

# Understanding and overcoming opioid use in law firms

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As a licensed addiction treatment professional, I am trained to recognize signs of substance use disorder. Some addicts and alcoholics adhere to the stereotype and appear beat-up, bloated and tired. However, others are higher-functioning, and physical signs and symptoms may not be immediately visible.

In fact, that was the case with two young lawyers I recently treated. They looked terrific — well-rested, in good shape, articulate and excelling at work. They were also heroin addicts. It was a shock to everyone, especially the management at their firms, when their addiction was exposed and they sought treatment, admitting to practicing law while under the influence of an illicit substance.

Yes, the national opioid epidemic has reached law firms, and it's an entirely different scenario than the alcoholism, depression and anxiety firms are used to seeing. Opioids and heroin are highly addictive and tend to kill people faster. There's also a considerably stronger stigma around heroin than there is around alcohol — making the shame more intense.

As a result, even though their lives are at risk, lawyers are far less inclined to admit they have a problem — and seek help — when opioids are the source of the addiction.

Prescription opioid and heroin addiction can be hard to detect. Many of us have this vision of heroin as a street drug, used by strung-out junkies living in cardboard boxes under the overpass.

Lawyers misusing opioids often manage to remain high functioning and well-kept. Keeping the signs hidden, they do just enough to get through the day. They can continue this pattern for decades, so their addiction often goes undetected until it's too late to avoid professional and personal consequences, including death.

Through the course of their addiction, these lawyers compromise the firm's culture and productivity, along with their lives.

There are predictively serious consequences for firms employing lawyers in active addiction, but how can they take steps to intervene with respect to something they don't even know is happening? The solution lies in understanding this drug and the disease, so actionable steps can be taken to save lives, professional consequences, relationships and reputations.

## A PORTRAIT OF THE OPIOID-ADDICTED LAWYER

Prescription opioids have exploded in popularity over the past 20 years. Today's young lawyers may have first experienced opioids by raiding their parents' medicine cabinets in their teenage years.

These drugs were everywhere. Between 1999 and 2011, consumption of hydrocodone more than doubled, and consumption of oxycodone increased by nearly 500 percent.<sup>1</sup> These young lawyers then joined one of the most stressful and isolating professions.

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Lawyers are likely to reach for a substance to quell the anxiety and stress of the job; the workload and pressure are often tipping points for those predisposed to addiction. While alcohol remains the substance of choice for many, opioids are a much cheaper, hangover-free alternative that provide a buzz that is often 10 times the pleasure of a drink. It is not difficult to understand the rise in popularity.

The medical community has significantly reduced the number of opioids prescribed, and law enforcement has taken steps to put pill mills out of business, making prescription opioids harder to access. Like millions of others who initially became addicted to prescription drugs such as Oxycontin, lawyers are turning to heroin.

It's not just young lawyers, either. Addiction doesn't discriminate, and lawyers of all ages can become addicted to opioids. From my experience, lawyers who receive pain medication from a health care professional find it hard to stop using the prescription after it runs out.



From lawyers in their 40s who just had dental surgery to retirement-age lawyers who required a hip or knee replacement, firms now are wholly exposed to risk.

Lawyers have many advantages when it comes to enabling addiction. Usually, people addicted to illicit drugs encounter roadblocks to continuous use. These roadblocks include a lack of funds to sustain purchasing drugs daily or the inability to successfully hide their use from those around them.

But, because of their income, status and lack of accountability, lawyers can often easily mask their opioid addiction. They don't have to resort to extreme or dangerous measures to purchase their drugs.

In addition, they can often conceal that they're under the influence, such as by enlisting the help of an assistant who covers up mistakes at work or simply using the same problem-solving skills that made them successful lawyers in the first place.

This also puts them at much greater risk for overdose. It's simple math: With more bags of heroin comes a higher chance of receiving the one that will kill you.

Today, suppliers are cutting their heroin with fentanyl,<sup>4</sup> a potentially fatal synthetic opioid. It's so powerful it only takes a few particles to kill the user. This same equation is killing famous entertainers.<sup>5</sup> Addiction doesn't care about your money, fame or social standing.

