



From the Executive Director

As we approach spring, one of my favorite seasons, the trees start to bud and come to life, grass turns green, beautiful flowers begin to bloom, providing an abundance of gratitude. I am certain no one will miss the brutal winter we experienced along with the COVID-19 pandemic, a record snowstorm, and days of extreme cold weather. I hope everyone is staying safe during the

cough, cold, flu season, and COVID-19. Due to the great advances made with the COVID-19 vaccines, we are slowly getting to the other side of this pandemic. We simply have to listen to the scientists, wear face-coverings, wash hands often, and social distance. If you are missing a loved one or someone close to you due to COVID-19, please know that Oklahoma Pharmacists Helping Pharmacists (OPHP) extends our heartfelt condolences. Our prayers are lifted up for a speedy recovery for those who are suffering from COVID-19.

I am overwhelmed with joy to see the pharmacists going above and beyond in the role of the vaccinator. Those of us in the medical profession are considered essential, we suit up and show up remaining on the front lines of this pandemic in order to take care of our patient's medical needs. We are all in this together.

In this issue OPHP is featuring an article from Enterhealth a treatment center based in Dallas, TX, "A response to the opioid crisis: How We Got Here And What It Takes To Recover". At times due to the COVID-19, we may fail to remember that we are directly in the middle of a serious opioid crisis. We must continue to address this crisis in order to save fellow Oklahomans. I hope you enjoy and learn something from this article.

The Oklahoma Pharmacists Association's (OPhA) student pharmacist intern for January 2021 and the Southwestern Oklahoma State University College of Pharmacy resident was able to join the OPHP Board of Directors Board meeting. In this issue, both write about their experience and what each learned. As always education is the key to addressing substance use disorder and co-occurring issues and their impact on the profession of pharmacy.

The OPHP Board of Directors is pleased to announce the launch of the new free-standing OPHP website at **OPHP.us** I am excited to have this new resource available to help educate the public regarding the critical services OPHP provides the pharmacy profession and the advantage of self-reporting to OPHP issues of substance use disorder and other mental health issues. Please visit OPHP at www.OPHP.us



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From the Executive Director continued

Also, in this issue, a successful OPHP participant who has graduated from the OPHP program shares his personal story of recovery. His story demonstrates the destruction in one's life due to substance use disorder, and the miracle of recovery.

Don't forget, take time for self-care, and if you are struggling with chemical dependency or other mental health issues, or you know another pharmacist or student pharmacist who you think may be suffering call the (OPHP) Help-Line immediately. There are those who struggle or have a hard time dealing with life on life's terms on a daily basis. Can I challenge everyone to recognize these struggles either in themselves or others and reach out for help or be willing to help if needed? If you find yourself struggling don't hesitate to reach out to (OPHP) for help that is readily available if needed. If you know someone struggling during this time, I hope you will be willing to be available for them if needed. If you are a pharmacist or student pharmacist and you are struggling personally with a substance use disorder or other mental health issues, I would encourage you to call OPHP today and self-report your issues now. The advantages of self-reporting your own substance use disorder or mental health issues are that you are able to get well or get in recovery, and if there are no legal issues or complaints the Oklahoma State Board of Pharmacy does not get involved. This is a tremendous opportunity, so don't let it slip away if you are suffering from substance use disorder or other mental health issues. Call OPHP before it is too late and then results in disciplinary action on your intern/pharmacy license or other legal consequences.

I encourage any pharmacist or student pharmacist that may be struggling with substance use disorder or any other mental health issues, or if you know a pharmacist or student pharmacist you think may be struggling, to call the OPHP Help Line now.

Please enjoy the newsletter.

I assure you it is the best thing you could do for a family member, friend, colleague, or yourself. If there is no legal action the pharmacist or student pharmacist can get the help and treatment they need for their disease and remain anonymous to the Oklahoma State Board of Pharmacy as long as they comply with the recovery recommendations of OPHP.



