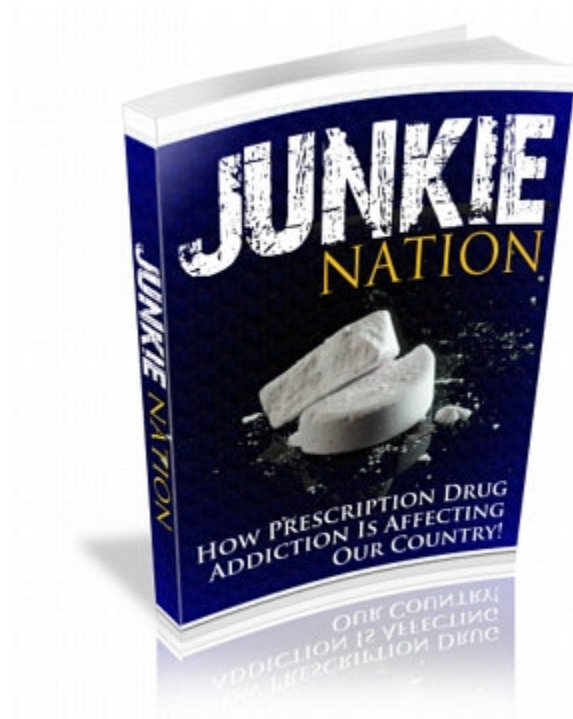


Junkie Nation!

How Prescription Drug Addiction Is Affecting Our
Country



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Table of Contents

[Chapter 1 – The Family Doctor Of Yesteryear](#).....

[Chapter 2 - Anti Depressants](#).....

[Chapter 3 – Shanna's Story](#).....

[Chapter 4 – The Pain Game](#).....

[Chapter 5 – Dave's Story](#).....

[Chapter 6 – Anxiety And Stress](#).....

[Chapter 7 – Michelle's Story](#).....

[Chapter 8 – Life Without Addiction](#).....

Chapter 1 – The Family Doctor Of Yesteryear

Years ago, the family doctor could always be spotted by his black bag. He was almost always a “he,” too. Rare were women doctors, although some did exist. For the most part, however, the family doctor was an older man with a kindly smile, a stethoscope and a black bag.

You would call the family doctor and he would arrange for an appointment. In some cases, he had a nurse who answered the phone for him. When you went to visit the family doctor, who today is called a “general practitioner,” you would be brought into an examination room, examined and then brought into a consultation room and told what was wrong with you. At this point, if it was needed, a doctor would prescribe medicine.

In some cases, the doctor would come to the house. This was especially common when it was young children who were sick, but house calls were not uncommon at all for doctors as early as the mid 1960s. The doctor would bring his black bag and check you out. In many cases, a shot of penicillin was the remedy of the day. And it worked.. One shot of penicillin and a child was usually feeling much better.

You paid the doctor in cash for his services. He would sometimes wait for the money if someone was out of work. The family doctor of yesteryear believed in the Hippocratic Oath that he took and although he made a good amount of money, his primary concern was caring for his patients. If you had an ailment that the family doctor could not

diagnose, he sent you to a specialist.

The family doctor of yesteryear still exists, but he and she is a dying breed. There are still many doctors out there who put the welfare of their patients first and foremost. Other doctors are concerned only with making as much money as possible. The majority of doctors, however, are scared to death of making a mistake and being sued and, as a result, do everything by the book. Especially when it comes to prescribing medication.

If you went to a doctor years ago and told him that you were feeling anxious, for example, the doctor would probably ask you what was causing your anxiety. He or she would try to calm you down and tell you some simple things you could do to relieve your tension. Most doctors would recommend exercise. If you were worried about your health, the doctor would be reassuring.

Occasionally, a doctor would prescribe a medication. There were medications years ago. Most people didn't know too much about them. They weren't advertised on television. But you knew if the doctor prescribed it for you, it had to be okay. People years ago were brought up to trust doctors and believe anything that they told us.

Anyone who is over the age of 40 remembers family doctors of yesteryear. They may or may not remember house calls, but they most likely remember the care a doctor took in examining a patient, a nurse with a white uniform and regulation shoes and a stethoscope hanging around the neck of the doctor.

Many people can think back to a time when medications were not advertised so prevalently on television. It seems as if every time you turn around today, there is a new medication for a different ailment. These are touted by pharmaceutical companies that pay for the advertising. What many people don't know is that the pharmaceutical companies are not content with trusting you to ask for this prescription the next time you go to the doctor. They want to make sure that your doctor knows about the drug as well. So they send a representative to the doctor's office to meet with him to make sure he knows how wonderful the drugs are.

Doctors read trade magazines and also keep up to date with the FDA and recently approved drugs. Some doctors are hesitant about prescribing certain medications that they feel may be detrimental. Years ago, most doctors would not prescribe Valium, which is a common, but rather old, anti-anxiety drug. We say "anti-anxiety drug" now because it sounds better than what Valium really is, which is a tranquilizer. Doctors felt that Valium was, like all tranquilizers, too addictive for patients and did not prescribe this medication. Patients didn't know about it because it wasn't advertised on television ever few minutes. As a result, only those suffering from severe anxiety were prescribed tranquilizers.

Other medications worked the same way. Doctors would always read the side effects and know which medications interacted with others and what not to prescribe.

Doctors of yesteryear got to know you as a patient and you go to know them. They would make small talk with you when they came into the

room. They took their time with you and made sure you left the office feeling better than when you went in. If you were the type of person who suffered from anxiety or depression, you often felt better just talking to the family doctor, even though he was not a licensed psychiatrist.

Say goodbye to the family doctor of yesteryear. He is no more. There are a few around, but they are dying a slow death. This is not their fault. Doctors are not evil people by nature and contrary to popular belief, want to be able to help people. They have a profession that is slowly being strangled by two formidable forces - the trial attorney lobby and the powerful pharmaceutical companies.

The pharmaceutical companies have a powerful lobby. It used to take the FDA forever and a day to approve drugs for use. Today, medications are getting passed through the ranks with lightening speed. If you think that medication in the United States is safer because it has been tested, think again. The "tests" that are run are usually done by the company and are based on the results of 500 or so people. Sometimes more and sometimes less. Long term effects of drugs like Zoloft, a popular anti-depressant, are not known. The drugs simply haven't been around that long in order to be studied for any period of time.

In addition to bullying the FDA, the pharmaceutical companies are also targeting the American public with countless advertisements. They know the power of advertising and that patients are becoming much more opinionated when it comes to their medical care. Patients hear often about the mistakes that doctors make and that they shouldn't be

trusted. It is up to each individual to make sure that he or she trusts only themselves and makes their own decisions regarding their medical care. The doctor? He or she is just the middleman between you and the drugs that you saw advertised on television that will give you everything you need, right away.

