

# Dopesick



## INTRODUCTION

### BRIEF BIOGRAPHY OF BETH MACY

Beth Macy was born in Urbana, Ohio, to a factory-worker mother and a housepainter father. She studied journalism at Bowling Green State University and earned a creative writing MFA from Hollins University. From 1989 to 2014, she wrote for the *Roanoke Times* in Roanoke, Virginia. Her first book, *Factory Man*, was published in 2014. The book looked at the effects of globalization on a major furniture-maker based in a small town in Virginia. Macy is perhaps best-known for her most recent book, *Dopesick*, which looks at the causes and effects of the opioid crisis and which was adapted into a streaming mini-series in 2021. Currently, Macy writes essays and op-eds for the *New York Times*.

### HISTORICAL CONTEXT

*Dopesick* is about the opioid crisis in the United States that continues into the present day. Opioids have a long history of causing addiction: even Neolithic humans realized the strange power of poppy plants. In the mid-19th century, China and Britain fought in The Opium Wars, which involved trade rights, specifically the transportation of opium. At the time, it was widely known that opium was addictive, and China's government tried to ban it. Around the same time period in the United States, many Civil War veterans who received opioids for their battlefield wounds were also showing clear signs of addiction. The current opioid epidemic began in the mid-1990s, when Purdue Pharma released OxyContin with a heavy marketing push that deliberately misled the public about the drug's addictive properties.

### RELATED LITERARY WORKS

Beth Macy is a working journalist, and her writing has been shaped by her time as a reporter for the *Roanoke Times* and an op-ed writer for the *New York Times*. She has said that her work is influenced by other recent essayists and historians, including Annie Dillard, Anne Lamott, and Will Durant. *Dopesick* in particular was inspired by Barry Meier's book *Pain Killer*, which was one of the first books to look at the burgeoning opioid epidemic and which helped draw attention to the activism of Dr. Art Van Zee (whom Macy interviews for *Dopesick*). Other books about the opioid epidemic include *Dreamland* by Sam Quinones, *Empire of Pain* by Patrick Radden Keefe, and *Pain Killer* by Barry Meier.

### KEY FACTS

- **Full Title:** *Dopesick: Dealers, Doctors, and the Drug Company That Addicted America*
- **When Written:** Mid-2010s
- **Where Written:** Roanoke, Virginia
- **When Published:** 2018
- **Literary Period:** Contemporary
- **Genre:** Nonfiction/Disease & Health Issues
- **Setting:** Appalachia, particularly rural and suburban Virginia
- **Climax:** Tess Henry is murdered in Las Vegas
- **Antagonist:** The Sackler family and Purdue Pharma
- **Point of View:** 1st person

### EXTRA CREDIT

**An Early Start.** Macy claims to have been interested in journalism since she was four years old, and at age 10, she got a job delivering papers on her bike.

**Star Power.** When asked to rate Macy's first book, *Factory Man*, Tom Hanks gave it "142 stars."



## PLOT SUMMARY

On a hot day in 2016, Beth Macy goes to a federal prison in West Virginia to interview the former heroin dealer Ronnie Jones. Many have blamed Jones for bringing tragedy to the region, due to the deaths and crimes that came in the wake of the heroin he imported, but even after Jones's imprisonment, opioids continue to decimate the region, particularly a new synthetic drug called fentanyl.

Seeking to understand the epidemic from another angle, Macy speaks to Kristi Fernandez, whose son, Jesse Bolstridge, was a high school football star who died of an overdose. Jesse was born right around the start of the epidemic, when OxyContin was first released. Unlike previous drug epidemics, this one didn't start in the cities—it began in rural places like Appalachia and the Rust Belt before eventually moving into urban and suburban centers.

OxyContin is a product of Purdue Pharma, which used to be an obscure pharmaceutical company, but which gradually grew under the ownership of the Sackler family. The company used to produce a popular end-of-life painkiller drug, but when the patent on that drug was about to expire, they launched OxyContin to replace it, giving their new drug a massive publicity push. The company deliberately covers up how addictive OxyContin is, citing outdated data, but few in the medical community push back.

OxyContin does, however, have some early opponents: the small-town Virginia doctor Art Van Zee; his wife and accomplice, Sue Ella Kobak; and a fiery drug counselor and Catholic nun named Sister Beth Davies. As a doctor who is used to being an outsider, Van Zee is among the first to notice the harmful effects of OxyContin when it comes to his Lee County community. He, Sue Ella, and Sister Beth hold community meetings to organize resistance to the drug and to Purdue Pharma.

Progress against Purdue is slow, with the company refusing to yield to the demands of protesters. Early court cases against the company are unsuccessful, with judges ruling that there simply isn't enough evidence to indict the company. Finally, however, in 2005 a federal grand jury investigates the company.

In 2007, Purdue Pharma accepts a plea deal. Though the occasion is a milestone for activists against OxyContin, it is also a bit of a letdown for them—the charges are significantly less than they could have been, and the Sackler family is still nowhere near the courtroom.

The book also looks at how the opioid epidemic has been directly affecting victims and their families. One tragic story is the story of former high school classmates Scott Roth and Spencer Mumford. Spencer sold Scott the heroin that led Scott to have a fatal overdose. As a result, Spencer gets sent to federal prison. Scott's mother Robin Roth is devastated and wants nothing to do with Spencer (although later, she will begin to take a softer stance toward him, and Spencer will write an apology letter from jail). Spencer's mother Ginger Mumford, a local community leader, remains there for her son the whole time, and she helps him begin to turn his life around after he hits rock bottom in jail. In Roanoke (the hometown of author Beth Macy), Scott's death is a shocking turning point that helps many wake up to the seriousness of the opioid epidemic.

Meanwhile, in the western part of Virginia, before he ended up in federal prison, Ronnie Jones was the head dealer of a heroin ring that operated in Woodstock, Virginia. Law enforcement officials Brent Lutz and Bill Metcalf are obsessed with tracking Jones down, but at first all they know about him is his nickname: D.C. Eventually, however, arrests of subdealers in Jones's ring give the officers enough evidence to arrest and charge Jones. The break-up of Jones's heroin ring doesn't stop the flow of heroin into Woodstock, however. Like Whack-a-mole, new sources of the drug just keep popping up, including a deadly new synthetic strain of heroin called fentanyl.

One of the addicts that Macy gets to know best over the course of her reporting is a young mother by the name of Tess Henry. Tess used to be a star high school athlete, but after she is prescribed opioids during a routine urgent care visit, she quickly becomes an addict. She turns to theft and ends up in prison, only learning there that she is in the second trimester of a pregnancy. After the birth of her son, Tess tries to get her life

together so that she can be a better mother. Her own mother, Patricia, is eager to help.

As time goes by, however, Tess seems to be less interested in seeking treatment. She stops going to Narcotics Anonymous meetings (which Macy was driving her to) and soon it is clear she is using again. She starts losing touch with her family and turns to prostitution.

After a visit to a psych ward, however, Tess again gets serious about treatment. Her family sends her to a program in Nevada, and at first, she seems to be making progress. Eventually, however, she leaves the program for Las Vegas and is back to using. She contacts her mother with paranoid and disturbing messages. She talks about wanting to come home but procrastinates about getting the proper paperwork.

Finally, one day just after Christmas, Patricia gets the news that her daughter Tess has been murdered in Las Vegas. The body is shipped back to Virginia. At a viewing, on what would've been Tess's 29th birthday, Patricia looks at Tess's body and sticks some mementos into Tess's clothes, including a picture of her toddler son.



## CHARACTERS

### MAJOR CHARACTERS

**Tess Henry** – Tess Henry is a young mother from the Hidden Valley region of Virginia and the daughter of Patricia Mehrmann. Tess first begins telling her life story to Beth Macy in 2015. The daughter of a local surgeon and nurse, as well as a star high school athlete, she eventually develops a \$200-a-day heroin addiction in college after a routine visit to urgent care ends with her getting an opioid prescription. Like many young addicts, her good health helps disguise her addiction for a while, but eventually it becomes impossible to hide, particularly after she turns to theft to help pay for her addiction. She is caught attempting to rob a hardware store and gets sent to jail where she learns that she is in the second trimester of pregnancy. Although the birth of her son initially helps her center her life around a new goal, eventually Tess is back to using, straining her relationship with her family and starting a downward spiral. Jamie Waldrop tries to offer help to Tess through the Hope Initiative and even author Beth Macy blurs the lines between journalist and subject when she takes Tess to Narcotics Anonymous meetings. But despite brief periods of wanting treatment (often right after a trip to the psych ward), Tess seems unable to break her cycle of addiction. Eventually, she ends up going to a treatment facility in Nevada, where she seems to make progress, but once again, she just ends up back to her old habits in Las Vegas. The day after Christmas, Patricia gets the shocking news that Tess has been murdered in Las Vegas. Tess represents the complexities and contradictions of life as an addict. As the course of her life shows, although she

had good intentions to be a better mother and daughter, she also frequently acted in ways that seemed to be against her own best interests—all motivated by her addiction. Macy tells Tess's story to explore and humanize the tragic side of the opioid epidemic: how even young healthy people with good intentions and a support network are sometimes unable to win their battles against addiction.

**Dr. Art Van Zee** – Art Van Zee is a doctor in impoverished Lee County, Virginia, who looks a little like Abraham Lincoln. He's cited by writer Barry Meier as being one of the first people to raise the alarm about the opioid epidemic. Married to Sue Ella Kobak, and frequently collaborating with fellow activist Sister Beth Davies and health administrator Sue Cantrell, Van Zee becomes a leader in the grassroots movement to expose the harmful effects of OxyContin. Originally from Nevada, and educated at Vanderbilt, Van Zee moves to Virginia in order to help a medically underserved community, and he quickly gains a reputation as an excellent doctor. He is concerned, however, when he sees the effects that opioids are having on his local community—and how many of his peers in medicine are overprescribing OxyContin, apparently buying in to marketing hype without considering the consequences. It's only after going to public meetings and following the news in other parts of the country that Van Zee learns that the opioid crisis isn't just a locally issue—it's impacting communities across the country. Van Zee begins aggressively contacting the Sackler family's Purdue Pharma (creator of OxyContin) and even gets a meeting with their medical director, Dr. J. David Haddox, but for the most part, the company refuses to hear his warnings about the addictive properties of OxyContin. Van Zee faces a difficult decision when Purdue offers grants of \$100,000 to help Appalachian communities affected by opioids (although the "grants" are really more like bribes to silence opponents). Van Zee initially thinks the money could do a lot of good, but Sister Beth talks him and the others out of accepting it, arguing that it's never good to take "blood money." Van Zee eventually sees Purdue Pharma executives put on trial for their role in creating the opioid crisis, but the sentences end up being relatively light, and the Sackler family avoids any serious consequences. Van Zee represents the persistence of activists in the early opioid crisis. It took outsiders like Van Zee to challenge accepted wisdom in the medical community about opioids, and while these outsiders were often frustrated and often fell short of their goals, they still played a key role in drawing greater attention to the issue.

**Ronnie "D.C." Jones** – Ronnie Jones is a Black man in his 30s who is the head dealer in a heroin ring that runs drugs along **Interstate 81**, from Harlem to Woodstock, Virginia. Jones is the one who sells the heroin that kills Kristi Fernandez's son Jesse Bolstridge (although later in prison, he doesn't specifically remember Jesse). Author Beth Macy interviews Jones in prison, hoping that his story will help tie up loose ends

about the opioid epidemic in western Virginia. While Jones can't provide closure for Fernandez's story, his experiences do help Macy explore the role of race in the opioid crisis. Jones was in and out of prison starting at an early age. His lack of support after he got out of prison, particularly his difficulties with finding well-paying work, is a large part of what motivated him to start dealing heroin. His brother, Thomas, who grew up with Ronnie, goes on to be an internationally famous rapper, suggesting that maybe Jones too could have had a bright future in different circumstances. When Jones starts dealing, he predicts that he'll last three to six months, and his prediction ends up being exactly right. After Jones is caught, he doesn't snitch or offer much in the way of remorse, suggesting that he always knew the potential consequences of his dealing and is willing to face them. Jones' arrest does little to cut off the supply of heroin in western Virginia—in fact, soon after, fentanyl comes to the region, bringing even more overdoses. Ultimately, while Jones is a flawed person, Macy realizes that he bears much less personal responsibility for the opioid epidemic than people in the pharmaceutical industry, like the Sackler family.

**Kristi Fernandez** – Kristi Fernandez is a mother from the Shenandoah Valley region of Virginia whose son, Jesse Bolstridge, dies of an overdose in 2013. Fernandez becomes obsessed with finding out what happened to her son—how he went from a high school football star to an opioid-addicted construction worker to a victim of a fatal overdose. She and her family continue to visit Jesse's grave and keep it clean. Despite her grief over her son's death, Kristi's relationship with Jesse wasn't always easy when he was alive. At one point, Fernandez had to install a lock on her bedroom door so that her son wouldn't be tempted to steal any valuables (which he could sell to buy more pills or heroin). Fernandez eagerly agrees to speak with Beth Macy for *Dopesick*, hoping the experience will shed new light on her son's death. She is disappointed, however, when Ronnie Jones (the dealer who sold Jesse his fatal heroin) doesn't apologize and when his arrest doesn't seem to do anything to stop the flow of opioids into the region. Kristi represents not just the heartbreak that families of opioid victims have experienced but also the frustration—much of her son's drug use was hidden from her, and she struggles to learn what even happened to him, long after his death.

**Jesse Bolstridge** – Jesse Bolstridge, son of Kristi Fernandez, was a former star high school linebacker who died of an overdose in 2013. As a boy, Jesse was popular and excitable, but eventually his energetic behavior in class gets him a prescription for Ritalin. In time, he moves on from Ritalin to more serious painkillers, trading Adderall to his high school classmates in exchange for stronger stuff. At first, he's able to hide his habit from his mother, but eventually his problem becomes too large to cover up. Eventually, Jesse is sent to rehab, and he is weaned off of opiates via MAT—a controversial

practice now that was more common at the time. The former start athlete becomes a construction worker and starts stealing things from his family to fuel his addiction, but he still struggles with money. Just before his death, Jesse is scheduled to fly out to Florida for another attempt at treatment, but his friend Dennis invites him to go on one last bender, in part because both of them are struggling with dopesickness. Jesse agrees, and this leads to his fatal overdose. Jesse's life represents not just the incredible power that opioids are able to exert over addicts but also the many frustrating questions that addicts leave behind for their families when they ultimately succumb to the drug.

**Spencer Mumpower** – Spencer Mumpower, son of Ginger Mumpower, is a young man from Roanoke, Virginia, who goes to prison in 2012 for selling his former classmate Scott Roth the heroin that leads to his fatal overdose. Spencer and Scott have not seen each other for three years—since high school—when Scott shows up to buy heroin from Spencer. By then, Scott is a full-blown junkie, barely weighing 135 pounds. After Scott fatally overdoses, Spencer is arrested and sentenced to federal prison. Though he struggles at first, eventually Spencer hits rock bottom and begins to turn his life around. In prison, he discovers martial arts and funnels his energy into that, creating a new, healthier addiction. He eventually attempts to apologize to Robin Roth (Scott's mother). Although it will be a long time until Robin is ready to hear from Spencer, eventually she will take a softer stance toward him, realizing that, in some ways, he's a victim too. Despite the prison sentence, in many ways Spencer is lucky. His mother is able to be very supportive, both emotionally and financially, and this helps get him on track to turn his life around. While it's clear that no amount of privilege is enough to fully protect someone from the opioid crisis, the story of Spencer Mumpower shows that the right support and treatment can help some people turn their lives around, even when they've done things they regret.

**Sister Beth Davies** – Sister Beth Davies is a Catholic nun and activist who works closely with Dr. Art Van Zee, Sue Ella Kobak, and Sue Cantrell in her activism against opioid addiction in the impoverished Lee County region of Virginia. She is originally from Staten Island, and before becoming a crusader against OxyContin, she had a history of activism on behalf of **coal** miners. Though she may seem unassuming at only five feet tall, Sister Beth is known for her fierce determination. At one point, when Purdue Pharma offers \$100,000 to local communities to deal with the effects of opioids, Sister Beth is the sole dissenter who believes they should avoid taking “blood money.” Eventually, she is able to convince the other Lee County activists to see things her way, and they ultimately reject the money. Sister Beth is also one of the first to realize that for recovering addicts, MAT is more effective than twelve-step programs alone. Though Sister Beth is not a traditional medical

expert, she is knowledgeable and passionate, showing what persistent outsiders can accomplish in the face of pharmaceutical companies with much more money and resources.

**Scott Roth** – Scott Roth, son of Robin Roth, is a young man from Roanoke, Virginia, who dies of an overdose on heroin that he bought from his former classmate Spencer Mumpower. Growing up, Scott is well-liked and known for his life-of-the-party personality. Eventually, Scott gets addicted to opioids. He has been on and off drugs since at least 2006 (when he was 17), but for a while, he is able to hide his habit from his mother, claiming that he's only doing weed (when, in fact, he was already doing heroin). Scott's death is one of the first ones in the Roanoke region to receive major attention, and it leads to the federal imprisonment of Spencer. Scott's mother continues to mourn her son's death, even eight years later when she speaks to Macy for the book. Scott represents how the opioid epidemic was able to stay stealthy in its early days—and how later, it burst into the open, fracturing communities in unexpected ways.

**Sue Ella Kobak** – Sue Ella Kobak is a lawyer and activist who is married to Dr. Art Van Zee and who was a close collaborator with fellow activist Sister Beth Davies in the early days of the opioid epidemic. She first meets Van Zee at an NAACP rally, and she opts not to change her name after they're married. Though Sue Ella is committed to exposing the harmful effects of OxyContin (as well as the lengths that the Sackler family and Purdue Pharma have gone to hide these harmful effects), she sometimes worries that her husband's patient caseload combined with his activism is too much work for him. One of Sue Ella's biggest contributions to the movement is when she scores some documents that Purdue Pharma filed when they applied for FDA approval of OxyContin—these documents prove that Purdue knew about the harmful effects of the drug early on, despite their claims to the contrary. Like her husband, Van Zee, Sue Ella represents how early activists in the opioid crisis struggled to be heard and how they were frequently frustrated. But she also represents how through persistence they were ultimately able to bring greater awareness to the issue and effect change, even if the changes are still short of what they originally hoped to accomplish.

**Beth Macy** – Beth Macy is a journalist from Roanoke, Virginia, and the author of *Dopesick*. Although the book isn't a memoir, she does occasionally insert herself into the story, usually to explain the process of interviewing her sources for the book. While Macy typically tries to keep a journalistic distance from her subjects, occasionally the lines get blurred, such as when Macy begins driving opioid-addict Tess Henry to her Narcotics Anonymous meetings. Macy faces a hard choice when she receives garbled text messages from Tess asking Macy to come immediately to help. Ultimately, Macy decides to forward the messages to Tess's mother, Patricia, and to an advocate at a



local addiction clinic, Jamie Waldrop. Macy's relationship with Tess shows that, while she doesn't believe in blindly following rules, she also has strong journalistic ethics, making her a credible source to report on the opioid epidemic.

**Patricia Mehrmann** – Patricia is the mother of Tess Henry. She remains committed to getting help for her opioid-addicted daughter right up to the moment of Tess's death. She seeks help from Hope Initiative members like Jamie Waldrop, and at times they really do seem to be making progress in treating Tess's addiction. Ultimately, however, Patricia's story is tragic, as Tess is murdered just days before her 29th birthday. The final image in *Dopesick* is Patricia grieving over Tess's body, suggesting that the toll of the opioid epidemic is not just the lives lost but also the devastated family members that they leave behind.

**The Sackler Family (Mortimer, Raymond, and Arthur)** – The Sackler family are the owners of Purdue Pharma, the company that created OxyContin and which author Beth Macy calls "The Company That Addicted America." Purdue was an obscure pharmaceutical company when it was founded in 1892. The Sackler family (brothers Mortimer, Raymond, and Arthur) took it over in 1952, and it was later owned by their descendants. They gradually grew the company, first getting into painkillers in the 1980s, then releasing the massively popular OxyContin in the mid-1990s. Despite widespread evidence that OxyContin causes addiction (as well as historical precedent about addiction from other opioids), the Sacklers try to cover this up, with the help of Purdue executives and aggressive lawyers, including Dr. J. David Haddox and Howard Udell. Despite their pivotal role in creating the opioid crisis, the Sacklers generally avoid having to face any consequences for it and remain wealthy.

**Dr. Sue Cantrell** – Sue Cantrell is a former pharmacist and long-time health-department director in Virginia who works to combat the harmful effects of OxyContin, sometimes collaborating with Art Van Zee, Sue Ella, and Sister Beth. She notices the opioid epidemic early, noting that it comes at a particularly bad time when the lack of mining jobs has caused widespread poverty in Appalachia. Her early efforts to raise awareness, however, are mostly met with silence, and officials are eager to pass the blame elsewhere. Eventually, however, the broader public does begin to recognize the extent of the crisis. Cantrell continues to work on the front lines, advocating for programs like needle exchanges that are a hard sell to some audiences but which have been proven to be the most effective options.

**Jamie Waldrop** – Jamie Waldrop is the mother of former opioid addict Christopher. She meets Drenna Banks at a Families Anonymous meeting and becomes involved with the Hope Initiative for addiction treatment that Chris Perkins founds. After helping her son, Christopher, through many rounds of expensive rehab, she tries to help others struggling

with addiction in her local area, including Tess Henry. Though she initially opposes addiction treatments that involve medication, like buprenorphine, she keeps an open mind and becomes an influential advocate for people struggling with addiction in her area.

**Dr. J. David Haddox** – Dr. J. David Haddox is the head pain specialist at Purdue Pharma, working on behalf of the Sackler family to sell OxyContin as an effective, non-addictive painkiller. Haddox plays a key role in spreading false information for the company, often citing an outdated source that allegedly proves that OxyContin isn't addictive. He is known to harass journalists who cover opioid-related crime and ultimately acts as the face of Purdue's misleading marketing campaign for OxyContin.

**Ginger Mumpower** – Ginger Mumpower is a community leader in Roanoke, Virginia, who is shocked when she finds out that her son, Spencer, has sold heroin to Scott Roth that led to his fatal overdose. Throughout the experience, she remains supportive of her son, spending large amounts of money to send him to rehab and visiting him in federal prison almost every weekend. Ultimately, Spencer is able to start turning his life around, but although his success story provides some hope, others in Roanoke have not been as lucky.

**Dr. Steve Huff** – Steve Huff is a doctor based in Laurel Fork, Virginia, who begins to notice the insidious effects of pharmaceutical marketing on doctors around the turn of the millennium. While many of his peers accept swag and meals from pharmaceutical reps, Huff makes a deliberate point to avoid these sorts of interactions. When he takes over a new practice, he heavily cuts back on opioid painkiller prescriptions compared to his predecessors and is shocked by how violently patients oppose this change.

**Christopher Waldrop** – Christopher Waldrop is an opioid addict and the son of Jamie Waldrop. The death of his friend Colton Banks is one of many wake-up calls that causes Christopher to reevaluate his life and try to get clean. With the help of his mother and several expensive stints at rehab, he is ultimately able to stop using.

**Chris Perkins** – Chris Perkins is a retiring Virginia police chief who wants to do something good before he leaves the force, so he founds the Hope Initiative to help recovering addicts. The initiative attracts Janine Underwood and Jamie Waldrop, who both become active in it. Modeled after similar initiatives in Massachusetts, the Hope Initiative faces early stumbles and bureaucratic roadblocks, but it slowly grows to help provide support for local addicts and fill in gaps in the state's patchwork treatment programs. He, Janine, and Jamie represent how motivated local volunteers can help do what traditional healthcare doesn't.

**Janine Underwood** – Janine Underwood is the executive director of Chris Perkins's Hope Initiative and the mother of

Bobby (who dies of a fentanyl overdose). She works with other concerned community members, including Jamie Waldrop, to help addicts in the Hidden Valley region of Virginia get connected to treatment. Though she is skeptical of harm reduction approaches to addiction and of medication-assisted treatment (MAT), she keeps an open mind and doesn't let this prevent her from referring some Hope Initiative people to MAT. Janine provides a model for how motivated people can get involved to help improve their local communities.

**Drenna Banks** – Drenna Banks is the mother of Colton Banks, who dies young of an overdose. She connects with Jamie Waldrop at a Families Anonymous meeting and they bond over their shared struggles with their opioid-addicted sons. Drenna hopes that her son's funeral can be the last of its kind for the area and pleads to Christopher Waldrop that his friend Colton would want him to get clean.

**Teresa Gardner Tyson** – Teresa Gardner Tyson hosts a major medical outreach event called Remote Area Medical (RAM), which provides support to the uninsured of southwestern Virginia. Reporters who come to RAM are often surprised by the scale of the event, comparing it to disaster relief in Third World countries. Tyson remains enthusiastic despite setbacks and slow progress, and Macy sees her as an inspirational model for what people can achieve for healthcare on the local level while the federal government remains so slow to respond.

**Brent Lutz** – Brent Lutz is a police sergeant in Woodstock, Virginia, who teams up with Bill Metcalf to investigate a heroin ring that is running drugs from Harlem down [Interstate 81](#) to Woodstock. The chief suspect is a mysterious man known at first only as D.C., later revealed to be Ronnie Jones. Lutz's dedication to tracking D.C. and ending the heroin ring begins to take over his life, causing him to work on holidays. It turns into his own version of addiction. Ultimately, Lutz is successful in tracking down and arresting Ronnie Jones, but this does little to stem the opioid epidemic in Woodstock, particularly after fentanyl begins making its way into the region, leading to even more overdose deaths.

**Bill Metcalf** – Bill Metcalf is an agent for the Bureau of Alcohol, Tobacco, Firearms, and Explosives who teams up with Brent Lutz to track down Ronnie "D.C." Jones, the head dealer for a heroin ring that supplies drugs to Woodstock, Virginia. Metcalf is known for being aggressive—too aggressive, according to some colleagues—and likes to imagine himself as the hero of a cop show. He succeeds in arresting Jones and Jones's Harlem supplier, Mack, but this has little effect on the flow of dangerous opioids coming into Woodstock.

**Richard Stallard** – Richard Stallard is a police lieutenant in a relatively poor region of Virginia known as Lee County. He is on the front lines of the opioid epidemic, seeing firsthand what OxyContin is doing to local communities: increasing crime as desperate dealers look for ways to get money and pills to avoid

feeling dopesick. Later, Purdue Pharma will offer "grants" to try to encourage community leaders like Stallard to keep quiet.

**Heinrich Dreser** – In the 1890s, Heinrich Dreser was a chemist at the pharmaceutical company Bayer who was responsible for creating heroin. He hoped it would be a safe replacement for addictive opioids like opium and morphine, but in fact, it caused a new wave of addiction after doctors over-prescribed it. Dreser's story is a cautionary tale that parallels and foreshadows the more recent opioid epidemic.

**Ed Bisch** – Ed Bisch is a father from Philadelphia who doesn't know anything about OxyContin or the opioid epidemic until the day that he learns his son Eddie has fatally overdosed. His son's death inspires him to create the website [OxyKills.com](#), which becomes one of the first places online where families of victims of the opioid epidemic can gather to share their stories.

**Lee Nuss** – Less Nuss is a mother from Philadelphia who loses her 18-year-old son Randy to the opioid epidemic. After connecting with Ed Bisch (who shares a similar story), the two join the mission of activists like Art Van Zee and Sister Beth, founding a grassroots organization called Relatives Against Purdue Pharma (RAPP).

**Barry Meier** – Barry Meier is the author of the 2003 book *Pain Killer*, perhaps the first major book to look at the harmful addictive effects of OxyContin. His book looks at the work of Dr. Art Van Zee, and this is how *Dopesick* author Beth Macy first hears about him. Meier covers the opioid beat at the *New York Times*, but he gets taken off of it after Howard Udell from Purdue Pharma complains that Meier has a conflict of interest.

**Barbara Van Rooyan** – Barbara Van Rooyan is a mother from Virginia whose son, Patrick, becomes a victim of the opioid epidemic at age 24. She becomes a vocal advocate against OxyContin, petitioning the FDA to recall it. Along the way, she joins forces with fellow activists like Art Van Zee and Sister Beth. Staffers at the FDA become familiar with Van Rooyan due to her frequent calls. Eventually, the FDA makes good on what she asks for in her petitions, but the response is too little too late.

**John L. Brownlee** – John L. Brownlee is a former paratrooper turned prosecutor in his mid-30s who hopes to make a name for himself by taking difficult cases against Purdue Pharma and OxyContin. He and his office's fraud investigator, Gregg Wood, keep detailed files of Purdue's misdeeds in order to build a case against the company. Despite many initial failures, he is ultimately able to get a plea deal out of Purdue in 2007. Though many activists believe the punishment for Purdue is too lenient, the case still represents the first significant win against the company.

**Fayne McCauley** – Fayne McCauley is a miner from Lee County Virginia who is one of the first clients to face Purdue Pharma in court, after he got addicted to OxyContin in the 1990s when it was prescribed for a shoulder injury. The judge

rules that there isn't enough evidence to back up McCauley's claims. McCauley dies in 2009, seemingly murdered over drugs.

