

My Child Survived an Overdose



by an Anonymous Parent

A YEAR AGO, MY YOUNG ADULT DAUGHTER, after nine years of sobriety, overdosed on heroin in our home. Because she survived, we are more fortunate than many families. My purpose here isn't to relive her overdose or frighten readers unnecessarily. If you know someone affected by the disease of addiction, my experience may give insight if you face overdose at some point. I wish I could provide a roadmap or template, but the landscape is everchanging.

Melissa, our beautiful and complicated thirty-year-old daughter with untreated ADHD (her choice) had returned home to reboot her life. Her childhood, young adulthood, and years of sobriety were a mixed bag. Musically talented, hilariously funny, charming, and cute, she struggled with emotional regulation and impulsive decision-making. She'd been diagnosed with ADHD at fifteen, but initially rejected treatment. It wasn't until sobriety that she accepted that medication played a key role in her mental health.

Melissa found success, stability, and adventure in college, along with a few life lessons, and our family began to heal as we shared positive interactions, laughter, and grown-up conversations. But after earning a college degree, she experienced several personal and career disappointments. My suggestions to seek a new treatment plan were brushed aside, but she went to work every day and spent time with nice friends, so I backed off.

During the dark times, she spent four years in the constant upheaval that can accompany addiction—multiple rehabs, a jail sentence, shady boyfriends, halfway houses, and the drug-related deaths of two of her friends. This put a strain on our entire family.

My husband and I bounced between letting consequences occur and intervening/enabling until I started attending Alanon meetings.

In one of Melissa's treatment programs, we met weekly with her doctor. He would say these words to us at every appointment, "Addiction is a chronic illness, accompanied by relapse, that if left untreated results in death." The first time he said it, I nearly ran out of the room. These words filled my mind during my sleepless nights. Although difficult to hear, this sentence made me face reality and ultimately, I was grateful for this knowledge.

Even though I was intellectually prepared that relapse could occur, I was still blindsided by seeing my daughter unresponsive on her bedroom floor. Her friends had discovered her, and one girl had the presence of mind to administer CPR while I frantically called the ambulance.

Most communities don't arrest those who have OD'd because their companions will be reluctant to call an ambulance for fear of their own arrest. It was a blessing to not worry about that, although the police officer made a point of showing me Melissa's paraphernalia. That was very distressing but forced me to face the seriousness of it. I felt sympathy for the first responders as they are affected by this epidemic also.



After Melissa's health was stabilized at the hospital, the ER staff asked her if she wanted to enter a treatment program. No one was surprised when she said "no." People struggling with addiction want to avoid withdrawal or are convinced that the overdose was a one-time event. The medical staff then looked at me to see if I wanted to take any action. I was flabbergasted at these questions. My daughter wasn't allowed to walk to the restroom unaccompanied and was prohibited from leaving. Yet they thought she had the presence of mind to decide about treatment?! And was completely shattered after witnessing the scene in her bedroom and the scary revival process. I was in no shape to make decisions!

Later I found out that if hospitals try to convince these patients into treatment, word will get out and overdose victims will be less likely to accept hospital care after resuscitation. Our community has addressed this by having volunteers that are in recovery talk to the patient before the release papers are drawn up. I'm sharing this because if your community doesn't have volunteers available to talk to overdose patients, you may want to call your local Alcoholics Anonymous or Narcotics Anonymous hotline and see if you can arrange this on your own.

After she was released, I found an online training in administering naloxone (Narcan) nasal spray and picked it up from the health department. Based on advice from a friend, we decided not to tell our daughter that we have it in the house. Some people believe that drug addicts will think "if I overdose, my family can revive me." Others think this is a risky stance to take. For us, we believe this is best for our family at this moment. It is a very personal decision and we can always change our minds.

I also have Narcan in my car and in my purse, because the Surgeon General has asked the public to carry it in case they arrive at the scene of an overdose. The nasal spray may be obtained at no cost and will not harm those who are unconscious from other medical conditions.

The memory of that horrible moment is becoming dimmer and I'm taking care of myself. I attend Alanon meetings, CHADD meetings, and addiction education programs. I'm actively working to incorporate more happiness into my life. My self-pity evaporated when I met a woman whose son was revived by Narcan on six occasions.

I attend vigils pertaining to drug overdoses. I do this so I don't get complacent about relapse, to acknowledge the heaviness in my heart that may never go away, and to honor those who've lost family members in such a senseless manner.

As for Melissa, she attended a few therapy appointments but eventually declined help. She moved out of state to avoid the people, places, and things that trigger her addiction. In retrospect, I wish she had seen a neurologist to determine if brain changes took place while she was without oxygen. I notice a difference in her speech pattern and ability to plan. Our phone conversations are less frequent than I would like; I think she feels shame from how our family was hurt and is avoiding us. My love for her has not changed and I'm cautiously optimistic about her future.

While there is no bright side of addiction, I'm grateful that it is becoming less of a shameful secret, treatment methods are increasingly science-based and individualized, and that those of us on this path we did not choose, are not alone. ☺

Our anonymous parent is a longtime CHADD volunteer.