Addiction affects one out of three people. In the United States alone, more than ten million people are affected by the use of some type of toxic substance. It is well established that tranquilizers, antidepressants, pain medication, substance abuse, alcohol abuse, substance related problems can cause illnesses including: cancer, heart disease, suicide, homicide as well as highway fatalities and other accidents. Addictions can and do affect people from all social classes, of all degrees of intelligence, and all professional levels.

According to the President's Commission on Mental Health, a fourth of the citizens in the United States suffer from some type of severe emotional stress. Another study shows that eighty percent of all Americans feel the need to reduce stress in their daily lives. People want to understand the forces of stress and their effect on their mind and body, and to explore the use of amino acids for pain, stress and anxiety.

A cry for help from the American public has gone out. How do they reduce the harmful impact of stress on their physical and mental well being? Many have come to expect instant relief from emotions and negative feelings, and find it necessary to look for instant pleasure that is chemically induced. Given this information, records show that drugs—and a greater inclination to try them, once or twice perhaps sporadically—conveniently, fit into our stress-filled society. These substances allow the manipulation of moods by simply providing an escape for the user.

Everyone has problems and antidepressants, tranquilizers, pain pills, drugs and alcohol make a person feel these problems are not pressing ... that he can put them on hold. But prescription drugs and alcohol make problems unmanageable, irresolvable and unbearable. Prescription addicts as well as street drug users are thirty times more likely to commit suicide than the norm.

What predisposes a person to choose a particular substance? It is their availability through prescriptions or contacts, and the funds to pay for it. This is especially evident among teens and those younger. We live in an addictive society, a society that has all the characteristics and exhibits all the effects of the alcoholic or prescription addict.

As health care professionals who work with addiction know, the most caring thing we can do is not embrace the denial, but confronts the disease. The primary cause of the addict's problem is not psychological illness, but physical addiction. An addiction is any process over which we are powerless. Prescription drugs, street drugs and alcohol take control of a person, causing them to do and think things that are inconsistent with their personal values. It leads them to become more compulsive and obsessive.

A particular symptom of an addiction is the sudden need for the addict to destroy himself and others. He often lies, denies, and covers-up. The addictive personality feels compelled to lie, and unwillingly to give anything up. He is unaware of what is going on inside him. He does not have to deal with his anger, pain, depression, confusion, or even joy or love; he does not have these feelings, or feels them only vaguely. The addicted person stops relying on his knowledge and sense and relies on confused perceptions. Since addicts are not in touch with themselves, they present a distorted self to the world. Addicts con people and eventually lose the ability to become intimate with others, even those they are closest to and love the most—their family and friends.

Addicts are aware that something's very wrong, but the addictive thinking tells them that it could not possibly be their fault. This kind of thinking also tells them that they cannot make things right—that someone else will have to do it for them. An addiction absolves us from having to take the responsibility for our lives, and permits the assumption that someone or something outside ourselves will sweep down to make things better or help us deal with what we are going through. Since addicts tend to be dependent and feel increasingly powerless and bad about them, the notion that they can take responsibility for their lives is inconceivable to them.

The longer the addict waits to be rescued, the worse the addiction becomes. Regardless of what one is addicted to, it takes more and more to create the desired effect, and no amount is ever enough! Before one is ever ready for recovery, the individual alcoholic/addict must often hit bottom. At this time a new sense of reality surfaces: they no longer want to hide their addiction. They want help.

The addicted personality is one that has been enslaved a prisoner of his own mind, condemned by his own guilt, and fearful of failure. This is one of the reasons he must hit bottom before he will admit he is out of control and needs help with his fears—fear of living, fear of loss of control, etc. The addict must not concern himself with how he got there, only with recovering, living one day at a time. He cannot allow fear of the future to set in; this leads to almost certain failure. An addict grieves for the past and all of the time he wasted, the people he hurt, the lives he destroyed. But his fear of the future brings forth a new set of problems, anxieties, fears, and phobias. Now he must become responsible and face the realities he has avoided, denied and pushed aside.

Researchers have found that there is a specific receptor in the brain for morphine. Shortly thereafter, it was
discovered that there were natural brain chemicals that fire these receptors. This finding opened the door to a new understanding of the psychiatric profile of substance abusers, and their brain function.

