Be Aware. Don’t Share.® Lock Your Meds.®
Have you read the news lately?

“Prescription drug abuse skyrocketing.”
“Opioid epidemic devastating America.”
“Parents overdose on heroin in front of children.”
“Fentanyl kills police officer by exposure during traffic stop.”

Houston, we have a problem – and it’s not going away until we all do our part to solve it.

As parents and other concerned adults, it is our responsibility to take action to help prevent our children and family members from experiencing the devastating consequences of addiction. Americans are becoming addicted to pain killers and then turning to heroin and fentanyl, cheaper and more readily available options when they can’t access pills. What can we as parents and concerned citizens do to prevent this?

1. Take medication, only as prescribed by our own doctor.
2. Secure our medication to ensure that no one is accessing it.
3. Take regular inventory to be sure nothing is missing.
4. Safely dispose of expired or unused medication.
5. Spread the message to family and friends.

This Meducation guide is designed to educate you about everything you need to know about prescription drug abuse – from what started it to what we can do to stop it, and includes relevant information about fentanyl, heroin and other emerging trends. We invite you to join us and get involved in your community to help stop this epidemic. We hope you’ll join us.

Peggy B. Sapp
President & CEO, Informed Families
Volunteer President, National Family Partnership, Proud Creators & Sponsors of the Red Ribbon Week® & Lock Your Meds campaigns
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 1,700 children and young adults begin experimenting with prescription drugs. These drugs range from pain relievers and depressants to stimulants and over-the-counter (OTC) medicine.

19 million Americans misuse prescription drugs*

(Source: 2013 and 2015 National Survey on Drug Use & Health)
Some disturbing facts:

**Almost 1 in 4 teens** in America say they have abused prescription drugs.

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

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

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

**One in 7 boys** and one in five girls has shared or borrowed a prescription drug.

Nearly **1 in 10 high school seniors** admit abusing pain relievers.

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

I get my hair from my mom.

My eyes from my dad.

And my drugs from my home medicine cabinet.
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 Abusers
Ages 12 and older

*Percentage from friend or relative is derived before rounding of individual sources. Source: SAMHSA 2016 National Survey on Drug Use and Health (September 2016)
I can get my hands on pain relievers and stimulants whenever I want them—usually within an hour.

More disturbing facts:

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

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

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.”

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

Drugs Most Frequently Used by 12th Graders

(Source: “Monitoring The Future Study,” University of Michigan, 2015)
The most commonly abused prescription drugs are:

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

<table>
<thead>
<tr>
<th>TYPES</th>
<th>PRESCRIBED FOR</th>
<th>SAMPLE BRAND NAMES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hydrocodone</td>
<td>Severe pain</td>
<td>Vicodin, Lortab, Norco, Zohydro</td>
</tr>
<tr>
<td>Oxycodone</td>
<td>Severe pain</td>
<td>OxyContin, Percocet, Percodan, Roxicet</td>
</tr>
<tr>
<td>Tramadol</td>
<td>Severe pain</td>
<td>Ultram, Ultracet</td>
</tr>
<tr>
<td>Morphine</td>
<td>Severe pain</td>
<td>Avinza, Kadian, MS Contin</td>
</tr>
<tr>
<td>Fentanyl</td>
<td>Severe pain</td>
<td>Actiq, Duragesic, Fentora</td>
</tr>
<tr>
<td>Buprenorphine</td>
<td>Severe pain</td>
<td>Suboxone</td>
</tr>
<tr>
<td>Hydromorphone</td>
<td>Severe pain</td>
<td>Dilauidid, Exalgo</td>
</tr>
<tr>
<td>Others</td>
<td>Pain</td>
<td>Darvon, Dilauidid, Demerol, Ultram</td>
</tr>
<tr>
<td></td>
<td>Relieve diarrhea</td>
<td>Lomotil</td>
</tr>
</tbody>
</table>

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

Why Prescription Drug Abuse Increased?
- Overprescribing By Doctors
- Drug Company Marketing/Advertising
- Illegal Online Pharmacies
- Low Perception of Harm

Why Prescription Drug Abusers Are Turning To Heroin
- Similarity to Opioid pills
- Low Cost
- Easier To Access Due To Crackdown On Doctor Shopping
- Lack Of Resources For Recovery Effort

Why Fentanyl Use Is On The Rise
- Man-Made/Synthetic & Available On Street
- 50-100Xs More Potent Than Morphine
- Cheaper & Easier To Obtain Than Heroin Or Prescription Pills
- Often used by drug dealers to cut heroin and other drugs

Result of all of these: 60,000 overdose deaths in 2016 – that’s more than the number of people who die from car crashes or gun violence.

