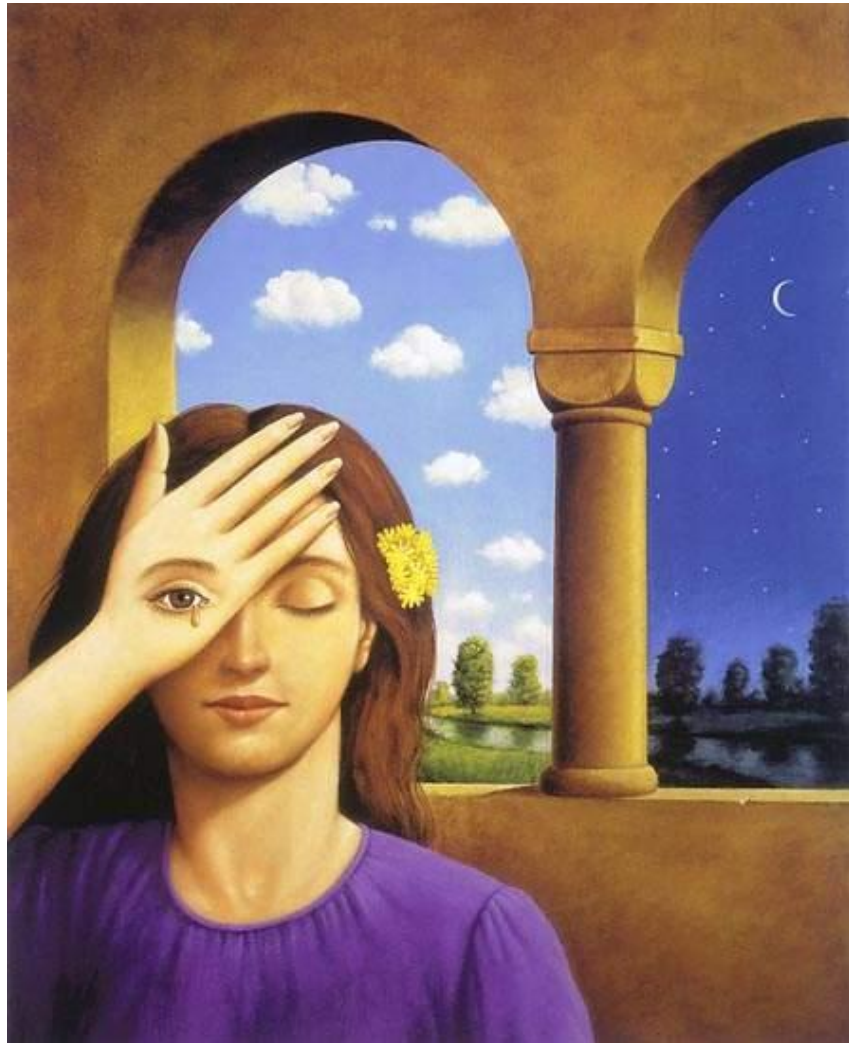


**REST FROM PAIN:**  
**A Lecture On the Addiction of Drugs**



**By**

**Alexandra Porter, Ph. D.**

**Conference**  
**November 16, 2001**

## *Greetings*

Good afternoon everyone!

Welcome to a lecture series on “How to Be Dependent and in Harmony with Christ.” Before I begin this conference, let us center ourselves.

Sit comfortably in your chairs, relax for a moment and draw unto yourself the attitude that you are in the presence of God.

Very well, now permit me to open this conference with a prayer

Mother-Father God, in today’s conference, we beg you to bless us and grant us the safety of your presence. Please allow each of us to unite with you through our Lord Jesus Christ and may all of us, who gather here today, find comfort and peace of mind in the content of this lecture.

Please, join me now, in the Lord’s Prayer. Our Father, who art in heaven ...

Now we will end this period of giving thanks with a concentration on “Deliverance from addictions”.

Excellent! Thank you very much.

## *Introduction*

The content of this conference comes from my research work in the area of Health and Human Services. In this lecture, the topic of drug addiction in children will be explored, as it relates to our prevalent habits and behaviors. The content of this lecture will help you answer the question: “What is an addiction?” In this respect, innovative ideas will be presented to explore the question: “How can we help our children brake free from that behavior?” And, “How can addiction of drugs be healed?” In this lecture, the topic of misconception along with our physical and mental desires will be explored. Included, is a brief explanation of how we can be strong, dependent and in harmony with Christ. This includes addiction of drugs in children and adults.

