

JEANNE'S STORY

After her car accident, Jeanne was in constant, chronic pain. She tried going to physical therapists and chiropractors, but she just could not find relief. After months and months of trying to avoid the doctor, Jeanne finally broke down. "I just can't take it anymore," she said, "It's affecting everything. I had to leave my position at my job because it was too physically demanding. Is there anything else I can try?" The doctor wrote up a prescription for some Vicodin, and even though Jeanne knew how addictive painkillers could be, she was desperate.

Before even pulling out of the pharmacy parking lot, Jeanne took 2 pills, which was more than what her doctor prescribed, but the pain was unbearable in her neck and back. Within minutes, she began to feel relief and even a little giddy and exhilarated. Within just a few months, Jeanne skyrocketed out of control. Even though she had no more damage from the accident, she was completely hooked to her Vicodin. Some days she felt like she couldn't even get out of bed unless it was to take her pills. Her friends had all basically abandoned her. They called her a "pill popper" and a "pillhead." They accused her of just shopping for doctors who would give her a new prescription. "They just don't understand," Jeanne thought to herself miserably. "I really need my pills."



TEST YOURSELF

1. What was the increase percentage of deaths caused by prescription opioid overdose to women between 1999 and 2010?
a. 400% b. 250%
c. 48,000% d. 100%
2. A women's liver can metabolize a drug faster than a man's, so it's in her system for a shorter amount of time.
a. True b. False
3. Women are able to feel greater relief from opioids partly because of estrogen.
a. True b. False
4. Between 1997 and 2001, how many drugs were pulled off the market because of the negative side effects affecting women?
a. 2 b. 10
c. 8 d. 5
5. In 1912, 20,000 infants were born with symptoms of opioid withdrawal.
a. True b. False

WOMEN AND OPIOIDS



Answers: 1.A 2.B 3.A 4.C 5.B

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SKYROCKETING STATISTICS

WHAT ARE OPIOIDS?

The term "opioids" covers a massive variety of drugs, all ranging from legal drugs like morphine to illegal drugs like heroin. Their main job is to act on the central nervous system to relieve pain. Legal opioids like oxycodone, codeine or morphine can be safe when prescribed by a doctor for a short time and in small doses. When abused—taken without a prescription, in larger quantities or in the incorrect way—opioids can lead to some feelings of euphoria on top of pain relief, but they can also lead to addiction, overdose or death. The most commonly known opioid brands for medicinal purposes are: Demerol, Percocet, Vicodin and OxyContin.

EFFECTS ON MEN AND WOMEN

Is there a difference?

Absolutely. In a study published in 2011, researchers concluded that various prescribed opioids affect women more negatively than men. Women tend to report chronic pain more often than men, which in turn means more prescriptions are given to them. Furthermore, doctors often prescribe higher doses to women, despite new research saying the drugs affect them faster and more potently.

While the opioid epidemic certainly affects both men and women of all socioeconomic and racial backgrounds, the number of women and girls who have overdosed on prescription pain relievers is staggering. According to the study in 2011 and the CDC, 48,000 women died between 1999 and 2010, which is an increase of more than 400%! Men, on the other hand, saw an increase of approximately 250% in those same years. With only prescribed painkillers like OxyContin or Vicodin being included in that statistic, think of how much higher that number is when illegal drugs like heroin are added in!



PHYSIOLOGICAL DIFFERENCES

How It Affects Our Bodies

When taking into consideration metabolism, different hormones, and body composition, it makes sense that opioids would obviously affect women differently. Here's why:

- **Estrogen.** Estrogen is the primary female sex hormone, but it also plays an important role in how pain is experienced in the brain. Some researchers describe it as a "pain switch," which can enhance the ability to recognize pain. Women, therefore, are able to experience greater relief from opioids than men.
- **Glucose.** Glucose in the brain is necessary for self-control. In the middle of the menstrual cycle, glucose is lower, which can explain why women have a harder time quitting once addicted to painkillers.
- **Blood.** There is less binding capacity in women's blood than men's, which means our blood is less able to trap foreign substances.
- **Stomach Acidity.** Women's stomachs are generally less acidic than men's, which can make us feel the effects of drugs faster and more powerfully.
- **Liver.** Men's livers are usually better at breaking down medications faster than a woman's liver can, meaning the drug is in a woman's system longer.



TILTED TESTING

Ok, so if opioids affect women differently than men, the drug manufacturers would've discovered that in testing, right? Wrong! Up until 1990, women weren't even allowed to participate in clinical testing. Even today, most drugs are often tested on only men because drug manufacturers perceive women's hormones as seen as an uncontrollable variable that could affect the outcome of the trial. Because minimal testing is often done on various prescription opioids before they're released to the market, researchers are often unsure of the potential side effects until female patients are already suffering various side effects. According to a government report, 8 out of 10 drugs that were pulled from the market between 1997 and 2001 by the FDA were pulled because they posed more health risks to women than men.

PREGNANCY AND OPIOID USE

With opioid addiction becoming more rampant throughout the United States, it only makes sense, unfortunately, that more children are being born into opioid addiction. According to the Department of Health and Human Services' Substance Abuse and Mental Health Services administration:

- Heroin use rose by 100%, compared to 50% among men, from 2002 to 2013.
- From 2000 to 2009, the number of babies born with opioid dependence increased from 1.19 to 5.63 per 1,000 hospital births.
- From 2009 to 2012, infants born with neonatal abstinence syndrome (NAS) increased from 3.4 to 5.8 per 1,000 hospital births. NAS is a group of problems that occur when the mother used addictive drugs like heroin, codeine, oxycodone, or methadone while pregnant.
- In 2012 alone, more than 20,000 infants born in the United States had signs of opioid withdrawal at birth.



TREATING THE PROBLEM...

NOT JUST THE SYMPTOMS

In every avenue of health, treating the underlying problem rather than just the symptoms would eradicate many types of addictions. For people lucky enough to have health insurance, a month's worth of opioids may cost \$10 whereas a physical therapy session may cost \$150. Many women also may face the issue of finding childcare during physician appointments. It's cheaper for a mother to just pick up a prescription rather than drop off her child to a babysitter every time she has a physical therapy appointment.

Women need to be better advocates for their health not just for themselves, but for one another as well. "Tough love" approaches to dealing with opioid addicts is often counterproductive and shaming a pregnant woman with an opioid addiction can actually diminish the odds of her seeking treatment. Don't label women as "doctor shoppers," but try to understand they are people with very real problems. Try to offer support to a woman struggling with opioid dependence by understanding the circumstances that led her to this moment.