

Rx for Prescription Drug Abuse

By Pilar Kraman

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rescription medications are vital for many individuals suffering from anxiety, pain and various other medical conditions. There are millions of individuals

nationwide, however, who buy, sell, steal and abuse these same drugs for recreational purposes.

The diversion of prescription drugs into the illegal market costs states billions of dollars in areas such as law enforcement, health care, social services and court costs. In 2001, The National Community Pharmacists Association estimated the impact of prescription drug abuse on U.S. health care costs to be more than \$100 billion. An important issue for policy-makers nationwide is how to control the diversion of prescription drugs into the illegal market while maintaining their availability for legitimate use.

According to the 2002 National Household Survey on Drug Use and Health, 6.2 million people aged 12 or older were current illicit users of prescription drugs. They abused pain medications such as Percocet, Lortab and OxyContin; tranquilizers such as Valium and Xanax; stimulants, like Ritalin; and sedatives, including sleeping pills.

The number of people misusing prescription drugs has increased significantly in recent years, according to the survey. In 1990, for example, 628,000 individuals abused pain medications for the first time. By 2000, that number had increased to nearly 3 million. Similarly, the number of admissions to substance abuse treatment services for prescription pain relievers increased 168 percent between 1992 and 2001, according to the Substance Abuse and Mental Health Services Administration. And the number of emergency room visits related to the use of pain medications also increased 168 percent between 1994 and 2002, while visits related to the use of benzodiazepines (such as Valium and Xanax) increased 42 percent.

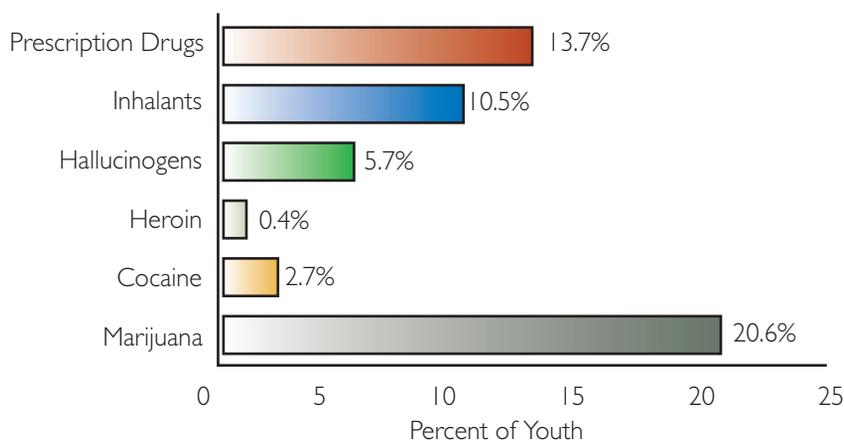
Due to the relative ease of obtaining prescription drugs and the common misconception that they are “safe” to abuse, the trend of prescription drug abuse by our nation’s youth is steadily increasing. The 2002 national survey showed that youth abuse prescription drugs more frequently than heroin, cocaine and

every other illicit drug except marijuana (see Figure 1).

Several drugs have received a lot of media attention in recent years – particularly the pain medication OxyContin; benzodiazepines, such as Xanax; and the stimulant Ritalin. Many substance abuse treatment facilities across the country report that between 30 percent and 90 percent of new admissions are OxyContin-related. One study found that one-fifth of college students interviewed had taken Ritalin at least one time. Campuses nationwide report that these drugs are as common as marijuana and are heavily relied upon for late night studying.

Compared to drugs like heroin and crack cocaine, prescription

Figure 1. Percent of Youth Aged 12 to 17 Who Have Used Illicit Drugs in Lifetime, 2002



Source: Results from the 2002 National Household Survey on Drug Use and Health: National Findings, 2003.

drugs are unique because they can be obtained through legal channels. These drugs are attractive to would-be substance abusers because they are manufactured legitimately and are prescribed by physicians, giving them the illusion of safety.

