

## DRUGS OF ABUSE IN NC AND CRIMINAL CHARGING

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## DRUG ABUSE & ADDICTION

- *DEFINITION OF ABUSE – USE OF A DRUG FOR NONTHERAPEUTIC USE; USE OF A SUBSTANCE THAT ALTERS ONE'S MOOD, EMOTION OR STATE OF CONSCIOUSNESS*
- *DEFINITION OF ADDICTION – CONDITION BY AN OVERWHELMING DESIRE TO CONTINUE TAKING A DRUG TO WHICH ONE HAS BECOME HABITUATED THROUGH REPEATED CONSUMPTION BECAUSE IT PRODUCES A PARTICULAR EFFECT*

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## PHARMACEUTICAL DRUGS



**PHARMACEUTICAL DRUGS** – Drugs which have been approved by FDA for use by humans for certain medical conditions and can be marketed in the United States

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## CONTROLLED DRUGS

Drugs placed in Schedules I through V in NC

*Are placed in Schedules based on Actual or Relative potential for abuse and other abuse factors, risk to public health.*

*Potential to produce psychic or physiological dependence.*

*Whether the substance is an immediate precursor of a substance already controlled under state or federal law*

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## SCHEDULE I DRUGS



Drugs placed in this Schedule normally have a high potential for abuse, have no currently accepted medical use in the US or lack accepted safety of use in treatment under medical supervision

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## SCHEDULE I DRUGS

- DRUGS IN THIS SCHEDULE INCLUDE
- SOME OPIATES
- LSD
- Mescaline
- Psilocybin
- MDMA



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## SCHEDULE II DRUGS

DRUGS IN THIS SCHEDULE INCLUDE THOSE WITH A HIGH POTENTIAL FOR ABUSE, CURRENTLY ACCEPTED MEDICAL USE IN THE US AND CURRENTLY ACCEPTED MEDICAL USE WITH SEVERE RESTRICTIONS



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## SCHEDULE II DRUGS

- OPIATES INCLUDING HYDROCODONE (THE DRUG BY ITSELF)
- MORPHINE (MS CONTIN)
- OXYCODONE (PERCOCET, OXYCONTIN)
- HYDROMORPHONE (DILAUDID)
- FENTANYL (PRIMARILY AN ANESTHETIC)
- METHADONE

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## SCHEDULE II DRUGS

- DEMEROL (PETHIDINE)
- AMPHETAMINES (RITALIN, DEXEDRINE, ADDERALL)
- PENTOBARBITAL



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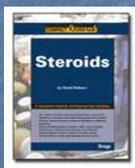
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### SCHEDULE III DRUGS



DRUGS IN THIS SCHEDULE ARE DRUGS WITH A POTENTIAL FOR ABUSE LESS THAN THE PREVIOUS SCHEDULES, HAVE A CURRENTLY ACCEPTED MEDICAL USE IN THE US, AND ABUSE MAY BE LEAD TO MODERATE OR LOW PHYSICAN DEPENDENCE OR HIGH PYSCHOLOGICAL DEPENDENCE

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### SCHEDULE III DRUGS

- TYLENOL WITH CODEINE #2, #3
- HYDROCODONE COMBINED WITH ASPIRIN, ACETAMINOPHEN (LORTAB, VICODIN, NORCO, LORCET)
- PAREGORIC
- ANABOLIC STEROIDS (TESTOSTERONE)

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### SCHEDULE IV DRUGS

DRUGS IN THIS SCHEDULE ARE THOSE WITH LOW POTENTIAL FOR ABUSE, HAVE CURRENTLY ACCEPTED MEDICAL USE IN THE US & LIMITED PHYSICAL OR PYSCHOLOGICAL RELATIVE TO HIGHER SCHEDULES

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## SCHEDULE IV DRUGS

- DEPRESSANTS ( BENZODIAZEPINES SUCH AS XANAX, AMBIEN, RESTORIL, VALIUM, AND MANY OTHERS
- STIMULANTS
- PROPOXYPHENE (DARVON, DARVOCET)



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## SCHEDULE V DRUGS

DRUGS IN THIS SCHEDULE ARE DRUGS WITH A LOW POTENTIAL FOR ABUSE, HAVE CURRENTLY ACCEPTED MEDICAL USE IN US, AND LIMITED PHYSICAL OR PSYCHOLOGICAL DEPENDENCE

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## SCHEDULE V DRUGS

- BUPRENEX INJECTABLES
- SOME CODEINE COUGH SYRUPS
- COUGH SYRUPS CAN BE PURCHASED WITHOUT A PRESCRIPTION IF PERSON IS OVER 18 YEARS OLD, AND PROVIDES IDENTIFICATION



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## PHARMACEUTICAL DRUGS FLOW

CRADLE TO GRAVE APPROACH  
FROM MANUFACTURER TO DISTRIBUTOR  
TO PHARMACY TO CONSUMER



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## DRUG FLOW

ONCE DRUGS ARE DELIVERED TO A  
PHARMACY, DOCTORS OFFICE,  
HOSPITAL, CLINIC, ETC.

