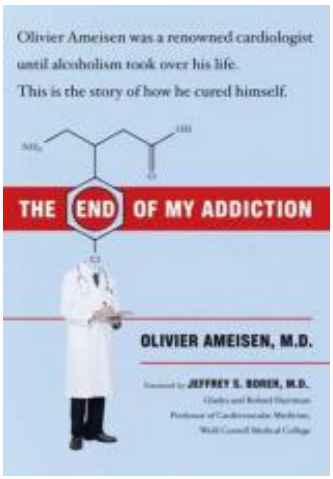
The End of My Addiction

by Olivier Ameisen, M.D.



About the Book

The End of My Addiction is both a riveting personal memoir of battling addiction and the inspiring scientific saga of an extraordinary physician who bravely used himself as a guinea pig to find an effective medication for this deadly disease --- and then shed his anonymity as a physician with addiction and campaigned against all odds to bring this breakthrough treatment, which produces complete, rapid, and effortless freedom from addiction, to the attention of a dogmatic medical establishment. Astonishingly, the medication he found, baclofen, has been hiding in plain sight of the addiction treatment community for years. Yet despite baclofen?s sterling safety record and compelling evidence of its effectiveness, most addiction specialists and researchers continue to ignore it.

The first book to combine the personal experience of addiction with the science of addiction, and the first to bring the healing potential of baclofen to the public at large, **The End of My Addiction** is also a compassionate call to action that could herald the end of addiction for tens of millions of people with this disease, until now deadly and irreversible.

Discussion Guide

1. The book?s narrative weaves together a personal and a scientific story. Did you find the combination of these elements effective and compelling? What was the most powerful personal moment in the book for you? What part of the science of addiction most intrigued you?

2. The book reports that 1 in 4 U.S. deaths is caused by alcohol, tobacco, or illegal drugs, and observes that addiction to nicotine is the single biggest cause of cancer. Were you aware that addiction is such a huge public health problem? Would you support changing public health priorities to provide more funding for addiction research and treatment?

3. The rates of alcoholism and illegal substance dependence among physicians equal those in the general population. Based on what you?ve read in the book, do you think medical and governmental authorities are taking the right measures

to identify and treat physicians with substance-dependence problems, in order to help them and safeguard the public?

4. Dr. Ameisen describes how the moral stigma of addiction pervades our society, despite overwhelming evidence that addiction is a biological disease that manifests itself in imbalanced neurotransmission in the brain. Studies cited in the book also show that the likeliest explanation for vulnerability to addiction is a preexisting imbalance in neurotransmission associated with chronic anxiety and depression, post-traumatic stress disorder, or related problems. Before reading the book, were you inclined to see addiction as a failure of moral character or self-control? Has reading it changed your view of addiction and those who suffer from it?

5. Dr. Ameisen explores the possibility that his mother?s traumatic experiences as a Holocaust survivor may have predisposed him to chronic anxiety and thus made him vulnerable to addiction. Have you observed similar patterns in your own family or in friends? families?

6. Addiction has both direct and indirect victims- --- not only alcoholics and other addicts, but also their families, loved ones, and friends. Has the book deepened your understanding of how the disease drives a wedge between the people who suffer from it and those around them? After reading it, do you feel any better equipped to reach out to a friend, relative, or coworker who is struggling with substance dependence?

7. As the book explains, studies show that people with anxiety, depression, and post-traumatic stress disorder or with so-called nondrug addictions --- gambling addiction, binge eating, sex addiction, and compulsive shopping, among others --- have the same imbalanced neurotransmission as people with drug addictions. Given this shared pattern, does it seem reasonable that a single medication might be effective against all these problems?

8. The history of medicine reveals that whenever medicine has lacked an effective treatment for an illness, it has blamed the patient for supposed immorality or a lack of positive attitude and willpower. Were you surprised to read in the book that victims of tuberculosis and cancer were once seen in this way? What can each of us do to change the way addiction is viewed by society?

