

Good Morning!

It's **SUNDAY**

August 14, 2005.

133rd Year

No. 226

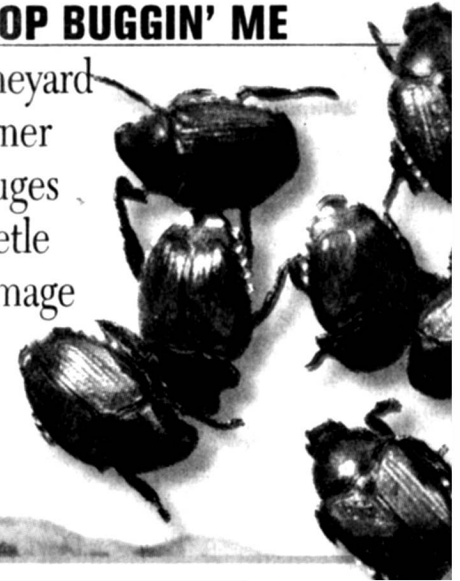
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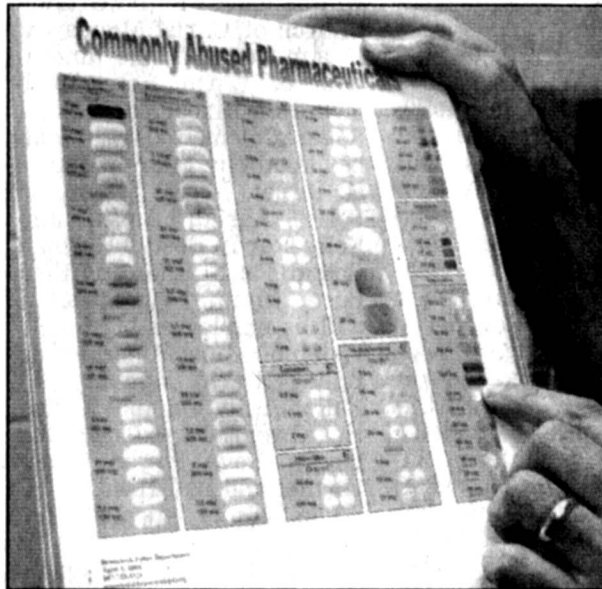
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STOP BUGGIN' ME

Vineyard
owner
gauges
beetle
damage
B1



SUNDAY CENTERPIECE



EARL NEIKIRK/BRISTOL HERALD COURIER

Kaveh Ofogh, chief physician for the new Southwest Virginia Regional Jail Authority, points on a chart to some of the most commonly abused prescription painkillers.

According to authorities, the region's worst problem drug isn't the one you think it is. It turns out there may be a ...

Fate worse than meth

Officials say prescription drug abuse takes worst toll

BY DANIEL TAYLOR
BRISTOL HERALD COURIER

ABINGDON - Methamphetamine has been at the forefront of the drug debate as police make record-setting numbers of lab seizures and prosecutors secure the convictions of meth-trade kingpins.

EDITOR'S NOTE

In a two-day series, we examine the problem of prescription drug addiction in the Mountain Empire. The series concludes Monday.

Most areas of the region, however, face a far bigger drug problem

- prescription drug abuse. It's an issue that gets little attention these days due to the intense focus on stamping out methamphetamine.

So far this year, the Southwest Virginia Drug Task Force - which covers Dickenson, Wise, Scott and Lee counties - has arrested nine people on meth charges.

In comparison, nearly 50 have been nabbed on pre-

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SERIES AT A GLANCE

Today:

It's not methamphetamine but prescription drugs that are abused the most in the region, officials say.

Plus: A local jail physician sees firsthand the results of prescription drug abuse.

