Prescription for Disaster

How Teens Abuse Medicine
To locate your local Poison Control Center or for assistance on recommended treatment for the ingestion of household products and medicines, go to the American Association of Poison Control Centers, http://www.aapcc.org/ or call the Poison Help Line at 1-800-222-1222, 24 hours a day, 7 days a week.
Prescription for Disaster

How Teens Abuse Medicine

A DEA Resource for Parents

This publication is designed to be a guide to help the reader understand and identify the current medications that teens are abusing. It is not all-inclusive; every dosage unit or generic form of the medications cannot be listed due to space constraints and the frequent introduction of new drugs.

For more information, visit the following DEA websites:
For general information: www.dea.gov
For parents, caregivers, and educators: www.getsmartaboutdrugs.com
For teens: www.justthinktwice.com
A “prescription drug” is a drug that is available only with authorization from a healthcare practitioner to a pharmacist.

The prescription drugs that are most abused fall under three categories:

→ **Opioids**
  Medications that relieve pain such as Vicodin®, OxyContin®, or codeine

→ **Depressants**
  Substances that can slow brain activity such as benzodiazepines used to relieve anxiety or help someone sleep, like Valium® or Xanax®

→ **Stimulants**
  Increase attention and alertness and are used for treating attention deficit hyperactivity disorder (ADHD) include drugs such as Adderall® or Ritalin®

Abusing **opioids** can cause severe respiratory depression or death and can be addictive.

Abusing **depressants** can cause sleepiness, impaired mental functioning, blurred vision, nausea and can be addictive.

Abusing **stimulants** can cause irregular heartbeat, paranoia, high body temperatures and can be addictive.
Over-the-counter (OTC) medicines are drugs you can buy without a prescription. They are safe and effective when you follow the directions on the label and as directed by your health care professional.

In the United States, the Food and Drug Administration (FDA) decides whether a medicine is safe enough to sell over-the-counter.

Taking OTC medicines still has risks. Some interact with other medicines, supplements, foods or drinks. Others cause problems for people with certain medical conditions.

*FDA, Understanding Over-the-Counter Medicines*

http://www.fda.gov/Drugs/ResourcesForYou/Consumers/BuyingUsingMedicineSafely/UnderstandingOver-the-CounterMedicines/default.htm

*U.S. National Library of Medicine, Over-the-Counter Medicines*

Non-Medical Use of Prescription Drugs

Most prescription drugs are safe and effective when used correctly for a medical condition and under a doctor or dentist’s supervision. But they can have serious side effects if not used correctly. Using a prescription incorrectly for non-medical reasons can lead to abuse, addiction, and even death.

What is Non-Medical Use of Prescription Drugs?

- taking more than the prescribed dose of a prescription drug;
- taking a drug prescribed for another person or taking a drug obtained illegally or without a legitimate prescription;
- deliberate poisoning with a pharmaceutical by another person; and
- any use of a prescription drug, an over-the-counter pharmaceutical, or a dietary supplement that Emergency Department medical staff document in the patient’s medical record as misuse or abuse.

Abusing prescription opioid pain relievers, like OxyContin® and Vicodin®, may lead to heroin use.

Heroin is cheaper and easier to obtain and produces a similar high.

Heroin use has become more prevalent nationwide, and as a result there has been a 286% increase in heroin-related deaths since 2002.

### Heroin Use Has INCREASED Among Most Demographic Groups

<table>
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<tr>
<th>Category</th>
<th>2002-2004*</th>
<th>2011-2013*</th>
<th>% Change</th>
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<tr>
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<td>Medicaid</td>
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<tr>
<td>Private or other</td>
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<td>1.3</td>
<td>63%</td>
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**Heroin Addiction and Overdose Deaths are Climbing**

*Source: Centers for Disease Control and Prevention, Vital Signs, July 2015*
How Big is the Problem?

Although most people take prescription medications responsibly, **6.5 million** persons or 2.5% of the population (12 years and older) were current users of prescription drugs for non-medical reasons. **1.9 million** persons aged 12 or older were classified as dependent on or abused pain relievers.

Source: Drug Facts Prescription Drugs
http://www.teens.drugabuse.gov/drug-facts/prescription-drugs

According to a national survey, **17.8%** of high school students took a prescription drug without a doctor’s prescription (such as OxyContin®, Percocet®, Vicodin®, codeine, Adderall®, Ritalin® or Xanax®), once or more in the past year. When looking at high school students’ use by state, Arkansas had the highest use with 21.5% of students reporting they took a prescription drug without a doctor’s prescription, while Utah had the lowest use with 8.7% of students reporting that they took a prescription drug without a doctor’s prescription.

Source: Youth Risk Behavior Survey, CDC, 2013

Prescription drug abuse is when someone takes a medication prescribed for someone else, takes their own prescription in a way not intended by a doctor, or takes a medication to get high.

Source: Prescription Drugs & Cold Medicines
http://www.drugabuse.gov/drugs-abuse/prescription-drugs-cold-medicines
Labels on prescription and OTC drugs contain information about ingredients, uses, drug interactions, warnings, and directions that are important to read and understand. It is especially important to teach teens how to read labels and use prescription and OTC drugs safely.

