How the Employee Becomes an Addict

Injured employees do not set out to become drug addicts. Drug addiction happens most often due to a legitimate need for a pain reliever being replaced by an injured employee’s uncontrollable desire to obtain the narcotic(s).

The familiar scenario is the employee injures his/her back, neck or other body part and the treating physician prescribes a narcotic painkiller, like Lortab or Vicodin, to relieve the pain while the body part heals. If the injured employee has had no previous experience dealing with narcotics, the road to addiction can be straight and fast.

**The Road To Addiction Can Be Straight & Fast**

Initially, the pain was fairly severe and the narcotic worked great in relieving the pain. The employee notices that not only does the narcotic make the pain go away; it also creates a feeling of euphoria. The employee is no longer stressed over the job injury, his/her money situation, his/her personal life or any other problem.

The employee also begins to realize the narcotic effect does not last as long as it did when he first started taking the narcotic. The pain returns sooner and sooner. Instead of taking the narcotic every 12 hours, twice a day, to get pain relief, the employee starts taking three doses, one every 8 hours to get pain relief and to enjoy the euphoria of having no worries. When the employee, and not the doctor, makes the decision to increase the frequency of the narcotic administration; the physical and psychological compulsion to take the narcotic has become an addiction.

Because the employee increases the frequency of consumption of the narcotic, the prescription supply is exhausted early. The wise doctor will recognize the narcotic addiction issue and try to address the problem with the injured employee. Other doctors become enablers by either increasing the strength of individual pills or by changing the recommended consumption on the prescription written to match the employee’s consumption of the narcotic. Neither approach of the enabler works for long as the employee continuously has to increase either the frequency of consumption or increase the potency of the narcotic.

**“The Doctor is Doing Nothing To Make Me Better”**

When the wise doctor refuses to assist the injured employee with continuing the narcotics addiction, it is not long until either the adjuster or the employer or both receive a phone call from the injured employee. The employee will claim “the doctor is doing nothing to make me better” with the intent of finding another doctor that will prescribe the narcotic the employee is craving. This practice is known in the work comp world as “doctor shopping”.

A smart adjuster or employer will recognize the request to change the doctor is just a ploy to obtain more of the employee’s favorite narcotic. The request to change doctors should be refused in those states where the employer selects the medical provider(s).

Regardless of whether the employee or employer controls the selection of the medical provider, the focus of the medical treatment should have two prongs. First, the underlying cause of the pain should be addressed with treatment that corrects the medical problem causing the pain. Second, the employee should be provided with medical treatment to end the narcotic addiction.

If the cause of the pain and the narcotic addiction are not treated, it is only a matter of time until the injured employee starts treating with other doctors across town or in a nearby city, to obtain more of the narcotic(s). An employee treating with several doctors, without any of the doctors knowing about the medical visits to other doctors, is a frequent ploy of the narcotic addict. While the workers’ compensation insurer is not getting the medical bills for these behind the scenes medical visits, the work comp insurer will get stuck with the necessary detoxification treatment of the addict or with many years of paying for part of the employee’s narcotics.

**Immediate Medical Intervention Can Prevent Addiction**

Adjusters and/or employers who note the employee’s narcotic pain medicine dosage has been increased either in frequency of administering or in the strength of the dosage should seek to have immediate medical intervention to prevent the employee from becoming a hard-core narcotics addict. A nurse case manager who specializes in narcotic addiction prevention should be brought in to work with the employee’s doctor.

If you have a claim where your fear the employee is about to become a narcotics addict or you have claim(s) where the employee is already addicted to narcotics, please contact us for a referral to a nurse case manager who can assist you and the employee.