

Process of recovery

Treatments work to change addiction focus

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Bottom. Rock bottom.

People suffering from addiction say that bottom doesn't come just once. Neither does recovery.

And in many cases, with the staggering nationwide heroin epidemic, the eventual alternative to winning that battle is death.

Article Photos



Danielle Burk, 29, a success story of the First Step Recov...

Trumbull County Coroner Dr. Humphrey Germaniuk said there have been 35 confirmed drug-induced accidental deaths in the county so far this year - 34 involved heroin. Sixteen other cases are pending, all suspected drug overdoses awaiting results of toxicology tests.

The county is on track to surpass the 54 accidental overdose deaths in 2014, 43 of which involved heroin.

If the pending cases are confirmed, the county already is well past 43 heroin-related deaths halfway through the eighth month of the year.

Recovery: The individual

Warren native Danielle Burk, 29, was the third person to enter treatment at First Step Recovery, which opened May 5 as the first detoxification facility in Warren.

She said she started abusing substances at 14, avoiding problematic issues in her home life.

"I didn't really even enjoy the feeling at first," Burk said. "But I couldn't figure out any other way to find happiness in myself. It took me out of myself. I would do anything for a buzz-drink, huff gas, drugs I got outside of myself."

Burk said she was involved in volleyball and cheerleading; she went to church. She could hide it, but when her family caught on, they instituted consequences. They tried to get her on track and put her in programs designed to help.

"At the time, I wasn't honest. It didn't work because I wasn't honest with my counselors, my family, my friends," Burk said.

"I felt like. I felt like I deserved a break, like I had done enough good for the day, and I deserved something for myself," Burk said.

Burk dropped out of school. She said she remembers wanting to travel the world searching for the meaning of life as a "happy hippy."

She said that now that she is recovery and setting attainable, short-term goals, she intends to get her GED.

The first substance that took over her life was alcohol.

"I started waking up with the shakes, feeling like my skin was crawling," Burk said. "And I was unwilling to see what a jerk I was being. I would hurt someone to avoid being honest with myself, to avoid my feelings."

"I was getting scared then, but I didn't know what to do. I had to drink to alleviate the symptoms," she said.

At this point, Burk said, it was easy to accept a heroin-addicted boyfriend. It made her own addiction seem acceptable. When he died of an overdose, Burk said she fell into a sense of guilt and depression. She said she thought she hit bottom when she jumped into a new relationship, gravitating toward another heroin user, using it as an excuse to drink.

Ironically, Burk said, she felt a sense of pride when she quit alcohol for heroin. The opioid made her nauseous if she drank, and, "At 25, I thought I could handle it."

"I had been a functioning alcoholic. I had managed to work three jobs to support myself, but heroin took that away. I did things I never thought I would do, I lost my self-respect."

She said she lived that way until a friend referred her to First Step Recovery. She said she had tried rehab twice previously.

"Something clicked this time," Burk said. "I found honesty was the biggest thing."

Her family, people she had alienated with her behavior, have started accepting her back into their lives. She said she is honest now. She said she cannot tell even the smallest lie without slipping. She said she stopped seeing the heroin-addicted boyfriend before entering detox.

One of the scariest parts of recovery is accepting the brief but very real pain of detoxing, she said.

But "if you really want recovery, you will find it," Burk said.

Recovery: Medicine on a human level

"What I do with the patients is I try to get into their world and try to understand them as a person," First Step Recovery addictionologist Dr. Joseph Lydon said.

"I don't walk in thinking, 'OK, here is a 26-year-old male dealing with heroin for the last six years.' I want to get a broad picture of the person, starting in the early adolescence, determining how a pattern of addiction formed."

Many addictions - to any legal or illegal substance - begin with traumatic experiences and toxic family dynamics, Lydon said.

Lydon tells his patients, "You have been taking one of the most effective anti-anxiety pain medications out there to avoid anxiety and pain."

He said his patients have never heard addiction to an opioid explained quite like that.

