

# Prescription Drug Abuse Plan

What is Prescription Drug Abuse?

Prescription drug abuse<sup>i</sup> is the use of a medication without a prescription, in a way other than prescribed, or for the experience or feeling elicited. According to several national surveys, prescription medications, such as those used to treat pain, attention deficit disorders, and anxiety, are being abused at a rate second only to marijuana among illicit drug users. The consequences of this abuse have been steadily worsening, reflected in increased treatment admissions, emergency room visits, and overdose deaths.



“When we talk about the pharmaceutical drug abuse problem, we’re talking about a national problem that crosses all economic and cultural lines. To combat the problem takes a network of the entire community, led by law enforcement in conjunction with prevention and behavioral health services. It is critical that we take a bold stance because, although abuse by older adults is a problem, use by minors and younger adults is at epidemic proportions.

This strikes at our future generation who are under the erroneous belief that because the pharmaceutical drugs are manufactured legally, they are not dangerous. We must note that current statistics show 70% of teens get their pharmaceutical drugs from friends and family members, not street pushers.

Drug take-back programs, like the one Stanislaus County has implemented and others like it help to make a difference and bring needed awareness to communities. We must continue to build on these types of programs.”

Tony Loya, Director  
National Methamphetamine and Pharmaceuticals Initiative  
A HIDTA/ONDCP Initiative

## **Introduction**

Alcohol and other drug misuse pose one of the greatest risks to individual and community health and safety. Substance misuse has both short and long-term health and safety consequences, including cognitive impairment that affects driving and learning, delays to adolescent brain development and social skill development, suicide risk, unwanted sexual activity, violence, injury, family and relationship problems, academic failure, low work place productivity, acute intoxication, crime, addiction, and other outcomes, many of which are associated with significant personal and societal costs.

Given the magnitude of individual, family, community, governmental and societal costs of substance abuse, the most poignant aspect of its devastating effects is that they are **100% preventable**. However, the preventability does not make the issue simple to address. The awareness and engagement of multiple stakeholders and sectors within communities is a first step toward changing the norms and other contributing factors that influence a person's decision to misuse drugs or abuse alcohol.

The rise of prescription drug use is rooted in multiple contributing factors including a low perception risk, ease of accessibility, and the entrenched social norm that no one should be in pain and there is a pill to fix everything. Root cause analysis data aligns with what's being reported nationally, that most youth and young adults are accessing un-prescribed medication from friends or family.

### **Problem**

Unwanted, unused or expired prescription medications are susceptible to diversion, misuse and abuse. Rates of prescription drug abuse in the U.S. are alarmingly high, as are the number of accidental poisonings and overdoses due to these drugs. Studies show that a majority of abused prescription drugs are obtained from family and friends, including from the home medicine cabinet.

In addition, Americans are now advised that their usual methods for disposing of unused medicines flushing them down the toilet or throwing them in the trash — both pose potential safety and health hazards.

The National Survey of Drug Use and Health (NSDUH) is conducted annually by the Substance Abuse and Mental Health Services Administration, and included responses to various questions by a random sampling of households throughout the United States.

#### **Most Common Misused Prescription Medications**

**Prescription Opioids, or "painkillers,"** include powerful and addictive substances such as oxycodone (OxyContin, Percocet), hydrocodone (Vicodin), fentanyl, morphine and methadone. Prescription opioids act on brain receptors and can be highly addictive. Heroin is an illegal, nonprescription form of opioid. Abuse of opioids, alone or in combination with alcohol or other drugs, can depress respiration and lead to death. Injecting opioids also increases the risk of HIV and other infectious diseases through use of contaminated needles.

**Central Nervous System Depressants,** such as benzodiazepines, hypnotics and barbiturates, are sometimes referred to as sedatives or tranquilizers and are used to treat anxiety and sleep problems. These drugs can be addictive. High doses can cause severe respiratory depression. The risk rises when the drugs are combined with other medications or alcohol.

**Stimulants** are used to treat ADHD and narcolepsy. These drugs can be addictive, and can cause a range of problems, including psychosis, seizures and heart ailments.