In reality, however, the addiction and withdrawal associated with the abuse of many prescription drugs can be more harmful than that associated with illegal drugs. In 2001, 67 deaths in Virginia were attributed to oxycodone. The same year, Florida counted 957 deaths due to overdoses of the prescription pain medications oxycodone and hydrocodone, compared to 328 deaths due to heroin overdoses. A recent report by the Florida medical examiner’s office showed that the trend is continuing. More Floridians died from prescription drug overdoses than illegal drugs in 2002.

Diversion Methods

Prescription drug diversion is a lucrative business because many pills sell on the street for as much as 10 times what they are worth retail. An 80 mg OxyContin pill, for example, costs about \$6 at a pharmacy and sells for \$65 to \$80 on the street. Although state officials and the federal government have regulat-

ed prescription medications for more than 30 years, they still end up on the street through the following methods:

- **Doctor shopping.** The most popular method of obtaining prescription drugs for illegal use, the practice of “doctor shopping” involves a patient going to various physicians complaining of a wide array of ailments in order to get controlled substances. In Arizona, for example, an investigation by the U.S. Drug Enforcement Administration found that an individual used a legitimate medical condition to get prescriptions from doctors in two states. The individual collected between 8,000 and 9,000 pills during one year and sent them to Maryland to be sold on the street.
- **Illegal Internet pharmacies.** In recent years, the Internet has also become a tool for the illegal diversion of prescription drugs. Rogue sites, many operating under the guise of a legitimate pharmacy, provide controlled substances to individuals without prescriptions. This is particularly troubling with respect to the 30 million youth nationwide with Internet access.
- **Pharmacy theft.** Prescription drugs can be stolen at any point from the manufacturer to the patient. Thefts are on the rise largely due to the drastic increase in prescription drug abuse and high street prices. There have been accounts of prescription samples stolen from doctors’ offices and medications stolen from patients’ homes. Recently, the instances getting the most attention have been pharmacy burglaries involving theft of prescription pain killers.
- **Prescription forgery.** Forgery occurs in one of two ways: One is making or stealing blank prescription pads in order to write fake prescriptions. Forgery also occurs when legitimate prescriptions are altered, typically to increase the quantity.

- **Illicit prescribing by physicians.** While the vast majority of health care professionals never use their access to controlled substances to provide drugs for illegal use, the profits enjoyed by unscrupulous physicians are often at the expense of taxpayers. In one state, for example, 61 overdose deaths were connected to 16 physicians each billing Medicaid for \$1 million or more over three years. This has serious fiscal implications for the Medicaid program, which cost states more than \$110 billion in fiscal year 2003. In fact, fraud contributes to a \$1 billion loss annually in Medicaid spending on prescription drugs.

Solutions

In order to ensure the availability of prescription medications for serious medical conditions, such as cancer, while preventing their availability to substance abusers, states can actively attempt to prevent the diversion of prescription drugs to the illegal market. In some areas of the country, declines in diversion have been attributed to the combination of control methods, such as education, legislation and prescription regulation. States can work to prevent the diversion of prescription medications through the following strategies:

- **Prescription drug monitoring programs.** Currently, 20 states operate a prescription drug monitoring program. Some of these programs require physicians to use multiple-copy, state-issued prescription pads that contain serial numbers. One copy is sent to the state regulatory agency after the prescription is filled. Electronic prescription drug monitoring programs, which have become more common in the last decade, require pharmacists to transmit prescription information via computer to the designated state agency.
- **Promoting drug education for health care professionals.** Unfortunately, many physicians get little to no training in

