

PILLS-A-GO-GO

journal of pills

Your Favorite pill news from around the world

#21



Pills south o' the border

Celebrity Pills

Pill do's and don'ts

Rockin' Victorian Weekend!

"in the public market place ... are to be seen ... one stall for vegetables, another for meat, and a third for *pills*."

— a Leeds surgeon writing for the *Lancet* in 1845, describes a typical Saturday night in his home town.

"Saturday afternoon the counters of the druggists were strewed with pills of one, two, or three grains, in preparation for the known demand of the evening."

— Thomas De Quincey in *Confessions of an English Opium-Eater*

Chix dig those pills...

"I like pills so much I can feel a warm glow in my body when I see a Dristan ad in the subway."

— Anonymous stewardess in 1979 book, *The Tranquilizing of America*

"People just don't understand... I get nervous when I realize how much I have to do each day and that I won't get here or there when I'm running late ... I take Valium."

— Betty Ford, First Lady, 1974

"I began taking 'nerve pills'... City folk call them tranquilizers... Every time I felt nervous I'd take a pill. And at bedtime I had me still other pills to get to sleep"

— Loretta Lynn 1978

And, on the launching pad

"Take your protein pills and put your helmet on."

— Ground Control to Major Tom



Pills-a-go-go is published 4-6 times a year by the Pills-a-go-go Empire. Subs are \$12 for a year's worth. PaGG also gladly accepts trades of zines we like, pill paraphrenalia, articles, pill information, and, of course, artifacts of pill culture.

The Pills-a-go-go mailing list is never given out and all names & other information are kept confidential.

Right now there are no back issues available, but we hope to remedy this pretty soon.

Of course the innards are copyrighted by Pills-a-go-go and the name is an official trademark, but feel free to reprint anything you want. Try to give credit where credit is due, though.

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#21

You would think with all this hoop-da-da press PaGG has been getting lately (*Rolling Stone*, *GQ*, etc.) I might at least make an effort to keep on schedule and crank out an issue "on time". I mean, I called the last issue "Summer" and here it's comin' on Winter and there was no Fall.

Which just shows the folly of predicting the future. There is no Fall issue, obviously — unless you wanna think of this one as the Fall issue. Call it what you like, this is a hurry-one-out-to-my-friends--so- they-don't-think-I've-disappeared issue.

By the way, I must get around to saying this sooner or later about subscriptions to PaGG. When the thing first came out (as you may remember) it was a humble one-sheeter with some of the pill news & a little commentary by me & sometimes others. Then the zine got bigger and bigger and consequently took lots more time and effort and... to put it bluntly, a year's subscription get's you a year's worth of Pills-a-Go-Go — however many issues that might be. It started out as a pretty steady monthly but then became bi-monthly and now it's lookin' more quarterly. Some people got more issues in their year than others.

But nobody's gettin' shorted on pages. I wanna make that clear. As PaGG increases pages, frequency drops per force but you still get the same amount of pillophilical news & commentary as you ever would.

Also, this is a zine and I want it to stay that way as long as it's just me doing it and I got no money and no staff or advertisers. Some of you may have gotten your issues from stores and I'll see if I can keep doing that, but it's kinda capital-intensive to do that and at the moment, I'm fresh out of juicy capital!

But I cannot forget you, my loyal subscribers. You've made the right choice to sign up with PaGG. You're the ones I've got in mind right now. This issue

may not even show up in the damn magazine racks!

So, please expect normal zine-ness from PaGG — the occassional late issue, for instance. Also, since I've decided not to try to one-up myself each issue, the price is back to \$12/year and you'll probably get about six issues for that. Fair enough?

Hey I do take submissions. I want submissions, submissions is what are making this very issue possible since yours truly doesn't have to write as much of it. Send me any damn thing you want. Letters are appreciated, too. Articles torn out of newspapers & magazines, photos, random scribblings — I want it all.

And for all of you involved in the pill industry at any level: I WANT GOSSIP! You send me the dirt and I'll go after it and protect your anonymity. Those of you who contribute articles, research, dirt, etc. can stop paying for PaGG as I consider this trade. Let's get some insider stuff, leaked documents, etc.

Lessee, anything else? Oh yeah, the next issue may be a while in coming too since I'm working on an already wee bit late *book version* of PaGG for Carol Publishing. Anything you write or send me here has a chance of being included in the book, which should be pretty high quality considering that the publisher's a big deal New York firm.

I'm still looking for pill art and pill artifacts like the legendary Mr. Ritalin statue one of our readers was kind enough to send me a photo of :

OK, gang, enough blabbering from me, let's get on to the world of pills!

First the celebrity news...



HEIDI FLEISS, SENATOR'S WIFE

• The big celeb news to report is Heidi Fleiss's flunking of a drug test in September — which showed she'd been using methamphetamine. This violated the terms of her release from jail pending trial and so now she has to go to a rehab program. Mom says it was Heidi's asthma medication. Good one, ma.

• Michael Fay, of Singapore ass-whipping fame also entered some kind of rehab program after getting caught huffing butane. By the way, we forgot to report last ish that, while in jail awaiting his caning, Michael was given both Prozac and Valium. His mom was real concerned about the Valium, citing the possibility of addiction. Apparently that didn't happen.

• Cindy McCain, 39-year-old wife of Sen. John McCain (AZ) squirmed out of drug-stealing charges by agreeing to go to rehab. It seems Cindy started up this charitable organization called American Voluntary Medical Team in 1988 then started ripping off Percocets and Vicodins from 1990 to 1992 when she kicked her habit. Now, two years after she got off the drugs she's going to rehab as penance.

