



MEDIA RELEASE

July 2013

IS AUSTRALIA'S ADDICTION TREATMENT MODEL FAILING AUSTRALIANS?

The Cabin Chiang Mai, Asia's foremost rehab centre, will be conducting free workshops on the latest addiction treatment methods that demonstrate the merits of inpatient treatment on August 20th in Brisbane, August 22nd in Sydney, August 27th in Melbourne and Perth on August 29th, 2013.

“Jane”*: 43, married, two kids, binge drinker – diagnosed bipolar, detoxed at a psychiatric ward, where street drugs were freely available and the contacts she made there then began to supply her with amphetamines when she was discharged. She also became addicted to Valium on release as the hospital’s psychiatrist continued to prescribe her Valium as an outpatient doctor. On entering The Cabin she required a lengthy detox from benzodiazepines.

Australia is well known for being a world leader in the health field with high clinical standards in medicine, psychiatry and related disciplines, but has it thrown the baby out with the bathwater when it comes to treating addiction?

Addiction treatment services in Australia are delivered predominantly in outpatient or psychiatric settings, which are not usually based on abstinence principles, and the use of prescribed medications to suppress the symptoms of addiction or substitute the drug is fairly widespread. Numerous case studies of previous treatment episodes in Australian clinics provided by The Cabin Chiang Mai Rehab Centre’s Australian clientele, which account for approximately 35% of the centre’s total clients, point anecdotally to:

- Wilful overprescribing of addictive drugs,
- A general lack of residential options which aren’t in uncomfortable/clinical/psychiatric settings
- Ease of availability of illicit drugs within residential clinics/psychiatric hospitals,
- A lack of anonymity due to town centre location of clinics
- A general unease with being labelled a ‘psychiatric case’.

For many years private and publicly funded Australian drug and alcohol treatment services have promoted the harm minimization model of drug treatment perhaps more aggressively than any other Western country. This model of addiction treatment seeks to direct resources at ‘still active’ addicts rather than place emphasis on abstinence. Whilst this is a sensible model to prevent the spread of blood borne viruses (HIV, Hepatitis C) and other social harms, there now seems to be a growing public concern over policies which seem to enable addicts to remain in their addiction rather than helping them towards long term recovery.

Research findings by ASAM & NIDA* over the last 5 years show us that addiction is a chronic neurological disease affecting the reward pathways in the brain and the transmission of the pleasure/reward chemical dopamine. This condition is genetically inherited in up to 60% of cases. Sufferers of this disease often feel ill before they even start using drugs and consequently they will seek external sources of dopamine (drugs, alcohol, sex) which act as ‘reinforcers’ to top up the reward chemical in their brain.



Once the process of using substances begins (in someone with the disease) their brain is effectively 'hijacked'. This is why addicts display seriously impaired reasoning with regard to drug use, whereas ordinary people do not. It is also why addicts cannot take any drugs or alcohol at all if they are to have any chance of recovery. Because addiction is a chronic disease it cannot be cured. It relies on daily treatment and therefore the ideal of treatment and recovery is abstinence from any chemicals which boost the reward system. This is now a scientific fact which is established beyond doubt.

Australians suffering from this disease are now effectively voting with their feet and opting out of this system. According to The Cabin's Programme Director Alastair Mordey, "Australian outpatient treatment models are often not intensive enough to make these changes, and many do not even place abstinence as a desired goal. As a result many Australians now fund their own treatment and head abroad for a less medicalised, more holistic model offered in overseas residential rehabs like The Cabin."

Evidence is in the numbers – since going into operation in 2009, the north Thailand-based rehab has treated over 550 clients, 195 of which have been Australian predominantly in 27-37 year age bracket, making Aussies their biggest client group by country.

"Inpatient addiction specific treatment centres like The Cabin use Western-qualified addiction specialists and counselling techniques which take account of the chronically relapsing condition and place an emphasis on long term psychological training rather than continuing drug dependence," Alastair explained.

Ends

*Jane is an anecdotal case study based on factual accounts of many of The Cabin's Australian clientele

*ASAM <http://www.asam.org/advocacy/find-a-policy-statement/view-policy-statement/public-policy-statements/2011/12/15/the-definition-of-addiction>

*NIDA <http://www.drugabuse.gov/publications/science-addiction>

.....

*For more information please contact The Cabin Chiang Mai directly or their PR representative **Edelman Healthcare** at:*

The Cabin Chiang Mai

Reeya Chaicharas, PR Manager

+66 (0) 80446 8850, reeya@thecabinchiangmai.com

Edelman Healthcare

Christie Galloway, Account Manager

+61 (02) 9291 3368, Christie.galloway@edelman.com

Amy Sanders, Account Executive

+61 (02) 9291 3364, amy.sanders@edelman.com



About the Cabin

The Cabin Chiang Mai is Asia's most respected in-patient drug and alcohol treatment centre, with two facilities and a secondary treatment Sober House located in Chiang Mai. Since 2009 the Cabin has treated over 550 men and women from around the world with a programme completion rate of 96% and a recovery rate amongst the highest in the world.

The unique programme at The Cabin uses 3 Circles, which combines CBT, a secularized version of 12 Steps, mind mapping, mindfulness therapy and physical exercise therapy. A fully inclusive 28 day programme at The Cabin Chiang Mai costs \$12,900, about a third of the cost of private rehabs in countries such as Australia.