

Celebrating Women in Pharmacy



NAWP

Magazine

Founded 1905 Issue 03 - Septemeber 2011

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NAWP Cardiff Branch

Medicinal Histories: Ecstasy

and more...



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Celebrating Women in Pharmacy



NAWP
Magazine
Founded 1905

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The President's Letter

Dear Colleagues,

Where does the time go? I can hardly believe that over three months have elapsed since I wrote my last letter for the NAWP Magazine.

The November conference - Blue pill, pink pill? Does gender matter?- continues to occupy much of my time. The programme has been printed, the Royal Pharmaceutical Society (RPS) have been actively publicising this event and registration has opened. Nevertheless, there is still a regular stream of email correspondence with both the Medical Women's Federation (MWF) and the RPS on various 'behind the scenes' aspects.

I trust that you have all received a copy of the programme and that many of you will be able to join us, not only for the conference content which has attracted some eminent speakers but also to meet up with old friends, to revisit 1 Lambeth High Street, to browse around the displays of pharmaceutical antiques, and to share in and support this first joint meeting of NAWP and MWF. The Executive Committee (EC) have not organised a social programme around this event, but the MWF are holding an informal dinner on the evening of 10 November (i.e. after the conference) to which we are to be invited. I have not yet had any details from the MWF but will circulate this information at the earliest opportunity. Lastly, I would like to remind you that 'early bird' registration closes on 30 September so urge you to register by post or online before this date to take advantage of the reduced rate.

So what other NAWP activities have taken place in recent months? We had an EC meeting in June, Hazel Baker was invited to a General Pharmaceutical Council (GPhC) reception in London, and the EC has nominated Christine Heading to represent NAWP on the GPhC Equality, Diversity and Inclusion (EDI) reference group.

I mentioned in my last letter that we are regularly notified by the RPS of new and ongoing consultations and draft guidance and I responded on behalf of NAWP to the GPhC's consultation on 'Annual renewal fees'. Currently the main consultation of interest is the European Medicines Agency (EMA) draft 'Guideline on good distribution practice of medicinal products for human use'. The closing date for this consultation is 31 December. If any of you would like to provide input to the EC or to respond as individuals, please let me know (contact details on the back cover).

The 7th European Meeting of Women Pharmacists, at which Hazel Baker and Sid Dajani will be speaking, takes place on 1-2 October. I know a number of NAWP members will be travelling to Warsaw for this weekend of professional and social activities and I look forward to seeing some of you there.

Since I last wrote I have been to Berlin and Riga on business. I don't usually refer to my work within the pharmaceutical industry but the trip to Latvia in June was particularly interesting in a number of ways and I was there to give a two-day training course. These courses are very intensive for both the participants and trainer, but on this occasion language difficulties and the culture within the pharmaceutical companies over there made this course particularly challenging and having said that, they were a delightful group of people, very friendly, keen to learn and talking with one lady over lunch on the first day I mentioned that, when I had gone up to my room during the coffee break, and I had noticed a ceremony taking place at the Freedom Monument: a band was playing, there was a large gathering of people and flowers were being laid at the foot of the monument. Apparently, it was a commemorative event dating back to 14 June 1987 when flowers were placed at the monument 'to demonstrate the rebirth of national courage and self-confidence in Latvia'.¹ She got very distressed when trying to explain to me what it was like during the early days of Soviet occupation in the 1940s. Although her English was not very good members of her family had obviously suffered and I wished that I had a greater knowledge and understanding of what the people had had to endure. It is several years since I read Pamela Mason's novel, *Puppet Maker*, but as it refers to events of 1945 I plan to read it again in the hope that it will give me a greater insight into the difficulties experienced by the people of Latvia under the Soviet regime.

When travelling abroad on business, there is very little time to see anything of the town or country one is in, but on this occasion I had a free evening at the end of the course so I took the opportunity to explore part of the old town. I came across a small pharmacy and wandered in to ask if I could take a few photographs. The pharmacist on duty explained that this was owned by a company called Phoenix and a subsequent internet search confirmed the link with the sponsor of our NAWP magazine. What a small world!!

¹ Wikipedia: *Latvian Independence Movement*

Virginia Watson

President of the National Association
of Women Pharmacists

Carers Project



The Princess Royal Trust
for Carers



In 2007 a joint project was set up by The Princess Royal Trust for Carers (PRTC) and The National Association of Women Pharmacists (NAWP) to support Carers in the Cardiff community. This initially ran in 12 independent pharmacies where the Pharmacist, usually the owner, was appointed the Carer's Champion. They were asked to identify Carers both known and unknown, to recognise their roles as Carers and to inform them of the services available at The Cardiff Carers Centre. Yellow stickers were attached to all dispensed medicine bags to try to highlight the role of the Carer and several referrals were made.

