

OPINION

Question for patients: What's in your medicine chest?

Prescription drug abuse is a serious public health threat. Urging patients to take steps to protect their medicines is an important way to control it.

Editorial. March 24/31, 2008.

A public service announcement now being aired highlights a danger lurking in many medicine cabinets. Simply stated, it's medicine.

The TV spot features a teenager -- he could be one of your patients, one of your patients' children, even one of your own kids -- sorting through his stash of pills. He points to one, left over from a hysterectomy; another was for use after a hip replacement; yet another remained after a bout of postpartum depression. The list goes on. Suddenly, the bell rings. He slides the collection into a container and off to class he goes.

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The scenario is not at all far-fetched. Prescription meds have become drugs of choice for abusers, young and old. According to the U.S. Drug Enforcement Administration, nearly one in 10 high school seniors admits to abusing pain medicines. Moreover, Office of National Drug Control

Policy data indicate that each day an estimated 2,500 young people ages 12 to 17 abuse such medications for the first time. More teens abuse prescription drugs than any illicit drug, except marijuana. They report mixing these meds together or with over-the-counter pills, cough syrups or alcohol. The result can be respiratory failure or even death. Related emergency department visits, for instance, increased 21% from 2004 to 2005. Still, 40% of teens and an almost equal number of parents think abusing prescription pain killers is safer than abusing street drugs.

But the problem reaches well beyond the teen years.

An estimated 7 million Americans by the DEA's count abused prescription drugs in 2005 -- more than the number abusing cocaine, heroin, hallucinogens, ecstasy and inhalants combined. That number was just 3.8 million in 2000. Misuse of painkillers represents the biggest slice.

Among the reasons the problem is so pervasive is that access to the drugs is so easy. Although some abusers go to lengths such as doctor shopping or pharmacy theft to gain a fix, many abusers report that they get the meds from friends or relatives, or from raiding unused pills left forgotten in their homes.

Earlier this month in observance of Patient Safety Awareness Week, the American Medical Association called on patients to be active partners in their own health care -- starting with a simple check of the items in their medicine cabinets.

The AMA recommended safely disposing of any unused prescription pills. Medications such as prescription pain relievers and sleeping pills should be locked up and kept far out of reach of children and teenagers. The organization also cautioned against sharing prescription medicines with family and friends. Other experts urge physicians to advise patients to be aware of signs around the house such as missing pills, unfamiliar pills, or empty cough and cold medicine bottles or packages.

The AMA also plans to consider a report on the subject at its Annual Meeting in June.

The situation also requires another sort of doctor-patient conversation -- the sometimes-awkward screening questions about personal histories of addiction or difficulties in controlling prescription drug use.

The doctors' task is made even more complicated by the other side of this very complex issue. Physicians constantly face the risk of not treating pain adequately or having patients afraid to ask for relief because they fear addiction. AMA policy notes that undertreating pain is a concern that must be balanced against the risk of abuse. It also supports physician education, research activities and the development of state-based prescription drug monitoring programs.

These searchable databases for tracking users of controlled substances can be particularly helpful in detecting doctor shoppers. The Indiana Scheduled Prescription Electronic Collection & Tracking program

-- INSPECT -- is one such example. Previously accessible only to law enforcement, it became available to physicians in July 2007. Meanwhile, Congress enacted in 2005 but has yet to fund the National All Schedules Prescription Electronic Reporting Act. Many experts urge investment in this program.

All these actions are important. But doctors can help patients understand what is at stake -- if used or stored carelessly, prescription medicines can pose a serious public health threat. Doctors and patients alike should join together to close the gaps that have allowed these meds to be viewed as drugs of abuse instead of drugs of relief.

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