

OPIOID IDENTIFICATION GUIDE

WHAT ARE OPIOIDS, PRESCRIPTION PAINKILLERS, OR NARCOTICS?



The Prescription Playbook is an education and awareness campaign for parents and coaches to prevent opioid pain reliever diversion, misuse, and abuse by adolescent athletes.

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Education and awareness
provide the foundation for
individuals to make safe
and informed decisions.

Prescription opioids are powerful medications that can provide relief for pain. Unfortunately, they can also be prescribed inappropriately and misused. Adolescents can acquire opioid pain relievers from dental surgeries such as wisdom teeth removal, injuries that require medical attention, prescription diversion from their peers, or medicine cabinets at home.

[Learn more from the Illinois Department of Public Health ¹](#)

WHY PARENTS NEED OPIOID EDUCATION?

Parents are responsible for creating a safe environment that allows their adolescents to make healthy decisions

Parents have the ability to support their teens by encouraging them to make healthy and responsible decisions. By starting conversations with doctors, adolescents, and others in the community about prescription drugs, parents can influence significant positive change. Having informative discussions, becoming educated, and being aware of various types of prescription drugs will further a commitment to create a safe chemical health environment.

A simple way that parents can take the first step to create a safe environment is by learning the facts through education and awareness of prescription drugs. One way this can be achieved is by talking to healthcare professionals and pharmacists. According to a recent report from the C.S. Mott Children's Hospital, parents whose child's provider discussed what to do with leftover pain medication were significantly less likely to keep leftover medication at home, compared to parents who did not discuss this topic with their provider.² It is not only up to providers to initiate these conversations, but it also takes initiative from parents to ask questions and further their knowledge of any substances that might be given to them or their teens. Parents should have an active role in the conversation and can be the ones to engage in further conversations with doctors or other healthcare professionals. It is necessary for

parents to have a complete understanding of prescription pain relievers, and be willing to have the appropriate conversations with others about these types of drugs.

Starting the conversation with others about information learned from doctors or healthcare professionals is the next step in creating a safe chemical health environment. Informing adolescents about the risks associated with use of prescriptions and teaching them how to safely use these substances will allow them to make healthy decisions even when there are no adults around to lead the way. A report from the Partnership for Drug Free Kids found that teens who learn about the risk of drugs from their parents are up to 50% less likely to try them.³ Initiating simple conversations is enough to influence each person to have a role in creating positive change for themselves and others. Involving the community and working together to bring education and awareness on methods of safe use, storage, and disposal of prescription drugs will make it easier for individuals to make healthy decisions.

With nearly 236 million prescriptions for opioid pain relievers in 2016, it is important that parents are aware that teens might have access to these substances in certain situations.⁴ When used properly, opioids can provide temporary relief for pain. However, due to the addictive nature of these substances, physical and psychological dependence of opioids can occur just after a few days of use.⁵ Knowing the signs can deter certain unintended consequences such as tolerance and addiction, and prevent prescription misuse before it ever occurs. Parents are the first line of defense in recognizing and addressing teens' behaviors. Parents should always be aware of how their teens are coping with busy academic and extracurricular schedules and stay in contact with them regularly as support systems. By carefully monitoring teens, offering lines of support, and setting positive examples as role models and leaders, parents can keep their teens on a path to making healthy decisions.

OPIATES

Opiates are substances that derive from natural compounds of the opium poppy plant - from a species of poppy called the *Papaver Somniferum*. Over twenty alkaloid compounds have been isolated from this plant, with certain ones (morphine, codeine, and thebaine) occurring naturally in larger amounts.⁶ Morphine and codeine are the most commonly recognized opiates, typically combined with other non-opioid pain relievers such as aspirin or acetaminophen to produce certain types of prescription medications such as Tylenol #3 (codeine/acetaminophen).

OPIOIDS

Opioids are a class of drugs that includes heroin, prescription pain relievers such as oxycodone and hydrocodone (i.e., Oxycontin®, Percocet®), Vicodin®), and dangerous synthetic opioids such as fentanyl, carfentanil, and other analogues. Opioids work in the brain to reduce pain and can also produce feelings of relaxation and euphoria.⁷ A common way to identify various types of pain relieving substances is to describe them as opioids, but the terms “opiate” and “opioid” are often used interchangeably.