In 2009 funding was secured by the Cardiff Carers Centre to employ a part time Liaison Officer to take this project out to all Pharmacies in Cardiff and possibly extend it into The Vale of Glamorgan. Boots and The Co-op were enlisted to further spread the message. Resource packs were produced containing lists of useful contact numbers as well as information leaflets and left in each participating Pharmacy. A Carer's champion was appointed in each pharmacy and asked to identify Carers and their needs. The same system had been operating successfully, via the Cardiff Carers Centre, in nearly all GP surgeries in Cardiff, using doctors' receptionists. The Liaison Officer was involved in both projects. NAWP stayed involved on a steering committee, but meetings were infrequent and no documented information was forthcoming as to the progress of the project.

Unfortunately in March 2011 funding for this project was lost. Cardiff Carers Centre lost major funding in this financial year leading to a loss of several staff. Although this is very disappointing after all the hard work put in by NAWP, Steve Lewis of PRTC and the staff of the Cardiff Carers Centre, I feel that awareness has been raised by the project in many pharmacies in Cardiff and beyond. Not least by the project being short listed in The Welsh Pharmacy Care Awards in 2009. Hopefully those pharmacists involved thus far will continue the good work as part of their everyday signposting duties.

Perhaps NAWP will be able to work with the PRTC or similar charities again in the near future.

Anita White

NAWP Cardiff Carers Project Co-ordinator

www.nawp.org.uk

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Tŷ Hafan Walk

Friday 13 May 2011 – the eve of the Eurovision Song Contest (a long awaited evening in the Griffiths' household!), score cards printed off, wine chilling in the fridge, time for an early night - but not this year! This year it's pyjamas on and a night out in downtown Cardiff.

The Tŷ Hafan midnight sleep walk is one of the few reasons I would forego my bed for several hours and walk the streets of Cardiff dressed in my best (thickest) pyjamas and flashing bunny ears. The walk is an important contributor to the funds needed for the continuing work of Tŷ Hafan hospice, the only children's hospice in Wales, which was set up in 1999 and is fully funded by public donations. Its purpose is to provide palliative care for children with life-limiting conditions and their families. The hospice is situated in the Vale of Glamorgan just outside of Cardiff but its services are available to all children in Wales. The hospice's services are provided for free but it is not part of the NHS and receives no guaranteed statutory funding. Just to tread water, it has to raise £3million every year and this figure will inevitably rise. To continue to offer its unique services to families, it relies on the generosity of the public, corporate sponsors and volunteers - that's where we came in.



Back to the pyjamas!

So many mums of life-limited children often with many complex needs rarely get a full night's sleep which can put an enormous strain on their health and family life. To celebrate the dedication of these mums we volunteered to give up a few hours' sleep to raise vital funds so that these mums get a well-earned rest at Tŷ Hafan.

So that is why four pharmacists and four pharmacy assistants found themselves dressed in an attractive variety of pyjamas, some with dressing gowns but all definitely with the regulation issue flashing bunny ears, leaving the house at a time when most of them would have been in bed!

The event kicked off with a fun warm up routine accompanied by Johnny Depp dressed as a pirate (of the Caribbean). After an enthusiastic countdown the walk began with a circuit of the hallowed turf at the Millennium Stadium then continued for eight miles on an exciting circuitous route of Cardiff city centre and Bay areas. Quite a spectacle 400 or so sets of flashing ears progressing down the city underpasses then up again to street level, stretching over several hundred yards. The young city revellers looked on in amazement as we mostly middle-aged ladies powered along in our unlikely garb, on one occasion we were mistaken for one huge hen party - glad we were not buying the first round!

On we walked round the back of the gaol and down streets of Cardiff that most of us would not have dreamt of walking - let alone at 1am! It was a fabulous night, a beautiful moon, no wind or rain, great company and a whole troop of volunteer gentleman stewards.

As we neared the end of our stroll (now confident of success) thoughts turned to the joy of a bacon butty and hot coffee, sadly the mind was willing but the flesh weak at the thought of hours of heartburn which would inevitably follow a few minutes of such an illicit pleasure.

