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## 'Heroin. It Wants You Dead but it Will Settle for Miserable'

Heroin in the suburbs: A Middlesex man's story of how he descended into heroin addiction. And how he got clean again.

**Middlesex, NJ** - Brian (last name withheld) grew up on a quiet suburban street in Middlesex, NJ. With 14,000 residents, it's the kind of New Jersey town where everybody seems to know everybody else, and neighbors look out for each other.

As a kid, he rode his bike and climbed in the tree house his dad built in their backyard. He played sports: soccer in the fall, basketball in the winter and baseball in the spring. Later, in his teenage years, he found he had a talent for music and became adept at the guitar, the bass and the piano. He and his friends messed around in a garage band.

His parents were happily married. They both had good jobs.

He first tried alcohol at 13. A friend's parent kept a minibar in their basement and the boys were tempted.

"I tried to avoid pot, though. I was so into my music and I didn't want to get distracted. I would say, 'My friends and I don't do that,'" he said.

Of course, he did try it finally, at a party. “Around that time I started drinking, then drinking a lot, like every day,” he said. “I would drink to the point where I would black out.”

But Brian kept his grades up through senior year, and he was smart, smart enough to get a full college scholarship. He headed to Bloomfield College to study music production.

### **Customer gave pills as tip**

That's when Brian began “partying” a little more, as he puts it.

“This was my life: School, two part-time jobs, and drugs. I smoked weed as soon as I woke up every day and I drank every night,” he said. “And then I began experimenting with heavier drugs: cocaine, ecstasy and prescription pills.”

In fact, he remembers how he got his first pills: As tips for his pizza delivery job.

“I would deliver pizzas and people would give me a couple dollars, and say, 'Go get a beer after work.' Or, sometimes people would give me a joint. Then one time someone gave me pills as a tip: 10 milligrams of Percocet.”

“I will never forget that high,” he said, of the pills. “I fell in love with it. I wanted to feel like that for the rest of my life.”

Being on opiates, “made me feel more confident, more creative, even though I'd forget half of the songs I wrote when I was high. I felt like I fit in better with the world.”

At first, he treated himself to the high just once a week. Then twice a week. Then every weekend, plus a couple weekdays in between. Before he knew it, he was snorting pills before class in school bathrooms.

“That's how drug addiction starts off in suburban areas. Obviously, nobody is going to stick a needle in their arm for the first time. It starts off really slowly.

And then the habit builds up and soon it starts to cost a lot of money to get high every day," he said.

"And then somebody told me there was a cheaper alternative."

## **Heroin**

A single 30 milligram dose of the painkiller Oxycontin retails on the street for \$20 to \$30. Higher doses, up to 80 milligrams, go for \$50 a pill. And Brian had a three-pill-a-day habit.

Compare that to a plastic bag of heroin, which can be found for \$5 in parts of Newark, \$10 in the suburbs. A bundle of 10 baggies, how they're most commonly sold, sells for \$30.

"I was living in Bloomfield at the time, so I was pretty close to Newark. I used to go there to buy it," he said. "I was 22 or 23 when I first shot up."

Brian said he doesn't want to talk about the first time he got high off heroin. The memory is either too pleasurable, or too painful, or perhaps a combination of both.

"Let's just say it was a feeling that made me want to get up and do it every day."

Soon, heroin was all he wanted to do. He graduated from Bloomfield, but barely.

"Because of my scholarship, I had to keep above a 3.0. By the spring semester of my senior year, it was a 1.68. I should not have graduated, but because I had done well in my first few years, they let me walk," he said.

He stayed in Bloomfield, still working two jobs, including the pizza gig. "All my money went to drugs. I left work every day with money in my pocket, and overnight I spent it all on drugs."

## **Several attempts at rehab**

Then he started borrowing money. When that didn't work, he stole it.

"I broke into my girlfriend's mom's boyfriend's house looking for weed and pills," he said.

He was arrested, charged with burglary and the judge told him he had a choice: 180 days in jail or rehab, at a Christian facility in South Jersey.

"Of course I chose the rehab. But it was really strict and very, very intense — no caffeine, no cigarettes. All kinds of people were in there, for gambling, sex addiction."

Brian got kicked out for smoking cigarettes. Now, back in court, the judge doubled down: Double the prison time, 360 days in jail, or a second rehab attempt, this time at the Salvation Army halfway house in Newark. He chose the halfway house.

"It wasn't that bad. Eighty to 100 grown men were in there. They gave you a clean bed and they fed you. Guys were in there straight out of prison or were homeless. But it wasn't that bad," he recalled.

Of course, he could also just walk halfway down the block to a fried chicken joint and buy synthetic weed. A lot of the guys in the program did it. But it wasn't pills, Brian reasoned, and at least it wasn't heroin.

He graduated from the program, and came home to Middlesex, where he got a seasonal job cleaning gutters. He was there a few weeks when one of the men he worked with told him he had some Percocet painkillers on him. Would he like one?

"That was it. The \$4,000 I had saved was all gone by the spring. I went straight back to shooting heroin."

## **Full-blown heroin addiction**

"At first, drugs are fun. Then over time, it becomes a necessity and it's not fun anymore. You are doing it just so you can function. You're not even getting high anymore. You wake up every morning and it's something you *have* to have."

