

MEDUCATION™

A dose of knowledge

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Be Aware. Don't Share.

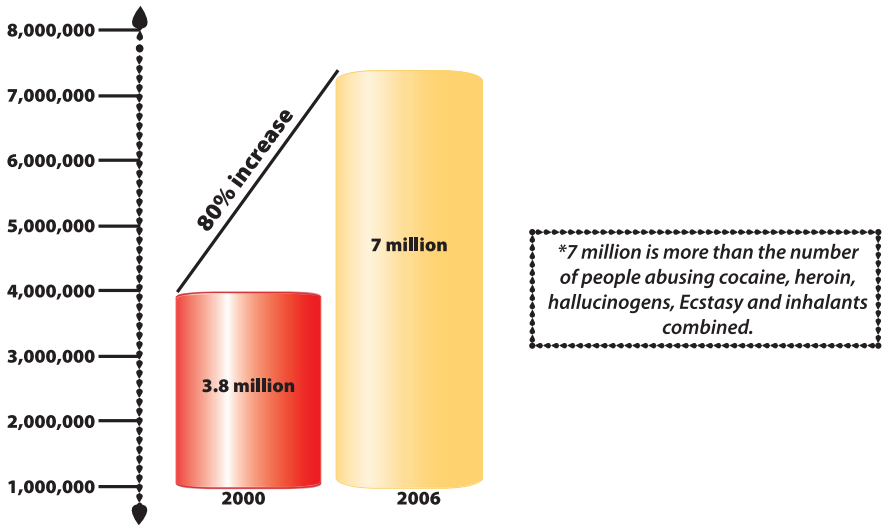


LESSON 1: Your Medicine. Their Drugs.

Prescription medicines taken properly help heal illness, relieve pain, control disease and bring balance to your life. But when others take your medications, they can be very dangerous.

An alarming trend is emerging. Every day, more than **4,000 children and young adults** begin experimenting with prescription drugs.¹ These drugs range from pain relievers and depressants to stimulants and over-the-counter (OTC) medicine.

7 million Americans abuse prescription drugs²



Sources of information for this guide are numbered after each statement or chart. The numbers align with the list of sources on page 12.

Some disturbing facts:

2.1 million teens abused
prescription drugs
in 2006.³

3.1 million
12 to 25 year olds used
OTC cough and cold medications
at least once
to get high.⁴

Prescription drugs are the
#1 choice
among 12-13 year olds.⁴

One-third of all new abusers of
prescription drugs in 2006 were
12-17 year olds.⁴

13 is the mean age
of the first non-prescribed use of
sedatives and stimulants. ⁴

One in seven boys
and one in five girls has shared or
borrowed a prescription drug. ¹²

Nearly **one in 10 high
school seniors** admit
abusing pain relievers. ⁴

Girls age 12-17
are more likely than boys to
misuse OTC medications, but the
trend reverses with
18- to 25-year-olds. ³



I get my hair
from my mom.

My eyes from
my dad.

And my drugs
from my
grandma's
medicine cabinet.

LESSON 2: Your nightstand. Their drug supplier.

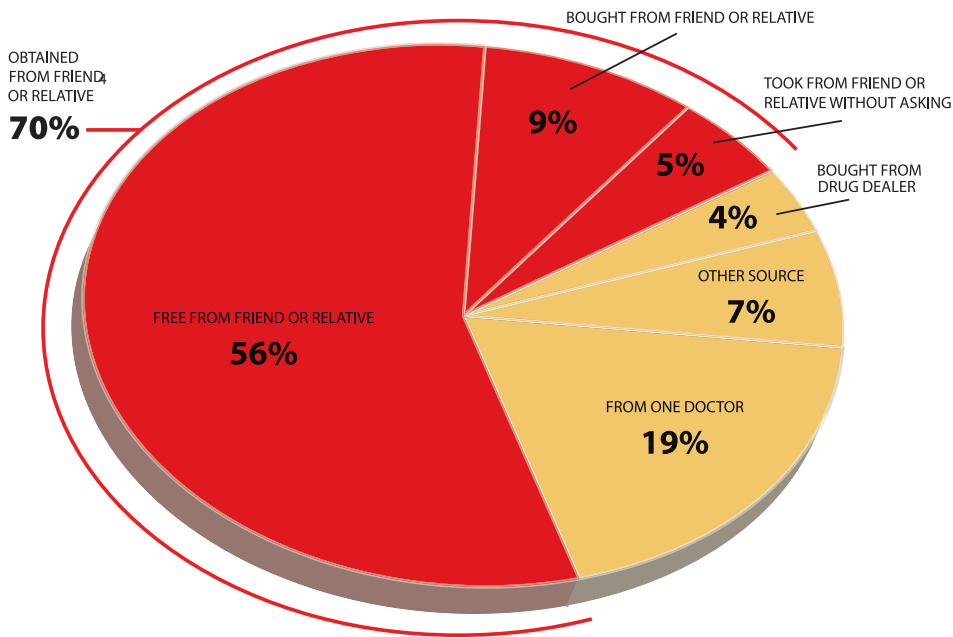
What's in your medicine cabinet? On your nightstand or the kitchen counter? In your purse? Naturally, you keep prescription medicines and cold and cough remedies handy for you to take when needed. But, they are also handy for teens to take without you knowing it.

