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Prescription Drug Abuse

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Abstract: *This paper analyzed the prescription drug abuse epidemic among the adolescent population through a holistic lens. The prescription drug abuse epidemic has been identified as a national and community healthcare issue due to the harmful physiological effects and alarming death rates among adolescents in the United States. The current healthcare policies of the federal government, pharmaceutical companies, and other various organizations were researched in order to evaluate the progress made to counteract the epidemic. In addition to the progress, the possible consequences of these newly implemented policies were also reviewed and scrutinized. In response to the prescription drug abuse epidemic, a physician accountability system was proposed as a potential solution. It was found that the collaborative effort of healthcare practitioners, along with new federal guidelines, will decrease access and availability of prescription drugs to adolescents, thus, decreasing the number of adolescents abusing prescription drugs in the United States.*

Keywords: Prescription drug; abuse; healthcare; adolescents

According to the National Institute on Drug Abuse (National Institute of Health [NIH], 2018a), “about 1 in 9 youth or 11.4 percent of young people aged 12 to 25 used prescription drugs non-medically within the past year” (para. 2). Prescription drug abuse includes the usage of prescription drugs in a dose other than prescribed, taking another individual’s medication, or taking prescription drugs for a nonmedical use (NIH, 2018a). Prescription drug abuse can lead to life-threatening medical consequences including, but not limited to, addiction, depression, seizures, overdose, and death (NIH, 2018b).

National and Community Healthcare issue

Prescription drug abuse is a major public health problem. National data indicates that the nonmedical use of prescription drugs has dramatically increased from 2010 to 2018. This increase is a reflection of the rise in the number of prescriptions issued by physicians to treat chronic pain (DuPont, 2010). The three most common classifications of prescription drugs misused by adolescents are opioids, central nervous system depressants, and stimulants, such as Adderall (NIH, 2018a). The misuse of these prescription drugs has severe effects on the developing brains and bodies of many adolescents. Indeed, these effects can alter areas of the brain that are critical for basic functions of life such as heart rate, breathing, and sleeping (Elliot et al., 2008). Furthermore, the frequency of misuse or abuse of prescription drugs is highly related to addiction and other risky behaviors such as smoking and unprotected sexual activity.

Impacts on Delivery of Healthcare

The World Health Organization (2017) states that “in 2012, more than 250 million opioid prescriptions were written in the USA, and according to the Center for Disease Control and Prevention (CDC), that is more than enough for the entire population of 319 million people” (p. 318). Indeed, the prescription drug abuse epidemic appears to be directly related to physicians increasing their prescribing habits. Therefore, it is likely that physicians who overprescribe medications are unintentionally enabling prescription drug abusers. In the case

of prescription opioids, adolescents who receive a legitimate prescription from a physician are at an increased risk for future prescription drug misuse (NIH, 2018a). Physicians must consider alternatives to opioids, and other addictive prescription drugs, in order to counterbalance this community and national healthcare issue.

Population Impacted

The populations most affected by the prescription drug abuse epidemic are vulnerable adolescents. The high prevalence of prescription drug abuse by adolescents varies due to many demographic factors including religion, ethnicity, gender, income, education level, geographic location, and ease of access (NIH, 2018a). The motivations associated with prescription drug abuse also vary between genders. Indeed, prior literature indicates that female adolescents are more likely to engage in prescription drugs abuse if they are romantically involved with a partner who also engages in abuse, and to improve their academic performance (Papp & Kouros, 2017). Males were more likely to misuse prescription drugs to self-medicate or get high (Papp & Kouros, 2017).

Research by Lo, Howell, and Cheng (2013) assessed the impact of demographic factors of geographical location and education and found the lack of much needed healthcare, especially in rural areas, shows a significant association with the nonmedical use of prescription drugs. Additionally, the lack of education and misinformation regarding the addictive properties of prescription drugs is a substantial contributing factor to the epidemic among adolescents. Understanding the relationship between demographics and the prevalence of prescription drug abuse within the community is imperative for viewing adolescent abuse holistically.

Thesis Statement

The nonmedical use of prescription drugs has become a national and community healthcare epidemic for the adolescent population, often leading to life-threatening medical consequences. This informative paper will examine the abuse of prescription drugs by adolescents through a holistic lens, as

well as the role that healthcare professionals have in the prevention and enablement of prescription drug abuse, and the future polices implemented to regulate and prevent prescription drug abuse.

