

Drug using teens would benefit from involuntary care: Kelowna doctor Involuntary care for teens?

Kathy Michaels - Oct 17, 2024 / 4:00 am | Story: 512167



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As a pediatrician dealing with teens immersed in Kelowna's drug culture, Dr. Tom Warshawski hasn't found much cause for optimism as of late.

"I have had two patients die of overdose deaths in the last two years, I never saw anything like this 20 years ago," said Warshawski, the medical director of Youth Recovery House.

"We have a toxic drug supply and there is no safe drug out there."

Whether it's a stimulant like cocaine, or a depressant like heroin, he said odds are there's fentanyl in it and it's killing people, regardless of their age.

It's been bleak, but when Premier David Eby <u>announced that involuntary care</u> was on the horizon in B.C., Warshawski said he was pleasantly surprised.

"This is something many of us feel is a necessary piece of the puzzle to help youth struggling with serious addictions," Warshawski said.

He's been lobbying the province for the change in policy that mirrors policy in other provinces since 2019 and said it will save lives simply because young people who need the help may simply not be able to see their way to that avenue.

Warshawski said almost all teens with serious substance use disorders have significant mental health challenges, and some have additional developmental disabilities, but impairments can improve with sobriety.

"Most chronic users have had their brain reward systems hijacked by drugs and will continue to use them despite the accompanying risk of death," he said.

"Persons who have had a life-threatening overdose have a five-to-10 per cent chance of dying within one year. Continuing in a dangerous pattern of chronic drug use is irrational and inconsistent with the assumption that the user is in full control of their decision-making process."

He pointed out that asking youth if they want to go into care and abiding by their decision when "they shrug their shoulders and say 'no'" is inconsistent with evidence for proper treatment and unethical.

"We don't let people under 19 buy alcohol, but they can buy fentanyl?" he said.

"Quite clearly we need to do things differently."

Warshawski said he knows some groups have a different take, and that all are "well meaning" in the debate, but there needs to be change and involuntary care has been shown to work, according to case studies in Norway and less formalized research out of Alberta where that's been a possibility for 30 years.

"This overdose epidemic is getting worse in B.C. and it's worse than it is in Alberta," he said. "It's reasonable, if your neighbour is doing better, to see what they're doing."

This election cycle, both the B.C. NDP and Conservative Party of B.C. have committed to expanding the use of forced treatment for people with addictions or severe mental health issues. The B.C. Green Party, however, has echoed the call to expand voluntary care options prior to focusing on forced treatment.

While some are embracing the notion, it is being met with pushback from some residents of B.C. — as well as Canada's federal addictions minister. Some say the focus should simply be on expanding the number of beds available so when someone wants treatment, it's there.