**Paul Goldenheim** – Paul Goldenheim is Purdue Pharma's medical director. When Purdue becomes the target of a federal investigation for its role in the opioid crisis, it takes a plea deal in 2007, and Goldenheim is charged with a federal crime (along with Michael Friedman and Howard Udell), though he gets a more lenient sentence than many activists against OxyContin feel he deserves. Notably, the Sackler family is absent from the courtroom when Goldenheim is charged.

**Michael Friedman** – Michael Friedman is the CEO of Purdue Pharma when, in 2007, the company accepts a plea deal for its role in manufacturing the opioid crisis. Along with Paul Goldenheim and Howard Udell, he is sentenced for a federal crime, although the charges are considerably lighter than they could have been. His sentencing helps keep attention away from the Sackler family, who remain wealthy even after the plea deal.

**Howard Udell** – Howard Udell is a lawyer for Purdue Pharma who aggressively defends the company's controversial practices on behalf of the Sackler family. At one point, he gets the journalist Barry Meier taken off the opioid beat at the *New York Times*. Ultimately, Udell ends up being one of the ones charged with a federal crime (along with Paul Goldenheim and Michael Friedman) when Purdue takes a plea deal in 2007.

**Brandon Perullo** – Brandon Perullo is a young opioid addict in Roanoke, Virginia, who makes the news in 2010 when he attempts to rob a bank. News reports focus more on the sensational nature of the attempted robbery than on the opioid addiction that led to his behavior. Once he is released from prison he dies, perhaps of suicide to avoid dopesickness (as his mother, Laura Hadden, believes).

**Don Wolthuis** – Don Wolthuis is a prosecutor in Roanoke, Virginia, who specializes in "death cases" that involve prosecuting people who have sold drugs that led to fatal overdoses. He keeps an open case file about Jesse Bolstridge, because he believes Jesse's overdose death was related to a local heroin ring (run by Ronnie "D.C." Jones), but he doesn't have enough evidence to prove it.

**Dennis** – Dennis is a friend of Jesse Bolstridge who convinces him to do heroin on the day that he has a fatal overdose. Jesse's mother, Kristi Fernandez, believes at one point that Dennis may be withholding information about the day that Jesse died. Dennis, however, tries to honor Jesse's memory by naming his son after him. Eventually, Dennis moves to a new city in an attempt to find a "geographic cure" for his addiction.

**Jordan "Joey" Gilbert** – Joey is a friend of Tess's who dies young of an overdose. Her death is particularly tragic because she wanted treatment but had to wean herself off MAT so that the treatment facility would accept her. Her death highlights

the sometimes-fatal consequences of medical bureaucracy in the U.S. Joey's funeral also forces Patricia to imagine what things would be like if her daughter, Tess, were the one in the coffin instead.

**Andrew Bassford** – Andrew Bassford is the man who prosecutes the case of Ashlyn Keikilani Kessler. He has a noteworthy love of former president James Garfield and wears cowboy boots to make himself look like a TV cop. Despite his dedication to prosecuting drug cases, he remains cynical, likening his work to "Whack-A-Mole": new dealers just keep popping up.

**Thomas Jones** – Thomas Jones is the brother of Ronnie "D.C." Jones and raps under the name Big Pooh, touring around the world. He suspected that his brother's stories about running a computer repair shop may be false, but he is still shocked to learn about his brother's heroin ring. He tries to express his complicated feelings toward his brother in song.

**Dr. Steve Lloyd** – Dr. Steve Lloyd is a former opioid addict who becomes a charismatic speaker against addiction. As a doctor, he benefited from a rigorous (and expensive) recovery program that was available to him, but he argues that investing more resources into treatment could greatly improve the results for recovering addicts. He is a big believer in second chances and represents the optimism that many fighting the opioid maintain in spite of all the odds against them.

**Rudy Giuliani** – Rudy Giuliani was the mayor of New York City during 9/11, and he becomes a consultant for Purdue Pharma to help rehabilitate their image. His influence and star power show how Purdue Pharma had vastly more influence than its critics like Art Van Zee and Sister Beth, who in spite of their expertise, were largely outsiders with little budget.

**Matthew "Mack" Santiago** – Mack is the Harlem supplier for the Woodstock, Virginia, heroin ring run by dealer Ronnie "D.C." Jones. Mack remains mysterious, known only by his nickname and completely eluding investigators Lutz and Metcalf at first. He has a lot of resources at his disposal, including several assistants. Eventually, however, he slips up on some financial records and gets arrested while walking the dog near his Brooklyn home. He gets a lesser sentence than Jones or Jones' collaborator because he was only a "flipper," not someone working at the street level the way they were.

## MINOR CHARACTERS

**Colton Banks** – Colton Banks is the son of Drenna Banks and a young opioid addict who dies during what would have been his last hurrah before a stint in rehab. His death shocks the local community and helps his friend Christopher Waldrop find the motivation to break his addiction.

**Debbie Honaker** – Debbie Honaker is a mother from a county in Virginia near where Dr. Art Van Zee works. She is one of many Virginia residents who is prescribed heavy painkillers

after routine surgery and who suddenly ends up an addict, having a near-death experience and going to jail.

**Crystal Street** – Crystal Street is a patient at the same addiction clinic as Debbie Honaker, and the two have similar life stories. Addiction runs in her family—her octogenarian father is addicted to Dilaudid and sells prescription pills from his nursing home bed.

**Eddie Bisch** – Eddie Bisch is the son of Ed Bisch. His death (by fatal opioid overdose) inspires his father to create the website OxyKills.com, where families of OxyContin victims gather to share their stories.

**Randy Nuss** – Randy Nuss is an 18-year-old boy from Philadelphia who dies of an opioid overdose and whose death inspires his mother, Lee Nuss, to become an activist against OxyContin and Purdue Pharma.

**Patrick Van Rooyan** – Patrick is the 24-year-old son of Barbara Van Rooyan. His death of an opioid overdose motivates his mother to become an active critic of the FDA and its role in approving OxyContin.

**Gregg Wood** – Gregg Wood is the chief fraud investigator at the office of John L. Brownlee. Wood builds such a thorough archive of Purdue Pharma's various misdeeds that he needs to rent space at a local strip mall to store all the files.

**Lisa Green** – Lisa Green is the daughter of Fayne McCauley. She remembers her father's many attempts at rehab before his eventual death in October 2009.

**Randy Ramseyer and Rick Mountcastle** – Randy Ramseyer and Rick Mountcastle are the U.S. attorneys who lead the 2005 case against Purdue Pharma for its role in creating the opioid crisis. Although they like the spotlight less than John L. Brownlee, they have a history of getting convictions against overprescribing doctors.

**Jamey Singleton and Marc Lamarre** – Jamey Singleton and Marc Lamarre are meteorologists in Beth Macy's hometown of Roanoke, Virginia. When news breaks that both of them are major opioid users, it causes a sensation in the local news, marking a transition between the opioid epidemic's stealth early phase and more open later phases.

**Clifton "Lite" Lee** – Clifton "Lite" Lee is a heroin dealer from Philadelphia who helps popularize the drug in Roanoke, Virginia.

**Laura Hadden** – Laura Hadden is the mother of Brandon Perullo. She tries to use her son's opioid addiction to draw more attention to the issue, but many of the people she reaches out to just ignore her.

**Brian** – Brian is a member of the same Hidden Valley, Virginia, group of opioid users as Spencer Mumpower. While in recovery, he agrees to tell his story to Beth Macy.

**Devon Gray** – Devon Gray is a key distributor for heroin dealer

Ronnie "D.C." Jones. Gray's arrest at a routine traffic stop helps lead to the later arrest of Jones.

**Kareem Shaw** – Kareem Shaw is another major dealer in the same Woodstock, Virginia, heroin ring as Ronnie "D.C." Jones. He is arrested after Jones, but unlike Jones, he agrees to cooperate with the police and gets a lighter sentence as a result.

**Marie** – Marie is a user-dealer associated with Ronnie "D.C." Jones who gives the police enough information for them to arrest Jones.

**Ashlyn Keikilani Kessler** – Ashlyn is a young mother from the suburbs of Roanoke, Virginia, who gets addicted to opioids through OxyContin and who finds she can take vast quantities of heroin without overdosing. She turns to selling to fund her habit and gets sentenced to seven-and-a-half years in a federal women's prison.

**Bobby** – Bobby is the son of Janine, and his death of a fentanyl overdose inspires her to join Chris Perkins's Hope Initiative as the executive director.

**Rosemary Hopkins** – Rosemary Hopkins is a Virginia OxyContin addict and a patient of Van Zee's who believes that the pain killer is part of a government conspiracy to deliberately get rid of "low lifes."

**Bryan Stevenson** – Bryan Stevenson is the author of [Just Mercy](#) and founder of the Equal Justice Initiative. Macy interviews him to better understand the case of Ronnie "D.C." Jones, and he helps explain unfairness in the U.S. criminal justice system, particularly the challenges that former prisoners face once they're free.

**Robin Roth** The mother of Scott. She is unable to help her son get off drugs, and he dies of a heroin overdose.

## TERMS

**Adderall** – Like Ritalin, Adderall is a drug used to treat ADHD. It can be abused as a "study drug" and young people who are prescribed Adderall sometimes progress to taking stronger drugs.

**Buprenorphine** – Buprenorphine is the generic name for a drug used in MAT to treat recovering addicts.

**DEA** – DEA is a commonly used acronym for the Drug Enforcement Administration. It is the government branch that deals with drug trafficking and distribution. Many people, including *Dopesick* author Beth Macy, criticize the way the DEA operates, particularly the way that its investigations can lead to long jail time for small-time users.

**Dilaudid** – Similar to OxyContin, Dilaudid is a heavy opioid painkiller that can cause addiction and lead to abuse.

**Dopesick** – Dopesickness is a colloquial term for symptoms of



withdrawal that come when a person suddenly stops using opioids (the opioid heroin is sometimes called “dope”). It’s extremely unpleasant, and some addicts keep using just to avoid the effects of dopesickness. The book is titled *Dopesick* not just because of this slang term, but also because the United States itself is “sick” from the opioid epidemic.

**Fentanyl** – Fentanyl is a synthetic opioid that is up to 100 times more powerful than morphine. It leads to more overdoses than even heroin, in part because fentanyl is sometimes mixed with other drugs, causing users to take it unknowingly.

**Iatrogenic** – Iatrogenic means caused by a doctor. If a doctor overprescribes opioids, it can lead to iatrogenic addiction.

**MAT** – MAT is the acronym for medication-assisted treatment. It involves treating opioid addicts with less powerful drugs in order to help them cope with their addiction and avoid dopesickness. Although MAT has been proven to be perhaps the most effective treatment option available for addiction, it can be controversial, partly because of the cost and partly because many treatment centers advocate for “abstinence-only” treatment (which has been proven to be less effective).

**Medicaid** – Medicaid is public health insurance in the United States for people with low income. Many states were given the option to expand Medicaid after the passage of the Affordable Care Act in 2010, an option opposed by many conservatives. Some opioid addicts face difficulties because they have Medicaid insurance that doesn’t cover their necessary treatments.

**Methadone** – Methadone is the generic name for a drug used in MAT to treat recovering addicts.

**Naloxone** – Naloxone is the generic name for Narcan, a drug that can be used to reverse the effects of an overdose.

**Naltrexone** – Naltrexone is the generic name for a drug used in MAT to treat recovering addicts.

**Narcan** – Narcan is the brand name for naloxone, a drug that can be used to reverse the effects of an overdose.

**Opioid** – An opioid is a compound that resembles opium, and it refers to a wide range of legal and illegal drugs associated with pain relief (including heroin, codeine, and OxyContin). While there are legitimate medical uses for opioids as painkillers, even legal opioids can lead to addiction and may be abused. One of the reasons that opioid addiction is so difficult to treat is because addicts who try to wean themselves off the drugs often experience dopesickness.

**OxyContin** – OxyContin is the drug that caused the opioid crisis. Introduced by Purdue Pharma in the mid-1990s, the drug was heavily marketed and overprescribed, in part because executives at Purdue misled the public about the drug’s addictive properties.

**Ritalin** – Like Adderall, Ritalin is a drug used to treat ADHD. It can be abused as a “study drug” and young people who are

prescribed Ritalin sometimes progress to taking stronger drugs.

**Suboxone** – Suboxone is the brand name for buprenorphine and naloxone, drugs used for MAT to treat recovering addicts.



## THEMES

In LitCharts literature guides, each theme gets its own color-coded icon. These icons make it easy to track where the themes occur most prominently throughout the work. If you don't have a color printer, you can still use the icons to track themes in black and white.



### POVERTY AS AN OBSTACLE TO RECOVERY

The current opioid crisis has affected people from all economic backgrounds, rich and poor. But *Dopesick* depicts how the poorest victims of the epidemic often face the most difficult path to recovery. Poorer people who want to seek treatment often face significant obstacles, including long wait lists, high treatment costs, and stringent requirements to qualify for aid. Furthermore, in order to save money, many states and local governments have limited the resources available to recovering addicts, creating conditions that lead to shorter stays at residential treatment centers, more outpatient treatment, and more abstinence-only treatment (as opposed to medication-assisted treatment, which is often more effective). To illustrate specifically how the U.S. healthcare system fails patients, author Beth Macy looks not just at broader studies, but also at the stories of individual people who have struggled to get treatment, either because they didn’t have the money to pay for it or because they faced bureaucratic hurdles. Tess Henry is one notable example: she faced a difficult decision over her use of buprenorphine (a type of MAT). Although the drug is considered the gold-standard treatment among public health officials, Tess was initially refused a prescription for it and had to make expensive cash-only payments. Tess’s situation is far from unique; her friend Joey faced similar issues with getting MAT, and countless others seeking addiction treatment are in the same position. Macy argues that removing financial and logistical barriers to treatment is perhaps the most important thing that can be done to help people struggling with opioids and that, since the federal government seems unable (or at least unwilling) to do so, the work of removing these barriers to treatment will likely be the responsibility of local communities.



### CYCLES OF HISTORY

One of the tragedies of the opioid epidemic, according to Beth Macy, is that the whole thing has happened before, and that anyone familiar with the

history of opioids in the U.S. could have predicted the new epidemic. Knowledge of the addictive properties of opioids has existed in some form since the Neolithic Period. Much more recently, there was a widespread opioid epidemic in the U.S. around the turn of the twentieth century, when the pharmaceutical company Bayer introduced heroin. During the current opioid crisis, history repeats itself on smaller scales, too, with families and communities often witnessing the same addiction stories again and again, rarely with happy endings. In *Dopesick*, Macy vividly portrays the dangers of forgetting the past and argues that a greater knowledge of history can help prevent future tragedies.

While the opioid epidemic may seem to be a very modern problem, Macy shows that actually it isn't the first opioid epidemic in the United States, and that studying the past could have helped to prevent the present crisis. Humans have understood the effects of opioids since the beginning of history, when Neolithic humans first learned the effects of poppy. More recently, the Opium Wars between Britain and China showed that these drugs were so powerful that they could even lead to mass conflict. In the United States in particular, there were at least two clear warnings about the dangers of opioids. The first occurred in the aftermath of the Civil War. Many soldiers who were wounded in battle received morphine or other opioids from doctors in order to ease their pain. Shortly after, these soldiers became addicts. While the science of addiction was not as well understood back then, doctors knew to leave behind morphine and hypodermic needles for wounded patients, in order to spare them the pains of withdrawal. These wounded veterans continued to seek out morphine and opium, turning into haggard shells of their former selves.

The second instance of mass addiction is perhaps even more relevant to the current crisis. In the late 1800s, a researcher at the pharmaceutical company Bayer developed heroin. Initially, his goal was to create a nonaddictive substitute for morphine. This is how the drug was marketed, and it ended up being sold in 23 countries around the world, aimed at everyone from babies to the elderly. It didn't take long for many doctors to realize the problem: that heroin was, in fact, highly addictive. Though doctors eventually stopped prescribing heroin, by then the damage had already been done. The story of heroin would end up being very similar to the story of OxyContin when it was introduced by Purdue Pharma just about one century later—but few at the time would draw the parallel.

The book doesn't offer an easy explanation for why history is so often forgotten in the "United States of Amnesia" (as Macy titles one chapter), but Macy does suggest one important contributing factor: profit. On the one hand, the new opioid crisis can be attributed to Purdue Pharma's reckless disregard for the addictive potential of OxyContin as they rushed it onto the market in order to make money. But there were also larger structural forces in the healthcare industry that caused many

professionals to disregard the past. In the 1990s, patients were beginning to be treated more like customers, with many of them being given formal surveys to rate their healthcare experiences. Hospitals began to compete to get the best ratings, and bad ratings from patients could lead to serious financial difficulties. As a result, doctors were encouraged (either tacitly or directly) to be more liberal with painkillers, since being stingy ran the risk of bad reviews from patients. This move toward treating patients as customers came at right around the same time that pain was being recognized as "the fifth vital sign" in patient treatment (an idea that was boosted by millions of dollars' worth of advertising by Purdue). All of these factors combined to put pressure on physicians to prescribe more opioids. While some doctors familiar with history may have had misgivings about prescribing OxyContin, they were either swayed by the hype that the new drug really was a history-defying breakthrough, or they felt that in order to keep their jobs, they had no choice but to prescribe the painkiller, since it was what patients wanted.

In hindsight, it seems obvious that an opioid like OxyContin would cause mass addiction just like heroin or morphine did. But to really understand why heroin and morphine became epidemics, Macy argues, it takes more than just a surface-level knowledge of history. Most doctors who prescribed heroin the late 19th and early 20th century were not ignorant about addiction—they simply bought into the hype that heroin was something new. In the 1990s, Purdue Pharma used similar techniques to convince physicians to prescribe OxyContin, preying on the natural human tendency to believe "this time is different."



## RACE, HEALTHCARE, AND CRIMINAL JUSTICE

Although the opioid crisis is most commonly associated with rural, predominantly white regions of the U.S., Beth Macy shows in *Dopesick* how it eventually went on to affect Americans of all races. Macy builds on the work of previous writers like Michelle Alexander and Bryan Stevenson (both of whom she references in *Dopesick*) to explore how the so-called War on Drugs that took off during Ronald Reagan's administration had a disproportionate effect on Black Americans, leaving them overrepresented in prison populations. Somewhat ironically, however, although people of color were the main victims of opioids in the United States for much of the middle of the 20th century (when heroin remained a largely urban phenomenon), they have been less affected by the recent opioid epidemic. Macy argues that this is because, due to biases, doctors hesitated to give out stronger painkiller prescriptions to patients of color. In *Dopesick*, Macy depicts how powerful opioids are addictive to people of all races, but she also shows how biases in the American healthcare and criminal justice systems have led to very different experiences

of the epidemic for Black and white Americans.

As the dealer who provides heroin to Woodstock, Virginia, where many people die of overdoses, Ronnie “D.C.” Jones may seem at first like the villain of *Dopesick*. But the situation is more complicated, and while Macy lets readers draw their own conclusions, she shows that many of Jones’s actions were informed by the biases he faced as a Black man, particularly in the criminal justice system. Ronnie’s brother Thomas recalls that Ronnie wasn’t a bad kid, just stubborn, but this was enough to get him in trouble. Ronnie first went to prison at age 17, for allegedly stealing a car from his girlfriend. Once Ronnie was in the prison system, he found it hard to get out. Even when he was out of prison and technically free, he found it hard to do necessary things like get a job and find stable housing, raising the question of how free he truly was. Macy cites authors Michelle Alexander and Bryan Stevenson who confirm that Ronnie’s experience is typical and that many people who have supposedly served their time—particularly Black men—continue to face problems like the ones Ronnie does. Ronnie soon finds out that he can make more money in a single drug deal than he can in many days of working the terrible jobs available to him as an ex-convict. He knows that drug dealing is unsustainable and that he’ll likely be caught within months, but even still, he decides that he prefers it over the alternative. Though his decisions arguably lead to the loss of many lives in Woodstock, Virginia, Macy raises the question of how much personal responsibility Ronnie bears for his actions versus how much his actions should be blamed on his circumstances. Ronnie’s brother Thomas, who grew up in similar circumstances to Ronnie, goes on to become an internationally famous rapper. This suggests that had he been luckier, or had he been given more support, Ronnie, too, may have been able to achieve great things.

Macy compares and contrasts the life of Ronnie Jones to the life of Bill Metcalf, a white agent for the Bureau of Alcohol, Tobacco, Firearms, and Explosives who is responsible for tracking down and arresting drug dealers like Ronnie. The two men, whose lives take very different courses, are also very similar in some ways, and Macy explores the role that race may have played in determining their different life paths. Like Jones, Metcalf is the son of addicts, and also like Jones, he’s known for being stubborn. Instead of ending up in prison, however, Metcalf ends up with a job in law enforcement where his hard-headedness is rewarded and even encouraged. Both Metcalf and Jones try to escape the fates of their addicted families by avoiding personal drug use and instead dedicating themselves to their work. The difference is that Jones has far fewer job opportunities and the “job” he ends up dedicating himself to is illegal heroin dealing, which has dire consequences for him and for those he sells to. Metcalf and Jones find themselves pitted against each other, and when they finally meet in person, each despises the other. The irony, Macy shows, is that the two

enemies actually have a lot in common. The racial bias (or lack of bias) that Jones and Metcalf each experienced helped to put them on different sides of the law, unable to see their common ground.

Though *Dopesick* focuses on predominantly white communities in Virginia, Macy convincingly argues that it’s impossible to fully understand the opioid crisis without looking at race. While many white addicts, like Spencer Mumpower, also faced consequences from the criminal justice system, it’s impossible to understand the full scope of the crisis without looking specifically at how men like Ronnie Jones had a different experience in the system because of their race. Macy interviews Jones hoping for answers and closure but just comes away with more questions. While Macy doesn’t attempt to justify Jones’s actions, she argues that greater support for men like Jones and a more equitable criminal justice system could have wide-ranging benefits, showing how race, health, and economics intersect in the opioid crisis.



## FIGHTING THE MEDICAL ESTABLISHMENT

In *Dopesick*, Beth Macy argues that the American healthcare system has been broken in a significant way since at least the mid-1990s. Around the turn of the millennium, the healthcare industry began promoting the notion that pain was “the fifth vital sign,” and that physicians should respond to this sign by prescribing powerful painkillers, such as the opioid OxyContin. Conventional wisdom at that time also held that drugs like OxyContin were safe, with all but negligible risk for abuse. As it turns out, this common wisdom was wrong: opioids like OxyContin turned out to be extremely addictive, and they quickly became the driving force behind an epidemic that led to a sharp uptick in crime and a shocking increase in drug-related deaths. Because powerful opioids were embraced so widely by the medical community (in part because of how much money can be made from them), the first people to raise the alarm about the danger of opioids were not necessarily the experts—they were often small-town activists who saw firsthand what was happening to their communities, people like Art Van Zee, Sue Ella Kobak, and Sister Beth Davies. In this way, the book deftly portrays how the medical establishment turned a blind eye to the brewing catastrophe, leaving it to everyday people to hold big corporations accountable and fight for their communities.

As *Dopesick* reveals, the medical establishment helped fuel the opioid epidemic—in large part because there was so much money to be made. The pharmaceutical industry is an obvious culprit. Purdue Pharma, the makers of OxyContin, knew early on that they had created a dangerous and addictive drug. But their profit motive outweighed any humanitarian concerns, so they covered up the addictive side of Oxy, promoted the notion that pain was “the fifth vital sign” to convince doctors that it

was actually good to prescribe heavy painkillers, and lavished doctors with perks (free meals, free gas, and even free shrubberies) to coax them into prescribing more and more Oxy. As the epidemic grew, doctors also faced increasing incentives to prescribe addictive painkillers. Virginia physician Steve Huff, for example, faced strong resistance from his patients themselves when he cut back on prescribing opioids out of fear of their effects. By this time, the pharmaceutical companies had created a huge market for opiates by convincing doctors to prescribe addictive pills, and when their addicted patients demanded more painkillers, doctors had a strong incentive to keep prescribing them. This created the vicious cycle at the heart of the epidemic, one in which patients became casualties of the medical establishment's desire for profit.

Due to this strong profit motive, it makes sense that people outside the medical establishment were often the first to sound the alarms. One of the people *Dopesick* profiles, Sister Beth Davies, is a Catholic nun with a history of advocating for coal miners. While she had no particular insight into the pharmaceutical industry nor medical expertise, her involvement in her community meant that, when the opioid crisis hit, she noticed it immediately. Her history of activism positioned her to fight back. Sister Beth worked closely with Art Van Zee, who actually is a doctor. But he, too, was outside the medical establishment—instead of choosing to get rich at a more prestigious practice, Van Zee decided to become a family doctor in a medically underserved community. Since Van Zee was always more interested in community than money, he too could immediately identify and push back against the culture of overprescribing opioids. A core idea of *Dopesick*, then, is that the medical establishment is not necessarily out to keep patients healthy and to help communities thrive—sometimes, if those priorities are in conflict with moneymaking, money wins out at great cost to everyday people. To fight that, everyday people must sound the alarms.



### THE VALUE OF SCIENCE

As a journalist, Beth Macy is interested in the stories of individuals, but in *Dopesick* she also frequently cites broader scientific studies, including statistics about relapse, recovery, and the most effective addiction treatments. The opioid epidemic is widespread, and while the experiences of individuals can be illuminating, statistics are an essential way to look at the epidemic on a macro level. At the same time, however, companies like Purdue Pharma often abuse the trust people place in science by making “scientific” claims that fail to hold up under scrutiny. Macy argues that public health policy should always be informed by science, but she is careful to distinguish between legitimate studies and pseudoscientific marketing jargon. While Macy urges caution toward bold scientific claims—especially when they come from drug companies—she shows in *Dopesick* how

healthcare workers and administrators can improve public health by looking at the data with an open mind and by implementing policies that may seem counterintuitive, but that have a strong scientific grounding.

One of the most effective forms of treatment for recovering opioid addicts—medication-assisted treatment (MAT)—is incredibly controversial, which makes it difficult to separate scientific truth from overblown moral rhetoric. MAT is controversial because it's essentially helping drug users wean themselves off of one drug by giving them another drug, which is counterintuitive to many people. In addition, abstinence-only treatment programs, which have long dominated the medical landscape, are strongly against this practice. Because of this, many people have strong moral or logistical objections to MAT. But by looking at actual scientific studies, Beth Macy convincingly argues that MAT is more effective than abstinence-based treatment. She finds studies showing that only about 25 percent of heroin addicts who undergo abstinence-only counseling are still clean after two years. By contrast, the success rate for people who receive MAT alongside counseling is 40 to 60 percent, showing a clear advantage. This shows how following the science—despite potentially having a strong gut reaction against its recommendations—has the potential to save lives.

Despite the book's embrace of some scientific studies, it's also a cautionary tale about uncritically embracing other scientific claims—particularly when they come from the marketing arms of drug companies. When the Sackler family's pharmaceutical company, Purdue Pharma, was promoting its new drug OxyContin, its marketing team cited scientific evidence to tout the drug's effectiveness and safety. The team presented statistics purportedly showing that less than 0.5 percent of people who are prescribed OxyContin will become addicted to it. This likely reassured many doctors who were hesitant about prescribing OxyContin. But when skeptics began digging into the source of this statistic, they found that it came from one short letter to the editor in a medical journal from the 1980s. This not at all comparable to a real clinical study, and yet the marketing team at Purdue Pharma continued to cite the statistic as if it really were part of a proven scientific consensus. In fact, despite Purdue's confident public claims about their new drug's low probability for addiction, their application to the FDA showed that many people in the company were actually aware of the drug's potential for abuse. It's clear, then, that the “scientific” evidence cited by Purdue to promote OxyContin was not real science, but simply a deceptive marketing ploy to disguise the actual science behind the drug.

In this way, *Dopesick* shows that evaluating scientific claims is always a careful balance. Clinical trials are essential for determining the best way to treat patients, but pharmaceutical companies can easily abuse the public's trust by trying to give the false appearance of scientific credibility to their claims. The



book implies that doctors, patients, journalists, and concerned citizens must trust data but remain skeptical, always digging deeper into any claim that seems too good to be true.



## SYMBOLS

Symbols appear in **teal text** throughout the Summary and Analysis sections of this LitChart.



### INTERSTATE 81

Interstate 81 represents the connections between urban, suburban, and rural America and how the opioid crisis affected all parts of the country, albeit in different ways. In *Dopesick*, Interstate 81 is known as a “drug highway” and is perhaps most associated with the heroin ring run by Ronnie “D.C.” Jones, which exports heroin from Harlem in New York City all the way down to Woodstock, Virginia. Though the opioid crisis affects rural and urban America in different ways, the fates of all parts of the country are ultimately connected. In the decades leading up to the opioid epidemic, drug addiction was largely considered a big-city problem. Though the opioid epidemic begins in rural areas, soon rural addicts who can’t get prescription drugs begin turning to suppliers of other, illegal opioids in major cities. Interstate 81 shows how in the modern world, all parts of the United States are connected and how even issues that seem to be “rural problems” or “urban problems” can ultimately have an effect on the whole country.