\* \* \* \* \*

# **REST FROM PAIN:**

## **A LECTURE ON THE ADDICTION OF DRUGS**

**By Alexandra Porter, Ph. D.**

### **RECORDED CASES:**

- On Coney Island's Mermaid Avenue, New York City police break up a thriving sidewalk traffic in heroin. The pushers were: three boys aged 15, 13 and 11; whose sales averaged \$900 a week. All three boys were later found to be addicts working as pushers to maintain their drug addiction. [reference 1998]
- The daughter of a Manhattan Psychiatrist, in New York, located at the far end of a drug spree, boast to newsmen: "I take hash, pot, LSD, heroin, speed—anything I can get." She is twelve. [reference 1999]
- In Hollywood, California a boy of eleven has been pushing "ups" (amphetamines and methadrine) and "downs" (barbiturates and tranquilizers) since he was nine, he is found out by his parents and locked in his bedroom. Through a window he transacts business as usual. This business was necessary to sustain his personal drug addiction. [reference 1999]
- At a hospital in California; where I worked in the Intensive Care Unit, a white male youth was admitted in a comatose condition. Four hours prior to admission to this facility the youth had self-injected heroin and had already been treated at another hospital with Nalorphine, Oxygen, and Dextrose in water, while in a comatose state with pinpoint pupils. [reference 1999]
- The male youth had bruises about his face and multiple injection punctures on his left arm. His pulse was 120 beats per minute and laboratory reports indicated serious destruction of red blood cells. Six hours after admission the youth was passing burgundy-colored urine which was positive for blood. The doctors were unable to find a cause for the massive destruction of red blood cells, but it was concluded that some substance used as filler for heroin was responsible.

The youth remained in the hospital for nine days and when discharged, still had a very low red blood cell count condition.

These are not isolated cases of drug abuse by the very young. They can be multiplied many times over. And they add a frightening new dimension to the newly evolving drug society.

## **RECORDED STATISTICS**

- Statistics show that 56%, of all known drug abusers are between the ages of 13 - 21. This percentage cuts across all social and economic lines; it is as common in the suburbs as it is in the ghettos, and as common among high school dropouts as among college students. [reference 2000]
- The narcotic problem is at its greatest in the following three cities with a percentage of national addiction as shown: New York 52%, Los Angeles 12%, Chicago 11%. [reference 2001]
- At the present time in Los Angeles more individuals between the ages 14 - 18 die from drug addiction than from all the murders, suicides, and natural causes of death. [reference 2001]
- Testimony before a subcommittee of the California State Senate has indicated that thefts by drug users cost the citizens of Los Angeles about two hundred thousand dollars per day. This committee further states that one drug addict cost the community ten thousand dollars a year in drugs, in crimes committed and time spent in jail. [reference 2001]

## **RELATED DATA**

Since the beginning of the industrial revolution in the 18th century, the pressures of a competitive society have increased, thus, imposing on the individual the burden of having to distinguish himself in one way or another. Even the big executive can come to believe that he is merely a faceless small wheel in the operation of our faceless huge society. How much greater then are the pressures of the young who are living, learning, and growing in an affluent society without knowing no other condition. A society that spends more money on alcohol, tranquilizers and sleeping pills than it does on education and the great society. These external forces, present in our environment, may have led the juvenile to the point of drug use, but drug abuse is probably as old as the earliest civilizations.

Throughout the ages, man has used great ingenuity in identifying substances to escape from discomfort and misery. But it is interesting to note that misery and discomfort are conditions familiar to all: in all walks of life and at one time or another. Some suffer more frequently and more intensely than others but misery and discomfort are universal.

For centuries available agents remained fairly quiet. They had been limited only to botanicals and their derivatives. However; since the barbiturate and amphetamine have become available, our society is accepting the well advertised proposition that there is a chemical solution for every problem of discomfort and misery. What makes this fact crucial is the damage it is doing to our children. They have also come to believe that if you have a pain, you treat the pain center and you are reprogrammed. Another crucial fact is that these young people seldom learn the facts or the effects of these drugs before using them.

