



# COGNITIVE IMPAIRMENT DUE TO NARCOTIC USE

Spider Event: March 22, 2019

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# LEARNING OBJECTIVES

1. COGNITION – WHAT ARE WE TALKING ABOUT?
2. INTRODUCE SOME OF THE EFFECTS OF SUBSTANCE USE
3. REMEDIAL STRATEGIES FOR INDIVIDUALS WITH COGNITIVE IMPAIRMENT

# NARCOTICS

- FROM [ANCIENT GREEK](#) *NAPKŃ NARKŌ*, "TO MAKE NUMB"
- "NARCOTIC" WAS A TERM USED BY PHARMACOLOGISTS TO DESCRIBE PAIN-RELIEVING DRUGS BUT IS NOW PRIMARILY USED IN A LEGAL CONTEXT TO DESCRIBE SUBSTANCES THAT ARE REGULATED UNDER THE *CONTROLLED DRUGS AND SUBSTANCES ACT (CDSA)*

<https://en.wikipedia.org/wiki/Narcotic>

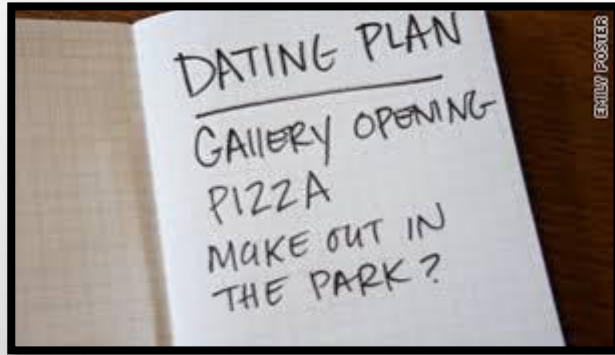
Brands, Sproule and Marshman 1998: 72

# COGNITION

Neuropsychological Domain	Components
Memory	Ability to learn, perform skills, remember to do something in the future
Attention	Needed for multitasking, avoiding distracted by various environmental stimuli
Executive function	Ability to initiate a behaviour, reason/problem-solve, working memory, be cognitively flexible (change focus to complete tasks), ability to control impulses, self-regulate, gather and evaluate information, setting goals/planning
Psychomotor functioning	Motor strength, hand-eye coordination, balance, fine motor skills, process signals and respond appropriately
Processing speed	Ability to process information automatically
Emotion processing	Ability to recognize, experience and express emotions



	PROS	CONS
DRAGON	DRAGONS ARE AWESOME	BAD AT TOASTING BREAD THE CORRECT AMOUNT.
TOASTER	DON'T FLY AWAY	BAD AT TOASTING BREAD THE CORRECT AMOUNT.





# FENTANYL

- SYNTHETIC OPIATE → 50-100X STRONGER THAN MORPHINE
- WHITE, ODOURLESS, TASTELESS POWDER
- MIXED WITH OTHER DRUGS SUCH AS HEROIN TO AMPLIFY THE HIGH
- RESPONSIBLE FOR ~4,000 OVERDOSE DEATHS IN CANADA IN 2017

## LONG-TERM:

- RISK OF OVERDOSE AND DEATH
- EXACERBATION OF PRE-EXISTING MENTAL HEALTH CONDITION
- RISK OF ANOXIC INJURY DUE TO DECREASED OXYGEN (RESPIRATORY SUPPRESSION) AND PARALYSIS OF CHEST MUSCLES
- INCREASED RISK OF STROKE
- DAMAGE TO PERSONAL LIFE AND RELATIONSHIPS



## ***Signs of Fentanyl Overdose***

Physical signs of fentanyl overdose include:

- Severe sleepiness/sedation
- Slow, shallow breathing
- nausea
- respiratory arrest
- Lips and nails turn blue
- confusion
- Person is unresponsive or unconscious
- Gurgling sounds or snoring
- Cold and clammy skin
- Tiny pupils
- Drowsiness/respiratory depression
- coma
- death