405-557-5773 locally—1-800-260-7574 x 5773 statewide
There is a solution. All calls are confidential



If you haven't already contributed to OPHP this year, please consider making a tax-deductible contribution. These contributions help OPHP continue to assist and provide scholarships to pharmacists, pharmacy students and pharmacy technicians during the recovery process. To make a donation, please [click here](#) to make a donation online. For those who have made a contribution this year, please accept our sincere thanks.

OPHP Helpline

*If anyone has questions or needs assistance with a
chemical dependency problem
Either for a friend or themselves please call
Oklahoma Pharmacists Helping Pharmacists (OPHP)
405-557-5773 locally—1-800-260-7574 x 5773 statewide
There is a solution. All calls are confidential*

MY STORY

There were people in this world who were destined for greatness. One man was destined to invent the polio vaccine. Another was destined to be the first person to walk on the moon. And one man was destined to be the first black president. I wonder sometimes what I am destined to do. I can tell you what the statistics say about my future. The statistics say that a man with my background, who grew up the way I did, is destined to end up in one place.....PRISON. At least that is what my counselor told me when I was in rehab. I was surprised when he told me that because I thought my life was fairly normal up until that moment. I was 38 years old before I first realized that the way that I grew up was anything but normal. I spent the first part of my life living with my mother in a notoriously bad neighborhood. My mother was prone to frequent fits of rage where she would yell and scream. When she was in this state, she would often stomp throughout the house searching for me to unload on. She used me as sort of a venting dummy. She shrieked and lashed out at me, sometimes violently, in an attempt to convey the rage she felt regarding how her life turned out. She sort of reminded me of one of those banshees from Scooby-Doo. I always thought I did things to make her that angry. I never once thought that she might have emotional issues. My father was just the opposite. His personality was really friendly and gentle. He was the kind of person that everyone knew and loved. They divorced when I was in the ninth grade. It was sort of a relief not to have all that arguing. The problem was that now my mother no longer had my father to inflict her wrath upon. That became my job when he left. To be fair to my mother, Dad had problems of his own. He had major problems with fidelity and alcohol. He seemed to always be having a good time. He was an eternal optimist and I idolized him. I wanted to be just like him. I wanted to go everywhere with him and he always let me; he was awesome like that. He even took me into bars with him. When I was really little, people didn't say anything, but when I got older he would have to bribe the bartender to keep things quiet. I remember once when I was sixteen he gave a waitress fifty dollars to serve me on New Year's Eve. Under the influence of Bartles' & James "Passion Punch" wine coolers, I danced with girls and rang in the New Year like a champ. Back then, I remember thinking that was the greatest night of my life. At that time in my life, my father could do no wrong in my eyes.

I tried to go through junior high and high school as quietly as possible. I was in a school system filled with some of the most dangerous criminals on the planet. All I wanted was to hide in the shadows and not be noticed by anyone. I was physically much smaller than the other boys my age, so I tried to develop my mental abilities. I had a good buddy from elementary school who developed a reputation for being somewhat of a badass. No one ever bothered me when he was around. I learned quickly that it mattered who I stood next to. Once I figured that out, I gradually accumulated a small army of hoodlum friends to protect me. With my mind and their might, we were a terrible force to be reckoned with. We ran the streets almost every single night of the week. We were getting into nightclubs even though we were barely old enough to drive. Drinking was a large part of the life that we lived. We drank together as brothers and vowed to die in the protection of one another. The liquor seemed to soften even the hardest of hearts. We were down for each other and I loved being part of that. Never before had I felt so accepted. We began every night the same, with a trip to the convenience store. We were always on the lookout for a place that did not ask for any identification. We would send in the oldest looking one of our crew to buy the cheapest beer that money could buy. Because I looked unusually young for my age, I was sent in only as a last resort. I used my older brother's driver's license as identification whenever things were desperate. Any idiot could see that I was nowhere near old enough. It was amazing how many times it worked though. I used that I.D. until the night before my 21st birthday. I tried to use it to get into a local club and the bouncer happened to know my brother. He laughed when he put it in the front pocket of his shirt. That was the first and last time that it did not work for me. I came back the next night with my actual identification card. I wanted to show it to the bouncer from the night before but he wasn't there. The bouncer that night let me right in. It was just like any other night for me. I had been drinking in bars since I was sixteen years old. For five years I had fooled them all. For some reason, now that I was of legal age, it wasn't quite as fun. The night had lost some of its appeal.

