Older Adults and Prescription Medication Abuse and Addiction

Addiction among adults over age 60 is estimated to be as high as 17%*, with dependence on prescription medications such as opioids (painkillers) and benzodiazepines (sedatives) fast becoming a national epidemic.

While older adults are at great risk for developing addiction to mood-altering prescription medications, diagnosis can be hampered by difficulties in distinguishing between signs of aging and those of drug dependence. A summary of key considerations is provided below, along with a checklist of possible symptoms and warning signs.

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Older adults are at greater risk for developing addiction to prescription medications.

Older adults take more prescription medication than younger generations. An estimated 83% of adults over age 65 use an average of 15 different prescription medications for acute and chronic conditions. Many older adults:

- Suffer from multiple health conditions
- See several different care providers who prescribe an assortment of medication
- Receive extended treatment for chronic conditions such as diabetes, heart disease, or arthritis

While the focus of this handout is on prescription drug abuse, it should be noted that older adults are also at greater risk for alcohol abuse due to changes in the metabolism.

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Often it is more difficult to detect addiction among older adults.

Many older adults do not have a job or other daily routine that provides an objective measure of behavioral change. The stigma of addiction weighs heavily for this generation as well, with shame and denial keeping the problem under wraps. Family members may not be around to notice and intervene. Medical conditions along with natural consequences of aging can mask substance abuse. Is the older neighbor falling down frequently because her eyesight is failing, or is it because she is mixing pain medications with alcohol? Is her confusion related to dementia or misuse of painkillers? As the extensive checklist illustrates, it can be difficult to distinguish between aging-related medical concerns and addiction complications.

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Behaviors that may indicate drug dependency in older adults

- Decrease in activities of daily living
- Unexplained burns, bruises, or falls
- Decreased mobility
- Hygiene concerns
- Malnutrition or weight loss
- Blurred vision
- Slurred speech
- Increase in risky sexual behavior
- Increase in sleep
- Loss of function
- Memory loss
- Sleep complaints
- Multiple doctors or pharmacies
- Mixing up appointments
- Chronic health complaints
- Isolation
- Secretiveness; hiding supply
- Change in friends or loss of friends
- Driving drunk
- Missing or cancelling events
- Multiple social hours throughout the day
- Doctor shopping for prescriptions
- Nesting (sitting in “their chair” all day)
Some older adults become “accidental addicts.”

“Accidental addict” refers to an older adult who, innocently and unintentionally, develops problems with prescription drugs. Older adults who seek medical care for physiological concerns that come with normal aging all too often receive prescription painkillers (opioids) or sleeping pills (benzodiazepines), both of which are highly addictive. Then, situations can occur that increase the risk of addiction. They could mix prescription medications with alcohol or forget how many pills they’ve taken. Or they may have been prescribed the wrong dosage. Some older adults lack adequate oversight or monitoring of the medications they are taking. Plus, the effects of medications can be compounded with age, as the body metabolizes substances differently.

Addiction treatment can be highly effective for older adults.

Most older adults do better in treatment than younger people—once they finally get there—because they are willing to listen and follow directions. Many times they have had successful lives up until the time they become “accidental addicts,” and they are able to build on this success.

When researching treatment providers, ask about programming designed specifically for older adults. Treatment is a slower process for older adults, and different issues are at play. For example, an older patient might be the caregiver at home. He or she may need a longer lunch or dinner break in order to care for a spouse at home and may not be able to stay in a residential program. Other older patients may need time set aside during the day to rest and take care of themselves. An effective posttreatment plan is also important, with strong case management and community-linked services. Key decisions should be made before treatment ends, such as involvement of the patient’s health care provider, identification of support people, and transportation arrangements for support groups and other recovery activities.

We look forward to discussing the special treatment needs of older adults. We offer a variety of treatment services, including residential and a new afternoon intensive outpatient treatment program featuring a specialized track for older adults.

* According to the National Clearinghouse for Alcohol and Drug Information

Hazelden in Naples
A Path to Recovery Unique to You

We invite you to contact us.