



Agenda

Cocaine

Julian Durlacher

Agenda

Cocaine

THIS IS A CARLTON BOOK

Design copyright © 2000 Carlton Books Limited
Text copyright © 2000 Carlton Books Limited
Pictures © various, see Picture Acknowledgements

This edition published by Carlton Books Limited 2000
20 Mortimer Street
London
W1N 7RD

This book is sold subject to the condition that it shall not, by way of trade or otherwise, be lent, resold, hired out or otherwise circulated without the publisher's prior written consent in any form of cover or binding other than that in which it is published and without a similar condition including this condition, being imposed upon the subsequent purchaser.

All rights reserved.

A CIP catalogue for this book is available from the British Library.

ISBN 1 85868 863 9

Design: Adam Wright/bluefrog
Picture research: Catherine Costelloe
Production: Garry Lewis

Agenda **Cocaine**

Julian Durlacher

CARLION 
BOOKS

CONTENTS

Introduction	7
Chapter 1 Early history	8
Chapter 2 Science	22
Chapter 3 Restriction	38
Chapter 4 The industry	48
Chapter 5 The war continues	62
Chapter 6 Cocaine culture	76
Chapter 7 Scandal	85
Index	95
Bibliography	96

PICTURE ACKNOWLEDGEMENTS

The publishers would like to thank the following sources for their kind permission to reproduce the pictures in this book:

Corbis/Bettmann 28/Bill Gentile 62, 67, 69/Francoise de Mulder 43/Owen Franken 58

ET Archive 9

Mary Evans Picture Library 23, 39, 77

Hulton Getty 85

The Image Bank/Archive Photos 17

The Kobal Collection 80

PA News 51/Policia 56

Retna Pictures Ltd./Jenny Acheson 90

Science Photo Library 11, 33/Dr Morley Read 46

Vintage Magazine Archive Ltd. 12, 19

Every effort has been made to acknowledge correctly and contact the source and/or copyright holder of each picture, and Carlton Books Limited apologises for any unintentional errors or omissions which will be corrected in future editions of this book.



INTRODUCTION

Illicit drugs are one of the biggest leisure activities in the world today, representing an estimated US\$400 billion per annum industry. During the twentieth century they moved, despite the best efforts of governments and law enforcers, from the underground into the mainstream. This series of books tells the stories of these drugs, from their initial synthesis and use as therapeutic or medical aids, to their adoption as adjuncts to pleasure. It also tells of the increasingly draconian legislation attendant as each drug moved from the medical to the sybaritic world.

Cocaine was the first local anaesthetic. As such it revolutionized surgery in the nineteenth century. Sigmund Freud extolled its virtues and recommended it to all his friends – and patients. A new drink called Coca-Cola was invented, containing the new elixir. Cocaine tells the story of how the drug went from medical saviour to firstly, the drug of choice for the rich and glamorous then the poor and disenfranchised.



EARLY HISTORY

NEW CONTINENT, NEW DRUG

Robin Williams' oft repeated joke that "cocaine is God's way of telling you that you've got too much money" pretty much sums up many people's attitude to the drug – that it's fun, it's up-market, it's expensive and it's harmless. But cocaine has an evil twin – crack cocaine – which is none of these. Crack is cheap, powerful, quick-acting and associated with crime and poverty. How is it that these two substances, essentially the same drug, have come to acquire such very different reputations?

The coca plant is indigenous to South America. Radiocarbon dating of some ancient chewing paraphernalia uncovered by archaeologists has shown that people were using coca leaves in Ecuador and Chile at least two thousand years ago. Why they chewed these leaves – whether as part of some religious rite, or to combat fatigue in work and war, or merely to get a buzz – is uncertain.

There is also some evidence, from graves in Peru, that masticated coca leaf was used as a local anaesthetic prior to the surgical technique of trepanning. This involves drilling a hole through a person's skull and today is mainly carried out to relieve pressure on the brain but was an ancient and common treatment for any number of ailments. The first documented use of coca leaves comes from the Spanish, who arrived in Peru in the mid sixteenth century. They noticed that the Incas, who by that time had come to dominate most of what is now Bolivia, used the leaves sparingly, often as a reward or inducement. They considered it to be divine, claiming that the God Inti had created it to alleviate thirst, hunger and the burdens of life.

The Incas didn't just chew the leaves, they had a highly developed method of preparation. They first combined coca leaves with some sort of alkali, such as lime or ash, and bound the two together with cornstarch or bird droppings to form a pellet. They



A PERUVIAN POTTERY FIGURE OF A WOMAN CHEWING COCA

even had a word – “cocada” – which meant the time (about 40 minutes) or distance a man could walk (one–two miles) before the pellet was exhausted.

The Spanish had an ambivalent attitude to this curious practice at first. The Catholic church saw it as a heathen habit and a hindrance to its attempts to convert the natives to Christianity. But these voices of Christian conscience were largely drowned out by the sound of money. In 1545, large deposits of silver were discovered at Potosi, high in the mountains of Bolivia. The Spanish found that their workers functioned much better at these high altitudes when chewing coca

leaves. So they began to cultivate the plant and sold it on to the toiling natives. As a result, the colonists made a fortune at both ends of the process: they made a huge profit on their coca-leaf production, over which they now held a monopoly, and they got greatly increased productivity from their workers. Everyone was happy – even the workers, who were in a constant state of semi-intoxication.

But while coca leaf became an increasingly important commodity in the colonies, integral to the despoiling of the continent's natural resources, it remained virtually unknown in Europe. The Spanish were not particularly keen on advertising the riches of their newly annexed continent. There were strict import and export controls, with all produce from the Americas entering Europe via Seville. Books about the New World were subject to heavy censorship by the King and the Holy Office of the Inquisition.

The first that anyone outside Spain heard about the coca plant was in 1574, with the appearance of a Latin translation of a work by the explorer Nicholas Monardes. An English language version was produced in 1577, written by John Frampton and called *Joyfuller News Out of the New Founde Worlde*, wherein is declared the virtues of “herbs, trees, oyales [oils], plants and stones”. In the book, he says of coca: “Surely it is a thyng of greate consideration, to see how the Indians are so desirous to bee deprived of their wittes, and be without understanding.”

After this, the coca plant disappears from view in English literature until 1662, when Abraham Cowley published a poem called *A Legend of Coca*. Clearly, coca was of little interest outside the colonies. The main reason for this is that coca leaf does not travel well. By the time the leaves had reached Europe they had lost most of their potency.

This remained the state of play for the next two hundred years. Coca continued to be cultivated and consumed in the Americas, with the occasional plant reaching botanical researchers in Europe. Then, in 1859, Fredrich Wöhler, head of the chemistry department at Göttingen University, acquired sixty pounds of coca leaves. Wöhler was determined to find the “active ingredient” of coca and passed the leaves on to his assistant, Albert Nieman. Interestingly, Nieman's method for producing cocaine involves some of the same principles that the Incas used. He soaked the leaves in water and lime for three or four days and then added alcohol. Solids formed at the top of the mixture that, when dried, he named “cocaina”. The process has not changed much since.

Nieman gained a PhD for his thesis describing the process and died the next year from unknown causes, thus starting off the first ever cocaine-based piece of gossip. In his thesis, Nieman noted that

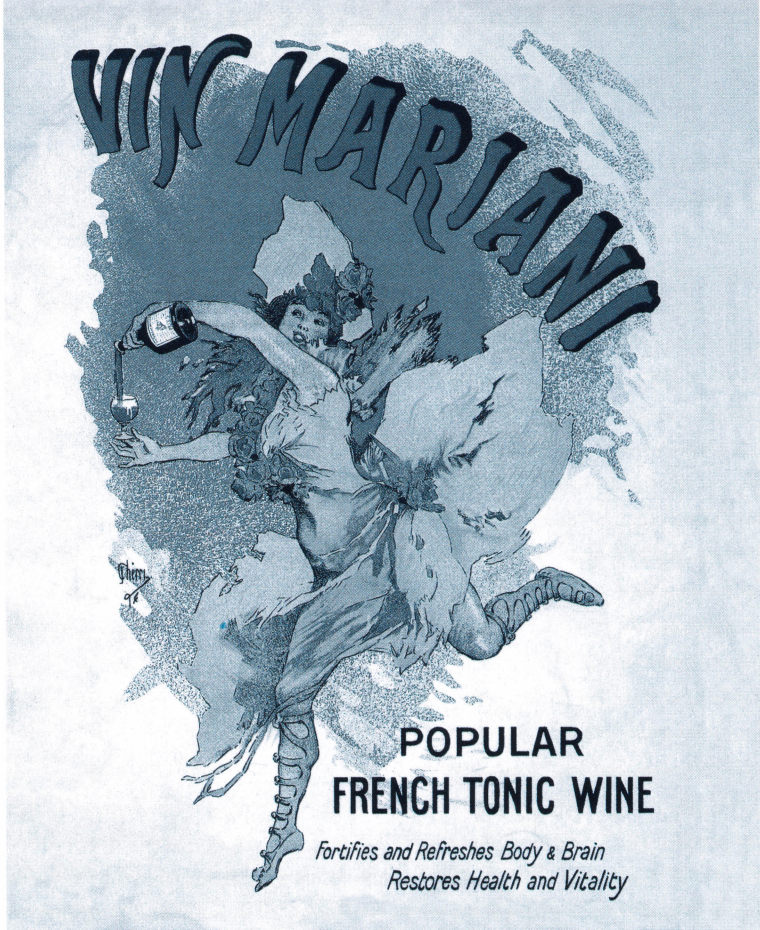


A NINETEENTH-CENTURY ILLUSTRATION OF THE COCA PLANT

cocaine crystals made the tongue go numb, but remarked on this only as a curious fact, not as a pointer to further research. Over the next 25 years, various people experimented with cocaine, most of them noting the anaesthetic qualities of the drug and its tendency to induce euphoria. Some also mentioned the despondency that tended to follow this euphoria. But cocaine remained firmly in the realm of the laboratory and these investigations found little audience outside the tight-knit world of scientific research.

POPE IN COCAINE BUST

The leaves, however, were used in a variety of preparations, the most famous of these being Vin Mariani, or Mariani wine. Angelo Mariani, a Corsican, trained as a pharmacist in Paris. Sometime around 1865, he created



VIN MARIANI, THE TONIC WINE WITH THAT EXTRA KICK

a tonic wine that included the extract of coca leaves. He first gave some to an actress who had come to him complaining of depression. She immediately perked up and then told all her friends about this fabulous new pick-me-up. Mariani, seeing he was on to a good thing, left the pharmacy where he was working and set up shop by himself producing his new tonic, which he modestly named Vin Mariani. By 1870 it was on sale throughout France. Before long he had offices in New York and London as well.

Mariani had something of a knack for self publicity. He solicited celebrity endorsements shamelessly – by 1902 he had a collection of over eight thousand letters of commendation. Some of the many famous people who endorsed it were Thomas Edison, George I of

Greece, the Grand Rabbi of France and Pope Leo XIII, who sent Mariani a gold medal with the accompanying letter: *"Rome, January 2, 1898. His Holiness has deigned me to thank the distinguished donor in his holy name, and to demonstrate His gratitude in a material way as well. His Holiness does me the honour of presenting Mr Mariani with a gold medal containing His venerable coat of arms."*

The President of France was similarly enthusiastic, thanking *"Mr Mariani, who spreads coca"*, as was the then President of the USA, William McKinley. Another Pope, Pius X, sent a letter to Mariani saying: *"His Holiness has received the bottles of coca wine sent by Signor Mariani. This indication of your devoted respect has been really welcome by His Holiness, who has asked me to let His pleasure be known to yourself and ask you at the same time to thank the same donor in name of His Holiness Himself. I am sure you will be eager to fulfil such a high wish."* H.G. Wells' letter was perhaps the most succinct. He drew two cartoons of himself – one "before", with the great author slouched and depressed, the other "after" showing him full of beans and raring to go.

Naturally, Mariani spawned imitators. Although his recipe was, technically, a secret, in reality anyone could make it. All it involved was steeping ground coca leaves in wine for a few hours, and then draining the wine off and bottling it (in, of course, an instantly recognizable bottle). One of those hoping to cash in on the coca wine craze was John Styth Pemberton, an American pharmacist. In the 1870s, he launched a similar product, called Pemberton's French Wine cola. It was intended primarily as a medical product, as well as being *"a most wonderful invigorator of the sexual organs"*.

Pemberton's wine was not, however, the gold mine he expected it to be. But then fortune smiled, in an unlikely way. In 1885, the town of Atlanta banned alcohol, indicative of a general trend toward prohibition that was growing in the USA. Pemberton reformulated his tonic, taking out the wine and adding extract of cocoa bean. He named this new tonic Coca-Cola – a headache remedy and stimulant. He also picked up from Mariani the importance of promotion and brand recognition. Admittedly, Coca-Cola was not endorsed by the Pope, but Pemberton's company continued to be successful, even after they removed the coca from their product in 1903.

Coca leaves found some favour in other ways, too, primarily as a performance enhancer. Cocaine, or at least coca, even sparked off the world's first doping scandal. Long-distance walking was becoming a popular competitive sport during the nineteenth-century. In 1876, the reigning English champion was challenged by an American, Edward Weston, to a 24-hour race, to be held at the Agricultural Hall in

Islington, North London. The Englishman quit after 14 hours and 65.5 miles. The American, though stopping briefly to nurse a few blisters, carried on for the full 24 hours and 109.5 miles. Later, it emerged that he had been chewing coca leaf throughout the race. There was an outcry but he was never stripped of the title.

There was a growing body of evidence that cocaine might prove useful as a local anaesthetic. But it was not followed up, mainly because there simply wasn't enough coca leaf of sufficient quality around to duplicate Nieman's process. Often scientists would find that, despite following Nieman's procedure exactly, they came up with a totally useless end product. This was generally because the leaves had lost their potency *en route* from South America to Europe. Edward Squibb, founder of what is now the pharmaceutical giant Bristol Myers Squibb, gave up on coca products altogether. The German pharmaceutical company E. Merck and Co started producing cocaine in 1862, but only made about fifty grams of it a year. The true therapeutic importance of cocaine only came to light in 1884. Two figures lay claim to its introduction to modern medicine – Sigmund Freud and Karl Koller.

FREUD'S DREAM

Freud and Koller were colleagues at Vienna General Hospital. Both decided to experiment with cocaine in 1884. No one is entirely sure of the genesis of these experiments – whether Freud and Koller were acting independently or had previously discussed the subject. The matter is not clarified by Freud's discussions of the episode in his autobiography and letters, which are full of inconsistencies.

Freud began to experiment with cocaine in April 1884. At the time he was an unknown, penniless, 28-year-old neurologist. His main goal in life was to earn enough money and/or glory to be able to marry his fiancé, Martha Bernays. *"I have been reading about cocaine,"* he wrote to her *"the essential constituent of coca leaves, which some Indian tribes chew to enable them to resist privations and hardships. I am procuring some myself and will try it with cases of heart disease and also of nervous exhaustion."* Freud acquired a small amount of cocaine a week later and was immediately impressed by its effects. He started taking it regularly and also pressed it on his friends and colleagues.

He wrote again to Martha: *"If it goes well I will write an essay on it and I expect it will win its place in therapeutics by the side of morphia and superior to it. I have other hopes and intentions about it. I take very small doses of it regularly against depression and against indigestion, and with the most brilliant success... In short it is only now that I feel I am a doctor, since I have helped one patient*

and hope to help more. If things go on in this way we need have no concern about being able to come together and to stay in Vienna."

Freud started an essay on cocaine – *Über Coca* – during which he wrote to Martha: "Woe to you, my Princess, when I come. I will kiss you quite red and feed you till you are plump. And if you are forward you shall see who is the stronger, a gentle little girl who doesn't eat enough or a big wild man who has cocaine in his body. In my last severe depression I took coca again and a small dose lifted me to the heights in a wonderful fashion. I am just now busy collecting the literature for a song of praise to this magical substance."

Clearly, Freud was much taken with cocaine, as much for its effect on his mood and sexual prowess as for more mundane qualities. Freud finished his essay in under two months – suspiciously quickly, some might say. Nor was it in any way dispassionate in tone.

Freud's main biographer, Ernest Jones, wrote that the essay had "a tone that never recurred in Freud's writings, a remarkable combination of objectivity with a personal warmth as if he were in love with the content itself. He used expressions uncommon in a scientific paper such as 'the most gorgeous excitement' that animals display after an injection of cocaine, and administering an 'offering' of it rather than a 'dose'; he heatedly rebuffed the 'slander' that had been published about this precious drug. This artistic presentation must have contributed much to the interest the essay aroused in Viennese and other medical circles... He even gave an account of the religious observances connected with its use, and mentioned the mythical saga of how Manco Capac, the Royal Son of the Sun-God, had sent it as 'a gift from the gods to satisfy the hungry, fortify the weary, and make the unfortunate forget their sorrows'."

Freud also gave a detailed description of the effects cocaine had on his own mood when he took small doses of the drug to relieve his recurring bouts of depression. These included "exhilaration and lasting euphoria, which in no way differs from the normal euphoria of the healthy person... You perceive an increase of self-control and possess more vitality and capacity for work... In other words, you are simply normal, and it is soon hard to believe that you are under the influence of any drug... Long intensive mental or physical work is performed without any fatigue... This result is enjoyed without any of the unpleasant after-effects that follow exhilaration brought about by alcohol... Absolutely no craving for the further use of cocaine appears after the first, or even after repeated taking of the drug; one feels rather a certain curious aversion to it."

It is hard not to detect in the tone of *Über Coca* the workings of the drug itself. This, the most important work on cocaine to date, appears to have been written under the influence of it. The essay was an

overview of the then existing scientific literature on the subject combined with Freud's own observations. For all that, it was hugely influential. Freud concluded by recommending cocaine in seven instances:

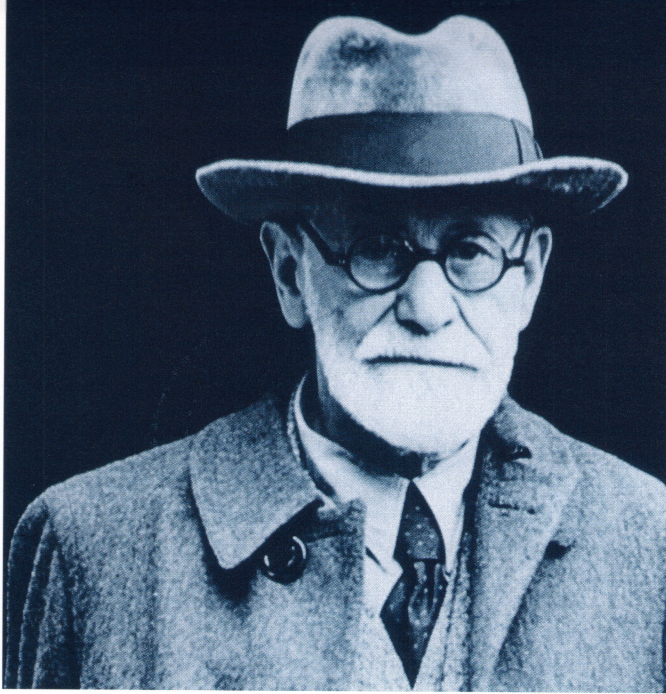
- As a stimulant
- For digestive disorders
- In cachexia (general weight loss and wasting through illness or emotional disturbance)
- For the treatment of morphine addiction
- For the treatment of asthma
- As an aphrodisiac
- As a local anaesthetic

Unfortunately for Freud, the aspect of his research that most people seized upon was his claim that cocaine offered a cure for morphine addiction. This may have been because it was the one property of cocaine he himself saw as gaining the most recognition. Whoever found a cure for "morphinism" would certainly secure fame and fortune (some 15 years later, heroin was promoted for the same reason).

HELPING A FRIEND

Ernst von Fleischl-Marxow was a friend of Freud's and a fellow student at the Vienna hospital. Another colleague described him as "*young, handsome, enthusiastic, a brilliant speaker and an attractive teacher. He had the charming and amiable manners of the old Viennese society, ever ready to discuss scientific and literary problems with a flow of challenging ideas.*" Tragically, this promising 25-year-old surgeon injured his thumb during a routine autopsy and, following infection, had to have the thumb amputated. It was during this period that he became addicted to morphine. Fleischl-Marxow was one of the first people with whom Freud shared his cocaine. In 1884, Freud offered some of the drug to Fleischl-Marxow in an attempt to wean him off morphine.

For a time, at least, he was successful. However, by early 1885, Fleischl-Marxow was giving cause for concern. He was now acquiring his own cocaine and Freud noted that in one month he had spent 1800 marks on the drug, which works out at about one gram a day. At one point, Freud witnessed Fleischl-Marxow having convulsions and hallucinating, saying that he had "*white snakes slithering all over his body*". He had also returned to morphine. It appeared that Freud's intervention with cocaine had not only failed to cure his friend of morphine addiction but had landed him with a cocaine habit as well. That Freud was aware of this is revealed in a letter he wrote to a female friend, warning her of the perils of acquiring cocaine



SIGMUND FREUD - DOCTOR OR DEALER?

addiction. Nonetheless, he continued to defend the role of cocaine in the treatment of morphine addiction.

Mainly due to Freud's somewhat questionable findings on the usefulness of cocaine as a treatment for morphine addiction, demand for the new drug flourished. The drug companies also seized upon Freud's paper – Merck publishing a summary of Freud's essay while at the same time upping production. But soon Freud's claims came under scrutiny as clinics began to fill up with cocaine addicts, who had "taken the cure". An expert on addiction, Dr Albrecht Erlenmeyer, called cocaine the "third scourge of humanity" after alcohol and morphine. He wrote of the treatment of morphine addiction with cocaine:

"This therapeutic procedure has lately been publicly trumpeted and praised as a veritable salvation. But the greater the fuss made about this 'absolutely precious' and 'totally indispensable' route to health, the less efficacious it proved to be... It was simply a question of propaganda expounded by individuals [i.e. Freud] without any truly scientific experience, as objective analysis of the question easily demonstrated. But they persisted despite the warnings and ended up with the sorry and frightening result that has turned use into abuse. The genies

that they summoned up to help them turned into furies bearing misfortune and disaster."

Freud attempted to defend himself from the mounting criticism, arguing that the only people who became addicted to cocaine were those who were already addicted to morphine. This would seem, even to the most unscientific eye, a good enough reason for not prescribing cocaine to morphine addicts in an attempt to cure them, but Freud was sticking to his guns.

After publication of *Über Coca*, Freud left Vienna to visit his "gentle little girl who doesn't eat enough", presumably intent on investigating the aphrodisiac properties of cocaine. In his absence, his colleague, Karl Koller, continued to experiment with cocaine.