According to the NSDUH 2012 survey, an estimated 2.9 million persons aged 12 or older used an illicit drug for the first time within the past 12 months. This averages to approximately 7,900 initiates per day. Although a majority of these past year illicit drug

users reported that their first drug used was marijuana (65.6 percent), more than 1 in 4 stated that they initiated their illicit drug use with nonmedical prescription drugs (26.0 percent) Stanislaus County is not immune to the effects this nationally recognized drug epidemic. Based on statistics taken from Stanislaus County’s two methadone treatment clinics, (1 public and 1 private) the number of clients seeking treatment for opiate addiction is alarming. Of the approximately 600 clients surveyed, 46% stated that their opiate addiction began with their use of prescription drugs for nonmedical purposes; 44.1 % stated that the onset of their prescription medication abuse started between the ages of 18 to 25 years.

**“Todd’s Story”**

Todd grew up in Modesto and started abusing prescription medication at the age of 11. He was introduced to Codeine 3 by his friends and began to use out of curiosity and peer pressure. Todd explained that he didn’t know what addiction was, but he really enjoyed how the pills made him feel.

By the age of 13, Todd was a full-blown addict and had moved on to painkillers such as Vicodin and Norco to feed his addiction. While visiting his grandfather, Todd discovered a large box of prescription pain killers his grandfather hid in his closet. Todd said these prescriptions were excess pain medications his grandfather had accumulated over several years while he sought treatment for a back injury. Todd said he stole small amounts of painkillers from his grandfather until the supply was gone. At age 16, Todd began selling painkillers while attending Downey High School. This gave Todd the means to feed his addiction while making extra money. During the course of his prescription pill addiction, Todd stated that he had to take at least “10 Vicodin just to get up in the morning.

<b>Methadone Clinic Survey Snapshot Fiscal Year 2011/2012</b>		<b>Percent</b>
<b>Gender</b>		
Male		48.60%
Female		51.40%
<b>First Substance Used</b>		
Marijuana		38.40%
Alcohol		32.35%
Methamphetamine		4.15%
Heroin		12.15%
Oxycontin		0.50%
Vicodin		5.95%
Other		6.45%
<b>How Did Opiate Addiction Begin</b>		
Heroin		53.65%
Prescription Drugs		46.35%
<b>Age of First Opiate Use</b>		
Under 12 years		1.45%
12 to 15 years		17.30%
16 to 17 years		14.85%
18 to 20 years		21.35%
21 to 25 years		22.85%
26 to 30 years		8.45%
31 to 40 years		11.15%
Over 40 years		2.65%
<b>Total Number Interviewed</b>		593

At the age of 21, Todd was introduced to Heroin, which started a roller coaster of addiction which would last for 29 years. Todd stated that heroin is a natural progression

from prescription painkillers because of the cheaper cost and easier availability. In his mind, “pills are the reason I ended up shooting heroin.” During the course of his 29 year heroin addiction, Todd estimates that he overdosed 15 to 20 times.

At the age of 50, Todd was introduced to methadone treatment by a friend. At first, Todd said he originally thought methadone was going to be an “opportunity to get free dope”, but as he continued the treatment he found that his desire to use heroin had become less frequent. Todd began to believe that methadone treatment was an opportunity for him to break free from his heroin addiction and pursue the life that had eluded him for so many years.

Today, Todd has been clean for 19 months. He chose to tell his story because he wanted the opportunity to help others dealing with addiction. “If this keeps just one kid from trying pills, it was worth it.”

### **“Amanda’s Story”**

Amanda grew up in Ceres with her mother and described her childhood as “pristine.” Based on her personal experiences, she associated drug use with being “dirty”, such as; shooting or snorting drugs. In her eyes, prescription medications weren’t considered “drugs” because she observed her mother and grandmother taking them on a regular basis.

Between Amanda’s 8<sup>th</sup> and 9<sup>th</sup> grade school year, she had oral surgery. After the surgery was completed, the dentist prescribed Vicodin to help with the pain. For the first week after surgery, Jennifer said she took the pain medication as prescribed to help her with the pain. In weeks to come however, Jennifer said she began taking the pain medication “in anticipation of the pain.” Before Jennifer realized it, she was addicted and didn’t feel “normal” without using prescription medications daily.