### COAL

Coal, which used to be an economic staple in Appalachia, represents an older way of life that is no longer viable in the modern world. On the one hand, coal stirs nostalgia among residents of Appalachia: it represents a time when well-paying jobs were more plentiful and before the opioid crisis had begun spreading through rural communities. This idealized memory of coal may not be entirely accurate, however. Coal mining is back-breaking and sometimes even deadly work. In fact, on-the-job injuries for coal mining were one of the reasons that residents of Appalachia got prescribed heavy painkillers like OxyContin in the first place, showing a clear link between the past and present. The life of Sister Beth Davies helps further draw a connection between coal and opioids—she goes from advocacy for miners to advocacy for addicts, showing how the biggest problems facing people in these rural areas have evolved over the years. While coal represents the past in *Dopesick*, it also shows how the past is inseparable from the present, and how social problems in the past may take on different forms in the present.



## QUOTES

Note: all page numbers for the quotes below refer to the Back Bay Books edition of *Dopesick* published in 2018.

### Prologue Quotes

●● Though the opioid epidemic would go on to spare no segment of America, nowhere has it settled in and extracted as steep a toll as in the depressed former mill and mining communities of Central Appalachia, where the desperate and jobless rip copper wire out of abandoned factories to resell on the black market and jimmy large-screen TVs through a Walmart garden-center fence crack to keep from “fiending for dope.”

**Related Characters:** Beth Macy

**Related Themes:**

**Related Symbols:**

**Page Number:** 15

### Explanation and Analysis

This quote, which begins *Dopesick*, helps to set the scope of what author Beth Macy will cover over the course of the book. While some might dismiss the opioid epidemic as a rural problem, Macy makes it clear from the beginning that she believes the epidemic is a national problem in the U.S. and that its effects aren’t limited to any specific segment of the population.

The popular stereotype about the opioid epidemic is that it’s primarily a problem for former coal-mining regions, where the death of the coal industry led to joblessness and despair, creating the conditions for a drug epidemic. As Macy establishes in *Dopesick*, this popular conception isn’t necessarily wrong, but it is a little bit limited, neglecting the true scope of the epidemic and the forces that came together to cause it.

Macy starts her book off with the image of rural “dope fiends” because she believes the stereotype is just that: a starting point. This familiar opening reflects Macy’s methodical writing style; throughout the book, she often starts by presenting established or easy-to-understand ideas before gradually moving on to ideas that could be considered more controversial.

☛☛ Three months before visiting Jones, in the spring of 2016, Kristi Fernandez and I stood next to Jesse’s grave on a rolling hillside in Strasburg, Virginia, in the shadow of Signal Knob. She’d asked me to meet her at one of her regular cemetery stops, on her way home from work, so I could see how she’d positioned his marker, just so, at the edge of the graveyard.

It was possible to stand at Jesse’s headstone—emblazoned with the foot-high number 55, in the same font as the lettering on his Strasburg Rams varsity jersey—and look down on the stadium where he had once summoned the crowd to its feet simply by running onto the field and pumping his arms

**Related Characters:** Jesse Bolstridge, Kristi Fernandez, Beth Macy

**Related Themes:** 

**Page Number:** 6

### Explanation and Analysis

This quote from the prologue provides a brief snippet of one story—the death of Jesse Bolstridge and the grief of his mother, Kristi Fernandez—which Macy will flesh out in more detail in a later chapter. At this early stage of the book, Macy wants to establish the stakes of the opioid epidemic and show why it’s an issue that her audience should care about. She highlights the story of Jesse Bolstridge because it foreshadows a lot of issues that will be at the heart of later chapters of *Dopesick*, for instance how the opioid epidemic strikes down even unexpected people like young football stars and how the grieving families of opioid victims will fight for justice.

The detail of Jesse’s gravestone, particularly how it is emblazoned with his high school football number, is sad and perhaps also a little unusual, which is why it is memorable. High school football is not a uniquely rural tradition, but it does often take on extra significance in rural communities—it is a humanizing detail about Jesse and his community that Macy brings up in order to contradict the “rural dope fiend” stereotype that she brought up earlier. The football numbers on Jesse’s gravestone are also noteworthy because very few people die when high school football is still what they are best remembered for. They highlight his innocence, as well as the merciless nature of the opioid epidemic which can be a threat even to young and healthy people—perhaps even especially to them, as statistics about overdoses will show.

## Chapter 1 Quotes

☛☛ In the United States of Amnesia, as Gore Vidal once called it, there were people in history who might have expressed skepticism over Haddox’s claim, had anyone bothered reading up on them. Ever since the Neolithic humans figured out that the juice nestled inside the head of a poppy could be dried, dehydrated, and smoked for the purposes of getting high or getting well, depending on your point of view, opium had inspired all manner of commerce and conflict.

**Related Characters:** Dr. J. David Haddox

**Related Themes:**   

**Page Number:** 21

### Explanation and Analysis

This quote, which gives the first chapter its title, gives a broad overview of humanity’s experience with opioids and shows how this history contradicts the lofty claims of Purdue Pharma’s Dr. J. David Haddox (who pushes the idea that Purdue’s new opioid OxyContin isn’t addictive). Gore Vidal coined the phrase “United States of Amnesia” (a joking alternate definition of “U.S.A.”) in order to highlight how people in the United States often forget the past, just like people with amnesia forget the past. While the opioid epidemic is often treated as a relatively recent phenomenon (and in some ways, it is), Macy argues that this focus on the newness of the epidemic obscures an important fact: humans have long known about the dangers of opioids. Macy points out that even Neolithic humans understood the effects of the poppy plant (from which the first opioids were derived).

Why, then, would this history be forgotten? It would seem obvious, to someone familiar with the long history of opioids, that OxyContin presented a real threat for addiction. Macy resists answering the question right away; she explores the issue in detail throughout the first chapter. Much of the blame lies with Purdue Pharma, which used a deceptive (and well-funded) marketing campaign to deceive doctors and the public, but other issues contributed too. In particular, a trend in medicine about approaching pain as “the fifth vital sign” helped create the “amnesia” that led to the opioid epidemic.

●● By the 1870s, injecting morphine was so popular among the upper classes in Europe and the United States that doctors used it for a variety of ailments, from menstrual pain to inflammation of the eyes. The almost total lack of regulatory oversight created a kind of Wild West for patent medicines, with morphine and opium pills available at the nearest drugstore counter, no prescription necessary. As long as a doctor initially OK'd the practice, even injected morphine was utterly accepted. Daily users were not socially stigmatized, because reliance on the drug was iatrogenic.

**Related Characters:** Heinrich Dreser

**Related Themes:**   



**Page Number:** 22

### Explanation and Analysis

During Macy's description of the history of opioids in the United States, she describes how morphine fueled an earlier addiction epidemic. In some ways, the passage describes a time that is very remote from the present day: morphine and opium are both controlled substances now and the prospect of them once being available at the local drug store counter feels strange to a modern audience.

On the other hand, however, the situation in the 1870s has some strong parallels to the recent opioid epidemic. Like morphine, OxyContin is an opioid, and also like morphine, it was carelessly prescribed by doctors for relatively minor ailments. In fact, in some ways the current situation is worse: OxyContin is significantly more potent than morphine. The common thread between the past and present is a lack of regulatory oversight. Macy shows how cycles of history repeat themselves, particularly with opioids in the United States, while also showing how things change over time.

●● But what exactly was adequate pain relief? That point was unaddressed. Nor could anyone define it. No one questioned whether the notion of pain, invisible to the human eye, could actually be measured simply by asking the patient for his or her subjective opinion. Quantifying pain made it easy to standardize procedures, but experts would later concede that it was objective only in appearance—transition labor and a stubbed toe could both measure as a ten, depending on a person's tolerance. And not only did reliance on pain scales not correlate with improved patient outcomes, it also had the effect of increasing opioid prescribing and opioid abuse.

**Related Themes:**  

**Page Number:** 28

### Explanation and Analysis

This quote discusses a movement in medicine in the 1990s when doctors began moving toward treating pain as “the fifth vital sign.” The general idea behind the movement was that, up until that point in history, doctors had not been paying enough attention to the pain that patients reported and that it was important to take that pain as seriously as a vital sign (like, for example, a heartbeat).



On the surface, this might seem like a reasonable reform. But as Macy explores in this passage, the premise of the movement was flawed in some important ways. To begin with, the whole concept of what defined “adequate” pain relief was difficult to pin down. This ambiguity left the movement vulnerable to being exploited by companies like Purdue Pharma, which used millions of dollars in advertising to capitalize on pain as a fifth vital sign in order to increase prescriptions of its painkiller OxyContin. Macy describes later how painkillers became an expectation among patients—and therefore how patients were likely to rate hospitals lower on customer satisfaction surveys if they weren't prescribed painkillers. Ultimately, the pain as a fifth vital sign movement reveals flaws in the medical establishment—and addressing these flaws would perhaps have to fall to people outside of the establishment.

## Chapter 2 Quotes

●● Industrywide, pharmaceutical companies spent \$4.04 billion in direct marketing to doctors in 2000, up 64 percent from 1996. To get in the doctor's door, to get past the receptionist and head nurse, the reps came bearing gifts, from Valentine's Day flowers to coupons for mani-pedis.

The average sales rep's most basic tool was Dine 'n' Dash, a play on the juvenile-delinquent prank of leaving a restaurant without paying the bill. For a chance to pitch their wonder drug, reps had long offered free dinners at fancy restaurants. But soon, to-go options abounded, too, for a busy doctor's convenience. Reps began coming by before holidays to drop off a turkey or beef tenderloin that a doctor could take home to the family—even a Christmas tree. Driving home from the office, doctors were also invited to stop by the nearest gas station to get their tanks topped off—while listening to a drug rep's pitch at the pump, a variation the reps nicknamed Gas'n' Go. In the spring, the takeout menu featured flowers and shrubs, in a version some dubbed—you guessed it—Shrubbery 'n' Dash.

**Related Characters:** Dr. Steve Huff

**Related Themes:**  

**Page Number:** 32

### Explanation and Analysis


This quote, which describes the experience of many doctors in the late 20th century, including Dr. Steve Huff, goes into detail about the extensive lengths that pharmaceutical companies went through in order to get doctors to prescribe their pills. As Macy details, these pharmaceutical companies spent over \$4 billion wooing doctors in unconventional ways that included meals, gas tank refills, and even shrubberies. While some doctors accepted these gifts believing they were immune to being influenced (or just not caring), Huff was someone who raised the alarm about it at his practice.

At the time, Huff's behavior was considered unusual by his peers—this system of gift-giving seemed to just be part of the established way of doing things. With hindsight, however, Macy shows that these gifts clearly had their intended effect and helped drugs like OxyContin become national bestsellers. Macy shows how people who go against the establishment like Huff are sometimes later proven right by history.

●● The doctors were witnessing the same thing that Lieutenant Stallard had seen a year earlier, in 1997, on the streets. “We had always had people using Lortabs and Percocets, but they were five- or ten-milligram pills you could take every day and still function. They didn't have to have more,” Stallard said.

“The difference with OxyContin was it turned them into nonfunctioning people”

**Related Characters:** Richard Stallard, Barry Meier, Dr. Art Van Zee, Dr. Sue Cantrell

**Related Themes:** 

**Page Number:** 39

### Explanation and Analysis

This passage describes a moment from the mid-1990s when doctors, law enforcement officers, and other officials were just beginning to see the first effects of OxyContin in their communities. Here, Macy quotes Richard Stallard, a police lieutenant, who recalls that the biggest difference with OxyContin is that it seemed to cause users to lose

agency over their lives in a way that previous painkillers had not.

Stallard was far from alone in noticing a shift; elsewhere doctors like Art Van Zee and administrators like Sue Cantrell were noticing a similar shift and became concerned about what they saw. Journalist Barry Meier would later chronicle these early days of the opioid crisis in his book *Pain Killer*—perhaps the first comprehensive look at the epidemic. Despite how many people noticed the burgeoning epidemic, however, information was still scattered, in part because of a stigma in many communities against discussing addiction openly. Macy looks at how this lack of information allowed the epidemic to spread stealthily, while also showing how a few people outside the establishment saw early warning signs but were unable to stop it.


## Chapter 3 Quotes

●● Though it took nearly a decade before police, the press, and drug-abuse experts fully understood what was happening, Ed Bisch watched the urbanization of the pill epidemic play out on his front lawn in 2001, as paramedics carried his son's body away.

He retreated to his computer, where he was shocked to learn that his son's death had been the region's thirtieth opioid overdose in the past three months.

How was that possible when he'd only just learned the word? “The internet was still new, and back then it was mostly message boards as opposed to websites,” he said.

**Related Characters:** Ed Bisch, Eddie Bisch

**Related Themes:**  

**Page Number:** 60

### Explanation and Analysis

This quote describes a moment shortly after the beginning of the opioid epidemic, when it had spread from its rural beginnings but was still relatively stealthy. Ed Bisch is one of many parents in *Dopesick* who is shocked to learn about his son's addiction and only realizes the full extent of it after his son's death. Macy doesn't blame Ed; in fact, she shows how the circumstances of the opioid epidemic, including stigmas around discussing addiction, made it hard for someone like Ed to know what was going until it was too late.

Macy looks at how media changed over the course of the opioid epidemic, and when Ed's son Eddie died, Internet message boards were just beginning to become popular.



These message boards allowed Ed to connect with others facing similar experiences. This cycle of grieving family members coming together in solidarity will repeat many times over the course of the epidemic, but as media evolves, the medium that enables these connections will change.

●● In the fall of 2006, Purdue's lawyers began to sense that this case against them was different; that a full-court press meant nothing when the opposing counsel was the United States of America. Was it really possible the small-town lawyers had compiled enough evidence to indict both the company and its top executives on a host of felony charges, not just for misbranding the drug but also for mail fraud, wire fraud, and money laundering? It seemed so, according to a memo written by the federal prosecutors to Brownlee at the time.

**Related Characters:** John L. Brownlee

**Related Themes:** 

**Page Number:** 81

### Explanation and Analysis

In this chapter, Macy describes a series of court cases that were brought against Purdue Pharma for its role in distributing OxyContin (which led to widespread addiction and was a major driver of overdose deaths). None of the early cases seemed to succeed, with judges ruling in favor of Purdue Pharma and its high-powered legal team. Still, small-town lawyers like the former paratrooper John L. Brownlee were persistent, and they managed to compile impressive documentation of Purdue's wrongdoing, even if it wasn't enough to garner a favorable ruling yet.

The situation changes, however, when news breaks that a federal investigation is being conducted into Purdue. Suddenly, Purdue's high-powered legal team isn't enough to keep criticism away, and all the evidence that lawyers like Brownlee have compiled might actually be put to important use. Ultimately, the federal trial will not be the slam dunk that many activists hoped for, but Macy shows how progress can be incremental and how the seemingly failed earlier court cases actually built the groundwork for one of the anti-opioid movement's first success stories.

## Chapter 4 Quotes

●● Conspicuously absent from the courthouse drama was the family that owned the company and its 214 affiliates worldwide- and benefited the most from the drug's sale. Purdue had earned over \$2.8 billion from the drug by 2007, including \$595 million in earnings in 2006 alone. Unlike a public company that answers to shareholders, privately held Purdue answered only to the Sacklers.

In 2015, the family would earn its way onto Forbes's "America's Richest Families" list. With an estimated net worth of \$14 billion, the OxyContin clan would edge out such storied families as the Busches, Mellons, and Rockefellers. Having gone from selling earwax remover and laxatives to the most lucrative drug in the world, the family had museum wings and college institutes named for it from Boston to Tel Aviv.

**Related Characters:** Paul Goldenheim, Michael Friedman, Howard Udell, The Sackler Family (Mortimer, Raymond, and Arthur)

**Related Themes:** 

**Page Number:** 94


### Explanation and Analysis

The passage describes the moment after the federal court case against Purdue, when the company accepts a plea bargain. Although this is the first court victory that activists have secured over the powerful pharmaceutical company, the success is offset by the comparatively mild repercussions of the court case.

Arguably, the people who have benefited most from the opioid crisis are the Sackler family (the family who owns Purdue Pharma). Despite their prominent role in creating the health crisis, however, they are largely spared any sort of punishment for their actions, instead sending out executives like Paul Goldenheim, Michael Friedman, and Howard Udell to be the public face of the scandal. This strategy works for the Sacklers who remain tremendously wealthy even after the court case. In fact, for a while their reputation remains intact, largely due to expensive donations to colleges and museums. Macy shows how money can have a negative impact on healthcare and how it can insulate people from having to face the consequences of their actions.

## Chapter 5 Quotes

☛☛ Awareness of the opioid crisis has typically come in waves, often celebrity-studded and well covered by the media: the death by overdose of Philip Seymour Hoffman, in 2014, then two years later the death of Prince. But for ordinary citizens, the news that opioids had crossed over from *Not me and not anyone I know* to mainstream traveled more slowly, in dribs and drabs, maybe when the *Cincinnati Enquirer* became the first newspaper in the country to dedicate a reporter solely to the heroin beat.

**Related Themes:** 

**Page Number:** 103

### Explanation and Analysis

After describing the early phases of the opioid epidemic in earlier chapters, Macy transitions to talking about a middle phase, when public awareness of the epidemic began to grow. She emphasizes how the deaths of celebrities like Philip Seymour Hoffman and Prince were not isolated incidents but in fact part of the larger opioid story—and how this means that the epidemic has reached a point where everyone has a stake in the outcome.

This increase in awareness about the epidemic does not immediately lead to reform. Still, Macy notes encouraging signs like the new heroin beat at the *Cincinnati Enquirer*. At times, Macy is critical of the media's handling of the opioid epidemic, particularly the tendency among some outlets to sensationalize events. Ultimately, however, she favors journalism, and in particular strong local journalism. Later, she will show that heroin beats like the one at the *Cincinnati Enquirer* may have been an anomaly rather than a permanent fixture, as throughout the years of the epidemic, local papers struggle to stay afloat financially and cut back on parts of their coverage. This is why Macy describes awareness about the opioid epidemic as coming in waves: the way it crests at different moments often depends on the state of media.

☛☛ The skin-popping weathermen represented Roanoke's first wake-up call. But it was wrongly viewed, by myself and other area journalists, as an anomaly. The story was so tawdry that the *Roanoke Times* assigned two beat reporters to track it, one from courts and the other from media and entertainment. It received much more attention, for instance, than the national story that broke in our backyard when Purdue Pharma settled with the feds a year later.

**Related Themes:** 

**Page Number:** 105

### Explanation and Analysis

This quote describes how opioid awareness first began to spread in Macy's home of Roanoke, Virginia: when two well-known local weathermen were caught in the act. The story is specific to Macy and where she lived in particular, but in many ways, it also represents the experience that many Americans had when learning about the opioid crisis. According to Macy, one of the biggest features of opioid stories that appear in the media is that they are often treated at first as anomalies. The two weathermen in Roanoke are treated like a tabloid scandal, when in fact there is already a whole community of people within Roanoke who are dealing with similar opioid-related issues.


While Macy supports local journalism and specifically coverage of the opioid crisis, she uses the story of the two weathermen to criticize how some outlets sensationalized the opioid epidemic. The weathermen's scandal received far more extensive coverage in Roanoke than the Purdue Pharma settlement, which Macy believes was a much more consequential story. Macy uses the story about the two weathermen to show how the media can play a positive role in spreading awareness about the opioid epidemic while at the same time showing how the media can play a negative role in elevating less important stories while ignoring the most impactful news.

## Chapter 6 Quotes

☛☛ In rural counties decimated by globalization, automation, and the decline of coal, the invisible hand manifested in soaring crime, food insecurity, and disability claims. In Martinsville and surrounding Henry County, unemployment rates rose to above 20 percent, food stamp claims more than tripled, and disability rates went up 60.4 percent...

It was easy to understand the connection between joblessness and hunger, to get that hunger fueled some of the crime. It was growing clearer, too, that the federal disability program was becoming a de facto safety net for the formerly employed, a well-intentioned but ultimately disastrous way of incentivizing poor people to stay sick, with mental illness and chronic pain—conditions that are hard to prove and frequently associated with mental health and substance use disorders—prompting the majority of disability awards.

**Related Themes:**  

**Related Symbols:** 

**Page Number:** 123

### Explanation and Analysis

This passage, from the beginning of Chapter 6, looks at the role that economic factors played in setting the stage for the opioid epidemic. Poverty and globalization are often put forward as causes of the epidemic, and while these explanations have truth to them, Macy is determined to go deeper. She finds that one of the most important factors is the high rate of disability in the regions most affected by the crisis.



There are a couple factors behind this high disability rate in regions most affected by the opioid epidemic. One was the coal mining jobs and other heavy industrial jobs that used to dominate these regions: these were physically demanding jobs that often caused injuries that led to people becoming disabled, which often comes with chronic pain. Doctors often treat pain with opioids, so regions with many disabled people became hotbeds of addiction.


Disability programs are also popular in these regions because there are few other social safety nets available to people experiencing poverty. Macy isn't making the argument that healthy people are "abusing" disability checks; rather, she is simply noting that in the absence of other economic opportunities, it is natural that people would try to become eligible for disability checks, which represent the best way to survive for many. The desirability of becoming eligible for disability checks makes patients more likely to seek out painkillers (in order to prove they are disabled), setting the stage for the opioid epidemic.

### Chapter 7 Quotes

☝ In the picturesque Shenandoah Valley town of Woodstock, more than two hours north of Roanoke, bulk heroin cut in a Harlem lab had just made its way down I-81. It was the last thing Shenandoah County sergeant Brent Lutz, a Woodstock native, would have expected to find himself doing: stalking a major heroin dealer. But here he was, at all hours of the day and night, clutching a pair of binoculars while crouched in the upstairs bedroom of his cousin's house a few miles outside of town. He'd spent so much time there in recent days that the mile-wide stench of chicken entrails coming from George's Chicken across the road no longer bothered him.

**Related Characters:** Brent Lutz, Ronnie "D.C." Jones

**Related Themes:**  

**Related Symbols:** 

**Page Number:** 146

### Explanation and Analysis

In this quote, Macy sets the stage in Woodstock, Virginia, which will be an important setting for the next few chapters. It is a relatively tight-knit community that will be rocked by the opioid epidemic, particularly by a local heroin ring (since many OxyContin users eventually move on to heroin). Macy begins by looking at the perspective of Brent Lutz, a law enforcement officer who is tasked with tracking down the source of this heroin ring. Lutz doesn't know it at the time, but the man he's looking for is Ronnie "D.C." Jones, a dealer who imports heroin from Harlem to Woodstock with the help of runners who take Interstate 81.

Macy begins telling the story of opioids in Woodstock by taking a perspective that is likely familiar to her audience—the perspective of a police officer tracking down a crime. This is how many stories about drugs are told in the media, and Macy seems to believe there is still something worthwhile in looking at this perspective. As the story about Woodstock goes on, however, Macy begins to consider other perspectives, including the perspectives of heroin users in Woodstock, the perspectives of grieving families, and even the perspectives of dealers. She builds the story piece-by-piece in order to create a fuller picture of what happened in Woodstock, Virginia, and to explore what it means for the opioid crisis.


### Chapter 8 Quotes

☝ Later that day, when Metcalf finally got his first close-up look at Ronnie Jones in a county jail interviewing room in Front Royal, he found him to be "very smug, very arrogant."

The feeling was mutual. "He was very aggressive; he harassed people," Jones said of Metcalf. Jones hated him for delivering a subpoena to the mother of his oldest child—at work, embarrassing and intimidating her, he said—and for interviewing Jones's mom.

**Related Characters:** Bill Metcalf, Ronnie "D.C." Jones (speaker)

**Related Themes:** 

**Related Symbols:** 

**Page Number:** 166

### Explanation and Analysis

In this climactic moment, law enforcement official Bill Metcalf finally comes face-to-face with the man he's been tracking down for several months, the heroin dealer Ronnie "D.C." Jones. Predictably the two of them don't like each other. Macy looks deeper than this surface dislike, however. She's interested not just in the fact that the men dislike each other but in the reasons *why* they dislike each other—and also in the ways that the two men are alike.

One of Macy's central arguments about the opioid epidemic is that it's a problem that affects all Americans. This means that both Metcalf and Jones have a stake in it—even if they can't imagine each other being on the same side. Macy shows, however, that the two men actually come from similar backgrounds—both Metcalf and Jones are the children of addicts and many of their choices in life go back to the self-conscious decision to try to avoid turning out like their parents did. The harsh drug enforcement laws in the United States have made it so that Metcalf can't see Jones as anything more than a criminal, and this in turn influences Metcalf to take actions that cause Jones to see him as cruel and aggressive. Macy steps back, however, and asks what would happen if the two men were able to see what they have in common. Would this help lead the way to a solution, or are the divisions already caused by the epidemic too deep to overcome?

☛ NIDA, the Institute of Medicine, the World Health Organization, and the White House drug czar's office would all agree that indefinite (and maybe even lifelong) maintenance treatment is superior to abstinence-based rehab for opioid-use disorder. And even Hazelden, the Betty Ford-affiliated center that originated the concept of the twenty-eight-day rehab, changed its stance on medication-assisted treatment, or MAT, offering Suboxone to some patients in 2012.

But the rehab Jesse went to was aimed at abstinence, as most were, then and now.

**Related Characters:** Jesse Bolstridge, Kristi Fernandez

**Related Themes:**   

**Page Number:** 174

### Explanation and Analysis

This quote comes from a section where Macy is providing an overview of the current state of addiction treatment in the United States. Reputable institutions like the Institute of

Medicine and the World Health Organization are all issuing their support for long-term medication-assisted treatment (MAT). If these organizations are all recommending this course of treatment so highly, it would make sense for addiction treatment centers to adopt it, but in fact, long-term MAT remains something of a rarity in the U.S. Macy decides to investigate why that is.

The biggest problem is that abstinence-only treatment (like the kind Jesse encounters) is already firmly entrenched in U.S. treatment culture. Perhaps at one point, abstinence-only treatment was the best option available, but as new research continues to reveal the superiority of MAT, many in the treatment world seem unable to let go of the old way of doing things. In part, this might be because abstinence-only treatment is easier to understand. "Just Say No" and getting people completely off of drugs seems like an admirable goal, while keeping people on MAT may seem like simply replacing one addiction with another. Macy is sensitive to why people might be skeptical of MAT, but using data and personal stories, she passionately argues why medical professions and others who deal with addiction should keep an open mind toward MAT.

### Chapter 9 Quotes

☛ By 2014, the suburban heroin-dealing scene had become entrenched in Roanoke's McMansion subdivisions and poor neighborhoods alike. But the largest dealers weren't twice-convicted felons like Ronnie Jones with elaborate dope-cutting schemes, multiple cars, and hired mules. They were local users, many of them female, dispatched to buy the heroin from a bulk dealer out of state, in exchange for a cut. And they were as elusive as hell to catch.

**Related Characters:** Ronnie "D.C." Jones, Ashlyn Keikilani Kessler

**Related Themes:**  

**Related Symbols:** 

**Page Number:** 189

### Explanation and Analysis

This quote describes a new phase of the opioid epidemic, when the epidemic has already made the jump from rural to suburban to urban and is now entrenching itself every more firmly into local communities. As a Black man with connections to New York City and previous jail time, Ronnie Jones in some ways fits the stereotype of what a drug



dealer “should” look like (and Macy explores the consequences of this stereotype in greater detail later). But Macy notes that many drug dealers don’t fit popular stereotypes of how they “should” look. Ashlyn Keikilani Kessler, for example, was a young suburban woman who went from having no criminal history to being deeply involved in heroin trafficking in a relatively short period of time.

Because dealers like Ashlyn don’t fit the profile, they are “elusive as hell to catch,” in Macy’s words. Macy brings up this elusive quality both to show how the epidemic was able to continue spreading quietly while also raising a question: is it even worth expending the resources to try to catch people like Ashlyn? Macy certainly doesn’t support letting addiction run rampant, but she is also deeply critical of punitive approaches to drug enforcement (i.e., the idea that you can just solve addiction by throwing all the dealers—or even all the users—into jail and leaving them to rot). Cases like Ashlyn present a complicated problem, and Macy uses them to show how old solutions, like simply arresting dealers, may not be enough to meet the new challenges.



*Dopesick*, receives the fullest profile. While Macy frequently cites broad studies and population-level statistics in *Dopesick*, she also tries to make sure that the stories of individuals get highlighted and that no one is reduced to an oversimplified label like “addict.” Tess’s story makes a good case study because it is full of twists and turns. Like many opioid users, Tess began with promise—young, athletic, and seemingly as healthy as possible. Through sheer bad luck and bad timing, however, she ends up being prescribed heavy painkillers for a minor condition and developing an addiction. Tess goes back and forth between reaching out to her mother, Patricia Mehrmann, for help and treatment, and pulling away, going deeper into her addiction and often going off the grid for days.

