

May 16, 1970

Mr. Max Singer  
Hudson Institute  
Croton-on-Hudson, N.Y.

Dear Max,

I have read the "First Draft of Final Report", dated May 1, 1970 with interest, enthusiasm and some eventual disappointment. Interest, because the report is well-written and some expressions (such as the need for better enforcement against heroin) are clearly stated. Enthusiasm, because I know the problem is urgent and any thoughtful approach should be listened to with care. Disappointment, because I find the medical aspects treated tritely, even diffidently, and with an immaturity that casts doubt on the value of the effort. Perhaps my original doubts are re-enforced by this report. Let me give you a few examples.

*"Moreover, physical damage from even protracted use of heroin is rarely serious or irreversible." (pg 16, par. 1); and, "Current addiction . . . . is a disease one can treat, and in most cases is not terribly serious even if untreated." (pg 19, par. 2). What fatuous comments! Death is irreversible, and death is an ever-present aspect of opiate dependence. So is liver dysfunction and heart disease and post-traumatic brain disease. Your views of opiate dependence are the views of the upper classes who rarely saw the dangers of syphilis or tuberculosis, diseases of 'those other people', and therefore could say that they were unimportant-- until it affected their children. Heroin addiction is a serious, fatal disease, especially among the young.*

*"It seems likely that many or most of those who take up heroin are weak or immature personalities, perhaps psychologically dependent types. It also seems likely that the addiction experience strongly reinforces the tendency toward immaturity, weakening the character of those who might have been stronger when they began." (pg 19, par 1). There is no evidence for these views, and they are equally fatuous. How does it help to see the ill as "psychologically weak" except to assert your own superiority. I suppose it makes you feel better, for after all, you are not addicted, therefore you must be 'strong' or have a 'mature personality'. Come off it, Mr. Jack Armstrong, All-American Nixon hero.*

There is more. I am disappointed that we know so much that more research is not needed. I am delighted that there is little danger of methadone spillage, especially if the delivery system is computerized.

It is valuable to know that a methadone delivery system can be self-supporting, and indeed could eventually replace off-track betting as a source of state revenues.

There is some hope in the future, I am glad to see. Remind me to have faith in the democratic process, if it does work.

My thanks for sharing this preliminary report, and I am sure you will appreciate the candor.

My best regards.

Sincerely yours,

Max Fink, M.D.  
Professor of Psychiatry

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P.S. The Truitt position paper on legalization of marijuana is equally trite and superficial. The issue is not the medical data on marijuana, where I agree we need more information, and we are participating in obtaining the necessary data. The present crisis is the disparity between the severity of the legal penalties for marijuana use and possession and the complete lack of evidence of any harm from occasional use (or the harsh comparison with alcohol use and its prominent medical complications). The political issue is in a relaxation of legal penalties for marijuana use and the clear separation of its relative safety with the severe harm of the opiates.