Seniors and Prescription Drug Misuse and Addiction

Michele Leith
Office of Attorney General Mark R. Herring



Seniors and Prescription Drugs

- Americans 65 years of age and older make up less than 15 percent of the population, but they consume more than 30 percent of ALL prescribed medications.
- America has 4 percent of the world's population, but consumes 80 percent of the world's opioids.
- An enormous amount of opioid painkillers are handed out to seniors





Most Commonly Prescribed Medications for Seniors BENZODIAZEPINES

• Prescription Drugs used to treat anxiety, panic attacks, or insomnia. They include medicines such as diazepam (Valium), alprazolam (Xanax), clonazepam (Klonopin), and lorazepam (Ativan). A person can become addicted if the medicine is taken for a long period of time.

OPIOIDS

- Pain Relievers available legally by prescription, such as oxycodone (OxyContin[®]), hydrocodone (Vicodin[®]), codeine, morphine, fentanyl, and many others.
- Heroin is an opioid drug made from morphine.



Seniors are at Greater Risk of Prescription Drug Addiction and Abuse

- Seniors have more medical issues that result in more medication prescriptions.
- Prescription pain medications can easily become less effective over time, due to tolerance, therefore seniors seeking relief may increase medication dosages.
- Seniors might go to multiple doctors, with different complaints that lead to multiple prescriptions that the individual doctors are not aware of.



Seniors are at Greater Risk of Prescription Drug Addiction and Abuse

- Seniors are subject to serious cognitive decline and forgetfulness.
- As we age, capacity for processing medications is reduced decreased ability to metabolize and increased brain sensitivity
- Seniors are especially vulnerable to serious drug-related effects that arise from mixing one drug with another.
- Prescription drugs may have a negative impact on older livers, kidneys and brains and digestive tracts.



- "Prevention Tactics" periodical reports that Prescription Drug Abuse is present in 12 to 15% of elderly individuals who seek medical attention.
- According to Johns Hopkins Medical School, the number of Americans over the age of 50 who abuse prescription drugs is projected to rise to 2.7 million in the year 2020. This is a 190% increase from the 2001 figure of 910,000.



Signs of Prescription Addiction Among Seniors

- Appears to be over sedated, disoriented or impaired Poor Hygiene
- Changes in appetite or eating patterns
- Physical balance challenges when they are physically capable
- Mood swings, personality changes, depression, isolation
- Requesting / demanding narcotic medications at medical appointments
- Stating their medications have been lost or stolen (multiple times)

Signs of Prescription Addiction Among Seniors

- Regularly requesting early prescription refills
- Suspected "doctor shopping" recent / continuous changing doctors and / or pharmacies OR multiple prescription drug prescribers (Primary Care, Physician Assistants, Specialists, Pain Management) without feasible reasons
- Constant concern / excuses / reasons for needing their medication
- A history of substance addiction or received substance abuse treatment in the past

Life Events May Also Lead to Addiction...

- Retirement
- Financial Stressors or Loss of Income
- Death / Loss of Spouse, Family Member, Close Friend, Neighbor, Pets
- Family Conflict
- Relocation Home of Family / Friends or Assisted Living Community
- Physical / Mental Health Decline or Diagnosis
- Elder Abuse / Neglect Victimization



WE CAN FIGHT SENIOR PRESCRIPTION DRUG ADDICTION TOGETHER!





When you Suspect Potential Prescription Drug Misuse / Addiction in a Loved One...

- COMMUNICATION to gain information and insight into present needs/issues AND builds a trust
- Maintain communication with others who caring for your loved one other family members, hired caregivers, medical personnel
- Stay Connected know what medications are taken and what they are taken for
- Monitor medication intake to ensure medications are taken properly and as prescribed
- Encourage and support personal self care / empowerment



When you Suspect Potential Prescription Drug Misuse / Addiction in a Loved One...

- Accompany individual to medical appointments
- Inform medical professionals of ALL medications and dosages they are currently taking especially during annual check-ups strive to keep medical professionals updated on medication / dosage changes
- Ensure methods to put safe guards in place to control access to medications to prevent taking too much / not enough, mixing up or neglecting to take medications
- Remind to avoid alcohol consumption when taking sedatives and painkillers



When Signs of Prescription Drug Misuse / Addiction are Present...