PRESCRIPTION PAIN RELIEVERS (PAINKILLERS)

Prescription pain relievers (painkillers) are drugs such as Oxycodone (Oxycontin®, Percocet®) and Hydrocodone (Vicodin®). These drugs typically need a doctor’s prescription, but have been increasingly diverted, misused, and abused. Many types of prescription pain relievers are also known as prescription opioids.

NARCOTICS

The term “narcotic” comes from the Greek word “narco”, which means sleep or stupor, and originally referred to a variety of substances that dulled the senses and relieved pain.⁸ Though some people still refer to all drugs as “narcotics,” today “narcotic” refers to opium, opium derivatives, and their semi-synthetic substitutes.

ANALGESICS

Analgesics are drugs that can help relieve pain without loss of consciousness. These drugs can be further classified into opioid and non-opioid (acetaminophen and NSAID’s) analgesics. This term can also be used interchangeably to describe opioids and may be referred to as “opioid analgesics”.

PRESCRIPTION DIVERSION

Prescription diversion is the sharing or selling of one’s own or another individual’s prescription medication. Prescription diversion is a common method of access for those who misuse prescription pain relievers. Of those aged 12 and older who misused prescription pain relievers in the past year, 53% of those individuals were given by, bought from, or took the substance from a friend or relative.⁹

PRESCRIPTION MISUSE & ABUSE

Prescription misuse is using a prescription in a way other than how it is prescribed by a healthcare professional. This includes taking a dose at the wrong time, accepting prescription medications from a friend, taking drugs for reasons other than what they were prescribed for, or not following medical instructions as labeled or directed. Prescription abuse is using a prescription with the intent of experiencing a “high” associated with the drug. The most recognizable difference between prescription misuse and abuse is the intention that a user has when taking a drug.

Start the Conversation

Teens need their parents to start talking about safe use of prescription medications, particularly highly addictive opioid pain relievers. Parents can help adolescents make safe chemical health decisions by speaking up.

Safe decisions begin with simple conversations.



16%

During the last conversation teens had with their parents about substance abuse, only 16 percent said they discussed the abuse of prescription pain relievers with their parents¹⁰



53%

Of those aged 12 and older who misused a prescription pain reliever in the past year, 53% were given by, bought from, or took the substance from a friend or relative⁴

What if my child is prescribed an opioid pain reliever?

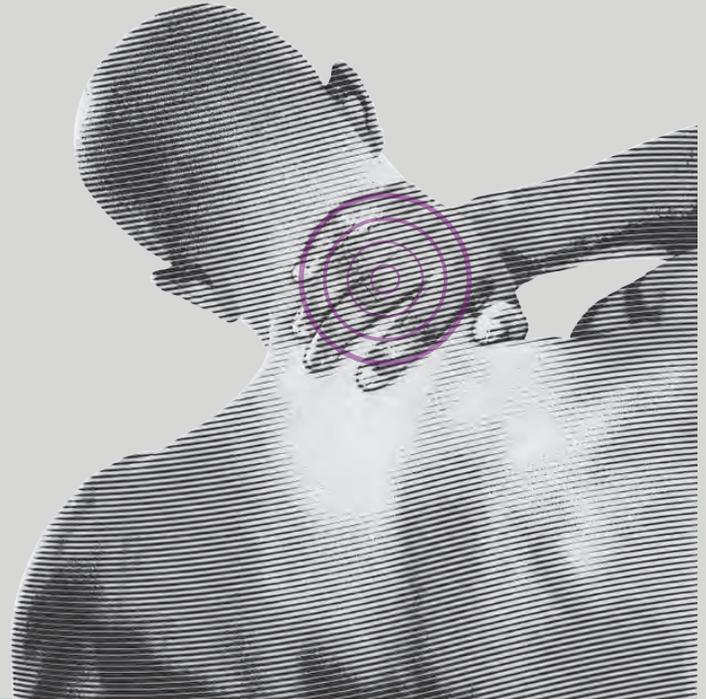
Talk openly with your doctor or healthcare provider and explore alternatives to opioids. Share information about other medications that are being taken and don't hesitate to ask questions. If you or your adolescent are prescribed opioids, aim to get off them within 72 hours and continue to follow guidelines for safe use, safe storage, and safe disposal.

