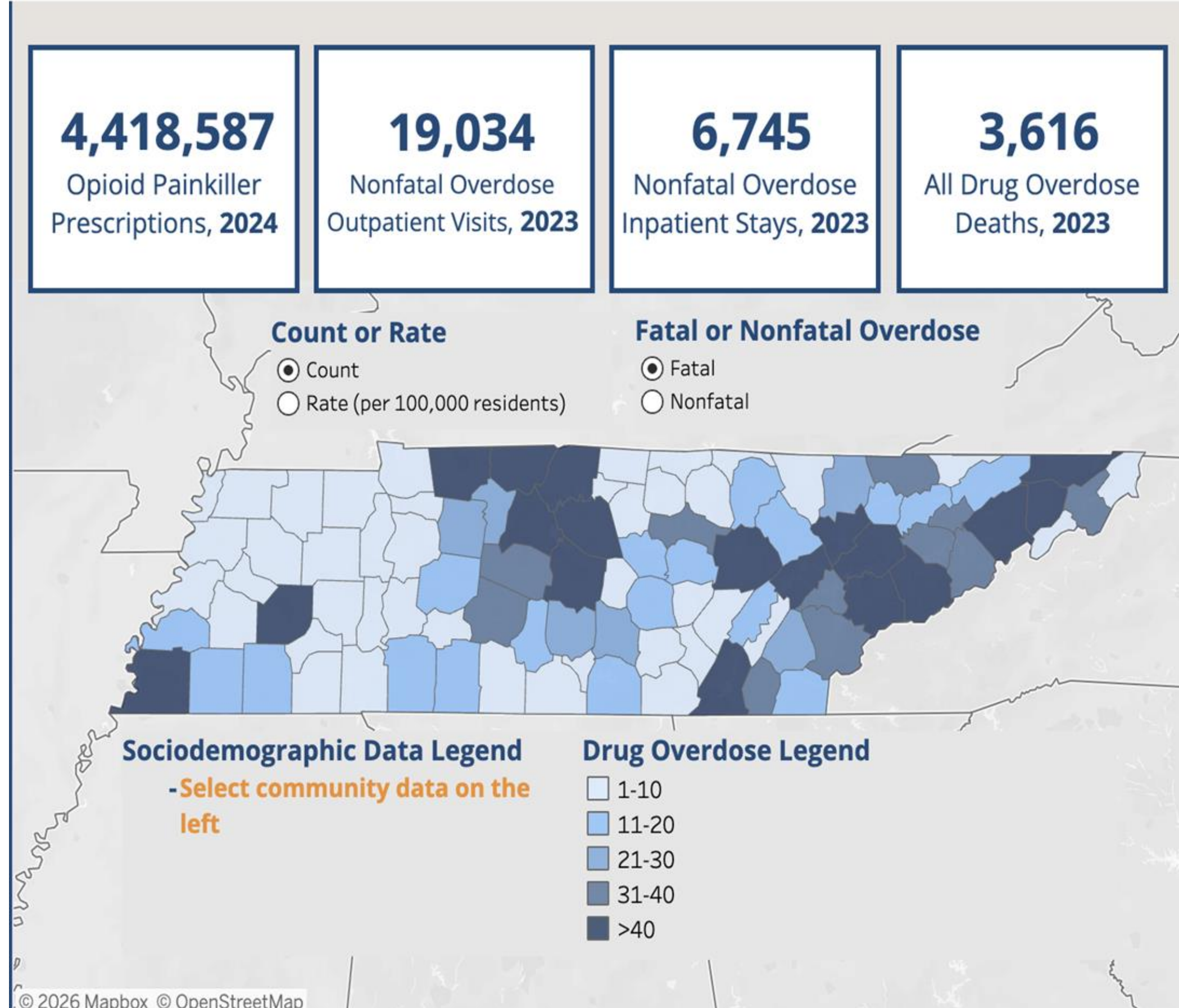


Tennessee's Universal Postpartum Naloxone project

Perinatal Harm Reduction & Naloxone Distribution Programs

Tennessee Background

- Overdose remains a significant public health issue in TN.
- Significant numbers of opioids are prescribed yearly.
- All overdose deaths are considered preventable




Tennessee Background

- Overall, overdose rates may be decreasing.
- Naloxone distribution
- Fentanyl Test Strip Distribution
- Overdose education
- Linkage to treatment including medications for opioid use disorder

Fatal Drug Overdose Timeseries Trends

Select the options below to view timeseries trends.

 Why isn't a rate showing for my selected geography?

Category:

