

Senator NELSON. For the treatment of the individual?

Mr. KING. It varies from person to person, Senator.

The average is roughly in the neighborhood of 16 weeks, in terms of us counseling with them intensively, and working with other aspects of our comprehensive youth plan, in developing possibilities for involvement in constructive activities for that person to address himself to. Beyond that, we do not really measure as part of our drug program.

Senator NELSON. Are all or most of the clients residents of the community?

Mr. KING. Yes; they are all residents of the community, with rare exceptions. When someone comes to us from outside the township, we see them, we do not turn them away, but I would say about 98 percent of the people we work with come from within the geographical township of Huntington.

Senator NELSON. What is the population within the geographical area?

Mr. KING. Two hundred and twenty thousand people.

Senator NELSON. And within that township, do you know how many physicians prescribe?

Mr. KING. Three who are outstanding, two doctors prescribe almost exclusively amphetamines.

They do not actually prescribe them, they give them away, and charge for the office visit.

Senator NELSON. There is no particular indication for their use, for control of obesity, as you said earlier?

Mr. KING. First of all, I do not feel they have value in the control of obesity, and, second, people obtaining the drugs are not obese, and some of them are almost thin enough so you can see through them.

Senator NELSON. What is the age group you deal with mostly?

Mr. KING. Mostly between the ages of 12 and 22, with the largest majority being around the ages of 15, 16, 17.

Senator NELSON. And in taking this history, how were those 12, 13, 14, 15 year olds introduced to the drug use?

Mr. KING. With the amphetamine abusers, they are an older population.

Senator NELSON. It is an older population than the general population of drug abuse?

Mr. KING. Yes, and I would say they are more toward the upper scale of the young people we deal with.

They are in their late teens and early twenties, for the most part, and they were introduced to those drugs by doctors.

That is particularly sad in a number of ways, especially in the sense of a young boy or girl, who is going through a lot of emotional and physical changes in adolescence. He becomes overweight because of overeating, out of emotional need at one time or another, or just because of physiological change, they are awkward and clumsy at the time, and they are very highly motivated to do something about their overweight condition, and they really become sitting ducks for doctors who practice in this way.

They go to the doctor, respecting his authority, respecting his position in society, and they go to him for medical help. They are doing the responsible thing, and through that treatment, they become