

NOTE: The original 1,000+ page manuscript for *Slaying the Dragon: The History of Addiction Treatment and Recovery in America* had to be cut by more than half before its first publication in 1998. This is an edited excerpt that was deleted from the original manuscript.

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### **"Speed Kills" or Does It?**

Amphetamine use was a visible element within the polydrug youth culture of the 1960s. By 1967, diverted pharmaceutical and illicitly manufactured stimulants and sedatives were well integrated into the nation's illicit drug supply. By 1970, annual legal production of amphetamines was 10 billion pills--25-50 pills for every man, woman and child in the US. Diversion of amphetamines to the illicit market was commonplace through the forging of prescriptions or by obtaining amphetamines in large quantities directly from wholesale drug distributors.

The Justice Department initiated limits on legal amphetamine production in 1971 in an effort to bring abuses of the drug under control (Grinspoon, & Hedblom, 1975). Similar controls were initiated against barbiturates as drugs like Seconal, Nembutal, and Tuinal became highly sought after within the illicit drug market. Amphetamines and barbiturates were diverted from the licit pharmaceutical industry, "hustled" from physicians, and later produced in black market laboratories. Diversion occurred through theft and illegal ordering from the manufacturers and from thefts of doctor's offices and pharmacies.

These drugs were primarily consumed orally, but as use patterns intensified and tolerance rose for many users, some began to experiment with injecting barbiturates and amphetamines. In 1968, a well-developed methamphetamine (Methedrine, Desoxyn) injection subculture developed in California and then spread to many large cities in the U.S. (Carey & Mandel, 1970). "Speed Freaks," as they were then known, injected methamphetamine to experience the "rush" or "flash" and went on extended "runs" described by a streetworker of this era.

*Speed freaks" didn't eat. They didn't sleep. Didn't do either for days on end. All they were in to was "speed rapping," sex, and their own paranoid fantasies about all the people who were after them. They could also tap a pencil, string beads or rewrite the same poem for six hours straight. They were emaciated. They were often sick and didn't even know it. They got crazy, rambling on about who owed them money, who burned them in a dope deal, who was a "narc." And when they got crazy, they could get violent. They hung out with each other in "flash houses"--nobody else could tolerate them. It's a wonder they didn't all kill each other, but it was also no wonder so many of them got into downers and heroin. No one could sustain those runs!*

"Speed freaks" became a significant concern for those working in alternative medicine and in the early, youth-oriented drug counseling centers. A Midwestern "streetworker" whose responsibility was to link drug users to medical and psychiatric services describes the changing milieu.

*The hang-loose pot and LSD drug culture of 1965 had soured by 1969 and 1970. It was like a marriage between the “heads” and the “hoods” that had turned out all wrong. Superficially, people looked the same, but long hair couldn’t hide the increasing number of jailhouse tatoos, and psychedelic posters couldn’t hide the increasing number of weapons and the growing physical and sexual violence within the drug culture. The pot and LSD were still there but had taken a backseat to enormous quantities of booze, downers and the growing presence of methamphetamine. The turning point was when people started shooting “crystal.” The whole street culture began to feel like a psychiatric ward for paranoid schizophrenics. That set the stage for a growing number of users to seek out barbiturates and heroin.*

Between 1969 and 1972, increased medical complications due to injection and needle sharing became common. Drug users seen in health clinics and admitted to addiction treatment programs often suffered from such conditions as needle abscesses, bacterial endocarditis, and needle-transmitted hepatitis and other blood-borne disorders.

The changes in the drug culture were clearly evident in Haight Ashbury. The Haight Ashbury Free medical Clinic that had in 1967 treated “bad trips” through new “talking down” techniques and “calm rooms” was by the end of 1969 seeing 60 patients a day strung out on heroin (Gay & Gay, 1971). A street culture speaking of peace and brotherhood had been abandoned to the paranoid ravings of the speed freak and the detached, predatory proclivities of the junkie.

A common slogan of that period was “Speed Kills,” but most “speed freaks” did not die of amphetamine use. Most cycled out of amphetamine use into heroin addiction or alcoholism. The “speed freaks” of 1968-1970 drifted into alcoholism treatment, therapeutic communities and methadone programs in the years following the methamphetamine epidemic.

While amphetamine achieved great visibility via the exotic lifestyles and medical complications of the “speed freaks,” there remained a large population of prescription amphetamine users who were all but invisible within the culture. This population was made up of women, truck drivers, students and athletes. The extent of amphetamine use among professional athletics broke into public view in 1973-1974 surrounding the activities of Dr. Arnold Mandel. Mandel, a professor of psychiatry at the University of California at San Diego, had attempted to wean several members of the San Diego Chargers football team off of street “Speed” by prescribing pharmaceutical amphetamines. After reporting his concerns about amphetamine use to NFL officials, the NFL placed the owner, General Manager/Coach, and eight San Diego players on probation and banned Dr. Mandel from having further contact with players. Mandel’s accounts of these events in journal articles and his book *The Nightmare Season* refer to the use of amphetamines and other drugs by NFL players as “a plague” and an “occupational disease in pro football” (Mandel, 1976).

## **References**

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