Another profession that seems to have helped the demise of the family doctor of yesteryear is the legal profession. Quick to jump on the bandwagon to initiate a lawsuit against any doctor for any error he or she may make. Doctors are not God. When you visit a doctor, you are paying for his or her opinion, according to what they have learned. Every once in a while, an illness can fool them. This does not happen often.

There was a young man who was told by a team of doctors at a hospital that he had Lymphoma. He had all the symptoms and initial tests indicated that he had this form of cancer. He was told the diagnosis. The next day, another doctor looked at the tests as a precautionary measure and found that he did not have Lymphoma, but a rare condition that mirrored this disease. They did a few more tests and the next day, the young man was told he did not have Lymphoma. He had something that was easily treated and was not cancer.

Instead of being relieved, the young man headed to the attorney's office upon release and sued the hospital, doctors, nurses and laboratory technicians. Although he had not been treated for Lymphoma and this diagnosis was only made for one day, and the hospital followed up with a second opinion, the young man won several million dollars in a lawsuit. Many people wondered if he was

disappointed that he didn't have the cancer.

Although the American Medical Association is pushing for tort reform, trial lawyers have a very formidable lobby. While medical malpractice caps are being placed on awards in certain states, there is a long way to go. While doctors and everyone else should be held accountable for their actions, the legal profession needs to stop looking at doctors and hospitals as instant lottery tickets.

The legal profession and pharmaceutical companies are not really that powerful. They need something in order to succeed and that is clients. And the clients they need are the American People.

Many American lament the loss of the family doctor from yesteryear. They complain that the physicians do not spend enough time with them when they visit the office. They blame the doctor for issuing prescriptions to addictive substances. Many people think doctors get a "kickback" from the pharmaceutical companies.

Doctors do not get a "kickback." They issue prescriptions because the American people want an instant cure. The drugs they offer have been approved by the FDA. They are simply following orders - yours. If you go to the doctor for anxiety and he or she refuses to give you anything, when there is medication approved by the FDA and on the market, and you end up jumping out a window - what happens to the doctor?

He or she gets sued for refusing to treat you with the proper medication. A doctor who prescribes pain medication or other

prescription drugs that might have adverse side effects is merely giving the patient what they want and following protocol.

Very few doctors will offer a patient advice such as "exercise" or "take vitamins" anymore when they talk about depression or anxiety. Years ago, doctors would offer this sound advice and it would work. But today, people want instant cures and the protocol is to prescribe medication.

Are you in pain? You need to have pain medication. Treating pain with anything other than pain medication is against protocol for a medical doctor. No medical doctor will tell you any alternative means for preventing pain because it is against "the rules." They are simply following protocol because if they don't, they can get sued.

If you don't like it that your doctor never has any time to talk to you when you visit him or her and appears rushed, it is because he or she is. They have to see a certain amount of patients a day in order to cover the ever rising cost of malpractice insurance. Many doctors, especially in the obstetrics profession, have even abandoned their practices in certain states or counties that do not have caps on malpractice insurance because it does not pay for them to practice in this field any longer.

Prescription drugs have hit our lives in a big way. While years ago we knew very little about different names of medications, today people know these names off the top of their head. Drugs are advertised on television and even available on the internet. The protocol in the medical profession is to prescribe these drugs to patients complaining

of symptoms, despite the fact that some of them are highly addictive or have adverse withdrawal effects. The four most common conditions for which addictive prescription drugs are prescribed are pain, insomnia, depression and anxiety. In many cases, all of these go hand in hand.

Actor Heath Ledger is the most recent casualty of prescription drug abuse. The actor was found dead in his apartment after mixing pain medications with anti depressants and anti anxiety pills. Sleeping pills were also involved. He is the latest in a string of celebrities who met their death by prescription drugs. A year before the death of the 28 year old actor, Anna Nicole Smith ended up dying from an overdose of prescription drugs a month after the death of her 20 year old son, also from a lethal mixture of anti depressants and anti anxiety medications.

The death of Heath Ledger at such a young age drew criticism of the pharmaceutical companies for about two minutes, but was quickly dismissed. Many people felt that Ledger "deserved" to die because of his own abuse of the drugs that he was prescribed. These people obviously have never taken these drugs and have no idea how they interact with your body.

The purpose of this book is to make you aware of what is going on in the medical profession with regard to the ever increasing pushing of prescription drugs, many of which are highly addictive and have severe withdrawal consequences. It is tempting to just blame doctors for "pushing" these drugs, but the entire situation is not their fault. Instead, the fault lies within ourselves. In our zest for instant relief from any problem, we have opened the floodgates for pharmaceutical

companies to use us as guinea pigs for the latest different drugs that they can conjure up to relieve us from our woes.

Because we live in a society based on greed, we have run to lawyers at the slightest provocation whenever something went wrong at the doctor's office, despite the fact that we know they are human and that all human beings are prone to error. We have sat in on juries that awarded millions of dollars for "duress" because a patient felt that for one day, he had Lymphoma.

This book will talk about addictive prescription drugs, why they are prescribed, alternative ways to treat the conditions and how you can withdraw from these drugs safely. We will use examples of real life people who fell into the abyss of prescription drug addiction but were lucky enough to make it out alive.

This book is not meant to deride the medical profession or even the pharmaceutical companies. As a result of their hard work, we have seen medications that allow us to not only cure certain diseases that were once a death sentence, but also allow us to live longer and more productive lives. The medical field is full of doctors who care tremendously about the welfare of their patients and the pharmaceutical companies employ research doctors who put a tremendous amount of effort into working to find cures for disease who make a fraction of the money that those in private practice make. Medical science is a modern miracle in many cases. And doctors are lifesavers. However, our constant quest for the instant cure for minor problems is causing problems in our society that will probably get worse before they get better. This book is intended to discuss those

problems.

Chapter 2 - Anti Depressants

Anti Depressants are sometimes called SSRIs. This stands for selective serotonin reuptake inhibitor. A theory regarding depression is that a person has a chemical imbalance in their brain and that their brain is not producing enough serotonin, which is causing them to be depressed. The drugs that are given for depression include Zoloft, Wellbutrin, Paxil and Buspar. All work essentially the same to alleviate the effects of depression and give a person a "boost."

Zoloft is the most commonly prescribed of all anti-depressants with the starting dosage usually at about 50 milligrams. The maximum dosage is 200 milligrams. The side effects when beginning Zoloft vary from person to person but they include:

- Vivid dreams
- Lethargy
- Dizziness
- Loss of Sexual Interest
- Night Sweats
- Dry mouth
- Nausea

As the symptoms begin to get into your bloodstream, the side effects subside. Some people cannot handle the side effects and asked to be switched to another medication. Severe reactions to Zoloft can include fainting, suicidal thoughts and rashes. If any of these problems occur,

you should cease taking the drug and consult your physician right away.