One of the recurring themes in Tess’s story is that medication-assisted treatment (like buprenorphine) seems to be working for her, but financial difficulties and biases at treatment centers make it difficult for her to keep up MAT on the recommended basis. The passage above highlights one particularly cruel feature of the incentives in the American medical system. Tess’s treatment facility is so obsessed with the possibility that Tess might abuse her MAT drug that instead of giving her Subutex, they give her Suboxone (which reduces the possibility of abuse by Tess but which *increases* the risk to her baby compared to Subutex). Macy shows how this short-sighted policy isn’t a quirk limited to one treatment center, but is in fact a larger problem with the way the American medical establishment approaches treatment and with the economic incentives behind treatment.

## Chapter 10 Quotes

💡 Tess was nearly seven months pregnant when she left jail in June 2015. For a month, she lived with her mom and tried to make a go of it with her boyfriend, the baby’s father—“disastrous,” Patricia and Tess agreed—before they found a private treatment center two hours away that would take Tess during her final month of pregnancy. Private insurance covered most of the \$20,000 bill while her dad paid the \$6,500 deductible, using the remainder of Tess’s college-savings fund. The Life Center of Galax was one of the few Virginia facilities that accepted patients on medication-assisted treatment (methadone or buprenorphine). Tess was now taking Subutex, a form of buprenorphine then recommended for some pregnant mothers. (Suboxone is typically the preferred MAT for opioid users because it also contains naloxone, an opiate blocker; Subutex, which is buprenorphine with no added blocker, was then considered safer for the baby but more likely to be abused by the mom.)

**Related Characters:** Tess Henry, Patricia Mehrmann

**Related Themes:**  

**Page Number:** 209

### Explanation and Analysis



This passage introduces Tess Henry, who struggles with addiction and who, out of all the people Macy profiles in

## Chapter 11 Quotes

☞ Harm reduction remained slow to catch on in most of the Bible Belt, including Roanoke. When I told Janine about an idea hatched at an opioid brainstorming session in Boston—to segregate users on a boat in international waters, where they could legally inject under medical supervision, ideally then transitioning to counseling and MAT—she was repulsed. “That’s crazy! We’ve created this problem, and now we decide we’re just going to continue to let it happen, and that’s the answer?”

And yet she was miles ahead of most leaders in her conservative community. She’d told her son’s story recently to the local school board and county officials, hoping to raise money for the county’s risk prevention council, which was currently running on fumes and a few small federal grants. She’d explained how she’d pulled strings to get her kids into the Hidden Valley school zone because she considered it a superior place to raise children. But the affluence she believed would protect her family had instead allowed the festering of shame and inaction. Almost daily the Hope Initiative took a call about a heroin user from Hidden Valley or nearby Cave Spring, and police data showed that the problem was worse by far in those two communities than in other, less affluent areas of the county.

**Related Characters:** Janine Underwood (speaker), Beth Macy, Chris Perkins, Bobby

**Related Themes:**  

**Page Number:** 241

### Explanation and Analysis


This quote describes harm reduction, an approach to treating addiction that tries to reduce the negative effects associated with drug use. While this may not seem like a controversial goal, harm reduction isn’t accepted everywhere because some of its strategies go against the conventional wisdom of abstinence-only addiction treatment, which is firmly ingrained in many parts of the U.S.

While Macy is firmly on the side of implementing harm reduction and leaving behind outdated abstinence-only programs, she can still find things to admire in the activism of people like Janine Underwood (who joined Chris Perkins’s Hope Initiative, a community organization that tries to help drug users but does not support harm reduction). Macy acknowledges that harm reduction represents a significant shift in thinking and that many people will be reluctant to leave behind old ways, particularly if they haven’t seen evidence about the effectiveness of harm reduction. Ultimately, Macy

concludes that her differences with Underwood over theory are insignificant when compared to all the goals they share in common and all the hard (and often thankless) work Underwood has done by getting involved in local government.

☞ I just left goodwill, can you please transfer \$4 so I can get a pack of cigarettes please?

**Related Characters:** Jordan “Joey” Gilbert (speaker), Tess Henry, Patricia Mehrmann

**Related Themes:** 

**Page Number:** 245

### Explanation and Analysis

This quote is part of the last text message exchange that Jordan “Joey” Gilbert (a friend of Tess’s) has with her parents before she’s discovered the next day, dead from an opioid overdose. On the surface, the text message may not seem to be remarkable, but after Joey’s death it takes on additional meaning. Macy quotes the text verbatim; little details, like that fact that the text has a minor typo (it repeats “please” twice) raise questions. Maybe the typo is insignificant or maybe it’s a sign that Joey was under the influence—there’s no way of knowing for sure. Even if Joey really did spend the \$4 that her parents sent her on cigarettes, it seems clear that she was lying to them in other ways and hiding important details about her life. The amount of \$4 would be insignificant to many people—certainly for Joey’s parents, the bigger concern is Joey’s well-being and the \$4 itself means little. The fact that Joey didn’t have even have \$4 on hand to buy cigarettes speaks volumes about how precarious her financial situation was (a problem that was certainly made worse by an expensive opioid addiction).



Joey’s death comes as a warning to Tess and her loved ones, like her mother Patricia Mehrmann. Tess too worries her mother with mysterious text messages that seem to leave important things unsaid. While Macy doesn’t have space to quote all of the text messages she’s seen as research, she chose to quote Joey’s in particular because it helps illuminate the experience of dealing with addiction and the frustrating questions that family members often have to confront when they have a loved one dealing with addiction.

## Chapter 12 Quotes

☛ I hoped the stories of Ronnie Jones and his victims would illuminate the ruts in both a criminal justice system that pursues a punishment-fits-all plan when the truth is much more complicated and a strained medical system that overtreats people with painkillers until the moment addiction sets in—and health care scarcity becomes the rule.

I hoped, too, that my interview with Jones would help answer Kristi Fernandez's questions about what led to her son Jesse's premature death. Was Ronnie Jones really the monster that law enforcement officials made him out to be? Had the statewide corrections behemoth that returns two thousand ex-offenders a year to Virginia's cities, counties, and towns played a role in his revolving door of failures?

**Related Characters:** Beth Macy (speaker), Ronnie "D.C." Jones, Jesse Bolstridge, Kristi Fernandez

**Related Themes:**  

**Page Number:** 252

**Explanation and Analysis**

This passage describes Macy's plan to tie together several plot threads in her book, specifically her hope that speaking with Ronnie "D.C." Jones would help provide the missing link between all the various groups affected by the opioid epidemic, from drug users and grieving families to doctors and health administrators, to police officers and drug dealers. While Macy's discussion with Jones is an important part of the book, it is not the great unifying moment that she hoped it might be (and she realizes that perhaps she went in with the wrong expectations).

As she does elsewhere, Macy looks at the flaws of a "punishment-fits-all criminal" justice system. She builds on the work of authors like Michelle Alexander and Brian Stevenson (both critics of the prison system and writers that Jones has also read). Particularly for Black men like Jones, who already face bias and discrimination, the current criminal justice system seems more destructive than helpful—both for Jones and for the rest of society. Jones's previous prison stints made it difficult for him to find a job with a living wage and housing, creating conditions that made drug dealing an appealing alternative. It's unsurprising that Jones is so focused on his own situation that he doesn't know about overdose victims like Jesse Bolstridge. While Macy does not try to justify all of Jones's actions, she shows that, like many of the other people she profiles, Jones was motivated by forces outside his control and his dealing is ultimately more a symptom of the opioid crisis than a motivating factor causing the crisis.

## Chapter 13 Quotes

☛ The birthplace of the modern opioid epidemic—central Appalachia—deserves the final word in this story. It is, after all, the place where I witnessed the holiest jumble of unmet needs, where I shadowed yet more angels, in the form of worn-out EMTs and preachers, probation officers and nurse-practitioners. Whether they were attending fiery public hearings to advocate for more public spending, serving suppers to the addicted in church basements, or driving creaky RVs-turned-mobile-clinics around hairpin curves, they were acting in accordance with the scripture that nurse-practitioner Teresa Gardner Tyson had embroidered on the back of her white coat: Verily I say unto you, inasmuch as ye have done it unto one of the least of these my brethren, ye have done it unto me. (Matthew 25:40)

**Related Characters:** Teresa Gardner Tyson

**Related Themes:**    

**Page Number:** 273

**Explanation and Analysis**

This passage comes from the middle of the final chapter in the book, when Macy makes the conscious decision to focus on an inspiring story from central Appalachia. While the opioid crisis is a dark topic, Macy shows that it has also spurred some people to do great things, like Teresa Gardner Tyson. Tyson lives according to the Biblical quote on the back of her white coat: a famous verse from the Gospel of Matthew about how even people considered to be among the "least" in society deserve to be treated well. Though Tyson stays humble, there are Biblical parallels to her story, with her traveling clinic recalling the Gospel stories about Jesus traveling to heal the sick.

But while Macy admires Tyson, the real story in Appalachia is bigger than just Tyson and her mobile clinic. Tyson is also a stand-in for all the other nameless "angels" who have persevered through the opioid epidemic in Appalachia, trying to help people in spite of the difficulties. These "angels" are too numerous to cover in a chapter—perhaps their stories seem mundane or perhaps they wouldn't want the recognition—but Macy believes they will ultimately be the ones responsible for helping Appalachia weather the opioid crisis.

☛ If the federal government wouldn't step in to save Appalachia, if it steadfastly refused to elevate methods of treatment, research, and harm reduction over punishment and jail, Appalachia would have to save itself.

**Related Themes:**   

**Page Number:** 296

### Explanation and Analysis

This final line of the book (before the epilogue) neatly summarizes most of Macy's central arguments. She begins by acknowledging the ineffectiveness of the federal government in responding to the epidemic—this topic has shown up again and again, from regulatory failures by the FDA to insufficient availability of Medicaid to pay for treatment. She moves on to stating the importance of “treatment, research, and harm reduction” over strict zero-tolerance punishment. Macy has reviewed the scientific evidence and agrees with the experts: harm reduction and MAT work better than zero-tolerance policies and abstinence-only treatment. The lives of people like Tess only provide further anecdotal evidence to support these expert opinions.

Finally, Macy turns to the topic of solutions. While the opioid crisis is a formidable problem, Macy finds inspiration in the responses to it she's witnessed, primarily in Appalachia but also throughout the rest of the country. In some cases, this response has been out of necessity: with little hope of federal aid, local communities have had no choice but to adapt. Ultimately, Macy ends her book with a call not to get discouraged—to believe that people in Appalachia have the means and the resilience to save themselves in spite of all the obstacles they face.

### Epilogue Quotes

●● Tess was still homeless, and another week passed before she called Patricia with an address via a borrowed phone, possibly belonging to a current or former pimp. “Are you in danger?” her mom asked, and Tess claimed she was not, repeating a line she often said: “I'm a soldier, Mom. I'll be fine.” “Yes, love.” Patricia responded. “But sometimes even soldiers fall.”

**Related Characters:** Tess Henry, Patricia Mehrmann (speaker), Beth Macy

**Related Themes:** 

**Page Number:** 304

### Explanation and Analysis

This passage comes from the epilogue, which details events

that occurred after Macy had already turned in drafts of the previous chapters. In this passage, Macy learns that not much has changed about Tess's situation since last time Macy heard from her. She is still going through good and bad periods, seemingly in danger one moment, then willing to accept treatment the next. Eventually, Tess starts to seem more optimistic and even makes plans to come home to Virginia from Las Vegas (where she went after getting treatment elsewhere in Nevada).

When Patricia asks her daughter if she's in danger, Tess replies that she's a soldier. Patricia tells her that even soldiers can fall (inspiring the epilogue's title, “Soldier's Disease”). What Patricia means is that even strong and healthy people aren't invincible. Just as young people can die suddenly from bullets in war, they can also die suddenly from an overdose. This exchange between Patricia and Tess highlights the fragility of life for people living with an opioid addiction. It also darkly foreshadows where Tess's story is ultimately headed.

●● It was January 2, Tess's birthday. She would've been twenty-nine.

Patricia tucked the treasures of her daughter's life inside the vest—a picture of her boy and one of his cotton onesies that was Tess's favorite, some strands of Koda's hair, and a sand dollar.

**Related Characters:** Tess Henry, Patricia Mehrmann

**Related Themes:** 

**Page Number:** 308

### Explanation and Analysis

These final words of the epilogue are unlike the hopeful ending of the last chapter—this is tragic, focusing on Tess's wasted potential, including the years of life she lost and all the heartbreak she left behind. Macy lingers on specific details, like the photo, the onesie, the strand of dog hair, and the sand dollar in order to reaffirm the ways in which Tess was an individual and not just an overdose statistic.

The solemn ending of the epilogue may at first seem at odds with the ending of the last chapter of the book (which promised that Appalachia could save itself). The epilogue seems to suggest that, in fact, it isn't possible to save some people, even with the best of intentions. Still, the sentiments of the epilogue and of the final chapter don't necessarily cancel each other out. One of the features Macy admires about people in Appalachia is their resiliency, and perhaps



tragic setbacks like Tess's death only add greater urgency to

the need to find solutions for the opioid epidemic.



## SUMMARY AND ANALYSIS

The color-coded icons under each analysis entry make it easy to track where the themes occur most prominently throughout the work. Each icon corresponds to one of the themes explained in the Themes section of this LitChart.

## PROLOGUE

On a very hot day in 2016, at a federal prison just outside of Bruceton Mills, West Virginia, the imprisoned former drug dealer Ronnie Jones has his first visitor: the author of *Dopesick*, Beth Macy. Jones is in the second year of his 23-year prison sentence for being involved with a heroin ring. This particular area of West Virginia used to be a **coal** mining hotspot, but shortly after the turn of the millennium, most of the mines shut down—leaving prisons as the state’s biggest employer.

During their early communication, which takes place over Jones’s prison-monitored email, Jones is skeptical about talking to Macy. Eventually, he agrees to communicate with her because he wants his young daughters to see a different side of him. As one prosecuting lawyer put it, Jones has a reputation for bringing a “tsunami of misery” to western Virginia: between 2012 and 2013, he ran vast quantities of heroin into the region. Macy wonders how many of Jones’s former users ended up dopesick after he was arrested or how many of them drove over to big cities where they took their chances with new heroin dealers.

Within a week of Macy’s interview with Jones, a batch of heroin comes to Huntington, West Virginia (four hours away from Jones’s cell), and it kills 26 people in a single day. A new synthetic opioid from China called fentanyl has proven to be particularly deadly. And the issue isn’t limited to Virginia or West Virginia: it’s nationwide. In the past 15 years, 300,000 Americans have died of opioids, and some experts predict it will only take five years for another 300,000 to die.

*Although Dopesick is about the opioid epidemic and the pharmaceutical industry, the story begins at a federal prison, establishing how healthcare and criminal justice are interconnected. Coal is an important symbol in the book that represents the old way of life in Appalachia (the region of the United States near the Appalachian Mountains, where mining was once the biggest industry). As an investigative journalist, Beth Macy has firsthand experience conducting interviews with the people she profiles in the book and she sometimes describes the process, as she does here with Ronnie Jones.*



*As a prisoner, Jones has his freedom restricted in many ways: his communications are all monitored by prison guards, and he doesn’t get to see his young daughters. Some people, like the prosecuting lawyer here, believe that Jones’s punishment is fitting, given all the misery that came as a result of the heroin that Jones imported. Macy, however, questions such easy narratives. She asks whether the users who bought Jones’s heroin are really better off with Jones in prison or if they will just seek heroin from other sources.*



*The figures cited here are from 2018, but they nevertheless show the staggering human toll of the opioid epidemic. This is the first of many scenes where Macy uses statistics to back up her argument, appealing to the value of science to convince her audience. This passage also broadens the scope of the book, showing that, while much of Dopesick focuses on regions of Virginia, the opioid crisis is larger than any one place, impacting the whole of the United States.*



Seeking to understand the opioid epidemic from another angle, Macy visits Kristi Fernandez in Strasburg, Virginia, in the spring of 2016. Kristi's son, Jesse, has died of an overdose and was buried with a headstone that carries the number of his varsity high school football jersey: 55.

Jesse was a popular, energetic boy in a small town where football is everything. Kristi and her family maintain Jesse's grave, keeping it clean and even bringing decorations. Kristi also remains obsessed with figuring out what happened to her son: how he went from high-school football star to construction worker to overdosing. Macy agrees that the questions of mourners like Kristi are a central part of the story of the opioid epidemic.

Most new drugs start in urban centers and move out to rural areas, as was the case with cocaine and crack. But the opioid epidemic went in reverse, starting in places like Appalachia, the Rust Belt, and rural Maine—places where families traditionally depend on high-risk industries, like steel, **coal**, and logging. Jesse was born right around when the epidemic started, in the mid-1990s.

Opioids made an impact in a diverse variety of communities. First were the **coalfields**, in places like St. Charles, Virginia (where OxyContin was introduced in 1996). Then there were the suburbs, like the ones around Roanoke, Virginia, (Macy's hometown and a place where heroin arrived by the mid-2000s). The epidemic first got attention in Roanoke when Spencer Mumpower (son of local civic leader Ginger Mumpower) went to federal prison for the overdose death of a former classmate. Finally, the epidemic made it to big cities like Baltimore and New York, where needle drops in public restrooms became evidence of the spread.

*In addition to looking at the science behind the opioid epidemic, Macy also seeks to show the human side of individuals who have been affected by opioids. The fact that Jesse's gravestone is emblazoned with his high school football number emphasizes that when he died, he was young and healthy. Jesse was a unique individual, whose story Macy will explore in greater detail, but he also represents the many other healthy young people who died as a result of opioids.*



*Kristi's dedication to maintaining her son's grave represents her dedication to his memory, even long after his death. While Jesse's gravestone represented the immediate consequences of the opioid epidemic, Kristi's grieving represents the longer scars of the epidemic and how it did long-term damage to families across the country.*



*This passage sets up the link between rural and urban America during the opioid epidemic, an important recurring theme. Coal—and other industries with dangerous, blue-collar jobs—represent the old way of life in Appalachia. While they offered stability to families in the region and are sometimes remembered fondly, they were also dangerous and helped create conditions that would allow the opioid epidemic to thrive.*



*Macy establishes a timeline for the opioid epidemic, showing when it reached different parts of the country. This timeline once again emphasizes how in the modern United States, the fates of rural towns and major urban centers are connected. By bringing her hometown of Roanoke, Virginia, into the story, Macy shows that she isn't simply a disinterested observer in the story, but someone who has a stake in the outcome. By emphasizing how widespread the epidemic is, Macy argues to readers that they may have a stake in the outcome too.*



The epidemic didn't reach the Shenandoah Valley (where the dealer Ronnie Jones lived) until 2012. There, the epidemic followed the same pattern as elsewhere: users began with prescription opioids, then increasingly turned to heroin and to dealing themselves in order to avoid the pain of dopesickness.

*Throughout the book, there are many examples of seemingly unbreakable cycles. One of the most important is the cycle of opioid addiction, where even users who want to quit often struggle with overcoming dopesickness (the painful withdrawal symptoms for people who go off opioids). The book is called Dopesick partly because dopesickness is one of the main drivers behind addiction, but also because the title suggests that the whole United States is metaphorically "sick" with the opioid crisis.*



To get to Ronnie Jones, Macy takes **Interstate 81**, dubbed a "heroin highway" by some, and she goes in the opposite direction that Jones went for his drug runs. She passes through the suburbs of Roanoke where she sees the toll of the epidemic, particularly in parents who are dealing with addicted children or grieving their deaths. When she finally meets Jones in prison, he looks older and thinner than his mugshot, with more gray hair. Macy thinks of all the victims of the epidemic and what Jones might say to their mothers. The two sit down, and Jones waits for Macy to start.

*This passage introduces Interstate 81, the physical embodiment of all the connections between rural and urban life that Macy explores in the book. Macy's physical journey in this passage represents the metaphorical journey that the opioid crisis took across the country, leaving destruction in its wake. Macy ends the prologue on a cliffhanger, partly to build suspense about an eventual conversation with Jones, but also to suggest the sprawling, open-ended nature of the opioid crisis. The prologue ends in the same place where it begins, with Jones in prison—this cyclical structure resembles cycles of addiction as well as the cyclical nature of history (particularly when it comes to opioid epidemics).*



## CHAPTER 1

The opioid epidemic affects just about every segment of the American population, but its most severe toll is on the former mill and mining towns of central Appalachia, where joblessness is high and many are desperate. It was among the first places hit by opioid pills (beginning in the mid-90s), and it continues to struggle. A recently published study suggests that 56 percent of Americans know someone who has abused or died of opioids.

*After a broad, wide-ranging prologue, Macy zooms in to provide a more detailed history of the opioid crisis. She continues to cite scientific sources showing that a shocking 56 percent of Americans know someone who has had opioid problems. She convincingly argues that the opioid epidemic is a problem for all Americans by showing that a majority of Americans have been affected in some way.*



In the Shenandoah Valley, a preschool teacher tells Kristi Fernandez that her then-four-year-old son, Jesse, is too wild in class, so a doctor suggests Ritalin. Two years later, Kristi tries Ritalin on her son, and it seems to stop teacher complaints without changing too much about Jesse.

*Expanding on the story of Jesse and Kristi from the prologue, Macy looks at the sequence of events that led to Jesse's death. The full significance of Ritalin in the story isn't yet apparent, but it does show how social factors (like Jesse's performance in school) intersect with medicine.*





In 1997 in Virginia's Bullit Park, near Lee County, Lieutenant Richard Stallard is on patrol. The year is an important turning point in the history of the epidemic. People haven't yet begun locking their doors to prevent desperate addicts from stealing their things. The region, once known for widespread poverty and hunger, is now known for obesity, disability rates, and the illegal use and selling of prescription drugs. Stallard is waiting in his patrol car for an informant.

The informant comes up to Stallard's car and tells him about a new drug called "Oxy," a.k.a. OxyContin. Users have learned how to get around the pill's time-release mechanism, giving them a massive dose all at once, with a rush similar to heroin. Stallard rushes back to check with a local pharmacist, who laments that they only just got the drug a month or two ago.

The FDA approved OxyContin in 1995. The drug is the invention of a comparatively little-known pharmaceutical company called Purdue Frederick, from Connecticut. The company is currently owned by three brothers: Mortimer, Raymond, and Arthur Sackler. They slowly grew the company, first getting into the painkiller business with an end-of-life drug called MS Contin, which is derived from morphine, and which came out in 1984. But the patent on MS Contin was set to expire in the mid-1990s, so Purdue Pharma launched OxyContin to replace the income they would lose from MS Contin. They advertised the drug heavily through their extensive network of salespeople. To advertise it, Dr. J. David Haddox, head pain specialist at Purdue, claimed that iatrogenic (meaning doctor-caused) addiction was extremely rare.

History, however, provides several reasons to be skeptical about Haddox's claims about OxyContin's lack of addictive properties. Even Neolithic humans understood the power of poppy plants, and opium played a major role in two 19th-century wars between the British and the Chinese. American Civil War doctors also noticed that injured soldiers often became addicted after treatment with morphine—an addiction that affected perhaps as many as 100,000. By the 1870s, injecting morphine was a popular cure among the upper class in the United States and Europe, prescribed for a wide range of ailments, and its addictive properties continued to spark public debate.

*Richard Stallard shows how the opioid crisis looked to someone on the opposite side of the law from Ronnie Jones. His experiences in the mid 1990s show that, while the opioid epidemic is widely recognized today, at the beginning, there was a lot of confusion and uncertainty. This was particularly an issue for people in law enforcement, who weren't sure how to respond to the new threat.*



*Stallard's experience of discovering OxyContin is similar to the experience that many law enforcement officials probably had when first discovering the drug. The fact that his local pharmacist is surprised at how quickly the drug reached the black market shows that even those in the medical community were often in the dark during the early days of the crisis.*



*The Sackler family and Dr. Haddox are the most visible figures in the book who show how the pharmaceutical industry put profits ahead of the well-being of patients. Macy doesn't lay this all out at once; instead she starts with biographical details. At first, the story of the Sacklers may seem mundane or even admirable—they built a successful company from humble beginnings. Their drug, OxyContin, supposedly relieves pain without any significant risk of addiction—a major breakthrough. As Macy will reveal, however, this outward appearance of achieving the American Dream is hiding a darker story.*



*Macy begins dismantling the rosy picture of Purdue Pharma by looking back to history. Her condensed history of opioids shows that opioid epidemics are far from a modern problem—there have been plenty of comparable events in the past. The question then becomes, if opioids have such a long history of problems, why weren't doctors more skeptical about claims around OxyContin? Macy leaves the question unanswered for the moment, showing only how cycles of history seem to inevitably repeat themselves.*



While working at Bayer in the 1890s, the chemist Heinrich Dreser created a new drug called heroin, which he hoped would replace codeine (which is derived from opium and known to be addictive). Bayer sold the drug widely, claiming that addiction was extremely unlikely.

Around the turn of the 20th century, however, some prominent doctors began to call out their peers for overprescribing. By 1900, an estimated 250,000 Americans were addicted to painkillers derived from opium. In 1914, the new Harrison Narcotics Act greatly limited the sale and possession of heroin, and by 1924, new laws banned the manufacture of heroin outright.

Despite regulatory efforts and the so-called “War on Drugs” that began in the 1980s, in the 1990s history began to repeat itself. Purdue’s OxyContin is chemically similar to Bayer’s heroin, but in spite of the historical parallels, no one is able to predict the full extent of the epidemic it will cause.

When OxyContin arrives in 1996, one of the big trends in medicine is the idea that pain is “the fifth vital sign” (supplementing the traditional four: blood pressure, heart rate, respiratory rate, and temperature). The budget people at Purdue see the opportunity for massive profits. They push OxyContin aggressively, including making \$300,000 worth of branded pens.

An influential *New York Times* article published in 2000 further contributes to the idea that health care experts have been ignoring pain. The story does not, however, define what counts as adequate pain relief and many others in the industry struggle to define what this means. Doctors get more serious about how they treat pain, and as a result, they prescribe more painkillers. Many of these doctors don’t realize that the effects of their prescriptions will be disastrous—by 2017, the economic toll of the opioid crisis is estimated at \$1 trillion.

*The story of Heinrich Dreser at Bayer is presented in a way that deliberately parallels the later events at Purdue Pharma. Heroin was first developed to treat pain without causing addiction, just as Oxycontin was developed for the same purpose almost a century later.*



*As with OxyContin, any good intentions behind the development of heroin are quickly overshadowed by its impact in the real world. Macy cites dates to show that the federal government was somewhat slow in responding to the heroin crisis—and the same will turn out to be true with the new opioid crisis.*



*Macy’s history of opioids in the United States is highly critical of the government. While she doesn’t dismiss the importance of government reform, this section sets up a theme that she will return to later: that when it comes to fixing the opioid crisis, people outside of the establishment (whether that means the federal government or the medical establishment) will play an important role in finding solutions.*



*This passage begins with a seemingly reasonable assertion: that doctors should pay more attention to a patient’s pain. It quickly spirals into something ridiculous, however, with Purdue Pharma spending an absurd \$300,000 on pens. It represents how the claims of companies like Purdue Pharma may have seemed reasonable on the surface but how they didn’t stand up to greater scrutiny.*



*While Macy doesn’t avoid criticizing companies like Purdue Pharma, she also shows that other factors combined to set the stage for the opioid crisis. The fact that pain as a fifth vital sign was written about in a major *New York Times* piece shows that the idea had fully entered the mainstream (and helps show why doctors may have ignored history and believed the fantastic claims of Purdue Pharma).*



In the early days of OxyContin, there are few who raise warnings, and many of these warnings aren't very strong. Eventually, however, a couple more forceful voices will break through: the country doctor Art Van Zee and his colleague, the Catholic nun and drug counselor Sister Beth Davies. Despite being outsiders, they are both experts at what they do.

*When even major institutions like the New York Times are lining up to support the claims of Purdue Pharma, the work of pushing back against these claims will by necessity fall to outsiders. Macy shows how Van Zee and Sister Beth are both positioned to question authority (while also showing that they have the experience and credentials to back up their opinions).*



## CHAPTER 2

Around the same time that Stallard is meeting with his informant, the FDA changes the rules for drug ads, giving pharmaceutical companies more leeway. The industry more than triples in size in just three years, with drug companies aggressively trying to win influence with doctors.

*While Macy hinted in the previous chapter at how Purdue Pharma made OxyContin a best-selling drug, this chapter goes into greater detail, showing how the company overcame safeguards that should have theoretically prevented a dangerous opioid like OxyContin from entering mainstream medicine. One of Macy's biggest targets of criticism is the FDA, which approved OxyContin's use and allowed it to be widely advertised.*



OxyContin becomes a huge marketing success in rural America, where disability claims are already high. Purdue targets doctors who already prescribe lots of rival painkillers, hoping to convert them to OxyContin by handing out OxyContin-branded freebies. The campaign is wildly successful, and by 2000, family doctors are the largest group of OxyContin prescribers. In that same year, pharma companies spend over four billion dollars directly marketing to doctors, often providing additional freebies to receptionists, nurses, and anyone else who might stand between them and the doctor.

*While there was a genuine need for pain medications in rural parts of the United States (as evidenced by all the disability claims), Macy shows that the spread of OxyContin was only possible due to the massive amounts of money that Purdue spent on advertising (which itself was only allowed because of loosened FDA regulations). The fact that Purdue Pharma spent over four billion dollars on advertising suggests that profits from OxyContin must have been even greater. Macy presents these shockingly high figures to explore how money influences the pharmaceutical industry (and not in a good way).*



The main technique these sales reps use is called the "Dine 'n' Dash." Reps start by taking doctors to fancy restaurants but soon progress to just giving the doctors food to take home, then progress to giving the doctors other things, like gas or even shrubberies.

