

# THE IPRN NEWS

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## **"SHORE UP YOUR RECOVERY"** **16<sup>th</sup> Annual Heartland PRN Conference**

In September Michigan will be hosting the 16<sup>th</sup> Annual Heartland Pharmacists Recovery Network Conference. The conference will be held at Camp Geneva (on the shore of Lake Michigan) on September 28-30, 2007. Camp Geneva (<http://www.campgeneva.org>) looks like an absolutely beautiful place which promises to be an excellent and affordable conference. There is even a campfire planned on the lakeshore featuring S'mores. It will be an opportunity to get recharged and invigorated.

The full weekend package (includes registration; continuing education; breakfast, lunch and dinner on Sept. 29 and breakfast of Sept. 30) will cost \$175.00. The full package without the continuing education credits will cost \$125.00. Rooms are available at Camp Geneva or hotels available in nearby Holland, Michigan. Staying at the camp will make the trip enjoyable and affordable for anyone.

Holland, Michigan is approximately 450 miles from Des Moines and 350 miles from Iowa City. If students would want to come, participate and carpool, please let me know and I will see what assistance we can offer. This is a great opportunity to see what Heartland is and to participate in the Midwest states PRN programs. Iowa will be hosting the Heartland Pharmacy Recovery Network Conference in 2008 so it will be a time to promote our state and our PRN programs. There will be students from a number of states so it will provide networking and assistance to our college's programs.

The conference will be hosted by the Michigan Pharmacists Helping Pharmacists Council - Michigan Pharmacists Association,  
815 N. Washington Avenue Lansing, Michigan 48906  
Phone #: (517) 484-1466 Dianne Miller and/or Mary Farrington

Online registration available at <http://www.michiganpharmacists.org>.

Or contact - Dan Smith, Chairperson, Michigan Pharmacists Helping Pharmacists Council at [sdaniel0801@aol.com](mailto:sdaniel0801@aol.com) or 616-891-1788.

*We are committed to excellence!*

## ***“SHORE UP YOUR RECOVERY” Agenda***

### ***FRIDAY, SEPTEMBER 28***

**5:30 p.m. Registration**

**8:00 p.m. Open International Pharmacists Anonymous Meeting/Al-Anon Meeting**

**9:00 p.m. S'mores by the Shores Bonfire**

### ***SATURDAY, SEPTEMBER 29***

**7:30 a.m. Breakfast**

**8:00 a.m.-8:30 a.m. Registration**

**8:30 a.m.-10:00 a.m. Co-occurring Disorders: Alcohol and Drug Abuse in the Psychiatric Patient**

**112-000-07-218-L01, 1.5 contact hours, David J. Mazur, DO, Grand Rapids, MI**

**At the end of this presentation, participants should be able to distinguish the diagnosis and description of co-occurring disorders, illustrate a treatment plan for substance abuse and psychiatric disorders, and identify dangers and treatment problems with this group.**

**10:30 a.m.-noon Methamphetamine: Your Drug of Choice**

**112-000-07-219-L01, 1.5 contact hours, Lt. Anthony Saucedo, Michigan State Police**

**At the end of this presentation, participants should be able to explain what methamphetamine is, describe the side effects of methamphetamine and the process used to make it, and explain the dangers of using it.**

**Noon-1:00 p.m. Lunch in Dining Room**

**1:00 p.m.-2:30 p.m. De Nile is Not Just a River in Egypt**

**112-000-07-220-L04, 1.5 contact hours, Rondi L. Wightman, MSW, LCSW, CADC**

**At the end of this presentation, participants should be able to define how humor is different from laughter, explain how pharmacy professionals can utilize humor to maintain sobriety, and provide an overview of the physical and physiological aspects and benefits of laughter.**