Monday:

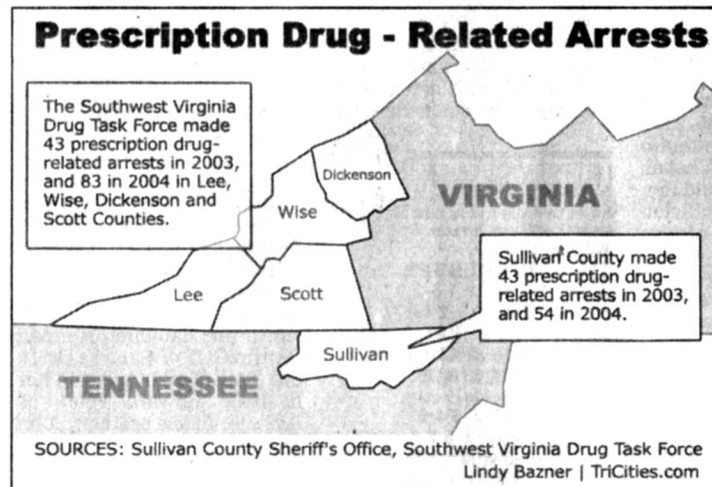
A former addict recounts his ordeal while a grieving family still mourns a son's loss.

Plus: How to treat addicts, not to mention how to pay for the process, is a topic of much debate.



EARL NEIKIRK/BRISTOL HERALD COURIER

Ofoh examines a patient at the Southwest Virginia Regional Jail in Abingdon. The doctor said the number of jail inmates addicted to prescription drugs is a stark testament to the toll their abuse takes on the region's residents.



Jail doctor sees addiction's results daily on the job

BY DANIEL TAYLOR
BRISTOL HERALD COURIER

ABINGDON - Most people would never consider taking heroin.

But those same people might think nothing of taking a prescription painkiller for a backache, a kidney stone or to dull their pain after surgery.

What those people don't know is that many

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scription drug charges.

Across the Tennessee line, officers in Sullivan County last year made three meth-related arrests. They paled in comparison to the 54 arrests on charges involving prescription drugs.

Prescription painkillers also account for the vast majority of overdose deaths in the region.

Of the 217 overdoses recorded in 2003 by the Cumberland Plateau Health District – which covers Buchanan, Tazewell, Dickenson and Russell counties – 211 involved prescription drugs.

Kaveh Ofogh, chief physician for the new Southwest Virginia Regional Jail Authority, has practiced medicine in jails and prisons across Virginia for a decade, spending most of his time in Richmond.

He said he's never seen a prescription drug abuse problem like the one locally.

"It's heavy here," Ofogh said. "And when I say something's heavy, you better believe it's heavy."

Four years ago, the doctor began practicing in the region and took over at the network of regional jails in April. He began to notice the severity of the problem immediately, he said.

"The first day the jail opened in Abingdon, we received inmates from different counties that this jail covers," he said. "The first day we got about 140 to 150 people, and about 80 percent of them were receiving narcotics."

Statistics show the number of prescription drug cases has risen drastically in the past few years, mostly in rural areas.

The Southwest Virginia Drug Task Force recorded 43 prescription-drug-related arrests in 2003. That number jumped nearly 100 percent to 83 last year.

It's not just a problem in Southwest Virginia. Sullivan County, Tenn., saw its prescription drug cases more than double between 2002 and 2004. In Bristol Tennessee, police have seen 28 prescription drug cases this year, already nearly double last year's total of 16.

Sullivan County Assistant District Attorney General Gene Perrin said he sees increases in abuse of common drugs like oxycodone, morphine and hydrocodone.

"I am amazed at how many we see come through the criminal justice system," he said. "It's an extremely large problem."

He said he feels the numbers likely do not show the enormity of it.

"There is no doubt in my mind that if we added two more vice detectives to departments in the area, we could double those numbers," Perrin said. "I think many, many people in society greatly underestimate the problem."

The popularity of prescription drugs among addicts continues to rise in part due to their easy availability, the prosecutor said.

"(Visiting the doctor) is a lot easier than to risk going to a drug dealer and getting your money stolen," Perrin said.

Addicts usually employ a tactic called "doctor shopping" to acquire prescription-only painkillers. They go from doctor to doctor making complaints of illnesses until they find one who will prescribe the drug they're after.