** Be certain that you are always holding onto the bottle or source of medication. Administer the dose and lock the medication in between doses. If you do not have a locking cabinet, prescription lock box, or household safe, place the medications up and away and out of sight from everyone. Monitor your medicine cabinet or the place where you are keeping the medications and count the number of doses that remain after each use. Guard and discard any leftover medications at a prescription take back location near you.*

KNOW YOUR OPTIONS

Talk to your health care provider about ways to manage your pain that don't involve prescription opioids. Some of these options **may actually work better** and have fewer risks and side effects. Options may include:

- ❑ Pain relievers such as acetaminophen, ibuprofen, and naproxen
- ❑ Some medications that are also used for depression or seizures
- ❑ Physical therapy and exercise
- ❑ Cognitive behavioral therapy, a psychological, goal-directed approach, in which patients learn how to modify physical, behavioral, and emotional triggers of pain and stress.



IF YOU ARE PRESCRIBED OPIOIDS FOR PAIN:

- ❑ Never take opioids in greater amounts or more often than prescribed.
- ❑ Follow up with your primary health care provider as directed.
 - Work together to create a plan on how to manage your pain.
 - Talk about ways to help manage your pain that don't involve prescription opioids.
 - Talk about any and all concerns and side effects.
- ❑ Help prevent misuse and abuse.
 - Never sell or share prescription opioids.
 - Never use another person's prescription opioids.
- ❑ Store prescription opioids in a secure place and out of reach of others (this may include visitors, children, friends, and family).
- ❑ Safely dispose of unused prescription opioids: Find your community drug take-back program or your pharmacy mail-back program, or flush them down the toilet, following guidance from the Food and Drug Administration (www.fda.gov/Drugs/ResourcesForYou).
- ❑ Visit www.cdc.gov/drugoverdose to learn about the risks of opioid abuse and overdose.
- ❑ If you believe you may be struggling with addiction, tell your health care provider and ask for guidance or call SAMHSA's National Helpline at 1-800-662-HELP.



Be Informed!

Make sure you know the name of your medication, how much and how often to take it, and its potential risks & side effects.

THREE STEPS FOR SAFE CHEMICAL HEALTH DECISIONS

01

Safe Use Starts With You

Understanding safe use of prescription drugs will greatly reduce the risk of diversion, misuse and abuse of certain substances. Improper use of prescriptions often stems from a misunderstanding of medications and failure to acknowledge the potential risks associated with these drugs. Another factor that has largely contributed to excessive numbers of misuse of various prescription drugs across the country is a lack of education.

Increased education and awareness of prescription drugs can help provide individuals with tools to make safe and informed chemical health decisions.

There are five simple steps (Talk, Know, Read, Avoid, Monitor) that you can follow to ensure safe use of your prescriptions and encourage others to begin learning more about substances before they are prescribed or taken. Learning the steps of safe use is fundamental to create a safe chemical health environment for yourself and others. Taking what you learn and teaching these tools to others is equally important.

02

Safe Storage Is Within Reach

You can safely store prescription opioids or other medications in your household so that they are not visible or accessible by family members, friends, or visitors.

Unfortunately many adults report unsafe storage methods of prescription opioids, even in households with children and adolescents. Given that large numbers of individuals who misuse pain relievers access them from friends or family members, there is a need for increased emphasis on safe methods of storage.

You can ensure safe storage and prevent improper or unintended consumption of substances by safeguarding your prescriptions, monitoring your medicine cabinet, and guarding and discarding miscellaneous medications. This can be achieved by installing a lock equipped medicine cabinet, storing prescriptions in household safes or prescription lock boxes, and counting the number of doses that remain after each use. Safe storage will keep unnecessary prescriptions out of easy to access areas and reduce unintended consumption.

