



COTTONWOOD
tucson

February 2010

Alumni News...

the journey continues

Recovery and Hope

With recovery comes a new hope - for the future, for life, and for dreams yet unfulfilled. A French proverb says, "Hope is the dream of a soul awake." If hope is the dream of a soul awake then recovery is the awakening of that soul. Before recovery I felt dead inside. Spiritually I was bankrupt. The hope I received when I walked into the rooms of AA has sustained me for many years. Of course, hope alone will not keep me clean and sober. I had to do my part. However, hope was one of the major ingredients missing from my life. Now as I trudge the road of Happy Destiny, hope is my constant companion. With continued recovery I never have to face the four hideous horsemen of terror, bewilderment, frustration and despair again. Today they are replaced with security, clarity, satisfaction, and joy. I'm secure in the knowledge that if I remain sober and practice the spiritual principles in all my areas of me life, I will always have hope. I have the clarity to make healthy decisions and take responsibility for my actions and decisions. I'm satisfied with what I have in life, no longer searching for something outside of myself to fix me. And last but not least, I have joy. The joy that comes with being a hopeful and grateful recovered alcoholic and food addict.

If you are feeling hopeless today, pick up the phone and let us help you. Attend your alumni meetings for support and fellowship. If you are in need of more help than that, please contact us at 520-743-0411 or e-mail us at cottonwoodtucson.com. Hope and freedom await you.

Cottonwood is a unique and life changing experience. Let us help you find recovery and hope once again.

If you have any questions, please contact me at shicks@cottonwoodtucson.com or call 520-743-0411 extension 2517.

Be well, Sally

Designer Drugs by Jeffrey Friedman, LISAC

The following is a handout that Jeff uses in his presentation on drug use and the effects it has on the brain. It isn't really an article but I found it fascinating and thought you might be interested in it as well. Because of it's length, it will be split into two parts.

Designer Drugs

Designer drugs are analogs, chemical compounds that are similar in structure and effect to existing drugs, but which differ slightly in molecular structure. They are essentially new drugs based on older, existing drugs. Designer drugs are, today, produced mainly in clandestine laboratories to mimic the psychoactive effects of popular drugs of abuse. Theoretically, the number of potential synthetic analogs of the well-known substances of abuse that can be made and distributed is very large.

The most common designer drugs available in the illicit drug market include analogs of methamphetamine (which can have either hallucinogenic or stimulant properties), and analogs of meperidine and fentanyl, (both synthetic opiate-like drugs). GHB and ketamine are also considered to be designer drugs even though they are not technically analogs. Both GHB and ketamine have sedating and dissociative/psychedelic effects. The street names of designer drugs are many, and vary according to time, place, and manufacturer. They tend to change quite frequently.

Designer Drugs

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MDMA

MDMA (3,4-methylenedioxyamphetamine), generally known as Ecstasy, XTC or X, was first synthesized by the Merck Company in 1912 and is the N-methyl analog of the stimulant methamphetamine. It shares similarities to mescaline, a hallucinogen, and amphetamines, which are stimulants. Because of its ability to increase empathy and lower defense mechanisms, MDMA was used briefly in the 1960s as an aid to enhance communication and reduce anxiety and defenses in psychotherapy before being introduced on the street in the early 1970s.

MDMA works primarily by increasing the activity of the neurotransmitter serotonin. Serotonin is thought to be responsible for many psychological (and physiological) states including mood and sleep. Disregulation of serotonin has been associated with major depression and obsessive-compulsive disorder. MDMA blocks the reuptake of serotonin, similarly to a class of drugs called selective serotonin reuptake inhibitors (SSRIs). Two well-known SSRIs are Prozac and Paxil. Unlike the SSRIs, however, MDMA appears to actually enter the neuron (brain cell), either through passive diffusion or directly through the reuptake transporter, causing a flood of serotonin throughout the brain. MDMA is likely to also activate dopamine, the neurotransmitter responsible for reward or pleasure.

MDMA exerts amphetamine-like side effects on the body, including dilated pupils, dry mouth and throat, tension in the lower jaw, grinding of the teeth, and overall stimulation of the central nervous system. The drug also appears to exert an adverse action on the immunological response in some who take it. Some people are considerably more sensitive to MDMA than others. Long-term users often describe increasingly uncomfortable and prolonged "burn out" periods after use, sometimes lasting two or more days. On the other hand, about one person in 12 appears to lack the enzyme (cytochrome P450-246) needed to metabolize MDMA. These people are susceptible to a sudden and fatal reaction to the drug.

Many individuals have also reported an increased susceptibility to various ailments, particularly sore throats, colds, flus, herpes outbreaks. The use of MDMA may also have a deleterious effect on users who suffer from diabetes, impaired liver function, epilepsy, glaucoma, heart disease, high blood pressure, or who are pregnant.

Other side effect of MDMA include a sometimes dramatic increase in body temperature accompanied by a severe dehydration. This is probably because a primitive part of the brain called the *brain stem*, when flooded with serotonin, can cease functioning as the body's "thermostat," allowing body temperature to rise uncontrollably. Those under the influence of the drug may have a tendency to say things that they feel uncomfortable about later. The use of MDMA may also lead to inappropriate and/or unintentional emotional bonding. After using, some people experience mild depression and fatigue for up to a week.

