The Opiate Crisis

Presented by
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"Words are important.
If you want to care for something, you call it a 'flower

If you want to kill something, you call it a 'weed'."
~ Don Coyhis

Why Words Matter
Person First Language

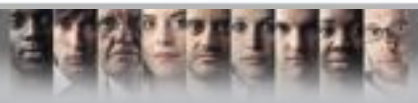
Person-first language is a philosophy
of putting individuals before their disability

Why Words Matter

Person First Language:

- Is trauma informed
- Is crisis intervention informed
- Breaks down barriers and stigma
- Lessens perceived judgment
- Prevents reinforcing of stigma and shame
- And will aid with legislation and support.

Why Words Matter



Say This	Not That
Person who struggles with addiction	Junkie/Addict
Person in recovery	Ex-addict
Person living with an addiction	Battling/suffering with addiction
Person who was arrested for a drug violation	Drug Offender
Chooses not to at this point	Non-compliant/bombed out
Medication as treatment tool	Medication as a crutch
Had a setback	Relapsed
Maintained recovery	Stayed clean
Positive urine screen	Dirty drug screen

Definitions

Opium
Fluid obtained from the poppy plant

Opiate
a substance derived from opium

Opioid
Compounds with opiate-like actions, including, but not confined to opiates (e.g., synthetic, endogenous opioids)

Narcotics
A general term technically referring to an opiate - related or opiate -derived drugs. It is often mistakenly used to include several other illicit drug categories as well.

What are the Opiates?

- Morphine
- Codeine
- Oxycodone (Vicodin, Oxycontin)
- Percocet
- Hydrocodone
- Fentanyl
- Methadone
- Heroin
- Carfentanil
- Fentanyl analogues

History of Opiates

- **4000 - 2000 BC:** Opium believe to be discovered in the Mediterranean area.
- **1500 BC:** Egyptian papyri list opium as on of 7000 remedies.
- **1st Century AD:** Opium poisoning described.
- **1655:** Portuguese physician, Acosta, wrote of withdrawl sickness.
- **1701:** British physician, John Jones, advocated moderation in the use of the drug in order to avoid the discomorts with its continued use.
- **1805:** Morphine isolated as the main active ingredient in **opium.**

Opiate Pharmacology

- Opiates work in the brain at specific "opiate receptors"
- There are several types of opiate receptors but the main receptor is called "Mu"
- Binding can cause full stimulation or effect at the receptor (agonist), or a partial effect (partial agonist) or block the effect of the receptor (antagonist)

Addiction

"Addiction is a primary, chronic disease of brain reward, motivation, memory and related circuitry."

- Must be treated, managed and monitored over a person's lifetime
- As a **chronic disease**, periods of relapse are a common feature of addiction
- [however] the return to drug use is **not inevitable**. The classification of chronic disease puts addiction in same category as hypertension and diabetes.

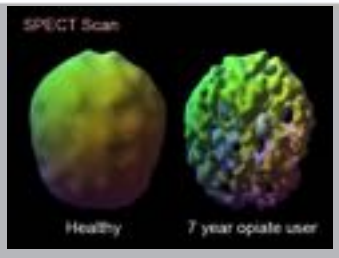
Addiction

- The reward pathway is primarily involved in addiction.
- The natural function of the reward pathway is to release dopamine when we do something that supports our survival, setting up a drive to repeat that behavior.
- What drugs of abuse have in common is that they stimulate the reward pathway, tricking us into thinking we did something important for our survival.

Addiction

- Chronic exposure to drugs disrupts the way critical brain structures interact to control behavior.
- In other words, drug addiction erodes a person's self-control and ability to make sound decisions.
- Adaptive changes may be permanent. No one is ever "cured" of addiction; it can only be put into remission.

Brain Effects



A SPECT scan. A healthy brain shows a smooth pattern of energy. Low blood flow and poor functioning appear as "holes".

Addiction

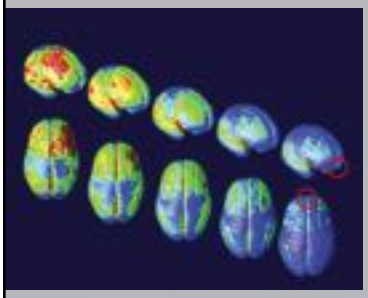
What Biological Factors Increase Risk of Addiction?

Scientists estimate that genetic factors account for between 40 and 60 percent of a person's vulnerability to addiction; this includes the effects of environmental factors on the function and expression of a person's genes.

Other Factors?

- ***Early Use.***
  Although taking drugs at any age can lead to addiction, research shows that the earlier a person begins to use drugs, the more likely he or she is to develop serious problems such as addiction.