03

Safe Disposal Is a Solution

Safe disposal will reduce the likelihood that medications will be available to be misused, diverted, or abused by others. There are several ways that you can discard prescriptions to protect those in your household and the environment.

The FDA currently regulates and provides recommendations that vary based on specific medications, particularly highly addictive opioid pain relievers that should be disposed of immediately. However, prescription take back locations and community drug take back events offer some of the safest ways to discard a variety of substances. Thousands of free drug take back locations exist across the United States, with certain locations offering 24/7 anonymous drop off capabilities. Drug take back days are typically sponsored by the DEA and occur twice a year.

If you are unable to take your medications to a prescription drop box location or drug disposal event, the FDA offers steps that you can follow to safely discard medications at home.

Be aware of these simple steps for safe use of medications

Talk

Speak up and ask questions

1.) Keep a list of all medications and supplements that you are taking and share this information with your doctor and pharmacist. Address any questions, concerns, or hesitations about a medication with your doctor before use. Make sure you talk with your adolescents about any medications they are taking and teach them about safe use of medications.

Know

Learn about your medications

2.) Know the risks and side effects associated with use of opioids or other medications. Understand what your medications look like and how to store them safely in the household.

Read

Examine labels and follow directions

3.) Only take drugs prescribed to you by a doctor. Do not take someone else's medication or give away your own medication. Never take a medication in higher doses than prescribed or directed. Always read any instructions given.

Avoid

Be aware of drug-drug interactions

4.) Understand how opioids and other medications might interact with each other. This includes alcohol, other prescriptions, over the counter medications, vitamins, and supplements. Overuse or multiple use of medications can be dangerous. Make sure you and your doctor are aware of everything you are taking.

Monitor

Stay in contact with your doctor

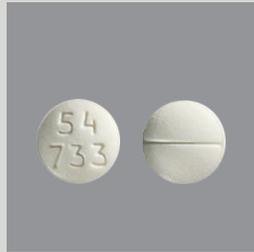
5.) Monitor the effects of a medication on your body or others who are taking the medication. Contact your medical health provider if you need to change a dosage. Reach out to your doctor with any questions or concerns.

Opioid Identification

There are various types of opioids that differ in strength depending on the time and amount taken. Most opioids are offered in pill, liquid, or injectable forms and are prescribed by healthcare professionals. Images of the drugs listed or shown below vary in appearance based on their physical and chemical makeup and may look different depending on the manufacturer. This is not a comprehensive list of all opioids. Please use this as a reference, but always refer to your doctor or healthcare professional with any questions or concerns.