*Normally, dining and dashing is eating a restaurant, then leaving before paying. In this case, however, sales representatives are giving doctors fancy meals or other perks before taking off. The implication is that because the doctors received these gifts, they will be more likely to consider prescribing the drugs that the sales reps are selling.*



Steve Huff first encounters pharmaceutical swag as a medical resident in the mid-1990s. It's not just stickers and branded merch, but even golfing outings and free lunch most days of the week. Later, as a family doctor, Huff decides that the ethical thing to do is turn down these free meals, and he tries to convince the others at his practice to do the same.

*Steve Huff is just one doctor, but his experiences are typical of what many doctors experienced in the mid-1990s. He is a bit unusual in that he refuses the "free" gifts from sales representatives rather than accepting them. The fact that this was seen as unusual at his practice highlights how widespread this gifting culture was.*



When in 2003, Huff moves to a new practice in Laurel Fork, Virginia, he finds himself overwhelmed by the volume of patients who had been prescribed large amounts of opioids by his predecessors. He cuts back severely on narcotics prescriptions and finds the whole experience very stressful—two patients even threaten his life.

*As the new member at his practice, Huff is able to see things from an outside perspective. To him, it is obvious that his predecessors have been prescribing too many opioids, but because the culture of overprescribing is so ingrained at his practice, other doctors and patients resist Huff's changes. Macy develops the theme of how sometimes an outsider's perspective is necessary to effect change.*



Dr. Sue Cantrell, a former pharmacist who has been a longtime health-department director in Virginia, sees the arrival of OxyContin as particularly ill-timed. The decent-paying mining jobs and lower-paying production jobs have all been steadily drying up, due to factory closings and increased automation. Cantrell gets her first call about OxyContin from a doctor based out of one of the smallest, poorest areas in the state: Dr. Art Van Zee.

*Cantrell, as a health administration official, represents another side of the opioid epidemic. She views the situation from a broader perspective than people like Stallard or Huff (who are largely focusing on their own communities), but she faces similar challenges, feeling isolated and lacking in information when the crisis begins.*



Van Zee is a Vanderbilt-educated doctor originally from Nevada who moved to tiny St. Charles, in Lee County, Virginia, at age 29 in order to help out a medically underserved community. There, at an NAACP rally to stop a planned KKK event, he met his wife, Sue Ella Kobak, who is a lawyer and an activist. When they got married, the flower girl was a three-legged goat, and Sue Ella didn't change her name. Some locals compare Van Zee to Abe Lincoln, because he is lanky and bearded.

*Van Zee's background establishes that he is an intelligent and passionate (if sometimes unconventional) doctor. His wife, Sue Ella, shares similar convictions and balances out his work. While Van Zee's resemblance to Abraham Lincoln is physical, Macy perhaps brings the comparison up to suggest how Van Zee's ideas about fairness and justice owe something to historical figures like Lincoln.*



Macy first learns about Van Zee from a 2003 book by Barry Meier called *Pain Killer*, which was one of the first books to explore the harmful effects of OxyContin. Van Zee was ahead of his time in recognizing the dangers of OxyContin, and he ends up spending much of his career dealing with the fallout of the opioid crisis.

*Macy gives credit to one of her sources for recognizing the significance of the opioid crisis and Van Zee's activism before she did. She acknowledges how her own work builds on the work of those who came before her.*



In the 1990s when OxyContin first arrives in Virginia, however, Van Zee is still confused about what's happening. He calls Sue Cantrell with some concerns about what he's seen experienced users do with the new pill, OxyContin. He hears horror stories about how the drug is causing people to spend vast amounts of money and basically stop functioning as normal humans.

*Rather than trusting the marketing hype around OxyContin, Van Zee looks around with his own eyes to see what OxyContin is doing in his local community. Macy suggests that if more doctors had taken this approach—of paying attention to what's actually happening in communities—the opioid crisis may not have been as severe.*



Cantrell, as the region's top public health official, begins in the late 1990s to call other officials to look into the burgeoning opioid crisis. They don't listen and mostly pass the blame elsewhere.

*Cantrell's experience illustrates one of the major challenges faced by activists trying to fight the opioid crisis—getting people in power to listen. Because the crisis is so widespread, it is easy for officials to pass the blame elsewhere.*





In the early 2000s, Debbie Honaker is a 27-year-old woman who lives a couple counties east of Van Zee. She is prescribed OxyContin and Percocet after routine gall bladder surgery that continues to leave her in pain. When this isn't enough for the pain, a neighbor advises her to snort the pills instead. Within three months, Honaker has become a regular user, learning how to fake kidney injuries to get more pills. Honaker begins stealing money from her husband and pills from her husband's grandmother.

Crystal Street is a patient in the same addiction clinic where Honaker is currently being treated. Street's father got addicted to morphine and Dilaudid in his 80s and was arrested for selling prescription pills from his nursing home bed. Honaker and Street have both themselves spent time in jail after going through near-death experiences to get more pills.

In the early days of the opioid epidemic, Van Zee watches as 24 percent of juniors at a local high school report having tried OxyContin, as well as nine percent of seventh graders. Many of his friends from the community begin showing up at the ER.

In the spring of 2000, before small-town newspapers were widely online, Van Zee doesn't yet know that the opioid epidemic is also affecting other communities. He first gets the news from a copy of the *Boston Globe* that a young doctor from his clinic brings back. The article details a remote area of Maine where addiction is on the rise, and as a result, crime is, too. Van Zee realizes that he and his community aren't alone and that it's time to organize.

Van Zee begins holding public meetings. At one, an undercover Purdue Pharma rep raises sharp objections. Sue Ella begins to worry that her husband's heavy caseload is getting the better of him. He begins contacting Purdue directly, writing increasingly pointed letters. Purdue remains resistant. At one point, Purdue's medical director, Haddox, calls a local Virginia reporter to complain about her crime coverage (which mentions connections to OxyContin).

*Macy uses the specific example of Debbie Honaker to show how even people who don't seem like likely drug users can become addicted to OxyContin. Nothing in Honaker's previous history suggests that she would become addicted to pills, but within just a few months she is faking injuries and stealing pills, using sophisticated techniques to keep up her addiction.*



*Crystal Street and her father provide further evidence that Honaker's story isn't unique, that in fact addiction clinics are full of people like Honaker. Macy tries to show that no one is simply an "addict"—that all of the people affected by the epidemic had their own lives and stories before the drug hijacked everything.*



*If even many high school juniors can get their hands on opioids, this suggests that the drugs are already circulating wildly in the region. The appearance of Van Zee's friends in the clinic confirms this. The fact that there is so much evidence of the epidemic but so few people in the community acknowledge it suggests that there is still a stigma about discussing the issue in the open.*



*Macy reminds readers how the news worked very differently back near the turn of the millennium and how it's important to understand this when considering the opioid crisis. As a journalist, Macy is particularly interested in how the news media covered (or ignored) the opioid epidemic and how this affected its spread.*



*Van Zee displays extraordinary dedication to his activism. The fact that he achieves so little at first highlights how large the challenges facing him were. Macy looks at how Purdue Pharma and its employees intervened to try to control the media narrative around OxyContin. Though Macy supports independent journalism, she also explores how it can be influenced and manipulated by money and power.*



At a meeting about crimes related to the opioid epidemic, Van Zee has a chance to speak with Haddox. Despite Van Zee's concerns and accusations, Haddox defends Purdue's behavior and says it's no different from what other pharma companies do.

*Even after securing a meeting with Haddox, Van Zee is not able to get meaningful change from the company. Macy shows how profit motivated companies like Purdue far more than concerns from activists like Van Zee.*



By late 2000, Purdue is giving doctors a promotional video about how OxyContin is helping patients with pain get their lives back. They push back against claims that OxyContin is addictive, citing a one-paragraph letter to the editor from a 1980 edition of the *New England Journal of Medicine*.

*While Macy champions the value of science in Dopesick, she also shows how the appearance of scientific legitimacy can be cynically exploited. In this case, the evidence for OxyContin's lack of addictive properties is very weak, but this weak evidence becomes the cornerstone of a whole marketing campaign for Purdue. It's obvious the evidence is insufficient; Macy is making the argument that, for Purdue, this wasn't a case of good intentions gone wrong but in fact, a deliberate attempt at deception.*



By March 2001, Van Zee is frustrated that his letters are doing nothing while the harmful effects of OxyContin in his community only get worse, with people resorting to increasingly bold crimes to get more pills. Van Zee and the Lee County Coalition for Health launch a petition asking the FDA to recall OxyContin, receiving over 10,000 signatures.

*Van Zee's pivot from contacting Purdue to contacting the FDA represents an acknowledgment that companies like Purdue can't be shamed into doing the right thing—they have to be forced into it by a regulatory board.*



The next month, the DEA begins a “national action plan” to observe Purdue's distribution and marketing. In response to the pressure, Purdue puts out its own plan to reduce abuse. The FDA announces in July 2001 that it will add a black-box warning (the highest kind for prescription drugs) to the label for OxyContin. Purdue tries to downplay the black box, suggesting that “legitimate patients” are being hurt by the decision. They maintain that the issue is abuse, not the drug, and that Purdue shouldn't be blamed for any of the crimes committed by OxyContin users.

*The DEA clearly has more sway with Purdue than activists like Van Zee. When the FDA gets involved, its new regulation seems to be largely symbolic—Purdue is able to spin the issue in their favor. Macy shows here that enforcement agencies like the DEA and FDA do have real power to influence companies like Purdue but that their actions often fall far short of what's required. She further develops the theme of skepticism toward establishment solutions to the opioid crisis.*



One of Purdue's other tactics to silence opponents is a \$100,000 “grant” that they offer to community leaders in Appalachia like Stallard, with the money to be put toward drug treatment and law enforcement. During a meeting where several locals discuss the issue as a coalition, many—including Van Zee and Sue Ella—are initially leaning toward accepting the money. But a five-foot-tall nun named Sister Beth is adamantly opposed to the idea.

*The \$100,000 grant presents an interesting moral question for the activists. On the one hand, they want Purdue to have to pay for the damage its drug has caused, but they are also wary about the strings that might come attached if they accept the money. Macy shows that Van Zee and Sue Ella are willing to accept the money, suggesting that sometimes activism involves making difficult, pragmatic decisions.*



Sister Beth is a Staten Island native with a masters from Columbia. She has a history of activism in the **coal** industry, helping miners demand reparations. She threatens to quit the coalition if they accept the grant, calling it “blood money.” Eventually, the whole group agrees with her.

*Ultimately, however, the activists decide not to accept the money. The back-and-forth discussions of the activists provide a stark contrast with the communications with Purdue Pharma, where representatives like Haddox dogmatically repeat the same claims over and over.*



## CHAPTER 3

The story of the OxyContin epidemic doesn't reach national media until a *New York Times* article published on February 9, 2001. By the summer, it is clear that the opioid abuse epidemic is spreading out from areas like Virginia and Maine, into the rest of Appalachia, into major East Coast cities, into the Deep South, and even into parts of the Southwest. The parents of those who die from overdoses are some of the first to organize a response. Ed Bisch, from Philadelphia, first learns about OxyContin on the day that his son Eddie dies of an overdose.

*Macy begins looking in more detail at the next phase of the epidemic when it was branching out from rural communities to more suburban and urban ones. As with before, Macy often follows the stories of the families (particularly parents) of opioid victims. This is both a narrative choice (since the grief of these families eloquently shows the impact of the epidemic) as well as a practical one (since the families are often the only ones alive who know what happened).*



The new movement of OxyContin from rural areas into the cities and suburbs resembles the wave of iatrogenic morphine and opium addiction that swept through the nation about a century earlier. Eventually, opioid addiction died out in most places except big cities (where heroin was part of the jazz scene). When, after the Vietnam War, 20 percent of American soldiers came back with signs of heroin dependence, it didn't lead to an epidemic, largely because there was no heroin network outside of major cities. By the mid-1990s, however, OxyContin changed this by expanding the supply.

*While Macy often looks to draw comparisons between the current opioid epidemic and historical issues with opioids, she also acknowledges how the current epidemic is unique. In this case, the lack of widespread, long-term addiction after the Vietnam War highlights how in the 1970s, the rural and urban parts of United States were not as closely connected. She suggests that perhaps if an event like the Vietnam war had happened in the mid-1990s, it would have led to a similar epidemic, fueled by greater connections between urban and rural communities.*



Ed Bisch learns that his son Eddie wasn't alone—that Eddie's death was in fact the 30th overdose in the region in just the past three months. He starts a message board called OxyKills.com. In 2001, the same year OxyKills.com is founded, OxyContin hits \$1 billion in sales for the first time.

*Macy's history of the opioid epidemic is also in some ways a history of media. Here, she looks at how awareness about the epidemic was affected by the media that was available at the time and how message boards helped create a community in a way that differs from how the Internet creates communities today (when individual message boards are less common and social media is generally run by large tech companies rather than individuals).*



Lee Nuss is another parent with a story similar to Bisch. She lost an 18-year-old son named Randy to the opioid epidemic. Though she initially hesitates to reach out because of grief, she eventually connects with Bisch and discovers that they're from similar areas of Philadelphia. The two of them eventually align with Van Zee and Sister Beth after they read Barry Meier's 2003 book *Pain Killer*. Nuss and Bisch launch a grassroots nonprofit to oppose the opioid epidemic, called Relatives Against Purdue Pharma (RAPP).

More memorials flood the OxyKills.com message board. Barbara Van Rooyan's 24-year-old son Patrick is another victim. Van Rooyan asks Van Zee how OxyContin ever got approved for sale by the FDA. As it turns out, Van Zee receives some documents from Sue Ella about Purdue Pharma, including their application to the FDA for OxyContin's approval. It turns out that, although Purdue was claiming they had no knowledge of the drug's potential for abuse until February 2000, the drug's 1995 FDA application contradicts this.

The FDA's top examiner noted in 1995 that the drug could be crushed up for a more immediate high and that the company should be cautious in its marketing. Two years later, however, the same examiner was hired as a consultant by Purdue.

Armed with this knowledge, in January 2002, Van Zee goes to testify before an FDA advisory committee. At the meeting, he is outnumbered 19-to-1 by Purdue people, and they try to portray him as a kook. Purdue also falls back on the fact that no clinical studies have been done to look at the long-term risks of opioid abuse. The FDA ends the forum promising to monitor the abuse situation more closely, but many, like Van Rooyan, feel that it's too little too late. It takes several more years, until 2013, before it comes to light that FDA regulators had been meeting in expensive hotels with Big Pharma executives, who were using a strategy called "enriched enrollment" (weeding out people from studies who don't respond well to drugs) in order to get approval of their drugs.

Staffers at the FDA get to know Barbara Van Rooyan whether they want to or not. She picks up where Van Zee left off, formally submitting a recall petition for OxyContin to the FDA in 2005.

*Though Van Zee and Sister Beth are some of the most visible activists during the opioid epidemic, Macy presents the story of others like Bisch and Nuss to show that in fact, activism came in many forms and emerged from different places. The story of Bisch and Nuss is in many ways a hopeful counterpoint to the stories of addiction covered in the book—while ordinary people can suddenly find themselves struggling with addiction, there's also the possibility for ordinary people to achieve great things as activists.*



*The FDA papers are the most damning evidence so far to suggest that Purdue Pharma deliberately covered up negative side-effects of OxyContin during the marketing campaign. They also show that the FDA failed to regulate OxyContin even when presented with information about its addictive qualities. Macy further explores how competing interests can cause companies and regulatory agencies to ignore science when it turns up inconvenient information.*



*With the example of the FDA examiner, Macy shows how people can be bought and sacrifice their principles. While many aspects of the opioid crisis are complicated, sometimes it is as simple as following the money.*



*The fact that Van Zee is outnumbered 19-to-1 shows that the odds are stacked against him and highlights how exceptional his viewpoint was in 2002. As with previous cases (like with the black label on OxyContin), the FDA promises action but makes largely symbolic gestures. Strategies like "enriched enrollment" show how pharmaceutical companies use the appearance of science to get approval for drugs, but the expensive hotel meetings make it clear that for pharmaceutical companies and for many FDA regulators, money was the biggest motivator.*



*Despite being outnumbered, activists like Barbara Van Rooyan show persistence and instead of being discouraged by the lack of results, they continue to organize.*





RAPP gets involved with civil lawsuits against Purdue. Though Purdue wins the cases, the legal bills are adding up. To help rehabilitate its reputation, Purdue hires the consulting firm of former New York City mayor Rudy Giuliani (who was recently popular because of his response to the 9/11 terrorist attacks).

One of the early civil lawsuits that RAPP gets involved with is a wrongful termination case about a former Purdue sales representative. The representative believes she was fired because she refused to sell OxyContin to doctors who were illegally overprescribing it. White has a single lawyer with no staff, in contrast to Purdue's high-powered team and their consultancy with Rudy Giuliani. Ultimately, the judge rules in favor of Purdue, saying that the former sales rep's lawyer had not sufficiently proved that Purdue's tactics were illegal.

Back in western Virginia, John L. Brownlee is a 36-year-old former paratrooper, now an attorney who likes to make a splash in the press. He likes to take risky cases and wants a big win so that he can run for office, and he sees an opportunity with OxyContin lawsuits.

In 2005, Purdue lawyer Howard Udell goes after Barry Meier (author of *Pain Killer* and a *New York Times* journalist). Udell gets Meier taken off the opioid beat at the newspaper because, as the author of a book about OxyContin, he has a financial conflict of interest. For the most part, Meier doesn't write about Purdue in the paper for four years.

Brownlee (along with his office's fraud investigator, Gregg Wood), keep in communication with Van Zee and RAPP about the latest OxyContin news. Wood in particular is passionate about collecting dirt on Purdue.

*The involvement of Rudy Giuliani (who was influential at the time) sets up a David and Goliath battle in the courtroom, with Purdue having far more money and resources than the activist groups bringing civil cases against them.*



*This court case shows that Purdue's strategy of using power and prestige in the courtroom is effective. The judge's ruling leaves things open-ended, however, suggesting the possibility that maybe some future court case could provide enough evidence to show that Purdue's conduct is illegal. This case illustrates how the progress of activists like RAPP was slow.*



*Macy mentions Brownlee's history as a paratrooper to highlight his daredevil personality. He gets involved with opioid court cases partly for selfish reasons (to improve his own political reputation), but Macy has shown that activist groups can work together even when they are made up of people with different motivations.*



*When a newspaper reporter is assigned to a beat, they cover once specific issue in depth. This helps them become experts on reporting the topic. As the reporter on the opioid beat, Meier was well-qualified to report on it—which was dangerous for Purdue, since they were trying to cover up the addictive nature of OxyContin. The fact that Udell gets Meier reassigned suggests that even the free press wasn't immune to Purdue's influence.*



*One of the things that all anti-opioid activists have in common is passion. The fact that Wood is interested in collecting information contrasts with how Udell got Meier removed from the opioid beat of the *New York Times*. It sets up the activists as people looking to bring the truth to light, while Purdue is trying to stifle it.*



Fayne McCauley is a miner in Lee County, Virginia, who injured his shoulder in the 1990s and got prescribed OxyContin. Though McCauley is not the ideal client for a lawsuit against Purdue (since he has admitted to taking other drugs), his case seems promising to an ambitious lawyer from Abingdon who agrees to take up the case. Again, however, a judge rules that there is not enough evidence to rule in McCauley's favor, suggesting that the risk of addiction was not proven to be high enough to outweigh the benefits of eliminating pain.

Lisa Green, the daughter of McCauley, remembers sending her father to rehab multiple times before he died. Despite her efforts, however, on October 22, 2009, she gets the news that he has died. Though a state trooper tells her that her father died of a heart attack, his head is blown apart, suggesting murder over a bad drug deal.

Despite the 2005 loss in McCauley's court case, Brownlee continues to stock ammunition against Purdue. Later in 2005, news breaks that a federal grand jury is investigating Purdue, which gets the attention of Van Rooyan, Bisch, and the other RAPP parents. Leading the investigation are the assistant U.S. attorneys Randy Ramseyer and Rick Mountcastle, who are both much less interested in the spotlight than Brownlee but who have a record of sending overprescribing doctors to jail.

By fall 2006, Purdue's lawyers sense that things may be beginning to change. A memo from federal prosecutors to Brownlee suggests there may be enough evidence to prosecute Purdue with felony charges. But Purdue is able to use its influence to water down the charges, using Giuliani's influence as well as pressuring the current deputy attorney general, James Comey, to question Brownlee about his tactics. Brownlee personally drives to Washington to lay out his tactics, however, and Comey ultimately lets him go ahead.

*As a coal miner, Fayne McCauley is connected to the old traditional way of life in western Virginia. He is a victim first of the exploitative coal industry (which gave him the injured shoulder), then of the economic changes that made coal mining increasingly obsolete. This all makes him particularly vulnerable to OxyContin. The judge rules against McCauley, showing how high the burden of proof is and how difficult it is to find a perfect plaintiff to make the case against opioids.*



*As is often the case with family members of opioid victims, Lisa Green doesn't know the exact circumstances of her father's death. While problems with OxyContin were beginning to be more widely recognized in 2009, there were still significant gaps in information (either because people didn't talk about the issue or because companies like Purdue were deliberately suppressing information). Green's uncertainty about her father's death helps portray this.*



*The involvement of the federal government suggests that Purdue will face a higher level of scrutiny than ever before. It raises the question of to what extent the previous cases against Purdue were actually failures versus to what extent they were the building blocks for a federal case. Macy again shows how activism that may seem ineffective is sometimes gradually building towards larger change. The introduction of Ramseyer and Mountcastle (who are more cautious than Brownlee) reinforces the gradual nature of anti-opioid activism.*



*While Macy showed earlier the power Purdue was able to wield with its expensive legal team, now she shows the limits of what money can achieve in a courtroom. When there's enough evidence, even a consultancy from Rudy Giuliani isn't enough to secure a ruling.*



Purdue's boldest move comes in October 2006: they get a senior Justice Department officer to call Brownlee at home and pressure him to give Purdue more time for a plea agreement. Brownlee doesn't budge, and the company accepts the plea deal. Eight days later, Brownlee and several other attorneys find themselves on a list to be fired (although Brownlee is not ultimately fired)—this seems to be yet another case of Purdue meddling with U.S. attorneys' offices.

The charges are not as large as what Ramseyer and Mountcastle initially threatened against Purdue, but they represent a mixed success against the company, particularly compared to earlier lawsuit outcomes. The Sacklers realize that a plea deal is preferable to holding a trial in southwest Virginia, which could lead to much harsher penalties.

In May 2007, Brownlee unveils news of the settlement: Purdue has pleaded guilty to falsely advertising the benefits of OxyContin while concealing its potential for abuse. As a result, Purdue will pay \$600 million in fines, and top executives will admit to misdemeanor crimes (although without jail time). A sentencing hearing in mid-July will also force these executives to meet the parents of opioid abuse victims. At the press conference, Brownlee's team shows evidence from their vast collection of Purdue's wrongdoings—they have so much evidence that they have to rent extra space in a strip mall to store it.

## CHAPTER 4

Abingdon is the legal and artistic center of southwest Virginia, and by 2007 it begins to be known for upscale boutiques and farm-to-table restaurants. On July 20, 2007, the relatives of opioid victims gather in Abingdon to see the Purdue executives sentenced.

Van Zee can't make the sentencing, but he sends detailed notes to Sister Beth. Van Rooyan will also be there, as will Ed Bisch and Lee Nuss. They bring protest signs and memorials for their lost loved ones. The Purdue executives fly in from Connecticut on a private jet.

*Macy depicts how Purdue attempted to influence the Justice Department itself. She presents the facts and lets the audience draw conclusions. For example, do Purdue's actions suggest that even the government is vulnerable to the influence of big corporations or does the fact that Purdue failed suggest that some traditional institutions can't be corrupted? Macy seems to suggest that both of these things can be true.*



*While this court case is a big win compared to previous cases, it also falls far short of the goals of many activists. The fact that the Sacklers want to avoid southwest Virginia suggests that even all their wealth isn't enough to protect them from everything.*



*While both the activists and Purdue hoped for a decisive victory in the court battle, Macy depicts how some cases are more complicated. From one perspective, this is a major win for the activists, who, with the involvement of the federal government, have achieved a historic win over Purdue's mighty legal team. On the other hand, however, this victory does little to address the underlying causes of the opioid epidemic or even to punish Purdue as a company, suggesting that the activists still have plenty more work to do.*



*The fancy shops and restaurants suggest that Abingdon isn't quite like some of the more rural places where the opioid epidemic took hold (although it is located near them in southwest Virginia and by 2007, the epidemic would have reached cities and suburbs).*



*Macy once again contrasts the situations between the activists and the pharmaceutical executives. Van Zee isn't even able to make the sentencing, but the Purdue executives have private jets that take them there directly, emphasizing how much easier they have it.*



Paul Goldenheim (Purdue's medical director), Michael Friedman (the CEO), and Udell seem stunned to see the families of the OxyContin victims there. Purdue's lawyers try to argue that the stigma of a criminal conviction is punishment enough for the men.

The Sackler family themselves are notably absent from the courtroom proceedings. In 2015, the Sacklers will be listed on *Forbes*' "America's Richest Families" list, with a net worth of 14 billion.

At the courthouse, many relatives of opioid victims argue that the Purdue executives deserve jail time and that even the multi-million-dollar settlement pales in comparison to the damage Purdue has done to families. The activists are also disappointed to learn that Purdue Frederick is being banned from participating in federal insurance programs instead of Purdue Pharma. (Purdue Frederick is a holding company, which basically acts as a shell company to plead guilty instead of the actual company.)

The judge in Abingdon is also frustrated by the lack of jail time, but his hands are tied by the plea agreement that Purdue made with prosecutors. The former Purdue people (Goldenheim, Friedman, and Udell) serve out their probation, with Udell dying of a stroke in 2013. Udell's son remains resentful of the measures taken against his father.

The sentencing in Abingdon ends up being one of the most dramatic ones the region has ever seen. Nuss, who brings her son's urn with her into the courtroom, is still disappointed that the Purdue executives don't apologize or truly admit to what they did.

## CHAPTER 5

People find out about the opioid epidemic in waves, often after shocking media stories like the deaths of Philip Seymour Hoffman and Prince. One of the biggest signs of the growing awareness is when the *Cincinnati Enquirer* becomes the first newspaper in the country to have a reporter dedicated solely to the heroin beat.

*Many families of opioid victims feel that it is important for Purdue executives to see them, perhaps because they feel it will help them see the consequences of their actions. The surprise that Goldenheim, Friedman, and Udell exhibit upon seeing the families suggests that perhaps they haven't had to directly face the consequences of their actions very often.*



*The fact that the Sacklers are still worth \$14 billion in 2015, shows that, while the court case had some positive outcomes for anti-opioid activists, it had very little negative effect on the Sacklers.*



*Shell corporations are companies that generally don't have employees and only exist on paper; they can sometimes be used for illegal purposes, like tax evasion, although they can also be used to exploit loopholes in the law. The fact that Purdue Frederick is being penalized instead of Purdue Pharma suggests that, despite Purdue's loss in the courtroom, the company still has ways to protect itself.*



*Macy depicts how the court system can lead to contradictions. On the one hand, the plea agreement was a win for activists, but it also removed the possibility of jail time for Purdue executives. Macy shows how anti-opioid activism often involved taking imperfect compromises like this in order to achieve progress.*



*The image of Nuss's son's urn emphasizes that even a total victory in court would not have been enough to undo the damage that OxyContin has done, particularly all the lives that it has already claimed.*



*While some people in Macy's audience may not have been directly affected by the opioid crisis, Macy highlights the much-publicized deaths of Philip Seymour Hoffman and Prince to emphasize how universal the issue is.*



In Roanoke, Virginia in February 2006, the local TV meteorologists Jamey Singleton and Marc Lamarre stun viewers when news breaks that they are both heavy opioid users (and that Lamarre has suffered a near-fatal overdose). The addicted weathermen are a wake-up call to Roanoke (where author Beth Macy lives), although the case of the weathermen is far from an anomaly. Previously, heroin use in Roanoke had been more or less limited to its Black residents, but increasingly, the epidemic crosses racial lines. People suffering from addiction neglect all their other relationships to focus on getting their next fix.

In 2006, Clifton “Lite” Lee is a dealer originally from Philadelphia who helps popularize heroin in Roanoke. When he is sentenced to jail in 2008, prosecutors show how, at the height of his business, he had profits of 600 percent. At the time, his story doesn’t reach Macy, even though she works at a newspaper.

Scott Roth is a young man in Roanoke who dies of a heroin overdose. Spencer Mumpower goes to prison in 2012 for selling Scott Roth the heroin that killed him.

Robin Roth, mother of Scott, recalls how her son had been on and off drugs since he was 17, in 2006. Though he tried to claim he’d only done weed, he had, in fact, smoked heroin. Despite her efforts to help her son with rehab, she wasn’t able to stop him from taking the heroin that would cause his fatal overdose.

