



A LOST GENERATION:

OPIOIDS AND YOUNG ADULTS



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The U.S. opioid epidemic worsens each year. It currently claims 115 lives every day and impacts countless families in its wake. Between 2015 and 2016, the largest opioid overdose death rate increase occurred among people aged 25 to 34 years, according to the Centers for Disease Control.¹ Today, opioid abuse is the number-one cause of preventable death among 18-to-35 year-olds.

Here, we look at opioid use among those it affects most: The Millennial generation, which is comprised of today's 18- to 35-year-olds. We examine why young adults use opioids, how addiction and dependence develop, and how exactly treatment works to help end even a severe opioid use disorder for the long-term.





WHY YOUNG PEOPLE USE OPIOIDS

Young adults abuse opioids for a variety of reasons, including to relieve physical and emotional pain, deal with problems, relax, reduce stress, and have a good time with friends. But addiction almost always has underlying causes--issues that led to the opioid abuse in the first place. Getting to the bottom of these issues is central to successful recovery, because if these aren't addressed, they will continue to lead to substance abuse.

The underlying causes of addiction are unique to every individual. Some people have multiple issues, and these are often interconnected like a web. Some of the most common underlying causes of addiction include:

- ◆ **A History of Trauma**

Trauma that occurs at any time, but particularly in childhood, is a common cause of addiction down the road. Witnessing or being the victim of traumas like sexual abuse, violence and disaster can lead to symptoms of post-traumatic stress disorder, or PTSD. These include frequent nightmares, flashbacks, anger, fear and insomnia. These issues and the negative emotions that result often lead people to self-medicate with drugs--particularly euphoria-inducing opioids.



◆ Chronic Stress

Chronic stress can result from a number of life circumstances, including poverty, abuse, systematic discrimination, family dysfunction, the loss of a loved one or living with medical or mental illness. Chronic stress results in consistently high blood levels of the stress hormone cortisol, which affects brain function. Persistently high cortisol levels can shrink the brain's prefrontal cortex, responsible for memory and learning, and increase the size of the amygdala, the stress and fear center responsible for the fight-or-flight response. It disrupts synapse regulation, leading to a loss of sociability and a tendency toward withdrawing from others. While opioids may seem to reduce stress due to the euphoric effects, heroin and painkillers actually reduce your ability to cope with stressful situations and increase your stress response in the long run.

◆ Mental Illness

Anxiety, depression, obsessive-compulsive disorder and other mental illnesses dramatically reduce an individual's quality of life. When a mental illness co-occurs with a substance use disorder, it's known as a dual diagnosis. According to the National Alliance on Mental Illness, around half of all people who are diagnosed with a substance use disorder also have a mental illness, and half of those diagnosed with a mental illness also have a substance use disorder.²

Considering that one in five people between the ages of 18 and 25 reported a mental illness in the past year, according to the Substance Abuse and Mental Health Services Administration, it's not surprising that the prevalence of dual diagnosis is high among Millennials.³ Opioids worsen mental illnesses in the long run, and misuse can even cause mental illness where one didn't previously exist.

◆ Missing Coping Skills

Those suffering from addiction usually have a reason why they began abusing opioids, and for most, it all boils down to missing coping skills. Dealing effectively with stress, illness, fear, depression, boredom, loneliness, and other negative states requires developing healthy thought patterns and practicing specific coping strategies.

Until you change negative ways of thinking about yourself, your addiction, and your relationships, and learn how to cope with difficult feelings and emotions, opioids will be the coping mechanism of choice.



A photograph of two men in a conversation. The man on the left, seen in profile, has curly brown hair and wears glasses and a blue and white plaid shirt. The man on the right, facing him, has short brown hair, a beard, and is wearing a white and navy blue striped sweater. They are in a dimly lit room with warm, bokeh-style lights in the background and a potted plant to the right. A dark blue semi-transparent banner is at the bottom, containing white text.

HOW OPIOID ADDICTION AND DEPENDENCE DEVELOP

PEOPLE WHO ARE ADDICTED
NO LONGER HAVE CONTROL
OVER HOW MUCH, HOW
OFTEN, OR FOR HOW LONG
THEY USE.

Addiction and dependence aren't the same thing and they develop differently. They both develop as the result of brain changes caused by heavy substance abuse.

Addiction

Addiction is characterized by compulsive opioid abuse despite the negative consequences it causes. People who are addicted no longer have control over how much, how often, or for how long they use.

Heavy substance abuse leads to changes in the brain's reward, learning, and memory centers. Opioids cause the brain to release large amounts of dopamine in the nucleus accumbens, which is the reward center of the brain. When this occurs, the memory center, known as the hippocampus, records a memory of the pleasure it produces and the environmental cues that are present while using. The amygdala, which is associated with learning and with survival instincts, creates a conditioned response to those environmental cues – think Pavlov's dog, who salivated every time a bell rang because he associated the sound with getting fed. This response causes cravings for opioids whenever you're exposed to the people, places, things and emotions that you associate with using.

