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THE EPIDEMIC IN YOUR MEDICINE CHEST

by Jeffrey Lewis



FOR AS LONG AS I CAN REMEMBER, AUTOMOBILE-RELATED INCIDENTS WERE THE LEADING CAUSE OF ACCIDENTAL DEATHS IN THE UNITED STATES, OUTPACING ALL FOLLOWERS BY LEAPS AND BOUNDS. THAT ALL CHANGED IN 2007, WHEN DEATHS FROM AUTOMOBILE ACCIDENTS WERE SURPASSED, FOR THE FIRST TIME IN HISTORY, BY DRUG OVERDOSE — PRIMARILY PRESCRIPTION DRUGS (NAMESLY NARCOTIC PAIN KILLERS).

During the most recent decade, many states, like my home state of Ohio, have experienced increases in prescription drug-related deaths by more than 400 percent. In 2010, the number of patient visits to U.S. emergency rooms involving the nonmedical use of prescription drugs was more than 1.3 million. That same year, more than 38,000 Americans died from drug overdose (more than 100 each day).

The landscape of drug use and abuse has rapidly shifted. Whereas the street-drugs-of-choice were once heroin and cocaine,

more readily available prescription drugs — especially those used for the treatment of severe pain, such as morphine, oxycodone, and hydrocodone — have become preferred and, thanks to supply and demand, also more costly. Heroin has become the “back-up” drug because prescription drugs are often less expensive and easier to obtain. Prescription drugs are also preferred because they are, theoretically, more “reliable” in terms of producing the desired effects. While this is likely true when compared to street

drugs from unknown sources, increased demand for prescription drugs has resulted in an underground manufacturing and distribution market. A large supply of counterfeit “prescription drugs” is now being sold on the streets.

To put the nature of this epidemic into some perspective, present death rates from prescription drug abuse are more than four times higher than the “black tar” heroin epidemic of the 1970s and more than three times higher than the peak of the crack cocaine epidemic of the 1990s. The annual

number of deaths from prescription drug abuse each year is more than the number of deaths from heroin and cocaine combined.

The accessibility of prescription drugs is a major contributor to the epidemic. More than 50 percent, perhaps as high as 70 percent, of abused drugs come from family and friends, either offered or stolen. Although the highest rates of death have been in the 45–54-year-old category, this problem reaches all age groups, including teenagers. Perhaps you have heard about

and emotional benefits of controlling chronic pain, easing patient concerns regarding the risk of addiction in favor of good pain control.

But, it didn't take long for the pendulum to swing the other direction. Pain is certainly more effectively treated now, and for that we can be truly grateful; however, as the medical community and patients became more comfortable with treating (and, being treated for) pain, the number of pain medicines being stored in home



a new style of party that is popular with teens — called “skittling” or “pharma,” among other names — where participants simply bring whatever pills they can find, add them to a bowl, and consume a handful of the colorful drugs. It doesn't take long to understand these parties are dangerous.

Easy Availability

The epidemic had noble beginnings. Throughout recent decades, pain management — especially among individuals experiencing some sort of chronic pain syndrome — was suboptimal at best. Physicians shied away from aggressive therapy for fear of overdosing a patient and being sued.

In the mid-1990s, a variety of good things occurred that set change in motion. State governments addressed physicians' concerns regarding the link between aggressive pain management, unintended outcomes, and malpractice litigation. Changes in malpractice laws were accompanied by improved pain management education for health care professionals during and following their medical training. Pharmaceutical manufacturing companies studied and produced improved (more effective and, supposedly, less addictive) pain medications. At the same time, public awareness was growing about the physical

medicine cabinets grew to an all-time high, introducing a whole new problem. Today, addiction to prescription medications, primarily due to misuse and abuse (not legitimate treatment managed by a health care provider) is at a greater level than ever before. And, so are the tragic outcomes of that misuse and abuse, namely, accidental deaths.

Supply and Demand

The increased demand for prescription medications on the street — sustaining and creating new addicts — has resulted in the proliferation of illegitimate pain management clinics. The scourge of so-called “pill mills” (providing phony care and prescribing and/or providing narcotics — usually as a low-overhead, cash-only business) has magnified the problem in many U.S. cities.