Addicts go to great lengths to fool doctors, Perrin said. He's seen cases in which someone pretended to have a broken arm or went to the doctor in a wheelchair pretending to be crippled.

"A classic example is when we had this one person who had an abscessed tooth," Perrin said. "She went to a number of dentists and timed it in such a way that they did not pull her tooth but gave her a prescription."

The fraud doesn't stop at

doctor manipulation, said Washington County Sheriff Fred Newman.

"Prescriptions can be forged," he said. "A lot of times, they'll edit the number of refills. Doctors often leave that part blank."

Taxpayers sometimes pick up the tab, as publicly funded programs such as TennCare and Medicaid often pay for abusers' prescriptions.

Local authorities say they're stepping up efforts to stop the illegal sale and use of prescription drugs.

Officers in Washington County buy drugs undercover "as much as we can," Newman said.

In Tennessee, obtaining a prescription drug by fraud is a felony punishable by as much as 12 years in prison. It's a felony in Virginia, too, and carries a sentence of up to five years.

Some pharmacies have begun increasing their abuse-prevention efforts as well.

Michael Johnson, owner of Michael's Pharmacy in Abingdon, said he hasn't had a problem with forged prescriptions for three years. It's not by accident, he said. He stays on the lookout for potential abusers and turns them over to the police.

"I used to have a big problem, but once you get a reputation of having them arrested and taking them to court, they don't come back," he said. "You have to be vigilant."

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DOCTOR: Jail physician sees abuse's results

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prescription painkillers fall into a category of drugs called opiates, a narcotic analgesic derived from the opium poppy. That puts those medicines in the same family of drugs as heroin and can make them addictive.

Kaveh Ofogh, a local jail physician, sees daily the results of painkiller addiction, which can take hold of a person before he knows it's happened.

"Their body develops a tolerance," he said, meaning the user must take more and more to achieve the same result.

The time-release mechanism of most prescription painkillers – the structure of the drug that slows release into the bloodstream – prevents the user from getting high.

Those who intentionally abuse prescription opiates find ways around that mechanism. Addicts crush tablets and either snort them or inject them in liquid form, delivering the drug's full force at once.

"It gives a faster effect, a more dangerous effect and a stronger euphoric feeling," Ofogh said.

The popularity of OxyContin, a timed-released form of oxycodone commonly pre-

scribed to cancer patients, jumped among Southwest Virginia drug abusers in recent years.

The Southwest Virginia Drug Task Force seized 351 dose units of OxyContin last year, a nearly 200 percent increase compared to the year before.

What most people don't realize is that OxyContin can be even more dangerous than drugs such as heroin and cocaine, Ofogh said.

"Gram to gram, OxyContin has more of a rush than heroin," he said.

Other common painkillers include hydrocodone, sold under brand names like Lortab and Vicodin, and morphine, the principle active ingredient in opium.

Morphine, a particularly potent and dangerous drug, results in many accidental overdoses, said Gene Perrin, a prosecutor in Sullivan County, Tenn.

"(Addicts) melt it down and shoot it into the vein, and there's 1,000 milligrams right into the system," he said.

Methadone, used in some clinics to treat addiction to opiates, has proved deadly to those who abuse it, said Dr. John Dreyzehner, director of the Cumberland Plateau Health District, which

covers Tazewell, Russell, Dickenson and Buchanan counties.

Misused methadone accounted for 44 percent of the region's 217 drug-overdose deaths in 2003.

Many of the overdose cases were the result of mixing methadone with another drug such as Valium, a tranquilizer.

Drug users abuse not only opiates but also sedatives such as Xanax.

Regardless of the drug, the road to recovery often is long and painful, experts say. Once users become dependent, they must continue to use the drug or face the painful consequences of withdrawal.

Without help, the symptoms for many can be too much to bear.

"It's very uncomfortable," Dreyzehner said. "There's terrible stomach pain, diarrhea, chills, fever and goose-pimples."

The need to recover from addiction could be avoided altogether if people didn't make a common mistake, he said.

"There are all kinds of people out there who think they're stronger than the drug," Dreyzehner said. "None of us are."

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