Zoloft is commonly prescribed for depression, whether it is mild or severe. Depression is a very common ailment in this day and age. It is really nothing new. Years ago, people got depressed as well. They usually ended up self medicating themselves by drinking or engaging in other detrimental behavior. Thirty years ago, people didn't talk about depression - it was something to be ashamed about. There was no medication for depression. If someone was despondent over the death of a loved one, they would be given tranquilizers, but little else. Counseling was also not very well accepted in our culture 30 years ago. Even today, if someone admits to going to a counselor, they are considered "imbalanced." Yet there are few people, if any, who cannot benefit from some sort of psychotherapy.

Freud believed that depression was the result of stifled creativity. This could be true as creative people tend to suffer with depression more than other individuals. The list of painters, artists and musicians who killed themselves is long.

Other theories about depression are that we have a fear of death. As we get older and closer to death, it tends to frighten us. Studies indicate that people who have faith have less of a fear of death and suffer less from depression. However, there are other theories that indicate that the religion or faith is merely the substitute for drinking or depression medication.

Over the past ten year, depression medication is big business. Go to

the doctor now and he or she will be only too glad to give you a prescription for Zoloft. Zoloft is the favored drug for depression. Paxil is favored for people who have Obsessive Compulsive Disorder, but tends to have more adverse side effects than Zoloft.

Depression is something that can be very serious. People who kill themselves are not happy go lucky types. Chances are very great that they are depressed. However, there is a difference between clinical depression and mild depression. There is also depression that results from a traumatic incident in your life, such as the death of a loved one.

Severe and chronic depression can be crippling. It is the number one cause of people being on disability in the United States. Severe depression interferes with the function of every day life. It makes life seem like it is not worth living. It can give a person suicidal tendencies. Many people who suffer from chronic and severe depression are pretty apparent in their actions. They are morbid and unhappy all of the time. The late writer, Dorothy Park, suffered from depression all of her life and attempted suicide on more than one occasion. It is said that her life was one long suicide note, although in the end she died of natural causes.

Virginia Wolfe also suffered from depression and some say also suffered from bi-polar disorder, which is another mental condition altogether. After struggling with her condition for years, she placed a bunch of rocks in her pocket and walked into a nearby river. Her body was not found for three days.

Famous writer Ernest Hemingway blew his brains out with a shotgun . He also suffered from depression. His granddaughter, Margaux Hemingway, also killed herself, adding to the theory that depression is an inherited disorder.

Clearly, people with chronic depression need help. It is cruel and unfair to say that these people can get better by doing Yoga. They truly are imbalanced and medication can actually help them from killing themselves or others, if they take it. Imagine if depression medication had been around in the days of Hemingway and Sylvia Plath, who also killed herself by gassing herself to death with the oven, as well as Virginia Wolfe. Perhaps these people would have produced even greater works of art.

However, not everyone who goes to the doctor needs to get anti depressants. Many people who go to the doctor for depression are suffering from either one of the following:

- Seasonal Affective Disorder
- Circumstantial Depression
- Mild Depression

Seasonal affective disorder was discovered as an ailment about 20 years ago. It was noticed that people tended to get more “depressed” in the winter months when there was no sun and that they ended up staying inside all of the time.

The winter months with the short days and long nights are depressing. Furthermore, there is evidence that people who work during the night

have a higher risk of getting cancer than those who work during the day. The jury is still out on whether depression brings on cancer, however.

Light therapy has been used to treat Seasonal Affective Disorder. This is also known as SADS. There is also something else that people can do, which is an antiquated notion, but they can take up an indoor hobby. Years ago, during the winter months, people took up hobbies that they practiced during these months. This actually gave them something to look forward to during those months when they were stuck in the house.

Unless you are Amish, you have electric light in your home and can still read and practice hobbies during the winter months when it tends to get dark earlier. Hobbies are a great way to stave off depression and develop a sense of order in your life.

People who run to the doctor, however, complaining of Seasonal Affective Disorder are often given anti depressants such as Zoloft to cure their "chemical balance," which still has yet to be proved. When the spring comes and it begins to get light, the people who were prescribed Zoloft and other SSRIs have the fun of getting off the drug. More will be discussed about withdrawal from these drugs and what to expect in later chapters.

Another reason why someone may get depressed is because of a particular circumstance. The death of a loved one, for example, will make anyone feel depressed. Losing a job or a chronic illness can also cause depression. These are all forms of circumstantial depression.

They will be alleviated in time and things will get better for the person who is undergoing this very trying period of his or her life.

Years ago, treatment for this type of depression was to make sure the person was surrounded by supportive friends and family members. People would often bake and cook for a family that lost a loved one, for example. Friends checked in on new widows. Sure, people got depressed, but they eventually, through the help of their friends and their own inner strength, went on with their lives.

The "cure" back then, was to keep busy. Sure the person felt depressed. But they got over it. There were times of discomfort, but they made it through.

People who lost their jobs often felt sorry for themselves for a while and then went out and got another job. End of story. Most people realized, 20 years ago, that when bad things happened they had a choice - they could get on with their lives or they could jump out a window. Most people chose life.

Mild depression strikes everyone from time to time, mostly women. Mild depression is thought to be hormonal and mostly strikes women in the menopause years as well as during the menstrual cycle. Unfortunately, this is due to hormone fluctuations. This is normal and part of nature. It is not a pleasant part of nature, but part of nature nonetheless. Somewhere along the line, people began to think that we shouldn't have to put up with this part of nature.

We shouldn't have to put up with feeling lonely after the loss of a

loved one. We shouldn't have to put up with feeling depressed in the winter and getting the winter blues. We shouldn't have to put up with going through menopause or peri menopause or even menstruation. We shouldn't, in short, have to put up with any sort of inconvenience.

Severe, chronic depression is no laughing matter. It does require medical treatment that involves the use of drugs as well as counseling. Unfortunately, only a psychiatrist is qualified to diagnose serious chronic depression.

People who have serious, chronic depression are a threat to themselves and, in some sad cases, others. They suffer from a feeling of despair, cannot function in their lives, cannot hold a job and have trouble with relationships. They often attempt suicide. Many of them actually succeed. They are suffering from severe mental illness that needs to be addressed and treated.

Someone whose girlfriend broke up with him is not suffering from severe chronic depression unless he has a mental illness to begin with. The depression is a symptom of the mental illness, not the other way around. The pharmaceutical companies with the help of the AMA have done their best to convince us that depression in itself is an illness. It is not. It is a symptom of a mental disorder.

The way that it works today, however, is that the person with serious, chronic depression is treated with the same drugs as someone who is upset because his girlfriend broke up with him or he lost his job. Or a woman who has the "blahs" over the winter blues. This is equivalent to someone with a cold being treated with chemotherapy.

Part of the blame lies on the medical profession who insist on treating people for mental disease even though they are not qualified to do so and the pharmaceutical company that keep promoting their drugs and pushing them on unsuspecting Americans. A good portion of the blame lies on our society, however, and their "I want it now" attitude when it comes to medicine. People want an instant pill to cure them, no matter what the consequences.