### ALCOHOL VS. OPIOIDS: THE DEVIL WE KNOW AND THE DEVIL WE DON'T

For decades, alcohol has been culturally acceptable in law firms to socialize within the firm, blow off steam and entertain clients. Unfortunately, that level of acceptance has also led to a significant issue — at least 21 percent of active lawyers are problem drinkers.<sup>6</sup>

The opioid epidemic is now seeping into law firms and all too often flies under the radar. Here's why.

#### *It's harder to detect*

Alcohol abuse often becomes progressively difficult to hide. Between happy hours, client wooing, firm-wide liquid lunches and commiserating at the bar, there are myriad chances for colleagues to detect and issue and become concerned.

A lawyer engaging in illicit drugs intentionally remains in the shadows because of both the shame and illegality. Colleagues are far less likely to observe any use of opioids, and signs of intoxication are far easier to hide.

This means an opioid addiction can be effectively concealed until it's too late. Take, for example, the heartbreaking story

of the Silicon Valley lawyer who hid his addiction until his ex-wife found him dead.<sup>7</sup>

#### *More shame and stigma may impede asking for help*

The legal profession views alcohol, marijuana and even some other drugs as more benign, and essentially acceptable, unless abused. Heroin, on the other hand, is still perceived as a "dirty" street drug, used only by the most impaired and desperate addicts.

It's far less common for a lawyer to admit to using heroin and seek treatment than it is for a lawyer to acknowledge a problem with alcohol. In fact, in my seven years of treating impaired lawyers, I have never seen a heroin addict enter treatment when use has remained undetected.

#### *The professional consequences are dire*

The legal profession takes its ethical rules and code of professional responsibility very seriously — but the disease drives lawyers to use on the job, violating that code and often breaking the law.

The lawyer — and possibly even management (especially if it knows of the use) — can lose licensure, face criminal charges and be subject to malpractice or ethical liability. This means trouble for the entire firm, and all its clients will be affected.

Make no mistake: An opioid addiction will likely end tragically. If it's not death by overdose, it could easily be passing out in court, acting erratically in front of clients or mismanaging funds and confidential files — all scenarios that risk the firm's future.

#### *Heroin offers what lawyers need — and then kills them quickly*

A heroin high is described as the most intense feeling of relaxation and happiness the user has ever had — something obviously tempting to the thousands of depressed and anxious lawyers we have in this country.

The addiction progresses rapidly thanks to how quickly it reaches the brain, and overdose is a constant risk. Users build up a tolerance in their system and need to use more of it to reach a high, each time brushing against death as the drug slows their breathing and heart rate.

### MOVING FORWARD

I've spent the better part of a decade helping lawyers recover and assisting firms as they tackle the issue of substance use disorders. When I started, I was dealing almost exclusively with alcoholics, rarely opioid abuse, confronting alcohol's rising popularity with this demographic.

I suggest a plan of action I've shared with firm management teams as an approach to addressing this impending opioid crisis.

### Erase stigma

Stigma is one of the biggest barriers<sup>8</sup> to our nation's recovery, and it's especially prevalent in high-powered professions. Lawyers, doctors and law enforcement officers are expected to be infallible. They fear that admitting to a problem will cause them to be perceived as weak or untrustworthy.

Firm management should know that the most important organizations in the legal profession have committed to creating a culture that supports healthy lawyers. National organizations such as the American Bar Association co-founded the National Task Force on Lawyer Well-Being<sup>9</sup> in 2017 with the National Organization of Bar Counsel and the Association of Professional Responsibility Lawyers, sharing details on why lawyers are susceptible to addiction and how pressing the issue is, and providing recommendations for a better future.

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Firms need to reinforce the message of these well-respected institutions: A healthy lawyer is a successful lawyer, and seeking treatment for a life-threatening illness does not make a lawyer weak.

### Support wellness

One of the reasons lawyers struggle with mental health is the constant pressure to perform at a high level — often under strict time constraints. They also can be isolated in their work and vulnerable to depression and anxiety, which typically co-occur with substance use disorders.

Management can support mental health and well-being by allowing lawyers to embrace a healthy work-life balance. Setting realistic expectations and encouraging employees to take vacations and weekends are great starts — but inspiring such a paradigm shift can be challenging. Firms can consider bringing on a director of well-being or tasking someone in HR to ensure the company stays on track with these new initiatives.

