

# Inhalants Top Drug of Abuse for 12-Year-Olds

BY ALICIA AULT

WASHINGTON — New federal data show that 12-year-olds abuse inhalants more than marijuana, cocaine, and hallucinogens combined.

From 2006 to 2008, almost 7% of 12-year-olds said they had used an inhalant to get high, according to the National Survey on Drug Use and Health, a survey sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA).

In comparison, the lifetime use rate is 5% for prescription drugs and 1.4% for marijuana. Alcohol remains the most abused substance overall among 12-year-olds.

Officials from SAMHSA, the National Institute on Drug Abuse, the National Inhalant Prevention Coalition, and the White House Office of National Drug Control Policy gathered in Washington to discuss the inhalant use data, and to urge parents and physicians to educate children and adolescents about the dangers of “huffing.”

Although federal statistics show a decline over the last decade in the num-

bers of people first using inhalants, the numbers are still large: 729,000 Americans tried inhalants in 2008, with 489,000 of them in the 12- to-17-year-old age group.

That’s down from 821,000 total in 1998, and but up slightly from 455,000 in 1998 in the younger age group. Officials also said they are concerned that from 2007 to 2008, fewer eighth graders perceived inhalant use as harmful, according to the Monitoring the Future Survey conducted for NIDA.

Usually, a decline in risk perception is followed by an uptick in usage, officials said at the briefing.

Inhalant use is largely a phenomenon among whites, but large numbers of Hispanic and African Americans also abuse the chemicals.

The mean age for first-time inhalant use is 16—a year younger than for any

other illicit substance, according to SAMHSA.

SAMHSA Administrator Pamela Hyde said inhalant use often precedes a move to other drugs. And, according to Ashley

Upchurch, a 17-year-old recovering inhalant addict who spoke at the briefing, inhalants often are used to enhance the high from other drugs or alcohol.

Inhalants are easy to obtain and can often be abused without detection.

The chemicals can be found in household cleaners, paint thinner, fabric protector, magic markers, glue, hairspray, nail polish remover, and dessert topping sprays, among a multitude of other products.

Teens also inhale freon, butane, and nitrates, which are sold under names such as “Rush” or “Locker Room.”

For Ms. Upchurch, the inhalant of choice was a pressurized can used to

force dust out of computer keyboards and other electronics.

The chemicals can lead to short-term memory loss, emotional instability, problems with gait and speech, and over the long term, more permanent neurologic and cardiac symptoms.

“As risky as inhalants are, many kids don’t see the drugs that way,” said Dr. Timothy Condon, deputy director of NIDA. Dr. Condon said warnings about huffing dangers weren’t “hype.” He added, “inhalants can be deadly.”

Dr. Jennifer N. Caudle, director of the family medicine section at Sinai Hospital, Baltimore, said there was a phenomenon called sudden sniffing death, in which the inhaler dies from cardiac arrest.

Dr. Caudle and her colleagues at the American Osteopathic Association are collaborating with the Inhalant Prevention Coalition to publicize the dangers in inhalants.

They are working together to educate physicians about the signs and symptoms of huffing, and about the need to educate adolescents regarding the dangers. ■

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## Gastric Banding Tops Lifestyle Changes for Obese Adolescents

BY MARY ANN MOON

Gastric banding allowed extremely obese adolescents to achieve a more substantial and durable weight loss than did an intensive lifestyle modification program, in a clinical trial with 50 adolescents.

Dr. Paul E. O’Brien of the Centre for Obesity Research and Education at Monash University, Melbourne, and his associates compared the two approaches in adolescents aged 14-18 years with a body mass index above 35 kg/m<sup>2</sup>. All had related medical complications, including hypertension, metabolic syndrome, asthma, and back pain, as well as physical limitations such as the inability to play sports and problems with activities of daily living.