Researchers have determined there is a neurochemical imbalance that makes the alcoholic incapable of drinking normally. His body simply does not process alcohol correctly. And unlike other psychoactive drugs, alcohol does not target specific parts of the nerve cells or neurons, but it seems to enter cell membranes and sabotage the nervous system indiscriminately.

The National Institute of Mental Health is studying how alcohol affects certain cells in the brain to induce a sedative effect. The complex workings of the brain provide a map with unique pathways for the addicted. Although some become sedated, others become agitated, angry, depressed, melancholy, anxious, excited or fearful. The brain chemistry holds the key. Deficiencies or imbalances are thought to be the result of genetic anomalies, metabolic disturbances, due to stress, or the destructive effects of prescription drugs, alcohol or drug abuse.

All addicting substances, from sugar to nicotine to narcotics, seem to give short-term relief from depression, in the beginning. Later, the same substance aggravates it. There is no doubt that a link exists between depression and addiction. It plays an important role in the overall pattern of addiction and addictive behavior.

No one ever fully recovers from anxiety, insomnia, or depression while on drugs whether the drugs are in the form of alcohol, street dope or pharmaceutical grade drugs.

Millions of dollars are spent publicizing and promoting pharmaceuticals rather than researching them. The promotions are to convince all of us that their prescription products are useful and beneficial so that physicians will prescribe them. The pharmaceutical industry thrives on illness, not on wellness. It has no significant financial motivation to strive for wellness in society. Sick days pay, not well days.

Most physicians are unappreciative of the extent nutrition plays in wellness. Many psychiatrists live under the illusion that anything below the brain cannot contribute to an emotionally healthy person—and amino acids and nutrients do not count. Most doctors’ education regarding nutrition is only superficial and generally is limited to one semester. The greatest part of their nutritional education deals with caloric requirements and the recommended daily allowances.

The late Carl C. Pfeiffer, M.D., Ph.D., renowned for his work in the field of orthomolecular medicine, summoned up the challenge in what he calls “Pfeiffer’s Law.” Pfeiffer’s law states, “We have found that if a drug can be found to do the job of medical healing, a nutrient can be found to do the same job.” When we understand how a drug works, we can initiate its action with one of the nutrients.

Benzodiazepines are available as commercial products, but they do not cure anxiety, depression, stress or insomnia. These drugs exist because of the tremendous profits they generate for the pharmaceutical companies that manufacture and promote them. The pharmaceutical companies have spent millions to convince physicians to prescribe their products. The resulting profits are made possible due to the inherent addictive potential and proprietary patent protection of these drugs. Thus, when users become dependent on particular drugs, the pharmaceutical companies stand to make huge profits.

A condition that baffles millions is characterized by free-floating anxiety and panic attacks. These attacks can come without warning and seemingly without reason. This sends the poor, anxiety ridden and confused person to the nearest emergency room. After admission, every conceivable test is administered. The physicians determine the cause is actually a panic and/or anxiety attack that can take on the symptoms of a heart attack. Thirty percent of admissions in the emergency rooms in the United States are actually panic/anxiety attacks disguised as heart attacks.

Prescription drug dependents become addicts because they are unaware of natural alternatives and orthomolecular therapy. They make choices based on information that has taught them to trust doctors and their doctors’ medicines.

These victims go through a very long period of addiction denial. But denial is self-defeating. Addicts, and often their families as well, deny the addiction. Many never do admit it, and never look at the situation honestly, because it is too frightening for them to do so. Honest and open communication of feelings in a non-judgmental way is vital. For more information on amino acids and nutrients that can be used for recovery from substance abuse dependency on a daily basis read Break Your Prescribed Addiction Habit.

NUTRITIONAL SUPPORT PROGRAM

SBNC – 2 capsules twice daily.
NeuroLinks – full dropper twice daily if needed.
Anxiety Control for anxiety. Use two capsules three times daily.
LT (theanine) – 2 capsules twice daily for tension and cravings.
If you do not use SBNC use three scoops of Brain Link daily.
Sleep Link** – two capsules an hour before bedtime will help raise serotonin levels and provide restful sleep.
Neuramins DHA – 1 capsule daily for children OR ProDHA for adults according to label instructions.
Teen Link** for teens – 2 capsules twice daily or one capsule three times daily.
Tyrosine, 850 mg – 1 capsule twice daily along with one capsule of GABA 375 mg three times daily.
** Caution: do not take with SSRI or MAO antidepressants, or if pregnant or lactating.

References

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