**2:45 p.m.-4:00 p.m. Stress Management and Relaxation Techniques for Pharmacy Professionals**

**112-000-07-221-L04, 1.5 contact hours, Michael K. Kivinen, MA, LLP, Wyoming, MI**

**At the end of this presentation, participants should be able to define stress and identify its everyday sources and manifestations, explain the difference between adaptive and maladaptive responses to stress, and apply basic meditative and hypnotic techniques to personal stress management and relapse prevention.**

**4:00 p.m.-5:00 p.m. Personal Story of Recovery**

**5:15 p.m. Dinner in Dining Room**

**6:00 p.m. International Pharmacists Anonymous Meeting/Al-Anon Meeting**

### ***SUNDAY, SEPTEMBER 30***

**7:30 a.m. Breakfast in Dining Room 8:15 a.m.-8:30 a.m. Janet Ralstin Memorial**

**8:30 a.m.-10:00 a.m. Addictions by Design**

**112-000-07-222-L04, 1.5 contact hours, Rev. Ryan Veeneman, MSW, LCSW, M.Div.**

**At the end of this presentation, participants should be able to articulate chemical, emotional and spiritual dimensions of lifelong recovery, self-assess the progress made within larger dimensions of recovery, and explain the perception and acceptance of a higher power as a resource for lifelong recovery.**

**10:15 a.m.-11:45 a.m. Assessing State PRN Programs**

**112-000-07-223-L04, 1.5 contact hours, Charles H. Newman, R.Ph., Ann Arbor, MI**

**At the end of this presentation, participants should be able to list two ways in which Michigan's PRN program differs from many other state programs, identify at least three states with active PRN programs, and describe the operation of attendees' state PRN programs.**

**11:45 a.m. Adjourn**

***Sharing ideas and information.***

***Iowa will be hosting the Heartland Pharmacy Recovery Network Conference in 2008 so it will be a time to promote our state and our PRN programs.***

***I encourage anyone who wishes to be involved with hosting the conference next year to attend this year.***

## ***Reflections of Utah***

**The University of Utah School on Alcoholism and Other Drug Dependencies in Salt Lake City was an amazing experience for me. Alcoholism and drug addiction is something that pharmacists face each day with their patients and can easily become victims themselves with have such convenient access to the most highly abused medications.**

**I never realized how much these two diseases can effect a profession until I came to Utah. I was amazed at all of the help that pharmacists have access to if such a problem does arise. The programs are made to help the pharmacist battle their addictions and get back on their feet again with their jobs. It was great meeting people who are currently battling their addictions and dependencies and learning about their recovery process.**

**One of the most interesting topics at Utah included a group therapy session. The patients who came in from the group had a lot of courage and were able to talk openly about their struggles – both alcohol and drug related along with other family issues that it led to. Their session demonstrated what many recovering patients go through to get the help they need to stay clean.**

**I was very impressed with everything that the school had to offer. Overall it was a great experience that I think more pharmacy students should be able to have because it affects such a large portion of the profession and population. Together, with other Drake pharmacy students who attended the school, I hope to make the Drake PRN a more well known organization on campus and inform students that if a problem should arise, there will always be help!**

**Thanks again! Kelly Ackerman, P2 Student, Drake University**

***Be a part of the solution!***

## ***Southwest Pharmacist Recovery Network 20th Annual Meeting - September 14 - 16, 2007***

**Where: Cal-Neva Resort & Spa, 2 Stateline Road, Crystal Bay, Nevada**

**Sponsor: SWPRN, Inc., P.O. Box 18731, Oklahoma City, Oklahoma  
73154 Phone: 405 557-5775**

**Co-sponsor: Professionals Reaching Nevada - Pharmacist Recovery Network (PRN-PRN)**

**Contacts:**

**Kim Spitz - [kspitz@opha.com](mailto:kspitz@opha.com)**

**Kevin Rich - [rtoorich4u@aol.com](mailto:rtoorich4u@aol.com)**

**Or use the SWPRN website at [www.SWPRN.org](http://www.SWPRN.org) to access information, agenda and a registration form.**

***Make plans to attend a PRN Conference today.***

***Overall it was a great experience that I think more pharmacy students should be able to have because it affects such a large portion of the profession and population.  
- Kelly***

***IPRN has maintained a 24-hour, toll-free hotline. Calls made to the hotline included individuals needing help and concerned others.***

***The toll free number is:  
(877) 890-IPRN***

## **CDC Fact Sheet – Understanding Suicide**

Continuing our discussion on Suicide, this fact sheet was found on the CDC website at [www.cdc.gov](http://www.cdc.gov).