ONE IN THE EYE

Koller hoped to specialize in ophthalmology. At that time, the main obstacle to eye surgery was the absence of an effective local anaesthetic. It was a particularly important issue in eye surgery as the patient often needed to be conscious in order to move his eye as the surgeon directed. Koller's great aim in life – to the point of monomania, according to Freud – was to discover a substance that would enable him to carry out surgery to the eyes without the patient flinching.

In his autobiography, Koller said that the moment of epiphany came to him during an experiment with cocaine. He gave some of the drug to a colleague, who licked it off a pen knife and remarked that his tongue went completely numb. Koller wrote: "*In that moment it flashed upon me that I was carrying in my pocket the local anaesthetic for which I had searched some years earlier. I went straight to the laboratory, asked the assistant for a guinea pig for the experiment, made a solution of cocaine from the powder which I carried in my pocketbook, and instilled this into the eye of the animal.*" After this, he poked at the poor rodent's eyes and saw no evidence of pain. He tried the same experiment on himself and a colleague and achieved the same results. It seemed Koller had found his pot of gold at the end of the rainbow.

The results of Koller's experiments were presented at the Heidelberg Ophthalmological Society's annual meeting in September. His treatise was greeted with great enthusiasm. Many internationally renowned surgeons were present, ensuring that Koller's discovery was reported throughout the world, where other physicians expanded on Koller's work. In New York, Herman Knapp, the editor of the *Archives of Ophthalmology*, wrote of his own researches: "*My urethra is very sensitive to the introduction of instruments.*" Going way beyond the call of medical duty, he continued, "*I inserted, by*

means of an Eustachian catheter and a balloon, a 4 per cent solution of cocaine, and held it in for a few minutes. In ten minutes the glans had become pale and insensible to the touch... I injected... silver nitrate into the interior part... I had no sensation from it at all."

Another surgeon who embraced cocaine was William Halsted, then chief of the outpatient department at Roosevelt Hospital, in New York. He extended the use of cocaine to other parts of the body and, by 1887, had performed nearly two thousand operations using cocaine as a local anaesthetic. In the process, he managed to become addicted to the drug, on one occasion having to be removed from the operating theatre because his hands were shaking so much. He eventually managed to wean himself off cocaine by becoming addicted to morphine instead. He remained addicted to morphine to the end of his life, without it interfering with his brilliant surgical career. It appears that Freud might have got it the wrong way round – it may be better to wean cocaine addicts on to morphine.

COKE THE PANACEA

Suddenly, cocaine was hugely in demand, initially as a topical anaesthetic (one applied to body surfaces). A whole range of products capitalized on this feature of the drug – toothache drops, haemorrhoid remedies and wonder cures were being turned out. One company even produced cocaine-impregnated plasters. Parke Davis, an American drug company, expanded their production of coca-based products and cocaine exponentially. They even sold a cocaine-



COCAINE
TOOTHACHE DROPS
Instantaneous Cure!
PRICE 15 CENTS.
Prepared by the
LLOYD MANUFACTURING CO.
219 HUDSON AVE., ALBANY, N. Y.
For sale by all Druggists.
(Registered March 1885.) See other side.

COCAINE WAS EVEN ADDED TO THIS CURE FOR TOOTHACHE

injecting kit. This comprised a syringe, cocaine powder and a solution in which to dissolve the powder. In a promotional brochure of 1885 the company enthused:

"The medical press teems with reports of its [cocaine's] efficacy in such a variety of affections that the sanguine might think it not too much to suppose that in coca and its derivatives the panacea for all human ills had at last been discovered. If these claims are substantiated... [cocaine] will indeed be the most important therapeutic discovery of the age, the benefit of which to humanity will be incalculable."

Other products containing coca or cocaine included Dr Tucker's Asthma Specific, to be applied to the nasal membrane, and Coca-Bola chewing gum – *"A powerful tonic to the muscular and nervous system, enabling the chewer to perform additional labour and relieving fatigue and exhaustion."*

Cocaine was an important drug – as a local anaesthetic. Until cocaine's arrival on the scene, the only effective anaesthetics caused unconsciousness. Operations had to be conducted either with ether, alcohol or nothing at all. Those scenes of the brave cowboy biting down on a stick, so beloved of the Western, are true to life (except that the cowboy never seems to scream, or die, both of which were regular occurrences). But cocaine was not a universal panacea. In retrospect, it is easy to see why it should have been viewed as such, though. Cocaine makes you feel good. This is the primary reason people take it nowadays. But in the nineteenth century, when they had only a limited knowledge of the causes of illness, anything that could ameliorate the symptoms was as good as a cure. The choice was to have an incurable disease and feel good or have an incurable disease and feel awful. Cocaine's generally anaesthetizing and uplifting properties were a godsend to many.

With the sudden upsurge in the popularity of coca and cocaine, companies such as Merck and Parke Davis were hard pushed to meet demand. Supplies were sold out as soon as they were produced. Although they greatly increased the importation of coca leaf, the problem remained that the product was both bulky and highly perishable. As a result, cocaine remained expensive. Then, in 1885, a young chemist by the name of Henry Rusby found a way to circumvent this problem. As much as Freud or Koller, Rusby can be said to be the "father of cocaine".

Rusby was sent to Bolivia by his bosses, Parke Davis. His assignment was to find new sources of coca leaves. This he achieved – but he also managed to do something else, which was to revolutionize cocaine production. Having been held up by a civil war in Colombia and endured the spectacle of a huge batch of coca leaves

rotting before his eyes, he was determined to find a way to insure that coca could be transported long distances and arrive with its active ingredient still viable. Setting up a makeshift laboratory in his hotel room, he began to experiment. Rusby knew the basics of cocaine production and thought there might be a way to produce an intermediate stage of the drug that could be transported more easily. He was right and, despite having blown up his hotel room on one occasion, managed to create a process whereby coca leaf could be refined to a paste, with a minimum of sophisticated equipment and raw materials that were easy to acquire.

Rusby's process involved soaking the leaves for three or four days in water and an alkali, such as lime, then adding alcohol. After this, he discarded the leaves and added sulphuric acid and more lime. Cocaine crystals then formed, which he dried out in the open air. This form of cocaine is what is now known as cocaine paste, or *buzco*. Smoked, it is still the most widely used form of cocaine in South America.

Rusby's discovery meant that coca leaves could now be processed to this intermediate stage close to the source of their cultivation. The crystals could then be shipped to European or North American factories where further refinement would take place. This process had the dual advantage of being much less bulky and ensuring none of the drug's potency was lost in transit. As a result, the cocaine boom really took off.

As early as 1885, just one year after Koller revealed to the world the anaesthetic properties of cocaine, doctors were reporting cases of cocaine overuse and even overdose. A notorious cocaine-related death occurred in 1887. Professor Sergei Petrovich Kolomnin was operating on a young woman thought to have tuberculosis. The operation involved cauterizing a lesion on the inside of the rectum. To facilitate this procedure, Kolomnin injected his patient with a substantial amount of cocaine – equivalent to about 30 lines of the drug in its pure form. The operation itself was successful, but shortly afterward the woman went into convulsions, turned blue and died. Kolomnin, racked with guilt, killed himself soon after.

In 1889, Charles Sidney Fletcher died on the operating table after drinking a large quantity of cocaine solution, intended to anaesthetize him prior to a bladder operation. The autopsy revealed that his brain was swollen and his lungs filled with fluid – indicative of a cocaine-related death. But more important to the future regulation of cocaine than deaths on the operating table – inevitable perhaps in the use of a new and relatively untested drug – was the growing non-medical use of cocaine and fears about its addictive properties.

2

SCIENCE

ADDICTION OR CRAVING?

Is cocaine a harmless, non-addictive bit of fun, as believed by many rock stars and movie moguls in the 1970s, or is it a dangerous drug that ranks alongside heroin? Opinion has been divided on this issue right from the start. Freud maintained that cocaine was non-addictive and even suggested it could be a cure for morphinism. He was backed up in this by Dr William Hammond, former United States Army Surgeon General, who assured doctors that cocaine was not addictive, using it, like Freud, to "cure" morphine addiction. At the same time, the first reports of "cocainism" were starting to appear, as well as cocaine-related strokes and cardiac arrests.

Unfortunately, as ever the issue is one clouded by vested interests and strong reactions. The following two examples epitomize the divergence of opinions on cocaine. The Dutch pharmacologist van Rossum wrote in 1979:

"Regular use of cocaine creates a moral decay in the addict who intends nothing else but acquiring his euphoric stimulus and who becomes insensitive for social interactions. This causes a lack of duty and will-power, egocentrism, wild associations and sometimes psychotic states. His extreme obsession with action, coupled to paranoia can make the addict under the influence of cocaine into a dangerous individual; homicidal behaviour occurs. The cocainist under influence of cocaine is more dangerous than the morphinist under influence of heroin. Moral decay with chronic use however is with both cases identical."

This characterization of cocaine as necessarily, indeed pharmacologically, addictive is not one shared by all. Robert Sabbag in his 1997 book *Snow Blind* takes entirely the opposite view:

"Government anti-drug literature," he writes, "tells us that cocaine use results in paranoia and organic psychosis. The country's



This type of addict is in the habit of putting cocaine and heroin on his hand and sniffing it

Inside of a year his nose will break down; sniffing causes an ulcer that destroys the bone

EARLY WARNINGS OF COCAINE ABUSE, FROM 1919

most reliable experts on cocaine have been unable, either through hospital admittance or through evidence given by clinical psychiatrists, to uncover any case of psychosis directly attributable to the drug. The best one can gather from the data available is that psychotics who use cocaine will be psychotic. The same literature tells us that cocaine users experience suicidal depression when deprived of the drug. Such depression has not been reported in recent medical history, even among users who consumed coke daily for years. Cocaine is not necessarily habit forming, nor do its users develop a physical tolerance to it. Any 'craving' for cocaine will develop along the same lines as the craving for money, sex, apple pie and chewing gum."

Part of the problem lies in a debate about the very concept of addiction, a relatively recent idea. Addiction was “invented” in the nineteenth century as morphine use grew and began to be seen as problematic, rather than a relatively harmless peccadillo. Morphine addiction as a disease state was first noted in 1877 by a German doctor, Levenstein, who still saw addiction as a human passion “*such as smoking, gambling, greediness for profit, sexual excesses, etc.*”. This concept is remarkably similar to Robert Sabbag’s statement that craving for cocaine is no different from “*craving for money, sex, apple pie and chewing gum.*”. Indeed, as late as the twentieth century, American doctors and pharmacists were as likely to apply the term addiction to the use of coffee, tobacco, alcohol and bromides as they were to opiate use.

It was in the early part of the twentieth century that cocaine use became problematic, and the idea of its addictive qualities first really took hold in the USA. This was due to two factors: its association with the working class, particularly black people, and its inaccurate classification as a narcotic. Thus, it was perceived as having the same properties as other narcotics such as opium, morphine and heroin and to be equally addictive and dangerous. But cocaine is not a narcotic, it is a central nervous system (CNS) stimulant. Its misclassification, which continues in US law, has meant that it has been lumped together with heroin. But the two are vastly different drugs, operating in different ways and with very different effects.

One curious fact is that cocaine users and heroin users often despise one another; those who use inordinate quantities of cocaine will declare self-righteously that they would never touch heroin (“the hard stuff”) while heroin users tend to consider coke “effete”. Both these views are cultural rather than having any factual basis. Cocaine’s “effeteness” stems from the fact that for most of the twentieth century it was the preserve of the rich, privileged few. As Robert Sabbag puts it in *Snow Blind*: “*Cocaine is the caviar of drugs... To snort cocaine is to make a statement. It is like flying to Paris for breakfast.*” Cocaine was not a problem drug simply because not enough people were taking it. Those who were, should they run into problems of addiction or overuse, were hardly likely to turn up at a state-run facility.

In the 1980s, as the use of cocaine grew and was joined by the cheaper and more accessible crack, the scientific establishment decided to turn its attention to the way in which cocaine was addictive. By this time it was widely accepted that cocaine was addictive – scientists just did not know how the drug had this effect on the body. In 1984, one scientist wrote: “*Cocaine-driven humans will relegate all other drives and pleasures to a minor role in their*

lives. If we were to design deliberately a chemical that would lock people into perpetual usage, it would probably resemble cocaine."

To help them understand the nature of cocaine addiction, scientists turned to the model of narcotic addiction that had been produced in the early 1970s. In 1972, scientists at the Johns Hopkins University in the USA discovered that the human brain had "receptor sites" that were tailor-made for opiate drugs. A receptor site is a protein on the surface of a cell that allows only one type of chemical to bind with it in order to trigger a reaction by the cell. Opiates have a very similar chemical structure to endorphins, a group of pain-relieving chemicals that occur naturally in the body ("endorphins" is short for "endogenous morphines"). They were actually endorphin receptors, but the name "opiate receptors" stuck. Taking morphine or heroin (which changes into morphine in the blood), stimulates these receptors to send out pain-relieving and mood-enhancing chemicals.

The theory behind opiate addiction was that, by stimulating these receptors, opiates were doing the job that the body should be doing. When the drug was removed, the mechanism for producing the naturally occurring chemicals had fallen into disuse and the hapless addict suffered the agonies of withdrawal. It was assumed, without much in the way of evidence, that cocaine must act in the same way. Thus, the director of the American National Institute of Mental Health simply identifies cocaine as addictive in the same sense and as a result of the same changes in "*molecular mechanisms*" following chronic drug ingestion as heroin: "*Repeated doses of addictive drugs – opiates, cocaine, and amphetamine – cause drug dependence and, afterward, withdrawal.*"

But many disagree with this view and, indeed, with the very concept of addiction altogether. In a 1998 essay, Stanton Peele and Richard DeGrandpre, wrote:

"Addiction is an evocative psychological and medical term whose meaning has changed significantly over time. For most of this century it has been described in terms of an abstinence syndrome (dependence and withdrawal) and associated with heroin use. In the 1980s, however, cocaine replaced heroin as the prototypical drug of abuse. Cocaine had heretofore not been considered to produce 'physical dependence'. Nonetheless, for both cocaine and heroin, current models of addiction – models widely propagated by the media – reduce drug use patterns to the properties of drugs and biological characteristics of the user.

"In creating this model, scientific and clinical debates along with public debates rely on the supposedly typical, inevitably addicting results of repeated cocaine consumption. Yet naturalistic human drug use and drug taking by animals in the laboratory instead reinforce the

picture that use of all drugs depends on the user's environment. Indeed, even the most severe examples of compulsive drug use can be reversed when key elements in the setting are modified. Such findings should by now play a fundamental role in both scientific and public conceptions of addiction, but they do not."

They go on to argue against the animal experiments made to demonstrate addictiveness. These consisted of giving various animals unlimited access to drugs such as cocaine, which they could self-administer using a drug pump. The animals had a tendency to keep on taking it – to the exclusion of everything else including food, water and willing sexual partners – sometimes to the point of death. This was cited as proof that cocaine was addictive. Stanton and DeGrandpre argue, however, that this is hardly a typical situation. Humans rarely have unlimited access to cocaine. Furthermore, in other experiments, when the animals had their cocaine supply removed, they exhibited no signs of trauma. Humans, either through penury or common sense, are unlikely to take cocaine until they die. A rat with free drugs and a small brain is.

Stanton and DeGrandpre argue for a different model of addiction, not only for cocaine but for all drugs. They write:

"Addiction is defined by tolerance, withdrawal, and craving. We recognize addiction by a person's heightened and habituated need for a substance; by the intense suffering that results from discontinuation of its use; and by the person's willingness to sacrifice all (to the point of self-destructiveness) for drug taking. The inadequacy of the conventional concept lies not in the identification of these signs of addiction – they do occur – but in the processes that are imagined to account for them. Tolerance, withdrawal, and craving are thought to be properties of particular drugs, and sufficient use of these substances is believed to give the organism no choice but to behave in these stereotypical ways. This process is thought to be inexorable, universal, and irreversible and to be independent of individual, group, cultural, or situational variation; it is even thought to be essentially the same for animals and for human beings, whether infant or adult."

Instead, they argue, addiction is a complex interplay of sociological and psychological factors, unique to each person. If cocaine is not addictive in the conventional sense, why do people take it? One American description of the drug's effects goes as follows:

"Cocaine is a potent vasoconstrictor, which narrows (or constricts) the blood vessels. It increases the respiration rate and body temperature, and also induces vomiting. At high dosages, tremors and convulsions may result. These stimulating effects can rapidly lead to a collapse of the central nervous system, which may then

lead to respiratory failure and/or cardiac arrest and finally to death. After repeated exposure to cocaine, certain areas in the limbic system (a group of structures of the brain that are concerned with emotion and motivation) are more susceptible to a type of seizure that resembles an epileptic fit. Cocaine causes profound loss of appetite, leading to severe weight loss and nutritional imbalance. It also causes sleep loss.

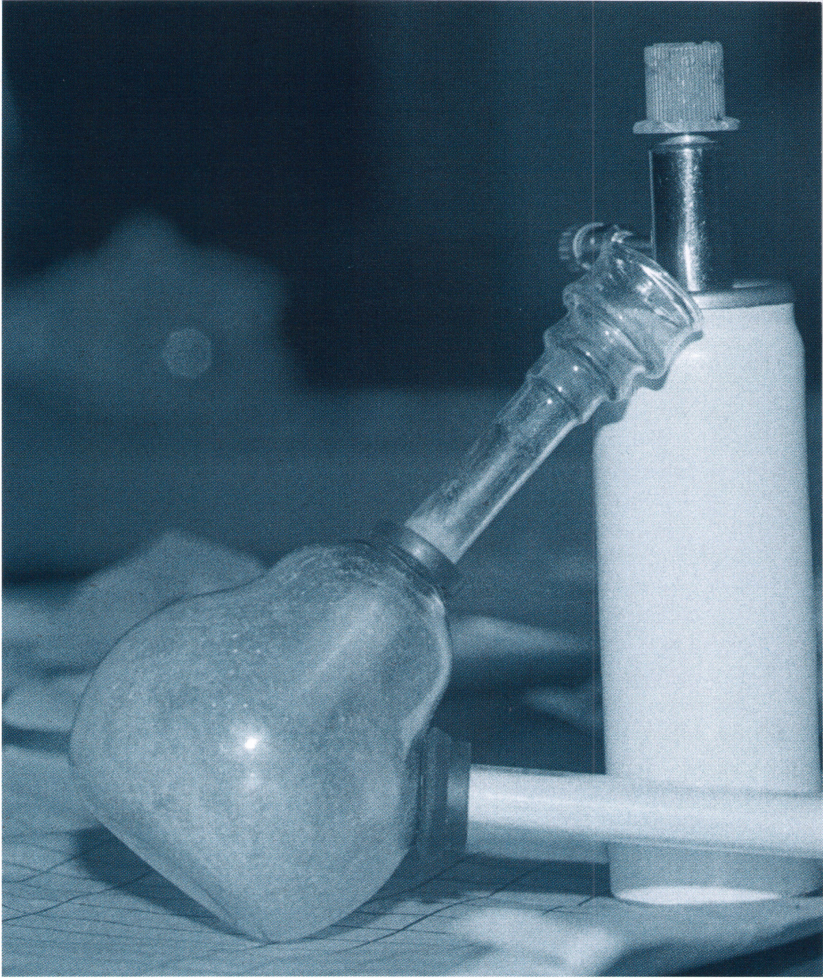
“The symptoms of cocaine psychosis usually include paranoia; delusions of persecution; visual, auditory, and tactile (touch) hallucinations; an increase in irrationality; restlessness; suspiciousness; depression; and a lack of motivation. Because of increased demands on the heart during cocaine use, people with heart problems, such as hypertension or cardiovascular disease, are more prone to fatal reactions.

“There are rare cases of cerebral haemorrhages (bleeding from the brain) occurring from acute increases in the blood pressure. Smoking cocaine paste produces severe complications: bronchitis, persistent coughing, blurred vision, and pulmonary dysfunction of circulation. Chronic and compulsive cocaine use leads to depression, anxiety, irritability, and other psychological complaints along with those previously mentioned. Despite the fact that continued use may not reduce the undesirable effects of withdrawal, as long as the drug is available, users find it very difficult to do without cocaine.”

Not exactly an advertisement for the drug. But much of the preceding quote, while true, is misleading. Many experts believe that the degree of cocaine use that would lead to these symptoms is so extreme as to make it very rare. For many people who take cocaine, the effects are pleasurable, rather than deadly. This is the problem that legislators face – cocaine users say, from personal experience, that the standard Government advice is wrong. They point out that they, personally, know of no one who has suffered a heart attack or brain haemorrhage, that paranoia is generally manageable and that they can easily go for periods without the drug. How then are they to take government health warnings seriously that they believe to be untrue?

This presents a problem. Cocaine can be a dangerous drug, but not in the way that the medical establishment would generally have us believe – as a physically addictive one. Cocaine, like alcohol, is processed through the liver. You are more likely to die from cirrhosis than brain haemorrhage as a result of excessive cocaine use, especially given its well-attested tendency to make people drink like seasoned toppers.

Cocaine only really began to be considered a dangerous drug with the emergence of crack. People said, without any evidence, that crack



A CRACK PIPE

was ten times as powerful as powder cocaine. That it drove you mad. That one hit was enough to hook you for life. The sort of hyperbole associated with crack was redolent of the worst excesses of past drug hysteria. For instance in 1937, the year that marijuana was made illegal in the USA, this article was printed in the *American Magazine*.

"In Los Angeles, California, a youth was walking along a downtown street after inhaling a marijuana cigarette. For many addicts, merely a portion of a 'reefer' is enough to induce intoxication. Suddenly, for no reason, he decided that someone had threatened to kill him and that his life was in danger. Wildly he



looked around him. The only person in sight was an aged bootblack. Drug-crazed nerve centres conjured the innocent old shoe-shiner into a destroying monster. Mad with fright, the addict hurried to his room and got a gun. He killed the old man and then later babbled his grief over what had been wanton, uncontrolled murder. 'I thought someone was after me,' he said. 'That's the only reason I did it. I had never seen the old fellow before. Something just told me to kill him!' That's marijuana."

That, most people would now agree, is most assuredly *not* marijuana. But while we may now scoff at such overblown rhetoric, it's not very different from the stuff the press was producing about crack in the

1980s. People seemed to think that crack was chemically different from cocaine. It is not. It is just a different – and more efficient – way of taking the drug. It is produced by heating cocaine powder (cocaine hydrochloride) in water with sodium bicarbonate or some other alkaline substance and then draining off the liquid. You are left with “rocks” of pure cocaine. Cocaine powder is not smokable, it just burns. But when the hydrochloric acid, added in the refining process, is removed by the alkali bicarbonate of soda, what’s left is smokable. The high from crack is much stronger and more immediate than that from sniffing cocaine powder – about 80 per cent pure cocaine vapour reaches the brain in eight seconds. But it’s still cocaine.