The excitement of completing our walk was all too quickly overcome by the draw of a warm bed and the dread of the all too soon ringing of the alarm clock. We open all day on a Saturday but hey! This is no ordinary Saturday - this is Eurovision Saturday!

We would like to thank all our family, friends and very importantly our customers and patients who very generously supported our efforts and helped us raise over £3000 between the eight of us.

Will we be back next year? - You can bet on it! We want to beat our best efforts for this year and maybe next year our Eurovision entry will win!

Wendy Griffiths

Data Protection Act

NAWP holds on computer file, the names, postal and email addresses and information about payment details of its members. This information is used solely to print address labels, to facilitate mailing within the organisation, to contact members about the Association affairs and to keep a record of fees paid. Under the Data Protection Act, a member may object to their name being on computer file. Objections should be sent in writing, to the Registrar.



The Editor would like to thank everyone who has contributed to this issue of the Magazine and PHOENIX for their continued Sponsorship.

If you would like to contribute to the next issue, please contact the Editor or any member of the Executive Committee.

A Little Light Relief

It all started when I answered an ad from a company called Greenforce for volunteers to help out with eco-projects around the world. Borneo sounds interesting I thought, I could learn to dive, meet new people, get to hang out under blue skies on pristine beaches and possibly do the odd bit of fish-spotting - great! So I signed up and set off to buy a pair of flippers and a snorkel. After training in my local pool, all I had to do was pass the dive medical test – easy! Or so I thought - until the childhood heart ‘murmur’ turned out to be a small hole between my ventricles, meaning that diving was out of the question so what to do now? Luckily for me Greenforce had a place on one of their other projects, in the Amazon. The Peruvian government had given them some money to map an area of the jungle so that the zone may one day become a National Park. Greenforce had also liaised with a local tribe to allow a volunteer camp to be set up on their land. The flippers and snorkel are really going to come in handy there I thought! I had visions of myself slip slopping through the jungle dressed like Jaques Coustou! And so I found myself in the Peruvian Amazon, or to be more precise the town of Puerto Maldonado near the Bolivian border.

Our camp was 8 hours up-stream from the town on the banks of the river Maldonado and consisted of two small wooden cabins, two basic toilets and a shower with no curtain! I wish I'd bought a sarong instead of flippers! We slept on thin mattresses on the floor with individual mosquito nets tucked underneath for protection. The scientific work consisted of mapping, counting and identifying species of flora and fauna. There were three ‘team leaders’; the plant guy who taught us how to abseil through the canopy, identifying fauna as we went; the bird guy who taught us how to mist-net birds and identify them before letting them go again - very eco-friendly; and the mammal guy who identified two transect lines, (each 3km long and in different directions to give a large enough sample size), which we had to walk every day at dawn counting



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the mammals along the way. Each of these transect lines or paths had to be dead straight, which meant that if the line went down a ravine, you had to go down the ravine, if it went through a river, you had to walk through the river - you get the picture?! They also had to be walked in silence to avoid frightening the animals and 'sweeping' them forward in the canopy - hence counting them twice.

On our first day out bird-man took us mist-netting and plant-guy promised to take a group of us abseiling later that week - hurrah! Later on that day clad in a pair of Wellies that more or less fitted, and armed with machetes and brooms our motley crew trudged along the first transect line trying to clear it and in so doing getting

covered in sweat bees attracted to the salt (we were not allowed to wear insect repellent). Oh joy!

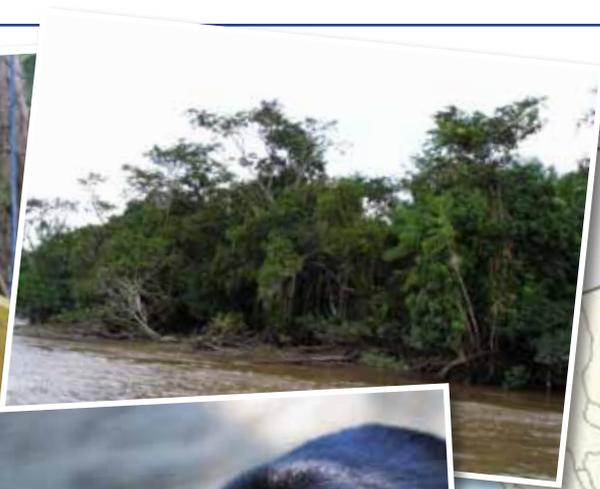
Then tragedy struck and bird-man had to leave urgently as his father was seriously ill back in the UK and unbelievably plant-guy's brother had been involved in a motorcycle accident in New Zealand. So within the first week we had lost two team leaders and all we had managed to do was kill several birds which were trapped in the mist-net we had forgotten to take down.