**Suicide occurs when a person ends their life. It is the 11th leading cause of death among Americans. But suicide deaths are only part of the problem. More people survive suicide attempts than actually die. They are often seriously injured and need medical care. Most people feel uncomfortable talking about suicide. Often, victims are blamed. Their friends, families, and communities are left devastated.**

*The goal is to stop suicide attempts.*

### **Why is Suicide a Public Health Problem?**

- More than 31,000 people kill themselves each year.
- More than 425,000 people with self-inflicted injuries are treated in emergency rooms each year.

### **How does Suicide affect Health?**

**Suicide, by definition, is fatal. Those who attempt suicide and survive may have serious injuries like broken bones, brain damage, or organ failure. Also people who survive often have depression and other mental health problems. Suicide also affects the health of the community. Family and friends of people who commit suicide may feel shock, anger, guilt, and depression. The medical costs and lost wages associated with suicide also take their toll on the community.**

### **Who is at Risk for Suicide?**

**Suicide affects everyone, but some groups are at higher risk than others. Men are 4 times more likely than women to die from suicide. However, 3 times more women than men report attempting suicide. In addition, suicide rates are high among young people and those over age 65. Several factors can put a person at risk for attempting or committing suicide. But, having these risk factors does not always mean that suicide will occur.**

*Please feel free to call IPRN if you need assistance, need information or need help with an intervention.*

### **Risk factors for suicide include:**

- Previous suicide attempt(s)
- History of depression or other mental illness
- Alcohol or drug abuse
- Family history of suicide or violence
- Physical illness
- Feeling alone

*We can help!*

### **How can we Prevent Suicide? The goal is to stop suicide attempts.**

- Learn the warning signs of suicide.

**Warning signs can include changes in a person's mood, diet, or sleeping pattern. The American Association of Suicidology ([www.suicidology.org](http://www.suicidology.org)) has detailed information on what to look for and how to respond.**

- Get involved in community efforts.

**The National Strategy for Suicide Prevention lays out a plan that guides the development of programs and seeks to bring about social change. ([www.mentalhealth.samhsa.gov/suicideprevention/strategy.asp](http://www.mentalhealth.samhsa.gov/suicideprevention/strategy.asp))**

*You can make a difference!*

## ***Additional Approaches For Recovery***

***Many individuals in recovery find these options as beneficial additions to their recovery without using mind altering medications.***

***“So we clean house with the family, asking each morning in meditation that our Creator show us the way of patience, tolerance, kindness and love.” Into Action, Chapter 6, pg. 83.***

**Additional approaches to alcoholism and drug addiction can augment recovery for individuals. For example, holistic approaches can greatly supplement the 12 step approach to alcoholism and addiction. Since the 12 step approach has been tested to the extent that it has and has been successful for over 72 years, I do not recommend holistic approaches replace the 12 step program but can be used to enhance the treatment of alcoholism and drug dependency.**

**Holistic medicine treats the person and not just the disease. Holism has existed for a long time as a health concept but only in more recent history has it been accepted in our medical community for the treatment of a variety of diseases. The first National Conference on Holistic Health was held at the University of California San Diego School of Medicine in June 1975.**

**Examples of holistic approaches include meditation, chiropractic, acupuncture, biofeedback, herbal therapy, homeopathy, hypnosis, imagery, massage, yoga, etc. Many individuals in recovery find these options as beneficial additions to their recovery without using mind altering medications. I recommend any that are beneficial to your program. There is a caution with herbal and alternative medications: make sure that they do not contain alcohol or products that metabolize to alcohol or other substances that you need to avoid.**

