



Durham Crisis Intervention Team Observe, listen, create a plan, communicate and connect

Desmethyl Fentanyl: Dangerous New Painkiller Hits Black Market

**BY JACQUIE
ON MAY 16, 2013
IN DRUGS**

Recently, Montreal police seized massive amounts of a dangerous new painkiller to hit the black market in Canada: Desmethyl Fentanyl, which is a derivative of the painkiller Fentanyl. Desmethyl Fentanyl is 80 times more powerful than morphine and 40 times stronger than heroin. This illegal synthetic substance is a dangerous new painkiller to be hitting the streets. The police inter-

cepted the package that was on its way to an address in Colorado. The police are pretty certain that some of the drug has already been shipped to the U.S.

To give you an idea of how strong this drug is, a police officer, who was wearing a protective mask and gloves, briefly came in contact with the substance during the raid and he had to be hospitalized because of heart palpitations. Three other

policemen were also effected after coming in contact with the drug. The police also seized during the raid sophisticated drug equipment that's capable of producing industrial quantities of drugs, with one machine able to produce a pill a second. (Policeone.com)

A major concern that many of us in addiction recovery have is that people who are unfamiliar with the dangerous new

Five New Drugs Parents Should Know About

Five New Drugs Parents Should Know About

Article via www.promises.com

The kids are back in school. Think your job is over and you have nothing to worry about? After all, they're occupied in class and monitored by teachers, so everything

should be fine, right? You could be very wrong. In fact, going back to school increases contact with other individuals who may be promoting or facilitating

Cap-
tion

Inside this issue:

Five New drugs Parents Should Know About	1 5 6 7
Desmethyl Fentanyl	1 7
CIT Partnership News	2
CIT International News	3
CIT Class 17 March	4
Five New Drugs...Cont'	5 6 7
Collaborative Team Spotlight	8

Durham Police Department:

Sgt. L. Ray 919-560-4438 x 29227
lori.ray@durhamnc.gov

Alliance Behavioral Health 651-8400
jmeade@alliancebhc.org
NAMI Durham Hotline- 919-231-5016 (non-crisis)

Durham Tech: Chief Sara Minnis
Office 919-536-7255, Ext. 5504
min-

Special points of interest:
<http://durham.nc.networkofcare.org/mh/>

This site will be up and running soon as a one-stop resource directory to help you locate needed services and supports throughout the Durham community.

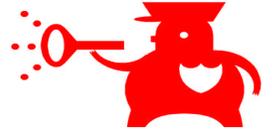
Tell us about the great job your officers do every day. We want to know!!
Sgt. Ray

Durham County Sheriff Office: Captain S. Harris
 919-560-0097
SEHarris@durhamsheriff.org

Durham County EMS
 Director Mike Smith(919)560-8206
msmith@durhamcountync.gov
Duke University Police Department: Captain M. Linton
 919-681-4370 or 812-2920;
Michael.linton@duke.edu

CRISIS COLLABORATIVE EFFORTS

Inter-Agency Partnerships at their best!!



Transitional Housing

Phoenix House



Transitional housing residents are provided with frequent self-improvement, educational, and

job training opportunities by professional volunteers from the community.

Housing for New Hope opened in 1992 with the Phoenix House, which provides housing and support for eight men making the transition from homelessness to independence.

“The Phoenix House challenged my mind, body, and soul. It was a spiritual awakening. It gave me a guide to find a new way of life.”

Alliance Behavioral Healthcare and Housing for New Hope are pleased to announce an enhanced partnership to help individuals with mental illness and/or substance abuse that are homeless in Durham County. Alliance and Housing for New Hope are committed to continuing Durham’s mission to end homelessness. This year we will work together to assure that this population has better access to housing resources, mental health services, substance abuse services and community resources. Through this collaboration, a program has been expanded that will serve persons in locations where previously services were unavailable. This program will meet homeless individuals in jails, hospitals, Durham Center Access, shelters and state facilities and will work with individuals to connect them with services faster and to assist local facilities with discharge planning for these individuals.