Relationship

Connection to United States Healthcare System

Healthy People 2020, which was launched in 2010, is a public health initiative concerned with achieving optimal population health (Shi & Singh, 2019). One of the four overarching goals of *Healthy People 2020* is to “promote quality of life, healthy development, and healthy behaviors across all life stages” (Shi & Singh, 2019, p. 82). The topic areas of *Healthy People 2020* focus on substance abuse and adolescent health, which is directly relevant to the prescription drug abuse epidemic. *Healthy People 2020* uses an action model that illustrates how interventions influence determinants of health such as individual behaviors, economic status, and access to health services (Shi & Singh, 2019). Determinants of health, such as access, are directly related to the prevalence of adolescents abusing and misusing prescription drugs. A recent study by Ford and Lacerenza (2011) examined the relationship between adolescents misusing prescription drugs and the availability of the source of diversion and access to healthcare. They discovered that dependency and misuse of prescription drugs by adolescents are strongly correlated with ease of access and availability via either friends, dealers, or physicians (Ford and Lacerenza, 2011). This correlation supports the significant need for public health initiatives, such as *Healthy People 2020*, that review and establish goals toward reducing the access of prescription drugs (Shi & Singh, 2019).

Connection to Occupational Science

In occupational science, the term occupation is central to the discipline. Occupational science is the study of human behavior regarding how and why people engage in occupations. Addiction, a common consequence of prescription drug abuse, prohibits adolescents from participating in everyday valued occupations. The initial decision to misuse prescription drugs is voluntary for most individuals, but repeated prescription drug use leads to chemical changes in the brain which causes addiction (NIH, 2018b). Indeed, these changes interfere with one’s ability to resist intense urges to take prescription drugs. The National Institute on Drug Abuse (2018b) states that “these brain adaptations often lead to the person becoming less and less able to derive pleasure from thing they once enjoyed, like food, sex, or social activities” (para. 5). Addiction controls adolescents once valued habits and routines and replaces them with occupations centered around urges to engage in drug abuse. Prolonged abuse of prescription drugs will affect the function of developing adolescent brains and impair learning, judgment, decision-making, memory, stress, and behavior (NIH, 2018b). Consequently, addiction extinguishes everyday adolescent interpersonal roles such as friend, student, son/daughter, and brother/sister.

Connection to Future Role as Healthcare Provider

All healthcare professionals play a crucial role in identifying and preventing nonmedical use of prescription drugs. Before healthcare professionals prescribe medication such as opioids, the patient should be thoroughly educated on

the addictive nature of the prescription drug. Occupational therapists, as members of the healthcare team, have an important role in client education regarding medication management, medication storage, and medication disposal (Blum & Fogo, 2018). Occupational therapists should educate and train clients to modify their habits and routines involved with the organization and use of medication (Blum & Fogo, 2018). Medication management, within the scope of occupational therapy, consists of “assessing and treating cognition and/or executive function, fine motor coordination, vision, health literacy, and the effectiveness of current strategies” (Rowe & Breeden, 2018, p. CE-4) to ensure that clients can accurately count pills and adhere to their prescribed routines. Indeed, logically, these assessments and interventions prevent clients from misusing prescription drugs in a dose other than prescribed.

Aside from medication management, occupational therapists provide evidence-based, non-pharmacological interventions for relieving chronic pain (Rowe & Breeden, 2018). Occupational therapists use a biopsychosocial treatment approach to manage pain rather than treating it with prescribed medication. After an extensive review of the literature, the major forms of treatment for chronic pain include education regarding energy conservation, self-management of pain, vocational rehabilitation, biofeedback, passive joint mobilization, modalities, splints, and sleep hygiene, as well as psychologically-based management strategies such as cognitive-behavioral therapy (Robinson, Kennedy, & Harmon, 2011). These interventions promote alternative forms of chronic pain management and are projected to reduce the need for prescribed medication (Robinson et al., 2011). Chronic pain significantly affects function, and occupational therapists are in the unique position to reduce the prescription drug abuse epidemic due to their client-centered and holistic approach to treatment of chronic pain.

Relevance

Relevance to Healthcare Policies

The federal government has responded to the current prescription drug abuse epidemic by creating a five-point, evidence-based strategy to counteract the current national and community crisis. This comprehensive framework includes: improving access to prevention, treatment, and recovery support services; targeting the availability and distribution of prescription drugs; strengthening public health data reporting and collection; supporting cutting-edge research that advances understanding of pain and addiction; and advancing the non-pharmacological practice of pain management (NIH, 2017). Under the direction of President Donald Trump, the current administration recently created a website dedicated to confronting the opioid crisis in the United States. According to the government website, “drug overdose deaths are now the leading cause of injury death in the United States” with 63,632 deaths from drug misuse and overdose (Trump Administration, 2019). The Trump administration is working to address this issue by coordinating with healthcare providers to decrease the number and strength of addictive drug prescriptions.

