Supply, attitudes abet opioid abuse in Greenwich

By Ken Borsuk, Published 12:00 am, Friday, November 11, 2016

GREENWICH — Illicit drug use in Greenwich is increasing, spurred on by the availability of opioids and acceptance of their use, a new report states.

The long-awaited report on opioid use in Greenwich was presented to the board of Selectmen Thursday by leaders of an addiction recovery organization that began its survey of drug use in town in February.

While the report had no hard local data to support its findings, anecdotally Greenwich seemed to mirror statewide data that indicated an increase of non-medical use of prescription pain killers, said Alan Mathis, president and CEO of the Fairfield County-based Liberation Programs. Abuse of prescription pain killers often leads to heroin use, he said.

“People think things made by a pharmaceutical company are safe,” Mathis said. “They think this is a real drug maker and it's done under controlled circumstances. After all, everyone is being prescribed those things, so it must be safe to consume.”

Liberation Programs Inc. co-wrote the report with the town’s Department of Social Services. It was based on information gathered during several focus group meetings with representatives of Greenwich Police, Greenwich High School, Greenwich Emergency Medical Services and Greenwich Hospital’s Emergency Room and Addiction Recovery Center.
Investigators also looked for local data in national, statewide and local data banks.

“This report clearly indicates that Greenwich is not immune to the problem of opiate drug use currently seen at the state and national level,” the report states.

Opioid deaths in Connecticut increased 53 percent between 2006 and 2014, according to the report. In the past four years, Greenwich experienced 15 accidental drug-related deaths, 10 of them involving opiates.

In 2015, 723 people died of overdoses in Connecticut, four of those were from Greenwich. In 2016, Greenwich has reported two more deaths from fatal overdoses.

“The perception across all sectors of the community interviewed for this report supports the finding that opioid use is increasing among all age groups in Greenwich,” the report states.

“This is a very serious problem and it didn’t occur overnight,” said Town Commissioner of Social Services Alan Barry. “This really started in the 1990s over pain management.”

According to Barry, doctors at the time were criticized for not being sensitive to people’s pain. As a result, opioids were prescribed in growing numbers as a matter of medical protocol to help with that pain.

But with that new practice and the work of pharmaceutical companies, he said, the country became “flooded with opioids.”

Those who were given doses of opiates they didn’t use left them in their medicine chests, where they were found and used by other family members, he said. Between 2005 and 2015, the percentage of Connecticut high school students who said they used prescription drugs to get high rose from 9.6 percent to 12 percent, the report states.

“Greenwich has high quality of life and a strong community,” Mathis said. “It had that yesterday. It has it today and it will have it tomorrow. I think the fact that we’re taking a look at the local level only helps us support our families in a much stronger way and allows us to get a bit ahead of the curve.”

Barry focused on steps the town could take to combat the problem.

“We need to reduce the circulation of opioids in the community,” Barry said. “We need the medical community to educate their patients when they’re being prescribed opioid medications that they are highly addictive substances and you have to be very careful with them. There are so many examples of people going for an operation or a procedure and you’re prescribed OxyContin or Vicodin or Percocet with no instructions.”

He suggested limiting the number of pills per prescription and getting unused pills out of the medicine cabinet. He also suggested a local campaign to remove the stigma of addiction.

“We need to encourage people who are addicted to opioids to seek treatment,” Barry said. “People are not going out and availing themselves of treatment programs and it’s
only getting worse. Addiction is a brain disease and some people are very susceptible to it. What we have to start doing is decriminalizing it and moving more into treatment.”

Barry also called for better collaboration between residents and health care professionals, better follow-up between the town’s medical professionals and the patients prescribed opiates and better data collection and collaboration among town agencies.

“People are out there thinking, ‘It’s not my problem. It’s not my kid’s problem. It’s somebody else’s problem’ until it is their problem,” Barry said. “Then they don’t know what to do. Most of the public is not that interested until it becomes their problem.”

Greenwich can model an effective solution to other communities, Mathis said.

“Folks in Darien say there’s a problem but the problem is in Westport,” Mathis said. “The people in Westport say there’s a problem but the problem is someplace else. One of our chief findings is that it is everywhere and it is here.”

After the presentation, First Selectman Peter Tesei, who pushed for the report, said Greenwich would start working on the problem as soon as possible.

“The next step is gathering together all of the stakeholders in the community to create a process in which we can develop successful strategies to eliminate this deadly scourge and its devastating effects,” he said. “I look forward to forging a community-wide collaborative effort that will open the lines of discussion and action to reduce opiate abuse as much as possible.”

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