



drug overdose
coping with sudden **loss**

NOPE NARCOTICS
TASK FORCE OVERDOSE
PREVENTION &
EDUCATION

3233 Commerce Place, Suite A
West Palm Beach, Florida 33407
561.478.1055 | Fax: 561.689.2440 | 866.612.NOPE
www.nopetaskforce.org

NOPE NARCOTICS
TASK FORCE OVERDOSE
PREVENTION &
EDUCATION



current trends

how this **could happen**

The first question you may be asking is, how could this happen to our family?

You may have been aware that your loved one was using and/or abusing substances, he or she may have received treatment on one or more occasions, or may have been arrested for possession of illegal substances or related illegal activities. Or, you may be discovering for the first time that your loved one has been involved with substance use.

To help understand how this could happen, let's first take a look at the statistics....you are not alone.

- More than 27,000 US Citizens die each year from an accidental drug overdose. (CDC 2009)
- Drug overdose deaths are second only to car crashes for unintentional injury deaths. (CDC 2008)
- 1.5 million Hospital Emergency Room Visits are attributed to drug misuse or overdose. (Drug Abuse Warning Network (DAWN) 2006)
- The non-medical use of prescription pain relievers is now the second most prevalent form of illicit drug use in the nation. (SAMHSA 2010)
- Rehab admissions for prescription medication abuse grew by 400 percent over a 10-year period. (SAMHSA 2010)

introductions

introductions & **acknowledgements**

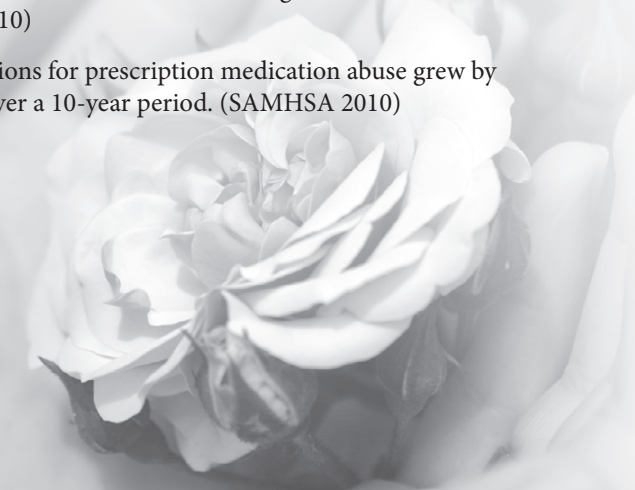
The sudden loss of a loved one is painful and difficult. When that loss involved alcohol and/or other drugs, the survivors may also feel and experience the stigma associated with addiction and substance abuse. Too often the consequences of addiction are perceived as deserved and shameful, leaving families and friends to grieve in silence.

This booklet has been created to support the survivors of those lost to drug overdose or drug related deaths. The information is provided by Narcotics Overdose Prevention and Education (NOPE), a non-profit organization, unless otherwise sourced.

The contents of this booklet, including text, graphics, images, and other material are for informational purposes only. Nothing contained in this booklet should be considered or used as a substitute for professional medical or mental health advice, diagnosis, or treatment.

contents

Current Trends.....	1
Substance Abuse, Addiction and the Brain.....	2
Drug Overdose.....	5
Working with the Justice System.....	6
Understanding the Grieving Process.....	8
Where to Find Support.....	13
Support Resources.....	14
About Us.....	15
Awareness.....	Inside Back Cover



substance abuse, addiction and the brain

understanding **substance abuse**

Substance abuse can simply be defined as a pattern of harmful use of any substance for mood-altering purposes. Medline's medical encyclopedia defines drug abuse as, "the use of illicit drugs or the abuse of prescription or over-the-counter drugs for purposes other than those for which they are indicated or in a manner or in quantities other than directed."

understanding **prescription drug abuse**

Prescription Drug Abuse is the use of prescription medication to create an altered state to get high, or for reasons – or by people – other than those intended by the prescribing physician.

understanding **addiction**

Addiction is a disease characterized by compulsive drug seeking behavior regardless of the consequences. Addiction develops over time. As the illness progresses, addicted people need more alcohol or other drugs to obtain the same desired effect. As the addiction flourishes, the illness becomes harder to treat and the related health problems become worse. The risk for overdose increases.

what drugs do **to the brain**

Some drugs work in the brain because the drug molecules have a similar size and shape as naturally occurring neurotransmitters. In the right amount or dose, these drugs lock into receptors and start a chain reaction of electrical charges, causing neurons to release large amounts of their own neurotransmitter.

