

Printed on page LETHAL LOCAL TOLL

## Pills take lethal local toll

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At times the bodies roll into the District 12 morgue one a day.

They look to have gone peacefully. No bruises. No broken bones. While not always young, few are old enough to be called old.

Medical Examiner Russell Vega knows what to expect when they come in this way. Odds are, a drug overdose will be blamed for the death.

In 2006, the most recent complete year for which data is available, more than 160 people died from a drug overdose in Sarasota, Charlotte, Manatee and DeSoto counties -- nearly triple the number of deaths from five years ago.

A preliminary report last month by the Florida Department of Law Enforcement showed that from January to June 2007, three of the four deadliest drugs were prescription medications. Sarasota, Manatee, Charlotte and DeSoto counties are on track to report record numbers of overdose deaths from several powerful painkillers.

The state's death toll has been rising steadily since at least 2001. In 2006 the number of deaths attributed to drugs surpassed the number of people killed in car crashes in Sarasota and Manatee counties.

Few places in the state have felt the impact as sharply as these counties, which have quietly become two of Florida's deadliest.

A Herald-Tribune review of state overdose data shows that among the 24 medical examiner districts for which overdoses are tracked in Florida, only five had more drug deaths per capita than District 12, which includes Sarasota, Manatee and DeSoto counties. The majority of those deaths occurred in Sarasota and Manatee.

The data, collected from medical examiners by the FDLE, show that District 22, which contains only Charlotte County, ranked 12th in total overdose deaths adjusted for population, but 7th in the percentage increase from 2001 to 2006.

Law enforcement officers and drug abuse experts are not sure why overdose deaths appear to be increasing more quickly in and around Sarasota. But some point to easy access and the increasing popularity of prescription drugs -- opiate painkillers like oxycodone, often sold under the brand name OxyContin, methadone, and depressants sold under the brand names Xanax, Valium and others.

The increase has been driven largely by the abuse of prescription drugs, which now kill more people in Florida than all non-prescription drugs combined. And early indications show that the number of deaths is increasing.

In Sarasota and Manatee, the amount of oxycodone in circulation nearly doubled from 2001 to 2005, according to Drug Enforcement Administration data. It was the largest increase in the state.

Misused, prescription drugs are especially deadly. Abusers often mix them in their search for a high, consuming toxic cocktails that may also include alcohol or still-popular street drugs like cocaine.

Yet Florida -- specifically Southwest Florida -- remains behind the times when it comes to combating prescription drug abuse.

### **Lack of enforcement**

Florida is one of 15 states that have not created a prescription drug tracking system to help ensure dealers and addicts can not visit multiple doctors and pharmacies to amass pills, a practice known as "doctor shopping."

Sheriff's offices in Charlotte, Manatee and Sarasota counties have not created special units to stop doctors from overprescribing or dealers and addicts from loading up on prescriptions.

That contrasts with enforcement efforts in Jacksonville and the Florida Panhandle and in some other states, including Kentucky, where law enforcement agencies have investigative teams dedicated exclusively to illegal prescription drug sales.

The lack of action in Southwest Florida counties can be explained in part by a slowness to realize just how big the problem has become.

"There are a tremendous amount of administrators who don't understand the scope of the problem, which has allowed it to fester," said Sgt. Lisa McElhaney, who heads the prescription drug diversion unit of the Broward County Sheriff's Office.

Some law enforcement officers interviewed by the Herald-Tribune were not aware of the extent to which local overdose deaths had increased compared with other areas.

"I would be surprised to find six in a year," said Bill Cameron, a top Charlotte County Sheriff's Office administrator who leads the county's anti-drug coalition, Drug Free Charlotte County. "There's just not a lot of them."

In 2006, Charlotte County had 17 overdose deaths, according to FDLE data.

Since 2001, drug overdoses have killed more than 700 residents of Sarasota, Manatee and Charlotte counties, a tally that some feel should have alarmed the community long ago.

"I figure if ... dead manatees were swept up on Siesta Beach, people would be up in arms," said Cindy Harney, a Sarasota County mother whose son Garrett, 20, died in August 2006 from an overdose of the anti-anxiety drug Xanax and opiate painkillers oxycodone and propoxyphene.

