

2021

PRESS RELEASE

For More Information:

ELLEN G. DUYSSEN

Central States Center for Agricultural Safety and Health

University of Nebraska Medical Center

College of Public Health, Room 3035

984388 Nebraska Medical Center

Omaha, NE 68198-4388

402.552.3394

FOR IMMEDIATE RELEASE

*By UNMC, Central States Center for Agricultural
Safety and Health, Omaha, NE*

OPIOID ABUSE

Drug abuse patterns were modified in 2020, but abuses didn't disappear.

PHOTO CREDIT: © Can Stock Photo / tab62

The manner in which people abuse opioid drugs evolved in 2020, but the basic issues surrounding abuse of these pain relievers remain the same.

Dr. Tina Christine L. Chasek, LIMHP, LADC, LPC, University of Nebraska-Kearney Associate Professor/Department of Counseling and School Psychology, says information recently released by the Centers for Disease Control and Prevention (CDC), provides a snapshot of current U. S. opioid abuse.

"Their information led me to some conclusions about current abuse situations," Chasek says. "The data appears to indicate that abuse of prescription opioids has declined. However, the use of illegal synthetic opioids, such as fentanyl has increased by about 10%."

Chasek credits perseverance of the medical community in closely monitoring opioid prescriptions use to help uncover abuse of the drugs and efforts to educate patients about opioid addiction risks. Improved prescription tracking tools have also helped reduce the number of people who successfully go from doctor to doctor to obtain excess prescription supplies.

"Those efforts, coupled with new regulations that help eliminate some barriers to helping people in treatment for drug abuse, have helped bring the volume of prescription drug abuse activities down," Chasek says. "The bad news about opioid abuse is that isolation caused by

Covid-19 restrictions has driven stress levels in general higher and overall substance abuse, including opioid drugs, has gone up.”

Over the past year, Covid restrictions has negatively impacted access to substance abuse treatment programs and increased barriers for entering medical facilities.

“For rural America, the good news is that opioid abuse rates dropped over the past year,” Chasek says.

A recent American Farm Bureau Federation survey revealed that, in rural areas, some 74% of people reported being impacted by opioid abuse practices. The survey indicated that the study participants either knew someone who abused opioids or were abusing the drugs themselves.

“Since Covid-19 began spreading, about 42% of survey respondents said they knew someone who used opioid drugs to self-medicate due to Covid-related stress,” Chasek says. “When someone abuses drugs to self-medicate in this way, it doesn’t point to a very good outcome, especially when drugs such as fentanyl, which is up to 100 times more potent than morphine, are involved.”

The U.S. Department of Justice/Drug Enforcement Administration’s (DEA) Drug Fact Sheet notes that that fentanyl is a synthetic opioid that was first developed in 1959 and introduced in the 1960s as an intravenous anesthetic. It is frequently used to help manage pain for cancer patients. Fentanyl pharmaceutical products are currently available as oral transmucosal lozenges (lollipops), effervescent buccal tablets, sublingual tablets, sublingual sprays, nasal sprays, transdermal patches and injectable formulations.

For illegal use, these products are sometimes stolen, secured through fraudulent prescriptions, or illicitly distributed by patients, physicians or pharmacists. For illicit purposes, fentanyl may be added to heroin to increase its potency or be disguised as highly potent heroin. Overdose deaths can occur when users don’t realize they purchased fentanyl-laced heroin. Illegally produced fentanyl is primarily manufactured in Mexico.

Street names for fentanyl include Apace, China Girl, China Town, China White, Dance Fever, Goodfellas, Great Bear, He-Man, Poison, Tango or Cash. The drug produces an intense, short-term high with temporary euphoric feelings. Physical effects include slowed respiration, reduced blood pressure, nausea, fainting, seizures, and possible death.

Other physical effects include relaxation, pain relief, sedation, confusion, drowsiness, dizziness, nausea, vomiting, urinary retention, and pupillary constriction.

DEA data shows that, fentanyl was involved in some 2,600 drug overdose deaths each year in 2011 and 2012. Between 2012 and 2018, fentanyl-related drug overdose deaths “increased dramatically each year. More recently, there has been a re-emergence of trafficking, distribution and abuse of illicitly produced fentanyl and fentanyl analogues (added compounds such as heroin) with an associated dramatic increase in overdose fatalities, ranging from 2,666 in 2011 to 31,335 in 2018.”

Regardless of why an opioid drug is ingested, opioids bind to receptors in the brain that tell the brain the body isn’t experiencing pain.

“Over time, your body is sensitized to the medication,” Chasek says. “You require more and more of the medication to relieve the pain, your body sensitizes to the higher dose, and it’s a vicious cycle. That’s why, if opioids don’t relieve the pain in a short time, you need to take a different approach to resolving the pain.”

