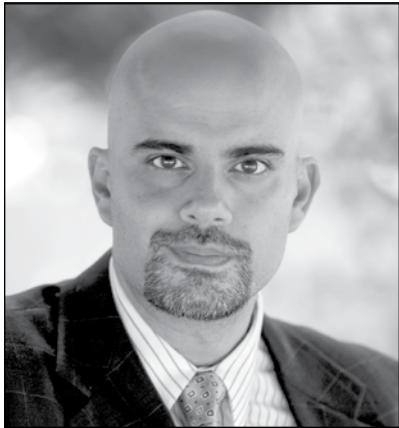


The Advocate



Insight on Diprivan...



With the recent media attention on Diprivan abuse (Propofol), we asked Dr. Omar S. Manejwala, Associate Medical Director at The Farley Center, to share some of his experience and understanding about this rare disorder. Dr. Manejwala is one of a very small number of physicians in the nation who has treated a significant number of patients with Diprivan abuse or Diprivan addiction. Below is a short excerpt from his response to a "Spotlight on Diprivan and Propofol Addiction." To read the complete article, go to www.farleycenter.com.

What is Diprivan, or Propofol?

Propofol is a widely used intravenous sedative medication that is used both for procedures (such as in surgeries or colonoscopies) and for non-procedural sedation, for example for an ICU patient who is extremely agitated. It has been around since the 1980s and is very widely used.

It is often described as "milk of amnesia" or "milk of the ICU." I've worked with many practitioners who prefer to use it because of its rapid onset and the ability to carefully titrate doses and the rapid recovery afterwards. It has more than a couple of decades of safe, effective use when used appropriately.

What is Diprivan abuse? What is Diprivan addiction?

When Diprivan was first being used, practitioners generally did not consider it to be an abusable medication. In fact, it isn't really controlled or regulated in the same way that powerful IV narcotics such as fentanyl and sufentanil are. That's not to say that anyone can access it, but the strict monitoring present for IV narcotics has not been generally done for Diprivan.

My ample clinical experience and that of some of my colleagues now readily confirms that Diprivan is reinforcing for some people. What that means is that people can abuse it, and people can develop the brain disease of addiction to Diprivan.

Who tends to abuse Diprivan? Who develops addiction to Diprivan?

Firstly, it is important to note that Diprivan abuse is extremely rare. Taking the available evidence in its entirety, it does seem that physicians, anesthesiologists and nurse anesthetists are *not* more likely to develop addiction than the general public.

In my clinical experience, most individuals who abuse Diprivan are health care practitioners, often anesthesiologists, nurse anesthetists and or technicians. Most commonly, they are using it initially to treat refractory, persistent insomnia. Insomnia can

(Continued on page 3)

Note on Traumatic Disorders & Diprivan Addiction: "Most, not all, of our patients with Diprivan addiction (rather than abuse) have a history of significant trauma, and this is usually (but not always) sexual trauma or molestation. This is an observation I made few years ago and shared with other colleagues who do concur. Thus, it is important to screen for trauma in this population and to treat traumatic disorders accordingly alongside the addiction treatment." ~ Dr. Omar Manejwala

For information, visit: www.farleycenter.com, "Spotlight on Diprivan and Propofol Addiction," or go to www.anesthesiologynews.com/index.asp?ses=ogst§ion_id=1&show=d.

Next Generation

By Stephanie Loeb, Executive Director



I remember being at the International Convention of Alcoholics Anonymous in Minnesota. I was probably six-seven years sober. We were waiting for a table at a restaurant.

It was an amazing experience. It was my first International. To see a whole town taken over as hundreds of thousands of sober members celebrate was incredible.

There was nothing like it. To stand in large convention hall where everyone was saying the Serenity Prayer. There was no doubting a Higher Power then! We went to get lunch at a local restaurant. The lines were long; all of us who were waiting were talking the talk. As we were waiting we realized that it would be much faster if there were four of us seated instead of two. Confident that everyone who was waiting was here for the convention, we asked the two women in front of us if they would like to join us. They agreed.

As a Higher Power would have it; I found myself just then seven years sober sitting with three other women who collectively had near 100 years of sobriety. And, as it seems always to happen, these old-timers began to recall the "Good Ole' Days." They spoke of traveling miles to go to meetings, of having their sponsors choosing them; to instructing the newcomers to sit quietly in

(Continued on page 3)



MARK YOUR CALENDARS!!!

