



Recreational Drugs

In this section, I'd like to review the physiological effects and use of the six most popular recreational drugs. Why?

- Because of their widespread use among athletes (> 95% of elite competitive athletes use at least one of the recreational drugs listed).
- Because knowing how they affect the body can help us make an informed, educated decision
- Because ignoring the issues or pretending the problem doesn't exist doesn't make it go away (especially when it's a spouse or one of your children).
- Because telling people, especially young people, not to use drugs because they are "bad" will absolutely not prevent them from experimenting with them

Steroids vs. Recreational Drugs

This section is neither intended as a means of drug promotion, nor is it a sermon about their

ill effects or how drug use can ruin the minds of our youth. It is known that billions of people worldwide consume recreational drugs. The trick it seems is one of management rather than abstinence. Sobriety does not appear to be an effective or practical solution. In surveys of college and high school students, only 1.4 percent of college athletes and 5 percent of high school athletes use steroids, compared to 80 percent alcohol, 30 percent marijuana, 25 percent tobacco, five percent psychedelic drugs and three percent amphetamines.

Opium, cannabis, mushrooms, coca leaves and peyote cactus have been utilized since the dawn of time, providing the user with such effects as pain relief, mood elevation, change of consciousness, aphrodisiac effects and interactive social pleasure. So far, neither laws nor fear of penalty have eliminated their use, and regardless of their legal, social, moral, ethical, religious and philosophical implications, recreational drugs will always be with us.

The majority of recreational substances in current use exist as natural constituents of plants. For example, LSD (lysergic acid diethylamide) was originally derived from ergot, a fungus on rye and wheat. Mescaline is the active principle of peyote cactus and psilocybin comes from Mexican mushrooms. Many seeds and vines contain hallucinogenic alkaloids, and even banana peels contain bufotenine, an alleged hallucinogen originally isolated from toad skins.

Coffee (caffeine), alcohol and tobacco are foods and concentrated drugs when isolated; however, most people have been convinced by governments and our educational system to think of them as food only or as non-drug substances that are relatively safe or at least socially acceptable. For example, if you drink alcohol or smoke tobacco you probably don't

think of yourself as a drug user or a drug addict or a loser. If you drink moderate amounts of alcohol or drink coffee everyday and I asked, "Do you take drugs", you would probably say no. But you'd be wrong based on the pharmacological definition of a drug. Then of course, there is prescription drug use and abuse...again, if you used acetaminophen daily for pain relief or occasionally for headaches or oxazepam for treating anxiety, you most likely wouldn't think of yourself belonging to the same group of people who use cannabis, cocaine or ecstasy.

Why Athletes Use Recreational Drugs

Athletes consume recreational drugs for the purpose of stimulation, performance enhancement, relaxation and stress management. Many use them simply for fun. Athletes consume drugs for the same reasons as everyone else (mind-altering and pleasurable effects). Steroids and recreational drugs often go hand in hand, as steroid users typically exhibit high-risk behavior, causing them to follow a lifestyle that can lead to health problems or even death. When cycling on and off steroids, recreational drugs are frequently used for depression associated with the washout phase. But let's keep in mind that the vast majority of recreational drug users and abusers in North America and the world have never used anabolic steroids.

Use vs. Abuse

One must distinguish the difference between substance use and substance abuse, although there are those who feel that consuming any amount of an illicit substance illustrates abu-

sive behavior. During Prohibition (1920-33), alcohol was considered illicit, whereas today in America you can buy it in a gas station or the corner store. Cocaine was actually added to the original coca-cola formula and was routinely added to wine.

“A fiendish Corsican chemist Angelo Mariani added the new alkaloid to wine, and “Vin Mariani”, with 24mg cocaine per 4 oz glass, became the overnight hit of Europe. Endorsed by Pope Leo XIII, the spiked wine addicted hundreds of thousands of people, including writers Jules Vern and Alexander Dumas.”

Optimum Sports Nutrition
Dr. Colgan

Recreational drugs definitely have a dark side, but then so do vitamins, food, medication and exercise. Tolerance to drugs varies as much as tolerance to food. It is obvious that drug abuse is a syndrome of multiple causative factors, including emotional, sociological, physiological, psychological, biochemical, and even spiritual.