In some cases, other medications such as Wellbutrin or Paxil are prescribed to combat depression. Paxil is not technically an anti depressant and is more of a drug that is used to treat Obsessive Compulsive Disorder, which is a separate mental disorder that will also have the symptom of depression. Sometimes, a patient is given several different drugs before the right dosage is found.

Do they need the drugs? In the case of someone who is suffering from severe, chronic depression - yes. They also need counseling and to be seen by a psychiatrist. A psychiatrist is a medical doctor who can prescribe medicine. Although a psychiatrist will ask you how you are feeling, you do not usually talk to him or her for hours about your problems. They are more concerned with diagnosis and treatment. Seeing a psychiatrist is not like in the movies where you lie on a couch and talk about your mother. You will see a psychiatrist for a short period of time, talk how you are feeling and the doctor will prescribe medication. He will probably want to run tests on you to make sure there is nothing else wrong. Thyroid problems can also cause depression. Blood tests will probably be taken to make sure that you do not have any liver problems and that you are not on any illegal

drugs.

A psychiatrist will also want you to see a counselor. This is a person who can help you work through your depression and maybe get to the root of your problems. This is the couch person, although most of them do not use a couch. This can be a psychologist, a counselor, a therapist or an analyst. They are all pretty much the same type of person but adhere to different healing techniques.

The point we are getting at here is that your family doctor cannot really accurately prescribe severe, chronic depression that needs to be treated with mind altering drugs. This is like an Ears Nose and Throat doctor diagnosing skin cancer and proceeding to remove a mole. Yes, they are both medical doctors, but one is a specialist. If you are suffering from severe depression, you need to be referred to a psychiatrist. Soon. If you are threat to others or yourself, you will be hospitalized.

Once someone starts taking an SSRI, they can expect to undergo the side effects that are listed above. They will probably feel better at a later date after the depression lifts due to a change in circumstances, a new girlfriend, or just natural healing. It is at this point that the person decides to take themselves off this drug because they just don't feel like they need it anymore.

They will probably talk to the doctor about this and the doctor will admonish them for questioning them and tell the person that they need the drug because they have a chemical imbalance that is making them depressed. They will advise not getting off the SSRI. So the

person will take themselves off the drug themselves.

There are sites all over the internet about people withdrawing from anti-depressants and the horrors they endured. If you want to know what it feels like to be addicted to anti-depressants and then have to come off of them, read Shanna's story.

Chapter 3 - Shanna's Story

Shanna is 22 years old and went out with her high school boyfriend since she was 17 years old. Shanna assumed they would get married, as a matter of fact, they discussed marriage many times. She decided to go to school close to home to save money and also she could work full time. In the meantime, her boyfriend went to a college where he lived in a Fraternity.

Most weekends found the couple together as either her boyfriend would visit her or Shanna would go visit him. Things went well until her boyfriend suddenly became very busy and could not see her as often. At first, Shanna believed his stories. But at the urging of one of her friends, decided to take a trip down to his school and sure enough, he was with another girl.

This story happens over and over again. Both Shanna and her boyfriend were very young at the time they made their commitment. Yes, they loved one another but never really got to experience any other part of life. And despite their young love, the distance between them was too great to overcome temptation on the part of the boyfriend. Shanna was crushed. She felt her world was over and

didn't go to work for two days following this episode.

Her mother was concerned and took Shanna to her family doctor. She told him how Shanna had been acting and he immediately prescribed anti depressants. He started Shanna on 50 milligrams of Zoloft and advised her to seek counseling.

Shanna was embarrassed to go to a counselor, after all, she wasn't crazy. She used her friends as counselors and had one very good friend who she could call about this all of the time who listened about Shanna's heartbreak.

The pills were a different story. Shanna felt the pills would give her an instant cure. The minute she started taking the Zoloft, she experienced a few side effects. She had some really weird dreams and felt dizzy when taking the drug. There was a certain lethargy that accompanied the drug that made it easier for her to fall asleep some nights. She still cried over the loss of her boyfriend.

She had to see the doctor in two weeks to report on her progress. The day before the two week visit, Shanna heard through the grapevine that her boyfriend had now moved out of his fraternity and was living with this new girl. The wounds were opened again and she was a mess. The doctor upped the dosage to 100 milligrams a day. This is half of the maximum dosage for Zoloft, which is 200 milligrams a day.

Shanna began taking the pills regularly, hoping that they would help her overcome her depression. They did not seem to be working that well in curing her of depression. She still missed her boyfriend and the

life they were supposed to have, but then started going out with her friends. And a guy at work who always had his eye on Shanna asked her out.

Soon she was living again, and even though she missed her ex boyfriend on occasion, she was gradually getting on with her life. She decided to enroll in school full time. She didn't think she needed to take the Zoloft anymore, so she went to the doctor and told him her plan to discontinue the drug. The doctor advised her to stay on the drug during her transition back to school.

Once away at school, Shanna took Zoloft until she ran out of the prescription. Then she simply stopped taking the drug. The first day was fine, but after a few days of not having Zoloft in her system, she began to experience tremors, the feeling of electric shocks running up and down her body and lightheadedness.

Vivid dreams that seemed to be more like hallucinations kept her from feeling rested. She quickly renewed the prescription. She then sought the advice of another doctor closer to her school. This doctor suggested that she take Wellbutrin. This was his personal antidepressant of choice. Shanna stopped taking Zoloft and took Wellbutrin. She broke out in a rash. She went back to the doctor who told her she was probably allergic to the soap she was using. The rash got worse.

Finally, Shanna decided to go home. Her mother took her to their old family doctor who was retired. He took a look at Shanna, listened to her history of prescription drug use and diagnosed her rash as an

allergic reaction to Wellbutrin. He told her to stop taking the drug, which she did. She experienced tremors, vivid dreams and electric shocks, but not to the degree she did when she went off the Zoloft.

The family doctor monitored Shanna's blood pressure and also sent her in for some blood tests, which fortunately, came back fine. He advised exercise and a multi vitamin. He also advised her to return to school when she felt better, to study hard and join some activities.

Today, Shanna is still in school although she will graduate soon. She did take her doctor's advice and joined a few clubs. She kept in touch with her old friends at work and met some new friends. She get anxious sometimes over tests and depressed if she feels something isn't going quite right. But she talks it over with her friends and feels better. Keeping herself busy seems to stave off any sort of depression.

Shanna was a typical young woman whose world seemed to collapse when she found her high school sweetheart with another woman. She was depressed and understandably so. The world, as she knew it, collapsed. However, she was not clinically depressed. She was not severely depressed. She never felt like killing herself or others. She was simply unhappy because of a lost love.

Instead of prescribing an instant cure, her doctor would have been better to advise activity, counseling and forcing herself to keep busy. However, her doctor might have been found guilty of malpractice had he suggested these things and Shanna ended up killing herself. He would have been first in line to be sued because he didn't treat her

according to protocol.

