

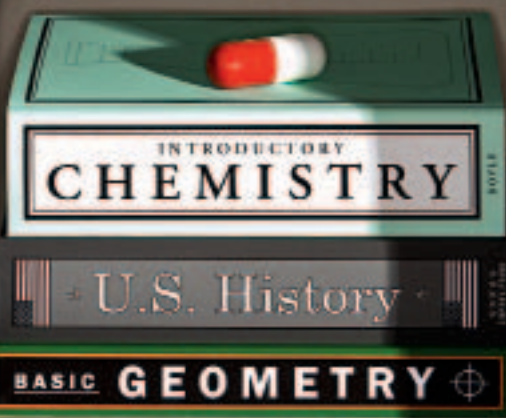
**PRESCRIPTION DRUGS ARE MORE POPULAR WITH TEENS THAN COCAINE, HEROIN, AND METH—COMBINED. THE SCARIEST PART: YOU PROBABLY HAVE THESE KILLERS IN YOUR MEDICINE CABINET RIGHT NOW.**

# LITTLE. LEGAL. LETHAL

**BY ALEXIS JETTER**

**Whitney Lizotte was easily one of the liveliest people** in her sleepy hometown of Berwick, Maine. Dishing out ice cream at the Dairy Delight, belting out songs from the musical *Rent*, or diving into social work classes at York Community College, Whitney, 20, lived boldly: She was impulsive, spontaneous, and bighearted.

So her silence on the afternoon of April 21, 2009, was unnerving. Whitney had spent the night at a friend's house in nearby Dover, New Hampshire, playing video games and horsing around with two childhood pals. She seemed fine, the two young men said later. But at 1 p.m., one of them found Whitney lying on a mattress on the floor of an upstairs bedroom, pale and unnatu-



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rally still. When he shook her, she didn't stir.

Paramedics tried to resuscitate Whitney, but there was little they could do: She had stopped breathing sometime during the night. Whitney was pronounced dead an hour later.

Detectives decided to get in touch with Whitney's roommate, Brandy Sewall, 22, who had spent the night in the girls' shared apartment in nearby Rochester, New Hampshire. Whitney had taken the shy, some-

## ONE METHADONE PILL WASHED DOWN WITH TWO GIN AND TONICS CAN BE FATAL. **“YOU ARE PLAYING A GAME OF RUSSIAN ROULETTE YOU DON'T UNDERSTAND.”**

what anxious girl under her wing, and they'd become inseparable. Police hoped that Brandy, who had spent the previous day with Whitney, could shed light on what had stricken her.

But en route to the apartment, the detectives got a stomach-churning call: “Get there as fast as you can,” Dover police captain David Terlemezian told them. A relative had just found Brandy in the apartment bedroom, motionless and unresponsive. The officers sped to Pine Street, but they were too late. Brandy, a soft-spoken young woman who loved the beach and the Boston Red Sox, had stopped breathing too.

The next morning, Dover police got yet another grim call, this time from a boardinghouse just up the street. Matty Rix, 19, an outgoing and popular former high school wrestling star, had been found dead in his bed.

“It was a terrible few days,” says Terlemezian, who directed the investigation. “You can't imagine how bizarre it is to think you're investigating one death—and suddenly there's another. And then another.

“Now you have three dead, all young, and all from southern Maine,” says Terlemezian. “You had to ask yourself: Are these cases related?”

It would take several more weeks for the full answer to emerge. When it did, families and friends in these

close-knit Maine communities were stunned. There had been no suicide pact, no tainted street drugs, and no fatal intruder. Whitney, Brandy, and Matty had all accidentally overdosed on prescription drugs—legal, widely used, and extraordinarily dangerous.

**“Kids think prescription** drugs are safer than street drugs because you can buy them in a drugstore,” says Nancy Coffey, a U.S. Drug Enforcement Agency official for New England, one of the nation's hot spots for prescription drug abuse. “But they're more powerful. And that's where kids get into trouble.”

Lots and lots of kids. Nearly one in five teens has used prescription drugs to get high; one in ten high school seniors reports having abused a prescription drug in the last year. And that's just what teens are willing to admit. They say they like the woozy, light-headed feeling that drugs like Vicodin, used in excess, can induce. "It takes everything away," says Jack\*, 17, from rural Maine. "You don't feel hurt; you don't feel stress. Nothing bothers you."

