Prescription drug abuse at epidemic levels

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First in a series

Sullivan County is a beautiful region right on the edge of the Tennessee-Virginia state line. The county holds two cities, one nicknamed the “Model City” which houses the international headquarters of Eastman Chemical Co. and the other containing a racetrack that attracts thousands of spectators from all over the country.

But just under the surface, an epidemic threatens the way of life for the 156,000 people who live in there. The epidemic is prescription drug abuse.

“I believe (prescription drug abuse) is an epidemic in our community,” said District Attorney General for Sullivan County, Barry Staubus. “I base that on the arrests, criminal charges, autopsy reports and conversations I’ve had with law enforcement officials and vice cops.”

Prescription drug abuse has risen steadily over the last 13 years. In Tennessee, you are now more likely to die from a drug overdose than from a car accident. Drug overdose deaths overtook car accidents as the leading cause of death in Tennessee in 2010, according to a presentation made by the Sullivan County Anti-Drug Coalition.

Overdose deaths in Tennessee have increased from 422 in 2001 to 1,059 in 2010. That represents a 250 percent increase over the 10-year time period. For every 100,000 people in Sullivan County, 14 will die from overdosing on drugs.

How did it become an epidemic?

People abusing prescription drugs was practically unheard of 15 years ago. But the rise in powerful painkillers in the 1990s — mainly hydrocodone and OxyContin — and doctors who made a concerted effort to manage pain, have made prescription drug abuse possible.

When OxyContin was first produced, it was marketed as non-addictive based on its construction as a time-released drug, according to Randy Jessee, senior vice president for Specialty Service at Frontier Health.

But people began to figure out a way around the time release function by crushing the pill and either snorting it up their nose or injecting it directly into their bodies. Not having the time release gave people an instant high that lasted for hours and became a widespread problem.

Problems first began to arise in Eastern Kentucky, where Jessee said it nearly killed that part of the country. It then spread to Southwest Virginia. States began to take notice of the problem and sued the company that produced OxyContin, which paid out billions of dollars to the states.
“It started in 1998 and by the year 2000, we had serious issues,” Jessee said. “It started bleeding over into Northeast Tennessee and we saw gradual increases from 2003 to 2005.”

Frontier Health keeps track of cases for their records and they began to see a rise in people seeking help with a prescription drug problem, at least 10 to 15 percent each year. Now, at any given point in time, 65 to 70 percent of cases at Frontier Health involve a pharmaceutical drug problem.

**Who is affected and where does it come from?**

Prescription drug abuse affects everybody and affects people who normally wouldn’t appear to be drug addicts. People who are married, employed and have at least a high school education are three times more likely to use prescription drugs than others, according to the division of alcohol and drug abuse services.

A reason for this is because people don’t feel like they are abusing drugs that were prescribed by a doctor. It is also a part of a culture that has been created that says taking pills for an ailment is the right way to fix your problems, Jessee said.

There is also disparity among men and women. More men sought help for addiction, but more women tend to abuse prescription drugs.

“I’m not surprised with the increase in prescription drug abuse,” Jessee said. “Drugs don’t pay attention to what your background is.”

So where do all these drugs come from? Well it depends, but the overwhelming majority come from a friend or relative, according to the Centers for Disease Control. Only around 16 percent of prescription drugs are stolen from a friend, bought from a drug dealer or obtained from some other source, while 17 percent are actually prescribed by a doctor.

But a lot of drugs are dispensed in the state. According to the controlled substance database report which was presented to the Tennessee General Assembly in 2011, there were 275 million hydrocodone pills dispensed in Tennessee in 2011; 117 million alprazolam, more commonly known as Xanax, were dispensed; and 113 million oxycodone pills were dispensed in 2011. To put that in perspective, that is 51 hydrocodone pills, 22 Xanax pills, and 21 pills of oxycodone for every Tennessean above the age of 12.

Staubus believes one of the reasons why there are so many pills dispensed is because of the explosion in pain management clinics in Sullivan County. Staubus believes some of these clinics are legit, but he thinks many more are pill mills.

**Pill mills**

Sullivan County has 11 pain management clinics. The most populous county in Tennessee — Shelby County which has around 1 million people — has only 22.
Staubus said the pain clinics started in Florida and people would travel down to Florida, get pills and bring them back. When Florida cracked down on the clinics, they moved to Georgia. Georgia cracked down on the clinics and they now have moved to Northeast Tennessee.

Undercover officers with local law enforcement have seen a big increase in pain clinics over the last year. The reason for the increase has been because there is a high demand in this area.

Pill mills work by a patient walking into the clinic and saying they have pain. The doctors do not take patient history or conduct routine tests like MRIs. Everything is based off of what the patient says. The clinics will only accept cash or money orders and don’t accept insurance. Often there are no limits on how many pills they can get.

“Around here, a lot of people are getting the 180 (OxyContin) scripts a month,” said an undercover officer who is not being identified due to the nature of his/her work. “It’s pain management, they are managing pain, they are planning on these people taking these pills for the rest of their lives. They are not trying to bring them down off of it, most of the time they are increasing it.”

The officers said it costs anywhere between $100 and $400 dollars for a visit. That may seem like a lot for out-of-pocket expense, but it is a drop in the bucket when the pills are sold on the street to addicts.

An average OxyContin pill sells for $1 a milligram on the street, according to the officers. That means an OxyContin 80 costs $80, at least that is what it used to be because lately prices are going up. So a person who walks into a pain clinic, pays $400 dollars and walks out with a prescription for 90 OxyContin 30s will make around $2,700 dollars if he or she sells all of the pills. Prescription pills are the most expensive drug on the market by weight, the officers said.

Law enforcement officials know this practice is going on in the county and named a couple of the worst places, but are frustrated because they can’t do anything about it.

Many times prescription drug abuse can lead to harder drugs and some of the undercover officers have noticed an influx of heroin to the area. Heroin gives addicts the same high and is cheaper.

Prescription drug abuse is not limited to pain pills or even adults. High school and college students are using Adderall, a drug used for ADD and ADHD. Officers said Sullivan Central High School was eaten up with it and students were training each other on what to say to obtain Adderall.

Not only high school students, but children are being exposed to prescription drugs before they even leave the womb. According to the Sullivan County Anti-Drug Coalition, 35 percent of 142 pregnant women that were admitted to state-funded treatment services in Tennessee said prescription pain killers were their primary substance of abuse.

http://www.timesnews.net/article/9067436/prescription-drug-abuse-at-epidemic-levels