October 16th

**The Recovery Comedy Show:
Mark Lundholm, Recovery Comedian**

October 16th & 17th

Fall 2009 Alumni Weekend

See Insert for Details!

FALL 2009



Movement Matters

We asked Susan Glover, LPC, about Movement Groups & Addiction Treatment at The Farley Center...

Why does “movement matter?”

What comes to mind is a wonderful observation of Emilie Conrad, Founder of Continuum, who states “Awareness changes as we physically move. As we become more fluid and resilient so do the mental, emotional, and spiritual movements of our lives.” This is what I want to share with our patients, to help them gradually develop an awareness that allows a more open and present understanding that they embody their life story, and to help them “move” forward in this amazing journey of discovery.

Describe the focus of Movement Groups?

It’s about freedom and spontaneity, the whole of the human body. I focus on awareness and attention to inner sensation and connection to essential states, direct experiencing and expressing of emotions and feelings, kinesthetic lessons and the connections to spirituality.

What are the key influences of your work in movement therapy?

There are a number of significant influences including Daniel J. Siegel’s research on Mindful Awareness, Emilie Conrad and Susan Harper’s Continuum Movement, and Mary Starke Whitehouse’s study of Authentic Movement. Additionally, I’ve personally studied the Hawkins Dance Technique for twenty-five years, The Diamond Approach for twelve and I incorporate a bit of Tai Chi and techniques from Ideokinesis.

Any final thoughts?

I like to share with my patients that dance and movement as well as spiritual questing have been a big part of my own healing journey. As I share my passion for movement and encourage curiosity, it helps to guide and support individuals as they begin to explore their own passion and connect with the unfolding thread of their authentic guidance. 🌸



WELCOME! 🌿

We wish to welcome the following new employees of The Farley Center at Williamsburg Place

- Charles Mallory, Unit Technician
- Jill Russett, Ph.D., Therapist
- Adrienne Spratley, Unit Technician
- Mahalia Thornton, LPN 🌸

Integrating Experiential Therapy

It’s often said that addiction is a whirlpool of repetition, that each day repeats itself. One’s energy, creativity and spirit are lost in the whirlpool. Given this struggle, this loss, it is tremendously valuable to integrate experiential therapy into addiction treatment.

At The Farley Center at Williamsburg Place, experiential therapy is a critical component of our comprehensive continuum of care. To meet the diverse needs of individuals in addiction treatment, a number of proven modalities are provided including: Mindful Movement and Family Sculpting, the Bonney Music Method, Equine-Therapy, Low-Ropes & Outdoor Adventure, and Mandala Therapy.

Pause for a moment, and simply think of... music, the “universal language,” as a mode of conveying deep, buried emotions. Also, movement, dance and sculpture can literally and figuratively move, change and embody the whole being.

“Direct experience is one of our greatest teachers,” said Susan L. Glover, LPC, Senior Licensed Farley Therapist. “Using various treatment modalities, our goal is to help our patients to ‘move out of their heads,’ to feel their feelings, to begin to heal, and to unfold the spiritual gifts of recovery.”

Experiential therapy involves active exploration, direct experience, and incorporates mindful awareness into treatment. Sharon Wegscheider-Cruse, nationally known speaker and founding chairperson of National Association for Children of Alcoholics, states, “Experiential therapy is a treatment approach that combines theory with action.”

Action provides the opportunity to begin to move from the “then and there” into the “here and now.”

Daniel J. Siegel, M.D., a leading researcher on mindful awareness and author of *The Mindful Brain* (Norton 2007), states that “mindful awareness has now been scientifically proven to enhance our physical, mental, and social well-being.” Siegel notes that mindful awareness seems to promote neuroplasticity, essentially, the rewiring of the brain in response to experience.

At The Farley Center, experiential therapy is designed to parallel and enhance the Twelve-Step principles practiced in treatment and recovery. “Consider the first two steps, experiential therapy provides structured methods to help the patient come to admit one’s powerless over alcohol and other drugs, and to begin to unfold an understanding of a Power greater than ourselves,” said Glover.

“The opportunity to explore, to feel and to heal through direct experience, and to apply experiential opportunities for spiritual growth is central to addiction treatment and recovery,” said Glover. “It is an incredibly beneficial element of facing the challenges, and embracing the joys of recovery.” 🌸



Susan L. Glover, LPC, is a Senior Licensed Farley Therapist, where she has been employed since 1998. Glover holds a B.A. in Psychology and M.Ed. in Agency in Addictions Counseling from the College of William and Mary, and M.A. in Spiritual Psychology from the University of Santa Monica.