2. Depressants, also known as tranquilizers and sedatives

<table>
<thead>
<tr>
<th>PRESCRIBED TO TREAT</th>
<th>SAMPLE BRAND NAMES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anxiety, tension, sleep disorders, severe stress reactions, panic attacks</td>
<td>Mebaral, Nembutal, Seconal, Soma, Phenobarbital, Klonopin, Xanax, Valium, Librium, Halcion, Ativan, Rozerem, Ambien, Lunesta, Lorazepam, Diazepam</td>
</tr>
</tbody>
</table>
Appeal to teenagers Causes euphoria or relaxation and sleep

3. Stimulants, or uppers, enhance brain activity

**PRESCRIBED TO TREAT**  
Respiratory problems, sleep disorders (narcolepsy), attention-deficit / hyperactivity disorder (ADHD), short-term treatment of obesity, depression

**SAMPLE BRAND NAMES**  
Adderall, Ritalin, Dexedrine, Focalin, Methylin, Concerta, Vyvanse, Dextroamphetamine, Daytrana, Metadate, Didrex, Tentuate

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

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

**USED TO TREAT**  
Cough, colds, sinus pressure (with DXM)  
Sleep problems  
Weight control: Laxatives, diuretics  
Diet pills, with ingredients, such as Ephedrine, caffeine, laxatives

**SAMPLE BRAND NAMES**  
Alka-Seltzer, Contac, Coricidin, NyQuil, Robitussin, Sudafed, Theraflu, Vicks, Nytol, Benadryl, Unisom, Tylenol PM  
Ex-lax, Dulcolax, MiraLax  
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

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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 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 ingested by handfuls.

Why should families be concerned?

• More people die of drug overdose than from car crashes or guns.

• Death by overdose involving prescription drugs have quadrupled since 1999.

• 1.5 million people 12 and older received treatment for prescription drugs in 2013.
### Watch for these signs and symptoms.

<table>
<thead>
<tr>
<th>DRUG</th>
<th>SHORT-TERM EFFECTS OF ABUSE</th>
<th>LONG-TERM EFFECTS OF ABUSE</th>
</tr>
</thead>
</table>
| Opioids (Pain relievers, narcotics) | **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  
**Psychological side effects:** anxiety, impaired judgment, inability to concentrate and learn, apathy, agitation, depression | Addiction, physical dependence  
Paranoia, hallucinations, dementia  
Severe withdrawal symptoms when teen stops taking the drug, including deep depression and suicidal thoughts  
Need to take more of the drug or a combination of drugs to produce the same high, possibly leading to overdose  
Higher risk of graduating to heroin |
| **Depressants**             | **Physical side effects:** loss of coordination, dilated pupils, slurred speech, relaxed muscles, shallow breathing, sluggishness, fatigue, dizziness, drowsiness, fever, hyperactivity, visual hallucinations  
**Psychological side effects:** poor concentration, feelings of confusion, disorientation, impaired judgment and memory, lowered inhibitions, rage, hostility, depression, amnesia, paranoia | Addiction, dependence  
Severe withdrawal symptoms  
Need to take larger doses to achieve the same effects  
Shallow breathing, clammy skin, weak and rapid pulse, seizures, overdose, coma |
| **Stimulants**              | **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  
**Psychological side effects:** restlessness, delusions, hostility, irritability, insomnia, anxiety, agitation, nightmares | Addiction, high fever, convulsions, heart failure, overdose  
Paranoia, aggressiveness, extreme anorexia, thinking problems, visual and auditory hallucinations, delusions, panic, suicidal tendencies, severe dental problems |
| **Over-the-counter drugs**  | **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  
**Psychological side effects:** impaired judgment, restlessness, euphoria, cold flashes, dizziness, diarrhea | Addiction, insomnia, panic attacks, psychosis, high-blood pressure, damage to nerves, muscles and tissues in large intestine, coma |

If you suspect your teen has overdosed on any of these drugs, seek medical help immediately.
Quite frequently youngsters merely open the medicine cabinet and there before them is a variety of drugs available for the taking: pain pills for post gum 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.
- **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.

**Take the pledge**
Visit www.lockyourmeds.org

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