What Are The Types of Drug Interactions?

Drug-drug interactions occur when two or more drugs react with each other. This may cause you to experience an unexpected side effect. For example, mixing a drug you take to help you sleep (a sedative) and a drug you take for allergies (an antihistamine) can slow your reactions and make driving a car or operating machinery dangerous.

Drug-condition interactions may occur when an existing medical condition makes certain drugs potentially harmful. For example, if you have high blood pressure, you could experience an unwanted reaction if you take a nasal decongestant.

It is also important to recognize that everyone’s metabolism and brain chemistry are different, and the same drugs can have very different effects on individuals. Experimenting with medicine to get high is extremely dangerous, and mixing drugs to get high can be deadly.
Prescription drugs are the most commonly abused substances by teens after marijuana and alcohol. When teens abuse prescription drugs and take them in different amounts or for other reasons than as they are prescribed, they affect the brain and body in ways very similar to illicit drugs.

When prescription drugs are abused, they can be addictive and have harmful health effects such as overdose (especially when taken along with other drugs or alcohol). An overdose is when a drug is swallowed, inhaled, injected, or absorbed through the skin in excessive amounts and injures the body. Overdoses are either intentional or unintentional. If the person taking or giving a substance did not mean to hurt themselves or others, then it is unintentional.


Some teens use Adderall® or Ritalin® to try and boost their test performance to improve their grades. Studies show that these stimulants do not help learning when used by persons who do not have ADHD.


In a national survey, among 12th graders, 7.7 percent used Adderall non-medically in the past year.

Source: 2015 Monitoring the Future Study.

Remember: Sharing prescription drugs with family members or friends is illegal.
Where do teens get their prescription drugs?

Many teens obtain prescription drugs from their family or friends.

Teens find prescription drugs and OTC drugs in their home medicine cabinet or on the kitchen shelf.

For persons aged 12 or older who used pain relievers, non-medically in the past year:

53.0 percent got the drug they used most recently from a friend or relative for free.

21.2 percent received them through a prescription from one doctor.

10.6 percent bought the drug from a friend or relative.

4.3 percent got pain relievers from a drug dealer or other stranger, 0.1 percent bought them on the Internet.

Source: 2013 National Survey on Drug Use and Health
How Teens Abuse Medicine

Possible warning signs of teen drug use

Teens are known to have mood swings. However, some behavior may indicate more serious issues, such as abuse of drugs and alcohol. Here are some of the warning signs of drug use.

→ Problems at school

- Frequently forgetting homework.
- Missing classes or skipping school.
- Disinterest in school or school activities.
- A drop in grades.

→ Physical signs

- Lack of energy and motivation.
- Red eyes and cheeks or difficulty focusing – alcohol use.
- Red eyes and constricted pupils – marijuana use.
- A strange burn on your child’s mouth or fingers – smoking something (possibly heroin or methamphetamine) through a metal or glass pipe.
- Chronic nosebleeds – cocaine abuse.

→ Neglected appearance

- Lack of interest in clothing, grooming, or appearance is not normal.
- Teenagers are usually very concerned about how they look.
→ Changes in behavior

Teenagers enjoy privacy, but be aware of excessive attempts to be alone.
Exaggerated efforts not to allow family members into their rooms.
Not letting you know where they go with friends, or whom they go with.
Breaking curfew without a good excuse.
Changes in relationships with family.

→ Changes in friends

No longer friends with childhood friends.
Seems interested in hanging out with older kids.
Acts secretive about spending time with new friends.

→ Money issues

Sudden requests for money without a good reason.
Money stolen from your wallet or from safe places at home.
Items gone from your home. (May be sold to buy drugs.)

→ Drug paraphernalia

Finding items in your child’s room, backpack, or car related to drug use.

Source: www.getsmartaboutdrugs.com
Why Teens Abuse Medicine

Teens abuse prescription drugs for several reasons including:

→ To get high. Many prescription drugs can make you feel good.

→ To feel better. Teens who suffer from stress-related disorders and depression may try prescription drugs.

→ To help concentrate doing schoolwork to get better grades.

→ To perform better in sports.

→ Curiosity and to try a daring behavior.

In some cases, boys and girls will abuse some type of prescription drugs for a specific purpose. For example, boys are more likely to abuse prescription stimulants to get high, while girls tend to abuse them to stay alert or lose weight.

Source: Drug Facts Prescription Drugs
http://www.teens.drugabuse.gov/drug-facts/prescription-drugs
Many teens obtain illegal drugs, particularly prescription drugs, from their families, friends, or relatives. Since prescription drugs are widely available in the home, teens often do not have to go far to find ways to get high. Other teens turn to the Internet and social media for prescription drugs, and the World Wide Web plays a big role in providing information and advice to teens.

HERE ARE A FEW THINGS TO CONSIDER
Your teen probably knows a lot more about the Internet than you do. It’s never too late for parents to jump in and get acquainted with various websites, communication methods, networking systems, and the lingo teens use to fly under parents’ radars.