Snapshot on Family Sculpting: Family sculpting is an intrinsically beneficial experiential modality used in addiction treatment. It provides a valuable therapeutic opportunity for the patient to explore family dynamics, to reenact the emotional climate of the family of origin, and to place the past and present in relationship. Major influences on family sculpting include the theories of Virginia Satir and of Gestalt Therapy. More recent insights from the theories of Bert Hellinger’s Family Constellation Approach, Al Pesso’s Psychomotor System and the Internal Family Systems work of Richard Schwartz are also incorporated. Various specialized techniques of psychodrama, role-playing and family therapy are utilized.

On one level, family sculpting creates a visual image, a “genogram,” as envisioned and experienced by the patient. Fellow peers in the treatment group are used to represent family members. This is a carefully structured therapeutic method to look at family structure, and how an individual internalizes, embodies, their family. While traditionally identified roles such as family hero, mascot, lost child, etc. are illuminated, deeper and subtler patterns and beliefs often emerge guided by the patient’s readiness to explore this material.

Therapeutic family sculpting can help to cut through layers of defenses and create greater awareness. Relational dynamics, behavior patterns, and emotions that trigger behavior become clearer, allowing the patient to develop new boundaries valuable for recovery. With this direct experience, powerful healing occurs and unconscious conflicts that may place a person at risk for relapse are addressed. This experiential awareness is then integrated into their recovery. 🌸

Insight on Diprivan

(Continued from front cover)

be due to any number of causes including depression, PTSD, alcoholism or addiction to other agents, or just primary insomnia.

Does Diprivan abuse treatment and Diprivan addiction treatment work?

In a word, **yes**. Blueprint project data for 908 physicians with alcoholism and addiction show extraordinary success rates (approximately 80% abstinence at a mean of 7.2 years) for addiction treatment when it is of sufficient duration and coupled with advocacy, support and monitoring such as is found in addiction treatment programs.

How does Diprivan get folks "high" if it lasts a short time and it causes amnesia?

Diprivan does increase nucleus accumbens dopamine concentration in animal models, and is preferentially self-administered by volunteers with a history of illicit drug use.

Addiction to Diprivan is possible, but addiction to alcohol and other intoxicants is far more common, and addiction treatment of the highest quality and of appropriate duration, when followed by advocacy and aftercare is very effective. Treating addiction saves lives.

Also, it is important to remember that, with addiction, people are using much more often to avoid a feeling state than to achieve one.

This is an important observation... many addicts describe their compulsive use as "just trying to feel normal." Nevertheless, the patients with Diprivan abuse that I have treated often describe a sense of euphoria on emergence from the drug.

Any final takeaways?

The bottomline takeaways are that addiction to Diprivan is possible, but addiction to alcohol and other intoxicants is far more common, and that addiction treatment of the highest quality and of appropriate duration, when followed by advocacy and aftercare is very effective. Treating addiction saves lives.

To read the full text of this article "Spotlight on Diprivan and Propofol Addiction," and for additional information on Diprivan abuse or Diprivan addiction, go to www.farleycenter.com.



August 28, 2009 Lecture:
Nan Reynolds, NACOA,
Guest Speaker on Grief,
Enabling & ACOA

SACAVA Professional contact hours are available for the Farley Lecture Professional Series. For information, call Gina Thorne, at (877) 369-4968.

Please Join Us **Farley Professional Lecture Series**

September 25, 2009 • 9:00 - 12:00 pm
Practical Application of Intimate Relationship Skills
PAIRS Workshop
Presenter: Tim Latsko, LPC, LMFT

November 20, 2009 • 9:00 - 12:00 pm
Sex Addiction
Presenter: James C. "Jes" Montgomery, MD

Farley Networking Luncheons

November 5, 2009 Luncheon
Washington DC
Hosted by The Farley Center & Assistance in Recovery (AIR)
RVSP to Robin McCown
at (678) 447-1595 or robin.mccown@farleyctr.com



It's Our Pleasure!... The Farley Center at Williamsburg Place wishes to thank the following individuals and organizations for visiting our facility:

- Albert Zandvoort, MD, Bayberry Clinic, United Kingdom
- Andrew Wainwright, CEO, Jim Geckler, Executive Director/COO, and Paul Hamblin, VP, Assistance in Recovery (AIR), St. Paul, Minnesota (National Headquarters)

If you are interested in visiting The Farley Center, call Gina Thorne at (877) 389-4968.

