

# Rising opiate and heroin abuse among young adults a public health epidemic

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Curtailling abuse of prescription pain killers is a top priority of the Governor's Task Force.

(Medical Xpress)—Prescription pain killers – a leading cause of youth addiction and easily accessible in the family medicine cabinet – have caused an alarming rise in heroin abuse in New Jersey and throughout the nation because heroin is a cheaper high and easy to get.

Frank Greenagel Jr., a clinical social worker who specializes in addiction recovery and treatment at Rutgers and is the Governor's Task Force chair on Opiate and [Heroin Abuse](#), has seen the trend on college campuses.

At Rutgers, the number of students living in the Rutgers Recovery House who had been addicted to prescription [pain killers](#) and heroin rose from

one student in 2009 to eight students in 2011 and 15 students this year.

The reason for the surge in [heroin addiction](#) among young suburban adults, according to Greenagel, is because it becomes too costly for those addicted to pain killers to feed their habit. Heroin delivers the same high and costs a lot less.

Next month, the Governor's Task Force on Opiate and Heroin Abuse will hold its last statewide meeting to discuss what is now considered to be a public health epidemic. Greenagel, a Rutgers alumnus, says he expects new and more effective recommendations to curtail the availability of illegal [prescription drugs](#).

This could mean advocating for new laws that would require blood tests before obtaining prescription pain killers, instituting more effective drug education in schools and increasing the number of spaces available at both inpatient and outpatient treatment centers to handle the rising number of teens and [young adults](#) needing drug treatment.

"We have made the essential first steps in decreasing the illegal availability particularly with the prescription-[drug monitoring](#) programs which identify people who are going to different doctors and pharmacies to get these pills," said Greenagel, a counselor at Rutgers Recovery Housing Program. Rutgers' on-campus recovery housing program is the first of its kind in the country – with a 95 percent abstinence rate, a 98 percent graduation rate and an average GPA of 3.25.

"Heroin is easy to get and it's cheaper," said Jay, a Rutgers junior who has been at Recovery House for 13 months. "I had taken everything possible as far as prescription pills so when I started with heroin it was not a big deal. I was still making the dean's list at Penn State University so I didn't give it much thought."

That was until, at 18, his life became totally unmanageable. He overdosed while taking methamphetamine before reaching out to his mother to ask for help. Next came 31 days in a rehabilitation treatment facility in Pennsylvania, followed by another 11 months in an extended care sober housing facility and finally acceptance – clean and sober – into the Rutgers Recovery program.

Ryan, another former addict, said his drug of choice was OxyContin, a controlled dangerous substance often prescribed for cancer patients. "My father had a lot of surgeries so I would go to the medicine cabinet and just take them. I got caught once and I swore up and down that I wouldn't do it again," said the 21-year-old history and communications major.

Like Jay, Ryan got arrested for stealing and his parents put him into a rehabilitation program. He doesn't blame his parents for not recognizing his drug problem. But, he said, if they and others, including school nurses, had been more aware of the danger signs – like coming to school with flu-like symptoms when he was trying to stop the opiates – he probably would have been caught sooner.

According to the task force, the number of New Jersey residents ages 18-25 admitted to treatment centers for heroin or opiate addiction between 2010 and 2011 increased by 12 percent. And there's no reason to believe, Greenagel says, that this number will decrease when new statistics come out for 2012.

"We need to get out there in our communities and do some real education," said Greenagel. "We need more treatment centers so we don't have to hear these heartbreaking stories from mothers whose children died before they could get the help they so desperately needed."

Provided by Rutgers University

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