Some pharmacies operating on the Internet are legal, and some are not. Some of the legal Internet pharmacies have voluntarily sought certification as “Verified Internet Pharmacy Practice Sites” (VIPPS®) from the National Association of Boards of Pharmacy. “Rogue” pharmacies pretend to be authentic by operating websites that advertise powerful drugs without a prescription or with the “approval” of a “doctor” working for the drug trafficking network. Teens have access to these websites and are exposed to offers of prescription drugs through email spam or pop-ups. Parents should be aware of which sites their teens are visiting and should examine credit card and bank statements that may indicate drug purchases.
Social media sites play a role in providing information and advice to teens on how to use prescription drugs to get high. Teens are exposed to offers of prescription drugs through social media sites, email spam, or pop-ups.

It is never too late for parents to get acquainted with various websites, social media sites, and the slang terms teens use to communicate while texting and using social media.

Parents should be aware of which sites their teens are visiting and should examine credit card and bank statements that may indicate medication purchases. They should also check the browser to see which sites their teen is visiting on their computers and cellphones.
Teens sometimes brag about their drugging and drinking on social networking sites such as Facebook, Twitter, and YouTube. Posting pictures of themselves in compromising scenes may hurt their reputation and opportunities for employment and education. Their behavior is out there in the open for future employers, college admissions offices, and others to see.

The Internet is a tremendous resource for teens to learn about the dangers of drug abuse. However, it is also full of information about how to use prescription drugs to get high—how much to use, what combinations work best, and what a user can expect to experience.

24% of teens go online “almost constantly,” facilitated by the widespread availability of smartphones. Aided by the convenience and constant access provided by mobile devices, especially smartphones, 92% of teens report going online daily – including 24% who say they go online “almost constantly,” according to a new study from Pew Research Center. More than half (56%) of teens – defined in this report as those ages 13 to 17 – go online several times a day, and 12% report once-a-day use. Just 6% of teens report going online weekly, and 2% go online less often.

Source: Teens, Social Media & Technology Overview 2015
Compared to teens that have never seen pictures of kids getting drunk, passed out, or using drugs on social networking sites, teens that have seen these images are much likelier to have friends and classmates who abuse illegal and prescription drugs.

Compared to teens that do not watch suggestive teen programming, teens that watch one or more shows are more than one-and-a-half times likelier to try to get prescription drugs without a prescription within a day or less.

*Source: CASA, National Survey XVI*
71% of teens use more than one social network site

Teens are diversifying their social network site use. A majority of teens – 71% – report using more than one social network site out of the seven platform options they were asked about. Among the 22% of teens who only use one site, 66% use Facebook, 13% use Google+, 13% use Instagram and 3% use Snapchat.

Source: Teens, Social Media & Technology Overview 2015
There are thousands of websites dedicated to the proposition that drug use is a rite of passage. So-called experts are more than happy to walk your kids through a drug experience.

DON’T LET THEM.
“Street drugs” is a term that refers to drugs that are commonly known as illegal drugs – cocaine, heroin, methamphetamine, marijuana, and others. Many teens wrongly believe that prescription drugs are safer than “street drugs” for a variety of reasons:

- These are medicines.
- They can be obtained from doctors, dentists, pharmacies, friends or family members.
- It is not necessary to buy them from traditional “drug dealers.”
- Information on the effects of these drugs is widely available in package inserts, advertisements, and on social media sites.

Parents and teens need to understand that when over-the-counter and prescribed medications are used to get high, they are every bit as dangerous as “street drugs.” And when prescribed drugs are used by or distributed to individuals without prescriptions, they are every bit as illegal.
Drug-Impaired Driving

What is drug-impaired driving?

Driving under the influence of over-the-counter medications, prescription drugs, or illegal drugs.

Why is drug-impaired driving dangerous?

Over-the-counter (OTC) medications and prescription drugs affect the brain and can alter perception, mental processes, attention, balance, coordination, reaction time and other abilities required for safe driving. Even small amounts of some drugs can have a serious effect on driving ability.

*Source: National Institute on Drug Abuse (NIDA) 2013.*

A recent national survey showed 20% of nighttime weekend drivers tested positive for illegal, prescription, or OTC drugs that can impair driving.


What substances are used the most when driving?

After alcohol, marijuana is the most commonly used drug.

What happens when you use drugs and drive?

Marijuana can decrease a person’s ability to drive a car. It slows reaction time, impairs a driver’s concentration and attention, and reduces hand-eye coordination. It is dangerous to drive after mixing alcohol and marijuana. Driving after using prescription drugs or over-the-counter medicine, such as cough suppressants, antihistamines, sleeping aids, and anti-anxiety medications may impair driving ability.

No one should drive after using marijuana or other drugs, and should not get in a car with a driver who has used marijuana or other drugs!

Remember: any medications act on parts of the brain that can impair driving ability. Many prescription drugs have warning labels against the operation of machinery and driving motor vehicles for a certain period of time after use.

