

Our only other accepted condition is in veterinary practice where the drug may be used in the depression of cardiac and respiratory centers. I refer here specifically to I.V. methamphetamine commonly known as "speed".

You will note, of course, that I have up until now not discussed the question of amphetamines and obesity, although I know this to be your main point of present interest. There are indeed a number of compounds on the market in North America based on amphetamine which have as their primary medical indication the depression of appetite. Many of the names are probably well known to you: phentermine, sold under the trade name of Ionamin; chlorphentermine under the trade name of Presate; diethylpropion under the name of Tenuate; more recently the drug fenfluramine known variously as Pondamin or Ponderex has been introduced, and most recently maxindol or Sanorex has been made available in Canada. Another is Phacetoperane known as Lidepran in Canada. All but one of these are amphetamine based. All have as their primary target the obese patient. They are not identical in terms of their stimulation of the central nervous system because changes in the molecule can decrease the actual amount of stimulation and thus euphoria. However all of them demonstrate some stimulation, and probably because of this the psychological phenomenon of positive reinforcement is produced. This simply means that unless the effect of a drug is perceived as pleasurable, we usually do not develop a hankering to use it again. The effects of amphetamines and most amphetamine-derived drugs for most humans results in a pleasurably altered state of consciousness (if one wants to employ that term).

In honest I must make some exception for the drug Fenfluramine. Although there is no argument that pharmacologically or chemically, one has to classify this as an amphetamine, it does have very little potential for abuse. In my opinion after employing it as a physician in a number of patients, I was impressed quite early how much it differed in terms of the expected appeals for another prescription. The drug probably effects more than one area of the brain, and has a side effect a tired, drowsy feeling rather than stimulation. Neurophysiological testing of the brain however shows some degree of subcortical stimulation. The point is that the drowsiness effect area is greater than the stimulant effect. In addition Fenfluramine seems to cause some nausea and sometimes diarrhea, and this