ACCORDING TO THE US. SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (SAMHSA)...

- Prevention of mental and/or substance use disorders and related problems in children, adolescents, and young adults is critical to America’s behavioral and physical health.
- Behaviors and symptoms that signal the development of a behavioral disorder often manifest 2 to 4 years before a disorder is present.
- People with a mental health issue are more likely to use alcohol or drugs than those not affected by a mental health problem.

ACCORDING TO THE INSTITUTE OF MEDICINE AND NATIONAL RESEARCH...

- A $1 investment in early treatment and prevention programs yields $2 to $10 worth of savings in health costs, criminal and juvenile justice costs, educational costs, and lost productivity.

OPU=Opiate Use Disorder MDE=Major Depressive Episode NMPO=Non-medical Prescription Opiate

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Among adolescents, opiates are second in illicit drug abuse to marijuana. Of growing concern, in addition to recent increases in heroin use, is use of nonmedical prescription pain medications (i.e. hydrocodone [Lorcet, Vicodin, Norco]; oxycodone [OxyContin]). Over four million Americans 12 years of age and older report current use of NMPO - approximately 500,000 of whom are between 12 and 17 years of age, and 1 million between 18 to 25 years of age. Alarmingly, since 2000 there has been a four- to five-fold increase in mortality and substance treatment admissions related to NMPO use. In the United States, 18- to 25-year-olds demonstrate the highest rates of heroin use. The risk of initiating heroin use is 13 times higher in adolescents and young adults with previous NMPO use, with peak age of heroin initiation being 17-18 years of age. Those who initiate NMPO use between 10-12 years of age are nearly 18 times more likely to transition to heroin use. Those who begin NMPO use at 13-15 or 8-9 years of age have about a 15 times greater risk of transitioning to a four-to-five-fold increase in mortality heroin use. Adolescents and young adults often transition from NMPO to heroin due to the high cost, reformulation, decreasing availability, and increasing restrictions on pain medications. Progression from NMPO to heroin is associated with more rapid development of dependence, which is further associated with lower probability of treatment success. The rates of prescribing opiates for adolescents and young adults have doubled in the past 20 years. In addition to obtaining a prescription, teens may also access these medications through diversion from friends, peers and/or family.

“Why are we spending so much money on suicide prevention and the opioid epidemic, which are 4th stage* of illness? For true system-level impact to reduce the number of people suffering from addiction and other mental health problems focusing on prevention and 1st stage of mental illness* is paramount for success!” Sharon Engdahl, Ex. Dir. AMWA

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*For more information on prevention/signs & symptoms of 1st, 2nd, 3rd, & 4th stages go to our website and click on Resources