Accidental fatal drug overdoses have soared by 500 percent since 1990, and federal officials say prescription medications—primarily painkillers such as OxyContin, Vicodin, and methadone, all synthetic versions of opium—are largely to blame. According to the U.S. Centers for Disease Control and Prevention (CDC), opioid painkillers now cause more lethal overdoses than heroin and cocaine put together. Most alarming: The rate of fatal overdose among 15-to-24-year-olds has spiked 300 percent in recent years.

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\* names have been changed



**Whitney Llzotte was just “being a kid,” say her mother, Tammi, and sister Abi. She didn’t realize she’d strayed into dangerous territory.**

Young people simply don't understand that even legal prescription drugs have a “wildcard factor,” says Thomas Andrew, MD, New Hampshire's chief medical examiner. Methadone, the biggest prescription drug killer in New Hampshire, kicks in slowly, then lingers at full strength. That long “half life” is dangerous for anyone unused to the drug, Andrew says. “They'll take 40

milligrams, which is a big dose, and a little while later, they'll say, 'I'm really disappointed. I thought I'd get a buzz on from this. I'm just going to take another 40.'

"But by the time the full 80 milligrams kicks in, it's not going to make them feel the way they want to feel," Andrew says. "It's going to stop their respiration."

Nora Volkow, MD, director of the National Institute on Drug Abuse (NIDA), is most worried by the growing trend among teens of sampling a variety of prescription drugs and then drinking alcohol. "Kids are not pharmacologists," she says. "They may say, 'Fentanyl, OxyContin—what's the difference?' So they take a bunch of things and may combine them with alcohol."

That's a deadly miscalculation, Volkow says. The amount of opioid painkiller needed to induce euphoria is already frighteningly close to the amount that can kill you. That margin virtually disappears if you add alcohol or tranquilizers like Klonopin, Valium, or Xanax, which also depress the brain's respiratory center. One 40 mg methadone pill, washed down with two gin and tonics, can be fatal. Says Volkow, "You are playing a game of Russian roulette you do not understand."

**"Honestly, Whit was just** being a kid," says her mother, Tammi Lizotte, a vibrant woman with short red hair and startlingly blue eyes. "She was not popping a million

pills." Indeed, the medical examiner told Lizotte that Whitney hadn't taken a large drug dose. But she and her roommate Brandy had mixed methadone, an addiction-treatment drug also widely used to control pain, with Klonopin, an antianxiety drug, and washed them down with a few beers. That's a popular combination for kids looking for a quick high, police say.

Matty had taken fentanyl, an opioid that in some formulations is hundreds of times more powerful than heroin. Used properly, fentanyl can enable patients to cope with cancer pain. Taken in excess, it creates euphoria—then can shut down the respiratory center of the brain.

Matty Rix wouldn't fit anyone's idea of a hardened drug addict, friends and family say. Mischievous and affectionate, Matty was a gentle boy, despite his 100 wrestling victories. "He was always the kid behind other kids' laughter," says Matt Edwards, 18, a close friend and wrestling buddy.

"He wasn't afraid to give me a hug or a kiss good-bye, or say 'Dad, I love you,'" recalls his father, veteran high school wrestling coach Matt Rix. "He wasn't ashamed to say that in front of anybody."

But the sweet-faced youth became addicted to OxyContin in his junior year in high school, after he broke his hand taking jumps in an ATV. Surgery left him with steel screws in his hand and a three-month prescription for painkillers in his

## PAINKILLERS: HOW THEY HOOK YOU

Nora Volkow, MD, understands all too well why teenagers get hooked on prescription drugs—and it's not just because she's a world-renowned researcher into addiction and the brain.

Fifteen years ago, during an ice storm on Long Island, New York, she was pulled from a car wreck. Volkow's leg was shattered; she was in agony, and doctors were afraid she would go into shock. "So they gave me an opiate, and it was an extraordinary experience," Volkow says. "I was supposed to be in great pain, but instead I felt an incredible sense of well-being."

After three days on Demerol, Volkow said, "Enough."

"I'm sensitive about the potential of addiction," she says—she is, after all, the

director of the National Institute on Drug Abuse. "But it did give me insight into why people would want to take these drugs."

The human brain is the biggest drug pusher of them all, Volkow explains. It produces natural opioids that reward you for activities like breast-feeding, bonding with a baby, eating, sleeping, and having sex. "Pain medications with opioids are recreating that state of well-being," she says.

Your genes determine the sensitivity of your brain's built-in opioid receptors, Volkow says, and not just to drugs. Those same receptors flood the brain with pleasurable sensations when triggered by alcohol. So it's no coincidence that people addicted to opioids might also have a drinking problem. De-

pression or anxiety can also ratchet up risks for opioid addiction.