WHAT THEY BOTH DO

Like all stimulant drugs, either those prescribed by physicians or those taken recreationally, cocaine produces a psychoactive effect by interacting with the central nervous system, stimulating it to perform its ordinary functions more intensely. This system operates through the release of various chemical neurotransmitters (from the brain cells in which they are produced) and their binding to receptor sites on neighbouring cells.

Brain cells, or neurones, send messages to other neurones in the form of electrochemical impulses that are carried along transmitting fibres called axons. These messages are picked up by neighbouring neurones via receiving fibres called dendrites. Between the axon and the dendrite is a minute gap called a synapse. It is in this gap that drugs such as cocaine have their effect. The job of neurotransmitters such as dopamine is to convey the message across the synaptic gap. Dopamine is released from the terminal of an axon and carries the message across the synapse, binding with receptors on the dendrite. The transmitter is then gathered up to be used again.

The constant release and binding of these neurotransmitters forms a pathway of messages that travel through the nervous system, making possible the organism’s response to environmental stimuli. However, cocaine prevents dopamine from being gathered up again, so the impulse is much more powerful. In essence, this is the rush you get from cocaine – neuro-chemical pleasure bombardment.

Cocaine also has an impact on the autonomic (or involuntary) division of the central nervous system, which helps regulate a variety of bodily functions that are mostly controlled without conscious effort, such as respiration, circulation, digestion, and body temperature. Ordinarily, these functions are maintained at relatively stable levels throughout the day. But they are slowed down during periods of rest through diminished production, release, and binding of neurotransmitters and can be speeded up, as needed, through

increased neurotransmitter activity. Cocaine operates in this system by increasing the concentration and binding activity of the neurotransmitters – particularly dopamine. Thus, what people experience as cocaine's stimulant effect is an intensification of the body's normal stimulatory mechanisms. Basically that's what keeps people on coke awake all night.

Cocaine is a quick-acting and short-acting drug. When it enters the bloodstream directly, via injection, it reaches the brain quickly, and users feel its effects within minutes. Smoking also delivers cocaine quickly to the brain. When cocaine is sniffed, the onset of the effect is slower because the drug must first pass through the mucous lining of the nasal passages before entering the bloodstream. However you take cocaine, the body quickly processes it. This means that in order to sustain the high you need to take more of the drug after a short space of time.

This raises a further issue: not only whether cocaine is addictive but also, if it is, whether crack cocaine is more addictive. Physiological cocaine addiction has been explained by recourse to arguments similar to those used to explain narcotic addiction. Cocaine takes over the role of the brain's natural neuro-chemical "reward system" and then supplants it, leaving the body in need of the drug to derive not just pleasure but any sort of basic ability to function. Nice theory, but not born out in practice. All studies of cocaine users have shown that even those that use the drug regularly are able to stop without serious physical withdrawal symptoms. Users may not want to stop, but do not physically suffer for want of the drug.

Having observed this fact, scientists have turned to a psychological model for cocaine addiction. This is rather more difficult to prove one way or another – there's no reason why one shouldn't be psychologically addicted to anything, from shopping to television. But locked in a room without it you wouldn't die. Conceivably you might go mad, but the point is that there is nothing in the intrinsic nature of shopping or television to induce psychological addiction. The problem lies solely in the psychological make-up of the individual.

In an attempt to find the psychological basis for cocaine addiction, scientists have looked at the role played by the neurotransmitter dopamine in the brain's "reward system". Research at the Center for Studies in Behavioral Neurobiology, at Concordia University, Montreal, has focused on a primitive area of the brain called the mesolimbic dopamine system. This system is centred at the base of the brain but has an interlocking neural network that reaches all the way to the top. It plays an important part in the "positive reinforcement" or "reward" mechanism that governs much of human behaviour. This system is also bound up with motivation, learning and

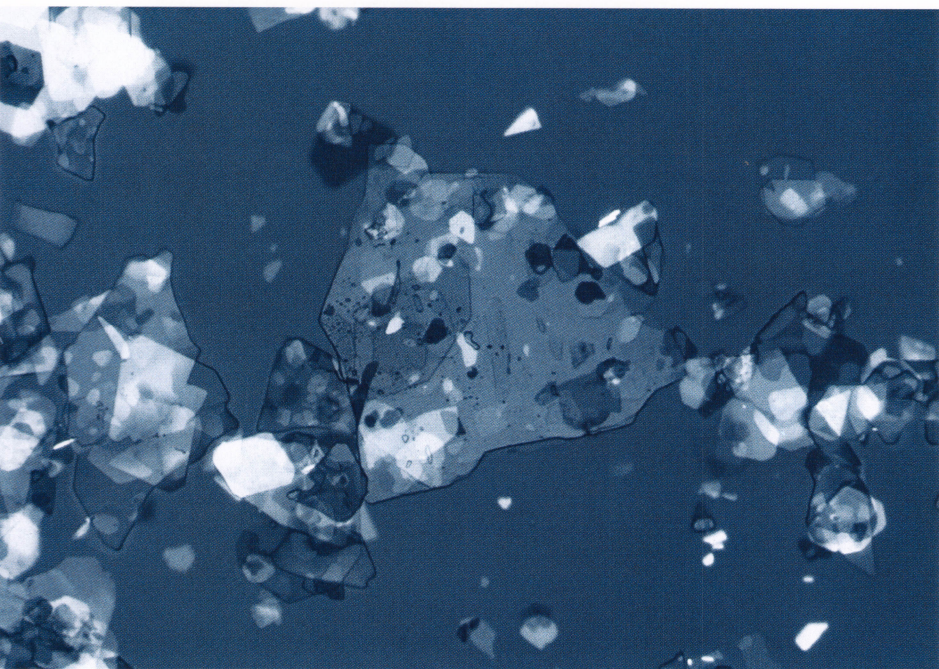
memory. Any pleasurable behaviour will stimulate the mesolimbic dopamine system and this encourages humans to repeat the activity in order to get another “dose” of pleasure. It is not only those activities that satisfy biological needs, such as food and sex, that stimulate this system, but also more esoteric pursuits such as the study of art, music or nature. Cocaine activates this system, too.

However, just as some people take more enjoyment from good food and wine, a piece of music, or the contemplation of a beautiful sunset, others seem to be predisposed to a craving for drugs such as cocaine. Such cravings often seem to run in families, but whether this indicates that inherited genetic factors play a part or whether environmental influences, such as family role models during early childhood development, are more significant, is still being investigated.

One of the more level-headed analyses of cocaine use comes from Aleister Crowley. Crowley was born in 1875 in Leamington Spa, England. His parents were members of the Plymouth Brethren, a strict fundamentalist Christian sect. Crowley's religious beliefs, however, veered in other directions and in 1898 he was initiated into the Golden Dawn. This was an occult society led by S.L. MacGregor Mathers that taught “*magick, qabalah, alchemy, tarot, astrology*”, and other “*heretic*” subjects. Crowley went from strength to strength as he embraced increasingly esoteric forms of mysticism and even founded a few of his own. He died in 1947, an inspiration to generations of gothic punks and disenfranchised teenagers ever since. In a 1917 article he wrote:

“Look at this shining heap of crystals! They are Hydrochloride of Cocaine. The geologist will think of mica; to me, the mountaineer, they are like those gleaming feathery flakes of snow, flowering mostly where rocks jut from the ice of crevassed glaciers, that wind and sun have kissed to ghostliness. To those who know not the green hills, they may suggest the snow that spangles trees with blossoms glittering and lucid. The kingdom of faery has such jewels. To him who tastes them in his nostrils – to their acolyte and slave – they must seem as if the dew of the breath of some great demon of Immensity were frozen by the cold of space upon his beard.

“For there was never any elixir so instant magic as cocaine. Give to no matter whom. Choose me the last loser on the earth; let him suffer all the tortures of disease; take hope, take faith, take love away from him. Then look, see the back of that worn hand, its skin discoloured and wrinkled, perhaps inflamed with agonizing eczema, perhaps putrid with some malignant sore. He places on it that shimmering snow, a few grains only, a little pile of starry dust. The



THE THIRD SCOURGE OF HUMANITY – PURE COCAINE

wasted arm is slowly raised to the head that is little more than a skull; the feeble breath draws in that radiant powder.

“Now we must wait. One minute – perhaps five minutes. Then happens the miracle of miracles, as sure as death, and yet as masterful as life; a thing more miraculous, because so sudden, so apart from the usual course of evolution. Natura nono facit saltum – nature never makes a leap. True – therefore this miracle is a thing as it were against nature.

“The melancholy vanishes; the eyes shine; the wan mouth smiles. My lost manly vigour returns, or seems to return. At least faith, hope and love throng very eagerly to the dance; all that was lost is found.”

Crowley continues with his analysis of the problem of cocaine addiction, distinguishing between the “morally forceful” user and the “clod”.

“Give cocaine to a man already wise, schooled to the world, morally forceful, a man of intelligence and self-control. If he be really master of himself, it will do him no harm. He will know it for a snare; he will beware of repeating such experiments as he may make; and the glimpse of his goal may possibly even spur him to its

attainment by those means which God has appointed for His saints.

"But give it to the clod, to the self-indulgent, to the blasé – to the average man, in a word – and he is lost. He says, and his logic is perfect: 'This is what I want.' He knows not, neither can know, the true path; and the false path is the only one for him. There is cocaine at his need, and he takes it again and again. The contrast between his grub life and his butterfly life is too bitter for his unphilosophic soul to bear; he refuses to take the brimstone with the treacle.

"And so he can no longer tolerate the moments of unhappiness; that is, of normal life; for he now so names it. The intervals between his indulgences diminish.

"And alas! the power of the drug diminishes with fearful pace. The doses wax; the pleasures wane. Side-issues, invisible at first, arise; they are like devils with flaming pitchforks in their hands."

Leaving aside the rather fruity prose style, what Crowley seems to be arguing is that any problems attendant on cocaine use are not inherent in the drug but dependent on the person taking it, although one suspects his distinctions were to do with class as much as anything. Crowley is saying that once those caught up in a mundane or miserable existence experience the "lift" that cocaine gives them, they can no longer bear to return to their previous mental state. Crowley, of course, did not have access to pharmacological evidence providing a model for cocaine addiction, he only had the experience of himself and others to go on.

If cocaine is not addictive in the conventional physiological sense, is there any reason crack should be? Some argue that the more intense and immediate high somehow interacts with the brain differently. But it's still the same drug. It's more likely that the ease and lower cost of crack contribute to its more regular use than its uptown sibling. If you can get something readily and cheaply and you like it, you probably would take it as often as possible. This is not addiction, this is human nature. Perhaps what really matters is not whether cocaine or crack are addictive – but whether either is ruining someone's life. Addiction has become a highly moral issue, a bad thing in itself. Perhaps it is better to talk of dependence – whereby a drug is *interfering* with somebody's life. The diagnostic criteria for cocaine dependence in the USA are:

Cocaine abuse: A destructive pattern of cocaine use, leading to significant social, occupational, or medical impairment. Must have three (or more) of the following, occurring when the cocaine use was at its worst:

1. *Cocaine tolerance:* Either need for markedly increased amounts of cocaine to achieve intoxication, or markedly diminished

effect with continued use of the same amount of cocaine.

2. *Cocaine withdrawal symptoms:*

Either (a) or (b).

(a) Two (or more) of the following, developing within several hours to a few days of reduction in heavy or prolonged cocaine use:

- Sweating or rapid pulse
- Increased hand tremor
- Insomnia
- Nausea or vomiting
- Physical agitation
- Anxiety
- Transient visual, tactile, or auditory hallucinations or illusions
- Grand mal seizures

(b) Cocaine is taken to relieve or avoid withdrawal symptoms.

3. *Greater use of cocaine than intended:* Cocaine was often taken in larger amounts or over a longer period than was intended.
4. *Unsuccessful efforts to cut down or control cocaine use:* Persistent desire or unsuccessful efforts to cut down or control cocaine use.
5. *Great deal of time spent in using cocaine, or recovering from hangovers.*
6. *Cocaine caused reduction in social, occupational or recreational activities:* Important social, occupational, or recreational activities given up or reduced because of cocaine use.
7. *Continued using cocaine despite knowing it caused significant problems:* Cocaine use is continued despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have been worsened by cocaine (e.g., current cocaine use despite recognition of cocaine-induced depression).

Of these criteria, perhaps the one that matters most is in the definition – “significant social, occupational, or medical impairment.” Then, by anyone’s standards, you have a problem. The difficulty we have when discussing cocaine, or indeed any of the substances currently legislated against, is the assumption that drugs are inherently “bad”, combined with a similar assumption that addiction is likewise “bad”. To suggest that either of these beliefs is open to question is tantamount to heresy, but it should be done, nevertheless. What is surely important is not just whether people are taking a drug, but whether they are harming themselves or others in so doing.

There is a prevailing assumption in society that harm is an inevitable

consequence of drug use and that drug use and drug abuse are the same thing. It may well prove to be so, in which case the drug crusades of the twentieth century will at least have a rational and moral basis. But while no one is prepared to question the principles and definitions underpinning society's views on drug use, which were effectively enshrined at the beginning of the century and had as much to do with prejudice as science, the laws on cocaine and other drugs – which by anyone's standards are not having their desired effect – will remain unchanged.

CRACK BABIES

Headlines such as "The Crack Children", "Crack in the Cradle" and "Crack Babies: Genetic Inferiors" filled the American press in the late 1980s. Radio and television networks devoted many prime-time hours to these "crack babies". A New York State Senator's investigative efforts resulted in a monograph with the title "Crack Babies: The Shame of New York". The press had discovered a new demon and it was a perfect combination. In a rerun of the "innocent victims of HIV" scenario, we were presented with vast numbers of babies born to crack-addicted mothers who were premature, tiny, brain-damaged, unlovable, unteachable and incurable. They were, according to one columnist, condemned to "*a life of certain suffering, of probable deviance, of permanent inferiority*". In 1991, John Silber, president of Boston University, went so far as to lament the expenditure of so many health-care dollars on "*crack babies who won't ever achieve the intellectual development to have consciousness of God*".

The first reports of cocaine damage in babies came from the Chicago drug treatment clinic of paediatrician Ira Chasnoff. His study, published in 1985 in *The New England Journal of Medicine*, found that the newborns of 23 cocaine-using women were less interactive and moodier than non-cocaine-exposed babies. The report was flashed round the world. Crack had proved useful for some years as a scare story but was beginning to run its course – there were just so many times you could rework the "*instant addiction, life of crime and prostitution followed by death*" line. Crack babies gave the story a new lease of life. Crack – the sequel. And it was a perfect moral tale. These mothers had "*inflicted a life of misery on their offspring*".

"*It really got out of control,*" said Donald E. Hutchings, the editor of the *Journal of Neurotoxicology and Teratology*, "*because these jerks who didn't know what they were talking about were giving press conferences. I'd be sitting at home watching TV and suddenly there'd be the intensive care unit in Miami or San Francisco, and what you see is this really sick kid who looks like he's about to die and the staff is saying, 'Here's a crack baby.'*"

Crack babies were thought to be doomed to a life of handicap, thanks to their mothers' refusal to stop smoking cocaine during pregnancy. But crack babies soon turned out to be yet another media scare. Dr Chasnoff, who carried out the original work in identifying the problem, did a two-year follow-up study. His conclusion: *"Their average developmental functioning level is normal. They are no different from other children growing up. They are not the retarded imbeciles people talk about."*

What people began to realize was that so-called crack babies were no different from other babies born to low-income, drug-abusing mothers. It wasn't the crack – it was everything. Most likely anyone prepared to smoke crack while pregnant would not bat an eyelid at drinking or smoking or taking other drugs. None of these is conducive to a healthy foetus. Dr Chasnoff, continued: *"As I study the problem more and more, I think the placenta does a better job of protecting the child than we do as a society."* Research began to show that the problem with crack babies was less due to the time they spent in the womb than the time after. Mothers on crack are not necessarily the most diligent of carers.

Further evidence of this came from a report in a 1992 issue of the *Journal of Neurotoxicology and Teratology* which indicated that cocaine, on its own, does not cause behavioural problems in babies who are exposed to it before they are born. The report was produced by a research team at Emory University, Atlanta, who had studied 107 healthy, full-term infants, most born to poor, black, single women.

Over 60 per cent of these women had inhaled, smoked or injected cocaine. Although their babies were smaller than average, they were free of problems typically blamed on the drug, including tremors, hyperactivity and gastrointestinal upsets. The group reported: *"Cocaine appeared to have a smaller impact on neonatal behaviour than do alcohol, cigarettes and/or marijuana."* Ten women who were not cocaine-users averaged 24 ounces of alcohol a week while pregnant. Their babies displayed more signs of withdrawal. The researchers warned that cocaine use during pregnancy can lead to premature birth, and it is this – plus malnutrition and other environmental factors associated with poverty – that causes much of the suffering among babies born to cocaine users.

Unfortunately, the growing dissatisfaction with the concept of crack babies, even by one of its originators, came too late for many. Children labelled as such were almost impossible to place with adopters. Furthermore, because they were widely labelled as mentally retarded and incapable of proper reasoning or communicating, they were rarely given the same level of education as other children. Many did indeed grow up handicapped, not through any birth defect, but through neglect.

3

RESTRICTION

WAGING WAR ON COCAINE

By the beginning of the twentieth century, cocaine was not only being used as a local anaesthetic, but also as a panacea for all ills. In Paris, opera singers used it to relieve their sore throats before performances. Another common use for cocaine was the relief of bronchial and nasal symptoms. Cocaine was believed to reduce swelling of the mucous membranes and so widen the nasal and bronchial passages. One of these products, Ryno's Hay Fever and Catarrh Remedy, promoted itself for use in *"hay fever, rose cold, influenza, or whenever the nose is 'stuffed up,' red and sore"*. Most would now consider this last a symptom of cocaine use rather than a reason for taking it, but Ryno's powder, which was nothing more than pure cocaine, sold well. It is probable that cocaine snorting became prevalent through such preparations as Ryno's.

As cocaine became more and more widely available, inevitably people began to use it for no other reason than the sheer pleasure of taking it. This was hardly surprising, from the start Freud had stressed the "euphoric" effects of cocaine use, without mentioning any attendant downside. For many, cocaine became the Prozac of its day, taken not for any specific condition but just to lighten their mood, or get them through a particularly gruelling day. Within a few years, the West – especially the USA – had a working class that was functioning on cocaine.

The main problem was that you could buy cocaine over the counter in any drug store in the form of preparations such as Ryno's Hay Fever and Catarrh Remedy. One concerned father wrote to the Bureau of Chemistry in the USA: *"It [Ryno's] is ruining our boys... I have a son that has been using it and have tried for the last year to break him from it, but no use as long as he can get it and there are others that use it more and are worse than my son. I hope you can*

POLICE MAGAZINE



LES POURVOYEURS DE COCO

Lire, pages 8 et 9, nos révélations troublantes sur le trafic de la cocaïne à Paris et l'existence des odieux pourvoyeurs de drogue. La jeune femme ci-dessus prépare un paquet de coco qu'elle enterrera dans cet innocent bouquet, afin de dépister les vigilants inspecteurs de la brigade mondaine. (S. G. P.)

A PARISIAN COCAINE USER IN 1933

give it your earliest attention for there are many here that he is ruining with his drug and the sooner it is stopped the better."

COCAINE AND THE BLACK COMMUNITY

Cocaine was regarded as a particular problem within the black community. The drug was readily available and was becoming increasingly cheap and thus provided a welcome opportunity for poor blacks to escape the general misery of life. This alarmed the moral guardians of America, and the myth of the "cocaine-crazed Negro" soon surfaced. An article in the *New York Times* claimed that "Negro cocaine fiends had become a new Southern menace" and listed some "facts"

about the use of cocaine by black workers: *"Stories of cocaine orgies, followed by whole-sale murders seem like lurid journalism of yellowest variety... However nine men killed in Mississippi on one occasion by crazed cocaine takers, five in North Carolina, three in Tennessee – these are facts that need no imaginative colouring."*

The article continued: *"There is another effect and a most important one. This is the temporary steadying of the nervous and muscular system, so as to increase good marksmanship. The record of the 'cocaine nigger' near Ashville, who dropped five men dead in their tracks, using only one cartridge for each, offers evidence that is sufficiently convincing."*

In case its readers still hadn't grasped the full horror of the situation, the article added: *"The drug produces several other conditions that make the 'fiend' a particularly dangerous criminal. One of these conditions is a temporary immunity to shock – a resistance to the 'knock down' effects of fatal wounds. Bullets fired into vital parts, that would drop a sane man in his tracks fail to check the 'fiend' – fail to stop his rush or weaken his attack."*

What evidence the *New York Times* had for its allegations is not clear, but these highly sensationalized stories were sufficiently horrific to get the moral guardians of society up in arms. Dr Hamilton Wright opined that: *"The use [of cocaine by Southern blacks] is one of the most elusive and troublesome questions confronting law enforcement and is often a direct incentive to the crime of rape."* Another Doctor, Edward Huntingdon, wrote in 1914 that *"sexual desires are increased and perverted, peaceful Negroes become quarrelsome, and timid Negroes develop a degree of 'Dutch courage' that is sometimes almost incredible."*

The use of cocaine by black workers was tacitly allowed – and in some cases positively encouraged – by their employers. Like the Spanish in South America, they realized that a work-force on cocaine was both happier and more productive. Dr Hamilton Wright, the man largely responsible for framing the United States' and much of the world's drug laws said this in a 1911 interview with the *New York Times*:

"In the South the use of cocaine among the lower order of working Negroes is quite common. It is current knowledge throughout the South that on many public works, levee and railroad construction, and in other working camps where large numbers of Negroes congregate, cocaine is peddled pretty openly. In all of our large cities the drug is compounded with low grades of spirit, which make a maddening compound. Inquiries have shown that contractors of labor in the South under the impression that cocaine stimulates the Negro laborers to a greater output of work, wink at the distribution of the drug to them."

