

CHAPTER 8



Special Populations

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STUDENT ATHLETES

It is well-documented that sports serve as a protective factor for youth, preventing them from engaging in risky behaviors such as drug and alcohol use. Positive social interaction with peers as well as community-level participation reinforce wellness and healthy behavioral norms in youth. Participating in sports, however, does have a set of risks specific to student athletes. Some of these risks include strenuous daily training regimens, injuries, surgeries, ongoing commitment, and internal and external pressures and expectations. Student athletes who have been injured or undergone surgery are a priority demographic to be considered at higher risk than their non-athlete peers in developing opioid dependence.

What to do when sports injuries occur:

- **Return-to-play decisions should be determined by the medical professionals involved with the injured athlete** such as physicians, athletic trainers, physical therapists, and/or other outside professionals-not the athlete, coach, or the athlete's parents.
- **Document the treatment and return-to-play plan**, and share it with all parties involved in an injured athlete's care and sports participation.
- **An injured athlete needs time to heal.** Missing a game or two is better than missing an entire season or more.

Consider the injured athlete's social, emotional, and mental health:

- **Sports injuries can also have an impact on the social and emotional wellbeing of a student athlete.** Being sidelined and losing a structured activity may lead to depression, loss of connection to friends, stress, and loss of identity as an athlete.
- **Communicate regularly with injured athletes about how they can stay involved with the team even if they are not able to get back on the field.**



What to do if an injury occurs and pain management is needed:

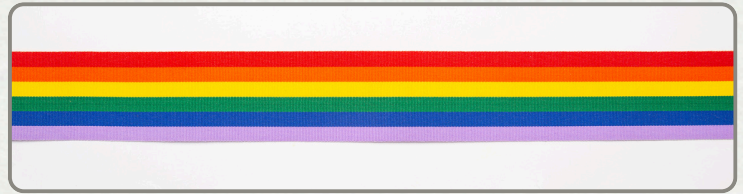


- **Opioids for pain should be considered by physicians when other approaches have not provided relief.** Students and their families should talk openly with their doctor and pharmacist about the medications, their proper use, and possible risks and side effects.
- **Consider asking about alternative treatments** such as ice, heat, massage, braces, physical therapy, rest or over-the-counter non-steroidal anti-inflammatory medications.

RETURNING TO PLAY AFTER AN EXTENDED ABSENCE

It is important to acknowledge some novel circumstances athletes may face when returning to play from an extended absence that puts them further at-risk than their non-athlete peers of developing an opioid dependence. As restrictions lift some things to consider:

- Abbreviated athletic seasons may intensify both internal and external pressures on the student athlete.**
- Athletes may be more inclined to play through pain/injuries or return too quickly after an injury or surgery.**
- Injuries that are not given proper and immediate attention may require more pain medications over a longer period of time.**



SPECIAL POPULATIONS - LGBTQ+

The opioid epidemic is devastating communities across the United States. Data indicate that young people who identify as lesbian, gay, bisexual, transgender, or queer (LGBTQ+) are disproportionately affected by substance use disorders (SUD) including opioid use disorder. It is also important to note that there is a gap in the data of opioid use amongst individuals identifying as transgender because many research studies fail to properly identify these participants.

Identifying as LGBTQ+ does not cause someone to misuse opioids. Minority stress and the consequences of prejudice act as a barrier to accessing adolescents' typical support systems and can serve as a framework for understanding the opioid epidemic in LGBTQ+ populations. As these youth cope with stigma, harassment, and even rejection by their own families, LGBTQ+ teens are more likely than their non-LGBTQ+ peers to use alcohol and drugs, including opioids.

Minority stress caused by discrimination, victimization, stigma, and marginalization is something LGBTQ+ people face constantly from a young age. As a result, oftentimes an individual's psychological processes and ability to regulate emotions are negatively impacted which can lead to identity concealment and internalized feelings of worthlessness and concerns about their future. In order to escape or dull these feelings and emotions, some young people seek opioids and/or other substances for relief.

What risk factors do LGBTQ+ youth face?

- Bullying and harassment
- Family conflict and rejection
- Minority stress
- Gender stereotypes

What are the outcomes for LGBTQ+ youth?

- LGBTQ+ are more likely than their non-LGBTQ peers to use alcohol and other drugs.
- There is less research available about substance use among teens who are transgender.
- Transgender young people experience certain substance abuse risk factors, such as peer victimization and psychological distress, even more often than lesbian, gay, bisexual, or queer youth who are cisgender.

How do I help?

- **Family support** - Young people whose parents and caregivers affirm their identity are less likely to use drugs and alcohol and more likely to trust these adults for help if they do have trouble with these substances.
- **Families can help teens find and join a local LGBTQ+ youth group.** Not only does this effort demonstrate a family's support, but it also helps teens find LGBTQ+ friends. Strong social support is a protective factor when it comes to drugs and alcohol.
- **Families who find the issue particularly challenging may be interested in the work of the Family Acceptance Project, particularly its family education booklet.** In the United States, PFLAG supports family members, friends, and allies of LGBTQ+ people through its online resources and more than 350 local chapters.



SPECIAL POPULATIONS - DENTAL SURGERY PATIENTS



MORE THAN
2/3 OF
OPIOIDS
PRESCRIBED BY
DENTISTS ARE
RELATED TO
DENTAL
SURGERY

The most common procedure among teens requiring an opioid prescription is the removal of wisdom teeth. It is important to note that the American Dental Association recommends that dentists prescribe a combination of ibuprofen and acetaminophen for the treatment of dental pain rather than opioids; a study from 2013 **found that a 200mg dose of ibuprofen combined with 500mg of acetaminophen was more effective in treating pain than opioids.**

How to protect your child

Talk to your child's dentist to make sure that you understand what medication is being prescribed to your child.

- **Ask if this prescription has the potential to be addictive.** If so, are there other alternative pain management solutions, such as ibuprofen and acetaminophen?
- **Ask if there's an option other than prescription opioids to treat your pain.** Some non-opioid medicines might offer the best balance between benefits and risks.
- **Tell the dentist about any substance use disorders or addiction in your family.** This will help the dentist decide if opioids are safe for you.

- **Talk about your teen's medical history and any medications they are taking.** It might not be safe to take opioids with some other medicines, and mental health challenges can put youth at greater risk of misuse and dependence.

If your dentist decides that opioids are the best choice for your child, there are additional steps you can take:

- **Manage and monitor your child's medication.** This includes storing the opioid medication safely and securely. Consider purchasing a locking medication box for your household.
- **Urge them not to share medication.** Discuss the dangers of misusing opioid prescriptions and the addictive properties associated.
- **Dispose of extra painkillers as soon as possible.** Drug disposal kits are available, along with national drug takeback day events. For immediate disposal, mix the prescription in a sealable bag with coffee grounds or cat litter. For more information on how to properly dispose of unwanted/needed prescriptions, please visit the CT Department of Public Health website.
- **While it may seem like a fool-proof plan, do not flush extra medication down the toilet, as it can affect water supplies.**

Taking these steps can mitigate the impact that an opioid prescription has on your child, preventing the misuse and dependence that put them in harm's way.