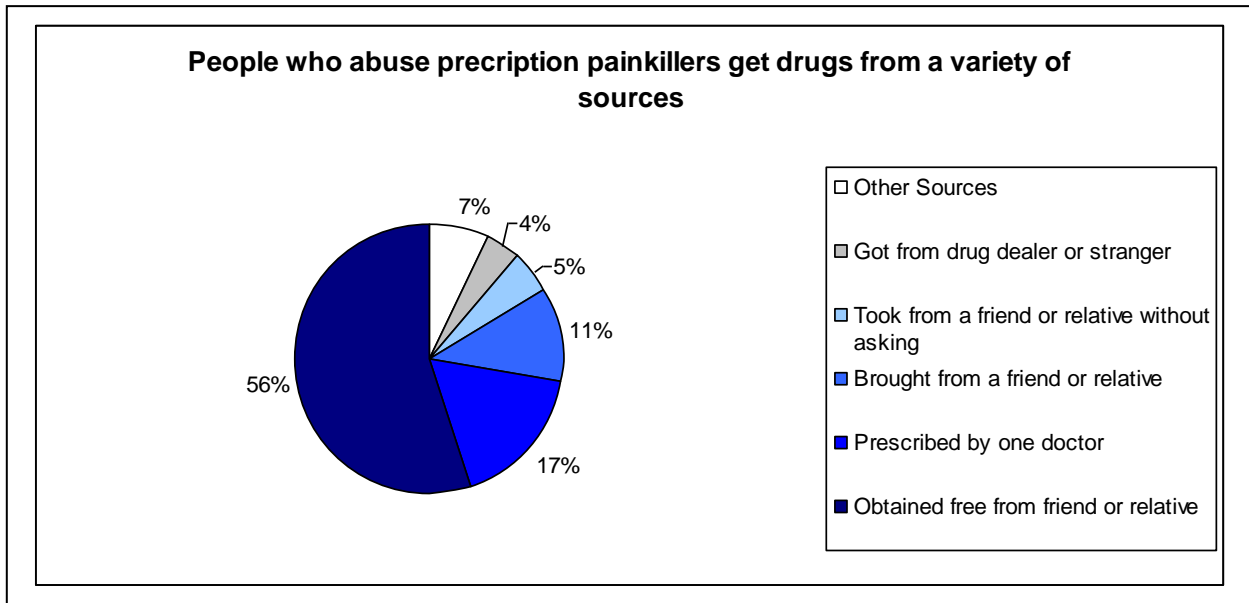
In order to feed her addiction, Amanda began borrowing pills from her mother and stealing pills from her grandmother. The use of prescription medication was so common in Amanda’s family that her mother would “borrow” pain meds from Amanda, and then pay her back with interest. By the time she turned 17, Jennifer began smoking marijuana. Jennifer said she wanted to get clean, but it was difficult for her to find treatment because she was under the age of 18. The treatment options she did find were very expensive and required her to travel out of the area.

During her time in high school, Amanda was able to acquire and maintain a job driving a delivery van. She described herself as “a functioning addict.” During Amanda’s senior year, she met a boy. During their relationship, Amanda and her boyfriend continued to abuse prescription medication. By the time she turned 19, Amanda began snorting OxyContin. As Amanda’s addiction grew, her fiancée began using crystal methamphetamine.

Once Amanda realized her addiction was out of control, she broke up with her fiancée and began to take steps to get clean. She moved to New York for a small period of time with the desire to make a fresh start, but she soon realized the need for prescription medication would follow her. Amanda decided to move back to Ceres so she could have her baby near her family.

At the age of 22, Amanda was introduced to methadone treatment. At first she didn't realize the true purpose of methadone, but she soon realized that it would help her control her desire to abuse opiate based painkillers.

Today, Amanda has been clean for 21 months. She considers herself lucky in the fact that her addiction never escalated to heroin. "I don't think kids realize how a simple prescription for surgery can turn your whole life upside down." Jennifer shared her story in hopes that she can make an impact in the lives of youth and prevent others from becoming addicts.



### History

In recent years it has become obvious through studies and research conducted by local law enforcement agencies, Stanislaus County Behavioral Health & Recovery Services (BHRS), and U.S. Department of Justice that residential supplies of pharmaceutical controlled substances (contained in our own residential medicine cabinets), are fast becoming the supply of choice for criminals. Studies show that drug abusers, a high percentage which are teens, are obtaining their drugs or pharmaceutical controlled substances from residential medicine cabinets belonging to family and friends.

