

A communication periodical for our clients, staff & the community at large

The Chronicle

A Paterson Counseling Center Newsletter

Special points of interest:

- Client feedback via surveys indicates positive outcomes
- Counselors integrate new file maintenance procedures into process
- Client orientation becomes a video
- Quarterly phase spreadsheets updated

NIDA Substance Abuse Trends

A number of information sources are used to quantify America's drug problem and to monitor drug abuse trends. Foremost among these sources are the Monitoring the Future survey (MTF) and the National Survey on Drug Use and Health (NSDUH).

Since 1975, the MTF survey has measured drug, alcohol, and cigarette use as well as related attitudes among adolescent students nationwide. For the 2007 survey, 48,025 students in 8th, 10th, and 12th grades from 403 public and private schools participated. Funded by the National Institute on Drug Abuse, the MTF survey is conducted by investigators at the University of Michigan.

The NSDUH is an annual survey on the nationwide prevalence and incidence of illicit drug, alcohol, and tobacco use among Americans aged 12 years and older conducted by the Substance Abuse and Mental Health Services Administration. Approximately 67,500 people are included in this survey.

In MTF and NSDUH, there are three primary prevalence periods for which data are reported: lifetime, past year, and past month (also referred to as "current"). It is generally believed that past year and past month are the better indicators of actual use. However, some analyses are done for only one specific prevalence period; therefore, data for both past year and past month are reported here.

Trends of Abuse

Alcohol

Overall, the prevalence of underage (ages 12–20) past-month alcohol use and binge drinking has been unchanged since 2002. In 2006, about 10.8 million persons (28.3 percent) in this age group reported drinking in the past month. However, there has been a long-term decline in past-year alcohol use among 8th-graders (persons aged 12 to 13 years), from 46.8 percent in 1994 to 31.8 percent in 2007.

In 2006, an estimated 30.5 million people (12.4 percent) aged 12 or older reported driving under the influence of alcohol at least once in the past year. Although this reflects a downward trend from 14.2 percent in 2002, it remains cause for concern.

Tobacco

Trends (Continued)

According to NIDA's MTF survey, smoking rates are at their lowest point in the history of the survey. In the past year, smoking prevalence among 8th-graders—13- to 14-year olds, the youngest age group surveyed—dropped in all prevalence categories: lifetime, past-month, and daily use.

Daily smoking rates dropped to 3 percent in 2007, down from a peak of 10.4 percent in 1996. The NSDUH survey found that between 2002 and 2006, the rate of past-month cigarette use by 12- to 17-year olds declined from 13 percent to 10.4 percent.

Another encouraging trend is the decrease in cigarette use by young adults aged 18 to 25 years: Use decreased from 40.8 percent in 2002 to 38.4 percent in 2006.

Illicit Drugs

Illicit drug use by the Nation's adolescents is declining for almost all specific types of drugs. When data for 8th-, 10th-, and 12th-graders are combined, they show that overall, past-month illicit drug use declined by 24 percent between 2001 and 2007, dropping from 19.4 percent to 14.8 percent.

The downward trend in illicit drug use has been driven largely by declines in marijuana smoking.

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Addiction Continued

Past-year marijuana use among 10th-graders dropped from a peak of 34.8 percent in 1997 to 24.6 percent in 2007.

Among 12th-graders, use declined from a peak of 38.5 percent in 1997 to 31.7 percent in 2007. Annual prevalence of marijuana use by 8th-graders is down to 10.3 percent in 2007, from a 1996 peak of 18.3 percent.

In the 5 years between 2002 and 2006, the level of current marijuana use among persons aged 12 to 17 years declined from 8.2 percent in 2002 to 6.7 percent in 2006. The trend was also seen among older groups. From 2002 to 2006, the rate of current use of marijuana among 18- to 25-year olds dropped from 17.3 to 16.3 percent.

Current cocaine use has remained stable between 2002 and 2006 (there were 2.4 million users in 2006 aged 12 or older); however, a positive trend is the decline in use of crack cocaine, particularly among younger age groups.

From 2001 to 2007, the percentage of 10th-graders reporting past-month use of crack declined from 0.7 percent to 0.5 percent.

Despite these downward trends, the MTF survey data highlight some problem areas. For example, there has been a drop in perceived harmfulness of hallucinogens. For the third year in a row, there was a drop in perceived harmfulness of MDMA (ecstasy) among 8th-graders.

Tenth-graders reported a decrease in perceived harmfulness of LSD and MDMA, and a decrease in disapproval of LSD. This change in attitude is reflected in an increase in past-year use of MDMA by both 10th- and 12th-graders over the past 2 years.

Prescription Drugs

Also of concern is the increase in past-month nonmedical use of prescription drugs among young adults aged 18 to 25, from 5.4 percent in 2002 to 6.4 percent in 2006.

The increase is being driven largely by the use of pain relievers such as OxyContin and Vicodin. Furthermore, in 2006, the number of new initiates in the nonmedical use of prescription pain relievers was roughly even with that of marijuana among persons aged 12 or older.

Drug Detox and Withdrawal

Most abused drugs are not only mentally addictive but physically addictive as well. More and more of the drug is needed to achieve the same effect.

Trying to cut down or stop once the body is used to the drug is unpleasant or even painful. These withdrawal symptoms can include shakes, chills, severe aches and pains, difficulty sleeping, agitation, depression, and even hallucinations or psychosis.



Withdrawal Symptoms

Cocaine

Agitation, insomnia, anxiety, depression, anger, cravings, fatigue, nausea, vomiting, shakes, irritability, muscle pain.

Methamphetamine

Extreme fatigue, disturbed sleeping patterns, irritability, restlessness, intense hunger, moderate to severe depression, anxiety, angry outbursts, lack of motivation, mental confusion, psychotic reactions, depression, intense cravings for the drug.

Opiates (e.g. heroin, oxycontin, vicodin)

Watery eyes, runny nose, yawning, sweating, chills, stomach cramps, shakes, feeling jittery, irritability, panic, tremors, anxiety, restlessness, insomnia, dilated pupils, goose bumps, rapid heart beat, high blood pressure, nausea/vomiting, diarrhea, muscle aches and pains.

Benzodiazepine (Anti-anxiety medications)

Sleeplessness, irritability, anxiety, feeling shaky, headache, dizziness, loss of appetite, rapid heartbeat, sweating, agitation, and in extreme cases seizures.

Need Help? Call Us We Are Here To Help.
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