

Of Ecstasy he Agony BY KATHRYN ROSE GERTZ

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To some it's the miracle of the '80s—an open door to real insight, the perfect tranquillity trip. But to those who cite its risks, the drug should be strictly controlled-if not banned outright-to prevent widespread abuse. This report spells out the current pros and cons.

the "hug drug," doctors swear that it sweeps away angst-and grateful patients agree. It is 3,4-methylenedioxymethamphetamine, or MDMA for short. Most, though, simply call it Ecstasy. Chemically, it is a made-in-the-lab concoction related to amphetamines, mescaline and a potent stimulant known as MDA. It is the hottest thing in the continuing search for happiness through chemistry. And now it is also illegal. MDMA is not new. Developed back in 1914

oeds pop it to party, singles call it

by Merck as a diet pill but never manufactured, it was all but forgotten except for its inclusion in one army research project in 1953. Then in the mid-1970s a few studies on the drug were published. Although there were no data recording its physiological effects, several psychiatrists began using it quietly as an adjunct to therapy-just the way they had originally handled LSD. The pharmaceutical industry never pro-

duced MDMA commercially, and yet it was not banned. So there were always private chemists who would easily custom-make it for doctors and recreational users alike. Word quickly spread of its blissful benefitsadvocates say it promotes intimacy, insight, empathy-and Ecstasy was on its way to becoming the drug-of-choice of the '80s.

Until the Drug Enforcement Agency stepped in, that is. Last July, acting on reports of "widespread" use and abuse, the DEA temporarily listed the drug as a Schedule I controlled substance, putting it in the same league as heroin, marijuana and LSD in order to "avoid imminent hazard to the public safety." Hearings are being held, and the final decision about MDMA's permanent status will be made sometime early next year.

Meanwhile, a group of psychiatrists, convinced of the drug's therapeutic value, have hired a lawyer to help them persuade the government to place it in the less restrictive Schedule III category. Unless this action is taken, they fear that the strictures will all but

halt research, as evidenced by the fate of LSD

when it was relegated to Schedule I in 1966.

a full exploration of this drug as a possible catalyst to insight-oriented psychotherapy,' maintains Lester Grinspoon, M.D., professor of psychiatry at Harvard University and one of the doctors actively challenging the DEA. "Schedule III would give the DEA all the law and authority it needs to interdict production and prosecute possession, and at the same time would not compromise any clinical research." The DEA insists, however, that research will not be hindered, citing one FDAcleared LSD project and the recent approval of THC (synthetic marijuana) for marketing. "But that's not really the point," says DEA chemist Frank Sapienza. "We believe that

"The general properties of MDMA warrant

MDMA does not fit the criteria for Schedule III. One requirement is that the substance have a presently accepted medical use, and we still do not believe it does. The other is that it have a relatively low abuse potential. We hold that it can be exploited based on its current clandestine production and widespread availability. All we have are anecdotal reports suggesting its role in therapy-and that's not enough." The Case For Ecstasy

ndeed there are many favorable claims-both clinical observations and glowing testimonials from users. True, there is an initial 15 minutes or so when most experience varying degrees of sweating, jaw tightening, increased blood pressure and heart rate, nystagmus (involuntary eye movement), sometimes nausea. And afterward there are effects that may persist for 24 hours-exhaustion, appetite loss, sometimes sleeplessness. But enthusiasts contend that the fourhour duration of the drug's impact more than makes up for those fleeting discomforts. In addition, medical proponents insist that Ecstasy cannot be addictive because regular use nullifies the desirable, but not the negative, In interviews with three single women in their 30s-a flight attendant, a nutritionist

and a trade journal editor-the reactions most commonly (CONTINUED ON PAGE 56)



reported were self-acceptance, self-love, tolment tranquillity insight a consequent ability to unravel psychological knots. What's more, much of this equanimity seems to endure even after the drug has worn Says the flight attendant: "It's as if you're

living in a muddy pool and suddenly all the mud settles and the water is very clear. You can see everything so lucidly. I learned things about myself that I hadn't recognized before-like how self-critical I am. Now I'm less judgmental about myself and about others, too. I also used to be prone to mood swings. I won't say that will never happen again, but since taking Ecstasy I've been on an emotionally steady course. And I have learned to differentiate better between the important and the trivial. I'm sure that sooner or later these changes would have come about, but this just accelerated the process." None of the three women expressed an

overwhelming, overflowing kind of superelation as the chemical's name might suggestjust a "calm joy" as one of them put it. And they agreed with most every other account that the drug seems to take the sizzle out of sex; instead, most are content just to cuddle a lot. "I would not recommend it for people trying to get someone into bed," says the editor, "but I would for those trying to communicate better with others." "Using [Ecstasy]

