How Black Kids With Sickle Cell Anemia Get Screwed By The War On Drugs

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During my pediatric rotation in nursing school, there was a young boy, about 12-years-old, whom I'll refer to as Zackary*, who suffered from sickle cell anemia. He was African American, lived in the inner city, loved football and basketball and his favorite subject in school was science. He was just a regular kid who wanted to do regular kid stuff.

But instead, he was already addicted to opiates at age 12.

If you're not familiar with sickle cell anemia, it’s an incredibly painful disease caused by misshapen red blood cells, and it primarily affects those of African descent. The treatment consists of lots and lots of opioid pain killers and a possible bone marrow transplant.

Zackary was hooked up to a patient controlled analgesia (PCA) pump, which is a pump programmed to allow Zackary to administer prescribed amounts of morphine to himself by pressing a button, otherwise known as a morphine drip.

Now, the machine was programmed so he couldn’t overdose, and it was stressed over and over to me in nursing school that “opioid analgesics are not addictive when used properly”.

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Several of the other nursing students and I tried to distract him from the pain by asking him questions about himself and trying to get him to talk about things he liked. His favorite team was the Jets. He didn’t have a girlfriend, yet. Then, he screamed in pain until he passed out. His oxygen saturation level was low, and his respirations were slow from the amount of morphine he’d taken.

I went home angry, imagining what this poor kid had to look forward to as an African American from the inner city already addicted to morphine at age 12. It’s a legitimate treatment for him, but it still carries a stigma. But the worst part he had to look forward to, are the side effects of long-term opioid use: constipation, nausea, vomiting, itching, possible bowel impaction and something called “tardive dyskinesia” which are creepy-looking involuntary movements of facial muscles. Not a side-effect a pre-teen boy wants to acquire, as he’s looking forward to becoming a teenager and dating some day.

I thought, if Zackary was lucky, he might find cannabis, and not have to deal with those side effects. Or, perhaps, that wouldn’t be such a lucky thing after all, as the worst side effect of cannabis use is getting arrested. Black kids on morphine and cannabis grow up to be arrested in disproportionate numbers to their White counterparts, after all.
A study conducted by the University of Minnesota Medical School in 2010 showed the use of cannabinoids (a synthetic compound based on marijuana derivatives, but also more easily available in the actual cannabis plant) alleviated pain just as effectively, if not better, than the use of opioids in those with sickle cell anemia.

Another government study has shown there is a high prevalence of cannabis use among those with sickle cell anemia. That's not surprising.

Now, I don’t know for sure if cannabis could have helped Zackary. However, it doesn’t make any sense to me that our society has such an unrealistic fear of putting “children” and “cannabis” together in the context of medicine. And yet, we have no problem allowing kids like Zackary to pump themselves up with drugs like opiates without thinking twice.

If the current status of the law is the only real thing stopping healthcare professionals from utilizing treatments like cannabis, then we are failing our patients, like Zackary, when we don’t speak up or do anything to try to change those laws.

We can do better than this. We have to.

*Names have been changed to protect anonymity.*

**UPDATE 7/21/2013** The author wants to acknowledge that the use of the words “addiction/addicted” in this scenario was incorrect. The appropriate word would be “dependence/dependent”.