Generation Rx: The Rising Abuse of Prescription and Over-the-Counter Drugs International Narcotics Control Caucus

Written Testimony of Derek Clark
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Clinton Substance Abuse Council
Clinton, Iowa

Recently, there was a local high school student that was caught by his mother stealing her heart medication. This boy was crushing the medication and snorting it in the hopes of getting high, he didn't. This mother became suspicious when she noticed her medication was disappearing and confronted her son, he admitted his actions. The boy is currently receiving treatment. Unfortunately, this is a growing trend with an uncommon ending.

Clinton, Iowa, the State of Iowa, and the country face an array of drugs of abuse; many have plagued us for decades. One of the fastest growing threats to youth today is the abuse of prescription and over-the-counter drugs. 15% of CCSD 11th grade students report having used prescription medications not prescribed to them at least once in the last 30 days compared to 7% of all Iowa 11th grade students. 11% of CCSD 11th grade students report having used over the counter medications different from the directions at least once in the last 30 days compared to 7% of all Iowa 11th grade students. There are several reasons for this new phenomenon.

- The perception that these drugs are not harmful or dangerous.
- They have easy access to the drugs; they are stealing them, buying them, or getting a prescription for themselves or a family member.
- Individuals are "doctor shopping" or "pharmacy shopping" to obtain large amounts of medications.
- User generated video websites show youth how to get high and with what over-the-counter drugs to use.

Prescription Drug and Over the Counter Drug Abuse Data

Prescription drug and over-the-counter drug abuse is a relatively new problem and there is not a lot of historical data. The Iowa Youth Survey only began asking students about their prescription drug and over-the-counter drug abuse/misuse since 2005 and they only have 2 questions included, see below. Law enforcement only recently began tracking this data and treatment is still trying to find a universal way of reporting this data.

The **Iowa Youth Survey** is prepared by the Iowa Department of Human Rights, Division of Criminal & Juvenile Justice Planning and Statistical Analysis Center. The State of Iowa conducts this survey every 3 years and surveys 6th, 8th, and 11th graders. The survey includes questions about the students' behaviors and attitudes/beliefs, as well as perceptions of their peer, family, school and neighborhood/community environments.

Youth Prescription Drug Abuse

15% of CCSD 11th grade students report having used prescription medications not prescribed to them at least once in the last 30 days compared to 7% of all Iowa 11th grade students (IYS 2005).

Students reporting using prescription medications not prescribed to them at least once in the past 30 days.							
	6 th Grade	8 th Grade	11 th Grade				
Clinton Community School District (Clinton, Iowa)	3%	6%	15%				
Clinton County, Iowa	2%	4%	9%				
State of Iowa	2%	3%	7%				

The above data was collected by the Iowa Youth Survey, 2005.

Youth Over-the-Counter Medication Abuse

11% of CCSD 11th grade students report having used over the counter medications different from the directions at least once in the last 30 days compared to 7% of all Iowa 11th grade students (IYS 2005).

Students reporting using over-the-counter medications different from the directions at least once								
in the past 30 days.								
	6 th Grade	8 th Grade	11 th Grade					
Clinton Community School District (Clinton, Iowa)	2%	4%	11%					
Clinton County, Iowa	2%	2%	7%					
State of Iowa	1%	3%	7%					

The above data was collected by the Iowa Youth Survey, 2005.

Calls involving Abuse/Misuse of Substances of Abuse (excluding suicide attempts)

The data shows a notable increase over the years in abuse/misuse of prescription (i.e. hydrocodone) and over-the-counter medications (specifically the dextromethorphan-containing products such as Coricidin and cough syrups). However, health care providers/hospitals are not mandated to call the poison center in cases of poisoning/overdose so there is probably hundreds of cases out there that are not reported.

Substance	2002	2003	2004	2005	2006	2007
Benzodiazepines (ie. Valium®, Xanax®)	48	68	74	87	102	123
Oxycodone (ie. Oxycontin®, Percocet®, Percodan®)	12	11	12	15	23	35
Hydrocodone with APAP (ie. Vicodin®, Lortab®,	19	25	41	43	33	74
Lorcet®)						
Coricidin HBP® & cough syrups (containing	28	55	67	57	91	113
dextromethorpham or DM)						
SSRI's (ie. Paxil®, Zoloft®, Prozac®)	38	35	47	35	35	42

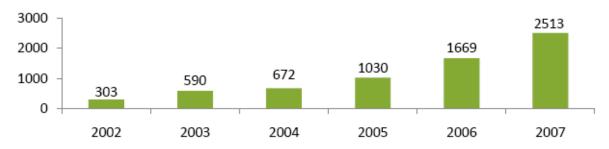
Methylphenidate (ie. Ritalin®)	8	10	13	17	14	9
Propoxyphene (Darvocet®, Darvon®)	13	11	13	10	9	11
Morphine	3	4	9	3	5	10
Methadone	3	3	7	10	7	13
Tramadol (Ultram®)	0	3	10	11	10	22
Other Narcotic (ie. Dilaudid®, hydrocodone other)	4	15	16	14	21	21

The above data was collected by the Iowa Statewide Poison Control Center, 2007.