## **RELATED DRUG INFORMATION:**

A dangerous drug by definition is any substance, other than food, which affects body structure or function, is unsafe for self-medication and has potential for abuse. The three major categories of drugs used excessively by the young are: Marijuana, Barbiturates and Amphetamines.

### **1. Marijuana**

Marijuana is, hemp or cannabis, a plant that may grow almost anywhere; except in very cold climates. Although it has not been proven to be physically addicting, an overview of the teenage addicts today disclosed that 90% started with the use of marijuana. Yes! You are all correct, of that total 100% started with milk. The chronic user tends to acquire a resistance which makes the drug incapable of satisfying his desires; hence he turns to a stronger drug. One such drug in many instances is Hashish; a. concentrated, form of marijuana six times as potent. The user is often startled to learn that Hashish is extremely addictive.

### **2. Barbiturate**

A barbiturate, the main depressant drugs used for sedation, causes more suicides than any other substance. Abusers of this drug seldom know that in conjunction with alcohol, barbiturates have a synergistic effect. That is to say that the total of the two substances is greater than the sum of the two substances taken independently (hence, in these cases  $2 + 2 = 6$ ). The abuser seldom knows that an overdose may render him overly depressed. In combating this extreme depression the abuser often turns to alcohol which in many cases results in death.

### **3. Amphetamines**

Amphetamines, the pep pills students often use for late night cramming, may

result in physical and emotional deterioration for the chronic user. This drug decreases the appetite and keeps the user awake for abnormally long periods of time. The user although exhausted finds it impossible to sleep, rendering the user a danger to himself and a danger to others. Having deprived the body of food and rest to the hazardous point of fatigue, that is often not recognized, the user experiences extreme anxiety or "freaks out"; resulting in serious injury to himself or to those around him.

As I stated, earlier drug abuse cuts across all social and economic lines, therefore; let us look at the sociological aspects of drug addiction. The continuing spread of drug addiction depends upon:

1. **A Host**--- a host is one with a personality so constituted as to make the individual susceptible to addiction.
2. **An Agent**---an agent is any drug bringing about physical dependence. In the case of the juvenile addict the three drugs discussed earlier are the main agent.
3. **An Environment**---an environment is an area where the drug is readily available. Contact with an addicting drug is necessary and the method of contact is extremely important, for addiction is more likely to occur from association than if administered for medical reasons. A review of a large number of case histories of addicts revealed that association and curiosity are the greatest contributing factors to habituation and addiction.

In these external forces are the causes leading to drug addiction. "Do points 2 and 3 really matter if a host is not available?" Point 2 and 3 seem like false causes; in fact; escape goats which avoid the entire problem, i.e., the Host.

The logical questions now are:

"What type of individual will abuse drugs?"

"Does the use of these drugs relate to some psychological factors?"

Numerous noted psychiatrists and sociologists, with experience in drug treatment, agree that the users have one common characteristic-a psychological disorder. It is my opinion that the outside physical environment is secondary to the individual's abuse of a drug. The users for the most part are unable to tolerate physical or mental pain; in essence they are basically weak. The drug is merely a placebo, what the addict really wants is to seek escape.

## PAIN

Everyone hurts at one time or another. Some people hurt more frequently and more intensely than others, but pain is universal-one great common bond of this human condition.

Considering how long men have lived with pain, it is remarkable how little firm knowledge they have acquired about its essential nature and effects. The National institute of General Medical Sciences, a part of the government's famed National institutes of Health, points out that men have not even reached consensus on what pain is.

Pain is indefinable, except, of course, as each man introspectively defines it for himself.

- ❖ Pain to a biologist is a sensory signal that warns a living creature when harmful stimulus threatens to cause him injury.
- ❖ On the other hand, a philosopher may view pain as a passion of the soul, an emotional process and a moralizing influence.
- ❖ To a physician it is always a message to be decoded, interpreted and acted upon.
- ❖ Whether pain ennobles the human spirit depends on the subject's response to it. While it may provide heroics examples of fortitude for some people, it may dehumanize others like madness.

A study done by Rene Leriche show that pain is no less painful for being psychosomatic or imaginary in origin. One of his patients was a man who complained of severe pain in a particular location of his jaw. Upon examination of the jaw itself, there seemed to be no identifiable reason for the pain. The attacks not only became more frequent, but, instead of being localized, the pain spread over the man's face . . . utterly debased by pain and fear he spent his days and nights in despair like an entrapped animal.

