



Controlled Dosage is the Science of Harm Reduction

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After 40 years, the United States' war on drugs has cost \$1 trillion and hundreds of thousands of lives, and for what? Drug use is rampant and violence even more brutal and widespread. \$33 billion in marketing "Just Say No"-style messages to America's youth and other prevention programs. High school students report the same rates of illegal drug use as they did in 1970, and the Centers for Disease Control and Prevention says drug overdoses have "risen steadily" since the early 1970s to more than 20,000 last year.

Such a drug policy looks only to enforce drug laws rather than instruct our youth in prevention. Indeed, deaths from adolescent drug overdoses now exceed deaths from traffic fatalities (Cermak, 2009).

Providing vital public health information about reducing the harm from a drug overdose does not "glamorize" the drug; it is an acknowledgment that there is danger when using any psychoactive drug.

We cannot rely on the police, going undercover, arresting people for sales and possession. Control over an internally perceived drug experience is in the hands of the user and external social control agents such as the police have not the knowledge nor the inclination to prevent overdoses. That's up to the individual. What does he or she need to know?

A person who intends to go to a Rave and take MDMA (Ecstasy) expects to have certain anticipated sensations. Yet who can they talk to about these sensations, parent prohibitionists with little knowledge and much to fear or peers who, while being supportive, may have little accurate information. This is why www.Erowid.org is a necessary survivor link for anyone contemplating taking any psychoactive drug including Ecstasy. What would Erowid have told the user about Ecstasy?

Erowid would tell what to expect from the drug experience... how not to overdose...and how to avoid problems. More than any other factor in drug taking is the dose. Every pharmacologists knows that a substance can be toxic (a poison) at one dose level

and at another dose be a medication. Even drinking water can be fatal if enough is drunk at anyone time (too much of an electrolyte imbalance). But there is a "sweet spot" to MDMA drug use as there is with all psychoactive drugs where the dose produces the anticipated sensations and there is no need to exceed that dose.

A standard oral dose of MDMA is between 80 - 150 mg. Most good quality pills contain somewhere in this range, generally 80-120 mg. A large percentage of users find that, there is a 'sweet spot' in MDMA dosage. Once this spot is found, higher dosages are not particularly desirable as they don't increase the sought after effects or duration.

Erowid also discusses specific problems in relation to the drug. For example the problem of hydration with MDMA;

Negative effects can include overheating, nausea, vomiting, jaw-clenching, eye-twitching, and dizziness, as well as depression and fatigue in following days. After frequent or heavy use, some users report bouts of dizziness or vertigo which gradually subside after cessation of use. There have been problems with MDMA users experiencing dehydration, hyperthermia, hyponatremia, exhaustion, blackouts, and a few cases of death generally while using MDMA at clubs or raves. MDMA users would be wise to drink lots of water and take occasional breaks.

Thus control of dosage is something that is in the interest of the user to attain and maintain a euphoric high... not to overdose and die.

We currently live in a culture of drug censorship. Anything that discusses drug use in an objective way is met with establishment opposition and censorship.

The tragic overdoses and death from the misuse of Ecstasy is the result of national censorship about the use, abuse and misuse of psychoactive drugs in general.

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