

## Post-its from Practice

### No room for bigots

Prejudice continues and must be challenged, says **Dr Chris Ford**.



**Joan, a long-standing patient of mine, died a few weeks ago.**

Like so many, she led a full life, juggling work with family commitments and although eventually divorced, was proud of her three children, two grandchildren, and her circle of good friends. Over the years, I shared some of her moments of joy and times of difficulty, and was happy to support her stable need for long-term injectable methadone.

Her death was unrelated to her drug dependence which, although

it was one small part of her life, was often how she was defined. She dreaded going to hospital, fearing the reactions of the staff. Her concern was often well-founded – a typical example was when one doctor turned to her and said ‘What’s a nice lady like you doing taking those horrible drugs? You don’t really need them, do you?’ So before every admission, we ‘negotiated’ the continuation of her methadone maintenance and during every admission the hospital team would discuss reducing it.

She saw little of her family during her final illness but was supported and sustained by the daily visits of her best friend Alice, who also did her shopping, collected her prescription and generally cared for her. Alice is also my patient and takes maintenance methadone. Alice was understandably distraught when Joan died and phoned her eldest son seeking information about the funeral arrangements. Out of the blue, he demanded ‘Are you taking methadone?’ Taken aback, she admitted that she was and enquired why he wanted to know. Joan’s son then informed Alice that she was not welcome and refused to tell her where the funeral was to take place. Despite all our best endeavours, Alice missed her best friend’s funeral.

Charitably, we could say that both Joan’s son and the hospital staff acted out of ignorance. Prejudice (literally to pre-judge) however, arises when ignorance unites with heartlessness and I am appalled that its foul influence led to humiliation for Joan when in hospital and distress for Alice over the funeral arrangements. No wonder those who take drugs alter their behaviour and their lifestyle, in order to minimise its ugly stench.

Now ignorance may be ‘educatable’ but prejudice is inexcusable and those of us who loath it need to confront it at every opportunity. We need to be wary of colluding with organisations that express prejudicial views about people who use drugs and politely challenge colleagues who also perpetuate them. We need to support others so that they feel strong enough to speak out. We need to be aware of our own prejudices and be ready to apologise when we get it wrong.

I will remember Joan as a wonderful, multidimensional person who deserved to be respected and treated with dignity. It is a basic human right and an expectation we all have and we forget it at our and our society’s peril.

*Dr Chris Ford is a GP at Lonsdale Medical Centre and clinical lead of SMMGP*



**I read your article about tackling addiction alone last month, prompting this request. I’m 25 and I’ve been using base amphetamines and alcohol in increasing quantities for nearly two years. I want to give up now, so much. I’m sleeping badly, getting chest pains and losing my ability to keep a grip on my life. I’m also starting to experience paranoia which I never have before. I can’t go to my doctor or attend a clinic. I would lose my (well-paid and respectable) job if they ever got a sniff of my drug use. I need to do this myself and I need to do it quickly. Is there, or has anyone, any specific amphetamine-oriented advice that can help me give up alone?**  
**Sarah, London**

### Seek out support

Dear Sarah

Well done for admitting that your substance misuse has become a problem and well done for taking the brave step of asking for help.

It sounds like you’re ready to give up your substance use but not yet ready to trust anyone to help you, as you fear losing your job. I would like to reassure you that if you went to your GP or a drugs clinic no one would ever dream of telling anyone about your drug use. Both drug workers and GPs will keep confidential what you tell them.

They would only breach confidentiality if you or someone else is at risk. Often appointments can be scheduled around your work with many clinics having a late night appointment system.

You don’t have to do anything on your own; it can be lonely to have no-one to talk to or to share your hopes and fears with. We all need encouragement and support with whatever we are doing and it’s also good to share your problems with someone who can help.

It may be helpful to explore why you are using substances and what alternative coping strategies are available, as often substance misuse is a symptom of other problems.

Sarah you can go to your GP, Drugs Clinic, Counsellor or any health professional and you can trust the services that are there for you. Let them help you to move forward with your decision to become substance free.

The only reason they may report your drug use is if you are under the influence at work and this causes a risk to you or anyone else – for example if you were driving a bus whilst under the influence of drink or drugs.

Get the chest pains checked out with your GP to make sure you’re OK. Your GP may also be able to refer you to a counsellor. Drug clinics

often have alternative therapies to help with relaxation, offering massage and acupuncture for free. These may all help to get your sleeping patterns back. I would suggest your own anxiety may be keeping you awake and talking to someone might help. Your GP may also be able to prescribe medication to help get your sleeping patterns back, although the best way to get a good night’s sleep is to start dealing with the problems that cause the worry.

By writing to the magazine you have made the first step and are asking for some support and help; take one more step and speak to someone face to face. Most places won’t insist on you giving an address or even your real name.

Get the help and support you need and deserve so that you can get a good night’s sleep and be ready for that well-paid job when you wake up each morning. Best wishes,  
**Mel, counsellor and drugs worker**

### Staying anonymous

Dear Sarah

You can’t do this alone. You have to get help but this does not necessarily mean that you will lose your job, everyone will find out and you will be labelled with being a ‘speed freak’ for the rest of your life. There are organisations that will help you, where you can meet people who have overcome similar problems, and where you can work through a programme that has been proven time and time again to work. Maybe your first port of call should be Narcotics Anonymous – the clue’s in the name, no one need know! By attending meetings and using the 12-step process that has worked for countless people before, you can reclaim your life and beat your addictions. Good luck,

**Phillip, by email**

### Reader’s question

**I came across your magazine on the web and want some advice. I suspect my teenage son is taking drugs, something he vehemently denies. I need to know the truth and have heard about drug-testing kits (and seen them advertised online). Can your readers advise me if this is a sensible approach?**

**Ruth, by email**

**Email your suggested answers to the editor by Tuesday 31 October for inclusion in the 6 November issue of DDN. New questions are welcome from readers.**