



DrugFree@WorkPlace

Increase in Overdose Deaths from Smoking Drugs

The most common methods of drug overdose have always been by either oral administration or injecting. But according to a report from the Centers for Disease Control (CDC), as of 2022 the most commonly documented route of use in drug overdose deaths was by smoking.

Almost 110,000 people died from drug overdose deaths in America in 2022. From January–June 2020 to July–December 2022, the percentage of overdose deaths with evidence of injection decreased 29.1%, from 22.7% to 16.1%, whereas the percentage with evidence of smoking increased 73.7%, from 13.3% to 23.1%. The number of deaths with evidence of smoking increased 109.1%, from 2,794 to 5,843, and by 2022, smoking was the most commonly documented route of use in overdose deaths.

Dangers of Smoking Drugs

Drug users mistakenly think that smoking is safer than injecting, but smoking drugs carries substantial risks because of rapid drug absorption.

In addition to the risk of overdose death, smoking any form of drug can cause serious harm to the respiratory system. Smoking drugs is associated with lung irritation, breathing issues, lung infections, and lung disorders.

Smoking certain drugs (like meth) can lead to pneumonia, acute respiratory distress, and non-cardiac pulmonary edema (fluid in the lungs).

Smoking crack cocaine is associated with life-threatening asthma, pneumonia, and exacerbation of chronic obstructive pulmonary disease, a chronically progressive lung disease characterized by a

chronic and productive cough, wheezing, shortness of breath, and chest tightness.

Smoking any kind of drug can be especially harmful to the lungs when users forcefully inhale, increasing the pressure inside the tiny air sacs of the lungs where gas exchange occurs. This can rupture the air sacs and contribute to air leakage into the space between the two lungs (i.e., pneumomediastinum) or the space between the lung and the chest wall (i.e., pneumothorax). These conditions may lead to subcutaneous emphysema, where air is trapped in the tissue under the skin, and if left untreated, may result in respiratory failure.

Smoking (anything) is one of the worst things a person can do for their health and people who smoke are almost twice as likely to have a heart attack compared with people who have never smoked.

Chronic drug smoking can also lead to addiction at even higher rates than with other routes of use. This is due to how rapidly certain drugs take effect and wear off when smoked, making the user want to return to the high quickly and frequently.

In response to the recent findings about smoking drugs, the CDC has issued the following statement: "The sharp increases in deaths with evidence of smoking and continued prevalence of other routes of drug use highlight the importance of expanded messaging emphasizing overdose risk associated with smoking."

The following suicide prevention information, while provided by the Georgia Department of Behavioral Health and Developmental Disabilities, will also be helpful to those in states other than Georgia. All online resources listed are available to users nationwide.

The correlation between suicide risk and mental illness is no secret, but with May being Mental Health Awareness Month, it seems appropriate to take a closer look at

this relationship. But first, it is important to acknowledge just how prevalent mental illness currently is in America.

The National Alliance on Mental Illness (NAMI) shares a wealth of information about mental health in America with the public and estimates that about one in five adults experienced mental illness in 2021. That's over 57 million Americans, more than the entire population of Georgia five times over.

The link between mental health and physical health has also been well documented, with many mental illnesses contributing to physical health conditions and vice versa. Another staggering statistic from NAMI shows that people with depression have a 40% higher risk of developing cardiovascular and metabolic diseases than the rest of the general population. Moreover, mental illness greatly increases the risk of developing a substance use disorder, increases unemployment rates, and contributes to a much higher school dropout rate among youth and young adults with mental illness.

So now let's get into how mental illness contributes to suicide risk, which is currently the 12th leading cause of death in the U.S. for all age groups, the 2nd leading cause of death among people aged 10-14, and the 3rd leading cause of death among those aged 15-24. And how many of those individuals have a diagnosed mental health condition? About 46%. That's a significant amount. Psychological autopsies also revealed that an estimated 90% of people who die by suicide may have experienced symptoms of a mental health condition.

The data indisputably shows that suicide and mental illness are both significant issues in this country. But stigma continues to be a major barrier that keeps many from seeking treatment, and it is also the reason many suffer in silence, without reaching out for help from the people they love. A culturally created separation between mental and physical health has also proved to be a substantial barrier in a more whole-health approach to wellness, making mental health treatment less accessible than what we consider "physical" health, and

putting many people experiencing mental illness into the examination rooms of primary care physicians who are ill-equipped to address these issues.

Those all sound like big problems that would take some major shift in our culture and the way we approach health in general to fix, but that cultural shift is already happening, with many physicians learning more about treating mental health, and with many mental health professionals working alongside physicians to deliver wraparound cohesive care to their patients. For our part, we can all be a bit more proactive about managing our mental health, treating it no differently than the preventive care and regular treatment we receive regularly to keep ourselves in good physical health.

