
the ASAP News

-- Tools you can use from the Adolescent Substance Abuse Program --

Issue number 13 -- January 2006

Special focus of this Issue: **Methamphetamine**

Current trends -- What drugs are out there?

This issue focuses on **methamphetamine**. Abuse of methamphetamine, or "meth," is currently a legitimate crisis in Arizona. Over the past few years well-publicized home meth lab busts have diminished, leading some to falsely conclude that meth use in Arizona was decreasing. Far from it. There is really no need for a home bathtub meth lab in Arizona any longer, since now the vast bulk of meth comes easily across the border from Mexico in pill form. Some reports contend that Mexican meth now outnumbers locally made meth by 100 to 1. The trend in many Arizona communities is to lock up, by new state law, the cold medicines that contain pseudoephedrine (such as Sudafed) that, bought in bulk, can be used to make a batch of meth. These new laws may make politicians look good or allow us to feel better about the situation--but the truth is the availability of meth in pill form will not be diminished due to the massive recent influx from Mexico.

Meth has numerous names, including "speed." The smokable form of meth is often referred to as "ice," "crystal," "crank," or "glass." Methamphetamine can be swallowed, snorted, injected, or smoked. When smoked a large, usually clear crystal of high purity is usually smoked in a glass pipe. While national NIDA-funded studies report that 2.5% of 8th graders, 5.2 % of 10th graders, and 6.2% of 12th graders have used meth nationally, anecdotal evidence suggest that these percentages are significantly higher among Arizona teens.

The results of Arizona's widespread meth use have been devastating. The Arizona Republic reports that 1 in 5 childhood fatalities in Arizona is now directly tied to a maltreatment of the child by a meth-addicted parent. Adult meth addicts often become so obsessed with the drug that they neglect their children. The New Times Special Report on Meth reports that substance abusers are entering treatment programs in Arizona at 5 to 6 times the national rate. Meth is often being called the biggest drug scourge ever to hit the state of Arizona. Most reports are now finding that meth use has even surpassed marijuana and alcohol use, making meth the most widely abused drug in Arizona. More treatment options are critically needed, but in short supply.

Teens are turning to meth for a wide variety of reasons, not just to get "high." These reasons include, especially for young women, weight loss. Weight loss does occur, but of course addiction can occur even faster. Sexual acting out is also a common effect of meth use.

Promiscuity is rampant among meth users. Planned Parenthood reports that the number of abortions had by meth users has quadrupled in recent years.

In Arizona meth is plentiful, easy to make, easy to find, cheap, powerfully addictive, and incredibly destructive.

In short, methamphetamine is scary.

News and notes

NIDA, the National Institute on Drug Abuse, provides the following basic information on methamphetamine:

Methamphetamine is an addictive stimulant that is closely related to amphetamine, but has longer lasting and more toxic effects on the central nervous system. It has a high potential for abuse and addiction. Street names for methamphetamine include speed, meth, chalk, ice, crystal, and glass. Methamphetamine increases wakefulness and physical activity and decreases appetite. Chronic, long-term use can lead to psychotic behavior, hallucinations, and stroke. 12.3 million Americans have tried amphetamine.

In other news, the 2004 Monitoring the Future (MTF) Study investigating the extent of adolescent drug use found that 6.2% of high school seniors reported use of methamphetamine, a number statistically unchanged from the 2003 MTF Study. However, all anecdotal reports place that number as significantly higher for Arizona's senior class.

Methamphetamine use produces a type of euphoria. What exactly is the mechanism in the brain that causes the methamphetamine euphoria? Meth affects many brain structures, but it especially affects the structures that release a chemical, a neurotransmitter, called dopamine. Dopamine is sometimes called the "pleasure" neurotransmitter because it helps you feel good. Methamphetamine causes a large release of dopamine in the brain, producing an extra sense of pleasure that can last for many hours.

But eventually the effect wears off, and then of course the user must use again to chase the euphoric feeling or risk experiencing the "crash" that inevitably results. This is where the process of addiction begins.

Websites that can help

At <http://www.nida.nih.gov> you will find NIDA -- the National Institute on Drug Abuse. The NIDA website has many helpful features, including the Monitoring the Future Survey results, Research Summaries that detail the latest research on drugs and drug treatment, and NIDA Notes, which are newsletters summarizing current findings, trends, research results, and treatment effectiveness.

Specialized information regarding meth in particular can also be found at this website. Look under "NIDA's Featured Publications" and click on the [NIDA Research Report: Methamphetamine Abuse and Addiction](#) to see what we rate as the single most useful resource currently available on methamphetamine.