- Count
 Rate

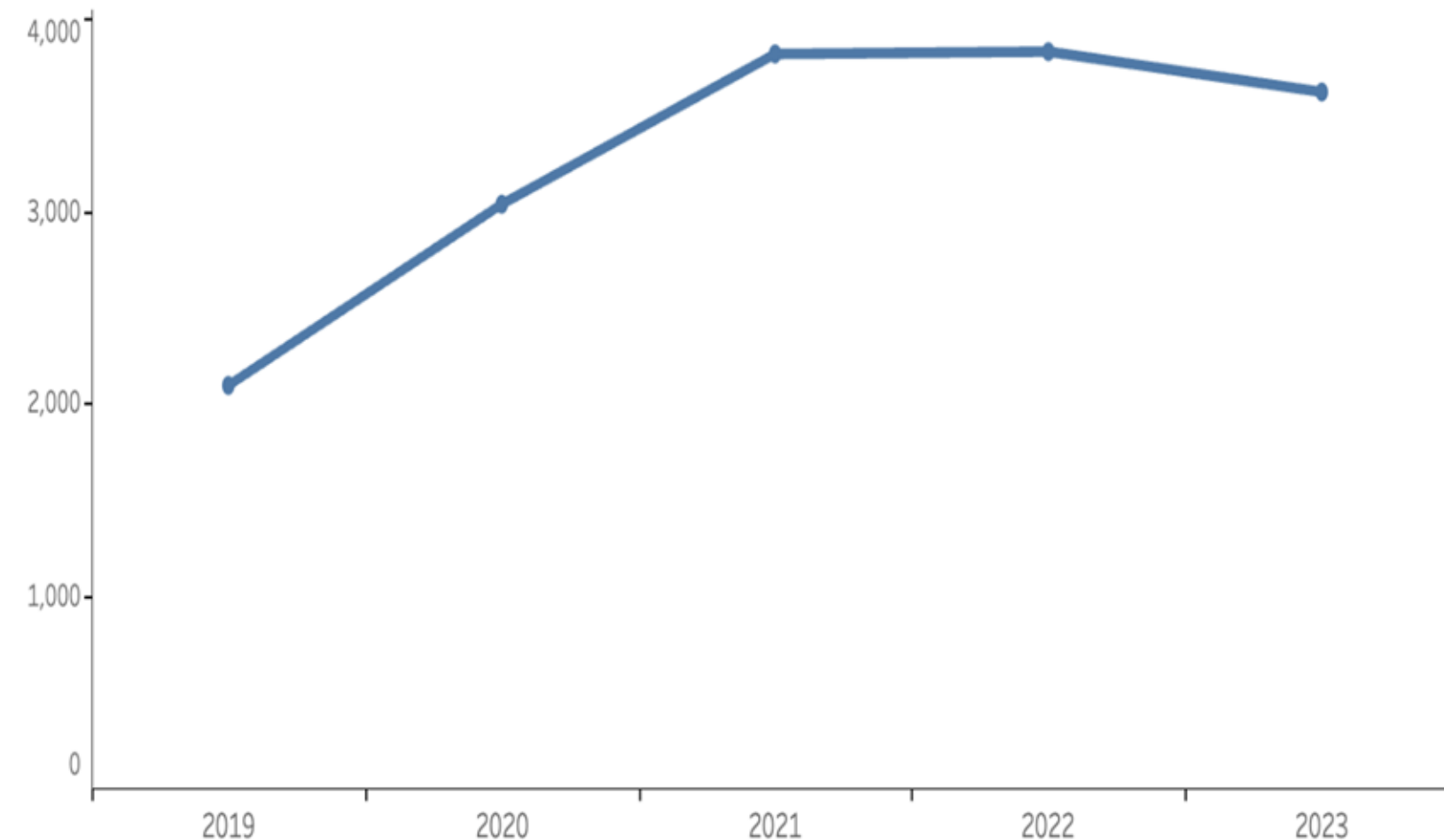
Fatal Overdose Type:

All Drug Overdose Deaths

County or Region:

Tennessee Statewide

All Drug Overdose Deaths - Count in Tennessee, 2019-2023

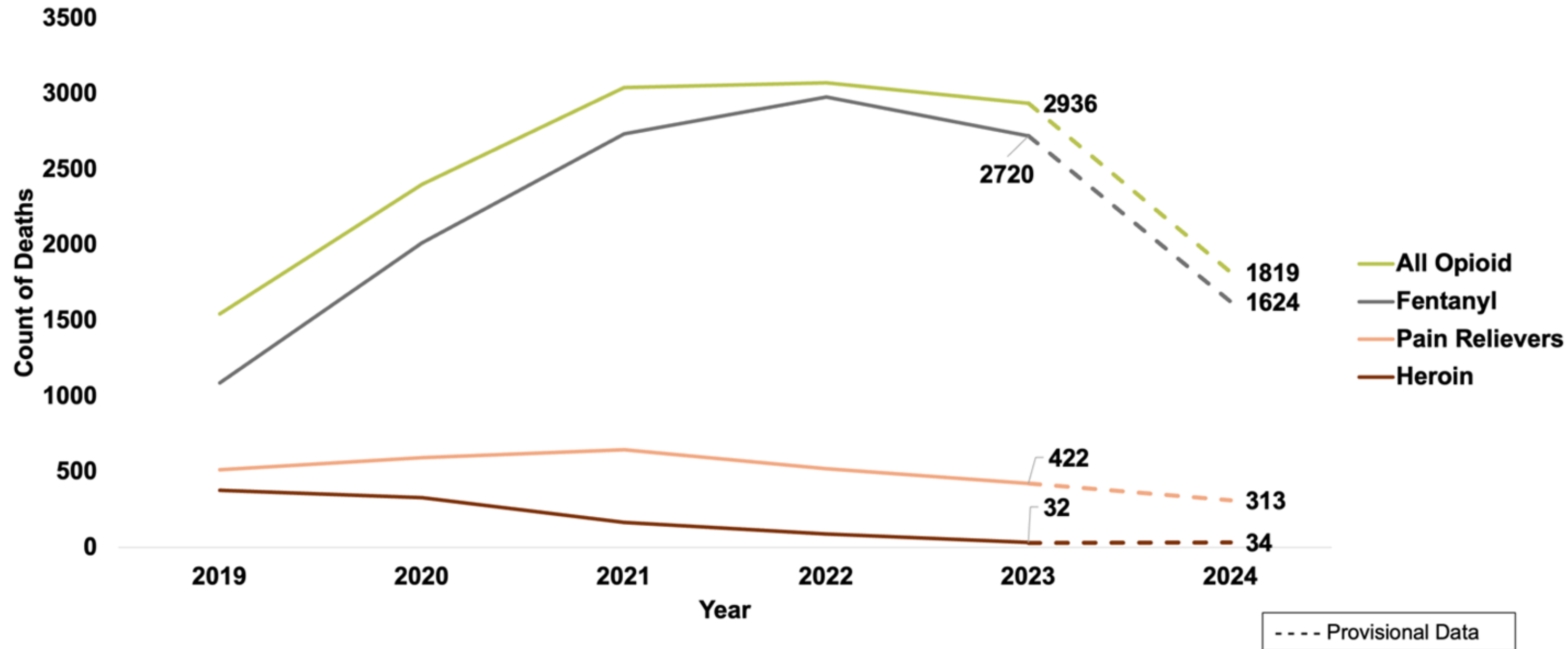


 What are TDH Public Health Regions?

Selected County or Region

 Tennessee Statewide

Opioid Overdose Deaths among TN Residents, 2019-2024



Analysis by the Office of Informatics and Analytics, TDH (last updated September 22, 2025. 2024 data is provisional. Final numbers are subject to change. Limited to TN residents. Drug categories are not mutually exclusive. Data Source: TN Death Statistical File.

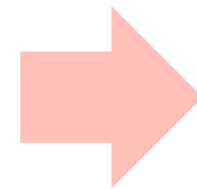
Background

Tennessee Overdose and Maternal Mortality

2017-2019

20%

pregnancy-associated
deaths due to drug overdose.



2020-2022

34%

pregnancy-associated
deaths due to drug overdose.