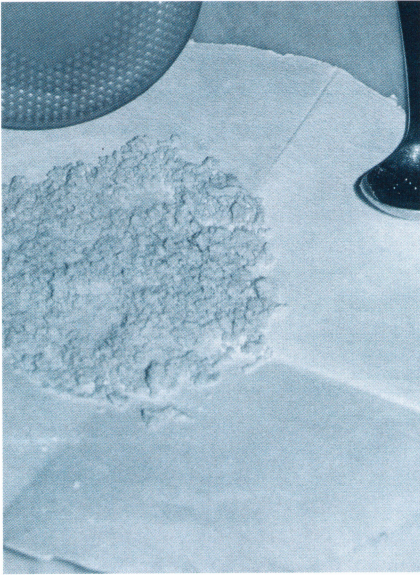
Wright continued in his diatribe against cocaine, listing some of its other distinctions: *"It is the unanimous opinion of every State and municipal organization having to do with the enforcement of State and municipal pharmacy laws that the misuse of cocaine is a direct incentive to crime; that it is perhaps of all factors a singular one in augmenting the criminal ranks. The illicit use of the drug is most difficult to cope with, and the habitual use of it temporarily raises the power of a criminal to a point where in resisting arrest there is no hesitation to murder... There is no doubt that this drug, perhaps more than any other, is used by those concerned in the white slave traffic to corrupt young girls, and that when the habit of using the drug has been established, it is but a short time before such girls fall to the ranks of prostitution."*

In case his readers were not yet sufficiently disturbed by the perceived threat that the drug posed to society, Wright added his *coup de grâce*: *"To illustrate the insidious spread of the cocaine habit, you should know that an ever increasing number of our sailors and soldiers are falling into the use of it."* He finished the interview by concluding that: *"It [cocaine] is really more appalling in its effect than any other habit-forming drug in use in the United States."*

Alarmed at the prospect of a growing white slave trade and invincible, sharp-shooting, murderous and priapic blacks, no matter how unfounded, the authorities prepared to take steps to clamp down on the drug. But these irrational fears were only part of the reason why cocaine use began to be frowned upon and eventually legislated against. Toward the end of the nineteenth century, the UK and the USA witnessed a growing temperance movement. This movement, which encompassed alcohol, morphine, cocaine and even tobacco, began to distinguish between those who used drugs for "good" reasons and those who used them for pleasure.

Hamilton Wright was one of those who adhered to this distinction: *"It is a generally known fact that during the last twenty years cocaine has been diverted from its original use by the surgeon as a local anaesthetic to pander to the supposed needs of large numbers of our population. It is estimated, after a wide consultation, that 15,000 or 20,000 ounces of this drug are sufficient to satisfy the demands of surgery in the United States. Today there are manufactured in the United States at least 150,000 ounces of the drug, the larger part of which is put to improper uses."*

Another doctor wrote that the *"vicious user of a drug whose sole excuse is the seeking for new sensations, is a person who does not need protection, but rather restraint by law in order that he may not become a menace to the public welfare and a care for public charities."* Others joined the bandwagon. Dr Charles B. Towns wrote: *"When*



ILLEGALLY REFINED COCAINE

an overseer in the South will deliberately put cocaine into the rations of his Negro laborers in order to get more work out of them to meet a sudden emergency, it is time to have some policy of accounting for the sale of a drug like cocaine."

Hamilton Wright was happy to oblige, framing the 1914 Harrison Narcotic Act. Cocaine was erroneously classified as a narcotic drug and legislation concerning it went through largely on the back of legislation about opium and its derivatives. The Harrison act stipulated that "all persons who produce, import, manufacture, compound, deal in, dispense, sell, distribute, or give away opium or coca leaves, their salts,

derivatives, or preparations" be licensed and liable to a tax. A series of court judgments on the interpretation of the act had the net result of making cocaine illegal outside a hospital. Cocaine taking became a criminal activity and its supply was similarly prohibited.

RICH DRUG, POOR DRUG

Medical use of cocaine had all but stopped by the time the Harrison Act was passed. A general suspicion of the drug had already arisen, with doctors noticing cases of "cocainism" as early as 1885. Cocaine was removed from Coca-Cola in 1903, without adversely affecting the drink's sales. Even before the Harrison Act was implemented, cocaine had become almost exclusively a drug of recreation – the only difference was that now it became an illegal one. It had also become an expensive habit to maintain and many poorer users turned to heroin instead, a considerably cheaper drug. Cocaine became the preserve of the rich, a position it was to hold – at least in North America and Europe – for the next sixty years.

In the UK, it was cocaine rather than opium, morphine or heroin that was at the forefront of drug legislation. In 1901, a columnist for the *Daily Mail* wrote that:

"The [cocaine] habit grows rapidly; a mild 10 per cent solution obtained at a chemist's to cure a toothache has given many people a

first taste of the joys and horrors of cocaine. The first effect of a dose is extreme exhilaration and mental brilliancy. The imagination becomes aflame. The after-effects – reaction, utter loss of moral responsibility, a blotched complexion, and the lunatic asylum or death. Yet any chemist will tell you that it has been increasingly in demand by women of late years."

What is interesting in this passage is that in the UK cocaine was seen as a woman's drug, rather as morphine had been in the latter half of the nineteenth century. Many of these female users were assumed – possibly correctly – to be prostitutes. It was this fact that convinced the British Government to legislate against cocaine.

When the First World War broke out, London became the nexus of an ever shifting population of soldiers being moved to the front lines, with the likelihood of being killed. A huge service industry grew up to keep the "cannon fodder" happy, whose main components were alcohol and prostitutes. Alarm over the former caused David Lloyd George, the future Prime Minister, to declare: *"We are fighting Germans, Austrians and Drink, and so far as I can see, the greatest of these deadly foes is drink."*

The King, George V, announced in 1915 that he and his family would abstain entirely from alcohol for the duration of the war, as an example to the nation but especially to the armed forces. It was at this time that the UK's peculiar licensing laws were drafted, contained in Lloyd George's Defence of the Realm Act (affectionately known as DORA), with the principal aim of reducing drunkenness among munitions workers. Pubs were restricted to opening for two hours at lunch-time and three hours at night. These restrictions continued in the UK, with only minor changes, until the last decades of the 20th century.

With such draconian measures against alcohol coming into force, it is hardly surprising that many people turned to other substances for recreation. The Defence of the Realm Act also required restaurants and theatres to close by 10.30pm, but for some reason forgot to mention night-clubs. Once the other venues closed down for the night, the city's pleasure seekers would reconvene, *en masse*, at their clubs. As a result, London developed a thriving night-club scene. Soon, the night-clubs were forced to close early as well, at which point the whole scene went underground. As it did, so it acquired some underground habits. By 1915, the *Evening News* was able to report on the night-club scene:

"I see that ...people are turning their attention to the growing craze of opium smoking, to which I referred last week. West End Bohemia is hearing some dark stories of what is going on. But still more prevalent is the use of that exciting new drug cocaine. It is so easy to take – just snuffed up the nose; and no one seems to know why the

girls who suffer from this body-and-soul-racking habit find the drug so easy to obtain.

"In the ladies' cloakroom of a certain establishment two bucketfuls of thrown-away small circular cardboard boxes were discovered by the cleaners the other day – discarded cocaine boxes."

What was implied, though not stated, in this article, was that *"the girls who suffer from this body-and-soul-racking habit"* were most likely prostitutes – or chorus girls, which to the average reader amounted to much the same thing. The Empire's soldiers were naturally enjoying the services of these prostitutes and the powers-that-be were seized by a largely unfounded panic that their fighting boys were going to be seduced into a life of effeteness by an army of pretty women of easy virtue brandishing cocaine.

This fear seemed to be confirmed in 1916 when a Canadian major stationed near London found that some of his soldiers were being supplied with cocaine by a prostitute called Rose Edwards, in league with her partner, Horace Kingsley. Kingsley was charged with *"selling a powder to members of HM [His Majesty's] forces, with intent to make them less capable of performing their duties"*. Both Kingsley and Edwards received six months' hard labour.

The national press seized upon the case and others like it that appeared at the same time and whipped up a frenzy of alarm around cocaine – always easy to do in time of war. It was also to the press's advantage that cocaine was associated with the two principal enemy nations – Germany and Austria (the German pharmaceutical company E. Merck and Co was the first commercial producer of the drug, and Koller and Freud were both Austrians). One 1916 article in a national newspaper ran under the headlines *"Vicious drug powder – Cocaine driving hundreds mad – Women and aliens prey on soldiers – London in the grip of the drug craze – Secret 'coke' parties of 'Snow sniffers'"*.

The *Evening News* commented, without any justification at all, that *"Practically unknown a few years ago, cocaine taking has spread like wild-fire in all classes of the community until, next to alcoholism, it is far and away the commonest form of drug taking."* Out of this furore came an amendment to DORA in 1916, which prohibited the possession of cocaine by soldiers. This prohibition was soon extended to anyone but doctors, pharmacists, vets and holders of prescriptions for cocaine. Opium was included as well, as part of a job lot, just as cocaine followed opium into law in the USA.

Cocaine, which in the UK had never really been a drug of the working classes, quickly became enshrined as a drug of the wealthy and bohemian, just as it did in the USA after the Harrison Act. In the UK, Aleister Crowley wrote in his 1922 *Diary of a Drug Fiend*: *"We*

went to tea with Mabel Normand. Everyone was talking about drugs. Everyone seemed to want them; Lord Landsend had just come back from Germany and he said you could buy it [cocaine] quite easily there." This was most likely correct. During the 1930s, Germany replaced the USA as the largest consumer of cocaine, presumably fuelling the antics of the decadent night-clubs of the Weimar Republic immortalized in the musical "Cabaret". One of Germany's more famous cocaine users was Hermann Goering, Hitler's number two.

In the USA, *Vanity Fair* ran an article in 1922 entitled "Happy Days in Hollywood". It contained the following scenario (presumably a parody): *"With the brightening influence of spring there has been a distinct quickening of the social pace. Drugs are not as much in evidence as during the trying days of winter, but they still spread their genial influence at some of the more exclusive functions. Last week little Lulu Lenore of the Cuckoo Comedy Co. gave a small house dance for the younger addicts. 'Will you come to my snow ball?' said the clever invitations. In one corner of the living room was a miniature 'drug store', where Otho Everard kept the company in a roar as he dispensed little packages of cocaine, morphine and heroin. The guests at their departure received exquisite hypodermic needles in vanity boxes which have caused many heart-burnings among those who were not invited."*

Both these passages show that cocaine was firmly established as the preserve of the privileged. Drug users among the poor had first moved on to heroin and then, from about 1930 onward, to synthetically produced amphetamines. As a result, police forces in the West did little to curtail the use of cocaine, which by this time at any rate was minimal. The police were much more interested in heroin, which was becoming the drug of choice for the criminal fraternity. This is reflected in seizures of cocaine, which in the USA in 1938 only amounted to 417 grams. This was less than 1 per cent of the total amount of heroin seized that year. This discrepancy reflects not just the smaller amount of cocaine used but also the lack of interest the authorities showed in it. So long as cocaine remained solely a drug of affluent, white consumers, the authorities had little interest in mounting a campaign against it. This was to become all too apparent in later years, as crack emerged on the streets of American cities in the 1980s.

JAPAN THE DEALER

China was one country where cocaine use flourished throughout the 1930s and 1940s. This country's cocaine came from Japan, not Europe, and the coca leaf from which it was derived was Asian in origin, not South American. It is generally assumed that coca plants grow only



THE COCA SHRUB IN ITS NATURAL HABITAT

in South America, specifically the Andean basin, simply because that is the situation today. It is true that the coca plant is indigenous to that area, but just as potatoes and tomatoes found happy homes far away from their birthplaces, so did coca.

During the nineteenth century, the European powers, which between them controlled most of the world, frequently took plants that originated in one of their acquisitions and tried growing them in another. For example, cinchona trees, whose bark is the source of quinine, a treatment for malaria, are indigenous to South America. The British Government started planting them in India. From these trees they were able to produce the quinine necessary to sustain a huge colonial force in a malaria-ridden country. The British did much the same with the coca plant, trying it out in India, Africa, Ceylon, Malaya and Jamaica. The Dutch followed suit, planting coca in their colonies in Indonesia. The coca plant flourished, to varying degrees, in all these places.

It was against this background that Japan was able to enter the cocaine-producing business, eventually becoming the world's largest single producer of the drug, perhaps ever. Of the areas mentioned above, the only one to produce serious quantities of coca was Dutch Indonesia. At one point, in 1911, coca leaf from the Dutch East Indies eclipsed that from South America in quantity. When Japan first started to make cocaine it imported coca leaf from both Dutch

Indonesia and South America. However, as international regulations on the export of coca leaf grew, the Japanese began to look closer to home for their leaf.

Japan took control of Taiwan (then Formosa) in 1895. The first coca fields were planted in 1916, with a crude refinery nearby. At first, they were a resounding flop, and were promptly shut down. But the Japanese were nothing if not single-minded and persevered with their attempts to cultivate coca. By 1929, plantations in Taiwan, Iwo Jima and Okinawa were producing enough coca leaf to keep Tokyo's cocaine manufacturing factories supplied without recourse to foreign imports. By the 1930s, Japan was left with the wherewithal to produce vast quantities of cocaine. What it lacked was any legal market. The minuscule amounts now needed by medicine in the West could easily be supplied by a single company. Japan solved this problem by entering the illicit drug business, primarily in China.

In 1939, China formally accused Japan of "*promoting the abuse of drugs in China*". This was undoubtedly true. Not only did Japan need the money from its drugs to finance the vast expense of mounting its invasion of China, it also hoped to debilitate that country's populace with the drugs. Selling drugs to the Chinese seemed like a stroke of genius to the Japanese authorities – it made money and it also made the war easier to win. Much of this was confirmed at the Tokyo War Crimes trials, where Japan was accused and found guilty of supplying drugs to the Chinese:

"Successive Japanese governments, through their military and naval commanders and civilian agents in China and other territories which they had occupied or designed to occupy, pursued a systematic policy of weakening the native... inhabitants... by directly and indirectly encouraging increased production and importation of opium and other narcotics [still, incorrectly, including cocaine] and promoting the sale and consumption of such drugs among such people... profits from the government-sponsored traffic in opium and other narcotics and other trading areas were used by agents of the Japanese Government."

With Japan out of the picture after the war, the world's consumption of cocaine went into free fall. Obviously, individuals continued to take it but there is little evidence that it was prevalent in any one socio-economic group. It was certainly out of the price range of the majority of people and producers and traffickers devoted their considerable energies and ingenuity to the business of heroin, which continued to sustain a large and dependable profit. In 1957, Henry J. Anslinger, the head of the Federal Bureau of Narcotics (the predecessor of the Drug Enforcement Agency) was able to say with some justification that cocaine had disappeared as a problem in the USA.

4

THE INDUSTRY

After the scares of the early twentieth century, cocaine once again lost its stigma as a problem drug. Although still classed as a narcotic and so covered by the same harsh penalties as heroin, people saw it as non-addictive and harmless. This attitude was mostly due to the scarcity of the drug and the sort of people taking it. Cocaine was so expensive and difficult for most people to acquire that only the very wealthy were likely to be able to develop a habit. Nor, as a rule, was cocaine injected, unlike narcotic drugs. To the average drug taker, cocaine didn't seem to have much in common with heroin, whatever US legislation might say.

Cocaine returned in the late 1960s – and with a vengeance. The reasons for this are not at all clear. One suggestion is that it was linked to the growth of methadone maintenance – the method used to wean heroin addicts off heroin. The claim was that addicts sold their methadone and used the money to buy cocaine. However, this seems unlikely – they would presumably be more likely to buy heroin with any spare cash they had. A more plausible explanation is that the rise in cocaine came about because the United States Government began to crack down on the illicit use of amphetamines. This, combined with the community led – and highly effective – “speed kills” campaign at the end of the 1970s convinced many people that amphetamines were not the free ride they had previously appeared to be.

Frank Zappa preached to America's long-haired youth: *“I would like to suggest that you don't use speed and here's why: it will mess up your liver, your kidneys, rot your mind: in general this drug will make you just like your father and mother”* – this from a man who named his son Dweezil. It also seems that South American cocaine production was stepped up at this time. What remains unclear is whether this was the cause of the increased interest in cocaine, or a consequence of it. By the early 1970s, cocaine was everywhere once

again. What has often seemed extraordinary is that South America was able to come up with the goods so quickly – it was almost as if the Andean countries had just been sitting there biding their time. This wasn't far from the truth.

PERUVIAN PASTE

Peru is the world's largest producer of coca leaf and paste. It no longer has a large cocaine-producing industry – that tends to be carried out in Colombia now. But this was not always so. At the beginning of the twentieth century, Peru achieved the impressive feat of not only being the world's largest producer of coca leaf for export but also the largest producer of finished cocaine. And it was all legal. The story of Peru's loss of a licit industry and its subsequent supremacy in an illicit one is yet another example of the high-handed way in which the developed nations, through their drugs policies, have played with the lives of those in the developing nations.

The legal cocaine industry at the beginning of the twentieth century was a matter of great pride to the country. Coca was an indigenous plant, while the scientific processes employed to convert it to cocaine were thoroughly modern. Peru's finance minister at the time proudly said: *"This novel and so essentially Peruvian industry satisfied world demands in this realm... We affirm its grand future."* The cocaine business was both profitable and patriotic. Unfortunately for Peru, this happy picture was not to last long.

Demand for cocaine began to dry up. Concern over the addictive nature of cocaine was growing, Albrecht Erlenmeyer had published his paper identifying cocaine as the *"third scourge of humanity"* and the Coca-Cola company had removed the drug from its formula. By the time the various US and international controls on drugs had been passed, during the first two decades of the twentieth century, the love affair with cocaine was already over. The market for the drug was dwindling and Peru was no match for the Netherlands, who were producing enough cocaine from their fields in the East Indies to satisfy a contracting market. It was at this point that the production of coca and its products began to assume its current form in Peru. Whereas at the beginning of the twentieth century it was a proud, national industry, by the 1920s it had dissipated into a set of small-scale regional operators, supplying a predominantly domestic market. It was, however, their very exclusion from the international market that saved these small concerns and sowed the seeds of Peru's massive cocaine industry today.

During the first half of the century, the Dutch jealously clung on to – and fought for – a steadily decreasing licit market. But once cocaine became a contraband drug they had to give it up. The Dutch were too much

a part of the international community (and too weak, especially by the end of the Second World War) to fly in the face of US policy on coca production. Cultivation of the plant in the East Indies soon stopped after the war.

Peru, however, remained largely unnoticed by the rest of the world, for three principal reasons. First, their potentially important role within the international community was overlooked – they neglected to attend major international conferences on drugs, such as the one at the Hague, in 1912, which gave rise to the Harrison Narcotic Act in the USA and similarly restrictive laws in other countries. The Peruvians felt, perhaps rightly, that such international jamborees were just another way of ensuring preferential treatment for the multinational industries. Second, Peru had ceased to be a major supplier of cocaine, even before international restrictions came into force. Third, cocaine was no longer seen as a major problem – by the 1930s, the anti-drug forces only had eyes for heroin. As a result, in the opinion of the developed nations, Peru was simply not worth bothering about. This was a short-sighted view. Peru maintained a fairly lax attitude to its small, and increasingly invisible, coca industry, thus allowing it to survive.

THE COCAINE CARTELS

The United States' indifference to the seemingly negligible cocaine industry bubbling away in South America was eventually to blow up in their face. In February, 1970, *The New York Times* reported: "*More and more cocaine, worth millions of dollars, is being smuggled into the United States from Latin America, much of it through this area [Miami], according to Federal law enforcement officials and narcotics agents.*" The article went on to quote Dennis Dayle, supervisory agent of the Federal Bureau of Narcotics and Dangerous Drugs in Miami, as saying: "*The traffic of cocaine is growing by leaps and bounds. It was insignificant only a few years ago, but now it has become a significant problem.*"

"The article described a typical smuggling operation: "*There are two principal partners, one controlling operations in South and Central America and the other in Miami. The syndicate boss abroad, through a number of subordinates, buys coca leaves, sets up laboratories, maintains contact with local officials, arranges for payoffs, and recruits and dispatches local couriers with cocaine to the United States, mostly by plane.*"

"*The Miami boss, like a head of a large commercial corporation, has deputies in charge of travel, transportation, personnel, security, accounting, and quality control – 'cutting' pure cocaine for wholesale and retail trade.*"



PART OF A HAUL OF 3000 KILOS OF COCAINE SEIZED EN ROUTE TO THE UNITED STATES

"Several years ago, modest Latin-American women were usually employed as 'body carriers,' smuggling into Miami from two to four kilograms of pure cocaine... Some women carriers posed as being pregnant. After passing through Customs at the Miami International Airport, these couriers – who were given precise but simple instructions and who had little information about the syndicate – usually proceeded to a downtown hotel where cocaine and cash transportation payment changed hands."

This is hardly the sort of high-tech, high-quantity operation we associate with the cocaine-trafficking business of the present day. For that one must look to South America and, especially, Medellín in Colombia. Colombia's history is emblematic of the changing face of the cocaine-producing regions of South America. For some time, Colombians had been trading in contraband whisky and cigarettes. One of their number was Pablo Escobar Gaviria. Escobar was born into humble circumstances in the village of Rionegro, seventeen miles from Medellín. From modest beginnings as a small time smuggler of bootleg liquor and tobacco, he became one of the most notorious criminals of his age.

Initially, the cocaine smuggling trade was run by Cubans and Mexicans, but in the 1960s the Colombians realized that there were far greater profits to be made if they could take over the entire business from

cultivation through to distribution. They were admirably placed to do this as many Colombians had settled in the USA between 1965 and 1975. Until the 1970s, Colombia was still the baby of the coca leaf-producing countries, with less than a 15 per cent share of the world market. After the coup of General Augusto Pinochet in Chile in 1973, things began to change. At that time, Chile was the main refiner, if not producer, of coca leaf. In an act of goodwill to the USA, Pinochet deported twenty leading traffickers to the USA and imprisoned many more. Many of the chemists who escaped his purge moved to Colombia. The essentials for a large-scale cocaine-producing operation were in place.

Pablo Escobar was one of those who saw the opportunities presented by the cocaine trade. Until the 1970s, the South Americans produced the paste then sold it to North Americans, who took over from there. The producing nations made money from the transaction, but it was nothing to the profits being made by the distributors. Escobar and his contemporaries decided that they should take over the distribution end of things as well. As a result, they would acquire total control over the process and maximize their profits.

The Colombian cocaine industry mushroomed; by 1978 it was estimated that 85 per cent of all the cocaine consumed in the USA came from Colombia, and the drug represented \$4 billion a year in trade to Colombia. With this sort of money involved, the traffickers became hugely powerful. They also became increasingly violent. As Escobar and his contemporaries rose to the top of the heap they carried all before them. Bad luck to anyone who got in the way. Criminal groups, who were the precursors of the cartels, began to form. So did gang warfare, as each group tried to get the lion's share of the cocaine business. As the gangs became richer and more powerful, they naturally began to buy into politics, ensuring safety for their members and security for their exports. By the end of the 1970s, Colombia was effectively being run by cocaine.