ANIMAL DRUGS

• "Sick animals should not be denied modern medical treatment," drawled Senator Howard Heflin while promoting a bill that would allow vets to prescribe drugs for whatever species of animal and for whatever disease they want.

Of course this was previously illegal.

• Upjohn announced it would really go to town marketing its drug Naxcel now that it's been approved for urinary tract infections in dogs. Previously only chickens, hogs, horses, and cattle were legally allowed relief by using Naxcel.

• Seems Prozac's all the rage for use on dogs but not on cats, since cats get sick from it. Mainly it's being used to control "obsessive-compulsive" behavior such as too much barking, licking things, chasing their tails, in other words — normal behaviors for dogs locked up in the house all day. According to the *Wall Street Journal*, show dogs are being dosed with Prozac to quell the "profound anxiety" they feel at being forced to prance around a ring or stand in some ridiculous posture for the judges' amusement.

DEATH AND CRIME

• The decomposing bodies of an old married couple were discovered in a luxury Chicago lakefront apartment after neighbors complained of the stench. Cops found suicide notes, an audio tape, and a copy of *Final Exit*.

• In Hampton, VA an 8-year-old girl died after drinking a glass of cherry-flavored 7-Up loaded with a couple of teaspoonfuls of Roxanol (a morphine syrup). She was supposed to get Demerol, which is far weaker, but the pharmacist fucked up and, thinking he was providing a generic handed over the killer liquid.

The error was discovered a couple of months later when the girl's mom used her American Association of Retired Person's medical guide to figure out what went wrong.

• Psychiatrist Tony Hale of London, England told TV people he thought between 500 and 1,000 people were killed in road accidents caused by "one particular group of anti-depressants." No word on what pills he's talking about. A professor at the Univer-

sity of Surrey kind of backed him up saying blood samples from 300 seriously injured patients at two London hospitals showed 16% had prescription sedatives in 'em when they crashed and only 14% had alcohol.

• Iranian cops grabbed almost 6 tons of drugs after a two-day battle with smugglers near the Pakistani border. They also nailed 74 camels laden with drugs (probably mostly opium). Although Iranian cops have killed 64 smugglers and arrested another 215 since March 21 they sometimes catch only camels, which are trained to get to their destinations a lot like homing pigeons. Neat, eh?

CORPORATE BEEFS

• Burroughs-Wellcome is suing SmithKline to stop it from selling its anti-herpes pill Famvir, claiming the pill infringes on B-W's patent rights already established by its anti-herpes pill, Zovirax. Since Zovirax accounts for around a third of the company's income, the suit is important.

• In London, SmithKline agreed to pay a 2 1/2 percent royalty to Glaxo on sales of its anti-nausea pill Zofran. SmithKline said Glaxo had infringed on its pill Kytril. Maybe B-W can get the same kind of deal out of the Famvir suit?

• Upjohn finally managed to get an appeals court to reverse the 1992 judgement against it for \$2 million in a suit brought by ex-cop and murderer William Freeman, who blamed Halcion for making him blow his best friend's head off. Freeman's doing life.

• The FDA is accusing Genentech of using a bogus public health program as a way of drumming up business. In August, one of its employees was indicted for allegedly paying a doctor \$1.1 million in a kickback — so the company could hardly afford this latest trouble.

Genentech said it would stop its program of going around the country "screening" children in public schools for potential shortness as a function of its charitable, "non-profit" Human Growth Foundation. Some gov't officials say the foundation's screening program is just a way to drum up business for Genentech's growth drug, Protropin

• Hoffman-LaRoche has agreed to pay the government \$450,000 as a settlement against allegations it paid kickbacks to physicians through the use of bogus "research grants". The grants, which ranged from \$500 to \$2,500 were no more than spiffs paid to doctors who who prescribed their intravenous antibiotic Rocephin.

• Copley Pharmaceutical Inc. recalled a bunch of its OTC allergy medication, Brompheril, when it was discovered workers might not have been following correct procedure in production. The problem seemed to be with a coating process that requires two workers to be present — but only one was on hand.

A former employee at the south Boston plant said he was forced to ignore certain regulations because of bosses breathing down his neck.

"I told them [the bosses] what I was doing," he said, "and that I need some help, but they kept putting it off. All they wanted was production, get it out, get it out, get it out!"

• AT LAST, the German company, Bayer, got back the rights to its own name, which was confiscated along with everything else by the U.S. government in a greedy move during World War I.

They're not getting back any of the expropriated factories, and the firm had to pay almost \$3 billion to buy its own damn name from Eastman Kodak but now Bayer aspirin is really made by Bay-



er AG in Germany, which invented the stuff in the first place back in 1899.

"This is a special event in the history of our firm," Bayer chairman Manfred Schneider said. "We are pleased that we will now, after 75 years, be able to do business once more under our company name with the Bayer Cross symbol without limitations."

Another German drug firm, Schering AG, had its name stolen during World War II. The Schering — Plough company of the United States is an imposter of the real German company.

- Sidney Wolfe hates quinine pills, which his Public Citizen Group has called dangerous and reports of its effectiveness against leg cramps "almost folklore".

Between 1969 and 1992, 16 people have died in "quinine-related incidents." The FDA announced it will ban the sale of OTC quinine on Feb 22 1995. Wolfe is demanding that it be banned altogether and that might happen, too, so get some today!

- Sandoz agreed last September to stop selling women the pill Parlodel to help them stop lactating. The pill, which is a boon for Parkinson's and endocrine-problem patients also dries up breast milk but it's a bit too dangerous for that since, as Dr. Sidney Wolfe will tell you, it can kill you, cause strokes, heart attacks and seizures. This hasn't been proven conclusively but people are starting to win lawsuits.