Shanna did not need anti depressants and they played havoc on her life when she tried to withdraw from them. This is because her body became addicted to anti depressants. Withdrawal from anti depressants is one of the worse of all withdrawals. It is comparable to withdrawal from any addictive illegal drug only worse because the withdrawal symptoms can last for weeks.

If you are addicted to anti depressants and try to discontinue their use, you should not attempt this yourself. The withdrawal from these drugs can make you feel as though you are losing your mind. You will have a difficult time distinguishing dreams from reality as they are more like hallucinations. You will feel electric shocks running up and down your body all of the time. Your sexual energy will increase. You will have headaches, nausea and dizziness. You may even feel like you are going to faint.

When you walk, you will feel as though you are walking on air. Lightheadedness will accompany you everywhere. Tremors will bother you most of the time and you will probably feel very, very depressed.. You may feel as though you have reached rock bottom.

Some people who have taken themselves off of anti depressants have ended up committing suicide because of the withdrawal symptoms. No doctor will advise you to go "cold turkey" when relieving yourself of these drugs. You are advised to only take yourself off of the drugs under the care of a physician.

Taking Yourself Off Anti Depressants

Again, do this under the care of a medical doctor. Begin by cutting the dosage in half of what you were taking. Do this for a week. Then cut that dosage in half. Do this for another week. Yes, you will experience some discomfort, but it will not be as bad as going "cold turkey."

If, for some reason, you have no choice but to go "cold turkey" off of these drugs, make sure that you have someone with you who understands the symptoms of withdrawal and can look out for you. Make sure that you, too understand the symptoms of withdrawal before you begin this process.

There are also many online forums that deal with withdrawal from anti depressants. You can read them and learn from them. You may even choose to participate in these forums to share your story.

Taking yourself off of anti depressants is only advisable if you have been diagnosed with conditional depression, such as that which happened to Shanna, or mild depression. If you have been diagnosed with chronic, severe depression, you should be under the care of a psychiatrist and not ever attempt to stop taking your medication.

Anti depressants definitely have their place in our world. They can allow a person who is clinically and severely depressed live a semi normal life. However, they are over prescribed in today's world.

If you have mild depression, there are some things you can do to help

yourself overcome this problem. Face it, everyone gets depressed every once in a while. Here are some tips on how to naturally alleviate depression:

Exercise. Exercise raises endorphins and can also increase serotonin, which is the same way that SSRIs work. When you are depressed, the last thing you may feel like doing is exercising, but this can truly help you stave off depression.

Hobbies. Do something that you like such as drawing, writing or even scrap booking. Keeping busy is one way to concentrate on something else besides your problems and can alleviate depression.

Humor. Watch funny films and television shows. Humor truly can be the best medicine and will allow you to forget for a while, what is troubling you.

Faith. People who have some sort of faith fare better in depressive situations than others who do not have a particular faith. Some say this is just a replacement for drugs, but at least it will not harm your liver.

Diet. Eat a healthy diet and take a multi vitamin. There are suggestions that depression can be the result of lack of vitamins. Most people today don't eat right. Stay away from fast foods and try to eat properly. Take a multi vitamin that can give you supplements lacking in your diet.

If you ever feel that you are going to do harm to yourself or anyone

else, or the depression gets worse, seek medical help immediately. Mild depression and seasonal affective disorder as well as the occasional blues can be self treated. Severe depression requires urgent medical care.

Chapter 4 - The Pain Game

Chronic pain is experienced by many Americans. The biggie is back pain followed by headaches. Back pain, particularly lower back pain, is the main ailment that brings people to the doctor's office each year. Back pain can be caused by a number of different factors. In some cases, the cause of back pain is unknown.

Stress has been linked to back pain as well as being overweight. Next to back pain, headaches are on the list as chronic painful conditions. Joint pain is next. Many people suffer from conditions where there is no known physical cause for their pain, although it is very real.

How do we treat pain? It will depend on what type of doctor you visit. Most people, upon experiencing a painful condition, will seek out a medical doctor. As mentioned earlier, back pain is the number one reason why people seek medical treatment. Back pain, especially lower back pain, is one of the most common ailments in America.

A medical doctor will prescribe pain relievers for back pain. If it is intolerable pain, he or she will most likely prescribe Tylenol with Codeine while they run tests. If this doesn't work, they will move you up to the favored drug of choice when it comes to pain management and that is Vicodin. Vicodin has replaced the last favored pain drug of

choice, which was Oxycontin. Oxycontin was found to be very addictive and received a lot of bad press when radio personality Rush Limbaugh admitted that he was addicted to this drug.

Oxycontin continued to receive even more bad press as people started overdosing from this drug, which was nicknamed "hillbilly heroin" and dying. As it began to move to the black market and people began to regularly abuse this drug, it was replaced by Vicodin, which was supposed to be less addictive.

Vicodin is often prescribed for someone after surgery or a painful incident such as an accident. It is meant to be taken only for a brief period of time as it is, like Oxycontin, highly addictive. Unlike morphine, which is also prescribed after surgery, it is often given without constant medical supervision. It is also widely available online and on the black market.

Pain medications make a person feel really good. Not only do they take away the pain, but they make someone feel totally relaxed. They are the most widely abused of all prescription drugs. Yet doctors continue to prescribe these medications for ailments such as back pain.

If you go to a medical doctor for lower back pain, he will take tests to find out the cause of the back pain. He will probably prescribe medication to relieve the pain. Once the source of the pain is discovered, he will either suggest surgery or constant pain medication. He will prescribe either Vicodin or something laced with codeine, a powerful narcotic.

A medical doctor will never suggest acupuncture, despite the fact that it has proven successful in alleviating chronic back pain. He will also never, ever suggest seeing a chiropractor. The American Medical Association has made an arrogant stand against any and all alternative medicine or treatment.

Vicodin can play havoc on your body and cause extensive liver damage. It is highly addictive and also creates a tolerance. This means that you need to take higher doses of the drug to get the same effect. This causes people to want more and more of the drug in order to feel better.

Doctors understand the dangers of Vicodin and its addictive potential. The protocol is that it is only supposed to be used in short term situations. So they will prescribe it a couple of times then abruptly take you off of the drug.

Withdrawing from pain medications is not pleasant. Pain medications are narcotics and the experience is similar to withdrawing from heroin. We often imagine heroin withdrawal to be the worst of all drug withdrawals. Withdrawing from Vicodin or Oxycontin, however, is the same thing. Ask Dave. Dave was addicted to Vicodin for over two years.

Chapter 5 - Dave's Story

Dave had surgery on his knee after an accident at work. He actually needed knee replacement surgery. After the surgery he was in

considerable amount of pain. Unlike years ago, when someone would be monitored in the hospital for two weeks before being allowed home, Dave was released the day after his surgery with a prescription for Vicodin and one free refill

At this point, it should be said that one of the reasons why people are becoming addicted to narcotics used to treat pain is because they are treating themselves and have no idea what they are doing. Hospitals "need the beds" and can no longer afford to keep people for more than a day or so. Insurance companies will not cover this treatment, either.

