

COMMONLY MISUSED SUBSTANCES

Every year, **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)** offers assistance and resources for those in need of treatment and recovery support services, as well as their friends, colleagues, and loved ones. In 2009, millions of individuals began their recovery from substance use and mental disorders, some through treatment: 4.3 million people aged 12 or older received treatment for a substance use disorder¹ and 30.2 million adults aged 18 or older received services for mental health problems.² Many people use alcohol and/or illicit drugs to self-medicate the symptoms of depression, anxiety, or other mental health problems, or to escape physical and emotional discomfort. These actions can worsen the symptoms that individuals initially tried to relieve, and can lead to substance use disorders.³ Furthermore, many people suffer from more than one mental health problem at a given time, with 45 percent meeting the criteria for two or more disorders.⁴ However, treatment does work and people can and do recover from substance use and mental disorders.

- **Recovery Month**, sponsored by the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT) within the U.S. Department of Health and Human Services (HHS), recognizes individuals and families in recovery and acknowledges those who provide treatment and recovery services for substance use and mental disorders. This year's theme, **"Join the Voices for Recovery: Recovery Benefits Everyone,"** emphasizes that all Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost.

Recovery Month stresses that all individuals have the fundamental and inherent right to be accepted and treated with respect, dignity, and worth. The campaign supports several of SAMHSA's Strategic Initiatives, particularly the goals of increasing public awareness of substance use and mental disorders, health reform implementation, and offering recovery support through an individual, program, and system approach. Public awareness will increase access for those in need of essential treatment and recovery support services and improve the overall health and well-being of people in the United States.

Commonly Misused Substances

Statistics from the **2009 National Survey on Drug Use and Health** show that education about the dangers of substance use and mental disorders, along with prevention, treatment, and recovery education, is critical to decrease the growing rates of substance use.

While illicit drug use in 2009 is lower than in 2002, the United States saw an overall increase of illicit drug use among people aged 12 or older to 8.7 percent in 2009 from 8 percent in 2008, an increase of 1.7 million individuals.⁵ Marijuana, prescription drugs, ecstasy, and methamphetamine had the largest increases. Additionally, the misuse of dextromethorphan, a drug found in over-the-counter cough medicines, has been a growing trend among adolescents. The drug is easily accessible and can be mixed with other liquids to create a high and is referred to as "robo-tripping." Despite new growing trends, among people aged 12 or older, current cigarette use decreased to 23.3 percent in 2009 from 26 percent in 2002, and the use of cocaine also declined to 1.6 million users in 2009 from 2.4 million users in 2006.⁶

Parents are the most important influence on their children's decision on drug and/or alcohol use and it's extremely important for parents to have open dialogue about the dangers involved with experimenting with drugs and/or alcohol.⁷ As children transition from their youth to adolescent years, they may misuse alcohol and prescription drugs as a response to stresses at school and possibly at home.⁸ In 2009:

- Almost 2 million youth aged 12 through 17 needed treatment for a substance use disorder.⁹
- Among youth aged 16 or 17, lifetime, past-year, and past-month alcohol use rates were 59.4 percent, 49.3 percent, and 26.3 percent, respectively; and past-month binge alcohol use rate was 17 percent.¹⁰
- Among youth aged 12 to 17, 1.3 million initiated marijuana and hashish use.¹¹
- 15.9 percent of youth aged 17 used marijuana in the past month.¹²

Additionally, teenagers aged 12 to 17 who believed that their parents would strongly disapprove of them trying marijuana or hashish once or twice were less likely to use the drug than those who didn't believe so—4.8 percent versus 31.3 percent, respectively.¹³ Reinforcing messages about the dangers of substance use is more important than ever before and caregivers, teachers, coaches, faith and community leaders must all find ways to communicate with our youth.