- Perhaps looking for trouble, Hoffman-LaRoche and another company, Andrulis Pharmaceuticals of Rockville, MD are looking into running some human trials of *thalidomide* to see if it's any good at treating AIDS patients and people who have inhaled asbestos. The drug may also help people with lupus. It is theorized that the same properties that make the pill so dangerous to a fetus can be used against abnormal cell growth.

- In Brazil, there is somewhat of an uproar over the use of thalidomide because it seems it's getting into the hands of pregnant women, who either are not aware of the pills' effects on fetuses, or sometimes take it in the mistaken belief that it will cause an abortion.

The pill is distributed all over the country as a remedy for leprosy (works very well), multiple sclerosis and even certain kinds of itching.

Hoffman-LaRoche is not the only firm to see a possible boom in thalidomide. EntreMed is working with Harvard Medical School to see if the pill can prevent a common cause of blindness in children. Another study at the University of Toronto is checking out thalidomide's effectiveness in relieving an intestinal disorder.

OLD JUDGE LARSEN — WHATTA DICK

Pennsylvania finally got rid of Supreme Court jerk Rolf Larsen impeaching his ass from the bench. Officially, the charge that brought him down was evidence that he accepted or rejected appeals to cases based on the advice of a Pittsburgh lawyer pal.

Of course it was the judge's predilection for Valium, Prozac and Vicodin that made for the best testimony. Former flunkies for Larsen told how he made them go get him drugs under fake names so no one would know he liked pills.

He also ordered his secretaries to go on errands to pick up jockstraps and porno for him. Larsen had standing orders that fresh fruit be available to him. Furthermore, the fruit had to be of the correct temperature and ripeness. If he was displeased with, say, a bunch of apples brought to him, "Judge Larsen would spit them out into a garbage can beside you and become very upset," said a pretty secretary who was terrorized by the judge's twisted "court orders".

PILL PIRACY

A United Nations study published in late October says poor countries are being ripped off to the tune of about \$5.4 billion

every year by rich countries' pill firms.

The pharmaceutical firms, the report said, are making a good \$30 billion off plants & the like they learn about from local "medicine men" in the jungles, which they then patent, turn around and sell at a nice profit without compensating the natives.

"As private companies move into the developing countries' seed markets, indigenous farmers are finding themselves paying for the end-product of their own genius." said the report.

GOOD PILLS

- A couple of in vitro studies indicate good old aspirin might be of use in inhibiting HIV.

- And birth control pills just make good sense for any woman as they appear to cut the risk of a number of diseases — mainly ovarian and endometrial cancer. The risk for ovarian cancer is cut by a whopping 80%, pretty good considering how deadly it is. On the other hand, another study suggested it could increase the incidence of a very rare cervical cancer.

- Prozac's just about got the official nod as a treatment for Bulimia.

- But if another study, partially carried out at the University of Hawaii, is correct Prozac's days might be numbered. Prozac consumption among a bunch of rats showed the pill might just cause rebellion. Rats on Prozac stopped obeying the head rat. They did not become aggressive or seek to take over or anything, but they definitely stopped caring what he thought.

NOW, the government might pull the pill!

- Another pill, Megace (megesterol acetate) made by Bristol-Myers Squibb — normally used to fight cancer in its advanced stages has been found to relieve common hot flashes. You know, the hot flashes women experience during menopause. It also cures the hot flashes and sweating men get during treatments for prostate cancer

MORE PROZAC

The miracle pill/devil drug is on trial again in Louisville Kentucky where it is blamed for some jerk bringing an AK-47 to work (and an assortment of handguns) selectively gunned down 20 of his former co-workers. Eight of them died.

The maniac ex-employee at the printing plant had vowed revenge on the company which, he said "done him dirty".

MORE LAWSUITS

- A jury in Alexandria, Virginia, awarded \$8.8 million to a man who lost his liver after he took Tylenol and drank wine. So from now on Tylenol and other pills containing acetaminophen will bear a warning label telling people not to do this.

Antonio Bendedi, 39, said it was the Tylenol that ruined his liver. Johnson & Johnson is going to appeal since they pin the blame on the virus Bendedi had in the first place.

On the other hand, PaGG thinks Bendedi's alcohol consumption could have played a large part in hurting his liver — he was something of a lush.

- In October, a lawyer hauled in a \$4 million judgement against McNeil for causing the death of a 75-year-old woman who croaked after taking the popular muscle relaxant Parafon Forte DSC. The lawyer was backed up by consumer watchdog Dr. Sidney Wolfe of Public Citizen, who hates the pill. Now the lawyer, Allen Eaton is personally petitioning the FDA to yank the pill from

the shelves.

• Man, there is a hellacious lawsuit being brought by "the nation's neighborhood pharmacies" against 27 big-time pill-makers over pricing discrimination.

Lawsuits filed in Florida, Georgia, Idaho, Illinois, Kansas, Kentucky, Louisiana, North Carolina, Ohio, Oklahoma, Pennsylvania, South Carolina, Texas and Tennessee are also aimed at mail-order drug companies. Led by the Georgia Pharmacy Association, they say unfair pricing is putting 10 pharmacies a month out of business in Georgia alone. They say it won't be long before the nation's 30,000 neighborhood pharmacies are killed off.

HOW MANY HITS FOR A TANK TREAD?

Hungary announced it has signed an agreement to swap \$300,000 worth of pharmaceuticals for military spare parts from the Ukraine.

OTHER PILL NEWS

• How 'bout this new Aleve stuff? It's already become the third largest seller in OTC pain remedies. We here at PaGG have no opinion. Naprosyn is another NSAID that used to be aimed at arthritis.

