

**NEWSLETTER**

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**THE TWELVE STEPS FOR ALCOHOLICS ANONYMOUS**

1. We admitted we were powerless over alcohol — that our lives had become unmanageable.
2. Came to believe that a power greater than ourselves could restore us to sanity.
3. Made a decision to turn our will over to the care of God as we understood him.
4. Made a searching and fearless moral inventory of ourselves.
5. Admitted to God, to ourselves and to another human being the exact nature of our wrongs.
6. Were entirely ready to have God remove these defects of character.
7. Humbly asked him to remove our shortcomings.
8. Made a list of all persons we had harmed and became willing to make amends to them all.
9. Made direct amends to such people where-ever possible, except when to do so would injure them or others.
10. Continued to take personal inventory and when we were wrong, promptly admitted it.
11. Sought through prayer and meditation to improve our conscious contact with God as we understood him, praying only for knowledge of his will for us and the power to carry that out.
12. Having had a spiritual awakening as the result of these steps, we tried to carry this message to others with addictions, and to practice these principles in all our affairs.

**WHAT IS SPONSORSHIP?**

ALCOHOLICS ANONYMOUS began with sponsorship. When Bill W., only a few months sober, was stricken with a powerful urge to drink, this thought came to him: "You need another alcoholic to talk to. You need another alcoholic just as much as he needs you!"

He found Dr. Bob, who had been trying desperately and unsuccessfully to stop drinking, and out of their common need A.A. was born. The word "sponsor" was not used then; the Twelve Steps had not been written; but Bill carried the message to Dr. Bob, who in turn safeguarded his own sobriety by sponsoring

countless other alcoholics. Through sharing, both of our co-founders discovered, their own sober lives could be enriched beyond measure. What does A.A. mean by sponsorship? To join some organizations, you *must* have a sponsor a person, who vouches for you, presents you as being suitable for membership. This is definitely not the case with A.A. Anyone who has a desire to stop drinking is welcome to join us!

In A.A., sponsor and sponsored meet as equals, just as Bill and Dr. Bob did. Essentially, the process of sponsorship is this: An alcoholic who has made some progress in the recovery program shares that experience on a continuous, individual basis with another alcoholic who is attempting to attain or maintain sobriety through AA

When we first begin to attend A.A. meetings, we may feel confused and sick and apprehensive. Although people at meetings respond to our questions willingly, that alone isn't enough. Many other questions occur to us between meetings; we find that we need constant, close support as we begin learning how to "live sober."

So, we select an A.A. member with whom we can feel comfortable, someone with whom we can talk freely and confidentially, and we ask that person to be our sponsor.

Whether you are a newcomer who is hesitant about "bothering" anyone, or a member who has been around for some time trying to go it alone, sponsorship is yours for the asking. We urge you: *Do not delay*. Alcoholics recovered in A.A. *want* to share what they have learned with other alcoholics. We know from experience that our own sobriety is greatly strengthened when we give it away!

Sponsorship can also mean the responsibility *the group has* for helping the newcomer. Today, more and more alcoholics arriving at their first A.A. meeting have had no prior contact with A.A. They have not telephoned a local A.A. intergroup or central office; no member has made a "Twelfth Step call" on them. So, especially for such newcomers, groups are recognizing the need to provide some form of sponsorship help. In many successful groups, sponsorship is one of the most important planned activities of the members.

## **Sponsorship responsibility is unwritten and informal, but it is a basic part of the A.A. approach to recovery from alcoholism through the Twelve Steps.**

### **HEROIN**

**Heroin is highly addictive drug. It is both the most abused and the most rapidly acting of the opiates.**

Heroin, also a product of the opium flower is usually injected, sniffed/snorted, or smoked. Injection continues to be the predominant method of heroin use among addicted users seeking treatment. Researchers however, have observed a shift in heroin use patterns, from injection to sniffing and smoking. Typically, a heroin abuser may inject up to four times a day. Intravenous injection provides the greatest intensity and most rapid onset of euphoria (7 to 8 seconds), while intramuscular injection produces a relatively slow onset of

~euphoria (5 to 8 minutes). When heroin is sniffed, or smoked, peak effects are usually felt within 1 0 to 1 5 minutes.

Heroin addicts are at risk for contracting HIV, Hepatitis C, and other infectious diseases. Drug abusers may become infected with HIV, Hepatitis C, and other blood-borne pathogens through sharing and reuse of syringes and injection paraphernalia that have been used by infected individuals. Injection drug use has been a factor in an estimated one-third of all HIV and more than half of all Hepatitis C cases in the United States.

heroin is: typically sold as a white or brownish powder, as the black sticky substance known on the streets as ‘black tar heroin.’ Although purer heroin is becoming more common, most street heroin is “cut” with other drugs or with substances such as sugar, starch, powdered milk, or quinine.

Reports by the UNDCP have shown that there has been a global increase in the production, transportation and consumption of opioids, mainly heroin. Heroin use has become increasingly common in North America and Europe since the 1960s. The worldwide production of heroin has more than doubled or even tripled since 1985. Evidence from national surveys and other data sources suggests that the prevalence of heroin use in

general populations is relatively low, but growing in some areas. Globally, it is estimated that 13.5 million people take opioids, including 9.2 million who use heroin. However, in many countries (*notably those from Europe*), the majority of heavy drug users seeking treatment are primarily addicted to opiates.

The use of heroin in particular is causing widespread health and social problems in many countries. In Europe heroin injectors who regularly consume large amounts of different drugs, face a risk of death which may be 20 to 30 times higher than non-drug users in the same age range.

