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Why do addicts get hooked?

By Meg Murphy | Globe Correspondent

Dr. Kevin Hill oversees alcohol and drug treatment at McLean Hospital in Belmont (Kayana Szymczak for The Boston Globe)

A growing number of suburban young people are falling prey to deadly drug addictions, but most emerge from the same cultural environment with lives intact. Why?

Is the answer in genetics, environment, psychology, or a potent mix of these? Or is it sometimes a matter of chance - an adolescent's decision to try a pill with addictive properties infinitely more powerful than a jigger of whiskey from the family liquor cabinet?

There is no simple answer, says Dr. Kevin Hill, psychiatrist-in-charge at the alcohol and drug abuse treatment program at McLean Hospital, the largest psychiatric affiliate of Harvard Medical School and a global resource on substance abuse.

"There is certainly a heritable component, a genetic predisposition toward substance abuse, but depending on what is going on in a person's life, it may or may not express itself," he said in a recent interview.

Hill said about 40 percent of the people at McLean's post-detoxified treatment center are struggling with a dependence on opioids, an umbrella term often used in the medical community to indicate drugs, such as heroin or oxycodone, that are derivatives of the narcotic material found naturally in the opium poppy plant.

"Think of addiction as a chronic medical illness, such as high blood pressure or diabetes," he said, adding that all have a biological basis but personal behavior and environment can influence whether the given disease develops and affects an individual's life.

He said young people must proceed with caution if family history places them at higher risk. "If I come from a family of alcoholics, then in a social setting I need to be more cognizant of my vulnerabilities than other people do."

That risk is enhanced within the context of a national opiate epidemic.

"Research shows that if a person is exposed to prescription opioids or heroin and starts to use, they are far more likely to become dependent on opioids" than on marijuana, he said.

What kind of stories does he see emerge from the lives of young people in treatment for opioid dependence at McLean?

First of all, he said, if all is well in a young person's life, he or she does not typically end up with an addiction.

"If things are going great, they are not going to develop a problem," said Hill.

"Often the kids we see don't have healthy coping mechanisms. They don't know how to cope with what seems like standard stuff to other kids - graduating from high school, dealing with college prospects."

He said many young people with an opioid addiction are struggling with interpersonal issues with one or both parents. One common theme, he said, involves pressure to perform for a disappointed parent or parents.

"Is the kid making it like they want him or her to make it?" he asked.

Another recurring issue, said Hill, is that one or both parents disapprove of a romantic relationship that is moving more quickly than desired.

A fair number of the young people, he said, are graduates from prestigious universities who developed an opioid addiction after they were unable to find jobs.

Many more, Hill said, are experiencing problems in their family or at work and must examine these social issues because, if those stressors continue without being addressed in psychotherapy, it is unlikely the addiction will remain at bay.

"We want to know what is going on in their lives," he said. "We treat the whole family."

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