

'Ecstasy'

Is it 'LSD without fireworks' or a dangerous addiction? Federal ban spurs a debate

"The experience was about two things: about my heart and my mind. It was about my heart opening up to this ecstatic connection, a union with life, a feeling of love. And then in my mind it was as if I had dropped to that place that was beneath all thoughts."

— David, 32, commenting on his experience with the drug MDMA.

by Dean Katz, Times staff reporter

Photo Illustration by Richard S. Heyza / Seattle Times

Although it's been around since 1914, most medical experts know little more about the drug than its name: 3,4-methylenedioxymethamphetamine.

But that's of little concern to the rapidly growing number of people in Seattle and elsewhere around the country who have quietly been experimenting with what they fondly refer to as MDMA, Ecstasy, Adam, Decadence or Love Potion No. 9.

Cancer patients report the psychedelic drug with amphetamine properties is of benefit in helping them let go of the fear of dying. Some psychotherapists say it enables patients to put behind them chronic fears and inhibitions. Artists, corporate executives, doctors and others who have tried the drug say it opens them up emotionally to a life-transforming experience with lasting positive benefits.

It's the consummate yuppie drug, said Dr. Norman Zinberg, professor of psychiatry at Harvard Medical School who has interviewed scores of people who tried MDMA. "It's a very tame psychedelic" that doesn't appear to cause serious negative reactions or be addictive, he said.

"It's what LSD was supposed to be, but wasn't. It's LSD without the fireworks," said Susan, 31, a Seattle artist who took the drug 20 times.

Whatever it is, the federal Drug Enforcement Administration doesn't like it. Although most Americans probably still haven't heard of the drug, the DEA has become alarmed by a phenomenal rise in its use in recent years. It cites as evidence the fact that the drug has turned up in at least 13 states. One UCLA drug expert estimates that distribution has increased from 10,000 doses in all of 1976 to 30,000 hits a month in 1985. Federal offi-

cialists say there may be that many doses in Dallas alone. The government says MDMA, which sells for \$8 to \$10 a dose nationally, is a highly dangerous substance related to another popular and now illegal drug, MDA. Properties of the two drugs are similar and the government contends that MDMA could, like its cousin, cause brain damage. The Drug Enforcement Administration says there have been eight emergency-room admissions and two deaths associated with MDMA since 1979.

One of the deaths occurred in Seattle. According to Bill Haglund, chief investigator for the King County Medical Examiner, a 23-year-old man, LeRoy Douglas Miller, died from what the state toxicology lab analyzed as an overdose of MDMA on July 20, 1979.

If MDMA is causing widespread problems here today, however, local officials don't know it. At the Seattle Drug Enforcement Administration office, there was only one report of the drug being in-state. The Seattle Police Department's narcotics division had barely heard of MDMA. Several local drug-abuse

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Drug agency acts to ban hallucinogenic drug, but it has supporters

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program. Doctors said they hadn't seen any of it around. Harborview Medical Center, which treats most of the drug-overdose cases in the city, hasn't had any reports of problems with MDMA.

Today, MDMA is legal. But two weeks ago, just as national media attention (USA Today, Newsweek, New York magazine, among others) about MDMA was approaching a crescendo, the Drug Enforcement Administration issued an emergency order making the drug illegal after June 30. Anyone caught with the substance after that will face a \$125,000 fine and 15 years in jail.

MDMA will be in the same classification — Schedule I — as SD and heroin, which are considered to have no medicinal value and a high potential for abuse. Today in Los Angeles, the DEA is taking public testimony on its plan to ban the drug permanently.

"All of the evidence DEA has received shows that MDMA abuse has become a nationwide problem and that it poses a serious health threat," John C. Lawn, acting administrator of the agency, said in announcing its action.

But those in Seattle who have experimented with the drug, and some nationally prominent experts in the field of drug use and psychiatry, say the DEA acted precipitately and without good reason.

"Schedule I is the dark hole of initial research," said Dr. David Nith, medical director of the eight-Ashbury Free Medical Clinic in San Francisco. Although Nith figures his clinic sees more cases of MDMA drug abuse than any other in the country — about one a month — he's nevertheless opposed to the Drug Enforcement Administration's plan.

