Addiction engineering

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Purpose:
Integrating calculation and scales into addiction treatment in order to regulate the drug dosage and to find the most suitable usage hours.

Introduction:
As a result of relatively long cooperation with addiction treatment specialists and witnessing the people who are being treated (Methadone and OT treatment); I have observed that there is no scientific, logical or computational relation between using amount of an addict and the prescribed drug dosage for treatment. (Whether as maintenance or to achieve certain treatment)

Eventually I have come to this conclusion that using simple calculations in addiction treatment field; to measure the amount of drug will be pretty effective.

I have mentioned a few determinative and important points in this brief article.

Research method:
My research method drives from impression of 35 years experience. 20 years of my life which I lived as an addict and the other 15 years is my experience in addiction treatment field (Human revivification society of Congress 60).

After publishing “Crossing the 60 degrees below zero zone” which is in 18th edition now, I have designed and field tested the D.S.T method with opium or OT (Opium Tincture). Fortunately more than 6,000 narcotics addicts have been treated with above-mentioned method and they have reached the certain cure of addiction.

At this time with collaboration of this field’s specialists (physicians, Psychiatrists, psychologists and etc) more than 7,000 drug addicts are being treated with the D.S.T method and this number is increasing every day.

Research findings:
It was written above the door of stamping ground of a philosopher (Plato) that:

“Let no one ignorant of geometry enter”
I have come to this inescapable conclusion that geometry has a fundamental role in all the aspects of our lives.

My perception of geometry is this:

Reckon, scheduling, income and expenditure, prevision, implementing a scientific task, sensible talking.

Whoever knows geometry and works with geometry rules is called an engineer.

No one can cast a shadow of doubt on the fact that engineering has integrated into variety of science fields such as: industrial engineering, construction, chemistry, medical, genetics, agriculture and many others.

It is like geometry has shed light on the science and technology field and brightened them.

Maybe we could put an end to the wandering of addicts which has been going on from the ancient times up to now, if we let geometry or engineering enter the addiction treatment science.

Maybe the public belief is that we are not wandering in addiction treatment field and everything is enlightened for us scientifically. But I do believe we are at the inception of understanding and treatment of addiction.

My point will be proved if we take a brief look at the addiction treatment statistics and if we let the geometry merge into this field.

For instance we have a sack of sugar but we have no weighing device. In this situation one might say the weight is 20 Kilo other might say 25 or someone else might assume 30 Kilos. Which one is correct?!

Obviously we can’t be sure. Maybe in order to repel a quarrel among them it is better to say they are all right!

All the methods for addiction treatment are good! This happens for lack of a scientific criterion. But when the measurement or geometry is integrated into this field; science and truth will emerge. The sack of sugar is on the weighing device now and everyone will accept the true weight without argument.

For measurement and treatment of addiction we must pay attention to below mentioned:

1. Satiation
2. Compatibility
3. Nutrition
1. **Satiation:**

Satiation is a term used in Chemistry and is relevant to our work. From our point of view satiation means enough, it means capacity is full or no more acceptance capacity.

Consider a glass of water that we start to dissolve sugar in it little by little. We will reach a point which we can’t dissolve any more sugar into it or the water can’t accept any more sugar; this point is called the satiation point.

Or consider an empty glass that we can pour certain amount of water into it. If we pour more water that its capacity it will split.

What is the connection between satiation point and addiction?

Most of the drug abusers are in the satiation point or even they are passed this point and are using several drugs and narcotics simultaneously.

We know that ingesting 1 or 1.5 grams of opium (10-15 cc of OT) has deadly effect on a person who has no habit of using opium.

So maybe it can be said that the satiation point of opium consumption is 1 or 1.5 grams (10-15 cc of Opium Tincture).
Thus an individual (Addict) who is ingesting more than this amount is in the satiation point as well as someone who is using Amphetamines combined with several pills or other narcotics.

On what scientific or logical basis; 30 Methadone pills (150 Milligram pills), 40 cc of Methadone syrup (200 Milligrams) or 60 cc OT (6 grams of opium) is prescribed for treatment of a drug abuser?!

