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Michael Jackson’s Death Highlights the Alarming State of Celebrity Medicine

By Jeffrey C. Friedman, LISAC

The last reviews for Michael Jackson are finally in; toxicology screens taken in the wake of the singer’s recent and highly publicized death confirm what many have been expecting—that his abuse of the powerful anesthetic Propofol killed the King of Pop. Even as we are learning the correct pronunciation of propofol, I fear that we are seeing a sadly reoccurring pattern here: a celebrity dies, suddenly and unexpectedly—of something presumed to be a “heart attack”—and a few weeks later, an autopsy finds that the overuse of prescription drugs either contributed to the death or killed the star outright. Then, right on cue, another practitioner of “celebrity medicine” is hauled before the medical board and charged with the indiscriminate over-prescribing of controlled dangerous substances. In Jackson’s case, no fewer than nine doctors—from Florida to California—have now become the focus of investigations into their questionable prescribing practices.

The story is a frighteningly familiar one. Even before Elvis’s personal physician, Dr. George Nichopoulos, wore the tires off his Cadillac making pharmacy runs to fulfill unending requests from the singer’s wish-list, we find stories of doctors whose main function seems to have been catering to their celebrity patients’ drug hunger. John F. Kennedy often traveled with the original “Dr. Feelgood,” Max Jacobson, who stood by to give the president regular shots of his preferred pick-me-up, an amphetamine/vitamin mix. Years later, when Wynona Rider was busted for shoplifting, police found that the actress had 37 open prescriptions written by 20 different doctors. The ensuing investigation also ensnared the hapless Courtney Love. In the last year, two of Anna Nicole Smith’s doctors were charged with supplying her with potentially lethal cocktails of prescription narcotics, hypnotics and anxiolytics. Now, we mourn the untimely drug-related death of Michael Jackson. O.K., cue the coroner, get medical board into makeup, and, roll cameras for the doctors’ perp-walk. The story has become as tiresome as it is predictable.

The occasional prosecution of celebrity doctors has done little to stem what appears to be an unending supply of doctors eager to engage in the practice of celebrity medicine. These are physicians who, in thrall to the light, heat and glitz of the celebrity lifestyle, appear indifferent to professional ethics. They are willing to ignore federal controlled substance laws, and even their famous patients’ health and emotional well-being, to gain entre into the star’s glamorous inner circle. The line between personal physician and celebrity hanger-on has become frighteningly ill-defined. Highly trained physicians, willfully blind to clear evidence of addiction, become medical enablers, yielding to the manipulations of their star patients—even to the extreme of prescribing controlled substances under assumed names to avoid the scrutiny of state prescription drug monitoring programs. It seems as though today’s celebrities are less at risk from shady street corner drug dealers than they are from their own physicians.

Maybe it’s the doctors’ own sense of grandiosity or the misguided belief that “I alone am qualified to handle this patient’s care.” Or, perhaps Dr. Nichopoulos stumbled onto the truth when he told...
adept at feigning painful maladies while being ever vigilant for the smallest sign of psychological weakness in their intended target. A star-struck doctor in the sights of a drug-seeking idol of pop is like the proverbial sitting duck.

At Cottonwood Tucson, where I work as a chemical dependency counselor, we get our share of high-profile patients. In the seven years that I have been here, I have worked with musicians able to fill huge stadiums with screaming fans, and studio executives who have the power to greenlight hundred million dollar blockbuster movies with a nod. When all the pleasantries are concluded and the character armor is finally removed, it becomes clear that these household names suffer just like the average individual—same pain, same worries, same insecurities. When these icons lose loved ones, they grieve just like us, and when celebrities suffer from addiction, getting clean and sober involves, for them, the same pain and frustration as it does for everyone else.

Dr. Bernice Roberts, a Cottonwood addictionologist, knows this well.

I sat down with Dr. Roberts the other day. She had just come from a meeting of the Arizona Society of Addiction Medicine, where she sits on the board of directors. Her take on Michael Jackson’s death was sobering but hopeful. “I can imaging how Michael Jackson must have suffered,” she said. “Dependency to opiates and sedatives is a progressive disease . . . eventually addicts have to use lethal amounts of drugs just to feel normal.”

Dr. Roberts also lamented the fact that addiction medicine specialists were not consulted by Jackson’s physicians despite clear evidence that his abuse of prescription drugs was out of control. She noted that the Arizona Society of Addiction Medicine offers doctors in all medical specialties consultation and support in helping their addicted patients confront their addictions, safely manage the detoxification process and find the treatment necessary to regain physical health and emotional balance. “No one needs to suffer or die from addiction,” Dr. Roberts said, “regardless of whether it is the King of Pop or the King’s most humble fan.”

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