

The Opioid Overdose Epidemic in Kentucky

By Cecil Dunn

In the morning, when I read the newspaper and see a notice of the death of a young person, I wonder if this is another one. Is this another life cut short by a drug overdose? You may have wondered that too.

As reported by the state Office of Drug Control Policy, during 2015 a total of 1,219 Kentucky residents died of drug overdoses, over 90% of them unintentional. In 2000, that number was 246. And it's not just young adults, although those may seem the most tragic. The highest rate is for ages 35 to 44. How did we get here?



Ironically enough, part of the answer comes from the advances made in containing prescription drug abuse. Just a few years ago pain medications such as oxycodone and hydrocone were being widely abused. Changes in the manufacture of these medications and the closing of "pill mills" made these substances more expensive and harder to obtain.

Overdose deaths in Fayette County:

2012	74
2013	86
2014	112
2015	141

- Kentucky Office of Drug Control Policy

Overdose deaths in Kentucky:

2012	1032
2013	1003
2014	1069
2015	1219

- Kentucky Office of Drug Control Policy

Heroin, on the other hand, is cheap and easy to acquire. It became the preferred high, but it has qualities that also make it high-risk.

With a prescription medication, you have a substance manufactured under careful guidelines. The strength and pleasure of the high are predictable. The user stands a better chance of knowing what the results will be. Two pills this time will produce a result similar to the one they produced last time.

In 2014 the 5 states with the highest rate of overdose deaths per 100,000 population were:

West Virginia	35.5
New Mexico	27.3
New Hampshire	26.2
Kentucky	24.7
Ohio	24.6

*The lowest rate was in North Dakota at 6.3.
The national mean was 15.1*



Heroin does not have the same predictability. The buyer never knows what exactly is in that white powder, and many times neither does the seller. Various substances are used to “cut” the heroin powder to make it go farther, and that means the strength of each dose is unknowable.

It’s not that people don’t overdose on oxycodone and other drugs. They do. To make a comparison, in 2002 there were zero overdose deaths in Kentucky involving heroin. There were 289 involving heroin in 2015. For overdoses involving prescription opioids the numbers are 149 in 2002, and 605 in 2015.

Many overdose deaths involve multiple drugs. Any drug someone takes might not produce an overdose, but combining that drug with others can be lethal.

Recently there has been an upsurge in substances that are added to heroin that make it dangerously stronger, substances such as Fentanyl, a powerful synthetic opioid used for extreme pain, such as that

suffered by cancer patients. It is 50 times stronger than heroin. In 2015 Fentanyl was involved in 420 overdose deaths in Kentucky, 34% of the total. In August of this year there were a rash of overdoses in central Kentucky, southern Ohio and elsewhere involving heroin laced with Carfentanil, another synthetic opioid. The DEA says that Carfentanil is 100 times as powerful as Fentanyl. Two milligrams can knock out a 2000-pound African Elephant. A dose the size of a few grains of salt can kill a human.

Today’s heroin addicts are playing a form of Russian roulette. Many of them are smart and experienced enough to make some decent judgments about risk, but when they are impaired a small mistake can have enormous consequences.

All of these factors make treatment and recovery even more urgent. It is also important to have readily at hand an overdose antidote such as naloxone (Narcan). It blocks the effects of opioids in the body during an overdose and a few minutes can mean the difference between life and death.

What Is 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. - Substance Abuse and Mental Health Services Administration

Note: Pharmacies in Kentucky can now distribute naloxone without a prescription. Training is required. Ask your pharmacist.

When a Son Dies of an Overdose

Thousands of parents have lost sons and daughters across the country to an epidemic of accidental drug overdoses.

Cathy Fennelly tried to save her son from heroin addiction.

For eight years, she tried to help him get sober. She told him he couldn't come home unless he was in treatment. It tormented her, knowing that he might be sleeping on the streets, cold at night.

But nothing worked. In 2015, she found him dead from an overdose on her front step.

"No matter how many detoxes I put him in, no matter how many mental facilities; I emptied out my 401(k), I sold my jewelry," she says. "This will never get easier. Never."

- National Public Radio

Health Crisis or Crime?

Drug overdoses and drug abuse in general constitute a major public health crisis in this nation, especially in Kentucky. Somewhere along the line we convinced ourselves that the criminal justice system is a good means to combat this health emergency. By now it should be apparent that locking up more and more people for longer and longer sentences does little to solve the problem, and public sentiment has moved strongly in that direction:

"The public appears ready for a truce in the long-running war on drugs. A national survey... finds that 67% of Americans say that the government should focus more on providing treatment for those who use illegal drugs such as heroin and cocaine. Just 26% think the government's focus should be on prosecuting users of such hard drugs."

- Pew Research Center

Hope Harnessed After Heroin Homelessness

My family is pretty normal, middle-class, and my parents are still married. But, I started drinking consistently when I was 12 because I was always isolated and picked on a lot. Then it moved into drug use and stealing from my parents and sisters. In

the height of my active addiction, nothing would have stopped me from using heroin. My family pushed me away because they didn't know what else to do. By this point in my life, the constant craving of drugs skewed my addicted mind and I didn't care if I lived or died.

A couple years ago I was dropped off at the Hope Center and stayed at the Emergency Shelter for a little over a week. Having been homeless, this was what I needed. Then, I got into the Recovery Program for Men. I learned the skills to be in recovery and not be dependent on heroin.

After making amends, every day a little more trust comes back. I don't ask much of my family and they don't question my motives anymore. I have two young sons and I'm in college working toward a degree in drug and alcohol counseling. I now have hope thanks to the Hope Center.

**"Hope Center
literally changed
my life." – Chris**



Photo: Michael Clevenger, The CJ

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