outside a doctor's office is very much like playing Russian roulette." Then, too, at the "safe" dosage level of

about 100 mgs. there is apparently no loss of self-control or any of the sensory pyrotechnics and other distortions associated with the psychedelic trip. Ecstasy is more subtle than that. "It offers," says Dr. Grinspoon, "a gentle invitation to introspection." Psychiatrist Richard Ingrasci, M.D., who

practices in Watertown, MA, and has administered MDMA to 200 patients during the past five years, agrees. "It puts a person in an unbelievably open frame of mind," he says. "I've never seen anything like this in my 15 years of practice-the expanded capacity for self-awareness, the enhanced sensitivity, the increased ability to share feelings. All that's attributable, I believe, to the lowered fear and anxiety induced by this drug. I am not implying that this is a miracle, but it certainly can speed up therapy." Dr. Ingrasci adds that he has used the pill "successfully" with couples to break down the barriers between them (one such session was filmed by ABC News); with cancer patients (CONTINUED ON PAGE 263) Harper's Bazaar

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**ECSTASY** 

sitivity to pain and aggression.

with those suffering from phobias, deep-seated childhood traumas and depression. THE PAINFUL PRICE

to help them come to terms with death; and

"This is all very intriguing and worthy of further study, but it's simply a bunch of impressions," counters Ronald Siegel, Ph.D., an associate research professor in the department of biobehavioral sciences at the UCLA School of Medicine, who has testified in behalf of the DEA's position. "What about the rest of it? What about the sweating and nystagmus jaw-tightening? The body is reacting with warning signals, trying to reject a foreign invader. Call it a psychological breakthrough, but recognize that you have slightly poisoned yourself." He is quick to point out that no one yet knows the toxicity level in humans. And there have been instances of abuse. The Haight-Ashbury Free Medical Clinic in San Francisco, for example, has reported abusers who have taken 10 to 15 doses at a clip.

Furthermore, the drug may cause longterm brain damage. Animal studies by Drs. Lewis Seiden and Charles Schuster of the University of Chicago-studies which the

DEA used to support their emergency ban-

show that MDA, a compound that differs only

slightly from MDMA, "produces a marked

depletion" of nerve cell chemicals involved in

Their research also reveals that chemically

similar methamphetamine can cause degeneration of cells that play a vital role in body movement. The damage is the same type that produces Parkinson's disease, the doctors say, although they note that it may take years for such problems to develop. "We are not yet exactly sure of Ecstasy's neurotoxic effects," admits Dr. Seiden, "but when very similar drugs demonstrate nerve cell death and potential disruption of key brain functions, it is likely that MDMA's consequences are equally serious. Until we have all the answers, we strongly discourage anyone from using it," he and his colleague warn. Advocates insist there is not enough scientific evidence to justify a national emergency.

"It's true that MDA and MDMA differ only slightly in chemical structure," says Dr. Ingrasci, "but a small variation can produce a radically different biological activity." But even the pro forces concede one caveat. "Someone who thinks she is buying MDMA might be getting just about anything masquerading as Ecstasy," cautions one experi-

ing. Using these drugs outside a doctor's of-

One chemical analysis confirmed that a

fice is like playing Russian roulette.'

enced researcher. "There is absolutely no such thing as quality control on the street. The range of misrepresentation is stagger-

mgs. instead of the paid-for 100 mgs. But the buyer of this dose may have been lucky. "We have reports from several cities that samples have been found to contain PCP," says UCLA's Dr. Siegel. Also known as Angel Dust, the compound can cause severe confusion and agitation. Dr. Grinspoon predicts stance.

capsule sold as MDMA contained only 57

that this sort of practice on the part of "illicit labs" will increase if MDMA is permanently classified as a Schedule I controlled sub-Certain chemists may also fill the void with new "designer drugs,"-legal variations or analogs. Designer drugs are substances in which the psychoactive quality and intensity have been maintained, but the molecular

structure has been altered slightly to skirt the law. The government may soon take action against this subterfuge, however. Right now, Congress is considering a bill that would make it illegal to manufacture, distribute or possess such spin-offs. Meanwhile, the Ecstasy controversy continues. "What I share with those who are en-

thusiastic about it is a desire to have chemical agents that may be useful in psychotherapy,' says Dr. Siegel, who remains skeptical. "I believe that eventually these will be availablesafely." But only research will tell if MDMA is the answer or just another false start in the pursuit of happiness.