

MEDICAL WELLNESS ASSOCIATES

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Fatal Prescription: America's Pain-Pill Epidemic

More women than ever are dying from painkiller overdoses. How can you spot signs of drug abuse in a loved one?

Americans' abuse of prescription painkillers has reached epidemic proportions, according to the U.S. Centers for Disease Control and Prevention. The CDC estimates that 15,000 people die every year in this country from overdoses involving opioid or narcotic pain relievers.

While men are more likely to die from painkiller abuse, the number of deaths among women was up 400 percent between 1999 and 2010. "More women are dying at rates that we have never seen before," said CDC Director Dr. Thomas Frieden. "Stopping this epidemic in women — and men — is everyone's business."

So what's driving this alarming trend, and what can be done to stop it without denying relief to people who need pain medicine?

James McGowan, MD, who specializes in advanced pain treatment options at The Center for Interventional Pain Medicine at Mercy Medical Center in Baltimore, believes the problem arose from a concern that chronic pain was being undertreated.

"Papers were written advocating for the use of opiates in chronic, non-cancer-related pain," said Dr. McGowan. "This movement led to a huge increase in the number of patients being prescribed opiates, and all these medications are potentially addicting."

Americans take about 80 percent of the total number of opiates produced in the entire world, according to the American Society of Interventional Pain Physicians. The CDC estimates enough prescription painkillers were prescribed in 2010 alone to medicate every American adult around the clock for a month.

Derived from opium, opiate painkillers such as morphine, codeine, and oxycodone work by blocking pain signals to the brain. They can affect parts of the brain that control emotions, causing feelings of euphoria.

Research such as a 2011 study in the journal *Drug and Alcohol Dependence* suggests patients with psychiatric disorders like depression or anxiety disorder may be especially prone to abusing opiates for their anti-depressive and anti-psychotic effects.

McGowan stresses doctors need to be aware if a patient shows signs of any psychological conditions. He points out that opiates aren't always effective and should be prescribed as a last option for treating pain.

"Doctors should recognize that certain patient populations are very unlikely to benefit from opiates," said McGowan. That would include "patients with pain without an obvious anatomic cause, and those who have significant psychological issues such as depression or anxiety thought to be contributing to their pain."

Family and friends can help spot early signs of prescription drug abuse in a loved one. The Mayo Clinic lists several potential symptoms including depression, confusion, poor decision-making, an increase or decrease in sleep, and mood swings. Seeking medical help as early as possible can prevent drug misuse from becoming an addiction.

There are treatment options available for people addicted to painkillers, including counseling and medications. But an August study in the journal *Health Affairs* suggests a lot of people don't get the help they need.

According to the study, "...practitioners have at their disposal more tools than ever to treat opioid dependence. Yet these tools are not being used to their greatest potential in the United States or Canada." The authors attribute that gap to regulation of drugs like methadone that are used to treat addiction and to the prohibitive cost of treatment for uninsured patients.

In October, the U.S. Food and Drug Administration recommended stricter regulations on how doctors prescribe painkillers containing hydrocodone. The restrictions would reduce the supply of drugs a patient could get without a new prescription from 180 days to 90 days. Patients would have to take the prescription to the pharmacy to get it filled, rather than have a doctor call it in. The restrictions will likely take effect sometime this year.

Similar restrictions are already in place for other opiates such as Percocet and Oxycontin. But not everyone is convinced that such regulation is a long-term solution.

"The new restrictions may help slow the tide of opiate addictions by... deterring physicians from starting patients on these medications," said McGowan. "But we see tremendous amounts of addictions with other medications with similar restrictions. So I am not sure if the new ones will really make much difference in the long run."

Imposing restrictions can have the adverse effect of limiting availability of painkillers to patients who could benefit without risk of abuse. According to Institute of Medicine estimates, 116 million Americans experience chronic pain resulting in as much as \$635 billion in healthcare costs and lost productivity every year.

"These are very difficult trade-offs that our society has to make," Dr. Janet Woodcock, director of the FDA's Center for Drug Evaluation and Research, told The New York Times. "The reason we approve these drugs is for people in pain. But we can't ignore the epidemic on the other side."