Some drugs lock onto the neuron and act like a pump, so the neuron releases more neurotransmitter. Other drugs block re-absorption or reuptake and cause unnatural floods of neurotransmitter.¹

All drugs of abuse, such as nicotine, cocaine, and marijuana, primarily affect the brain's limbic system. Scientists call this the "reward" system. Normally, the limbic system responds to pleasurable experiences by releasing the neurotransmitter dopamine, which creates feelings of pleasure and reward.

what happens if someone **keeps using drugs**

Think about how you feel when something good happens—maybe your team wins a game, you're praised for something you've done well, or you drink a cold lemonade on a hot day—that's your limbic system at work. Because natural pleasures in our lives are necessary for survival, the limbic system creates an appetite that drives you to seek those experiences.

The first time someone uses a drug of abuse, he or she experiences unnaturally intense feelings of pleasure. The limbic system is flooded with dopamine. Of course, drugs have other effects, too; a first-time smoker may also cough and feel nauseous from toxic chemicals in a tobacco or marijuana cigarette.²

But the brain starts changing right away as a result of the unnatural flood of neurotransmitters. Because they sense more than enough dopamine, for example, neurons begin to reduce the number of dopamine receptors. Neurons may also make less dopamine. The result is less dopamine in the brain: This is called down regulation. Because some drugs are toxic, some neurons may also die.³

¹ (Source: National Institute on Drug Abuse. The Brain: Understanding Neurobiology through the Study of Addiction (<http://science-education.nih.gov/Customers.nsf/highschool.htm>): NIH Pub. No. 00-4871)

² (Sources: National Institute on Drug Abuse. The Brain: Understanding Neurobiology through the Study of Addiction (<http://science-education.nih.gov/Customers.nsf/highschool.htm>): NIH Pub. No. 00-4871)

³ (Sources: National Institute on Drug Abuse. The Brain: Understanding Neurobiology Through the Study of Addiction (<http://science-education.nih.gov/Customers.nsf/highschool.htm>): NIH Pub. No. 00-4871. National Institute on Drug Abuse. Mind Over Matter: The Brain's Response to Drugs Teacher's Guide (http://teens.drugabuse.gov/mom/tg_intro.php))

how many times does someone have to take a drug to become an addict?

No one knows how many times a person can use a drug without changing his or her brain.

A person's genetic makeup probably plays a role. But after enough doses, an addicted teen's limbic system craves the drug as it craves food, water, or friends. Drug craving is made worse because of down regulation.

Without a dose of the drug, dopamine levels in the drug abuser's brain are low. The abuser feels flat, lifeless, depressed. Without drugs, an abuser's life seems joyless. Now the abuser needs drugs just to bring dopamine levels up to normal levels. Larger amounts of the drug are needed to create a dopamine flood or high, an effect known as tolerance. By abusing drugs, the addicted teen has changed the way his or her brain works. These changes cause addicted drug users to lose the ability to control their drug use. Drug addiction is a disease.¹

if drug addiction is a disease, is there a cure?

