EDITORIALS & OPINIONS

The Bulletin
AN INDEPENDENT NEWSPAPER

Heidi Wright — Publisher
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Central Oregon has a fentanyl supply problem

We are buried in it.

That's how Sgt. Kent Vander Kamp of the Deschutes County Sheriff's Office described how bad the fentanyl problem is in Central Oregon. He is part of the Central Oregon Drug Enforcement team. And he says every case the CODE team deals with involves fentanyl.

It's a synthetic opioid. It can cost 15 cents to 20 cents to make a pill. They can be sold for $1 wholesale. On the street in Bend, they can be sold for $5 to $6 a pill. It's typically cheaper than heroin. Addicts say it gives them a higher high. People take pills or smoke it. It sometimes gets mixed with pot or passed off as OxyContin or oxycodone.

The illegal pills aren't made with quality control. Dosages can vary from zero milligrams in a pill to 1 milligram to 2 milligrams. A prescription dose can be 2 micrograms. A dose of 1 milligram can kill. And the overdoses can happen in a manner of seconds. There's little time for a victim or anyone with them to take action.

"Taking it is a modern day version of Russian Roulette," Vander Kamp said.

The Oregon Health Authority recently announced drug overdoses from opioids doubled in the state from 2019 to 2021. Most of that is attributed to the spread of fentanyl. We reached out to the CODE team to try to better understand what is going on here.

Kids buy it. Adults buy it. Vander Kamp said they have found 60- and 70- year olds buying it thinking they have found a great deal on discounted prescription medication.

All indications are most of the illegal production is in Mexico based on ingredients made in China.

People on the CODE team know when a shipment comes into Central Oregon. Overdose cases start going up. They have seen it come into the area any way drugs can come in, by plane, car, train, mail. It can get marketed on social media apps and delivered.

The CODE team's role is to look at "cartel-level" operations. They aren't focused on individual dealers as much as they are the level above that. It's an interdisciplinary unit with representatives from local and federal agencies. It varies in size from 12 to 50 people.

People who misuse opioids can be successfully treated for addiction. And that's one aspect of addressing the problem. But it's also about stopping the supply.

Take the Envision Bend survey, please

Take the Envision Bend survey.

You can find it here, tinyurl.com/EnvisionBendsurvey.

We should be up front that The Bulletin is a community partner with Envision Bend to help get the word out about what it is doing.

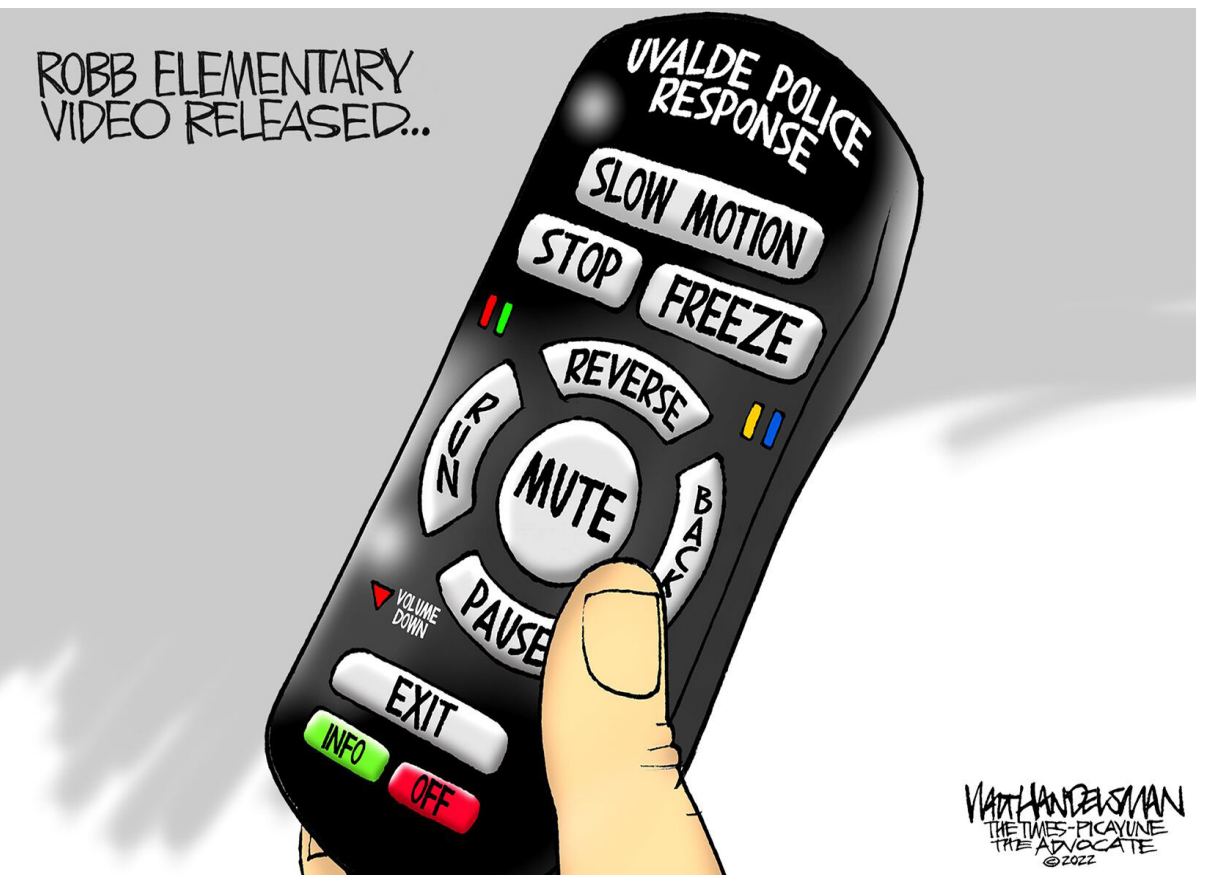
That survey is going to be key to the group's work. It wants as many people as it can to share their perspectives on what they value, what they see as Bend's challenges and what Bend could or should do about it. Envision Bend is hoping to find areas where people agree on what we should do to move forward as a community and help formulate a plan of action.