**Overdoses of fentanyl should be treated immediately with an opioid antagonist, like Naloxone.**





# FREE NALOXONE KITS ARE AVAILABLE



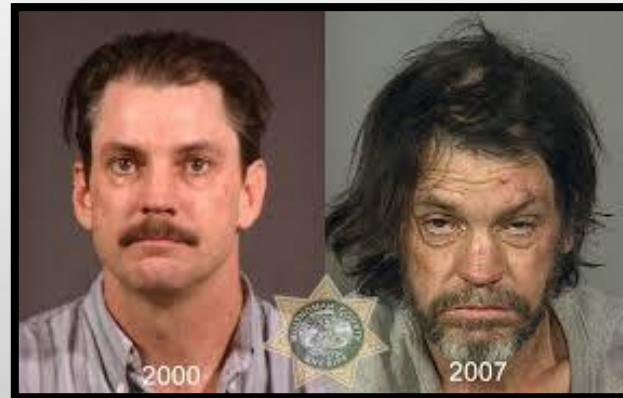
Location	Mobile Unit Name	Telephone	Additional Information
Durham Region	John Howard Society of Durham - Outreach Service	905-440-5410 - Call or text	Monday to Friday: 6:00 p.m. - 11:00 p.m.
Elgin County	Elgin St. Thomas Public Health - Wellness Wagon	519-631-9900 - Call or text	First Thursday of the month - call to schedule appointment
Hamilton Region	Hamilton Region Health Department - Needle Exchange Outreach	905-330-3325 - Call or text	Tuesday to Thursday 6:00 p.m. - 10:00 p.m.
Hamilton	City of Hamilton Public Health Services - Harm Reduction Program	905-702-4200 or 905-546-4275 - Text not accepted	Monday to Friday: 8:30 a.m. - 4:30 p.m. Home visit or group training available within the city of Hamilton
Kitchener/Waterloo/Cambridge	City of Hamilton Public Health Services - The Van Program	905-317-9966 - Call or text	Everyday: 7:00 p.m. - 11:00 p.m.
Niagara Region	Sungate Health Centre - Community Health Van	519-591-4626 - Call or text	Wednesdays in Kitchener/Waterloo: 5:30 p.m. - 8:30 p.m. Thursdays in Kitchener: 4:00 p.m. - 6:30 p.m. Fridays in Cambridge: 4:00 p.m. - 6:30 p.m.
Ottawa	Positive Living Niagara - Beyond The N.O.D. Outreach Program	905-328-6775 - Call or text	Monday to Friday: 6:00 p.m. - 9:00 p.m. Day and evening trainings available Refills available through the 24 hour notice van services Training can take place in the office, in persons at home, or at a partner agency
Ottawa Public Health - Sun Van	613-232-3232 - Text not accepted	647-225-1623 - Call or text	Monday to Friday: 6:00 p.m. - 10:30 p.m. Refills available through the 24 hour notice van services Training can take place in the office, in persons at home, or at a partner agency
Peel Works Needle Exchange Program	647-225-1623 - Call or text	647-225-1623 - Email accepted	Monday to Saturday: 4:00 p.m. - 11:00 p.m. Closed on statutory holidays and Sundays Appointments not necessary Able to travel to all locations in Peel

Spider Event - March 22, 2019



# METHAMPHETAMINE

- A STIMULANT WITH SIMILAR CLINICAL SYMPTOMS AS COCAINE
- WHITE, ODORLESS, BITTER-TASTING POWDER THAT MAY BE SNORTED, SWALLOWED, SMOKED OR INJECTED
- 2010 – 2017 THERE WAS A 590% INCREASE IN DRUG OFFENCES AND SEIZURES RELATED TO METH





## **LONG-TERM:**

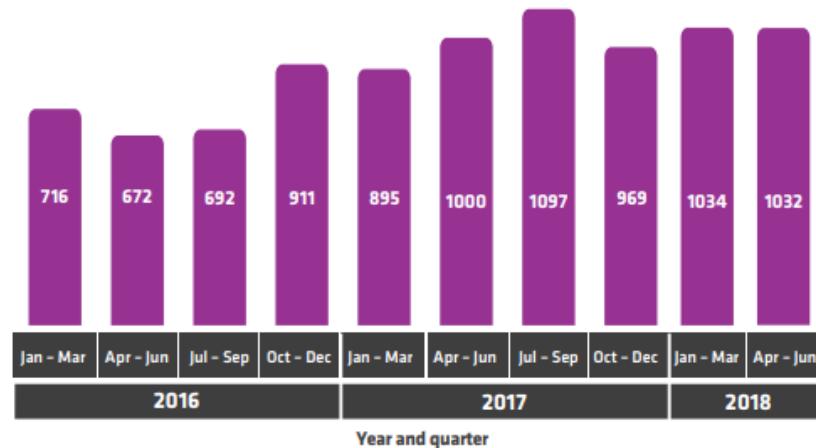
- RISK OF OVERDOSE AND DEATH
- TOXICITY: ABNORMAL HEART RHYTHMS, SEIZURES, RESPIRATORY ARREST, BRAIN HEMORRHAGE
- PSYCHOSIS/PSYCHOTIC SYMPTOMS: VIOLENT BEHAVIOUR, PARANOIA, HALLUCINATIONS, DELUSION
- IMPAIRMENT TO REWARD CENTRES
- MEMORY LOSS, MOTOR SKILLS, LANGUAGE, MOOD FLUCTUATIONS, CONCENTRATION DEFICITS, IMPAIRED EXECUTIVE FUNCTIONING ARE COMMON
- TOOTH DECAY, HEART DISEASE, LUNG COMPLICATIONS, ACUTE RENAL FAILURE, INTESTINAL DISORDERS, HORMONAL IRREGULARITIES ETC.
- RISK OF INFECTION VIA NEEDLES OR UNPROTECTED SEX
- DAMAGE TO PERSONAL LIFE AND RELATIONSHIPS