In 1976, police arrested Escobar for possession of thirty-nine pounds of cocaine, but the arresting officer was killed shortly afterwards, and nine judges received death threats and refused to hear the case. The official records disappeared from the courthouse, and so Escobar Gaviria wasn't tried. This was the new face of Colombian drug trafficking – cocaine literally ruled Colombia, and its producers and traffickers were untouchable.

As the cocaine money poured in from the USA, especially to Medellín, Escobar's base, so did American and European goods. Medellín was transformed from a quiet, almost rural town, known for the conservatism and religious observance of its inhabitants, into the Las Vegas of South America. It became a boom town, with a new

style of architecture – “narco-arquitectura” – springing up to house the new drug aristocracy.

Shops selling expensive goods opened and the streets were full of Mercedes and BMWs. Escobar even founded a newspaper and, in 1982, was elected to Colombia's Congress, giving him immunity from prosecution. By 1983, his personal wealth was estimated to be \$2 billion, making him the richest criminal in the world. He financed the construction of a *barrio* (settlement) for two hundred poor families in Medellín, and for this and several other benevolent actions, he was called the “Robin Hood Paisa”.

To an unsuspecting eye, Medellín looked like a paradigm of capitalist success – the streets were empty of beggars, discotheques and boutiques were popping up everywhere and expensive cars churned up the dust on the roads. But the only reason the beggars had gone was because they had become “mules” (drug carriers), body guards, and assassins and the money that was paying for the cars and clothes was all cocaine money, usually bloodstained – and tax free. When a country's main export is untaxed, you have problems, especially as cocaine began to edge out Colombia's other traditional industries, such as textiles.

For a while, things continued more or less the same in Colombia – everyone was having a good time on the new cocaine money, of which there was enough to go round without significant gang warfare. The poor, especially, welcomed the drug barons – they were a better source of bounty than the state or any previous industry had been.

During the 1980s, the drug business went from strength to strength – in 1983 the largest cocaine laboratory in the world was built in Tranquilandia. It had fourteen laboratories, its own water and electricity supply, roads and an air strip – not to mention a private army to guard it. Colombia was booming, awash with cocaine dollars. Unfortunately for the drug barons, the same year a new minister of justice, Rodrigo Lara Bonilla was appointed and embarked on a campaign against the drug trade. He enlisted the help of *El Espectador*, a leading newspaper, which began to expose some of Escobar's crimes. Suddenly, Colombia was in a state of civil war.

The factory at Tranquilandia was raided and fourteen tons of cocaine dumped in the river. All the employees were arrested and the guns and planes impounded. The bosses got away, mainly to Panama. From there, they offered to pay off Colombia's entire foreign debt – about \$13 billion – in return for immunity from prosecution. Their offer was turned down.

In 1984, Bonilla – the cause of the drug barons' exile – was murdered and the Colombian Government retaliated by stepping up their

campaign against drugs, forcibly extraditing four traffickers to the USA. The Medellín cartel responded in kind by going on the rampage, culminating in the 1989 assassination of the presidential candidate, Luis Carlos Galán. The same year, the offices of *El Espectador* were blown up, as was an aeroplane, in mid-flight between Bogotá and Cali, killing all 101 passengers and crew.

Out of this snowballing mayhem and terror eventually came the surrender of Escobar and his colleagues. Escobar went into comfortable "retirement" (far from it in fact) in a luxury prison near his home town and the drug trade flourished as usual, but now with less violence. Escobar's "prison" soon became an international joke and one that seemed to demonstrate unequivocally the indifference Colombia felt to the cocaine trade. The "prison" was a 30,000 square metre compound set in hills above Escobar's hometown of Envigado. It had an electric fence – not to keep him in, but others out – a gymnasium, disco/bar and games room. Escobar's henchmen (the only other people allowed in the jail – the police guards were only allowed to patrol the perimeter and had to ask permission to enter) each had their own room, with television, video and stereo. The image of a luxury hotel was further enhanced by the presence of jacuzzis, a football pitch and a racing track.

Around the inner core of the jail there were luxurious cottages, in which visiting wives or prostitutes could be entertained, and there was even a field where marijuana was grown. Visitors to the jail were frequent. In addition to the relatives, prostitutes and entertainers, judicial officials, politicians and leading members of the church were regular attendees. The majority of the visitors, however, were fellow traffickers or murderers. It was business as usual.

Unfortunately for Escobar, as it turned out, he escaped. It was not difficult – he simply walked out of the front door. The Colombian Government was chaffing at the increasing international derision being heaped upon Escobar's incarceration and had decided to remove him to less salubrious accommodation. Increasingly paranoid about his safety, Escobar decided not to chance it and went on the run. This was about the worst thing he could have done, for by now the Cali cartel, his long-term rival in the cocaine business, was reigning supreme in Colombia and Escobar was fast running out of friends. With a bounty of \$12,000,000 on Escobar's head, there followed a long-running game of cat and mouse. The end was inevitable and in 1993 he was finally run to ground and killed by Colombian security forces. Not, however, before hundreds had been murdered in attacks and counterattacks on both sides.

Though Escobar and the other founders of the Medellín cartel had been more or less eliminated, they helped to establish the total

dominance of Colombia in the international Cocaine trade. Escobar's departure from the scene was at best a mixed blessing. The eighteen-month running battle between Escobar and Colombian and US drug enforcement officials had tied up funds and manpower. While no one was looking, the Cali cartel moved in and assumed complete dominance over the cocaine business – and soon made Escobar's operation look amateurish.

Whereas the Medellín cartel was run by violence and intimidation, the Cali cartel took a more subtle approach. No less ruthless, just less brash. As one observer quipped: "They hide the bodies." Escobar and his friends had left them out as warnings. The Cali cartel made themselves impregnable by acquiring total influence. The cartel took an interest in – and control over – everyone from senior politicians and officers of the police force to the owner of the cafe on the corner. It is money as much as violence that keeps the Cali cartel going. But the difference between the two is largely cosmetic. Despite its reputation as the "gentlemanly" group, the Cali cartel is as ruthless and bloody as the Medellín. They're just better at public relations and infinitely more powerful. They have replaced the "narcoterrorism" of Escobar with "narcopolitics". For all that, Colombia remains the most violent "peace-time" country in the world.

WAYS AND MEANS

Escobar and his fellow traffickers set up systems for the smuggling and distribution of cocaine that remain in place today. Their ingenuity was aided by the complicity of senior officials in Government and the judiciary. One example suffices to show the absurdity of the situation.

In 1976, the Colombian Navy's flagship, the *Gloria*, set off to take part in the USA's bicentennial celebrations. Its first port of call *en route* from Colombia was Miami, where a sailor and a non-commissioned officer were detained along with six kilograms of cocaine hidden in the ventilation system. As the ship continued its stately progress up the Eastern seaboard of the USA, more cocaine was discovered at every stop – ten kilograms here, another twenty there, each time "found" by a member of the crew in the normal execution of his duties.

It was never established exactly how much cocaine was on board the *Gloria*, nor who was responsible for its presence. Pablo Escobar later said that not all the drug was recovered. As the *Gloria* sailed up New York's Hudson river, the Colombian ambassador to the USA said, "I feel very proud of the *Gloria's* participation in this celebration." Whether he was aware of exactly how great a contribution the *Gloria* was intending to make to the celebration is a moot point.

The reticence shown by the Colombian authorities and the Americans in

this case highlighted a major obstacle in the United States' war on drug traffickers. It was inconceivable that the Colombian navy's flagship could be used to smuggle cocaine without the connivance of senior officials, but you cannot easily go round accusing another country's leaders of being drug dealers – not if you think you might need their help in the future and want to avoid a major diplomatic row. The US Drug Enforcement Agency's hands were tied by the necessities of *realpolitik*.

Not all smuggling operations had an official seal of approval, like the *Gloria*'s. In the early 1970s, traffickers contented themselves with using mules on flights, who were often relatives of the traffickers. Escobar's right-hand man, Hitler fanatic Carlos Lehder, even sent his mother to the USA with a load, while the sister of Jorge Ochoa, the

US AND COLOMBIAN OFFICIALS DESTROYING A COCAINE LABORATORY IN BOLIVIA



other linchpin in the Medellín cartel, was once caught with 1.5 kilograms of cocaine stuffed into her bra. The risk of detection was minimal in the early days – US customs had not yet woken up to the influx of cocaine. But as customs became more sophisticated, so did the smugglers. Soon, mules were using false-bottomed suitcases and later swallowing the drugs, wrapped in condoms. This last method is highly dangerous, for if a package should burst the mule is killed outright by the surge of cocaine into his or her system. Cocaine was found in wigs, shoe heels, aerosol cans and toothpaste tubes. Shoulder pads were given an extra lift – little could the creators of the soap “Dynasty” have foreseen that the fashion for “power dressing” spawned by their series would facilitate the import of cocaine into the USA. Dissolved, it could be shampoo or a soft drink. Clothes were even being soaked in a solution of cocaine. By the early 1990s, smugglers were found with cocaine stuffed into surgically implanted buttock packs.

Sometimes, cocaine was made solid and moulded into objects such as ashtrays, that could be carried in hand luggage or, more ambitiously, furniture that would be transported as freight. In 1992, US federal narcotics officials seized dog kennels – each of which, when ground down and suitably treated, would render about \$450,000 worth of cocaine. In 1993, a consignment of boa constrictors entering the USA were found to have been made to swallow condoms stuffed with cocaine, their anal passages sown up to prevent them from evacuating the drug. Most of them died *en route*. Cocaine was also shaped to look like coffee beans – Colombia’s other principal export. At one point, it was estimated that up to 5 per cent of the coffee coming out of Colombia was actually cocaine.

THE COCAINE COUP

It’s impossible to know whether the huge upsurge in cocaine imports during the 1970s and 1980s was in response to demand or the cause of that demand. What is clear is that cocaine quickly became the single most important factor in the politics of some South American countries. In 1980, General Luis García Meza took over the government of Bolivia in a ruthless military coup. In this he was assisted by European mercenaries recruited by Klaus Barbie, the former Gestapo chief known as the “Butcher of Lyons”. The coup began one of the darkest periods in Bolivian history. Arbitrary arrest by paramilitary units, torture, and disappearances destroyed the opposition while dissenting journalists simply vanished. Shortly after, it emerged that not only had the coup been backed by one of the greatest war criminals of the twentieth century but also by drug money.

About a month before the coup was launched, six of Bolivia's biggest cocaine traffickers met with the conspirators to work out a mutually beneficial deal. It was no particular secret – a leading La Paz businessman was reported in the *Sunday Times* at the time as saying that the army take-over should be known as “the cocaine coup”. The name stuck – and with good reason. Within weeks of the coup, convicted drug traffickers were being released from jail by the new minister for the interior who was, by strange coincidence, a cousin of Bolivia's leading trafficker. Meanwhile, his henchmen, still under the leadership of Klaus Barbie and calling themselves the “Fiancés of death”, ensured the safe transit of drugs through the country and onward.

Cocaine exports reportedly totalled 850 million US dollars during the period of the García Meza regime, from 1980–81, which was



A TYPICAL STREET SCENE FROM BOLIVIA – SELLING COCA LEAVES

twice the value of official government exports. García Meza failed to gain total support from the military, however, and faced repeated coup attempts. He was finally pressured into resigning on August 4, 1981. But by this time, Bolivia's democracy, always fragile at best, had been so tainted by the corruption of cocaine that it has never recovered.

In September 1986, three members of a Bolivian scientific team were murdered in the Huanchaca National Park in Santa Cruz Department shortly after their aircraft landed beside a clandestine coca-paste factory. The murders led to the discovery of the country's largest cocaine-processing installation and evidence of an extensive international drug-trafficking organization consisting mostly of Colombians and Brazilians. President Paz Estenssoro fired the Bolivian police commander and deputy commander because of their alleged involvement. Meanwhile, suspected traffickers in Santa Cruz murdered an opposition deputy who was a member of the congressional commission that had investigated the Huanchaca case.

At the same time that Bolivia's cocaine industry was burgeoning, its traditional tin mining industry was in decline. In an attempt to appease the powerful miners' union, the Bolivian Government offered compensation to miners put out of work. They, in turn, used the money to buy land and grow coca. The Bolivian Government estimated that coca production had expanded from 1.63 million kilograms of leaves covering 4,100 hectares in 1977 to a minimum of 45 million kilograms over an area of at least 48,000 hectares in 1987. The number of growers increased from 7,600 to at least 40,000 over the same period. Besides growers, the coca networks employed numerous Bolivians, including carriers (*zepeadores*), manufacturers of coca paste and cocaine, security guards, and a wide range of even more nefarious personnel. The unparalleled revenues made the risk worthwhile for many. It is estimated that 500,000 Bolivians are dependent on coca or cocaine for their livelihood.

ENTER THE MERCHANT OF DEATH

After the 1970s' boom in cocaine use, another development occurred, the crack epidemic, one that was to provide a new generation of drug scare stories. Crack is a form of smokable cocaine. By the mid 1980s, crack was claimed to be tearing at the very heart of society and became, until heroin made one of its periodic comebacks as the media's most feared drug, the root of all evil. Crack's origins are, however, obscure.

There was a glut of cocaine at the end of the 1980s. The US market was flooded and prices were beginning to drop. Producers and traffickers needed to "expand their client base" – even with cocaine's lower

prices it was not within the scope of most people's pockets. What crack did was to lower the cost of the "cocaine high" dramatically. Simply because smoking delivers a drug more efficiently to the brain than does snorting, an amount of cocaine too small to produce an effect in powder form becomes an effective dose when converted to crack. In 1986, a single dose of crack could be purchased for as little as \$5 or \$10; over the next few years, as the price of cocaine powder fell even further, the price of a pellet of crack fell as low as \$2 in some parts of the USA.

Thus, by the late 1980s, what had once been called "*the champagne of drugs*" had become available to the poor – and its use spread especially quickly in impoverished urban areas where enterprising youth turned powder cocaine into crack and sold it on the streets.

Once crack had been introduced to the inner-city poor, the "crack epidemic" became a major media event, with literally thousands of articles appearing in newspapers and magazines. The first article on crack appeared in the *Los Angeles Times* in November 1984. The following year there was a story in the *New York Times*, which recorded: "*Three teenagers have sought this treatment [at a local drug programme] already this year... for cocaine dependence resulting from the use of a new form of drug called 'crack' – rock-like pieces of prepared 'free base' (concentrated) cocaine.*" The report was wrong in equating crack with free base, but was otherwise probably quite accurate.

Over the next year, more than one thousand articles appeared in the US press on this new threat to society. CBS made a prime time series called "48 Hours on Crack Street". Even the DEA, never one to knowingly undersell a drug scare, thought the press were going over the top. In 1986, the DEA issued a statement: "*Crack is currently the subject of considerable media attention. The result has been a distortion of the extent of crack use as compared to the use of other drugs. With multi-kilogram quantities of cocaine hydrochloride available and with snorting continuing to be the primary route of cocaine administration, crack presently appears to be a secondary rather than a primary problem in most areas.*" The press saw little reason to let the DEA water down their story and continued to strike the fear of God into the general public with straplines like "*an inferno of craving and despair*".

No scientific studies had been conducted into the drug at this time, but journalists found and quoted a handful of "experts" – mostly law enforcement officials and drug treatment providers – who had decided that crack was "*the most dangerous drug known to man*". They claimed that crack was highly potent and highly toxic, causing

record numbers of heart attacks, seizures, and strokes. They blamed crack for recent increases in crime, family violence, and child abandonment. They claimed that crack was instantly addictive, making moderate and controlled use impossible. And when used by pregnant women, crack was said to produce babies so severely damaged that they would never fully recover.

Crack became so demonized that it even got its own laws, separate from those governing the use and traffic of cocaine powder. In 1986 and 1988, these laws resulted in a 100:1 ratio between the amount of crack and powder cocaine needed to trigger certain mandatory minimum sentences for trafficking, as well as creating a mandatory minimum penalty for simple possession of crack cocaine.

Under this format, a dealer charged with trafficking 400 grams of powder, worth approximately \$40,000, could receive a shorter sentence than a user he supplied with crack valued at \$500. This seemingly absurd inconsistency, powder cocaine and crack cocaine essentially being the same drug, was explained by recourse to the fact that crack was infinitely more addictive than powder cocaine, infinitely more dangerous and more likely to promote criminal behaviour. None of these claims had any scientific backing. The main result of these laws was to penalize large numbers of Afro-Americans and Hispanics, who were more likely to use crack than powder, rarely having the funds for the latter. In 1994, a US District Court Judge said this of the law:

"This one provision, the crack statute, has been directly responsible for incarcerating nearly an entire generation of young black American men for very long periods. It has created a situation that reeks with inhumanity and injustice. The scales of justice have been turned topsy-turvy so that those masterminds, the kingpins of drug trafficking, escape detection while those whose role is minimal, even trivial, are hoisted on the spears of an enraged electorate and at the pinnacle of their youth are imprisoned for years while those responsible for the evil of the day remain free."

The crack laws were indeed iniquitous and whether racially motivated (as some claimed) or not, they led to great misery. One example is that of Derrick Curry, a 20-year-old African-American college student and small-time crack dealer. In 1990, he was supplied by Drug Enforcement Agency operatives with a cellular (mobile) telephone in exchange for crack. Through this planted telephone, the DEA managed to record all his deliveries and the evidence was used against him in court. He was sentenced to 19 years and seven months, with no possibility of parole. This was three times the prison sentence for most murderers in the USA, five times that handed down to most rapists and ten times that for illegally possessing guns.

5

THE WAR CONTINUES



NICARAGUA PROTESTS

HOW TO WIN A WAR

In 1986, President Reagan signed a directive acknowledging drugs as a national security threat. His successor, George Bush, promised shortly after his inauguration to confront “*the toughest domestic challenge we’ve faced in decades*”. Just as Richard Nixon had some 25 years previously, the American president declared war on drugs. The rationale behind this was ostensibly the ever-growing quantity of cocaine entering the USA from South America and the emergence of crack as a new threat. It was a particularly ironic rationale, as it has become increasingly clear that the influx of cocaine into the USA during the 1980s was in part thanks to the country’s foreign policy in Central America, where it was hell bent on the overthrow of the left-wing Sandinista regime in Nicaragua through support, by any means, of the Contras.

In 1979, the Nicaraguan dictator Anastasio Somoza was thrown out of office after more than 40 years of brutal and oppressive rule. He was replaced by the Sandinistas, a disparate group of left wing revolutionaries. When they came to power the then US president, Jimmy Carter, immediately extended diplomatic recognition to them and offered aid, which had been withdrawn during the leadership of Somoza. However, the Sandinistas moved to the left, cosying up to Cuba and the Soviet Union, and aid was once again withdrawn.

Ronald Reagan continued this policy when he came to power in 1981. But for Reagan it was not enough to withdraw aid, he needed to ensure that the Sandinista revolution failed by whatever means necessary. The last thing he needed was another Cuba in his backyard, especially one so centrally located as Nicaragua, with the ability to “infect” its neighbours with the red plague of Communism. Luckily, he found willing allies in the form of Nicaraguans who had fled the country after the revolution to the neighbouring states of Costa Rica and Honduras or further afield to the USA. These disparate groups of dissidents were known collectively as the Contras – from *contrarevolucionario*.

The Reagan administration openly assisted the Contras, at least for a time. But in 1982 the Boland amendment was passed in congress, prohibiting the use of taxpayer funds “*for the purpose of overthrowing the Government of Nicaragua...*” The bill was amended in 1984, curtailing all CIA support for the Contras. The United States assistance to the rebels merely went underground. Using the CIA, they continued to assist the Contras, covertly, just as they had the Nationalist Army in Burma against the Chinese and just as they were in the process of doing in Afghanistan, assisting the Mujahideen against the Soviet invasion.

Heading up the operation was Oliver North. It was North who oversaw the

infamous "arms to Iran" operation, whereby the profit from arms sold illegally to Iran was diverted to the Contras to pay for their war. The story exploded in 1986 when a plane was shot down over Nicaragua and the one survivor, an American citizen called Eugene Hasenpus, spilled the beans to his Nicaraguan captors. After the usual denials from the authorities, an inquiry was immediately launched. But throughout the inquiry there was an undercurrent of rumour, which occasionally surfaced, most memorably in a banner unfurled by a spectator at the Iran-Contra hearings in 1987, saying "ask about cocaine".

In 1996, the *San Jose Mercury News* published a series of articles called *Dark Alliance*. In these articles, journalist Gary Webb detailed the results of a year's research that demonstrated, he said, the involvement of Contras in drug trafficking in the 1980s. More seriously, he suggested that the CIA, and by implication the US Government, were aware of these activities and had done nothing to prevent them, preferring instead to turn a blind eye so long as the Contras were continuing to be a thorn in the side of the Sandinista Government.

Predictably, the articles were rubbished by the Government and most of the press. Even Webb's editor, Jerry Ceppos, started backtracking, writing an editorial in which he said that the series "*fell short of my standards*" in the reporting and editing of a complex story that contained many "*grey areas*". Among the weaknesses of the series, Ceppos said, were instances where the paper included "*only one interpretation of complicated, sometimes conflicting pieces of evidence.*" Webb was eventually fired from his job at the paper.

Why anybody should express surprise at the idea of US foreign policy inadvertently or otherwise promoting the drug traffic is a puzzle. It's not as if this was anything new. The US Government has a long history of encouraging – unintentionally – the illicit drug traffic, usually through CIA covert operations. Since the Second World War, US foreign (and sometimes domestic) policy has been dictated by one overriding concern – the fight against Communism. In several countries, this has resulted in the growth of illicit drug production and trafficking. First, after the war the CIA shored up both the Sicilian Mafia and the Corsicans in Marseilles in order to prevent the left taking power in government or the unions. These groups, newly empowered, were then able to take over the heroin industry. They were also left free to run it so long as they remained a thorn in the side of the left. The notorious "French Connection" was only able to thrive because of the CIA's munificence.

In South-east Asia, in the 1950s and 1960s, the CIA enrolled the

help of anti-communist guerrillas, whom they trained and funded, in an attempt to destabilize the spread of Communism in that area. In so doing, they effectively created the drug barons who still run South-east Asia's heroin trade today. They even assisted them in transporting drugs from one area to another – anything to keep their allies strong in the fight against Communism. As Ramón Milian-Rodríguez, a major money launderer, explained when the Contra drug story broke:

"There seems to be a big to do about the CIA having connections with drugs. It might be news now but it's something that has been prevalent for quite some time. Outside of the United States, drug dealers are very powerful people. They have the ability to put governments in power or topple them, if they do it subtly. They have cash. The CIA deals primarily with items outside of the US. If they want to deal in foreign countries' policies and politics, they are going to run up against, or run with, the drug dealers. It can't be done any other way. If the end result is for the benefit of everyone, it usually works. You know, whether the players are the Contras today or... whatever, as far as I've been able to see, that's the way it's always been."