In addition research has shown water contamination due to pharmaceutical medications being flushed down the toilet or drains in our homes create significant threats to our environment. Most controlled substances are created synthetically and are not removed through water treatment and are released to the environment and ground water supplies.

The proposed Prescription Medication Drop-off Program not only provides benefits to our environment, but it serves as a preventative step against the potential for prescription medication diversion and drug abuse by removing the readily available

supply of prescription medications. In addition, this program can be used to educate the community about the dangers these medications pose to our youth.

Our experience has shown that community members of Stanislaus County, in possession of such prescription medications, will take advantage of opportunities for safe and secure disposal. In 2009, the Stanislaus Drug Enforcement Agency, in partnership with Stanislaus County BHRS successfully initiated Stanislaus County's first prescription medication take back event. During the 2009 take-back event, 420 pounds of controlled substances were collected. Since that date, the partnership has continued and we have successfully hosted over 20 additional prescription take back events in Stanislaus County from 2010 through 2013. The events have yielded an additional 6,845 pounds of unused, unwanted, or expired prescription medications from our community, totaling 7,265 pounds.

Through our continuing county-wide educational efforts, the partnership between Stanislaus County BHRS, the Stanislaus Drug Enforcement Agency (SDEA), and Stanislaus County Department of Environmental Resources (DER) has remained vigilant in identifying a more permanent solution for the citizens of Stanislaus County to dispose of their unwanted, unused, or expired prescription medication.

One way citizens can be afforded such an opportunity is for Stanislaus County BHRS in partnership with local law enforcement to provide secure drop boxes for the deposit and subsequent destruction of unwanted, unused or expired prescription medications. This program will bring community members into our local law enforcement facilities where they can safely dispose of unwanted prescription medications, while having the opportunity to expose themselves to additional resources available to them.

## **Stanislaus County Prescription Drug Abuse Plan Outline**

### **Media Campaign**

Goal 1: Use media to raise awareness and gain community support.

### **Education**

Goal 2: Educate the community about prescription drug abuse and the resources available to them.

Goal 3: Educate healthcare professionals about all aspects of prescription drug abuse.

### **Enforcement / Availability**

Goal 4: Decrease access through proper storage and increased disposal.

Goal 5: Increased training for law enforcement.

Goal 6: Increase collaboration and information sharing between community stakeholders.

### **Media**

**Goal 1:** Use news stories, public service announcements, social media, and other media outlets to highlight the dangers of prescription drug abuse.

### **Education**

**Goal 2:** Use the “Drop the Drugs” prescription take back program as a platform to educate the community about the dangers surrounding prescription drug abuse and the multiple ways in which prescription drugs are illegally acquired. Develop age appropriate messages that clearly emphasize the dangers of prescription drug abuse. Create posters, videos, and other informational materials that can be distributed throughout the community, including schools, medical facilities, pharmacies, senior centers, and youth recreational centers.

**Goal 3:** Reach out to physical and behavioral health professionals, including dentists, doctors, nurses, and pharmacists to collaborate with training to screen for prescription drugs abuse and to provide appropriate intervention and referrals when necessary.

**Enforcement / Availability**

**Goal 4:** Decrease access by coordinating and promoting county-wide prescription drug take-back events and implementation of permanent take back drop boxes located in law enforcement agencies across the county.

**Goal 5:** Train law enforcement personnel in the area of prescription drug identification, understanding crime trends related to the issue, and to ensure consistent and comprehensive enforcement throughout the county.

**Goal 6:** Prevention efforts rely largely on cross sector collaboration. The Stanislaus County Prevention Network is utilized to increase public awareness by actively promoting the availability of take back locations and disseminate information regarding the importance of proper storage and disposal.

**Drop the Drugs**  
**Prescription Medication Disposal Event**

**THERE'S A NEW DRUG DEALER IN TOWN**

Drop the Drugs Event provides community members a controlled and safe place to dispose of medications that may have accumulated in their homes; diverting potential abuse, overdose, and environmental impacts. The non-medical use of prescription drugs to get high ranks second only to marijuana as the most common form of drug abuse in America. Bring us your unused prescription and over-the-counter medications in the original bottles/containers. Home-generated sharps can also be dropped off for disposal; sharps must be in a rigid, puncture resistant container.