Once opioid addiction takes hold, "we have to treat it very aggressively," Volkow says. Medications such as naltrexone, which blocks the drugs from attaching to the receptors, and buprenorphine, which eliminates withdrawal symptoms after quitting, can be very effective. Counseling has been shown to help too.

But Volkow cautions that parents should be prepared for the long haul and for relapse. "To send someone to rehab for one month, even three months, and expect that's going to cure them—that's magical thinking. Your child isn't cured. He needs help fighting the tremendous urges to take the drug once he's outside."

wallet. Soon Matty started taking risks to enhance the drug's effects, crushing the OxyContin pills to remove their slow-release coating and snorting them. Ultimately he tried heroin.

After narrowly surviving a heroin overdose in January 2009, though, Matty vowed to stay clean. "He was

scared to death," says his father. "But it seemed like a big weight had been taken off his chest."

Matty moved into his own apartment, attended Alcoholics Anonymous meetings, and woke early every day to work with his father on electrical jobs. "It was about trust," recalls Rix, who says he misses his

son's good-night calls and companionship. "That's all he wanted back."

But Matty, depressed after breaking up with a girlfriend, faltered when he spotted a fentanyl patch, still in a drugstore bag, atop a refrigerator in a house where he and his father were doing work for a local contractor. The patch—infused with three days' worth of painkiller—was intended for the homeowner's dog, who'd just had surgery. No one is sure whether Matty chewed

180 million prescriptions for opioids every year, a fourfold increase in the last 20 years, she says. (The CDC, using a different calculation, cites a tenfold spike since 1995.)

Why so many opioid prescriptions? Experts say that after years of under-medicating pain, even for cancer patients, doctors now understand that pain thwarts the healing process. "Now people don't fear cancer as much as they used to, because of opioids," explains Seddon

Savage, MD, a New Hampshire anesthesiologist and addiction expert, who is president of the American Pain Society.

But the pendulum may have swung too far. Many opioid prescriptions are written

to ward off discomfort from minor medical procedures, Volkow says. Half of those pills don't get used.

Even children barely into adolescence are routinely overprescribed powerful painkillers. Volkow was astonished when she took the helm at NIDA seven years ago and saw the statistics: Painkillers like OxyContin, Percocet, and Vicodin are now the most commonly abused pills among 12-to-13-year-olds. "It just blew my mind," she says. "Adolescents are being prescribed opioids by dentists and oral surgeons. They're sent home after molar extraction with many more pills than they need." In fact, a re-

## **PRESCRIPTION DRUGS ARE EASY TO PILFER FROM THE FAMILY BATHROOM. MEDICINE CABINET EMPTY? NOT A PROBLEM. "IT'S WAY EASIER TO BUY PILLS THAN BEER."**

the patch or scraped off the drug and snorted it. But once he did, his battle was lost.

**"People think of drugs** as coming into the United States from another country," says David Pavlik, a senior intelligence analyst at the Justice Department's National Drug Intelligence Center. "But increasingly, these drugs are coming from inside our own medicine cabinets."

Americans used to grab an aspirin for a sore back or toothache. Now we're much more likely to select from an array of leftover prescription painkillers on our bathroom shelves, says Volkow. Doctors write

cent NIDA study found that 30 percent of teen prescription drug abusers have a doctor's prescription for their medication.

Of course, teens get hurt just like adults do, and opioids relieve their pain. But doctors sometimes prescribe pills for too long, or lose track of how many their young patients are taking. Greg\*, 18, a high school athlete in rural Maine, got a prescription for Vicodin after he tore a rotator cuff in his sophomore year. He started by taking one pill a day, but at a party, he heard that Vicodin was an easy high. Soon he was taking four or five pills a day. Greg's doctor, unaware that he had gotten hooked, renewed the prescription for two years.

Greg ultimately stopped taking Vicodin cold turkey and suffered through a harrowing week of withdrawal. Now he has strong advice for parents. "If your son or daughter is prescribed Vicodin, you should be watching the pills," he says. "You should count them. Because some kids will take five or six in an hour."



**Matty Rix's funeral was held at his high school less than a year after he graduated. He was trying to stop using, say his sister Brittany and father, Matt Rix.**

**Even without a prescription,** pills aren't hard to find. More than three out of five teens say that prescription pain relievers are easy to pilfer from the family bathroom, according to a recent survey by the Partnership for a Drug-Free America.

"Kids will text their friends," says Jeff Upton, a police officer stationed in South Berwick's Marshwood High School. "I'm at my grandma's



house. I can snag a few Oxys from her hip surgery.’ ‘My buddy’s brother has a prescription for Ritalin.’”

