

Introduction to the Special Series on Opioid Dependence and Recovery

June 1, 2016

Many American policy makers are proposing ways for the health and criminal justice systems to respond to [the current drug dependence and overdose epidemic](#). And rightly so: according to the [most recent available statistics](#), every day in the United States 130 people die from drug overdoses, and 80 of those deaths involve an opioid.

The most commonly cited explanations for the epidemic of opioid dependence and overdose tend to involve the properties of opioids and the environment within which they are taken. Consider America's history with the opioid painkiller OxyContin: the drug is powerful and becomes especially prone to abuse and dependence when it is crushed and its powder is snorted or injected. OxyContin came on the market at a time when doctors were [instructed to treat their patients' pain aggressively](#). Other environmental factors exacerbated the situation. For example, OxyContin was [marketed](#) as relatively safe, and patients who were unable to access it often tried [heroin as a more affordable alternative](#).

These two kinds of explanations—properties of drugs and properties of the environment within which they are taken—cannot fully account for the opioid epidemic. If they could, then everyone who consumed OxyContin in America since it was introduced in 1996 would have become addicted to it. To come to a more complete understanding of America's relationship with opioids, we also need to consider the role of a third kind of explanation: the nature of the person taking the drug and his or her expectations in taking the drug. This is the “set” in Dr. Norman Zinberg's classic description of drug use effects, “[drug, set, and setting](#).”

We devote this month to the subject of opioid dependence and recovery. In doing so, we will focus not just on these powerful drugs and the environments within which they are consumed. We also consider how personal experiences and tendencies make certain people susceptible to developing an unhealthy relationship with opioids or influence their recovery. We start with today's science review in [The DRAM](#), which explores patterns of problems among people

who misuse alcohol in addition to illicit substances, like heroin. Our science reviews in The WAGER, [ASHES](#), and STASH will share this view of opioid dependence as a complex, multi-determined disorder. Later in the month, we will supplement these reviews with an [Editorial from Dr. Mark Albanese](#), a psychiatrist, educator, and scientist who advocates for evidence-based care of opioid dependence and other expressions of addiction. We will also present an Editorial from a different kind of expert: a student at a recovery high school in Boston who finds that his setting, a school environment, is an essential part of his long-term recovery from opioid dependence.

We hope you will enjoy and learn from this Special Series. Please share your feedback using the comment link below or within the individual posts.

—Heather Gray