There is no cure for drug addiction, but it is a treatable disease; drug addicts can recover. Drug addiction therapy is a program of behavior change or modification that slowly retrains the brain. Like people with diabetes or heart disease, people in treatment for drug addiction learn behavioral changes and often take medications as part of their treatment regimen.²

¹ (Source: National Institute on Drug Abuse. The Brain: Understanding Neurobiology Through the Study of Addiction (<http://science-education.nih.gov/Customers.nsf/highschool.htm>):NIH Pub. No. 00-4871)

² (Source: National Institute on Drug Abuse. NIDA InfoFacts: Drug Addiction Treatment Methods (<http://www.drugabuse.gov/infobox/treatmeth.html>): Bethesda, MD: NIDA, NIH, DHHS. Retrieved June 2003)



drug overdose

A drug overdose occurs when a person accidentally or intentionally misuses any drug or combination of drugs to such excess that it results in direct physiological harm.

dangers of combining drugs and alcohol

Mixing alcohol with certain drugs is hazardous and unpredictable. Alcohol magnifies the impact of many commonly used drugs. Combining prescription drugs with other prescription medicines and/or alcohol increases the effects of each drug and increases the risk of overdose and death.

who is at risk of overdose

- History of substance abuse
- History of drug related arrests
- History of substance abuse treatment
- History of mental health treatment
- History of drug overdose
- Under a physician's care at time of death
- Most likely combinations = alprazolam, oxycodone, cocaine, methadone

(Source: Overdose Risk Profile, Palm Beach County Sheriff's Office, 2009)

LOVING MEMORIAL
DEPLY MISSED

working with the justice system

why is there an **investigation**?

In most jurisdictions, the Office of the Medical Examiner is required by law to conduct investigations that reveal the cause and manner of a person's death. In cases of sudden, unanticipated death, law enforcement officers are routinely included in the investigative process to determine if any criminal action contributed to the person's demise. If actionable, unlawful behavior is uncovered, law enforcement officers begin a criminal investigation with the goal of identifying the perpetrator(s) and seeking prosecution.

what will happen with **the investigation**

In most cases of sudden death, the investigation is initiated by the first responding uniformed police officer. Once the fatality is confirmed, the area becomes a protected death scene. Access to the scene is restricted so that potential evidence can be maintained, photographed, documented, and collected.

In many jurisdictions, the investigation of sudden death is then turned over to, or overseen by, a detective. The lead detective is responsible for making strategic decisions that intentionally move the investigation forward. Witnesses are often interviewed to help recreate the decedent's last moments. Family members are questioned to reveal the decedent's known medical conditions, habits and routines.

The detective works cooperatively with the medical examiner to come to some conclusion about the most likely circumstances that led to the person's death. In most cases of sudden death, an autopsy is required to determine the specific physiological means and contributing causes of death. A toxicology analysis is a critical component of the autopsy process. Toxicology findings reveal chemicals, drugs and poisons contained within body fluids and tissues. Unfortunately, toxicology analysis may take weeks or months to complete.

Once all the available information is gathered, the detective comes to a conclusion about the cause, manner and circumstances of death.

This conclusion is based on the totality of information gathered during the investigation.

If no criminal behavior is uncovered, the decedent's property can be released to the decedent's next of kin.

If the death was the result of accidental events, police reports are written to document the process/sequence of the investigation and to give explanation for the conclusions.

If criminal behavior is uncovered, however, the investigation continues until sufficient evidence is gathered to move for prosecution. There are occasions where criminal behavior is discovered however the available evidence is insufficient for prosecution.

can someone **be arrested**?

In cases of drug overdose death, the source point for drugs is an important element of the investigation. Unfortunately, illicit drug users frequently have multiple and transient sources of drug supply. Directly linking a specific drug supplier to the specific drug that played the causal role in a user's death is a significant challenge for successful prosecution. Sadly, in most cases, the only person who knows how, where, when, and from whom the fatal drug was obtained; is the victim.

Often, information about alleged drug suppliers is gathered during an overdose death investigation. Although not immediately actionable, that information can be the starting point for an investigation into that drug supplier's future crimes.

what can I do **to help**?

- Relay any relevant information to the lead detective
- Read the pertinent laws
- Understand the limitations of the criminal justice system
- Maintain reasonable expectations
- Talk with others that have lost loved ones to overdose death
- Participate in the NOPE Task Force

understanding the grieving process

grief

Grief is the normal process of reacting to a loss including the emotional and life changes that survivor's experience.