The Vicodin helped Dave but after a while, he began to need to take more of the drug. He broke tablets in half and increased his dosage to one and a half tablets instead of one. Then he ran out of the prescription.

Although he had a refill, he could not get it refilled when he ran out of the drug because the pharmacy had a strict rule when it came to controlled substances. They said he would have to wait. He became agitated, nervous and nauseous. He could not sleep. The pain in his knee was excruciating but also seemed to be all over his body.

He had a friend who recently underwent oral surgery and was prescribed Vicodin. His friend had warned Dave about the drug and bragged that he refused to take it and instead used over the counter Tylenol and tolerated some pain. Dave called his friend and begged for the Vicodin. His friend, seeing that Dave was in a lot of discomfort, relented and gave him the prescription that he never used.

Now Dave had his pills and felt better. He still renewed the prescription for the refill. He didn't have to worry about running out because he had two bottles, nearly full. Unfortunately, he realized that he needed to take more of the drug in order to continue to get the same relief. He was now up to two tablets instead of one.

Worried that he would run out of the Vicodin before his next doctor's appointment, Dave went to another doctor and told him about the pain in his knee. He asked for a prescription of Vicodin. The doctor, who spent all of five minutes in the examining room with Dave, wrote him a prescription for 30 pills and left the room. Dave had the prescription filled at another pharmacy.

Dave continued to do anything to get the Vicodin and was soon up to three tablets. By the time he went back to the doctor who operated on his knee, he was addicted to the drug. The doctor did not realize the extent of the addiction but told Dave he would have to wean himself off the Vicodin. He gave him another prescription for 30 pills but said that was all he could do. He instructed Dave on how to withdraw from the drug slowly.

The withdrawal process was too much for Dave to endure. Pretty soon, he was back on the Vicodin. To make it last even longer, he combined it with alcohol. Vicodin is the most widely abused prescription drugs in the United States and many who are addicted also attempt to aid the medication with alcohol as well. This allowed Dave to extend the use of the pills.

Then Dave discovered the internet and the magical world of getting

controlled substances online. He began to order pills from places where the drugs were easily disbursed. He would pay four times the amount to get the drugs, but it didn't matter. In fact, nothing really mattered to Dave except the Vicodin.

Dave was a full fledged Vicodin addict. If this had been heroin, he would be dismissed as an unsavory drug addict. However, there is no difference between Dave's behavior and that of a heroin addict. The only difference is that heroin is illegal and Vicodin is commonly prescribed. They are both opiates.

Fortunately for Dave, his friend who gave him the prescription for his Vicodin had been watching his friend. He organized an intervention in Dave's home with his friends and family. Everyone had noticed Dave's personality changing, particularly when he was out of Vicodin. He became moody and even violent on some occasions. Everyone who knew him was concerned.

Because his insurance covered detox treatment, he was able to enter a facility that treated him for withdrawal of this powerful opiate. After a few weeks, he felt better. The pain in his knee had subsided, but he entered a pain management program that taught him how to use natural methods instead of drugs to combat pain.

Dave was lucky. Each year, thousands of people die from pain medication overdose. More are arrested for prescription fraud, a growing crime. Dave got the help he needed to kick the Vicodin habit.

Years ago, drugs like heroin, opium and cocaine were legal. Heroin

was actually recommended as a cough medicine for children. Opium and cocaine were available over the counter in various forms. Today, these substances are illegal and carry stiff prison sentences for anyone selling or even using them.

Yet doctors are allowed to push opiates like Vicodin, which is manufactured by powerful pharmaceutical companies, without any problems from the law. Medical protocol allows for the use of this powerful and very addictive opiate after operations. Why? Because the pharmaceutical company is making money with the drug and they are now calling the shots. Imagine if your doctor told you to inject yourself with heroin to alleviate pain. By giving you Vicodin, he's pretty much doing the same thing.

While there is a strong need for pain medication, especially for people recovering from surgery or who have terminal illness, it should be controlled and administered by professionals. People who are suffering from chronic pain such as lower back pain, should seek alternative therapy before resorting to drugs. Drugs, particularly opiates like Vicodin, should never be the first choice when it comes to pain management, but the last resort.

Pain management clinics have opened across America in response to the public's growing concern for addiction to opiates. Most people have become educated enough to realize that there are other ways to control pain other than harmful, addictive drugs that build up a tolerance and play havoc on the body.

Some popular methods to manage pain that have been actually proven

to work are as follows:

Meditation. This is an Eastern art but will be dismissed as hogwash by your doctor. However, meditation can do wonders. It involves cleansing your mind from all thought. Since the brain is the organ that signals the nerves that they are in pain, meditation can relieve some forms of pain.

Exercise. Unless your lower back pain is caused by a slipped disc, exercise will probably help relieve the pain, especially if the cause is unknown, as it is in most cases. Inactivity and sitting all day long as well as weak abdominal muscles can contribute to lower back pain. Exercise can relieve this pain.

Chiropractic Treatment. A Chiropractor is a licensed professional who uses spine manipulation techniques to alleviate all different types of pain as well as other ailments, such as allergies. Do not even suggest this to your doctor as he will dismiss it as useless, although Chiropractors have gained respect throughout the years and many people, especially those with chronic back pain, swear by this treatment.

Acupuncture. This is yet another method of pain treatment that is off the beaten path but has proven to work, particularly with lower back pain and headaches, although the jury is still out whether it works with neck pain. This ancient healing art has been practiced in the East for thousands of years.

Diet. How is your weight? If you are obese, the reason for your knee

and back pain can be excessive weight on your spine. Lose weight instead of resorting to drugs. If you suffer from frequent headaches, make up a food journal and keep track of what you eat. Many people believe that migraines are the result of undiscovered food allergies. Massage Therapy. This is similar to Chiropractic treatment but the massage therapist will most often come to you. Instead of manipulating your spine, a massage therapist will work on your muscles. Forget the seedy notion of massage parlors and red lights. Massage therapists are licensed professionals who can truly help those in chronic pain.

If you have chronic pain not related to any physical ailment, you should try an alternative to pain medications. Use pain medications, especially those that are addictive, as a last resort.

The medical profession can help alleviate the amount of people who become addicted to pain medications by changing protocol in hospitals and releasing patients who are not ready to leave the hospital and allowing lay people to treat themselves with dangerous and addictive drugs.

Chapter 6 - Anxiety and Stress

Who among us has not suffered from anxiety and stress? Anyone who is human and has an ounce of normal feelings has experienced some degree of anxiety and stress in their lives. Stressful situations include the following:

- Loss of a loved one
- Divorce
- Moving
- Losing a job
- A major illness

Each of the above are considered major stressors. Some people manage to go through these events better than others. Some people are able to handle a great deal of stress while others cannot handle the slightest thing out of the ordinary. The thing that all of the above have in common is that they each involve a break from routine.

