

AND THE ECSTASY

FLAWS IN THE NEW DESIGNER DRUGS

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Five samples of what was claimed to be Ecstasy, bought in clubs and pubs around London, were sent for analysis by THE FACE. The two white capsules were pure MDMA or Ecstasy. The blue pills and the powder were between 10 and 30 per cent MDMA plus something else. The yellow pill was something else entirely. What was the mystery ingredient?

SET OUT ON THE BENCH at the hospital laboratory lay a row of six suspiciously grubby pills and capsules.

"All of these are . . . what is it, *Ecstasy*?" asked the technician, the last word carrying a note of disbelief. He picked up the most obvious example, a bright yellow pill about a quarter inch wide, turned it in his fingers, unimpressed.

It *did* bear an uncanny resemblance to a dose of Beta-Carotene.

On the counter remained a blue pill, a white pill, some crystalline powder on silver foil and three white capsules of varying size. All but one were reputedly samples of 'E' or MDMA, the media drug of America last summer and an addition to the dealer's tray of illicit highs. Yet these samples had been collected in the South East of England in July 1986. They were being analysed in a bid to find out *what* so many had been taking, even if the machine could not, as yet, say why.

The technician's next remark proved prophetic. Picking up the largest of the capsules, a good one and a half times fatter than the other two, and with a certain bulge of chemical masculinity, he added, "This one's far too big to be just Ecstasy."

HE WAS RIGHT. Inadvertently, he'd layed his fingers on the latest variant of last year's 'most tried new drug'. Under analysis, the capsule turned out not to be 3,4, methylenedioxymethamphetamine (MDMA) but, as had been claimed by its promoters, 4-bromo-2,5, dimethoxyphenethylamine (2C-B), a stronger, rarer cousin, with similarities to Mescaline and, according to street folklore, the 'next step' after Ecstasy. The rumour circulating New York of so-called new 'designer hallucinogens' had found at least one item of confirmation . . . and not in the Lower East Side, but the East End.

Swamped for many months in the American press by the more heinous Cocaine concentrate 'Crack', ripples from the Ecstasy story have nevertheless been quietly spreading. Ecstasy displays the surest sign of an accepted drug: people aren't talking about

it. What was hearsay is now fact. There is a state-by-state street price in the drug digest *High Times* and several European cities — Amsterdam and Barcelona in particular — are known for their produce. Barcelona even has several brands: 'Night', 'City' and 'Country'. One recent visitor explained, "You don't think about it there, just pop a couple in a bottle of the local champagne and get on with the evening." In Britain, dealers estimate usage has increased tenfold in the last year. Even at £22 per hit, many more people now claim experience of the drug and it has spread widely from the small circle of early enthusiasts. At this point — surprise — there occurs the rumour of something similar but smarter. It sounds too much like careful marketing.

For a street drug that, before its crimina-

were phonies, either speed or chalk dust. A curiously similar correlation and close enough for our purposes.

So . . . MDA, the original 'love drug' and a more toxic leftover from the Seventies, is the likely cause of anyone waking up in their Ritz bathroom complaining of an Ecstasy hangover.

But is this drug holding out for its users anything other than a further taste of decadence? And is it possible that a culture of increasingly savage competitiveness, what sociologist Christopher Lasch calls the "siege mentality", might need a safety valve like MDMA?

PICKING UP THE TRAIL of a street drug might have led to one of the earth's more exotic corners; but Old Compton Street had to

cooled down. Now we tend to stay at people's houses, make our own adventures . . . A lot of childish dramatics really, like re-enactments of *The Sound Of Music*, impersonations of the Piccadilly line . . ."

Looking closely at his face, I notice that his skin does have a slightly worn and pallid cast. But he showed no concern at the observation. He was far more keen to implicate the chemical as an influence on popular culture.

"No names . . . but I think there may be a song or two on the way, and I know for a fact it's, er, affected a few pop videos. I'd say of the main pop groups probably ten have tried it; five have liked it."