According to the Centers for Disease Control and Prevention, the majority of newly addicted heroin users first took a prescription opioid as pain relief. The plant-based drug masks pain, but it interferes with resolving an individual's underlying problems, Lydon said.

"I acknowledge the reason behind the drug abuse," he said. "I tell them, 'You are not bad, dumb or immoral for having this addiction.'"

He said his approach is producing results for some of the more than 300 patients he has seen as the medical director at First Step Recovery. He sees an average of three new people a day. So far, 350 people have come through the facility's doors.

Caseworkers examine a client's file carefully and place them in sober housing, or arrange further treatment after the initial detox time and, if necessary, a stay in one of the 32 beds for men and women in the dormitory - a construction project just about to open.

"Other places I've been to were more textbook, more institutionalized," First Step Recovery patient Nick Schroeder said. "Here, I feel like they break things down in addict term."

"I am human, not just another patient, and it is important to them all that it isn't just some of us that make it. They don't treat me like I am not going to make it. I feel like the odds have turned."

The facility is full. It receives referrals on a daily basis, more so recently, as word-of-mouth spreads about their program, said co-founders Tom Dailey and Dave Kapp.

There is a waiting list, but founders say no one has to wait more than seven days for entry into the program. With the expansion of Medicaid, most people can receive treatment without paying a dime, although there are plenty of people entering treatment with private insurance and self-pay, they said.

Dailey said he would like to arrange employment services and partnerships in the community, too. Many people in recovery have records or have been out of work for a while, he said.

The old Aetna Freight building is in the middle of being converted into a building for meeting space, a gym, a lounge and offices. Counselors are already offering group sessions there, he said.

"This was just an idea 11 months ago," Dailey said. "But now we are a respected, established pillar of change."

The facility has forged relationships with regional hospitals, drug courts, parole boards, children services agencies and other behavioral health organizations, Kapp and Dailey said.

Over the last month, Lydon welcomed a residency doctor, Dr. Rudolph Krafft, into the facility under the guidance of the St. Elizabeth Family Medicine Residency program.

"It is important for family physicians to have an understanding of addiction, detox and recovery," Krafft said. "We are bound to encounter patients with substance abuse issues and we need to know why the problem develops, and help them get through it, even if that means just knowing when to provide referrals when we encounter patients with problems beyond our experiences."

Lydon said many people that need addiction services look like any other patient, and through the relationship with the residency program, he said he hopes to teach new doctors the signs of chemical dependency in order to get people help before the problem escalates.

Recovery: Moving forward

Burk said she now has found a living situation that is safe and supportive. She said she finds strength in the recovery process and attends intensive outpatient meetings weekly.

Alcoholics Anonymous and Narcotics Anonymous provide onsite meeting for patients at First Step.

"She is an anchor in our alumni community," Dailey said. "She is one of about 20 people in three months that are active in their sobriety and giving back to people in recovery."

Burk said she thrives on the fact that administrators in the facility see something in her, giving her a chance to give something back and stay on track by speaking weekly to new patients.

"If you are broken, you can find a new way to live," Burk said.

Lydon likes to use an analogy to help patients understand, accept and move past their addiction.

"If you have a stroke and you can't walk on the right leg, it isn't the leg's fault," Lydon said. "That part of the brain will never come back. It is gone. But some, with a lot of physical therapy and work, can learn to recircuit, redraw those nerves and pathways."

Many addicts think they are irreparable, blame themselves and fight themselves in their minds, Lydon said. Many people are able to keep their own addictions under some sense of control.

"A lot of people are gainfully employed and silently struggle with addiction. Others only see the extremes of it as it begins to consume," Lydon said.

But when a person finds the right program for themselves, the tide can change, he said.

"Every time you go to a meeting, therapy, talk to another addict, keep the 12 steps in mind. Every time you do that - you are redrawing those pathways, you are taking back your mind," he said.

"And the alternative - the alternative is death."