Pharmaceutical manufacturers are in the process of creating abuse-deterrent formulations, which are designed to

prevent individuals from abusing or misusing prescription drugs. Current approaches being tested for use are physical or chemical barriers, agonist/antagonists combinations, aversive substances, delivery systems, and prodrugs (NIH, 2018a). Additionally, the federal government is pushing pharmaceutical companies to develop safer, non-addictive medication. Although safer prescription pharmaceuticals are currently being developed, the federal government is mandating that physicians comprehensively screen patients for substance abuse disorders before providing a prescription for addictive medications (Weigel, Donovan, Krug, & Dixon, 2007).

The Drug Enforcement Administration (DEA), has created new federal guidelines that were put into effect in October 2018. The purpose of these guidelines are to restrict physicians' prescribing habits and limit the distribution and supply of prescription drugs. These guidelines include restricting the authorization of refills from a 180-day supply to a 90-day supply and requiring patients to visit their primary care physician before receiving a new prescription (Sullivan, 2018). Medical approaches, assessments, and new guidelines such as these are projected to dramatically reduce the current prescription drug abuse epidemic (Sullivan, 2018).

Implications to Healthcare Service Delivery

Preventing the nonmedical use of prescription drugs is a collaborative effort from physicians, patients, and pharmacists. Physicians are in the position to identify the nonmedical use of prescription drugs and take note of rapid increases in the amount of medication a patient requests and unscheduled medication refills (NIH, 2018a). Although physicians should be significantly more cautious due to the recent increase of abuse, often times, physicians' overprescribing habits contribute to the rising rates of prescription drug abuse and overdoses. Therefore, the federal government and other various organizations are creating innovative strategies to reduce physician prescribing habits. In order to counteract the rising adolescent prescription drug abuse rates, I believe a physician accountability system needs to be implemented. Indeed, this online system would guarantee that physicians initially attempt to prescribe non-addictive forms of medication before prescribing opioids or other addictive medications. Because of this system, a physician accountability system would dramatically reduce the prescription drug abuse epidemic, however, some responsibility also remains with the patient.

Indeed, the patient has the responsibility of safeguarding their prescribed medications by taking the appropriate dosage for the recommended length of time. To counterbalance the current epidemic, patients need to safely store prescription medications and never refill any unnecessary prescriptions. Additionally, if a patient possesses a surplus of prescribed medication, the patient should properly discard the unused drugs (NIH, 2018a). Furthermore, before patients refill or retrieve their prescribed medications, pharmacists have the responsibility of ensuring patient understanding of the directions involved when taking their new prescription. This collaborative effort from physicians, pharmacists, and patients, along with the physician accountability system, will create barriers for prescription drug abusers, thus decreasing the prescription drug abuse epidemic.

Consequences to Healthcare Service Delivery

The proposed collaborative effort from healthcare practitioners and new federal guidelines will create many positive changes to healthcare service delivery, however, like any new system, some consequences may arise from these recently implemented regulations. Due to these implementations, it is likely that the number of teenagers abusing prescription drugs will decrease, as well as the number of accidental overdoses. However, there are negative implications to these new guidelines. For example, the action of making strict federal guidelines for prescribing medication such as opioids, central nervous system depressants, and stimulants may prohibit an individual who actually needs these pharmaceuticals from obtaining them. An article detailing the DEA states that "the Institute of Medicine estimates that as many as 100 million Americans suffer from chronic pain," and they believe the new refill restrictions on prescription drugs will prevent Americans who have legitimate needs from receiving them (Sullivan, 2018, para 15). Furthermore, because the guidelines require that patients see a primary care physician before receiving a new prescription, accessing these drugs now requires additional trips to the doctor's office. This change could potentially cost the healthcare system millions of dollars and prevent elderly individuals, who have difficulty transporting to the doctor's office, from receiving much needed medication (Sullivan, 2018). Nevertheless, the overall benefits of these federal restrictions and guidelines on decreasing prescription drug abuse outweighs the risks.

Conclusion

In conclusion, this informative paper has analyzed the prescription drug abuse epidemic and its impact on the adolescent population in a holistic perspective. The magnitude of this epidemic is viewed as a national and community healthcare crisis and a major public health issue that is currently being addressed with new regulations and guidelines by the federal government and many other organizations. The current epidemic has relevance to occupational science and impacts both the health care delivery and the future roles of many healthcare practitioners, such as occupational therapist, physicians, and pharmacist. The collaborative effort of healthcare practitioners and the federal government's guidelines will diminish the prevalence of prescription drug abuse among adolescents. Indeed, decreasing the access and availability of prescription drugs to adolescents will therein decrease the number of overall adolescent usage, as well as decrease the prescription drug related overdoses in the United States. Our generation of healthcare practitioners can be the change to end the prescription drug abuse epidemic.

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