

Naloxone as a first aid essential. How to best equip bystanders?

Community delivered Naloxone: A systematic review and meta analysis on overdose management

New global evidence on overdose management, naloxone distribution, and training. Commissioned to inform the World Health Organization's 2026 Guidelines on opioid overdose response.

Zahra E¹, Taylor S¹, McClean I¹, Gibson A¹, Nolan C¹, Lewis P¹, Chidwick K¹, Santo T¹, Farrell M¹, Krupchanka D², Siegfried N³, Hickman M^{1,4}, Busse A²,
Strang J⁵, Petrilli K⁵, Carter G¹, Degenhardt L¹

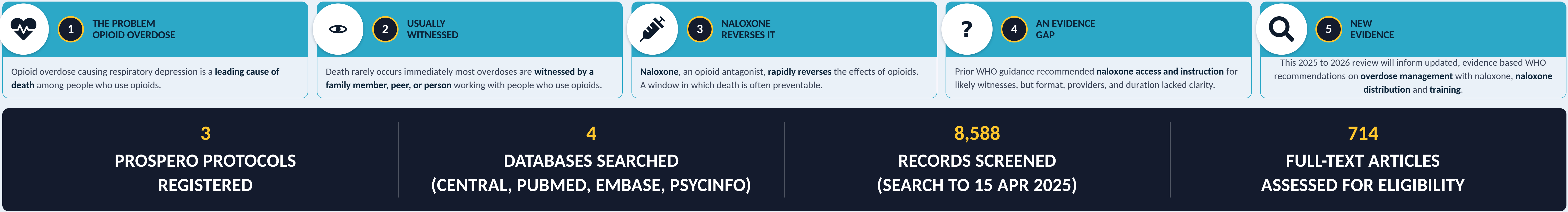
¹National Drug and Alcohol Research Centre (NDARC), UNSW Sydney, Sydney, NSW, Australia · ²Department of Mental Health, Brain Health and Substance Use, World Health Organization HQ · ³South African Medical Research Council, Cape Town, South Africa · ⁴Population Health Sciences, Bristol Medical School, University of Bristol, Bristol, United Kingdom · ⁵National Addiction Centre, Institute of Psychiatry, Psychology & Neuroscience (IoPPN), King's College London, London, United Kingdom

THE PROJECT Building the evidence WHO needs

NDARC led a systematic review and meta analysis under the **GRADE framework**¹, feeding directly into the WHO's 2026 Guideline Development process for opioid overdose response. This review spans **three PICO**s of a total of eleven, including two entirely new questions never before covered by WHO guidelines, shaped by a Guideline Development Group of clinicians, researchers, and people with lived experience from **every WHO region**².

Systematic review & GRADE
Aligned to the WHO handbook for guideline development¹

16 experts, every WHO region
Clinicians, end users & lived experience voices²



In May 2024, WHO Department of Mental Health, Brain Health and Substance Use initiated an update of existing guidance related to the psychosocially assisted pharmacological treatment of opioid dependence and community management of opioid overdose during 2025 to 2026. This review will inform updated guidelines that aim to reduce the number of fatal opioid overdoses by providing evidence based recommendations on training on opioid overdose prevention for people who are likely to witness an opioid overdose.

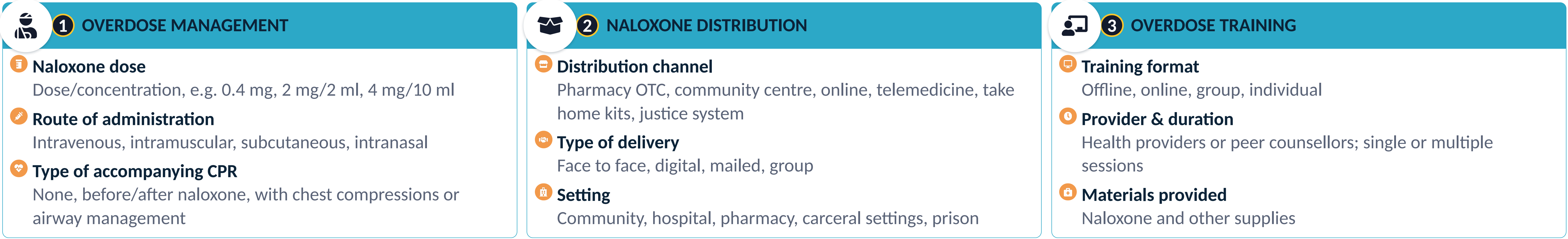
PROSPERO (CRD420251029172, CRD420251039362, CRD420251038640).

¹ World Health Organization. WHO handbook for guideline development, 2nd ed. 2014. <https://iris.who.int/handle/10665/145714>.

