

MARIJUANA, TOBACCO AND OPIOIDS

By: Dr. Victor M. Sternberg

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As you know, I have discussed smoking before within my practice. The patients who had the greatest difficulty retaining their teeth, or even their implants, have been people who are smokers. Smoking has an adverse effect upon the cells in your mouth. My own experience has been that patients who smoked make it a struggle to maintain their teeth or implants for a long period of time.

In addition, sadly, among the many patients that I have lost over my years of practice, the smokers who developed emphysema or lung cancer were the majority of patients who have passed on.

I spend a lot of time discussing this on my radio show, the legalization of marijuana. Interestingly enough, a sidebar to marijuana, which is another can of worms, is the issue of vaping, which is an epidemic in high schools around America. One of my patients, who also happens to be a hypnotist, is treating young teenagers who are addicted to vaping. He is finding this is a much more difficult habit to break through his hypnotic efforts than smoking.

Although vaping has been seen, via electronic cigarettes, to be a way to ameliorate or eliminate smoking, being something that is less harmful, the final verdict remains out. Just as we didn't understand the horrific effects of tobacco in this country for decades, until finally definitive research tied 400,000 deaths a year directly to smoking. Only then did we begin to deal with this scourge.

I, as a man who lost his father to lung cancer, would have no difficulty with the prevention of sales of tobacco in this country. I understand that the cow is out of the barn, but given the fact that smoking costs our health system \$200 billion a year, resulting in the deaths of 400,000 people a year, the restriction or elimination of smoking would be the single best public health measure we could employ.

Recently, in a conversation with a friend who is in the tobacco business, I learned that a carton of cigarettes costs nearly \$100. I asked him how the tobacco companies can justify such a high price for cigarettes. He confided in me that Philip Morris only gets \$20 per carton, with the remainder of the money going in taxes to the state and federal governments. Essentially, our governments, local and federal, are in the tobacco business, and would be loathe to lose the income they obtain from tobacco. If smoking was introduced today, knowing the health hazards, it would be banned by the FDA and classified as a drug.

Now we are facing the issue of marijuana. I understand all the issues regarding the criminal prosecution of so many people who are in jail for smoking or selling small amounts of marijuana. This is one of the reasons our prisons have become overflowing. I understand that marijuana is not, in itself, as dangerous as hard drugs, and I understand that many people can smoke it for years and years with no untoward effects.

However, when one looks at the number of alcohol related deaths we have on the highways, or due to violence and/or cirrhosis of the liver, and the number of individuals who die every year, upwards of 70,000, from opioids, it is impossible not to question whether we are just opening another Pandora's Box by legalizing marijuana.

When talking to patients who have lost children, or have children in rehab, they have all told me that their children began with marijuana.

Recently, a patient who is a practicing psychologist in Westchester, shared with me that he has had a number of young people who have come to him who have had psychotic episodes after using marijuana. The children had to eventually be sent to Columbia Presbyterian Psychiatric Institute to be treated with medications that would reverse the psychosis. At Columbia he discovered that there is an increasing number of young people being referred there for psychotic episodes following the use of marijuana. This is all part of the Pandora's Box we are about to open.

The rush for revenue by the states, and to decriminalize something which has resulted in mass incarcerations is understandable. However this writer is more concerned long term after very clearly seeing the effects of alcohol, tobacco and narcotics in our country.

We are facing an existential crisis in our country in terms of health care costs. You are well aware of the debates raging across the country and in legislatures, both locally and nationally. In this article I am not going to discuss that; it is a subject for another conversation. However, given the millions of individuals with addictive propensities, we should pause before we introduce another avenue of physical and emotional harm.

Below is a letter that I wrote to the New York State Dental Society. Recently, they published an article regarding their desire to educate the dental profession about the harms of prescribing opioids. I have been on this bandwagon for over a decade. It is a very sad reflection on our health system, both medically and dentally, that this issue has not been dealt with more aggressively in the past. Please read the article I wrote. It will be soon published in the New York State Dental Journal.

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I read with interest the article "Preparing New Dental Professional to combat Opiate Epidemic" in the November 2018 issue of the NYS Dental Journal.

As a practicing periodontist with over forty years of clinical experience, the opinions expressed here are based upon my own patient population, as well as clinical research examining the efficacy of non-opioid pain medication as an alternative to narcotics.

First the literature. There are a significant number of evidence based studies comparing the use of opioids for surgical dental pain to nonsteroidal combinations. The research strongly supports the efficacy of nonsteroidal medications providing equal or greater pain relief with a vastly significantly lower incidence of negative side effects. This literature has been available for many years and has been essentially ignored by much of the dental profession, both at an association level as well as on an individual level. In addition, there is a great body of research indicating that introduction to opioids leading to addiction began first among young people when they experienced opioids being prescribed after third molar extractions. Our profession must bear a significant share of the responsibility for the over prescription of opioids and the resulting addiction and tragic deaths.

On a daily basis over the decades, I have performed surgical extractions, sinus augmentations, dental implants and various types of periodontal surgeries without the use of an opioid. After reading the research and hearing lectures on the benefits of nonsteroidals, I stopped prescribing opioids in 2005. I have had little or no patient feedback indicating that the nonsteroidals, which are often combined with acetaminophen, had failed to provide them adequate pain relief. One particular patient

who said that nonsteroidals don't work for her, resulted in me prescribing Meloxicam, telling her that this is a powerful medication that she had never taken. Lo and behold, she reported back that it provided her with more than adequate pain relief.

Medicine and dentistry must move to an evidence based treatment. Colleagues in medicine and dentistry have often been influenced to prescribe opioids in order to satisfy a patient's desire, requiring the practitioner to prescribe them with opioids when it was not necessary. Additionally, as one physician told me, "for public relations. They come to me in pain and they want a prescription that will relieve it. If I tell them to take three Advil and two Tylenol they will think the visit was of no value. It would hurt my practice's reputation."

I have experienced, sadly, the death of five of my patients children due to opioid overdoses, and have literally dozens of patients whose children are currently fighting addiction.

I would strongly urge all dentists to read the book, Dreamland: The True Tale of America's Opiate Epidemic by Sam Quinones; it is a real eye-opener.

I would strongly urge all of my colleagues to think not twice, but multiple times, before prescribing a narcotic, and be aware that it is not the best medication for treating dental pain.

Yours truly,

Victor M. Sternberg, D.M.D.

As always, your feedback is appreciated. I asked a very learned person who he thinks is the smartest individual in a community. He told me that the person who learns from everyone else is the smartest among us. He also added that every human being knows something that you don't know. That being said, I await your responses.

Yours truly,

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