It is said by professionals of this field that 20 Milligrams of Methadone is equal to 100 Milligrams of Morphine.

20 Mil (Methadone) = 100 Mil (Morphine)

Now in order to shed light on the subject I shall bring up these questions and answer them briefly.

**Question:** How is the equalization between 1 Gram of Opium (ingesting) and Morphine and Methadone?

**Answer:** 1 Gram of ingesting Opium is equal to 100 Milligrams of Morphine and 20 Milligrams Methadone (20 milligrams methadone in pill form).

**Question:** How is the equalization between 1 Gram of Opium (smoking) and Morphine and Methadone?

**Answer:** It is equal to 25 Milligrams of Morphine and 5 Milligrams of Methadone (1 pill).

According to above mentioned contents; it is obvious that we are at the satiation point in prescribed addiction treatment. This subject must be studied and discussed.

**Compatibility:**

The compatibility phenomenon is the duration and process in which one kind of narcotic substance can replace another narcotic substance.

During this period the body’s metabolism and physiology prepare themselves to receive the new drug.

Years ago when I was an opium abuser one day I received half a kilo of burnt opium sap with reasonable price and I was so delighted. For during of 3 or 4 months I used burnt opium sap instead of opium.

One day it was finished and thus I started to ingest opium as before. But I found out that no matter how much opium I ingest yet I feel withdrawal symptoms. Those days passed rigorously.

It took 2 months for my body to regain compatibility with opium as before.
That day I realized each narcotics substance needs a specified period of time to become compatible with the body.

In the D.S.T method we have asked those who smoked opium to ingest it. (Ingesting opium is equal to 1/5 smoking opium)

In this condition we have witnessed that people are not reaching the appropriate balance and they are having the withdrawal symptoms.

They were right! Smoking opium effects are less than ingesting it because in the smoking opium the alkaloids of opium are absorbed through mouth and lungs. In the smoking opium even the alkaloids effects are different because of the combustion and heat.

We wanted to increase the amount of ingesting opium in order to make them feel better but it didn’t work properly and they experienced other side effects such as Constipation.

At last I realized that this must be solved through time because of the compatibility phenomenon. This means that human body needs some time in order to become compatible with the new type of using.

Thus when type of using narcotics is changed (for instance: smoking heroin is changed to injection or sniffing or smoking opium is changed to ingesting opium) a period of 20 up to 60 days is needed for body to become compatible with the new type of using.

Now imagine when the type of drug is changed (instead of opium we use OT or instead of heroin we use methadone) this issue (compatibility) becomes more complicated.

**Conclusion:**

When the type of drug is changed and the OT or Methadone is prescribed instead, body needs a period of 20-60 days to become compatible with the new drug.

So at the beginning of the treatment if we increase the amount of prescribed drug because of the compatibility phenomenon we will put the patient in the satiation point and this won’t help the patient.

We must share the compatibility fact with the patient so he won’t ask for more drugs and he will understand that he must tolerate some hardships in order to reach the cure.

It seems that the primarily reason for high prescribed drug dosages in addiction treatment is ignorance about the compatibility fact.

**Drug Nutrition:**
The best pattern of nutrition is 3 times a day. Let’s have look at fasting.

We Muslims fast a month each year and fasting means changing the eating pattern from 3 times a day to two times a day, on the condition of not eating nor drinking between these two times.

Those who have fasted know that fasting is tough. Fasting is a kind of worship or purification.

Now how do we expect a drug abuser who has been using narcotics several times a day to ingest the prescribed drug (OT or methadone) once a day?!

I do believe if this is not impossible it is onerous surely. The effectiveness of OT or methadone in body is a period of 7 or 8 hours.

Thus the best drug nutrition must be three times a day or TDS with the 7 or 8 hours intervals.

The medicine must be taken exact and on time.

At the end; if we expect a drug abuser to trust us we must trust them as well and give them the medicine to use themselves. If we spend enough time for them they will trust us in their treatment.

Translated by: Ehsan Ranjbar