**There are an estimated 2 million heroin users in the United States, with some 600,000 to 800,000 considered hard core addicts.**

## METHAMPHETAMINE

Methamphetamine use can be lethal, addictive, and unpredictable. This drug has effects similar to those of amphetamine, yet the effects of methamphetamine are more damaging to the central nervous system.

Chronic methamphetamine abuse can result in inflammation of the heart lining, and among users who inject the drug, damaged blood vessels and skin abscesses. Heavy users also exhibit progressive social and occupational deterioration. Psychotic symptoms (paranoia, delusions, and mood disturbances) can sometimes persist for months or years after use has ceased. Over time, methamphetamine appears to cause reduced levels of dopamine, which can result in symptoms like those of Parkinson’s disease, a severe movement disorder.

Acute lead poisoning is another potential risk for methamphetamine abusers. A common method of illegal methamphetamine production uses lead acetate as a reagent. Production errors therefore may result in methamphetamine contaminated with lead and there have been documented cases of acute lead poisoning in intravenous methamphetamine abusers.

Hypo phosphorous acid, which is used legally for a variety of commercial purposes, is a chemical that

increasingly is substituted for red phosphorus in the methamphetamine production process. The U.S.

federal government regulates the sale of hypo phosphorous acid through registration, record keeping, reporting, and import/export requirements regardless of the quantity being handled or distributed. Although hypo phosphorous acid is a List I chemical under the U.S. Controlled Substances Act, methamphetamine producers typically purchase the chemical via the Internet or from associates who also are engaged in methamphetamine production. The use of hypo phosphorous acid in methamphetamine production is an extremely dangerous practice because of the deadly gases that can be generated as well as the risk of fire or explosion.

## COCAINE

Crack cocaine is derived directly from powder cocaine. In the process, cocaine (*powder*) is dissolved in a solution of ammonia or sodium bicarbonate (*baking soda*) and water. The solution is boiled until a solid substance separates from the boiling mixture. The solid

substance, crack cocaine, is allowed to dry and then broken or cut into “rocks,” each weighing from one-tenth to one-half a gram.

Crack is most typically heated and smoked. The term “crack” refers to the crackling sound heard when it is heated. One gram of pure cocaine will convert to approximately 0.89 grams of crack cocaine. Crack is typically between 75-90% pure cocaine.

The effects of crack are similar to those of cocaine yet they occur more rapidly and are more intense but do not last as long as a powder cocaine high. Smoking crack can cause severe chest pains with lung trauma and bleeding. Smoking crack also has a more rapid addiction potential.

Smoking crack delivers large quantities of the drug to the lungs, producing effects comparable to intravenous injection. These effects are felt almost immediately after inhaling and are very intense, but do not last long. For example, the high from smoking crack cocaine may last from 5 to 10 minutes. The high from snorting powder cocaine

can last for 15 to 20 minutes

### **Signs & Symptoms**

- Dilated pupils
- Hyperactivity
- Euphoria
- Irritability
- Anxiety
- Excessive talking
- Depression or excessive sleeping
- Long periods without eating
- Long periods without sleeping
- Weight loss
- Dry mouth and nose
- Paranoia
- Disturbance of heart rhythm
- Chest pain
- Heart failure
- Respiratory failure
- Strokes
- Seizures

### **OXYCODONE**

Oxycodone is a narcotic prescribed to relieve pain AND is twice as potent as morphine. There are many variations of Oxycodone products on the market but of these OxyContin, Percocet, and Percodan are used and abused most frequently.

OxyContin (Oxycodone hydrochloride ER) is a timed-release version of Oxycodone and until recently, was the only extended release version of Oxycodone. In March 2004, a generic version became available by prescription. The generic version quickly became available on the illegal drug market and may pose a significant threat because it is only available in 80 mg. doses, whereas OxyContin is available in 10, 15, 20, 30, 40, 60 and 80mg. doses. Oxycodone ER (the generic version) comes in small oval, light green tablets. One side of the tablet is labeled “93,” the other side is labeled “33.”<sup>1</sup>

Oxycontin is reportedly crushed (to break down the timed-release component) and then snorted or injected. Used as a substitute for heroin, abusers use the drug to relieve pain alleviate withdrawal symptoms, and gain euphoric effects typically associated with use of the drug. OxyContin generally sells for \$5 to \$80 per tablet, depending on the strength of the dose.

As a prescribed medication OxyContin costs \$4 per tablet. On the street, OxyContin sells for \$1 per milligram making a 40 mg tablet \$40.

Other possible negative effects include an allergic reaction, difficulty breathing, swelling of the face, hives, seizures, loss of consciousness, and coma. Effects of long term use include constipation, respiratory depression, physical tolerance, psychological and physical depression, physical tolerance, psychological, and physical dependence. Withdrawal symptoms include restlessness, muscle and bone pain, insomnia, diarrhea, vomiting, cold flashes, and involuntary leg movements.

### **Signs & Symptoms**

- Pinpoint pupils
- Nausea
- Drowsiness
- Impaired coordination
- Weakness
- Confusion
- Muscle relaxation
- Lower blood pressure
- Lower heart/respiratory rate

**1001  
USES!**

**MIRACLE  
STAIN  
REMOVER**

**HAS NO EQUAL!**

An AA member said he read a story that reported alcohol will remove stains from clothing. This is quite true and it will also remove the clothes off a person's back if used home, rugs, from floors, food from a table, lining from a stomach, vision from eyes, and judgment from a mind. Alcohol will also remove reputations, good jobs, good friends, children, sanity, and it can remove life itself.

**AS A REMOVER OF THINGS, ALCOHOL HAS NO EQUAL!**

**AVAILABLE  
AT NEIGHBORHOOD STORES  
EVERYWHERE**