Adolescents believe that since the medicines were prescribed by a doctor, they provide

an inexpensive, legal and "medically safe high." In the case of OTC remedies, most children have been given these medicines by their parents for common illnesses, such as fevers, colds and coughs. So, teens believe it is safe to take these drugs whenever they choose. The proliferation of pharmaceutical ads on television as well as the Internet and peer misinformation helps contribute to this attitude.

Source of Pain Relievers for Abusers⁵

Ages 12 and older




More disturbing facts:

More teens have been
**offered
prescription drugs**
than other illegal ones, except
marijuana.⁴

Four out of 10 teens
believe prescription and OTC
medicines are less addictive and
dangerous than street drugs.⁴

7.3 million young people
believe there's
"nothing wrong"
with using non-prescribed
medicines periodically and that
parents "don't care as much if
you get caught."⁴

More than one-third say they
feel **peer pressure** to
take prescription or OTC drugs.⁶



I can get my hands
on pain relievers
and stimulants
whenever I want
them—usually
within an hour.

LESSON 3: Your rationale. Their reasons.

We often ask: Why? Teens give many reasons for abusing prescription and OTC drugs, such as wanting to “fit in,” relieve depression and anxiety, help them cope with life’s stresses, sleep better or increase their alertness and concentration power so they can do better in school. Some want to control their weight with stimulants. Others want to self-medicate to relieve pain. They want to experiment. They want to be accepted by their peers. They want to escape

reality or make their reality more bearable.

The abuse of OTC drugs by teens is largely with cough and cold medicines that contain dextromethorphan (DXM) to get high. Some young people are also abusing laxatives, diuretics and diet pills to control their weight. Some herbal or “natural” products can be just as dangerous as diet pills because they act like a stimulant on the nervous system.

The most commonly abused prescription drugs are:^{7 8 9}

1. Pain relievers (opioids). These powerful medications are used primarily to treat pain and can be found in some cough medicines:

TYPES	PRESCRIBED FOR	SAMPLE BRAND NAMES
Morphine	Severe pain	Kadian, MS Contin, Oramorph SR
Oxycodone	Severe pain	OxyContin, Roxicodone, Percodan, Percocet, Vicodin
Codeine	Coughs, mild pain	Tylenol with Codeine Robitussin with Codeine
Others	Pain Relieve diarrhea	Darvon, Dilaudid, Demerol, Ultram Lomotil

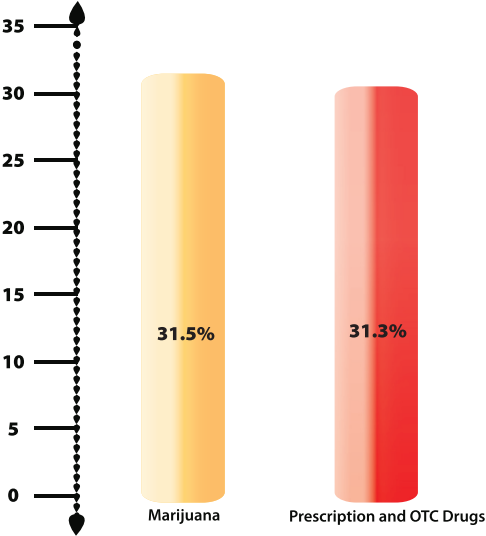
Appeal to teenagers Can produce quick, intense feeling of pleasure followed by a sense of well being and a calm drowsiness

2. Depressants, also known as tranquilizers and sedatives:

PRESCRIBED FOR	SAMPLE BRAND NAMES
Anxiety, tension, sleep disorders, severe stress reactions, panic attacks	Mebaral, Nembutal, Seconal, Soma, Phenobarbital, Klonopin, Xanax, Valium, Librium, Halcion, Ativan, Rozerem, Ambien, Lunesta

