Keep Your Distance!

Written by Geoff Kane, MD, MPH Thursday, 03 October 2013 00:00

Ask people engaged in addiction treatment for a single word to describe where they just came from—a word that sums up the experience of active addiction—and they quickly agree on "hell."

Many years ago someone asked the then famous and now controversial evangelist Billy Sunday, "What must I do to go to hell?" Sunday replied, "Nothing." In other words, make no effort; you will get there. Beliefs about religion and an afterlife aside, Sunday's answer speaks to people who want to get free from active addiction: make no effort; do what comes naturally; and you will keep returning to hell.

Statistics bear witness to the enormous human and dollar costs of addiction—and some measures keep going up. As a society, if we hope to reduce the toll of addiction, we must not only recognize that addiction is a brain disease, but also that addiction persists in individual lives and gets started in additional lives due to *deficiencies in responsibility throughout society*.

We can more readily identify opportunities for constructive action if we differentiate three overlapping areas of responsibility: *recovery is an individual responsibility*, *treatment is a professional responsibility*, and *prevention* is a *community responsibility*.

If we are outsiders, we may have difficulty acting in these areas. If we suggest *someone else* do a better job, we may be heard as preachy or blaming. Heck, we may *be* preachy or blaming. Blaming makes matters worse. For example, when individuals with addiction are judged and therefore stigmatized, it becomes more difficult for them to change.

Perhaps all those holding responsibility for addiction can assess *their own* behavior and adjust accordingly. Concerned communities, for example, can make prescription pain medicines

less available and their dangers more obvious. Healthcare professionals can become more expert in both human and technical aspects of treating patients with addiction.

What about people living the hell of active addiction? What can they do?

They can—and may have to—do several things. If, for example, they are physically dependent on alcohol, opioids, or sedative hypnotic medications, they may have to seek medically managed detoxification to safely discontinue their drug. If their values and lifestyle are centered on drugs, they may have to reorient themselves in a residential program. They may require short- or long-term medication to reduce their risk of resuming drug use or to manage medical or psychiatric illness. Perhaps most important, they must take responsibility for two fundamental actions that work with the laws of nature and allow recovery to happen. These actions and their underlying neurobiology were described in the previous NCADD Addiction Medicine Update and called The Two Pillars of Recovery. The rest of this Update addresses the first pillar: ***Keep your distance!***

Addiction changes the brain at an instinctual level. Addictive behavior—seeking and using more of the addictive substance—can occur without regard for the person's well-being and without the person's conscious consent. The decision-making "executive brain" (prefrontal cortex) may be more strongly attracted to additional drug use than to personal safety and natural rewards such as family or career.

If you have an addictive illness and wish to succeed in recovery—including substance abstinence—you will be wise to cultivate a realistic *mis*trust of yourself and simply not go near addictive substances or the circumstances of their use. Picture yourself in a motor vehicle, stopped on a steep slope, with the foot brake out of commission. The parking brake is the only mechanism between you and a scary ride—or disaster. Nature works by cause and effect: gravity and physics can't cut you slack; neurobiology can't cut you slack. If you place yourself too close to addictive substances, or try just one, it's the same as releasing the parking break. Brace yourself for a scary ride—or disaster.

> The NCADD Addiction Medicine Update provides NCADD Affiliates and the public with authoritative information and commentary on specific medical and scientific topics pertaining to addiction and recovery.