Collaborating Agencies Contact Information

Durham Fire Department
 Capt. Mark Law 919-560-4242 x19232
mark.law@duhamnc.gov

North Carolina Central University Police Department:
 Captain A.J. Carter 919-530-7365;
acarter@nccu.edu

Veterans Administration Police:
 Tim Virgillio 919-286-0411 x4078

CIT INTERNATIONAL



CODE 5/ 5R *REMINDER*

If a call concerns a mental health concern in any way- please clear the call 10-24, code 5. If the call requires an incident or arrest report- clear 10-24, code 5R. All referrals should be supported with a CIT Report as well.

CIT International Annual Conference

Oct. 14 - 16, 2013

CIT: PREVENTION THROUGH PARTNERSHIPS

Welcome to the 8th Annual CIT International Conference

October 14-16, 2013 in Hartford, Connecticut

CIT International is partnering this year with Connecticut Alliance to Benefit Law Enforcement, Inc. (CABLE, Inc.) to host the 2013 Annual Conference. Together we invite you to attend and share in the opportunities to network, learn and continue to grow and sustain your CIT program. **And come** celebrate 25 years of CIT!

Tell us about the great job your officers do every day. We want to know!!
Sgt. Ray

CIT: PREVENTION THROUGH PARTNERSHIPS

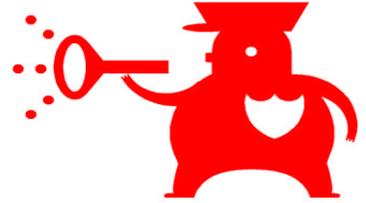
Celebrating 25 Years of CIT

WWW.CITCONFERENCES.ORG for more info

www.durhampolice.com/units/crisis_intervention_team.cfm

CIT FORMS

OFFICERS, PLEASE MAKE SURE YOU FILL OUT **THE ENTIRE CIT FORM**, FRONT AND BACK AND SIGN YOUR NAME! WE WANT TO BE ABLE TO KNOW WHO TO MAKE CONTACT WITH IN CASE OF FOLLOW-UP QUESTIONS AS WELL AS GIVING CREDIT TO THE OFFICERS !!



C.I.T. Class #17

In June 2013, the 17th C.I.T. Class certified a collaboration of 20 officers. Duke University along with the VA sponsored the event. In attendance were 4 Durham Police Officers, 2 Duke Officers, 4 Durham County Sheriff's Deputies.

Our 18th CIT class will be held September 9-13, 2013. This class will be sponsored by the Durham County Sheriff Office and the Emergency Medical Services Department. The location will be the Bethesda Volunteer Fire Station located on S. Miami Blvd., between Angier Avenue and Highway 70.

Send an email to Cpl. Drinker at Tracy.Drinker@durhamnc.gov if you are interested in attending.



DCSO/EMS Sponsored Dates:
September 9-13, 2013

NEW! Come visit our Durham CIT web link at:

www.durhampolice.com/units/crisis_intervention_team

Recent Trends in Drug Abuse

Now, let's take a look at some of the specific drugs teens today are using and abusing, whether they've just begun experimenting with them or have already fallen under the spell and begun the first stages of dependence.

2C-E

Earlier this year in Blaine, Minnesota, nearly a dozen teenagers overdosed and one of them died after taking a hallucinogen at a house party. Investigators later determined that the substance was a variation of a banned rave party drug that can be purchased online. And, even more frightening, initially, investigators said it was legal.

The concoction, called 2C-E and sometimes "Europa," is a variant of its banned relatives. Called "cousin drugs," the only thing that often separates substances like 2C-E from federally-banned counterparts are molecules. This case exposes the law enforcement gray area surrounding this dangerous class of drugs. Neither 2C-E nor Europa is specifically listed as a Schedule I controlled substance by the Drug Enforcement Agency (DEA), the kind that are banned by name because they have no approved medical use, such as LSD, cocaine, or heroin.

This is also true for similar drugs that go by the names of 2C-I and 2C-T-7 and are available online. But there's a related substance, known as 2C-B, which has gone through a long and cumbersome process for a formal ban. Federal officials say that's good enough because federal law does allow for prosecution of so-called "analogue" drugs.

