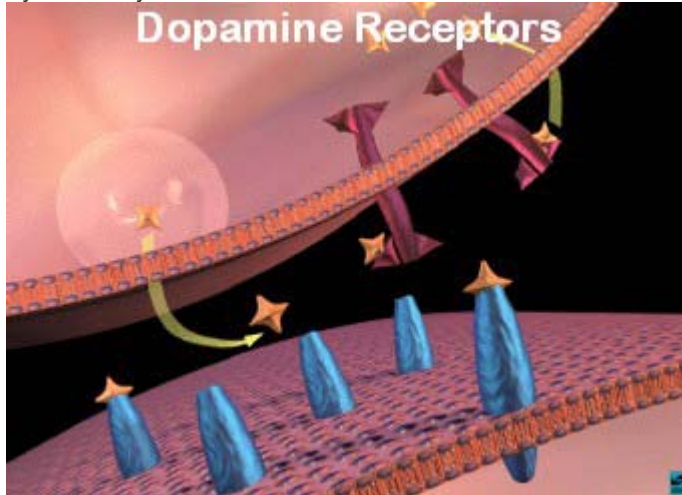


NEUROTRANSMITTER RESTORATION – AN ALTERNATIVE FIRST STEP TO MINIMIZE DETOX AND PREPARE ADDICTS FOR SUCCESSFUL LONG-TERM RECOVERY

By Robin Jay



Last summer, actor/singer Ben Vereen tap danced his way into a Lifetime Achievement Award ceremony of the California Association of Alcohol and Drug Educators (CAADE). But Ben wasn't there as the hired entertainment. Rather, he was there to honor the Lifetime Achievement Award winner, Dr. William Hitt, whom Vereen credits as saving his life in 1992. You see Dr. Hitt, an immunologist and amino acid expert, is the creator of a system called NTR – Neurotransmitter Restoration. NTR is a set of intravenous formulations of amino acids, vitamins, and minerals that has been used for more than 20 years in Mexico and the U.S. with what he says is an astonishing success rate among alcoholics, but relatively unpublicized success in the states.

Initially, Dr. Hitt studied tissue culture techniques of cells growing within the body. The biggest challenge was keeping the cells alive. The researcher worked for years with various ingredients, especially amino acids, to keep cells thriving. He found that changing the cells' nutrition could change cell activities, like dividing, repairing, resting or producing hormones. When Dr. Hitt gained an interest in treating addiction in the 1980s, he theorized that brain cells damaged by addiction may be able to heal using the same methods he used to nourish culture cells. The research, under sponsorship from the World Health Organization, started in the United States and was completed in Mexico City. Dr. Hitt's research found that intravenous formulas that bathe an addict's brain cells in a very high concentration of amino acids could penetrate the cells and repair damaged receptors. Although the body can produce amino acids on its own, it cannot make them at the concentrations needed for repair because, he says, the body wasn't designed for addiction. The intravenous formulas, a form of parenteral nutrition, were at first studied to treat alcoholics, with a stated 80 percent success rate, but now the NTR formulas are used to treat all other addictive substances.

Several clinics in the United States offer the NTR System as a means for addicts to end their cravings for addictive substances so that they can get through detox easier and faster and move on to a recovery environment. One of the U.S. clinics that uses Dr. Hitt's NTR System is the ExecuCare Addiction Recovery Center in Norcross, Georgia and Slidell, Louisiana. Founder Mike Sanders opened the clinics after the NTR System led the business executive out of a personal life of addiction.