To cheer us up the local tribe decided that some of them would take us out camen spotting, at night, in a piranha-infested river! Slithering down the steep river bank in the pitch black with a pit helmet torch and a million insects for company I spotted the boat on the river and alongside it a log floating in the water. We passed the boat and headed towards the log. Then two local guys picked it up, turned it over, shook out the water and invited us to sit inside - great! So sitting one behind the other in two inches of filthy water we paddled out into the night - this is fun I thought!! Then I noticed that the water level inside the log was rising. I started penning my obituary "tourists found clutching a log in the Maldonado". I tapped the person in front on the shoulder and said - "the boat is sinking, pass it on". Just as the message got to our 'captain' in the front he reached into the water and pulled out a 'baby' camen, about 1 meter long, with his bare hands and brandished it above his head like a trophy - great I thought, now get us back to the shore!!!

The second week started with another 4am wake-up call from the parakeets, cockerel and howler monkeys, the cacophony of a jungle dawn chorus is hard to imagine. Blearily I groped my way in semi-darkness to the 'bathroom' where mammal-guy was standing in front of the mirror trying to pull what looked like a maggot out of his shoulder. "Get a tweezers!" he shouted, but it was too late the maggot had wiggled its way back down under his skin. Later that afternoon, after the obligatory transect walks, mammal-guy had help from the local tribe to try to eradicate his 'friend' which turned out to be a botfly larva. The locals applied vaseline over the area and then covered it with a banana skin which had to be held in place for 24 hours. I think the idea was to suffocate the larva which would retract its 'hooks' so it could then be pulled out after making a cut in the skin - lovely!



Week three, I couldn't believe I'd spent the past three weeks 'sweeping' the jungle with a broom, the local tribesmen must have thought we were lunatics! With two transect lines cleared we started walking them every day, very slowly and very silently. This was fun initially until I realised where these paths led! "You don't expect me to go through that?" I said..."well you can either wait here for us to return later or come with us" was the reply. Reluctantly, as I slipped into the coffee coloured water, waist high, I could hear the start of a sick joke - "how many anacondas does it take to kill an Englishman..." Wading for what seemed like an eternity we eventually hauled ourselves out on the mud bank the other side and after emptying out our Wellies trudged on, you really have to like mud to go to the jungle! That afternoon the rain was more torrential than usual and some of us were tempted to take an al-fresco shower with our not so eco-friendly shampoo. So now, as well as killing birds, we were polluting the river! Ah well so much for saving the planet! ⇄



↔↔ They don't call this the rain forest for nothing. The rain never stopped! You eventually get used to putting on damp clothes and drinking brown water. In fact we had been drinking brown water from the beginning as it had been iodised and so was brown in colour with a metallic taste - but now it was just brown! Yes you've guessed it someone had forgotten to iodise the water - it had been bird-man's job - but with him gone we all went down with Giardia! I won't bore you with the details; suffice to say I didn't think people could have so many conversations about their bowel movements!

Entertainment in week five started as we all sat around the table in the 'comedor' after dinner, squinting at our books by candle light or playing cards. We heard a scream from Jane over in the cabin. Someone dark-adapted rushed out to her aid, the rest of us stumbled behind hysterically. Inside the cabin, on her towel, which was hanging up on a hook (as we were told to keep everything up off the ground), was a huge pink-toed tarantula who according to mammal-guy, was pregnant and looking for somewhere to lay her eggs. He shoed it out with a broom and we tried to calm Jane down. That night as I laid on my mattress the scuttling sounds inches from my head made it even harder to sleep.



By week six I had had enough and so had Jane so we decided to leave. A boat had been organised to take us back down river to Puerto Maldonado and was supposed to pick us up at 4am. We had our gear packed and only had to pull down our mosquito nets and pack them before we left. At 2am we were woken by mammal-guy hammering on the door shouting "girls, girls, the boat is here". You have no idea how dark 2am is in the jungle! Grabbing our nets and half asleep, we were man-handled onto a boat full of bananas and waved off into the night.

All I really remember is how beautiful the stars looked out on the open water, you never see the stars in the jungle, and how fresh it was with a light breeze playing around us. Jane was sleeping. Then the reality of the situation started to dawn on me - we were on a boat in the middle of the river with three scruffy-looking local guys, we could have been killed! Thrown overboard! Then I felt a hand near my leg I remember thinking that the end was nigh, when in fact, it was just one of the local guys tucking a blanket around us so that we would not be cold.

