



Testimony of

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Regarding the Heroin Epidemic in Pennsylvania

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Good Morning Chairmen Marsico and Caltagirone. Thank you for the opportunity to testify before the House Judiciary Committee this morning on the important topic of Pennsylvania's heroin epidemic.

Too many of us in this room can think of someone we've known or have heard about who has battled a heroin problem. We hear about it from our constituents regularly, and they are asking us to do something to help address this crisis. This is not surprising, considering that in Pennsylvania, we have more heroin users than every other state besides California and Illinois.¹ We are losing children, spouses, parents, siblings and friends to this monstrous drug. Consider the fact that, in Pennsylvania, heroin is the most commonly cited drug of use among treatment admissions². What has become strikingly clear about this epidemic is that it knows no bounds and, in one way or another, affects the lives of every Pennsylvanian.

Heroin destroys lives, and not just the lives of those using it. Collectively, Pennsylvania's District Attorneys have heard from too many parents who worry -- they worry that their child or their child's friends might be using heroin; they fear that one day they could get a call that their child has overdosed. This is because desperate heroin users may be willing to do, steal or sell anything for money to buy their next fix.

Heroin dependency leads to users to steal money from their own family members to buy drugs, break into neighbors' homes to find anything they might be able to pawn, or even sell their own bodies just to get high. We need to curb this epidemic, not just for those suffering from heroin addiction, but for all Pennsylvania residents who are falling victim to the consequences of this drug.

Like a tornado, heroin is a drug that devastates everything its path. Very few heroin addicts are "functioning addicts". Most heroin users drop out of school, lose their jobs, abandon their families and/or become homeless. Users who inject heroin are at risk of contracting deadly diseases, like HIV/AIDS, Tuberculosis and Hepatitis C. These diseases are then multiplied by the sharing of dirty needles and unprotected sex. Most heroin users experience overdose at some point; many die or end up in prison.

It is essential that we understand the far-reaching grip heroin has over our state. A common myth about the heroin epidemic is that it is solely an urban problem. At this point, there are more heroin overdoses in rural and suburban communities than urban

¹Newsworks, *PA lawmakers address escalating heroin use*. Oct. 2013.

²White House, *Pennsylvania Drug Control Update*, 2010.

communities. Almost every county in the state of Pennsylvania has seen the toll heroin takes on its citizens: addiction, overdoses, crime, homelessness, violence and death.

There are many reasons for the heroin epidemic. These reasons include the staggering number of individuals addicted to prescription drugs who end up using heroin; heroin is more pure than ever; heroin can be snorted; and there has been a rise of heroin production in Mexico. Young people can obtain heroin easier than ever before—no longer having to travel to dangerous city streets. In fact, many dealers are now moving out of the city to the more lucrative rural areas, where they have found a new level of interest. Heroin, especially in Pennsylvania, is so high in purity now that you can get high just by snorting or smoking the drug—more favorable to people with a needle aversion³. Law enforcement has been ramping up efforts to track down drug traffickers and the dealers to those who overdose. But on the legislative side, the most productive approach to this epidemic is reducing demand.

So, how do we reduce demand? We prevent new users from moving to heroin. The key to preventing initiation to heroin is curbing the abuse of prescription opiates. Consider the following statistics from the 2012 Partnership Attitude Tracking Study⁴

- Among teens, 89% disapprove of people who use heroin.
- Meanwhile, one in four teens admit to having used or misused prescription drugs at least once in their lifetime.
- One in five teens says they believe that prescription painkillers are not addictive.
- Teens who have misused or abused a prescription drug have been asked “What was the main reason why you last tried a prescription drug without a prescription,” and the vast majority of teens --70 percent-- state that they do not know why they misused or abused a prescription drug.

Parents and others need to educate their children about the dangers of heroin and prescription drugs. Unfortunately, many are uneducated about the dangers prescription drugs present:

- One in six parents mistakenly believes that using prescription drugs to get high are safer than using street drugs.
- 14% of parents admitted that they themselves have misused or abused prescription drugs in the past year.

³ The Intelligencer, *Heroin: Available, pure and cheap, and law enforcement can't keep up*. May 2013.

⁴ Metlife Foundation, 2012 Partnership Attitude Tracking Study.

- Almost one in four teens (23 percent) say their parents don't care as much if they are caught using Rx drugs without a doctor's prescription, compared to getting caught with illegal drugs.

These statistics, also from the 2012 Partnership Attitude Tracking Study, show how parental attitudes implicitly send a message to children that it is acceptable to experiment with prescription medications. Parents need help, support and further education on how to have preventative conversations with their children. There must also be increased awareness on how to better and more quickly recognize when their child may be abusing prescription drugs. This information can be easily dispersed to parents via the media, social networks, doctors' offices or schools.

The FDA is also entering into the battle and increasing regulations on prescription opiates containing hydrocodone, another addictive prescription painkiller. The FDA recently released a report that hydrocodone-containing painkillers will be re-classified as Schedule II drugs, which limits the amount of pills that can be dispensed and prohibits refills without a new written prescription. Pharmaceutical companies are also taking action by formulating prescription opiates that are harder to abuse. Now it is time for us to make some significant changes to how we see and address this heroin epidemic.

It has been discussed at length that prescription opiates are the gateway to heroin use, likely due to the fact that heroin is cheaper, easier to obtain and provides a stronger, faster high. It is no coincidence that Pennsylvania has the third highest amount of heroin users in the nation and also one of the weakest prescription drug monitoring programs. A recent Pennsylvania news article chronicles the story about a young man who started using OxyContin recreationally while in college and then quickly deteriorated into intravenous heroin use. This young man states that the struggle to find money to get high is now his full-time job. The white male, college graduate, born in the suburbs of Pennsylvania to a middle-class family, states at the end of the article, "When you're addicted to drugs, all your 'nevers' come true."⁵

This is precisely why we need an enhanced prescription drug database. While the House recently passed legislation by Representative Baker expanding our current database, the bill contained language that restricts the ability of law enforcement to access information about the use of regulated, prescription drugs. We believe this to be

⁵ PhillyBurbs.Com, *To get their fix, young Bucks, Montco heroin addicts beg, borrow, steal*. May 2013.

bad policy as it will hamper our ability to be proactive and hold pill mills and corrupt doctors accountable.

We want to thank the committee for the opportunity to share our testimony today.