Neil Armstrong on the day of the moon landing.

First man on moon dies at 82

Ohioan's 'one small step for man' turned a dream into history

By John Faherty
The Cincinnati Enquirer

CINCINNATI — Neil Armstrong, the first man to walk on the moon, died Saturday. He was 82 years old.

Armstrong died after complications from cardiovascular procedures, according to a statement from his family.

Armstrong's life began and ended quietly in Ohio, but in between was a life near-ly beyond measure.

He was a fighter pilot in the Korean War, he tested experimental jet planes for the government, and then he joined the space program.

He piloted the Gemini 11, performed the first successful docking of two vehicles in space.

But he became an icon on July 20, 1969, on his second and last space flight, when he jumped down off a ladder, landed on the moon, and said: "That's one small step for man, one giant leap for mankind."

"That's one small step for man, one giant leap for mankind."

By Laura Ungar
| The Courier-Journal

The Courier-Journal has been investigating the state's prescription drug abuse epidemic for the past two years, publishing stories on the rising toll of drug overdoses, the Florida pain-pill pipeline, rogue pain clinics in Kentucky, and the crisis in neonatal intensive care units. Annalena was born dependent on opiate medications, a problem Kentucky's prescription drug abuse epidemic — babies born addicted because of their mothers' drug abuse.

These infants' first experience is withdrawal, causing them to cry incoherently, breathe rapidly or suffer tremors. And nothing can take away their pain, only ease it.

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T hey are the most vulnerable victims of Kentucky's pain pill epidemic — babies born addicted because of their mothers' drug abuse.

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A dozen years ago, it was rare to see a newborn suffer this way. But the number of drug-dependent infants has skyrocketed with Kentucky's prescription drug abuse epidemic, and today hundreds fill hospital nurseries across the state, leaving doctors and officials scrambling for answers.

ABOUT THE SERIES

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Ungar wrote these stories while participating in The California Endowment Health Journalism Fellowships, a program of the University of Southern California's Annenberg School of Journalism, which is providing partial funding for this project.

INSIDE

A four-page package explores the prob-lem, successes and remaining challenges an Kentucky's trial for state-wide prescription drug abuse, a center helping mothers battling addiction.

ONLINE

To see the continuing coverage of the prescription-drug epidemic in Kentucky, go to www.courier-journal.com/drugabuse.

"It's a silent epidemic that's going on out there. You need to say: 'Stop the madness. This is too much.'"

AUBREY TAYSE HAYNES, secretary of the Kentucky Cabinet for Health and Family Services
More than half the babies in University Hospital’s neonatal intensive care unit one day this month were suffering from drug withdrawal — one sucking licorice-flavored morphine to ease his tremors and near-constant crying, another so sensitive to light and sound that he slept in a dark isolation room.

They are the tiniest victims of Kentucky’s prescription pill epidemic, and their numbers are soaring.

Kentucky has seen its hospitalizations for addicted newborns climb from 29 in 2000 to 730 last year. The state’s 2,400 percent increase dwarfs by comparison a disturbing national rise of 330 percent found in a study that examined hospitalizations from 2000-09.

“It’s a silent epidemic that’s going on out there,” said Audrey Tayse Haynes, secretary of the Kentucky Cabinet for Health and Family Services. “You need to say: ‘Stop the madness. This is too much.’”

By Laura Ungar | lungar@courier-journal.com | The Courier-Journal

See PILLS, Page A10

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They are the tiniest victims of Kentucky’s prescription pill epidemic, and their numbers are soaring. Kentucky has seen its hospitalizations for addicted newborns climb from 29 in 2000 to 730 in 2011, reflecting another dire side of Kentucky’s pain pill epidemic.

Independence House resident Rebecca Brown tickles the foot of 4-month-old Easton Hall, son of resident Valerie Hall. He was born drug-free.

See PILLS, Page A10

ONLINE
See videos and continuing coverage of the prescription drug epidemic in Kentucky at www.courier-journal.com/drugabuse, including:
- An addicted mother gets help from the volunteers of America Grace House.
- An infant development therapist describes the addicted infants at Kosair Children’s Hospital.
- See what’s happening at a center helping moms battling addiction in Corbin.

INSIDE
- Without enough centers, treatment options are limited. Page A12
- Tight budgets put the squeeze on reaching solutions. Page A12
- A full-page graphic takes a closer look. Page A11
The skyrocketing number of newborns being treated for drug addiction at Kentucky hospitals is a sign of the growing national problem. A 2009 study in Kentucky found that newborns were addicted to prescription drugs. A 2011 report in the Journal of the American Medical Association indicated that the number of newborns born addicted to prescription drugs had tripled in a decade. A 2013 report in the Journal of the American Academy of Pediatrics found that the number of newborns born addicted to prescription drugs had more than doubled in the past decade.

HOW TO HELP
The public may donate to prevention programs targeting pregnant women at-risk for addiction. You can request a donation envelope from Independence House, go to www.voaky.org or call 636-4660 to request a donation envelope. Cumberland River Comprehensive Care Center’s Independence House, 2800 West Third Street, Corbin, KY 40701, is a nonprofit organization that helps pregnant and postpartum women. For more information, call 606-568-9634. For information about Kentucky’s treatment options, call the Kentucky Substance Abuse Information Line at (502)582-7190.

DONATIONS
To make a tax-deductible donation to a Kentucky organization that helps pregnant and postpartum women, contact the Kentucky Department of Health and Family Services.

VOLUNTEERING WITH BABIES
To volunteer at a Kentucky newborn nursery, contact your local community hospital.

