

Student Athletes and Opioid Misuse: What Coaches Should Know

Teen athletes benefit in many ways from participating in sports, but there is also a risk to involvement in athletics, as evidenced by the 2 million high school athletic injuries each year.¹ When athletes are prescribed pain medication after an injury or surgery, they may receive opioids, which can be misused if not monitored carefully.

In 2016, Massachusetts had 1,933 confirmed opioid overdose deaths, a 17% increase from 2015 and a 42% increase since 2014.² National estimates suggest that overdose rates will continue to increase, requiring prevention efforts to continue from every direction.

This document was designed to help coaches and others involved in high school sports prevent opioid misuse among student athletes. Keep these suggestions, facts, and resources in mind as you meet with your student athletes and their families, and as you work with colleagues. Integrate this information into pre-season meetings, half-time programs, and other events.



More information and downloadable handouts can be found on the MasTAPP website:

<http://masstapp.edc.org/rx-student-athlete>

What to do when sports injuries occur:

- Be honest about the limitations and discomfort that injuries pose. Pain exists for a reason. Ignoring it or masking it with drugs is not in the athlete's best interest.
- Return-to-play decisions should be determined by the medical professionals involved with the injured athlete, such as physicians, athletic trainers, or other outside professionals—not the athlete, coach, or athlete's parents. However, it is important to keep lines of communication open between these parties.
- 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 and emotional health:

- Sports injuries can have an impact on the social and emotional life of a student athlete. Being sidelined and losing a structured activity may lead to depression, loss of connection to friends, and loss of identity as an athlete. Speak with injured athletes about how they can stay involved with the team even if they are not able to get back on the field.
- Coaches and trainers are in a position to develop close relationships with student athletes. These connections can provide valuable guidance, support, and mentorship, and can make a profound difference in the lives of young people. Use these relationships to add personal impact to the rules and expectations about drug use that guide interscholastic sports.

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

- Students and their families should talk openly with their health care providers about the medications, their proper use, possible risks and side effects, and any alternatives.

1 Veliz, P., Epstein-Ngo, Q. M., Meier, E., Ross-Duow, P. L., McCabe, S. E., & Boyd, C. J. (2013). Painfully obvious: A longitudinal study of medical use and misuse of opioid medication among adolescent sports participants. *Journal of Adolescent Health, 54*(3), 333–340.

2 Massachusetts Department of Public Health. (2017, May). *Data Brief: Opioid-Related Overdose Deaths Among Massachusetts Residents*. Retrieved from www.mass.gov/eohhs/docs/dph/stop-addiction/current-statistics/data-brief-overdose-deaths-may-2017.pdf

- Medication should be left at home or dispensed by school nurses (as required by law).
- Medications should not be shared with anyone.
- Mindfulness techniques, relaxation exercises, and physical therapy can also assist in pain management.
- Opioids for pain should be considered only by physicians—and only when other approaches have not provided relief. Consider ice, heat, rest, or over-the-counter non-steroidal anti-inflammatory medications, as appropriate.

What to know about prescription opioids:

- Common names of prescription opioids are Vicodin, OxyContin, oxycodone, Percocet, fentanyl, Opana, and codeine. They should be used only as prescribed, with only the minimal amount taken for the shortest period needed for effective relief.
- Unused medication should not be shared; it should be stored securely and disposed of properly, due to the high risk of accidental overdose by people and pets. You can find locations of prescription drop boxes online www.mass.gov/DrugDropbox.

Physical signs that someone may be misusing opioids:

- Slurred speech
- Itching or flushed skin
- Constipation
- No feeling of pain
- Euphoria
- Shallow or slow breathing
- Small pupils
- Nausea and/or vomiting

Behavioral signs of addiction:

- Neglecting other activities; decreased attendance or performance at work or school
- Taking serious risks in order to obtain the drug
- New relationship issues, or acting out against close friends or family (particularly those who try to address the substance use problem)
- Going out of one's way to hide the amount of substance consumed, and/or unusual secrecy about how one's time is spent while under the influence
- Experiencing unexplained injuries or accidents
- Seriously changing one's physical appearance or neglecting personal hygiene

Helpful Resources:

The Massachusetts Substance Use Helpline offers information about treatment and prevention services: <http://helpline-online.com/> 1-800-327-5050

Massachusetts Health Promotion Clearinghouse provides free education resources: <https://massclearinghouse.ehs.state.ma.us/>

MassTAPP offers statewide substance use prevention information: <http://masstapp.edc.org>

For more information on naloxone, the overdose reversal drug, and how to obtain it from a pharmacy, visit the Massachusetts Department of Public Health website: <http://www.mass.gov/eohhs/gov/departments/dph/programs/substance-abuse/prevention/naloxoneaccess/>