

Short Communication

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Opioids, Marijuana & Alcohol: A Losing Trifecta



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Introduction

(Figure 1) Louise Stanger is a speaker, educator, licensed clinician, social worker, certified daring way facilitator and interventionist who uses an invitational intervention approach to work with complicated mental health, substance abuse, chronic pain and process addiction clients. As a professional interventionist, clinician and social worker for over 40 years, I have never seen a trend quite like this. Every day I get inquiries from nice folks just like you and me whose hearts are breaking over an addiction or substance abuse problem.



Figure 1.

Last week I received a note from a new mother who was concerned about the father of her child smoking marijuana and popping xanax constantly. Then the wife of a high-powered executive who has chronic pain and is addicted to gambling, booze and pills called in a panic; no one will believe the wife of a powerful man is concerned for her husband who shows signs of more than a few process disorders. Calls like these keep coming in. It doesn't help that I open my front door, walk onto the sidewalk and take in a whiff of cannabis caught in the wind. I walk less than half a block to discover bars, liquor stores, all

night eateries and tiny markets. There's also head shops and green fluorescent signs for marijuana dispensaries. CVS and Walgreens at the corners remind me that addiction often starts with a well-meaning prescription!

If that were not enough I often see a young man in the early morning with a black knapsack on his back walk across La Cienega Blvd to talk to the homeless man lying on the street with his six pack by his side. The transaction is quick and to the untrained eye nonexistent. The homeless person pulls out some cash and a baggy crosses hand. But addiction is not limited to the homeless, nor is it limited to my neighborhood tucked away in a corner of West Hollywood, Ca (Figure 2). We are a nation in crisis, in chaos due to the confluence of these three substances - alcohol, opioids and marijuana - as all three have us hostage. It's a perfect storm of problems that is causing our country to experience a public health emergency.



Figure 2.

According to the World Health Organization, a public health emergency is "an occurrence or imminent threat of an illness or health condition... caused by an epidemic or pandemic disease... that poses a substantial risk of a significant number of human facilities or incidents or permanent or long-term disability." This

means that it affects all of us - communities big and small - in our country. Not to sound the alarm too early, however, with marijuana being legalized in 8 states and more to follow, rates of alcoholism rising, and the opioid epidemic roiling in states like Ohio and West Virginia, it is hard not to be overwhelmed. Just this past week President Trump declared the opioid crisis a national emergency, reports NBC News. "We're going to spend a lot of time, a lot of effort and a lot of money on the opioid crisis," Trump told reporters.

I've written at length about the history of opioids, as well as potent opioids such as fentanyl and carfentanil and their destructive power. However, with this crisis in the spotlight there's a lot of new information coming out of how this problem came to a head. For instance, CBS News reports that the National Survey on Drug Use & Health found that "92 million US adults, or about 38 percent of the population, took a legitimately prescribed opioid like OxyContin or Percocet in 2015." The same survey found that 11.5 million people, or nearly 5 percent of the population, misused prescription opioids they obtained through illicit means. This coupled with the fact that there were over 259 prescriptions written in 2012, which is enough to give nearly every person in the US regardless of their age their own prescription bottle, and in 2015 more than one third of all adults were prescribed opioids (Figure 3).



Figure 3.

To give you an idea of how addictive these pills are, a study authored by Bradley Martin, a professor of pharmaceutical evaluation and policy at the University of Arkansas for Medical Science, found that with a one-day supply of prescription pain killers, there's about a six percent chance "of being on opioids for a year or longer." A five-day supply jumps to 10 percent. And a ten-day supply bumps the user to a 20 percent chance they'll still be using a year later. It doesn't take a data scientist to see where the trend is going. With numbers like these, and the ease and availability for Americans to get their hands on a

prescription opioid drug, the odds of developing an addiction are stacked against them. This is what the president is talking about when he declared a public health emergency. As such, the New York Times reports that 96 lives are lost every day from an opioid overdose.

Opioids are only one piece of the three-part equation. Marijuana is in the news for legalization. On August 12th, Attorney General Jeff Sessions was featured in a piece for the LA Times, saying he has "serious concerns" about the effects of legalization. Before he became Attorney General, Sessions was a Republican Senator from Alabama where his tough stance on marijuana sent a clear message about how he would handle the issue at the federal level. In fact, he called marijuana's effect on the user "only slightly less awful" than heroin's.

As national legalization looms, only time will tell the impact it will have on the country for now, a recent Gallup poll reported in the Daily Wire found that 1 in 8 Americans smoke marijuana. The overall conclusion of the poll is that "recreational and medicinal marijuana usage and experimentation has increased and will predictably increase within the next few years as states continue to legalize it." Alcohol appears to be on the rise as well. According to a piece in the Daily Mail on August 9th, new data from the National Institute on Alcohol Abuse and Alcoholism found that "12.7 percent of the population - or roughly one in eight Americans - are alcoholics." This constitutes a 49 percent increase over the 11-year study period. The rise is attributed to increase usage amongst women, elderly and ethnic minorities, the report says.

The rise in these three issues suggests a public health crisis is omnipresent. I'm an educator at heart, and reading about these rising tides as well as observing in my daily work with clients and families, I'm concerned for the long-term health and vitality of our nation. How can we begin to address such a harrowing substance abuse problem that is impacting millions of people? We must put our ideological differences aside and begin on the national, state and local level to create policies and programs which support health and wellness. We must have a conceptual framework that spells out goals, objectives and directives for folks at all levels. We must fund research which allows us to develop best treatment practices.

Insurance companies must work hand in hand with behavioral health care specialists to find the best treatment options that are equitable and fair to all Americans. Health care providers, doctors, nurses and administrators must educate their patients and offer alternative pain management solutions. We must develop educational programs that are consumer friendly that speak to the risks involved for all these. In short, we must, fund, educate and inform. As a nation, we must be willing to treat these addictions with wholehearted vigor and determination.



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