One has no choice but to believe these figures, but his eagerness in their telling belies uncertainty; a hint that, over and above these few cultural overtones, a wish exists that Ecstasy prove important. This drug appears to be offering a cohesion to some, the crucial ticket of friendship that other drugs can't produce. Yet it begs the question: what about the other five groups? If it's so magical why didn't they swallow it too?

ELSEWHERE, AT A FASHIONABLE Holland Park restaurant, a girl probably known to several of them, a model in her early twenties, offered a very different slant on Ecstasy.

"Yes, I did it quite a bit. I went to some of the parties, though I must say it's not really a party drug; in fact, it made some people quite annoying — people you already knew. They'd come up, stroke your arm, talk for a bit, then with a generous smile ask if you'd like to go home with them. The fact that it makes people more honest isn't necessarily a good thing. I think I only felt genuinely Ecstatic on it alone with my boyfriend."

On its reputation as a sex drug she showed only jaded enthusiasm. "I suppose I have spent a lot of time . . . in bed with it. And it's good in one sense; your skin is very, kind of, 'aware'. But it's better for touching than for actual sex. Though I suppose you're not so likely to get pregnant," she smiled. It's a recognised medical fact that MDMA inhibits male orgasm.

"But," the smile faded quickly. "I won't be doing it again; besides, sometimes its strength was too much, I could hardly stand. Once I broke both my shoes and my Walkman on it. That time it lasted about nine hours and left me emotionally dragged out for several days."

After the initial euphoria, this kind of report was to be expected. Almost certainly, it was the effects of MDA, not MDMA. This older, simpler pill has a reputation for longer duration, and more unpleasant side-effects, particularly on women. But it's easy to see why manufacturers and dealers are peddling it in a mix with or in the guise of Ecstasy. The effects are more apparent, and they support that unfortunate drug truism: stronger is better. But how does the medical profession respond to accounts of such symptoms.

From the U.C.L.A. School of Medicine, the drug psychologist Dr Ronald Siegel offered

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lisation in the US last summer, sometimes came with printed instructions and discount coupons for the next purchase, these new, not yet criminalised, designs were to be expected. The Haight Ashbury Free Clinic in San Francisco has recently reported an MDMA analogue U-4-E-UH, 'Euphoria'. In Texas something referred to as 'Rhapsody' has a similar ring and, unlocated as yet, there is the phenomenon known as 'Spectrum'. All are small-scale variants of a freshened-up MDMA molecule. Although unlikely to reach Britain for a while — save in isolated cases — when they do, November's new US designer drug law will be in force. This will outlaw any and all analogues, landing them in exactly the same category as MDMA today. This has put the production of all Ecstasy in the hands of uncontrolled, unlicensed (and untaxed) chemists.

HAVING PULVERISED THE BRITISH samples, the technician flipped the switch of the spectrometer and fed the solutions one by one into the chamber. A few quiet *whirrs* told that chemical wavelengths were being recorded, another click and the print-out began to roll. A few minutes later and, with a 'told you so' look, he handed over the results: six incomprehensible graphs.

The two small capsules proved to be completely pure MDMA as had been claimed — as indeed was claimed for all. The blue pill and the powder were MDMA plus *something else*; and the yellow pill was something else entirely. Not conclusive by any means, but enough. By comparing this against similar but more extensive tests carried out by the Californian laboratory PharmChem, a conclusion could be drawn about the kinds of chemicals circulating under the guise of Ecstasy. Almost certainly, the 'something else' was the more powerful drug MDA. PharmChem's 1985 tests of MDMA samples came up with the following: 52% were pure MDMA; 20% pure MDA, and the rest, bar 10%, a cocktail of the two. These 10%

suffice. I wait for my first informant to show. He's reputedly a heavy user, an 'X-Head'. Attempts to conjure up the image of an 'X-Head' only result in hopeless confusion. How can those reports of a surging, flowing empathy reconcile with other tales, since it arrived in the UK last year, of addiction — a dependency on the affection the drug inspires? I sift the clichés for a clue. He will probably show a preference for soft, strokable clothing, wear an over-receptive, Moonie-like expression of beatitude; and when he speaks, round off every sentence with a hopeful smile. Or, as some have tried to coin it, a 'permagrin'.

