The Power of Parenting...
“Parents, TALK to your children often about the risks of chemical use and your values on underage/illegal drug use. Statistics show that most teens do listen to what their parents say.”
Mrs. Morrow    Chemical Health specialist
District #423

CHEMICAL HEALTH TRENDS CORNER:

Teens know what VAPING is...Do their parents?
The “coolest” drug trend: according to several McLeod County teens.
E-cigs target teens with flavored nicotine and a device that can be adapted to smoke Meth, heroin, synthetic drugs, dabs and more. Nicotine addiction occurs quickly.

VAPING

A recent study from Yale shows that “Vaping” is on the rise amongst teens. Vaping might be hard to notice since there is no Cigarette smoke or smell of it. These vape-pens may look like a James Bond-style pen. These e-cigarettes deliver nicotine through heated vapor.
The study states that one in four high school students have already tried e-cigarettes. Through a survey given to two middle schools they found that 3.5 percent of these kids have also tried e-cigarettes and many more said that they would consider it.

The associate director in the division of pulmonology at Stamford Hospital in Connecticut, Michael Bernstein, MD states, “Kids are less scared of trying vaping: one report states that less than one quarter thought they’d ever try conventional cigarettes, but close to half said they might try vaping.”

The problem is that teens think the e-cigs are safer than regular cigarettes since they were designed to help adults to stop smoking. And while most experts agree that e-cigs are safer than conventional cigarettes that does NOT mean that they are safe.

So instead of also delivering “thousands of toxic and cancer-causing chemicals into the body, including tobacco and carbon monoxide” the e-cigs contain mostly “nicotine, which can also wreak havoc with the cardiovascular system and lead to hypertension and heart attacks.” Nicotine is an addicting substance and can work as a “gateway” drug to smoking regular cigarettes.

Since the e-cigarettes industry is still fairly new it is largely unregulated compared to
traditional tobacco products. And although 20 states have already banned the sale of e-cigarettes to minors the rest still allow it. Children can also go online and buy with impunity. Read more

**HERE Are 5 Signs Your Kid Is Vaping**

1. A sudden STRONG WIFF of candy or mints when there are NONE around. “The scent – “E-cig vapor can have no odor at all, which is part of the appeal,” says Laura Offutt, MD, founder of the teen health website Real Talk with Dr. Offutt. That said, the vapor can be flavored, so if you suddenly catch a whiff of fruit punch, bubble gum or mint – and you can find no juice containers, gum or candy wrappers – that could be a red flag.” Says the Stir.

2. Cool looking “PENS”

“Pens” that aren’t pens – “Another thing that I think is helpful for parents to be aware of is that e-cigarettes or vaporizers can look like many things,” says Offutt. “They can look like thumb drives, or pens, or like a stylus.” So if you spot something along these lines, take a closer look, and if there are holes on each end, you’ve probably got an e-cig in your hands.”

3. Copious sipping of liquids. “One major ingredient in the vaporized liquid in e-cigs is propylene glycol, which is “hygroscopic” – meaning it attracts and holds water molecules from its environment, like the mouth. According to Genovese, this can lead e-cig users to have a constant state of dry mouth, which can be alleviated by quaffing more drinks. Dry skin is another common side effect.”

4. Nose bleeds. “The water-holding effect of e-cig vapor can also dry out the nasal passages, leading to bloody noses.”

5. Passing on caffeine. “Some e-cig users develop sensitivity to caffeine, and curb their caffeine intake. So if your teen is suddenly passing on the energy drinks or soda’s they used to chug often, vaping may be to blame.”

**Tobacco Cessation is a Return on Investment**
ClearWay April 6, 2016
Costs to Minnesota’s economy from smoking are estimated in excess of $5 billion each year.

Health care spending due to smoking related illness is estimated to cost Minnesota $2.5 billion each year.

Indirect costs, such as lost workplace productivity and absenteeism, are estimated to cost Minnesota employers $1.2 billion each year.

Tobacco use is the single most preventable cause of death and disease in the U.S., causing 5,100 deaths each year in Minnesota.1 Smoking affects nearly every system in the body, causes serious health problems and increases medical costs. Roughly 10 percent of smokers live with a smoking-related illness.2 Tobacco use has substantial direct and indirect costs for the state and the public, health care providers, employers, insurers, and individuals. Spending on health care due to a smoking-related illness is estimated to cost Minnesota $2.5 billion each year.

