



Overdose prevention task force warns FGCU students of taking, mixing drugs

By JESSICA LIPSCOMB

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The room was silent when Sgt. Mark Dabney unfolded a crinkly sheet of plastic in front of about 30 students at Florida Gulf Coast University.

When a person overdoses, he explained, the medical examiner places the body inside and zips the bag closed.

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"And that generally is the last sound that a parent or family member ever hears," said Dabney, a sergeant with the Palm Beach County Sheriff's Office and state licensed funeral director and embalmer. "And ladies and gentlemen, they'll hear that sound for the rest of their lives. Sometimes in their sleep."

There was no clapping or laughter in the auditorium for the two-hour-long presentation last week, aptly titled "Sometimes, You Never Sleep It Off." The tone was somber, and understandably so — 99 people died of accidental pill overdoses last year in the four-county region that includes Collier, Lee, Hendry and Glades, an increase of about 15 percent from 2010.

Those are only deaths that were directly caused by prescription drugs, said Gary Martin, the vice president of the Narcotics Overdose Prevention and Education (NOPE) task force. That means they don't include fatalities like the September death of FGCU student Sean Cavanaugh, an 18-year-old who died after attacking his roommate and jumping off a third-story balcony in a drug-induced rage, according to friends.

The presentation, hosted by the NOPE task force, was meant to help prevent those deaths on college campuses. Perhaps most notably, the presenters spoke of a Florida law that went into effect Oct. 1 that allows people to call 911 and get medical assistance for their friends without fear of being arrested.

When detectives ask the friends of a recently overdosed person why they didn't call for help, the "cliché answer we get" is that they didn't want to get in trouble, said Martin, who also is a psychotherapist, Palm Beach County homicide investigator and associate dean for student wellness at Lynn University.

The so-called 911 Good Samaritan Law specifically addresses that, he said.

"That's how severe this issue is," Martin said. "We want you to pick up the phone."

Flashing pie charts across a projection screen, Martin showed students that in nearly all cases of overdose fatalities, a person consumed at least two different substances. Popular mixes included alcohol and illicit drugs, alcohol and prescription drugs, and prescription drugs and illicit drugs.

"Rarely does anyone die because they took a massive amount of any one of these drugs. The reason people died, the reason they end up on these posters," he said, motioning to faces of young dead people mounted behind him, "is because they naively mix or combine some of these drugs ... even in small quantities."

"They have the perception that they know how much they can take," he continued. But "your lethal threshold changes and evolves."

A person who is passed out to the point where he or she can't be wakened is a medical emergency, Martin said.

Dabney, the sergeant and funeral director, said there typically is a window of a few hours in which a person with a toxic amount of drugs in their system can still be helped.

"Life is about choices. You know that," he said. "But I want you to know something about the choices that you make. The choices you make do not always affect just you. The choices you make affect the people you love, and the choices you make affect the people that love you."

Joel Breneman, an FGCU student who overcame substance abuse and now is sober, said his addiction led him to prison, then the St. Matthew's House at 28. That was the breaking point.

"I did not think I was going to be partying until I was homeless," he said.

People with addiction problems should be approached with tact and concern, Breneman said.

"In their mind, they're fine," he said. "The worst you can do is ignore it."