

STAR STYLE

Monday, July 15, 1985 Page 12

Not all are in ecstasy: Witnesses exalt, denounce drug

By Brian Burnes

It wraps the more easily understood moments of hearings last week in Kansas City concerning a drug MDMA—sometimes called Ecstasy—were when witnesses described facts of the controversial—and as of yet illegal—drug they had once taken.

"It's a calm, peaceful state," said David Nichols, a professor of medicinal chemistry from Purdue University in Lima.

June Biedinger, a registered retail pharmacist from Chicago, said: "It sped me deal with everyday, troublesome things in a more analytical way."

Most of the two-day hearing, before U.S. Drug Enforcement Administration administrative law judge Francis L. Young at the U.S. District Courthouse Downtown, was steeped in the esoteric and technical.

Specific molecular structures of MDMA—3,4-methylenedioxymethylamphetamine—were discussed as to their alleged hallucinogenic qualities. So was methodology used in determining the extent of brain damage suffered by laboratory animals.

However, when asked to describe alleged benefits of Ecstasy, witnesses, as well as those present in the small gallery, abandoned technical jargon for more uplifting language.

"Do you know the word *agape*, the

word usually associated with Christianity?" Thomas B. Roberts, professor of educational psychology at Northern Illinois University in DeKalb, asked a reporter. "It usually means a divine love between God and man. It also means a feeling of brotherhood among all men."

Mr. Roberts was not a witness. He was one of 29 subjects who participated in a "pilot, exploratory" study of the effect of MDMA on humans several years ago. He is also one of four private citizens who have hired a Washington law firm to challenge the U.S. Drug Enforcement Administration in its effort to permanently place MDMA in the same category as heroin and cocaine.

As of July 1, MDMA was a "Schedule I" drug, Schedule I, in government par-

lance, means a drug that has a high potential for abuse and no accepted medical use.

Under the ruling, those who possess MDMA can be charged with a misdemeanor. Those who sell and manufacture the drug are guilty of a felony and can face a sentence of up to 15 years in prison and a \$125,000 fine.

The first arrests under the emergency ruling were made last week in Dallas. Three men were apprehended after selling about 750 tablets—at a wholesale price of \$12.50 a tablet—of the drug to undercover DEA agents, says Phillip Jordan, special agent in charge of the DEA field office in Dallas.

See Ecstasy, pg. 3B, col. 3

Kansas City Star, Monday, July 15, 1985 Page 3B

Ecstasy continued from pg. 1B

The Ecstasy problem in Texas will be highlighted in an upcoming issue of *Life* magazine. Some DEA heads have said the drug, sometimes called a yuppie drug, is popular with college students and professionals. Mr. Jordan says it is more pervasive.

"It's in the gay bars, it's on the university campuses, it's in the straight bars, it's among the professionals," Mr. Jordan says. As to its "designer" appeal, Mr. Jordan is baffled.

"The impurities, the poisons in this thing, it's unbelievable what people will put in their systems."

"Abuse of Ecstasy is another problem we do not need."

The term "designer drug" has come to mean synthetic chemical compounds produced in clandestine laboratories.

Underground technicians create a designer drug by subtly varying the chemical structure of an existing illicit drug, or controlled substance. Until the drug is banned by the DEA, it is a "legal" variation of the drug.

However, Charlotte Johnson, DEA attorney, says: "These drugs are being touted as legal by those selling them—'legal' as in not being controlled substances under state or federal law. But if you traffic in unapproved drugs in interstate commerce, it's a violation of the Federal Food, Drug and Cosmetic Act."

The government was hamstrung in reacting to these substances, so last October, Congress streamlined procedures that allowed the DEA to

enforce a one-year ban on a drug in 30 days. Last month's emergency, temporary scheduling of MDMA—under the terms of the Comprehensive Crime Control Act of 1984—was the second such use of that procedure.

Still another government step is a bill, introduced last week in the U.S. Senate, called the Designer Drug Enforcement Act of 1985. It would make it unlawful to willingly and intentionally manufacture with intent to distribute a "designer" drug intended for human consumption.

Last month, citing a University of Chicago Medical Center study warning that a drug called MDA, similar to MDMA, causes brain damage in laboratory animals, the DEA said it wanted to place MDMA on Schedule I.

A segment of the psychotherapy community has challenged the scheduling. The four men who hired a Washington law firm to challenge the DEA include two professors with Harvard University Medical School in Cambridge, Mass.; Dr. George Greer, a psychiatrist in Santa Fe, N.M.; and Mr. Roberts.

"Everybody knows that a traumatic experience can influence a person's life negatively," Mr. Roberts says. "But can a positive experience influence a person's life to the good? That doesn't occur to most people."

The group says it opposes street abuse of MDMA. The four also say possible therapeutic benefits of MDMA could be sacrificed in the government's

rush to schedule the drug.

To that end, the four want the government to place the drug on Schedule III, as opposed to Schedule I. Schedule III would allow doctors properly registered with the DEA to use the drug in patient treatment. They maintain it also would allow for more research into the drug's qualities; placing it on Schedule I would inhibit that, they say.

The first hearing was in June in Los Angeles. Attorneys for both sides were allowed to cross-examine witnesses during the Kansas City hearing.

The third and final session is tentatively scheduled in October in Washington. Judge Young then will make a recommended ruling to John Lawn, administrator of the DEA. Mr. Lawn's ruling is expected later this year or early next.

It was for a pilot study that Dr. George Greer of Santa Fe personally administered doses of MDMA to 29 subjects.

Most sessions were in the subjects' home. Five couples took MDMA together. Six sessions involved groups of three to six mutual friends.

There were undesirable side effects. Twenty-two subjects reported jaw tension or teeth clenching during the session. Twenty subjects reported fatigue from a few hours to a few days after the session. Three had difficulty walking.

Every subject experienced some benefit from the drug, the doctor reported in his study. Twenty-seven felt "closer and more intimate with anyone present." All 21 subjects who

had sessions in couples or groups experienced "more closeness and/or enhanced communication." Twenty-seven reported positive changes in attitudes and feelings.

The study, although written up by Dr. Greer, has not been published in a journal. Dr. Greer says one of his motives is to alert the research community to the possibilities of more research.

What, he was asked last week, were the motives of the 29 subjects?

"Nine wanted a more cognitive understanding of themselves," he said. Five subjects received 50-milligram doses to facilitate creative writing. Six subjects wanted "enhanced communication with someone (often their spouse)," according to his written report. Eight subjects wanted a "peak-experience of a visionary or mystical state."

Four subjects "mentioned fun and enjoyment" as a goal.

"Is fun and enjoyment a legitimate use for a pharmaceutical agent?" Dr. Greer was asked by Steve Stone, associate chief counsel for the DEA.

"It's not a standard use," Dr. Greer replied.

Dr. Greer, as his study points out, said subjects were screened for health reasons before involving themselves in the study. They were healthy people, he said.

"In other words," Mr. Stone said, "they're OK, but they want to be better?"

"They're OK in some ways," Dr. Greer said. "They want to be better in some ways."