

# OxyContin: From Prescription to Addiction

*Brooklynn Binkier*

*Writer's comment:* I could have written about anything. Jayne Walker's guidelines in English 101 (advanced composition) were very liberal, and I'd like to thank her for allowing so much individual freedom. Further, Jayne provided the guidance and encouragement necessary to create this essay. I am supremely grateful. I embraced the opportunity to examine a socially relevant issue that personally affected me.

I've never tried OxyContin. But the struggle of loved ones is always personal. My friends no longer use the drug. But addiction is always an issue. Spreading awareness is imperative in dealing with such a persistent problem, and I appreciate the opportunity to do so.

– *Brooklynn Binkier*

*Instructor's comment:* Brooklynn is a talented writer, with a real gift for recreating characters and dialogue from inside a social scene. In an earlier essay, she vividly rendered the sights and sounds of her favorite group, Floater, in concert. In this one, intimate observations and conversations with her friends show us, more powerfully than any billboard or TV commercial could, the toll that OxyContin abuse takes on young lives.

– *Jayne Walker, University Writing Program*

**T**here are three forms of addiction. Depends on how you take it. Pop it. Snort it. Slam it. How would you like your high? Olly is explaining OxyContin mania to me, his fingers waving through the air in excited illustration. He used to snort it. He doesn't anymore. Too expensive. When OxyContin made its debut in Yuba City, California, several of my friends, including Olly, decided to experiment. It started at a dollar a pill—it was readily available, and the demand was low. As the “experimenters” fell into addiction, the demand surpassed the supply and prices rose. Eighty dollars. I know people who pay \$80 for an 80mg pill now. \$80 up your nose in one night. No, that's not entirely true. They inject it too.

OxyContin is a prescription drug, approved by the Food and Drug Administration in 1995, for relieving moderate to severe chronic pain (“OxyContin,” “What is OxyContin?”). The brand name for Oxycodone, an opiate, narcotic analgesic, OxyContin is produced by Purdue Pharma L.P. as a time-release pill (“Oxycodone.”). Taken orally, its time-release mechanism allows relief for up to twelve hours (“OxyContin”). It is valuable for its long-term effectiveness. When abused, however, it is dangerous—addiction and death being two well-known side effects. Because of the threat that misuse poses, it has become increasingly difficult to obtain an OxyContin prescription, but the abuse refuses to subside.

As a Schedule II drug, OxyContin may be legally obtained only through a prescription, and its label provides strong warnings (“What Is OxyContin?”). This is not enough. My friends never had a prescription, their dealer did not offer a disclaimer, they never saw the bottle. OxyContin has had significant media coverage over the last few years due to associated abuse and death. Why, then, did my friends and I not know about this six months ago when our drug-dealer-friend advertised it as a “must-try, wonder high”? My friends fell to curiosity or peer-pressure, then addiction. We can avoid this tragedy by directing the warning signs at the most vulnerable prey—adolescents.

Buick resisted the drug for weeks. One night he was drunk and a friend insisted he try it. “It was great, and coming down that first time wasn't too bad. So I did it again.” He and my other friends snort pills they chop up with a driver's license in an orange Frisbee. The time-release function is destroyed as the pill is pulverized, and the effects are more intense and immediate, providing a rush comparative to that of heroin (“Abuse”). This euphoric feeling prompts a second and third trial, then the body craves it, then requires it. “It was subtle. I

thought I was doing it for fun, then"—Buick snaps his fingers dramatically— "bam, I *needed* it." He shakes his head with a shamefaced grin and explains how he couldn't believe that it happened to him. Addiction. Even now, after three months without physical dependency, he recognizes that he will always crave the drug. "My body doesn't *need* it anymore, it doesn't feel good anymore. But when it's available, the cravings take me over, and I go after it, even though I know I won't enjoy it." He shrugs his shoulders with his only explanation: "Addiction. Who knew?"

Addiction may be subtle, because it begins with a gradual increase in tolerance. A derivative of opium, OxyContin works by preventing the brain and central nervous system from receiving pain messages. The brain's level of dopamine increases, enhancing pleasurable, euphoric feelings throughout the body. Seeking equilibrium, the body compensates for the additional dopamine, requiring a higher dosage of OxyContin to obtain the same feelings of pleasure and euphoria. In this way, tolerance builds; the body needs more of the drug as more is consumed ("Addiction").