(Source: MedicineNet.com.)

Grieving is a personal experience. The way you process your loss and the length of time for grieving will depend on your personality, your relationship with the deceased and the cause of death.

Common symptoms of grief include shock, numbness, anger, guilt, fear, anxiety, depression, physical ailments and sleeplessness.

(Source: <http://www.ivillage.com/grief-and-grieving/4-y-98725>)

the five stages of grief

In her 1969 book, *On Death and Dying*, Elisabeth Kübler-Ross described the five stages of grief and initially applied to people suffering from terminal illness, then later to any form of personal loss (marriage, job, etc.).

The five stages of grief:

- 1. Denial** – “This can’t be happening to me.”
- 2. Anger** – “Why is this happening? Who is to blame?”
- 3. Bargaining** – “Make this not happen, and in return I will...”
- 4. Depression** – “I am too sad to do anything.”
- 5. Acceptance** – “I am at peace with what happened.”

If you are experiencing any of these emotions following a loss, it may help to know that your reactions are natural and that you will heal in time. However, not everyone who is grieving goes through all of these stages – and that’s okay. Contrary to popular belief, you do not have to go through each stage in order to heal. If you do go through these stages of grief, you probably won’t experience them in sequence, so don’t worry about what you “should” be feeling or which stage you’re supposed to be in.

coping with sudden loss

Kirsti A. Dyer, MD, MS – excerpts from “*Dealing with Sudden Accidental or Traumatic Death*”

A sudden, accidental, unexpected or traumatic death shatters the world as we know it. It is often a loss that does not make sense. We realize that life is not always fair and that sometimes bad things happen to good people. The sudden death may leave us feeling shaken, unsure and vulnerable.

definitions

A Sudden Loss occurs without any forewarning. A Traumatic Death is sudden, unanticipated, violent, mutilating or destructive, random and/or preventable; involves multiple deaths or one in which the mourner has a personal encounter with death.

special problems for survivors

Death due to a sudden or traumatic accident or disaster can raise a number of complex issues for the survivors. The grief process is often very different from a natural or anticipated death. Homicide, suicide, or exceptionally tragic events can cause reactions such as Post Traumatic Stress Disorder on the part of survivors and family members. Sudden loss or death may create special problems for the survivors. Many of these problems compound the grief response.

The grief response following sudden loss is often intensified since there is little to no opportunity to prepare for the loss, say good-bye, conclude unfinished business or prepare for bereavement. Families and friends are suddenly forced to face the loss of a loved one instantaneously and without warning. This type of loss can generate intense grief responses such as shock, anger, guilt, sudden depression, despair and hopelessness.



A sudden tragic event shatters our sense of order and thrusts us into a world forever changed. Survivors of sudden loss may experience a greater sense of vulnerability and heightened anxiety. The safe world we once knew, no longer exists. We fear for ourselves, our family and friends. Survivors can become overwhelmingly preoccupied with thoughts that such a random act of violence might happen again.

Along with the primary loss of the person, families and loved ones may experience concurrent crises and multiple secondary losses: lost income, loss of home, loss of social status. The role the loved one held in the family is gone. It takes time for the family to reorganize. Family may be left feeling in a state of perpetual disarray with a lingering sense of unease and disorganization. Marital and other family relationships can become strained.

Additional problems arise if the grieving survivor was involved with the disaster or was physically injured. Memories of the accident or the disaster may dominate the person's mind. They may be taken up with feelings of numbness, unreality and fear. The bereaved person may suffer from "survivor guilt," wondering why they survived when others have died and believing that they could have or should have done more to prevent the tragedy.

sudden death leading to the unanswerable "why?"

It is human nature to want to answer the question "Why?" yet it may be difficult if not impossible to find an answer. Instead the question "Why?" is more of a plea for meaning and understanding.

