

# [Sample essay on mdma and alcohol](https://assignbuster.com/sample-essay-on-mdma-and-alcohol/)

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Illicit drugs such as MDMA are typically thought to be in a category of their own when compared to alcohol. Most think illegal substances share nothing in common with ones that we are allowed to purchase on a daily basis. Many forget that MDMA had very humble roots, having been synthesized in a lab and used for therapeutic purposes. Eventually, it morphed into something that could harm people. Alcohol has a similar history. Once used as something that would relax an individual after a long day of work, it is now something that people become addicted to every day. Though the two drugs are different in several ways, in some ways they are also the same. They are metabolized differently but share some of the same long-term and short-term side effects. The evidence collection procedure used by toxicologists for either drug is also parallel in some cases, showing that though one is illegal, and the other is readily available, the two substances are not that different.   
MDMA, known on the street as ecstasy, began as a psychotropic drug used in therapy sessions, where it was thought to enhance therapy sessions. During the 1980’s it began to circulate throughout the club scene, where its effects were found to be far more harmful. Once taken, MDMA is absorbed into the bloodstream. From there it travels to the brain, using monoamine transporters to enter neurons and stimulating the release of dopamine, norepinephrine, and serotonin. It constricts the vesicular monoamine transporter, concentrating the three stimulants into the cytoplasm, as noted in Morgan A. Beck’s article “ Designer Drug Confusion: A Focus On MDMA”, published in Journal of Drug Education (2009). The MDMA reverses the transporters, metabolizing the drug through a process called phosphorylation. The long-term impacts as noted in Morgan A. Beck’s article of abusing MDMA include addiction and a predisposition to anxiety and depression (Beck, 2010). According to an article by Udo Benzenhofer and Torsten Passie, titled “ Rediscovering MDMA (ecstasy): The Role of the American Chemist, Alexander T. Shulgin”, published in Addiction, short-term impacts of ecstasy also include anxiety, depression, dependency, and even death (2010). Short-term effects also include brief periods of extreme joy or happiness, hallucinations, overstimulation of sensory receptions and occasionally promiscuity. In order to test whether an individual has experimented with MDMA, toxicology analysts may run a test on blood or urine, which can yield positive results in drug activity for up to two months, depending on the amount of MDMA taken (2010). Hair can also be tested, which will hold evidence of the drug until the hair is cut (Beck, 2009). MDMA remained legal until it became an issue in the 1980’s. It was quickly upgraded to a controlled substance and made illegal by the 1990’s. Forms of the designer drug are still available on the street today.   
The prohibition and cigarettes notwithstanding, alcohol is the only continuously legal drug on the market. When your body begins metabolizing alcohol, that is its main priority; it stops metabolizing everything else, says an article entitled ” Alcoholic Liver Disease-Related Mortality in the United States: 1980 – 2003”, published in The American Journal of Gastroentenology (Paula, Helga, et al., 2010). This is because alcohol is not a protein, fat, or carb so there is nowhere for it to be stored and it must be dealt with quickly. Once the alcohol hits the stomach as much as 20% can be absorbed directly into the bloodstream, giving the drinker a feeling commonly known as “ buzzed”. The rest of the alcohol travels to the intestines with the rest of what is being metabolized and is absorbed (2010). Small amounts are lost through sweat, urination, and salivation. Once the alcohol is absorbed, it is metabolized by the liver. This is why many heavy drinkers are at risk of liver dysfunction.   
Short-term effects of drinking are incoherence, drunkenness, loss of memory, and unconsiousness. Long-term effects of alcohol are the previously mentioned, with the addition of addiction, liver failure, malnutrition, depression, and psychological issues (Paula, Helga, et al., 2010). Trauma to the kidneys and heart is also possible. In cases of abuse, the drinker may begin to retain water as the body becomes severely dehydrated. Much like when an individual begins to starve themselves, when the body is deprived of liquid it stores all it can hold. Another longterm effect of drinking is osteoporosis and joint pain. A urinalysis can be performed for 12 to 24 hours after drinking, a breathalyzer can be taken, or the drinker’s blood can be drawn (Paula, Helga, et al., 2010).   
The ways in which MDMA and alcohol are metabolized are completely different. MDMA attacks neurons in the brain, causing the release of serotonin and dopamine while alcohol is absorbed into the bloodstream, causing incoherence. Some of the effects are the same. Both can lead to addiction and depression. Both damage the brain and leave the user feeling badly if the drug is abused. There are differences too, however. MDMA causes hallucinations and sensory stimulations while alcohol is primarily a mood enhancer, or suppressant, depending on the person drinking it. Toxicology is relatively the same though MDMA stays in an individual’s system for much longer than alcohol. Although the two drugs are different in many ways, alcohol appears to be just as damaging as MDMA and it forces us to ask, why is one illegal, but not the other?

## References

Beck, Morgan A. " Designer Drug Confusion: A Focus On MDMA." Journal of Drug Education (2009): 286-298. Print.   
Benzenhofer, Udo and Torsten Passie. " Rediscovering MDMA (ecstasy): the role of the American chemist Alexander T. Shulgin." Addiction (2010): 1355-1361. Print.   
Paula, Helga, et al. " Alcoholic Liver Disease-Related Mortality in the United States: 1980 - 2003." The American Journal of Gastroentology (2010): 39-50.