When high school ended I got accepted into a small college in my hometown. I was allowed to enter on academic probation because of my horrible ACT score. Of course the night before the big test we drank until dawn. I was barely able to get my name correct. I began my college career cautiously. I only took the easiest courses, saving the harder ones for last. I took full advantage of the fact that I got to choose what time I had to be in class. I made sure that I had no classes before noon on any given day of the week. I even managed to get Fridays off during my first semester. I put down biology as a major because I always liked animals. I later found out zoology was not really about naming all the animals at the zoo. I did fairly well in the entry-level biology course that I took that first semester. My instructor, who happened to also be my academic advisor called me into his office for a meeting. He was looking at the next semester's schedule that I had chosen for myself. Of course, it was all classes such as music appreciation and shooting sports. He asked me why I was afraid to take any more challenging courses. I asked him if he thought I could handle them. He smiled and started typing in a new schedule on his computer. I saw that the first one on my list was a 7:30 am chemistry 1 course Monday through Thursday with a 7:00 am lab on Friday morning. That was the end of my leisurely mornings at college. The advisor came back at me with a schedule filled with all sorts of scary classes like physics and college algebra. I was totally screwed. He reassured me that I was completely capable of handling this load. Next, he asked me why I wanted to major in biology. He told me there were no job opportunities in that field. I couldn't believe he was telling me this. He was the head of the biology department. He said that I should major in chemistry because there were many more opportunities and I could do anything with a degree in chemistry. I had not planned to take chemistry until the very last semester at college, however, he did not seem to be asking me. It seemed like I did not have a choice in the matter. So I reluctantly agreed and with one last keystroke, he produced my new and improved schedule.

While still in my first semester I worked as a roofer to get beer money. My mom didn't like pitching in when she knew where it would ultimately end up. Roofing was hard work. I was the only one in my crew that had a valid driver's license so I was in charge of getting people to and from the job site. Every single other roofer had multiple D.U.I.s. I was amazed at the terrible condition these other men were in. They looked old and sun-scorched and broken down. Every single day after working in the hot sun they made me stop at the store so that each of them could buy a case of beer. They would have at least three or four of the beers drank before I could even get them home. And the next morning when I picked them up, they would come to the door looking hammered. It was a terrible sight to see. This was their routine every day and I wondered how they could manage to endure such a life. I think it was the spark that inspired me to start trying harder in school. I saw what life had to offer these poor men and I heard how their bones creaked as they moved up and down the ladder. How long could a man do this physically demanding job? How long could their minds and bodies endure that hot sun? Their futures were anything but bright. I had two choices in front of me: I could work my butt off roofing or I could work my butt off studying. It was an easy choice. I began that next semester with fire in my heart. I was ready to do whatever it took to stay off of those hot roofs. I decided to make school my new job. I spent every day after class either in the library or in study hall getting extra help. I worked for the college of chemistry cleaning glassware to get my beer money. And speaking of beer, my buddies would pick me up at the library around nine o'clock every night and we would go out drinking. We drank every single night. It didn't matter what day it was or if I had a test the next day. Once I got my studying done, I was ready to drink! The funny thing was that it did not seem to affect my G.P.A. For the first time in my life, I was at the top of the class. I made a perfect four-point that semester and that was with all of those hard classes. My success gave me the confidence to take it up a notch. I entered my next semester as a chemistry major with a biology minor. I continued using my same technique of studying and drinking. Somehow every semester I continued to make a perfect 4.0 GPA. My philosophy was simple: Always work hard to make the best grades possible, but still, leave enough time to get nice and drunk every night. In the end, the same guy that made a 12 on his ACT and was admitted to college on academic probation graduated at the top of his class magna cum laude with a degree in chemistry and a 3.89 GPA. I had done it. The problem came when it was time to choose a profession. My father kept nudging me toward pharmacy. He said that " it paid like hell and was indoors under the air conditioner." That sounded pretty good to me so I applied the semester before I graduated. Fortunately, my good GPA overshadowed my abysmal ACT score and they let me in. I could hardly believe it.