• Indian scientists at the Indian Institute of Science in Bangalore say they've come up with a new drug to fight malaria. Bad news for the parasite that has built up some immunity to chloroquine and infects 300-500 million people a year. Good news for humans.

• Benjamin Stein of L.A., writing in the *Washington Post* has invented a new kind of economic study based on pills. It's called "bioeconomics" and theorizes that the market can be influenced by mood-influencing pills.

He suggests considering a public policy of mass administration of anti-depressants to keep investment high. In fact, he theorizes that the sustained rise of the stockmarket might be caused by the 12 million people who are on anti-depressants and what you might call "chemically optimistic". [good one, no?]

Should the market ever gets out of hand, the Federal Reserve and the FDA might consider raising the price of certain drugs to curtail their use. Of course, banning a drug outright or handing it out for free could be used in case of emergencies.

• Though the FDA banned it in OTC remedies, a prescription form of lobeline is being used to help people stop smoking. DynaGen Inc. is developing a lobeline pill that dissolves under the tongue, to be marketed under the name NicErase. Preliminary result suggest the pill to be very effective.

• Burroughs-Wellcome's anti-depressant, Wellbutrin, too, has been shown to be perhaps twice as effective as the nicotine patch in helping people quit smoking.

• Gliatech Inc. has announced it's working on a new stimulant — so far called only GT2016 — that works at certain histamine receptors in the brain. This is a new approach but one that's worked before for GT2016's father, Graham Durant, who also invented Tagamet. Good work, Graham!

• Another new drug, a derivative of the anti-viral drug Foscarnet has convinced test-tubists we're on the way to having a broad-spectrum virus killer. The stuff appears to be as much as 100 times as potent as Foscarnet. Of course in living humans these things tend to be a bit less powerful. Still, the drug's mode of action is hoped to be versatile enough to attack many different viruses at many stages of infection.



Letters to PaGG

Dear Pills-a-go-go,

I used an Oralet "fentanyl lollipop" on a patient the other day — she became totally disinhibited, told me she loved me and that she was having a great time — This is prior to go into the operating room to have her right big toe amputated

— Dr. Candyman, NY

Dear Pills-a-go-go,

Hey,

I enjoyed the issues you sent me, and I really do appreciate your giving me a free sub. First of all, I know that sooner or later they will turn one of them back, (they ban just about everything fun or interesting) but until then I will expectantly await the next issue.

[editor's note: prisoners get PaGG for free]

Now, the reason I'm writing . I've had a lot of time to study the shrinks in here, and now can try out just about any anti-depressant I choose.

I was on amitriptyline 25 mg 3X daily for 5 months straight. At first they gave me a pleasant "fogyness" but after a week, I had to take 50 mgs to get the same effect. After 2 weeks it took 100 mgs to get off. Soon, I began having terrible headaches (a common symptom of amitriptyline withdrawal) between doses. They slowly reduced my script instead of making me go cold turkey. I won't touch 'em anymore.

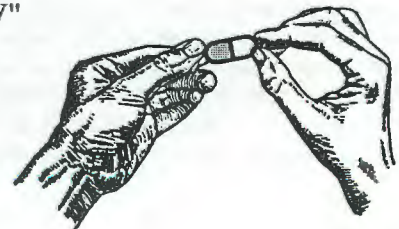
Next was Lithium. I had heard a lot about this pill & was really looking forward to it... Under normal doses it does nothing! I was very disappointed. When taken in larger doses it gave me a drunk feeling, Just what I wanted! But there was a problem I was not expecting. When the Doc gives you Lithium, he will call you in for routine blood testing to try and maintain the proper amount of Lithium in the bloodstream. So, it doesn't take them long to figure out that this medication is being used in some way they did not intend.

Real problem here. So, I'm off of Lithium now

I am presently being VERY closely monitored, but the shrink said he wants to try me on Prozac. So my next letter will let you know if Prozac will get ya where you wanna go.

— take care, "V"

You take
care, too,
✓! det



Mighty Morphin' PDR

by Chet Antonini

Whatever category you choose to rate books—weight, number of pages, famousness, ... whatever, the *Physician's Desk Reference* is the mother of all pill books. Alternating cover colors between blue and red each year the PDR is widely considered to be THE book for information on prescription and non-prescription drugs. All the doctors have them and no pill-head — or even mild pill-fan — is without at least one. As docs get their free copies each year the old ones get passed down through various folks in the office and osmose into the populace. Lots of people have a 1988 or-so copy and PDRs can easily be found in used book stores at various prices, depending mostly on their age.

Old ones are worthwhile to have around to look up drugs taken off the market or to see what they used to say about a pill before the lawsuits came in. Old PDRs can be free, too. Just ask your doc if he's got an old one you can have. Or ask your sister's boyfriend, the occupational therapist, to nab you one. Nobody really pays for a PDR. PDRs are strewn all over the place, being handed out gratis to every single doctor in the country and the chief pharmacist of every U.S. hospital with more than 25 beds. Free copies are also distributed to "other health-care professionals in pharmacies, dentistry, nursing homes, hospitals, and schools of nursing."

You can even buy the damn thing for like 70 bucks.

The oldest PDR in the PaGG Research Library is from 1960.

Back then the book was only a couple inches thick and was not full of all the cover-your-ass FDA bullshit that makes up most of the book we know today. Back then there were pills called "Darvo-Tran" and some pills were prescribed for "harried housewife syndrome". On the other hand it didn't have nearly so many pills and there was no color picture section for E-Z identification.

Today's PDR is thick has nearly 3,000 pages and is sometimes said to include every single pill sold in America. Would that it were true! If the PDR has any major failing it is this common misbelief. It is true that the enormous tome can stop a .32 caliber hollow-point, but it doesn't have *all* the pills you can buy at the

store.