But the results of the CIA's operations in Central America in the 1980s have a particularly ironic tone, given their concurrence with the drug war. In 1989, George Bush's drug czar, William Bennet, announced that cocaine use had been consistently on the increase since 1985, citing this as *"terrible proof that our current drug epidemic has far from run its course"*. This was the period of media hysteria about the crack "epidemic", and a drug war seemed a sensible choice to deflect the American people's attention away from domestic concerns. In this, the Government was wholly successful. According to Noam Chomsky, in his book *Deterring Democracy*, in 1988 some 34 per cent of the electorate had selected the budget deficit as George Bush's prime concern upon entering office, with only 3 per cent choosing drugs. By September 1989, after a well-orchestrated media blitz, 43 per cent of the public thought drugs the USA's most pressing issue with the budget deficit coming in at just 6 per cent.

The mainstream press showed unnatural glee in the apparent dismissal of Webb's story. In an editorial entitled "The Mercury News Comes Clean," the *New York Times* said Ceppos's *"candour and self-criticism set a high standard for cases in which journalists make egregious errors... Mr Ceppos suggested that editors got too close to the story while it was being written and lost the ability to detect flaws that might have been obvious had they maintained a more sceptical distance."*

The ferocity with which Webb's articles were attacked was unrestrained – why? Perhaps because there was an element of truth in them. And perhaps because the press had known this for some time but had dutifully neglected to report it. The outcry over Webb's allegations was all the more remarkable for their not being original – the issue of the Contras' drug dealing and the possible CIA involvement with it had been bubbling away since the mid 1980s, but none of the mainstream press had seen fit to pick up on it.

In December 1985, the Associated Press put out the story that *“Nicaraguan rebels operating in northern Costa Rica have engaged in cocaine trafficking, in part to help finance their war against Nicaragua's leftist Government.”* The story was barely picked up by the rest of the media, but enough noise was made to elicit a Government inquiry, headed by Senator John Kerry. In the meantime, Government officers did their best to stifle the investigation. The US Government did not want their allies to be discovered to be drug runners, especially as Reagan at the time was keen to overturn the Boland amendment and secure from Congress new funds to give to the Contras. Jack Blum, senior counsel for the Kerry sub-committee, later described the brick walls they came up against when investigating the Contra drug link.

“When we tried to pursue the investigation, the Justice Department Criminal Division, then headed by Bill Weld, fought giving us access to essential records and to witnesses in Government custody. I remember a telephone conversation in which the United States Attorney for Northern California shouted at us and accused us of being subversive for wanting the information... I might add that the Justice Department did everything possible to block our investigation. It moved prisoners to make them inaccessible, instructed Justice employees not to talk to us, punished an assistant US Attorney for passing information to the Sub-committee.

“We [the Kerry investigators] were the target of a systematic campaign to discredit our witnesses and the quality of our work. Justice Department officials called the press that covered our hearings and told them our witnesses were lying. The White House staff described our work as a ‘politically motivated attack’. Once we were attacked, the press treated the conclusions with caution and downplayed the testimony of our witnesses.”

Despite such opposition and stonewalling on the part of the Justice Department, the senate sub-committee on terrorism, narcotics and international operations of the committee on foreign relations finally published its findings in a report in 1989. It, too, described the resistance the investigators came up against:



A CONTRA – BUT WHAT ELSE?

"The Justice Department," said the report, "was slow to respond to the allegations regarding links between drug traffickers and the Contras. In the spring of 1986, even after the State Department was acknowledging there were problems with drug trafficking in association with Contra activities on the Southern Front, the Justice Department was adamantly denying that there was any substance to the narcotics allegations. At the time, the FBI had significant information regarding the involvement of narcotics traffickers in Contra operations and Neutrality Act violations.

"The failure of US law enforcement and intelligence agencies to respond properly to allegations concerning criminal activity relating to the Contras was demonstrated by the handling of the Committee's own investigation by the Justice Department and the CIA in the spring of 1986.

"On October 5, 1988, the Sub-committee received sworn testimony from the Miami prosecutor handling the Neutrality and gun-running cases that he had been advised that some officials in the Justice Department had met in 1986 to discuss how 'to undermine' Senator Kerry's attempts to have hearings regarding the allegations."

Clearly, somebody had not wanted an investigation into this subject. When the report was published it was easy to see why. The allies of Ronald Reagan and his successor George Bush were knee-deep in the controversy. The report stated that: *"There was substantial evidence of drug smuggling through the war zones on the part of individual Contras, Contra suppliers, Contra pilots, mercenaries who worked with the Contras, and Contra supporters throughout the region."*

This was damning enough in itself – the golden boys of Reagan's war against Communism were nothing more than a bunch of drug runners. But worse was yet to come – it began to look as if certainly the CIA, and probably the President, were well aware of the fact. *"Senior US policy makers were not immune to the idea that drug money was a perfect solution to the Contra's funding problems,"* said the report. This was the big story – the US government could have got away with the Contras misbehaving, claiming ignorance. But it was looking as if they were far from ignorant – they knew exactly what was going on and they were prepared to turn a blind eye.

The Kerry report was careful not to dwell on the issue of the CIA, however. Its brief was to investigate the links between the Contras and drugs, not the US Government and drugs. Thus, it contains statements such as: *"General Paul Gorman testified that the use of narcotics profits by armed resistance groups was commonplace. Gorman stated further that: 'If you want to move arms or munitions in Latin America, the established networks are owned by the cartels. It has lent itself to the purposes of terrorists, of saboteurs, of spies, of insurgents and subversions.'"*

The Kerry report raised many questions that remained unanswered. It was cautious in its tone, acknowledging that some Contras were involved in drug trafficking but loath to say that it was a well-orchestrated and essential part of their organization. Nor were they prepared to say that the CIA were involved to any greater extent than, on occasion, being prepared to turn a blind eye to the activities of some of their more colourful friends.

But the report seems to contradict itself directly here – one of its conclusions was of: *"Payments to drug traffickers by the US State Department of funds authorized by the Congress for humanitarian assistance to the Contras, in some cases after the traffickers had been indicted by federal law enforcement agencies on drug charges, in others while traffickers were under active investigation by these same agencies."* The Kerry report should have blown the whole story open, had anyone cared to follow through its implications: namely that the CIA was involved – to some degree – with the trafficking of drugs.

As Jack Blum said: *"Our findings raised issues that needed*

extensive public discussion. The involvement of the covert operations side of the intelligence community with drug traffickers and criminals is a long-standing problem. The willingness of the foreign policy establishment to subordinate every other priority in international relations to the crusade against Communism was also a long-standing problem.

"We have lived through a period during which priorities were set on an ideological basis that verged on religious belief rather than on a genuine assessment of threat. During the same period, covert actions were taken with an eye to short-term results without regard to long-term consequences. We must never let that kind of ideological blindness and short-term vision infect intelligence assessments again."

With heavy irony, he added: *"During the 1980s, I could count in the hundreds the number of dead from drug overdoses and drug wars on the streets of American cities. I could not find a report of a single death in the United States linked to hostile action by a Sandinista."*



THE END OF A WAR — THE SANDINISTAS AND CONTRAS SHAKE ON IT

However, Blum was careful not to accuse the US Government or the CIA directly of drug trafficking: *"We found no evidence to suggest that people at the highest level of the United States Government adopted a policy of supporting the Contras by encouraging drug sales."* Almost immediately contradicting himself, he added:

"There was, however, plenty of evidence that policy makers closed their eyes to the criminal behaviour of some of America's allies and supporters in the Contra war. The policy makers ignored their drug dealing, their stealing, their human rights violations. The policy makers allowed them to compensate themselves for helping us by remaining silent in the face of their impropriety and by quietly undercutting the law enforcement and human rights agencies that might have caused them difficulty.... In sum, we 'paid' our friends in Central and South America by not interfering with their criminal business. The long-term price in my view was the solidification of the power of the drug cartels and their transformation into wealthy sophisticated international business organizations."

Given the US Government's declared hostility to drugs, such negligence can hardly be overlooked. Most would consider it complicity. Unfortunately, by the time the Kerry report came out in 1989, everyone had lost interest in the issue – the Sandinistas were all but defeated and the press were little interested in exposing yet another scandal involving the Contras, everyone being thoroughly bored by now with Oliver North. This remained the state of play until 1996, when Gary Webb wrote his *Dark Alliance* series. The story broke once again and this time, despite the best efforts of everyone to smother it, it received more air play than previously. Rightly so, as some of the allegations are mind boggling.

THE GENERAL

When the USA invaded Panama in 1989, they called the manoeuvre "Operation Just Cause". This was a reference to the country's dictator General Manuel Noriega's involvement in and indictment for drug trafficking and money laundering over the past two decades.

Panama has long been a country of immense strategic importance. In 1914, the first ship sailed through the Panama canal, the waterway that linked the Atlantic and Pacific oceans. For many years, control of the canal had been a stumbling block in relations between the USA and first Colombia, then Panama. But Panama had another strategic importance – as the main smuggling route for cocaine from South America to North America.

Manuel Antonio Noriega Morena was born in 1934 in a poor area of Panama City. Unable to afford much formal education, he accepted a scholarship to a military school in Lima, Peru. On his

return to Panama, he was commissioned as a sub-lieutenant in the Panamanian National Guard and continued to pursue his military career. In October 1968, he participated in a coup that overthrew the existing government and ushered in an era of military rule under General Omar Torrijos.

Noriega loyally supported Torrijos, became his right-hand man and was promoted to lieutenant colonel. As head of Panama's dreaded G-2 intelligence service, Noriega was responsible for dealing with the country's dissidents. This he did with a firm hand. He established a record of harassing, arresting, imprisoning or exiling critics of the Torrijos regime. By the end of the 1970s, Noriega had earned a reputation as the most feared man in the country.

Torrijos died in a mysterious plane crash in 1981. He had come to an agreement with President Jimmy Carter by which the US base in Panama would be dismantled and control of the canal revert to Panama by the end of the century. Ronald Reagan, who succeeded Carter in 1981, had other ideas – the Panamanian Fort Gulik base was known as the military school of the Americas, and had been a vital training centre for American officers for decades. Even more important, on the Pacific side of the canal was a US listening post covering the whole of South America. Reagan was not at all happy about relinquishing so strategically important an area. Happily for him, a power struggle between civilian and military authorities resulted ultimately in Noriega becoming the dominant force in Panama. Noriega promised to be less obstinate than his predecessor Torrijos and, in return, the USA were prepared to ignore some of his less savoury activities.

Noriega was an old friend of the USA and especially of the CIA. He was recruited by the US Defence Intelligence Agency in 1959 and went on the CIA pay roll in 1967, the year before he became head of the G-2. But Noriega was not without skeletons in his cupboard. It was well known from the early 1970s onward that he was involved in the drugs trade in Panama, perhaps even running it. Despite increasing evidence of this, the US drug agencies left him well alone, the Government feeling that he was strategically too important to undermine just because of a little drug trafficking.

The USA had further cause to be grateful for their friend in Panama when the Sandinistas took power in Nicaragua. Noriega was put back on the payroll of the CIA to the tune of \$185,000 a year (Carter had removed him from it, though had not gone so far as to demand an investigation into his drug dealing). The money was deposited for him in the Bank of Credit and Commerce International.

Noriega was crucial to the Contra movement. He provided pilots to fly arms to the rebels in Costa Rica and donated money to the cause. He

helped to train Contra units and let them use Panama as a base. At one point he allegedly even offered to have the entire Sandinista leadership assassinated.

Occasionally, the odd article in the press would surface questioning Noriega's suitability as a US ally. In 1984, Noriega, in what can only be described as a public relations stunt, ordered a raid on a Medellín cartel-owned cocaine operation, stopped an airborne cartel shipment and set up a co-operative between the US Drug Enforcement Agency (DEA) and his anti-drug unit, eventually leading to the arrest of 115 traffickers and seizure of over ten thousand pounds of cocaine. But suspicious commentators have suggested that this raid was more to do with a power struggle between different cartels, with Noriega doing it as a favour to the Cali group.

Noriega nearly blew it in 1985. In September of that year, the body of Hugo Spadafora was found, hideously mutilated, under a bridge on the border between Panama and Costa Rica. Spadafora, a doctor, was a Nicaraguan exile who had started out by fighting against Somoza but had then turned against the Sandinistas and joined the Contras. He was hugely popular in Panama and his status as a folk hero was demonstrated by the thousands who took to the streets on his death.

It soon became clear that Noriega was behind Spadafora's death; Spadafora had been collecting evidence of the General's drug dealing and was on the verge of exposing him. The CIA and the US Government might have known about Noriega but the rest of the world didn't and as long as that remained the case he was relatively safe. Strangely, however, even after this atrocity, the US Government did little to interfere with Noriega's illicit activities.

One would think that if ever there was "just cause" to invade Panama and remove its leader, it would have been then. But the USA kept mum. The reason for this was the increasingly vital role Noriega was playing in the war against the Sandinista Government. The murder of Spadafora happened at exactly the same time that the US Government were trying to find ways around the Boland amendment – the 1984 US Congress ban on CIA support to the Contras. Just one month after Spadafora's death, the US gave \$200 million in aid to Panama.

The reasons for the USA's lack of interest in bringing Noriega to book ran deeper than his usefulness as an ally, though. Spadafora's death had been as much a godsend for them as it had been for Noriega – the last thing they wanted at this juncture was for one of their most important allies to be exposed as a drug dealer. Although no one has suggested that CIA forces were involved in the doctor's death – one can assume that Noriega was acting unilaterally in that

case – there were undoubtedly many high ranking officials in Washington who breathed a sigh of relief when they heard the news.

It wasn't just that Noriega was trafficking in drugs. He was using the same apparatus to run the drugs as the Americans were to run arms to the Contras. In fact, his drug-running organization was integral to Oliver North's arms-running operations. The Contras, fighting within Nicaragua, desperately needed supplies to be flown in. Noriega's planes, already running drugs to the USA, were happy to oblige. Why waste an empty plane, after all?

Noriega's honeymoon with the USA came to an end in 1986, when Oliver North's illegal gun-running operations came to dramatic light. As the whole operation collapsed, Noriega became expendable and, in 1988, the USA tried him, *in absentia*, for drug-trafficking offences. His indictment was what occasioned "Operation Just Cause" in 1989.

The story of Noriega's rise to power, his maintenance of it and his eventual fall is hardly edifying. US officials were well aware of his drug trafficking – as early as 1971 the Bureau of Narcotics and Dangerous Drugs (BNDD) had heard rumours of Noriega's involvement with the drug trade in Panama. One former senate intelligence committee member said later: *"We had a very complete picture. We knew about the drug problem. And the Panamanians knew we knew it... The Panamanians got the word that the United States was open for drug business."*

In December 1989, twenty-four thousand armed US troops invaded Panama, captured Noriega and brought him to Miami for trial. He was convicted in 1992 on eight counts of racketeering, drug trafficking and money laundering and is currently serving a 40-year sentence in a US federal penitentiary. The CIA never turned over their files on Noriega to the prosecution so we can never know the precise details of this murky affair. What seems clear is that Noriega was running a vast drug operation, which the US Government only saw fit to object to when it became politically expedient to do so. Worse still, it is likely that Noriega's drug-running organization and the United States' covert arms-running operations to the Contras supported one another, in as much as they used the same infrastructure.

DID THEY KNOW?

Some years after the event, with different people in power both in the USA and in Central America, there has been some acknowledgement that the Contras were involved in drug trafficking. But the authorities are never going to countenance the idea that this was done with the approval of the USA. On the contrary, a commission set up to investigate Webb's allegations found that there was no evidence whatsoever

to substantiate his claims that the CIA knew exactly what was going on. The reason this question is so sensitive is that if the CIA knew, who else did? *"It is absolutely impossible for me to conclude that anybody working for the CIA could be involved in that level of criminal activity and the Government, the CIA, not know it,"* said a member of the commission.

However, Democratic Representative, Maxine Waters, of California, responded: *"Give me a break"*. In her introduction to Gary Webb's book *Dark Alliance*, she writes: *"The time I spent investigating the allegations of the Dark Alliance series led me to the undeniable conclusion that the CIA, DEA, DIA, and FBI knew about drug trafficking in South Central Los Angeles. They were either part of the trafficking or turned a blind eye to it, in an effort to fund the Contra war. I am convinced that drug money played an important role in the Contra war..."*

Waters was not alone. As the articles appeared, an angry citizenry wanted answers. At a heated meeting in Los Angeles, the director of the CIA, John Deutch, was forced to defend accusations that the CIA was, effectively, responsible for the abundance of crack in Los Angeles. *"I will get to the bottom of it and I will let you know the results of what I found,"* Deutch announced, surrounded by armed guards and hundreds of Los Angeles police. He continued, *"It is an appalling charge that goes to the heart of this country. It cannot go unanswered, that the CIA, an agency of US Government founded to protect Americans, helped introduce drugs and poison into our children and helped kill their future. No one who heads a Government agency can let such an allegation stand."*

Others joined in with promises of a proper investigation. Attorney General Janet Reno said: *"We are going to make sure that no stone is left unturned, working with the CIA and within the Department of Justice, to see that all the facts as to what exactly the situation is are brought to light."*

The US drug czar also joined in with demands for an inquiry, at the same time pre-empting its outcome: *"I don't think there is anything to it,"* said Barry McCaffrey, Drug Policy Director. *"It's been looked at in the past, but clearly we have to satisfy the legitimate concerns of particularly the African-American community."*

Louis Farrakhan, leader of the Nation of Islam, threatened to sue the US Government on behalf of crack users, their families and the victims of crime by crack-takers. *"I would like to see the US Government atone for the counter-intelligence program,"* said Farrakhan. *"If the CIA has been involved in bringing drugs and guns into the black community I think there's a need for atonement there."*

SO WHO DID KNOW?

The Contra/drugs scandal has never truly been resolved. The problem is that none of the major witnesses can be considered reliable sources. On one side you have drug dealers, not known for their candour, many of whom have been trying to do deals with the authorities in order to reduce their sentences. On the other side you have the CIA, for whom secrecy is a way of life. Subterfuge is so deeply ingrained in the culture of the intelligence service that telling the truth is usually the last thing that comes into their heads. Running through the whole story is a complicated political thread in which many very important people, past and present, are implicated. The officers may have changed but the offices have not. It is as much in the current president's interest as any of the former's to keep the office free from the taint of scandal. The same applies to the current head of the CIA when tasked with investigating the actions of his predecessors. The USA has yet to recover from Watergate, when, you may remember, President Nixon promised that *"there will be no whitewash at the Whitehouse."*

The full story behind the Contra/cocaine/CIA connection may never be known, but probably lies somewhere between the US Government's insistence that there was no connection at all and the more extravagant claims of the conspiracy theorists who maintain that the CIA instigated the crack epidemic in order to destabilize and debilitate the black community. Whatever the truth, the Contra story is only the most recent episode in a series of cases where the United States' political (in other words, anti-Communist) aims have resulted in yet more drugs flowing into their country. If the developed nations, particularly the USA, want the South American countries to get behind the "war on drugs" they must own up to their own part in the creation of the problem.



COCAINE CULTURE

ELEMENTARY

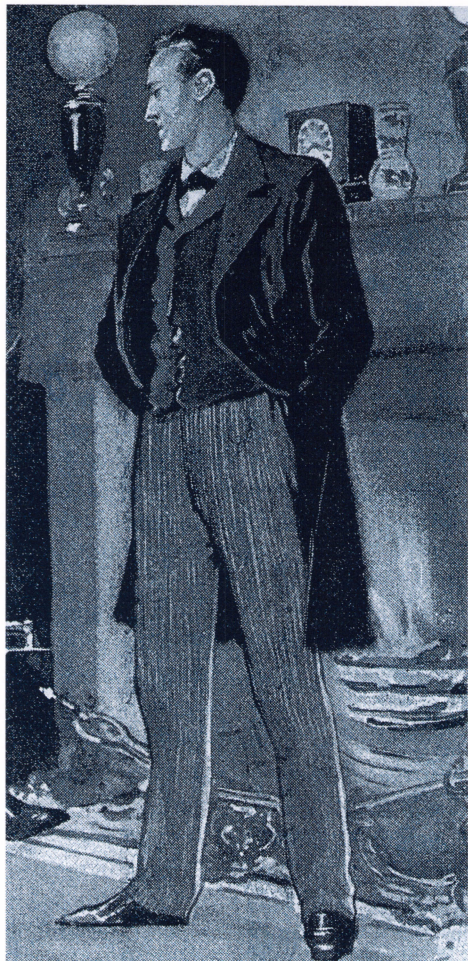
The first explicit literary depiction of cocaine appears in Arthur Conan Doyle's Sherlock Holmes stories. In *A Scandal in Bohemia*, published in 1886, we are introduced to Sherlock Holmes for the first time. He is described by Dr Watson as “*alternating from week to week between cocaine and ambition*”. Two years later, in *The Sign of Four*, Holmes justifies his use of cocaine:

“My Mind rebels at stagnation,” he says. “Give me problems, give me work, give me the most abstruse cryptogram, or the most intricate analysis, and I am in my proper atmosphere. I can dispense with artificial stimulants. But I abhor the routine of existence.” His drug taking is described in some detail. “*Sherlock Holmes,*” Watson records, “*took his bottle from the corner of the mantelpiece, and his hypodermic syringe from its neat Morocco case. With his long, white, nervous fingers he adjusted the delicate needle...*”

Conan Doyle knew what he was talking about – before he took up writing he was a struggling ophthalmologist and so would certainly have heard about Koller and Freud's work. What is interesting is that Holmes is seen to be using cocaine recreationally (if you can call it that) just two years after Koller's announcement. Admittedly, Albert Nieman had discovered cocaine back in 1860, but there is no evidence that cocaine was being used purely for pleasure before 1884. Holmes was clearly an avant-guardist of drug abuse.

Also of interest is Dr Watson's growing concern over Holmes' use of cocaine. Throughout the books, Watson becomes more and more impatient with his friend's need for the needle, in the 1890 tale *The Final Problem*, being reduced to writing a letter to the *Lancet*, the British medical publication:

“Sirs – I have a patient who suffers from cocaine craving. I find it impossible to keep cocaine out of his reach. This habit has brought



SHERLOCK HOLMES IN TYPICALLY PENSIVE MOOD

him into a very low state of health. Perhaps some of your readers might be able to give me some suggestions to treatment. I have tried the usual remedies in vain. He suffers from great nervousness, sleeplessness, and has become very thin.