Most importantly, we can shift the way we talk about mental health and the way we support those with mental illness. There are so many ways we show up to support our friends, family members, colleagues, and neighbors when they become injured, ill, or undergoing treatment for serious medical conditions. Supporting those same individuals when they experience a mental health challenge should be no different. Also, the language we use can go a long way to reduce the stigma surrounding mental health. Being organized isn't being "OCD" and the weather in Georgia isn't "bipolar." A person living with schizoaffective disorder isn't a "schizophrenic" in the same way that we don't identify people with medical disorders as their diagnosis.

With May being Mental Health Awareness Month, it's the perfect time to start making these positive changes in our lives and to model the type of language that will help stop the stigma and allow us to all move towards a happier, healthier existence.

To learn more about suicide prevention, visit the DBHDD website at:
<https://dbhdd.georgia.gov/suicide-prevention>.

Or contact the Suicide Prevention Director, Rachael Holloman, at:
rachael.holloman@dbhdd.ga.gov.



That's All Drugs And Alcohol
Do, They Cut Off Your
Emotions In The End.

- Ringo Starr

www.LiveDrugFree.org

Supervisor Newsletter

Why Continue Drug Testing?

American's opinions on illegal drugs have changed rapidly over the past decade. For example, when surveyed, an overwhelming majority of Americans now say that U.S. drug policy should focus more on treatment than incarceration. This shift in attitude has impacted the workplace in numerous ways. One way is through reduced drug testing. According to the Bureau of Labor Statistics, fewer U.S. companies now drug test their workforce than in 1996. But is discontinuing drug testing a good idea?

Drug testing has long been used by employers as a tool for ensuring safety, security, and productivity at work. HR managers in industries where safety is paramount—such as transportation, construction, healthcare, and manufacturing—understand that drug screening mitigates the risks associated with impaired employees performing safety-sensitive tasks. Many research studies have proven that substance abuse has a detrimental effect on productivity, safety, and overall performance.

Business owners recognize that employees who use drugs or

abuse alcohol are more likely to experience absenteeism, tardiness, accidents, injuries, and decreased job performance. There is a well-established link between substance abuse and decreased productivity in the workplace.

Federal and state laws acknowledge the importance of workplace drug testing, and many companies are subject to legal requirements regarding mandatory drug screening of employees. These laws dictate the methods, frequency, and procedures for testing.

Cost of Workplace Substance Abuse

There is a staggering financial cost associated with substance abuse in the workplace. Companies lose billions of dollars annually due to drug-related issues.

Drug use can impair employees' cognitive function, coordination, and judgment leading to an increase in accidents. Workers under the influence of drugs or alcohol exhibit impaired decision-making, reduced concentration, and compromised safety, posing substantial risks to themselves and their coworkers.

Drug abuse incurs major financial costs for employers including

healthcare expenses, absenteeism, injuries, increased insurance rates, and legal liabilities. These costs can have a significant detrimental effect on the bottom line and overall profitability of a business.

The nominal costs of establishing a drug free workplace program should always be weighed against the high risks of not having a program in place. For many employers, one serious accident, one major financial problem, one breach of confidentiality, or one troubled employee can cost hundreds of thousands of dollars and even jeopardize a company's financial future.

While drug testing programs do incur some upfront expenses for employers, the long-term benefits have been shown to far outweigh the initial investment. The costs of implementing a drug free workplace program that includes drug testing are minor compared to the financial losses associated with substance abuse in the workplace.

Benefits of Drug Testing

Drug testing helps employers to deter substance abuse at work and to identify employees who may need treatment for addiction. Drug screening programs also assist employers in complying with industry regulations and standards, and in qualifying for

state-mandated discounts on workers' compensation insurance.

In addition to meeting legal requirements and saving money, many business owners appreciate the deterrent effect of drug testing programs. Employees who know they may be subject to drug testing more often refrain from drug use or seek help for substance use disorders. In this way, drug testing creates a culture of accountability and responsibility promoting overall employee well-being and productivity.

Critics of drug testing claim that what an individual does on their time off is none of the company's business, but a worker's activities outside of work can still affect their performance at work. So, while it's true that some employees perceive drug testing as invasive or intrusive, others realize its importance in ensuring a safe and drugfree workplace. Workers who value safety and accountability support drug screening as a means of protecting themselves and their coworkers.

Conclusion

A healthy, productive workforce begins with a drugfree workplace program that includes a comprehensive drug testing program. Drug screening plays a crucial role in maintaining workplace safety, security, and productivity, and in increasing profitability.