

Substance Abuse and Addiction



Substance Abuse and Addiction: Common Terminology

- **Acute pain** – Pain that usually starts suddenly and has a known cause (e.g., injury, surgery). Acute pain typically improves as your body heals and lasts less than three months.
- **Benzodiazepines** – A group of sedatives also known as “benzos” that are often used to treat anxiety, insomnia, and other conditions. Combining benzodiazepines with opioids increases a person’s risk of overdose and death.
- **Chronic pain** – Pain that lasts three months or more as a result of disease, injury, medical treatment, inflammation, or unknown reasons.
- **Drug misuse** – The use of prescription drugs without a prescription or in a manner other than as directed by a doctor (e.g., use of prescribed drugs in greater amounts or for longer duration than indicated or in any other way not directed by a doctor).
- **Drug abuse or addiction** – Dependence on a legal or illegal drug or medication.
- **Fentanyl** – Pharmaceutical fentanyl is a synthetic opioid pain medication 50 to 100 times more potent than morphine and is approved for treating severe pain. However, fentanyl is also illegally produced and sold through illicit drug markets for its heroin-like effect, and it is often mixed with heroin and/or cocaine as a combination product.
- **Heroin** – An illegal, highly addictive opioid drug processed from morphine.
- **Illicit drug use** – The non-medical use of a variety of drugs prohibited by law, including amphetamine-type stimulants, marijuana, cocaine, heroin and other opioids, synthetic drugs, and MDMA (ecstasy).
- **Naloxone** – A prescription drug that reverses the effects of opioid overdose and can be life-saving if administered in time. Naloxone is commonly sold under the brand names Narcan and Evzio.
- **Nonmedical use** – Taking drugs (by prescription or otherwise) not in the way, for the reasons, or during the time period prescribed; or the use of prescription drugs by a person for whom the drug was not prescribed.

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- **Opioids** – Natural or synthetic chemicals that interact with opioid receptors on nerve cells in the body and brain and reduce the intensity of pain signals and feelings of pain. This class of drugs includes pain medications available legally by prescription, such as oxycodone, hydrocodone, codeine, morphine, and many others; synthetic opioids such as fentanyl; and the illegal drug heroin.
- **Opioid analgesics** – Prescription opioid medications that can be used to treat moderate to severe pain. Categories of opioid analgesics include:
 - Natural (e.g., morphine and codeine)
 - Semi-synthetic (e.g., oxycodone, hydrocodone, hydromorphone, oxymorphone)
 - Synthetic (e.g., methadone, tramadol, fentanyl)
- **Opioid use disorder** – A problematic pattern of opioid use that causes significant impairment or distress. A diagnosis is based on specific criteria such as unsuccessful efforts to cut down or control use, or use resulting in social problems and a failure to fulfill obligations at work, school, or home, among other criteria. Opioid use disorder has also been referred to as “opioid abuse or dependence” or “opioid addiction.”
- **Overdose** – Injury to the body (poisoning) that happens when a drug is taken in excessive amounts. An overdose can be fatal or nonfatal.
- **Physical dependence** – Adaptation to a drug that produces symptoms of withdrawal when the drug is stopped.
- **Tolerance** – Reduced response to a drug with repeated use.

Source: Centers for Disease Control and Prevention (www.cdc.gov)