Routine is our security blanket in an insecure world. We all rely on routines to a certain degree and children are shown to do better in school if they have a routine at home. When routines are interrupted, stress is the result.

In order to combat stress, routines must be established and continued as much as possible, even under stressful conditions. Routines will keep you balanced.

Unfortunately, most people today tend to run around chasing their tails. Most of us are overburdened with full time jobs and a pressure in society to make sure that we do everything right. Our children have to be involved in every organized sport that there is. We have to work full time, cook a healthy meal, have a spotless house, go to all of our children's sports games and volunteer for functions.

Years ago, men worked, women stayed home and kids played outside

after school. End of story. Do you wonder why we are all so stressed out? Routines? Who has time for routines? We are lucky if we make it through the day without a nervous breakdown. Most of us are so over extended that if we have a break in our carefully planned schedule, we collapse.

Twenty years ago, the only people who were prescribed tranquilizers were those who were thought to be on the verge of a nervous collapse. Anyone who experienced a nervous breakdown was committed to the hospital and was pretty much thought to be insane. As a matter of fact, anyone who had any sort of mental problem, such as depression or anxiety, and admitted it, was dismissed as a lunatic.

Doctors didn't like treating patients who were very nervous. They kept complaining of imaginary ailments and acting really high strung. The doctors would give them Valium, which was the drug of choice back then, to get them the heck out of the office. Valium was very addictive but was better than the drug doctors used to give people for anxiety, which was strychnine.

Yes, you read that right. Strychnine, one of the most lethal poisons around, was used in small doses as a treatment for "nervousness." The diagnosis of "anxiety" had not yet been made in the 1950s when strychnine was prescribed. People who suffered from this condition were known as suffering from "nervousness."

It was advised to take strychnine in small doses because too much could kill you instantly. One wonders how many people died due to an overdose of this drug. However, this was before the country became

the litigious wonder that it is today, so doctors did not worry that much about prescribing the ingredient found in rat poison for people who were a little high strung. Just like doctors 40 years prior to that didn't mind recommending heroin as a great cough medicine for children.

Valium was a lot better than strychnine because it wasn't a lethal poison. However, it soon became apparent that it was very addictive and created a tolerance among users. People had to take more and more of the drug to get the same effect. Fortunately, this was before the era when controlled substances were carefully monitored, so many people were able to get all the tranquilizers they needed to get through life.

The pharmaceutical companies saw a market in anxiety and stress. So did the medical community. Soon there were new phrases for anxiety. Social anxiety. General anxiety disorder. Panic disorder. Obsessive Compulsive Disorder, etc. Doctors began to cash in on diagnosing people with these disorders. Buspar was the first drug recommended for anxiety disorder, but was not very effective. Nor was it very addictive.

Then the pharmaceutical companies hit the mother lode with Xanax. This was the wonder drug of all anxiety drugs. The phrase "take a chill pill" was soon coined and referred to Xanax. Doctors began to prescribe Xanax to any patient who came in complaining of anxiety.

Worried about your job? Take Xanax. Worried about your relationship? Here's a prescription of Xanax. Your kids driving you

nuts? Xanax will help. Doctors began prescribing this medication like candy.

Xanax is a very effective tranquilizer. It will work very well to take the edge off of any situation. Xanax has been described as "booze in a pill." It used to be used to treat alcoholism. Today, it is commonly prescribed for anxiety disorder. Although it is supposed to only be used for short term treatment, Xanax is widely given to people to use for years and years.

The longer term side effects of Xanax include the potential for liver damage. Not much is known about the long term effects besides liver damage, however, because the pharmaceutical companies today are so powerful that they manage to push drugs through the FDA after performing tests on something like 500 people. Only the cancer drugs are held up for years on end.

Like any controlled substances, Xanax is carefully monitored by pharmacies. If you get a 30 day prescription for Xanax with one refill, do not expect to be able to renew the prescription 15 days later. Because Xanax creates not only a dependency but also a tolerance, many people naturally find that they have to continue to take more and more of the drug in order relax.

If you think that you were nervous before taking Xanax, just wait until you try to get yourself off of it. Especially if you try to quit "cold turkey." Consider Michelle's story.

Chapter 7 - Michelle's Story

Michelle suffered from anxiety all of her life. She always considered herself to be a nervous type. She was always high strung. She never drank or took drugs, this was just her nature and she accepted it.

Two years ago, she had a bit of a health scare. She went to the doctor's office and was examined for the problem. While there, the doctor noticed that she was very nervous. She asked Michelle why she was so upset. A normally high strung person as it was, Michelle was even more nervous over the health scare. The doctor took the normal tests and prescribed Xanax to relieve Michelle's anxiety.

Fortunately, the health crisis was nothing. Physically, Michelle was fine. And mentally, she was doing pretty good, too. The Xanax really helped to relieve her stress. She enjoyed taking the pills and for the first time in her life felt really relaxed.

She began to see the doctor regularly for more Xanax. The doctor, an internist, gave her several prescriptions before cutting her off. She told Michelle that if she wanted more Xanax, she would have to see a psychiatrist.

Getting in to see a psychiatrist in the area where Michelle lives is easier said than done. There are not that many psychiatrists around. On top of that, the insurance process was time consuming. She had to get a referral, which she did from her internist, and then go to a psychiatrist who was on the treatment list.

Even with decent insurance, in the United States mental illness is

treated differently than physical illness. Referrals are needed and you have to generally wait a long period of time to see a psychiatrist. The only way to see someone urgently is to visit the emergency room of a hospital. Most people do not want to do this for fear that others will think them "crazy."

Michelle made an appointment with a psychiatrist but was quickly running out of the Xanax. Like Dave, she began self medicating with liquor. She also used the internet to obtain Xanax from India. She wasn't even sure if it was Xanax that she was receiving and the cost was about \$200 for 30 pills, but she was willing to pay and take a chance.

She ran out of the Xanax before the shipment from India came through. The withdrawal symptoms she experienced include severe anxiety to the point where she was trembling and unable to go to work. She also was unable to sleep or eat. She was nauseous and even experienced delirium. When she did manage to sleep, she had dreams that were so vivid she wondered if she was losing her mind.

At this point, she would have done anything for one Xanax. She knew a friend who had taken this prescription and called him. He was able to give her a few pills that he had taken from another friend. There is a network of people who are addicted to prescription drugs that is similar to those who take illegal street drugs. People who become prescription pill addicts often seek out other addicts and trade prescriptions. Michelle began to know quite a few other people. When the shipment from India arrived, she was able to give some pills to those who had helped her out.

Finally, she got to see the psychiatrist who gave her a prescription for pills which she took to the pharmacy right away and had filled. In the meantime, she found another internist and went to see him, complaining about anxiety. She got another prescription for Xanax and took it to another pharmacy. She wanted to be sure that she never ran out of the pills again.

