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Government’s Control on Illicit Drugs

Man has created, consumed, sold, and manufactured drugs since the dawn of our existence. Unfortunately in today’s society, we have abused the system numerously. Instead of using drugs to treat an ailment (as presumed and expected), we have made excuses to take drugs: to fit in a crowd, to feel wanted, to ultimately commit suicide, and the list continues to grow. This abuse has ultimately caused the nation to undergo a civil war on drugs, which is, trying to find a way to regulate how these harmful drugs are to be manufactured, distributed, and prevented to reach those who shouldn’t be using drugs like children and adolescents. With that, however, some believe the war on drugs is prevalent because of the fact that the government has control over tobacco and prescribed drugs, for example. Though the government recently had a breakthrough into allowing marijuana for recreational use in Colorado and Washington, some argue against it due to the fact that marijuana is a Schedule I drug under the Controlled Substances Act of 1970. In my paper, I will discuss several drugs and will later explain whether or not it should be appropriate for the government to regulate and make the drug legal for recreational use.

Since marijuana was a prescribed drug before being allowed for recreational use, I want to initiate my argument with methamphetamine. A variation of amphetamine, methamphetamine was synthesized in Japan by Nagayoshi Nagai in 1919. Initially, this drug was particularly used during World War II to keep those awake in order to be more aware of their natural surroundings (Inaba 115). As the epidemic for methamphetamine escalated in the United States during the 1950’s, we were beginning to see methamphetamine used for other reasons. According to the Meth Project Foundation, users—especially models during this era—were using meth as a way to lose weight. Meth turns off the appetite and hunger response, thus consequently shrinking the stomach over time. To that, methamphetamine distracts the dopamine to reach the hypothalamus, which is where we get our hunger from. Dopamine plays a vital role in the body. Because methamphetamine disrupts the homeostasis on Dopamine, the neurotransmitters from the amygdala cannot function normally. This is where the “cravings” for the drug occurs, thus the old brain overpowering the new brain (Erickson). However, once the user stops taking methamphetamine, the hunger response triggers again which results in excessive weight gain. If taken excessively, methamphetamine has other harmful side effects, including alterations in the Central Nervous System, euphoria, an increase sex drive, anxiety, and numerous physical distortions (DEA). Currently, Desoxyn® is the prescription version of methamphetamine to treat obesity since the drug is an appetite suppressant. Methamphetamine is a Schedule II drug as well (FDA).

With that, I do not think methamphetamine should be legalized for recreational use. I strongly believe as of right now, the use of methamphetamine should be regulated through a doctor, and even at that, be restricted. There are other methods to lose weight: exercise, eat healthier foods, speak to a nutritionist, etc. One does not need to resort to a drug like methamphetamine to use as an alternative to get the job done. With the dangers of the drug, it would not be safe to be legalized for recreational use. Especially in the United States, we are beginning seeing prepubescent kids using drugs because of their surroundings, for example.

We are currently seeing a shift in society; we are becoming more technologic thirsty; we are discovering more about the human brain day in, day out; we are beginning to take action. If methamphetamine were to be legalized, I would strongly presume the nation would undergo a halt to the potential success we have set for our future. However, if the government were to regulate the distribution of methamphetamine, increasing the price would make a purchase a burden, thus less would purchase it. But, to that, if one were to buy it, it would just be sold under the black market at a lower price, thus creating a bigger schism in this war on drugs. To be honest here, there is no way to stop this system; all it is a Catch-22 effect. Users who are obviously addicted to drugs will just cheat the system. If anything, I believe there should be greater consequences if caught in possession of methamphetamine.

Another drug that comes to mind—only because it has similar side effects to methamphetamine—is cocaine. Also a stimulant, cocaine derives from the coca bush, and is mainly grown in South America. In order to retrieve cocaine, it has to be refined from the coca plant (Inaba 100). Under the Controlled Substances Act, cocaine is also a Schedule II drug (FDA). According to the National Institute on Drug Abuse (NIH), cocaine can be injected, snorted, and smoked, each with singular, harmful effects. The severity of cocaine depends on how fast the drug reaches the bloodstream. The DEA states one who uses cocaine will experience insomnia, loss of appetite, and a synthetic state of euphoria since it harms dopamine receptors in the reward pathway. Where methamphetamine is altered and prescribed for limited use, cocaine is not, however. On the contrary, if mixed in a hydrochloric acid mixture, it can be used as an anesthetic. With that, however, cocaine is rarely used in the United States as medication agent.

Comparing methamphetamine to cocaine, cocaine is actually safer to use. Major effects of cocaine only lasts for about 40 minutes whereas methamphetamine can last up to 6 hours. Furthermore, those who take methamphetamine are more likely to be addicted to the drug than to those who use cocaine (Inaba 114). A survey compiled by NIH showed that from 2008-2009, 10th graders who used cocaine decreased from 1.2 to .9 percent. This is an important statistic, especially what we have discussed in class recently. We have been deliberating the vitality to not allow adolescents do drugs. At this age, the brain is undergoing a second alteration, not only in the chemistry aspect but the biology as well. The brain is developing new ways for the pathways to connect at a faster rate. We are finding different yet sufficient functions the brain is unfolding, thus the importance to not allow kids to do drugs at this age. When a teenager starts drugs at a young age, the drugs will harm the brain thus becoming more addicted to the drug.

In the end though, I do think that cocaine should remain illegal for recreational use. It would be too risky to follow the footsteps of marijuana with cocaine. Being similar to methamphetamine in terms of side effects, and its severity, it would not be safe to have it promoted to the public. If the government had the power to process, manufacture, and sell cocaine at their price and demand though, we could possibly see an increase on our economy.

On the contrary, however, top doctor Sir Ian Gilmore strongly suggests that cocaine should be legal. He believes “…total prohibition of drugs, making them totally illicit and unavailable, has not been successful at reducing not only the health burden, but also the impact on crime.” Furthermore, he also suggests that “[T]here should be a ‘regulatory framework around illicit drugs, rather than a blanket prohibition’” (Kircup). With the war on drugs, it so seems that the users feel attacked by the government. I can see why the addicted users would want to cheat the system if I felt belittled by my own government.

Before anything can change, I think we all need to take a step back and reflect on oneself and ask, “Who’s really to blame?” Especially with the war on drugs, addicted drug users are more apt to point the finger than to admit for one’s action. Because the user is so dependent on the drug, that is all he or she is living for at that point. It is depressing to notice how badly our nation has become due to those who need to desperately use drugs. To that, I feel there’s a definite impasse when it comes to regulating drugs, whether the public has the right to use it recreationally, or the government having complete control over used-to-be illicit drug. It does not matter what it is, we are bound to become addicted to it, and unfortunately, most of people’s addictions derive from the drugs they used when first tested long ago at a young age. Will the war on drugs ever end, or will government control on future illicit drugs only make matters worse?

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