

November 22nd, 1972

Congressman Paul Rogers,
U.S. Congress,
Washington, D.C.

Dear Mr. Rogers,

Since our discussion more than a year ago, the goal of general methadone delivery for our nation has progressed with great rapidity. The journals speak of 50,000 patients now in treatment in the nation, with treatment (with methadone) without delay available to every addict, so that crimes will no longer be necessary.

Enclosed is a flyer I received from a mailing to all physicians in the city.

When we last spoke, I expressed some optimism that the narcotic antagonists may provide some assistance, and you assured me that the (then) forthcoming bill would provide funds for the effort. And indeed, the bill supported research specifically in the narcotic antagonists.

Enclosed is our latest report. It suggests to us that success with cyclazocine is more feasible than generally acknowledged.

I am writing to express some disappointment with the national effort. The push to methadone has led (as was predicted) to freely available methadone, primary methadone addiction, methadone deaths, and a methadone illicit market. A small impediment to this spread, the suggested use of levomethadyl, is faltering because the F.D.A., N.I.M.H. and S.A.O.D.A.P., fearful of changing the rules again (having done so for methadone) are using administrative caution ("red tape") to delay studies in man until animal studies can be completed.

But most disconcerting is a continued bad press for cyclazocine; an optimism about naltrexone (EN1639) - a drug as yet unavailable for clinical trial; and the incessant push to methadone.

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When we last met, you were concerned that the position of the laboratory at New York Medical College was partisan, and that our opinions were clouded by an unconscious desire to see "our" therapy tested. We have waited and watched the new scene for more than a year, and regretfully, embarked on this communication.

Perhaps the time will soon be appropriate for a review of the first year of the drug abuse bill of 1971, with a focus on some questions such as:

What is the rate of new cases into methadone? What is the state of the illicit market? The number of primary methadone addictions, and deaths due to opiates?

What, indeed, is the status of levomethadyl and are the trials truly being expedited?

What is the N.I.M.H. - S.A.O.D.A.P. program for antagonists? And is the Congress satisfied with this program?

As ever,

Yours sincerely,

Max Fink, M.D.
Professor of Psychiatry

MF/ij

Enc.

cc. to Senator Jacob Javits
Rep. Lester Woolf
Senator Harold Hughes