Here’s why Minnesota has a big problem with opioid overdoses

Deaths from opioid drug overdoses have hit epidemic proportions nationwide. In March, the Centers for Disease Control and Prevention for the first time urged doctors to avoid prescribing opiate painkillers for chronic pain, warning that the risks outweighed the benefits for most people. In Minnesota, the struggle with prescription painkillers and illegal drugs has left communities grieving for people whose deaths could have been prevented.

Overdose deaths involving prescription opioids have quadrupled since 1999,1 and so have sales of these prescription drugs.2 From 1999 to 2014, more than 165,000 people have died in the U.S. from overdoses related to prescription opioids.1
Opioid prescribing continues to fuel the epidemic. Today, at least half of all U.S. opioid overdose deaths involve a prescription opioid. In 2014, more than 14,000 people died from overdoses involving prescription opioids.

**Most Commonly Overdosed Opioids**

The most common drugs involved in prescription opioid overdose deaths include:

- Methadone
- Oxycodone (such as OxyContin®)
- Hydrocodone (such as Vicodin®)

**Overdose Deaths**

Among those who died from prescription opioid overdose between 1999 and 2014:

- Overdose rates were highest among people aged 25 to 54 years.
- Overdose rates were higher among non-Hispanic whites and American Indian or Alaskan Natives, compared to non-Hispanic blacks and Hispanics.
- Men were more likely to die from overdose, but the mortality gap between men and women is closing.

**Additional Risks**

Overdose is not the only risk related to prescription opioids. Misuse, abuse, and opioid use disorder (addiction) are also potential dangers.

- In 2014, almost 2 million Americans abused or were dependent on prescription opioids.
- As many as 1 in 4 people who receive prescription opioids long term for non-cancer pain in primary care settings struggles with addiction.

- Every day, over 1,000 people are treated in emergency departments for misusing prescription opioids.

**Heavy Teen Marijuana Use May Cut Life Short by Age 60**

Legalization advocates and the marijuana industry they have created insist that no one has ever died from a marijuana overdose, and therefore the drug is harmless. An important new study shows just how foolish such a claim is. It finds that heavy marijuana use during adolescence puts men at risk of death by age 60. In other words, marijuana seems to have the same risk for premature death as tobacco.

Researchers from the Karolinska Institute in Stockholm, the Institute of Social Medicine at the University of Rio de Janeiro State, and the Center for Epidemiology and Community Medicine in Stockholm studied some 45,000 Swedish military conscripts 42 years later. The conscripts were recruited at ages 18 and 19. The researchers found that those with a baseline history of heavy marijuana use--50 times or more--had a significantly higher risk of death (40 percent) than those who never used the drug. The association persisted after controlling for several possible confounders.

The researchers say that about ten
percent of people who ever used marijuana and from one-third to one-half who use the drug daily will become addicted and continue to use despite experiencing problems.

They note that marijuana users “have been found to have higher rates of hospital admissions for injuries from all causes and of fatal traffic collisions compared to nonusers” and that there is reason to suspect the drug can cause some forms of cancer, including lung cancer, and perhaps cardiovascular fatalities.


Alcohol Impairs Learning!

- Underage drinking substantially increases risk of developing an alcohol use disorder in adulthood.
- Adolescents and young adults are more susceptible to the negative cognitive effects of alcohol than are adults.
- Alcohol use can cause a host of immediate neurological consequences (e.g., blackouts, hangovers, overdose with respiratory arrest and death), cognitive Dysfunction (e.g., memory, language, learning, and visuospatial problems), and sleep disturbance. These problems, along with mood disorders often associated with alcohol use, can impair intellectual development and academic performance, impacting adolescents even after they become adults.
- When alcohol affects the frontal lobes of the brain, a person may find it hard to control his or her emotions and urges. The person may act without thinking or may even become violent. Drinking a lot of alcohol quickly can cause a blackout—not being able to remember entire events, such as what he or she did last night. If alcohol damages the hippocampus, a person may find it hard to learn and to hold on to knowledge.
- Our children are given one brain at birth that has to last a lifetime.