Next Generation

(Continued from front cover)

meetings for up to a year...

I then decided to ask a question. The question was: "So what happened?" I wanted to know why it wasn't like that now. Now it seems there is a shortage of individuals wanting to sponsor, let alone volunteering. Meetings are everywhere yet it seems that participation was growing less and less. What followed was one of the many truly amazing moments I have had in my recovery.

The women that had joined us hailed from Boston. One was a waitress, the other a school secretary. They had that great accent that screams 'I am from Boston!' I had asked my question, and without a moment's hesitation one of the pair spoke up and what she said I will never forget. She said: The program that Bill & Bob devised is working perfectly, just as they had planned. What she went on to explain changed my life and resulted in me never questioning what was happening in AA again.

She went on to say that in the beginning AA was founded. It was one alcoholic helping another. As they stayed sober the next generations became responsible citizens and were able to regain what they had nearly lost. It seemed that the possibility of breaking the intergenerational nightmare of alcoholism may be possible. The next generation began.

This generation now sober sooner, became doctors, teachers, business men, and they became counselors and opened treatment centers. Taking the Principle behind the Twelfth Step, they began to provide treatment for alcoholism. She said to me then: "You see dear, everything is happening exactly the way it was suppose to." I wish I knew her name so that I could thank her, for I will always remember her and her wisdom. I guess that is what happens when you stay sober for a long time. 🍷

For more thoughts about the "Next Generation," go to Stephanie's extended message on www.farleycenter.com.

The Advocate

The Advocate is published for the alumni and associates of The Farley Center at Williamsburg Place. This newsletter promotes sharing knowledge, support and ideas. We welcome your comments and ideas for future newsletters. Please contact the Business Development Office at (877) 389-4968, or send correspondence to:

*The Farley Center
at
Williamsburg Place*

5477 Mooretown Road
Williamsburg, VA 23188

Management Team

Stephanie Loebs, B.S.N.

Executive Director

Melissa Lee Warner, M.D.

Medical Director

Omar S. Manejwala, M.D.

Associate Medical Director

Eleanor J. Woollard, L.P.C.

Associate Director of Clinical Services

Penelope P. Ziegler, M.D.

Medical Director- Emeritus

Gina de Peralta Thorne, M.S.

Director of Business Development

Websites

www.williamsburgplace.com
www.farleycenter.com

The material in *The Advocate* is not intended for diagnosing or treatment purposes. The articles and comments offer information only. Consult your physician for medical advice.



July 17, 2009 *The Early Show*: Harry Smith, CBS anchor, spoke with Dr. Omar Manejwala about the effects of Diprivan on the body.

SERENITY LOANS

Financing for Addiction Treatment Services

Now Available: For many individuals, we understand that getting help with financial needs can make all the difference in obtaining addiction treatment... Serenity Loans is a credit facility specifically arranged for individuals wishing to access financial loans for addiction treatment.

For information regarding Serenity Loans, call the Admissions Office at The Farley Center at Williamsburg Place, (800) 582-6066.

IN THE NEWS...

Summer/Fall 2009 National News Coverage: In the interest of advocacy and public education, The Farley Center at Williamsburg Place has provided addiction medicine expertise for a number of recent national news stories on Diprivan (Propofol) abuse and Diprivan Addiction. Dr. Omar S. Manejwala, Associate Medical Director at The Farley Center, was featured in several stories sharing his experience and understanding about this rare disorder. Go to www.farleycenter.com to view the following national news stories:

The New York Times
August 6

ABC Primetime Live
July 29

ABC Good Morning America
July 27

Chicago Tribune
July 21

LA Times
July 20

CBS The Early Show
July 17

*The Farley Center
at
Williamsburg Place*

5477 Mooretown Road
Williamsburg, VA 23188

IN THIS ISSUE...

- 📖 Insight on Diprivan
- 📖 Experiential Therapy
- 📖 Family Sculpting
- 📖 Movement Matters
- 📖 Serenity Loans
- 📖 Next Generation
- 📖 Upcoming Luncheons, Lectures & Meetings
- 📖 And, More...



Check Inside for Exciting Details about the:

October 16th: The Recovery Comedy Show, Featuring Mark Lundholm

October 16th & 17th: Fall 2009 Alumni Weekend

Presorted
First Class
U.S. Postage
PAID
Newport News, VA
Permit No. 100

