

HUBBARD COMMUNICATIONS OFFICE
Saint Hill Manor, East Grinstead, Sussex
HCO BULLETIN OF 25 OCTOBER 1971

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DRUG DRYING OUT

It occasionally happens that someone is still on drugs when he or she requires drug processing.

This sets up a very rough problem: DRUGS PREVENT ANY CASE GAIN.

If the person is still on drugs, processing will have little effect. He will not cease to be a drug addict. The drugs trap him.

When the world went druggie (about 1960), this problem of drying out became one of the first order. It was not just a problem to us. All pre-Scientology efforts failed—and had been failing for all Man's history. But relatively small numbers had been involved. After 1960 the problem became planet-wide.

Our first organization to handle this was Los Angeles. They made the person cease to take drugs for 6 weeks, and then audited the drugs out. Most of these cases stayed stable and thereafter had case gain and were no longer condemned to an eternity of disability.

However, some were unable to stop taking drugs.

What is called WITHDRAWAL SYMPTOMS set in. These are the body and mental reactions to no longer taking drugs. They are ghastly. No torturer ever set up anything worse.

The patient had this problem then:

- A. Stay on drugs and be trapped and suffering from here on out.
- B. Try to come off the drugs and be so agonizingly ill meanwhile that he couldn't stand it.

This was a dead if you do, dead if you don't sort of problem.

Medicine did not solve it adequately. Psychotherapy was impossible.

Two approaches now exist to this withdrawal problem.

1. Light objective (look outward, take attention off body) processes ease the gradual withdrawal and make it possible.
2. Nutritionist experiments indicate that vitamins assist the withdrawal.

Objective processes are covered elsewhere in this material.

VITAMIN THERAPY

According to world-renowned nutritionist Adelle Davis, vitamin therapy has had success in handling Withdrawal Symptoms.

Instead of just telling the person to break off drugs with all that suffering and danger of failure, the patient is given heavy doses of vitamins. The data is repeated here for information.

DRUG BOMB

ONE DOSE

1,000 mg of niacin amide (*not* nicotinic acid as it is severely toxic in such amounts). This for any mental disturbance.

500 Milligrams of magnesium carbonate (to make the Vitamin C effective).

2,000 Milligrams of Vitamin C.

25 Milligrams of B6.

200 Milligrams of B Complex.

100 Milligrams of pantothenic acid.

ADMINISTRATION

The bomb is given four times a day, roughly every six hours.

It is given in a mild preparation that furnishes intestinal flora such as yoghurt.

GREAT CAUTION must be used to give the dose in such a way that the vitamins will not corrode the stomach. If this is neglected the patient can be given a false duodenal (upper intestine) ulcer and will be unable to continue the treatment. Druggies are usually in terrible physical condition anyway. Thus all the above would have to be in "enteric coated" capsules, meaning an intestinal shielding must be on the pills so they gradually dissolve and don't hit the sensitive upper stomach hard enough to corrode it.

Thus milk with powdered amino acids in it would have to be given to wash the pills down.

In testing these recommendations stomach corrosion from the bomb was the main barrier noted.

If the bomb is given without any cushion the patient can

- (a) feel too full after eating
- (b) have a stomach ache
- (c) have a burning sensation
- (d) the exterior of the stomach can get sore.

These are all stomach ulcer symptoms.

If such symptoms turn on, end off the vitamins. Aluminum hydroxide tablets chewed up and swallowed in milk each time the symptoms start will ease the stomach.

Amino acids, intestinal flora and milk must then be given until the stomach gets better.

Shots, with a needle, especially of Vitamin C can be too painful. Not the needle, that's nothing; but the vitamin itself.

Such medication is in a crude state of research, mainly because of the violent hostility earlier exerted against vitamin people by the American Medical Association and other reactionaries to anything beneficial or new.

It is hoped that the stomach corrosion factor can be lessened by new preparations which do the same thing but less violently.

I am not particularly advocating the use of the Drug Bomb but as a pioneer in this area of research I feel that any data of value on the subject of drug withdrawal should be widely published.

The difficulties and agonies of withdrawal are the primary failure point in trying to salvage a being from the insanity of drugs.

SUMMARY

People who have been on drugs do not make case gain until the drugs are handled in processing.

Processing such as Dianetics is not effective when done on a person who is taking drugs.

Withdrawal from drugs sometimes sets up a violent physical reaction too painful or depressing to be continued and the person goes back on drugs.

Anyone on drugs or who has taken drugs is doomed as a being just like that. He or she will cave right on in and finish up in the ash can from here on out.

Only processing by Dianetics and Scientology can handle the effects of drugs fully. No other technology, medical or biochemical, has ever helped—we have thousands of cases to prove this completely.

The primary barrier to processing is getting the person off drugs and keeping him off until he can be fully audited. Then he will be very okay.

Two means to do this are known—A. Light objective processes while “drying out” and B. Nutritional therapy.

A and B can be combined.

Neither A nor B will fully handle drugs. The person on vitamins if not processed will relapse.

Vitamins are not drugs. They are nutrition. A person can be processed while on them.

By close application of these principles the person can be salvaged.

And having been salvaged can go on up to greater freedom and ability.

He won’t make it otherwise by any other known technology.

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