"I think about these bodies. I have these nightmares about these people that no one seems to care about."

### **Readily available**

Chris Tozzo lost her son Brett in June 2005. A personal trainer and aspiring fireman, the 22-year-old Riverview High School graduate first took OxyContin when a friend gave him a pill to try, "partly because he was full of aches and pains," she said.

"He died within four months of his first taking the prescription painkillers," said Tozzo, of Sarasota.

When Brett died, alcohol, oxycodone and heroin were in his system. It was only with her son's death that Tozzo understood the danger of prescription drugs.

"Even when he told me he was addicted to painkillers, I still wasn't worried because it wasn't an 'illegal' drug," she said. "I was very naive."

Like many parents of overdose victims, Chris Tozzo has spent the years following her child's death educating herself about the area's pervasive drug culture.

"Everything is so readily available, it's absolutely insane," said Tozzo.

The rate of overdose deaths is climbing across the state and the nation largely because of the prevalence of new prescription painkillers that have proven to be addictive and deadly if abused. Addicts typically take large quantities of the drugs or they crush them, snort them or find other ways to enhance their effect.

Since Purdue Pharma introduced OxyContin as a miracle painkiller in 1996, the drug has rewritten the the culture of drug abuse nationwide and, along with other prescription drugs, helped drive up overdose deaths.

Hardest hit were poor, white communities in Appalachia, where OxyContin, once dubbed "Hillbilly heroin," became wildly popular in part because Purdue's marketing efforts there flooded doctors' offices with the drug.

But while overdose deaths blamed on oxycodone in some parts of Florida have subsided to pre-2001 levels, Southwest Florida's death rates have not.

In the Sarasota-Manatee area, there were twice as many oxycodone deaths in 2006 as in 2001, FDLE numbers show. A preliminary report for the first six months of 2007 shows the two counties on track for a 30 percent increase over the 26 oxycodone deaths reported the previous year. Charlotte is set to triple the number of oxycodone deaths it had in 2006, the report shows. In addition to OxyContin, the opiate painkiller is sold under brand names that include Roxicodone and Percocet.

Sarasota also has the state's third-highest death rate caused by benzodiazapines, a class of depressants that includes Xanax. And from 2001 to 2006, it had one of the largest increases in deaths due to methadone, a once sparingly dispensed drug for heroin withdrawal that doctors now prescribe as a painkiller.

A lethal amount of one or more prescription drugs was listed as the cause of death in more than two-thirds of overdoses in Sarasota, Manatee and Charlotte counties in 2006.

There is no clear answer as to why fatal overdoses have risen so quickly in Southwest Florida.

"It certainly is the \$50 million question," said Curt Lavarello, executive director of the Sarasota Coalition on Substance Abuse, the county's anti-drug nonprofit. "It's something that our coalition is going to look into."

Drug abuse experts say overdose rates are driven largely by access. Make dangerous drugs easier to get and more people will die from them. By that reasoning, Southwest Florida, with one of the most concentrated elderly populations in the nation, is a natural location for a spike in deaths.

The area's affluence, its thriving medical community and its high population of elderly residents have sent the amount of prescription painkillers soaring. In Sarasota and Manatee counties, the amount of the oxycodone in circulation increased 91 percent from 2001 to 2005, DEA numbers show. And only the Tampa and Fort Lauderdale areas have more available per person than Charlotte County.

"It's unbelievable how many drugs are being passed around," said Norman Shewman, who runs Home Detox Inc., a home-based detoxification service based in Venice. "We're talking thousands of thousands of thousands of dollars. It's really sad when an 18-year-old tells you it's easier to buy OxyContin than it is to buy a beer."

### **Weak enforcement**

On March 9, 2006, Punta Gorda resident Todd Brazis walked into a St. Petersburg clinic and complained of lower-back pain. He paid \$250 for 330 pills: 120 oxycodone, 120 Xanax and 90 methadone.

Three days later, the 28-year-old cook and father of a 3-year-old daughter died of a methadone overdose. Oxycodone was also found in his system.