What this means to parents is that analogue drugs, such as 2C-E, can put users at risk for prosecution under federal law. But what's worse is how dangerous such concoctions are to teens. The various 2C rugs, say authorities, fall into the family known as phenethylamines – hallucinogens with similar chemical structures. Their effects are similar to known club drugs such as Ecstasy. When raves were popular about 10 years ago, such party drugs were more common. But their resurgence lately shows that drugs of choice are often cyclical. What was once a fad becomes popular again, metamorphosing into the same type of drug with a different name, but just as dangerous effects.

One of the Minnesota partygoers, who partook of the 2C-E drugs, described it as combining the effects of LSD and psychedelic mushrooms. He said it made his mind race, he couldn't really focus on anything, and he didn't know what was going on at all.

Synthetic Marijuana: K2, Spice

Marijuana has long been the drug of choice and often the entry-level drug for teens. But now there's a new game in town: synthetic marijuana. Often sold under the names of K2 and Spice, these are anything but harmless. These are (currently) legal herbs that are laced with synthetic cannabinoids.

These synthetic compounds mimic the effects of marijuana by triggering the cannabinoids receptors in the brain. The compounds are more potent than natural marijuana and may remain in the body much longer. The U.S. Customs Service banned the importation of Spice in 2009, despite its legal status.

Almost as soon as Spice was being banned, another synthetic compound, K2, appeared on the scene. K2 is a fluffy-looking mixture of legal herbs that have been sprayed with synthetic cannabinoids. When smoked, K2 creates marijuana-like intoxication and the compound is not detectable in urine tests.

Getting high by smoking synthetic marijuana, easily available over the Internet and in head shops, is also coming under intense scrutiny by the DEA. The agency recently banned five chemicals often used in synthetic marijuana.

"Bath Salts"

The popularity of so-called "bath salts" has prompted bans in several states, including Florida. That's because bath salts contain MDPV, an unregulated stimulant.

The problem with both synthetic marijuana and bath salts is that even though they may have a label listing ingredients, they can't in any way be considered safe. Users have no way of knowing what's really in them, the country of origin or the conditions under which it was manufactured. And there's not enough research that's been done on these substances to fully know of their dangers.

Bottom line: Designer drugs are dangerous, whatever they're called. Teens are playing Russian roulette when they put them into their body. There are too many reports of teens overdosing and dying from abusing these substances to look upon them as inconsequential. Nationally, the DEA says that use and abuse of party drugs is a growing problem.

Prescription Drug Abuse: Hydrocodone and Oxycodone

The drugs have been in existence for a long time, and you've probably heard some of the more popular names before.

While this isn't meant to be a complete list, we'll center in on some of the most-abused opioids or painkillers currently used by teens.

Law enforcement officials, health agencies and treatment providers warn that there's been a dramatic and dangerous increase in abuse of medicines containing the narcotic hydrocodone. These drugs are sold under the brand names of Vicodin, Norco and Lortab. Street names for Vicodin include Vikes, Vic and Watson 387. Lortab goes by names such as Tab, hydro, and Norco on the street, as well as being called Vikes or Viko.

Medical experts say that Vicodin can hook a user in as few as seven days.

But it's not just hydrocodone abuse that's skyrocketing in America. In fact, hydrocodone abuse is second only to abuse of a related narcotic, oxycodone, used in drugs such as OxyContin and Percocet. Street names for OxyContin include Oxy, hillbilly heroin, poor man's heroin, pills, kicker, cotton, OCs, Ox, Os, Oxy, blue, 40, 40-bar, and 80. On the street, Percocet is also called Percs, Paulas, Roxicotten, Roxi's, Blue dynamite (the 15-30 Percocet with no Tylenol), Cets and 512s (refers to the generic brand that prints "512" on the round white 5 mg Percocet pill).

Prolonged use of oxycodone will lead to tolerance and the need for higher doses to achieve the desired effect. The drug eventually changes the user's brain in such a way that he or she cannot quit on their own. Both are symptoms of dependence.

DEA seizures of hydrocodone pills in 2010 totaled 44,815. That's up considerably from the 13,659 seizures in 2001. The DEA says that the increase in hydrocodone and oxycodone overdose, fatalities and crime-related incidents are part of a growing wave of prescription drug abuse nationwide.

Fentanyl Patch Abuse

Just when you thought you'd heard everything about prescription drug abuse comes another twist. This time, it is teens misusing Fentanyl patches. Authorities say that chewing, swallowing, smoking or injecting the drug contained in the patches – which are supposed to help relieve pain in patients with diseases like cancer – is 100 times more potent than heroin.

