

the **ASAP News**

Newsletter of the Adolescent Substance Abuse Program volume 6

For admission to ASAP:



In Phoenix call Joanna Woods at (602) 434-0249



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

To find ASAP online:



Click on www.asapaz.com

What is ASAP?

ASAP, the Adolescent Substance Abuse Program, has been Arizona's finest outpatient substance abuse treatment for teens since 1991. Designed by three Phoenix-area psychologists, Dr.'s Phil Lett, Mark Rohde, and Curtis Walling, the ASAP Program pursues the "real-world" changes in home, family, peer, and school environments that yield lasting sobriety and an improved quality of life for the entire family.

The ASAP Program distinguishes itself with some of the following unique features:

- ✓ Only interventions proven by research and clinical experience are utilized. Only this "best practices" focus yields consistent therapeutic success. ASAP has constructed the 400-page ASAP Curriculum of diverse, empirically proven therapeutic interventions that we use to treat teens and families experiencing an incredibly broad array of challenges to sobriety and personal problems.
- ✓ Random and for-cause urinalysis is utilized throughout the Program to assess abstinence and honesty and to combat denial.
- ✓ Family participation is mandated in the ASAP Program. Teens attend three evenings per week for 10 weeks, and parents are required to attend one of those evenings each week (Mondays) in MultiFamily Therapy. No meaningful and lasting changes are possible in the "real world" without the family receiving the help necessary to re-establish healthy bonds, communication, and limits.
- ✓ Group therapy is the treatment of choice for young substance abusers. The power of positive peer pressure in group therapy is unmatched as a change agent with teens. Individual therapy is rarely successful, given youth's ability to hide and minimize drug use. Years of research and clinical experience indicate that to have any reasonable chance for success the amount and duration of group therapy must be very significant, and must match the severity of the teen's drug/alcohol use problem.

Where is ASAP located?

ASAP has four outpatient treatment sites to cover the entire Phoenix metropolitan area, and one site in Tucson:

- ① **ASAP Main** (mailing address for all sites)
4222 E. Camelback #230H, Phoenix, AZ 85018
- ② **ASAP East Valley**
2530 S. Alma School Road, Mesa, AZ 85202
- ③ **ASAP North Valley/Scottsdale**
3839 E. Shea Boulevard, Phoenix, AZ 85028
- ④ **ASAP West Valley**
8607 N. 59th Ave #C-6, Glendale, AZ 85302
- ⑤ **ASAP Tucson**
350 N. Wilmot Road, Tucson AZ 85711



The Research shows



Does Early Marijuana Use Lead to Abuse of Hard Drugs?

Is Marijuana a "gateway" drug that leads to use of additional and harder drugs? This has long been debated. For this first time a well-controlled study published in the prestigious Journal of the American Medical Association offers a solid answer.

An Australian study studied the association between marijuana and use of stronger drugs by eliminating other variables. Thousands of pairs of twins were interviewed, and 311 pairs of twins were found who differed in their early experience with marijuana. Twins with early use of marijuana (prior to age 17) were found to have a 1.6 to six fold greater risk of progressing to future alcohol or drug abuse, compared to their twin who never smoked marijuana or began after the age of 17. This increased risk held for all drugs, including cocaine, hallucinogens, sedatives, and opiates. This study, appearing in one of the world's most highly regarded medical journals powerfully implicates early marijuana use as a facilitator of later serious drug use.

Current Topics

What are “Club Drugs”?

The past 10 years has seen a huge rise in the use and acceptance of “Club Drugs.” Parents often ask ASAP staff: “What are “Club Drugs” and are they dangerous?” “Club Drugs” is a broad term referring to a number of drugs popularized especially at nightclubs, dance parties or “raves”—and therefore sometimes called “club drugs.” The most common of these are Ecstasy, GHB, Rohypnol, and methamphetamine. The most commonly seen effects of these drugs are:

MDMA—Methylenedioxyamphetamine, commonly known as “Ecstasy”--

Ecstasy is both a stimulant and a hallucinogen. Users take it for energy to keep on dancing and for mood enhancement. But ecstasy increases the heart rate and body temperature and has occasionally contributed to heart and kidney failure. Ecstasy also masks the sense of thirst, and ecstasy users have died from acute dehydration. Ecstasy also has long-term effects of memory loss and damages brain cells that produce serotonin, with long-term consequences still not fully understood and still being investigated.

GHB and Rohypnol--

These two drugs have become notorious for their use in crimes, especially rape and date rape. Because they are both colorless, odorless, and tasteless, they can be slipped into a victim’s drink easily. These drugs cause sedation, which can be so severe that the victim can become helpless if not unconscious. Another effect is amnesia, making it almost impossible for a rape victim to participate in pursuing a perpetrator. Overdoses are common, given the widespread differences in concentration in street doses, with coma and sometimes death from respiratory arrest possible when users do not know how pure the drug is that they are ingesting.

Methamphetamine—

Also known commonly as “speed” or “meth”, this highly addictive drug and its many combinations or variations is a powerful variation of a stimulant typically found in some diet medications. The effects of long-term methamphetamine use are well documented, and include anxiety, confusion, paranoia, hallucinations, and cardiovascular problems. Some heavy users are experiencing a combination of slowed thinking, depressed mood, and motor impairment.

According to National Institute of Drug Abuse Director Dr. Alan Leshner, “Young adults believe club drugs can harmlessly enhance their experience at dance parties and raves, but there is no safe way to use any of these drugs. Research shows that some of the so-called club drugs have long-lasting effects on the brain. Combined with alcohol, these drugs are even more dangerous, sometimes deadly. There is no such thing as a safe club drug.” Why, then are club drugs so popular? Dr. Leshner explains that the new arrival, the novelty, of club drugs is one big reason for their recent surge in use. When drugs are new, many vulnerable individuals mistakenly imagine that taking them is safe. Little data is available with new drugs to combat these misperceptions. In contrast, false beliefs about older drugs are more difficult to support or maintain. Cocaine, for example, was widely used in dance clubs and elsewhere in the 1980s when it was more of a novelty, but cocaine use has since diminished as the health risks have become more clearly known.

ASAP

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Address correction requested