The survey is an online survey. We spoke with representatives from Envision Bend Tuesday and they acknowledged it is not scientific. That means it will suffer from, at least, selection bias. But the organization is sincerely making the effort to get as many people from as many different backgrounds and perspectives to take it. And it is certainly cheaper than paying a polling firm tens of thousands of dollars to do a scientific one, though not better.

One focus of Envision Bend's might be on ideas to bridge the town's east/west divide. Another might be on mental health. There are already community and government efforts on many topics. Envision Bend is trying to fill in gaps, not repeat work that is already being done.

So, take the Envision Bend survey. It's about acting as a community to build a better future for the community. Finding common ground will be tricky on many subjects. It's important to try.

Editorials reflect the views of The Bulletin's editorial board, Publisher Heidi Wright, Editor Gerry O'Brien and Editorial Page Editor Richard Coe. They are written by Richard Coe.



Perinatal mental health support after Roe

BY WENDY DAVIS AND CHRISTENA RAINES

GUEST COLUMN

Access to safe, legal, and informed options related to pregnancy is fundamental to providing equitable heal thcare. Restricting access disproportionately impacts communities of color and those with limited resources. By overturning Roe vs. Wade, the Supreme Court has potentially exacerbated the risks of pregnancy, including rates of perinatal mental health disorders and even maternal mortality.

Pregnancy and postpartum mental health, also known as "perinatal mental health," represents a serious and on-going public health crisis, requiring a concerted effort to improve access to care for pregnant and postpartum individuals. Increasing awareness and education among the public, professional communities, and policy makers. It is essential that we work to make progress and close the gaps in our health care system to ensure a lasting difference in the lives of parents.

Perinatal mental health disorders are one of the most common complications during and after pregnancy, and according to the American College of Obstetricians and Gynecologists one in seven women or approximately 500,000 U.S. women who give birth will experience one of these disorders annually. Pregnant and postpartum individuals, adoptive parents, grandparents, and families of all kinds are susceptible to the effects of perinatal mental health disorders. Untreated and unrecognized perinatal mental health disorders can lead to serious lifelong consequences for parents, babies, and their families.

The pandemic exacerbated many existing health disparities and challenges, and perinatal mental health is no exception. Rates of postpartum depression among American mothers rose nearly three-fold during the COVID-19 pandemic, along with large increases in major depression and thoughts of self-harm, according to a 2022 study called COVID-19 MAMAS (Maternal Attachment, Mood, Ability, and Support), conducted by University of Michigan researchers. As we readjust to new normal, persistent barriers continue to prevent families from accessing helpful resources. The court ruling on Roe creates an additional barrier to the autonomy between perinatal patients and health care providers.

Education is essential. Professionals and parents are often unaware of resources available to support perinatal mental health needs. Many underestimate the prevalence and the many types of perinatal mental health disorders, as well as the length of time a person is at risk.

A recent survey conducted by Southpaw Insights on behalf of Postpartum Support International, found that only a third of adults know that a person is at risk of postpartum depression 12 months or more after the birth of a child. In addition, few Americans are aware of the prevalence of other possible perinatal mental health conditions that a person can experience during pregnancy and/or through the first year postpartum. These include perinatal panic disorder, obsessive-compulsive disorder, insomnia, post-traumatic stress, mania, and psychosis.

Postpartum Support International has worked for the past 35 years to promote awareness, prevention, and treatment of mental health issues related to childbearing in every country worldwide. Decades of experience have shown that leaning into the lived experience of help-seekers and providing evidence-based interventions are essential to support the specific needs of each individual.

Equitable health care — including mental health care — for all pregnant, postpartum and post-loss individuals and their families is a fundamental human right. Patients, along with their trusted health care providers, should be afforded the autonomy to make important decisions about their own physical and mental health.

All families suffering with perinatal mental health deserve an inclusive and supportive environment- especially in this post-Roe world.