You are more likely to be injured or in an accident while driving under the influence of drugs.
Some pharmacies operating on the Internet are illegal.

No one should use a website to purchase a prescription drug unless –

1. the person has obtained a valid prescription from a medical practitioner who has conducted an in-person medical evaluation of the person and

2. the website is operating in accordance with the Ryan Haight Act.

Report Suspicious Internet Pharmacies

If you or your teen is aware of someone distributing prescription drugs or selling them on a suspicious Internet pharmacy site, you can report it to the DEA 24 hours a day, 365 days a year, by using the RxAbuse online reporting tool located at www.deadiversion.usdoj.gov or by calling the DEA hotline toll free at 1-877-RxAbuse (1-877-792-2873).
Francine Haight, Ryan’s mother, shares her son’s story with the world: “Ryan Thomas Haight overdosed and died on February 12, 2001, on narcotics (Vicodin®) that he had easily purchased on the Internet. A medical doctor on the Internet that he never saw prescribed them, an Internet pharmacy mailed them to his home. He was only 17 when he purchased them; he was only 18 when he died.”

Through the efforts of Francine Haight and members of Congress, with support of DEA, the Ryan Haight Online Pharmacy Consumer Protection Act of 2008 was enacted. The Act aims to remove and prosecute unscrupulous or rogue Internet pharmacies that sell controlled prescription medicines to persons without a prescription from a registered physician. These pharmacies lack quality assurance and accountability. This law has enabled the DEA to prosecute cybercriminals supplying controlled substances and to shut down the illegal online pharmacies.
What is Drug Addiction?

Addiction is described as a chronic, relapsing brain disease that is characterized by compulsive drug seeking and use, despite harmful consequences. It is considered a brain disease because drugs change the brain; they change its structure and how it works. The brain changes can be long lasting and can lead to many harmful and self-destructive behaviors.

Source: The Science of Drug Abuse and Addiction: The Basics

The misuse of prescription drugs may lead to abuse and then to addiction.

Some pharmaceuticals have the same potential for abuse, dependence, and addiction as heroin. They share many of the same properties and effects as “illegal drugs.” It is important for parents to know and understand that using medications outside the scope of sound medical practice is drug abuse.

Dependence on a drug means that the body adjusts to allow for them and can’t function normally without them.
**Categories of Drugs:**

Illegal drugs and legitimate medications are categorized according to their medical use, potential for abuse, and their potential for creating physical or psychological dependence.

There are five classes of drugs of abuse:

- **Narcotics**
- **Stimulants**
- **Depressants**
- **Hallucinogens**
- **Anabolic Steroids**

Within each class are substances that occur naturally and substances created in laboratories (synthetics). When they are used appropriately in the practice of medicine, these substances can have very beneficial properties. When used for non-medical purposes, including the desire to get high, these drugs can cause great harm and even death.
narcotics → substances that dull the senses and relieve pain

**Narcotic Medicines**

Used to treat mild to severe pain (anything from dental surgery to terminal cancer). Also used to suppress coughs, treat diarrhea, induce anesthesia, and treat heroin addiction.

**Forms**

Liquid, tablet, capsule, skinpatch, powder, syrup, lollipop, diskette, suppository, and injectable forms.

**Adverse Effects**

Euphoria, drowsiness, and slowed breathing. Skin, lung, and brain abscesses; endocarditis (inflammation of the lining of the heart); hepatitis; and AIDS are commonly found among narcotics abusers who inject drugs or engage in other risky behaviors.

**OD**

Slow and shallow breathing, clammy skin, confusion, convulsions, coma, and possible death.
Common Drugs of Abuse

Narcotic medications available only with a prescription:
(Note: Lists are not all-inclusive.)

{ codeine cough syrup }
ROBITUSSIN A-C SYRUP® | MYTUSSIN AC COUGH SYRUP®

Cough syrups sometimes include other ingredients such as antihistamines (promethazine). Some controlled substances, including cough syrups, can be dispensed by a pharmacist without a prescription (21 C.F.R. 1306.26).

slang names: Lean, Purple Drank, Sippin Syrup

{ fentanyl }
DURAGESIC PATCH® | ACTIQ LOZENGE®

Fentanyl is a very powerful painkiller, 80 times more powerful than morphine. It is used in combination with other drugs to treat extreme pain. The biological effects of fentanyl are indistinguishable from those of heroin, with the exception that some forms of fentanyl may be hundreds of times more potent. Encounters with fentanyl that are not medically supervised are frequently fatal. This narcotic is most commonly used by wearing or chewing a patch or sucking on a lozenge, but like heroin, it may also be smoked or snorted. A new effervescent tablet, Fentora®, is now available to place between the cheek and gum.

slang names: Tango and Cash, Perc-a-Pop (Actiq®)

{ hydrocodone }
VICODIN® | LORTAB® | LORCET® | HYDROCODONE WITH ACETAMINOPHEN

Hydrocodone products are used for pain relief and cough suppression and produce effects comparable to oral morphine. Hydrocodone products are the most frequently prescribed opioids in the United States, and they are also the most abused narcotic in the United States.
Methadone has been used for years to treat heroin addicts. It is also used as a powerful painkiller. From 1999 to 2004, the Centers for Disease Control and Prevention (CDC) reported that the rate of methadone deaths in younger individuals (15-24) increased 11-fold. For people who are not regular users of methadone, the drug can be dangerous and must be used with a doctor’s supervision.