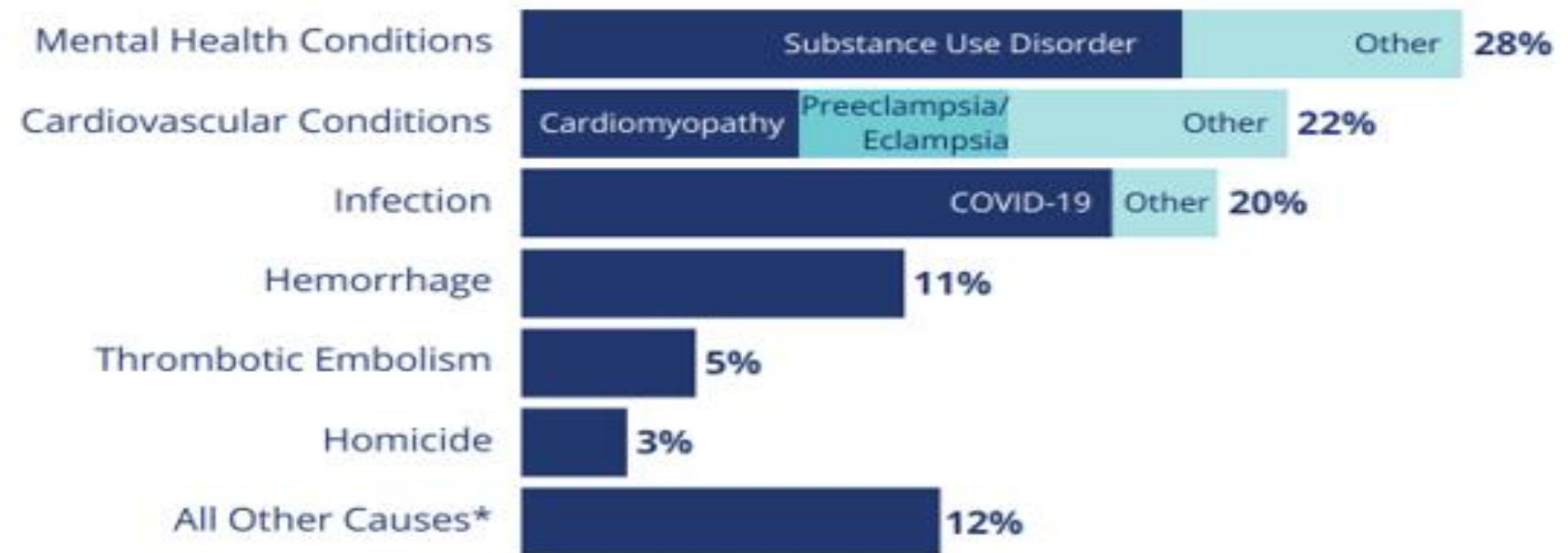
FROM 2016-2020

100%

of pregnancy-associated
deaths *due to* unintentional
overdose were preventable

Tennessee Maternal Mortality Data

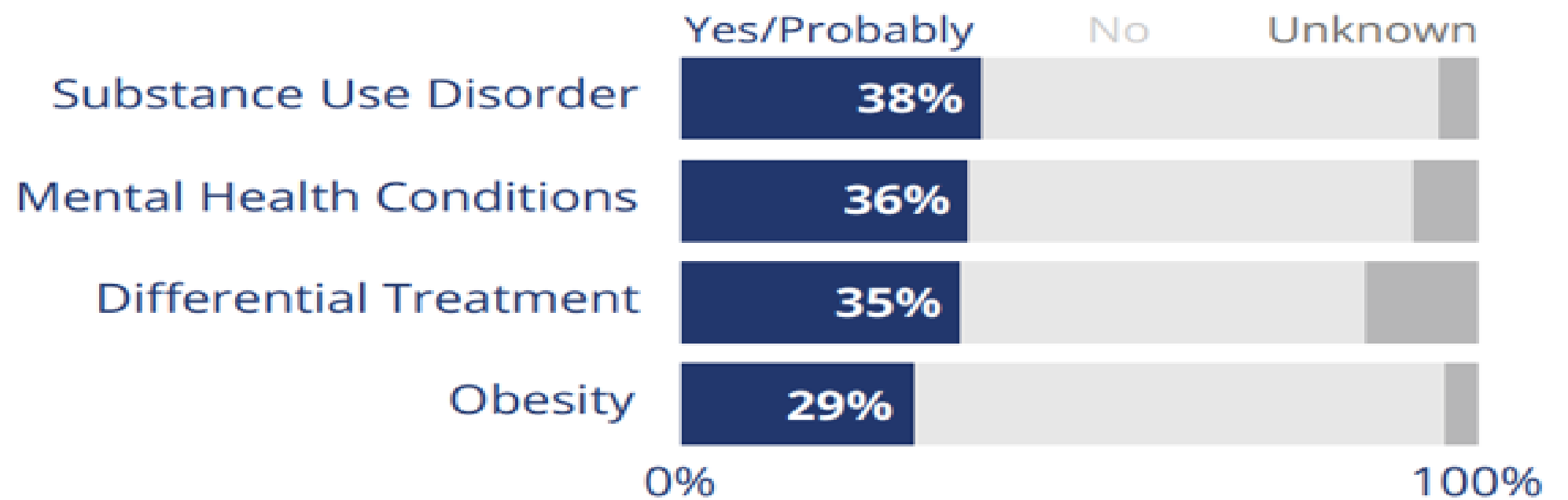
Leading Causes of Pregnancy-Related Deaths, 2020-2022



