



Devils Youth Opioid Misuse Awareness Policy

The misuse of prescription medications, particularly opioids, has been declared a public health emergency in the United States. In 2016, more than 42,000 people were killed by opioids, and the CDC estimates that for every young adult overdose death there are 119 emergency room visits and 22 treatment admissions. That same year, 3.6% of adolescents ages 12-17 reported misusing opioids in the preceding 12 months, and two in three adults treated for opioid abuse report first using opioids before the age of 25. A 2013 study found that participants in high-injury sports are more likely to misuse opioids, and a 2017 study found that ice hockey players are at exceptionally high risk.

Risk factors for opioid misuse

- Acute and chronic pain
- Physical health problems
- Mental health or behavioral issues
- Trauma and stress
- Impulse control problems
- Other substance abuse issues
- Friends who misuse prescription drugs
- Family history of substance abuse including alcohol abuse
- Low self-esteem or feelings of social rejection

What can parents do to help prevent opioid misuse?

- Treat pain cautiously. If your child sustains an injury, talk to their doctor about non-opioid alternatives for pain management. Monitor your child's use of prescribed opioids to ensure that they are only being used as prescribed. Help them set a realistic time for recovery and ensure that they take the time they need to rest and heal.
- Talk with your children about drug use and pain management. Don't assume that your child has learned everything they need to know about drugs in health class. Make sure your teens are aware of the risks associated with opioid misuse and drug mixing, particularly if there is a history of substance abuse in your family. Let them know that sharing medications is dangerous because a normal dose for them could be fatal for someone else. Tell them clearly that you disapprove of substance misuse, and set a good example.

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- If you have any opioid medications in your house, make sure they are securely stored or dispose of them properly.
- Be aware of the media that your child consumes and the messages they are receiving about substance abuse.
- Keep your child busy and know what they are doing. Provide the support your teen needs to stay involved in activities that interest and motivate them.

Signs of opioid misuse

- Drowsiness, sleeping at odd hours, changes in sleep habits
- Clumsiness
- Constricted “pinpoint” pupils
- Flushed, itchy skin
- Weight loss, sudden appetite, changes in eating habits
- Frequent flu-like symptoms, frequent sickness, sweatiness, constipation, dry mouth
- Lack of hygiene
- Isolation from family or friends, losing interest in activities, sudden changes in friend group
- Disappearing for long periods of time, goes out every night, makes secretive phone calls
- Stealing from family, friends, or workplaces
- New financial difficulties
- Being overly energetic, talking fast and saying things that don’t make sense
- Quickly changing moods, being nervous or cranky
- Missing important appointments or deadlines, attending school on an erratic schedule, frequently breaking curfew
- Mood changes or emotional instability, lack of focus, hyperactivity, hostility

What to do if you suspect opioid misuse

- If you have reason to suspect that your teen is abusing opioids or other drugs, you will want to check their room for evidence. Besides the obvious hiding places, you should also look in flowerpots, between books on a bookshelf, inside books with the pages cut out, inside fake lipstick tubes or compacts, inside writing implements like pens and highlighters, inside OTC medicine containers (Tylenol, Advil), inside empty candy bags, and behind posters and other wall hangings.



- Talk to your pediatrician about prescribing naloxone, an overdose reversal medication, to have on hand in case of emergency.
- Before speaking with your child, make sure you are on the same page with your partner, spouse, or co-parent. Eliminate any opportunities for your child to play one parent against the other.
- Be prepared for your child to deflect by calling you a hypocrite if you have a history of substance abuse or currently use recreational drugs such as tobacco or alcohol.
- Stay calm, no matter what your child says. If you are having trouble keeping your cool, you may want to involve a school counselor, therapist, pediatrician, or other trusted adult.
- Set limits and expectations and spell out the consequences of breaking the rules. Don't set rules you cannot enforce.
- Mild opioid withdrawal can be treated with acetaminophen (Tylenol), aspirin, or NSAIDs (ibuprofen), ioperamide (Immodium), plenty of fluids, and rest. Your pediatrician may be able to prescribe medication to help ease the nausea associated with opiate withdrawal. More intense withdrawal symptoms may require hospitalization and other medications.
- Opioid withdrawal can be very uncomfortable, and even if the symptoms could be managed at home you may increase your chances of success if you place your child in the care of a physician or treatment center.
- If you suspect an opioid overdose, call 911 immediately. Signs of an overdose include loss of consciousness, unresponsiveness to stimuli, inability to speak, slow and shallow or erratic breathing, choking sounds, vomiting, limpness, clamminess, and slow or erratic pulse.

Resources

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"Look for Warning Signs of Teen and Young Adult Drug Use." Where Families Find Answers on Substance Use | Partnership for Drug-Free Kids, drugfree.org/article/look-for-warning-signs/.

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"Recognizing Opioid Overdose." Harm Reduction Coalition, harmreduction.org/issues/overdose-prevention/overview/overdose-basics/recognizing-opioid-overdose/.

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