Methadone carries more risks than other painkillers because it tends to build up in the body and can disrupt a person’s breathing or heart rhythm. According to the CDC report, 4 of every 10 overdose deaths from a single prescription painkiller involved methadone, twice as many as any other prescription painkiller. As methadone prescriptions for pain have increased, so have methadone-related nonmedical use and fatal overdoses. CDC researchers found that six times as many people died of methadone overdoses in 2009 compared to methadone-related deaths in 1999.

Source: CDC Press Release, Methadone linked to 30 percent of prescription painkiller overdose deaths
http://www.cdc.gov/media/releases/2012/p0703_methadone.html

Oxycodone products are very powerful painkillers. Oxycodone is widely used in clinical medicine. It is marketed either alone as controlled release (OxyContin®) and immediate release formulations (OxyIR®, OxyFast®), or in combination with other non-narcotic analgesics such as aspirin (Percodan®) or acetaminophen (Percocet®). Oxycodone’s behavioral effects can last up to five hours. The drug is most often administered orally. The controlled-release product, OxyContin®, has a longer duration of action (8-12 hours).

slang names: Oxycotton, Percs, OC, OX, Oxy, Hillbilly Heroin, Kicker.
Other abused narcotics

- **meperidine** \(\rightarrow\) *DEMEROL*®
- **hydromorphone** \(\rightarrow\) *DILAUDID*®
- **oxycodone with acetaminophen** \(\rightarrow\) *ENDOCET*®
- **codeine** \(\rightarrow\) *FIORINAL*®
- **morphine** \(\rightarrow\) *ORAMORPH SR*®
- **oxycodone with acetaminophen** \(\rightarrow\) *ROXICET*®
- **pentazocine** \(\rightarrow\) *TALWIN*®
- **cough syrup with hydrocodone** \(\rightarrow\) *TUSSIONEX*®

How are narcotics abused?

Oral (swallowing pills or liquid). In the case of fentanyl, Actiq® is sucked; fentanyl patches are worn on the skin, and abusers sometimes scrape off the fentanyl from the patch or chew the patch to get high. Hydrocodone and oxycodone pills are most frequently taken orally but can be crushed and snorted. Crushing the pills negates the time-release features of some medications, so the user experiences the full power and effect all at once. Cough syrups can be drunk or mixed in sodas or sports drinks.

Where would a teen obtain narcotics?

Friends, relatives, medicine cabinets, pharmacies, nursing homes, hospitals, hospices, doctors, social media and purchased on the Internet. They can also be purchased on the street.
narcotics

- **LORTAB®**
  - 5mg 7.5mg 10mg
  - 10mg 20g 40mg 80mg

- **OXYCONTIN®**
  - *5-500mg* *10-660mg* *7.5-750mg*
  - *hydrocodone bitartrate-acetaminophen*

- **VICODIN®**
  - *5-500mg* *10-660mg* *7.5-750mg*

- **ACTIQ®**
  - 600mcg 400mcg 600mcg
With repeated use of narcotics, tolerance and dependence develop.

**Tolerance** occurs when the person no longer responds to the drug in the way that person initially responded. Stated another way, it takes a higher dose of the drug to achieve the same level of response achieved initially.

*Source:* NIDA, The Neurobiology of Drug Addiction: Definition of Tolerance

**Physical Dependence** is not equivalent to addiction, and may occur with the regular (daily or almost daily) use of any substance, legal or illegal, even when taken as prescribed. It occurs because the body naturally adapts to regular exposure to a substance. When that substance is taken away, symptoms can emerge while the body re-adjusts to the loss of the substance. Physical dependence can lead to craving the drug to relieve the withdrawal symptoms.

Many stimulants have legitimate medical use and are scheduled by the DEA. Caffeine and nicotine are stimulants that are not controlled. Stimulant medicines are used to treat obesity, attention deficit and hyperactivity disorders (ADHD/ADD), and narcolepsy. Pseudoephedrine, found in allergy and cold medications to relieve sinus congestion and pressure, is also a stimulant chemical. Cocaine and methamphetamine have a currently accepted medical use in treatment. Crack cocaine and khat have no legitimate medical uses.

Powder, “rocks,” “crystal,” pills, and smokable and injectable forms.

Alertness, excitation, euphoria, increase in blood pressure and pulse rates, insomnia, and loss of appetite. Abuse is often associated with a pattern of binge use—sporadically consuming large doses of stimulants over a short period of time. Heavy users may inject themselves every few hours, continuing until they have depleted their drug supply or reached a point of delirium, psychosis, and physical exhaustion. During this period of heavy use, all other interests become secondary to recreating the initial euphoric rush. Because accidental death is partially due to the effects of stimulants on the body’s cardiovascular and temperature-regulating systems, physical exertion increases the hazards of stimulant use.