Public Calls to Identify Unknown Pain Pills

Public calls to the Statewide Poison Control Center to identify unknown pain pills have increased 643% since 2002 in Iowa.

Pain Reliever Drug ID Calls from Iowans (Iowa SPCC-CYs)



Community Strategy

CSAC involved the community in developing the Strategic Plan by holding monthly meetings to discuss local substance abuse problems, emerging drug use trends, solutions designed to address that problem, and outcomes from programs and projects. When needed task forces and ad hoc workgroups were formed to allow individuals to focus on that issue, whether it is addressing a specific problem or implementing a project or program. In addition to the regular meetings, CSAC also conducted focus groups with local law enforcement, substance abuse treatment providers, mental health professionals, human service professionals, and community members. When individuals were not available to meet they completed a key informant survey to ensure the widest amount of people had their voice included in CSAC's Strategic Plan.

Through this process, the top three most widely used drugs in Clinton are alcohol, tobacco, and marijuana but the trend data shows that usage rates are going down. However, Clinton has a growing problem with prescription drug abuse.

CSAC's Strategic Plan would address Clinton's prescription drug abuse problem by:

- Developing social marketing campaigns to change the perception of risk associated with prescription drug abuse
- Implementing environmental strategies to reduce access to prescription drugs
- Educating the community and targeted segments on the dangers and problems
- Facilitating participation in the online prescription drug tracking system being developed by the State of Iowa.

CSAC uses the Strategic Prevention Framework when conducting their community planning and decision making process. This 5 step process 1) needs assessment 2) capacity building 3) planning 4) implementation 5) evaluation, ensures the focus of CSAC is always current with local trends and being as effective as possible with the resources available to them.

Projected Outcomes

Community level change that CSAC expects to see include evidence of increased perception of harm, decreased age of onset of substance abuse, increased parental disapproval of substance use, and decreased youth use rates. CSAC uses environmental strategies,



social marketing campaigns, training opportunities for local professionals and the community, and community forums to affect change on prescription drug abuse, underage drinking, marijuana use, and illicit drug use.

CSAC has a Drug Free Communities Support Program grant and will achieve the following outcomes:

- By Sept. 2012, CC youth report a 15% increase in perception of harm for non-medical use of prescription drugs.
- By Sept. 2012, youth will report a 10% reduction in illegal use of prescription drugs.
- By Sept. 2012, arrest records will show a 15% reduction in prescription drug related arrests
- By Sept. 2012, 95% of Clinton medical facilities will participate in the prescription drug abuse prevention program.

Logic Model: Prescription Drug Abuse									
Theory of Change: Implementing multiple strategies to address prescription drug abuse will likely delay use and use less.									
Problem Statement			Strategies	Activities		es			
Problem	But why?	But why here?			Short Term	Intermediate	Long-Term ¹		
Increasing number of youth & adults are abusing prescription drugs.	Perceived as safe.	Because prescriptions are prescribed by a doctor people believe the side effects are known and safe	Provide Information	Develop and implement social marketing campaign	Research most abused drugs and side effects	Development of campaign Implement campaign.	By Sept. 2012, CC youth report a 15% increase in perception of harm for non-medical use of prescription drugs.		
15% of CCSD 11 th grade students report having used prescription medications not prescribed to them at least once in the last 30 days. Compared to 7 th of all Iowa 11 th grade students. IYS, 2005.	Doctors hand out prescriptions easily. Lack of awareness on local doctor shopping problem and practices that reduce/support doctor shopping. No central database or control to ensure no doctor shopping. Easy access Easy to steal/obtain. Provide Information Reduce access Provide Information Provide Information		Increase awareness of problems among medical professionals	Work with pharmacists to create information for medical professionals (including ER staff)	Create social marketing to educate medical professionals on this issue.	By Sept. 2012, youth will report a 10% reduction in illegal use of prescription drugs.			
		Reduce access	Create multiple doctor reporting process.	Work with medical professionals to report if patient is under the care of another physician to report to pharmacist.	Develop a way to track form	By Sept. 2012, arrest records will show a 15% reduction in prescription drug related arrests.			
		Develop and Implement a social marketing campaign	Research most abused drugs and side effects	Develop campaign to restrict access to prescript. Drugs.	By Sept. 2012, 95% of Clinton medical facilities will participate in the prescription drug abuse prevention program.				
		Research the dangers of getting your prescriptions online.	Develop and Implement a social marketing campaign	Create a social marketing campaign with medical professional and law enforcement.					

