Parents unaware of kids’ drug use
A survey commissioned by the Hazelden Betty Ford Foundation has found U.S. parents are not concerned enough about the potential for their children to use or abuse drugs and alcohol.

Nearly 60 percent of parents of youths ages 12 to 24 years said they were not concerned about their children’s possible abuse of alcohol or other drugs. One in four said their homes have prescription painkillers in unlocked cabinets and 54 percent said they have alcohol out in the open.

Respondents also said they wouldn’t know whom to contact if their child had a drug problem. Only 20 percent said they would seek help from a primary care physician.

The survey of 2,454 parents was conducted by Q Market Research.

Source: A matter of concern: Survey finds parents underestimate risks of alcohol or other drug use. www.hazelden.org/youth.

Marijuana for PTSD study inches closer
A researcher at the University of Arizona may soon begin studying whether marijuana is effective in treating post-traumatic stress disorder (PTSD) among veterans.

The study by Sue Sisley, M.D., will look at whether smoking or vaporizing marijuana can help reduce PTSD symptoms in 50 veterans who have not been helped by medication or psychotherapy. Sisley will test five different potencies of the drug in a placebo-controlled, triple-blind, randomized crossover pilot study funded by the Multidisciplinary Association for Psychedelic Studies (MAPS).

In March, the Department of Health and Human Services became the second government agency to give approval for the study, allowing for the purchase of research-grade marijuana from the federal government’s only marijuana farm at the University of Mississippi.

According to a timeline on the MAPS website (www.maps.org), the study received approval from the Food and Drug Administration in 2011. Researchers must still get approval from the Drug Enforcement Agency before testing can begin.

Source: A matter of concern: Survey finds parents underestimate risks of alcohol or other drug use. www.hazelden.org/youth.

Gateway to smoking?
Young people who use e-cigarettes are more likely to smoke conventional cigarettes, according to a study published March 6 in the Journal of the American Medical Association Pediatrics.

Researchers from the University of California, San Francisco, analyzed data on teenagers who completed the 2011 and 2012 National Youth Tobacco Survey.

Among the findings, use of e-cigarettes was associated with higher odds of being a current or past cigarette smoker. The authors stated: “Use of e-cigarettes does not discourage, and may encourage, conventional cigarette use among U.S. adolescents.”


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Opioid prescribing primer

Doctors urged to become knowledgeable about risks

BY CARMEN PEOTA

If there was a take-away message from a February educational session at the University of Minnesota’s McNamara Center, it was that physicians need to know a great deal before they ever prescribe long-acting and extended-release opioids.

That message was delivered by Gavin Bart, M.D., Ph.D., and Charlie Reznikoff, M.D., both addiction medicine specialists at Hennepin County Medical Center. The two were asked by the Minnesota Medical Association to present curriculum on mitigating risks related to these drugs, which are often prescribed for pain.

Reznikoff told audience members to base decisions about prescribing opioids on evidence and indications. He also emphasized the importance of getting to know patients in order to weigh potential benefits against potential risks, including addiction and abuse. To illustrate the challenge of doing that, he asked the audience to picture a 25-year-old military veteran who has PTSD and is an amputee and complains of pain. The patient would have a compelling indication for treatment, he said, but also would be in the highest risk category for substance abuse.

Bart addressed technical issues, including the differences between specific formulations and brands. He said physicians must do their homework long before they prescribe or counsel patients. They need to know about disposal, limitations of usage and that dose equivalency tables are problematic. They also need to know about the indications and potential interactions.

Both presenters said doctors need to be forthright when talking to patients about the risk of mixing alcohol and opioids. Reznikoff said patients need to be told that mixing any amount of alcohol and opioids is dangerous. And Bart said the best approach is to bluntly state, “If you misuse this drug, it could lead to death.”

A video of the session is available online at www.mnmed.org (click on Events, then Education, then CME Webinars). Physicians who view the webinar and complete the evaluation are eligible for CME credit.

Physicians and other health care professionals took part in the seminar on minimizing the risks associated with prescribing opioids.

FDA approves new opioid formulation

The Food and Drug Administration’s February approval of Zohydro sparked a rash of criticism from experts across the country. The drug is the first extended-release hydrocodone product to be approved that does not contain acetaminophen. A coalition of 40 groups called on the FDA to revoke the decision, pointing out that the drug was so potent a single dose could kill a child. Critics also noted that the drug is prone to abuse because it is crushable.

Zohydro’s maker, Zogenix, claims its product meets the needs of patients at risk of liver damage if they take acetaminophen or who aren’t helped by combination pain drugs.

In a statement, company president Stephen Farr, Ph.D., said Zogenix would provide education on safe use to physicians, patients and pharmacies and that the company was developing a noncrushable formulation.

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