"I am 52 years old, I'm a business owner, I'm a family man, I sit on the board of many charitable organizations, and I've been saddled with addiction to alcohol most of my life, as well as addiction to pain medication more recently in the last 10 years," said Sanders. "I was one of those individuals that probably would have never gone into a treatment even though it was badly needed because I couldn't see myself pulling away from my job for 30 days or longer. When I first heard about the amino acid therapy, called the Neurotransmitter Restoration, it made sense to me because I knew what the withdrawals felt like. I knew what the anxiety felt like. I knew what all the symptoms were of not using and I was scared to death of those. So when someone talked about addressing those issues first and then we could start to work on the behavioral, the spiritual, and the other components of the disease, which are very important, it made sense to me. I literally was an individual who drank very heavily for the last 10 or 15 years of my life, I was very addicted to pain medication. But January 3, 2005 was my first day on the I.V. of amino acids. I drank and took Oxycotin and Xanax up until hours before I started, and those were the last that I took and the last that I drank since that time four years ago. What I found in the very first day was that my cravings to use, or my need to use, were gone. My thought process, which had been totally dominated by drinking or not drinking, no longer included those cravings. For the next 10 days, I just concentrated on coming in each day and going through the 5 to 10 hour IV treatment, set in a comfortable room, a comfortable chair, watched movies nonstop over the period of 10 days. And within days of starting the treatment, I was having periods of just feeling good. I would listen to a song and my feet would want to start to dance. By day 10, I was highly motivated, my clarity of mind was restored somewhat and I began to embrace all the life changes that I needed to get at least to the point where I am now, which is 130 pounds less than I was then. I was tipping the scales at 370 and was able to lose 130 pounds, begin exercising, begin changing my diet, begin changing the things that I did and got back into enjoying life again. The things that I had lost interest in, whether it be going to movies, or going to dinner, or just spending time with my family or friends, I got back into those things again and just made the life changes necessary so it's been a great journey for me."

Sanders says he does face skepticism among many providers of the traditional pathways of treatment. "Their biggest fear is that someone is always looking for the magic bullet. To this day, we've never found the magic bullet and this isn't the magic bullet either," said Sanders. "There's a lot of work in recovery. There's a lot of support systems that are available that need to be utilized, whether those be 12 steps, whether they be some of the nontraditional means of cognitive behavioral therapy, whether it means trigger therapy, or relapse therapy or working to get at the root of possibly what happened to drive a person to use to begin with. The most important thing, however, is that this is a great first step in the recovery process, and once many of the traditional channels realize that we only approach it as a great first step, the brain healing step in order to send them an individual that's more cognitively ready for treatment for those life changes that need to be made. And [recovery facilities we refer to] have been great about embracing what we do, because they can see that they are getting a better client, a better patient to try to teach those life changes that need to be made."

Sanders says the program is ideal for busy professionals who may feel they can't take 30 or 90 days off from work, or who think doing so may put their job in jeopardy. "A professional can start treatment on a Friday and be done a week from Sunday, missing a week of work, not more than a family vacation," said Sanders. "During that time, they will quit using all the addictive drugs that they are on. By day 10, they will not have a need to use any of those particular drugs and they will have restored clarity of mind. They will not suffer from the anxiety and the depression, the things that were a result of the drugs or alcohol. They see during those 10 days a licensed

professional, a certified addiction counselor, or a licensed social worker or a psychiatrist. They come in on a case-by-case basis to assess where that person is, what their resources are and what the next phase of recovery should look like for them. That may be residential, that may be intense outpatient with someone that's in the geographical area, that may be 12 steps or any combination of all of those, but that's determined prior to day 10. So on day 11, they take that next step into whatever that phase of recovery looks like."

For more information on the NTR System or ExecuCare Addiction Recovery Center, go to www.Execucarearc.com.

To listen to the the full transcript of BHC Journal's interview with Mike Sanders, click on the media player on this page. Or, to read the full transcript, see below.

BHC Journal: This is Robin Jay with BHC Journal. Joining me today is Mike Sanders, the founder of Execucare Addiction Recovery Center in Norcross, Georgia and Slidell, Louisiana. Execucare has a unique approach to recovery and Mike is here to tell us about it. Mike, thank you for joining us.

Mike Sanders: Thank you for having me Robin. Actually what we do at Execucare is provide another entry point for a person suffering from addiction to drugs or alcohol into an abstinence-based recovery model. The starting point is to help patients discontinue the use of drugs or alcohol while restoring the damage that has been done to the brain from chronic use.

