

Media Disinformation and the US Heroin Epidemic

The New York Times Gets it All Wrong

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Global Research, January 29, 2016

Theme: <u>History</u>, <u>Media Disinformation</u>

Anthrax Vaccine 24 January 2016

On October 30, 2015 the NY Times published an in-depth <u>article</u> on the heroin epidemic, focused on New Hampshire, which saw the <u>greatest increase in deaths from drug overdoses</u> (74%) in the US between 2013 and 2014. New Hampshire is a bucolic place, where villages of tidy white capes and saltboxes lie sprinkled among the mountains and pine forests.

Manchester, New Hampshire's largest city, has a population of 110,000. In one 6 hour period on September 24, Manchester police responded to <u>6 separate heroin overdoses</u>. Manchester saw over 500 overdoses and over 60 deaths between January 1 and September 24, 2015.

At presidential campaign stops throughout the state, candidates were forced to respond to the problem when New Hampshire citizens demanded answers. Hillary has a \$10 billion dollar plan for prevention and treatment of abuse. Chris Christie prefers treatment to jail time for first offenders. Obama announced a \$5 million initiative in August to combat heroin addiction and trafficking. NH has designated a drug czar. NH Senator Ayotte says "We've got to reduce the stigma." Narcan, an opiate antidote that has been made widely available, is admittedly a band-aid. It saves lives from acute overdoses, but does absolutely nothing to stem the tide of abuse.

The solutions being touted by politicians and the media include "working together:" police, citizens, and health-care facilities-though to what end is unclear; educating; reducing the stigma of heroin use (now that users are predominantly white and middle class we can relabel addiction a disease, not a crime); adding treatment facilities; and adding more police.

I call this salutary-but almost entirely missing the mark.

Overdose deaths and heroin users are at an all time high in the United States. Between 2 and 9 of every thousand Americans (<u>0.2-0.9% of the population</u>) is currently using heroin. In Maine, 8% of babies are born "drug-affected"-a stratospheric rise <u>from 178 babies in 2006 to 995 babies in fiscal 2015.</u>

Despite what you have heard, the cause of our current heroin epidemic is not as simple as doctors overprescribing narcotics.

While nationally, <u>heroin overdoses jumped from 1.0 per 100,000 in 2010 to 3.4 per 100,000 in 2014</u>, the <u>number of prescribed narcotics held steady</u> over the same period. A <u>2015 UN document</u> noted that "A recent [US government] household survey in the United States indicated that there was a significant decline in the misuse of prescription opioids from 2012

to 2013" (page 46).

According to CDC itself, "CDC has programmatically characterized all opioid pain reliever deaths (natural and semisynthetic opioids, methadone, and other synthetic opioids) as 'prescription' opioid overdoses." That means illegally produced drugs in these categories are being designated as prescription drugs, when they are not. A further confounder is that heroin metabolizes to morphine, which is a prescription drug. So if fully metabolized at the time of autopsy, a death due to heroin will be labeled as due to a prescription narcotic.

The true cause of the current heroin epidemic is <u>massive amounts of heroin flooding into the US</u>, exceeding what can be sold in our large cities, and now finding its way into even the tiniest hamlets.

Here's the problem with the NY Times' and the politicians' solutions: neither fifty individual states nor thousands of towns and villages can treat, educate, exhort, investigate or imprison their way out of the heroin maelstrom. There are nowhere near enough police, social workers, prisons, treatment facilities or sources of funding. *Narcan* and clean needles don't cut the mustard. There is only one possible solution, and that is stemming the supply.

In my <u>September 7 blog post</u>, I showed that 96% of US heroin does not come from Mexico and Colombia, as claimed by US government sources. Mexican and Colombian production is inadequate to supply even half the US market.

At least Canada knows where its heroin comes from:

<u>"According to the Royal Canadian Mounted Police National Intelligence Coordination Center, between 2009 and 2012 at least 90 per cent of the heroin seized in Canada originated in Afghanistan."</u> (page 46)

If one wants to get into the weeds on this issue, a 2014 <u>RAND report</u> titled <u>What America's Users Spend on Illegal Drugs: 2000-2010</u> is a good place to start. The report, performed under contract for DHHS and released by the White House, looks at multiple databases and identifies many problematic issues with estimates of heroin country-of-origin.

It shows that while Colombian opium was allegedly supplying 50% of a growing US heroin market between 2001 and 2010 (pages 82-83), Colombian production actually sank from 11 metric tons in 2001 to only 2 in 2009.

Furthermore, US government estimates for the 2000-2010 decade of Mexican production relied on a claimed 3 growing seasons per year, while in reality there were only two. RAND admits Mexican production estimates were inflated. Mexico historically produced lower quality, "black tar" heroin, used west of the Mississippi, while the influx of heroin to the US has been of higher quality white powder, and the greatest increases in use have been in the eastern US, far from the Mexican border.

Meanwhile, according to **RAND**:

"in recent years, there have been no [heroin] seizures or purchases from Southeast Asia [Myanmar, Laos, Thailand] by DEA's Domestic Monitoring Program."

Back in 1992, DEA estimated that 32% of US heroin came from Southwest Asia (mainly Afghanistan). Since then, <u>Afghan opium production has tripled</u>. But in the years 1994 through 2010 only 1-6% of US heroin had a southwest Asian origin, according to DEA's Domestic Monitoring Program. Yet <u>Afghan production accounts for 90% of the world heroin supply.</u>

It would be great if we could point to improved US interdiction at the source, or to poppy field eradication to explain this anomaly. But neither is the case. Seizures of heroin in Afghanistan dropped from 27 metric tons in 2010 to 8 metric tons in 2013, according to the UN, figure 41. Only 1.2% of poppy fields were eradicated in 2014, also according to the UN.

It is undeniable: there has been profound, systematic deception regarding the amount of heroin reaching the US from Mexico and Colombia by the US government, presumably to conceal and protect the actual source(s) of most US heroin.

We know where and how to look for heroin: Afghanistan and Myanmar are the world's #1 and #2 producers. Historically, heroin bound for the US leaves these countries by air. There are a manageable number of flights departing Afghanistan and Myanmar. We could put all the needed personnel in place, today, to fully inspect every flight and every airport.

The fact that we have looked the other way and pointed in the wrong direction is itself the smoking gun.

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