Needless to say, he arrives with none of the above. He wears jeans and T-shirt, has a brisk manner of speech. As a writer in the pop business, he displays a mix of enthusiasm and wariness . . . except toward the subject at hand. And here the enquiry might well begin — because, for this very wordly 26-year-old, the image of the drug Ecstasy has hardly changed for nearly a year.

"The first week I had it, it was simply the most brilliant thing I'd ever taken! That was ten months ago in New York. The people I was with did it about every night. It gives you massive confidence, especially in a group . . . Now we've kind of developed a London core of about 30 who do it regularly, and it's usually the best night of the week."

For him, the emphasis has shifted from the experience of the drug to the circumstances of its use. A cult almost, that uses the arousal of a warm tide of communal feelings as an excuse for a certain loving mayhem — and, more crucially, to revive a fading sense of group identity.

"At first we used to go out and cause a lot of trouble on it. The New York clubs were great, you could get away with a riot, but in London we were escorted to the door a lot. The bouncers couldn't understand it. If they saw us sitting under a table they'd think we were drunk. Then a couple of people in the public eye were noticed acting funny so we

some of his more hardened knowledge on designer drugs.

"The effects you are seeing are the symptoms of poisoning. MDMA is a toxic drug and MDA is definitely stronger . . . We have studies on rats that prove it destroys the brain's neurotransmitter, serotonin. Also, we found in one LA street survey that about a third of the people who tried Ecstasy don't try it again. They don't like the side effects."

Perhaps more disturbing, this trend of enhancing the strength of the drug draws it uncomfortably closer to other relics of the Seventies like PMA, or Paramethoxyamphetamine, a stronger MDA which, after reports of arm paralysis and several fatalities in 1973, earned the street tag, 'Death Drug'.

With only small changes in the chemical structure necessary to make any of these metamphetamines, one can only hope that producers of the new, stronger blends and designs would never stoop this low. Does Dr Siegel see the potential for what he would term a 'major abuse problem'?

"No, not so much with these new designer hallucinogens, because people don't use them in the same way as they use say, depressants and narcotics. We don't see the same compulsive patterns of use. People usually take them a few times a year for the experience of it, so they won't represent the same public health or societal threat as, say drugs like Cocaine and Heroin."

WHAT SORT OF THREAT are they, then, to society? Both here and in the US, they're as illegal as Heroin and Cocaine. Another informant proffers an unusually potent explanation.

"Are you a *journalist* . . . ?"

His first words on opening the door are not a question but a charge. I step into a room more resembling a cave, with an empty floor, rough, semi-textured figures scratched onto the walls, and a burning wood fire.

"I warn you, I'm not going to say what you want to hear." He pauses for the reaction.

"In fact, all I have to say is you shouldn't be writing about this . . . MDMA, *nobody* should. It should be kept away from" — then with an intense sidelong glance — "*the culture*."

The atmosphere is not hostile nor unfriendly, just charged. All I know about this man is that he writes poems and uses 'Adam', the Hampstead term for MDMA.

"It's your type, your curiosity and your magazine that will ruin it, just like they ruined LSD. You probably don't realise, but by talking about it you simply hand it over to 'them'. This drug is an unknown, an antidote to a certain mentality; they sense it as a threat, are already trying to define it, label it out of its real existence. You *can't* write about MDMA, it has no conclusions. My only words to you are, *take it*, learn about yourself, and your 'culture'."

He gives me a friendly but summary smile and I realise the 'interview' is over. Outside I notice another 'Heroin Screws You Up' poster, this time set right against one promoting Jim Beam Bourbon, and the

ironies behind his remarks receive some reinforcement. One doesn't have to be on MDMA or anything else to notice that, on issues of recreational drugs, the 'culture' almost never fails to make a mockery of itself. As if kids don't know they're going to be screwed up; as if it isn't part of their intention.