Appeal to teenagers Causes euphoria or relaxation and sleep

Drugs Most Frequently Used by 12th Graders¹⁰



3. Stimulants, or uppers:

PRESCRIBED FOR	SAMPLE BRAND NAMES
Respiratory problems, sleep disorders (narcolepsy), attention-deficit / hyperactivity disorder (ADHD), short-term treatment of obesity, depression	Adderall, Ritalin, Dexedrine, Focalin, Methylin, Concerta

Appeal to teenagers Increases alertness, attention and energy, feeling of extreme joy, gives them energy to stay awake, increases concentration, become more talkative, lose weight

4. Over-the-counter drug abuse with dextromethorphan (DXM), which is called “robo-tripping” by teens:

USED TO TREAT	SAMPLE BRAND NAMES
Cough, colds, sinus pressure (with DXM)	Alka-Seltzer, Contac, Coricidin, NyQuil, Robitussin, Sudafed, Theraflu, Vicks, Nytol, Benadryl, Unisom, Tylenol PM
Sleep problems	
Weight control:	
Laxatives, diuretics	Ex-lax, Dulcolax, MiraLax
Diet pills, with ingredients, such as Ephedrine, caffeine, laxatives	Alli, Apidexin, Phenphedrine, Liporexall, DecaSlim, Colovox

Appeal to teenagers Creates a high, relieves pain, reduces anxiety, suppresses appetite, helps them sleep or lose weight, gives them an edge in sports or school

If you suspect your teen is using drugs, do not wait to act. The Substance Abuse & Mental Health Services Administration has a listing of treatment centers in your area. (www.findtreatment.samhsa.gov or 1-(800) 662-HELP (4357).

LESSON 4: Your words. Their slang.

Close the COMMUNICATION



1. All Star

Best players lose in this sport.

Taking multiple drugs

4. Cotton

Little children use it for bunny tails.

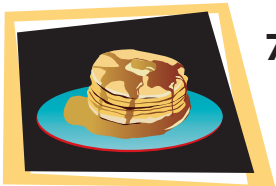
Big kids use it for fairy tales.

OxyContin

5. Kibbles & Bits

Excites both dogs and teens.

Ritalin



7. Pancakes & Syrup

*A sweet way to start your day and
end it for them.*

Combination of a sedative and codeine cough syrup

10. Legal Speed

*Staying within the speed limit is
impossible with this fuel.*

Over-the-counter asthma drugs



GAPTM

DIRECTIONS: Every generation has their slang, but the lingo today's teenagers use could mean something dangerous if they are abusing prescription or over-the-counter (OTC) drugs. For example, you go "fishing" for salmon or trout, they go "phishing" for pharmaceuticals.

Words that sound innocent to your ears may have another meaning on the street. Read the "hints" and then see if you can guess the drug culture's definition of these common words or expressions.¹¹

2. Vikings

Minnesota fans don't cheer these guys.

*Vi*codin



3. Trail Mix

Not the usual combination of fruit and nuts.

*Various prescription drugs, usually served in a bag or bowl at phar*m parties



6. Jack

A friend you don't want your teen to know.

A person who steals someone else's drugs

8. Babysit

Not a healthy way to earn money.

Guiding a friend through first drug experience



9. "V"

Flashing this Victory sign is a downer.

Valium

www.lockyourmeds.org

LESSON 5: Your lifesaver. Their lifetaker.

When your doctor prescribes medicine for you, the effects are closely monitored. But when teenagers abuse medicines that are prescribed for someone else, no one is monitoring their dosage or frequency of use. They can become addicted, poisoned or even die from an overdose.

All too often, teens combine prescription or OTC drugs with other substances, like alcohol or marijuana, which can lead to dangerous consequences. And, sometimes they attend “pharm or rainbow parties” where various prescription medications are dumped into a bowl and randomly ingested.

Watch for these signs and symptoms.⁷⁸⁹

DRUG	SHORT-TERM EFFECTS OF ABUSE	LONG-TERM EFFECTS OF ABUSE
Pain relievers (opioids)	<p>Physical side effects: relief from pain, lack of energy, drowsiness, constriction of the pupils, flushing of the face and neck, nausea, constipation, vomiting, slowed breathing, nightmares</p> <p>Psychological side effects: anxiety, impaired judgment, inability to concentrate and learn, apathy, agitation, depression</p>	<p>Addiction, physical dependence, paranoia, hallucinations, dementia</p> <p>Severe withdrawal symptoms when teen stops taking the drug, including deep depression and suicidal thoughts</p> <p>Need to take more of the drug or a combination of drugs to produce the same high, possibly leading to overdose</p> <p>Higher risk of graduating to heroin</p>

Why should families be concerned?

