

— The whole truth about drugs

A conversation with Carl L. Hart¹

Tutta la verità sulle droghe

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by Susanna Arcieri, Claudio Dalpiaz, Alessandra Ferrazzi Portalupi, Carl L. Hart

Your research brought you to exclude negative effects of certain drugs (metamphetamphetamine and cannabis) on human brain function. Did you draw similar conclusion for "hard drugs" too (e.g. heroin and cocaine)?

I use methamphetamine as an example, because the amphetamines are the only class of drugs of all of these things – like heroin, cocaine, marijuana – amphetamines are the only class that will or can produce neuro toxicity, that will damage brain cells. Whereas cocaine, in high doses, it's really hard to produce neurotoxicity; heroin in large doses it's hard to produce neurotoxicity. So, if you are going to see really brains effects with a drug, it would be with one of the amphetamines first. If you don't see it with the amphetamine, then you would definitely not see it with something like heroin or with anything else that's not an amphetamine. But the amphetamines... give it to animals in very, very large doses – doses that are twenty times, forty times what are taken by humans: you can see some damage to the cells in the brain. Now, but if you give that same large dose to an animal, after you have allowed the animal to become tolerant, giving the animal the drug at lower doses on several days before you give the large dose, you don't see the toxicity.

The point is that, it's very hard to produce neurotoxicity or brain damage using the drug, using these drugs, especially at the doses that humans takes these drugs. So when people claim that these drugs cause some brain damage or some brain change that is negative, there is no evidence for it and that's what I am showing. I am trying to show

¹ Neuroscientist, Professor of Psychology and Psychiatry at Columbia University.

people that these statements about drug-induced toxicity, neurotoxicity, in humans, are not supported by any evidence.

Now, maybe later in the future, somebody will show some data that they do, but at the moment, there is no evidence to support that conclusion.

Do you think there are any biases in the current approach to drug research? What are the possible solutions to prejudice in scientific research?

There are biases when assessing the cognitive functioning of substance users, no matter what the substance. For example, we can say the drug users were out-performed on two tasks, whatever the task – a memory test and an attention test. They were outperformed by the control group. Now the researchers will conclude that the drug users are cognitively impaired – or impaired or have a deficit, when that's not necessarily the case because there is a range of performance that's considered normal, just like there is a range of height, like, people's height – you know you could be short, you could be tall – that's considered normal. The same is true with cognitive functioning. In order to determine whether the scores fall outside of the normal range, the scores of each participant has to be compared with scores that are appropriate for their age and for their educational attainment. If that's not done, then we can't say if someone is impaired or not. And oftentimes in science, they don't make that additional step because it hasn't been required, because we have had a big, long, we have decade-long biases against drug users.

And so, it was OK to publish saying that this group is impaired based on evidence that you don't have. And now more people are paying more attention to that in the literature. So the literature has been biased for a number of years. Just think about this. I am sure that you all know people who use all these drugs. I certainly know them, and I use these drugs myself. We know people who use these drugs, and they are not cognitively impaired – in fact, they are very accomplished people. But they have been in the closet about their drug use, so they don't... we don't know. They have concealed their drug use. So that's a major concern in terms of the literature. And so, I am trying to push the scientific community to do better, to do a better, a more rigorous job.

If you think about the criteria for meeting substance use disorder – so if you have a group of participants who meets the criteria for substance use disorder. That's a minority. So, of all the drugs that people use, a minority of people will meet the criteria for substance use disorder. The vast majority of those users do not. And so right from the start, you're biasing what you can say about the drug.

Does your proposal for decriminalization of drugs refer to all kind of drugs?

I have modified my position. I am no longer advocating for decriminalization. I am advocating for legal regulation of all drugs. Just like we regulate alcohol, just we regulate tobacco, just like we regulate in the United States, in a number of states, cannabis, and also in Canada, in Uruguay, they all have legal cannabis.

So, I am arguing that heroin should be available and regulated so that the quality control – the quality controls would be in place and people will not get contaminated substances. I am arguing that, yeah, cocaine should be available in a similar way where it's regulated for quality control. And so, I'm mainly arguing for the classic sort of drugs. But as new drugs come along and as people desire them, yeah, I think we should have legal regulation. In the United States for example, our country's founding document is the Declaration of Independence. The Declaration of Independence says that each citizen has at least three birth rights – life, liberty and the pursuit of happiness. And pursuing happiness by using drugs, some people do that, and our Declaration guarantees that as long as you're not impeding anybody else's ability to do the same. You should be fine. And so, I am arguing that our country should live up to its promise to its citizens.