Pharmacy school was a whole different ball game. No longer was I in class with average students. This was the crème de la crème. The best and brightest from all around. It was very difficult to make it into pharmacy school in those days. You had to have done well in your undergraduate studies. Some people said that it was easier to get into medical school at the time. I suffered total culture shock when I left my hometown to venture to the big city. People were much more upper class, so to speak. I just did not seem to fit in. I looked to drinking to dull the pain of my loneliness. I doubled my efforts in my studying to make sure that I made it through my first semester. Most people that dropped out did so in that first semester. I was intimidated by all the incredibly smart people. I never thought that I would be able to keep up, so I even managed to keep my drinking down to a minimum. I saved drinking for the weekends where I rewarded my efforts with a twelve-pack or two. I never before had so much to contend with. There were so many classes and all of them were tough. I studied late at the library every night. I drank Dr. Pepper by the gallon in an effort to stay awake. Sleep was a luxury that I did not have often. I usually preferred drinking to sleeping any day of the week. I tried my best to make friends with my classmates but they just were not the same crowd that I was used to running with. These were, for the most part, wealthy white people. There was not a single black person in my class. I was completely alone. It wasn't long before I was forced to lower my standards and start to associate with my own race. At first, I felt out of place but later learned to like not having to pretend to be something that I wasn't. I even became good friends with a redneck guy from a small town outside of Tulsa. It was funny, but by the end of our first semester, we became roommates and best friends. He liked drinking almost as much as I did. In fact many times, he would try to pry me away from the books in order to go out drinking. He really helped to keep me sane that first year. As always, I took things far too seriously. But to my astonishment, and with his help, I pulled off another 4.0 GPA the first semester. Once again I was at the top of my class. Everyone who knew about my partying habits was totally shocked. But no one was more shocked than me. That first year went by fast and the summer after even faster. The second-year at pharmacy school was known to be a tough one. At least I had friends to go through it with me. That made all the difference in the world. We had grown close as a class. After all, we had all been put through the fire together the first year. There was a special bond that existed between us now. We were kind of like one big special family now. Our common enemy was all the pressure that we put on ourselves to succeed. The first day back I saw a cute girl entering the common room. I had never seen her before so I figured she was a new first-year student. She did seem to have that frightened look in her eyes. And speaking of eyes, hers were lovely. I purposely tried to pass by her as much as possible. I even made a spectacle of myself in an attempt to show her that I was a big man about campus. It didn't work though. She pretty much kept to herself. Finally one day I was passing by her in the busy hallway and got a smile. I repeated this same path every single day hoping to get more smiles and I did. I could tell that she was looking for me now as well. This immature game quickly became the favorite part of my day. I eventually was able to find her school mailbox. I periodically would fill it with candy and small love notes written on ruled note cards. One time I was feeling particularly frisky and left a 4-word question: how shall we proceed? The next day my mailbox had her answer: very carefully! That was all it took for me. I was hooked. Everything about her was yielding and gentle. I think I loved her from the very start. I was undone. She was good for me in that my late-night drinking was quickly pushed aside to spend time with her. She made fun of my rigid study schedule. However, I got the feeling that she was more impressed than amused. I could tell that she didn't require as much time as I did to get things done. It was amazing how quickly she picked things up. I had to hammer things into my brain to make them stick. She just seemed to glance at her notes and was fully ready for the test. Most nights we would study in my room, me at my desk and her laying on my bed. We ended each night with me walking her to her car.