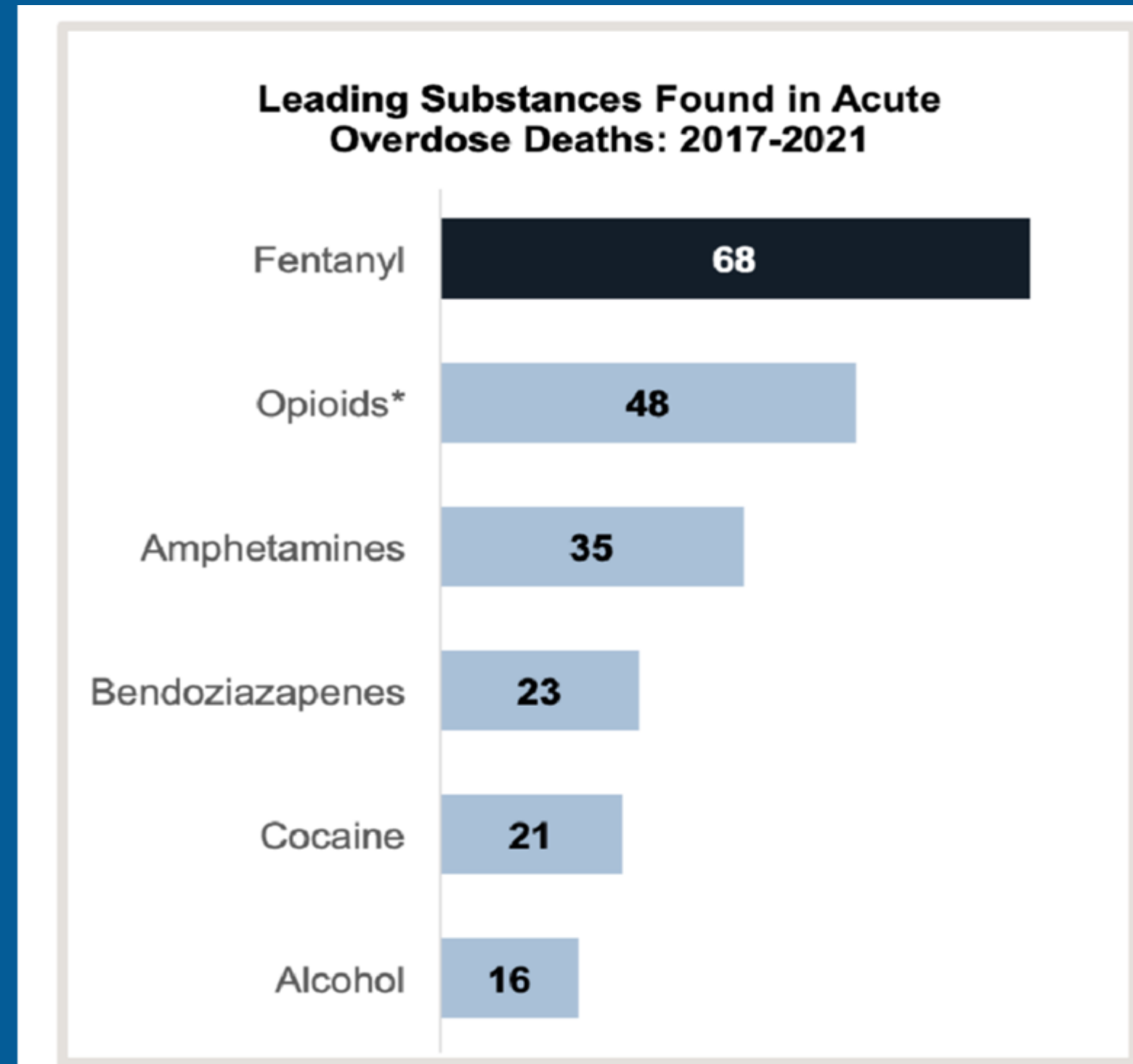
*Other causes include stroke, neurologic/neurovascular conditions, amniotic fluid embolism, cancer, pulmonary conditions, anesthesia complications, collagen vascular/autoimmune diseases, hematologic conditions, diabetes mellitus, and renal diseases.

Tennessee
Maternal
Mortality
Data 2024

Circumstances Contributing to Pregnancy-Related Deaths, 2020-2022



PERINATAL OVERDOSE SUBSTANCES



Maternal Overdose in TN

In Tennessee, women who died from acute overdose within a year of pregnancy:



Over four in five women (83%) died **between 43 days and 1 year postpartum**



Most deaths (80%) were preventable



Over half (59%) of deaths **had mental health conditions** as a contributing factor



29-years-old was the average age of women who died from an acute overdose

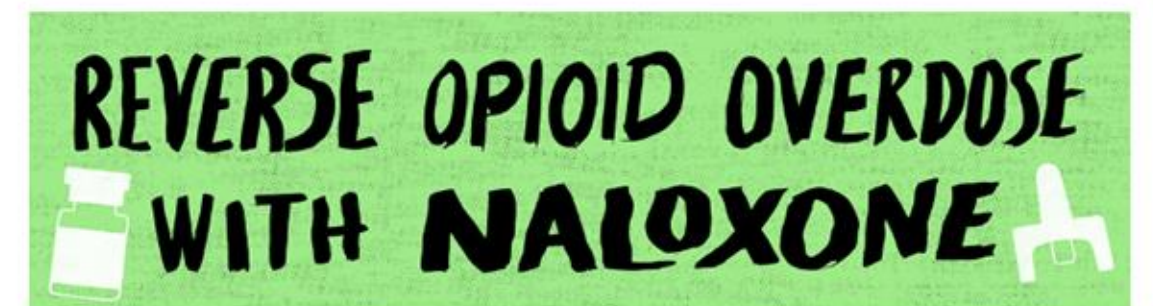
WHAT IS NALOXONE?

- Opioid Antagonist
- Rapidly kicks off other opioids and binds to opioid receptors
- Reverses and blocks effects of opioids
- Dosages 2-8 mg
- Formulations
 - Injectable
 - Nasal spray
- Rapidly restores breathing
- Effective for 30-90 minutes
- Risks include agitation, precipitated withdrawal, acute lung injury



WHY NALOXONE?

- Only 1 Naloxone rx is distributed per 70 high dose opioid prescriptions.⁹
- CDC study: Naloxone distribution at overdose prevention programs prevented 10, 171 overdoses.⁵
- A rural NC study showed decreases in mortality rates with Naloxone distribution.⁶
- In MA, Naloxone distribution and community education decreased overdose deaths.⁷



