Messages to Share

Below are sample messages that can be shared on social media or as Plan of the Week notes aligned with Navy Drug Detection and Deterrence’s prevention efforts:

1. Maintaining a regular physical fitness routine which includes aerobic and strength training exercises is a great way to reduce the risk of certain chronic illnesses. Find tips on incorporating more physical activity into your life and learn about the benefits from the Navy and Marine Corps Public Health Center’s Physical Fitness Month toolbox at go.usa.gov/xm3AG.

2. May 12-18 is National Prevention Week, an annual opportunity for communities to increase awareness and action around mental health and substance use disorders, foster partnership and collaboration and promote resources and education. Learn more about National Prevention Week at go.usa.gov/xm3sx.

3. Memorial Day is almost here. Planning to visit your hometown this summer? Mom may offer a prescription medication for your headache or a buddy may want you to try out some CBD they just got. Protect your career. Avoid medications not prescribed to you and substances prohibited by Navy policy, including CBD.

4. Mother’s Day marks the beginning of National Alcohol- and Other Drug-Related Birth Defects Awareness Week. During pregnancy, it is important to avoid alcohol and substances, including certain prescription medications to prevent harm. Learn more from the CDC’s Substance Use During Pregnancy Page.

Spotlight on Opioids

Preventable deaths in the U.S. reached their highest number in history in 2017 (169,936), a 5.3% increase from 2016. The number one cause of preventable death? Poisoning, including drug overdoses, at 64,795 deaths, an 11.1% increase from the previous year. The majority of drug-related overdoses are from opioids. American deaths from prescription opioid overdose between 2013 and 2017 were higher than U.S. military deaths in the Vietnam, Iraq, and Afghanistan wars combined.

Opioids are often prescribed following surgery or injury or for painful health conditions such as cancer. In recent years, prescriptions for opioids have increased for less-severe complaints such as back pain or osteoarthritis, despite serious risks. The 2015 Department of Defense Health Related Behaviors Survey (HRBS) reported that 21% of service members used opioid pain relievers in the past year, and 2.4% used them without a prescription.

Morphine, methadone, hydrocodone, oxycodone are common opioids. The synthetic opioid fentanyl is 50 times more powerful than heroin and responsible for the majority of overdose deaths (including the deaths of Prince and Tom Petty). Fentanyl can be delivered through a skin patch (brand name Duragesic and Ionsys), lozenges commonly referred to as fentanyl “lollipops” or in sublingual or nasal sprays. Brand names of opioid painkillers include OxyContin, Percocet, Vicodin, Percodan, Tylox, Lortab, and Demerol. The risk of death rises sharply when opioid dosage is 50 mg or greater and benzodiazepine (such as Valium, Xanax, and Klonopin) is also used.

If you are living with chronic pain, discuss all treatment options with your doctor. Options may include acetaminophen (Tylenol) or ibuprofen (Advil), physical therapy, exercise and weight loss, topical agents (such as lidocaine), cognitive behavioral therapy, or acupuncture and massage. The Centers for Disease Control and Prevention (CDC) recommends using non-opioid treatments to the fullest extent possible.

Never take prescription opioids in greater amounts than prescribed, and never share them with others. Store them in a secure place, out of reach of others (including children, family, and visitors). Avoid flushing leftover medications as this can contaminate the water supply and cause ecological harm. Instead, utilize a drug take-back program—some pharmacies have installed medicine disposal kiosks or can provide mail-back envelopes— or dispose of them in the trash in a small plastic bag along with an unwanted substance such as kitty litter or used coffee grounds. Remove identifying personal information on the prescription label before throwing it away.
E-Cigarettes: Not for Cessation

World No Tobacco Day is an international effort by the World Health Organization and other partners to promote a period of 24-hour abstinence from all tobacco products, observed annually on May 31. This year’s World No Tobacco Day focuses on the impacts of tobacco on lung health. Smoking is the number one risk factor for the development of lung cancer (linked to up to 90% of all lung cancer deaths in the US), plus it contributes to stroke and heart disease risk and is associated with chronic obstructive pulmonary disease (COPD).

Some people believe electronic cigarettes are safer than cigarettes and use them in an attempt to quit, but studies have shown that those who start vaping to quit smoking often end up becoming dual smokers and vapers. A recent study suggests that dual use of cigarettes and e-cigarettes increases nicotine use frequency and dependency, potentially making it difficult to quit using either.

The emergence of e-cigarettes is relatively recent, so there is little information available on the potential long-term effects of the products on lung health. The US Surgeon General has determined, though, that some chemicals in secondhand emissions from e-cigarettes can cause lung disease.

Instead of relying on another nicotine delivery system to quit smoking, smokefree.gov suggests making a plan to quit, avoiding triggers, fighting cravings, and seeking support from loved ones. Combining in-person counseling with cessation medications such as varenicline (Chantix) and bupropion (Wellbutrin or Zyban) is the most effective, and a healthcare provider can help determine the best options.

World No Tobacco Day is a great day to join people around the world in a potential first step towards fully quitting smoking, but be aware of the risks associated with using e-cigarettes as a tool to quit.

Risks of Kratom

Kratom is a plant native to Southeast Asia. In low doses, kratom may produce stimulant effects and in high doses, have opiate-like effects. It is often marketed as a dietary or herbal supplement that can help with pain, depression and anxiety. But data from the State Unintentional Drug Overdose Reporting System show that kratom has been a factor in some recent drug overdose deaths.

The CDC has determined that between July 2016 and December 2017, 91 Americans in 27 states died from fatal overdoses in which the drug kratom was a contributing factor. In addition to those 91 deaths, another 61 fatal drug overdose victims were found to have had the drug in their bloodstream, though other drugs may have caused the overdoses.

Overdose deaths involving kratom still account for less than 1% of the 27,000+ fatal documented overdoses, according to researchers. But nearly 80% of people who died of kratom overdoses also had a history of other substance misuse, including fentanyl, heroin and prescription opioids. Kratom is not currently a controlled substance but the US Drug Enforcement Agency issued a warning against the drug in 2017, listing it as a “drug of concern.”