In Roanoke, 2012 is the end of the opioid epidemic’s stealth phase. Jesse Bolstridge is a high school student who trades his Adderall to classmates in exchange for painkillers. His mother, Kristi Fernandez, knows something is wrong but can’t pinpoint the exact moment that her son’s life shifts and he becomes completely addicted to the pills.

*Macy tells her own story about how opioid abuse first became public knowledge in her own community. While the story is specific to Roanoke, it is also representative of a broader story of opioids in the United States. Weathermen are (or at least used to be) widely recognized figures in a local community. The fact that such visible people are struggling with opioid addiction suggests the epidemic really can reach anyone. They are the local equivalent of the stars like Philip Seymour Hoffman and Prince mentioned in the previous section.*



*The fact that even as a journalist, Macy didn’t hear about Clifton “Lite” Lee suggests that information about the opioid crisis remained scattered, even as late as 2008. The 600 percent profits Lee earned don’t necessarily justify his dealing, but they do provide context for why he would do it.*



*Macy is setting up a story that asks questions about responsibility during the opioid crisis. If Spencer Mumpower sold Scott Roth the heroin that killed him, how much responsibility does Spencer bear for Scott’s death, and if he bears responsibility, what sort of punishment does Spencer deserve?*



*The story of Robin and Scott Roth echoes some of the stories Macy has already told—particularly the part where a parent isn’t fully aware of the extent of their child’s addiction. Macy shows how the cycle of addiction repeats itself even in different situations and circumstances.*



*Macy has already revealed in the prologue that Jesse Bolstridge dies of an overdose. Just like Robin Roth, Kristi Fernandez isn’t able see the full extent of her son’s condition. Macy presents their stories in parallel to show that they weren’t neglectful parents: they were just facing a difficult-to-understand challenge that parents across the country have struggled with.*





Kristi is a local businesswoman, and she doesn't believe it the first time someone tells her that her son might have a pill problem.

In 2010, news breaks that a local heroin user named Brandon Perullo has tried to rob a bank. He is sentenced to prison in 2011. His mother, Laura Hadden, tries to get the local newspaper to draw attention to the issue, but they ignore her, finding the bank robbery itself more notable than the motivation behind it. She begins to do drug-prevention advocacy but attracts little attention at first.

Years later, Brandon is released from prison. Laura Hadden begins a new round of advocacy. Though Brandon seems to be adjusting well to life outside at first, his felony record makes it hard to find a job. Seven months after getting out of prison, he relapses, and two weeks after that, he dies of an overdose. Hadden believes the death may have been a suicide, in order to avoid dopesickness.

Kristi faces a similar situation to Hadden, but she didn't encounter Hadden's advocacy. Kristi knows her son has a serious problem, and so she reluctantly installs a lock on her bedroom door (so that he won't be able to steal valuables). Robin Roth also feels like a failure because of the death of her son Scott, not realizing how many parents out there are in similar situations (since internet support groups around the issue aren't prevalent yet).

At court in 2012, Spencer is convicted of selling Scott Roth the heroin he overdosed on. The judge suggests that it might be helpful for Robin to meet with Spencer, but she says she isn't ready.

In summer 2012, Macy follows Robin and Spencer as Spencer prepares for prison. Spencer opens up to Macy about his past, giving tips about how parents can stop children from accessing their drugs (for example, by removing any medicine from their cabinet that ends in "codone").

*As Macy has shown, Kristi's denial isn't evidence of obliviousness but evidence of how stealthily pill addiction can infiltrate communities, particularly among young and seemingly healthy people.*



*While Macy is a big advocate for journalism (and a journalist herself), she is also critical of the way some newspapers are run. The example with Brandon Perullo shows that many newspapers put undue emphasis on the most sensational parts of stories. For Macy, the real story here isn't the attempted bank robbery but the nationwide opioid epidemic that is fueling crimes like the bank robbery.*



*Brandon's experience with the criminal justice system is an extremely negative one. His time in prison didn't seem to rehabilitate him and if anything made it more difficult for him to adjust to life on the outside. Macy presents his story to question whether the current criminal justice system really best serves people like Brandon or if punishing small-time users is in fact counterproductive.*



*The lock on Kristi's bedroom door symbolizes how Kristi was forced to lock her son out of parts of her life—arguably for his own good and for hers too, although it's a tragic situation all around. Macy cuts over to Robin Roth's story to show that, ironically, just as many parents were feeling isolated about their situation, other parents around the country were facing the exact same circumstances.*



*Given the poor outcome that Brandon Perullo had with the criminal justice system, Macy has primed her audience to expect a similar outcome for Spencer.*



*Spencer, however, seems to actually improve his behavior after hitting rock bottom. His openness about his past behavior suggests that he has reflected on it and that he doesn't want other young people to find themselves in the same situation as him.*



Spencer recalls the night he sold Scott the heroin that led to Scott's death and Spencer's imprisonment. The two hadn't seen each other since high school, three years earlier. When Scott showed up to buy from Spencer, Scott looked like a full-blown junkie, weighing just 135 pounds. Later, in jail, Spencer has a hard time at first before finally hitting rock bottom and deciding to change.

In jail, after Spencer decides to turn his life around, he writes an apology letter to Robin Roth (which her therapist keeps until she's ready). By 2012, he is drug-free for two years and has replaced his drug addiction with a new focus on karate.

Robin begins to soften toward Spencer, and she learns from other newspaper stories that she is not alone. A drug-use survey at the local high school reveals that 6.4 percent of students have tried heroin and almost 10 percent have used prescription drugs illegally. While family members of victims go to Families Anonymous meetings, most keep quiet, either out of grief or out of shame.

## CHAPTER 6

An hour south of Roanoke, Virginia, is Martinsville, which in 2012 has the highest unemployment rate in the state. It has held that record for the past 12 years, ever since globalization reduced the number of factory jobs in the area. Macy began reporting on areas like Martinsville in 2008 for the *Roanoke Times* and later for her first book, *Factory Man* (2014). Because of the recession and because of the disappearing factory jobs, disability checks become a major source of income, which incentivizes people to stay sick. Children are frequently given Ritalin because the ADHD diagnosis will help them draw disability checks in adulthood.

Macy learns about the connections between poverty, disability, and opioid addiction when the Basset Furniture store (in Basset, Virginia) is burned down by an accidental arsonist who was trying to steal copper (to sell for money for opioids). The man who started the fire looks like a poor junkie who is desperate to avoid being dopesick. His circumstances are very different from Spencer Mumpower, who went to private school and several rehabs, but their desperation is the same.

*Spencer is willing to admit that he showed bad judgement by selling to Scott (who was clearly a danger to himself based on all the drugs he was taking). Spencer's ability to acknowledge his error suggests that he has the capacity for change.*



*Spencer's experience in jail is in many ways the ideal outcome—he learns from his mistakes and is ready to make amends. Macy leaves the question open, however, whether Spencer's progress happened due to his time in jail or in spite of it. One of the themes she returns to is how, in spite of broad patterns in common, everyone's journey with addiction is different, and what works for one person might not work for another.*



*Robin's sympathy for Spencer seems to suggest a growing awareness that, while Spencer did play a role in Scott's death, there are perhaps other forces that played an even greater role. The quiet of many grieving families represents quiet on the issue of opioids in general—in many parts of the U.S., there is still a stigma against discussing addiction in the open.*



*The Great Recession was a period of economic decline that officially lasted in the United States from December 2007 through June 2009, although arguably its effects on the economy have lasted long beyond then. It was likely a contributing factor to the high unemployment rate in Martinsville in 2012 (although the declining coal industry is another major factor behind unemployment in many parts of Virginia). Macy brings up the importance of disability checks not to shame people who draw them but to emphasize how limited the options are for people in the region to make a living wage.*



*Macy once again returns to the theme that the opioid crisis isn't happening in a vacuum. Race, class, unemployment, and poverty are all related to each other in complicated ways, and the opioid crisis only makes these connections more complicated.*



In rural America in the 2000s, the opioid epidemic enters its “wily adolescence.” It spreads like an infectious disease, jumping in particular between family members. The main hub is **Interstate 81**, where OxyContin spreads up and down the Appalachians.

In 2010, police begin to notice that the opioid epidemic is not just a rural phenomenon but also a suburban one, spread more among peer groups than families. The spread is stealthier in the suburbs because many users have more money and are able to better disguise their spending. Teenagers, for example, pretend to lose electronic devices when in fact they are selling them for drug money.

The death of Scott Roth helps wake Roanoke up to the seriousness of the epidemic. He was well-liked and remembered for his life-of-the-party personality, which makes his death particularly shocking.

Drug prevention coordinators have a hard time catching up—they don’t realize the connection between heroin and pills until at least 2014. Flashier drug stories like warnings about bath salts distract from the quieter problem with opioids.

Teenagers in the Hidden Valley region of Virginia become experts at finding pills, usually from other people who have been overprescribed. The 2010 reformulation of OxyContin, which makes the pills harder to crush up for an instant high, causes many to turn to heroin to fulfill their addictions. For most teenagers that develop addictions, the first drugs they took were Ritalin or Adderall (prescribed for attention deficit disorders but also abused as a study drug on campuses).

Between 1991 and 2010, prescription of stimulants like Adderall and Ritalin increases tenfold among all age groups, with some going to children as young as two years old. Although not all studies show that behavior meds lead to opioid abuse, some addiction researchers have suggested a connection. While the drugs can be helpful in the short term, there is also no evidence that these medications lead children to perform better in school over the long term—particularly if the stimulants become a gateway to harder drugs.

*While the opioid crisis is usually called an “epidemic” in the metaphorical sense (because it spreads like a disease), Macy shows that in some ways it may be a literal disease. The family spread of the opioid epidemic mimics the way that a contagious disease would spread through a community.*



*Macy looks at how money and class change the impact of the opioid epidemic on a community. While wealthier people have more options for treatment, Macy shows that wealth also has a dark underside: it allows the epidemic to hide, spreading through a community in secret.*



*Scott’s upbeat personality contrasts with the mercilessness of the opioid epidemic, suggesting that even youth and good health are not enough to make a difference.*



*Macy once again criticizes the media’s tendency to focus on sensational stories, like bath salts, instead of focusing on more important stories that don’t quite generate the same easy headlines.*



*Ritalin and Adderall are controversial because, arguably to a greater extent than OxyContin, they have legitimate medical uses (as a treatment for hyperactivity disorders), but they still do present the opportunity for abuse and may lead to future drug use. Macy seems to suggest that these drugs are overprescribed, but she makes a more nuanced argument because these drugs are not, on their own, anywhere near as dangerous as OxyContin.*



*There is not specific evidence to link Adderall and Ritalin to opioid abuse, so rather than making the argument that the drugs are dangerous, Macy simply argues that not enough is known about them, given how widely they are prescribed. Her claim that Adderall and Ritalin don’t lead to long-term improvements for children in school is perhaps one of Macy’s more controversial arguments, which is why Macy appeals to the expertise of scientific studies to support it.*



Brian is another member of the same Hidden Valley opioid-using group as Spencer. He becomes dependent on pills by the time he's 17 years old. In six months, he blows \$8,000 on pills. Finally, Brian's counselor stages an intervention with his parents, and he admits to them that he's addicted to heroin. They send him to detox. In 2012, at age 23, Brian is being weaned off Suboxone (a treatment for narcotic dependence) when he is interviewed by Macy and tells his story.

*Brian's story emphasizes how Spencer Roth's addiction story wasn't occurring in a vacuum—there were others in the same community like Brian who were going through the exact same thing (even if stigmas about discussing addiction prevented them from realizing it). The fact that Brian survived while Spencer didn't may not suggest any meaningful difference in their personalities or circumstances—it could simply show that when it comes to opioids, sometimes who lives and who dies all comes down to luck.*



Two mothers of opioid users meet and bond at a Families Anonymous meeting: Jamie Waldrop and Drenna Banks. Jamie and her family end up paying more than \$300,000 while attempting to treat her son Christopher. Jamie begins isolating herself so that her friends don't ask her how her kids are doing.

*Macy mentions the detail that Jamie Waldrop spent over \$300,000 on treatment to criticize the U.S. healthcare system. When treatment costs that much (and isn't even guaranteed to work), it means that even many people who want treatment aren't able to afford it.*



After two weeks into his first stay at a residential treatment center, Christopher learns that his good friend Colton Banks (son of Drenna Banks) has fatally overdosed. Colton died during what was supposed to be his "last hurrah" before going in for treatment.

*Colton isn't the only opioid user profiled in the book who will die right when he's on the cusp of receiving treatment. Macy shows just how precarious life can be for those struggling with addiction and how a simple matter of timing could mean the difference between life and death.*



Drenna remembers how two years before Colton's death, a family friend lost his son to heroin. At the time, she thought, "Why can't you control your kid?" but she soon realized that it's not so easy when she learned her own son had a hidden habit.

*Drenna's judgement toward her family friend isn't meant to portray her as an overly critical person; rather it shows how easy it is to judge when you don't have the full information about a situation. Drenna painfully learns this lesson when heroin comes to her own family.*



At Colton's funeral, Drenna presents him in an open casket. She begs during the service for Colton's death to be the last and for the stigmas about addiction to be lifted. Later, she speaks to Christopher about how Colton wouldn't want him to start using again.

*Many of the most committed activists against opioids are motivated by the deaths of people in their family or in their community. While these deaths can sometimes bring about positive change, it remains hard for people struggling with addiction (like Christopher) to change their habits overnight, particularly when quitting often means having to deal with the pain of dopesickness.*



Christopher, however, does relapse. Jamie refuses to bail him out financially again. Instead, she takes him to a hotel for a week for him to detox. At the time, he's still only 20 years old. This time, however, it works, and as of the publication of *Dopesick*, he has been sober for four years. He tries to give back to his community, mentoring other young people who are newly sober. Christopher is a rare case: less than a quarter of patients who receive abstinence-only counseling for heroin like he did are able to stay clean for over two years. (The recovery rate climbs to 40 to 60 percent for those who also get medical treatment, such as with methadone or naltrexone.) When Colton dies in 2012, there are still 130 opioid-addicted Americans out there for every one death.

*While Christopher seems to kick his addiction using an abstinence-only method, Macy questions whether his story really shows the benefits of abstinence-only treatment or whether it instead shows the benefits of having a dedicated support network (in this case, his mother, Jamie). Macy doesn't blame the parents of children who die of opioids—in many cases, the situation is out of their control—but she does show how, with luck, some dedicated families are able to help loved ones through the treatment process. Macy emphasizes how treating addiction isn't just about personal responsibility but in fact something that needs a whole community.*



## CHAPTER 7

In Woodstock, part of the Shenandoah Valley region of Virginia (two hours north of Roanoke), a big shipment of heroin has just arrived on **Interstate 81** from Harlem. Local sergeant Brent Lutz is investigating it, tracking the movements of two suspected low-level dealers. Lutz receives lots of money and resources from the government, with the goal of finding out who is involved with the local heroin ring and who is the boss of the two dealers.

*Macy begins telling the story of heroin in Woodstock, Virginia by following the perspective of a law enforcement officer. This is a perspective that many other real and fictional depictions of heroin also follow; however, Macy's conventional beginning is only the set-up for a more complicated story that will consider other perspectives. Perhaps she begins with Lutz's perspective because it is most familiar to many in her audience.*



In late 2012, Lutz (then age 30) becomes the lead narcotics investigator in Woodstock. Though he was working in other departments for the past six months, he'd worked in narcotics before, and in 2008, he made a major drug bust at George's Chicken, a local area known as a haven for meth and other drugs. During the six months that Lutz was out of narcotics, heroin exploded in his community. Lutz hears from an informant that there is a major heroin supplier out there who is known only by his nickname: D.C.

*One of the common themes during the opioid epidemic is a lack of information. In this case, the lack of information is dramatized by the lengths that Lutz has to go through to learn about a major heroin supplier who is known only by his nickname, D.C. At age 30, Lutz is a little older than some of the people profiled in the book who struggle with addiction, like Scott Roth or Jesse Bolstridge, but he is from the same generation. Though Lutz isn't a drug user, Macy invites the audience to compare his life to other people around his age in the book, highlighting both similarities and differences.*



Woodstock differs significantly from Lee County, with better indicators of average health: fewer smokers, fewer uninsured, and less drug-related mortality. Opioids are also prescribed at a much lower rate. Still, the declining workforce is a problem in Woodstock as it is in most parts of the country during the early 2010s, and this leaves the area vulnerable to the epidemic.

*The better health statistics in Woodstock once again emphasize the point that no amount of prior good health is enough to make someone immune to the effects of opioids. Macy also shows how the changing economic situation (particularly the Great Recession) helped make certain places more vulnerable to heroin than they were before.*





By spring 2013, Lutz has not yet learned the real name of the supplier nicknamed D.C. He has, however, learned some other important details: D.C. is Black and in his mid-30s, and he drives an older Mercedes SUV. His heroin enters Virginia on **Interstate 81**, typically carried in cheddar cheese Pringles cans by young women who take a bus from Chinatown in New York City, earning about \$300 to \$500 for each round trip.

D.C. doesn't do heroin himself; he is only interested in the money. Though his supply comes from Harlem, D.C. realizes he can make a lot more selling to rural places like Woodstock than he can selling in the city.

Lutz's work begins to take over his life—he is on his phone at weddings and out working on Christmas Day. Ever since the 2010 reformulation of OxyContin, Lutz has been tracking heroin users, many of whom make commutes to Baltimore, which is a major staging area. (Twentysomething users from Roanoke also make the trek to Baltimore, where they don't need as many connections as in New Jersey and New York.)

Late in March 2013, Lutz gets a new clue about D.C. A routine traffic stop catches Devon Gray, who is one of D.C.'s key distributors. Gray peels out and attempts to get away. Bill Metcalf, an agent for the Bureau of Alcohol, Tobacco, Firearms, and Explosives (ATF), has already been chasing Gray for three weeks. Lutz and Metcalf have teamed up before on cases. ATF agents are known for being very gung-ho, and Metcalf in particular has a reputation among his peers for being “a pain in the ass.” The high-speed chase after Gray ends with the officer crashing and Gray getting away.

Though the Obama administration attempts to rein in excessive drug enforcement, particularly against users, high-level and violent dealers remain a target, and the D.C. case seems to qualify. Gray is mid-level and may be useful as a witness, although dealing with low- and mid-level user-dealers always comes with risks. They target Gray with a set-up where Metcalf offers him a gun. Gray cooperates immediately.

*Macy notes that D.C. was Black in part because the part of Virginia where he lived was predominantly white and this made him an anomaly. Race also plays a role in the American criminal justice system, which Macy explores in greater depth later. Macy again mentions Interstate 81, which is not just a physical road that carried heroin but also a symbol for how urban, suburban, and rural America are all connected.*



*Macy shifts the story back and forth between Lutz's perspective and D.C.'s. Notably, D.C. is only interested in heroin for the money. This echoes the profit motives of the pharmaceutical companies who make opioids, the doctors who prescribe them, and—interesting enough—money is also a factor in using these drugs, as many opiate users are motivated to use because of economic losses they face in their lives.*



*Macy is showing how Lutz's work becomes its own sort of addiction. She isn't necessarily saying that being devoted to a job is the same thing as being addicted to heroin, but she is noting that Lutz is not as different from people on the “wrong” side of the law as he might at first seem.*



*The role of random chance is a recurring theme in Dopesick, and in this case, it's a random traffic stop that leads authorities to find out more information about D.C. At the same time, however, D.C. is in a dangerous business, and perhaps it was only a matter of time before random chance caught up with him. The role of random chance once again highlights the similarities between D.C. and a heroin user (who all face the constant risk of an unexpected overdose).*



*One of the biggest questions about drug enforcement is who should be punished for drug crimes and how. Under the standards of the Obama administration (which was arguably one of the more lenient recent American administrations), D.C. is clearly someone who would be a target for prosecution. Macy presents his story to let readers reach their own conclusions about whether this is a good policy, though she herself seems to favor policies more lenient than the ones in place during the Obama administration.*



Gray reveals that D.C.'s real name is Ronnie Jones. It turns out he isn't the only dealer in the area—Kareem Shaw is the other big name. Jones lives in a low-income apartment on the outskirts of Roanoke and runs a ring that traffics drugs in seven counties, making him possibly the largest dealer in the state. Jones's strategy of importing heroin in bulk to small towns helps him make twice as much as dealers in Baltimore, but it also puts him at risk of being discovered.

Jones's case becomes the most complex one that Metcalf has ever worked on. They make charts with photos to keep the whole ring of collaborators straight, which reminds them of TV shows like *The Wire*. They call the chart FUBI because of an interview between Metcalf and one of the lieutenants in Shaw's organization. Shaw's lieutenant refused to talk, so Metcalf told Shaw's lieutenant that he could connect him to a federal case and come back with a warrant. The lieutenant replied "Fuck. You. Bring it," so Metcalf did.

## CHAPTER 8

When Ronnie Jones is arrested in June 2013, the moment is almost anticlimactic. One of his main subdealers is caught and confesses everything in detail. By that time, Jones already knows that the police are on to him. Lutz and other officers had already come to one of Jones's apartments in Woodstock, only to find that he had moved on to somewhere else. After the attempted raid, Jones keeps a lower profile, changing his cell number and limiting his deals to trusted clients.

At the raid of Jones's apartment, although Jones has fled, Lutz and the other officers arrest Marie, a user-dealer associated with Jones who is there with her young daughter. Jones knows that Marie will confess everything, and so when he's arrested six weeks later, he doesn't seem at all surprised. His run as a bulk heroin dealer lasted about six months—almost exactly as long as Jones predicted when he first started. Metcalf is eager to arrest other dealers in Jones's ring, but there's paperwork to do first. Eventually, they arrest other user-dealers in their homes.

*Despite his wealth from drug trafficking, Jones still lives in low-income housing, highlighting the contradictions in his life. Though in some ways he is wealthy and influential, all of his power is built on a precarious drug-running empire that is poised to topple at any minute. Macy asks her audience why someone would choose such a risky lifestyle: is Jones attracted to danger, or does he not have any other options?*



*Macy shows how fictional depictions of drug dealing, like *The Wire*, have an effect on how drug enforcement operates in the real world. She shows both how fiction has the power to help people understand the world around them while also showing how it can distort things (Metcalf's world of drug enforcement is much less glamorous and exciting than how it is depicted in many network TV shows.)*



*Macy begins this chapter with a scene that sharply contrasts the end of the previous chapter—the anticlimactic arrest of Ronnie Jones is the complete opposite of what would happen on an exciting police TV show. Though Jones is difficult to track down, Macy portrays how he wasn't a criminal mastermind—he was just a regular person doing what he could to put off his arrest for as long as possible. Her goal is partly to dispel stereotypes about how big-time drug dealers are all master criminals (a stereotype largely derived from TV and other fictional depictions).*



*The fact that Jones is undone by someone close to him emphasizes just how precarious his position was. Jones doesn't seem surprised at being caught. This suggests that he was aware of the consequences of his actions and perhaps even expecting them. In some ways, Jones's motivations are unknown, but Macy hints that desperation may have played a role—one reason why he would take such big risks is if he had few other options in life.*



When Metcalf and Jones first meet, while Jones is in county jail, Metcalf thinks Jones is “very smug, very arrogant.” Jones meanwhile recalls that Metcalf was “very aggressive; he harassed people.” Jones is angry that Metcalf has been interviewing his family, who previously had no idea about his heroin racket.

Despite their mutual hatred, Metcalf and Jones have some things in common. Metcalf’s own father was a heroin trafficker who was arrested at the dinner table when Metcalf was seven years old. He grew up in Chapmanville, West Virginia, a poor area that would eventually become a breeding ground for the opioid epidemic. At the time, there were few options for a young man in the area, so Metcalf got out by joining the Air Force. Metcalf sees his pursuit of Jones as a way of atoning for what his own father did. Metcalf’s wife, on the other hand, sees the case as an unhealthy obsession.

Mack, the New York bulk heroin supplier for Jones, is still out there. Shaw’s side of Jones’s heroin ring is also still operating, and so dozens more user-dealers are arrested in the summer of 2013. Metcalf begins plotting to get Mack. He is eager to arrest more people, but Wolthuis, the prosecutor, reminds Metcalf that courts need evidence.

Wolthuis keeps an old case file open on his desk. The case is for the September 2013 death of high school football star Jesse Bolstridge; Wolthuis suspects this death was related to the FUBI heroin ring. Wolthuis, at age 61, has built his reputation on “death cases” by prosecuting drug suppliers when someone has died from their drug. Though the Jesse Bolstridge case is a big one, it is difficult to prosecute because the timeline of when Bolstridge bought his fatal heroin is fuzzy.

Kristi Fernandez (Jesse’s mother) is worried in May 2013, when Jesse asks to come home from an Asheville sober house for a visit, saying he’s homesick. This goes against the advice of the counselors, and when he comes back to the sober house, he tests positive for marijuana and is booted out. Kristi takes him back in, even though she is still struggling to pay off his previous stints in rehab.

*It's unsurprising that Metcalf and Jones dislike each other, given their history. Still, Macy shows their reactions in parallel to highlight the similarities. She offers the facts to her audience in order for them to reach their own conclusions: did Metcalf go too far by going after Jones's family, or were his actions justified in the pursuit of a greater good?*



*Macy presents the stories of Metcalf and Jones side by side to show how the two men actually had a lot in common. One of the things they don't have in common is race (Metcalf is white and Jones is Black). Because race and criminal justice is such a controversial topic, Macy is careful not to make broad statements. Here, the role of race is mostly unstated, and it is up to the audience to infer what role it may have played in each of the men's lives. Macy shows how, although Metcalf may seem to be fighting against addiction, in many ways, he is struggling with his own form of addiction (his relationship with his job).*



*The role of Mack and Shaw shows that heroin distribution in Woodstock was bigger than just Jones. While law enforcement officials often seem to focus on apprehending major targets, Macy introduces the many people in the heroin trade in part to question how much any individual bears responsibility for the supply of drugs (and therefore to question whether imprisoning a dealer actually does much to affect the supply).*



*By mentioning Jesse Bolstridge, Macy shows how the story of law enforcement and dealers is intimately connected to the story of people struggling with addiction and their families. As with many aspects of the opioid epidemic, “proving” something anecdotally is much easier than proving something in a court room.*



*Jesse is clearly a flawed human who struggles to follow the rules of the sober house, but Macy also questions whether those rules are actually in Jesse's best interest. As a critic of abstinence-only treatment, Macy seems to suggest that it is counter-productive to kick Jesse out because of a positive marijuana test—since that's when he needs help the most.*



Jesse is weaned off his medical detox—a common practice at the time that becomes more controversial as more and more evidence shows how long-term medical treatment is more effective than abstinence. By 2016, some government agencies are recommending that medical-assisted treatment for opioids should be indefinite, perhaps even lifelong. One researcher estimates that after the start of treatment, it takes an average of about eight years to get one year of sobriety, including four or five different episodes of treatment for sobriety to last. Many, like Jesse, don't have that much time.

After returning home from the sober house, Jesse takes a construction job with his father in the D.C. suburbs—a 90-mile commute one-way from Kristi's house. Despite being a good worker, he is soon overwhelmed with expenses, and he finally admits to his mother that he's using and can't stop. Kristi mistakenly believes that her son is only on pills, not heroin, because Jesse's strong physical appearance helps hide his drug problem.

In late September 2013, Jesse is scheduled to fly to Jacksonville for another attempt at treatment. His friend Dennis, however, is vomiting from dopesickness and buys heroin to ease it. Jesse is reluctant at first, but since he's also feeling dopesick, he agrees to go on one last hurrah with Dennis.

The next morning, Dennis and some other friends reportedly leave Jesse alone for two hours, then come back to find him unconscious in the bathroom with a needle in his arm. Dennis calls 911, but by the time Lutz arrives (two to six hours later), Jesse is dead. Kristi suspects that Dennis is lying and that he may have waited to call 911 for a reason that he wants to hide.

Metcalf interrogates Jones, trying to find out who Mack is. Jones remains defiant and is even caught trying to coordinate new sales from in jail. Like many others who are high up in the heroin ring, Jones prides himself on not being a snitch.

*Although weaning patients off medical detox may sound good on paper, Macy goes beyond common sense assumptions and looks at the evidence. She determines that many of the most reputable sources are recommending indefinite or even lifelong medical treatment to deal with addiction. Macy uses this fact to begin making a comprehensive argument: that addiction is a problem that needs to be managed over the course of a lifetime, not through a short rehab program.*



*Physical location often plays an important role in the course of addiction for many people struggling with opioid dependency. In this case, Jesse's condition gets worse when he's physically separated from his mother (who is a major part of his support system).*



*For many people addicted to opioids, it is the fear of dopesickness that motivates them to keep using more than the pleasure of an opioid high. Macy returns again and again to the physical unpleasantness of dopesickness in order to help readers understand the decisions that opioid users make (which, without the context of dopesickness, may seem irrational).*



*As with Fayne McCauley (whose death is mentioned in a previous chapter), there is a lot of uncertainty around the death of Jesse, even though some broad details (i.e., that opioids were involved) are clear. Kristi's suspicions about Dennis are not necessarily just paranoia—Dennis would have motivation to conceal information if it paints him in a bad (and possibly criminal) light. It's perhaps worth noting that later, Dennis tries to honor Jesse's memory and even names his son after him.*



*Although Jones refuses to cooperate with the law, Macy seems to see something noble in how he sticks to his principles, even if she doesn't necessarily endorse them.*



Shaw, however, is more willing to talk when he is arrested four months after Jesse's death. He tells Metcalf about a documentary on YouTube where Mack's face is clearly featured. Even Shaw doesn't know Mack's real name, however.