At dawn, as the mist rose over the still water, and we chugged on downstream the howler monkeys started calling from one side of the river to the other, it was a magic moment, one I will never forget! But it was when the scruffy-looking local guys broke up a very small packet of biscuits into tiny pieces and offered us some that the second realisation dawned on me...here we were with some of the poorest people on earth and they were sharing with us! It taught me to trust in human nature and not to be prejudice by my own fears. As we sailed into the dawn I didn't like to tell Jane that there were probably a good few tarantulas on board with us!

Maria Murphy

NAWP *Cardiff* Branch

If you live in the Cardiff area and you are free on Thursday October 20th we can meet for lunch at 12.00pm in The Nine Giants Thornhill Road.



This is the kind of message that goes out by bush telegraph every six weeks or so.

The idea came at a coffee morning when four of us were chatting. We felt it was such a shame after all our working lives we rarely saw some of the colleagues that had become friends over the past 40 years or so.

A few years after I qualified the 1965 Pharmaceutical Conference was held in Cardiff. Many local pharmacists who were free and willing were asked to act as stewards at various venues, and it was at this event that the idea of setting up a Cardiff NAWP branch was suggested.

The initial meeting was held at Mrs M Rawlins's (then unbeknown, a soon to be president of the Society) mother's flat. From this gathering a committee was formed, and a programme of meetings set up to be held in homes kindly loaned by members. Topics were varied, aiming to keep us up to date and to encourage members who recently had become mothers or had had career breaks to return to work, if only for a few hours. Locum lists were made.

Having contacts while at work also gave us more confidence, as sometimes it could feel a lonely profession.

Some of our members were very persuasive when talking to representatives of the pharmaceutical drug companies who then sponsored meetings and soon we were able to hire rooms in hotels. Our AGM is always held after a good meal at a restaurant.

Each year in early spring we would escape the household ties and meet in various parts of the country with other NAWP members for the Annual Weekend School sharing transport. This was concentrated learning in a pleasant atmosphere.

Many friendships were formed during these years.

Times have changed and now the post graduate learning centre at the Welsh

School of Pharmacy provide lectures, distance learning has become readily available and new directives from the Society has added a whole new dimension to keeping our knowledge up to date.

'Modern' women do not have the career breaks that most of us had and so their needs are different; although a mentoring service is still available.

We still have meetings, less frequently and sometimes numbers are low but it is no less enjoyable and informative.

On a personal level, I was so grateful to have the friendship and company of my colleagues when my husband died after a long illness.

Now many of us well into retirement have another opportunity to meet, this time for lunch and catch up on the family news instead of work.

If you would like to join us on October 20th then please contact me or just turn up.

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Rosemary Waters

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Forthcoming Events

7th European Meeting of Women Pharmacists

1-2 October 2011

at House of Congresses and Conferences of the Polish Academy of Sciences

Jablonna Palace, Poland

The conference theme will be the Role of the Pharmacist and the Ageing Society in Europe. The programme has not been finalised but will include speakers from Germany, Poland and the UK.

There will be a piano concert followed by Dinner on Saturday evening and on Sunday morning delegates have the option of an excursion to Żelazowa Wola, Chopin's birthplace.

If you would like to see a copy of the full conference programme then please go to:
<http://www.pharmazeutinnen.de/dpv/pdf/Jablonna-Symposium.pdf>



National Association of Women Pharmacists Medical Women's Federation and Royal Pharmaceutical Society Conference

Blue Pill, Pink Pill – Does Gender Matter?

The effect of gender on clinical research, treatment outcome and prescribing practice

Royal Pharmaceutical Society, London

10 November 2011

Comprising of presentations, workshops and a panel discussion, this one-day conference will focus primarily on cardiovascular disease, stroke and dementias, oncology, HIV and diabetes, but will also include sessions on drug metabolism and gender and the current requirements for gender considerations in clinical research.

Speakers will include;

- Baroness Ilora Finlay,
- Dr Rowan Hillson, National Clinical Director for Diabetes,
- Dr June Raine, Medicines and Healthcare products Regulatory Agency (MHRA)
- Dr Jane Flint, British Cardiovascular Society (BCS) Joint Working Group for Women's Heart Health
- Dr Richard Tiner, Faculty of Pharmaceutical Medicine

- Astrid James, The Lancet
- Kirsten Patrick, British Medical Journal (BMJ)
- Dr Mark Nelson, Chelsea and Westminster Hospital
- Dr Peter Dewland, Consultant in Pharmaceutical Medicine.