- Consult with prescribing physician(s) immediately
- Inquire with medical professionals about psychological tests to check for mood and / or behavior disorders
- Discuss concerns with the senior if possible
- Check into substance abuse treatment services and resources specifically for seniors
- Many insurance plans cover addiction service programs determine which ones are available through the senior's coverage

YOU ARE NOT ALONE!



2017 Virginia Board of Medicine Regulations

- The Virginia Board of Medicine voted to adopt new regulations that address the safe prescribing of opioids and buprenorphine by health care practitioners in the Commonwealth.
- The regulations also give prescribers a descriptive template for effective prescribing habits to ultimately produce best patient outcomes.
- The opioid prescribing regulations address three common types of pain: Acute pain (often from injury or minor illness), pain resulting from surgery and chronic pain. The regulations prescribe limitations on the number of days opioids should be prescribed while maintaining a physician's discretion to exceed in cases where medically necessary. The BOM also addressed the prescribing of buprenorphine, used to treat opioid addiction, to ensure Virginians struggling with an opioid use disorder have every opportunity to successfully manage their disease.



Strengthening of Prescription Drug Monitoring Program (PMP)

• Efforts to strengthen this program may ensure safety to patients by alerting medical professionals of opioid abuse or overly prescribed.

2017 HB2165 mandates that all opioid prescriptions will be transmitted to pharmacies electronically by 2020 and creates a workgroup to study how to implement this change.



NALOXONE

Naloxone is a medication approved by the Food and Drug Administration (FDA) to prevent overdose by opioids such as heroin, morphine, and oxycodone. It blocks opioid receptor sites, reversing the toxic effects of the overdose. Naloxone is administered when a patient is showing signs of opioid overdose. The medication can be given by intranasal spray, intramuscular (into the muscle), subcutaneous (under the skin), or intravenous injection.

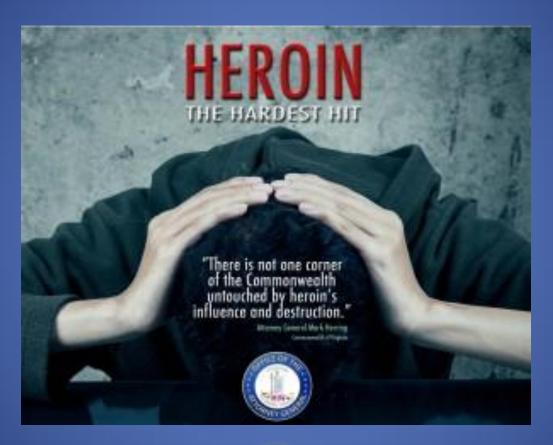
New Naloxone Laws in Virginia (2017)

• SB848 and HB1453 allow community organizations to possess and dispense naloxone to those that they train to use it.

COMMUNITY OUTREACH AND EDUCATION

- Community outreach coordinators in each region of the state working with local law enforcement, medical professionals, education personnel, service providers, community / faith groups, and prevention coalitions to provide outreach and education focusing on this topic.
- Hardest Hit documentary available for viewing online, free DVDs available by emailing HardestHit@oag.state.va.us
- Partnering with law enforcement agencies and prevention coalitions to sponsor drug take-back events. Information on OAG website about proper storage and disposal of prescription meds and planning drug takebacks

Heroin: The Hardest Hit





HARDEST HIT VA.com

NEW WEBSITE Provides Videos, Resources, Facts and Assistance to those suffering from addiction and their loved ones.

Let's take a look...



"I hope that anyone who is struggling themselves, or who has a friend or family member fighting a substance abuse disorder, will visit the site and try to get connected to recovery and treatment resources in their area. We have to make sure that Virginians in every corner of the Commonwealth know that there is help, there is life after an addiction, and there is hope in recovery."



Attorney General, Mark Herring



Contact Information

Michele Leith

Community Outreach Coordinator Northern Virginia Office of the Attorney General Mark R. Herring 10555 Main Street, Suite 350 Fairfax, Virginia 22030

mleith@oag.state.va.us

703.359.1121