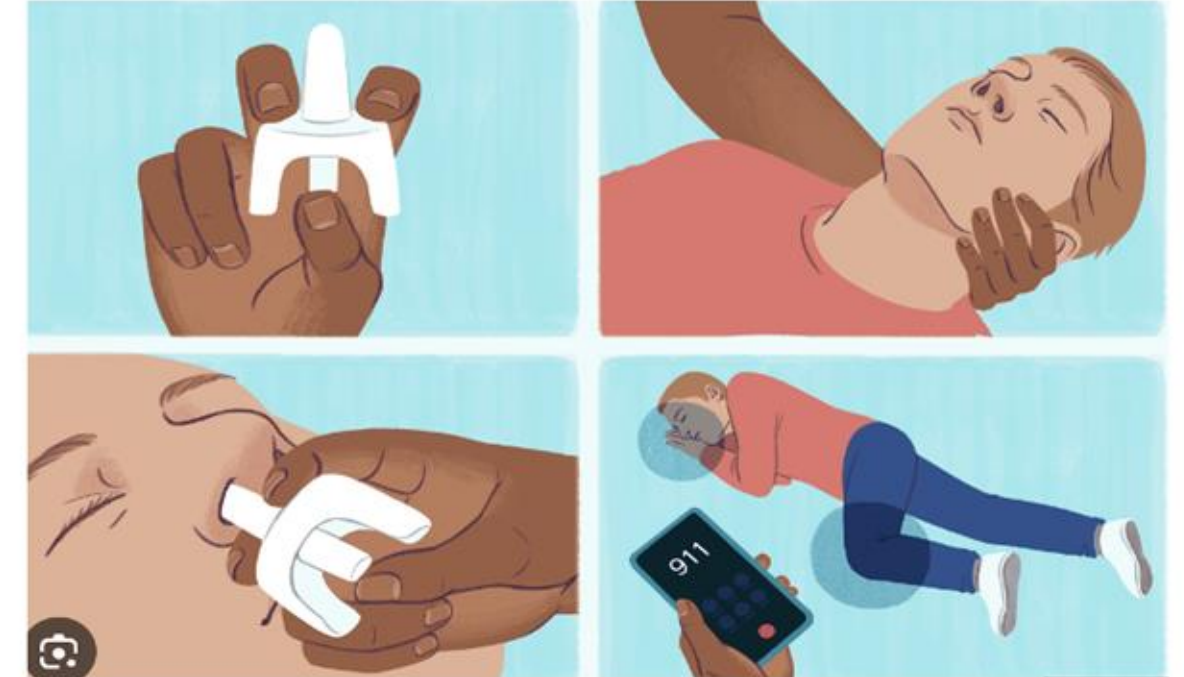
Naloxone Education

What to do if you think someone is overdosing

It may be hard to tell whether a person is high or experiencing an overdose. If you aren't sure, treat it like an overdose—you could save a life.

- 1** Call 911 Immediately.*
- 2** Administer naloxone, if available.
- 3** Try to keep the person awake and breathing.
- 4** Lay the person on their side to prevent choking.
- 5** Stay with the person until emergency assistance arrives.

**Most states have laws that may protect a person who is overdosing or the person who called for help from legal trouble.*



<https://www.verywellhealth.com/how-to-use-narcan-nasal-spray-7373509>

Naloxone in Obstetrics

- Prenatal visits
 - Offer and prescribe for all patients with Substance Use Disorder
 - Family members/loved ones with OUD
- During delivery admission
 - Offer/prescribe for all patients with SUD
 - Offer to all patients being discharged with opioid rx.
- Postpartum visits
 - Offer/prescribe for all patients with SUD



Dr. Kaylin Klie, left, who runs two addiction medicine clinics, and Rachael Duncan, a clinical pharmacist at Swedish Medical Center and Heart of the Rockies Regional Medical Center, are co-chairs of the Colorado Naloxone Project. (Provided by Don Stader)

Naloxone Access

- Pharmacies
 - With a rx/insurance
 - Without rx/insurance
 - \$45-75
- Free naloxone
 - Regional Overdose Prevention Specialists
 - Health Departments
 - Online

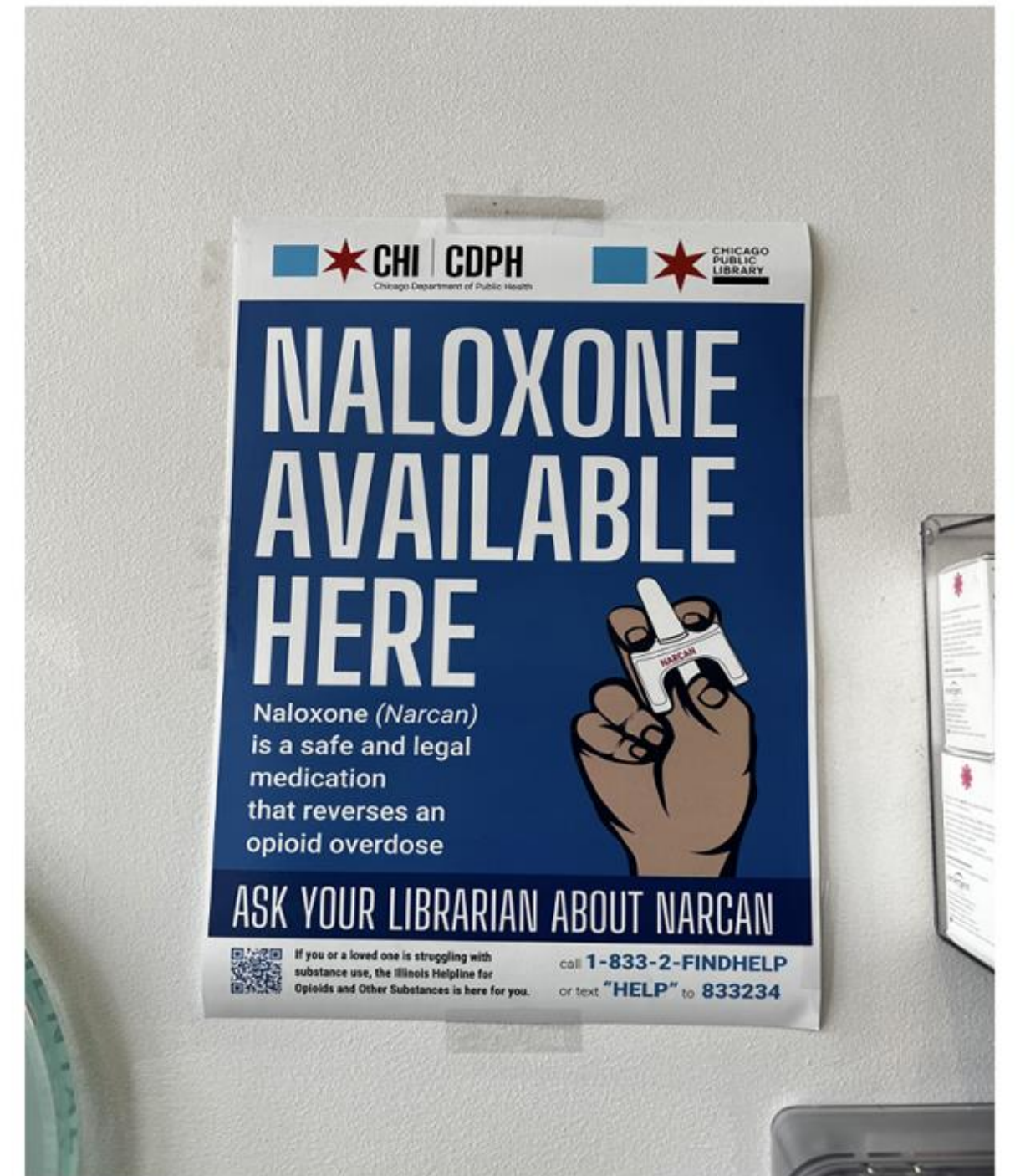


Photo by Jessica Young

Naloxone Access



Tennessee Universal Postpartum Naloxone Project

Acknowledgement Statement

“This project is funded under a Grant Contract with the
Tennessee Opioid Abatement Council.”