To volunteer at the University of Kentucky Medical Center in Lexington, contact the University of Kentucky’s Volunteer Services Office.

To volunteer at Baptist Hospital East and University Hospital, contact the Volunteer Services Office.

To volunteer at Kosair Children’s Hospital, contact the Volunteer Services Office.

TO REPORT
If you suspect a baby is being addicted to a prescription drug, contact your local police department or call 911. If you suspect a mother is addicted to a prescription drug, contact your local health department or call 1-800-255-1151.

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PRESCRIPTION FOR TRAGEDY

NEWBORN ADDICTS

Neonatal Abstinence Syndrome

**WHAT IS IT?**
A group of problems that occur in newborns who were exposed to addictive drugs while in another's womb. Neonatal abstinence syndrome can occur from two weeks to six months.

**CAUSES**
A pregnant woman takes addictive drugs or uses one or more drugs such as 30,000, benzodiazepines, amphetamines or others. These pass through the placenta to the baby during pregnancy, and the baby becomes addicted along with the mother. At birth, the baby is still dependent on the drug, but because the therapy is no longer getting the drug, symptoms of withdrawal may occur.

**SYMPTOMS**
Symptoms are dependent upon the type of drug, the mother used, how much she was taking and how her body broke down the drug. They can begin 7 days after birth or take up to 10 days to appear. They may include:
- **Blepharospasm or twitching**
- Convulsions
- Excessive or high pitch crying
- Excessive sucking
- Fever
- Inspiratory reflux
- Increased muscle tone
- Irritability
- Poor feeding

**TREATMENT FOR NEWBORNS**
Depends on the drug involved, whether the therapy is premature and the baby's age.
- Watch for the signs of withdrawal, feeding problems, and weight gain. Babies who are born preterm may need to get fluids through a vein.
- Giving of caffeine in infants by gentile1 rinsing, reducing noise and lights, swaddling in a blanket.
- Some babies have sleep disorders requiring medication, such as narcotics or methadone, to treat withdrawal symptoms. The doctor may prescribe the baby on a small scale like to the same mother used during pregnancy and slowly decrease the dose. This helps wean the baby of the drug and relieves some withdrawal symptoms. Opiates such as morphine or dilaudid may be prescribed.
- Breathing depression may also be helpful. Babies with poor feeding or slow growth may need a high caloric formula that provides greater nutrition, or smaller portions given more often.

**INCIDENCE OF NEONATAL ABSTINENCE SYNDROME**
Per 1,000 U.S. Hospital births

<table>
<thead>
<tr>
<th>Year</th>
<th>Incidence Rate</th>
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**MATERNAL OPIATE USE**
Per 1,000 U.S. Hospital births

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**KENTUCKY HOSPITALIZATIONS FOR NEWBORN DRUG WITHDRAWAL SYNDROME**
Hospitalizations involving a diagnosis for Neonatal Abstinence Syndrome.

<table>
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<th>Number</th>
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<td>730</td>
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</table>

**WAYS PARENTS CAN HELP**

**THE "C" POSITION**
Holding your baby in a "C" position will help him relax. Hold him securely and place his face in the crook of your elbow, with arm near the center of his chest. Thelaby will feel more secure and comfortable, with legs tucked in.

**PALING**
Put the baby's diapered and blanketed. (This can sometimes help most with the most sensitive baby.)

**SWADDLING**
Wrapping your baby snugly in a blanket will help him calm movements and keep him comfortable.

**AVOID FAST, JERKY MOVEMENTS**
Such movements can be too stimulating to the baby's nervous system.

**SLOW AND SMOOTH MOVEMENTS**

**SUMMARY**
- The "C" position is better for holding your baby.
- Use a blanket to wrap your baby.
- Avoid fast, jerky movements.

Source: Kentucky Injury Prevention and Research Center, University of Kentucky, Kentucky Office of Drug Control Policy.

"They are just agitated. They are screaming. They have tremors. Their faces — you have the grimace. They’re in pain. Sometimes the babies have seizures. We hate it. I'll be honest about it. It breaks my heart to see these babies go through withdrawal."

TONYA ANDERSON, Infant development and touch therapist at Kosair Children's Hospital.

"We knew that it was common, but we would not expect this problem would have tripled (nationally) in the last decade. There are not many medical problems that have tripled in a decade — not obesity, not heart disease, not diabetes."

DR. MATTHEW DAVIES, Newborn psychiatrist at the University of Michigan.

"This is driving costs in so many areas up from a fiscal standpoint. Then you look at the children who are born withdrawing from drugs — that’s a whole different cost. That’s the human cost."

AUDREY TAYLOR HAYNES, Secretary of the Kentucky Cabinet for Health & Family Services.

Source: Kosair Children’s Hospital, Kosair Children’s Hospital Regional Medical Center.
Do you or a loved one have a prescription drug problem?

Answering yes to any of these questions could mean that you have a prescription drug problem:

1. Have you ever had problems stopping taking the medication after the pain resolved?
2. Have you ever tried to cut down on your medication early because you took more than prescribed?
3. Have you ever felt guilty about your use of the medication?
4. Have you ever mixed other drugs with your prescribed medication to enhance the effect?
5. Have you ever taken pain medications for a family member without their knowledge?
6. Have you ever stolen property to pay for your medication?
7. Do you or anyone close to you have problems related to pill use?
8. Have you ever taken your medication when you were not in pain?
9. Have you ever asked your doctor for a refill when you ran out of pills?