Agitation, increased body temperature, hallucinations, convulsions, and possible death.
Stimulant medications available only with a prescription:
(Note: Methamphetamine and cocaine have limited legitimate medical uses. Lists are not all-inclusive.)

{ **amphetamines** }
ADDERALL® | DEXEDRINE® | DESOXYN® (methamphetamine)

Amphetamines are used to treat ADHD/ADD.
slang names: Ice, Crank, Speed, Bennies, Black Beauties, Uppers

{ **methylphenidate and dexamethylphenidate** }
CONCERTA® | RITALIN® | FOCALIN® | FOCALIN XR®

These drugs are used to treat ADHD/ADD.
slang names: Pellets, R-Ball, Skippy, Vitamin R, Illys

→ Other abused stimulants

{ **phentermine** } ADIPEX® | IONAMIN®
{ **benzphetamine** } DIDREX®
{ **phendimetrazine** } PRELU-2®

These drugs are used in weight control.
How are stimulants abused?

Oral (swallowing pill forms of stimulants), smoked (crack, methamphetamine), crushed and snorted, injected.

Where would a teen obtain stimulants?

Friends, relatives, doctors, pharmacies, schools, Internet, social media and street drug dealers.
Common Drugs of Abuse

RITALIN®
- 5mg
- 10mg
- 20mg
- 10mg

37.5mg 100mg 200mg

ADIPEX®
- 5mg
- 10mg

PROVIGIL®
- 100mg
- 200mg

DEXEDRINE®
- 25mg
- 10mg

FOCALIN®
- 2.5mg
- 10mg

5mg 20mg

FOCALIN XR®
- 5mg
- 20mg
Depressants

Substances that induce sleep, relieve stress, and reduce anxiety ("downers")

Alcohol, Valium®, Xanax®, Tranquilizers, Sleeping Pills, Rohypnol®, GHB

Depressant Medicines

Used to treat anxiety, insomnia, seizure disorders, and narcolepsy. Also used to relax muscles and to sedate.

Forms

Mainly pills and liquids. GHB is often found in liquid form.

Adverse Effects

Slurred speech, disorientation, drunken behavior without the odor of alcohol, impaired memory, vivid and disturbing dreams, and amnesia.

OD

Shallow respiration, clammy skin, dilated pupils, weak and rapid pulse, coma, and possible death.
Depressant medications available only with a prescription:
(Note: Lists are not all-inclusive)

{ **benzodiazepines** }

VALIUM® | XANAX® | HALCION® | ATIVAN® | KلونOPIN®

Benzodiazepines are used as sedatives, hypnotics, anti-convulsants, muscle relaxants, and to treat anxiety. Many times they are abused in combination with other drugs or to counteract the effects of other drugs.

**slang names:** Downers, Benzos

{ **sleeping pills** }

AMBIEN® | SONATA®

These depressants are used to treat insomnia.

→ **Other abused depressants**

{ **chlordiazepoxide** } SOMNOTE®

{ **barbiturates**, such as amo-, seco- and pentobarbital } 

{ **GHB** } XYREM®

{ **carisoprodol** } SOMA®

{ **ketamine** } KETALAR®, KETACET®

Please note that even though ketamine is a depressant, it is abused by kids for its psychedelic effects.
How are depressants abused?
Oral (swallowing pills).

Where would a teen obtain depressants?
Friends, relatives, doctors, hospitals, Internet, street drug dealers.

Jason Surks was 19 and in his second year of college, studying to be a pharmacist, when he died of an overdose of depressant pills. After his death, his parents discovered that he had been ordering controlled substances from an Internet pharmacy in Mexico. His mother, Linda, writes: “I thought to myself that this couldn’t be possible. I work in prevention, and Jason knew the dangers—we talked about it often. I think back to the last several months of my son’s life, trying to identify any signs I might have missed.

“I remember that during his first year in college, I discovered an unlabeled pill bottle in his room. I took the pills to my computer and identified them as a generic form of Ritalin. When I confronted Jason, he told me he got them from a friend who’d been prescribed the medication. He wanted to see if they would help him with his problem focusing in school. I took that opportunity to educate him on the dangers of abusing prescription drugs and told him that if he really thought he had ADD (Attention Deficit Disorder), we should pursue this with a clinician. He promised he would stop using the drug. But as a pre–pharmacy major, maybe he felt he knew more about these substances than he actually did and had a ‘professional curiosity’ about them.”

Source: As recounted on www.drugfree.org/memorials.
Common Drugs of Abuse

ATIVAN®
1mg 2mg 7.5mg

RESTORIL®

XANAX®
1mg 2mg

XANAX XR®
.5mg 3mg

VALIUM®
2mg 5mg 10mg

KLONOPIN®
.5mg 1mg 2mg wafer, 1mg
Anabolic Steroids

Synthetically produced variants of the naturally occurring male hormone testosterone are used to promote muscle growth, enhance performance, or improve physical appearance. Prescribed by doctors for loss of testicle function, breast cancer, low red blood cell count, hypogonadism, delayed puberty, and debilitated states resulting from surgery or sickness (cancer and AIDS). Administered to animals by veterinarians to promote feed efficiency, improve weight gain, and treat anemia and tissue breakdown during illness or trauma.

