OPIOIDS

What do Heroin, Morphine, Codeine, Oxycontin, Dilaudid, Darvocet, Percodan and Percoset have in common?

They are <u>ALL</u> highly addictive drugs.

FACTS:
- Opioids, often called narcotics, are analegesics (pain reducers) which work by depressing the central nervous system. They can also depress the respiratory system.
- Opioids are very addictive, both physically and psychologically. Daily use for only a <u>short</u> time can result in physical and/or psychological dependence.

Nature of the disease of opioids addiction:

Tolerance – With succeeding doses you need to increase the dosage to get the same effect.

Withdrawal: When you take the drug away, you immediately have a set of uncomfortable symptoms:
- Sweating
- Nausea / Vomiting
- Cramps
- Diarrhea
- Headaches
- Muscle Spasms

Features of addictive disease: Craving (drug hunger)
Continued use despite harmful consequences

Opioid addiction is:
Chronic – long lasting
Progressive – gets worse over time
Primary – has its own course and progress
Potentially fatal – through accidental overdose or damage
to the body

Who is susceptible to opioid addiction?

There might be a co-susceptibility or common susceptibility between alcoholism and cocaine dependence and opioid addiction and other substance use disorders to the point where, if you have in your family history a parent or grandparent or some other close relative who is addicted to opioids or cocaine or alcohol or some other drug – some history of addictive disease, that will increase your chance of becoming addicted by double or triple.

While anyone who is exposed to opioids is potentially at risk to develop an opioid use disorder, those who have a family history (or a genetic link) of substance use disorders (including those involving non-opioids such as alcohol or cocaine) are shown to be at higher risk.

The growing popularity and use of these drugs have led to their becoming a preferred drug of abuse.

Please talk with your doctor!