Ohio couple arrested after eight-year-old son overdoses on heroin

Naomi Spencer 22 February 2017

Parents from the Cleveland suburb of Berea, Ohio, were arrested after their eight-year-old son overdosed on heroin last month. According to a police spokesperson, the child has "recovered well" and is in the care of relatives. His parents are each being held on \$150,000 bonds.

On February 17, a grand jury in the Cuyahoga County Common Pleas Court charged Danielle Simko and Charles Dowdy, both 31, with felonies for drug possession and child endangerment. The child is the youngest overdose victim in Berea, a town on the southwestern end of Cleveland in Cuyahoga County.

Local news reported that Dowdy found his son unresponsive on his bed around 10:30 p.m. on the night of January 11 and immediately called 911. All three of them had been sleeping in the same bed when Dowdy awoke to find the boy's lips were blue and he was not breathing. Police found Dowdy trying to resuscitate the child, and an ambulance rushed him to Southwest General Medical Center.

Police searched the house, finding a bag of heroin and prescription pills in a toy watch that was kept in the boy's socks, and both parents were arrested at the hospital after they admitted they had used drugs earlier in the day.

Not a day goes by in America without an appalling "human interest" news story about the drug epidemic. More often than not, such stories are meant to further demonize the drug-addicted and whip up law-and-order sentiment in an upset and fearful public.

On September 6, East Liverpool, Ohio, police photographed a couple who had overdosed on heroin in their car, with a toddler strapped into a car seat in the back. The police department published the photographs on the city's Facebook page without even blurring the faces of the vehicle's occupants, including the child.

The images have become something of a symbol of Ohio's heroin epidemic, and the right wing has invoked the fate of children in drug-affected homes as rationale for tougher drug sentencing laws.

Meanwhile, the genuinely tragic outcomes of so many children caught up in the drug crisis are compounded by official indifference. Foster care systems, for example, are buckling under the weight of the heroin epidemic, and thousands of children have nowhere to go. Ohio has seen a 19 percent rise in the number of children removed from parental custody since 2010, most often for drug addiction.

Drug use in distressed industrial towns like Cleveland has surged over the past few years. The Cuyahoga County Medical Examiner's Office reported deaths from heroin, fentanyl and other opiates rose from 64 in 2011 to 517 last year. In total, at least 663 people died of drug overdoses in the county last year.

In January alone, Cuyahoga County witnessed 46 fatal overdoses, most from fentanyl and heroin, and 24 other overdose cases are still awaiting testing. At least 24 more deaths followed in the opening days of February. Medical Examiner Dr. Thomas Gilson reported a similar spike in overdose deaths attributed to cocaine laced with heroin or fentanyl, including 19 in January.

In late December, Gilson told Cleveland 19 News that the most common heroin overdose victims were white, middle-aged men, usually from the suburbs, but fentanyl victims included many younger people. Most of the victims are between 30 and 60 years old. Heroin is 5 times stronger than morphine; fentanyl is 100 times stronger. Gilson noted that more than 400 overdoses were reversed by the opioid-blocker Narcan—preventing a far higher death toll.

According to a Cleveland.com report last October, the

death toll was overwhelming the Medical Examiner's Office. "The office expects to spend an extra \$130,000 this year to transport bodies to the morgue, and has seen dramatic spikes in the numbers of autopsies conducted for other counties and toxicology cases," the news site reported.

The epidemic of heroin has followed the wake of a prescription drug tsunami deliberately whipped up by the pharmaceutical industry. Over the past two decades, opioids like oxycodone, hydrocodone, and fentanyl—under the brand names OxyContin, Vicodin, Percocet, Subsys, and others—were marketed in rural and working class areas as non-addictive relief for chronic aches and pains. Many people suffering from repetitive stress injuries, arthritis, or other work-related strains were prescribed these powerful painkillers.

Drug distributors have been fined millions of dollars in the past year for failing to report what federal investigators found to be extremely large "suspicious orders" of pain pills. The nation's largest drug distributor, McKesson, was forced to suspend its sales in Ohio and other states and pay a record \$150 million civil penalty—a drop in the bucket for the \$191 billion company.

In 1999, Ohio's opioid prescription rate was already high, at an average that year of 10 pills for every man, woman, and child in the state. By 2011, that rate was 66 pills per Ohio resident.

Data shows that overdoses from prescription painkillers have leveled off, while heroin—a cheaper street drug that triggers the same receptors as opioid pills—has skyrocketed. "Most people start popping pills," Cleveland MetroHealth Medical Center's Medical Director Dr. Jennifer Bailit told WKYC News. "As the pills get expensive they don't last as long, they're not as strong. Heroin is very cheap in our community, and people will switch to heroin as an economic savings. Typically, they'll start by snorting the drug, and then, as they need more and more of it and money gets tighter and tighter, they'll start injecting."

Bailit works in the Mother and Child Dependency Program at the Medical Center, and said the number of pregnant women with opioid addiction has surged in the past decade and a half. Dr. Joan Papp, who works in the emergency room, told CBS News that some 300 overdoses were reversed at MetroHealth last year, nearly one every day.

Ohio leads the country in the number of heroin overdoses, and cities across the Rust Belt state are struggling to provide emergency response and medical care. In January, Cuyahoga County and Cleveland officials pledged \$1.5 million to grapple with heroin, including \$1 million to expand outpatient treatment programs.

In the face of this social crisis, the political establishment has provided little more than lip service and photo-ops. In July, Congress passed legislation that would provide \$181 million nationwide in aid—amounting to just over \$3.6 million per state. Much of the money will likely go to police departments and toward prosecution of drug dealers. Long-term treatment programs are woefully underfunded.

Meanwhile, the cost of life-saving antidotes like naloxone has increased dramatically. Narcan prices have risen from \$3 to \$38 per dose, a situation that is putting severe financial pressure on municipalities across the country.

The price of Evzio, a naloxone delivery system produced by pharmaceutical company Kaleo, jumped by a staggering 600 percent from \$600 in 2014 to \$4,500 today, according to figures published in the *New England Journal of Medicine*. The price hike follows similar increases in life-saving pharmaceuticals used for AIDS and asthma treatments. Cities, emergency responders, and family members of those struggling with addiction are captive buyers for the makers of antiopioid drugs.

"There's a highly inelastic demand, meaning people are willing to pay for it because they really don't have other alternatives," Pinar Karaca-Mandic, a University of Minnesota associate professor of health policy and management, told the *Detroit Free Press* February 13. "There has been a big shift in demand. Naloxone used to be pretty much used by hospitals and ambulances. It didn't have as much demand, but with the opioid epidemic...there's a big market."



To contact the WSWS and the Socialist Equality Party visit:

wsws.org/contact