to use with little instruction
- Less stigma than IM naloxone
- Widely available

CHALLENGES

- High cost per 2 dose box
- Cost prohibitive for scaling to saturation
- Participant preference for IM naloxone
- Participant preference for compassionate dose nasal naloxone spray
- Cannot titrate, less autonomy
- Opportunity for excessive administration
- Plastic applicator can be subject to breakage or other damage

NASAL NALOXONE GENERIC

- PADAGIS
- AMNEAL
- TEVA



4 MG

- Pre-packaged and labeled kits
- No assembly required
- Easy to use with little instruction
- Less stigma than IM naloxone
- Widely available

- High cost per 2-dose box
- Cost-prohibitive for scaling to saturation
- Participant preference for IM naloxone
- Participant preference for compassionate dose nasal naloxone spray
- Unfamiliarity with generic(s)
- Cannot titrate, less autonomy
- Opportunity for excessive administration
- Plastic applicator can be subject to breakage or other damage

- All formulations and potencies of naloxone take 1-3 minutes on average to begin to take effect and any form of naloxone may require a subsequent dose after the first few minutes, depending on the overdose. If you give 4 doses of nasal naloxone spray (16mg) in rapid succession during an overdose, it does not work any faster than if you give 1 dose of nasal naloxone (4 mg) or 1 dose of injectable naloxone (0.4mg). After administering a dose, perform rescue breathing and wait 3 minutes before administering an additional dose.
- The ideal dose of naloxone is one that restores breathing without inducing withdrawal.

UMSL-MIMH ADDICTION SCIENCE TEAM



Jake Agliata
Grants Administrator



Aila Al-Maliki
Overdose Prevention
Specialist; Supply
Distribution



Greg Boal
First Responder Training
Coordinator



Morgan Bradley
Strategic Communications
Associate



Daje Bradshaw, Community
Partnership and
Programming Specialist



Kanika Brown
Clinical Psychology PhD
Student



Kay Campbell
Clinical Psychology PhD
Student



Bridget Coffey
Research Consultant;
Research Infrastructure
Lead



Christopher Eck, Operation
Coordinator



Keith Eldridge
Computer Programmer
Analyst and Dashboard
Manager



Morgan D. Farnworth
Assistant Research
Professor; Director of
Research and Analysis



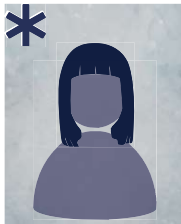
Amanda Gebel
Overdose Prevention
Specialist, Supply
Distribution



Lauren Green
Director of Overdose
Prevention and
Community Health



Grace Iverson
Training Lead, Overdose
Prevention Coordinator



Casey Johnson
Director of Supply
Distribution



Jameala Jones
Overdose Prevention
Coordinator



Rithvik Kondai
Senior Overdose
Prevention Coordinator



James Lituchy
Overdose Prevention
Specialist



Trinity Merritt, Overdose
Prevention Specialist



Schlyer Newman
Clinical Psychology PhD
Student



Donald Otis, BSW,
Overdose Prevention
Coordinator



Brandon Park
Clinical Psychology PhD
Student



Maria Paschke
Director of Impact and
Innovation



Lindsey Pawlowski, MSW,
Recovery Services Project
Coordinator



Sarah Phillips,
Lead Evaluator



Nico Ruiz
Project Coordinator



Saad T. Siddiqui
Lead Evaluator



Frances Storgion
Graduate Research
Assistant



Esmarie Swisher, M.H.,
Overdose Prevention
Coordinator



Paul Thater
DB Programmer Analyst-
Expert



Kyle Vance
Research Support Specialist



Rachel P. Winograd
Director of Addiction
Science

* Photo not included at personal request: Casey Johnson, Director of Supply Distribution

EXTRAS

- [Annual Naloxone Report Fiscal Year 23](#)
- [Annual Naloxone Report Fiscal Year 24](#)
- [Missouri Drug Overdose Death Report 2024](#)
- Russell, E., Hawk, M., Neale, J., Bennett, A. S., Davis, C., Hill, L. G., Winograd, R., Kestner, L., Lieberman, A., Bell, A., Santamour, T., Murray, S., Schneider, K. E., Walley, A. Y., & Jones, T. S. (2024). A call for compassionate opioid overdose response. International Journal of Drug Policy, 133, 104587.
<https://doi.org/10.1016/j.drugpo.2024.104587>
- Find where you can be supplied with naloxone:
[Missouri Naloxone Providers Map](#)
- Request naloxone for yourself or your organization:
getMOnaloxone.com

Email: info@mimhaddisci.org

Phone: 314-516-8440

FB: MIMHAddictionScience

IG & X: @mimh_addisci

