OPIOIDS

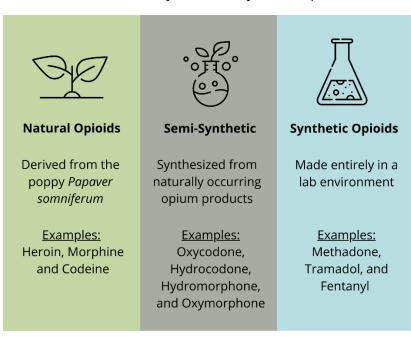
COAST TO FOREST RESOURCES

Thank you for exploring our fact sheet series. To learn more about substance use and mental health, check out our other <u>fact sheets</u>. To find local resources, check out the <u>Coast to Forest County-Specific Resource Guides</u>. For a variety of national and state-focused resources, please visit our <u>Helplines & Practical Tools page</u>.

WHAT ARE OPIOIDS?

Opioids, also known as narcotics, are a class of drugs that provide pain relief.¹ Opioids may be prescribed by a healthcare provider to manage moderate-to-severe pain after surgery or for chronic diseases like cancer.² Opioids are controlled substances in the U.S., meaning that they are regulated by the government and have varying potential to be misused. It is important to note, that while the terms opioid and opiate are often used interchangeably, opioids refer to all synthetic, semi-synthetic, and natural opioids while opiates refer only to natural opioids.³

Natural vs. Semi-Synthetic vs. Synthetic Opioids^{1,3}



THE OPIOID CRISIS:

- 1990: First wave begins. Most overdose deaths related to prescription opioids⁴
- 1995: American Pain Society launched "pain as the fifth vital sign". Unfortunately, this led to a reliance on opioids for management⁴
- 2010: Second wave of the opioid crisis begins. Most overdose deaths related to Heroin⁵
- 2013: Third wave begins. Most overdose deaths related to synthetic opioids⁴
- Current Data suggests that a fourth wave is beginning that is characterized by polysubstance use, with a noted increase in stimulant and/or opioid use. 15 Research is underway to better understand this new wave and pinpoint when it began.

FACTS AND STATISTICS:

National:

- In 2020, 68,630 deaths involved opioids⁶
- In 2020, 56,516 overdose deaths reportedly involved synthetic opioids (excluding methadone)⁶

Oregon:

- On average 5 Oregonians die each week of opioid overdose⁷
- From July 2019-June 2020 heroin and fentanyl were involved in 29.7% and 23.7% of overdose deaths, respectively⁸
- From 2019 to 2020, the number of fentanyl related deaths increased from 75 to 2988

COMMON NAMES:

Smack, Horse, Mud, Brown Sugar, Junk, Black Tat, Big H, Paregoric, Dover's Powder, MPTP (New Heroin), Hillbilly, Heroin, Lean or Purple Drank, OC, Ox, Oxy, Oxycotton, Sippin Syrup¹

PRESCRIPTION NAMES:

- Oxycodone:
 - OxyContin®, Roxicodone®, Oxecta®, Oxaydo®, Xtampza ER®, Percodan®, Targiniq®, Xartemis XR®, Oxycet®, Roxicet®, Tylox®, Percocet®⁹
- Hydrocodone-Acetaminophen:
 - Vicodin®, Norco®, Lorcet®, Zamicet®, Verdrocet®, Lortab®, Anexsia®, Co-Gesic®, Hycet®, Liquicet®, Maxidone®, Norco®, Xodol 10/300®, Zolvit®, Zydone®⁹
- Morphine:
 - Duramorph®, Infumorph P/F®, MS Contin®, Oramorph SR®, Avinza®, Arymo ER®, Kadian®, Morphabond®, Roxanol-T®⁹
- Fentanyl Cirtrate:
 - o Actiq®, Fentora®, Abstral®, Lazanda®, Onsolis®, Sublimaze®⁹
- Fentanyl: Duragesic®, Subsys®⁹

FORMS:

- Tablets, pills, capsules¹
- Skin patches¹
- Powder or chunks ranging in color from white to brown or black¹
- Liquid that may be consumed orally, via injection or suppository¹
- Lollipops¹

HOW OPIOIDS WORK:

Opioids work by binding to opioid receptors found primarily in the central nervous system (CNS), resulting in reduced cell excitability and neurotransmission.¹⁰ Thus, opioids do not treat the cause of pain, but rather work by decreasing the perception of pain.