Early Use



Images of Brain Development in Healthy Children and Teens: 5 – 20 years

One of the brain areas still maturing during adolescence is the prefrontal cortex—the part of the brain that enables us to assess situations, make sound decisions, and keep our emotions and desires under control. The fact that this critical part of an adolescent's brain **is still a work in progress puts them at increased risk for making poor decisions (such as trying drugs or continuing to take them). Also, introducing drugs during this period of development may cause brain changes that have profound and long-lasting consequences**

The Adolescent Brain

- Major growth occurs in the PFC between ages 13 - 26
- Adolescents can become addicted 5x faster than adults
- People who start using as teenagers have immature PFC's

Understanding Risk and Protection

Risk Factors

- Genetic disposition
- Prenatal alcohol and/or drug exposure
- Parents who use drugs and/or alcohol or who suffer from mental illness
- Child abuse and maltreatment
- Inadequate supervision
- Neighborhood poverty and violence
- Norms and laws favorable to substance use
- Adverse Childhood Experiences

Protective Factors

- Parental involvement
- Health peer involvement
- Availability of faith-based resources
- After-school activities
- Policies limiting the availability of alcohol
- Attachment to community
- Pro-social engagement
- Connectedness to adults outside of family

Treatment

Three typical medications used in treatment are:

- Buprenorphine
- Naltrexone
- Methadone

Evidence based practice advises the use of behavioral therapy, family therapy and 12 step programs in conjunction with MAT for recovery.

Treatment

Effectiveness of Treatment

- Goal of treatment is to return to productive functioning
- Treatment reduces drug use by 40-60%
- Treatment reduces crime by 40-60%
- Treatment increases employment prospects by 40%
- Drug treatment is a successful as treatment of diabetes, asthma, and hypertension

Relapse

Recovery

Consequences of Addiction

Some of the more devastating and troubling consequences of addiction are:

- ***Negative effects of prenatal drug exposure on infants and children***
  A mother's abuse of heroin or prescription opioids during pregnancy can cause a withdrawal syndrome (called neonatal abstinence syndrome, or NAS) in her infant.
- ***Hepatitis C***
  Injection drug use is also a major factor in the spread of hepatitis C, a serious, chronic, potentially fatal liver disease.
- ***HIV***
  Rates here in FC have not risen but in pockets of the country we are seeing an increase of HIV due to injection drug use.

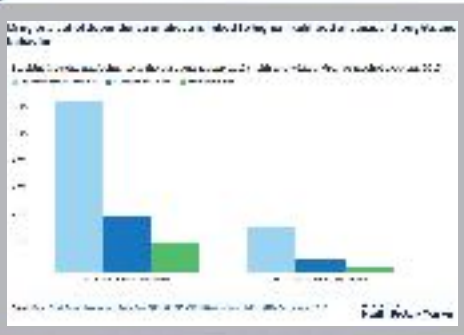
Women and Addiction

Women escalate drug use more rapidly than men: all drugs of abuse. Increased dopamine production and estradiol

In general, women show greater propensity to drug relapse than men. Relapse is more likely triggered by stressful or emotional stimuli in women

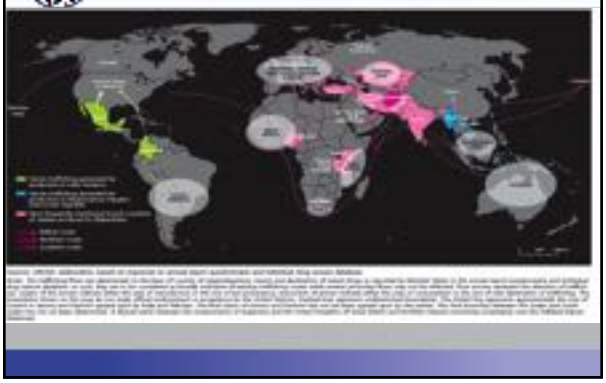
Sex differences in initiation of drug use are small to negligible in early to mid adolescence. As puberty starts and maturation begins the differences in rates of use of alcohol, marijuana and smoking are notable.

Suicidal Thoughts and Addiction



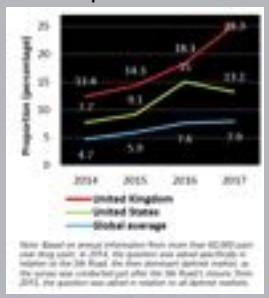
UNODC: UN Office of Drugs and Crime

Main opiate trafficking flows, 2011-2015



Drugs on the Darknet

Annual drug users obtaining drugs over the darknet in the past 12 months



National

Drug Deaths in America Are Rising Faster Than Ever

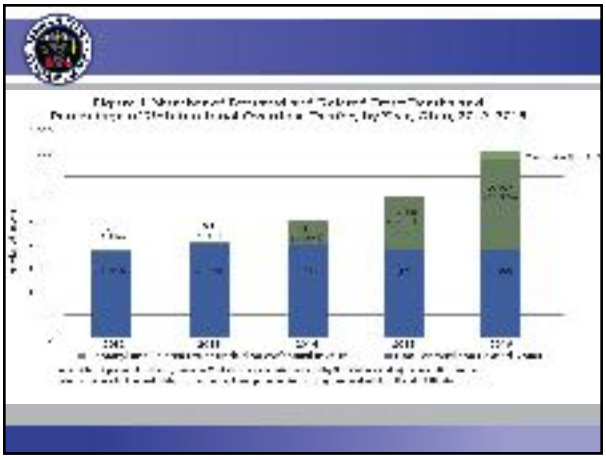
National Health Center Statistics recently revealed preliminary national overdose death statistics: 63,600. This is a 21% increase from 2015.