- 20,950 people died from an overdose of prescription drugs between 1999 and 2004. The 62% increase is **more than cocaine and heroin combined**.⁶
- Emergency room visits involving abuse of prescription or OTC drugs increased 21% from 2004 to 2005 and **nearly half** of the patients under the age of 20 had abused DXM (dextromethorphan).⁶
- Teen admissions to treatment facilities for addiction to prescription pain relievers **increased by 300%** since the mid-1990s.⁶
- **29% of teens** in treatment were dependent on tranquilizers, sedatives, amphetamines and other stimulants. (2004)⁶

DRUG	SHORT-TERM EFFECTS OF ABUSE	LONG-TERM EFFECTS OF ABUSE
Depressants	<p>Physical side effects: loss of coordination, dilated pupils, slurred speech, relaxed muscles, shallow breathing, sluggishness, fatigue, dizziness, drowsiness, fever, hyperactivity, visual hallucinations</p> <p>Psychological side effects: poor concentration, feelings of confusion, disorientation, impaired judgment and memory, lowered inhibitions, rage, hostility, depression, amnesia, paranoia</p>	<p>Addiction, dependence</p> <p>Severe withdrawal symptoms</p> <p>Need to take larger doses to achieve the same effects</p> <p>Shallow breathing, clammy skin, weak and rapid pulse, seizures, overdose, coma</p>
Stimulants	<p>Physical side effects: decreased appetite, loss of coordination, collapse, increased heart and respiratory rates, elevated blood pressure, dizziness, tremors, headache, flushed skin, chest pain, excessive sweating, vomiting, abdominal cramps</p> <p>Psychological side effects: restlessness, delusions, hostility, irritability, insomnia, anxiety, agitation, nightmares</p>	<p>Addiction, high fever, convulsions, heart failure, overdose</p> <p>Paranoia, aggressiveness, extreme anorexia, thinking problems, visual and auditory hallucinations, delusions, panic, suicidal tendencies, severe dental problems</p>
Over-the-counter drugs	<p>Physical side effects: nausea, headache, blurred vision, dizziness, vomiting, loss of consciousness, numbness of fingers and toes, loss of coordination, abdominal pain, irregular heartbeat, aches, seizures</p> <p>Psychological side effects: impaired judgment, restlessness, euphoria, cold flashes, dizziness, diarrhea</p>	<p>Addiction, insomnia, panic attacks, psychosis, high-blood pressure, damage to nerves, muscles and tissues in large intestine, coma</p>

If you suspect your teen has overdosed on any of these drugs, seek medical help immediately.

LESSON 6: Your solutions. Their protection.

Quite frequently young people merely open the medicine cabinet and there before them is a variety of drugs available for the taking: pain pills for post surgery; sleeping pills from an overseas airplane trip; cough medicine from last season's flu. The time to act is now. You are the key to your child's drug-free future.

Take the following **preventative steps:**

- **Remove** drugs from your medicine cabinet and hide them, lock them up or take them out of your house.
- **Safeguard** all medicines that have to remain at home by monitoring quantities and controlling access.
- **Take inventory** by writing down the names and amounts of medications you currently have and regularly check to see if anything is missing.
- If your child is on prescribed medication, monitor the

dosages and refills. **Set clear rules**, such as not sharing and always following proper dosages.

- **Warn** your youngsters that taking prescription or OTC drugs without a doctor's supervision can be just as dangerous and potentially lethal as taking street drugs.
- **Supervise** your child's **Internet** use: many pharmacy sites are not regulated and will sell your child medications without prescriptions.
- **Properly dispose** of old, expired or unused medicines in the trash. Call your local Sheriff or police department for local "take-back" collection information. DO NOT flush medications down the drain or toilet, unless the label indicates it is safe to do so.

Take the pledge to protect your child and spread the word. www.Lockyourmeds.org

Be Aware. Don't Share.

Sources:

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- 2 U.S. Drug Enforcement Administration, 2007 http://www.justice.gov/dea/concern/prescription_drug_fact_sheet.html
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- 6 Office of National Drug Control Policy, *Teens and Prescription Drugs*, February 2007;
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- 8 Parents. The Anti-Drug, [http://www.theantidrug.com/](http://www.theantidrug.com/http://kidshealth.org/teen/drug_alcohol/drugs/prescription_drug_abuse.html)
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- 9 The Medical Letter, *Treatment Guidelines*, Vol. 43, March 2001; Vol. 4, November 2006; Vol. 5, April 2007; Vol. 6, April 2008;
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