GHB

Y-Hydroxybutyrate (GHB), known on the street as "G", Liquid E, Fantasy and a host of other names, is a central nervous system depressant, and has been used as an anxiolytic, anesthetic and sedative/hypnotic. Most of the GHB available on the street is made in clandestine labs—usually from commercially available degreasing agents, floor stripper and the caustic alkali sodium hydroxide (generally known as lye).

GHB causes intoxication, increased energy, talkativeness, a desire to socialize and playful and affectionate feelings. But it can also cause nausea, headaches, drowsiness, dizziness, amnesia, loss of muscle control and respiratory problems. Larger doses can result in paralysis and death.

GHB is thought to be a naturally occurring neurotransmitter and has been shown to exert influence on many neurotransmitter systems, most notably the dopamine, glutamate (an excitatory neurotransmitter) and acetylene pathways. The drug can act by either inhibiting the action of dopamine or causing its release. In fact, data seem to show that GHB initially inhibits dopamine release and then, in a time-dependent manner, causes its release in quite large amounts. Receptors for GHB are widely distributed throughout the limbic brain (the part of the brain that makes feelings and moods) where the drug seems to activate the inhibitory GABA-B receptor.

Designer Drugs

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Ketamine

Ketamine, sometimes called Ket, K, or Special K, was discovered by Dr. Cal Stevens of Wayne State University in 1961 and was used extensively as a battlefield anesthetic in Vietnam. Today it is occasionally used for short-term surgical procedures in both animals and humans. For human consumption it is marketed as Ketalar® by Parke-Davis. Ketamine produces a dissociative state in the central nervous system in which amnesia and profound analgesia (loss of pain) are induced, though the patient does not appear to be asleep. It may produce a pleasant dream-like state accompanied by vivid imagery, but can also cause hallucinations and occasionally extreme and frightening delirium. Excitement and visual disturbances can recur days or weeks after exposure to ketamine; the problem with "flashbacks" may be greater with ketamine than with other hallucinogens. It also produces ataxia, slurring of speech, dizziness, confusion, blurred vision, anxiety and insomnia. Ketamine can also cause cessation of breathing, cardiac arrest, brain damage and death. Tolerance and psychological dependence can develop with frequent exposure. Chronic users may suffer short-term memory loss, impaired vision and attentional problems.

This is the end of the handout at this point...stay tuned for the March newsletter as it will have the rest of the handout which includes the opiate designer drugs and effects it has on the brain and in the communities.

Farmington/Durango Alumni Meetings

Dear Farmington and all our New Mexico alumni,

Hello, I hope you are all staying warm. Tucson has been having a wet and cold winter and I am loving it. I will be seeing you again in March, I'm sure it will still be cold but recovery happens no matter what the temperature is outside. I hope to see you there, all are invited. The 2010 meetings will be held at the **First Baptist Church at 511 W. Arrington, 87401 in Farmington, NM.** (west side of building)

March 29—May 24—July 26—September 27—November 29

7:00 pm- 8:30 pm

Phoenix Alumni Meetings

The Phoenix alumni are now meeting in a new place. We will be meeting every other Tuesday night at ABC Wellness Office, located at **7219 E. Shea Boulevard Scottsdale, AZ 85260** it is on the corner of Shea and Scottsdale Road. The meeting is from **7:00 pm until 8:30 pm**. The 2010 dates are listed below. Hope to see you there.

2010 Phoenix Alumni Meeting Dates

Feb 2 & 16 - Mar 2 & 16 - Apr 6 & 20 - May 4 & 18 - Jun 1 & 15

Jul 6 & 20 - Aug 3 & 17 - Sept 7 & 21 - Oct 5 & 19 - Nov 2 & 16 - Dec 7 & 21



InnerPath Retreats

Beginnings & Beyond

Jan 18-22 • Feb 15-19

Women's Retreat

Apr 12-16 • June 21-25

Developing Healthy Relationships

Feb 11-14 • Dec 2-5

Developing Healthy Families

5 days: Monday - Friday
Contact us to schedule

We offer several 4 and 5 day programs for individuals, couples, and families who want to focus on codependency, relationships, communication, grief, loss, trauma, and anger. InnerPath is like a mini-Cottonwood experience where you can come back for a boost to your personal recovery plan. All of our retreats are held at the Cottonwood Nash House, meals and lodging included, and are limited to 8 people. Rokelle Lerner who is a therapist, author, and codependency expert, is our facilitator. Please contact Jana Zeff at 520-743-2141 or e-mail her at jzeff@cottonwoodtucson.com for more information about InnerPath.

Sweetwater Adolescent Program

Cottonwood Tucson is pleased to announce the opening of our newly restructured **Sweetwater Adolescent Girls Treatment Program**. The new 90-day **Sweetwater Program** for girls ages 13 - 17 has been designed to help girls and their families to recover and make those changes necessary to improve the quality of their lives. The **Sweetwater Program** places a strong emphasis on scholastics, offering both structured classroom hours as well as a therapeutic curriculum designed to further the intellectual, emotional, and spiritual growth of each girl. Our Sweetwater program is a recipient of the **Woodbury Reports, Inc. "Excellence in Education Award"** having been selected on the basis of our excellent reputation for producing positive and consistent results with at-risk young girls and their families. Additionally, Cottonwood Tucson is a proud member of [National Association of Therapeutic Schools and Programs \(NATSAP\)](#). If you know of anyone who is struggling with addiction or depression please contact us Cottonwood Tucson and let us help you and your family experience recovery and health.



For more information, click here shicks@cottonwoodtucson.com or call 520-743-0411 extension 2517 or toll free 800-877-4520 www.cottonwoodtucson.com