THEY THEN ARE DISPENSED,  
ADMINISTERED OR GIVEN TO THE  
CONSUMER

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## DRUGS ABUSED ALONG THE FLOW

- DRUGS CAN BE DIVERTED ANYWHERE ALONG THE FLOW AND ABUSED, SOLD, ETC.
- IN THE MANUFACTURING PROCESS
- COURIER SERVICE
- PHARMACY, HOSPITAL CLINIC
- PUBLIC

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## North Carolina State Bureau of Investigation Diversion and Environmental Crimes Unit (DECU)



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## Unit Responsibilities

- The Diversion and Environmental Crimes Unit investigates diversion of drugs by licensed healthcare professionals and others involved in the healthcare registrant field (pharmacists, nurses, veterinarians.)
- Large scale or multi-jurisdictional prescription fraud cases and doctor shopping investigations.
- Suspicious deaths in healthcare facilities.
- Violations of state and federal statutes and regulations including: Clean Water Act, or other violations involving pollution or hazardous substances.

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## "NONMEDICAL USE"

### Prescription Drug Misuse

**Definition:**

*The intentional use of someone else's prescription medication for the purpose of relieving symptoms that may be related to a health problem.*

**Attributes:**

*No legal prescription for the drug,  
Use is intentional,  
Perceived barriers to medical care,  
Motive is to relieve a condition for which the medication, when prescribed is generally intended*

### Prescription Drug Abuse

**Definition:**

*The use of a scheduled prescription medication to experiment, to get high or to create an altered state.*

**Attributes:**

*No legal prescription for the drug,  
Use is intentional,  
May involve use in combination with other drugs,  
May involve delivering in a wrongful manner,  
Motive to experiment, get high or to alleviate withdrawal symptoms.*

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## WHY?

### Prescription drugs are the number one drug of choice for children ages 12-13

- From 1995-2005, the number of teenagers treated for addiction to prescription pain relievers increased more than 300%
- Nearly 1/4 of 12<sup>th</sup> graders have abused prescription drugs by the time they graduate
- Every day, 2,500 children age 12-17 abuse a prescription pain reliever for the first time
- 13 is mean age of first non-prescribed use of sedatives and stimulants

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## WHY?

- **Prescription drugs are "gateway" drugs to illicit drugs**
  - Predisposes young abusers to street drug use
  - Twice as likely to use alcohol
  - Five times more likely to use marijuana
  - 12 times more likely to use heroin
  - 15 times more likely to use ecstasy
  - 21 times more likely to use cocaine
- **20% of teens and tweens admit to prescription drug abuse (drugfree.org)**
- **Prescription drugs are killing our young people**
  - North Carolina ranks second to Florida in Methadone Overdose deaths
  - 23 % of all drug-related ER admissions
  - more than 20 % for all single drug-related ER deaths

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## WHY?

*We are so accustomed to trusting the medical community that we don't have the same sense of danger about prescription drugs that we do with street drugs.*

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## Top Five States Reporting Methadone Related Deaths

According to the 2007 National Drug Intelligence Center Report:

1. Florida
2. **North Carolina**
3. New York
4. Washington
5. Texas




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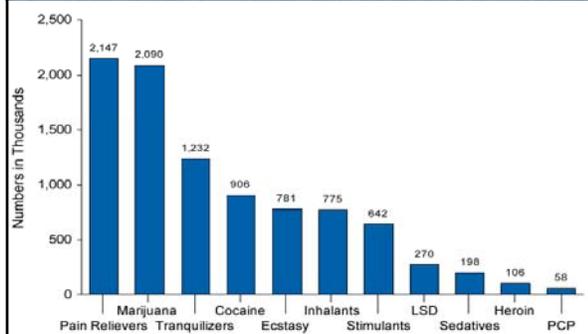
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## Past Year Initiates for Specific Illicit Drugs Among Persons Aged 12 or Older, 2007 (In Thousands)




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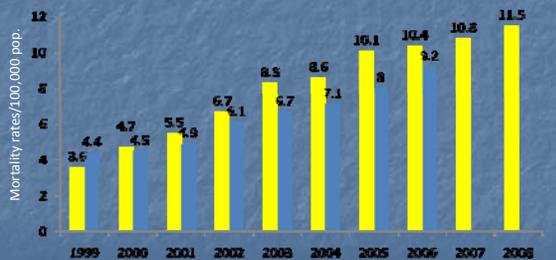
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## Fatal Unintentional Overdose Mortality Rates: NC (yellow) and US (blue), 1999-2008



Source: Mortality data - US 1999-2005 - WI S Q. ARS, obtained 9/1/08. NC rates, NC State Health Statistics, 2006-2007, obtained 8/17/2008