Smith said as long as therapists believe MDMA may be of value in treating patients, the drug should be available by prescription. It won't be under the DEA's plan.

MDMA does not present a major abuse problem compared to other drugs, said Smith, who questioned how much effect the agency's action would have on preventing street abuse.

Zinberg, of Harvard, agreed: "If anything, it will increase interest in the drug."

Although Zinberg doubts the therapeutic value of MDMA, he says a government ban will do to MDMA what it did to LSD 15 years ago, when experts were just beginning to find that the drug might have value in work with terminally ill individuals.

"The drug got so notorious, research was virtually abandoned," said Zinberg.

Several prominent psychiatrists and educators have hired a high-powered Wall Street law firm to challenge the Drug Enforcement Administration's action. Richard Cotton, their Washington, D.C. lawyer, said his clients "support DEA's efforts to make street use and recreational use of MDMA illegal, but they have been urging the DEA to schedule MDMA in a way that will facilitate medical research into its therapeutic potential, not obstruct it."

The doctors' lobbying effort has thrown the Drug Enforcement Administration for something of a loop.

Howard McClain, chief of its drug-control section, said "we were surprised to find that there were people claiming it has therapeutic utility." But McClain said that doesn't change the agency's position.

Dr. Ronald K. Siegel, a UCLA psychopharmacologist who supports the federal action, says if MDMA really does have therapeutic value, "it is too darn important to leave it to cavalier investigation. It has to be studied seriously and in a controlled way. It is purely an entertainment drug right now."

Siegel believes the drug has no therapeutic value and that it can cause users, at a minimum, discomfort such as nausea, jaw pain, blurred vision, bulging eyes, dehydration and an increase in blood pressure.

Tests done years ago and initial reports from street users suggest that the drug is "extremely toxic," Siegel said, although those who oppose the federal agency's action said the early testing was not adequate foundation for the ban.

Ron Jackson, executive director of Evergreen Treatment Services, a Seattle drug-treatment center, believes high-dosage chronic

abusers of MDMA are, like heavy users of amphetamines or cocaine, "likely to develop a paranoid schizophrenic state."

Some individuals who have experimented with the drug confirm that they do experience nausea, sweaty palms and a tightening of the jaw. But they say those reactions are minimal compared to the drug's benefits: pleasant physical sensations and a sense of ease within themselves, with friends and relatives and the world in general.

In interviews with several people in Seattle who took the drug — all of whom would talk only on condition that they not be identified — none expressed any concern about freaking out, or losing control, on the drug. None recounted the kind of frightening visual hallucinations or thoughts people have had with LSD. Most said they felt the drug had been a gentle but powerful catalyst for meaningful change.

"It's a learning drug. It's good for people inclined to be sensitive about how they are living their lives and who desire to improve the quality of their lives," said Jim, 31, a designer and builder who has tried the drug three times. "It allows me to be much more compassionate with other people and myself. It really enhances a kind of communication and leaves the ground open for love to grow. It isn't something that wears off when the drug is finished."

"It's the ultimate lie detector, of sorts," said a 50-year-old corporate executive, with a doctorate, who works in the scientific community. "It forces you to confront yourself with your own hypocrisies, in a non-bullying fashion."

A physician who took the drug for the first time about two weeks ago said he felt nothing for the first 1 1/2 hours, but that gradually he was overtaken by a "sense of real serenity. I just felt very at peace with the world and the people around me."

David first tried MDMA last August.

On his first trip, "I saw all of my patterns, all of my neuroses, all of my fear responses, all of the ways that I am in life that are my suffering. In the midst of the experience — I don't know how to describe this other than this way — I felt something being rewired in my brain . . . something I have since decided to refer to as effortless change. It was as if I was being wired up for a new way of being in the world."

David took the drug a second time a few weeks later and had an even more intense experience.

"It (MDMA) is very, very, very seductive. It's like most things in life. It has two sides to it; a side where you can learn from it, but the other side will take you right down with it," he said. "Part of that experience was making a commitment to not take this substance anymore. When you get the message, you hang up the phone."

The Drug Enforcement Administration, however, would like to disconnect the transmission system altogether for the controversial drug.

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