*I am yrs, truly,
October 28, 1890*

Irene (Watson was not a transvestite – he was merely using a pseudonym in order to protect Holmes' identity.)

A SUITABLE CASE FOR TREATMENT

Holmes' cocaine-taking is interesting in two ways. First, Conan Doyle is not troubled by portraying his hero as a drug taker. There is no suggestion of Holmes' habit being unacceptable socially, at least not in the beginning. Second, over the course of the books Watson *does* begin to find Holmes' habit intolerable, hence his letter to the *Lancet*. As Conan Doyle was a trained doctor and was writing his Holmes stories in "real time" over several years, one can assume that this growing concern was a reflection of how conventional medical wisdom was steadily changing during this period.

The Final Problem ends with Holmes tumbling into the Reichenbach Falls with his arch rival and nemesis, the fiendish Dr Moriarty. Somehow, four years later, he turns up again, in a manner worthy of the most tawdry American soap opera. He explains to Watson that he has been travelling through Europe. He is also cured of his cocaine addiction and appears happy, fit and well fed.

Author Nicholas Meyer came up with an ingenious idea for what really happened to Holmes during this four-year absence. In Meyer's book *The Seven Percent Solution*, Holmes is enticed by Watson, utterly exasperated by his friend's drug abuse, to Vienna to meet Sigmund Freud, who cures him of his addiction. It's a nice idea, but given Freud's record on cocaine addiction (getting his best friend, Fleischl-Marxow, hooked for instance) a little improbable. The book was made into a film in 1976.

Some argue that there is another reference to cocaine-taking in the literature of this period, albeit a camouflaged one. They suggest that the potion which transforms Dr Jekyll into Mr Hyde is cocaine. The main evidence for this is the year the book was published (1886) and the fact that the author, Robert Louis Stevenson, wrote two drafts of it (amounting to sixty thousand words) in six days. His wife commented on his extraordinary energy at the time.

SPOOFS AND WARNINGS

Sherlock Holmes also supplied Hollywood with its first depictions of cocaine taking. As early as 1909, in one of Thomas Edison's films, *Squeedunk*, Sherlock Holmes appears taking cocaine. Various other silent films followed, and in the stage play *Sherlock*, the actor William Gillette actually injected himself on stage (one assumes with saline). Most of the early silent films are lost, but one that survives is the 1916 film *The Mystery of the Leaping Fish*, a spoof film starring Douglas Fairbanks snr. It also starred Bessie Love as "Inane, the little fish blower of Short Beach" whatever that means, and Alma Reubens appears as an opium smuggler's mistress. This last piece of casting was ironic, as Reubens was a heroin addict, whose career and life were later ruined by her addiction.

The Mystery of the Leaping Fish, opens with Inspector Coke Ennyday, played by Fairbanks, sitting at his desk scooping handfuls of white powder out of a can with the word "cocaine" written on it in big letters. Round his waist is a belt packed with syringes. Occasionally he draws a syringe from the belt and jabs the needle into his arm. He then spins an arrow on a board in order to decide what to do next. The four options are "dope", "sleep", "eat" and "drink". The arrow points to "drink" so he knocks back some laudanum (a solution of morphine in wine).

The whole scene, as is the film, is played for laughs. There is no moralizing about Coke's drug-taking. In fact, on more than one occasion, his habit saves the day. First, when Coke sets off on his mission, to track down and capture a suspected opium dealer, given to him by the police ("*even the secret service was often forced to appeal to Coke Ennyday*" went the none-too-subtle caption). He falls into the sea and when rescued is revived by an injection of cocaine in his nose. He rents a giant rubber fish from Inane and in order to speed his way, punctures it with one of the syringes from his trusty belt (could this be the original of Batman's utility belt?) and shoots off to an island. There, he finds a pile of cocaine, which he promptly eats. A caption says "full of hop", which is exactly what he does for the rest of the film.

Coke gives chase to the Chinese laundry workers (from the Sun Hop laundry) who are moving out what's left of the opium and jabs them with cocaine injections to disable them. When they rush at him *en masse* he blows a huge cloud of cocaine in their faces, disabling the gang once and for all and saving Bessie from their clutches. The film ends with the caption "*No, Douglas, you had better give up scenario writing and stick to acting.*"

The Mystery of the Leaping Fish shows that in 1916, even after the Harrison Act was passed making it effectively illegal to possess cocaine, the drug was not really seen as much of a threat. It wasn't just that Hollywood was by then pretty much running on the stuff – the laughs in *The Mystery of the Leaping Fish* are not insider jokes, they are aimed specifically at the cinema-going public. The last caption makes it clear, in case anyone had any doubts, that the whole thing is a send-up. The film assumes that the audience will laugh at the film. There is no inkling that they will find the content offensive. The moral guardians of Hollywood had yet to fix their death grip on the cinema.

The Mystery of the Leaping Fish is a take on the huge number of Sherlock Holmes films that were being made in the first two decades of the twentieth century. Most are lost, but the titles remain and number in the region of hundreds. From the way that cocaine use is parodied



BROTHER AND SISTER ON THE ROAD TO RUIN IN THE PACE THAT KILLS

in *The Mystery of the Leaping Fish*, it is fair to assume that many of them depicted Holmes using cocaine.

Jolly japes and mystery solving involving cocaine were soon to become verboten. A combination of Government censorship and Hollywood wanting to be seen at least to be cleaning up its own back yard, meant that from the late 1920s onward, films that featured cocaine tended toward the moralistic, “this drug will destroy your life” genre. The Sherlock Holmes films of this period no longer show him taking drugs – the idea that the smartest man in the world (or second smartest after his brother Mycroft) should be a drug addict was anathema to the new moralists of the 1930s.

Typical of the drug films made in the era of morality was *The Pace that Kills*. The title alone gets the message across. The film contained all the stock

motifs of the slide into drug addiction – criminality, prostitution, family break-up and death. The film kicks off with this ominous warning:

“Since the dawn of creation, race after race has emerged from the dim shadows, flourished, then faded away into obscurity. History teaches that every nation, each race perished miserably when they ignored their problems and failed in their struggles against debauchery and sin. Today we – the highest civilization the world has ever known – are faced with the most tragic problem that has ever confronted mankind – a menace so all embracing that if we fail to conquer it our race, our people, our civilization must perish from the face of the earth! What is this octopus – this hideous monster that clutches at every heart? Creeping slowly, silently, inexorably into every nook and corner of the world? It is the demon dope! In its slimy trail follow misery, degradation, death; and from its clutching

tentacles no community, no class, no people are immune, regardless of birth, training or environment."

The film tells the story of a country boy, Eddie, leaving for the city – his mother presciently remarking: *"I wonder what will happen to my boy – so many good clean boys leave home and never return."* He gets a job in a department store where he soon discovers girls and "headache powder," given to him by a solicitous colleague with the words *"Here's something'll fix you up, country boy"*. Later, he visits a night-club with his new, no-good girlfriend, where he spies his sister in the arms of the local crime lord. Eddie immediately becomes addicted to the "headache powder" and is supplied by the unscrupulous Snowy. The film introduces him with the cautionary words: *"You will find him next door, in your company, in your offices. One of the most dangerous features of the dope evil is that each addict has the burning desire to induce all of his – or her – associates to try it just once. And experience teaches us that after two or three trials the initiate becomes an addict."*

Eddie and his girl later go to a party, where Snowy turns up just as everyone's beginning to get bored. All of a sudden, the party's going with a swing, but, as the film reminds us, they are really *"a bunch of 'snowbirds' with their 'happy dust' or 'joy powder' – but it's slimy. Peddlers call it 'kid catcher' because it is the first drug that starts boys and girls on the downward path: on the path that kills."*

Said path takes in illicit sex as the lights go out at the party and untold numbers of girls lose their virtue. In the next scene, Eddie and his girlfriend are fired from their jobs for stealing – *"Soon all sense of honour and decency lost, the addicts will do anything to get the money for their dope,"* says the caption. Before long, Eddie is kicked out of his apartment – *"Just a bit of human wreckage in the city streets."*

Eddie and his girlfriend obviously then turn to heroin and opium on their downward spiral to total degradation and she has to become a prostitute to support both their habits. The film ends with Eddie's girlfriend drowning herself upon the discovery that she is pregnant – *"God a baby born to a dope fiend and a ..."* and Eddie following her shortly afterward. Just to round things off, the film ends with this message: *"How many mothers, how many sweethearts are waiting – always waiting for the boys who will never come home? What can you do about it? Write to your senator and lend your support to the Porter Bill for the segregation and hospitalization of narcotic addicts – the greatest constructive measure ever offered for the abatement of the narcotic evil."*

The Pace that Kills is indicative of Hollywood in the late 1920s – moralistic and hypocritical. Audiences quickly got bored with being preached

to in so patronizing a way and it was one of the last films in this genre, apart from a 1939 oddity, *Cocaine Fiends*. This film is essentially a remake of *The Pace that Kills*, subtitled "a wild sleigh ride with the snowbirds". The plot has minor variations – it is the sister who first goes to the city, followed by the brother who goes to find her. But both end up on opium via heroin, though in the final act the brother does not kill himself, but goes home, presumably to find redemption. For the sister, however "It's too late... Girls can't go back". The date of *Cocaine Fiends* is anomalous – this sort of film was way past its sell-by date. Some suspect that it is a spoof of the genre, poking fun at the censors who were busy ruling Hollywood at the time. If so, this suggests that the taking of cocaine could still be viewed light-heartedly even in 1939.

With the studios prohibited from making films that treated cocaine lightly and unwilling to make films with portentous warnings about the drug's dangers, they decided to steer clear of cocaine altogether. With the exception of *Cocaine Fiends* in 1939 and a handful of European films, coke disappeared from celluloid. This was a fair reflection of the real world, where cocaine use was also in decline. Ironically, though, probably the only place where cocaine was still being consumed in substantial quantities was Hollywood itself. Then, in the 1960s, coke suddenly came back, into life and into film.

SUPERFLY GUYS

One film in the early 1960s tried, bravely, to feature cocaine. It was called *Paris Blues* and starred Paul Newman as a jazz musician trying to cure his friend, a flamenco guitarist, of his cocaine addiction. The film was a resounding flop and heavily criticized for its depiction of cocaine. According to one reviewer, there were "attempts to excuse coke addiction. The addict loves birds and is a wonderful player... The dope addiction may be an indigenous part of the Paris milieu... but it is irrelevant to the story and it is reprehensibly included." One dreads to think what the reviewer would have made of films such as *Scarface* (1983) and *GoodFellas* (1990), but the movement that was going to culminate in films like that was just around the corner. *Paris Blues* was just too early and, in truth, not very good.

By the end of the 1960s, a new generation of film writers, directors and producers had arrived, sweeping all before them and changing the face of Hollywood forever. They were christened "the New Cinema" by *Time* magazine in 1968. The New Cinema's first foray into drug taking was in 1969, with *Easy Rider*, the cult road movie starring Peter Fonda and Dennis Hopper. *Easy Rider* was the brainchild of its two stars. According to Peter Biskind's book *Easy Riders and Raging Bulls*, the plot was hatched between the two stars

one drunken night. They wanted to do a "road" movie but needed some reason why they would be travelling across America on a motorbike. Obvious solution – they were carrying drugs.

Next came the issue of which drug they were carrying. Biskind reports Hopper's decision: *"Peter, we couldn't carry enough grass on bikes that's gonna make anybody able to retire. That's a stupid fucking score. It's got to be something else."* Fonda replies *"What about heroin?"* to which Hopper, hardly a goody two-shoes, answers, *"It's got a bad connotation. A terrible idea. Why not cocaine."* So, cocaine was what the two end up carting across the USA, Hopper later saying: *"I picked cocaine because it was the king of drugs."* In the film, they sell the cocaine to Phil Spector, whose Christmas card that year showed a picture of him snorting a line and bearing the legend: *"A little snow at Christmas never hurt anyone."*

Easy Rider's choice of cocaine was a form of compromise – the film was groundbreaking, but was not prepared to go so far as to have its stars peddling heroin. Cocaine, however, was all right. And cocaine has remained a fixture in the cinema ever since, with a positive glut of films coming out in the early 1970s. Of these, one of the most interesting is *Superfly*, made in 1972. *Superfly* tells the story of a black cocaine dealer but is unusual in that he is not the baddie. He is portrayed sympathetically and ends up outwitting the police and going off into the sunset victorious. *Superfly* was similar in style to the "blaxploitation" films of the 1970s and consequently caused controversy, especially among black audiences. Blacks Against Narcotics and Genocide (BANG) picketed it, claiming that it portrayed drug dealing as a glamorous lifestyle choice for young black people.

The film's producer, Sig Shore, replied: *"Our story is not about dope, but about a dope hustler; his life, not his product is being examined."* His star, Ron O'Neal, who played Priest the pusher in the film, backed him up saying:

"I wouldn't have done it if I felt it condones dope traffic. The trouble with Superfly is that it's too real for a lot of people to accept. There's no reason why Priest should be killed off at the end. Why shouldn't a pusher win? It happens in real life... Never in the film do we say that coke pushing is good. All throughout the movie Priest is trying to get out of the racket... Movies have always emasculated black men. We don't do that in Superfly."

The film also caused controversy because of another statement by O'Neal. Of the film's depiction of cocaine, he said:

"The heroin pusher is the scourge of the black community, but we're talking about cocaine, which is basically a white drug. Very few black people could afford cocaine at \$800 an ounce, even if they had a

taste for it. It's mainly an expensive, downtown vice, it's for the Park Avenue crowd. And since cocaine is not physically addictive, people do not steal and rob to get it; there are no coke junkies, nobody ever overdosed on cocaine."

Many took issue with this last statement, which sparked a mini-debate in the press about whether cocaine was harmful or not. But what is most revealing about O'Neal's comments is that, like Hopper and Fonda, he clearly saw heroin as beyond the pale while cocaine was probably OK. In retrospect *Superfly* wasn't taking as big a risk as some people thought. Its producers knew that the cinema-going public could handle the cocaine references and they were vindicated when the film became a smash hit.

THE SOUND OF SNOW

For many, the music business is synonymous with cocaine-taking. For all that, cocaine was a relatively late arrival on the music scene. By the time rock arrived, popular music had already been through a protracted love affair with heroin, barbiturates, acid, speed, marijuana and a lot of alcohol. Cocaine didn't really become mainstream in the business until the 1970s, although there were some who had indulged in the drug before. It rapidly became so dominant that Joni Mitchell, years later, replied to a question about what was most likely to undo an album by saying: "*Cocaine. There are entire albums that would have been very different if that drug didn't exist.*" Steve Tyler, of Aerosmith, confirmed her opinion: "*We would make sure that we had enough cocaine and do a lock in for three or four days...*" It wasn't just the musicians who were on coke – the whole business ran on it, to the point that some people were even being paid in cocaine.

Songs increasingly began to mention cocaine, explicitly and not in order to warn the kids off it. "Let it Bleed" by the Rolling Stones and two songs by the Grateful Dead did so in 1970, as did the Stones again in 1971 with "Sister Morphine". The same year, *Rolling Stone* magazine ran an article on how coke was the "new thing". The *Journal of the American Medical Association* also featured the subject, however, which tended to diminish the likelihood that cocaine might be seen as "cool", at least in the near future. Besides, everyone was now at it – not just pop stars but lawyers, doctors and dentists. Cocaine became square. This is the position cocaine has held in the arts and in society ever since: despite increased scientific evidence that it is a dangerous drug, cocaine is still considered harmless and fun. Somehow, it has managed to hive off all its innate nastiness into crack – its "evil twin". The day when a sensible, non-moralistic film is made about cocaine, where the drug is not fetishized as a symbol of wealth, or dismissed as unimportant, is a long way off.



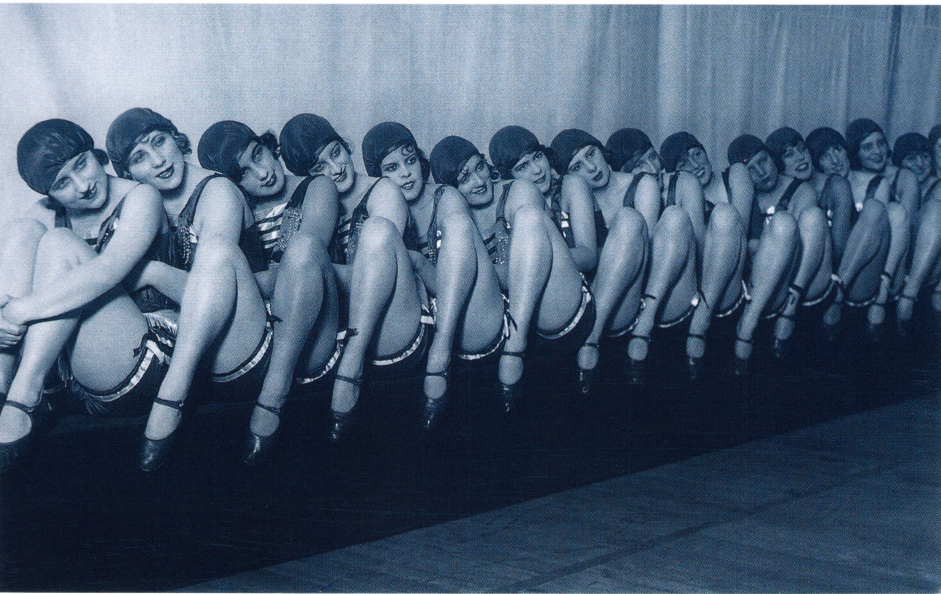
SCANDAL

THE DEMI-MONDE

Cocaine has not enjoyed the long history of scandal seen with other drugs, such as heroin – it is just too “respectable”. If a celebrity is found to be in possession of cocaine or known to have taken it, the general reaction is “so what – that’s what rich people do”. Even George Bush junior, whose father, prior to becoming President of the USA, was Ronald Reagan’s drug czar, was singularly unharmed by allegations of youthful cocaine-taking during the run up to the year 2000 presidential nominations.

There was, however, a brief stage in cocaine’s history where it provided much scandal and filled the newspapers. It was at the beginning of the twentieth century and it was in the UK. While

DANCING GIRLS – OR SNOW BIRDS?



cocaine at this time was fast disappearing from the American drug scene (its traditional consumers – working class blacks – having been edged out of the market by rising prices) in the UK it remained the drug of the *demi-monde*. This came to light in dramatic fashion in 1918 with the death, at the age of 22, of Billie Carleton, a rising star of stage musicals.

THE SHOW GIRL AND THE DRAG QUEEN

Billie Carleton was, according to one reporter “*the very essence of English girlhood*”. If so, things were looking pretty bleak for English womanhood over the next few years. The illegitimate daughter of a chorus girl, Carleton left home at 15 to go on the stage. She soon attracted the attention of the wealthy and extravagant playboy John Marsh, who introduced her to the high life. Billie was clearly a fast learner and took to champagne and caviar like a duck to water. Before long, she had introduced another element into her increasingly fast life – cocaine.

Carleton was most likely introduced to cocaine by her costumier, Reginald De Veulle. De Veulle was a man with a distinctly dubious past. After a failed career as a chorus boy, he turned his talents to prostitution, or something very like it. At any rate, he was more or less kept for some years by a wealthy businessman. In return for this man’s generosity, De Veulle set him up with another of his friends and then marched round to the flat attempting to catch the two *in flagrante delicto* and blackmail him. The scheme was only semi-successful, with De Veulle pocketing just enough to buy himself a passage to New York, where he acquired a taste for cocaine. On his return to London, he got a job as a theatrical costumier, making women’s dresses. One of the advantages of this job was that it facilitated his penchant for dressing up in drag at parties.

Carleton met De Veulle professionally and they became firm friends, sharing a life of increasing debauchery. As Carleton’s fame grew so did the rumours about her life of self-indulgence. For once, the rumours were true. She and De Veulle were part of a set, based in London’s West End and composed of various “theatrical” types and hangers on, who lived by night, sustained by cocaine – and opium, to bring them down.

Though Carleton’s professional star was in the ascendant, with the *Tatler* magazine saying: “*She has cleverness, temperament and charm,*” her personal life was far from charming. Her drug use was escalating way out of control and she was permanently broke. Her doctor and mentor, Frederick Stuart, wrote to her in 1918: “*I’ll do anything to save you from the bottomless pit of darkness, despair and depression. Some of your acts are disappointing and a great*

shock to me. Get over these lapses. Get over the influence and existence of this damned stuff. Leave it to do its useful work as a local anaesthetic and kill pain, not people." Needless to say, Carleton took no notice of the good doctor's words and carried on as usual.

By the end of the First World War, Carleton, although still penniless, was living in some splendour in Central London. She had lots of job offers and her prospects looked bright, much more so now the war was over and she could travel abroad. The beginning of this new dawn for Carleton was to be marked by a huge Armistice Ball, held at the Albert Hall and attended by all of high society. Carleton went, dressed in a sumptuous costume designed, of course, by De Veulle. He accompanied her, dressed as a Harlequin.

After the ball, Carleton left with friends and continued the party back at her flat. The next day her maid found her dead, a half-full box of cocaine by her side. The inquest into Carleton's death provoked huge interest in the general public, a fact the press were quick to latch on to. The British press's obsession with celebrity drug deaths can be traced to the Billie Carleton affair – it provided a winning formula that no one has managed to better since. At the inquest, a verdict of death by cocaine overdose was recorded with De Veulle, as the supplier of the drug, facing an attendant charge of manslaughter.

De Veulle was set up as the villain of the piece, with the prosecution asking suggestively, *"How long have you been engaged in the gentle art of designing ladies' dresses?"* (cue snigger from public) and *"You were what we may call, without being offensive, in the chorus.... How were you dressed – as a girl, or boy?"* Not that counsel needed to push the point home but just in case anyone hadn't yet got it, he added *"I put it to you that while your youth lasted you often made curious friendships with older men,"* asking if these friendships were *"remunerative"*.

De Veulle did not help his own cause either. When asked why it was that Carleton had liked him so much, this low-rent Oscar Wilde replied *"my beauty, I suppose"*. De Veulle, however, fared better at his trial, where he was acquitted of manslaughter, copping a lesser plea for dealing cocaine, to which he pleaded guilty. Though he only got an eight-month sentence, De Veulle's reputation, such as it was, was destroyed. He fitted perfectly the prevailing view of cocaine at the time – as an effeminate drug. Although it was supposed to turn American Blacks into sex-crazed monsters with the strength of ten men, in the UK it was deemed to have quite the opposite effect. *"Men,"* said a specialist quoted in the Daily Mail at the time, *"do not as a rule take to drugs unless there is a hereditary influence, but women are more temperamentally attracted."* The term *"hereditary influence"* was a roundabout way of saying mummy's boy, or gay.