If you would like more information on the Conference and/or would like to register then please go to:

<http://www.rpharms.com/conferences/blue-pill-pink-pill-does-gender-matter.asp>

Please note early bird registration ends on 30 September 2011

Weekend Conference 2012

20-22 April 2012

Chancellors Hotel and Conference Centre, Fallowfield, Manchester

NAWP will host the 8th European Meeting of Women Pharmacists in this elegant building set in five acres of landscaped gardens and only three miles south of Manchester city centre. Chancellors Hotel is conveniently located approximately 5 miles from Manchester International Airport.

The theme for Saturday's symposium will be Neurological Diseases and proposed topics include Parkinson's disease, Epilepsy, Multiple Sclerosis and Motor Neurone Disease.

In addition to the Conference reception and dinner at Chancellors on Saturday evening, plans are underway for social activities on Friday and Sunday giving plenty of opportunity for networking or just enjoying each other's company.

Don't miss this opportunity to share experiences with pharmacists from other countries and to meet up with old and new friends. Please note the date in your diaries!

Look out for further details, to be published soon and look forward to joining us in April for an informative and enjoyable weekend.

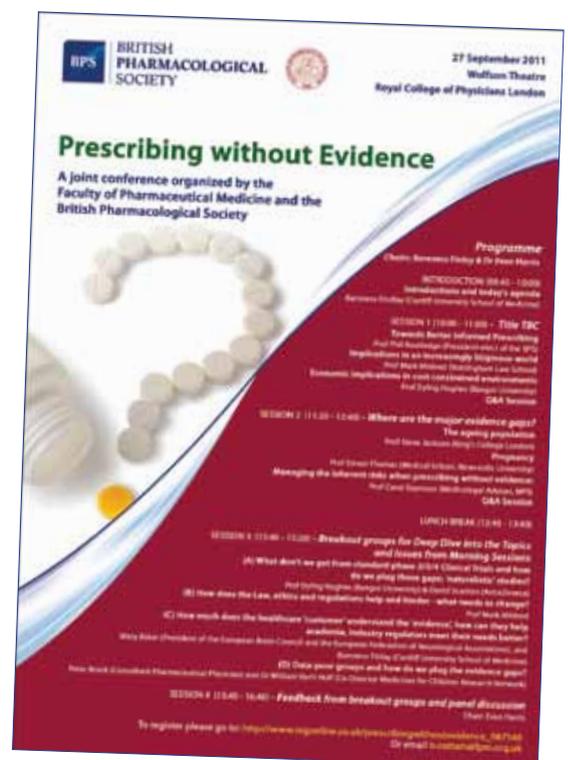
Prescribing Without Evidence

27 September 2011

This one day Conference will address the issues surrounding prescribing in the absence of adequate evidence.

For further information please visit:
<http://www.fpm.org.uk/> or <http://www.bps.ac.uk/view/index.html>

If you would like to attend this Conference you can register online at:
http://www.regonline.co.uk/prescribingwithoutevidence_987146



2011 Annual Subscriptions

A reminder that your Annual Subscription are now overdue. If you have not paid your subscription see for this year, please do so as soon as possible.

Subscription fees for 2011 are:

Full time	£30
Associate Member	£30
Part time	£20
Retired	£10

Students are entitled to join NAWP free of charge and to pay a reduced subscription of £10 for the first three years after registration (please state the year of graduation)

Associate Membership is open to individual healthcare professionals (including pharmacists in other countries and technicians) who support the objectives and activities of the Association. Associate members may attend and speak, but not vote at the Annual General Meeting of the Association.

Cheques should be made payable to NAWP.
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Medicinal Histories:

Ecstasy

MDMA (3,4-Methylenedioxymethamphetamine) – colloquially known as ecstasy, often abbreviated as “E” or “X” – is an entactogenic drug of the phenethylamine and amphetamine class of drugs. MDMA can induce euphoria, a sense of intimacy with others, and diminished anxiety. Many studies, particularly in the fields of psychology and cognitive therapy, have suggested that MDMA has therapeutic benefits and facilitates therapy sessions in certain individuals, a practice for which it had formally been used in the past. Clinical trials are now testing the therapeutic potential of MDMA for post-traumatic stress disorder (PTSD) and anxiety associated with terminal cancer.