With repeated exposure to opioids, the pleasure center of the brain communicates with the prefrontal cortex, the area responsible for executing tasks, in a way that leads to compulsive behaviors. Opioids have re-wired the reward pathways in the brain, and even if you want to stop or try to stop, you find that you can't – at least not for any length of time. Many people will fall into a remission-relapse cycle that doesn't seem to end.

Signs and symptoms of addiction include:

- ◆ The inability to stop using, even if you want or try to
- ◆ Using more opioids or using for a longer period of time than you intended
- ◆ Using opioids despite the problems it causes for your relationships, health, finances and legal status
- ◆ Neglecting duties at home, work, or school due to opioid use
- ◆ Losing interest in activities you once enjoyed
- ◆ Taking risks to obtain opioids or engaging in risky behaviors while under the influence
- ◆ Hiding the extent of your opioid use from others
- ◆ Neglecting personal hygiene and basic self-care

Once an addiction develops, substance abuse is no longer a choice, but rather a compulsion. The National Institute on Drug Abuse stresses that good intentions and willpower are rarely enough to end an addiction for the long-term.⁴





Dependence

Dependence is characterized by withdrawal symptoms that occur when you quit using a substance cold-turkey. For opioids, these symptoms include nausea and vomiting, abdominal cramps and diarrhea, hot and cold sweats, and muscle cramps.

When you repeatedly abuse opioids, your brain changes the way it operates in order to compensate for the heavy presence of the drug. It does this by altering the activities of neurotransmitters – including reducing dopamine activity – to try to normalize brain function.

DEPENDENCE IS CHARACTERIZED BY WITHDRAWAL SYMPTOMS THAT OCCUR WHEN YOU QUIT USING A SUBSTANCE COLD-TURKEY.



This leads to tolerance, which occurs when you need increasingly larger doses of opioids to get the same effects smaller doses once produced. But as you increase the dosage, the brain continues to alter its function. At some point, a shift may occur, and your brain will operate more comfortably when opioids are present than when they're not. Then, when you stop using, normal brain function rebounds. This causes the physical symptoms of withdrawal. Tolerance and withdrawal are the two indicators that dependence has occurred.

Opioids produce tolerance very quickly. It doesn't take long to develop an opioid dependence, and the fear of withdrawal keeps many addicted individuals from quitting or getting help.



**OPIOID ADDICTION
IS TREATABLE**



Even severe opioid addiction is treatable. The gold standard of treatment for opioid addiction is medication-assisted treatment, or MAT. MAT involves a combination of medication and counseling, and it offers the best chances of successful long-term recovery. According to the National Institute on Drug Abuse, MAT has been shown to:⁵

- ◆ Decrease opioid use
- ◆ Reduce opioid-related deaths
- ◆ Reduce criminal activity associated with opioid abuse
- ◆ Reduce the transmission of infectious diseases like HIV and hepatitis
- ◆ Increase social functioning
- ◆ Improve retention in treatment
- ◆ Improve birth outcomes for pregnant women

THE MEDICATIONS USED TO
TREAT OPIOID ADDICTION
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THAN ON WITHSTANDING
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Medication-assisted treatment involves two components: Medication and counseling.

Medication

While many people believe that MAT is simply replacing one addiction for another, this simply isn't true. Medication for opioid addiction helps to reduce cravings and normalize brain function so that you can focus on recovering from the addiction. When these medications are taken as prescribed, they help end the addiction to opioids. **Three medications are approved by the FDA for MAT:**

Methadone, which prevents the onset of withdrawal symptoms, including cravings, and blocks the effects of other opioids. Because methadone is a synthetic opioid, it has a high abuse potential and is administered daily at a specialized clinic.

Buprenorphine, which, like methadone, blocks withdrawal and the effects of other opioids. But unlike methadone, buprenorphine has a ceiling effect, and taking more of it won't produce more pronounced effects. This means that it has a lower abuse potential and can be prescribed by a doctor and taken at home.

Naltrexone, which blocks the effects of opioids and reduces cravings. Unlike methadone and buprenorphine, naltrexone can only be taken once all traces of opioids are out of your system. It's available as a daily pill or a monthly injection.

The medications used to treat opioid addiction enable individuals to focus on recovery rather than on withstanding intense cravings.

Counseling

Without the counseling component of MAT, the relapse rate for opioid addiction is over 90 percent. Detox and medication alone can end a physical dependence on opioids, but it won't do much to address the addiction, which is far more complex.

The Substance Abuse and Mental Health Services Administration stresses that there is no single pathway to recovery that works for every individual.⁶ A holistic approach to treatment offers the best outcomes and involves both traditional and complementary therapies.