"Somebody turned him on to the pill mill up there in St. Pete," said father Steve Brazis, who, as a kitchen manager, worked beside his son at Chubby's Sports Tavern in Port Charlotte.

Steve Brazis said he spent a lot of time with his son, watching NASCAR races and organizing family barbecues. So he was "flabbergasted" when he learned how his son died.

"I didn't know him to be on anything. I would have noticed it right off the bat," he said.

The Doctors Urgent Care Walk-in Clinic where Brazis got his pills was well-known among prescription drug abusers, according to Pinellas County Sheriff's reports. A banner advertising oxycodone and other drugs hung outside the practice, where lines backed up into the parking lot.

Ultimately the clinic's doctor, Ty Anderson, was reprimanded by the state Board of Medicine after undercover detectives found his assistants handing out prescriptions to patients who were not seen by the doctor. Anderson was also arrested but was never charged.

Experts say such clinics find it easy to thrive because Florida lacks oversight on prescription narcotics adopted by most other states.

State lawmakers have blocked several efforts to establish a prescription monitoring program that could be used to identify questionable doctors and patients who pile up on painkillers. The primary argument against it has been a concern that a database of people's prescription purchases could compromise their privacy. Other opponents argue that the database will force doctors to stop writing prescriptions and end up leaving patients with serious pain unable to get relief.

Advocates say such concerns are far outweighed by the need to crack down on abuse.

"If the state regulated it, they would find out: Hmm, something funny here; a lot of pills going out," Steve Brazis said. "They got everything regulated in the state you can think of -- except for drugs."

More than 30 states have approved prescription monitoring programs that record the flow of drugs from the doctor to the pharmacy to the buyer. The programs have reduced the time it takes to investigate a doctor-shopping case from about six months to a matter of weeks.

In Kentucky, where a tracking system was created in 1999 at the height of the state's OxyContin crisis, the average investigation time dropped from 156 days to 19.

The monitoring system has spurred law enforcement agencies across the state to create specialized units that go after prescription fraud.

Although Kentucky's drug-death statistics are not as comprehensive as Florida's, Kentucky's medical examiner reported a slight drop in accidental overdose deaths between 2005 and 2006.

More police work

Florida narcotics investigators say a monitoring program is a necessary first step if police are to make a serious reduction in the illegal supply of prescription drugs.

"That would be the check and balance that you would need," said Capt. Jeff Bell, who oversees the Sarasota County Sheriff's Office narcotics unit.

Law enforcement agencies are hesitant to get bogged down trying to prove a doctor is writing unneeded prescriptions or a patient is stockpiling pills to sell.

"It's a very highly specialized field of investigation; it's kind of a combination of narcotics and white-collar crime," said McElhaney, the head of Broward County's prescription drug unit. "A lot of investigators, they don't want to do it. It's almost looked at like the bastard child of narcotics."

Because prescription narcotics are legal, the investigations are often not as black-and-white as those targeting illegal drugs: If you possess them, you are breaking the law.

Local narcotics units are generally focused on shorter-term investigations: drug-house raids and undercover buy-and-busts.

"We just buy the dope and put people in jail; that's all we want to do," said Lt. Dale Ritchhart, head of the narcotics unit of the Charlotte County Sheriff's Office.

A handful of Florida law enforcement agencies have created units dedicated to combating the illegal sale of prescription drugs. Broward's three-person unit was created four years ago, and in October 2006, the Lee County Sheriff's Office created a unit in response to a string of painkiller deaths.

In Lee County, Detective C. Vernon Tyus is part of the sheriff office's prescription-drug unit, Pharmaceutical Investigations Law Enforcement Strategy, PILS.

Tyus said his year with the PILS unit has shown him how pervasive prescription drug abuse is in Southwest Florida.

Tourists from Midwestern states with monitoring programs vacation in Southwest Florida to take advantage of the state's lack of oversight, he said.

"They come down simply for controlled narcotics."

Tyus said every police agency in Florida should have a unit that focuses only on prescription drugs.

"And I still think it would be a problem," he said. "Pills are taking over. It's just a matter of time."