BHC Journal: What specific methods do you use that are novel for your particular type of care?

MS: Well first off, let me explain traditionally the entry point for most people is what's known as detox, whether it be cold turkey, they have done it on their own, or they go to a medical lockdown facility to undergo a several what they call detox, but what they are really doing is discontinuing the use of drugs or alcohol and trying to stabilize the body as you take that away. What we do at Execucare is provide an intravenous treatment of amino acids, the precursor amino acids that are used by the body to repair cells in the body, as well as some minerals and some vitamins and what that does is it give the brain what it needs, or what the body needs, to restore certain receptors in the brain that have been damaged or down regulated as a result of chronic use of drugs or alcohol.

BHC Journal: This is the neurotransmitter receptor restoration process that you are describing?

MS: That is correct. It was developed by Dr. William Hitt 20 years ago. Essentially what he found is that you can motivate or induce cells to do certain things. He got his experience in laboratory conditions working formally for a company by the name of Baltimore Biological Laboratories, which then became a company called Becton Dickinson back in the 1950's. What they did was learn that depending on what nutrients you put living cells into will determine whether or not the cells would divide and duplicate or would produce hormones or rest or repair, and by changing the nutrients, you could change what it is that you wanted cells to do. He also found that by putting specific cells in specific formulations of nutrients, that you could get the damaged receptors in the brain to repair themselves.

BHC Journal: So the idea would be that with your program, the patients first gets the physical form of their disease under control so that they can progress to other stages, is that right?

MS: That is exactly correct. Right now, today, in most traditional treatment facilities, the vast majority, if not all, of the concentration is in the psycho, the behavioral, the spiritual components of the disease of addiction, all of which I might add are very important. But they kind of leave the

healing of the brain, the actual physical problem of what's going on in the brain up to time and chance. They say if they eat properly, change your nutrition, exercise, that hopefully in time the brain will heal and those reward pathways that have been dis-regulated or changed will restore themselves. And they probably will if a person can remain sober and abstinent long enough for that to happen. What we do is provide the body what it needs to accelerate that repair process over a 10-day period.

BHC Journal: What is the significance of the name came to be Execucare? I know that the 10 day process makes it more available for professionals who may think they can't take off a traditional 30 or 90 days at the beginning for the initial treatment, so 10 days might be more effective, but you also had mentioned that there is another unique reason for ExecuCare.

MS: Well, whether a person is going out to dinner, or staying at a hotel, or getting addiction treatment, it's our feeling that everybody wants to be treated like an executive, and that means with compassionate care, one-on-one comfortable surroundings, and that's exactly how a person's treated at ExecuCare. It has nothing to do with their socioeconomic status. It has to do with the way everybody wants to be treated, expects to be treated and is treated when they come to ExecuCare. We do however provide an excellent alternative for professionals out there that most people would agree most professionals can't imagine taking 30, 60, 90 days; which is the standard for addiction recovery, away from their job. So to be able to accomplish the brain healing in that 10 day period and then work an intense outpatient program around their work schedule may at least enable them to keep their job throughout this ordeal.

BHC Journal: Mike since the NTR system isn't one that is traditionally employed at conventional treatment centers, do you ever face skepticism? And if so lets talk about your personal experience with the treatment.

MS: Sure, we do find skepticism along many of the traditional pathways today of treatment. Their biggest fear is that someone is always looking for the magic bullet. To this day, we've never found the magic bullet and this isn't the magic bullet either. There's a lot of work in recovery, there's a lot of support systems that are available that need to be utilized whether those be 12 steps, whether they be some of the nontraditional means of cognitive behavioral therapy, whether it means trigger therapy, or relapse therapy or working to get at the root of possibly what happened to drive a person to use to begin with. The most important thing, however, is that this is a great first step in the recovery process, and once many of the traditional channels realize that we only approach it as a great first step, the brain healing step to give them an individual that's more cognitively ready for treatment for those life changes that need to be made. And they've been great about embracing what we do, because they can see that they are getting a better client, a better patient to try to teach those life changes that need to be made.

