

Montana officials alarmed as they fight surge in meth use

February 18 2017, by Bobby Caina Calvan



In this Sept. 2, 2010, file photo a Franklin County police officer counts pills containing pseudoephedrine during a raid of a suspected meth house in Gerald, Mo. Methamphetamines continue to make an alarming surge in Montana, as law enforcement, health officials and communities struggle to address the problem. Panelists at a drug summit convened Saturday, Feb. 18, 2017, by the Montana Legislature said resources are being strained because of a widening prevalence of the drug. (AP Photo/Jeff Roberson, File)



Methamphetamines continue to make an alarming surge in Montana, as law enforcement, health officials and communities struggle to address the problem.

Panelists at a drug summit convened Saturday by the Montana Legislature said resources are being strained because of a widening prevalence of the drug.

While authorities attempt to stanch the flow of meth into the state from Mexican cartels, courts are burdened by a growing caseload of drug cases. Family services are also strained by drug-related cases that are tearing apart families. And drug clinics are struggling to serve an increasing population of meth users seeking to treat their addictions.

As meth use in Montana continues to rise, authorities are also bracing for a possible influx of heroin in an expansive rural state whose borders aren't easy to patrol.

"I've never seen it this bad before," said Bryan Lockerby with the Montana Department of Criminal Investigations. "The problem we're all trying to solve is like boiling the ocean, and we have people drowning in meth."

The concern over meth and opiates, such as heroin, in Montana is shared nationwide. More Americans are dying from opioids than at any time in recent history, with overdose deaths hitting a peak of 28,000 in 2014. That amounts to 78 Americans dying from an opioid overdose every day, according to the U.S. Centers for Disease Control and Prevention.

But meth remains the drug of choice in Montana and other nearby states because it is inexpensive and so widely available.

Lockerby told legislators that law enforcement is but a component in the



effort to eradicate the drug from Montana. But the challenges, he said, are daunting as the meth supply transforms a homegrown substance cooked in clandestine labs to a well-financed out-of-state import that crosses stateliness and national borders.

In 2015, the state's crime lab analyzed about twice the number of samples as two years prior, according to state statistics.

Montana health officials say meth-related cases now account for more than 40 percent of the caseload being handled by the state's child and family services—doubling from a decade ago.



This April 1, 2008, file photo shows a graphic billboard depicting a young Montanan under the influence of meth displayed during the kickoff of the Montana Meth Project advertising campaign inside the capital in Helena, Mont. Methamphetamines continue to make an alarming surge in Montana, as law enforcement, health officials and communities struggle to address the problem.



Panelists at a drug summit convened Saturday, Feb. 18, 2017, by the Montana Legislature said resources are being strained because of a widening prevalence of the drug. (Eliza Wiley /Independent Record via AP, File)

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As meth use in Montana continues to rise, authorities are bracing for a rise in heroin use as that drug further encroaches into an expansive rural state whose borders aren't always easy to patrol.

Meth is the primary drug encountered by Montana's 11 drug task forces, according to the Montana Department of Justice.

Attorney General Tim Fox called for more collaboration among state, federal and community agencies to deal with the issue.

"One of the largest challenges is for us all to work together," he said. "We have various agencies with all the same general goal to protect our citizens and in promoting health. Because we're compartmentalized in separate places, and we all have our separate missions, we sometimes don't work together well."

That means identifying "all the stakeholders, what money is being spent where, what kind of success rates we have and where are we not doing enough," Fox said.

What's needed In particular, Fox said, is to develop stronger partnerships



with tribal authorities, who are also struggling to attack the scourge of meth and other substances on reservations.

"Meth is so devastating to a community, to a family, to children," said Alexis MacDiarmid, an addiction counselor at the Helena Indian Alliance.

Zoe Barnard, an administrator for the Department of Public Health and Human Services, called the economic burdens associated with substance abuse alarming.

From 2010 to 2014, she said, there were \$714 million in charges for hospital admissions in Montana because of substance abuse. About a fifth of that amount was charged to the taxpayer-funded Medicaid program.

Sen. Diane Sands, a Democrat from Missoula, said the summit sought to bring awareness about the state's drug problems and to help fellow legislators understand the need for more resources, particularly for drug treatment programs.

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