Individualized treatment plans are central to successful rehab. The treatment plan should address the individual's unique needs, issues, and challenges, and it should evolve to meet new and changing needs as a person progresses through treatment.

**A HOLISTIC APPROACH TO TREATMENT OFFERS THE
BEST OUTCOMES AND INVOLVES BOTH TRADITIONAL
AND COMPLEMENTARY THERAPIES.**



Through a variety of traditional and complementary therapies, people in treatment:

- ◆ Identify harmful thought and behavior patterns and develop healthier ways of thinking and behaving
- ◆ Develop an arsenal of skills and strategies for coping with cravings, stress, negative emotions, and other relapse triggers
- ◆ Address the complex issues behind the addiction
- ◆ Work to repair damaged relationships and restore function to the family system
- ◆ Learn to relax and have a good time without opioids
- ◆ Identify their inherent strengths and values and use them to find purpose and meaning in an opioid-free life

Duration of MAT

Some people will be on medication for a few months, others for a few years. Some will stay on medication for the rest of their lives. Ideally, the counseling component of MAT will last at least 90 days. Anything less is of limited effectiveness, according to the National Institute on Drug Abuse.⁷

A young woman with long brown hair, wearing a pink sweater, sits on a light-colored leather sofa. She is looking towards a man with dark hair, wearing a light blue button-down shirt, who is sitting on the floor. The man is gesturing with his right hand while speaking. They are in a room with large windows in the background, showing a cityscape. A dark blue semi-transparent banner is overlaid on the bottom right of the image, containing white text.

THE BEST APPROACH TO OPIOID ADDICTION TREATMENT FOR YOUNG PEOPLE

Overall, fewer than 10 percent of addicted individuals seek professional help for an addiction. But while people between the ages of 35 and 39 account for 11.7 percent of all treatment admissions, young people between the ages of 20 and 29 account for almost 30 percent, according to the National Institute on Drug Abuse.⁸ This is due, in part, to stronger family ties among young people and their relaxed attitudes toward treatment. Young adults are less likely to stigmatize drug addiction, and they're less likely to feel ashamed or embarrassed about seeking help for mental health issues, including addiction.

Because people of different ages are in various stages of life and have different needs and issues, treatment should be age-appropriate. A high-quality program for any age group will take a holistic approach to treatment that addresses a range of physical, mental, and spiritual issues for whole-person healing.

A treatment approach tailored to young adults will likely include:

- ◆ **Experiential and Complementary Therapies**

Young people respond particularly well to complementary and experiential therapies like art or music therapy, adventure therapy, restorative yoga, and mindfulness-based meditation. These therapies help individuals reduce stress, improve self-awareness and self-confidence, increase self-esteem, build trust, and develop healthy relationships.



◆ **Group Therapy**

Group therapy offers numerous benefits for young people. It helps participants develop communication skills, social skills, and healthy relationships. It promotes honesty, trust, and accountability. Group therapy provides a strong pillar of support in early recovery as the group bonds over shared experiences and seeks to help one another sort through a variety of issues.

◆ **Family Therapy**

Family therapy is a cornerstone of a high-quality treatment program. That's because addiction affects the entire family unit. It leads to unhealthy coping behaviors as loved ones navigate the fear, uncertainty, and stress that addiction brings to the family and the household. Family therapy helps to restore function to the family system through improved communication skills and identifying unhealthy behaviors among members, such as co-dependency and enabling. Family members are encouraged to engage in individual therapy as well to help them address their own issues that may stem from – or contribute to – their loved one's addiction.

◆ **Dual Diagnosis Treatment.**

Because of the high prevalence of mental illness among the 18-to-25 year old demographic, dual diagnosis programs are in high demand. Treating co-occurring disorders requires specialized treatment that addresses both the addiction and the mental illness at the same time, each in the context of the other. This is because mental illness impacts the severity of addiction and vice versa, and both addiction and mental illness have many common underlying causes.