Clinton Substance Abuse Council

CSAC's mission statement is "The Clinton Substance Abuse Council, through collaboration, works to develop solutions to community problems that are related to substance abuse issues through the process of facilitation, cooperation, and communication."

The Clinton Substance Abuse Council (CSAC), founded in 1989, is a community-based coalition focused on substance abuse and related issues. CSAC addresses substance abuse and related issues through community planning and development, program planning and management, and education. Wide cross sections of Clinton County residents are involved in CSAC from the mayor of Clinton to high school students to local business to law enforcement, etc. etc..

For the past 18 years, the CSAC has met monthly to address substance abuse and related issues within our community, addressing all cultural groups in the community. Through our planning, we have identified problems and gaps within the community and found programs and/or solutions to fill these problems/gaps. In addition to the CSAC community meetings and CSAC Board of Directors meetings, CSAC has numerous short-term and long-term task forces and workgroups to focus on specific issues or complete specific duties. In order to ensure each group has a complete picture of the issue, all groups are culturally representative of the community.

The CSAC Board of Directors is made up of 11 community members to supervise all functions and duties of CSAC and staff. Duties include: fiscal oversight and management; ensure that the organization has proper internal controls and policies to safeguard, promote and protect the organization's funds and other assets; assist in the strategic planning process. Members include: executive from Mercy Medical Center; Mayor of Clinton, a pastor from a local church, local businessman, County Attorney, etc.

Clinton, Iowa

The City of Clinton is located on the eastern-most tip of Iowa along the Mississippi River, within Clinton County. Clinton has a population of 27,086 (2005, Census). Clinton's population is composed of: persons under 5 years old 6.6%; Persons under 18 years old 24.6%; persons older than 65 years old is 17%. There are 52.3% females and 47.7% male. Clinton County is a predominantly Caucasian community, 93.8%, with the second largest group being African-American, 3.2%, the third closest is Asian Americans, 0.8%. Clinton is classified by the US Census as an urban cluster.



Clinton County has a higher rate of unemployment (4.0%) compared to the State (3.3%) (February, 2007, IA Workforce Development). Clinton Community School District's free and reduced lunch rate, for grades 1st thru 6th, is 53.52%. And the Clinton Community School District has 44.4% of their students fall in the economically disadvantaged category whereas the

State rate is 30% (2005, www.schoolmatters.com). Also, Clinton's population has declined by 7.2% since 1990, whereas the state's population has grown by 7.4% since 1990.

ATTACHMENTS

Please join the Clinton Substance Abuse Council, for

A Dose of Prevention: Combating Prescription & Over-the Counter Medicine Abuse in Clinton Thursday, March 27, 2008, 6:30 PM

According to the 2006 National Survey on Drug Use and Health, more teens abuse prescription drugs than any illicit drug except marijuana-more than cocaine, heroin, and methamphetamine combined.

You already know about illegal street drugs like marijuana, meth, and cocaine, but do you know that every day adults and YOUTH abuse prescription and over the counter drugs to get high? This townhall meeting will provide the answers to many questions that you may have about prescription and over the counter drug use. We have a panel of experts here to answer all of your questions.

Guests will include:

Senator Charles Grassley United States Senator

General Arthur Dean Chairman & CEO of CADCA

Director Gary Kendell

Director of the Governor's Office of Drug Control Policy

Andrew Fish

Senior VP, Legal & Government Affairs, CHPA

Mike Wolf, Welcome

Clinton County Attorney

Sheriff Rick Lincoln, Moderator

Sheriff of Clinton County

Panel of Local Professionals including:

Clinton Police Department

Darlene Fox, M.S., R.N., School Nurse, Clinton High School

Trisha Atkinson, BA, ACADC Adolescent Treatment Counselor, New Directions

Cindy Ryan, RPh, Pharmacist, Jewell-Osco

Dr. Wade Lenz, Family Practitioner, Medical Associates



Town Hall Meeting

Thursday, March 27, 2008, 6:30 PM CCC-Graphic Arts & Technology Center, Room 10 1951 Manufacturing Drive, Clinton, Iowa

Seats are limited, call 563-241-4371, or email kristin@csaciowa.org to reserve your seat. This is a free event, and open to the public.

