

Ending Addiction

Overcoming opioid addiction is possible with community support.

Maureen Lyn Bernard | Special to the Jewish News

Jenny G. is a 26-year-old Jewish woman who lives with her parents and works part time as she looks for a more permanent job.

She is also a heroin addict.

Jenny has six months clean time, which she attributes to the Narcotics Anonymous meetings she attends four to five times a week and the counseling she receives to address her relationship with her on-again-off-again boyfriend of eight years, Aaron. Aaron has six months clean time as well.

When they tried heroin for the first time, together, it was supposed to be a one-time experience. Yet all these years later, heroin has become the third wheel in their relationship, having damaged almost every other relationship in their lives.

Often perceived as a problem limited to those with little education, family support and resources, heroin addiction actually spans all ages, genders, races, socio-economic statuses and locations. The fastest rising rates of heroin usage are in the predominantly white suburbs of the Midwest among people ages 18-44.

There are no readily available statistics that break down substance use by religion, yet anecdotally among professionals who work with this population, we are seeing subtle increases in Jewish young people, such as Jenny and Aaron, seeking help.

There is a lot of conversation swirling around about what is causing this increase in heroin availability and use, how big of a problem it really is, how best to fight it and how best to treat the individual who wants to be in recovery.

In the nightly news, somewhere in this country, there is a story about an illicit drug arrest. *60 Minutes* has featured two segments in as many months about the nation's heroin and opioid crisis. And crisis it is: The number of accidental overdoses involving heroin has increased by 286 percent from 2002 to 2013; and drug overdose deaths are now considered the leading cause of injury death in the U.S., above those from motor vehicle accidents and firearms. In Oakland County, the number of heroin overdose deaths has doubled from 2013 to 2014.

The majority of first-time users are also addicted to prescription painkillers; approximately one in every 20 Americans over the age of 12 has taken a painkiller for non-medical usage.

Jenny's boyfriend, Aaron, had been

prescribed painkillers following a surgery for a sports-related injury. These narcotic painkillers are members of the opioid family of narcotics and are extremely effective in managing pain by attaching to specific proteins called opioid receptors, which then block the transmission of pain messages to the brain. They can also cause a relaxed feeling, a sense of euphoria.

Prolonged use can lead to an increased tolerance; this, in turn, leads to the need for more and more of the drug to achieve the desired effect. Because the body becomes accustomed to the presence of the drug, withdrawal symptoms can develop when it is suddenly stopped.

Aaron's physician felt it was time for him to taper off the medication; eventually, he stopped prescribing the quantities Aaron insisted he needed. A friend suggested he try heroin, a seemingly less expensive alternative to getting these pills on the street.

Much of the conversation between politicians and policy makers is focused on the connection between prescription drug abuse and heroin abuse; people are 40 times more likely to be addicted to heroin if they are addicted to prescription painkillers. Yet it is important to remember that not everyone who is prescribed painkillers and takes them responsibly is destined to become a heroin addict.

Jenny and Aaron have another friend, Brian, who suffered a similar sports-

related injury and subsequent surgery that Aaron did. Brian was prescribed the same narcotic painkillers, but he didn't like the way they made him feel. He adhered to treatment recommendations, actively sought out ways to reduce the pain without medication and followed directions on how to slowly taper his medication use in order to minimize withdrawal symptoms.

Heroin addiction is initially physical as the body desires more and more to get the same effect; yet it quickly takes over the brain's ability to function effectively because the brain comes to believe that heroin is needed for its very survival.

There were many times over the last eight years that Jenny and Aaron wanted to stop using, and tried; yet the powerful pull of addiction caused them to doubt they could ever feel normal without it.

Why will this time be different for them? Maybe the desire to be in recovery is stronger than the desire to use just one

more time. They are tired of burying their friends and lying to their families and themselves.

This time, Jenny and Aaron approached their recovery differently. Recovery from addiction is multi-faceted, and Jenny and Aaron started with medically supervised detoxification. They know now that detox is a good first step, not treatment. They are taking medications to help with the residual cravings and other physical symptoms while actively participating in outpatient counseling and 12-step fellowship.

Jenny says, "No matter how bad my day might be going, I try to remember that my worst day clean is better than my best day using." *

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Help Is Available

If you or a loved one is struggling with addiction, the counselors at Jewish Family Service can help. Contact the Resource Center at (248) 592-2313 for more information or an appointment. Other treatment resources can be found at Oakland County Community Mental Health Authority at (800) 350-0900 or www.OCCMHA.org.

Healing Havurah is a newly formed support group with a Jewish focus for survivors of those who died by overdose. Contact Bluma Greenwald, program director at Friendship House, at (248) 788-7878, ext. 205, or Maureen Lyn Bernard, Jewish Family Service, at (248) 592-2334 for more information.