Like any other drug addict, Michelle's quest for Xanax began to rule her life. She put money aside in case she had to order from India. She perused the internet for places to get more Xanax cheaper. She was afraid to use the same place over and over.

Michelle never sold the drugs. She did give a few to friends who were also addicts, but that was in exchange for the pills they gave her. She was surprised, therefore, to find the police at her door one day. Apparently, her use of this controlled substance and doctor and pharmacy hopping had been tracked in computers and the one pharmacy reported her to the police, sure that she was trafficking a controlled substance.

The police had no proof that she sold the drugs, which they would have needed to arrest her. They did question her, however, and it scared Michelle. It scared her so much that she decided to face the fact that she was a prescription pill addict and had to either quit or continue in this downward spiral.

Michelle talked to the psychiatrist who told her how to wean herself off of the drugs. The psychiatrist said she could do this alone but if she

was not successful, he would admit her into an inpatient program at the local hospital. Michelle was bound and determined to do this on her own. She followed the advice of the psychiatrist and began to slowly wean herself off of the drug.

The process that she used required her to see the doctor once a week. In addition to following the doctor's orders, she also began to exercise, which helped relieve the stress. The doctor recommended physical activity as a way to stave off some of the effects of getting off of the Xanax.

After two months, Michelle was free from the Xanax prison that had held her for over a year. Today, Michelle is still a high strung person, but instead of looking for the instant cure for anxiety and stress, she uses yoga, meditation and exercise.

Tranquilizers are addictive. They should only be used in extreme circumstances and for short term use only. They are not only addictive, they build up a tolerance. You need more and more of them to get the same relaxed effect. These drugs are no different than taking a drink. Except a drink is easier to get.

No doctor will advise you to "take a drink" if you complain about being anxious. They will not direct you to the nearest bar and tell you to start pounding down alcohol. Yet that is what they are doing when they write you a prescription for Xanax or other tranquilizers and send you to the nearest pharmacy.

Anxiety and stress affects everyone in the world. Effective ways to

deal with anxiety and stress include the following:

Exercise. Exercise not only staves off depression, but is especially good to relieve stress. It gives you a sense of focus, raises the serotonin and makes you feel better physically as well as mentally. Try Pilates, a popular stretching exercise, to alleviate stress. This will not only make you feel better mentally, but will also give you toned and attractive muscles.

Yoga. An Eastern art that helps give you both peace of mind and body. Yoga is not hogwash, it really works. You should make time for yoga and meditation every day and look at it as your time for yourself.

Routine. Stress is usually the result of a broken routine. Developing a routine is essential to eliminate stress. Even if it involves just getting a cup of coffee at the convenience store every day, that is one constant in your life. Everyone does better with some order in their life.

Organize. Stress can also be the result of feeling out of control. Many of the common mental disorders such as depression and anxiety are the result of feeling out of control. Many people who suffer from stress will feel better if they have some control over their environment. Organize a closet or room if you feel stressed out. This will not only take your mind off of your problems, but will make you feel more at ease when the project is completed.

Diet. Again, make sure that you eat healthy foods. Also eliminate your intake of simple carbohydrates that really don't add anything to

your nutritional state except pack on the pounds.

Herbal Supplements. You can take herbal supplements such as Kava Kava or St. John's Wort to alleviate mild anxiety. These should never be taken in conjunction with anti depression or anti anxiety medications.

Group Therapy. Sometimes just talking to friends with whom you feel comfortable discussing your problems with is helpful. If you have no friends that you feel you can confide in, talk to a counselor. Many counselors will even give you therapy on a sliding fee scale so that you only pay what you can afford.

Behavior Therapy. There are certain behavior therapies that you can use when experiencing anxiety that are helpful. These include putting a rubber band on your wrist and snapping it every time an intrusive thought enters your mind. There are also therapies that actually train your body how to react to stress.

Anxiety and stress are here to stay. You can alleviate your stress and in some cases, learn to eliminate stressful situations simply by being aware of stressors. You do not have to spend your life hooked on prescription drugs in order to just get by.

Chapter 8 - Life Without Addiction

We discussed the three most common types of prescription drugs that are abused and to which people become addicted. There are many different pain drugs, anxiety drugs and anti depressants on the

market. It seems as if they will continue to be manufactured and abused as people continue to look for the “instant cure” for whatever ails them.

Another popular prescription drug that is also abused is sleeping aids. There are new sleeping pills being advertised now, namely Lunesta, that promise not to be addictive. In the same ad, however, they tell that most sleeping aids carry the risk of some dependency.

You can rest assured that sleeping pills are physically and emotionally addictive. Like anti anxiety drugs, they are made to be used on short term basis. Sleeping pills are meant to get you back into the pattern of sleep, not as a way to fall asleep every night. The addiction potentials and withdrawal from sleeping pills is very similar to those of anti anxiety medications. Like anti anxiety medications, sleeping pills are considered a controlled substance.

Controlled substances are carefully monitored by pharmacies throughout the United States. Because they are so abused and often sold on the black market, some people, like Michelle, have been accused of trafficking the drugs to others.

Because these drugs are legal, they are relatively easy to get over the internet, without a prescription. You can find hundreds of different outlets that will sell you controlled substances for a price. The drugs will come from out of the country and are not approved by the FDA. As if being addicted to prescription drugs is not bad enough, some people have died taking drugs that they obtained over the internet that were laced with poison or other substances. Others have paid

hundreds of dollars for sugar pills. They are the fortunate ones.

Prescription drugs are not bad. Without them, we would not have cures for many diseases that used to end up killing people 100 years ago. Pharmaceutical companies are not evil, but like any big business where a lot of money changes hands, there is a potential for greed and exploitation.

More legislation is not the answer. We see how effective that is against the illegal drug market, that flourishes. The answer is a change in attitude within ourselves. Instead of looking for the quick fix, we should look for the right fix.

Each generation wants things faster and faster and is willing to pay more money for convenience. The idea of waiting in line is abhorrent to most of us. We demand instant relief and satisfaction in everything that we do. Because of this, we are creating a demand for addictive, prescription drugs.

The answer is to stop looking for instant gratification and start living using alternative means to control chronic pain, alleviate stress and cure mild depression.

If you have severe depression, are in pain or are experiencing severe anxiety, certainly you should seek medical attention right away and, in many cases, take a prescription. Be sure, however, that you do not fall into the trap of using prescription drugs for ailments or conditions that can be conquered naturally.

Remember that heroin, cocaine, arsenic, strychnine and other

dangerous substances were all once thought to be fine cures for various ailments. Heroin was a great cough medicine. Arsenic was good for the complexion. Cocaine was a wonderful little boost and strychnine, in a small quantity, couldn't really hurt you and could be good for the nerves. This sounds preposterous today. But how do you now that 100 years from now, our descendants will not be saying the same thing about drugs that are so often prescribed today?