

J. Letters

June 20, 1979

Judith H. Quattlebaum
President and Executive Director
National Committee on the Treatment
of Intractable Pain
P.O. Box 34571
Washington, D.C. 20034

Dear Mrs. Quattlebaum,

My experience with opioids is limited to experimental studies of the central effects of heroin, methadone and levomethadyl, and their antagonists, naloxone and cyclazocine. These studies were done between 1966 and 1972, at the New York Medical College. Some reprints derived from these studies are attached. It is not clear to me how these experiences, which are focussed on EEG, pupillary response, heart rate, respiration and mood, would be helpful to your mission.

In our experience, we did find that intravenous heroin could produce a seizure. This effect could be blocked by naloxone. We also found that tolerance to methadone and levomethadyl developed rapidly (4-14 days), as did tolerance to the agonist (opioid) effects of cyclazocine.

We concluded that the narcotic antagonists could be a useful therapy of opioid dependence, if drug delivery could be assured; but came to no conclusions regarding the usefulness of heroin.

As to your specific questions:

1. Evidence of heroin effects. See reports.
2. No special knowledge.
- 3, 4, 5. Not studied.
6. Not as therapy; only as a "challenge" to determine activity of antagonists.
7. No.

8. I could testify to the experience noted in the references. Scheduling a drug is an administrative and political act, not medical. Nothing in our experience would suggest that heroin is uniquely different from other opioids, except in rate of entry to the brain and in half-life. The present restrictions are not based on the pharmacology of heroin; but on political considerations. Similarly, the suggestions that heroin is a "uniquely" more effective analgesic than other opioids, is not clearly proven.
9. No.
10. Probably not.
11. Only by history, and my own experience from 1966-1967.

You may wish to write also to Dr. John Kramer (University of California at Irvine) and Dr. Arthur Zaks (971 Madison Ave., N.E.C.), who have extensive experience and knowledge of the pharmacology and history of heroin use.

I trust these reports are of some help.

Sincerely yours,

Max Fink, M.D.
Professor of Psychiatry

MF:bc
Att.