Wendy Davis, is the executive director of Postpartum Support International and is a psychotherapist specializing in perinatal mental health. Christena Raines is a dual trained nurse practitioner in women's health and board certified in Psychiatric-Mental Health and serves on PSI's board of directors.

Letters policy

We welcome your letters. Letters should be limited to one issue, contain no more than 250 words and include the writer's phone number and address for verification. We edit letters for brevity, grammar, taste and legal reasons. We reject poetry, personal attacks, form letters, letters submitted elsewhere and those appropriate for other sections of The Bulletin. Writers are limited to one letter or guest column every 30 days.

Guest columns

Your submissions should be between 550 and 650 words and must include the writer's phone number and address for verification. We edit submissions for brevity, grammar, taste and legal reasons. We reject those submitted elsewhere. Locally submitted columns alternate with national columnists and commentaries. Writers are limited to one letter or guest column every 30 days.

How to submit

Please address your submission to either My Nickel's Worth or Guest Column and mail, fax or email it to The Bulletin. Email submissions are preferred.

Email: letters@bendbulletin.com

Write: My Nickel's Worth/Guest Column
P.O. Box 6020
Bend, OR 97708

Fax: 541-385-5804

The world's oldest trees can outlive anything except humans

BY FAYE FLAM
Bloomberg

What's captured people's attention about the Washburn fire raging in Yosemite isn't just its size or scope, but the fact that it threatens a giant Sequoia with a name, Grizzly Giant, and an extreme age: It's almost 3,000 years old.

The oldest trees have scientific as well as sentimental value. There's something alarming about the thought that anything hardy enough to live through multiple millennia could now be in trouble. As it turns out, climate change is not even the worst hazard the oldest trees face.

Trees possess a quality that humans had once attributed to gods: They don't age. Or as forest ecologist Nathan Stephenson puts in a more scientifically accurate way, there's a growing school of thought that trees don't undergo senescence, a programmed slide toward decline and death that puts a limit on the lives of animals. "They die from accidents, like getting attacked by bark beetles, getting burned in a fire … getting infected by a pathogen," said Stephenson, who is a scientist emeritus with the USGS Western Ecological Research Center.

Someone once did a calculation, he said, that if humans didn't senesce but only died when our luck ran out, the average lifespan would be about 700 years. Some unlucky people would die at five, and some lucky ones would live thousands of years.

Trees, including giant Sequoias, don't have life expectancies of 3,000 or more years. Most never survive the sapling stage, and of those that reach adulthood, most never get to their 1,000th birthday. But a few can last thousands of years.

The only way to ascertain the age of a living tree is to take a pencil-thin section from the trunk and count the rings. While scientists can pick up clues about which trees are likely to be very old, it's almost inevitable that the oldest tree in the world is growing in a remote spot — unmeasured, unknown and unnamed.

But among known trees, the oldest grow in an arid set of jutting peaks called the White Mountains, near California's border with Nevada. They're called bristlecone pines — midsize trees, with gnarled branches that look like long-dead driftwood. The living bark and needles cover just a few strips and patches of the mostly dead wood. Bristlecones have been measured at ages close to 5,000 years, having sprouted from seeds when humans were just inventing writing on clay tablets.

The oldest ones take root in the harshest environments — the driest, windiest, roughest mountains with the chalkiest soils — places inhospitable to predators, tree-eating beetles, tree-rotting microbes and smaller plants that might build up brushfire fuel.

The ones that live in nicer spots, such as the lower-elevation hills of Death Valley, are more vulnerable, and indeed, some of those are now dying, suffering from beetle infestations and other side effects of human-generated climate change.

The very oldest trees are good at standing up to changes in climate — that's one of their superpowers — but there are some threats that even they can't endure.

The world's oldest recorded tree, called Prometheus, was killed in 1964. A scientist tried to take a core sample using drill called an increment borer. When the instrument got stuck in the tree, the researcher called the Forest Service for help. They said there were plenty of old trees like this one and called in a crew with a chainsaw to cut it down. After the fact, the scientist, who was a graduate student at the time, counted the rings and discovered to his horror that it was nearly 5,000 years old. They'd just chopped down the world's oldest tree.

The current oldest living tree, a bristlecone called Methuselah, endured the extraction of a tree ring core without harm, but spent years getting torn apart by tourists wanting a piece of bark. Now scientists try to keep its location secret.

There's another threat. Stephenson said that the trees are well adapted to a natural cycle of fire, but not to the kinds of megafires that result when humans suppress fire for decades, allowing an explosive buildup of small trees, brush and other fuel. When those finally catch, flames can rise more than 100 feet and burn the crowns. He said fires have killed 13% to 19% of all the giant Sequoias in the last few years alone. Our current period of global warming and Southwestern drought are also contributing risk factors for megafires.

And of course, global warming is cause for alarm even if it spares the toughest, oldest trees. The more enduring threat of climate change is the collapse of complex ecosystems. It will leave us in a diminished world, a world less able to provide food and clean water to billions of humans. The most weather-hardened gods, looking down from their Olympus, won't miss us.

Faye Flam is a Bloomberg columnist covering science. She is host of the "Follow the Science" podcast.