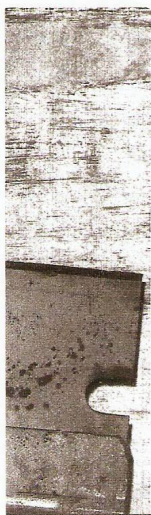


risky business

by Mary Ann McGann



Anxious about graduating from high school and terrified of the uncertainty of college, "Susan" (not her real name) took the only action she could think of to deal with the pressure: She used a sharp object to carve the words "I hate my life" into one of her forearms.

"This girl who was cutting so obviously on her forearms was sending a clear message that she needed help and wanted help," says Dr. Alfredo Lowe, a psychologist at Children's Specialized Hospital in Fanwood, who treated "Susan." "And there's no clearer message than 'I hate my life.'" In fact, when she first sought help from Dr. Lowe, "Susan" already had at least 50 scars on each arm.

Self-injury—or self-mutilation—is not new. Neither are the many other scary behaviors some teens, even preteens, engage in—like inhaling (or "huffing") common household products; chugging over-the-

counter cough syrups; abusing their parents' prescription medication; or playing the "choking" game by putting a rope around their necks and tightening it. It's just that so much attention has been paid to underage drinking and illegal drug use that parents may be less aware—or in denial—about other ways adolescents put themselves at risk.

"I define the 'reality gap' as a disconnect between the real world that kids live in and the make-believe world that many adults, especially their parents, think that they live in," says Stephen Wallace, a former school psychologist and National Chairman of Students Against Destructive Decisions (SADD). "And that reality gap is the single biggest impediment to effective education and prevention."

CONSIDER THE NUMBERS

More than one in 10 teens say they've engaged in auto-asphyxiation, and 58 percent say they're familiar with the practice, according to SADD.

About 14 percent of young people say they've used prescription drugs illegally to get high, again according to SADD.

About one in every 25 eighth graders abused cough or cold medications fairly recently, as did about one in every

14 twelfth graders, according to the 2007 Monitoring the Future survey, a continuing study of American youth conducted by the National Institute on Drug Abuse and the University of Michigan.

The Alliance for Consumer Education says one in five kids has admitted to abusing a household product as an inhalant by eighth grade.

"I think there's a misperception among parents that the warning signs are always obvious," says Wallace, whose national non-profit organization changed its name in 1997 (from Students Against Driving Drunk) to reflect the growing realities facing today's teenagers.

"You know, [they think] if their kid's using drugs or if their kid is engaging in some sort of destructive behavior that they're going to notice. The fact of the matter is, we know that more often than not, these teens look very healthy. They look just like every other teen. They may be successful. They may be doing well in school or be excelling athletically. They may have lots of friends. Sometimes we fall victim to a stereotype about at-risk teens that doesn't match reality," he says.

NOT JUST STREET DRUGS

While the percentage of adolescents using illegal drugs and alcohol continues a decade-long decline, the number of young people abusing prescription and over-the-counter medications remains relatively high, according to the Monitoring the Future survey.

"One of the reasons that [the use of] some of the illegal drugs has gone down is that young people have become more concerned about the dangers of using them," says Dr. Lloyd Johnston, a research scientist and professor at the University of Michigan and principal investigator of the survey. "The use of prescription medicines may be increasing for a related reason, which is that a lot of young people don't see them as dangerous, perhaps in part because they're legally manufactured, doctors prescribe them, and so forth."

One recent college graduate from Morris County remembers a classmate at her high school who did a brisk business selling his prescription Adderall, used to treat attention deficit disorder. "If you don't have ADD, it makes you hyper-focused and organized," she says, "so if you had

a paper due the next day, you could get it done and clean your room while you were at it. People used it in college, too."

Known as "robo-tripping" or "skittling," the practice of chugging over-the-counter cough remedies also has become popular with teens seeking to get a high from a common active ingredient, dextromethorphan (or DXM).