Certain parts of the body are more sensitive to pain than others:

- ❖ The eye for example can detect the lowest degree of pain.
- ❖ Superficial wounds are often more painful than deep ones.
- ❖ One of the most excruciating types of pain comes from the spasms caused by kidney stone colic.

Some students of pain believe that a dying man does not feel pain. Others feel that the sensation is almost wholly. A man during rage feels no pain from injury until after his anger has cooled. The same man waiting in the ante-room of his dentist's office may suffer agony in anticipation.

The incidence in intractable pain is increasing and will continue to increase as people are living longer. A price we pay for living longer is chronic degenerative disease. A characteristic of the most prevalent of these diseases -cancer and arthritis- is chronic pain.

Men have made some progress in understanding the cause of pain. In centuries past, he attributed pain to capricious spirits, which entered his body to maliciously torment him. He tried to humor and placate these spirits with elaborate rituals and sacrifices and he tried to keep them away from him by taboos.

By the middle ages, man had come to regard pain as a punishment. It was assumed, then, that whoever felt pain was deserving of it.

Modern medicine, of course, looks upon pain as a natural symptom to be diagnosed and alleviated as quickly as possible. For the physician reading the message properly may be a life-or death matter. Misinterpretation of a pain message could mean the death of a patient, if for example, a physician was to mistake the pains of a rupturing appendix for an ordinary stomach ache and gave the patient a laxative.

The physician's textbook "The management of pain" by Dr. John J. Bonica states that there are two medical concepts of pain:

1. Pain is a necessary warning signal for the body's protection.
2. Pain is a disease in itself.

Pain, according to this source, can be one or the other at different times and in the same person.

There are three general types of pain:

1. ***Skin Pain*** - This type of pain makes us act quickly to escape a continuing stimulus.
2. ***Deep lingering aching pain*** - This type tends to make us withdraw into seclusion and inactivity.
3. ***Phantom pain***-such as an itch on the sole of the foot which has been amputated. So real.... is the type of sensation that some patients have killed themselves to escape it.



The past has offered, the addict a physical cure and possibly a change of environment. This was the only complete medical treatment. The term "once a junkie, always a junkie" is basically true. The psychological dependence is always present and if untreated will continue to be. The problem can only be successfully cured, if treated where it originates—in the mind, not where it is physically apparent. You cannot treat an addict by locking up a drug, for a substitute will be sought. Nor by locking up the addict, for his life is dismally disorganized and he cannot seem to learn from his failures. The answer lies in the treatment of the mind as opposed to the treatment of a tangible life style. This psychological treatment will remove the desire to escape from discomfort and misery through drugs, for it tends to be pointed towards solving a problem. Through this method the problem is almost certain to yield to this intelligent attack.

My own twelve year research study gave rise to the development of a paradigm theory of cellular patterns of disharmony, and showed that a personal energetic wave frequency could be measured.

The study was a search for the origins of an electromagnetic field that lead the researcher to three separate empirical studies. The first study was done to examine if healing with this frequency could have an effect on human beings. The second one added the process of empirical case studies. The third study continued with the above process and also physically measured the energetic wave frequency. These relevant experiences of the second study are included in the case illustrations of this research.

The general background of this research was based on an existing belief that throughout the universe there is an electromagnetic frequency, moving at the speed of light, that has healing properties. It has been understood that the properties of the electromagnetic frequency were the universal whole, and thus, could not be isolated. The researcher found that the emotion of pain may be stored in specific parts of the body yet they responded the same in terms of pain. The historical background of each client's description was different yet the emotion that was caused by the pain was held in different parts of the body. That emotion gave rise to the development of a paradigm theory of cellular patterns of disharmony.

## **Max Heindel**

“It must not be imagined, however, that when the little body of a child has been born, the process of birth is completed. The dense physical body has had the longest evolution, and as a shoemaker who has worked at his trade for a number of years is more expert than an apprentice and can make better shoes and quicker, so also the Spirit which has built many physical bodies produces them quickly, but the vital body is a later acquisition of the human being. Therefore, we are not so expert in building that vehicle. Consequently it takes longer to construct that from the materials not used up in making the lining of the

archetype, and the vital body is not born until the seventh year. Then the period of rapid growth commences. The desire body is a still later addition of composite man, and is not brought to birth until the fourteenth year when the desire nature expresses itself most strongly during so-called "hot" youth, and the mind, which makes man, does not come to birth until the twenty-first year. In law that age is recognize as the earliest time he is fitted to exercise a franchise.”