Mental Health Problems

In addition to substance use disorders, mental health problems are common illnesses that need to be addressed and treated with the same urgency as any other health condition. In fact, with approximately one in four adults suffering from a diagnosable mental health problem, mental health problems are so common that few families in the United States are untouched by them.¹⁴ In 2009, more than 8.9 million of those 18 or older who were dependent on or abused alcohol and/or drugs also had a mental illness—known as a co-occurring disorder.¹⁵ Many who suffer from a co-occurring disorder may use alcohol and/or illicit drugs to self-medicate the symptoms of depression, anxiety, or other mental health problems, but this can eventually worsen the symptoms they initially tried to relieve.¹⁶ Many mental health problems begin in adolescence and young adulthood, with 50 percent of lifetime mental health cases beginning by age 14 and 75 percent by age 24.¹⁷

Research has shown that there is typically a long delay, sometimes even years, between the onset of symptoms, the acknowledgement of the condition, and receiving help for a mental health problem. When treatment is delayed, conditions may become more severe and more resistant to treatment, making early detection and action essential.¹⁸ However, mental health problems can be effectively treated with a variety of treatment options. Approximately, 70 to 90 percent of individuals experience a significant reduction of symptoms and improved quality of life with a combination of medication, therapy, and other recovery support services.¹⁹ Empower an individual with a mental health problem to seek treatment and recovery services, by encouraging them to live a healthy, productive, and meaningful life.

Using data from the [National Institute on Drug Abuse](#), [The Partnership for a Drug-Free America](#), and the 2008 and 2009 **National Survey on Drug Use and Health**, the following chart provides an overview of the most commonly misused substances in the United States, including how prescription medications are abused. The chart can be used to raise awareness about the prevalence of these substances and the need for substance use and mental health disorder treatment and recovery support services.

Alcohol, Inhalants, and Tobacco

Substance	Other Names ^{20, 21}	Immediate Intoxication Effects ²²	Negative Health Effects ²³	Average Age of First Use in 2009 vs. in 2008 and Current Rate Among Youth ^{*24, 25, 26}	Number of People Who Used it in the Past Month in 2009 vs. in 2008 ^{27, 28}
Alcohol	Booze	Depressant: Impaired coordination, memory and judgment; slurred speech; decreased attention and memory	Seizures, chronic sleep problems, respiratory depression, respiratory arrest, damage to vital organs, high blood pressure, negative pregnancy outcomes (including Fetal Alcohol Syndrome)	16.9 years in 2009 (17 years in 2008); (rate of current alcohol use is 3.5% among youth aged 12 or 13, and 13% among youth aged 14 or 15)	130.6 million people in 2009 (similar to 129 million people in 2008)
Tobacco products	Chew, dip, smoke, cigarettes, cigars, smokeless tobacco, snuff, spit tobacco	Stimulant: Increased adrenaline, metabolism, and concentration	Increased blood pressure and heart rate, lung disease, coronary heart disease, stroke, cancer	17.5 years in 2009 (17.4 years in 2008); (rate of current tobacco use is 11.6% among youth aged 12 to 17)	69.7 million people in 2009 (similar to 70.9 million people in 2008)
Gases, nitrites, aerosols (Inhalants)	Ether, chloroform, nitrous oxide, isobutyl, isoamyl (poppers, snappers, whippets, laughing gas)	Stimulant: Loss of inhibition, loss of motor coordination, slurred speech, and muscle weakness	Rapid or irregular heartbeat, cardiovascular and nervous system damage	16.9 years in 2009 (15.9 years in 2008)*	0.6 million people in 2009 (similar to 0.64 million people in 2008)

*Data for each substance not available.