Once we got there I would get a long and warm hug ending with a quick kiss goodbye. She never allowed herself to sleep over. I got the feeling that she was saving that for marriage. I respected her for that. I could definitely use all of the virtue I could find. We grew closer with each passing day and eventually, I told her how I felt. I was absolutely nuts for this girl. I knew that this was the woman that I was supposed to be with forever. It was as though God had created this perfect person just for me. She complimented me in every way. Her gentle way was what my life had always been missing. Time seemed to pass quickly for the two of us. After we both graduated we eventually married. We were two young pharmacists living the dream life together. We were making more money than either of us had ever seen and we were living like rock stars. We were constantly going on extravagant vacations. One of my wife's favorite places to go was Las Vegas. Once I taught her to play craps, she was hooked. I always overdid things in Las Vegas. I tended to stay up late and put down more beer than my poor body could handle. I always felt like complete hell in the mornings in Vegas. I especially hated the mornings when we traveled home. I came up with a handy trick that I saved just for Vegas and similar places. I had some Vicodin leftover from a previous dental procedure and I always took these with me when I went out of town. I would pop in a few in the morning after a rough night and I was completely cured of any sort of hangover. In fact, I usually felt ten times better than normal when I was on the stuff. The only problem was that eventually, I liked taking the Vicodin regardless of whether I was hungover or not. It gave me a feeling like nothing else could. It made me feel as though all was right in the world and that nothing bad could ever happen. I learned in treatment that it generally takes a few years of heavy drinking to become physically dependent on alcohol however, with narcotics like Vicodin it only takes a few weeks. That stuff took me fast. Before I knew it I was making up excuses to go see my dentist. I kept having these mysterious pains in my mouth that required large doses of narcotics. I quickly graduated to the highest strength. I told her that the lower dose did not help me anymore. She was nice enough to keep writing the scripts and I just kept taking more and more. My hunger for this drug was relentless. I started to wake up early in the morning with withdrawal pains. I ended up having to get up every morning around four o'clock in the morning just to keep from getting the sweats and shakes. In the end, I looked forward to my early morning doses. There was something about quenching that need that made the high more satisfying. I quickly started to need higher and higher doses each time to get the same effect. It is true what they say about addicts "always chasing that first time high." You are never able to duplicate that incredible "first-time" feeling no matter what you do. The maximum dose of Vicodin that any fully grown man should ever take is eight tablets per day. In the end, I was up to around forty tablets a day. The physician at my treatment facility said that the gradual way addicted people increase their dose over time is what gives them the ability to survive these incredibly high doses. A normal person would surely die from taking this same dose. I guess I had that going for me. I was able to keep my addiction a secret from my wife for several months. Finally one evening I got a call from her and in her voice, I could tell that something was wrong. I had been terminated from one of my jobs for obvious reasons and to cover things up I simply told her that I was laid off because the economy was bad. At the time she bought it, but now I was feeling like she may have become wise to my deception. I asked her if something was wrong and she wouldn't say it over the phone. I had the intense feeling that I was about to be caught so I downed around eight tablets and drove home. When I got home she was waiting for me in the living room in her bedtime clothes. I could no longer stand lying to her. That had been the one thing that I was truly ashamed of. I have often said that I would die for her and I meant it; her happiness was everything to me. I sat down on the couch next to her and told her everything. The look of shock in her eyes was more than I could stand. I started crying for the first time in my life since I was a child. The weight of that lie had been too much to handle for too long. I begged her for mercy as she sat and considered the situation. I had now damaged the single most important thing in my life, my marriage. At that moment I was so afraid that what I had done had ruined what we had forever. Nothing else in this world mattered to me as much as my marriage. What happened next truly made me believe that God had made this girl especially for me. She smiled, hugged me, and with tears in her eyes she promised to help me. It was as though the weight of the world had been lifted off of me. Now that I knew that she was on my side, I knew that I could accomplish anything.