Policy Options for Controlling Prescription Drug Diversion

| Policy Option | Pros | Cons |
|---|--|--|
| Prescription drug monitoring programs <ul style="list-style-type: none"> • Multiple prescriptions • Electronic transmission | Shortens investigation time Detects and deters diversion | Privacy concerns Possible impact on prescribing patterns |
| Drug education for health care professionals <ul style="list-style-type: none"> • Seminars • Model guidelines • Continuing Medical Education programs | Promotes “best practices” for patient care Can lower expenses, especially associated with Medicaid | Vast number of issues competing for providers’ attention |
| Theft and fraud controls <ul style="list-style-type: none"> • Medicaid fraud control • Pharmacy theft prevention • Internet pharmacy regulation | Protects the availability of drugs for legitimate medical need Safeguards public health and privacy | Ineffective if not timely Requires fiscal and human capital |

Commonly Abused Prescription Medications

| Type | Opioids | CNS* Depressants | Stimulants |
|--------------------|---|--|--|
| Examples | OxyContin, Darvon, Vicodin, Dilaudid, Demerol, Lomotil | Mebaral, Nembutal, Valium, Librium, Xanax, Halcion, ProSom | Dexedrine, Ritalin, Meridia |
| Purpose | Post-surgical pain relief, management of acute or chronic pain, relief of coughs or diarrhea | Anxiety, tension, panic attacks, acute stress reactions, sleep disorders, anesthesia | Narcolepsy, attention-deficit hyperactivity disorder, depression, obesity, asthma |
| Actions | Attach to receptors in the brain and spinal cord, blocking transmission of pain messages to the brain | Slow brain activity, producing a calming effect | Enhance brain activity, causing an increase in alertness, attention and energy |
| Short-term effects | Blocked pain messages, drowsiness, constipation, depressed respiration | “Sleepy” and uncoordinated feeling during the first few days as the body becomes accustomed (tolerant) to the effects, but these feelings diminish | Elevated blood pressure, increased heart rate, increased respiration suppressed appetite, sleep deprivation |
| Long-term effects | Potential for tolerance, physical dependence, withdrawal and/or addiction | Potential for tolerance, physical dependence, withdrawal and/or addiction | Potential for addiction |
| Possible problems | Severe respiratory depression or death following a large single dose | Seizures following a rebound in brain activity after reducing or discontinuing use | Dangerously high body temperatures or irregular heartbeat after taking high doses, cardiovascular failure or lethal seizures |

Source: National Institute of Drug Abuse Research Report Series, Prescription Drugs: Abuse and Addiction, NIH Publication No. 01-4881, 2001.

* Central Nervous System

drug abuse. A 1999 survey of primary care physicians found that there was a general lack of training in medical school about addiction and the signs of substance abuse, and that most physicians did not feel prepared to diagnose it. States can encourage and promote education and partnerships with law enforcement and health care professionals to ensure the proper use of prescription medications.

- *Controlling theft and fraud by preventing pharmacy theft, prosecuting illegal Internet pharmacies and enforcing Medicaid controls.* There are a variety of efforts at the local, state and federal levels and by the private sector to control the theft of drugs and to prevent fraud. RxPatrol, for example, brings together the pharmaceutical industry with law enforcement in order to protect pharmacists, prevent theft, and assist law enforcement investigations. The information clearinghouse, funded by Purdue Pharma LP, allows pharmacy staff to submit comprehensive theft report information via the Internet to be analyzed by RxPatrol staff and disseminated to law enforcement agen-

cies. Based on the information collected, RxPatrol conducts vulnerability assessments to develop profiles of pharmacies that may be susceptible to theft and develops strategies to prevent victimization.

States have the majority of the power to regulate the prescribing and dispensing of prescription drugs. When diversion control methods combine the appropriate use of regulation with education, the medical use of prescription medications can continue to provide relief for the millions of people suffering from serious conditions.

For more information on the problem, download CSG’s new publication, *TrendsAlert: Drug Abuse in America – Prescription Drug Diversion*, at www.csg.org (keyword: drug diversion). The report provides an overview of the various ways in which prescription drugs are diverted to the illegal market and the options available for states to help combat the problem.

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