Further complicating the situation, treatment options for addiction are incredibly limited. Current medical treatment includes the prescription medications methadone (distributed only by a limited number of specialized clinics) and buprenorphine (Suboxone). Much study is presently underway in an effort to identify newer, more effective options; however, we are likely months to years away from such products being tested and marketed for public use.

In response to the epidemic, state and federal governments have aggressively pursued legislation aimed at curbing access to medications, including shutting down “pill mills.” In addition, prevention efforts have been aimed at educating the public about the problem, including reducing the most common mode of medication access: the home medicine cabinet. These initiatives have achieved some success; the most recent annual report from the White House Office of National Drug Control Policy notes the number of people abusing prescription drugs decreased by nearly 13 percent between 2010 and 2011 (the most recent years for which data is available), although there is clearly more that we all can do to protect our families and communities.

Safety Precautions

Awareness of the problem is key to curbing it. Even if you haven't already been affected by this epidemic, you are now aware.

Tell others. Contact your local pharmacist, health department, or hospital to request additional education for your church, school, or community group. If you happen to live near a university with a pharmacy or medical school, contact them for the same.

Be aware of the types of medications that are most commonly abused. Frequently abused medications include prescription pain killers (e.g., OxyContin, Vicodin, oxycodone, hydrocodone), sedatives or tranquilizers (e.g., Valium, Xanax, diazepam, alprazolam), and stimulants (e.g., Adderall, amphetamines, Concerta, methylphenidate, Ritalin).

Recognize your own unwitting contribution. As noted above, as much as 70 percent of all abused prescription drugs are coming from our medicine cabinets. Keep your medications out of the reach of others (even other adults), using locks if necessary.

Discard any unused medications. The U.S. Drug Enforcement Agency (DEA) has sponsored Drug Take Back Days for the past couple of years. In cooperation with local and state law enforcement, public health organizations and other institutions, events have been staged to receive any and all unneeded medications from the public. More than 1,000 tons have been collected to date. The medications are securely received and then incinerated. Some communities have secure drop-off boxes located at police stations, and states

are considering new laws that would allow this to also occur at local pharmacies. If you don't have a drop-off opportunity in your community, the Office of Drug Control Policy recommends mixing the medications with noxious materials (e.g., coffee grounds or kitty litter), sealing them in a container, and then placing them in the trash.

Engage the church. The local church can serve as a resource for educating and engaging the community on this important topic. Youth groups are great venues for education supported by a local pharmacist. Senior adults can be encouraged to manage their medications in a secure manner. And, every community has been affected by the tragedy of the epidemic, offering an opportunity for the Church to minister to families who have lost a loved one.

Know the signs. Keep your eyes open for the signs of prescription drug misuse or abuse happening in your neighborhood or family (see sidebar). It's important to note that these are nonspecific (i.e., they may be related to many things other than prescription drug abuse) and the list is not exhaustive; however, several unexplained signs or changes in behavior should raise a flag in your mind. Don't be afraid to ask the hard questions. It's better to be safe than sorry.

The epidemic of prescription drug abuse came upon us quickly. With little warning, it has become a huge problem with disastrous results for families across the country. Federal and local government agencies, in collaboration with health care providers, law enforcement experts, and social service/behavioral health organizations, have actively engaged in addressing the problem. From legislation to education, much good is being accomplished. But, it's going to take more. It's going to take the active involvement of people like you — within your circle of influence — educating one another, getting rid of unneeded medications from your home, and responding to the signs of potential abuse or misuse of medications you witness in those around you. It's definitely hard work, but a lost life is too high a price to pay. ☩

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Know the Signs of Potential Prescription Medication Abuse

- Changes in sleep habits
- Changes in personal hygiene
- Changes in mood or energy
- Sudden decline in school grades
- Change in social circle (new friends, uninterested in old friends)
- New propensity for lying or making excuses
- Unexplained breaks in curfew
- Extended time alone in his or her room
- Verbally or physically abusive
- Stealing
- Taking more of a legitimate pain medication than prescribed
- Regularly "losing" a legitimate pain medication prescription
- Visiting multiple medical providers

Additional Reading

The White House Office of National Drug Control Policy:
whitehouse.gov/ondcp/prescription-drug-abuse

The Generation Rx Initiative:
pharmacy.osu.edu/outreach/generation-rx

Drug Free Action Alliance Ohio:
drugfreeactionalliance.org/SOLACE



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