The patients were randomly assigned to undergo laparoscopic adjustable gastric binding with follow-up education and guidance or to an intensive nonsurgical intervention program. The program focused on reduced energy intake, increased physical activity (with structured exercise for at least 30 minutes per day), and behavior modification. Subjects received 6 weeks of instruction from a personal trainer and met with a physician, a dietitian, or an exercise consultant every 6 weeks (JAMA 2010;303:519-26).

Of the 25 patients in the surgery group, 24 (96%) completed the full 2 years of follow-up, compared with 18 of the 25 patients in the lifestyle group (72%).

In the surgery group, 21 patients (84%) achieved the primary outcome measure of a loss of at least 50% of excess weight, compared with only 3 (12%) of those in the

lifestyle group. At 2 years, the surgery group had lost a mean of 35 kg, or a mean loss of 28% of total body weight. Patients in the lifestyle group lost a mean of 3 kg, or a mean loss of 3% of total body weight, Dr. O’Brien and his colleagues reported.

Metabolic syndrome, present at baseline in 9 surgery patients and 10 lifestyle patients, resolved in all of the surgery patients and in 6 of the lifestyle patients. Similarly, insulin resistance resolved in all patients in the surgery group but persisted in three patients in the lifestyle group.

There were no operative or postoperative complications, and the rates of adverse events were similar between the two groups. Seven patients in the surgery group (28%) required revisional procedures, a finding that the researchers said was not surprising because such revisions are “intrinsic to the gastric banding procedure.”

In an editorial, Dr. Edward H. Livingston, of the University of Texas Southwestern Medical Center, Dallas, said that the 28% rate of revisional procedures is important because the investigators “are among the most experienced group in the world with these operations, suggesting that these complication rates will probably be higher in actual community practice” (JAMA 2010;303:559-60). ■

**Disclosures:** The study was supported in part by Allergan, which provided the gastric bands. Dr. O’Brien reported no potential conflicts of interest; one of his associates is a consultant for Allergan and other pharmaceutical firms. Dr. Livingston reported no potential conflicts of interest.

## Teens Unaware of Tobacco, Head and Neck Cancer Link

BY HEIDI SPLETE

ORLANDO — Only 16% of adolescents are aware that there is a link between tobacco use and head and neck cancers, according to a survey of 51 respondents aged younger than 18 years.

“The two most common risk factors for head and neck cancers are tobacco use and alcohol consumption,” said Dr. Ajani Nugent of Emory University in Atlanta.

But few studies have examined awareness of head and neck cancer risk among children and adolescents, he said.

Dr. Nugent and his colleagues surveyed 139 medically underserved individuals during a community health screening that was offered at a transitional shelter. The participants who were surveyed included 51 adolescents aged younger than 18 years, 15 individuals aged 19-35 years, and 73 individuals aged 36 years and older. The results of the study were presented in a poster presentation at the Triological Society’s Combined Sections Meeting.

Overall, 82% of the adolescent respondents reported that they were aware of the association between tobacco use and lung cancer. However, only 16% of the respondents were aware of a similar association between tobacco use and head and neck cancers, including

cancers of the lips, mouth, salivary glands, and throat.

The survey findings are consistent with those from previous studies showing that a majority of the general public recognizes tobacco as a risk factor for lung cancer, but not for head and neck cancers, Dr. Nugent said at the meeting, which was jointly sponsored by the Triological Society and the American College of Surgeons.

In the current study, 53% of the adults aged 19-35 years and 31% of adults aged 36 years and older were aware that there is an association between tobacco use and head and neck cancers.

The study was limited by its small size and distinct population, but the results underscore the need to educate children and adolescents about the association between tobacco use and head and neck cancers, the researchers said.

“This is particularly important because of the well-known cumulative effects of tobacco on upper aerodigestive malignancies,” Dr. Nugent and his colleagues said. ■

**Disclosures:** Dr. Nugent and his associates reported having no relevant financial conflicts.

To view a video on the subject, go to [www.youtube.com/ElsGlobalMedicalNews](http://www.youtube.com/ElsGlobalMedicalNews). Click on Uploads and search for Nugent.