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In early recovery, when we may experience many strong and unfamiliar feelings. Sobriety is a new way of life—we often feel overwhelmed. When we are first getting clean, many of us experience drug-related depression and paranoia. Some of us suffer from withdrawal. These times are difficult, but they are not necessarily indicators of ongoing mental illness. Meetings, our sponsors, our fellows, prayer, meditation, and Twelve Step literature get many of us through tough emotional times.

We remember that we are not experts in the medical treatment of mental disorders.

**Over-the-counter drugs** Over-the-counter drugs possess risks, especially if they are mind-altering substances. They can get us high—just as alcohol and other drugs can, becoming new problems with new consequences and unmanageability. Many of us talk to our sponsors honestly about any and all chemicals we take, just to be on the safe side.

**Clean and clear** In sobriety, we practice a new way of life without drugs and alcohol. Today, many of us can't imagine any feelings—good or bad—from which we would have to escape by taking a drug. We can tolerate discomfort and want to see what new experiences might be on the other side of it.

In our active addiction, our lives revolved around drugs: looking for drugs, being high, recovering from using, “white knuckling” it to stay clean for short periods.... Everything took a back seat to drugs. Clean and sober, working a program of recovery, this is no longer the case. Abstinent and working the Twelve Steps, we have a “spiritual awakening”—a change in our personalities. The obsession to use is lifted. We find a new freedom and a new happiness, a life beyond our wildest dreams.

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NEW YORK CRYSTAL METH ANONYMOUS

# ALCOHOL AND OTHER DRUGS

The goal of Crystal Meth Anonymous is to help crystal meth addicts lead a life free of active addiction. CMA recommends total abstinence from all drugs, including alcohol, for the following reasons:

1. Many crystal meth relapses start with alcohol or another drug.
2. Addicts tend to use any substance addictively, and when we do, we find ourselves with the same problems and maybe some new ones.
3. We have found our spiritual lives are compromised if we use any mind-altering substances whatsoever. Abstinence works best if we want to live the richest and fullest of lives.

**Alcohol** Most of us didn't come to CMA because we had a drinking problem. "Alcohol was never an issue for me," is a commonly heard in meetings. But our experience has shown that drinking alcohol can be a disaster:

**"ABC" (Alcohol Becomes Crystal)** We've seen it happen many times. One drink easily leads to two or more, and once a drug addict is under the influence, he or she is much more likely to use. Inhibitions are down. Judgment is impaired. We may feel a little high, but not high enough. We have known addicts to start off with one friendly drink at an office party and end up calling their old drug dealer that same night. Others experiment with "manageable" drinking, sticking to one or two drinks with seemingly no apparent consequences. But that can be a slippery slope. Once we are drinking a little, we are a big step closer to drinking a lot. Once we are drinking a lot—using alcohol to get high—it's not such a big leap to start using crystal meth again.

**Substitution** Stories of those who thought they could drink like "normal" people are common

in our fellowship. Our experience has shown that crystal meth addicts who drink are inclined to use alcohol addictively. Our goal is to live free of active addiction, not to switch from one substance to another.

**Being Around Alcohol** Because alcohol is legal and commonly accepted in many social settings, we may find ourselves in situations where co-workers, friends or family members pressure us to drink socially. Even if they know we are addicts, they may not understand why we choose not to have wine at dinner or drink a champagne toast at a wedding.

At times, we may want or need to be in a setting where there is alcohol. We can go to nightclubs, parties, and work functions where alcohol is being served. But we must be rigorously honest with ourselves about our motivations for being there, and about our ability to stay sober in a situation where others are drinking. If we feel tempted to drink or triggered to do drugs, we call our sponsor or other fellows, and if necessary, leave the scene.

**Recreational drugs** Recreational drugs can lead us back to crystal meth just as alcohol can. Many of us can't imagine why we would not eventually go back to crystal meth—our drug of choice—if we were using drugs anyway. Just as alcohol can become a new addiction, so can any recreational drug. Substituting one drug for another, generating new consequences, finding new flavors of unmanageability, and hitting a new bottom is not the life we want.

**Prescribed medications** We are not doctors. Prescriptions are sometimes necessary; being sober does not mean that we compromise our health or suffer needless pain. As sober people we are learning to take care of ourselves. However, we have to be careful about using our health problems as an excuse to compromise our

sobriety.

Medically necessary drugs that get us high are dangerous. We tell our doctors we are recovering addicts so they can be more careful about what they prescribe. But even doctors with good intentions may not be versed in addiction—the spiritual side of our condition is not their area of expertise. Besides, some of us were good at manipulating our doctors: A doctor willing to write a prescription and an addict looking for an excuse to get high is a bad combination.

The decision to take some medications is personal and individual. We suggest a spiritual solution first whenever possible. Taking a pill may rob us of the chance to learn and truly alleviate our discomfort. We talk to our doctors, sponsors, and trusted fellows, and try to do the right thing.

**Painkillers and anesthesia** "Coming to" after surgery is a precarious time for addicts, especially if we are alone with a bottle of painkillers. We ask others for help, getting our sponsors and experienced sober fellows to monitor our prescriptions. Taking painkillers can impair our judgment, putting us at risk for relapsing or developing a new addiction. We ask ourselves, are we looking for an excuse to get high? Are we really in pain or just impatient and unable to accept that "this too shall pass"?

**Psycho pharmaceuticals** Rigorous honesty and respect for others is important in this area. We have known people who were bipolar, schizophrenic, or clinically depressed and could not stay sober—or function—without medically necessary drugs. Informed professional supervision is essential in this arena. For example, some of us were already on antidepressants when we came into CMA. Stopping abruptly can be very dangerous, so we made sure we talked to our doctors.

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