Illicit Drugs

Substance	Other Names ^{20, 21}	Immediate Intoxication Effects ²²	Negative Health Effects ²³	Average Age of First Use in 2009 (vs. in 2008) and Current Rate Among Youth ^{*24, 25, 26}	Number of People Who Used it in the Past Month in 2009 vs. in 2008 ^{27, 28}
Cocaine (including crack cocaine)	Coke, snow, flake, blow, bump, toot, C, white lady, crack, rock	Stimulant: Increased alertness, attention, and energy	Rapid or irregular heartbeat, stroke, muscle spasm, chest pain, nausea	20 years in 2009 (19.8 years in 2008); (rate of current cocaine use is 0.3% among youth aged 12 to 17)	1.6 million people in 2009 (similar to 1.9 million people in 2008)
Ecstasy	Adam, E, X, eve, XTC, decadence, M&M	Stimulant: Increased energy, feelings of peacefulness and acceptance	Involuntary teeth clenching, loss of inhibition, increased heart rate, anxiety, blurred vision	20.2 years in 2009 (20.3 years in 2008)*	760,000 people in 2009 (increased from 550,000 people in 2008)
Heroin	Big H, dope, smack, white horse	Feeling of euphoria, flushing of skin, dry mouth, and heaviness of the extremities	Collapsed veins, infection of the heart lining and valves, abscesses, liver disease, kidney disease, pulmonary complications	25.5 years in 2009 (23.4 years in 2008)*	0.2 million people in 2009 (same as in 2008)
Hallucinogens	LSD, peyote, acid, mellow yellow, boomers, shrooms	Delusions, changes in senses, mood, and body temperature	Elevated heart rate, increased blood pressure, persistent mental health problems	18.4 years in 2009 (18.4 years in 2008); (rate of current hallucinogen use is 0.9% among youth aged 12)	1.3 million people in 2009 (similar to 1.1 million people in 2008)
Marijuana	Pot, weed, hash, grass, reefer, Mary Jane, ganja	Distorted perceptions, impaired coordination, and loss of memory	Increased heart rate, respiratory infection, impaired memory, anxiety	17 years in 2009 (17.8 years in 2008); (rate of current marijuana use is 7.3% among youth aged 12 to 17)	16.7 million people in 2009 (increased from 15.2 million people in 2008)
Methamphetamine	Speed, meth, chalk, ice, crank	Stimulant: Agitation, anxiety, insomnia, and decreased appetite	Rapid or irregular heartbeat, stroke, high blood pressure, delusions, anxiety, hallucination	19.3 years in 2009 (19.2 years in 2008)*	502,000 people in 2009 (increased from 314,000 people in 2008)

*Data for each substance not available.

Prescription Drugs

Substance	Other Names ^{20, 21}	Immediate Intoxication Effects ²²	Negative Health Effects ²³	Average Age of First Use in 2009 vs. in 2008 and Current Rate Among Youth ^{*24, 25, 26}	Number of People Who Used it in the Past Month in 2009 vs. in 2008 ^{27, 28}
Pain relievers (Opioids: Hydrocodone, oxycodone, morphine, codeine, fentanyl)	Vike (Vicodin [®]), Oxy, O.C. (Oxycontin [®]), M (roxanol), Schoolboy (empirin with codeine), China white, dance fever (Actiq [®])	Pain relief, feeling of euphoria, and drowsiness	Restlessness, muscle and bone pain, drowsiness, seizure, respiratory depression, decreased heart rate	20.8 years in 2009 (21.2 years in 2008); (rate of current nonmedical use of prescription pain relievers is 2.7% among youth aged 12 to 17)	5.3 million people in 2009 (increased from 4.7 million people in 2008)
Psychotherapeutics	Prozac [®] , Zoloft [®] , Ritalin [®]	Increased attention and alertness, and dizziness	Blurred vision, rapid heartbeat, skin rashes, persistent muscle spasms, tremors	21 years in 2009 (22 years in 2008); (rate of current nonmedical use of prescription type drugs is 3.1% among youth aged 12 to 17)	7 million people in 2009 (increased from 6.2 million people in 2008)
Sedatives	Haldol [®] , Thorazine [®] , Navane [®] , Prolixin [®] , Mellaril [®] , Trilafon [®]	Depressant: Reduced anxiety, induced sleep, and lowered inhibitions	Seizures, chronic sleep problems, respiratory depression, respiratory arrest	19.7 years in 2009 (15.9 years in 2008)*	370,000 people in 2009 (increased from 234,000 people in 2008)
Tranquilizers	Benzos (Mebaral [®] , Ativan [®] , Xanax [®] , Valium [®] , Nembutal [®] , Librium [®])	Depressant: Reduced anxiety, induced sleep, and lowered inhibitions	Seizures, chronic sleep problems, respiratory depression, respiratory arrest	22.4 years in 2009 (24.4 years in 2008)*	2 million people in 2009 (similar to 1.8 million people in 2008)
Stimulants (methylphenidate, amphetamines)	Adderall [®] , Ritalin [®] , Concerta [®]	Increased calming, "focusing" effect	Increased blood pressure, heart rate, and body temperature, decreased sleep and appetite, stroke	21.5 years in 2009 (21.3 years in 2008)*	1.3 million people in 2009 (increased from 904,000 people in 2008)

*Data for each substance not available.

