



**CONCERNED ABOUT
YOUR CHILD'S USE OF
PRESCRIPTION
PAIN RELIEVERS
OR HEROIN?**

Learn the facts about opioids,
overdose, addiction and treatment.

How do opioids work?

- **Opioids include prescription pain relievers** (such as Percocet or OxyContin), heroin, and fentanyl.
- **Opioids are highly effective at relieving pain.** They affect areas of the brain that reduce pain and have a calming effect. However, opioids can also slow or stop a person's breathing and lead to an overdose.
- **Short- and long-term use of opioids** can lead to physical dependence and, in some cases, addiction.

What is opioid use disorder?

- **Much like diabetes or asthma**, opioid use disorder is considered a chronic health condition and may affect your child long-term, but can be controlled with ongoing care and treatment.
- **Opioid use disorder**, also called opioid addiction, can involve:
 - Strong cravings for opioids and preoccupation, where a person thinks about using to the point of neglecting other activities, like family, school or sports
 - Overdose or getting so sleepy a person can't do anything else
 - Tolerance to the opioid, where a person needs to use more of the drug to get the same effect
 - Flu-like symptoms due to withdrawal when a person stops using opioids, including body pain, diarrhea and a runny nose

Is there a treatment for opioid use disorder?

- **Yes, treatment works best** when it includes the use of medications for opioid use disorder.
 - There are three medications approved by the Food and Drug Administration (FDA): buprenorphine, methadone and naltrexone. The American Academy of Pediatrics recommends their use in teens and young adults, along with counseling in community settings.
- **Treatment with these medications** prevents return to drug use more effectively than treatment without medications, and can greatly reduce your child's risk of overdose.

Medication	Buprenorphine (Suboxone)	Methadone	Naltrexone (Vivitrol)
Effects	Reduces cravings and stops withdrawal symptoms		Blocks the effects of opioids
Dosing	Daily pill or film	Daily pill or film	Monthly injection
Minimum Age	16	18*	18
Offered in	Primary care and substance use disorder treatment programs	Specially licensed methadone treatment programs <i>Requires going to program daily for dosing</i>	Primary care and substance use disorder programs <i>Naltrexone is not recommended for everyone: Patients must be completely opioid-free before the first dose and are at risk of resuming drug use if a dose is missed.</i>

Annotation: *Exemptions for younger patients possible based on clinical need

How long will my child have to stay on medication?

While everyone's brain chemistry and circumstance is different, people who take medications for longer periods of time are better able to avoid returning to drug use. Research has shown that early treatment with medication helps youth remain in care.

Can I use a rehab or detox center instead?

Many people think of inpatient rehabilitation (rehab), long-term residential, or detoxification (detox) centers when they think about drug treatment. In some cases, people with opioid use disorder may require these types of intensive care. However, it is important that medications for addiction treatment are included in the treatment plan and an appropriate discharge plan is developed to connect people to ongoing community-based services. Without these supports, the strong cravings that people often continue to experience after leaving inpatient or residential settings like these puts them at a high risk for overdose. Any level of treatment that includes buprenorphine or methadone is much safer because it reduces cravings and protects people against overdose.

What about overdose?

Even if a teen or young adult does not have an opioid use disorder, they can still be at risk for overdose through occasional drug use. Fentanyl, a very strong and fast-acting opioid, has been found mixed into heroin and non-opioid drugs like cocaine. Opioid overdose deaths are preventable. Keep naloxone—an easy-to-use and safe medication that reverses opioid overdoses—in your home or with you at all times in case of an emergency.

You can get naloxone at a free naloxone training session or at over 700 pharmacies in New York City, including at Walgreens, Duane Reade, Rite Aid and CVS.

To find a pharmacy that offers naloxone without a prescription or to register for a free naloxone training, visit nyc.gov/naloxone.

+ Action steps to help your child:

1. Talk to your child about opioids and other drugs. Let them know you are there to help.
2. Carry naloxone for emergency use to reverse an overdose and save your child's life. Check on your child often.
3. Ask your health care provider to refer you to a substance use disorder treatment provider or use one of the resources such as NYC Well to locate one.
 - Ask them if they have experience treating adolescents or young adults and can offer treatment and medications for opioid use disorder.
4. Store prescribed medications (including opioids) in locked cabinets and throw away those you are no longer using. Encourage close relatives to do the same.
5. If your child has surgery or suffers from pain, talk to their doctor about the safest ways to manage their pain and avoid opioids where possible.

+ Resources

- **NYC Well**

- Support is available 24/7 through counselors who can provide free and confidential advice, treatment resources, and emotional support to help you or your child.
- To find help or learn more, call NYC Well at 888-NYC-WELL (888-692-9355), text “WELL” to 65173 or visit nyc.gov/nycwell.

- **Center on Addiction**

- Center on Addiction’s Helpline offers one-on-one support to parents and others who care for a child struggling with drug or alcohol use.
- To reach a Helpline Specialist, call 855-378-4373, send a text message to 55753 or visit drugfree.org/helpline.

- **Research articles**

- American Academy of Pediatrics’ “Medication-Assisted Treatment of Adolescents with Opioid Use Disorders:” pediatrics.aappublications.org/content/pediatrics/138/3/e20161893.full.pdf
- “Receipt of Timely Addiction Treatment and Association of Early Medication Treatment with Retention in Care Among Youths With Opioid Use Disorder:” jamanetwork.com/journals/jamapediatrics/fullarticle/2698965