

The Scourge of Youth

NVT

Use of Heroin by Students Is Called Deadliest Fad Ever to Hit Campuses

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By RICHARD SEVERO

In the nineteen-forties, teenagers sneaked a beer now and then if they wanted to be daring. By the nineteen-fifties, beer had given way to gin, and campuses were filled with students who went on binges before assaults on telephone booths and girls' dormitories.

Then, a decade ago, a weed called Cannabis sativa, or marijuana, started to win favor over gin and subsequently, neophyte swingers on campus sampled hashish, LSD, pep pills, goof balls and assorted other concoctions touted to give the user something he did not have before.

But now, the youngsters in schools and colleges are becoming attracted to something that for them, at least, is new. It is a drug called heroin and, according to medical authorities, it is in many ways the deadliest fad ever.

A History of Heroin

Heroin, or diacetyl morphine, has been around for more than 70 years. In its earliest years, it was administered to people who were addicted to morphine. But it was soon discovered that the heroin was more addictive than the morphine. By the nineteen-twenties, addicts appeared who were injecting the heroin directly into their veins. Heroin production in the United States was stopped and heroin was no longer used, not even as a pain killer.

LSD, which found such favor with college students a few years back, was bad enough, in the view of drug experts. They report evidence that it has caused personality changes among those who have used it, even psychoses. But medical researchers say it is not addictive.

To those who have been unfortunate enough to get hooked on heroin, it will destroy their ambition, their aggressiveness to cope with life, even their sex drive. But most important, it may destroy life itself.

Proof of heroin's power can be seen at the city morgue at 30th Street and First Avenue. Increasingly, the slabs that fit into its 126 refrigerated cubicles contain heroin victims in their teens. In 1950, the mean age of those who died from using heroin was 35 years; last year it was a little over 23. Of the more than 900 heroin users who died in New York City last year, 223 were teenagers and one was only 12.

Last Saturday morning, the body of a 17-year-old Barnard freshman named Antoinette Dishman was found in a third-floor apartment at 1205 College Avenue in the Bronx.

Miss Dishman was no addict and there were no needle marks on her arms. The indications are that all she did was sniff heroin, and possibly some cocaine, at a party Friday night. It evidently was enough to kill her.

Some college students feel that sniffing heroin is somehow safer than injecting it into the veins. They do not realize that heroin taken up the nose will be absorbed into the blood through the mucous membranes.

Doctors explain that once in the bloodstream, heroin causes a precipitous decline in respiration. In Miss Dishman's case, she simply went to sleep—and never woke again.

Miss Dishman was described by those who knew her as a good student and a reserved person. What makes her and people like her experiment with something as dangerous as heroin is now the subject of study and debate by medical authorities.

One thing is clear: the notion that heroin addiction is caused by poverty, slums, affluence, or youthful disillusionment with America is an explanation being abandoned by leading researchers.

In Britain, the greatest growth in heroin use is reported among middle-class young people and it would seem that America's middle class is on the verge of experiencing the same upsurge that long ago was felt in slum neighborhoods. The question is—Why?

Dr. Milton Helpern, the chief medical examiner of New York who has studied the heroin problem for more than 30 years, believes that much of the fascination among adolescents and young adults with the drug subculture is imitative.

Dr. Helpern's theories on the "herd instinct" among the young is at least partially borne out in interviews conducted over the last year with hundreds of past and present heroin users—most of them in their 20's or younger and many of them from middle-class homes.

Old Motions Discarded

Many persons who have studied narcotics say that heroin users once were thought of as antisocial, suffering from severe mental problems. But Dr. Michael Baden, associate medical examiner, says he finds increasing indications that heroin users are frequently within the parameters of "normal" as society currently views that condition.

Neither Dr. Helpern or Dr. Baden suggests that there are no maladjusted persons using heroin; only that they have been joined by others who are doing it "to be with the group."

The problem is further complicated by a feeling among the young that they are indestructible, that they will not become addicted or that even if they do, that heroin is no more serious than marijuana.

But most medical authorities agree that heroin is always addictive, although the degree of addiction varies. Unlike alcohol, where a man can drink but not become alcoholic, there are no such exceptions with heroin.

If it is true that a lot of students are like Miss Dishman—experimenting, but not addicted—the chances for more such tragedies will be great.

One important reason is that one who buys heroin from a pusher can never be sure of how much is in the little glassine bag. Bags that look alike may hold seven milligrams of heroin, a mild dose, or 20, or even 30 milligrams. If someone takes a large dose the first time he tries it, his chances of being killed are much greater.