Tips for parents

Of course, parents first need to know when their child might be using meth. Some of the most obvious signs are extremely dilated pupils, dry nose or lips that may be so dry as to bleed, persistent nasal and sinus problems, bad breath, hyperactivity, irritability, loss of interest in sleeping or eating, and drastic weight loss. Also seen is aggressive behavior, general nervousness not related to any known stress, and tangential, disconnected speech. As use progresses insomnia, tremors, convulsions, and psychotic symptoms can develop. Tragically, psychotic symptoms can sometimes persist long after the use has ended. Obviously, parents need to talk openly and immediately to their kids about the effects of meth when use is first suspected.

Parents suspecting meth use need to focus first and foremost on finding appropriate professional help. Many resources are available to parents, probably more than they realize. Of course, the ASAP Intake Coordinator nearest you is one important resource, and the phone numbers have already been provided to you (see below) for ASAP staff. But there are many additional resources available to you in your community when you think about it, including:

1. Family doctors 2. Pediatricians 3. Nurses 4. School counselors or social workers 5. Employee Assistance Professionals (EAPs) from a parent's workplace 6. Clergy, faith leaders, or pastoral counselors 7. Community Health Centers 8. Professional counselors, social workers, and psychologists specializing in treatment of addictions 9. Psychiatrists 10. Addictionologists

Be sure to select a professional who specializes in addictions. Many mental health professionals and professional helpers are very well qualified to assist with mental health issues but have no formal training or experience specifically with addictions. Be direct-- ask the potential helping professional what his/her specific qualifications are for treating meth use. How many youth has he/she treated? What was the outcome? What treatment options are available? What resources in the community will he/she utilize or team up with in treating your child? What continuum of care is available? Your professional helper must have the experience to help you; this is of course a critical time for your youth and your family. A history of recovery from drug use is not enough and makes no one a true expert -- your professional helper must have a demonstrated record of successfully treating youth with problems highly similar to your own youth. Additionally, he/she must present assistance to the whole family (in the form of education, coping skills training, conflict resolution, etc) in order for treatment to have the greatest and most lasting effects.

Factoid

The more often teens eat dinner with their families, the less likely they are to smoke, drink, and use drugs. The factoid for this Issue comes to us courtesy of the National Center on Addiction located at New York's Columbia University. In fact, the effect of this togetherness was fairly broad and robust. It was found that teens that eat dinner with their families:

1. Are less likely to have friends who abuse drugs
2. Have less tension and stress at home
3. Get better grades
4. Are more likely to be emotionally content
5. Have more positive peer relationships

What is ASAP?

ASAP stands for Adolescent Substance Abuse Program. Since its origin in 1991 ASAP has proudly served as Arizona's finest outpatient treatment program for youth suffering from substance abuse-- and their families. ASAP was founded by three Arizona psychologists who specialize in adolescent substance abuse: Dr. Phil Lett, Dr. Mark Rohde, and Dr. Curtis Walling. These three psychologists continue to own and operate the ASAP Program as a state-of-the-art Intensive Outpatient Program (IOP) treating youth substance abuse at three sites across the Phoenix metro area, with one additional site in Tucson and one site in Yuma. The ASAP Treatment Model has always been a "best practices" treatment model, and enjoys many years of proven success. The ASAP Program is contracted with all managed care companies and insurance companies, and any youth with health insurance should have no problem gaining admission to the ASAP Program site nearest them should the clinical need exist.

For more information on the ASAP Program visit our website anytime at <http://asapaz.com/> or call (602) 434-0249.

How can I get a youth into the ASAP Program?

The easiest way to get a youth admitted into the ASAP Program, or to simply get more information about the ASAP Program, is to call the ASAP Intake Coordinator in your community:

For any of the three Phoenix area locations call Dr. Joanna Woods at (602) 434-0239

In Tucson call Lori Marchese, MSW at (520) 241-0042

In Yuma call Sue Yoder, LPC at (928) 502-2915

There is no waiting list for admission into the ASAP Program at any site. Again, all insurance plans are accepted.

The exact addresses for the ASAP Program are:

1. ASAP East Valley-- 2530 South Alma School Road Mesa, AZ 85202
2. ASAP Scottsdale-- 3839 East Shea Boulevard Phoenix, AZ 85028
3. ASAP West Valley-- 8607 N. 59th Avenue #C-6 Glendale, AZ 85302
4. ASAP Tucson-- 5360 East Pima Street Tucson, AZ 85712
5. ASAP Yuma-- 202 S. 1st Avenue, Suite #102 Yuma, AZ 85364

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