



What are we to do about LSD—that appalling menace hanging over the young people of today? Here is what a medical authority has to tell us.

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The Dangers of the Drug Called LSD

IT WILL BE NO NEWS to those who read the daily papers that a new and serious threat to the physical, mental, and moral health of their teenage sons and daughters has been added to the dangers already imposed by marijuana, "pep pills," and barbiturates. Like these earlier menaces, its hazards are concealed from the fringe of frustrated, disturbed, or merely impetuous adolescents who are the chief experimenters with LSD.

Like its predecessors, too, LSD is attractive to young people because it offers them "kicks" and makes them feel adventurous and daring. Unlike its predecessors, LSD is not habit forming. This fact entices the young into the trap of believing that there is less danger in its use than in taking aspirin or alcohol or riding in a motor car. Yet its nefarious effects outrun those of all the earlier dangers.

LSD—lysergic acid diethylamide—is a drug whose unbridled use can result in catastrophe almost beyond imagining, and a national crusade of the proportions of an avalanche is needed to control it.

Parents and teachers can be extremely helpful in launching such a crusade and pursuing it until the threat to youth is eradicated. The more our readers learn about the danger, the deeper their interest and involvement must become.

LSD has been known to chemists, doctors, and pharmacists since 1943. Long before that, ergot, a parasitic fungus (smut), which grows between kernels of rye, was used as a valuable drug. LSD was originally made from ergot. Now it can be made synthetically, at much lower cost and in huge amounts. Only one reputable firm was granted the right to market LSD, but reports of its harmful effects on many persons increased so rapidly that LSD was removed from the legitimate market.

What is known about LSD?

A number of clinical investigations have been reported. In 1960 Dr. Harold Abramson edited a book, *Use of LSD in Psychiatric Therapy*, published by the Josiah Macy Foundation. On September 14, 1963, Dr. Dana L. Farnsworth, director of health service at Harvard University, wrote a two-page editorial that appeared in the *Journal of the American Medical Association*: "Hallucinogenic Agents."

As a warning to physicians everywhere, Dr. Farnsworth stressed the possible dangers of all hallucination-producing agents, the chief of which is LSD. "People who have tried them were most likely to be harmed by

them," he said. "Recent clinical studies suggest that the people who are attracted have had difficulty dealing with reality." Looking for an escape from their inner conflicts, they see in drugs a quick and easy way of solving them.

Dr. Farnsworth's experience with LSD patients demonstrates beyond doubt that the drug has the power to damage the individual psyche, perhaps cripple it for life. His warnings to physicians have proved true. Victims' narratives in magazine and newspaper articles tell of the agonies they suffered in their search for "kicks."

LSD promoters claim that the drug "expands consciousness," offers the taker new insights and new intellectual powers, and helps him to solve his personal problems through a "spiritual enlargement" that makes the mind free to reach beyond its usual powers of perception.

Combine such claims with the assurance that the drug is not habit forming, and it is not difficult to understand the fascination LSD exerts on many young people, especially those of college age. Sociability is a key reason for LSD promotion. It is often taken at house parties and other youthful gatherings.

Leading psychiatrists have warned us that the harmful effects are ob-

vious and sometimes immediate; a single dose has been known to produce them. It is impossible to foretell which persons in a group will first suffer harmful effects, or the amount of LSD required to cause them.

What are the symptoms?

The taking of LSD is a premeditated act. Before a novice swallows his initial dose, he usually seeks the confidence of a close and trusted friend. Within an hour after taking an average dose, the victim may be crouching on the floor, usually in a corner. Huddling there for six hours or longer is safer than lying on a couch or a bed because he is less likely to suffer bodily injury.

A writer recently called the profoundest effect of LSD a period of "oblivious withdrawal." Grotesque visions, it has been reported, flit through the mind. The victim stares vacantly at some trivial object or merely into space. The pupils of his eyes become dilated; his sleep is disturbed. He may remain limp for days—apathetic, indifferent.

Involuntary hallucinations may continue for a week or longer, even though no further dose of LSD has been taken. It is easy to see why some LSD victims drop out of school or college.

What about overdoses?

When an overdose is taken, the attending friend may well become alarmed. Through nausea and vomiting the victim's body attempts to eliminate the poison. He may perspire profusely. Fear sets in, and the friend may have to take him to the nearest clinic or hospital. There, as a rule, his pulse, blood pressure, and blood sugar levels are found to be elevated. If a victim's mental derangement continues, transfer to a mental hospital or asylum is not unusual.

How prevalent is the LSD habit?

The extent to which this vice has grown is difficult to estimate, mainly because LSD is being made unlawfully in bootleg laboratories scattered through the U.S. and is also smuggled in from abroad. All transactions—laboratory procedures, distribution, sales, and the identity of consumers—are shrouded in secrecy.

A popular writer recently tried to delve into this phase of the problem. He ventured to estimate that in 1966 *probably more than a million doses of LSD alone would change hands*, passing from "peddler" or "pusher" to users. The profits are large—from three to five dollars a dose—but the thrill seeker is willing to pay the price and take the chance.

Another widely read writer, who studied the problem from another angle, expressed the opinion that about a third of our college youth have taken at least one dose of LSD. Others question this. Fortunately most of our adolescents have the dignity and will power to resist such temptations.

How do young people get the drug?

Up to now this has been relatively easy. Friends, usually "experienced" classmates, know peddlers or pushers and also the haunts and the hideaways they frequent. One tells another, and the successors "pass it on."

What is being done to stop this vicious traffic?

Dr. James L. Goddard, the Commissioner of the U.S. Food and Drug Administration, has cautioned more than two thousand college and university administrators about the marked increase in illegal use of LSD and allied poisons, stating emphatically that we are faced with a most hazardous situation.

Said Dr. Goddard, "There is direct evidence of widespread availability of a number of drugs which have profound effects on the mental process." When he was questioned about whether LSD "expands" the mind, he answered, "That is the bunk. LSD is an extremely dangerous drug that can precipitate serious psychologic illness, or even suicide."

Dr. Goddard's department has set up a school at the University of California to train special investigators for undercover work. Two classes have already been graduated, and sixty more men are currently in training. California's Governor Pat Brown has said he acted because of evidence showing that this colorless, tasteless, and odorless drug, LSD, poses a growing threat to society, and particularly to young thrill seekers who are unaware of the damage it can do. California's police found its use rapidly spreading among college and high school students.

In New York the LSD problem was discussed at a recent conference of local, state, and federal law-enforcement and public health officials. It has been made a felony to distribute LSD; peddlers and pushers get tough penalties when they are caught. None of them seem to care about the harm they cause. *Their sole interest is the enormous profit to themselves.*

New York, California, and Nevada have enacted special laws against the manufacture, transportation, sale, and possession of LSD. Other states will doubtless soon follow. Only the use of the drug for investigational purposes by qualified persons or institutions is excepted. Such dangerous drugs require strict enforcement of stringent laws to prevent underground traffic.

The AMA's Council on Mental Health urges everyone to be on the alert in his own community to report to the local police when traffic in, or use of, LSD is suspected. This implies equal watchfulness by parents and teachers.

Next month Dr. Sauer answers questions about allergies, tranquilizers for hyperactive youngsters, and children's headaches.