“At the age of fourteen we have the birth of the desire body, which marks the commencement of self-assertion. In earlier years the child regards itself more as belonging to a family and subordinate to the wishes of its parents than after the fourteenth year. The reason is this: in the throat of the fetus and the young child there is a gland called the thymus gland, which is largest before birth, then gradually diminishes through the years of childhood and finally disappears at ages which vary according to the characteristics of the child. Anatomists have been puzzled as to the function of this organ and have not yet come to any settled conclusion, but it has been suggested that before development of the red marrow bones, the child is not able to manufacture its own blood, and that therefore the thymus gland contains an essence, supplied by the parents, upon which the child may draw during infancy and childhood, till able to manufacture its own blood. That theory is approximately true, and as the family blood flows in the child, it looks upon itself as part of the family and not as an Ego. But the moment it commences to manufacture its own blood, the Ego asserts itself, it is no longer papa's girl or mamma's boy. It has an "I"-dentity of its own. Then comes the critical age when parents reap what they have sown. The mind has not yet been born, nothing holds the desire nature in check, and much, very much, depends upon how the child has been taught in earlier years and what example the parents have set.” [Heindel, Max. The Desire Body. p. 30-31]

For centuries, many discussions and interpretations have been sparked by the saying of Jesus Christ, “Blessed are the poor in spirit.” Some people believe that this saying is the same as admitting that innocence or ignorance can protect us from adversity or bring us happiness. To me, this expression is saying that the knowledge of truth is not without risk. It is my personal experience that when a person is sensitive to the problems in his surroundings the methods of escape that are frequently used are habit forming drugs.

Ignorance of the truth, as opposed to knowledge of the truth, in some peculiar sense, is easier to live with. Ignorance of the truth can be much more gentle and protective. It can also delude us and prevent us from being hurt.

On the mystical and spiritual planes, acceptance of the truth does not mean giving up. When sorrow engulfs our heart, embarking on this pathway is not a choice, but an obligation, and sooner or later we must go forward and face it.

Some times we think we can push back the moment of revelation out of respect for others, fear, timidity, or hypocrisy and we try to do so by our silence, by our choices in the words we use, by not bruising the feelings of others or by what is not actually said. However, sooner or later, the law of cause and effect will apply. In the youth we see these effects developing when we look at their track record.

One day I read the words that said “Any pain whatsoever is acceptable where there is clarity”. These words came from the French philosopher Simone Weil. Since then these words have helped me overcome difficulties.

When we take a spiritual approach to life we are embarking on the path towards the knowledge of truth. Along this pathway our soul and our heart are in harmony with Divine Laws, and a clear view may be offered. It is at this time when things may appear very obvious.

When we are enlightened by the Divine light that shines within and around us, it is the time to welcome the love of the benevolent being that support us in adversity. This is the time to accept the light that illumines our steps, revealing the imperfection of our progress. Only this light will clarify all things, the good as well as the bad, for it is akin to the knowledge of truth.

My dear seekers of Divine Light, it does not matter how forcefully we try to push back our pain. The law of cause and effect will eventually find us. Whether we believe that our heart has been engulfed by sorrow due to good karma or by bad karma, the spiritual truth will remain the same. The effects of our natural laws will take effect for all of us, even if “all of us” are not aware of it.

I have always cherished the words of the French philosopher Simone Weil because in my personal experience, when my heart was engulfed with sorrow and I followed the path of the knowledge of truth I was always able to affirm that “Any pain whatsoever is acceptable where there is clarity.”

In conclusion I would like to leave you with the words of John Dryden, who wrote, “For all the happiness mankind can gain it is not in pleasure, but in rest from pain.” The drug manufacturer Burroughs Wellcome & Co. of Tuckahoe, N.Y. for the drug Empirin compound with codeine phosphate grain ½ No. 3, very cleverly used this; with the disclaimer: Warning-May be habit forming.

In Loving Service,

*Alexandra Porter*