... But what about people who cross the line set by the law? Should they be criminalized (imprisoned)?

No, there shouldn't be any criminalization because they are altering their own consciousness and they are making their own decision. It's not the state's concern. The state's job is to make sure that the substances that I use are of good quality and make sure that they inform the citizens of the potential risk and benefits of that substance. That's the state's job. Just like they do with food products, just like they do with other products: driving an automobile, they ask you to put on a seat belt and those sorts of things. The state helps people to duly engage in these potentially dangerous activities more safely. Drugs should be seen just like we see automobiles.

More people might engage in the activity, that absolutely might be one of the things that could happen. But another thing that will happen, however, is that there would be fewer people who die from contaminated substances. That will definitely happen. There would be fewer people who go to prison. There would be less amount of money you would need to pay your police for these undercover activities that get people killed and are just costly. So, you have risk and benefits, positives and negatives. I think the positives outweigh the negatives.

I don't have a crystal ball, I am not a genie or a wizard, so I can't predict the future, but I do know is that the plusses will outweigh the negatives. And it would be consistent with allowing adults to make their own decisions about their health, their life, their pleasure and all the rest of these things.

Does drug use limit our “free will”?

OK. An example that my wife uses for this is – let's think about people who are obese because they eat a lot. Right? And so, they just over-eat, they can't control for whatever reason. Do we say that... some food items have caused them to lose their free will? So they eat and we should ban that food item or put them in jail? It's ridiculous, that sort of thinking. You know, there are a number of people as you know, they engage in a lot of alcohol use and so do we say they have a lack of free will?

First of all, free will can be argued to be an illusion, number one, because when you live in a state that tells you what your choices are, you don't have free will. It's an illusion in most cases. Right? But the job of the society is not to protect people from themselves and that's where the problem becomes. It's like, I am protecting you from you. No! I don't need you to protect me from me. It's my life as an adult and that's what I would choose.

Being in the United States and being a Black man especially in the United States... it raises the question for people who actually think, who are Black men. It's like – you might ask yourself why do I want this life. Given this – there are people who decide to kill themselves rashly or whatever, maybe that's a choice that they thought was better. Who am I to say that they shouldn't be able to make that choice? Given this – the context.

How can we prevent people from developing a substance use disorder?

If you look at the criteria which we determine this disorder, it has a lot to do with social context and the person's level of responsibility skills. And so, that person has, for example – it says something like, they have tried to cut down their use or stopped their use unsuccessfully on several occasions. They spend a great deal of time trying to procure the substances or recovering from the substance, they use the substance in situations that are physically dangerous to themselves and then you just go down the list here.

A lot of those criteria have to do with the person not being well-developed, not having been taught some skills and it also has a lot to do with the illegality of the drug. For example, spending a great deal of time trying to procure the substance – a drug like alcohol, you don't have to spend a great deal of time, you can go to your local shop and purchase alcohol. But something like heroin, you have to find somebody who sells heroin so that increases the likelihood you'll meet that criteria for that. So that has everything to do with the illegality of the drug, the illegal status of the drug.

So my major point is that drug addiction has nothing to do with the drug. It has everything to do with all of these other social, environmental factors and personal factors. And so if the society takes better care of its people, then we wouldn't have these problems. That's one of the reasons that there are so many high functioning and accomplished drug users. Because, they have learned some skills – like when you drink alcohol, you know not to overdo it because you'll have to go to a meeting, because you have to work, you have to take care of your children, what have you. People who have not learned those skills are people who don't value those skills.

The drugs are the sexy things that politicians and everybody can look at and blame and then the politicians have a simple solution, and that simple solution gets them elected, that solution is to hire more cops, have more stringent and draconian laws and they look like a winner. But the problems that people really have are complex. And they are so complex that they take longer than an election cycle to fix. And so politicians are not going to address those problems because they want to have a solution that is quick. And so they can get elected in that cycle. And so the election cycle is the most important thing to the politician. The problems that people face are complex.

You may have, you guys know these things that are called supervised drug consumption sites, are you familiar with those things? And many countries who have

those, they are proud of themselves, they pat themselves on the back. But it's really... it's sad because if you make sure people have housing, then they don't need to come to these sites. If you make sure that they have some education then they don't need to come to these sites.

So rather than these sites, how about we make sure they have housing first? Exactly. That's number one. If you meet people's basic needs first, you don't have these problems.