

Greetings from the POW camps

Dear MAPS:

Hi and greetings from the POW camps. I thought you might be interested in an update on the federal laws.

The amendment to the US Sentencing Guidelines for LSD did become effective November 1, 1993 as everyone expected it to. One dose of LSD on blotter paper now weighs 0.4 mg regardless of the actual strength of the LSD or the carrier weight.

The difficult part of this amendment remains that it is written so that it fails to override the law on mandatory minimums. The law still reads "a mixture or substance containing." If the court so chooses, it can use the 0.4 mg to determine the sentencing level but use the entire weight to determine the mandatory minimum sentence.

I was sentenced in the 8th District in Cedar Rapids, Iowa. The policy developing there seems to be that if you cooperated - put someone else in prison - 0.4 mg is used for all calculations. If you didn't, the mandatory minimum calculation will revert to the entire weight. Just another government blackmail tool.

I understand that many other districts are denying all sentences below the mandatories. Some of these cases have gone to appeal with hopes of getting a helpful Supreme Court decision.

So, the issue is still not resolved. In my case in particular, the prosecutor says that resentencing is optional and he doesn't believe that I deserve it. In fact, he would still like to depart upwards from my original 24 year sentence. I believe I will be successful in getting a sentence somewhere between 14 and 17 years but will have to wait and see.

As always, I appreciate the MAPS journal that you send to me. This is indeed a problem to be attacked in all ways. Valid research, legal victories, and convincing the public will all be necessary in order to free the magic. I appreciate the part you do and wish I could be of more help. But I guess my lot is to fight the courts. We all have our roles. Good luck with yours.

peace and love,

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The November amendment is helping to reduce some prisoners' excessive sentences. Sadly, too many still suffer from mandatory sentences, drug laws that Congress passed in 1986, '88, and '90 that prohibit a judge from considering anything except the type of drug and its weight when sentencing a drug offender. If you are interested in obtaining more information about minimum mandatories and the sentencing guidelines you may write to: Families Against Mandatory Minimums (FAMM), 1001 Pennsylvania Ave. NW, Ste. 200 South, Washington, DC 20004. Phone: (202) 457-5790.

Writing letters to Congresspeople is still essential to getting US laws to reflect our beliefs in freedom and appropriate sentencing.

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SEE PAGE 30.

Another warning about harmala alkaloids and other MAO inhibitors

J.C. CALLAWAY

In an earlier edition of the MAPS newsletter (Callaway 1993), I described the use of harmaline and the minimal amounts needed to inhibit monoamine oxidase (MAO). This was not to encourage people to do so, but rather to provide the minimal guidelines one should consider before dosing with this substance. The impetus for this information came from two directions:

1) MAO inhibitors, in general, are not safe drugs to play around with in the absence of such information.

2) There seems to be an increased interest in their use as analog components of the sacred beverage Ayahuasca.

Since then, another potential problem has come to my attention, and that is the inadvertent combination of MAO inhibitors, such as harmala alkaloids, with serotonin uptake inhibitors. Prozac, for example, is a specific serotonin (re)uptake inhibitor which is commonly used in the treatment of depression. It will soon be used in the US to treat obsessive-compulsive disorders. In short, anyone can qualify for a prescription.

Simultaneous inhibition of both systems can result in the 'serotonin syndrome' (Sternbach 1991), which has resulted in deaths (Neuvonen et al. 1993). The symptoms are typically initial euphoria, followed by tremors, convulsions, and loss of consciousness which can eventually result in death. Unfortunately, high doses of harmaline and other harmala alkaloids (as well as Ayahuasca and analogous mixtures) can also produce tremors and convulsions, so it may not be initially clear if the victim had inadvertently taken a serotonin uptake inhibitor or not.

To reduce the chances of such an incident, do not mix drugs like Prozac (or any other serotonin uptake inhibitor/antidepressant) with harmala alkaloids, Ayahuasca or analogous mixtures. Also, take it upon yourselves to ask those who might consume such preparations whether or not they are currently taking any medications for depression or other mood disorders.

Be aware!

References:

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