

Problem Behaviors Can Signal Risk in Prescribing Opioids to Teens



A recent article posted on the National Institute on Drug Abuse (NIDA) website noted that in the years 2007 to 2009, more than 1 in 5 high school seniors nationwide had used an opioid painkiller (e.g., Vicodin, OxyContin, Percodan, Percocet, Demerol, Dilaudid, morphine, or codeine) at least once in their lives.

Roughly 1 in 8 had used these medications without a doctor instructing them to do so.

Any history of such nonmedical opioid use should raise a red flag for a person's potential engagement in multiple problematic substance-related behaviors.

The findings, by Drs. Sean Esteban McCabe, Carol Boyd, and Brady West at the University of Michigan and Dr. Christian Teter of the University of New England, highlight the need for physicians to exercise caution in prescribing opioid analgesics to teens.

The research also identified several problem behaviors whose presence can alert physicians that a teen requires particularly close monitoring when treated with these medications.

The behaviors include using an opioid for motives other than pain relief, co-ingesting an opioid with other drugs, and using non-oral routes of opioid administration.

To read the full article, [please click here](#).

Without question, [Talking With Your Children](#) is extremely important in your efforts to protect our kids from alcohol and drugs. But there are other things that we need to do as parents to be effectively involved in preventing alcohol and drug problems for our kids and in our families. [Read more here](#).