It has almost every one and it probably has any pill the doc is likely to give you. But it's not complete. Here's why.

If you haven't figured it out yet, the PDR is not so much a book as a big-ass advertising flyer. Drug companies pay the PDR's publisher, Medical Economics Company Inc. in Oradell, New Jersey, to have their pills listed and described. That's why the pills are arranged by manufacturer, not alphabetically or by type or something. It's the pill companies who are essentially taking out ad space in a publication with no other copy. Pill companies pay more to get into the color picture section. Pills that aren't big sellers don't rate much space in the PDR. Little pharmaceutical companies specializing in vitamins or generic drugs can't afford to get their pills listed although they sometimes can often afford a simple list of their products, with no descriptions at all.

So if you don't pony up, you don't get in the book. It doesn't matter if you're the maker of the Fountain of Youth nasal spray, the PDR is not a charity operation, it is a serious publishing enterprise.

Something around three quarters of a million PDRs are distributed nationwide every year. It's spin-off, the PDR for Nonprescription Drugs, prints up and hands out more than 300,000 copies. Even the puny PDR for Ophthalmology has a circulation of better than 13,500. And then there are the supplements sent out from time to time to update the damn thing with new drugs, new dosage forms etc. etc.

There is also the PDR on CD ROM, which is beginning to make sense because the 1994 PDR weighs more than seven pounds — more than a laptop computer. The cool thing about the CD is that you can cross-reference things by side-effects or other parameters that would be nigh impossible to do with the book.

The PDR's popularity with pill-heads has prompted the company to put out a "layman's version" without so much technical jargon and sell it to the general public. Last year, it's first year on the market the PDR Family Guide sold 250,000 copies last year. A second edition with all the latest pills should be on the shelves now. Right beside it is PDR's new guide to women's drugs and diseases.

The propensity of pharmaceutical advertisers invading non-traditional advertising space (like newspapers)

is making the book even more popular.

So your friend, the venerable PDR, is really just an advanced species of the calanders, penlights and prescription pads with an advertisement every 20 sheets. It's a promotional device. It's there to influence prescription writing and to keep doctors abreast of what the hell some of their patients are talking about when they come in jabbering about the latest prescription pill ad they saw in *Time* magazine.

Truth be told, the PDR doesn't seem to be nearly as fascinating to physicians as it is to the rest of us. Doctors don't spend as much time poring through the PDR as some of their patients, who treat it like some Holy Book of Knowledge. In the past, there was a kind of implied agreement among doctors not to let the PDR fall into the "wrong hands", so any PDR, even an old one was a precious thing to a layman. It was a peek into the alchemist's book of potions and spells — forbidden secrets of pill lore. This PDR scarcity is rapidly falling by the wayside and now many patients are able to find a particular pill's entry with the alacrity of an idiot-savant

Some people seem to have whole sections of the book memorized, even the words they don't understand. Sometimes, like Itchy DuPont (see last issue) the knowledge gained from the PDR is quite helpful in a quick raid of a stranger's medicine cabinet, while poorly understood information can cause confusion leading to mistakes in self-prescribing with other people's pills — like with Itchy (see last issue).

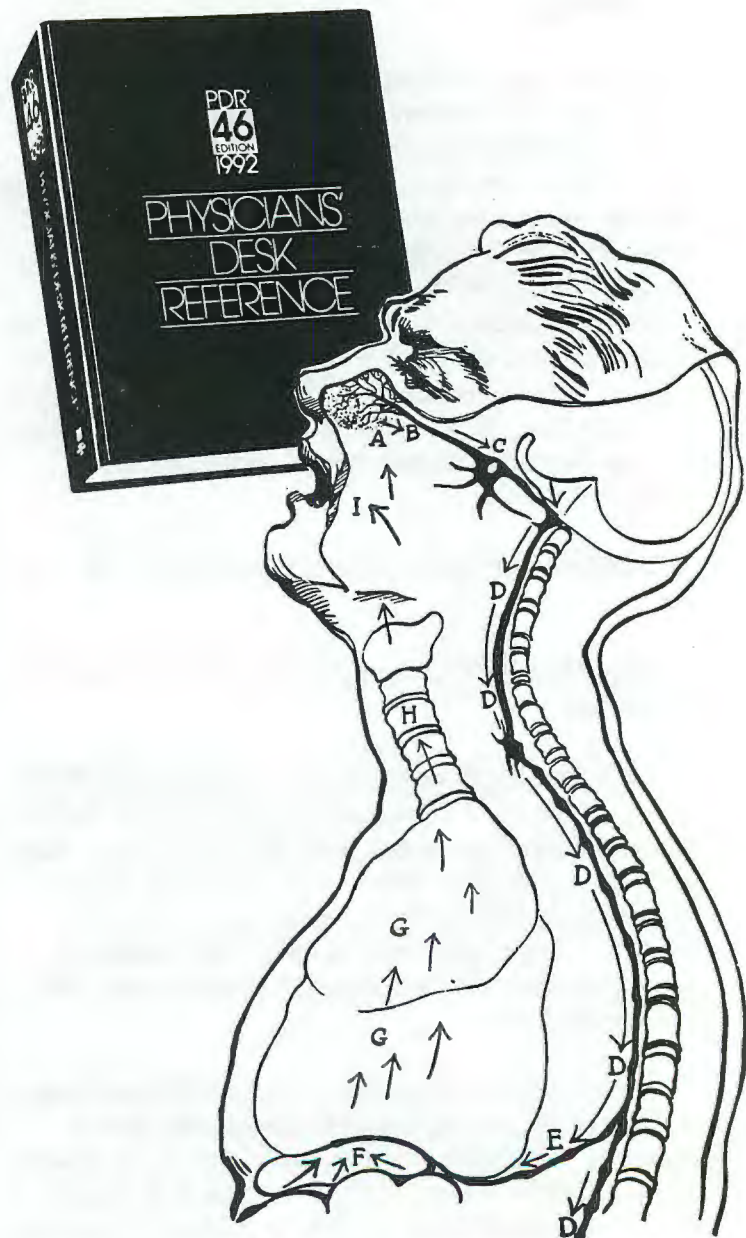
The PDR might be enjoying a wider readership than ever before, but that may not bode well for the publisher. Pill-heads love the PDR and the doctors know it. Sometimes medical journals publish letters from MDs about how a PDR was the root of a patient's problem or advising each other to look with suspicion on patients who refer to one.