9. The book reports studies documenting that doctors most often miss the signs of addiction in their patients, and even change the subject when patients bring it up. What should be done to encourage honest discussion between doctors and patients about addiction?

10. Serendipity --- a lucky break --- made Dr. Ameisen aware of baclofen, and many other important medical and scientific breakthroughs have depended on chance. Has luck ever played such a dramatic role in your own life? Do you think medical and scientific authorities are as open to serendipity as they should be?

11. When Dr. Ameisen first heard about baclofen and began self-experimenting with it, he did not know how safe it was. What do you think of his decision, as a patient and a physician, to prescribe himself baclofen?

12. After baclofen ended Dr. Ameisen?s craving for alcohol and completely freed him from addiction, he was astonished to learn that neurologists have safely used high doses of baclofen for comfort care of patients with muscular spasms and similar problems since the 1960s, but that largely because of the specialization of modern medicine, addiction researchers and caregivers did not know anything about this. What should medical authorities and organizations do to encourage doctors in different fields to learn from one another?

13. Baclofen has been documented to be non-euphoric and nonaddictive. Do you agree with Dr. Ameisen that taking baclofen for addiction should be seen in the same way as taking a medication for any chronic condition, such as a beta-blocker for high blood pressure?

14. Before he found baclofen, Dr. Ameisen tried every available form of treatment for alcoholism. But as the book discusses, the existing treatments are not enough on their own to help the vast majority of alcoholics and other addicts to quit. Given the extremely high failure rate of existing treatments, and in light of baclofen?s excellent safety record and documented effectiveness in both animals and humans, do you think addiction specialists? resistance to prescribing baclofen is reasonable?

15. Following Dr. Ameisen?s example and treatment protocol, some other physicians are already prescribing baclofen to alcoholics and other addicts. Is this a good thing, or should more studies be done first?

16. The usual medications for addiction --- disulfiram, naltrexone, acamprosate, topiramate, and varenicline --- have shown only limited benefit in repeated trials, and all except acamprosate can have serious side effects. What do you think of pharmaceutical companies that continue to push these medications, and of doctors who continue to prescribe them? What is your reaction to seeing advertisements for these medications?

17. Prescribing baclofen for addiction is an ?off-label? use. Before reading the book, did you know that more than 23 percent of all prescriptions are off-label? Has a physician ever advised you that he or she is prescribing something to you or a family member off-label?

18. A randomized clinical trial of baclofen for addiction would cost about $500,000. Because baclofen is out of patent and has been available as a generic prescription medication since the 1980s, no pharmaceutical company has a financial incentive to fund such a trial. Given the enormous cost to society of treating substance abuse --- alcohol abuse?related costs have been estimated at $200 billion a year in the U.S. alone --- should government step in to fund randomized clinical trials of baclofen?

19. Dr. Ameisen observes that AIDS activists had a decisive influence on changing AIDS treatment to incorporate lifesaving medications, and he calls on patients, their families, and concerned physicians to lobby for clinical trials of baclofen for addiction. How much influence do you feel patients with addiction and their advocates should have on the direction of medical research and treatment?

20. A bill is pending in Congress to change the name of the National Institute on Drug Abuse to the National Institute on Diseases of Addiction and the name of the National Institute on Alcohol Abuse and Alcoholism to the National Institute on Alcohol Disorders and Health. As the book discusses, many scientists and physicians support this as part of the new understanding of addiction as a biological disease, but others criticize it as diminishing the importance of personal responsibility in recovery from addiction. Before reading the book, would you have supported the name changes? Has

reading the book changed your opinion?

Author Bio

Olivier Ameisen, M.D., was once the personal physician of the prime minister of France. He came to the United States to join the prestigious cardiology team at New York Hospital and Cornell University. He currently lives in Paris.

Critical Praise

"This book is the riveting story of a sensitive and talented doctor whose life lapses into alcoholism. It is also the story of the dazzling discovery of a cure that could soon be within reach of all. If you or someone close to you suffers from alcoholism or drug dependence, you must read this book."

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