

Methadone deaths surging throughout SW Fla.
Deaths up 366 percent statewide since 2000

By Jennifer Booth Reed
jreed@news-press.com
Originally posted on January 17, 2008

With OxyContin on law enforcement's radar, drug users are turning to a different way to get high - methadone.

And it's killing them.

The number of Floridians dying with methadone in their systems has surged from 209 in 2000 to 974 in 2006 - a 366 percent increase, according to Bill Janes, director of the Florida Office of Drug Control, who recently issued a statewide bulletin about the uptick.

Southwest Florida saw 35 more methadone deaths in 2006 than in 2005. Complete information for 2007 was not available, but preliminary statistics from the first six months indicate 28 died from methadone in Lee, Hendry and Glades counties, which the state lumps into one medical examiners' district.

Methadone caused the second-greatest number of drug-related deaths in Florida in 2006, just behind cocaine, according to the state Medical Examiners Commission report. That report listed heroin, methadone and fentanyl, a pain killer, as the three most lethal drugs in terms of the number of deaths they caused that year.

An interim 2007 report tracking deaths from January to June shows that the drug is likely to remain the No. 2 cause of overdose deaths.

Methadone is perhaps most associated with recovering heroin addicts who get daily doses to battle withdrawal. Janes said those users aren't the problem. Although some methadone clinic patients are allowed to take their medication home, clinic nurses generally administer the medication on site.

Instead, Janes said, more people are abusing and selling methadone prescribed for pain.

"It's moved heavily into the street," Janes said.

Doctors, he said, are prescribing the pain reliever more often because it's cheaper and less monitored than OxyContin, the powerful opiate that has received much media and law enforcement attention in recent years.

"It is five times cheaper than OxyContin," Janes said.

Southwest Florida hasn't been immune to the trend.

Lee, Hendry and Glades counties in 2006 had a combined 50 methadone-related deaths, up from 31 in 2005, according to a state medical examiner report. Adding Charlotte and Collier counties brings the Southwest Florida total to 99 methadone-related deaths in 2006, compared to 64 in 2005.

The combined counties of Pasco and Pinellas had the greatest number of methadone-related deaths in 2006 with 120.

The Lee County Sheriff's Office isn't seeing an increase in methadone use specifically, though officials say prescription drug abuse overall continues to rise.

"It's unequivocally on the rise at a rapid pace," said Capt. Dominick Ferrante, commander of the narcotics division.

He said law enforcement agents would like to see harsher penalties handed out for pharmaceutical crimes, an electronic database that monitors patient purchases, rules requiring pharmacists to check identifications before handing over prescriptions, and tighter controls at doctors' offices.

Users think that when a doctor prescribes drugs, they aren't as toxic as illegal drugs, said Kevin Lewis, executive director of Southwest Florida Addiction Services.

"There's a myth that it's safe," Lewis said.

Last year, one in 10 opiate users seeking treatment at SWFAS was a methadone user, Lewis said. The prior year, it was 1 in 16 opiate users. Opiates are pain-relieving drugs such as opium, morphine, heroin, oxycodone and hydrocodone.

The users are younger than traditional opiate abusers, he said. They are in their 20s and 30s instead of middle-aged and older.

Methadone abuse is part of a bigger trend away from street drugs such as heroin and toward prescription pain killers, Lewis said. Several years ago, 1 in 20 patients was an opiate user, and the majority were heroin addicts. Today, about half of SWFAS drug clients are opiate abusers and about 70 percent of them use prescription medications.

Methadone carries unique risks, SWFAS administrators say.

"The tolerance factor is what is lethal," said Bill Edmonz, the director of special programs.

He said users continually increase their dosage because they need more to feel the drug's effect. Eventually, they exceed their bodies' limit. Or, they use the drug in combination with other substances, such as alcohol, and the toxicity increases.

Methadone is a slow-release drug. Users may take more of it because they don't immediately feel its effect. The drug also remains in a user's system after its effects wear off, again creating a risk of overdose.

Lewis said methadone has a legitimate place in pain management. But he worries that too much of the drug is escaping from medicine cabinets to the streets.

"From a community standpoint, there is a lack of awareness," he said.

ABOUT METHADONE

- **Methadone is part of the opiate family of drugs that includes heroin and oxycodone.**
- **It comes as a pill or an injectable liquid.**
- **It is prescribed as a pain killer and also is used to treat heroin addicts by suppressing cravings for that drug.**
- **The biggest risk of methadone overdose is respiratory suppression - take too much and you could stop breathing.**
- **Serious warning signs include: shallow breathing; extremely loud or uncharacteristic snoring; signs of allergic reaction such as difficulty breathing and/or swelling of the lips, face, tongue or throat; hallucinations or confusion; pounding heartbeats, chest pains or light-headedness.**