**Drop-Off Time & Location:**  
**October 26, 2013**  
 10:00 AM - 2:00 PM  
 Stanislaus County Court House  
 800 11th Street (I Street Side), Modesto, CA  
 For more information call Behavioral Health & Recovery Services (209) 541-2555

Behavioral Health & Recovery Services  
 A Mental Health, Alcohol & Other Drug Services Organization  
 Department of Environmental Resources

**Drop the Drugs Program Achievements**

**DROP THE DRUGS**  
**Prescription Medication Disposal Event**

There's a new threat and it's from the family medicine cabinet: The abuse of prescription and over-the-counter drugs. Did you know that throwing out your prescription medicine the wrong way could lead to drug abuse, accidental overdose, and even water contamination? Properly disposing of unwanted medications may be inconvenient, but there are some very important reasons to do this in a safe and responsible manner.

**WHAT'S THE PROBLEM?**

**ABUSE/MISUSE**  
 For many teens, finding these drugs is as easy as opening the medicine cabinet, nightstand, or purse — at home or at a friend's house. Every day 2,500 youth age 12 to 17 abuse a pain reliever for the very first time. More teens abuse prescription drugs than any other illicit drug, except marijuana. In 2006, more than 2.1 million teens ages 12 to 17 reported abusing prescription drugs. Among 12 and 13-year-olds, prescription drugs are the drug of choice. Many teens turn to prescription drugs because they think it's a safe way to get high.

There are serious health risks related to abuse of prescription drugs. A single large dose of prescription or over-the-counter painkillers or depressants can cause breathing difficulty that can lead to death. Even in small doses, depressants and painkillers have subtle effects on motor skills, judgment, and the ability to learn.

**ENVIRONMENTAL IMPACTS**  
 Drugs that are flushed down the toilet cannot be removed by the sewage treatment plant or septic system processes. The substances are released into waterways which can lead to contamination of surface and ground water. Recent environmental studies have found traces of pharmaceutical compounds in treated wastewater, rivers, lakes, groundwater, soil samples, and fish tissues. This continuous exposure to low levels of pharmaceuticals may have negative impacts on human health and the environment.

**Why Should I Take the Time To Do This?**

*"More teens abuse prescription drugs than any other illicit drug, except marijuana."*

*It's your environment: Please don't flush! Please don't pour!*

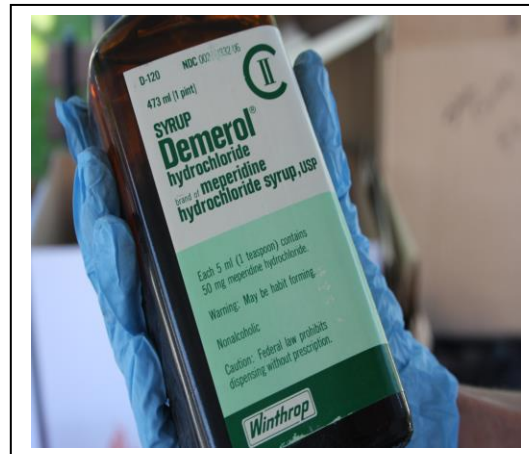
**Proper Disposal of Prescription Drugs**  
 Do not flush prescription drugs down the toilet or pour them down the drain, unless the label or accompanying patient information specifically instructs you to do so. If you need to dispose of prescription medication before the next Drop the Drug event, please follow the guidelines below:

- ✓ Take your prescription drugs out of their original containers.
- ✓ Mix drugs with an undesirable substance, such as cat litter or used coffee grounds.
- ✓ Put this mixture into a disposable container with a lid, such as an empty margarine tub, or into a sealable bag.
- ✓ Conceal or remove any personal information, including Rx number, on the empty containers by covering it with black permanent marker or by scratching it off.
- ✓ Place the sealed container with the mixture, and the

**Bring your unused prescription and over-the-counter medications in the original bottles/containers to the following Save Mart Supermarket locations:**  
 From 2:30 p.m. - 6:30 p.m.