² World Health Organization. Biographies of proposed members: Guidelines for the psychosocially assisted pharmacological treatment of opioid dependence and community management of opioid overdose. World Health Organisation, 2025. https://cdn.who.int/media/docs/default-source/alkohol/bios-for-posting.pdf?sfvrsn=654d820b_5.

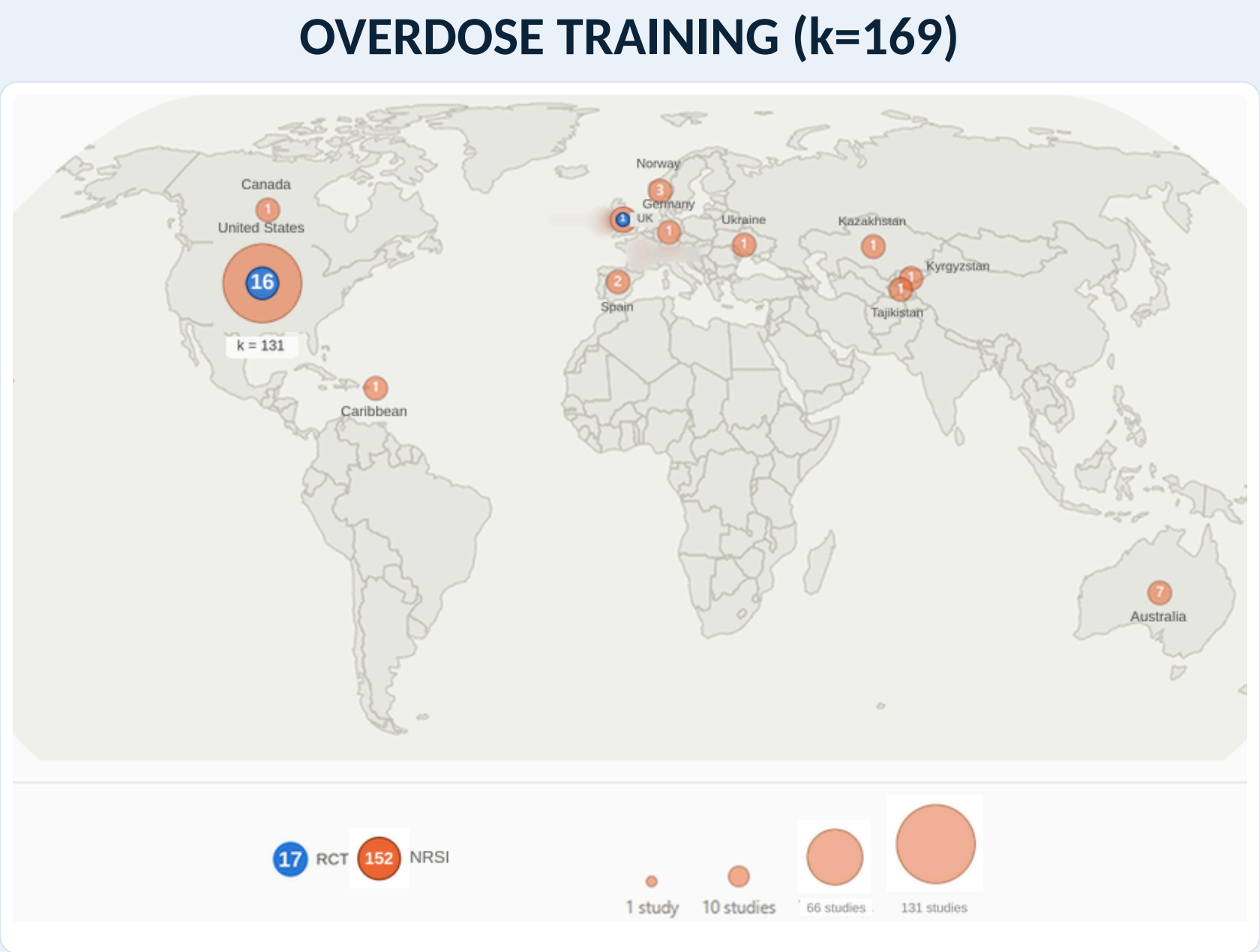
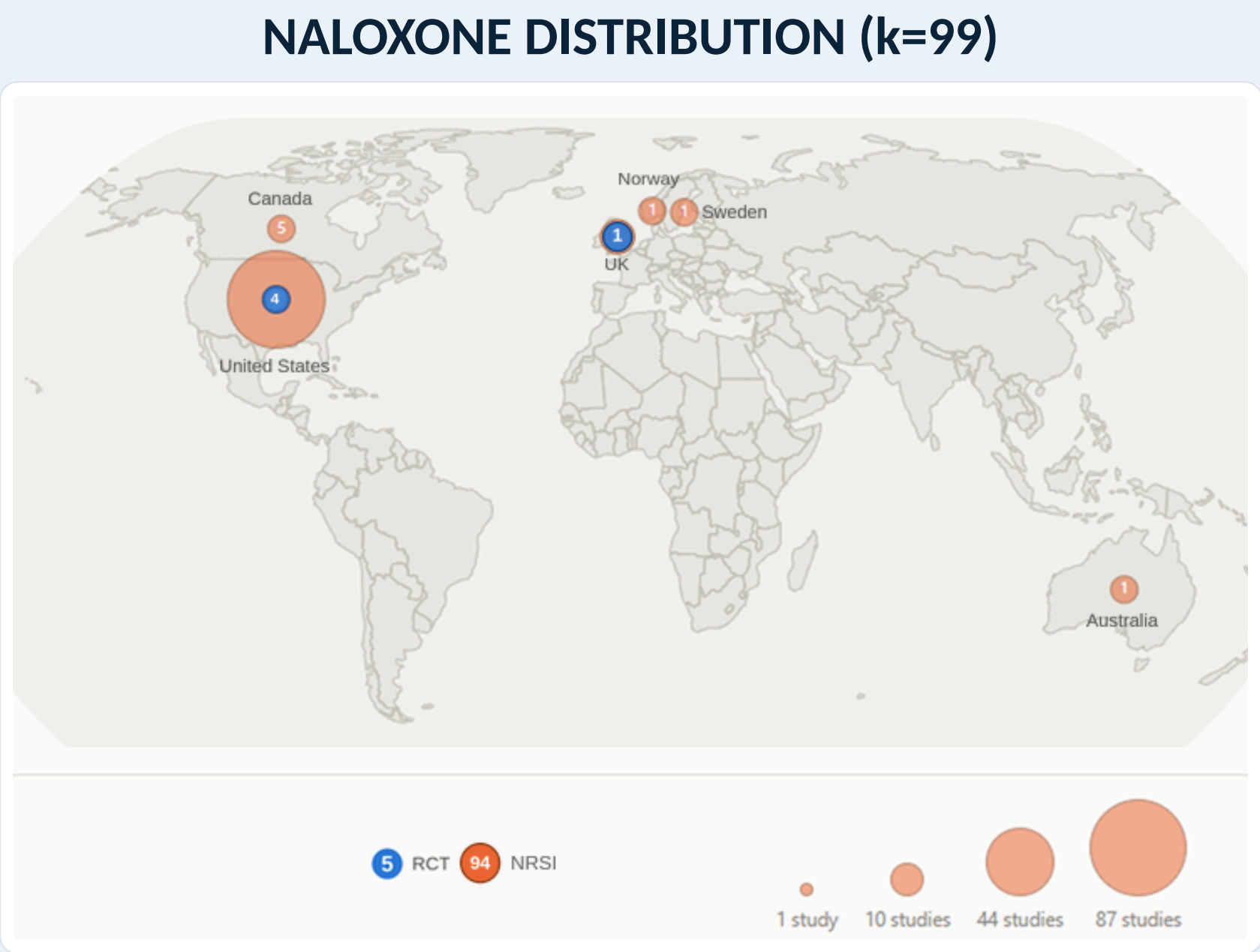
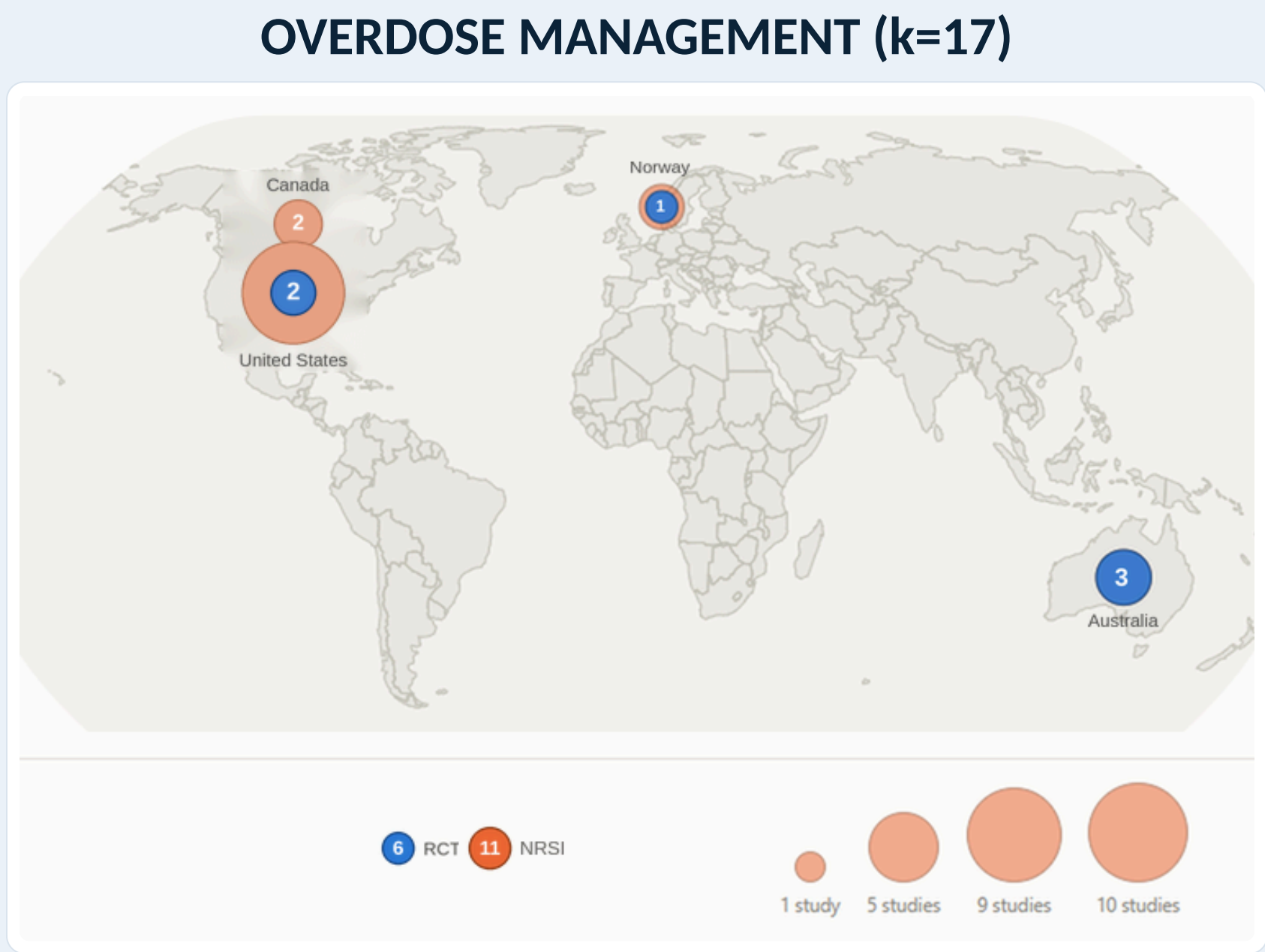
HOW WE CODED THE EVIDENCE Intervention & Comparator Related Variables

