

**If you need** more and more of the drug to still get the desired effect, this means your tolerance has increased. You and your healthcare team should reassess your pain treatment plan. Ask about alternative pain management options—there are many to choose from.

**If you feel** you have developed a dependence to opioids, quitting and entering treatment now greatly decreases your chances of death, and of sustaining a harmful brain injury. If these aren't viable options for you at this time, reduce your use and practice harm reduction techniques to lower your chances of overdose until you are able to quit.

**Even if you are** using an opioid medication exactly as prescribed, it is still possible to overdose. You do not need to be addicted or using street drugs to have an accidental overdose. It is always wise to obtain Naloxone and make sure those around you know the signs of overdose and how to administer the Naloxone.

## AFTER AN OVERDOSE

If you have ever overdosed and now feel "different," it's possible you are living with the aftermath of a brain injury.

### Examples of common symptoms include:

- Foggy Thinking
- Dizziness or Disorientation
- Balance Issues
- Slower Processing Speeds
- Judgment Issues
- Slurred Speech
- Change or Disruption in Sleep Patterns
- Headaches, Irritability
- Mood & Personality Problems
- Memory Issues
- Trouble Reading/Writing
- Seizures
- Vision and Hearing Issues

*A survivor of brain injury may experience one or several of these symptoms; every brain injury is unique to the individual it affects.*

Other possible causes of brain injury include falls, vehicle accidents, assault, firearms, penetrating and blunt trauma, blast exposure, and nerve agent poisoning.

If you feel you have ever experienced a brain injury, we're here to help.

The Brain Injury Alliance of Arizona works with survivors and family members to provide them the guidance and resources they need to navigate life after a brain injury.

The Brain Injury Alliance of Arizona (BIAAZ) is a statewide non-profit organization dedicated to working to prevent brain injuries and enhancing the quality of life for brain injury survivors and their families through resources and information.



Making the invisible visible since 1983

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# Battling Addiction:



*The Dangers of Military & Veteran Opioid Misuse*

**Military service comes with a multitude of risks and dangers. Many of those serving our country come home with scars—both visible and invisible—and are in need of care and treatment. But what happens when our methods of treating the pain becomes a new danger?**



If you were treated for injuries relating to your service, it's possible you were prescribed an opioid medication for pain management.

**Opioid medications you may have been prescribed include:**

- Hydrocodone (Vicodin®, Lortab®, Norco®)
- Oxycodone (OxyContin®, Percocet®, Endocet®)
- Morphine (MS Contin®, Kadian®, Oramorph SR®)
- Hydromorphone (Dilaudid®)
- Fentanyl (Duragesic®)
- Codeine (Tylenol® with Codeine #3, Tylenol® with Codeine #4)
- Methadone (Dolophine HCL®, Methadose™)
- Tramadol (Ultram®)
- Buprenorphine (Butrans®)
- Oxymorphone (Opana®)
- Tapentadol (Nucynta®)

**It's important that anyone using any opioid medication understands the risks associated with their use.**

## RISK OF DEPENDENCE

Opioid dependency means the body starts to rely on the medication to simply feel normal. This can happen even at low doses and over a short amount of time. Once a dependency is formed, stopping the medication can cause a person to feel increased pain and symptoms of withdrawal.

Opioid dependency is not a result of weakness or low morality—it can happen to anyone.

## RISK OF INCREASING TOLERANCE

Over time, a person with an opioid dependency may find they need more and more of the drug to treat their pain or avoid withdrawal. This is very dangerous, as larger amounts of the drug increases risk of overdose.

If a person builds up a high tolerance and then does not take the drug for a while, their tolerance may decrease without them realizing it. If the person returns to the drug at the same dosage as before, it may now be far too much for their body to handle and can cause an overdose.

## RISK OF TURNING TO ILLICIT DRUGS

If a person is prescribed an opioid and develops a dependence, they may turn to other methods of treating their pain or withdrawal symptoms when their prescription runs out. They may ask friends or family to provide them with medications not prescribed to them. They may even start stealing others' medications.



If prescription medications can't be obtained, or become cost prohibitive, a person may turn to "street drugs" such as heroin and/or illegally pressed pills. This is an especially dangerous practice, as there is no way to know exactly what drugs are being ingested. Many street drugs are laced with Fentanyl, which is 80-100 times stronger than morphine. Since there is no quality assurance, it's very possible to encounter a poorly mixed batch that could be life-ending.

## RISK OF OVERDOSE

Opioid overdose slows or stops breathing, which reduces or cuts off oxygen to the brain.

In 2009, VA Secretary Robert Wilkie stated, "Veterans are twice as likely to die from accidental overdose compared to the general US population."

Fortunately, a drug called Naloxone is available, which can reverse opioid overdose. Naloxone education and prescriptions are free to Veterans enrolled for VA care who may be at-risk of opioid overdose, thanks to the Comprehensive Addiction and Recovery Act of 2016. From May 2014 to September 2019, the VA's Opioid Overdose Education and Naloxone Distribution (OEND) program issued Naloxone to more than 200,000 Veterans. This resulted in more than 700 successful opioid overdose reversals— over 700 lives saved.

But death is not the only danger of opioid overdose. The reduction or complete lack of oxygen to the brain can cause hypoxic or anoxic brain injuries, even if the overdose is reversed with Naloxone. The longer the brain experiences oxygen deprivation, the more serious the brain injury and symptoms. Multiple overdoses increase the risk for lasting damage to the brain, even if a person is revived and their life is saved every time.

## WHAT TO DO

If you have been prescribed an opioid pain medication, there are steps you can take to avoid forming a dependency or overdosing.

Opioid medications should be used short-term to "take the edge off" chronic pain. They should not be used daily or over an extended period of time.