**Meditation has been recommended and referenced in the Big Book of Alcoholics Anonymous:**

**- The 11<sup>th</sup> Step states that we “Sought through prayer and meditation to improve our conscious contact with God ...as we understood Him..., praying only for knowledge of His will for us and the power to carry that out.” How It Works, Chapter 5, pg. 59.**

**- “So we clean house with the family, asking each morning in meditation that our Creator show us the way of patience, tolerance, kindness and love.” Into Action, Chapter 6, pg. 83.**

**- “Ask Him in your morning meditation what you can do each day for the man who is still sick. The answers will come, if your own house is in order.” A Vision for You, Chapter 11, pg. 164.**

**Simple ways of finding some serenity are numerous. A walk in the woods or along the river can refresh your soul. Finding a mountain top (or in Iowa, the top of a hill) can provide the opportunity to pursue peace and spirituality. For some people, it may be a bike ride or a boat ride, a run or a swim, spending time with family and friends, a church or treatment retreat... the list is endless. But the truth is we each need to find our own serenity and it is through the process of trying something different that we can achieve this goal. All of these additional approaches can enhance and augment recovery.**

**I wish you peace and serenity on your journey.**

***Take each opportunity you are given.***

## ***The Iowa Pharmacy Recovery Network***

**In order to understand what the Iowa Pharmacy Recovery Network was designed to accomplish, it is first important to understand chemical dependency as a disease. Over 40 years ago, the general population did not accept those with chemical dependency as people who needed to be treated; they simply saw it as a character flaw. Then, in 1956, the American Medical Association formally recognized alcoholism as a disease. If you understand this concept, you will understand the mission of the Iowa Pharmacy Recovery Network.**

**As Vernon Johnson outlines in his book, *Intervention*, you would not blame a child for coming down with the flu. Instead, you would take your child to the doctor, have the disease properly diagnosed, and do whatever you could to speed your child on the way to recovery. Similarly, you cannot blame the chemically dependent person for being chemically dependent. What you can do is help him or her to get the care that is needed.**

**Estimates place the incidence of chemical dependency in the pharmacy profession at about 15%. If this estimate is accurate, Iowa potentially has 350 impaired pharmacists, in addition to pharmacy students and technicians. IPRN has been designed to work with impaired pharmacy professionals in a compassionate and non-punitive manner by providing confidential assistance in locating appropriate rehabilitative services and serving as an advocate for their re-entry into the profession.**

**The Iowa Pharmacy Recovery Network is a monitoring and advocacy peer-review program for the purpose of assisting impaired pharmacy professionals, including pharmacists, pharmacy students and pharmacy technicians, whose dependency and/or disability is potentially threatening to professional performance and public safety. Services provided by IPRN are intended to be in the best interest of the professional and the public. IPRN's activities are designed to preserve the involved professional's reputation and ability to render competent and quality pharmaceutical care.**

**Activities of the Iowa Pharmacy Recovery Network, Inc. are administered by the Iowa Pharmacy Association, coordinated through the IPRN Committee, and carried out by caring and competent IPRN volunteers throughout the state of Iowa.**

**There are many roles for volunteers, including advocating and providing peer support and assistance, for others as they enter treatment and recovery. IPRN will assure that volunteers are adequately trained and educated so they can most effectively work with clients throughout the state. One source of education on chemical dependency is the Utah School on Alcoholism and Other Drug Dependencies. IPRN has provided support to many volunteers over the years to attend this internationally recognized program which serves to increase awareness of the health and social problems of alcoholism and other drug dependencies, particularly in the pharmacy profession.**

***Thank you all for your support!***

***If you know anyone who would like to receive this newsletter just email and we will add them to the mailing list. Otherwise, feel free to pass the news along.***

***Also, if you wish to be removed from the email list, please let me know. Thanks!***

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