Metcalf knows Mack has been recently released from prison. Mack is big time, with lawyers on retainer and several assistants. He treats his operation like a business. Still, despite his caution, Mack occasionally slips up, and by tracking some financial records, Metcalf learns that Mack is in fact a Black 37-year-old Brooklynite with a beard, named Matthew Santiago. He also confirms Mack's address. Though Metcalf is pleased by the success, he realizes that in many ways he's just like his father—he just has a different addiction.

Metcalf finds Santiago (A.K.A. Mack) outside his apartment in Brooklyn walking a dog and arrests him. Wolthuis and Santiago's lawyer work out a plea deal that the judge approves. While Jones received a 23-year prison sentence and Shaw received an 18-year sentence for cooperating, Santiago gets a lesser sentence of 10 years because he is only a "flipper," not someone who was on the ground and part of the ring. While being transported to the courthouse on the day of sentencing, Santiago tries to taunt Metcalf, saying nothing he does will change anything. Metcalf replies he's just doing his job.

The end of the Jones/Shaw heroin ring doesn't change things for users like Dennis. Despite several attempts to get clean, he finds that even after the bust of Jones, it's easy to go to Baltimore to pick up heroin. Dennis names his son after Jesse and makes plans to move to a bigger city where there might be better jobs and more of a sober culture, the so-called "geographic cure."

Jesse's 2013 heroin death is one of 8,257 in the U.S. that year, a 39 percent increase from 2012. Most of the dead are young men. The FDA is slow to act: they continue to approve new opioids and don't recall an opioid due to its abuse potential until 2017.

*The appearance of YouTube in the story highlights how media has changed over the course of time. Instead of local newspapers driving coverage of the opioid crisis, it is now new online media driving the discussion. The fact that Mack showed his face in a documentary shows how many didn't understand the power of this new media when it first began to take hold.*



*The fact that Mack runs his drug empire like a business is perhaps noted so that the readers can draw parallels between his illegal drug empire and the mostly legal drug empire of a company like Purdue Pharma. At the end of the day, heroin is not so different from OxyContin—the two are chemically quite similar. Macy again hints at the issue of race without directly stating anything too controversial; it is up to the audience to decide whether race plays a role in why his "business" is illegal while the Sacklers profit off a very similar business or whether other factors are more important.*



*The fates of the members of the FUBI heroin ring mirror the fates of the Purdue Pharma stakeholders when they were put on trial. Jones, who fulfills a role like the Purdue executives, gets the harshest sentence, just like they did. By contrast, Mack is at the top of the organization and gets the lightest sentence, just like the Sacklers did. While the FUBI heroin ring gets significantly heavier sentences than Purdue Pharma, the case raises similar questions about the priorities of the American legal system. Macy asks if it's fair that people at the highest leadership positions, like Mack and the Sacklers, often get lighter sentences than people in their organizations who did more hands-on work.*



*While Macy has spent most of the chapter laying out all sides of the arguments for and against strict drug enforcement, here she begins to more forcefully suggest that the current system doesn't work. If arresting men like Jones and Shaw is intended to improve the lives of people struggling with addiction, here Macy shows that, for Dennis, it doesn't really matter whether Jones is in jail or not.*



*Macy shows how the federal government seems to be at odds with itself. On the one hand, it is arresting men like Jones to try to keep opioids off the street, but on the other hand, the FDA continues to approve new drugs that offer the same potential for abuse.*





Two weeks before Jesse's 2013 death, the FDA notifies Barbara Van Rooyan that part of her petition to recall approval for the original OxyContin formulation has been approved. This doesn't matter, however, because Purdue has already voluntarily withdrawn the old drug and reformulated it (not necessarily due to the potential for abuse—it may have been reformulated because of an expiring patent).

*The fact that the new FDA action didn't prevent deaths like Jesse's is a visceral sign of how ineffective it is. The FDA's proclamation is largely symbolic (since Purdue has already reformulated its drug) only further highlighted how the response by the federal government has lagged.*



## CHAPTER 9

By 2014, suburban heroin dealing has become prevalent in both the rich and poor neighborhoods of Roanoke. One of Roanoke's top mules is Ashlyn Keikilani Kessler, a young woman of Hawaiian heritage who has the ability to take extreme quantities of drugs without overdosing. She first got addicted after being prescribed OxyContin for back pain that lingered after the 2008 birth of her son. When OxyContin is reformulated in 2010, she eventually switches over to heroin.

*Ashlyn's story is similar to the stories of a lot of people around the United States when they first discovered opioids. One of the most common patterns is the progression from something innocuous (a prescription for back pain) to a serious condition (heroin addiction).*



Ashlyn is serving a seven-and-a-half-year sentence in a federal women's prison in Kentucky when she begins emailing Macy. She knows about Spencer Mumpower and Colton Banks, and she was even there at Scott Roth's funeral mass. Two years into her addiction, she got fired from her job as a paralegal and started stealing valuables to buy drugs, including heirloom jewelry from her Hawaiian-born grandmother.

*Ashlyn's involvement with other local heroin users shows how tight-knit communities like Roanoke can be. Her story of how drugs caused problems with work, which led to crime, is similar to the story of many other OxyContin-turned-heroin users across the country. Macy has largely focused on the experience of younger white men using heroin (and they are a major demographic), but she makes it clear that they aren't the only ones affected by the epidemic.*



Soon after getting fired, Ashlyn connects with a dealer who approaches her about driving back and forth from New Jersey to run drugs. She agrees. By 2014, however, DEA agents have recovered 15,000 text messages from her phone that paint a clear picture of addiction in her local area. Police pull her over and arrest her on **Interstate 81**, just north of Roanoke, discovering 722 bags of heroin.

*Both the number of text messages and the amount of heroin Ashlyn was carrying suggest that she had gotten deep into the world of dealing it. This change in her life happened within a relatively short span of time, showing how quickly the effects of addiction can take place.*



Andrew Bassford is the man in charge of prosecuting Ashlyn's case. He keeps a portrait of James Garfield on his desk because he admires the Ohio-born president's work ethic. Bassford has a high-and-tight haircut and often wears cowboy boots; he tries to talk in one-liners like characters from TV shows like *Dragnet*.

*Bassford's portrait of Garfield and his cowboy boots show that he tries to be eccentric. Once again, Macy returns to the theme of how fictional depictions of law enforcement provide a distorted view of the reality: while Macy doesn't state it outright, she implies that Bassford isn't nearly as smooth as the cops from TV that he idolizes.*



Bassford despairs that the current law enforcement system for dealing with heroin isn't very effective. Because the drug is so wildly available and cheap, if you get rid of one dealer, more just show up, like Whack-A-Mole. Despite Van Zee's prediction that OxyContin would be recalled once rich kids in suburbs started dying, he is dismayed to see himself proven wrong—the response (or lack of response) remains the same.

*Bassford's comparison to Whack-A-Mole is evocative and easy to understand, which is why Macy uses it in the chapter title. The comparison to Whack-A-Mole could suggest that maybe the approach of arresting and imprisoning dealers is flawed from the premise, since more will just pop up, but Bassford and others might disagree with that interpretation.*



Tess Henry is a 26-year-old waitress that Macy meets in 2015. She is the daughter of a local surgeon and a nurse. Although she was a star high school athlete and an honor-roll student, she started a \$200-a-day heroin addiction in college. She identifies herself not as a drug runner or mule but as a “middleman” who knew many of the other users and dealers from Hidden Valley.

*Although she is introduced somewhat late in the book, Tess will become one of the most important subjects Macy profiles, in part because Macy goes into greater depth with her story than any of the others. Part of what makes Tess's story interesting is that, as a “middleman,” her experience is fairly average, and she was in regular contact with both users and dealers. But Macy is careful not to reduce people to stereotyped labels like “addict,” and Macy goes deep on the specifics of Tess's life in order to demonstrate how all people struggling with addiction are more than just a statistic or a label.*



Tess's family has a history with addiction: she has alcoholic relatives on both sides. A routine visit to the urgent-care center for bronchitis leads to two 30-day opioid prescriptions (one for codeine cough syrup and another for hydrocodone to ease throat pain). Soon after, she begins looking for dealers to supply her with more. New government regulations in October 2014 reclassified some common painkillers, making them harder for doctors to prescribe, but Tess's dealer suggests replacement drugs she can use instead.

*Tess's story has some parallels with Ashlyn and with countless others: her family history made her vulnerable but ultimately it was a chance medical problem that caused her to first discover opioids. The government makes an effort to solve the problem of over-prescribed painkillers, but as is often the case in Dopesick, the response is too little, too late, particularly for Tess.*



Tess believes she became truly addicted when she started snorting heroin. Though she was able to hide her addiction and hold on to her job as a waitress at first, eventually it becomes impossible to hide. After a couple arrests, she is caught on May 15, 2015, stealing copper from a Lowe's hardware store. In jail, she learns that she is in the second trimester of a pregnancy and is given a Tylenol to stop her fetus from having opioid withdrawal.

*Tess's trajectory follows that of many other people with opioid addictions, with the addiction leading to crimes that she likely wouldn't have otherwise committed. Tess's story also shows how normal life events, like pregnancy, don't stop because of an addiction and how by the time Tess is arrested, her unexpected pregnancy is so common among opioid users that jails have protocols in place to deal with it.*



Six weeks later, there is a spike in opioid overdoses, due to the synthetic opioid fentanyl, which is 25 to 50 times more potent than heroin. Despite the deaths, many users continue to seek heroin, with some even being intrigued by the prospect of a greater high.

*The fact that so many drug users deliberately seek out fentanyl helps to underscore just how self-destructive some people can act when they are motivated by an addiction.*



In 2015, Chris Perkins, the 46-year-old police chief, knows that fentanyl is going to change the whole opioid epidemic, for the worse. Catching user-dealers becomes harder as open-air markets are made obsolete by cell phones. Perkins, nearing retirement after 24 years on the force, wants to implement one final program to go out on. He hears about a program in Gloucester, Massachusetts, where police are allowing heavy users to turn in their drugs and receive treatment instead of going to jail.

Perkins helps create the Hope Initiative, which aims to establish a clinic for recovering opioid users like the one in Gloucester, Massachusetts. Janine Underwood is the executive director. Janine's son, Bobby, died of fentanyl in June of 2015, after several years of going in and out of treatment and prison. Janine is the first to tell Perkins she wants in on his idea. Jamie Waldrop (mother of Christopher) is the second to join Perkins's initiative.

Virginia, however, doesn't have the same public health measures in place as Massachusetts, and its legislature turns down attempts to pass Medicaid expansion as part of the Affordable Care Act, denying a potential \$6.6 million in federal funds to low-income Virginians. In Virginia in 2014, one Democratic senator resigns under unusual circumstances, giving the Republicans a majority to shut down the Democratic governor's proposal to expand Medicaid. The stakeholders in Perkins's new clinic despair about the obstacles they will face but remain convinced of the urgency of their cause.

*The flexibility and ingenuity that Perkins uses when looking for a solution to addiction provide a contrast with the more rigid solutions proposed by the federal government. Macy is an advocate for people in their own communities helping to fill in the gaps in the federal response to the opioid crisis, and Perkins represents a case study for one way to do this.*



*As with RAPP, from previous chapters, many of the most passionate activists for change are people who have watched family members die of opioids. Macy shows how one of the silver linings of grief is that it can motivate people to seek out positive change, although she is careful not to sugarcoat the harsh reality that many parents of opioid victims face.*



*Macy shows how the federal government's decision to leave many aspects of healthcare up to individual states has made things complicated for activists. What works in one state might not be possible in another, hindering progress. Healthcare reform, such as Medicare for All on the left and the movement to repeal the Affordable Care Act on the right, are an important context for this passage, but Macy largely avoids mentioning specific political platforms, perhaps because healthcare is such a contentious issue and because she wants to maintain some objectivity.*



## CHAPTER 10

In early 2016, the Hope Initiative was getting started at right around the same time that Macy began following the story of Tess Henry and her infant son. After getting out of jail while seven months pregnant, Tess worries about giving birth to a child with neonatal abstinence syndrome (NAS), which is a painful state of withdrawal for the children of addicted mothers, and which often requires a long hospital stay. Babies with NAS look like miniature versions of adults with dopesickness.

Tess's son is born two weeks early but very healthy, with no signs of NAS. He is lucky: many other babies in the hospital need to spend time in the neonatal intensive care unit (NICU) and about 27 percent of babies in the region's NAS clinic end up in foster care.

*NAS shows that even babies with no agency of their own can become victims of the opioid epidemic. In some ways, however, their situation is not so different from the parents. Tess, for example, was not properly informed of the risks of the heavy painkillers she was prescribed.*



*Once again, Macy shows how luck and probability play a role in outcomes for addiction. There doesn't appear to be any good reason why Tess's son is healthy when so many others aren't. In such cases, individual stories may be less helpful than the broader pattern, which in this case paints a troubling picture.*



Tess's goal in 2016 is to be a good mother. Her treatment with buprenorphine helps her to feel normal, but although much of her treatment is covered by insurance, the costs add up. In addition, medical-assisted treatment (MAT) clinics can have long waiting lists, and many used to take on more patients than they could handle until a new law passed that caps the number of patients a single doctor can see at 100.

Many public health officials consider buprenorphine, a type of MAT, to be the gold standard treatment for opioid addiction, reducing the chance of overdose by more than half compared to just behavioral therapy. Researchers debate how long patients should stay on drugs like buprenorphine—some suggest for at least twice as long as the length of addiction, others suggest for the rest of the person's life.

Because of the high demand for buprenorphine and other MAT drugs, there's also a lot of black market dealing of these drugs, with some even crushing the drugs up to snort or inject them for a high. Overprescribing among MAT doctors remains a problem, and only about half of drug courts nationally even permit the use of MAT.

Jamie Waldrop and Janine Underwood of the Hope Initiative are opposed to buprenorphine because, based on the experience of their sons, they felt that the drug was too easily diverted to be used for abuse. Tess's mother Patricia discovers that Tess has figured out how to abuse the drug, having relapsed shortly after giving birth.

For many months in early 2016, Macy drives Tess and her baby to Narcotics Anonymous meetings. Though Narcotics Anonymous theoretically approves of MAT, many of the members at Tess's chapter seem to shun her because of her involvement with the treatment.

*Over the course of researching and writing Dopesick, Macy becomes an advocate for MAT, including buprenorphine, which she explores in more detail later. One of the downsides of MAT is that its effectiveness makes it very desirable and therefore hard to get. The expensiveness and scarcity of MAT form a central part of Macy's larger critique of the U.S. healthcare system.*



*While Macy is sometimes skeptical of statements from public health officials (particularly the FDA), she trusts officials who have data to back their claims up, as is the case with MAT. The research about MAT, including the assertion that people should stay on it for life, may seem counterintuitive (since it might seem like the goal is to get people off drugs, not "addicted" to new ones), but Macy shows that sometimes the most logical response isn't the most intuitive one.*



*Though Macy favors MAT, she is also honest about the risks, including the potential for abuse. Macy mentions these risks in order to anticipate criticism for her position (which is somewhat controversial, given the popularity of abstinence-only addiction treatment in the U.S.) and pre-emptively defend it.*



*Macy shows how disagreement among activists doesn't have to be a major stumbling block. In fact, Tess's abuse of buprenorphine even helps justify Waldrop and Underwood's skepticism for MAT. Importantly, however, Waldrop and Underwood don't let their personal biases affect their own work too much, and they do keep open minds about MAT.*



*Macy reveals that the divide between subject and journalist is not always rigid. Instead of simply observing Tess's life from a distance, Macy becomes somewhat involved in her recovery. This does not mean that Macy is lax as a journalist (she keeps detailed notes about her sources in the Notes section at the end of the book), but it does show that she believes being an effective journalist might sometimes involve some flexibility.*



Controversy over MAT goes back all the way to the birth of methadone, which was created as a synthetic painkiller in German laboratories shortly after World War II. Methadone's ability to treat opioid addiction was discovered early, but regulatory agencies continued to restrict its use.

Buprenorphine and naltrexone were part of a new generation of MAT that were formulated in an attempt to avoid some of the risks of methadone, like its depression of the respiratory system. Naltrexone was first approved in 1984 but didn't start seeing wide use until a marketing push by its maker in 2012.

Research shows that buprenorphine is safer than methadone when taken in excess, but surprisingly, the drug still goes on to have significant value on the black market. Some doctors remain skeptical about all MAT, drawing parallels between the development of heroin in 1898. Macy believes, however, that hardline stances against MAT are the single greatest obstacle to reducing overdose deaths. Despite promises from both the Obama and Trump administrations to expand MAT funding, the treatment options available often depend on local drug courts.

Many in the medical community, including Art Van Zee, express frustration over anti-MAT skepticism, claiming that it prevents doctors from being able to use one of their most effective tools. Van Zee notices with his patients that rushing to wean patients off MAT can lead to relapse, which only furthers the narrative that MAT is ineffective.

Tess goes to a few more Narcotics Anonymous meetings, driven by Macy, but after four, she stops wanting to attend. The journalistic boundary between Tess and Macy blurs, particularly during a moment when Tess sends garbled text messages late at night asking Macy to come get her. Macy ultimately decides to forward the texts to Patricia and Jamie Waldrop, and the subject doesn't come up again.

In February 2016, Patricia believes Tess is using again, but her family disagrees about the best treatment methods. Eventually, Tess's relapse becomes too clear to hide, and Patricia meets with her attorney about the best way to kick Tess out without harming Tess's seven-month-old son.

*As with most things in the opioid epidemic, MAT is not a new concept—it has just recently gained new prominence. It's unsurprising that regulatory agencies are slow to approve MAT, given the slowness of the federal response to other parts of the opioid epidemic. The popularity of abstinence-only addiction treatment and especially "Just Say No" in the 1980s (which Macy discusses in more depth later) are an important context when it comes to why MAT was (and is) controversial for some.*



*Again, Macy considers the risks of MAT, which can be significant. Still, she looks at things from a utilitarian perspective and concludes that even if MAT has the potential for harm, it has even greater potential for good, and that banning MAT does the most harm. The importance of local drug courts once again highlights a downside of the United States' disconnected healthcare system, where access to the best treatment options is uneven.*



*Doctors like Van Zee are perhaps among those most likely to trust studies, so it makes sense that he would be an early adopter. The fact that his personal experience matches up with the studies only helps to solidify his position.*



*While earlier Macy was willing to bend journalistic boundaries for Tess's sake, the late-night text seems to cross a line for her. Still, rather than ignoring the message, she turns it over to Patricia and Jamie, suggesting that she still feels a moral obligation to do what's best for Tess, regardless of what a rigid interpretation of journalistic ethics might dictate.*



*The situation with Patricia and her attorney attempting to kick Tess out highlights one specifically heartbreaking moment in Tess's story. In some ways it recalls the earlier moment when Kristi Fernandez had to put a lock on her bedroom door. In both cases, parents find themselves forced to make painful decisions about what's best for their kids—often in a situation where there are no good answers. These choices represent part of the human toll of the opioid epidemic.*





Tess starts neglecting her son and eventually loses custody, with a judge awarding shared custody to the boy's grandmothers. Tess moves into a cheap motel with a reputation as a drug haven. To regain custody, she must find a job and a place to live, then prove her sobriety. She struggles to find a doctor for MAT that will accept Medicaid, which she's currently on.

By May 2016, Tess is couch-surfing and using heroin daily. Her son's father gets out of jail in early June. They argue violently, and Tess disappears, prompting Patricia and Jamie to worry and file a missing-persons report. It turns out Tess stole a car and credit card, and she is arrested later that day.

Tess's son grows to be a toddler without her there to witness his milestones. By fall, Tess is still alternating between the streets, jail, and a women's shelter. Tess tells Jamie she wants long-term treatment. Jamie knows this period is a critical window: many opioid users only want treatment for a limited period of time. But Tess disappears again before they can meet.

The next time Patricia sees Tess is in an ad on a prostitution website. She has been able to covertly track Tess by following her messages on a social media account that Tess forgot to sign out of. One of Tess's friends, Jordan "Joey" Gilbert, talks about success with naltrexone, before switching to buprenorphine because of naltrexone's high cost.

In October 2016, Jamie and Macy visit Tess in a psych ward, where she has checked herself in due to suicidal thoughts. Tess hasn't seen her son in eight months and has a warrant out for her arrest over a fraudulent credit card charge. She tells Macy, however, that she isn't using heroin. Jamie recommends an Asheville treatment center for Tess, and Tess seems interested and even hopeful.

*While Macy is sympathetic to Tess's situation, she also shows that Patricia isn't over-reacting and that Tess has become a potential danger to her son. Tess is caught in a vicious cycle where she needs a job to pay for MAT, but the best way to get a job would be to get treatment with MAT. The absurdity of her situation represents the difficulties that many opioid users faced as well.*



*As is often the case when an addiction worsens, Tess becomes more estranged from her family to the point that they don't know whether or not she's gone missing. Macy doesn't assign blame; she is trying to portray the tragedy from a perspective that is sympathetic to all sides.*



*Tess's absence from her son's life also shows a growing disconnect from her old self, particularly her old goal of wanting to be a better mother. The critical window of treatment for addiction is yet more evidence for why a slow federal response to opioids is doomed to be ineffective. What people like Tess really need is people like Jamie who can be there to act and respond immediately, although sometimes even this isn't enough.*



*Addiction has caused Tess to lose control over her body, and her prostitution ad seems to represent a new stage in this. Patricia's spying on Tess might be problematic under different circumstances, but given what Macy has revealed so far about their relationship, Patricia's concern for Tess seems more than justified.*



*Tess's suicidal thoughts confirm that she is no longer getting pleasure out of her addiction—in fact, it's the very opposite. It might seem paradoxical that Tess would keep using when she's so unhappy, but as Macy has shown many times before, dopesickness is a powerful force, motivating people to keep using in order to avoid its painful effects.*



But when Tess gets out of the ward, her moment of wanting treatment seems to have passed again. A week before Christmas that year, Patricia plans to mail a card to Tess with pictures of her son in it. She wants to tell Tess about the Beck song “Debra” because it mentions J.C. Penney, and that’s where Patricia and Tess used to go to buy Tess new clothes after a stay in the hospital or rehab. Tess was home for Thanksgiving, but Patricia has mixed feelings about Tess being home because she has to watch out for theft. A week after that Thanksgiving, Tess leaves a note saying she’s had another mental breakdown and checked into a psych ward.

*Macy uses this passage to look at some of the specific details of Tess and Patricia’s relationship, showing that they are both far more than statistics, even if their story does follow the same broad patterns as other addiction stories. Patricia’s misgivings about having Tess home for Thanksgiving are particularly heartbreaking because they show how addiction can turn a family celebration into a potential disaster. While sometimes the “geographic” cure can help addicts, for Tess, it doesn’t seem to be enough, since shortly after coming home, she checks into a psych ward again.*



## CHAPTER 11

Tess’s loved ones create a five-page spreadsheet that they hope will guide her recovery. It’s early 2017 and fentanyl continues to lead to significantly more overdoses than usual.

*The spreadsheet that Tess’s loved ones put together represents their attempt to control a situation that often feels out of their control.*



Janine Underwood is still grieving the death of her son, Bobby, to fentanyl, but she puts a lot of energy into the Hope Initiative. She remains skeptical of MAT but tries to keep an open mind. She supports bills to involuntarily commit users, but these raise civil liberties concerns, and some experts think they may backfire.

*Fentanyl is yet another step in the cycle of opioid history, just like morphine was stronger than opium and heroin was stronger than morphine. Underwood’s opinions show that she disagrees with Macy on some important points, but while Macy may not believe Underwood’s solutions are optimal, she still portrays Underwood’s commitment as admirable.*



Twenty-two people walk into the Hope Initiative for treatment, but at first, none have entered residential treatment. The first big success for the initiative comes when they do finally set up their first residential patient, overcoming significant bureaucratic obstacles (for example, it is usually difficult to transfer a patient from the emergency room to detox without a waiting period in between).

*Despite the Hope Initiative’s good intentions and the real need for better opioid treatment, progress is still slow. Still, slow progress is typical for opioid reformers and Macy shows how the initiative begins to help people in spite of all the obstacles.*



In late 2016, Virginia’s state health commissioner declares the opioid crisis a public health emergency. This means anyone can now buy Narcan (a drug that can reverse the effects of an overdose). Other cities, however, like Vancouver, British Columbia, are even more proactive. They offer supervised injection sites and provide clean needles, on the theory that this is more humane and cost-effective. Some more progressive American cities begin using Vancouver as a model.

*While Virginia’s recognition of the opioid crisis is important, Macy is quick to point out that other parts of the world have already taken much stronger action. Perkins got inspiration from Massachusetts, and here, Macy suggests similarly that eager reformers in the United States might look to methods that have been tested in Vancouver.*



Harm reduction policies and movements to end the stigma against addiction pick up momentum across the U.S., from San Francisco to Philadelphia. Still, there are not enough resources to treat all the people who need it.

Macy feels that the disagreements between the criminal justice establishment and the families of people struggling with opioids (like Tess) seem to only be getting more severe. Particularly during the Trump administration, government officials begin moving toward zero tolerance drug policies, prioritizing punishment over treatment.

Even among Hope Initiative members like Janine, the harm reduction approach to opioid treatment is controversial. Still, she tries to keep an open mind. Within the first few months of the Hope Initiative, they see 57 people, referring about 15 to outpatient MAT programs and admitting two to residential treatment.

Tess remains in contact with the Hope Initiative but is not among its success stories. In early 2017, she doesn't seem close to being ready to accept help, according to Patricia. She is back in a psych ward, weighing 90 pounds and with hepatitis C.

Patricia and Jamie arrange it so that Tess can go immediately from the hospital to treatment in Nevada, knowing that otherwise Tess will change her mind again. After being transferred to a new facility shortly after arriving, Tess seems to settle in. After a month, she seems to be doing very well, ready to transition to aftercare.

At the Hope Initiative, attention now turns from Tess to Tess's friend Joey, who is in a similar situation. Joey tries to appear sober but continues to use and even invites a drug dealer and his girlfriend to live with her. In March 2017, Joey faces similar treatment barriers to Tess, with long wait lists for expensive treatment. Joey tries to wean herself off MAT, believing it will make it easier for her to get accepted for treatment.

*Similar to MAT, harm reduction often seems counterintuitive but is in fact arguably the best way to improve the lives of people dealing with addictions, at least based on the most recent data. People's opinions on MAT and harm reduction tend to be linked, either favoring both or disapproving of both. (Macy favors them.)*



*While Macy sometimes avoids making political statements that could alienate parts of her audience, she is clearly taking a stand against zero-tolerance drug policies that put punishment over treatment.*



*Janine's willingness to refer patients to MAT programs, even though she herself doesn't support them, suggests that her intentions are in the right place: that she is willing to put the potential welfare of patients above her own beliefs when needed. (The situation is a little different for someone like Van Zee, who is a trained doctor, and who is therefore better qualified to make his own decisions about the health of patients.)*



*While Macy praises the Hope Initiative, she shows that even the best-intentioned organizations have their limits. In this case, Tess represents a case where even the Hope Initiative couldn't help. Her poor health foreshadows an ominous future for her.*



*Like many people struggling with addiction, Tess cycles through healthier and less healthy phases. Sometimes a sudden shift helps start a new phase, and in this case, the trip to Nevada seems to do the trick. Macy again uses Tess's story as a lens through which to view how treatment needs to be tailored to the individual patient, because different people will respond to treatments differently.*



*Joey's experience helps highlight both what is typical about Tess's addiction experience and what is unique. In particular, Joey's struggles to get treatment show that this is a much larger issue than the specific problems that Tess faced with getting treatment.*



Joey is nearly through her weaning before rehab but she's struggling. She calls her parents, who are traveling, and says she just had a major fight with her boyfriend. Later, she texts her father and asks for \$4 to get a pack of cigarettes. The next morning, they get the news that Joey has died of a fatal overdose, after lying around for almost eight hours before anyone called 911.

At the memorial service, Patricia is moved by Joey's family. She can't help wondering how she would feel if it were Tess's funeral instead of Joey's. She already knows where she will sprinkle Tess's ashes if she needs to.

Six weeks later, Patricia intercepts a message between Tess and a drug dealer in Las Vegas. She sends her daughter a letter to express her disappointment. Tess texts her on Mother's Day 2017: "I love you. But this [is] bullshit all of it." She promises to find a way home.

## CHAPTER 12

Rosemary Hopkins, a Virginia OxyContin user who first discovered the drug in 1998, used to feel like it offered everything she needed in life. Since 2009, she has been receiving treatment for her addiction from Van Zee. She is one of many who hold a cynical theory about that drug: that the government is deliberately allowing its spread in order to get rid of "lowlifes."