Treatment for me was an eye-opening experience. One of my counselors gave me the assignment to write down my life story and to read it out loud for our group session the next week. I grudgingly wrote it all out and apologized to my group before presenting it. I was afraid that it would be boring for other people to have to sit through something like this. It was like watching someone else's old home movies or something. To my surprise when I looked up at the group at the end of my presentation, I noticed the shocked look on everyone's face. A few of the women counselors were even crying. All these years, I thought that my life was normal with just a few small exceptions. After a few sessions with my therapist, I learned that what my mother had done to me was not my fault. He said that there was nothing that I could have ever done to deserve that much abuse. It was so weird to me that after all my education and experiences that I had no idea that I had been abused. It was good though because now I had an explanation for some of my issues. This treatment center was top-notch in that they did not only treat my addiction, they also treated my emotional issues. I put everything I had into the time that I spent there. I was on fire for recovery. I even voluntarily signed up to be monitored for five years after I finished my treatment. They said that would greatly increase my chances of staying sober. I did every single thing that they recommended with as much zeal as I could manage. In the end, the head of the department praised me for my hard work. He asked me how I managed to maintain such incredible enthusiasm for the entire length of my time there. I told him the truth even though I wasn't sure if my answer would be well accepted. My wife grew up as I did with an alcoholic father. She spent most of her life worrying and caring for someone who just could never stay sober. The truth was that under no circumstances would I ever let her suffer that same way from me. I was going to make certain that I beat the odds and did not put her through one relapse after another. I knew that you were not supposed to get sober for someone else. But right or wrong, that was where my zeal came from and so far it was working pretty well. Over three years passed and I was still staying the course of sobriety. I had a good job, good friends, and a good marriage. Overall my life was pretty good. Even my father found sobriety after a lifetime of drinking. Of course, that was court-ordered, but I'll take it anyway. Everything seemed to be going perfectly until one day I started to notice a change in my wife's behavior. She was becoming more and more distant and angry toward me. Her overall attitude toward me became very cold. This was totally opposite from the girl that I knew and loved for these past thirteen years. I was so afraid that I was losing her and I was completely helpless. One night I found several love letters that she had written to a male friend. There were several exchanges back and forth where they professed their love for one another. I don't think that I had ever felt that hurt before in my entire life. I remember that my hands were shaking as I tried to tell myself that this was just a bad dream. Unfortunately, this was real. The next day I came home from work and she was gone. She had taken all of her things, with the exception of her wedding dress. I sat on the floor of her closet and stared at the emptiness and cried. I used to think that I would lie down and die if I ever lost my wife. It was my greatest fear that I would someday lose her to cancer or a car crash. I could not bear to imagine my life without her. It's funny because I didn't lie down and die. What I had learned from AA and in treatment kicked in and saved me. It told me not to isolate myself and to call someone for help. I called my father and wept as I explained to him what had happened. It couldn't have been a coincidence that he happened to be sober during this particular time. I learned long ago not to count on him because of his drinking. But now he was right there for me, strong and sober. He called me every single day after that to make sure that I was all right. We have formed a new friendship together because of what happened. I can't ever remember a time when we were closer. As of today, I am still without my wife. I think of her every day and pray that she will come back to me. Regardless of what happens, I know that God has a plan for me and in that plan I am sober.

Former Successful OPHP Participant Anonymous

A RESPONSE TO THE OPIOID CRISIS: HOW WE GOT HERE AND WHAT IT TAKES TO RECOVER

by Cara McLeod, MA, LPC-S, Enterhealth Outpatient Center of Excellence Clinical Director

According to the numbers published by the Centers for Disease Control (CDC) in 2018, more than 130 people in the United States continue to die every day due to opioid overdose. Misuse and addiction to opioids has risen to the point that in late 2017, then-acting Health and Human Services (HHS) Secretary Eric D. Hargan issued a public health emergency regarding the crisis at the request of President Donald Trump.

In April 2017, HHS unveiled a new five-point Opioid Strategy, with the five following priorities:

- Improve access to prevention, treatment, and recovery support services
 - Target the availability and distribution of overdose-reversing drugs
 - Strengthen public health data reporting and collection
 - Support cutting-edge research on addiction and pain
- Advance the practice of pain management

Additionally, during Fiscal Year 2017, HHS invested almost \$900 million in opioid-specific funding, including support for state and local governments and civil society groups to support treatment and recovery services, target availability of overdose-reversing drugs, train first responders, and more.

How serious is the Opioid Crisis?

Currently in the United States:

- Roughly 21-29% of all patients who are prescribed opioids for chronic pain misuse them.
- Between 8-12% develop an opioid use disorder as a result.
- An estimated 4-6% who misuse prescription opioids transition to heroin.
- About 80% of people who use heroin first misused prescription opioids.
- Opioid overdoses increased 30% from July 2016 to September 2017.
- Opioid overdoses in large cities increase by 54% in 16 states.