Where are teens getting the Fentanyl patches? Law enforcement officers say that they're engaging in dumpster diving to obtain the quantities they need to support a growing dependence on the drug. If they don't use the patches themselves, they often sell them to others.

It all comes about as teens, who may have become addicted to the drug, look for ways to achieve an intense high and new ways to manipulate Fentanyl patches. Some users apply several patches at a time, hoping to jack up the high. Others tear apart the patches to get at the drug faster. This multiplier effect is extremely dangerous, since the patches are time-released and using many at once or getting the drug directly into the bloodstream magnifies the effect.

The only way to stay a step ahead of the rapidly-changing prescription drug abuse problem among young people is through awareness and preventive efforts, say authorities. Be on the lookout for and know what you're looking at if you see harmless looking patches or transparent squares that say "Duragesic 100 mcg/h (Fentanyl Transdermal System)." Street names for Fentanyl include Apache, China Girl, TNT, China White, murder 8, Tango and Cash, dance fever, jack-pot, goodfella and China town.

Is an Intervention Appropriate?

Considering all the above, if you're concerned about your teen and his or her involvement with various kinds of drugs, new or old, and with any kind of street name, maybe the time is right for an intervention.

But unlike the interventions you see on television, the kind of intervention we're talking about here doesn't have to be anything formal. Experts say that a simple but direct discussion will do. Here are some pointers you can use to get the conversation with your teen going in the right direction – and keep it going.

- First of all, pick the appropriate time. This needs to be when your teen isn't high and also when you are calm and rational. If you try to talk sensibly with your teen when he or she is strung out, hung over or otherwise incoherent, the message simply won't get through. By the same token, if you're really heated or upset, how calmly do you think you'll be able to carry on a rational conversation? It's best to wait until things smooth over, your teen is clear-headed and you're emotionally level-headed.
- Start off by reassuring your child that you love him/her and that your concern for their safety and well-being is first and foremost. This may feel a little awkward for some parents unused to such kinds of communication, but go with it anyway. It does get easier with practice. Telling your kids you love them is always good parenting.
- It's important to remain neutral. Also keep in mind that to be effective at this, you need to stay nonjudgmental.
- Talk about the behavioral signs and changes that you've observed in your child, things that have caused you to be concerned. Don't be accusatory, at least not directly. But it is important that you are open about what you suspect.

- Now, it's time to listen – and listen carefully and without interruption. Listen to what your teen has to say. Of course, your teen may bring up a related item, but now's not the time to deal with that. Let your teen know that you'll tackle that problem next, but what you need to talk about right now is prescription or over-the-counter drug abuse, or alcohol abuse, or whatever kind of substance abuse you're concerned about.
- If you feel that you need help in order to get this discussion off the ground, definitely involve another family member. You might also consider having your teen's guidance counselor or physician with you. For more suggestions on raising the topic of drug abuse with your teen, check out the link below for the Partnership for a Drug-Free America.
- Other steps you can take include talking with your teen's friends and also talk with other parents. Sometimes you'll find that others will share information that your own teen will not.
- Know the terms. If you hear your kids talking about "pharming," "pilz" or "trail mix," you need to be educated about what the words refer to. Pharming is abusing prescription drugs stolen from the medicine cabinets in your home and the homes of your children's friends. Pilz are any prescription medications used as recreational drugs. Trail mix can be any combination of prescription medications, sometimes offered at "pharm parties" in a grab bag or a punchbowl.
- Become as educated as you can about the common signs and symptoms of drug abuse from resources such as the [National Institute on Drug Abuse \(NIDA\)](#).

Above all, don't give up. You can make a profound difference in the lives of your children by being there for them, keeping the lines of communication open, loving them and getting them any help that they need.

Where to Find Help

You can't be expected to know everything, especially when it comes to your teen using and possibly abusing drugs of any kind, prescription or illicit street drugs. There is help available, so make use of it. Besides the NIDA mentioned above, here are some additional resources that can help you get the right type of assistance or point you in the right direction.

[The Partnership for a Drug-Free America](#) – Offers comprehensive information, resources and tips from experts and other parents and provides opportunities for parents to connect and share experiences with other families.