Goal's for Tennessee: from the Tennessee Department of Health

- » **Hospital Systems** should implement policies for universal naloxone distribution and education to pregnant and postpartum women prior to hospital discharge.
- » **Rehabilitation Facilities** should educate the patient's family on proper naloxone use at discharge and on recognizing signs of relapse or intoxication.
- » **Prevention Coalitions** should educate the public on prevention and harm reduction strategies, including the use of naloxone and safe-use practices.

Goals of Program.



Awareness

With every birthing individual offered a Free first aid kit with Naloxone it will become a common place in families to have access



Eliminate Barriers

Financial access to Naloxone will be eliminated with the free distribution of First aid kits with Naloxone offered.



Reduce Stigma

With this being universal it will allow every person in the family to have access to the Naloxone. This will allow for more community awareness.

First Aid with Naloxone Kit

The kits would be provided at no cost to the patient or facility participating. This will be offered to EVERY delivering patient prior to discharge from facility.

Includes:

- Naloxone Kit (2 doses of intranasal Naloxone)
- Fentanyl Test strips
- CPR mask
- Thermometer
- Band-aids
- Gauze
- How to administer Naloxone instruction Card



Timing

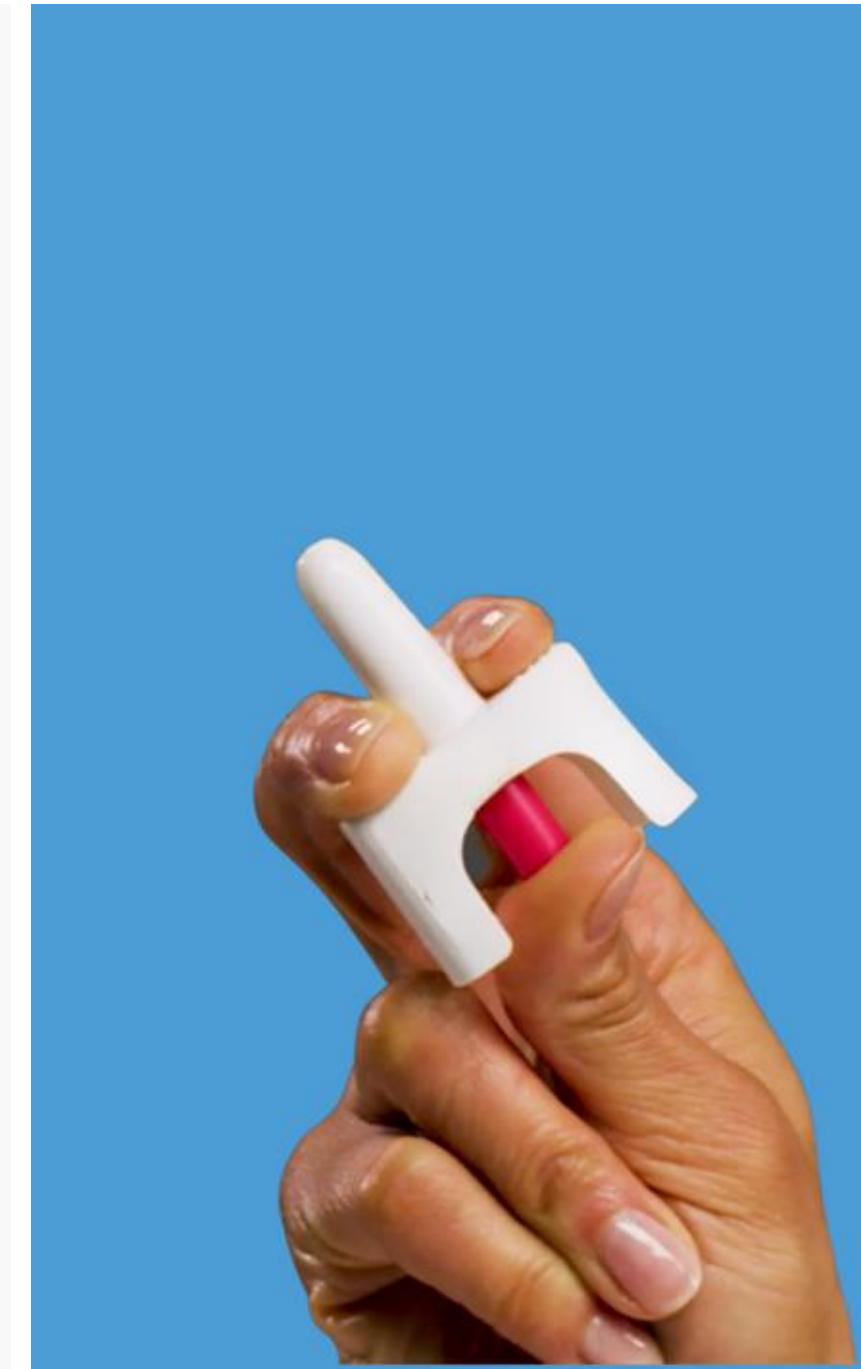
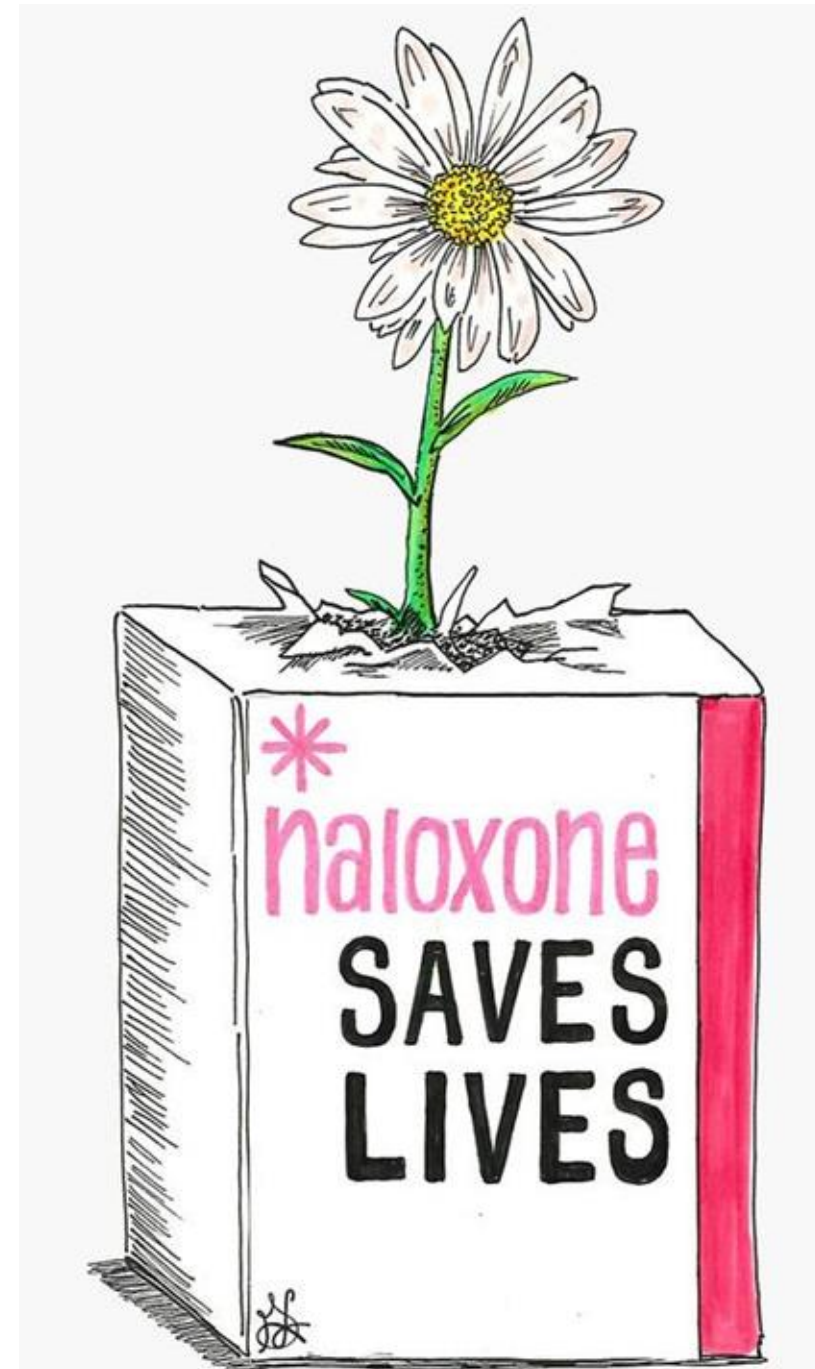
The Tennessee Department of Health awarded the Universal Postpartum Naloxone grant to The Naloxone Project with the length of the initial contract being January 2026–June 2027