SHORT TERM HEALTH EFFECTS:

- Drowsiness¹⁰
- Confusion¹⁰
- Nausea¹⁰
- Constipation¹⁰
- Euphoria¹⁰
- Slowed breathing¹⁰
- Overdose¹⁰

LONG TERM HEALTH EFFECTS:

- Overdose¹⁰
- Breathing problems during sleep¹⁴
- Constipation¹⁴
- Insomnia¹⁴
- Tooth decay¹⁴
- Tolerance, dependence, and opioid use disorder (OUD):
 - o Tolerance: Reduced response to a substance with repeated use³
 - Dependence: Adaptation to a substance that produces symptoms of withdrawal when the substance use is halted³
 - OUD: Follows opioid tolerance and dependence and involves a pattern of opioid use that results in significant impairment and distress³

WITHDRAWAL SYMPTOMS:

- Early symptoms:
 - Watery eyes, runny nose, yawning, and sweating¹
- Later symptoms:
 - Restlessness, irritability, loss of appetite, nausea, tremors, severe cravings, severe depression, vomiting, increased heart rate and blood pressure, and chills alternating with flushing and excessive sweating¹

This fact sheet was developed by the Oregon State University Coast to Forest team, a collaboration of the College of Public Health and Human Sciences Center for Health Innovation and Extension Service Family & Community Health program. We would like to thank the H 310 students for their contributions. For more information and to explore local resources, check out the Coast to Forest County-Specific Resource Guides.

Last updated 8/1/2024. https://c2f.oregonstate.edu/

• Given the symptoms of withdrawal, a person may need medical supervision to ensure their safety during the process.¹⁶

OVERDOSE:

- An overdose can be intentional or unintentional, and is when a large enough dose of an opioid is taken to have serious adverse health effects, including life threatening symptoms or death¹
- Physical signs:
 - Constricted (pinpoint) pupils, cold clammy skin, confusion, convulsions, extreme drowsiness, and slowed breathing¹
- In the event of a suspected overdose:
 - o Call 911
 - Administer CPR if breathing has stopped¹¹
 - Administer naloxone¹¹
 - To find naloxone in your county, please visit our <u>Resource Guides</u>. For general information please visit <u>SAMHSA's page on naloxone</u>.

OPIOID USE DISORDER TREATMENT:

- Studies have shown that a combination of medical and therapeutic interventions, such as Medication Assisted Treatment (MAT) is the most effective treatment¹²
- Medications
 - Buprenorphine (Suboxone®, Subutex®), Methadone, and extended-release Naltrexone (Vivitrol®)¹³
- Therapeutic interventions:
 - Cognitive Behavioral Therapy (CBT)¹²
 - Contingency Management¹²
 - Motivational interviewing¹²
 - Multidimensional Family Therapy¹²
- Treatments in development:
 - o Vaccines¹³
 - Transcranial Direct Current Stimulation¹

RESOURCES:

SAMHSA National Helpline: 1-800-662-HELP

• SAMHSA's National Helpline is a free, confidential, 24/7, 365-day-a-year treatment referral and information service (in English and Spanish) for individuals and families facing mental and/or substance use disorders

"Talk. They Hear You." Mobile App: https://www.samhsa.gov/talk-they-hear-you/mobile-application

• A phone app geared towards parents or caregivers to help facilitate conversations with children about drug use

CDC Opioid Overdose Prevention Guidelines: https://www.cdc.gov/overdose-

prevention/prevention/index.html

• Includes in-depth opioid and pain management prescribing resources for healthcare providers and patients

CDC National Center for Injury Prevention and Control - Opioid Overdose:

https://www.cdc.gov/drugoverdose/index.html

• A gateway website to access the CDC's latest data and critical updates about drug overdoses

REFERENCES:

- 1. Drug Fact Sheet: Narcotics
- 2. About Prescription Opioids
- 3. <u>Commonly Used Terms</u>
- 4. A Brief History of the Opioid Epidemic and Strategies for Pain Medicine
- 5. Understanding the Opioid Overdose Epidemic
- 6. <u>Drug Overdose Death Rates</u>
- 7. Reducing Opioid Overdose and Misuse
- 8. 2021 Opioid overdose in Oregon: Report to the Legislature
- 9. Opioids
- 10. Prescription Opioids DrugFacts
- 11. Opioid Overdose
- 12. Treatment
- 13. Effective Treatments for Opioid Addiction
- 14. A Review of Potential Adverse Effects of Long-Term Opioid Therapy: A Practitioner's Guide
- 15. <u>The fourth wave of the US opioid epidemic and its implications for the rural US: A federal perspective</u>
- 16. Withdrawal