The tone of such campaigns causes at best distrust, at worst the opposite effect — apropos the tale of one schoolboy who, during the Boy George furore was asked by his teacher what his ambitions were for later in life. "I want to be an ex-junkie," came the reply. This style of campaign, designed to scare people from using drugs instead of informing them, is all too common. And in the US, this style of social education has been taken even further, with a similar lack of success. Back in the late Sixties, during the 'war against Methedrine', a TV commercial was made in which Frank Zappa addressed prime time audiences in a deadpan voice, "Kids, if you keep doing speed, you're going to end up like your parents."

It may come as a surprise to my last interviewee, but down at the news factory itself, editors are still far too obsessed with Heroin and Crack scares to care about MDMA. Although Fleet Street *is* interested — the drug organisation Release say they receive more Ecstasy calls from journalists looking for a new horror drug than from its users (to date only one). But it has not produced enough Shock for the tabloids: no police prosecutions, no hospitalisations, no busts. So far *The Mirror* has only blandly reported that Ecstasy 'can kill', and *The Telegraph* described it emptily as the 'latest narcotic menace'.

It may come as a surprise to Fleet Street to learn that MDMA can be found no further away than in its own press-rooms; as it can within most professions and even some noble institutions — including, dare one say it, the House of Lords. The course of 50 or so inquiries revealed a wide spread of usage:

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"THE FACT THAT IT MAKES PEOPLE MORE HONEST ISN'T NECESSARILY A GOOD THING"

company directors, photographers, university lecturers, computer operators, publishers, secretaries, manual workers and the unemployed. The one thing they all shared was curiosity.

LISTENING TO THE ENTHUSIASM of another interviewee — the director of a successful computer company — it occurs that this drug does have one speciality effect. The effect of a 'cause', a focus for the future. The zeal of his description was redolent of the Sixties excitement about transforming self and society through drugs.

"MDMA is like sticking your head out through a bubble . . . Suddenly you're *here*, you become suddenly free in your relationships . . . I'd recommend it to almost anyone, even a 75-year-old lady I know."

This kind of uninhibited belief in promotion is not unique and has generated many isolated pockets of support, particularly in America where, unlike Cocaine — also a chemical used throughout the professions — it *may* turn out to be the catalyst for a minor legislative change.

The US has its counterparts to this innovative businessman; Richard Doblin is behind a company formed on behalf of MDMA; Dr George Greer of Santa Fe is one of the group that employed a law firm to press for legalisation of its medical use. They are *very* dedicated to challenging the accepted view. Dr Greer, who has used MDMA with noted success on cancer patients, now believes they have solid grounds to expect success.

"Quite recently, the Administrative Law Judge made a recommendation to the Federal Drug Administration that MDMA be put in Schedule Three, not One. And though the FDA continued the emergency Schedule One category, we can now take this ruling to the Court of Appeal. If you ask me, it's just a matter of time and raising the money before we have the present tag on MDMA — 'of no medical use' — scratched from the statute book."

If his appeal succeeds it will be the first time ever a psychedelic is officially recognised as having *any* medical application.

IN A FLAT OVERLOOKING Regent's Park, such facts washed right over the balding head of one former acid virtuoso. He shrugged off all inquiries about his experience with designer hallucinogens. All he had to say about MDMA was that, for him, it died an unspectacular death several years back. Too mild, too similar to a small dose of the others.

"All this talk about laws, animal studies, side effects etc. I can't buy it anymore. We're *all* on dope, even if it's only white sugar and Wogan. This is a *drug culture*; it's been depending on artificial stimulants since the industrial revolution, that's what we're all trying not to admit. You can't ban some,

allow others and expect the population to bounce by happily. Human beings are too curious. It's more a matter of learning to live with each other's habits, even if it *is* Wogan."

He squeezed up his eyes as if in the throes of the worst agonies of withdrawal.

"But really, Ecstasy's no different. Okay, so one shrink tells you it can put you in touch with the source of your troubles; that might be a good thing, or it might drive you into a worse addiction. It's not the pill that's the problem, it's the people. I don't touch drugs now, anyway." He stood up, walked over to the kettle. "What's yours, tea or coffee?"

After a year of Ecstasy in the UK, cynicism — that most persistent of British habits — still held the day. ●