Finally, firms should do away with many status quo company-wide events, or even just add new events into the mix that aren't centered around alcohol. This can include offering mindfulness meditation, yoga, running clubs and other proven stress-reducing activities.

### Encourage intervention

Lawyers are often convinced they have everything under control, from their work to health concerns. Lawyers

concerned about their substance use may be afraid to seek help for fear of others knowing they are vulnerable, loss of reputation or retribution.

However, there are approaches that can help lawyers access support in a safe and confidential manner.

First, establish a confidential reporting path. If given a safe option, more lawyers would bring themselves or peers in danger to the attention of management, just as they would address a diabetic colleague not looking well.

Second, management should become versed in addiction and identifying its signs. But they don't have to do it alone. There are fully trained external resources that can come in to evaluate the situation and advise on how to best handle it, including providing education for the firm and all its stakeholders.

### Treat addiction as a chronic disease

Brain imaging and other research show us that addiction is a chronic disease,<sup>10</sup> not a moral failing. It makes much more sense for firms to support lawyers with a substance use disorder by helping them maintain or regain their health rather than focusing on behaviors that may be symptoms of their disease.

Supporting the lawyers as they go through treatment and then helping them successfully transition back to work is far more beneficial in the long term than punishing them. Management should treat an addicted lawyer as someone who is sick and needs to get well rather than as someone who has misbehaved.

### ALL FIRMS SHOULD TAKE NOTICE OF THIS WARNING

Law firms have an absolute professional and ethical obligation to make sure their attorneys are competent and cognitively intact. My message to managers: You have a duty to your employees, your clients, your partners and everybody else who holds an interest in the firm to pay attention to the mental and behavioral well-being of your staff.

Young associates depend on the mentoring of senior partners, and those partners have faith in the performance of their associates. Practice groups and trial teams alike rely on each individual's sober engagement. And most critically, clients must be able to trust your product.

The opioid crisis is no longer hidden. Daily headlines, books, documentaries, movies and new legislation have flooded our daily consciousness. It is not overly dramatic to send out a rescue flare for the most addicted profession in America, as these opioids begin to infiltrate every level of the legal profession.

## NOTES

<sup>1</sup> Andrew Kolodny, David T. Courtwright, Catherine S. Hwang, Peter Kreiner, John L. Eadie, Thomas W. Clark & G. Caleb Alexander, *The Prescription Opioid and Heroin Crisis: A Public Health Approach to an Epidemic of Addiction*, ANN. REV. PUB. HEALTH, Vol. 36:559-574 (March 2015), <https://bit.ly/2KAB2Eb>.

<sup>2</sup> Eilene Zimmerman, *The Lawyer, the Addict*, N.Y. TIMES, July 15, 2017, <https://nyti.ms/2QQw20t>.

<sup>3</sup> Lynne Pregoner, *Substance Abuse within the Legal Profession: A Symptom of a Greater Malaise*, NOTRE DAME J.L. ETHICS & PUB. POLICY, Vol. 7, Iss. (1993), <https://ntrda.me/2BzajF9>.

<sup>4</sup> U.S. Drug Enforcement Admin., Drug Facts, Fentanyl, <https://bit.ly/2BBqpOM>.

<sup>5</sup> Sandee LaMotte, *Celebrities who died from painkillers, cocaine and heroin*, CNN (Apr. 25, 2017), <https://cnn.it/2Dx9FJW>.

<sup>6</sup> Hugh Grady, *Study shows lawyers have higher rates of problem drinking and mental health issues*, IOWA LAWYER, Vol. 76, No. 4 (May 2016), <https://bit.ly/2RZs6Lh>.

<sup>7</sup> Zimmerman, *supra* note 2.

<sup>8</sup> O.F. Wahl, *Stigma as a barrier to recovery from mental illness*, TRENDS COGNITIVE SCI. (January 2012), <https://bit.ly/2r7mRO5>.

<sup>9</sup> Am. Bar Ass'n, Report from the National Task Force on Lawyer Well-Being (Nov. 9, 2018), <https://bit.ly/2ORyFOc>.

<sup>10</sup> Nat'l Inst. On Drug Abuse, Media Guide, <https://bit.ly/2Q1QBuV>.

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## ABOUT THE AUTHOR



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