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# The deadly epidemic no one's addressing

By Steven A. Tolman | May 11, 2009

MASSACHUSETTS taxpayers are being robbed. Families are having their loved ones stolen from them and taxpayer dollars are lost in a system wrought with inefficiencies and gaps in care. This epidemic is silent because of the stigma, shame, and heartache that the disease of addiction places on families. OxyContin and heroin addiction continues to be a devastating issue, but there is a lack of outrage over this decade-long tragedy.

Since there are promising alternatives that will save both lives and hundreds of millions of state dollars, now is the time to break the silence and make reforms to Massachusetts drug policy.

There are numerous pathways to addiction. Some citizens receive prescriptions for OxyContin for pain after an injury, while adolescents and others experiment with pain medications from medicine cabinets. Synthetic or natural opioids are heavily addictive; the long-term neurobiological changes opioid dependency exacts on the brain are profound and make the disease difficult to treat with an outdated infrastructure.

Since 2003, overdoses, primarily from OxyContin and heroin, have exceeded motor vehicle deaths as the leading cause of injury-related death in Massachusetts. Between 2002 and 2007, the state lost 78 soldiers in Afghanistan and Iraq. In the same time period, 3,265 residents died of opiate-related overdoses. We are losing citizens at home at a rate 42 times greater than we are losing our soldiers in war. Yet, these gut-wrenching stories rarely make headlines, and little is being done to examine the problem and implement solutions.

Private insurers have drastically reduced payments for substance abuse treatment; taxpayers contribute more than 75 percent of the dollars spent on substance abuse services in Massachusetts. In fact, private insurance payments for substance abuse treatment decreased 1.1 percent annually from 1991 to 2001, while public payments increased by 6.8 percent each year. As shocking as these statistics are, they cannot portray the heartache, frustration, and despair in the thousands of households around the Commonwealth.

In 2007, 1,300 people received five or more acute treatment services or "detoxes" through MassHealth. I believe that long-term treatment programs and diversion from jail are essential to remaking our treatment infrastructure. Targeted investment, efficiencies in the system, and changes in policy will save hundreds of millions of dollars in direct and associated costs on state and municipal governments. For example, 18,000 individuals were treated in emergency rooms for opioid-related overdoses in 2005. These hospital stays alone cost the state nearly \$200 million.

Recently, the OxyContin and Heroin Commission, established during the 2007-2008 legislative session, held the second in a series of public hearings throughout the state. The commission's purpose is to investigate the levels of addiction to OxyContin and heroin, study the laws regarding treatment, gauge the epidemic's cost on state services, and offer solutions. We've heard from parents who have emptied bank accounts or remortgaged homes paying for private treatment because insurance won't cover long-term care. Families have described reviving their dying children with Narcan, or having them arrested for felony drug charges to get them off the streets. Otherwise good people appear in our courtrooms, end up in jail or the ER, or spend a lifetime on harm-reduction medication because there is no clear path to recovery.

This problem will not be fully addressed overnight; policy recommendations must be comprehensive solutions to the overall campaign against addiction. The commission's objective is to find the proper treatment outcomes, efficiently spend taxpayer money, and return addicted loved ones to their families. Substance abuse is a national problem, demand for illicit drugs in the United States continues to rise, and the connection with foreign policy makes this problem all the more urgent. National and state leaders must work together to implement effective treatment measures. With all of the efforts to fix economic systems, repair roads and bridges, and revamp the healthcare system, addiction treatment cannot be left out of the equation.

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