Our dealer-friend, Ron, still suffers from an extreme case of tolerance. Starting with one 40mg pill up his nose a day, he steadily progressed, over six months, to eight 80mg pills in one day. Crazy. If he had attempted this feat a few months ago, he would have died after the first few pills. Now he requires this dosage in order to function normally. "I can't function; I can't live my life without Oxy." He explains this to me, sprawled across my couch, strung out and fidgety. "If I go a few hours without it, all I can think about is getting more. I can't concentrate on anything else." And you do not want to encounter Ron without his omnipotent OC.

In fact, any addict going twenty-four hours without a fix should be actively avoided. When my addict friends can't find, or can't afford, OxyContin, I have two safe choices: find it for them or seek cover until the storm passes. They get viciously grumpy and want nothing to do with anyone. I tap Buick on the shoulder for his attention, which apparently works as a detonator: "What the fuck? Leave me alone!" He's yelling, and I'm confused, until later he explains withdrawals. "I want to die, and I want to take everyone with me." Addicts must not go a single day without their required dose, for fear of severe physical pain. "It feels like a beast is trying to crawl out of my chest." Buick takes his fingernails to his chest in a ripping motion. He parallels withdrawal with a child's temper tantrum over a toy his parents repeatedly refuse him. "The child cries uncontrollably, *needing* that pretty toy gun. And everyone knows that if she could only have it, she would immediately stop

crying—everything would be okay.” When suffering from withdrawals, all that he needs is just a little OxyContin and he will be okay. Refused the drug, he throws his own temper tantrum. It can last a week.

Withdrawal is much more serious than a temper tantrum. To quit OxyContin, after abuse, is like quitting heroin. The body alters itself chemically in expectance of a usual dose, and when the drug is no longer present, the body reacts adversely. Severe pain follows. Symptoms of withdrawal include muscle and bone pain, restlessness, insomnia, cold flashes, and other flu-like symptoms including severe diarrhea and vomiting (“Withdrawal”). Tangled in the torrents of withdrawal, my friends devote up to three hours at a time to their toilet.

And then it’s over. After a week of severe illness and horrid mood swings the symptoms subside, and the addict is healthy again. The body is no longer dependent, reverting to equilibrium without the drug. But given the opportunity, even after ripping through withdrawal, an addict will be likely to adopt the habit again. This allows us to witness the potency of addiction. He survives a trek through hell, a triumph over strangling dependency, and still he returns to the chains of addiction, willingly. Buick has forfeited freedom twice. “My body craves it and that mind over body stuff only goes so far,” he explains. OxyContin has the power to force an addict to subject himself to what he *knows* is inordinate pain and suffering. Addiction can be slavery.

Buick didn’t know that. None of my friends knew. Now, hundreds of dollars and weeks of pain later, Buick and Olly are picking up their lives where they neglected them months ago. They have spent the last six months concentrating on getting more OxyContin and staying high. Now, when I talk to them, they express worry and wonderment about how they have arrived at this point—the same place they were before addiction. “What am I going to do with my life? Where am I going? Everyone seems to be moving forward but me.” They are beginning adulthood still dependent on family for financial support. Their addiction left them in debt and still searching for “real” jobs.

What if they had been warned? What if they had seen what could happen? My friends—and hundreds of others—are led into addiction through ignorance. It can stop. We need commercials. Billboards. These means are used to spread the truth about cigarettes and can also be effective for drugs such as OxyContin. Prescription pills are a favorite among teenagers whose friends and relatives have a regular supply. And because parents and peers can obtain them respectably, legally, kids find it easier to rationalize usage.

I never learned about the dangers of prescription drugs in school. I should have. Kids should learn. Heroin addicts with empty eyes and extensive bluish-purple track marks should be ushered into auditoriums of elementary schools, stumbling over students and teachers to reach a stage in front of them all. They should lean heavily on the podium and drool into the microphone, with an almost incomprehensible slur, "When I was fifteen, I snorted my first line of OxyContin...."

### **Works Cited**

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