# OVERDOSE

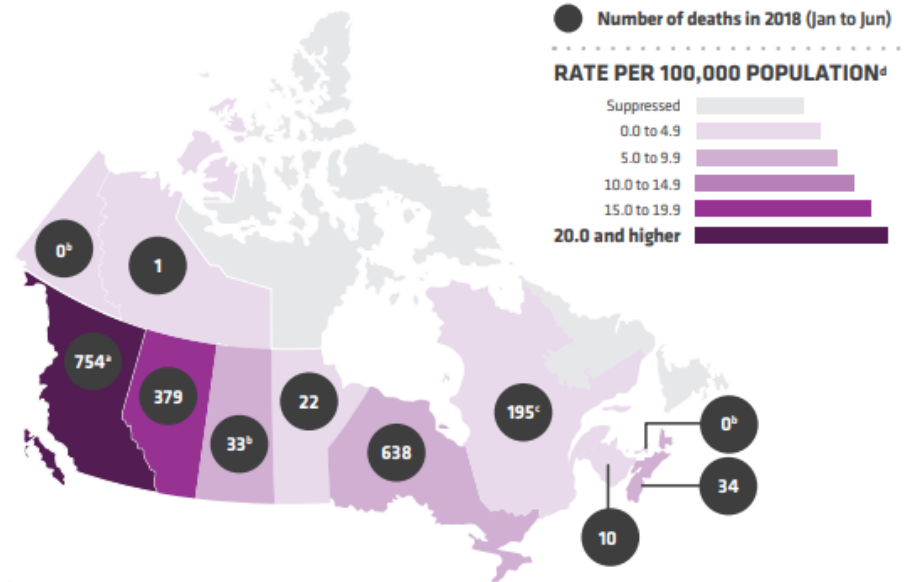
## DEATHS

In the first half of 2018, **2,066** apparent **opioid-related deaths** occurred.  
This means **more than 9,000** lives were lost between January 2016 and June 2018 related to **opioids**.

NUMBER OF APPARENT OPIOID-RELATED DEATHS IN CANADA\*



\*These counts do not include data from Newfoundland and Labrador, Prince Edward Island, and Nunavut. Data from British Columbia and available data from Quebec for 2017 (July to December) and 2018 include deaths related to all illicit drugs including, but not limited to, opioids.





# LONG-TERM EFFECTS

POLYSUBSTANCE USE (MORE THAN ONE SUBSTANCE)

## IMPAIRMENTS IN:

- MEMORY
  - ATTENTION
  - EXECUTIVE FUNCTION
  - IMPULSE CONTROL
  - LEARNING
  - EMOTIONAL PROCESSING
  - PROCESSING SPEED
- 
- IMPAIRMENTS ARE MOST PREVALENT FOLLOWING MEDICAL CRISIS

# What if ...

- WE ADD SCHIZOPHRENIA...
- WE ADD INTELLECTUAL DISABILITY...
- WE ADD LEARNING DISABILITY...
- WE ADD DEMENTIA...
- WE ADD A BRAIN INJURY...
- *YES! INDIVIDUALS WITH ID & THE ELDERLY ARE AFFECTED BY SUDS.*



# REMEDIAL STRATEGIES

- VISUAL REMINDERS:
  - SIGNS, STEP BY STEP INSTRUCTIONS, LABELLED DRAWERS, CALENDARS, PHONE NUMBERS AND APPOINTMENTS.
- AUDIO REMINDERS:
  - WATCH/PHONE ALARMS, TALKING ALARM CLOCKS, PHONE CALLS/TEXTS
- VISUAL INFORMATION:
  - LABEL HOOKS FOR IMPORTANT ITEMS SUCH AS KEYS
  - MARK FOOD WITH EXPIRY DATES
  - WHITE BOARD WITH DATE & SEASON/WEATHER
  - KEEP WRITTEN INFORMATION SIMPLE AND CLEAR





# REMEDIAL STRATEGIES

- REMOVE DISTRACTIONS:
  - REMOVE UNNECESSARY ITEMS, NOISE OR VISUAL STIMULI
  - KEEP VERBAL INSTRUCTIONS OR QUESTIONS SIMPLE AND CLEAR
- GIVE FREQUENT BREAKS FROM TASKS
- ALLOW SUFFICIENT TIME TO PROCESS REQUESTS AND QUESTIONS
- ARRANGE THE ENVIRONMENT IN WAYS THAT ENCOURAGE SUCCESS
  - HOOKS BY THE DOOR FOR COAT, KEYS, BAGS
  - TEACH HOW TO PREPARE LOW EFFORT, INEXPENSIVE MEALS