Part of this may be that the doc doesn't want to feel he uses the same texts as Joe no-MD. Part of it is the genuine confusion caused by different interpretations of what pill the patient should have. Part of it may be the sheer size of the damned thing and its obsessive listing of every goddamn side-effect ever reported to the FDA including ones that don't make any sense (like when the placebo group reports more dry mouth than the test group — how can dry mouth be considered a possible side effect? But it is.)

After awhile the PDR becomes a parody of itself.

The loss of mystique may cause the downfall of the traditional PDR as King of the pill books. As it moves from the shelves of the health care elite to the lumpen patients, doctors may start to shun the thing as just another pop pill book like all those glossy paperbacks you see at B. Dalton's. But that may not happen quite yet.

I have yet to see a copy of ~~the~~ ^{the} new, more approachable PDR but I wonder how it could top the real thing? And don't forget the PDR is free so, for the price, you cannot afford to be without one, no matter what year it was published.



The (Unfortunately) Elusive Pill Etiquette

— by Ginger Vitas

For the past three years, I had (note the past tense) the good fortune of having an almost constant supply of Vicodin and Xanax. As expected, I also had a never-ending supply of “best friends” more than willing to help me partake. Anyone who has been fortunate enough to have a good stock, be it pills, pot, or any other “illicit” material knows what I’m talking about. Freeloaders come in many forms...girls who flirt excessively, then hit you up for “just one...please?” or fakers who complain of whatever ailment that you happen to have the pill for. Actually, my most favorite was when I was at school and this girl sitting in my group saw me slip (I thought covertly) a Vic to my friend (who happens to kick down when he’s got it good). “Oooh,” she squealed, “what’s that? I want some, whatever it is!” She’s fabulous, really. So now the whole table “wants some”. This raises the issue of drug/pill etiquette. I think that if one follows two basic rules, everyone is happy.

I like to think of pill etiquette as just plain good manners, also known as the law of “do unto others”. If you find yourself constantly on the receiving end of pills, something is awry; conversely, if you are continually handing out your stash, while you may be racking up some good karma points (what goes around, comes around), you may also be known as a sucker. A little (pointless) anecdote to illustrate: I gave out more Xanax to Nadia and Wenny than to be believed. I’m serious, I practically kept them medicated throughout our entire last year of college. I mean, I figured I was getting, I may as well spread it around a little. They would take like four hits at a time, so my prescriptions would go pretty quick. Never did they bring me anything...I figured they didn’t have a line to anything (except pot, and I don’t smoke). Well, up to Seattle these two piggies trotted to visit me. Of course they stayed with me. Hugged the Xanax and the tv. Come to find out, Wenny has a hot line to Soma and to Darvocet...but did she offer me any? You guess. I broke one of the rules of pill etiquette and asked her for a Darvocet. You’d think she’d have gotten the hint and given me a handful, but no...she kicked down ONE. Needless to say, I was much less generous from then on.

Basically, the first rule of thumb is *equitability* (I think I made this word up...you know what I mean). If you’re constantly *receiving*, by all means, GIVE A LITTLE! IT WON’T KILL YA! If you have three pills, give one. If you have fifty, give five. It’s cool...you get high and you spread the wealth. That’s what it’s all about. It’s not even how much you give, per se, it’s how generous you are.

The second rule (one I broke in the anecdote above) is **DON’T ASK!** People will give when they want to give. The chick I was talking about in the beginning asked all the time...and every time I told her to forget it. I really resented being placed that position. Jesus, if she wanted some, why didn’t she just get her own? There was another girl, Judy, who found out that I dug/had Vic. Turns out she’s a major pillhead too, but of the worst kind. “Man, my head really hurts,” she’d moan, always looking right at me. “Try some aspirin...” I’d say, kind of cornered-like. She’d reply, “I did, but it’s not helping. Hey, do you have, you know, anything?” “I, um, ran out, um, yesterday,” I’d say. Then I’d have to spend the rest of the day hiding my own consumption. That really sucks. Generally, she’d hit up my friend Joker and ask him if he knew if I had “gone to the doctor lately”. He’d cover for me, report back, and it would assure her not getting any. Once again, **DON’T ASK!** Sure, there are ways of hinting, but you have to be subtle, staying within the lines of good manners. If you want painkillers, mention a little pain. If you want speed, complain of being tired, but for god’s sake, don’t push it...even with friends. It’s the surest way to end a friendship...and a good connection.

UPON DILIGENT THOUGHT OF PILL ETIQUETTE



Okay, so the anecdotes were mildly amusing, but what about the practical aspects of pill etiquette? To be honest, there really are more than two. The following should make the phenomenon of PE a little more clear.

