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How Could I Have Missed It?

By Susan E. Murray

The idea came to him the evening before his son’s funeral. Standing on the funeral home porch, Don Hooton told his Sunday school director how clueless he and his wife had been about the signs of their teenage son’s steroid use. “I didn’t know any better,” he said, “just like 99 percent of parents out there.” Since Taylor Hooten’s death, ruled a suicide, Don has made truth his purpose. Steroids killed his son.

Recently, I heard Don say that only 20 percent of teens across the country who he’s talked to say that anyone ever talked with them about the dangers of steroid use. That unnerved me and prompted me to share this column with you.

Steroid use has made headlines for many years in sports news, but it is also a real and constant danger for teens, both male and female. Steroids are synthetic substances similar to the male sex hormone testosterone. They do have legitimate medical uses, and the type of steroids (corticosteroids) often prescribed to reduce swelling are not anabolic steroids and don’t have the same harmful effects.

Generally called “roids” or “juice,” anabolic refers to muscle-building steroids; and androgenic refers to the class that increases male characteristics. Identified by how they are introduced into the body, there are ten major classifications of anabolic steroid preparations. Some steroid users pop pills, others use hypodermic needles to inject steroids (either oil-based or water-based) into the muscle. There are patches, gels, aerosols, sublingual (under the tongue), homemade transdermal preparations, androgen-estrogen combinations, and even over the counter and counterfeit anabolic steroids.

It’s not uncommon for a person to take two or more kinds of steroids at once, which is called stacking. In Taylor’s room, his dad found a packet of Clomid, a female fertility drug, he had been taking to boost his body’s production of testosterone. Traces of an anabolic steroid and citalopram, a drug prescribed for depression, were also in his system.

Taylor had experienced extreme fluctuations in emotions, from euphoria to rage, as well as irritability and depression. His parents noticed his anger and depression and were taking active steps to assist him. After his death, they also recalled the acne on his back and the changes in his hair, which appeared unusually oily. They assumed these were part of normal adolescence. Unfortunately, Taylor was an expert at hiding much from his parents.

What else should you look for? Other signs include quick weight gain with larger muscle mass, jaundice, swelling of the feet and lower legs, shaking or trembling, persistent body odors, purple or red spots on the body, tiredness and fatigue. Disfiguring effects can include baldness, eventual testicular atrophy, induced gynecomastia (development of breasts in males) and eventually liver damage and cancer, heart attacks and even strokes. Girls can become more masculine, their voices deepen, they grow excessive body hair even though they may experience baldness, and their breast size decreases. By injecting steroids by needle, teens can add HIV and hepatitis B and C to their list of dangerous outcomes.

While we know that knowledge does not necessarily change behavior, our children deserve to know the dangers of steroid use. My plea is that readers will have these important conversations directly with their preteens and teens. There is no substitute for parental involvement. Let your kids know they are so valuable, so precious, that you believe they deserve to know, from you, how to stay safe.

Susan Murray is an associate professor of family studies who teaches behavioral science and social work at Andrews University. She is a certified family life educator and a licensed marriage and family therapist.