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# Percs of Being an Athlete: Athlete Use and Misuse of Opioids

Mel Sturgill

**Abstract:** The opioid crisis has plagued this country for decades and athletes are not exempt from this statement. This paper discusses the prevalence of opioid use and misuse among adolescent and professional athletes. This results in an immense opportunity for healthcare professionals to come together and educate teams and players to provide alternative pain management therapies for acute and chronic pain.

Athletes have long been idolized for their perseverance through pain and injury dating back to the Roman gladiators and Greek Olympians.<sup>1</sup> Like athletes today, gladiators and Olympians built a name for themselves and performed nearly inhuman feats. Jump higher. Run faster. Hit harder. Athletes are pressured to compete at top performance. But what happens when an athlete is injured? High expectations of athletes extend from amateur to professional competitors which reinforces the constant pressure of being available for field time even in the presence of injury or pain. Pharmacologic agents, specifically opioids, are often used to manage sports-related injuries and pain so that athletes can return to their original level of play. As a result, athletes are at greater risk for lifetime use and misuse of prescription pain relievers.

The prevalence of opioid use disorders and deaths related to prescription drugs has increased significantly over the past decade. This trend is of particular concern when it comes to our youth. According to data analyzed by the CDC from the Youth Risk Behavior Survey, over 7% of high school students report misusing prescription opioids.<sup>2</sup> Exposure to opioids often begins with legitimate prescriptions such as treatment of a sports injury.<sup>3</sup> An estimated 1.4 million sports-related injuries occur every year at the secondary school level and over 200,000 at the collegiate level.<sup>3</sup> The phrase “playing through the pain” has become normalized and expected of athletes, but to compete through injury, athletes may turn to opioids. Studies have found that adolescents who engage in organized sports are more likely to have been prescribed opioids than their noncompeting peers.<sup>4</sup> A study by Veliz and colleagues explored the connection between participation in sports and the odds of medical use, medical misuse, and non-medical use of opioid medications in the past year. In this case, medical misuse is defined as taking prescription opioids outside of their intended, prescribed indication; for example, taking pills that are given to the athlete from a friend, teammate, or using leftover pills from a previous injury.<sup>5</sup> While the study concluded that adolescent athletes have more access to opioids, it also found that athletes are not necessarily more prone to misusing these medications. However, those who do misuse opioid medications have a higher probability of continuing to use and misuse opioids. This was confirmed by another study where Veliz et al. measured athlete injury to prevalence of drug diversion of high school adolescents.<sup>6</sup> It was found that those who participate in high school sports were more likely to use and misuse opioids while in college.

Opioid use is even more prevalent in professional athletes. Prevalence of current opioid use by NFL players is 3 times the rate of the general population.<sup>7</sup> Furthermore, over 50% of NFL players are exposed to opioids during their time in the league.<sup>8</sup> Brett Favre, quarterback for the Green Bay Packers, reported taking as many as 14 Vicodin pills at one time in the 1995 season. In the same year, he threw for over 4,000 yards, 38 touchdowns, and was named the league’s MVP.<sup>9</sup> With American football having the highest injury rates of all contact sports, it is not surprising that many former NFL players continue to have pain even

after retiring.<sup>7</sup> In a recently published study, NFL retirees answered survey questions about their physical and mental health, including opioid use, during their time in the league and since retirement.<sup>10</sup> The questions were asked in 2010 and then again in 2019 to judge changes in opioid use and association with their mental health status. Of the 644 NFL retirees who completed the survey, 80% admitted to experiencing daily joint pain lasting an average of over 20 years and about a quarter reported using opioids. In fact, 50% of the retirees who used opioids in 2010 were still using them 9 years later. The same study also showed that retired athletes who reported opioid use in 2010 were more likely to use opioids and experience moderate-severe depression in 2019.<sup>10</sup> In fact, opioid use is a well-documented risk factor for major depressive disorder as well as other neurological and psychosocial disorders.

With a high prevalence of injuries and chronic pain, opioid use and misuse is a concern for professional players as well. A 2010 survey of former NFL players evaluated sports pain and the use/misuse of opioids. Over half of the responders reported using opioids during their time in the NFL.<sup>7</sup> Of those, 71% misused the opioid medication by taking it outside a prescriber’s orders, took too much, too often, or intentionally used the medication for inebriation. It was also found that players who misused medications while they were in the league were 3 times more likely to continue misusing opioids 8 years into retirement compared to those retirees who only used the medications as prescribed.<sup>7</sup>

Similar opioid use/misuse has been reported by athletes in other professional sports as well. A 2017 interview with former NBA player Grant Hill published in *GQ* magazine discussed his use and naivety of opioids during his time in the league.<sup>11</sup> He states that players had ample access to opioids and, depending on the physician, were dispensed these medications in the locker room “like candy.”<sup>11</sup> Another interview with former professional mountain cyclist Ian Mullins depicted his downward spiral of addiction to tramadol (Ultram®), which until March 1<sup>st</sup>, 2019, was legal to have in one’s system for competitive races, including the famed Tour De France.<sup>12,13</sup> Tramadol was finally banned after numerous connections were made to the addiction of athletes and several peloton crashes.<sup>14</sup>

Although several studies have been published on the use/misuse of opioids in athletes, there has yet to be any documentation on interventions or providing support for these athletes. Additionally, there appears to be a lack of athlete specific pain management education. Pain medications are often the treatment of choice for managing injuries rather than pursuing other, non-pharmacologic options. Many of these retired NFL athletes who use opioids to treat injuries admit the medications are ineffective in managing their pain, but avoid change due to inaccurate, perceived notions of a lack of alternative options.<sup>10</sup> This is where organizations who employ these athletes can make a significant impact. Instead of being an avenue for prescribing opioids, alternative methods of pain management such as acupuncture, physical therapy, and hydrotherapy should be encouraged. If pharmacologic

agents are needed, athletes should be counseled on the importance of proper adherence and the potential risk for opioid use and misuse. Such interventions offer an incredible opportunity for healthcare professionals to provide more for their athletes and create a healthier team, both physically and mentally. Other options athletic teams can consider include annual education for professional athletes and staff on safe and effective pain management strategies including non-pharmacologic therapies, developing policies to restrict use of opioid medications, and providing support for those who abuse or misuse opioids. These strategies could help athletes, both young and old, play longer, minimize chronic pain, lower their risk for opioid misuse, and enjoy retirement.

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