1. **Kick Down.** I think this was covered well enough earlier. If you haven’t got the idea by now, you probably never will.
2. **Don’t Ask.** This was covered previously as well. I would like to make it clear(er) that this rule is based on subtlety. Take a good, close look at the nature of the relationship you have with your provider. Instinct (do not confuse with greed) should be a good guide.
3. **If You’re Gettin’ For Free, Don’t Complain.** Very little is as irritating as giving away your last Vicodin (or Darvocet, or Xanax, or...) and having the idiot you gave it to tell you that they “don’t feel anything”. There are plenty of adjectives which come to mind, including (but not limited to): ungrateful, unthankful, wretched, unappreciative, and inconsiderate. If you pay for something, by all means, expect to get your money’s worth, if it was a gift, be gracious. The person gave it to you with the best intentions.
4. **Expect A Reasonable Return Rate.** This one is tricky. What is gold to one person may be silver to another, but get real. Ten Xanax is not going to get you ten Percodan. Ten Xanax may get you two Percs, and that would be if the person is generous. Sometimes dealing is the best policy here. It can avoid hurt feelings and feelings of being taken advantage of. Sometimes you win, sometimes you lose, but most often if things are discussed in advance, the trade works out for the best.
5. **If You Accept ‘Em, Take ‘Em.** Otherwise, don’t accept them. You’re only wasting the goods and depriving someone of a high (bad karma).
6. **If You Accept ‘Em, Don’t Lose ‘Em.** Or, if you do, don’t tell. A mistake’s a mistake, but you don’t have to rub it in.

Real Pill Names

URISPAS®

brand of
flavoxate HCl

100 mg tablets

Bearis = Butthead -ism ↗

Capsules

Oruvail®

[or’ü vail]

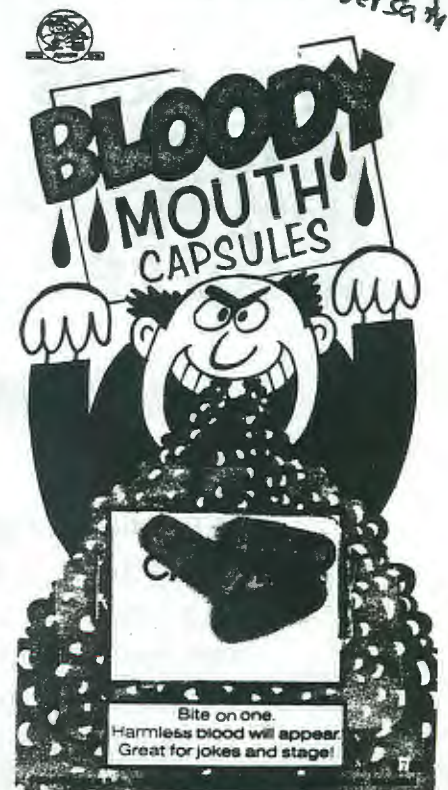
(ketoprofen)

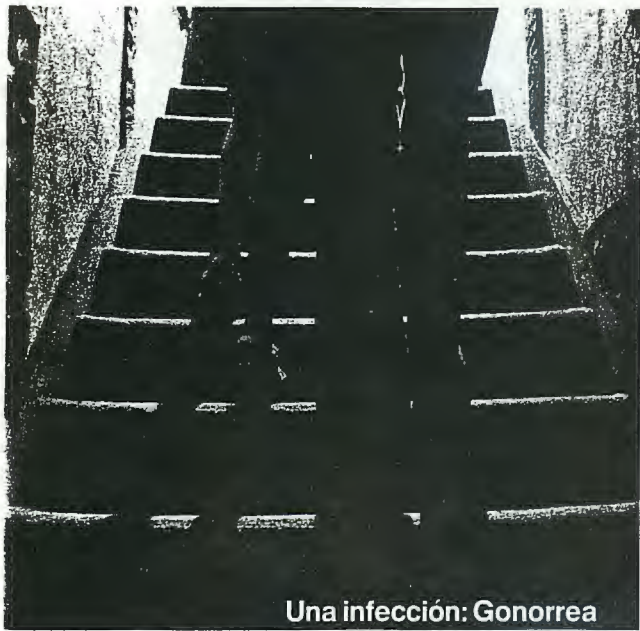
Extended-Release
Capsules

Description
Ketoprofen is a nonsteroidal anti-inflammatory drug. The chemical name for ketoprofen is 2-(3-benzoylphenyl)-propionic acid with the following structural formula:

Snuffy Smith’s middle name ↘

Pills are so versatile.





Una infección: **Gonorrea**

Una inyección:

Trobicin

El antibiótico para el tratamiento de la gonorrea — aún en casos debidos a cepas productoras de penicilinas



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Parámetro: Trobicin (spectinomina) Esénel como electrolito estabilizado para suspensión acuosa.
Resistencia bacteriana: Generalmente bien tolerado tanto local como sistémicamente. Sólo en menos del 1% de los pacientes se han comunicado molestias en el sitio de inyección. Con poca frecuencia se han observado mareos y sacudidos con febre.
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Presentación: frasco-ampolla de 2 gramos.

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3
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ESTIMULANTE GENERAL
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INDICACIONES

NOVOTONE está indicado en:

- Apatía e indiferencia al trabajo y vida familiar • Astenia presenil
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- Disminución de la libido en ambos sexos • Estados depresivos
- Fatigabilidad • Insuficiencia metabólica • Irregularidades menstruales y dismenorrea
- Nerviosidad • Obesidad y retención acuosa tisular.

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Frasco con 30 comprimidos

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In macho Mexico, not only are erection pills popular but look at the frank way it's assumed the clap will be around forever, spread by the disgraceful "puta". Lucky there's a shot!