Forms

Tablets, sublingual tablets, liquid drops, gels, transdermal patch, subdermal implant pellets, water-based injectable solutions, oil-based injectable solutions.

Adverse Effects

Males: In adults, shrinking of testicles, reduced sperm count, infertility, development of breasts, acne, fluid retention, and increased risk of prostate cancer. In boys, early sexual development, acne, and stunted growth.

Females: Acne, oily skin, deepening of voice, increased body and facial hair, menstrual irregularities, and fluid retention. Also, in girls, stunted growth.

Both: Harm to heart, liver dysfunction, liver tumors, liver cancer, increased blood pressure, increased LDL cholesterol, enlargement of the heart, heart attacks, stroke, hepatitis, HIV, anger, hostility, and male pattern baldness.

Upon discontinuation: Prolonged periods of depression, restlessness, insomnia, loss of appetite, decreased sex drive, headaches, and irritability.
Steroids available only with a prescription:
(Note: Lists are not all-inclusive)

{ **anabolic steroids** }
ANADROL® | ANDRO® | DECA-DURABOLIN® | DEPO-TESTOSTERONE® | DIANOBOL®
DURABOLIN® | EQUIPOISE® | OXANDRIN® | THG® | WINSTROL®

There are over 100 different types of anabolic steroids.

**slang names:** Arnolds, Gym Candy, Pumpers, Roids, Stackers, Weight Trainers, Gear Juice

**How are steroids abused?**
Steroids are taken orally, injected, taken under the tongue, or applied with topical creams that allow steroids to enter the bloodstream. There are different regimens for taking steroids to increase body mass; they are widely published and available on the Internet.

**Where would a teen obtain steroids?**
Friends, gyms, school, teammates, coaches, trainers, social media and the Internet.
anabolic steroids

THREE PARENTS’ STORIES

These three young men were athletes who sought ways to enhance their performance. Each of them turned to steroids, and each of them suffered the depression that comes when steroids are stopped.
Died at age 17. It took a while for his parents to connect Taylor’s recent weight and muscle increases with his uncharacteristic mood swings and violent, angry behavior. He’d been using a cocktail of steroids and other hormones to bulk up, and the drugs were wreaking havoc on his body and emotions. Taylor went to his room and hanged himself. It was only after his death that the whole picture came into focus.

Died at age 24. When supplements and workouts did not produce the desired results, Rob turned to steroids. According to Rob, he first obtained steroids from his trainer at the University of Southern California, whose name Rob never divulged. With a wink and a nod, they kept his use a secret. The desire and need to look bigger, be stronger, and avoid losing muscle gains already achieved prompted him to continue steroid use. Over time, Rob gained 50 pounds and became the powerhouse the steroids promised. Drinking alcohol or taking any other drug, including prescription medication, compounds the adverse effects of steroids. The most dangerous effect of steroids is suicide. His parents said: “We know, without a doubt, steroids killed our son.”

Died at age 19. Efrain had been secretly using steroids to prepare for football season. He had been a standout offensive lineman in high school and was now playing at the junior college level. However, he decided he wanted to move from the offensive line to more of a “glory” position at middle linebacker. Any football fan seeing Efrain would recognize the significant physical transformation it would take for him to make that happen. As his parents tell it, “Efrain began using steroids, under the impression that it would make him bigger, stronger, faster, and earn him the title and recognition he so much desired.” Unaware of the serious side effects of steroids, Efrain began to experience severe paranoia and deep depression. Frightened, he turned to his parents for help, who took him to the family doctor. The doctor assured them that the steroids would leave Efrain’s system soon and that no further action was required. No one knew that quitting steroids cold turkey was unwise; the physician failed to provide an appropriate course of action. Three weeks later, Efrain shot himself in the head.
There are well over 100 medicines that contain dextromethorphan (DXM), either as the only active ingredient or in combination with other active ingredients.

These medications (store brands as well as brand names) can be purchased over-the-counter in pharmacies, some grocery stores, and some other outlets.

Liquid, gelcaps, pills, powder.

High doses produce confusion, dizziness, double or blurred vision, slurred speech, loss of physical coordination, abdominal pain, nausea and vomiting, rapid heart beat, drowsiness, numbness of fingers and toes, and disorientation. DXM abusers describe different “plateaus” ranging from mild distortions of color and sound to visual hallucinations, “out-of-body” dissociative sensations, and loss of motor control. *(Note: Many OTC products listing DXM as an active ingredient may also contain antihistamines, acetaminophen, or other substances, which have other side effects.)*

Unable to move, feel pain, or remember.
How are OTCs with DXM abused?

Cough syrup is drunk either alone or in combination with soft drinks or alcohol. Gelcaps and pills are swallowed or crushed and put into drinks.