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## What About Non-Controlled Substances

- N.C.G.S. 106-122(19) – Obtain Prescription Drug by Fraud (M)
- N.C.G.S. 90-85.40(c) – Dispense Drug without a Pharmacy License (M) [Sell/Deliver of Non-Controlled substances]
- N.C.G.S. 90-18(a) – Practicing Medicine Without a License

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Weight of Opiate Tablets  
Data collected from case file reviews of ASAC N.H. Gregory, NCSBI Crime Lab

Tablet markings (Description)	Contents	Weight (grams/tablet)	# Required for 4 grams
512 (White tablet)	5 Oxycodone/325 Acet.	0.52	8
E 703 20 (Pink, extended release)	20 mg Oxycodone	0.17	24
E700	7.5 Oxycodone/325 Acet.	0.46	9
Endo 602 (White tablet)	5 Oxycodone/325 Acet.		
Fentanyl Lollipop		2 grams/pop	2
M 4 (M in a box and 4 on back side)	60 Codeine/300 Acet.		
M30 (M is in a box) purple round	Morphine Sulfate	0.15	27
M357	5 Hydrocodone/500 Acet.	0.64	7
M358	7.5 Hydrocodone/500 Acet.	0.64	7
M359 (White capsule-shaped)	7.5 Hydrocodone/500 Acet.		
M361	10 Hydrocodone/650 Acet.	0.83	5
M367	10 Hydrocodone/325 Acet.	0.42	9.5
M5771 (M is in a box)	10mg Methadone	0.24	17
Percocet (Yellow, oval)	10 Oxycodone/325 Acet.	0.45	9
V3592	5 Hydrocodone/500 Acet.	0.69	6
V3594 (White & green speckled)	7.5 Hydrocodone/ 500Acet.	0.80	5 = 4.0gram
Watson 503	10 Hydrocodone/650 Acet.	0.81	5
Watson 540 (Blue tablet)	10 Hydrocodone/ 500Acet.		
Watson 932 (White, oval)	10 Oxycodone/ 325 Acet.		
Watson 749 (White, oval)	5 Oxycodone/ 325 Acet.		

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## Other Charges

- 108A-64 – Medicaid Fraud
- 14-113.20 – Identity Theft
- 58-2-161 – Health Insurance Fraud
- 14-17 – Second Degree Murder

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### ABUSED SCHEDULE II DRUGS

OXYCODONE - PERCOCET, PERCODAN,  
TYLOX, OXYCONTIN, ROXILOX

METHADONE

DEMEROL (MEPERIDINE)

AMPHETAMINES – RITALIN, DEXEDRINE,  
ADDERALL, CONCERTA

HYDROMORPHONE – DILAUDID

FENTANYL – DURAGESIC PATCHES, ACTIQ



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### ABUSED SCHEDULE III DRUGS

HYDROCODONE MIXTURES  
#1 IN NATION

VICODIN, LORTAB, LORCET, NORCO

GENERICS SUCH AS MALINKROT, WATSON



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### ABUSED SCHEDULE III DRUGS

TYLENOL WITH CODEINE  
ACETAMINOPHNE WITH CODEINE

- #2 – 15 MG
- #3 – 30 MG
- #4 – 60 MG

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### ABUSED SCHEDULE IV DRUGS

BENZODIAZEPINES – DEPRESSANTS  
XANAX (ALPRAZOLAM)  
KLONOPIN (CLONAZEPAM)  
VALIUM (DIAZEPAM)  
ATIVAN (LORAZEPAM)  
HALCION (TRIAZOLAM)



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### ABUSED SCHEDULE IV DRUGS

PHENTERMINE - FASTIN  
PHENDIMETRAZINE

PROPOXYPHENE – DARVON,  
DARVOCET



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### NON-CONTROLLED ABUSED DRUGS

- TRAMADOL (ULTRAM, ULTRACET)
- SOMA (CARISPRODOL)
- ANYTHING A PERSON THINKS WILL GIVE THEM A "HIGH" , ETC.



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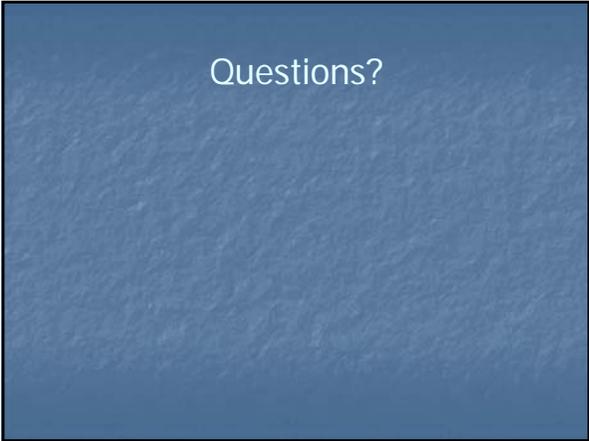
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