

The Opioid Epidemic Examined

By Jim Rachels



Going back as far as I can remember, the only opiate you heard about was heroin. That's all there was, or so I thought. Then in the 90s, a new wave of opiates took over - prescription medication. Then came the news about opiates and the public began taking notice.

Around the year 2010, a fairly new drug began to emerge, Fentanyl. Fentanyl is an opiate similar to morphine, although much, much stronger. The more we saw this on the streets, the more the death toll rose from overdoses. In 2017 more than 47,000 people died from opioid overdoses.

The opioid epidemic is something that has been building for years and years. This drug knows no boundaries and doesn't care about your race, sex or socioeconomic status.

From the National Institute on Drug Abuse:

"In 2019 there were about 50,000 reported deaths due to opioid overdoses." With numbers like this, I can't help but wonder why this problem has not drawn more attention than it has. 50,000 deaths is a staggering number.

When COVID hit us in 2020 the world quickly went through a change and we had to adapt to a new way of life. Most people were not aware that there was already a public health emergency in this country, long before COVID ever hit. It was the opioid epidemic.

Here is the definition of an epidemic from the Oxford Languages Dictionary:

"a widespread occurrence of an infectious disease in a community at a particular time."

So simply put, this applies to any type of disease that affects the general population. Many people believe addiction to be a disease, so by that theory, the opioid crisis is a true epidemic, affecting the population. Lives are being lost at an alarming rate.

Here are some statistics according to drugabusestatistics.org:

"136 Americans die every day from opioid use and addiction. The frightening thing here is that these numbers are from America only, not worldwide."

So how did the opioid crisis begin? What are its roots? Through years of research on the part of many, it was revealed that a major factor in the opioid problem we are facing today was an aggressive approach to sales and marketing by pharmaceutical companies in the 1990s. This was primarily fueled by the Sacklers, a wealthy family that owned Purdue Pharma which was the maker of Oxycontin. Oxycontin is stronger than morphine and is highly addictive even though it was marketed as being less stronger than morphine. Besides the aggressive marketing and sales tactics, there was even more deceit in their approach. They went around telling the medical community that only 1% of patients were shown to have addiction issues with their medication. This, in turn, led to doctors prescribing these medications at a much higher rate than before. Another tactic the pharmaceutical companies were using was to try to sell this medication for long-term pain instead of just short-term. This meant patients can take them for much longer periods of time. All that accomplished was to get the patient to build up a tolerance and to take more and more to treat their pain. This eventually led people to become extremely addicted to the medication they were relying on to help them.

This was a flat-out lie, backed by absolutely no science whatsoever. What started this misinformation was an article in the New England Journal of Medicine that stated 1% or less actually got addicted to these drugs. This article was later retracted by the author but by that time the damage had been done. It was then used in over 600 other articles that spread this falsehood throughout the community.

The Sackler/Oxycontin story starts with the introduction in the 80s to MS Contin, a morphine based drug. This drug was meant for and marketed to the hospice sector which was on the rise at that time. Because the patients were terminally ill, they didn't have to worry about it's addictive properties.

Then came the release of OxyContin which was a oxycodone based pill. They claimed that this was not as strong as morphine. This proved to be untrue. In fact it was up to 50% stronger than morphine.

Another thing that fueled the flames of this pandemic was the special label that the FDA allowed Purdue Pharma to use. It was said that due to the time-release properties of their pills these were much less likely to be abused and to cause addiction issues. The employee that helped approve this label soon after quit the FDA and went to work for Purdue Pharma.

At first these pills, like the MS Contin, were meant to be used by terminally ill patients. Then slowly they starting selling it for long term pain management. Between 1996-2001 OxyContin prescriptions went from 300,000 to over 6,000,000. Purdue would target poorer communities, where hard labor was the main occupation, because the workplace injury was at higher rates and doctors in these towns would prescribe more painkillers.

The company was looking for the doctors that prescribed the most and would work these doctors more than the others. What they were looking for was the "pill mills." These were the doctors that were known to prescribe the most OxyContin versus the other doctors. Some of these doctors didn't even take the time to examine patients. Once they were prescribed OxyContin after their first visit in the subsequent visits they didn't need to see the doctor for their refill on the prescription.