DR. WILLIAMS' PINK PILLS FOR PALE PEOPLE (B) 1887

DR. CODRARE'S RED PILLS FOR PALE AND WEAK WOMEN (C) 1897

DR. WILSON'S BLUE PILLS FOR PALE PEOPLE (D) 1901

Pill colors (and alliteration) showed up as powerful advertising tools a hundred years ago. More recently we have, Nuprin (little. yellow. different). When Merck first came out with their antidepressant Elavil, it was rumored that a possible slogan was "The blue pill for the blue broad". Ah, the more things change, eh?

Pill Fiesta! Mexican pills!

by Chet Antonini

Many, but many, PaGG readers are familiar with Mexican pills. Mexico is, after all, the land of over-the-counter everything.

Well, except in Puerto Vallarta or other Mex tourist towns, although it used to be. For at least the last five years or so it's been clear that someone has instructed the farmacias not to sell the gringos any more Valium. I found out about the de facto ban in 1988 when I took a trip to Mexico for a little pill-powered vacation. I was really looking forward to lounging around drinking coffee and crunching up Valiums in this (then) little town called Zihuatanejo. "Zihuat" is the real town behind the hills from the artificial town of Ixtapa. Ixtapa is just hotels and beach and obsequious waiters. My little town was not set up for gringos as much as Mexican tourists. It seemed like a good place.

But those guys just would *not* sell any Valiums to me! None. "No se puede..." they'd repeat to me even as they shoved boxes of alternates across the counter for my approval. "Percodan?" they'd enquire, "Darvon?". No way, José, I wanted Valium. No dice. I ended up taking a few boxes of this & that and going back to my steaming hotel room to look at the map. It wasn't until I was much further into the interior that they started to loosen up.

The best places to score pills in Mexico are either right up on the border with the states or deep inside the country. If you've been following recent events in Chiapas, you know there are places in Mexico where the government just is not very respected.

Of course you can take whatever alternatives the clerk gives you. If he's offering Seconal or Dexedrine that's fine. But I've had guys in Mexico City try to get me to buy Sinequan and Haldol.

As if!

In this case you've got to be a little more than a customer. I've found there are a couple of ways to deal with it.

1) Flatter the clerk behind the counter. Chances are he's not really a pharmacist. I've even had little kids wait on me! So treat 'em like a doctor. Fawn and ask their sage advice.

2) Refuse to leave until you get what you want. Insist you've got a condition that requires that certain pill and you want it and only it. I have used this method to beat down the most stubborn of Mexican pharmacists. In fact, I've done it in countries all over the

Dextropropoxyphene — a narcotic not found in the U.S., is E-Z to find in Mexico!

Lisalgil*

Analgésico

Fórmulas: Inyectable Tabletas Lisalgil® S
Tabletas

Dipirona magnésica
(antipirina)-metilamino-
metano sulfonato de magnesio) 2 g 0.400 g 0.500 g

Clorhidrato de dextropropoxileno (Clorhidrato de α -d-4-dimetilamino-1,2-difenil-3-metil-2-butanol propionato) 0.065 g

ACCION: LISALGIL es un analgésico no narcótico que actúa por impregnación neuronal en los receptores periféricos y en el sistema nervioso central.

A nivel de los receptores periféricos (démicos, periósticos, viscerales y vasculares). LISALGIL se fija haciéndolos refractarios a la recepción y transmisión del estímulo doloroso.

En el sistema nervioso central, LISALGIL actúa en la médula espinal y en el talamo. Su acción en la médula espinal tiene lugar en el "sistema polisináptico aferencial de Cajal-Nordenboos", que es el área de multiplicación y amplificación de los estímulos dolorosos.

INDICACIONES: Para el tratamiento sintomático de los procesos que cursan con dolor y/o fiebre. LISALGIL está indicado en todo tipo de dolor Agudo o somático. Dolores en oncología, dolor en el postoperatorio. Dolores en traumatología y quemaduras. Neuritis, neuralgia del trigémino, herpes zóster, cefaleas, otalgias.

CONTRAINDICACIONES: Úlcera gastroduodenal activa, insuficiencia hepática, hepatitis, nefritis, discrasias sanguíneas, insuficiencia cardíaca, oliguria. No se administre durante el embarazo ni en la lactancia, ni por períodos prolongados.

world. You're a foreigner far from home and you want your medicine. Pronto.

3) Try to think of parallel drugs. Sometimes a pharmacy that steadfastly refuses to sell you Valium will gladly sell you lorazepam or any other benzodiazepine. They'll even sell you generic diazepam if you ask for it. That's the trick, you have to ask for it. These guys *want* to sell you drugs, they just don't want to get into trouble. The cops have said, "no more vitamin V to the gringos" so you ask for Valium "o la misma cosa" (or the same thing).

Won't sell you Percodan? You can bet they'll sell you all the Lomotil you want. Sure, it's not as good but it's better than going home alone.

I have never bought amphetamines in Mexico and don't know anyone who has. On the other hand I have had no trouble walzing into pharmacies, even in tourist areas, and buying their entire stock of Ritalin.

4) In Mexican pharmacies there is their version of the PDR, which I've gotten merely by asking for "el libro". I think that might even be how it's known in the Mexican world of pills— just "the book".

Anyway, get it out and using your knowledge of chemical names, look up some new stuff to take. Make lemonade! You can also use the "whatever's fresh" approach and just order something that catches your eye. Remember, there are lots of drugs approved for use in Mexico that you can't get in the states. This may be your big chance to try out laetrile. Or ask the little kid what he he thinks is good..

FROM: PILLS-A-GO-GO

1202 E. PIKE ST. #849
SEATTLE, WA 98122-3934