<b>Patterson</b> 1035 Sperry Rd. Thursday, Sept. 10th	<b>Oakdale</b> 1449 East F St. Tuesday, Sept. 15th
<b>Riverbank</b> 2237 Claribel Rd. Thursday, Sept. 17th	<b>Modesto</b> 801 Oakdale Rd. Tuesday, Sept. 22nd
<b>Modesto</b> 415 Paradise Rd. Thursday, Sept. 24th	<b>Modesto</b> 2100 Standiford Ave. Tuesday, Sept. 29th





2009 – 420 pounds  
2010 – 1,300 pounds  
2011 – 3,500 pounds  
2012 – 540 pounds  
2013 – 1,505 pounds

**TOTAL: 7,265 Pounds of Prescription Medication  
Collected in Stanislaus County, 2009 – 2013**

Effective prevention requires the collaboration of multiple service systems in a community. Education, child welfare, law enforcement, health care, and behavioral health care are just a few of the systems required to ensure a comprehensive prevention infrastructure. Educating individuals about effective ways to store and dispose of medications safely, including “Take Back” programs that allow people to turn in unused medications for safe disposal, help reduce the potential for family and friends to have access to and misuse medications prescribed to someone else. According to the National Institute on Drug Abuse (NIDA), **Prevention is “the best strategy,”**

“The nonmedical use and abuse of prescription drugs is a serious public health problem in this country. Although most people take prescription medications responsibly, an estimated 52 million people (20 percent of those aged 12 and older) have used prescription drugs for nonmedical reasons at least once in their lifetimes. Young people are strongly represented in this group. In fact, the National Institute on Drug Abuse’s (NIDA) Monitoring the Future (MTF) survey found that about 1 in 12 high school seniors reported past-year nonmedical use of the prescription pain reliever Vicodin in 2010, and 1 in 20 reported abusing OxyContin—making these medications among the most commonly abused drugs by adolescents.

The abuse of certain prescription drugs—opioids, central nervous system (CNS) depressants, and stimulants—can lead to a variety of adverse health effects, including addiction. Among those who reported past-year nonmedical use of a prescription drug, nearly 14 percent met criteria for abuse of or dependence on it. The reasons for the high prevalence of prescription drug abuse vary by age, gender, and other factors, but likely include greater availability.

The number of prescriptions for some of these medications has increased dramatically since the early 1990s. Moreover, a consumer culture amenable to “taking a pill for what ails you” and the perception of prescription drugs as less harmful than illicit drugs are other likely contributors to the problem. It is an urgent one: unintentional overdose deaths involving opioid pain relievers have quadrupled since 1999, and by 2007, outnumbered those involving heroin and cocaine.

NIDA hopes to change this situation by increasing awareness and promoting additional research on prescription drug abuse. Prescription drug abuse is not a new problem, but one that deserves renewed attention. It is imperative that as a Nation we make ourselves aware of the consequences associated with abuse of these medications.”

Nora D. Volkow, M.D.  
Director  
National Institute on Drug Abuse

Stanislaus County Prescription Drug Plan was developed by Stanislaus County Behavioral Health and Recovery Services, Alcohol and other Drug Education and Prevention Services and modeled after San Diego County. For additional information about this plan or the Drop the Drugs program, please contact (209) 541-2555 or visit [www.crowdproject.com](http://www.crowdproject.com).

Special thanks to Stanislaus County Sheriff, Adam Christianson, for being the first law enforcement agency in Stanislaus County to commit to the placement of 5 permanent Drop Boxes. Drop Boxes will be placed at the Sheriff's Office headquarters in Modesto, as well as their contract cities in: Waterford, Hughson, Patterson and Riverbank. Sheriff Christianson has been a strong supporter of the Drop the Drugs program since its inception.

We would also like to recognize Stanislaus County Department of Environmental Resources (DER) for their partnership in the Drop the Drugs program. DER has provided the valuable resource of sharp collection at each Drop the Drugs event since 2009.

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<sup>i i</sup> Prescription drug abuse, as defined in this report, is equivalent to the term "nonmedical use", used by many of the national surveys or data collection systems. This definition does not correspond to the definition of abuse/dependence listed in the Diagnostic and Statistical Manual of Mental Disorders, 4<sup>th</sup> edition (DSM-IV)