Most of us tend to judge the difference between drug use and drug abuse from a practical perspective. When our work and eating habits, social demeanor, health and overall behavior is negatively affected, we think drug abuse. Certainly there is a scientific basis to the use vs. abuse position. Risk of damage is generally consistent with frequency of use and quantity consumed (i.e. 1 cup of coffee daily vs. 12). Is it possible to consume recreational drugs in limited amounts without harming the body and mind? Does every consumer of illicit drugs end up on skid row? Does recreational drug use compromise or enhance athletic performance? If used with discretion and in control, do recreational drugs have a neutral or even a positive effect?

Do mind-altering drugs expand our consciousness or destroy it?

To add a further perspective, does the widespread consumption of refined, processed man-made factory food affect the brain and immune system in such a way that our tolerance to drugs is diminished, our ability to metabolize them weakened, and our perception of their need distorted to the point of dependence? Is there a correlation between addiction to refined food in childhood and youth, its affect on blood sugar and brain biochemistry and drug addiction in adulthood?

Get the Facts Straight

Alcohol and tobacco cause more death and disease, and destroy more families than all the illicit hard drugs combined, including heroin, crack cocaine, acid and methamphetamine. For every heroin addict, there are tens of thousands of alcoholics. For every person who dies from an overdose of crack cocaine, thousands are dying from cancer or vascular disease caused by tobacco smoking. Is this because both alcohol and tobacco are legal, and therefore more accessible, or is it because they are far more toxic and addictive than we have been led to believe?

Do exercise and a whole food diet protect us from addiction and potential side effects of recreational drug use? Can we just burn them off the next day in the gym? If exercise is habit-forming and changes our state of mind, should it be regulated, controlled and taxed by the government, or even banned?

These questions and others like them raise strong disagreements and social debate. The so-called moralists and fundamentalist are

anti-drug. The drug consumers want the right to their freedom of choice. Drugs are a topic of enormous controversy. Their use is a personal, private concern and for many highly secretive, but it becomes a public concern when lives are lost, when innocent people are negatively affected and when the detrimental effects of drug use, be they legal or not, increase the economic burden on the health care system (more aptly named the disease management business).

In the end it may be the economics of health care and court costs and the observation of their use and abuse in relation to education that will determine the final outcome, not religion or morality. One thing's for sure. History proves you can't legislate morality or force people to love themselves enough so they won't willingly destroy themselves.

Functional Medicine

Functional medicine judges the use of food, supplements and any substance we consume in relation to outcome. If the effects of recreational drugs on our individual health or on the health of our society are negative, then reform through education, not enforcement, is necessary.

“National prohibition of alcohol, the “noble experiment”, was undertaken to reduce crime and corruption, solve social problems, reduce the tax burden created by prisons and poorhouses, and improve health and hygiene in America. The results of that experiment clearly indicate that it was a miserable failure on all counts. Moral issues and philosophy are predominantly subjective. And let's not forget, in the real world, drugs are big business.”

Mark Thornton
Cato Institute

Drugs are Non-Essential

None of the active principles of psychotropic drugs are essential to the nutritional chemistry of man. Both caffeine and nicotine, for example, have no known physiological requirements. Alcohol, like cocaine or ecstasy, is an option. From a rational or logical point of view then, I think it's important to understand the effect of the drug on the chemistry of the body and mind, and to analyze the mechanism of its action. This provides everyone with a better understanding of the cost to risk to benefit ratio. An educated mind is guided by reason, intellect and common sense, not by fear, religious prejudice, peer pressure or transient social values.

The issue is about understanding the chemistry of the substance on the body and acknowledging its effect. Some people should never touch caffeine and others have more tolerance. We know for example, that when you push coffee to more than 4-6 cups per day, which supplies about 200mg - 600mg. of caffeine depending on the strength, a whole range of health concerns become possible. But once again, it's really a question of how it affects the individual, how well hydrated they are, the quality of their diet and how well their liver is able to effectively metabolize and detoxify that particular substance. In many cases it's an issue of enzyme chemistry, and the overall functional capacity of the liver, which for many adults in North America, is compromised.