The prosecutor Bassford has his own conspiracy theory: that rehab is "a lie." In fact, a *New York Times* exposé shows that there is truth to Bassford's claim and that the highly profitable but lightly regulated recovery industry often focuses on unproven, abstinence-only methods.

Macy hopes that interviewing the dealer Ronnie Jones will help reveal the connections between addiction, the criminal justice system, and the medical system. She comes to him in prison expecting a two-hour interview with no devices allowed. She wonders how much of Virginia's heroin problem can be blamed on him.

*The text asking for \$4 for a pack of cigarettes represents a hyper-specific detail that makes Joey's story feel more personal and wrenching. Tragically, however, Joey's death and her lies to her parents are both a common feature of addiction stories.*



*Though parents are sometimes in the dark about the specifics of their children's activities, Macy shows that Patricia is far from naïve. She is already prepared for the possibility of Tess's death.*



*Patricia is in a difficult situation—her choice to send a letter to Tess makes Tess angry, but there would also have been consequences to staying silent. Macy shows how one of the scariest aspects of addiction is that it causes people to lose control: people on opioids lose control of their lives, and their loved ones lose the ability to do much about it.*



*Macy does not bring up Hopkins's theory about the government weeding out "lowlifes" because Macy herself believes it's true; rather, she is showing how, in the absence of an effective government response, it is understandable that people would take up the most cynical interpretation.*



*Again, Macy shows how a conspiracy theory, while not really true, probably arose from something with a grain of truth in it. Macy herself is a critic of the recovery industry (particularly its emphasis on abstinence-only treatment), although her reasons for this differ from Bassford's.*



*One of the recurring themes of the opioid crisis is a lack of information, so perhaps Macy hopes to rectify this situation by finding a common thread that will connect many of the stories she has told in *Dopesick: Ronnie Jones*. As she will see, however, fitting the facts into a neat narrative isn't always possible and may at times be the wrong approach.*



Ronnie, 39 at the time Macy visits him, remains guarded at first but polite. Jones has been studying Arabic and Swahili, as well as reading books about criminal justice like [The New Jim Crow](#) and [Just Mercy](#), which Macy has also read. These books suggest that the “Just Say No” approach to drugs of the 1980s led to racist policies that disproportionately affected Black Americans.

Ronnie had been in prison twice before his current 23-year sentence. Despite even many law enforcement officials agreeing that “We can’t arrest our way out of this problem,” drug offenders continue to represent a large portion of prison populations, with Black and Hispanic people being statistically overrepresented compared with white drug users and dealers.

Black Americans have not, however, been addicted to opioids at the same rate as white Americans, in part because unconscious biases among doctors seem to have caused them to prescribe weaker painkillers to people of color.

The government’s response to the opioid crisis remains slow, but local volunteers begin picking up the slack to help fill gaps in treatment. A half hour north of Woodstock (where Ronnie’s heroin ring operated), the area’s first drug court is established to help drug offenders get treatment, housing, and work.

Ronnie didn’t have this level of support when he first got out of prison—all he had was an overworked parole officer. Many ex-drug-offenders face similar problems, coming out of prison with no driver’s license, no support system, and no way to pay back their court fines and other expenses. Some states even bar them from food stamps. Unable to pay their bills, many former offenders turn back to crime.

*Ronnie and Macy have read the same books, suggesting that they have common ground, even though their lives are wildly different. While Macy was never quite critical of Jones in earlier chapters, her tone towards him does become more sympathetic when she recalls her own meetings with him (as opposed to earlier chapters, when she was portraying Jones through the perspective of the law enforcement officers chasing him). This suggests that hearing a person’s story firsthand may make you more sympathetic to their motivations.*



*Macy dives more explicitly into the topic of race, which was in the background of previous discussions about criminal justice but which now moves to the forefront. As she does with other controversial topics, Macy uses statistics to tell the story, since statistics help give legitimacy to her argument.*



*Macy’s exploration of race shows that, ironically, in one case Black Americans may have benefited from the unconscious bias of their doctors. Studies show that doctors take pain more seriously when expressed by white patients than by Black patients, leading them to prescribe weaker painkillers to Black patients overall. This leads to the opioid impact disproportionately affecting white people. Macy’s consideration of this does not diminish her larger argument that Black Americans have suffered disproportionately more than white Americans from drug enforcement laws.*



*Macy returns to the theme of how local communities can fill in the gaps in coverage left by the federal government. This support contrasts with the situation of Ronnie Jones, who grew up with little support.*



*Just as Macy traced Tess’s story to show how individual people with addictions are more than a statistic, she tells Ronnie Jones’s story to show how Jones has his own life and is more than simply a “criminal.” The problems he faces with getting a job (and the fact that getting a job is necessary for so many things he needs) provides a clear parallel with the struggles of opioid addicts.*





Macy wonders how Ronnie Jones's life would be different if he'd had help from people like the ones who work for the Equal Justice Initiative (founded by Bryan Stevenson, author of [Just Mercy](#)). Stevenson helps former prisoners find legitimate work in cities that are more tolerant to ex-felons. He tells Macy that reducing the prison population by 25 percent would save 20 billion dollars, some of which could then be directed toward treatment. He notes that Portugal decriminalized all drugs in 2001 but added housing, food, and job assistance, all of which led to it having the lowest rates of drug use in the European Union.

Ronnie's criminal history began with a felony grand larceny charge before his senior year of high school, when he borrowed a car from a girlfriend and used it to meet another girl, causing a fight that got him arrested for theft. He got another felony while on probation for that offense, while driving without a license in a car with stolen goods.

Thomas Jones, Ronnie's brother, recalls how as a kid, Ronnie could be difficult but generally wasn't bad. Now, Thomas is a music promoter based in Charlotte. Their uncle was on the famous state-championship football team from *Remember the Titans* and their grandfather was a housing activist who once met with George H.W. Bush.

Ronnie grew up in Virginia's Section 8 housing until a fight between him and his brother led to Ronnie being sent to live with his father in Alexandria. Ronnie's father and uncle were both regular drug users. Ronnie began acting out in school, which culminated in him getting arrested for the first time for stealing his girlfriend's car. Ronnie's felony record made it hard to get jobs, but he finally got one stocking shelves at a grocery store an hour away. Eventually, a cousin introduced him to cocaine, and Ronnie realized he could make more in a day selling cocaine than he could make in two weeks of stocking shelves.

Ronnie recalls that he never did any drugs, and only drank on his birthday and New Year's Eve. Selling drugs, however, earns him money and respect—at least until he's caught driving with cocaine in his car, then later caught selling drugs to an undercover cop. For the latter, Ronnie accepts the first plea deal given, on the encouragement of his overworked court-appointed attorney.

*Once again, Macy uses the opinions of experts to boost her own argument, in this case turning to Bryan Stevenson, who is well known for his writings about justice and for his activism. While Stevenson sees a moral need for justice, he also puts forward an economic argument for reducing prison populations, in order to hopefully make his argument appealing to a wider range of people. Like Macy, Stevenson uses statistics and examples from elsewhere in the world in order to offer a blueprint for positive change.*



*Like the opioid users who got prescribed a heavy painkiller for a fairly minor complaint, Ronnie was sent to jail for something that seems like a minor crime. This one moment of bad judgment (or perhaps bad luck) arguably played a role in shaping his life. Macy raises the question of whether or not this is really fair.*



*Thomas helps to further humanize Ronnie. Thomas's own successful career, as well as their illustrious family history, show that Jones was by no means "destined" to turn out a criminal—perhaps in different circumstances he would have ended up more like his brother or his other relatives.*



*Section 8 is a policy that helps low-income people rent houses. Growing up in Section 8 housing means that Ronnie and his family were poor. In addition to this, Ronnie also came from a family of regular drug users, suggesting that in many ways the odds were already stacked against him. While drug dealing may seem like a reckless choice, Macy shows how for someone in Ronnie's position, it might have been preferable to low-paid drudge work.*



*Ronnie's clean living shows that he doesn't fit the typical profile of a user-dealer. Despite this, however, his relationship with money does bear many similarities to what a drug user experiences. Just as Macy does with drug users, she tries to understand Jones's money "addiction" in a sympathetic way.*



Ronnie finishes high school in jail, then takes computer-repair classes, getting certified. Ronnie gets out of prison in 2008, right when Thomas's music career is taking off. His rap name is Big Pooh, and he's part of the group Little Brother, which has a major label deal and is touring Asia. Thomas gives Ronnie money to help him get set up. Ronnie finds a job but is soon impatient that he can't advance at the company, seemingly because of his felony record.

In 2010, Thomas gets a call that Ronnie is locked up again, this time for credit card fraud. This charge eventually sends Ronnie to the work-diversion program at George's Chicken. Ronnie seems to get his life together, telling his family he has a computer repair start-up. At one point, he asks Thomas to help him get a liquor license for a Caribbean restaurant (since felons can't apply), but Thomas refuses. When Thomas visits Ronnie, he finds his brother owns a very expensive truck and starts to doubt the whole computer-repair story.

Thomas is on tour when he gets the news that Ronnie will be serving a 23-year federal prison sentence. Thomas himself has never had legal trouble but says he has been racially profiled at traffic stops and is always cautious as a result.

Back in 2012, when Ronnie first arrived in Woodstock, he was charmed by small-town touches, like when drivers waved to each other on the roads. He kept working at George's Chicken after his diversion sentence, until he got sick and was hospitalized for a week, losing the job. He owed \$5,000 in medical bills and \$20,000 in court fines and restitution. He got work at another chicken plant, but it paid even less. Finally, he decided that dealing drugs full time would be more profitable.

Ronnie rationalizes his drug-selling by figuring that if users are going to buy anyway, they may as well get it from him, instead of making a dangerous, expensive trip to Baltimore. He also notes that he didn't introduce heroin to the Woodstock area—it was already very much there. Though many charges against him are true, he denies that he ever used drugs to have sex with dopesick users.

*Macy shows how Ronnie's felony record continues to haunt him, even after he has supposedly repaid his debt to society through prison time. While the relationship between Thomas and Ronnie is very different than the one between Tess and Patricia, there are some striking similarities. Thomas, for example, wants to help Ronnie but is often powerless to and sometimes fears that his "help" could do more harm than good, enabling Ronnie's bad tendencies.*



*Just as healthy drug users are often able to hide their addiction problems from loved ones, Ronnie is able to hide his career problems from his brother. Ronnie's computer repair start-up isn't real, but on some level, both he and Thomas wish it were. Macy tells this part of the story from Thomas's perspective to emphasize how painful and confusing it is for people to watch their loved ones get involved with something they can't control.*



*Thomas seems to have a more careful personality than Ronnie, but he knows from his experience with the criminal justice system, particularly his interactions at traffic stops, that his success is also partly a matter of luck.*



*Some drug enforcement officers might paint Ronnie as a ruthless or callous person, but Macy challenges this perception by showing how Ronnie actually liked Woodstock when he first arrived. Like many people profiled in Dopesick, his seemingly self-destructive decisions are motivated by his desperate financial situation, and viewed from that perspective, in some ways they make sense.*



*Ronnie is trying to present himself in the best light, so it's reasonable to treat his claims with skepticism. Macy seems to believe that, in spite of this, his perspective is worth hearing as part of an attempt to piece together the whole story. She also confirms that some of what he says is true: certainly Ronnie's arrest doesn't stop Woodstock heroin users from trying to get their supply elsewhere.*



Ronnie recalls how he didn't want to end up like his father. Though he didn't develop a drug addiction, however, Ronnie realizes he had his own addiction: the lifestyle that being a drug dealer afforded him. One of Ronnie's big regrets is losing contact with his daughters and their mothers.

*Ronnie's concerns are relatable; like Metcalf, he doesn't want to follow in the footsteps of his addicted father, and like Tess, he wants to be a better parent but faces significant obstacles along the way. These similarities suggest that people on all sides of the opioid epidemic share a common humanity.*



After speaking with Ronnie, Macy drives back to Roanoke, too tired to visit Kristi Fernandez in Woodstock. She dreads telling Kristi how little light her interview with Ronnie shed on Jesse's death. Kristi still visits her son's grave several times each month and has recently worked up the courage to see the police pictures of him dead in the immediate aftermath of his overdose.

*Macy's plan for Jones to tie the whole narrative together doesn't quite pan out. She mentions details like how she was too tired to visit Kristi in order to give readers an inside look at how her book came together, offering greater transparency.*



Overdoses begin to spike as fentanyl becomes more prevalent. One week in October 2016 sees 19 overdoses in the Shenandoah Valley region. Baltimore dealers continue to sell fentanyl because, even if fentanyl kills a client, it generally leads to new clients (who seek out the dead user's dealer in order to chase a higher high). A day after Macy interviews Ronnie, she finally tells Kristi that Ronnie doesn't even recognize Jesse's name.

*It's notable that fentanyl begins to spike when Ronnie is already in prison. Though it's perhaps doubtful that Ronnie would have protected his users more than other dealers, what is clear is that imprisoning Ronnie Jones did little-to-nothing when it came to stopping deadly overdoses. If imprisoning Ronnie doesn't stop overdoses, Macy asks what does it accomplish.*



Haddox of Purdue Pharma gives a speech about how his company is making opioids safer. Opioids remain difficult to regulate because, unlike tobacco, they do have some legitimate medical uses. Haddox continues repeating old marketing lines about how pain is the real problem, and the only recent consequence for the Sacklers is that they have fallen from 16th to 19th on a *Forbes* list of the richest families in America.

*A lot of time has passed since Haddox last appeared in the book, and yet he's still repeating basically the same marketing lines. The fact that the Sacklers have barely even slipped on the Forbes family wealth list shows how little things have changed. Macy mentions these details not to diminish the work of activists, only to show how much work still needs to be done.*



## CHAPTER 13

In 1925, a psychiatrist published some articles suggesting that addiction only affected people born with certain personality defects. He was forced to adapt his views, however, when colleagues showed him that 10 to 15 percent of "normal" patients, including healthcare professionals, could also become addicted when exposed to opioids.

*Macy is a big believer in the idea that the past can help shape or even predict the future. In this case, she dives into the history of addiction research to see what can be learned from it. From the very beginning, it is clear that addiction is a contentious topic and that people's innate biases may lead them to false conclusions.*



In the 1970s, the first MAT drugs were developed, but even today courts are more likely to send users to prison, where getting reliable treatment (particularly MAT) is difficult. While not all patients want or need MAT, Macy believes it is crucial that people have the option.

*Macy has indirectly endorsed MAT earlier, by bringing up studies that show its benefits, but here she becomes more explicit in her argument. She has laid the groundwork for this more specific argument through stories like Tess's, which vividly show the impact MAT can have on a person's life.*



Macy asks why it took so long for the government to respond to the opioid crisis, with the CDC only issuing voluntary prescribing guidelines in 2016. These guidelines did not solve the issue of opioids being overprescribed, and they also occasionally led to patients with real chronic pain being treated like addicts.

*Since this is the final chapter, Macy recaps many of the themes she's visited in previous chapters, including her criticism of the federal government's slow response. She makes it clear that, even as recently as 2016, the issue has not improved.*



To finish her story, Macy looks back to Central Appalachia, where the modern opioid epidemic began. She speaks with nurse-practitioner Teresa Gardner Tyson, who hosts a major medical outreach event called Remote Area Medical (RAM) for the uninsured every year in far southwest Virginia. Macy sees Tyson's makeshift health camp as proof of the benefits of a single-payer health care system with mental health and substance abuse coverage.

*Because the story of the opioid epidemic is often grim, Macy looks to the story of Tyson to provide a somewhat more hopeful ending to her book. Tyson's enthusiasm is an inspiration to Macy, and her proactive approach to treatment represents a constructive alternative to the stagnant federal government approach.*



Macy interviews Tyson before and after RAM. Macy and other reporters are often surprised by the scale of RAM, comparing it to natural disaster relief in Third-World countries. Though similar poverty and health problems exist in cities, in Appalachia, it's impossible to conceal the scale of the problem.

*Macy's critiques of the media sometimes include herself; she admits to being guilty of ignoring the scale of the medical crisis in the rural U.S. She shows that this ignorance doesn't have to be a stopping point—that once people learn about the problem, they can start to help with solutions.*



Macy finds hope while following the story of Tyson, her staff, and her patients. Tyson projects enthusiasm and confidence as she drives around the state in her old Winnebago. Macy watches her help a substitute teacher with a swollen wrist who has just suffered a pay cut due to school austerity measures.

*Tyson has a very hands-on approach to treatment. Because the federal government is often reluctant to act, hands-on help like Tyson's is often sorely needed, particularly in rural areas without the same medical resources as big cities.*



People like Tyson become crucial for filling in the gaps in Virginia's increasingly frayed safety net. Even the typically optimistic Tyson occasionally finds herself crushed, however, by the news of a patient's death.

*No one is superhuman, and even Tyson faces setbacks and disappointments—what's important is that these don't discourage her from doing her work.*



Meanwhile, regional health department director Sue Cantrell is slowly making her own progress. Virginia has recently passed a law paving the way for needle exchange programs (although despite success in West Virginia with a similar program in 2015, the **coalfield** legislators across the border in Virginia all voted against the measure). Cantrell starts pitching even more ambitious ideas, like “clean living facilities” in subsidized housing, which would place recovering former users in areas with support groups. Other researchers have also noted that a person’s external environment plays a big role in whether they relapse, sometimes referring to a “geographic cure” where people leave the circumstances that cause them to use.

Macy contends that the current political response to the opioid epidemic is far from adequate. She proposes a “new New Deal for the Drug Addicted.” Despite bold proclamations about how to fix the opioid crisis from the Trump administration, little is accomplished, although his administration is far from the first to ignore the crisis.

In Appalachia, the culture also remains a big barrier to treatment, with addiction still treated with a stigma. For example, a RAM event causes controversy when it’s alleged that a pharmacist gave Narcan training to a local Boy Scout troop without their parents’ permission, stoking fears that knowing how to use Narcan might encourage the Boy Scouts to party harder. Tyson’s mobile health service also faces close calls in dangerous neighborhoods and learns that they have to be careful about where they set up.

Opioids are currently on pace to kill as many Americans in one decade as HIV/AIDS has killed since its inception. Predictions about the end are vague, with some experts tentatively projecting a leveling off sometime after 2020. Meanwhile, 2.6 million Americans are currently addicted.

In 2017, the Virginia Board of Medicine orders that all doctors must check into a drug monitoring system before giving prescriptions (in order to prevent doctor-shopping). Though Virginia was well behind in its initial response, state officials now begin expanding MAT. The costs of addiction-related illness are high, and they force health systems to integrate addiction treatment with general health.

*Cantrell advocates for change through more bureaucratic measures than Tyson, but Macy shows that Cantrell’s approach is also valuable. Cantrell has big ideas about how to fix the opioid crisis. While these may seem impractical, Macy has shown that the opioid crisis is so big that it requires big solutions and that sometimes when ambitious goals fall short, they can still lead to smaller, incremental changes.*



*By invoking the New Deal, one of the most ambitious political proposals of the 20th century, Macy is encouraging healthcare reformers to be similarly ambitious. Such a monumental response is the only way to deal with such a monumental problem, she argues.*



*While Tyson is celebrated both by Macy and by many in her community, Macy shows that even Tyson can be the subject of criticism. Tyson’s work may not seem particularly controversial, but the passionate responses she receives seem to indicate how controversial healthcare remains in many parts of the U.S.*



*Most of the specific predictions in Dopesick have been totally thrown off by the COVID-19 epidemic, which drastically changed American healthcare. The statistics here do, however, accurately convey the sheer scope of the epidemic. Macy wants to emphasize that this is a problem all Americans must face eventually.*



*Macy balances her criticism of the government response to the opioid crisis by noting some achievements that have already been accomplished. Though Virginia is not at the forefront of addiction treatment, it has made progress, perhaps due to the tireless efforts of activists.*





Sister Beth and Art Van Zee find that in the Appalachian Bible Belt, it helps to blend MAT with twelve-step programs (the latter of which are only rarely effective for opioid addiction on their own). They get to know patients who suffer with addiction in their families, some losing multiple relatives to overdoses. Van Zee keeps up a hectic patient load, working 16-hour days, and he carefully guards his own health because of the responsibility he feels to be there for his patients.

*Beth and Van Zee demonstrate a flexible strategy of adapting treatment to the specific area where it's needed. They take a personal approach to treatment, doing something that even an effective, responsive federal government would struggle to do. Macy admires Van Zee's dedication to his patients, though she portrays him as an exceptional figure and doesn't suggest that everyone needs to work 16-hour days to combat the opioid crisis.*



Across the U.S., attitudes about drug addiction begin to shift. Neighborhoods of Boston where people once had derisive attitudes toward addicts have now become the testing grounds for new treatment ideas, like reverse-motion detectors in public bathrooms that call for help if a person hasn't moved in four minutes. Though some locals resist new programs, even in liberal neighborhoods, activists manage to win over some skeptical community leaders by explaining the benefits of treatment at public meetings.

*Macy gives the example of Boston to show how people's attitudes can change over time, particularly when they are presented with clear evidence of the effectiveness of new solutions. She doesn't downplay the challenges faced by activists, but she does show how the challenges they face aren't insurmountable, particularly if they have evidence on their side.*



Even in Appalachia, harm reduction begins to catch on as a method of drug treatment. Schools move away from the DARE model, which studies have proven is ineffective. Some addiction activists suggest that the real problem isn't the individual choices people make but the social and economic conditions that make certain people more susceptible to opioid abuse.

*DARE is a program founded in the 1980s that is used to teach children about drug abuse. It is often associated with hardline positions like "Just Say No" and zero tolerance enforcement. Macy disapproves of DARE, not because she disagrees with its stated intentions but because she believes the program is misleading and ineffective. Her disapproval of DARE shows that she believes it is important to clearly and correctly identify a problem before moving to the solution; for her, DARE does not adequately grapple with the nuance of drug addiction.*



Reflecting on what she's learned over the course of her book that makes her feel hopeful, Macy thinks of people like Sue Ella, Tyson, and Cantrell, who use the strength of community to combat the epidemic.

*Macy tries to move beyond negativity and pessimism—which can fatigue and discourage people—by giving a spotlight to people whose work she admires.*



Macy looks at the work of Dr. Steve Lloyd, a former opioid user who has become a charismatic leader against drug abuse. He credits his own recovery to a rigorous five-year model of intense monitoring, which is commonly used for addicted doctors and pilots. Though this method may not be feasible for widespread use—it cost Lloyd \$40,000—it also has recovery rates of 70 to 90 percent.

*Lloyd's case shows that there are, in fact, already highly effective treatment programs out there—there problem is that the vast majority of people just can't afford them. Macy leaves open a question: while offering this type of treatment more widely would be expensive, would it really be more expensive than dealing the effects of the opioid crisis?*



Lloyd repeatedly argues that MAT is an essential part of treatment, particularly since many patients are limited to 28 days of residential treatment, which has been proven to be far too short for most people who need treatment. One woman confronts him at a meeting to ask, “Just how many chances are we supposed to give somebody?” This attitude is fairly common, with many leaders bemoaning the taxpayer cost of treating people with addiction problems. Lloyd responds with a quote from the Bible: “Seventy times seven.” Macy concludes that if the federal government won’t step in to save Appalachia from the opioid epidemic, “Appalachia would have to save itself.”

*In the Bible, when Jesus is asked about how many times a sinner should be forgiven, he replies seventy times seven times. (The number generally isn’t interpreted literally; it’s more often interpreted as some very large, uncertain number that suggests God is forgiving). Lloyd quotes this Bible passage to emphasize that, while people with addictions may not be perfect, Jesus advocated mercy for sinners and so anyone who believes in Jesus should offer a similar mercy. Macy ends the book proper by clearly restating one of her main arguments: since the federal government seems to be incapable (or at least unwilling) to fully address the opioid crisis, local community leaders will have to do the job on their own.*



## EPILOGUE

Macy recalls how the families of addicted people that she followed in Roanoke seem to age in fast motion. After visiting her son, Spencer, almost every weekend since 2012, Ginger is there when he gets out in February 2017. Seven years sober, Spencer has picked up a healthier addiction to martial arts. He plans to attempt the “geographic cure,” moving to a new city to work for a martial arts studio.

*For the epilogue, Macy checks back in on the lives of some of the people she profiled in previous chapters. Spencer is a case study in how someone can recover from addiction. Though Macy is careful to avoid falling into “personal responsibility” arguments about the causes of addiction, she shows how with luck, support, and hard work, someone like Spencer can turn his life around. Spencer also proves that people aren’t condemned to their addictions—despite the difficulties some of them will turn their lives around.*



Scott Roth’s mother, Robin, still regularly texts with Macy and has been mourning her son’s death for eight years. She recently moved from her old house to a smaller apartment, but some sunflowers still grow on her old property, as if as a memorial to Scott and to the other victims of the opioid epidemic.

*On the other hand, Robin Roth shows that some people can’t escape the effects of the opioid crisis, even years after the death of their loved ones. Robin’s long mourning period emphasizes how the impact of the epidemic is much more profound than raw overdose statistics.*



In the fall of 2017, Macy again speaks with Bobby’s mother, Janine Underwood. Bobby’s old friends continue to show up at the Hope Initiative regularly, tired of their addicted lifestyles, but also unable to give them up.

*Macy shows how the Hope Initiative has not been a silver bullet in its community and addiction still persists as a problem. This does not mean the initiative has failed, however; as Macy noted earlier, the recovery process often takes many years and reform is often an incremental process.*



In 2017, both fatal and nonfatal overdoses explode in Roanoke. Ronnie Jones was correct in his prediction that heroin distribution wouldn't stop with him in jail, but these heroin rings receive less press due to severe cutbacks at local papers, leading some Virginia residents to falsely assume there is less heroin on the streets. A major addiction researcher receives money to expand MAT in Virginia, but despite the expansion, long waitlists remain a problem in Roanoke.

*One of the recurring themes in Dopesick has been how the changing media landscape affected the opioid epidemic. While Macy at times criticized the sensational coverage of opioids in local papers, she finds that any coverage at all is better than nothing, which is unfortunately all some papers can afford in 2017.*



From Las Vegas, Nevada, Tess texts about going back into rehab. Her mother, Patricia, has tried to get Tess into MAT in Virginia, but the limited resources in Roanoke mean that enrollment is currently limited to pregnant women. In Nevada, Tess herself has applied for Medicaid in an attempt to seek MAT treatment.

*Some things haven't changed in the epilogue: Tess still faces bureaucratic hurdles that make it harder for her to get treatment, even during moments when she's most willing.*



Tess has made some troubling phone calls home where she seems to be high on meth and paranoid about "gang stalkers" out to kill her. She may or may not actually be involved with gangs, but she does seem to have a pimp. By December 2017, Tess seems better, making vague plans to come back to Roanoke for a stay at an abstinence-only treatment center. She hears about an early copy of *Dopesick* and asks to see it.

*Tess's family has no way of knowing whether Tess's paranoid calls have any basis in fact or if they are brought on by drugs, once again showing how addiction keeps families in the dark. Even when she reaches her lowest points, however, Tess seems to have the ability to bounce back and suddenly decide she wants treatment. Macy portrays how the life of a heavy drug user is not necessarily one downward spiral, but often interspersed with moments of hope and clarity.*



In the days leading up to Christmas, Tess sends Patricia scattered text messages, still vaguely promising to come home. She keeps putting off picking up her ID, which she'll need to come home to Roanoke.

*Tess's behavior seems to be encouraging. The fact that she is communicating with Patricia at all is a good sign. Unfortunately, as Macy has shown previously, sometimes people struggling with addiction hit their lowest moments right when they are on the brink of a change.*



The morning after Christmas, Patricia gets a call from the Las Vegas police department. Someone has discovered Tess's body, naked and in a plastic bag, with blunt head trauma. The body and plastic bag are partially burned. The sensational nature of the death causes it to make national news. Just like the U.S. itself is divided in its response to the opioid crisis, Tess's grieving family is also divided, despite everyone's good intentions.

*Tess's death is shocking, both for its suddenness and for its violence. Like many of the deaths chronicled in Dopesick, it raises questions that may never be answered, particularly about the circumstances leading up to Tess's death. Macy does not pretend to have these answers; she sets forth the information available while acknowledging that in some ways the stories of people like Tess will remain incomplete.*



Police investigate potential gang connections to Tess's death. Tess's body finally comes home to Roanoke on December 30, 2017. It takes two days to make the body presentable for a viewing, in part because her head was shaved in order to collect evidence. Patricia sees the body on January 2nd, which would have been Tess's 29th birthday. Inside her daughter's vest, she puts a picture of her son, some of her dog's hair, and a sand dollar.

*Macy ends the epilogue by showing Patricia standing over the body of her dead daughter—perhaps the starkest illustration so far of the awful human toll of the opioid epidemic. The end of the epilogue is significantly less hopeful than the ending of the final proper chapter, although the two sentiments don't necessarily contradict each other. Arguably, the solemnity and grief that end the epilogue only provide greater urgency to the call to action in the final chapter.*





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