Year 1

- Begin enrollment of initial pilot hospitals for program.
- Train hospital staff on naloxone distribution and patient education.
- Distribute first aid and Naloxone kits to participating hospitals.
- Maintain continued support and engagement.

Year 2

- Enroll additional hospitals with the minimum goal of 15 facilities over 18 months to be enrolled.
- Continue outreach, education and support to hospitals enrolled.
- Provide supplies as needed.



Goals: Hospital enrollment & Data collection

Hospitals—Goal for 18 months is to enroll 15 Hospital's and to distribute 25,000 first aid and Naloxone Kits.

*So far there are 12 Hospitals and we are already ahead of target for year 1.

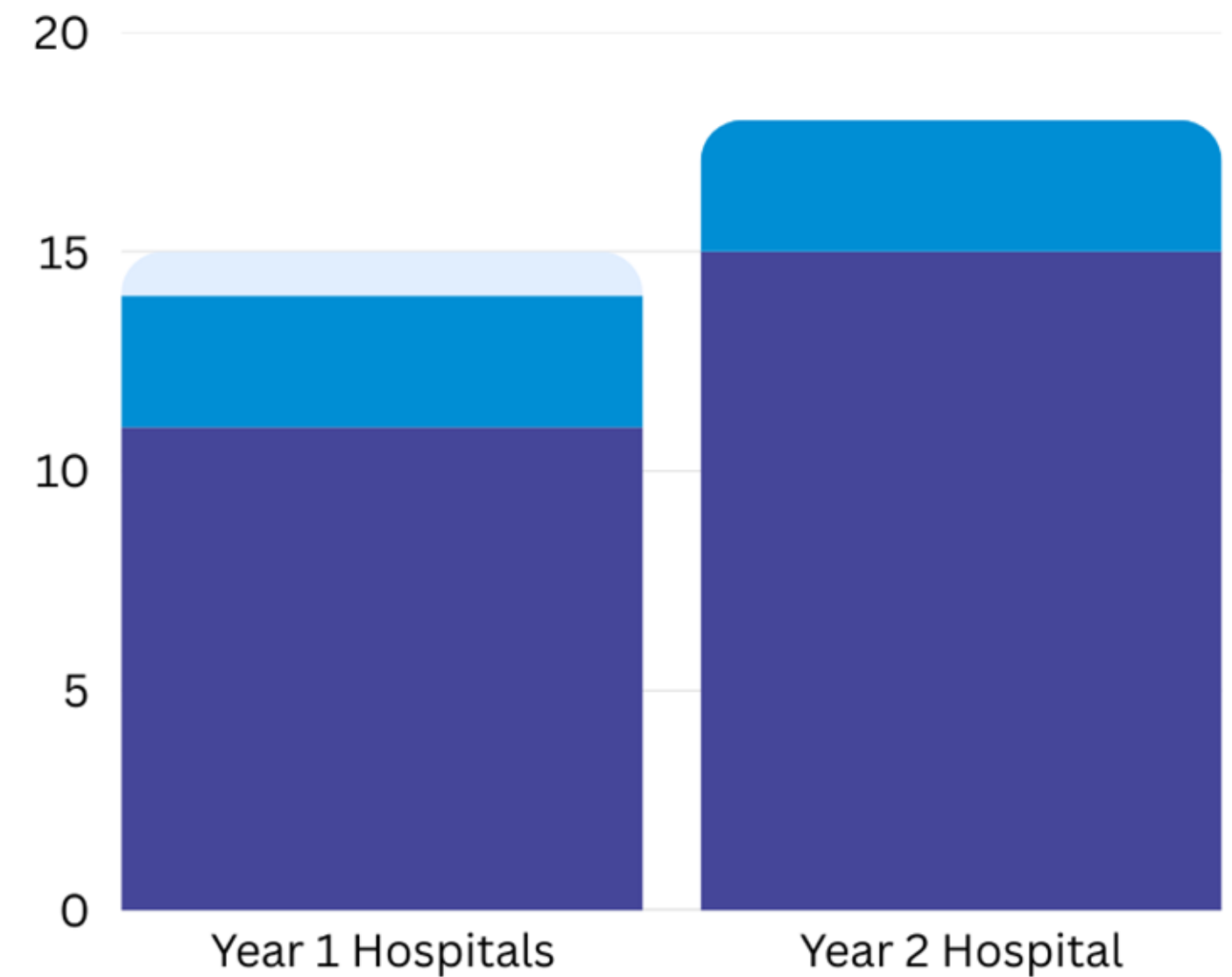
Data—Collect number of people delivered, How many receive harm reduction, Naloxone education. Naloxone kit received and First aid kits. Gather information for refusals as well.