THE CLIP GIRL AND THE CHINAMAN

Freda Kempton worked as a "dance instructress" at Brett's dance hall, a place of fairly low reputation. She was described as, "*always full of energy, even at four or five in the morning she would still be dancing and showing very few signs of fatigue.*" There are no prizes for guessing from where Kempton got this miraculous energy. Like Carleton, she lived by night, going from work to parties and night-clubs and only returning home to sleep as the rest of the world began its day.

Kempton hooked up with a notorious Chinese man, Brilliant Chang. Chang was from a wealthy family and always looked immaculate. He was said to have a charm that was irresistible to women, and for once this stereotype of the dangerously attractive foreigner seems to have had an element of truth. If nothing else, he was certainly sexually voracious, though there is no evidence that he ever needed to employ anything other than his charm to get what he wanted.

Kempton paid several visits to Chang at his restaurant in central London. It was after one such visit, in 1922, that she returned home in the early hours, started to have convulsions and died. At the inquest it was recorded that she had died of a cocaine overdose. Chang was found not guilty of supplying her, however, due to lack of evidence. As has invariably been the case, this did little to deter the press from perpetuating the stereotypical image of the "oriental dope fiend" which prevailed throughout the first half of the twentieth century. The myth was that the girls – it was always girls – that Chang corrupted were English flowers seduced into a life of depravity by the heady cocktail of oriental charm and cocaine. The assumption was that he was in league with legions of his fellow inscrutable countrymen, despite the fact that there were actually very few Chinese living in London at the time, and fewer still wealthy, urbane ones.

When Chang was finally arrested a year later and tried on a charge of possessing a very small amount of cocaine, the policeman in charge of the arrest testified: "*This man would sell drugs to a white girl only if she gave herself to him as well as paying him. He has carried on the traffic with real oriental craft and cunning.*" Chang was characterized as a Fu-Manchu figure, not only operating a huge drug ring but also a white slave business. Freda Kempton was said to be just one of his many victims: "*She was young, she was beautiful, and she danced. She called herself a dance instructress, but it is evident that she was a foolish little moth whose wings were scorched by the flame of vicious luxury,*" wrote the *Daily Express* after her death.

Again, the press and public lapped it up – the story of innocent (hardly), foolish girls being corrupted by invidious Chinese men was just too good. Sadly for the press and public, though, the stories dried up, along with the cocaine supply. The British press had to wait over 70 years for their next fix.

FLYING THE FLAG

In 1998, a scandal rocked the UK that went to the very heart of the British establishment. Not a member of Parliament or the royal family, but a children's television presenter. The problem was that the show in question was "Blue Peter", which occupies a place in the British psyche somewhere between God and the Queen Mother. Since 1958, generation after generation of children have been brought up with the comfortable stability and moral certainties of "Blue Peter". Then, in October 1998, Richard Bacon became the first presenter ever to be sacked from the programme. His crime – taking cocaine. Bacon, 22, had apparently snorted cocaine during a twelve-hour drugs and alcohol session. The head of children's programmes at the BBC said of his dismissal:

"It is sad that such a talented presenter as Richard Bacon has not only let himself and his colleagues down but, most important of all, he has let down the millions of children who watch 'Blue Peter'. For 40 years, 'Blue Peter' has been a force for good providing positive role models for children to follow and helping them to become responsible and caring adults. It is vital that nothing tarnishes that reputation."

Bacon accepted the decision with grace, saying: *"I fully accept and agree with the decision that has been taken. I regret what I did but it was in my personal time and I therefore hope that it does not reflect on the show."* It didn't, except to show 'Blue Peter' was woefully out of date in a country where, according to a variety of press reports, children as young as 13 were taking cocaine.

In October 1999, it was announced that more than 99 per cent of bank notes showed traces of cocaine. Around 5 per cent of the notes analyzed by Mass Spec Analytical showed "heightened levels" of the drug, indicating that they had actually been used to snort cocaine. The rest of the notes, it was assumed, had been contaminated through coming into contact with the drug-imbued ones in cash-dispensing machines and wallets. Sadly, for eager cokeheads, the amounts involved were so minuscule as to be undetectable even by the most sensitive nose. But the story was picked up by all the UK press, which had been having a field day over the past year with cocaine stories, mainly centring on upper-class cocaine users and even – horror of horrors – leading to the royal family itself.

In May 1999, Tom Parker Bowles, son of Prince Charles' close personal friend Camilla and godson to Prince Charles, was caught taking cocaine at a party in what was widely seen as a "sting" operation organized by a British tabloid newspaper. Despite the fact that a young upper class man who works in the film industry takes cocaine is about as newsworthy as the sun rising in the morning, the press again went into overdrive, citing the close relationship between Parker Bowles and the Princes William and Harry. According to the *Daily Telegraph*, Prince Charles was said to be "fairly cross and told Tom that he had been a bloody fool. He said that he always tried to understand the pressures on young people but that he found it pretty hard in some cases."



YOU'RE UNLIKELY TO FIND ONE OF THESE WITHOUT COCAINE ON IT

In September 1999, the British press really hit pay dirt when they managed to catch out a bona fide member of the royal family in the great cocaine jamboree. Lord Frederick Windsor, the 20-year-old son of Prince Michael of Kent and a cousin to the Queen, confessed to the press that he too had taken cocaine. Why he felt the need to make this confession is not clear – presumably he had little choice in the matter. His mother, Princess Michael of Kent said: *"I brought my children up to be anti-drugs."* She added, perhaps a little optimistically: *"I am disappointed that he experimented in this way, but he has assured me that he will not do it again, and I believe him."*

The British press continued on their self-appointed moral crusade by ensnaring a hitherto unheard of lord, the 10th Earl of Hardwicke, in a cocaine stitch-up. The Earl, whose only claim to fame till then was being the youngest hereditary peer to take a seat in the House of Lords, was conned into selling cocaine to some tabloid reporters, disguised as Arab sheikhs, at a London hotel. According to the court case that followed the newspaper's revelations, Hardwicke had told the faux Arabs that *"We call it help. That's what we call coke because we need it."* According to the prosecution, he went on to say: *"Come on, bring on the Charlie. I am going to have the biggest line I have had in my life and then I am going to be sick."* This time, however, the last laugh was on the press. The judge in the case decided that the newspaper's stitch-up was of no benefit to anyone but the newspaper involved, and that the 28-year-old Earl was hardly a major criminal and let him off with a minimum sentence. After that, the British press gave up on upper-class cocaine users, realizing perhaps that no one really cared.

REACH FOR THE SKY

It wasn't just the British upper classes who were falling prey to the lure of the white powder. In June 1999, Constantine Niarchos, son of the shipping tycoon Stavros Niarchos, was found dead in his Mayfair flat. Niarchos had spent most of his life playing the international social scene, hopping between chalets in St Moritz, the family yacht Atlantis, the beaches of Bermuda and the party circuit in New York. His wild life was chronicled in society gossip columns which labelled him "mad, bad and dangerous". According to one snippet, from Christmas 1985, he stormed into the rooms of the Aga Khan late one night in St Moritz to settle a family dispute. Another friend told how, at a New York dinner party, guests were given half a gram of cocaine each for pudding. *"It seemed everyone was taking it,"* the friend said.

But by the late 1990s, everyone thought that the 37-year-old had got over

his wild ways. His death came shortly after he had returned from conquering Everest – the first Greek to do so – and so it was initially thought that he had had a heart attack, brought on by the sudden pressure change as he descended from the summit in a helicopter. However, a post-mortem revealed that Niarchos had died from a massive cocaine overdose.

A female friend had called at Niarchos's flat to see his photographs of Everest and had found him with a bag of cocaine in his hand. She told police: *"It looked to be about an ounce. He was complaining that the cocaine was wet and he could not snort it, and so he had put some into a microwave to dry it out. However, he had become impatient and had started to eat some of the drug straight out of the bag."*

"He chopped up the cocaine with his credit card on a worktop. I had two lines and I saw Constantine snort at least four. He reached into the plastic bag, got out a handful about the size of a 50p piece, put it into his mouth and ate it. He tried to put some into my mouth but I spat it out."

About 45 minutes later, she found Niarchos collapsed on the bathroom floor with blood dripping from his nose, his eyes wide open, and a bottle of sleeping tablets by his side. She called an ambulance and Niarchos was rushed to hospital, where attempts to revive him failed.

The Niarchos' story was a tragic one, but was nevertheless eagerly seized upon as yet another chapter in the long running saga of a controversial family with ties to the similarly ill-fated Onassis dynasty. In the words of the coroner at the inquest, his story was *"yet another example, as if one were needed, of the danger to life from taking cocaine"*.

GOAL

Soccer players have long been noted for their capacity for self-indulgence. With fame and money, many a talent has disappeared into a life of alcohol and drug abuse. On one occasion in the UK, the Liverpool soccer player Robbie Fowler was fined by the sport's governing body for simulating the snorting of cocaine on the pitch after scoring a goal. But only in Colombia were the soccer teams – even the national one – actually run by drugs.

Each cartel had their own team, and with the huge resources provided by the money from cocaine, the teams improved drastically. But the ownership of soccer teams provided more than just glory to the cartels – they were an easy way of laundering money. Buying foreign players was a way of investing drug money while avoiding exchange controls and supervision. Players were paid mainly in

undeclared cash dollars, thus avoiding these sums going through any official banking procedures. The selling of players abroad allowed the football clubs – and their owners, the cartels – to invest the clean money from the proceeds of the sale in foreign banks. Thus, a player bought with dirty money could be sold for clean cash. Colombian soccer players became a major means of laundering; Government investigations estimated that about \$35 million had been moved abroad by the cartels by this means between 1983 and 1988.

Naturally, with all this money pouring into it, the Colombian national game thrived. In 1994, Colombia reached the finals of the soccer world cup being held in the USA. This was the first time the team had made it to this stage of the competition since 1962. The team captain, Carlos Valderrama, was feted as much for his extraordinary hair as his footballing skills. For the sake of the game, everyone kept quiet about what they knew lay behind Colombia's soccer renaissance. Expectations were high at home and abroad.

When the games began, however, things turned out far from well. Colombia lost their first two games and accusations of bribery were levelled at the players. This had become a regular allegation ever since the cartels had taken over Colombian football. Heavy bets were placed on matches and then intimidation and bribery were used to ensure that the "right" result occurred. Some thought the same was now happening at an international level. The fact that the team manager was seen parading around in a Cartier watch and driving a gold Porsche seemed to confirm this suspicion.

The Colombian team's visit to the 1994 world cup ended in tragedy when Andrés Escobar (no relation) was shot dead upon his return. Escobar's "crime" had been to score an own goal in a vital match. Rumours abounded that he did this on purpose, although no one has ever been able to prove this – indeed he seems to have been one of the more reputable members of the team. Perhaps that was his problem. The Colombians' world cup adventure seemed symbolic of the nation at that time. As one presidential candidate said in 1994: the country *"sold itself to the devil and the devil now demanded his share."*

WHAT IS TO BE DONE?

Western Governments are left with what is, by their own definition, a problem. How do they get rid of all this cocaine. The problem is, of course, one of their own making. The indigenous peoples of South America were managing quite happily with coca leaf until the European colonialists arrived and embarked on their wholesale exploitation of that continent's assets. In their quest for commercial gains, they created what they now consider to be a monster. But they have

done something else as well; the West has re-imported cocaine into its place of origin, but as a vice and not as an integral part of the continent's religious culture or medical service.

In the cocaine-producing regions of South America, cocaine abuse is rife, usually smoked in the form of cocaine paste – the intermediary stage between the shrub and the powder – mixed with tobacco. This is called *basuco* in Colombia and *pitillo* in Bolivia. If crack is a problem of the inner cities in North America, *basuco* and *pitillo* are far greater problems in South America.

Meanwhile, the economies of Peru, Colombia and Bolivia are becoming increasingly dependent on cocaine. In Colombia, in particular, the impact of the cocaine “explosion” is still being felt. Not only did thousands die in acts of terror, but the entire political and social landscape of the country has been changed. As the drug lords became the most powerful people in the state, their private armies effectively became the state police. While these armies had leadership and remained largely unthreatened by the official police, things worked OK. But with the leaders gone, especially after Escobar's death in 1993, the Colombian Government is faced with armed groups who owe their allegiance not to the state, but to cocaine. And so long as cocaine remains the money spinner it is, that is hardly likely to change.

Under the United Nations Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances, signed in Vienna in 1988, it is prohibited to sow, cultivate, harvest, process and market coca leaves, against which an undeclared war is being waged to achieve their complete eradication, with the exception of lawful consumption such as for chewing, medicinal use in herbal tea and poultices, etc.

This strategy, which has been developed by the Drug Enforcement Administration of the US Department of Justice, includes a vast programme to eradicate the Andean shrub by employing herbicides such as hexazinone and tebuthiuron which have devastating effects on vegetable life. Apart from eradicating the coca plantations, the arbitrary and unilateral use of defoliants and other chemicals might render vast areas of Andean land sterile and transform them into a desert. Even more significant, by its perverse effects, this measure is a *de facto* violation of the spirit of the Rio Conference on safeguarding biodiversity. It seems the West, having created a monster, now wants to destroy the tools of its creation, when they should really be looking closer to home.

In 1992, before the annual assembly of the World Health Organization, the President of the Republic of Bolivia, Mr Paz Zamora observed that “*coca is an Andean tradition while cocaine is a Western habit.*” He has a point.

INDEX

- alcohol 24, 41, 43, 44
amphetamines 45, 48
anaesthetic, cocaine as an 7,
14, 16, 18–20, 21, 38
Anslinger, Henry J. 47
“arms to Iran” operation 64
- Bacon, Richard (“Blue Peter”) 89
Barbie, Klaus 57, 58
Bennet, William 65
Bernays, Martha 14–15
Biskind, Peter 82–3
black community and cocaine 39–42, 75, 83, 86, 87
Blacks Against Narcotics and Genocide (BANG) 83
Blum, Jack 66, 68–70
Bolivia 8, 9, 20, 57–9, 94
Bonilla, Rodrigo Lara 53
Bowles, Tom and Camilla Parker 90
Bristol Myers Squibb 14
Bush, Pres. George 63, 65, 68, 85
Bush, George, Jr 85
- Cali cartel 54, 55, 72
Carleton, Billie 86–7, 88
Carter, President Jimmy 63, 71
Ceppos, Jerry 64, 65
Chang, Brilliant 88
Charles, Prince 90
Chasnoff, Ira 36, 37
China 45, 47
Chomsky, Naum 65
CIA 63–75 *passim*
cinchona trees (quinine) 46
coca leaves 8–14, 20–1, 42, 45–7, 49, 59, 93
coca wine 11–13
Coca-Cola 7, 13, 42, 49
cocaine cartels 50–7, 92–3
cocaine coup 57–9
Cocaine Fiends (film) 82
cocaine paste (buzco) 21, 27, 49, 52, 94
Colombia 20, 49, 51–7, 70, 92–3, 94
Communism 64–5, 68, 69
Conan Doyle, Arthur 76–80
Contras (Nicaragua) 63–75
Cowley, Abraham 10
crack (cocaine) 8, 24, 27–30, 31, 34, 59–61, 63, 65, 74, 75
crack babies 36–7
Crowley, Aleister 32–4, 44–5
- Curry, Derrick 61
- Dayle, Dennis 50
De Veulle, Reginald 86, 87
Defence of the Realm Act 43, 44
DeGrandpre, Richard 25–7
Deutch, John 74
dopamine 30, 31–2
Dutch East Indies 46–7, 49–50
- Easy Rider* (film) 82–3
Edison, Thomas 12, 78
Edwards, Rose 44
Erlenmeyer, Dr Albrecht 17–18, 49
Escobar, Andrés 93, 94
Escobar Gaviria, Pablo 51, 52–3, 54, 55
Estenssoro, President Paz 59
- Fairbanks, Douglas, Sr 78, 79
Farrakhan, Louis 74
films/cinema 78–84
Fleischl-Marxow, Ernst von 16, 78
Fletcher, Charles Sidney 21
Fonda, Peter 82–3, 84
Fowler, Robbie 92
Frampton, John 10
“French Connection” 64
Freud, Sigmund 7, 14–18, 19, 20, 22, 38, 44, 76, 78
- Galán, Luis Carlos 54
George I, King of Greece 12–13
George V, King of England 43
Gillette, William 78
Gloria (Colombian flagship) 55, 56
Goering, Hermann 45
Gorman, General Paul 68
Grateful Dead 84
- Halsted, William 19
Hammond, Dr William 22
Hardwicke, 10th Earl of 91
Harrison Narcotic Act (1914) 42, 44, 50, 79
Hasenfus, Eugene 64
heroin 22, 24, 25, 42, 45, 48, 50, 81, 83, 84
Holmes, Sherlock see Conan Doyle
Hopper, Dennis 82–3, 84
Huntingdon, Dr Edward 40
Hutchings, Donald E. 36
- Incas 8, 16
- Japan 45, 46–7
Jones, Ernest 15
- Kempton, Freda 88
Kerry, Senator John/Kerry report 66–7, 68, 70
Kingsley, Horace 44
Knapp, Herman 18–19
Koller, Karl 14, 18, 20, 21, 44, 76
Kolominin, Professor Sergei 21
- Lehder, Carlos 56
Leo XIII, Pope 13
Levenstein, Dr 24
Lloyd George, David 43
Love, Bessie 78
- McCaffrey, Barry 74
McKinley, William 13
Mariani, Angelo/Mariani wine 11–13
marijuana 28–9
Marsh, John 86
Mathers, S.L. MacGregor 32
Medellin cartel 51–5, 57
Merck & Co., E. 14, 17, 20, 44
mesolimbic dopamine system 31–2
methadone maintenance 48
Meyer, Nicholas 78
Meza, General Luis García 57, 58–9
Miami 50–1, 55, 73
Michael of Kent, Prince 91
Michael of Kent, Princess 91
Milian-Rodriguez, Ramón 65
Mitchell, Joni 84
Monardes, Nicholas 10
morphine 16–17, 18, 19, 22, 24, 41, 42, 43, 45
music business 84
The Mystery of the Leaping Fish (film) 78–80
- Newman, Paul 82
Niarchos, Constantine 91–2
Nicaragua 63–75 *passim*
Nieman, Albert 10–11, 14, 76, 75
Nixon, President Richard 63, 75
Noriega, General Manuel 70–3
North, Oliver 63–4, 70, 73
- Ochoa, Jorge 56–7

- O'Neal, Ron 83–4
 opium 24, 42, 43, 44, 81
- The Pace that Kills* (film) 80–2
- Panama 70–3
- Paris Blues* (film) 82
- Parke David drug company 19–20
- Peele, Stanton 25–7
- Pemberton, John
 Styth/Pemberton's wine 13
- Peru 8, 49–50, 94
- Pinochet, General Augusto 52
- Pius X, Pope 13
- Reagan, Ronald 63, 66, 68, 71, 85
- Reno, Attorney-General Janet 74
- Reubens, Alma 78
- Rolling Stones 84
- Rusby, Henry 20–1
- Ryno's Hay Fever and Catarrh Remedy 38–9
- Sabbag, Robert, *Snow Blind* 22–3, 24
- Sandinista régime, Nicaragua 63, 64, 69, 70, 71, 72
- Shore, Sig 83
- Silber, John 36
- Somoza, Anastasio 63
- Spadafora, Hugo 72
 speed 48
- Squibb, Edward 14
- Stevenson, Robert Louis 78
- Stuart, Dr Frederick 86–7
- Superfly* (film) 83–4
- Taiwan (Formosa) 47
- Torrijos, General Omar 71
- Towns, Dr Charles B. 41–2
- Tyler, Steve 84
- UN Convention Against Illicit Traffic in Narcotic Drugs 94
- US Drug Enforcement Agency (Federal Bureau of Narcotics) 47, 50, 56, 60, 61, 72, 94
- Valderrama, Carlos 93
- Van Rossum 22
- Waters, Maxine 74
- Webb, Gary 64, 65–6, 70, 73–4
- Weld, Bill 66
- Wells, H.G. 13
- Weston, Edward 13–14
- William, Prince 90
- Williams, Robin 8
- Windsor, Lord Frederick 91
- Wöhler, Friedrich 10
- Wright, Dr Hamilton 40–1, 42
- Zamora, Paz 94
- Zappa, Frank 48

BIBLIOGRAPHY

- Allen, D. F., *The Cocaine Crisis*. Plenum Press, 1987.
- Erickson, P. G., *The Steel Drug: Cocaine in Perspective*. Lexington Books, 1987.
- Karch, S. B., *A Brief History of Cocaine*. CRC Press, 1998.
- Peele, S., *The Meaning of Addiction: Compulsive Experience and its Interpretation*. Lexington Books, 1985.
- Sabbag, R., *Snowblind – a Brief Career in the Cocaine Trade*. Rebel Inc., 1998.
- Shapiro, H., *Waiting for the Man: the Story of Drugs and Popular Music*. Helter Skelter Publishing, 1999.
- Starks, M., *Cocaine Fiends and Reefer Madness: an Illustrated History of Drugs in the Movies*. Cornwall, 1982.

Whether we like it or not, drugs are a part of our world. Drugs are both vilified – in newspaper headlines and public health broadcasts – and glorified – in film, music and fashion. They continue to fascinate and horrify in equal measure, but drug-taking is a subject which none of us can afford to ignore. Discussion about drugs is often hampered by preconceptions on both sides, for and against, but the Agenda series aims to contribute impartially to the debate.

EACH BOOK IN THE SERIES CONCENTRATES ON A PARTICULAR DRUG AND:

- describes its invention or discovery and its transition to illegal and 'recreational' use
- tells the story of its misuse
- lists some of the tragedies and scandals caused by misuse of drugs
- outlines the physical and mental effects and side-effects of drug misuse
- explains how and why the drug has come to occupy the position it does in society today

The authors also expose some of the most popular myths about drugs, and explain the reasons behind drug-taking and drug addiction, while recognising that the two do not always go hand in hand.

Cocaine has a reputation as a 'white collar' drug. Julian Durlacher explains how cocaine was developed, from its early use as a local anaesthetic and anti-depressant and its inclusion in tonic wine and even chewing gum, to its present status as the drug of choice for a growing number of affluent, middle-class people. Crack, the cheaper and arguably more potent form of the drug, is also discussed, with particular attention to its reputation as the more dangerous of the two.

OTHER TITLES IN THE AGENDA SERIES: *Ecstasy* by Miriam Joseph, *Heroin* by Julian Durlacher, *Speed* by Miriam Joseph

CARLTON
BOOKS



X0001JNE4F

Cocaine: Its History & Lore

Used, Very Good

Andrew B.

Piers