Medicine cabinet empty? Not a problem. “It’s way easier to buy pills than beer,” says Jack, the 17-year-old from rural Maine. “Beer you have to buy from somebody who’s 21, and the store has to be open.” At school, pills can be exchanged for money in a handshake or by swapping jackets. You don’t need a pipe, rolling papers, or even a match. “It’s just one small white pill,” Greg says. “A lot of kids do it for the convenience.”

Another advantage: An opioid high isn’t immediately detectable. “If a kid has just smoked marijuana, I can smell it,” Upton says. “If he drank alcohol, I can smell it. If he takes some prescription drugs—I won’t know it.”

**On the winding** back roads of rural Maine, parents feel increasingly desperate. “Prescription drugs are an epidemic out here,” says Kim\*, Jack’s mother. “Three, four, five kids on the road we live on are struggling with it right now. It’s so scary and so sad, and it happens so fast.”

## 6 STEPS TO SAFETY

Parents have an enormous impact on their children’s attitudes toward prescription drugs—and the risk that their kids will abuse them. Here’s what experts suggest you do: **Don’t be shy.** Many teens believe that parents won’t care as much if they’re caught abusing prescription drugs because the meds are legal. Tell them that you do care and that you want to help if they’re in trouble.

**Keep track of quantities.** Even a few missing pills could be a red flag.

**Store your drugs**—and those of your children—in a secure location in your home, under lock and key if you have reason for concern.

**Properly dispose of old or**

**unused medicine.** Some experts advise against flushing unwanted meds down the toilet because doing so pollutes the water supply; instead, you can put them in a bag or container with coffee grounds or kitty litter to discourage pill-hunting. Or check with your local police, sanitation department, and pharmacies. Increasingly, towns are sponsoring prescription-pill drop-offs to help families dispose of unused prescription pills.

**Talk to other family members** (especially grandparents) and parents of your child’s friends about safeguarding drugs in their homes as well.

**Go to theantidrug.com** for more information.

## THE PILLS THEY TAKE

In 2009, high school seniors admitted to abusing these five commonly prescribed drugs.



**Vicodin, 9.5 %**



**OxyContin, 4.9 %**



**Xanax, 3.6 %**



**Valium, 1.9 %**



**Klonopin, 1.5 %**

Kim knew her son had been experimenting, but she never guessed that he was taking a whopping 80 mg of OxyContin every few days. That secret spilled out after Jack stole a neighbor's check.

Kim pulled her son out of school, sent him to a counselor, and helped him break his drug habit. "Parents need to realize the severity of prescription drug abuse," she says. "When they see it, they need to jump on it. Because it's a killer."

The day after Matty Rix died, his grief-stricken father systematically searched every bookshelf, closet, cabinet, and toolbox in the house they had shared. Behind the wrestling trophies and family photographs were pill bottles. But it was the addresses on the vials that shocked Rix and his best friend, Mark Moriarty, who helped him sift through the pile. "We know these people. They're our neighbors. They're the parents of our kids' classmates," Moriarty says. "When a kid asks, 'Can I use your bathroom?' your antenna should go up."

Rix decided to hold his son's funeral at the high school where he had been so beloved. "We're trying to turn this loss into a lesson," Moriarty told the 400 people who gath-

ered in the gym. "The greater the loss, the greater the lesson that must come from it."

After a short hiatus, Rix returned to coaching and to helping other troubled teens. A year to the day after Matty died, a letter appeared on his grave. It was a call for help. "I miss you and our long talks," the writer scrawled. "I'm struggling with Oxy addiction. There are times when I want to kill myself." Rix called the boy and talked to him for nearly an hour. "You're not alone," Rix told him.

For Tammi Lizotte, every day holds a reminder of her daughter. Pictures of the laughing young woman line her walls. "Whit had a wicked sense of humor," she says. "And she was very comfortable in her skin."

Lizotte, who has some of her daughter's ashes in a sand dollar pendant around her neck, has also decided to turn her loss into a call for action. At Whitney's memorial, Lizotte dispensed with formalities. "Everybody here knows Whitney," she told the gathering that overflowed a local church. "So I'm just going to tell you about her last day.

"She was doing what all of you do. It was a party gone wrong," she said. "And it could kill you."

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## FEAST OR FAMILY

**I was a vegetarian** until I married a proud meat eater. On Christmas, as our children gathered around the table, my husband announced, "Your mother didn't know what a turkey was until she met me." *Lorraine Larkin*