The below format describes how interventions and comparators were structured across the three reviews, enabling meaningful comparison and stratified analysis.



THE FINDINGS Where the evidence comes from

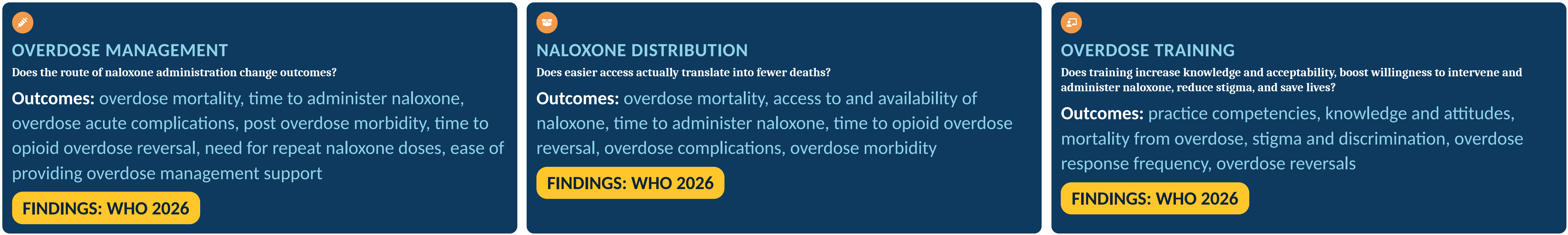
285 study country records (preliminary), mapped by country and study design.



RCT = Randomised Controlled Trial; NRSI = Non-Randomised Studies of Interventions.

THREE QUESTIONS, ONE EVIDENCE BASE

Across three connected reviews, the new evidence is in. We're not giving away the findings here, but here's what's on the table.



WATCH THIS SPACE

Full findings and policy recommendations from NDARC's contribution to the WHO Guidelines 2026, coming soon. Follow NDARC for the launch.

