Inhalant Abuse Continues to Rise

Most parents are not aware of the popularity and dangers of inhalant abuse. Inhalants are the common household products that are among the most popular and deadly substances young people abuse. Young people are quick to discover that common household products are inexpensive to obtain, easy to hide and the easiest way to get high. According to recent national surveys, inhaling dangerous products is becoming one of the most widespread problems in the country. If your teen is “dusting,” they may not be helping clean the house. A new trend in inhalant abuse is called “dusting.” The abuser inserts the straw into the computer dusting aerosol can and sprays it directly into his or her mouth. The result can be tragic including sudden death due to cardiac arrest. Parents and caregivers need to arm themselves with current trends in inhalant abuse and TALK with their teen(s). Young people must understand the consequences of their choices to experiment with and use these potentially deadly toxins.

Inhalants fall into three categories:

- Solvents (paint thinner, glues, gasoline)
- Gases (butane lighters, helium, propane)
- Aerosols (hair spray, whipping cream, computer dusting spray, spray paint)

Inhalant abusers use the following methods to get high:

- Sniff or snort fumes from containers
- Spray aerosols directly into the nose or mouth
- “Huff” fumes from an inhalant-soaked rag stuffed into the mouth
- Sniff fumes sprayed into a paper or plastic bag

Inhalants give the user a quick high that lasts only a few minutes. Consequently, abusers often inhale repeatedly over several hours, potentially causing unconsciousness and even death. Other health hazards linked to inhalant abuse are brain damage, bone marrow damage, hearing loss, suffocation, and heart failure.

Early recognition of inhalant abuse can make the difference between life and death for the abuser. Inhalant abusers often have chapped lips and faces, runny noses, bloodshot eyes, complaints of a numb tongue, chemical odors on their breath or clothes, paint stains on the skin or clothes, slurred speech, lack of appetite, lack of concentration, nausea, and a disoriented appearance. There is a common link between inhalant abuse and problems in school – failing grades, chronic absences, and general apathy.

Think About:

- Young people state they abuse inhalants because they are cheap and available.
- Inhalants are popular substances of abuse with potential tragic outcomes.
- Inhalants are poison toxins. This is a message young people can comprehend.
- Toxic chemicals can damage parts of the brain that control learning, movement, vision, and hearing.

Action Steps:

- Educate yourself about the dangers of inhalant abuse and monitor the inhalants in your home.
- Talk with your teen. Give him or her facts about the effects of inhalant abuse and communicate your expectations.
- Pass this information on to other parents.
- Visit www.inhalants.org for more information.

Source: Prevention Talk, Inhalant Abuse Continues to Rise, Issue Number 19, Nov. 2005

Phaming Parties

Time Magazine is reporting that “pharming parties” are a new trend among adolescents.

At “pharming parties,” young people bring medicines from home and trade them with each other in order to get high. Pills and medications used by teens or found in the family medicine cabinet are brought to parties in homes when parents are gone.

Oftentimes the medicine is left over and adults don’t know that it is missing. The term “pharming” is an abbreviation for the word “pharmaceuticals.” The pills are often taken with alcohol. Many of the adolescents at “pharming parties” are poly-drug users, meaning that they also abuse alcohol and other drugs.

Among the most prized trades are painkillers such as Oxycontin and Vicodin or antianxiety medicines such as Valium or Xanax. Attention deficit disorder drugs such as Ritalin and Adderall also have special value.

The abuse of prescription drugs has risen sharply in recent years. Columbia University’s National Center on Addiction and Substance Abuse reports that 2.3 million teens age 12 to 17 took legal drugs illegally in 2003. That is three times the number reported in 1992.

Teens point to personal or family-related stress as a major reason why they misuse prescription drugs. Sources of stressful feelings include:

- Anxiety about friendships, romantic relationships and family life.
- Angst about academic success, high school tests or college entrance exams.
- Difficulty balancing homework, after-school jobs and extracurricular activities.

The consequences for prescription drug misuse include respiratory distress, cardiac stress and seizures (all of which can lead to death), tolerance (meaning that you have to take more of the drug to achieve the desired effect), dependence and serious withdrawal symptoms.

Parents and other adults are urged to know what is in their medicine cabinets. Monitor the numbers in each container. Remove all prescriptions that are no longer being used. It’s also important to learn the signs associated with prescription and over-the-counter drug misuse and talk to their teens about the dangers of using them. Visit http://theantidrug.com/ for more information.