What Can You Do?

If you think that someone you know is misusing substances or has a mental health problem, let them know that you are concerned, you are there to listen, and you want to help them recover.³⁰ Treatment and recovery support services are readily available and health reform will increase access to services. Inform your loved ones that recovery benefits everyone, and that individuals who seek treatment and recovery services for substance use and mental disorders, change their daily habits, and learn new life skills that lead to healthier lifestyles. Individuals with a substance use or mental disorder who seek treatment and recovery support services can live a healthy, productive, and meaningful life in recovery. More information about health reform and treatment and recovery can be found throughout the toolkit including the following documents:

- **“Substance Use and Mental Disorders Affect All Individuals”** – Educates about the different signs and symptoms of substance use and mental disorders, which can be different for all ages.
- **“Treatment and Recovery: Finding Personalized Help”** – Showcases different types of treatment options and holistic approaches to recovery.
- **“Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery”** – Includes information about how health reform changes can bring positive changes to individuals, families, and communities.

Additional Recovery Resources

A variety of resources provide additional information on **Recovery Month**, substance use and mental disorders, and prevention, treatment, and recovery support services. Use the toll-free numbers and websites below to increase your knowledge, seek guidance from professionals, and provide resources to patients. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **Substance Abuse and Mental Health Services Administration (SAMHSA) Website** – Leads efforts to reduce the impact of substance use and mental disorders on communities nationwide.
- **SAMHSA’s National Helpline, 1-800-662-HELP (4357), or 1-800-487-4889 (TDD)** – Provides 24-hour free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.
- **SAMHSA’s “Find Substance Abuse and Mental Health Treatment” Website** – Contains information about all treatment options and special services located in your area.
- **SAMHSA’s ADS Center** – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour hotline available to anyone in suicidal crisis or emotional distress.
- **Treatment 101: Recovery Today** – Part of SAMHSA’s Road to Recovery Television and Radio series that examines many aspects of treatment and recovery.
- **RecoverForever.com** – Offers live online support and contains an abundance of resources on alcohol and drug treatment services searchable by State.
- **Alcohol and Drug Rehab Treatment Resource Center** – Provides information on key issues about alcohol and drug abuse, including interventions, rehab, and treatment. Visitors must enter identifying information to participate in this website.
- **Mental Health America** – Offers resources about the realities of mental health and mental illness.
- **American Psychiatric Association** – Works to ensure humane care and effective treatment is given to anyone with mental health problems, including intellectual disabilities and substance use disorders.

As health reform continues to be implemented, use the following resources to learn about the impact of these changes on access to treatment and recovery support services:

- **HealthCare.gov** – Managed by HHS, this Federal website provides information for the general public, people with disabilities, seniors, young adults, and employers, on how the law affects access to health care, insurance options, available preventive services, and comparing care quality.
- **Kaiser Family Foundation** – Issued by a nonprofit, health policy and communications group, this document provides a summary on the comprehensive health reform law, the Affordable Care Act, signed into law on March 23, 2010. The document discusses the law and subsequent changes, provisions to expand coverage, control health care costs, and improve the health care delivery system. Visit the Kaiser Family Foundation’s [Health Reform Source](#) for more information.
- **The Parity Implementation Coalition’s Parity Toolkit** – Created by organizations, including **Recovery Month** Planning Partners, this toolkit aids individuals seeking help, individuals in recovery, as well as their families, providers, and advocates in understanding their rights and benefits under the MHPAEA law.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

SOURCES

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