

Fighting the opioid scourge in American coal country

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Ryan Brown grew up playing sports and the cello, shooting games of pool in his basement, surrounded by friends.

Two weeks before his 28th birthday, Ryan died in the bathroom of a department store. Alone.

He was killed by a heroin overdose, yet another victim of the scourge ravaging American communities, most acutely throughout economically depressed, former industrial regions of the country.

"I don't want one more person to die. I'm coming out of the closet about addiction," Ryan's mother, Cece Brown, told AFP.

Perhaps nowhere is America's opioid crisis more severe than in Ryan's native West Virginia, a mountainous state of less than two million people west of the nation's capital. Coal was once king here, but now is in decline with little to replace it, leaving the local economy badly damaged, and Wal-Mart as the state's biggest employer.

It is a place where most of those looking for hope leave in search of opportunity, and where those without hope often turn to drugs.

Opioids permeate entire communities, with devastating effects: 150 of every 1,000 babies are already addicted at birth, suffering painful withdrawal symptoms.

In Huntington, a city in the state's northwest corner portrayed as the epicenter of the nationwide crisis, 28 people overdosed—two fatally—on a single day last August after injecting heroin laced with fentanyl, a dangerous synthetic opioid.

"This epidemic doesn't discriminate," the town's mayor Steve Williams told AFP. "Our youngest overdose was 12 years old. The oldest was 77."

Shining a light

In Cece and Bobby Brown's small house on a side street of the state capital Charleston, the loss of their younger son feels like a fresh wound. Both stress Ryan had none of the stereotypical signs of a drug user. He excelled at math, won a college scholarship, made friends easily and loved to crack jokes.

But he came home after his second year at the University of West Virginia addicted to heroin. His parents only found out when he collapsed of an overdose in the bathroom.

Despite years of treatment, and a long period when his life seemed on track, two years ago he went out to the shopping mall with a friend, and never came back.

Their willingness to talk and shine a light on the problem, despite the continuing stigma that addicts and their families face, is the tip of the spear in a new strategy to battle the scourge.

From painkillers... to heroin

The vast majority of heroin users nationwide resorted to that drug after becoming addicted to powerful pain medications like oxycodone,

according to the US Drug Enforcement Agency.

The highly addictive narcotics flooded into West Virginia in mind-boggling numbers for years, and unlike heroin were distributed in the open, with the help of "pain clinics" that weren't overly strict about writing prescriptions, and pharmacies that made no effort to keep tabs on how many pills went out the door.

Among those addicts are many older, retired coal miners, who were injured on the job but continued working with the help of pain medication.

When their prescriptions were cut off after authorities finally cracked down on the supply—they turned to heroin, sometimes smoking rather than injecting it.

But arresting traffickers and users, suing drug companies and distributors and shutting down pharmacies that pumped out pills, has not been enough to stem the flow of drugs.

'Full arsenal'

"We can't arrest our way out of this problem"—that is the new mantra of all those involved in the fight.

The economic incentives for dealers are powerful: one kilogram of fentanyl, for instance, costs \$5,000 and makes a million tablets sold at \$20 each for a gain of \$20 million.

And there are too many facets to the crisis: the overwhelmed jail and foster care systems; the shortage of treatment options and struggles with health insurance coverage; the job prospects of former addicts with a felony on their record.

A new DEA pilot program called the 360 Strategy is working with law enforcement and community groups to divert addicts into treatment rather than jail, and educate about the dangers of prescription drugs and heroin.

Despite the stepped-up fight, the numbers state-wide don't look good: deaths are up, it still has the highest overdose rate in the country, and 43 percent of people imprisoned last year had a substance abuse issue so acute they needed immediate medical attention.

"Right now under any measurement we are in the midst of a downward spiral and failing miserably," Huntington's mayor told AFP. "I am not putting lipstick on a pig."

Attacking a scourge of this magnitude, he says, will require a "full arsenal"—including talking about the problem.

Heartbreak

Ryan's mother Cece says she wants people to know opioid addiction can happen to anyone, but that there is hope.

That hope is sometimes hard to see on the streets of Huntington, where one police officer told AFP "90 percent of what we do is drug related."

One addict being arrested, described the devastation in his life: "I've lost the place I stayed at, I've lost a lot of good friends," he said. "Now that I come to think about it, it's ruined my life a lot."

Winfield police chief Bobby Eggleton spoke of the heartbreak and toll it takes on officers who repeatedly treat the same addicts, like one young couple who overdosed in a car at a gas station, their three-year-old daughter in the back seat.

More treatment facilities are key, he said.

One young woman who overdosed on that fateful day in August was saved, along with 25 others, by an emergency injection of naloxone, which can stop an overdose in its tracks. It is now standard equipment for police and emergency medical personnel.

Six months later, she was finally accepted into a medically-assisted treatment program. But the call came too late: she died two days before.

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