[Substance Abuse and Mental Health Services Administration \(SAMHSA\)](#) – Part of the United States Department of Health and Human Services (HHS), provides statistics, information and articles on improving the quality and availability of alcohol and drug addiction treatment.

[SAMHSA's National Clearinghouse for Alcohol and Drug Information \(NCADI\)](#) or call 1-877-SAMHSA7 - Part of the U.S. Department of Health and Human Services (HHS) and SAMHSA, NCADI is a resource for federal government agency publications dealing with drug and alcohol use prevention and addiction treatment.

[SAMHSA's Center on Substance Abuse Treatment \(CSAT\), Treatment Facility Locator](#) or call 1-800-662-HELP – Part of the U.S. Department of Health and Human Services (HHS), CSAT operates a toll-free treatment referral hotline that provides callers with information and listings of treatment and recovery services for alcohol and drug programs. of alcohol and drug addiction treatment.

[SAMHSA's National Clearinghouse for Alcohol and Drug Information \(NCADI\)](#) or call 1-877-SAMHSA7 - Part of the U.S. Department of Health and Human Services (HHS) and SAMHSA, NCADI is a resource for federal government agency publications dealing with drug and alcohol use prevention and addiction treatment.

[SAMHSA's Center on Substance Abuse Treatment \(CSAT\), Treatment Facility Locator](#) or call 1-800-662-HELP – Part of the U.S. Department of Health and Human Services (HHS), CSAT operates a toll-free treatment referral hotline that provides callers with information and listings of treatment and recovery services for alcohol and drug programs.

Dangerous New Painkiller (continued from page 1)

painkiller may not know just how powerful and toxic the drug is. This is often the case with many prescription drugs. All they see is a tiny pill and assume that it can't be that big of a deal. They think they can handle it, but this new painkiller can be deadly. Montreal Police released the above image of the seized drugs. It shows typical copycat "branding" imprints, some with the Facebook logo in an obvious effort to market the drug to a younger audience. Spread the word, talk to teens, help raise awareness



NAMI on Campus

Hannah Moyles will be entering Duke University as a freshman in the fall of 2013 to pursue psychology and public policy. She is the founder of From Ewe to You, a charity created to aid the disadvantaged in her community and across the nation. Hannah's greatest passion lies in educating others, especially her peers, about the importance of community ser-



**Introducing Hannah Moyles:
Creating NAMI on Campus at Duke
University**

vice. She is also an advocate for those with mental illnesses and hopes to remove the stigma surrounding such disorders by creating a chapter of the National Alliance on Mental Illness at Duke.

Jail Diversion is Back



**Introducing Capt. Bazemore :
In charge of the Jail
Diversion Unit**

Elijah Bazemore is a 25-year veteran of the Durham County Sheriff's Office. April 11, 1988 Elijah Bazemore joined the Durham County Sheriff's Office Detention Services Division.

As the number of mental health cases continues to increase he has been innovative in trying to find ways to help this population remain some type of normalcy while detained in the facility and reduce the length of their stay.

Captain E. Bazemore volunteered to assist with a BJA grant to assist with the reduction of the Mental Health Population in the Durham County Detention Facility. The Jail Mental Health Diversion Grant was to last for two years. He currently fa-

cilitates monthly Jail Mental Health Diversion meetings. The project is currently in its fourth year. Captain Bazemore has been instrumental in assisting with bringing resources to the monthly meetings to assist with the reduction of this population in the facility. The committee has been instrumental in helping the mental health population with a plethora of resources upon release.

In October of 2010, National Institute of Corrections selected Durham County to come to Colorado to learn how to implement CIT in a Detention Facility setting. He has been passionate about CIT and has collaborated with NAMI Durham, Durham Police Depart-

ment, The Durham Center, and Duke for the Detention Facility to participate in three CIT training this year.

Upon return from Colorado he was selected by NAMI to present at the North Carolina Conference. He presented at the conference for the past two years. We are proud of his dedication and compassion to assist the Mental Health Population and with the successful implementation of CIT in the Durham County Detention Facility.

He was recognized for his effort and was nominated as CIT Officer of the Year 2011 for the Durham County Sheriff's Office Detention Services Division.