

Talk It Up! Column

Drug and Alcohol Myths and Facts

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January 22-28 is National Drug and Alcohol Facts Week, sponsored by the National Institute on Drug Abuse (NIDA). To support and celebrate this education and awareness spreading event, we would like to address some commonly held myths related to alcohol and other substances.

Myth: The drinking age is lower in Europe and they're doing fine, so following the US drinking age laws isn't really that important.

Fact: Europe is not necessarily doing fine. The number of European teens (age 15-19) who report binge drinking is higher than in the US. In addition, younger teens, age 15-16, in Europe are more likely to report being drunk in the last month than their counterparts in the US. These trends continue into adulthood, which lines up with information from studies showing that youth who start drinking that young are up to 5x more likely to develop alcohol dependency issues later in life. In addition, higher minimum drinking age laws reduce the number of alcohol-related crashes and hospitalizations in youth, as well as decrease long term negative effects from alcohol on the still-developing adolescent brain.

Myth: My child will get in trouble if they call 911 to help a friend who has had too much to drink or may have overdosed.

Fact: Deaths by drug overdose or alcohol poisoning are preventable, but many times people are afraid to call for medical help because they are afraid of getting in trouble for alcohol or drug related crimes. In NC, the Good Samaritan Law offers protection to those who witness or experience a drug or alcohol overdose. Anyone in that situation can seek help, as long as you remain on scene with until help comes and then cooperate with all law and medical professionals, without fear of being prosecuted for possession of small amounts of drugs or paraphernalia or drinking underage. Note that there are some offenses for which this law does not protect you from prosecution, such as distribution or manufacturing of a controlled substance, drug trafficking, or prescription fraud.

Myth: Talking to your kids about alcohol will not make a difference.

Fact: Although the majority of parents believe that peers have more influence than they do on whether or not their children drink alcohol, the statistics show differently. In NC, 81% of students feel that parents talking more with them would help stop underage drinking. Even though it can be awkward, your children are listening to you. Take the time to talk to them.

Myth: I smoked a little marijuana when I was younger and I'm fine. Some experimentation is ok.

Fact: Over the last few decades, the potency of marijuana, specifically the amount of THC, has increased from around 3-10% to an average of 30% (and even as high as 80%). The higher the THC content, the higher the likelihood of addiction and the stronger the effects on the brain, including depression, anxiety, loss of motivation, and toxic reactions as severe as psychosis. In addition to that, marijuana can be laced with other drugs and substances, such as fungus, bacteria, LSD or cocaine, without knowledge of the user. These substances, in addition to the THC, can have varied and incredibly harmful effects.

Myth: You can't get addicted to marijuana like you can with tobacco, so it's safer for my child to smoke pot than cigarettes.

Fact: It is absolutely possible to become addicted to marijuana. When a user starts to seek it out and use it compulsively, they can become just as dependent as they can with other substances. Regular or heavy users can experience withdrawal symptoms such as trouble sleeping, weightless, restlessness and loss of appetite when not using. When teens try marijuana, they can move from occasional to frequent use just as quickly as they can with tobacco.

Myth: The opioid crisis is not as bad as they are making it sound. Most of the overdoses are from people who have graduated to stronger drugs, like heroin, not from doctor prescribed medications.

Fact: In about half of opioid overdose deaths, the victims overdose on the same drug that their doctor originally prescribed. To help address this, NC passed the Strengthen Opioid Misuse Prevent (STOP) Act in July 2017, which sets limits on the prescription quantities for first time patients, as well as requiring doctors and pharmacists to report all prescriptions to a state level reporting database. The goal of these steps is to monitor and reduce the chances of patients becoming addicted, as well as the potential for “doctor shopping” to procure multiple prescriptions.