

Heroin use on Long Island soars

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Linda Diorio never imagined what she was up against.

Not when her teenage son, Erik, started staying out and sleeping in, refusing to tell her who he was with or where he had been. Not even when he came to her for help with his addiction to a drug he wouldn't name.

In May of last year, Diorio and her husband finally learned that Erik, then 19, was using heroin. In the tense and wrenching weeks that followed, they tried to convince him to get help. They tried to convince hospitals to admit him. They tried to cobble together funds to pay for his costly rehab. But they didn't succeed in time, and by July, Erik was dead.

"You worry about them smoking pot. You worry about them driving recklessly. You worry about them not using their seat belt. You worry about that phone call in the middle of the night," said Diorio, of Farmingdale, who wears her older son's photograph in a heart-shaped locket around her neck. "You don't worry about heroin. Because it didn't exist in my mindset."

Diorio died three weeks after another teen, Natalie Ciappa of Massapequa, fatally overdosed on heroin at a Seaford party. The public outpouring after the June 2008 death of Ciappa, 18 - a college-bound honors student who sang in her church choir - "opened the floodgates," as Diorio put it, about heroin's troubling foothold among a growing number of Long Islanders, including teenagers.

Since then, parents have gathered at community events - one in Smithtown drew an estimated 1,000 residents - aimed at educating families about the signs of heroin use; laws have been passed in both Nassau and Suffolk Counties mandating that police notify schools about nearby heroin arrests; and law-enforcement agencies have redoubled efforts to track, and shut down, the migration of heroin onto Long Island, which they say is accomplished with the ease of a cell phone text message between seller and buyer.

By last summer, authorities say, heroin wasn't just an encroaching threat. It had already arrived.

"You could almost use the word 'epidemic,' " said Nassau County District Attorney Kathleen Rice in a recent interview. "What we've seen over the past three years, almost immediately after my administration came in, is a big increase in fatal heroin overdoses."

This happened, she said, when "nobody was thinking about heroin as a problem at all."

Last year saw Nassau's highest overdose numbers to date, with 46 heroin deaths. In Suffolk County, the number of heroin-related deaths has hovered around 46 for the past four years. Neither county, nor the state, officially tracks nonfatal overdoses, but Suffolk's Emergency Medical Services reported a 60 percent jump in the emergency use of an opiate antidote to counteract an overdose - for either heroin, or prescribed opiates like Vicodin - from 150 in 2007 to 254 in 2008.

1,068 fatal overdoses in 5 years

Between 2004 and 2008, at least 1,068 people in Long Island lost their lives in overdoses of either heroin or prescription opiates. In 2007 alone, a staggering 10,418 people were admitted to rehab facilities in both counties for opiate addiction. Statistics from other locales were unavailable yesterday.

Authorities say aggressive promotion by dealers, increased purity that allows users to snort or smoke the drug, rather than inject it with a needle, prices as low as \$5 for a one-time high, and similarity to popular but costly opiate painkillers like OxyContin and Vicodin are behind heroin's growth in popularity.

Experts say these painkillers - often found in parents' medicine cabinets, and legally prescribed - are more often than not the entry point to heroin addiction.

Police, hospitals and drug counselors alike have noticed a significant uptick in heroin use over the past few years.

"It really feels like, from all the traffic that comes in here now, that we have more and more kids using," said Jamie Bogenshutz, executive director of YES Community Counseling Center in Massapequa and head of the Nassau Alliance for Addiction Services. "They're starting younger, they're starting with more substances, they have better access, everything is cheaper and they have more money."

Heroin arrests in both Nassau and Suffolk counties have surged in recent years - rising 126 percent in Suffolk and 91 percent in Nassau between 2005 and 2008. Admissions to rehab facilities among those 21 and under for heroin use have risen 50 percent in Suffolk County since 2003; they have remained fairly constant in Nassau County.

Admissions of those 21 and under for opiate prescription drug addiction doubled in Nassau and quadrupled in Suffolk between 2003 and 2007 - a harbinger of even worse heroin problems to come, national studies indicate.

Federal officials say the vast majority of heroin in this area originates in Colombia, but the exponential increase in heroin production in Afghanistan threatens to further flood the market with low-cost, high-purity product that users and experts say is highly addictive.

Advocates fear the cuts to some state and local rehabilitation and prevention programs coupled with the high cost and scarcity of treatment options in both counties could add to the problem.

Funding cuts in Nassau, Suffolk

In Nassau, funding for the county's Mental Health, Chemical Dependency and Developmental Disabilities Services Department declined this year by about \$1.9 million, to \$22.6 million. Suffolk's Office of Community Mental Hygiene Services, which includes substance abuse, saw a 2 percent rise in funding, to \$53.9 million. The budget for the state Office of Alcoholism and Substance Abuse Services, which provides and regulates treatment for chemical and gambling addictions, was cut this year by 10 percent, to \$695 million.

Private facilities can cost as much as \$30,000 for a monthlong stay, forcing some parents to spend what they'd saved for their children's college tuitions on their rehab.