The death count is the latest consequence of an escalating public health crisis: opioid addiction, now made more deadly by an influx of illicitly manufactured fentanyl and similar drugs. ***Drug overdoses are now the leading cause of death among Americans under 50****.*

The Addiction Policy Forum has run the numbers and found that 174 Americans per day lost their lives to addiction in 2016

Ohio

- Unintentional drug overdoses caused the deaths of 4,050 Ohio residents in 2016, the highest number on record, compared to 3,050 in 2015. The number of overdose deaths increased 32.8 percent from 2015 to 2016 compared to an increase of 20.5% from 2014 to 2015. This increase is fueled by fentanyl.



Franklin County: 2017 Full Year

From January 1, 2017 to December 31, 2017 there were 520 overdose deaths in Franklin County. This is a preliminary number as not all cases have been finalized. We have seen approximately a **47.3% increase in overdose deaths from 2016 to 2017**. Fueling the increase is fentanyl.

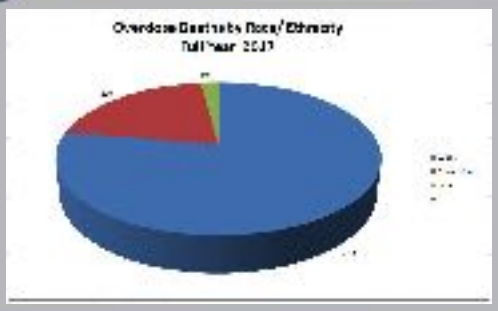
Fentanyl related overdose deaths accounted for 66.5% of all overdoses compared to 2016 when it accounted for 40.7% of all deaths. Cocaine related overdose deaths were 36% of all overdose deaths compared to 34% in 2016, slightly higher. Methamphetamine related overdose deaths were 4.6 % of all overdose deaths in 2017 compared to 2% in 2016. Heroin related overdose deaths have seen a decrease in 2017: 16% in 2017 vs. 40.7% in 2016. Overall opiate related deaths accounted for 81% of overdose deaths vs. 75.3% in 2016.

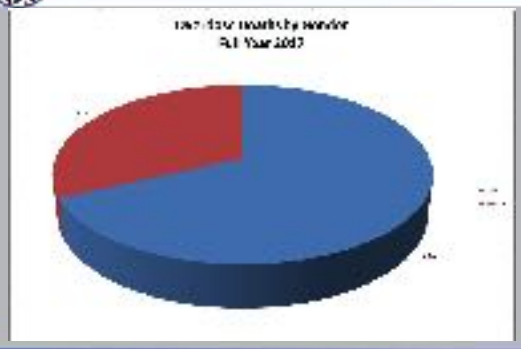
Decedents **under 39 years of age accounted for 56% of the overdose deaths in 2017** which was a slight increase from 2016. In **2016 50%** of overdose deaths occurred in those 39 and under.

The majority of deaths were in males: 68% male vs 32% female. This is an **increase of 10% in female overdose deaths from 2016**. 78% male vs 22% female, 2016.

White males were again the majority of overdose deaths in 2017: 78% white vs. 20% African American vs. 2% other. In 2016 we saw: 79.6% white vs. 19.2% African American vs. 1.2% other.

Franklin County





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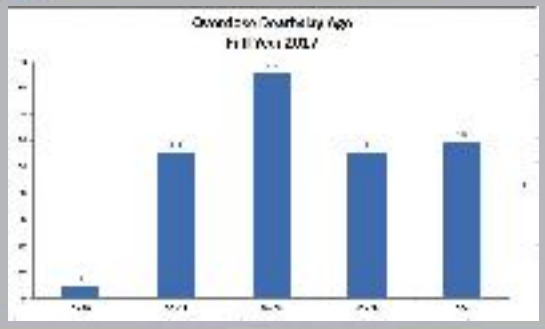

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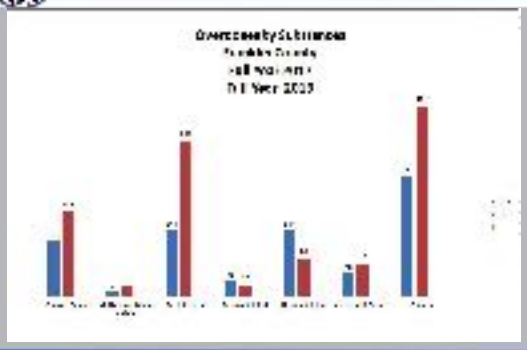

Franklin County

Local Efforts

Franklin County Opiate Action Plan:

https://adamhfranklin.org/wp-content/uploads/2017/06/2017-Opiate-Action-Plan-Web.pdf

Five committees:

Treatment, Law Enforcement, Prevention, Health and Harm Reduction, Recovery and Community Engagement

FCCO

- Grassroots Task Force
- Overdose death review
- Opiate Summits
- Current involvement in Action Plan
- Naloxone training
- HIDTA collaboration

Remember

Love
and
acceptance
go a long way

Questions?

Thank You!

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