Support for ibogaine from a LADC (Licensed Alcohol and Drug Counselor) in southeastern Vermont

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Dear Legislators

I am writing to discuss my experience as a LADC (Licensed Alcohol and Drug Counselor) in southeastern Vermont and express my support for the Ibogaine pilot initiative that is currently being attached to the upcoming opioid treatment bill S.243.

Recently I attended the 5th <u>Global Ibogaine Conference</u> in Tepozlan, Mexico, (March 14-16, 2016). This was a very well-organized affair featuring a very impressive list of Ibogaine treatment providers, research scientists, and some of the world's leading medical experts in the field of addiction medicine. Speakers came from as far away as Croatia, New Zealand, Portugal, Brazil, New York, and Gabon. The keynote speaker was Claudio Naranjo, Ph.D. a psychologist, anthropologist and writer well-known throughout the Latin American intelligentsia community and once nominated for a Nobel Prize.

The feast of information on this substance was more impressive than I ever imagined and the tidal wave of research and scientific evidence for its efficacy in terms of addiction interruption was nothing short of awe-inspiring. As an addiction treatment professional on the front lines of the opiate epidemic here in Vermont, I left feeling the arsenal of weapons at my disposal is grossly inadequate. Now it is extremely frustrating to be aware of such a powerful, safe and effective medicine knowing it is only available elsewhere.

It is doubly vexing to be aware that this situation is the result of a naive, and ill-informed political oversight. The Iboga plant and its derivatives is something for which little hard factual knowledge was available when USDA laws declared it a schedule 1 drug in the late 1970's, on par with heroin. One can only imagine that this unfortunate and primitive decision was due to the fact that Iboga is known to produce hallucinogenic effects and anything with any hallucinatory properties at that time was thrust into the same basket as LSD and other such 'psychedelics' which struck fear of rampant abuse into the minds of lawmakers of those turbulent times.

Unfortunately, these restrictive laws have remained virtually unexamined since the 1970's. Meanwhile, untold thousands of our citizens are dying when they could be offered a way out of the horrifying cycle of addiction. The effects of Iboga, as evidenced by the hundreds if not thousands of carefully supervised cases where Iboga (or it's derivative Ibogaine) has been used to interrupt sever opiate use disorders have had the opposite effect that lawmakers feared. Rather than produce another 'high' that would fuel further drug abuse, Iboga users find their appetite for addictive substances evaporates, leaving them in a clearer, more compassionate, dignified state of mind than many have experienced in many decades.

So yes, Ibogaine has proven to produce powerful hallucinogenic effects, But surprisingly, these effects are unlike any drug one might take for recreational purposes. In the case of Iboga, the hallucinations are not 'fun' but serve a very strong positive therapeutic value. While speaking with one provider in Mexico who operates a highly reputable Ibogaine clinic, I asked about success rates with opiate addiction interruption and was assured that no clients leave his clinic with any cravings or active addictive symptoms. A completely withdrawal-free, craving-free condition is achieved with one week of residential treatment and more than 80% of the former addicts report in post treatment studies no opiate use 8 weeks later, and approximately 75% are still drug free 6 months after that. These results seem miraculous but are reported aby critical scientific minds all across the globe. Imagine seeing a heroin addict free of his or her lifelong habit after one Iboga session. No need for a daily ride fifty miles to the methadone clinic. No need for costly suboxone prescriptions and no 'aftermarket diversion' of their medications, and thus a huge reduction in crime. No rehab in Vermont or any state can claim the 'success rates that Iboga offers. It just sounds too good to be true..

I certainly believed it must be too good to be true- that is why I found myself at that conference. The overwhelming results published and soon-to-be published by the impressive number of highly reputable Ph.D.s conducting outcome studies that corroborate these findings in Mexico, Brazil, St. Kits, Spain and Portugal were unanimous. I was very proud to be from Vermont when it was announced that there is a proposed law that might open the door to Ibogaine treatments s in my home state.

There is no substance quite like this natural plant, and nothing with anything like the promise it holds. However, the international lbogaine community has learned a lot more than simply that it works. There are protocols that must be followed, care must be taken in screening and application, and the environmental conditions surrounding a patient can be very important. Iboga is not a 'take-this-at--home' drug. Proper, respectful, protocols are key ingredients for success. I would therefore caution the legislature to proceed with hope and enthusiasm but also with careful, deliberate consideration.

I would be delighted to provide any consultation that might offer appropriate guidance. I might suggest you look at this Youtube testimonial, which is just one of many hundreds available. Just to be clear, I do not have any connection with the treatment facility mentioned here. https://www.youtube.com/watch?v=NMzrSG4f58U

Sincerely

Roger Guest, LADC