Where would a teen obtain OTCs with DXM?

Friends, relatives, pharmacies, grocery stores, discount department and warehouse stores. DXM is also available on the Internet.

**Warning** signs of cough medicine abuse include:

Empty cough medicine boxes or bottles in child’s room, backpacker or locker.

Child buys large amounts of cough medicine when not ill.

Bottles of cough medicine in medicine cabinet are missing.

Child visits websites with information on how to use DXM to get high.

*Source: http://stopmedicineabuse.org.*
Because prescription drugs are legal, they are easily accessible. Parents, law enforcement, educators, the medical community, and all levels of government have a role to play in reducing the nonmedical use of prescription drugs.

**Talk** with your teen about the consequences of using prescription and OTC drugs non-medically and the importance of healthy choices.

**Choose the right time to talk.** When talking to your child, be sure your child is sober or has not been using drugs before talking about drugs and alcohol.

**Voice your suspicion.** Begin by expressing your concerns without making accusations.

**Be specific.** Explain what you observed to make you concerned. For example, you found missing pills or an empty pill bottle. Or your child’s appearance indicates a problem.
Be prepared for strong reactions. Your child may accuse you of snooping or say you’re crazy. Stay calm.

Reinforce what you think about drug use. Tell her how much you care for him or her.

Get help from the experts. Contact the school counselor, school nurse, or family doctor about your concerns.

**TIP:** A teen that is using drugs or alcohol needs to be evaluated by a professional for a possible substance abuse disorder.

Ask teens what they find out about prescription drugs at school, at friends’ homes, at parties, and on social media sites.

Get information about teen abuse of prescription drug medications. Learn what the medication is used for, what it looks like, its effects and interactions, and how teens are using it.
What You Can Do

**Understand** the power and danger of these medications. Many medications, particularly narcotic pain relievers (opioid medications), are very powerful and are designed to relieve extreme pain. New medications are continually being approved for medical use, and it is important to be informed about the drugs’ uses and properties.

**Follow** disposal guidelines. Learn how to dispose of unused medicines by visiting the DEA Diversion website http://www.deadiversion.usdoj.gov/drug_disposal/. Read more about safe drug disposal and get information on drug poisoning. http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm101653.htm

**Ask** your doctor, dentist, and pharmacist about the medications you are prescribed. Ask about their side effects, interactions, and potential addictiveness.

**Review** what is in your medicine cabinet. Lock up powerful medications in a safe place, not in the family medicine or kitchen cabinet. Count your pills when you receive them, and periodically check to see how many are in the container. Avoid keeping prescription painkillers or sedatives around “just in case.”
**Read** the labels. The prescription label includes important information about how much to take, interactions, and the ingredients. Many generic prescriptions are substituted for brand name drugs. Usually, the generic name of the drug is printed with the brand name, so that the customer knows which medication they receive. It may be easy to overlook the fact that the doctor has prescribed a very powerful narcotic painkiller.

**Remember:** Use of Rx medicines without a doctor’s recommendation can be just as dangerous as using illegal drugs. Improper use can have serious health effects, including addiction and overdose.
DEA’s Role

DEA plays a critical role in preventing non-medical use and abuse of prescription drugs.

DEA investigates physicians who sell prescriptions to drug dealers or who overprescribe drugs; pharmacists who falsify records and then sell the drugs; employees who steal from drug inventory; executives who falsify orders to cover illicit sales; prescription forgers; and persons who commit armed robbery of pharmacies and drug distributors.

DEA investigates illegal Internet pharmacies. Rogue pharmacies exist to profit from the sale of controlled prescription medications to buyers who have not seen a doctor and do not have a prescription from a registered physician. The pharmacies lack quality assurance and accountability, and their products pose a danger to buyers.

DEA works with state, local, and foreign partners to interdict controlled substances and chemicals used to make drugs.

DEA’s authority to enforce laws and regulations comes from the Controlled Substances Act, Title 21 of the United States Code. DEA also provides fact-based timely information to the public about the dangers of illegal drugs and the non-medical use of prescription drugs through publications, websites and presentations.
RESOURCES

Center for Disease Control (CDC), Prescription Drug Overdose http://www.cdc.gov/drugoverdose/

Community Anti-Drug Coalitions of America (CADCA) www.cadca.org


Drug Enforcement Administration (DEA) www.dea.gov

DEA Office of Diversion Control www.deadiversion.usdoj.gov

DEA’s website for teens www.JustThinkTwice.com

DEA’s website for parents, caregivers & educators www.GetSmartAboutDrugs.com

Institute for Behavior and Health, Inc. provides information on drugged driving at www.stopdruggeddriving.org

National Institute on Drug Abuse (NIDA) provides information on prescription and over-the-counter drugs at www.nida.nih.gov


National Suicide Prevention Lifeline www.suicidepreventionlifeline.org; 1-800-273-TALK

NIDA’s Teen Website on Prescription and Over-The-Counter Drugs www.teens.drugabuse.gov/peertx/

Office of National Drug Control Policy (ONDCP) www.whitehouse.gov/ondcp/
