

'Yuppie psychedelic'

DEA to outlaw

hallucinogenic 'ecstasy' drug

A hallucinogenic drug used by some psychotherapists on their patients will be outlawed July 1, the Drug Enforcement Administration (DEA) recently announced.

The drug, commonly known as "ecstasy," has no accepted medical usage and has high abuse potential, the DEA says. A ban was necessary to avoid "imminent hazard to public safety," said DEA Administrator John C. Lawn.

The drug, whose scientific name is 3,4-methylenedioxymethamphetamine (MDMA), thus will join the ranks of heroin, cocaine, and LSD as a highly restricted Schedule I drug. Possession of a "trace" of MDMA will be punishable by up to 15 years in prison and a \$125,000 fine.

The ban has rekindled the debate over the use of psychoactive drugs in therapy, silent since Congress passed the 1966 Drug Abuse Control Amendments. Physicians have a right to research the therapeutic potential of mind-altering drugs, MDMA supporters maintain.

THE EMERGENCY ban will be effective for only one year; hearings will be held this summer in Los Angeles; Kansas City, Mo.; and Washington, D.C., to determine whether the drug should be re-classified permanently.

Therapists using the drug on patients complain that the pre-emptive emergency ban makes the chance of conducting

any further research difficult — perhaps impossible. The DEA, however, says it is establishing expedited registration procedures to assure that legitimate research can continue.

Although it is difficult to determine the exact extent of medical usage, therapists and analysts estimate that between 35 and 200 physicians are using the drug on patients.

"We are beginning increasingly to discover more and more about neurochemistry of the brain and develop chemicals that can modify the brain in important and subtle ways," Charles Schuster of the U. of Chicago told *The Washington Post*.

"We've accepted drugs that are capable of relieving symptoms of mental disease. But there are going to be drugs that enhance our capabilities. Are we going to reject them, or use them in an intelligent fashion?" asked Schuster, who has conducted research on MDMA's pharmacologic cousin MDA.

THE DRUG helps patients lower their defenses, making them more receptive to treatment, therapists assert. The patients no longer deny feelings and start to feel "in touch" with themselves, explained psychiatrist Rick Ingrasci, MD, of Watertown, Mass.

Some cancer patients have taken MDMA to relieve pain and prepare for imminent death. A patient of Santa Fe, N.M., psychiatrist George Greer, MD, said it suppressed feelings of hopelessness and helplessness, easing a life with inoperable bone marrow cancer.

Recreationally, it has been nicknamed "the yuppie psychedelic" because of its relatively mild psychoactive properties and popularity with students and young professionals. MDMA users say it makes them feel "warm," "relaxed," and "in touch with people." "It's the drug you want to do with your parents," user Rick Doblin told one reporter.

There is peril in its use, however, the DEA counters. A survey of 300 hospitals nationwide found that there have been eight emergency room visits and two deaths from MDMA since 1979. One death — of a California psychoanalyst with a heart condition — occurred with a 200 mg. dose, well above the typical 50 mg. to 110 mg. dose.

THE HAIGHT-ASMBURY Free Medical Clinic, San Francisco, a traditional weather vane of drug trends, reports that three or four of the 425 to 460 patients it sees each month complain of bad reactions to multiple MDMA doses. They include severe anxiety, paranoia, fear, depression, and sleep problems.

The yet-unpublished U. of Chicago study of MDMA's pharmacologic cousin, MDA, found evidence of permanent brain damage in animals. Although it is premature to extrapolate the findings to humans using MDMA, researcher Schu-

ster said, he thinks that the DEA did "the responsible thing" by banning the drug.

The DEA also is concerned about rumors that Texas-based MDMA producer plan to organize "pyramid" sales of the drug, recruiting users to become new sellers.

Although the drug has been patented since 1914 and was tested by the U.S. Army in the early 1950s, it has gained notoriety only recently. Non-medical MDMA use is estimated to have climbed from 10,000 doses in 1976 to 30,000 per month in 1985.

RECREATIONAL USE is most common on the West Coast and parts of New England, where 100 mg. tablets can be purchased for \$8 to \$20 each. It is suspected that no more than eight to 10 clandestine labs are responsible for the nation's supply of the drug.

There have been no scientific studies of the drug's value in psychotherapy. The first pharmacologic study was published by California chemist Alexander Shulgin and professor David Nichols, professor at Purdue U., West Lafayette, Ind., who said the drug evoked "an easily controlled altered state."

Users claim that it has low abuse potential because its pleasurable effects decline as frequency of use increases. The National Institute on Drug Abuse, at the DEA's request, is studying the "reinforcing effectiveness" on rats and baboons.