

# DE-LAP Zone

A Message from the Delaware Lawyers Assistance Program

## A Cocktail That Can Kill

By Carol P. Waldhauser, Executive Director

“It happened without any warning, a sudden wave of terror,” Jane recalled. “I was sitting in my law office and my heart was pounding so fast I could not catch my breath. As I tried to get to the outer-office, my feet were unstable. I thought that I was having a heart attack!” While in the emergency room, Jane tested negative for any type of heart problem. However, she did suffer from anxiety attacks. Accordingly, Jane was prescribed a central nervous system (CNS) depressant in the form of a barbiturate. Soon, the anxiety attacks all but disappeared.

Today, however, Jane suffers from another problem. Believing that she had been prescribed a “miracle drug,” Jane began taking more than the prescribed amount of the CNS. If Jane was experiencing difficulty in coping with life events, she popped a few extra pills. When Jane wanted to feel normal, she found herself not only popping a few more pills, but also using a combination of drugs to achieve a certain mood of normalcy. Equally as dangerous, Jane did not cut back on her consumption of alcohol. A risky cocktail indeed; plus, one that can kill!

### The Problem

Generally, medicines are prescribed to treat a medical condition, to relieve pain, and to make us feel better. Simply put, prescriptions are powerful drugs and the side effects can be dangerous—especially when used incorrectly. Alan I. Leshner, Ph.D., Director of the National Institute on Drug Abuse, states: “Most people who take prescription medications take them responsibly; however, the non-medical use of abuse of prescription drugs remains a

serious public health concern. Certain prescription drugs—opioids, central nervous system (CNS) depressants, and stimulants—when abused, can alter the brain’s activities and lead to dependence and possibly addiction.”

Alarming, more deaths and injuries are caused by the abuse of prescription drugs than from the use of all illegal drugs combined. Furthermore, this abuse is not discriminatory.

Research indicates that:

- Fifty percent of older adults regularly use over-the-counter medicine. One out of every four adults over the age of 60 takes four or more prescribed medications at once. One-third of older adults take medications prescribed by more than one doctor, and 77 percent of this group do not discuss with one doctor the medications prescribed by another.
- According to a report published by The National Center on Alcohol and Substance Abuse (CASA) between 1993 and 2005 the proportion of college students abusing Vicodin and other opioids went up 343 percent, or about 240,000 individuals. The numbers increased 450 percent, or by 170,000 students for tranquilizers such as Xanax and Valium, and 93 percent, or 225,000 students, for stimulants including Adderall.

Supporting further the misuse of prescription drugs, Joseph A. Califano Jr., chairman and president of CASA, the National Center on Alcohol and Substance Abuse at Columbia University states, “I wouldn’t be surprised if right now at this point in time, there are more kids abusing prescription drugs than abusing marijuana.”

### Commonly Abused Prescription Drugs

Although any prescription drug can be misused and/or abused, the big three are:

(1) Opioids (Narcotics); (2) CNS Depressants (Tranquilizers); and (3) Stimulants.

**Opioids:** Opioids (a.k.a. narcotics) are commonly prescribed because of their effective analgesic or pain-relieving properties. Medications in this class include, but are not limited to, morphine, codeine, oxycodone (OxyContin), propoxyphen (Darvon), hydromorphone (Dilaudid), and meperidine (Demerol).

This group of prescribed medications acts by attaching to specific proteins (called opioid receptors) in the brain, spinal cord, and gastrointestinal tract. When these drugs attach to specific opioid receptors, they can block the transmission of pain messages to the brain. Opioids can cause euphoria by affecting the brain regions that mediate what we perceive as pleasure.

The possible consequences of opioid use and abuse can result in tolerance for the drug. In other words, this means that users must take higher doses to achieve the same initial effects. Long-term use can also lead to physical dependence and addiction—the body adapts to the presence of the drug and physical withdrawal symptoms occur as use is reduced or stopped. Symptoms of withdrawal include, but are not limited to, restlessness, muscle and bone pain, insomnia, diarrhea, vomiting, cold flashes, and involuntary movements. When opioids are taken exactly as prescribed, they can be used to manage pain effectively.

### **CNS Depressants (Tranquilizers):**

This class is comprised of substances that can slow normal brain function. CNS depressants are useful in the treatment of anxiety and sleep disorders. Among the medications that are commonly prescribed for this purpose are:

- Barbiturates – include mephobarbital and Nembutal, which are used normally to treat anxiety, tension, and sleep disorders.
- Benzodiazepines – include diazepam (Valium), chlorodiazepoxide HCl (Librium), and alprazolam (Xanax), which are used normally to treat anxiety, acute stress reactions, and panic attacks.

There are many CNS depressants and most act on the brain by affecting the neurotransmitter gamma-aminobutyric acid (GABA). In other words, neurotransmitters are brain chemicals that facilitate communication between brain cells. GABA works by decreasing brain activity. More specifically, different classes of CNS depressants work in their own way to increase GABA activity in order to produce a calming effect that is beneficial to those suffering from anxiety or sleep disorders.

This class has the potential for abuse and should be used only as prescribed. When an individual uses such drugs long-term, their body will develop tolerance for the drugs and larger doses will be needed to achieve the same initial effects.

Furthermore, insofar as CNS depressants work by slowing the brain's activity, when an individual stops taking them the brain's activity can rebound and race out of control, possibly leading to seizures and other harmful consequences. Consequently, someone who is thinking about discontinuing CNS depressant therapy or who is suffering withdrawal from CNS depressants should speak with a physician or seek medical treatment before so doing.

**Stimulants:** Stimulants are a group of drugs that enhance brain activity—they cause an increase in alertness, attention, and energy that are accompanied by elevated blood pressure and increased heart

rate and respiration. This group is used to treat asthma and other respiratory problems, obesity, neurological disorders, and a variety of other ailments.

Today, commonly known stimulants include dextroamphetamine (Dexedrine) and methylphenidate (Ritalin). Their chemical structures increase the norepinephrine and dopamine in the brain. For that reason the consequences of stimulant abuse can be dangerous. Stimulants can be addictive in that individuals begin to use them compulsively.

### **A Cocktail That Can Kill**

One of the most ignorant and serious mistakes people make is drinking alcoholic beverages when taking medicine. Alcohol is a depressant. It increases the effects of some drugs to a degree much greater than if either drug were taken alone. It can also lead to fatal overdoses when used with other depressants such as tranquilizers and barbiturates. Often it is ignorance and/or stupidity, not intent, that is the cause of drug overdose deaths that claim the older and younger,

the rich and the poor, the famous and not famous. "Every year there are accidental deaths of people who overdosed with antidepressants and, say, sleeping pills and alcohol," says Dr. Robin Dea, M.D., regional director of mental health services for Kaiser Permanente in Northern California.

Moreover, as an attorney, you need to be particularly vigilant in having your medications monitored. And, if you are on medication—you must get off the alcohol not only for your well-being, but you owe it to your clients. If you believe that you (or someone you know) may have a problem with prescription drugs, contact the confidential service of The Delaware Lawyers Assistance Program (DE-LAP) at (302) 777-0124 or 1-877-24DELAP or e-mail [cwaldhauser@de-lap.org](mailto:cwaldhauser@de-lap.org). ☒