

INSIGHTS THAT MY CLIENTS HAVE TAUGHT ME LATE NIGHT THOUGHTS ON ADDICTIONS

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How can you put drinking and drugs in the same category as gambling, relationships and sex? That used to be the question. The argument was, there were no drugs involved in gambling, relationships and sex to become hooked on. So, how could they be addictive? Now most therapists agree that there are addictive relationships, addictive sex and addictive gamblers just as there are addictive drugs. If you need to see addictions as connected to drugs, then know that the body can produce some very strong chemicals.

What I have observed, that might not be so obvious, is that there are three things that are common to **all** addictions. Drugs are not what make something addictive. It is what the drugs mean to you and what affect they produce in you. For something **to be addictive**, the behavior and/or the substance must have these three elements:

- ✓ It must produce high highs and low lows. If there were a drug that produced only a high, without any low, it would not be addictive. I have never seen anyone who was addicted to a walk in the park. There are a lot of things that can give us pleasure but they will never become addictive because there is no withdrawal to set up the craving. (There are some drugs like Xanax and some of the painkillers that work in a reverse way. With Xanax, it can remove the feelings of anxiety (the low lows) and replace it with a sense of calm very quickly. The end result is the same; these drugs can become very addictive.)¹
- ✓ The addicted person sees the source of the high as outside of themselves. "I need the drug/behavior to give me my high. I can't get

¹ For a long time, before Xanax was reformulated, it was too good. That is, within 15 to 20 minutes, Xanax could take you from a full blown panic attack, where you thought you were dying, to being at peace, without anxiety. The temptation was, at the first signs of anxiety, to take the pill to avoid any feelings of anxiety.

the high without it.” These people can often be identified by their “drug seeking behaviors.”

- ✓ Intermittent reinforcement is the glue that holds the addictive urges in place long after the behaviors or drug use has ended.
Go into a casino and find a slot machine that says, “This machine pays out at a rate of 90 per-cent” (most slots pay out at a lot lower rate).
Now, if every time you put \$1.00 in the slot machine, you only get 90 cents. How long would you continue to put money in? How addictive would gambling be?

Gambling, sex, relationships, alcohol, or cocaine all are intermittently reinforced. Cocaine users talk about “chasing the high.” Relationships are notorious for their roller-coaster rides. Alcohol and drugs are known to give you “bad trips.” Does every cigarette you smoke taste good? Do you smoke it anyway?

TRIGGERS AND CUES

In fact, the drug itself is not what is the most addictive. If you quit drinking, the alcohol will be out of your system in a month or two. So, what happens when two, three or maybe five years later the urge to use strikes and the person “falls off the wagon?”

The nicotine from your cigarette will be out of your body in seven to ten days, but the addictive urges can continue for months, even years. The chemicals are not the most addictive part of an addiction.

Ivan Pavlov was a Russian physiologist who is credited for discovering the concept of Conditioned Response. What he discovered is that if you take two things that have no relationship to each other and pair them together, they will become linked.

For example, have you noticed the connection between getting in your car and smoking or the telephone ringing and smoking a cigarette? If you grab a cigarette and start smoking each time the phone rings, within four or five times of pairing the cigarette and the phone, you have formed a trigger—now the phone rings, the urge starts and you start looking for a cigarette. If you are a cigarette smoker, how many triggers or cues do you have? Pavlov produced triggers in German shepherd dogs and now you are doing it to yourself.

For a drug addict, a \$20 bill (the cost of a fix) can be their trigger, or the sight of the old crack house where he used to get his fix, can set the body urges going. What do think the metal trays, bells and lights are for in a casino? You walk into a casino and hear the coins dropping, the bells and lights going off, and your body starts reacting both physically and emotionally. Just like Pavlov's dogs, you have been conditioned.

The problem is that these triggers can last for years and catch you when you least expect it. There was a parolee that I had been working with who told me that he had spent 7 years in Pleasant Valley State prison for drug use. On the bus ride back to Fresno he was so excited, "I've been drug free for 7 years. I don't even have a desire or urge to use any more." He was planing how, with a new start, his life was going to be different this time. Then he went on to tell me that within an hour of being back in Fresno, he was totally wasted. "I don't know what happened." I bet I knew, "Where did they let you off the bus?" I asked.

"Down by the Metropolitan Museum."

"And where did you used to get your drugs before you went to prison?"

"Down by the Metropolitan Museum! Do you think there is some connection?"

The Left Side of your brain is the logical, rational part. Triggers are stored in the Right Side of your brain. There is no logic in the right side; it is like a picture album. You can't argue with a picture, it just is. Some are pleasant, some are scary and some are peaceful, but all have triggers connected to them.

The interesting thing about the right side of your brain is that it does not know the difference between what is real and what is imagined. When it sees a picture from your past, a flashback, it assumes that it is real and your body will react as if you are experiencing the same emotional and physical reaction that you did when the event happened!

Using a Cognitive, Affective, Behavioral therapy approach, it is possible to replace the negative pictures and urges with positive ones. This can be done through the use of psychodrama and/or visualization depending upon the situation.

Another thing that can help with any addiction is knowing that the urge to use will go away, whether you use or don't use! Giving into your addiction just makes the urge return sooner next time and last longer. As you can see, addiction treatment requires more than simply trusting your Higher Power to stop. Information and knowledge are essential to becoming and staying sober. If you are serious about addiction, then it is time to challenge your belief systems.

So, now the questions: Is alcoholism a disease? Can you ever recover from alcoholism if it is a disease? Is there such a thing as a recovered alcoholic? Will you always be a recovering alcoholic? If **you** are the one who has to turn **yourself** over to your Higher Power then who has the ultimate power?

In the Forward to the first edition of the Big Book it starts with:

"We of Alcoholics Anonymous, are more than one hundred men and women who have recovered from a seeming hopeless state of mind and body. To show other alcoholics *precisely how we have recovered* is the main purpose of this book." (The italics are in the original.)

Note, that the more than hundred men and women who started AA say they *recovered not from a disease but from a seeming hopeless state of mind and body.* What has changed in AA and who changed it and for what reasons?

I was told by an AA person that the recovery rate using the AA approach is only 10%! If the only medication you had was effective for only 10% of the population, would you settle for using it or would you keep looking for something better?

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