Asking "Why" may in actuality be counterproductive, especially for the healing process. Perhaps it is better to ask "What can I do about it now?" "How can I help?" or "How do I pick up the pieces and go on living as meaningful as possible?"

basics on coping with the survivor

It is important for the grieving person to take care of him/herself following a sudden loss. He/she is dealing with an event that is beyond his/her control. One way of coping is to do things that help re-establish a sense of control over the world. It is also important to focus on the basic needs for day-to-day survival:

- Maintain a normal routine. Even if it is difficult to do regular activities, try to anyway. Putting more structure into a daily routine will help one to feel more in control.
- Get enough sleep, at least plenty of rest.
- It may be helpful to keep lists, write notes, or keep a schedule.
- Try and get some regular exercise. This can help relieve stress and tension.
- Keep a balanced diet. Watch out for junk food, or high calorie comfort food binges.
- Drink plenty of water.
- Drink alcohol in moderation. Alcohol should not be used as a way of masking the emotional pain.
- Do what comforts, sustains and recharges.
- Remember other difficult times and how you have survived them. Draw upon the inner strength.
- Take it one hour at a time, one day at a time.

(Source: Kirsti A. Dyer, MD, MS – dealing with sudden accidental or tragic loss-sudden death leading to the unanswerable why – <http://journeyofhearts.org/grief/accident2.html>)

emotional support

Robin F. Goodman, Ph.D., excerpt from *Coping With Death After Sudden Loss*

With respect to your emotional needs immediately following a sudden death, you may need help that is similar to crisis intervention in order to get through the shock and disbelief of the event. Understanding the reality of the death becomes a major focus in the beginning stages. Over time, the bereaved deal with issues and feelings comparable to other death experiences. If engaging in activities related to the decedent or disturbing thoughts about the manner of the death occur, consider speaking with a mental health professional.

- Consider sharing your thoughts and feelings with others who have experienced a similar loss.
- Pay close attention to, and get help for, any changes in physical and emotional health as they may be related to the loss.

- Talk to professionals, family and friends to help gain perspective about the death and decrease feelings of guilt.
- Become educated about the cause of death.
- Accept rather than deny your feelings, even unpleasant ones such as anger.
- Be active in making choices about engaging in activities and rituals

(Source: Robin F. Goodman, PhD, ATR-BC © 2000 Lifescope – coping with death after a sudden loss)

consider a journal

You may find it helpful to “sort out” your thoughts about your loved one by writing a letter to the person who died.

The things that are bothering you the most are excellent ideas to journal about. It helps connect you to the messages coming from your heart.

Express your thoughts and feelings about:

- A special memory that I have about you...
- What I miss the most about you and our relationship...
- What I wish I had said or had not said...
- What I'd like to ask you...
- What I wish we'd done or had not done...
- What I have had the hardest time dealing with...
- Ways in which you will continue to live on in me...
- Special ways I have for keeping my memories of you alive...

Choose one or several ideas that are important to you or start at the top of the list and work your way down. These topics may help you come up with ideas specific to your situation and relationship.

(Source: Hospice – http://www.hospicenet.org/html/writing_ideas.html)



where to find support

An average of six (6) people are directly affected by each of the estimated 27,500 deaths that occur each year, including parents who lost children, husbands who have lost wives, wives losing husbands, brothers who have lost sisters.... You are not alone; a support system may already be in place in your area.

nope support group

Too often the disease of addiction is considered deserved and shameful,

leaving families and friends to grieve in silence. NOPE Task Force responded to the need for families to be able to share their grief and experiences openly in a safe place. The NOPE support group is facilitated by a licensed psychotherapist. To participate in or form a group in your community contact NOPE.

nope national candlelight vigil

The Annual NOPE National Candlelight Vigil honors those lost to drug and alcohol related incidents, and those suffering from addiction. The NOPE Vigil strives to raise awareness and open the doors to recovery by eliminating the prejudice that has followed the disease of addiction. NOPE provides a vigil tool kit to host communities and families. The Vigils traditionally are held during Red Ribbon Week in October.