The Sacklers showed absolutely no concern or regard for the people that were taking their drugs. 4 out of 5 IV drug users state that they started with pills. Not only did the Sacklers help fuel the opioid epidemic they also contributed to making it worse. When they first marketed their pills, they were supposed to be time released and last for 12 hours. That was untrue. So the sales reps were instructed to tell the doctors to up the dosage on each patient. In essence, all they did was get their patients more addicted to these powerful painkillers.

When they were finally held responsible and changed the formulation of the pill to make it harder to snort and inject, all that did was increase the rate of people turning to heroin. Addicts soon discovered that the heroin high was just as good if not better especially when injected. And it was significantly cheaper.

At this point nothing Purdue could do would help this epidemic. We need a new approach on how we are going to fight this.

There have been some major changes to the way people view addiction in some parts of the world. Take Portugal for example. Back in 2001, Portugal became the first country to decriminalize all drugs. This includes heroin, cocaine, mushrooms, acid and crystal meth to name a few. As long as what you are carrying is for personal use you will be ok. It is still illegal to sell drugs on the streets.

When the opioid crisis got extremely bad, there were finally some movements that began. The "harm reduction" movement is a huge one, focusing on making changes made to current drug policies.

Safe injection sites and more harm reduction strategies have been used recently in many parts of the world.

So what is being done to help with the opioid crisis?

This is from the National Institute on Drug Abuse:

In response to the opioid crisis, the U.S. Department of Health and Human Services (HHS) is focusing its efforts on five major priorities:

- 1. improving access to treatment and recovery services*
- 2. promoting use of overdose-reversing drugs*
- 3. strengthening our understanding of the epidemic through better public health surveillance*
- 4. providing support for cutting-edge research on pain and addiction*
- 5. advancing better practices for pain management*

The next thing that came along helping to raise the death rate was Fentanyl. Fentanyl is a synthetic opiate made in a lab. It is 80-100 times stronger than morphine. When added to heroin, it becomes even more addicting. At times, straight Fentanyl has been sold as a strong heroin to unsuspecting buyers. Because of this many users are playing Russian roulette and it's just a matter of time until they take that lethal dose.

Fentanyl is a drug that was originally being imported into the United States from China. Lately Mexico's cartels are learning to make the Fentanyl themselves. They have been able to get the necessary ingredients to make this themselves. They have their own chemists that will make this for the cartels. This drug has even been called a "Mexico's ghost drug" because no one knows how much is made and then imported into the U.S. From China these ingredients come in on large cargo ships who then drop it off to smaller fishing boats who then bring it in to Mexico and then transport them to their final destination. The Mexican cartels are slowly learning to make these needed ingredients themselves in an effort to streamline their process. Once they do this it will enable them to produce more.

So the next question to be asked is "How do we treat this issue?" This is not a moral issue and we should not be judging these people. We need to see them for what they are, sick people who need our help and most of all our compassion. We need to approach this just as we would with someone who has any other disease. Nobody shames a person with diabetes or cancer. So why is this any different?

I think we need to offer as much support and information available to these people. Education is a valuable tool in fighting this epidemic. We also need resources available to these people when they want to get better. Too many of these people in need simply can't afford to pay for rehab. Between detox and an inpatient program this can range from \$5,000 to \$50,000. I personally was unable to afford it but was unemployed at the time and had a DUI on my record so I qualified for the state to pay for my stay. I don't know what I would've done without that financial assistance. I will be forever grateful for the assistance I was given. I know many are not given that chance, and because of that many people die.

I think with the proper resources and more availability of these resources will help dramatically with our battle against addiction. Again it's not only about having these resources but they must be made more readily available. Without that we have nothing to work upon. So many people are dying each and every day. I hope we find new and innovative ways to help combat this epidemic.

Something that has been made more readily available to help fight this problem is Naloxone, also known as Narcan. This is an incredible tool in the battle against opioid overdoses. If used properly it can reverse overdoses. It has already saved countless lives. This is part of harm reduction techniques. Many people also advocate for safe injection sites.

Many people see this as enabling addicts to use. On the other hand you have to realize that these addicts are going to use no matter what. Why not give these people a place to use safely and be treated as what they are, a sick person. The one statistic you can't argue with is the fact that the death rate at these safe injection site are zero.

I think if we embrace all the things available to help fight this epidemic we can reduce the death rate. I don't think this is going away anytime soon. So all we can do is try to fight this the best we can with the resources we have available to us.