MDMA was first synthesized in 1912 by Merck chemist Anton Köllisch. At the time, Merck was interested in developing substances that stopped abnormal bleeding. At the behest of his superiors Walther Beckh and Otto Wolfes, Köllisch developed a preparation of a hydrastinine analogue, methylhydrastinine. MDMA was an intermediate compound in the synthesis of methylhydrastinine, and Merck was not interested in its properties at the time. In 1927, Max Oberlin studied the pharmacology of MDMA and observed that its effects on blood sugar and smooth muscles were similar to ephedrine's. Researchers at Merck conducted experiments with MDMA in 1952 and 1959. In 1953 and 1954, the United States Army commissioned a study of toxicity and behavioral effects in animals of injected mescaline and several analogues, including MDMA. These originally classified investigations were declassified and published in 1973. MDMA was being used recreationally in the United States by 1970. In the mid-1970s, Alexander Shulgin, then at University of California, Berkeley, heard from his students about unusual effects of MDMA; among others, the drug had helped one of them to overcome his stutter. Two years later, he and David Nichols published the first report on the drug's psychotropic effect in humans. They described “altered state of consciousness with emotional and sensual overtones”.

Shulgin took to occasionally using MDMA for relaxation, referring to it as “my low-calorie martini”, and giving the drug to his friends, researchers, and other people who he thought could benefit from it. One such person was psychotherapist Leo Zeff, who was so impressed with the effects of MDMA that he came out of his semi-retirement to proselytize for it. Over the following years, Zeff traveled around the U.S. and occasionally to Europe, training other psychotherapists in the use of MDMA. Which developed a reputation for enhancing communication during clinical sessions, reducing patients' psychological defenses, and increasing capacity for therapeutic introspection.

In the early 1980s in the U.S., MDMA rose to prominence as “Adam” in trendy nightclubs and gay dance clubs in the Dallas area. From there, use spread to raves in major cities around the country, and then to mainstream society. The drug was first proposed for scheduling by the Drug Enforcement Administration (DEA) in July 1984 and was classified as a Schedule I controlled substance in the U.S. on 31 May 1985.

12



In the late 1980s MDMA, known by that time as “ecstasy”, began to be widely used in the UK and other parts of Europe, becoming an integral element of rave culture and other psychedelic-influenced music scenes.

Medical uses

There have long been suggestions that MDMA might be useful in psychotherapy, facilitating self-examination with reduced fear. Indeed, some therapists, including Leo Zeff, Claudio Naranjo, George Greer, Joseph Downing, and Philip Wolfson, used MDMA in their practices until it was made illegal. George Greer synthesized MDMA in the lab of Alexander Shulgin and administered it to about 80 of his clients over the course of the remaining years preceding MDMA's Schedule I placement in 1985. In a published summary of the effects, the authors reported patients felt improved in various, mild psychiatric disorders and experienced other personal benefits, especially improved intimate communication with their significant others. In a subsequent publication on the treatment method, the authors reported that one patient with severe pain from terminal cancer experienced lasting pain relief and improved quality of life.

The first phase-II double-blind randomized controlled clinical trial into the potential therapeutic benefits of using the drug as an augment to psychotherapy showed that most patients in the trial given psychotherapy treatment along with doses of MDMA experienced statistically significant reductions in the severity of their condition after two months, compared

with a control group receiving psychotherapy and a placebo. The authors concludes “MDMA-assisted psychotherapy can be administered to post-traumatic stress disorder patients without evidence of harm, and it may be useful in patients refractory to other treatments.”

The possible therapeutic potential of MDMA is being tested in several ongoing studies, some sponsored by the *Multidisciplinary Association for Psychedelic Studies* (MAPS). Studies in the U.S., Switzerland, and Israel are evaluating the efficacy of MDMA-assisted psychotherapy for treating those diagnosed with post-traumatic stress disorder (PTSD) or anxiety related to cancer.

Small doses of MDMA are used as an entheogen to enhance meditation by some Buddhist Monks.



with relatively low usage. Other meta analyses have also reported significant impairment of wider aspects of cognitive function, such as executive function. Many factors, including total lifetime MDMA consumption, the duration of abstinence between uses, the environment of use, poly-drug use/abuse, quality of mental health, various lifestyle choices, and predispositions to develop clinical depression and other disorders may contribute to various possible health consequences. A study that attempted to eliminate many of these confounding factors was published in February, 2011 by *Addiction*, and found few differences in the cognitive functioning of MDMA-using ravers versus non-MDMA-using ravers. MDMA use has been occasionally associated with liver damage, excessive wear of teeth, and (very rarely) hallucinogen persisting perception disorder.