HEROIN



MORPHINE



CODEINE



OXYCODONE



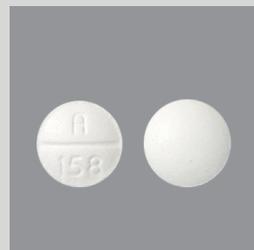
HYDROCODONE



OXYMORPHONE



HYDROMORPHONE



MEPERIDINE



TRAMADOL



FENTANYL



METHADONE



BUPRENORPHINE

Image source: Drugs.com

DRUG	BRAND NAMES	STREET NAMES ¹¹
HEROIN	Illicit - Not sold commercially	Horse, Smack, Big H, Black Tar, Junk, Chiva, Hell Dust, Negra, Thunder
MORPHINE	Roxanol®, Duramorph®, Arymo® ER, Kadian®, MorphaBond® ER, MS Contin®	Dreamer, Emsel, First Line, God's Drug, Hows, M.S., Mister Blue, Morf, Morpho, Unkie
CODEINE	Tylenol® With Codeine (#3 and #4)	Cody, Captain Cody, Schoolboy, Sizzurp, Purple Drank, Lean
OXYCODONE	OxyContin®, Roxicodone®, Percocet®, Tylox®, Percodan®, Oxaydo®, OxyFast®, Xtampza® ER	Hillbilly Heroin, Kicker, OC, Ox, Oxy, Roxy, Perc
HYDROCODONE	Lortab®, Vicodin®, Paracetamol®, Lorcet®, Tussionex®, Norco®, Zohydro® ER, Hysingla® ER	Vics, Hydros, Lorris, Tabs, Watsons, 357's, Vicos
OXYMORPHONE	Opana®, Numporhan®	Blue Heaven, Blues, Mrs. O, New Blues, Octagons, Oranges, Orgasna IR, OM, Pink, Pink Heaven, Pink Lady, Pink O, Stop Signs, and The O Bomb
HYDROMORPHONE	Dilaudid®, Exalgo®, Palladone®	D, Dillies, Dust, Footballs, Juice
MEPERIDINE	Demerol®, Pethidine®, Meperitab®	D, Demmies
FENTANYL	Duragesic®, Subsys®, Lonsys®, Abstral®, Lazanda®, Fentora®	Apache, China Girl, China Town Friend, Goodfellas, He-man, Jackpot, Poison, Tango and cash, TNT, Fen, Fenny
METHADONE	Dolophine®, Methadose®	Fizzies, Amidone, Chocolate Chip Cookies, Maria, Pastora
BUPRENORPHINE	Subutex®, Butrans®, Suboxone®, Belbuca®, Buprenex®	Bupe, Stops, Boxes

References

1. *Prescription Opioids and Heroin*. (n.d.) Retrieved from <http://www.dph.illinois.gov/opioids/home>
2. Children's Health Evaluation Research Unit. Narcotics in the medicine cabinet: provider talk is key to lower risk. *C.S. Mott Children's Hospital National Poll on Children's Health*. 2016;26(4). <http://mottnpch.org/reports-surveys/narcotics-medicine-cabinet-provider-talk-key-lower-risk>.
3. The MetLife Foundation: Partnership for Drug-Free Kids. *The Partnership Attitude Tracking Survey (2012)*. Accessed from <https://drugfree.org/wp-content/uploads/2012/05/PATS-FULL-Report-FINAL-May-2-PDF-.pdf>
4. IMS Health—NPA, based on TRx yearly data, August 2017.
5. Martin Bradley, PharmD, Ph.D., division of pharmaceutical evaluation and policy, College of Pharmacy, University of Arkansas for Medical Sciences, Little Rock; Scott Krakower, D.O., assistant unit chief, psychiatry, Zucker Hillside Hospital, Glen Oaks, N.Y.; March 17, 2017, *Morbidity and Mortality Weekly Report*
6. Schiff Jr, P. L. (2002). Opium and its alkaloids. *American Journal of Pharmaceutical Education*, 66(2), 186.
7. National Institute on Drug Abuse; National Institutes of Health; U.S. Department of Health and Human Services. (n.d.). *Prescription Opioids*. Retrieved from <https://www.drugabuse.gov/publications/drugfacts/prescription-opioids>
8. DEA (n.d.). *Drug Fact Sheet: Narcotics*. Retrieved from https://www.dea.gov/druginfo/drug_data_sheets/Narcotics.pdf
9. Substance Abuse and Mental Health Services Administration. (2017). *Key substance use and mental health indicators in the United States: Results from the 2016 National Survey on Drug Use and Health* (HHS Publication No. SMA 17-5044, NSDUH Series H-52). Rockville, MD: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. Retrieved from <https://www.samhsa.gov/data/>
10. The MetLife Foundation: Partnership for Drug-Free Kids. *The Partnership Attitude Tracking Survey (2013)*. Accessed from <https://drugfree.org/wp-content/uploads/2013/04/PATS-2012-FULL-REPORT2.pdf>
11. U.S. Department of Justice. (2017). *Drugs of Abuse, A DEA Resource Guide: 2017 Edition*. Drug Enforcement Agency.

Other Resources

NIDA for Kids - teens.drugabuse.gov/drug-facts/prescription-pain-medications-opioids

CDC - cdc.gov/drugoverdose/opioids/index.html

FDA - fda.gov/Drugs/DrugSafety/InformationbyDrugClass/ucm337066.htm

Partnership for Drug Free Kids - drugfree.org/drug/prescription-pain-relievers-opioids/

Illinois Youth Survey - iys.cprd.illinois.edu/

Monitoring the Future - monitoringthefuture.org/



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