

“Mother’s Little Helpers”: Medicine’s Safe Cabinet for White Narcotics

(as told by David Herzberg, historian)

When I first began reading about the opioid crisis in the early 2000s, it was with a profound sense of *déjà vu*. This is an occupational hazard for historians, of course, but this was a particularly bad case. You see, I had just spent years researching and writing a book on the history of popular psychiatric medicines like Prozac, and as part of that work I had read literally hundreds of magazine articles published during a panic over Valium addiction in the 1960s and 1970s. The weird thing was, if you switched out the name of the drug, those Valium stories from half a century ago read exactly like the ones I was now reading about OxyContin. They had the same setting, the same characters, the same plotline, and the same moral.

See for yourself:

1978: “The smartly dressed woman driving a sleek, late model car could be the envy of her neighbors. She has a loving husband, bright children, a beautiful home in the suburbs, and apparently no cares in the world. Except one. This woman is a junkie. She is not the kind of junkie one thinks of in terms of long-haired ‘hippies,’ counter-culture street people, pushers, and illicit drugs. She is dependent on legal drugs, the kind prescribed for her by a physician.”¹

1979: “The only thing that Carol, an attractive thirty-year-old stewardess for an international airline, clearly recalls about the night she was wheeled into the emergency room of St. Vincent’s Hospital in the Greenwich Village section of New York City is the ambulance attendant asking a doctor—almost casually—‘We’ve got another pillhead here. Are you going to pump her out?’”²

2008: “The first time Lauren, a suburban teenager in Connecticut, took a prescription pain killer, she says she was sick with strep throat during her freshman year in college and grabbed a Percocet from her parents’ medicine cabinet. She never dreamed where that one pill would take her.”³

2009: “The girl grew up in western Suffolk County, in a town where, she said, ‘everything is perfect,’ with white picket fences and two cars in each driveway; for her birthday last October, she received a black Jeep, and she went to a wealthy, high-performing public school. . . . Her first drive in her new black Jeep was to a heroin dealer. ‘I come from a good family. . . . When you think of a heroin addict, you don’t think of me.’”⁴

The stories were written decades apart but shared the same basic template of innocence defiled, titillating readers with the implicitly sexualized degradation of young, affluent white women.

The stories also shared a moral template. Even after they had become addicted, drug users were not portrayed as immoral or as vicious “fiends” to be feared. Instead, they retained their innocence even as they were victimized by political forces beyond their control. Again, see for yourself:

1979: “Karen is in her middle 20s, the wife of a rising corporation executive and the mother of two small children. Although she has many of life’s advantages, she feels dull and unproductive in contrast to the vital, active life her husband leads. She becomes ever more unhappy, nervous, and depressed, and finally turns to her family physician for help. He prescribes a minor tranquilizer. The drug makes her feel better—for a time. As her husband’s success grows, she is called upon increasingly to help him socialize with clients, and the pressures upon her worsen. Her doctor allows her to take more tranquilizers.”⁵

2016: “Mary Kathryn Mullins . . . was prescribed OxyContin for pain in her back after a car crash. . . . ‘They wrote her pain pills, and she just got hooked,’ said her mother. . . . As her addiction worsened, she went to dozens of doctors, visiting pain clinics that churned out illegal prescriptions by the hundreds and pharmacies that dispensed doses by the millions. . . . As the fatalities mounted—hydrocodone and oxycodone overdose deaths increased 67 percent in West Virginia between 2007 and 2012—the drug shippers’ CEOs collected salaries and bonuses in the tens of millions of dollars. Their companies made billions.”⁶

In both cases, the articles are ostensibly about addiction, but they are also muckraking exposés of injustice and at least implicit calls for reform. In the 1960s and 1970s, it was the medical system’s deadly support for sexist constraints on “housewives”; in the 2000s, it was profiteering pharmaceutical companies and the ignorant or unscrupulous physicians who enabled them.

But the aspect of the articles that really grabbed me—that convinced me that it was time to go back to the archives and research more—was their shared conviction that white, middle-class addiction to pharmaceuticals was a new phenomenon.

1967: An old and shrinking population of “urban, poor, colored” narcotic addicts has recently given way to “millions” of “White and affluent” Americans who “can’t sleep, wake up or feel comfortable without drugs” and are using prescriptions as an escape hatch. “Serious drug problems” have escaped from the “slums” and are now “sweep[ing] through White America: Junction City, Kans.; Pagedale, Mo.; Woodford, Va.; Plymouth, Mich.—places with apple pie smells and wind-snapped flags.”⁷

1971: Richard Nixon: “We used to say [that addiction] is a ghetto problem or it is a black problem . . . but today it has moved from the ghetto to the suburbs, from the poor to the upper middle class [because there is] ‘a pill for every problem.’”⁸

2008: Though overall heroin use has remained relatively stable nationwide, numerous police agencies across the country say the drug, once the scourge of poor inner cities, has in the last several years attracted a new generation of users who are largely young, middle-class and living in rural and suburban areas. At least part of that resurgence, police say, is a side effect of the explosion in prescription drug abuse.⁹

2017: Johnson, a former police chief, said the opioid scourge has introduced a new kind of addict: those who became hooked after receiving a prescription for pain. “Now we’re dealing with the 28-year-old mother who used to jog 5 miles a morning who sprained her knee, or the coal miner in Appalachia who hurt his back,” Johnson said.¹⁰

Why was history repeating itself in this way, and why did no one seem to notice the repetition? On the contrary: novelty was crucial to the stories. I decided to look into it further.

It didn’t take very long to realize that this repetition was bigger than I’d thought. The Valium and OxyContin episodes were not America’s only instances of widespread addiction to pharmaceuticals. Far from it. In fact, it seemed that almost every era had had its prescription drug crisis—even eras before there were such things as “prescription drugs.” Since at least the late nineteenth century, widespread use of and addiction to pharmaceuticals have been a consistent feature of white, middle-class American life. Indeed, I realized as I began to dig deeper, in most eras this type of drug use had in fact dwarfed “street” use of illicit drugs like heroin and cocaine.

National media had not ignored this type of addiction as I had assumed it must have, given its disappearance from popular memory.

Instead, I found, the media had covered it almost obsessively—but always describing it as a new and unprecedented phenomenon. Journalists and drug experts announced episodic panic after episodic panic like the proverbial goldfish discovering the castle in each swing around the fishbowl. In an eerie mirror inverse of Jules’s story about politicians suddenly discovering heroin overdoses once they appeared among middle-class white constituents, each discovery was also an act of forgetting.

Remembering forgotten things is what historians do. So I started to wonder. Why had addiction to pharmaceuticals been so widespread, for so long? And, given its obvious prevalence, what could explain the long-standing assumption that addiction was an affair of the “ghetto” rather than of the white middle classes—a belief so at odds with reality that it survived only because Americans continually forgot the last crisis every time a new one was “discovered”?