This event is made possible by: Clinton Substance Abuse Council, ASAC/New Directions, Senator Grassley's Office, Community Anti-Drug Coalitions of American (CADCA), and Consumer Healthcare Products Association (CHPA), Iowa ODCP, ONDCP, IDPH, and a DFC grant.



Clinton woman faces felony charges in methadone scheme

By Steven Martens | Tuesday, March 04, 2008

CLINTON, Iowa — A Clinton woman has been charged with six felony counts for allegedly scheming to fraudulently obtain prescriptions for methadone.

Lisa A. Fullerton, 39, was arrested last week after an investigation by the Clinton Police Department, according to court records.

A search of her medical history showed that Fullerton had been treated by several doctors between 2004 and 2007 for chronic pain, usually back pain, according to court records.

In November 2005, Fullerton allegedly called Dr. Steven Hanas in DeWitt and told him she had dropped more than

100 methadone tablets in the toilet, but Hanas refused to replace them, according to court records.

In April 2006, Fullerton allegedly told Hanas that she had left her bottle of methadone pills in California after visiting family there. Hanas prescribed her 180 tablets, but Fullerton later admitted to investigators she had not been to California, according to court records.

Investigators also believe Fullerton went to see Dr. Luis Barrios in Clinton in September 2007 while she still was under the care of Hanas, and that she saw Barrios nine times in three months, obtaining prescriptions for pain killers such as hydrocodone and fentanyl while she was still getting methadone prescriptions from Hanas. Neither doctor knew Fullerton was seeing another doctor, according to court records.

Fullerton was charged with six counts of prohibited acts, a Class C felony punishable by a maximum of 10 years in prison. She was being held Monday in the Clinton County Jail on \$50,000 bond. A preliminary hearing has been scheduled for March 10.

Steven Martens can be contacted at (563) 659-2595 or smartens@qctimes.com.

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PRESS RELEASE

January 12, 2006

In an attempt to demonstrate and quantify the problem of "doctor shopping" and "pharmacy shopping" in Iowa, the Iowa Board of Pharmacy Examiners has begun an ongoing study into the matter. The Board's initial inquiry began last fall when compliance officers for the Board randomly visited a small number of Iowa pharmacies to review prescription records. The purpose of the survey was to identify "drug-seeking" persons who had utilized 3 or more pharmacies and 3 or more physicians to obtain excessive quantities of narcotics and other addictive controlled substances.

The Board's initial inquiry revealed 85 patients having drug-seeking behavior. Fifty-five percent of the patients were female and forty-five percent were male. The age range was 19 to 63 and with the average age being 40. The patients resided in 32 cities scattered across the state from Sioux City to Fort Madison. The inquiry also revealed 153 other patients who may be drugseekers. The records of those individuals are continuing to be evaluated by Board staff.

The findings of the Board's initial survey include the following examples:

- A 49 year-old female from Carroll who utilized five pharmacies and multiple prescribers to obtain nearly 1,200 tables of Oxycodone in one month.
- A 34 year-old male from Winterset who utilized three pharmacies and seven prescribers to obtain controlled substances including Hydrocodone.
- A 47 year-old female from West Des Moines who utilized three pharmacies and nine prescribers to obtain controlled substances including Hydrocodone.
- A 40 year-old male from Fort Dodge who utilized 3 pharmacies and four prescribers to obtain controlled substances. This individual allegedly forged prescriptions for Dilaudid.
- A 40 year-old male from Des Moines who utilized nine pharmacies (including pharmacies in Cedar Rapids and Coralville) and twenty prescribers to obtain controlled substances including Oxycodone, Hydrocodone, and Morphine.
- A 47 year-old female from Mason City who utilized three pharmacies and four prescribers to obtain controlled substances including Hydrocodone. This individual had insurance but also paid cash for some of the prescriptions.
- A 34 year-old female from Des Moines who utilized six pharmacies and eight prescribers to obtain controlled substances including Hydrocodone and Oxycodone.
- A 19 year-old female from Des Moines who utilized three pharmacies and twelve prescribers to obtain controlled substances including Hydrocodone and Oxycodone.
- A 40 year-old female from Des Moines who utilized three pharmacies and ten prescribers to obtain controlled substances.

