



CPDD - 2005 Orlando, Florida

Monday, June 20, 2005

POSTER SESSION I (Breakfast)

Odd-numbered posters manned first hour;
Even-numbered, second hour

Exhibition Hall
8:00 - 10:00 AM

Set-up time begins Sunday 1:00 PM
Must be removed by Monday 12:30 PM

Board #: 118 Author will attend: 8:00 A.M. - 10:00 A.M.

D.C. Mash, L. Duque, J.D. Kamlet, F.D. Ervin and K. Allen-Ferdinand

Keywords

*Offshore Investigations of the Non-Addictive Plant Alkaloid Ibogaine:
1996 to 2004*

ibogaine
treatment
withdrawal
opiate

University of Miami School of Medicine, Miami, FL, McGill University, Montreal, Canada
and Healing Visions, St. Kitts, WI

The apparent ability of ibogaine to interrupt dependence on heroin and cocaine was first described in the early 1960s. Anecdotal accounts of the acute and long-term effects of ibogaine have included only a small series of case reports of opiate and cocaine addicts (Sheppard, 1994; Sisko, 1993; Alper et al., 1999) with observations provided for only 7, 4 and 14 subjects, respectively. Thus, objective investigations of ibogaine's effects on craving for drugs and alcohol and on the signs and symptoms of opiate withdrawal are not available. We have evaluated the safety and pharmacokinetics of ibogaine in the setting of an inpatient detoxification in over 400 patient volunteers assessed from 1996 to the present. We have attempted to collect data from this study using Food and Drug Administration guidelines for good clinical practices. Our clinical experience to date indicates that ibogaine has little toxicity in doses ranging from 1 to 14 mg/kg. Oral administration of ibogaine to opiate-dependent individuals was associated with significant blockade of the characteristic opiate-withdrawal signs and symptoms. We have also examined whether ibogaine affects drug craving using multidimensional craving questionnaires for heroin and cocaine. To the extent that physical, psychological, and emotional well-being might impact their self-reports of craving during their course of stay, participants also completed standardized questionnaires about their health both before and after ibogaine treatment and at program discharge. To assess whether the benefits of ibogaine on drug craving would persist outside of a controlled environment, one month follow-up data were also collected. The results of ibogaine research conducted offshore indicates that ibogaine diminishes drug cravings and improves mood. Ibogaine may be an adjunct to brief intervention to help patients to reduce risky or hazardous drug and alcohol use. Ibogaine also motivates some drug-dependent patients to enter treatment with the goal of long-term abstinence. (Supported in part by the Addiction Research Fund).



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L. Duque, C. Foord, B. Page and D.C. Mash

Keywords

Structured Elicitation Narrative Reveals a Variety of Ibogaine Experiences

Ibogaine
treatment
substance abuse

University of Miami School of Medicine, Miami, FL

Ibogaine is an indole alkaloid contained in the root bark of tabenanthe iboga. Ibogaine has been used in equatorial Africa in a ritual context associated with the Fang Bwiti religion. In the present study, the psychological and subjective effects of ibogaine were evaluated in patients that met DSM-IV criteria for dependence on cocaine (N=30; 10 females, 20 males) or opiates (N=30; 11 females, 19 males). Subjects narrated their subjective experience. The interviewer trained in open-ended elicitation techniques, elicited descriptions of the acute drug effects. After the initial stimulus question, the interviewer used a guide questionnaire to assure that key areas of content received coverage in each interview. The areas of content focused on sensations and perceptions, and interpretations of the experience. A content coding scheme was developed to catch key elements from the narrative. Cross coding was repeated until the coders achieved greater than 90% agreement. The Hallucinogenic Rating Scale (HRS, Strassman et al., 1994) was used to assess acute subjective responses. There appears to be common elements to the subjective experiences of drug-dependent patients treated with ibogaine. Ibogaine was administered as a single p.o. dose (10 mg/kg) with an acute onset of between 30 to 90 minutes. The duration of the active 'waking dream stage' was from 4 to 8 hours depending on the subjects CYP2D6 genotype. All of the sixty subjects reported the experience of visual phenomena from ibogaine. Approximately 40% (N=24) of the subjects reported that they relived their negative experiences that resulted from past drug abuse. Visions of previous early life events were reported by 30% (N=18) of all participants, with 43% (N=26) reporting visions of self as a child. One-fourth of the subjects had a vision of their own death and 10% reported death content with respect to others. Emotional and cognitive effects were marked in these subjects. The unique subjective effects of ibogaine may be developed as an adjunct to brief intervention to more effectively promote abstinence in drug-dependent populations.