

Book Review

Title: *Alcoholism, Drug Addiction, and the Road to Recovery; Life on the Edge*

Author: Barry Stimmel, M.D.

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Reviewer: J. Gary Linn, Ph.D.

Alcoholism, Drug Addiction, and the Road to Recovery is an extensive, scientifically based reference tool on addiction medicine which has been written both for health professionals and those in the general public who want to know more about one of the transcending health problems of our society. Following the medical model, Dr. Stimmel takes the position that drug (and alcohol) addiction is a chronic relapsing condition like hypertension or diabetes that requires sustained treatment, not incarceration. A corollary of this argument is that possession of small amounts of drugs should be decriminalized, and that persons identified as users of illegal drugs should be referred to treatment, not the criminal justice system. Dr. Stimmel's goal is to medicalize the drug (and alcohol) problem and bring the individual who is addicted or dependent into the healthcare system for professional help.

In Part I of the book, readers are introduced to basic concepts of drug (and alcohol) addiction. The pervasiveness of mood altering drug use across gender, ethnic, social class, and age groups is described with appropriate data. It is concluded that due to the ubiquity of mood altering drug use in our society and the high degree of pleasure derived from these drugs, they will never be eliminated. We learn that these drugs are classified by their availability, perceived harm to the public, effects perceived by the user, action on the brain, mood-altering effects, and legitimate medical use.

Perhaps one of the most enlightening chapters of this section deals with habituation, dependency, and addiction. The discussion focuses on the physiology of drug addiction. We learn that chronic use of mood altering substances results in long-term changes in the brain, which can influence bodily processes responsible for physical dependency. Also, repeated use can produce increasing tolerance to drug effects in the brain resulting in greater amounts of the drug being needed to become high. Further, physical conditioning in the memory areas of the brain can produce craving for the drug even after the person has experienced withdrawal symptoms and achieved a state of abstinence. The key point made here is that even though scientific research has clearly described the physiology of drug (and alcohol) addiction/dependency, the public and some policy makers continue to view it primarily as a moral and/or social problem that can not be effectively treated.

Despite the popular perception of the futility of drug and alcohol treatment, Dr. Stimmel argues convincingly that these treatment programs have compliance and success rates equal to treatment programs addressing other chronic health conditions, and they are exceedingly cost effective. He noted that in the Drug Abuse Treatment Outcome study (DATO), which followed over ten thousand drug abusers in 100 diverse programs, drug use significantly decreased by a minimum of 50 percent from a year before treatment to a year after treatment, however, longer-term success has yet to be documented. In comparison with drug treatment, he observed that less than 30 percent of patients with asthma, adult onset diabetes, and hypertension comply with directives on dietary or behavior change. Further, less than half of insulin dependent adult diabetics and only about 30 percent of hypertensives and asthmatics take their medicines as prescribed. Finally, he noted that recurrence of symptoms is quite high, ranging from 30 to 80 percent in these groups.

On cost-effectiveness, Dr. Stimmel's data summaries are even more compelling. The cost of untreated drug dependency in the United States is over \$400 billion because of lost productivity, healthcare, welfare, and law enforcement expenditures. Further, contrary to popular belief, the cost of drug treatment is far less than the usual alternative of incarceration. Annual treatment costs were reported to range from \$1,800 for outpatient care to \$6,800 for residential long-term care centers. A year of incarceration was found to be an average expense of \$25,900. In spite of these positive treatment effectiveness and cost comparisons, we are told that public funding for support services for federal treatment programs is decreasing and insurance companies are cutting back covered benefits for drug users.

The final chapter of this section also includes a thoughtful and well informed comparison of the legalization of illicit drugs vs. decriminalization of the simple possession of small amounts of controlled or illicit substances. Arguing against legalization, the author states that it would send an ambiguous or mixed message to adolescents about drug use, which might lead to greater usage at a crucial stage of their development. However, he skillfully makes a case for a limited decriminalization (simple possession), which he believes will lead to a decongestion of our courts and overcrowded prison system and would result in substantial public revenue savings that could be invested in treatment and prevention. At a time in our national history when policy makers and the public comprehend the massive failure of expensive drug interdiction programs and mandatory sentencing for possession of small amounts of illicit drugs, Dr. Stimmel's argument for limited decriminalization and expanded treatment programs in place of incarceration may begin to have greater influence on legislation.

Part II of *Alcoholism, Drug Addiction and the Road to Recovery* provides a comprehensive overview of the mood-altering drugs currently used in our society. We learn about patterns of use, costs, physical and psychological effects, dependency and withdrawal, diagnoses, interactions with other drugs, and reasons for excessive use of a wide range of illicit and controlled substances. The discussion includes alcohol, antidepressants and anti-anxiety agents, powerful hallucinogens, marijuana, opiates and opioids, heroin, amphetamines and caffeine, cocaine, nicotine, volatile solvents, anesthetics, and organic nitrates. This is extremely useful reference information for health professionals (MDs, nurses, psychologists, and social workers) who encounter patients with substance abuse issues. Further, since this section (and the book as a whole) is clearly written and without scientific jargon, it can be recommended by a

healthcare professional to a patient who wants/needs to learn more about a particular addiction/dependency.

Part III of the book discusses areas of special concern. This includes chapters on multiple drug use; AIDS and drug use; drugs, pregnancy and the newborn; and drugs and sports. I found the discussion of AIDS and drug use very timely. Each year in the United States, we add approximately 40,000 new HIV infections. Dr. Stimmel observes that many new infections can be attributed to high risk behavior while under the influence of drugs and/or needle sharing while "shooting up" with an individual who is HIV positive. Further, substance abuse is a barrier to participation in programs of anti-retroviral therapy. The negative implications of drug addiction/dependence for HIV transmission and treatment is, as the author concludes, another strong argument for effective and free drug prevention and treatment programs to be made to the public on demand.

The author has made no special effort to look at alcoholism and drug addiction among those with disabilities probably because there are relatively few existing empirical studies in this area. Nevertheless, given the pervasive abuse of mood altering drugs in all populations in our society, I believe that it is safe to assume that most of what Dr. Stimmel reports is relevant for persons with disabilities. Also, no apparent effort has been made to make the book accessible to people with disabilities, but I still believe that it is worth its \$40 price. I recommend *Alcoholism, Drug Addiction, and the Road to Recovery; Life on the Edge* without qualification.

J. Gary Linn, Ph.D., is a professor in the School of Nursing of Tennessee State University.

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