Sources: PRIDE Omaha, Inc., September/October, 2005; Time Magazine, July 26, 2005; ONDCP Media Campaign Flash on New Prescription Drug Misuse Info, Jan. 6, 2005
Over-the-Counter Drugs — Abuse Where You Least Expect It

Think that drug abuse among teens is limited to illegal substances like marijuana and club drugs such as Ecstasy? Think again.

If you're like most parents, you're probably not aware that a number of over-the-counter (OTC) products can potentially be abused by teens looking to get high. But it's important to educate yourself about the potential abuse of consumer products found right in your home. It is important to know the facts about OTC product and medication abuse and make a habit of closely monitoring the use of certain household substances. Talk with preteens and teens about the proper use of all medications (including those that are available over the counter) and the health risks associated with their abuse.

One category of products sometimes abused by teenagers that few parents know about is OTC cough and cold remedies. The OTC cough and cold medications available in your local pharmacy, supermarket or convenience store are safe and effective when used as directed. But some youth are drawn to an ingredient found in nearly half of these medications called dextromethorphan, or DXM. When taken in excessive doses, dextromethorphan can produce a high or cause psychoactive effects.

What is dextromethorphan or DXM?
Dextromethorphan is a cough-suppressing ingredient in a variety of OTC cold and cough medications. It is found in more than 125 OTC products and comes in various forms, most commonly in cough suppressants in caplet or liquid form.

Why are teens abusing products that contain dextromethorphan?
Dextromethorphan is a safe and effective cough suppressant when used as indicated on the product label. However, when taken in doses that far exceed the amount recommended, the ingredient may produce feelings of euphoria that some seek to get "high." A teenager looking to get high or experiment with drugs may turn to OTC cough and cold preparations that contain dextromethorphan because they are readily available at home or the local drug store. Dextromethorphan can also be purchased in a bulk powder form on the Internet. Some Web sites encourage teenagers to abuse dextromethorphan and actually offer "recipes" for the best way to achieve a high.

What does dextromethorphan do?
Depending on the dose, DXM's effects vary. Misuse of the drug creates both depressant and mild hallucinogenic effects. Users report a set of distinct dose-dependent "plateaus" ranging from a mild stimulant effect with distorted visual perceptions at low doses to a sense of complete dissociation from one's body at higher doses. If a child consumes large doses of a product containing dextromethorphan, it may cause a number of adverse effects, including impaired judgment and mental performance, loss of coordination, dizziness, nausea, hot flashes, dissociation, and hallucinations.

Another major concern is the risk incurred when abusers get high and engage in activities requiring reasonable judgment and quick reactions, like driving or swimming. The effects induced by overdose of DXM can make these activities deadly.

How can I tell if my child is abusing dextromethorphan?
You should be concerned if you notice that your child is taking excessive amounts of a cold and flu remedy, or if he or she continues to take medicine even after symptoms have subsided. Likewise, if cough and cold medications seem to disappear from the medicine cabinet or if you find packages of cough and cold preparations in the child's room or backpack, he or she may be abusing the product.

What else can I do?
Talking with teens and staying in touch with their lives are the first steps to keeping them free from abusing consumer products and medications. Following are a few basic preventative steps that you can take to help your child understand the importance of using OTC medications responsibly and help discourage abuse of dextromethorphan.

- **Talk to your child.** Speak with your children often about the importance of carefully following directions on the labels of all OTC medications. Help them understand the dangers of abusing OTC cough and cold medications.
- **Be mindful of the season.** Your child can benefit from medicinal relief of cough, cold, and flu symptoms by taking OTC cough and cold preparations according to the instructions on the manufacturer's label. But be aware if your child is using cough and cold medications outside of cold and flu season or if he or she continues to self-medicate after symptoms have subsided.
- **Check your home.** Take a quick inventory of all consumer products kept in your home. Be aware of the products in your medicine cabinet, and ask questions if you notice that any products are used frequently or disappear.
- **Monitor your child's Internet use.** Unfortunately, there are Internet sources that sell dextromethorphan in a bulk powder form or encourage teens to share their experiences with abusing dextromethorphan. These individual sites are not regulated so it becomes increasingly imperative that you be aware of where your child is getting information on the Internet, what sites he/she is spending time on, or with whom he/she may be communicating. Ask them why they think the information that appears there is true or false. Do they think the source is credible? Ensure your child's Internet time is properly supervised.


January, 2006