Harm assessment

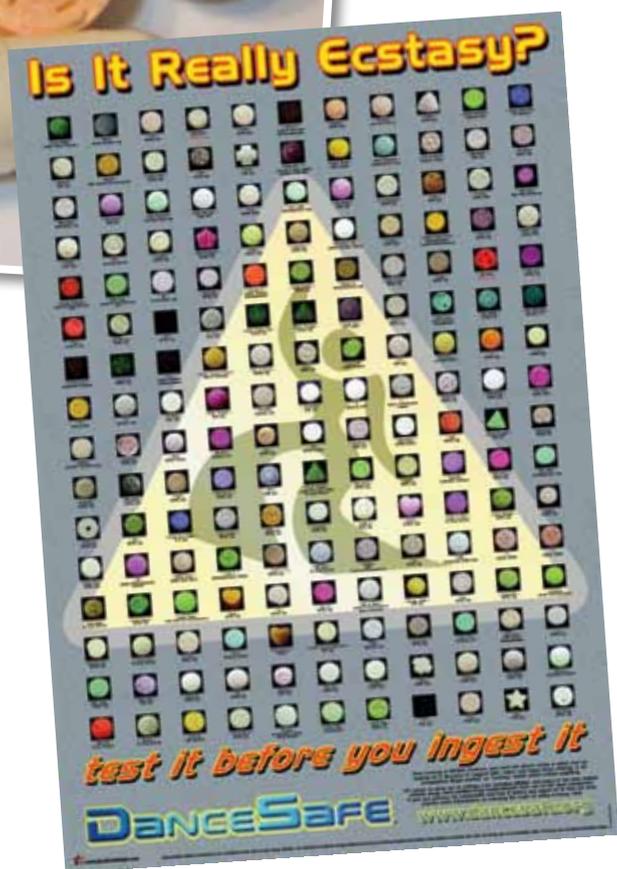
The UK study placed great weight on the risk for acute physical harm, the propensity for physical and psychological dependency on the drug, and the negative familial and societal impacts of the drug. They did not evaluate or rate the negative impact of ecstasy on the cognitive health of ecstasy users, e.g. impaired memory and concentration. Based on these factors, the study placed MDMA at number 18 in the list of 20 popular drugs.

David Nutt, a former chairman of the UK Advisory Council on the Misuse of Drugs, stated in the *Journal of Psychopharmacology* in January 2009 that ecstasy use compared favorably with horse riding in terms of risk, with ecstasy leading to around 30 deaths a year in the UK compared to about 10 from horse riding, and “acute harm to person” occurring in approximately 1 in 10,000 episodes of ecstasy use compared to about 1 in 350 episodes of horse riding. Dr. Nutt notes the lack of a balanced risk assessment in public discussions of MDMA.

The general public, especially the younger generation, are disillusioned with the lack of balanced political debate about drugs. This lack of rational debate can undermine the trust in government in relation to drug misuse and thereby undermining the government’s message in public information campaigns. The media in general seem to have an interest in scare stories about illicit drugs, though there are some exceptions (Horizon, 2008). A telling review of 10-year media reporting of drug deaths in Scotland illustrates the distorted media perspective very well (Forsyth, 2001). During this decade, the likelihood of a newspaper reporting a death from paracetamol was in 1 per 250 deaths, for diazepam it was 1 in 50, whereas for amphetamine it was 1 in 3 and for ecstasy every associated death was reported.

The most carefully designed study so far was published in February 2011 in the journal *Addiction*, comparing the effect on cognitive skills in 52 ecstasy users against 59 very closely matched non-users. The study, performed by the group of Prof. Halpern of Harvard Medical School, eliminated potential confounding factors like the use of other drugs and history of drug-use. The study found no short- or long-term differences in cognitive skills in the test group (users) versus the control group (non-users).

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Chronic use

Some studies indicate that repeated recreational users of MDMA have increased rates of depression and anxiety, even after quitting the drug. Meta-analytic reviews of the published literature on memory show that ecstasy users suffer significant short-term and long-term verbal memory impairment—with 70–80% of ecstasy users displaying significantly impaired memory. Moreover, this research shows that the memory impairment is not proportional to the lifetime number of tablets consumed and so, may occur

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