To participate or host a vigil in your community contact NOPE.

support resources

support groups

NOPE Support Group
561-478-1055

Hospice Bereavement
refer to your local phone directory

GRASP
Grief Recovery After a Substance Passing
760-262-8612

websites

NOPE Task Force
www.nopetaskforce.org

GRASP
www.grasphelp.org

Hospice
www.hospicenet.org

Journey of Hearts
www.journeyofhearts.org

Partnership at drug free.org
www.drugfree.org

books

A Broken Heart Still Beats After Your Child Dies
Anne McCracken & Mary Semen, Hazelden

How To Go On Living When Someone You Love Dies
Therese A. Rando, Ph.D., Bantam Books

Losing Jonathon
Robert Waxler & Linda Waxler,

The Grief Recovery Handbook
John W. James and Russell Friedman, Harper Perennial

When a Child Dies From Drugs
Patricia Wittberger & Russ Wittberger, Xlibris Corporation

about us

The Narcotics Overdose Prevention & Education (NOPE) Task Force is a 501-c3 nonprofit organization that was formed in Palm Beach County, Florida in 2004, to combat the illegal use of prescription drugs and narcotics, as well as other abused substances. NOPE Task Force is comprised of community leaders and concerned families working to save lives.

our mission

To diminish the frequency and impact of overdose death through community education, family support and purposeful advocacy.

vision

A world free of overdose deaths.

middle and highschool presentations

The cornerstone of the NOPE Mission is the high-impact, multimedia presentation, which is delivered to middle and high school students. The NOPE presentations are purposefully blunt and evoke powerful emotions. The response from students, parents and teachers has been very positive. Many students seek guidance after the presentation for themselves or to get help for their friends.

university presentations

This contemporary student program aims to raise awareness among all members of a campus community. The content focuses on actual and significant risks associated with combining any and all commonly abused drugs. The presentation includes overdose intervention/prevention strategies and is intentionally tailored to include information about each university's unique efforts to mitigate the negative impact of alcohol and drug use on campus.

NOPE for parents and communities

Drug prevention is a community issue. Each year new studies indicate the vastness of drug use in our schools. NOPE realizes the importance for educators and parents to understand the issues related to drug use in order to learn how to make a difference in their children's lives. NOPE offers parents/caretakers, communities and universities interactive presentations that inform participants about the reality our nation faces regarding substance abuse and overdose death, along with suggestions and parenting strategies to combat the issues.

efficacy

Lynn University, Boca Raton, Florida, provides ongoing quantitative and qualitative research for NOPE programs to determine whether or not NOPE presentations actually change students' core attitudes, opinions, perceptions, and behaviors relative to alcohol and other drug issues. The research completed to date has shown the NOPE presentations to be effective in changing students' attitudes and knowledge in regards to our three main messages. We believe that measurable changes in these important variables may translate to less overdose deaths.

treatment

Treatment is costly and for many, unaffordable. Ultimately, the NOPE goal is to seek out and support the best treatment programs and provide assistance to adolescents and young adults seeking further help from them.

support

NOPE partners with local agencies within Chapter locations to offer group emotional support services to families who have lost loved ones to drug related deaths. Groups meet once a month and are run by a mental health professional at no cost to group members.

awareness

candlelight vigil

The NOPE National Candlelight Vigil brings communities together each year during Red Ribbon Week to remember those lost to and suffering from substance abuse in a effort to bring awareness to the consequences our nation faces with the illegal use of prescription and illicit drugs. The NOPE Vigil strives to reduce the stigma surrounding the disease of addiction so that those suffering will openly seek help.

media campaign

The NOPE Task Force is part of the Florida Alliance for the Partnership for a Drug Free America providing a state wide healthy living, anti-drug media campaign.

anti-drug legislation

Not nearly enough action is being taken at the state and federal levels to combat the proliferation of illegal drugs, and the illegal distribution of powerful prescription drugs. NOPE brings its message to both public and private forums in order to focus attention on this epidemic that is devastating our nation and to put a human face on the debate.

NOPE NARCOTICS
TASK FORCE OVERDOSE
PREVENTION &
EDUCATION

561.478.1055

www.nopetaskforce.org