If family members or friends suspect opioid abuse in an individual, taking time to respectfully and carefully approach them to offer support may be an effective way to help them recognize their opioid use disorder.

An opioid use disorder is defined as a problematic pattern of opioid use that leads to serious impairment or distress. Persons diagnosed with this disorder exhibit at least two of these symptoms:

1. Substance is taken in larger amounts and for longer periods than intended.
2. User experiences persistent desire or unsuccessful effort to cut down or control use of the substance.
3. A great deal of the user's time is spent in obtaining, using, or recovering from substance abuse.
4. Strong desire, craving or urge to use opioids.

Continued use of opioids typically leads to failure to fulfill major obligations at work, home or school. Recurrent social and personal problems emerge and important social and/or occupational and recreational activities are reduced due to opioid use.

It's important to recognize whether or not a prescription is an opioid. Common opioid drug names include hydrocodone (Hysingla, Zohydro ER, Lorcet, Lortab, Norco, Vicodin), Hydromorphone (Dilaudid, Exalgo), meperidine (Demerol), methadone (Dolophine, methadose) oxycodone (OxyContin, Oxaydo), codeine, Percocet, Roxicet, etc.

Primary indications that a person may be struggling with opioid addiction include extended use of a pain medication, continued or increasing pain, abnormal sleepiness or lack of focus, and changes in general behaviors.

"Look for depression, too," Chasek says. "Ongoing pain makes you feel bad physically and emotionally and could lead to depression. If someone is irritable or seems to become cranky before it's time to take their medication, those can all be red flags."

When long term pain solutions are necessary, Chasek advises relying on the expertise of pain specialists to identify an effective and safe treatment plan.

"Long term pain treatment must be non-narcotic," Chasek says. "Pain specialists have the necessary expertise and knowledge to develop a safe and effective treatment plan. Your primary care physician may be able to consult with a specialist if you don't have ready access to that kind of care."

If family members or friends suspect opioid abuse in an individual, taking time to respectfully and carefully approach them to offer support may be an effective way to help them recognize their opioid use disorder.

"If you see something, say something," Chasek says. "We speak up because we care about people and want to help. Be respectful and kind rather than accusatory and defensive or angry. Right now, it may be challenging to gain access to drug abuse treatment but be persistent. Drug addiction is a disease. Don't blame or point fingers. Opioids cause changes in the brain and addicts need help to get back on the right path so they can heal."

A wealth of information about opioid addiction in America's farm communities is available at this link, including links to the latest news and events related to opioid use in rural America.

<https://www.fb.org/issues/other/rural-opioid-epidemic/>

Pharmacy Toolkit is an online resource to help health care providers talk to patients and caregivers about opioid use and opioid use disorder.

<https://againstopioidabuse.org/pharmacytoolkit/>

This site provides information about how opioids work, why people become addicted and how to avoid addiction issues.

<https://www.asahq.org/whensecondscount/pain-management/opioid-treatment/opioid-abuse/>

This 21-page PDF includes information about Nebraska's legislative response to the opioid epidemic, prescription drug monitoring, reversing overdoses and calling for help, response from Nebraska's State agencies, state strategies and resources for those who need assistance with opioid addiction.

https://nebraskalegislature.gov/pdf/reports/research/opioid_epidemic_2018.pdf

Funding for this educational article comes from the Central States Center for Agricultural Safety and Health and the University of Nebraska Medical Center.

PSA COPY

30 SECONDS

Basic opioid abuse issues haven't changed. Abuse of illegal synthetic opioids has replaced prescription abuse and isolation due to Covid-19 restrictions has driven stress levels and overall substance abuse higher. The good news? There is help and hope. If you suspect opioid abuse in your family or a friend, avoid blaming and seek professional assistance in addressing the problem. Help them get on a path to health and healing.

I'm Aaron Yoder. This safety message is brought to you by Omaha's Central States Center for Agricultural Safety and Health.

60 SECONDS

Basic opioid abuse issues haven't changed. Abuse of illegal synthetic opioids has replaced prescription abuse and isolation due to Covid-19 restrictions has driven stress levels and overall substance abuse higher. The good news? There is help and hope. Signs that someone may be struggling with opioid addiction include extended use of pain medication, continued or increasing pain, abnormal sleepiness or lack of focus and general changes in behavior. Addicts may experience depression, emotional instability and spend a great deal of time obtaining, using, or recovering from substance abuse. You may notice they are unable to fulfill major obligations at work, home or school. Addiction can lead to recurrent social and personal problems and reduced recreational or social activity. They may experience strong desire, craving or urge to use opioids. If you suspect opioid abuse in your family or a friend, avoid blaming and seek professional assistance in addressing the problem. Help them get on a path to health and healing.

I'm Aaron Yoder. This safety message is brought to you by Omaha's Central States Center for Agricultural Safety and Health.