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## Fueled by Growing Painkiller Use, Overdose Deaths and Child Poisonings Are on the Rise

By **MAIA SZALAVITZ** Monday, September 19, 2011

Drug overdose has now overtaken automobile crashes as the leading cause of accidental death in the U.S., according to an analysis of government data. This is the first time that drugs have killed more people than car wrecks since the government began tracking drug-related fatalities in 1979.

The increase in drug deaths can be ascribed largely to a surge in overdoses involving prescription painkillers. According to a separate analysis, that same increase in prescription drug use by adults may also be fueling a related trend in children under 5: from 2001 to 2008, **accidental drug poisonings of young children** increased 22%.

Statistics from 2009, the latest year for which data are available, show that 37,485 people died of drug overdose that year, compared with 33,808 who were killed in traffic accidents, according to the **analysis** by the Los Angeles *Times*. The paper's report was based on statistics from the from the Centers for Disease Control and Prevention and the National Highway Traffic Safety Administration.

Two factors are contributing to the trend. The first is **good news** about auto safety: people are driving more but dying less. The number of deaths per 100,000 automobile occupants fell nearly 23% between 1975 and 1992, and then dropped another 8.5% between 1992 and 2007. Between 2005 and 2009 alone, the overall number of deaths due to vehicle accidents fell by nearly 10,000.

Meanwhile, overdoses are only increasing. The drug death rate rose 63% between 1999 and 2004, and then another 27% between 2007 and 2009. Most overdoses involved prescription painkillers like Oxycontin and Vicodin, which users typically combined with alcohol or anti-anxiety drugs like Xanax. Deaths involving painkillers more than **tripled** between 1999 and 2006.

Painkiller prescriptions began rising in the late 1990s and 2000s, when doctors, drug companies and patient advocates pressed for increased access to pain-relieving drugs for patients with cancer and chronic pain, who were being severely undertreated. **Studies** show that this campaign did increase patients' access; for example, opioid prescriptions for Medicaid patients rose three-fold from 1996 to 2002.

But greater availability of these medications has had side effects: not only in the increase in overdose deaths of adults, but also in accidental poisonings of children. A recent study on child poisoning examined data on 544,133 children aged 5 or younger, who had been taken to the ER between 2001 and 2008 for swallowing drugs. In 95% of cases, the children had taken the drugs themselves. More than half of the cases involved prescription drugs rather than over-the-counter medications, and the most serious problems were associated with prescription opioids, sedatives and heart medications. Poisonings among children in this age group increased by 22% during the period studied.

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Interestingly, the research suggests that increased access to painkilling drugs has not increased the risk of addiction in pain patients. Rather, the overdose epidemic is being driven primarily by addicts and recreational drug users who are seeking pain medications to get high.

In pain patients with no prior history of addiction, for example, the risk of new addiction is less than 3%, according to reviews of the research. The vast majority of the overdose deaths occur in people who are deliberately misusing the drugs — often, these users don't have a prescription — not in pain patients who mistakenly take the wrong dose or become addicted. A **study** in West Virginia, which is particularly hard hit by drug addiction, found that fewer than half of overdose victims had been prescribed any of the drugs that killed them. More than three-quarters had taken multiple drugs simultaneously including alcohol, and 95% had signs of addiction such as injecting drugs meant to be taken orally.

Further, data show that 78% of the nearly 1,400 OxyContin users treated for addiction in 157 treatment centers across the U.S. in 2001-04 had never been prescribed the drug themselves; the same percentage had had prior treatment for addiction, a 2007 [study](#) found. The statistics suggest that drug deaths are occurring largely in the context of addiction, not pain relief.

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Although doctors are frequently blamed for carelessly prescribing these potent medications, the sources of the drugs involved in misuse remain somewhat obscure. Of those [surveyed](#) in the National Household Survey on Drug Use and Health, for example, 83% of people who used prescription drugs nonmedically said they did not get their drugs from a doctor; the vast majority said they were either given or sold the drugs by friends or family members.

It's possible that the high street value of prescription pain medications may be tempting the unemployed or underemployed to sell their legitimately prescribed drugs rather than taking them. The Internet, pharmacy robberies and drug thefts higher up the supply chain may also be playing a hidden role.

While we have worked hard as a society to reduce auto-related harm, the effort to reduce drug-related harm — as opposed to attempting to eliminate drugs altogether — has been much more controversial. So far, measures like prescription drug monitoring programs (PDMPs) have not affected the drug death rate, nor have police crackdowns and tough rhetoric.

It may be time to consider educating users about specific risks for overdose. For example, most deaths occur when users mix different classes of depressant drugs: Mixing "downs," such as opioids, sleeping pills, anti-anxiety drugs and other sedatives including alcohol, is extremely risky. When people inject or snort pills meant to be taken orally, the risk of death is even higher.

Users need to be made aware that when they take different types of drugs with the same general effects, they synergize in the brain; a dose that may not have resulted in O.D. if the drug had been taken alone may magnify into a potentially fatal cocktail.

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To prevent harm in young children, drug "take back" days, when people can dispose of unneeded medications, can help. For those who must keep prescription drugs in the house, storing them in a locked box or other secure space is essential.

In addition to educating the public about prevention, the overdose antidote naloxone (Narcan) can also be made more widely available. These strategies, combined with continued recommendations for careful prescribing practices, could be the "seatbelts and airbags" of drug safety, and help push the death rate in the right direction.

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