- A 39 year-old male having multiple Iowa addresses who utilized seven pharmacies and 18 prescribers to obtain controlled substances. This individual had insurance but also paid cash for some of the prescriptions.
- A 42 year-old male from Davenport who utilized six pharmacies and 13 prescribers to obtain controlled substances including excessive amounts of Oxycodone.
- A 22 year-old female from Davenport who utilized six pharmacies and **25** prescribers to obtain controlled substances including Hydrocodone.
- A 27 year-old female from Burlington who utilized five pharmacies and 23 prescribers to obtain controlled substances.
- A 45 year-old female from Iowa City who utilized six pharmacies and eight prescribers to obtain controlled substances including Hydrocodone.
- A 43 year-old female from Fairfield who utilized three pharmacies and nine prescribers to obtain controlled substances including Hydrocodone.
- A 45 year-old male from Fort Madison who utilized seven pharmacies and four prescribers to obtain controlled substances including Hydrocodone.
- A 26 year-old male from Keokuk who utilized ten pharmacies and **41** prescribers to obtain controlled substances including Hydrocodone and Oxycodone.
- A 32 year-old male from Davenport who utilized eight pharmacies and 23 prescribers to obtain controlled substances including Hydrocodone and Oxycodone.
- A 50 year-old female from Davenport who utilized six pharmacies and 28
 prescribers to obtain controlled substances. This individual is an Iowa Medicaid
 patient.
- A 50 year-old female from Dubuque who utilized six pharmacies and ten prescribers to obtain controlled substances. During the month of January 2005, she had 14 prescriptions for Hydrocodone filled at four different Dubuque pharmacies.
- A 36 year-old female from Marion who utilized nine pharmacies and five prescribers to obtain controlled substances including Amphetamines.
- A 42 year-old male from Vinton who utilized **20** pharmacies and **16** prescribers to obtain controlled substances.
- A 63 year-old female from the state of Colorado who utilized **18** Iowa pharmacies to obtain excessive controlled substances. This individual was reported to travel with a prescriber who wrote prescriptions while in the pharmacy with the patient.
- A 40 year-old male from Cedar Rapids who utilized 14 pharmacies and 12 prescribers to obtain controlled substances including Hydrocodone.
- A 26 year-old female from Sioux City who utilized six pharmacies and 16 prescribers to obtain controlled substances including Hydrocodone.
- A 22 year-old female from Kingsley who utilized ten pharmacies and **24** prescribers to obtain controlled substances. This individual obtained a total of ½ gallon of Phenergan & Codeine Liquid in May 2005 by having nine prescriptions written by seven different doctors filled at seven different pharmacies.

- A 48 year-old male from South Sioux City who utilized eight pharmacies and five prescribers to obtain controlled substances including Hydrocodone. This individual was admitted into drug treatment in July 2005.
- A 31 year-old female from Cedar Rapids who utilized 12 pharmacies and 20 prescribers to obtain controlled substances. A pharmacy "hot-line" alert from a dentist stated that "she likes to call dentists after hours."
- A 29 year-old female from Cedar Rapids who utilized 12 pharmacies and 22 prescribers to obtain controlled substances including Hydrocodone.
- A 39 year-old female having multiple names and multiple Iowa addresses who utilized 18 pharmacies and multiple prescribers to obtain controlled substances including Hydrocodone. This individual was detected by an alert relief pharmacist who was working in various pharmacies in central and eastern Iowa.
- A 49 year-old female from Muscatine who utilized 14 pharmacies and 26 prescribers to obtain controlled substances.
- A 33 year-old male from Council Bluffs who utilized six pharmacies and 16 prescribers to obtain controlled substances including Oxycodone.

Oxycodone is a Schedule-II controlled substance and Hydrocodone is a Schedule-III controlled substance. Both drugs are highly addictive and are two of the top-abused substances in the U.S. The prescribers who were involved in these cases were physicians, dentists, and other practitioners. The pharmacies were all community retail businesses, including many well-known chain pharmacies.

This information was compiled by Board consultant Jacqueline Devine, a former inspector/investigator for the Iowa Board of Pharmacy Examiners.

Patients identified in this study resided in the following Iowa cities/towns:

Burlington Carroll Cedar Rapids Clive

Council Bluffs Creston

Davenport Des Moines Dubuque

Fairfield Fort Dodge

Fort Madison

Iowa City Keokuk Kingsley Marion Mason City

Mingo

Mount Vernon Muscatine

Perry **Robins** Sherrill Sioux City

South Sioux City

Urbandale Vinton Walcott Waukee

West Des Moines

Wilton Winterset