

## The highs and lows of opiate abuse

By JOSH FARLEY, Scripps Howard News Service  
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At some point, Karen Wall stopped going to the doctor for pain and started going for the pills.

An achy lower back began to hamper her work as a professional house cleaner, so the 33-year-old Bremerton, Wash. woman scheduled a doctor's appointment.

The doctor gave her a diagnosis and 90 tablets of Percocet, an opiate-based prescription painkiller.

"I didn't expect pain medication at all. But there was lots of it," Wall recalled. "I just kept going back."

She was addicted after the first bottle.

She told doctors she needed the pills because of back pain. She told herself she needed them to help deal with the stress of her home life -- a rocky relationship, raising her children and working another job aside from cleaning houses.

"It was so much easier to live in a fog," she said, "because nothing got under my skin."

Despite a steady supply of the prescription narcotic from her primary doctor, Wall traveled throughout the area in 2005 and 2006 to keep up her five-pill a day habit.

She went to urgent care clinics on weekends with a simple plea: "I just need something to hold me over until my doctor's appointment."

Most doctors obliged. "There are some doctors that were very careful with it," she said. "But not very many of them do."

One in five Americans suffer from chronic pain problems, and a new class of enhanced prescription opiates has helped to ease that pain. Aging baby boomers have demanded pain management for all kinds of ailments -- and opiate-based drugs have met that need, resulting in a surge in prescriptions nationwide.

Between 1996 and 2006, sales of oxycodone -- which is used in OxyContin pills -- rose from 4.4 million grams to 37 million grams nationwide, according to the U.S. Drug Enforcement Administration.

But when taken without the careful guidance of a doctor, an opiate's intoxicating effects can lead to quick addiction.

"The brain doesn't know the difference between OxyContin and heroin," said Randy Viers, director of Olalla Recovery Centers, where treatment of patients with prescription opiate dependence has more than doubled since 2003. "An opiate is an opiate is an opiate."

The DEA estimates 7 million people abused prescription opiates in 2007 in the United States.

Prescription opiates, as well as illegal opiates like heroin, become morphine when they hit the brain, producing a calming, dreamy effect that blocks pain. Some prescription pills, like OxyContin, release the opiates over a period of hours to treat pain evenly and quell the addictive properties of the drug.

But because they all overstimulate the brain's so-called "reward system," excessive use can leave the brain incapable of producing pleasurable feelings without them, leading to addiction.

The proliferation of prescription opiates has filled emergency room and drug treatment facility beds with "script" addicts and created a black market for the drugs. The demand has sparked a rash of pharmacy burglaries and robberies targeting pills -- a crime unheard of just a few years ago.

Despite their chemical similarities to heroin, prescription opiates have also permeated populations that would never touch "black tar," or inject a drug into their veins.

"They're not this under-the-overpass type of addicts," said Steve Court, a chemical dependency counselor who works with people hooked on opiates at the Kitsap Recovery Center, west of Seattle. "They're walking alongside us in the grocery store."

Young people are particularly naive to the dangers of opiate addiction, because they believe a pill approved by the U.S. Food and Drug Administration will do no harm, said Jennifer Sabel, an epidemiologist with the Washington state Department of Health.

"Teens are just grabbing whatever they can from medicine cabinets," she said.

Federal and local law enforcement officials have ramped up efforts to reign in the underground supply of prescription opiates. Informant networks and sting operations similar to those used to fight meth and marijuana have been formed.

But Drug Enforcement Administration officials and others believe the key is educating the public -- primarily young people -- of the dangers of opiates, and to dispose bottles prescribed to them when the pills are no longer needed.

Regulatory efforts or crackdowns haven't been pursued, aside from a recent federal lawsuit that will force Purdue Pharma, the maker of OxyContin, to pay more than \$600 million for failing to convey its trademark drug's addictive properties.

About a year after Karen Wall got hooked on Percocet, she ran out of her supply, and withdrawal set in. When the pain, sweats and fevers set in, her husband figured out that her body was reeling from addiction.

But as she suffered, she found the thing that had been absent from her the past year: clarity. The withdrawal symptoms lasted five weeks. She sought out Bialock at Cascade Recovery Center and endured a year of treatment. She remains clean -- and won't even touch prescription opiates for surgeries, opting instead for Tylenol and ibuprofen.

"I would never go back to not feeling, and running away from everything," she said. "It's a much better place to be right now."



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