◆ 12-Step Alternatives

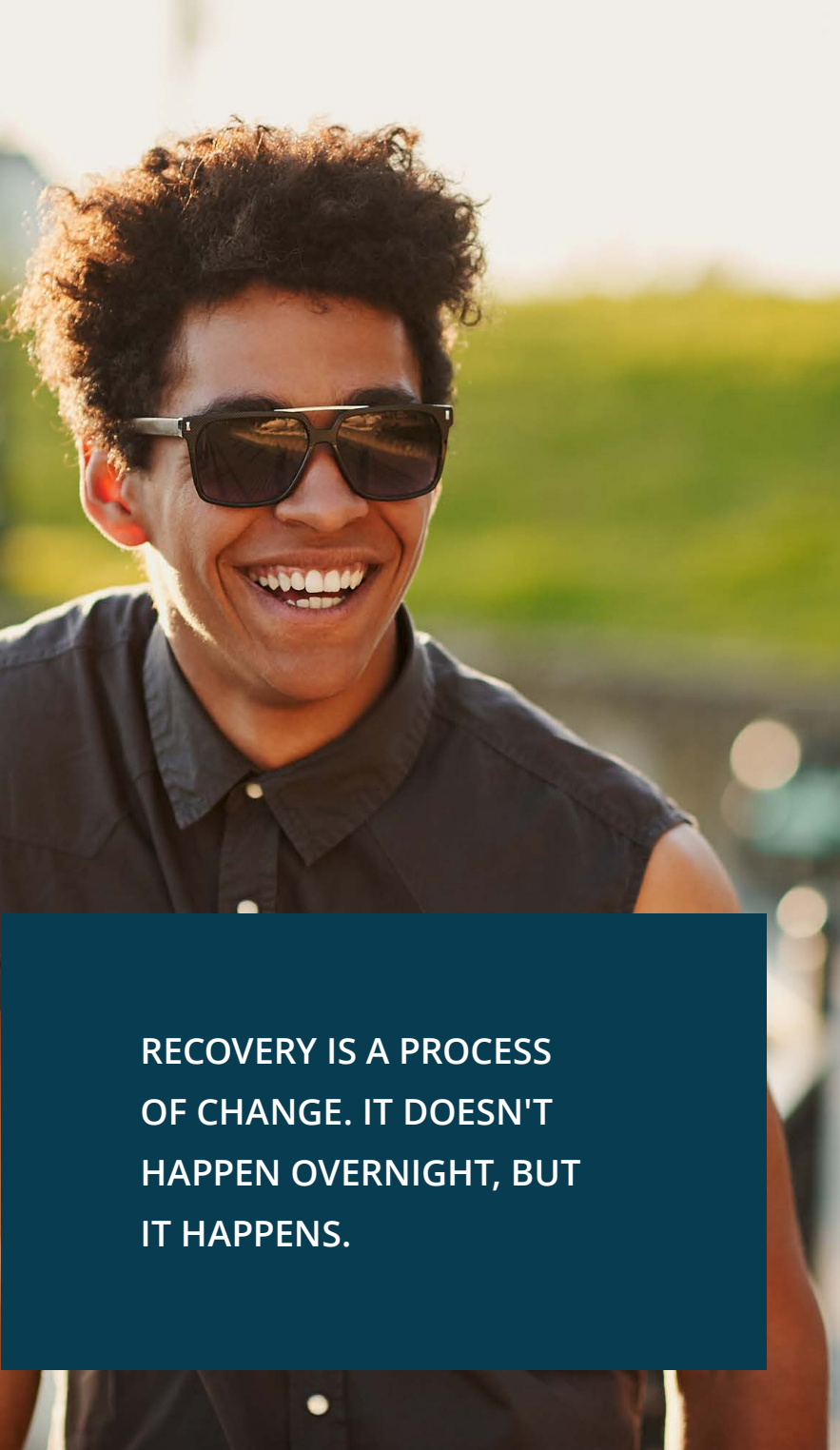
Participation in a support group is an important factor for successful recovery. Alcoholics Anonymous and other 12-step programs have historically been popular, but young people are less religious than their parents' and grandparents' generation, and they tend to push back against tradition. This makes Millennials, as a whole, less receptive to traditional 12-step programs, which have a basis in religion. Treatment programs for younger adults may offer alternatives to the 12-step program, such as Smart Recovery or Secular Organizations for Sobriety.

◆ Purpose-Driven Treatment

Millennials are a purpose-driven generation. They're better informed and more progressive than older generations were at that age, and they're motivated more by happiness and having a purpose than they are by money and material things. Treatment for young people should, like them, also be purpose-driven. It should help young people identify their inherent strengths and values and find ways to use their strengths and live according to their values every day. This, according to the burgeoning field of positive psychology, is a major factor for authentic happiness in life.



THERE IS HOPE



**RECOVERY IS A PROCESS
OF CHANGE. IT DOESN'T
HAPPEN OVERNIGHT, BUT
IT HAPPENS.**

Recovery is a process of change. It doesn't happen overnight, but it happens. Hope, according to the Substance Abuse and Mental Health Services Administration, is the foundation of recovery. Hope is the belief that a better future is possible. There will be setbacks, especially in early recovery, but during challenging times, it will be hope that pushes you to keep at it and to keep striving for a better version of you and a better life for yourself.

Treatment helps you examine your beliefs and discard those that no longer serve you. It helps you identify your strengths and values and develop a world view and a lifestyle that honors those inherent aspects of you. It helps you develop essential coping skills and find purpose and meaning in life that can lead to greater happiness and wellbeing.

Addiction is complex, and opioid addiction is particularly so, but a high-quality treatment program can help you or someone you love find peace, happiness, and a better quality of life for the long-haul.

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