Brian said he would "lie constantly and manipulate anybody" just to get cash to buy more heroin.

"I stole a lot of my mom's jewelry. I stole my dad's tools and sold them. I would take money out of the change jar at the local bar," he said.

His parents kicked him out the house. He slept in motels, on strangers' sofas. He was shooting 20-30 baggies of heroin a day, he estimates, and also smoking crack and snorting cocaine. Anything he could get his hands on.

"I was a monster. When you get to that point, you don't care about peoples' feelings. You don't care who you hurt. All I cared about is where is my next fix coming from? And am I going to get withdrawal if I don't get it fast enough? That's how heroin is. It wants you dead, but it will settle for miserable."

 That's when his mother and girlfriend at the time suggested the Center for Network Therapy, an addiction treatment center on Cedar Avenue in Middlesex.

"I said sure, I'll give it a shot. I mean, it was two minutes from my house, why not? I had no faith it was going to work," he said.

Brian was stoned for his first meeting, Dec. 5, 2014. It was a group therapy session: He sat with several other addicts in a small room, with Center Director  Dr. Indra Cidambi. "We went around the group and said, 'Hi, my name is so-and-so and I'm here because I'm addicted to Xanax, alcohol, heroin, etc.' Then you said how many days you've been clean. Talking like that, it helped me identify my addiction as a disease."

And then Dr. Cidambi said goodnight, and everyone left. What was going on? No other treatment program let participants leave in the evening. Brian was terrified; he didn't trust himself. Would he use the minute he walked out the door?

"That night I went to the movies with my girlfriend. I went to the bathroom and shot up. And I remember thinking, 'Why am I doing this? This s--t is getting so old.'"

"I walked in the next day and announced to everyone, 'I used last night. I'm ready to get clean.'"

### **A different kind of addiction therapy**

"The thing is, we don't view relapses as setbacks here," said Dr. Cidambi, MD, who is board-certified in psychiatry and addiction medicine. "I try to make every relapse a learning experience: How did you relapse? What made you do this? We talk about it, and the patient often says, 'I see how I could have stopped myself, I see that this was the trigger.' If they learn from a relapse, they've achieved a step forward."

Identifying triggers is important, she said. She also views addiction as a chronic disease, similar to say, diabetes. A patient can never be 'cured,' so to speak, but they can learn to manage their illness and identify situations, people and places that will make their addiction worse — i.e., trigger them to use.

"For example, a diabetic cannot play a basketball game when they have low blood sugar. It will make them sick," she explained. "For an addict, they cannot hang out with their same group of friends who used drugs. They will likely use again and it will make them sick. It's the same 'trigger' concept."

The Center, or CNT as its called, is also unique because it is not an overnight in-patient facility. At the end of each day, patients leave and are expected to return in the morning for more talk therapy.

"You go back and sleep in your own bed. It gives you autonomy. That way, *you* make the decision every single day whether you want to come back again, whether you want to continue treatment or not," Dr. Cidambi said.

Brian called it "the ultimate test."

"It made me realize if you're serious about getting clean, you can go home and stay away from temptation. That's when I finally realized I was really ready to get sober this time," he said.

Patients' urine is tested every day. They know they will get caught if they use.

Dr. Cidambi and her staff of mental health professionals also preach patience to addicts — and their families, who are often angry. Very angry.

"I ask them, how long did it take for you to become an addict? For some, it took years. So how can you expect them to get clean in a few months?"

"Other places are too quick to kick people out," she added. "These people really *do not know* how to be sober. Nobody recognizes this. I tell them they learned how to shoot drugs and they are smart enough to unlearn that behavior. They recognize, 'I am not a bad person. I am just an addict. I can overcome this.'"

CNT is not a methadone clinic, she stressed. They supply some drugs, such as Librium and Suboxone, to help a patient get through the physical symptoms of withdrawal, a 24-hour period Brian called "the flu times 10. Vomiting, diarrhea, muscle pain, your mind racing: 'I should have saved a bag, I can't do this, I should have saved a bag. This will all be over as soon as I can take that drug.'"

### **Sober for more than a year**

It worked for Brian. He's been clean since Dec. 7, 2014. You can hear the pride in his voice when he says the date.

"CNT taught me you can't get clean for your kids, your parents or your wife," he said. "You have to do it for you. You have to get clean for yourself."

Now 28, he works as a cable technician. He still takes 1 milligram of Suboxone a day, a drug that is supposed to control cravings and block opiate receptors in his brain. But he is trying to get off it completely. He attends twelve-step meetings several times a week, which he said really helps.

"I've built up a network of people who are staying clean," he said. "I got back into writing music. I'm rebuilding relationships with people I hurt. I'm going on hikes. Little by little, I'm learning how to enjoy things in life that used to make me happy, and still make me happy."

But the specter of heroin is never far away. Often, it's right down the block.

"I would guess there are 5-6 heroin dealers in Middlesex right now. You don't have to go to Newark or Bloomfield to get it anymore, because there are people who have it five minutes away."

"It's getting more accessible and the kids are getting younger who try it," he said. "It's a virus."