# REMEDIAL STRATEGIES

- REPETITION IS KEY:
  - REPEAT INFORMATION AS MANY TIMES AS NEEDED
  - PRACTICE SKILLS / ROLE-PLAYS WITH LOTS OF PRAISE AND ENCOURAGEMENT
  - ASK INDIVIDUAL TO PARAPHRASE TO CHECK FOR UNDERSTANDING
- EMOTIONAL SUPPORT:
  - IF YOU'RE NOT SURE HOW THEY ARE FEELING, ASK. "YOU'RE FACIAL EXPRESSION IS TELLING ME THAT YOU'RE ANGRY. IS THAT TRUE?"
  - IF YOU DON'T THINK THEY UNDERSTAND HOW YOU FEEL, TELL THEM.

# MORE TIPS...

- WHEN IN DOUBT, ASSUME THE INDIVIDUAL YOU ARE SUPPORTING IS NOT ABLE TO PERFORM THE BEHAVIOUR RATHER THAN SIMPLY “REFUSING” –CONSIDER DEFICITS AND BARRIERS FIRST!
- PRAISE/ACKNOWLEDGE ALL SUCCESSES, REGARDLESS OF HOW SMALL.
- BE AWARE OF YOUR OWN BIASES, BODY LANGUAGE AND TONE OF VOICE.
- BE PATIENT. BE PATIENT SOME MORE. AND THEN ADD SOME PATIENCE TO THAT.
- IF YOU DON'T KNOW HOW YOU CAN HELP, ASK THE PERSON. IF THE PERSON DOESN'T KNOW HOW YOU CAN HELP THEN ASK A PROFESSIONAL 😊

THANK YOU!

[LISA.ORSI@CAMH.CA](mailto:LISA.ORSI@CAMH.CA)



# ADDICTION SERVICES - CAMH

camh

[Your Care](#)[Health Info](#)[Science & Research](#)[Education](#)[Get Involved](#)

## Metro Addiction Assessment Referral Service (MAARS)

The Metro Addiction Assessment Referral Service offers substance use assessment and referral services free of charge to anyone who lives in Toronto.

[Home](#) / [Your Care](#) / [Programs & Services](#) / **Metro Addiction Assessment Referral Service**

[Facebook](#)[Twitter](#)[LinkedIn](#)[Email](#)[Print](#)

**Intended For**  
Anyone looking for an assessment or a referral for help with substance use.

**Referral Requirements:** Self-referral accepted through Access CAMH, call 416-535-8501 press 2

**Additional Referral Details**

camh

[Your Care](#)[Health Info](#)[Science & Research](#)[Education](#)[Get Involved](#)

## Women's Addiction & Concurrent Disorder Service

This service delivers group therapy to women experiencing concurrent addiction and mental illness concerns.

[Home](#) / [Your Care](#) / [Programs & Services](#) / **Women's Addiction and Concurrent Disorder Service**

[Facebook](#)[Twitter](#)[LinkedIn](#)[Email](#)[Print](#)

**Intended For**  
Women experiencing concurrent addiction and mental illness concerns.

**Referral Requirements:** Self-referral accepted through Access CAMH, call 416-535-8501 press 2

**Services Offered As:** Outpatient

**Location:** [Queen Street Site - 60 White Squirrel Way](#)

# WEBSITES

- [HTTPS://WWW.CAMH.CA/EN/YOUR-CARE/PROGRAMS-AND-SERVICES/METRO-ADDICTION-ASSESSMENT-REFERRAL-SERVICE-MAARS](https://www.camh.ca/en/your-care/programs-and-services/metro-addiction-assessment-referral-service-maars)
- [HTTPS://WWW.CAMH.CA/EN/YOUR-CARE/PROGRAMS-AND-SERVICES/WOMENS-ADDICTION-AND-CONCURRENT-DISORDER-SERVICE](https://www.camh.ca/en/your-care/programs-and-services/womens-addiction-and-concurrent-disorder-service)
- [HTTP://WWW.CCSA.CA/RESOURCE%20LIBRARY/CCSA-CANADIAN-DRUG-SUMMARY-METHAMPHETAMINE-2018-EN.PDF](http://www.ccsa.ca/resource%20library/ccsa-canadian-drug-summary-methamphetamine-2018-en.pdf)
- [HTTPS://WWW.FOUNDATIONSRECOVERYNETWORK.COM/WHAT-ARE-NARCOTICS-AND-WHY-ARE-THEY-ADDICTIVE/](https://www.foundationsrecoverynetwork.com/what-are-narcotics-and-why-are-they-addictive/)
- [HTTPS://WWW.ONTARIO.CA/PAGE/GET-NALOXONE-KITS-FREE](https://www.ontario.ca/page/get-naloxone-kits-free)

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