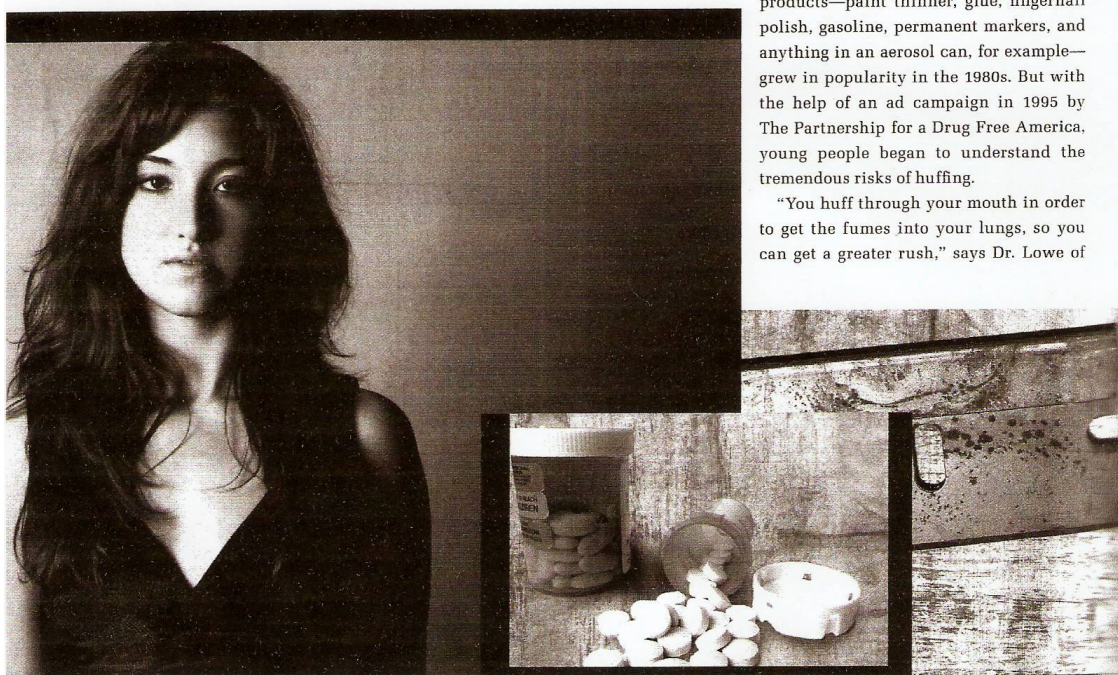
"Youngsters take these medications in very large doses to try to get high from the dextromethorphan they contain. But, of course, they are getting large doses of all of the other active ingredients in them as well," Johnston says.

And the consequences can be deadly. Abuse of prescription drugs like Vicodin or OxyContin can alter the brain's activity and lead to addiction, while swallowing mass quantities of products containing DXM can cause confusion, slurred speech, blurred vision, nausea, vomiting, irregular heartbeat, headache, numbness of fingers and toes, loss of consciousness, seizures, brain damage, and even death.

TOXIC FUMES

Inhaling, or huffing, common household products—paint thinner, glue, fingernail polish, gasoline, permanent markers, and anything in an aerosol can, for example—grew in popularity in the 1980s. But with the help of an ad campaign in 1995 by The Partnership for a Drug Free America, young people began to understand the tremendous risks of huffing.

"You huff through your mouth in order to get the fumes into your lungs, so you can get a greater rush," says Dr. Lowe of



"...there's a misperception among parents that the warning signs are always obvious."

Children's Specialized Hospital. "It's a very cheap high. It's very, very inexpensive and it's very, very dangerous."

But there seems to be less attention focused on this problem in recent years, so the number of kids who view inhalants as dangerous is decreasing steadily, according to the Monitoring the Future survey.

"[The products are] virtually free. They're right there in the house to simply take. They're not illegal to possess or buy," says Johnston. "So they are, in a sense, the safest of the drugs for younger kids to try."

And that misperception by young teens is dangerous, given that regular abuse of inhalants can damage the brain, heart, kidneys, liver, and other vital organs. Even a single huffing session can cause sudden death.

ROPES AND KNIVES

Teenage self-asphyxiation—kids purposely choking themselves or each other to achieve a kind of rush to their oxygen-starved brains—has been around for generations. But it hasn't been well publicized.

"There's been a lot of attention paid to impaired driving. There's been a lot of attention paid to marijuana use and to underage drinking. But we have yet to see that bright of a spotlight shining on some of these other behaviors, like cutting, like huffing, like self-asphyxiation," says SADD's Stephen Wallace.

While choking games may hold an allure for kids attracted by their mystery and danger, teenagers who cut themselves usually don't seek a thrill. Instead, they may hope for an emotional release—through physical pain—to get their minds off something that's troubling them. And while parents often assume a child cuts herself because she wants to die, it's often just the opposite—she might hope to feel anything, even if it's pain.

"Sometimes people cut because they feel nothing at all," says Dr. Lowe. "They feel emotionally numb."

WHAT YOU CAN DO

If you look carefully, you may see telltale warning signs: unusual marks around your teenager's neck, or fresh scars on his arms, ankles, or elsewhere. Maybe your child is losing weight or is inattentive, irritable, weak, and disoriented. Perhaps there's a strong odor of chemicals on her breath or clothes. Or maybe she's not doing as well in school or is hanging out with a new set of friends.

Here are steps you can take to help broach your concerns with your child:

- Don't panic by padlocking your medicine cabinet or hiding household cleaning supplies; this could cause your teen to mistrust or resent you and to further act out, experts say. Instead, quietly monitor your pain medications to see if there's a pattern of missing pills or empty bottles.
- Routinely check solvents and aerosols for misuse.
- Know where your child is and with whom.
- Seek professional help, if needed, from a psychologist, social worker, or trained substance abuse counselor.
- But most important, talk to your teen. Start an open and honest dialog so your child understands the risks and you become comfortable addressing these difficult subjects.

Sometimes, says Wallace, "By the time a young person actually has to make a decision, we've missed the boat. We want to prepare them to make good decisions. We need to recognize that we're probably not going to be there the first time they're offered a drink or a joint or asked to play the choking game. Therefore, we need to prepare kids to make these choices and to give them tools, strategies, and ways out of difficult situations."

There's no time like the present. □

Mary Ann McGann, mom of two elementary-school age children, lives in Warren.

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