In the past year, approximately 11.8 million people 12 years or older misused opiates (4.4% of the total U.S. population).

What are opioid drugs?

Opioids are a class of drugs that includes legal painkillers such as oxycodone, hydrocodone and codeine, as well as illicit drugs such as heroin. Opioids reduce feelings of pain by attaching themselves to the body's natural opioid receptors in the brain and throughout the body. The body already contains opioid chemicals, such as endorphins, which relieve pain and make you feel good during exercise.

When opioid drugs attach to these receptors, they further reduce a person's perception of pain. That's why they can be so useful for people who are recovering from serious injuries or surgery. However, opioids also have a profound effect on the brain's natural reward system, which can cause users to feel a euphoric high. The problem is that once this reward system has been altered by prolonged use of opioid medication, it is difficult for it to return to its normal baseline state, which can lead to unpleasant feelings for users – a condition commonly known as withdrawal.

Legal prescription opioid pain medications include:

- Oxycontin
- Codeine
- Demerol
- Percocet
- Vicodin
- Morphine
- Fentanyl
- Dilaudid

Prescription V. Heroin

Even though heroin is an opioid, there's a reason you can't get a prescription for it. Heroin is a synthetic narcotic made from morphine that involves several steps of processing with various chemicals, which can differ depending on where it's produced. Heroin is a street drug, not controlled by FDA regulations, meaning users don't know the potency of the opioids it contains, nor what other substances have been mixed in with it.

Because heroin is typically either injected, snorted or smoked, it enters the body and brain rapidly and produces an extreme high, but it doesn't last very long. This makes it a poor option for pain relief, but an easy substance to become addicted to.

Prescription opioids, on the other hand, are designed to affect users more gradually and produce milder effects compared to heroin, but they work for longer periods of time. Unfortunately, those who want to use them to get high will often crush the pills to then snort or inject the powder to get a more immediate and stronger effect.

All too often, people who begin by misusing prescription pain relievers will shift to using heroin because it's cheaper and they can get it on the street instead of having to get a prescription or pay more for illegally resold prescription pills.

The health risks of opioids

As mentioned earlier, opioid drugs bind to opioid receptors on cells in the brain and throughout the body in order to release other chemicals, such as endorphins, which in turn reduce feelings of pain. However, these chemicals also affect things like digestion, breathing, and other vital functions.

In lower doses, opioids produce feelings of sedation, a muffled perception of pain, and mild euphoria. That's not to say there aren't negative side effects, though. Even in small doses, opioids can cause nausea, constipation, slowed breathing and unconsciousness. In higher doses, the sedative effects can be profound (with users often drifting in and out of consciousness), and the drugs severely depress the person's breathing and heart rate, which poses the greatest risks of coma or death.

For every 1 overdose death in the United States, there are:

- 15 addiction treatment admissions
- 26 emergency room visits
- 115 addicted users
- 733 nonmedical users
- \$4.35 million in healthcare-related costs

Addiction is a chronic brain disease

Substance abuse (opioid abuse in particular) causes damage not only to the body, but also to the brain and its ability to function normally. Somewhat similar to a traumatic brain injury (TBI), this damage often leads to altered cognitive, behavioral and emotional functioning, as well as a disorder of the brain's natural reward system.

Opioid Use disorder criteria:

- Using in larger amounts or for longer than intended
- Wanting, but unable, to cut down or stop using
- Spending a lot of time to get, use or recover from use
- Craving
- Inability to manage commitments due to use
- Continuing to use despite negative consequences
- Giving up important activities because of use
- Withdrawal

How do you treat opioid addiction?

Unlike more traditional addiction treatment providers, Enterhealth relies primarily on science- and evidence-based treatments that have been clinically proven to work. This includes the use of anti-addiction medications, which are used to normalize a patient's brain and body chemistry without the negative effects that accompany the abused substance. Anti-addiction medications also reduce physiological cravings and make patients more comfortable by reducing anxiety and making it easier to get sleep.

In addition, Enterhealth utilizes cutting-edge diagnostic tools that can allow us to gather information about motor, linguistic, and higher functioning skills. This detailed understanding of a person's psychological functioning then informs what types of therapy fit best into each patient's customized treatment plan.