*will gather demographic data of patients as well.

Data: Hospitals Enrollment

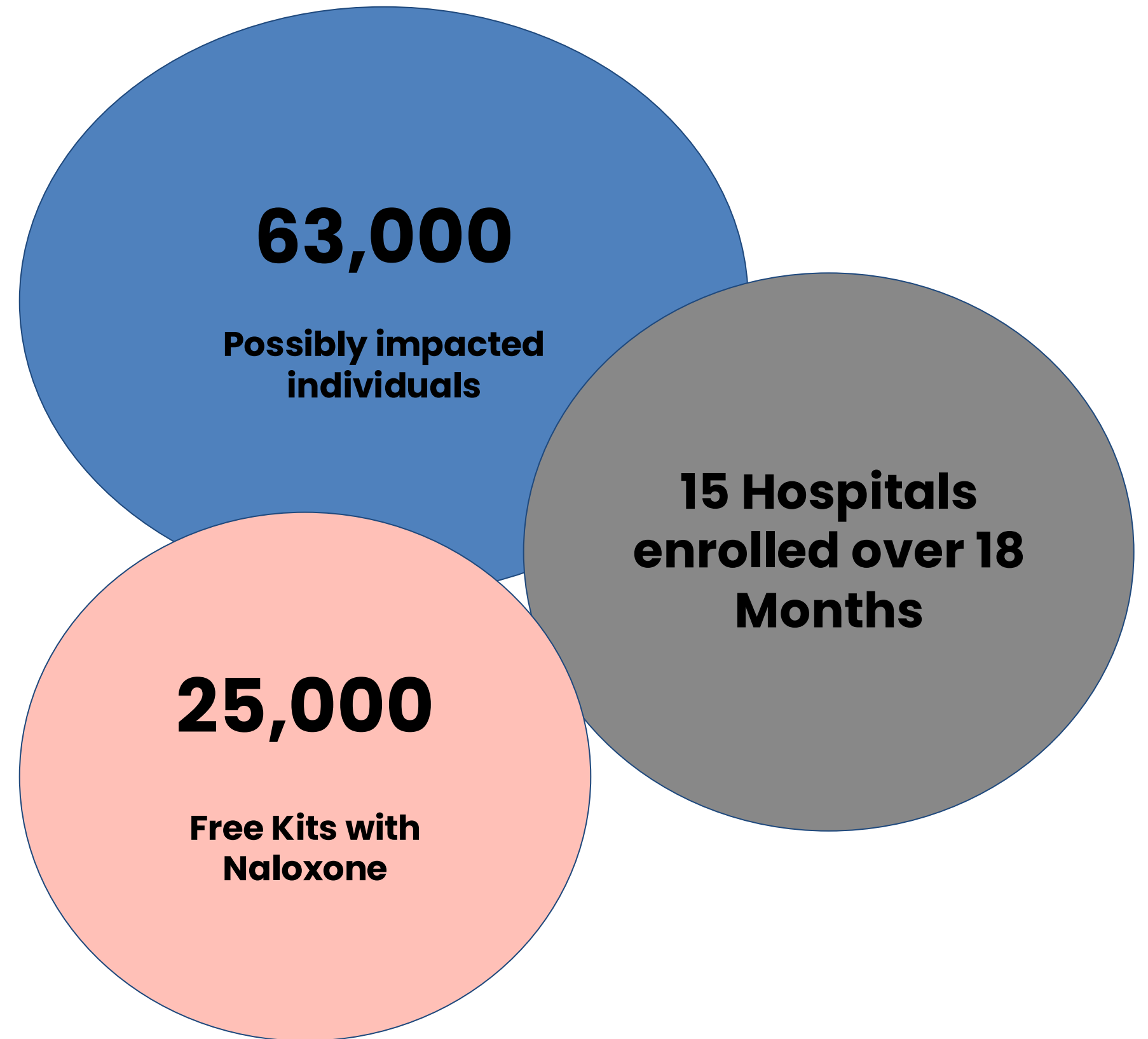
Hospitals-Year 1: 11 hospitals enrolled. 1 in discussion. 3 additional possibilities.

Hospitals-Year 2: Start with 15 and goal to add a possibility of 3-5 more.



Impact on the Community

In Tennessee, with an estimated average household size of 2.52, the project is expected to impact approximately 63,000 individuals.



Why is it Naloxone still important even though there has been a decline in overdoses?

There has been a 2 year decline in overdoses across the country. There are a lot of theories but the 2 main thoughts have been

1. Decrease in supply along with demand-Drugs are expensive and suppliers do not have access to them as easily and the younger population is not as interested in drugs as the previous generations have been
1. Increased distribution of Naloxone-Nearly 2 million prescription and OTC were dispensed in 2024 alone. This does not include community health grants and programs.

Future Planning

If the Universal Postpartum Naloxone Project demonstrates favorable outcomes in Tennessee supported by data. There is an opportunity for extension to be able to reach more hospitals and help Tennessee families statewide.



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