The Diorios' insurance covered Erik's first trip to a rehabilitation facility upstate, but when Erik left after three days, he had used up their insurance company's "once in a lifetime" rehab coverage. Two months later, when Erik's concerned friends brought him to Nassau University Medical Center's emergency room, the hospital confirmed he had a drug problem but sent him home, his mother said. When he asked his mother to bring him back later that week he was admitted, but to a part of the hospital that offered little more than a bed, and nothing in the way of counseling

services.

Soon he was using again - a repeat that parents of children struggling with heroin addiction say is all too predictable. Near the end of his life, when Erik once more asked for help, he abruptly changed his mind while his parents were trying to figure out how to pay the \$10,000 rehab fee.

"I feel very strongly that the loss of his life was a tragedy," Dorio said. "The challenges that we faced in that short period of time - there were so many roadblocks put in our way."

Prescription for surgery

In October 2006, after an emergency appendectomy, Erik's doctor wrote him a prescription for Vicodin.

"I remember thinking at the time, 'Why is he giving him Vicodin? What ever happened to Tylenol?' " said Linda Diorio, who believes the Vicodin started her son on the path to heroin.

The legal use of prescription opiate drugs like Vicodin and OxyContin has skyrocketed in recent years. And the rise in prescriptions has translated to a rise in illicit use.

Nationwide, the number of deaths involving prescription opiates increased 66 percent, from around 3,500 in 2001 to 5,800 in 2005, according to the Centers for Disease Control and Prevention, outpacing fatal overdoses of illicit drugs. The 2008 Monitoring the Future study of adolescent drug use, conducted annually by the University of Michigan, showed that about 13 percent of high school seniors admit using opiate painkillers at least once.

Part of the reason is availability - these are legal drugs that can often be found in a parent's medicine cabinet. And because these are medications a doctor prescribes, they seem safe.

"A lot of people don't think as much of it because when you were little your mom said, 'Here, take a Motrin, take an Advil,' " said Ann, 19, of Massapequa, who is battling an opiate pill addiction. "So you don't think anything of it."

Ann, who did not want her full name used because she never told her parents about her drug problem, worked at a Long Island restaurant where she and her co-workers would give dealers a list of the drugs they wanted. Soon, she said, she was spending all her tips on the opiates, taking as many as four a day. She estimates she spent about \$7,000 over an eight-month period.

"I was taking them at school," she said. "I was having a lot of problems with my parents. I became very shut off. I became very numb, emotionally."

She stopped using when her friends gave her an ultimatum: seek treatment or they'd tell her family. "It sounds grimy and sleazy now, but at the time it was just what I did," she said. "There's really no shortage of it on Long Island. Everyone knows someone who can get them for you."

State data shows that the number of people being hospitalized for opiate prescription drug addiction in state-certified facilities has doubled in Nassau County and quadrupled in Suffolk County in the last five years. In Suffolk, the number of fatal overdoses from opiate drugs other than heroin rose 60 percent, from 80 to 128, between 2005 and 2007, although it dropped back to 85 in 2008, according to the Suffolk Health Department. In Nassau, fatal overdoses from non-heroin opiates rose 66 percent between 2006 and 2008.

Efforts to educate doctors about prescription practices, and crackdowns on Internet sites that illegally sold opiate painkillers, have succeeded in making the drugs harder to obtain, said John Gilbride, head of the U.S. Drug

Enforcement Administration's New York field office.

But success in limiting the supply of those pills has had a toll, as many of those who become addicted eventually run out of money to pay for the costly pills, and turn to heroin - a drug that offers a similar high at a far lower price.

"Pills don't have a large stigma attached to them. They're easy to take, there's no smell, there's no setup, but then they break the bank," said Teri Corrigan, who heads the Nassau County DA's narcotics and street crimes unit.

Heroin, by contrast, costs as little as \$5 a bag.

"The dealers are savvy," Corrigan said. "They know you'll go from pills to heroin, so they key in on where are the opiate pills being taken, and they make sure there is a dealer in that neighborhood who will seek you out."

That, Linda Diorio believes, is what happened to her son.

"At some point after the [2008] new year, the oxys dried up," she said. Diorio believes her son's habit changed from pills to heroin sometime during the spring of that year.

"It started at a party," she said. "Someone said, 'Oh, try this.' "

Mistook signs of drug use

Some of the signs of illicit drug use that seem more apparent in retrospect - sleeping till noon, refusing to tell them where he was going or had been - at the time seemed merely like the rebellious behavior of a typical teen.

"That's pretty much what we thought we were going through," she said. "We knew he smoked pot, not crazy about the idea, but part of the teenage mindset. He drank occasionally, but not a major issue. Life was hectic - two parents working, two boys. You get caught up. You think when they get older they don't need you as much. That's a fallacy."

Erik was outgoing, social and bright, his mother said, but he didn't apply himself in school and learned during his senior year that he wasn't going to graduate on time. That, combined with the temporary loss of his driver's license because of several mostly minor tickets, left him feeling isolated, she said.

After Erik returned from rehab, Diorio said she started finding around the house needles and the tubing users tie around their arms when injecting drugs. Money and jewelry went missing. She tracked some of it down to the pawnshop where Erik apparently sold it.

"It's a surreal feeling," she said. "How could this actually be happening? How can my child, who I've done everything for, be a heroin addict?"

Staff writer Andrew Strickler contributed to this report.