Enterhealth offers several different types of therapy in addition to the standard one-on-one and group therapy sessions, including family therapy, motivational enhancement therapy, as well as advanced therapeutic modalities such as EMDR and Magnetic e-Resonance Therapy (MeRT).

Why treatment at Enterhealth produces better outcomes

At Enterhealth, we understand the intricacies of treating addiction as a brain disease because we've been doing it for more than a decade. Our team of physicians, psychologists and other clinicians provide each patient with a comprehensive, personalized recovery plan that combines state-of-the-art diagnostic capabilities, innovative behavioral therapy, anti-addiction medications and more to help patients overcome substance abuse and realize a long-lasting recovery.

If you would like to learn more about Enterhealth's proven, evidence-based treatment for opioid addiction, call 1.800.388.4601 or contact us today.

Insight from a Pharmacy Resident and a Student Pharmacy Intern from an Observation of an OPHP Board Meeting

I thought it was a great opportunity to see how some of the discussions and decisions were made. I had only ever heard about OPHP from school speaker events and when attending Oklahoma State Board of Pharmacy meetings, and now I've gotten to see some of what goes on from this side of things.

OPHP really strives to support pharmacists get the help they need and is understanding of each person's process towards not just getting better, but also ensuring that they will continue to be successful upon completion of their contract. Similar to how pharmacy students need to attend State Board meetings before graduating in order to get a better understanding of how the State Board works, I think it would truly benefit pharmacy students and residents to be able to attend an OPHP meeting to get a better idea of how OPHP works. This would ensure that Oklahoma pharmacists, or at least the newly graduated ones, will better know how to either seek help for themselves or offer help for others. It can be scary to be in a position of either needing to self-report or report others. Knowing that OPHP is truly there to help would alleviate some of that concern if and when the situation arises.

PGY1 Pharmacy Resident

Attending January's OPHP Meeting was insightful that helped me understand what they really do. Throughout the day, I was able to see the compassion, empathy, and relatability of the board members with the person at question. I can attest that if someone is ever in need of help for anything pharmacy related, they can be the ones to be the backbones to that person. When I was able to review someone's history on what they did, and where they were now, you could tell their personality had changed for the better. In school, we were given the opportunity to see what OPHP was through a presentation. However, the school presentation and real-life experiences do not equate. You do not ever understand a person's background or what it is like until you are there in person and experience the meeting. I recommend that if you know of someone or are someone in need of help, Oklahoma Pharmacists Helping Pharmacists can be the wind beneath your wings to lift you or them back and further to new heights.

Student Intern



OKLAHOMA PHARMACISTS HELPING PHARMACISTS (OPHP) ANNOUNCE NEW WEBSITE

OPHP is pleased to announce the development of our new free standing website at OPHP.us. This will offer a new resource for OPHP to educate the public about the critical services OPHP provides the pharmacy profession in Oklahoma, and the benefit of self-reporting issues of substance use disorder or other mental health issues to OPHP. This website will also offer a safe and easy opportunity to make a tax deductible donation to OPHP either a one time or a scheduled donation throughout the year. Please visit OPHP at www.ophp.us

***Oklahoma Pharmacists Helping Pharmacists (OPHP)
405-557-5773 locally—1-800-260-7574 x 5773 statewide
There is a solution.***

**WHAT DO YOU DO IF YOU SUSPECT A COLLEAGUE
HAS A PROBLEM WITH SUBSTANCE USE DISORDER**

Trust your instincts!!

Call Oklahoma Pharmacists Helping Pharmacists (OPHP) immediately
at the OPHP Help Line 1-800-260-7574 ext. # 5773 statewide or
405-557-5773 locally
Do not confront alone
Left alone the problem will not go away.

If you or a pharmacist you care about is suffering from substance use disorder there is a solution
Oklahoma Pharmacists Helping Pharmacists (OPHP)
is readily available to help.

Call the OPHP Help Line 1-800-260-7574 ext. # 5773 statewide,
405-557-5773 locally.

ALL CALLS ARE CONFIDENTIAL