



DrugFree@WorkPlace

The Next Drug Epidemic?

America has suffered from one drug epidemic after another since the Civil War. In the 1800s a morphine epidemic plagued the country. In the 1900s a cocaine epidemic led to the criminalization of cocaine through the passage of the Dangerous Drug Act in 1920. In the 1930s through the late 1940s America experienced a heroin epidemic. Amphetamines became the drug of choice in the 1950s, and in the 1960s, widespread use of LSD led to President Nixon's "War on Drugs" and the classification of LSD as a Schedule 1 drug.

In the 1970s the heroin epidemic once again returned due in part to Vietnam War soldiers who were using the drug while fighting overseas. The use of crack cocaine significantly increased to epidemic levels in the 1980s and ecstasy was the party drug of the 1990s.

The opioid epidemic began in the early 2000s and continues along with a prescription drug epidemic to this day. And of course, throughout all of these drug epidemics, alcohol and cigarettes have been and

remain the nation's continuing addictions.

The history of drug use and drug epidemics in America leads one to believe that unfortunately, there will be another drug epidemic when the opioid epidemic finally comes to an end. The question is, what will be the next drug that results in drug overdose deaths at epidemic levels? History has shown that worldwide, stimulant epidemics typically follow opioid epidemics.

Methamphetamine

Over the past ten years, there has been a substantial increase in the use of the stimulant drug methamphetamine, and meth-associated deaths. Methamphetamine deaths increased five-fold from 2012 to 2018, and these overdose deaths have continued to increase due to the COVID-19 pandemic. In fact, death from methamphetamine use has surpassed deaths from heroin and prescription opioids (but not fentanyl) in recent years. This steep rise in methamphetamine overdoses foreshadows a new methamphetamine epidemic following the opioid epidemic. Currently, of all illicit drugs available, meth poses the greatest threat of a new epidemic to the United States.

Addiction and Health Concerns

Super labs in Mexico are producing methamphetamine that is 95% pure and highly addictive. Because of the extreme addictive nature of this new meth, use of the drug has once again become a major healthcare concern.

In addition to the potential for overdose death, methamphetamine use leads to serious health problems. Meth is toxic to the brain and body, and can cause short-term psychiatric symptoms like anxiety, disrupted speech patterns, hyper-irritability, and aggression. Chronic use can lead to meth-induced psychosis, hallucinations, delusions, and paranoia. Long-term use can cause damage to the heart, lungs, and kidneys. Injecting the drug can increase the chances of contracting Hep C and HIV.

Communities and Businesses

Methamphetamine use also damages communities and businesses. Meth is often cooked in homes and commercial properties using readily available products and its manufacture creates significant problems and hazards including explosions, toxic waste, and child neglect and abuse.

Methamphetamine in the community results in an increase in crime in such areas as burglaries, theft (especially identity theft), physical and/or domestic violence, and even murder.

In the workplace, meth use leads to excessive absenteeism, increased illness rates, more accidents, and reduced productivity. These problems result in higher healthcare costs and increases in workers' comp insurance premiums.

A study on the economic impact of methamphetamine use found that meth-addicted workers cost each business almost \$47,500 per year.

Methamphetamine also has the potential to increase workplace violence. Workplace violence may be verbal or physical, but it is more likely to be physical with a methamphetamine user.

Dealing with the Crisis

As with all other drug epidemics, combating the methamphetamine problem will require a multi-faceted strategy that includes law enforcement, substance abuse prevention, and harm reduction. Individuals, communities, and businesses will have to join together to address the problem on multiple fronts.

The coming methamphetamine crisis also underscores the need for more diverse treatments for meth overdose and use disorders be developed, especially medication assisted treatments like naltrexone and bupropion, which are not yet FDA approved for methamphetamine addiction.