I am 52 years old, I'm a business owner, I'm a family man, I'm a husband, I'm a father, I sit on the board of many charitable organizations and, of course, I've been saddled with addiction to alcohol most of my life, and addiction to pain medication more recently in the last 10 years or so. I was one of those individuals that probably would have never gone into a treatment even though it was badly needed because I couldn't see myself pulling myself away from my job for 30 days or longer. When I first heard about the amino acid therapy, called the Neurotransmitter Restoration, it made sense to me, first of all because I knew what the withdrawals felt like. I knew what the anxiety felt like. I knew what all the symptoms were of not using and I was scared to death of those. So when someone talked about addressing those issues first and then we could start to work on the behavioral, the spiritual, the other components of the disease which are very important, it made sense to me. I literally was an individual who drank very heavily for the last 10 or 15 years of my life, I was very addicted to Oxycotin pain medication and Xanax, Benzodiazepine. January 3, 2005 was my first day on the I.V. of amino acids. I drank and took Oxycotin and Xanax up until hours before I started, and those were the last that I took and the last that I drank since that time. What I found in the very first day was that my cravings to use, or

my need to use, the Oxycotin and Xanax were gone. My thought process, which had been totally dominated by drinking or not drinking, and previous attempts to quit drinking were not there, it wasn't any part of my thought process and the next 10 days I just concentrated on coming in each day and going through the 5 to 10 hour IV treatment, set in a comfortable room, a comfortable chair, watched movies nonstop over the period of 10 days and within days of starting the treatment I was having periods of just feeling good. I would listen to a song and my feet would want to start to dance. I just started to feel good again. By day 10, I was highly motivated, my clarity of mind was restored somewhat and I began to embrace all the life changes that I needed to get at least to the point where I am now, which is 130 pounds less than I was then. I was tipping the scales at 370 and was able to lose 130 pounds, begin exercising, begin changing my diet, begin changing the things that I did and got back into enjoying life again. The things that I lost interest in, whether it be going to movies, or going to dinner, or just spending time with my family or friends, I got back into those things again and just made the life changes necessary so it's been a great journey for me.

BHC Journal: Well thank you for that Mike. If there are professionals listening to this who think that they might have a potentially good candidate for NTR treatment at Execucare, what is their next step to make that a final evaluation?

MS: You know we live in a work hard, play hard society and busy professionals, business professionals, executives, it's almost a way of life. Their sales watches revolve around drinking, they work so intensely they need to relax in the evenings and it gets to the point where they need to provide any time they need to celebrate or medicate or relax, they need to take something or drink something or smoke something in order to do that, if they find themselves in that path, the first step is to call ExecuCare. We have clinics in Norcross, which is Atlanta, Georgia and Slidell, Louisiana to call and talk to one of our intake individuals. They will just do a brief interview to find out if the person is right for the next step. If it is, then they generally come into to see the clinic itself, to watch some videos on NTR and to understand what's going on in their brain, why is it that they have to drink something to relax, or why is it they can't enjoy dinner out unless they have 4 or 5 drinks before hand, how it disrupts their life and that there is relief around the corner. We do a complete intake survey, which quite frankly if they smoked cigarettes when they were 13 years old, then we want to know about that because it's from that complete chemical survey that discusses all the legal and illegal drugs that they may have ever done then from that this specific protocol from their needs is developed. They then see our physicians, our doctors for a pretreatment assessment, physical history, lab work. The doctors then sign the orders for the 10 day treatment. This treatment is administered by an RN under a doctor's orders, and from there a schedule is set up conducive to their schedule.

A professional can start treatment on a Friday and be done a week from Sunday, missing a week of work, not more than a family vacation. During that time they will quit using all the addictive drugs that they are on, by day 10 they will not have a need to use any of those particular drugs and they will have restored clarity of mind. They will not suffer from the anxiety and the depression, the things that were a result of the drugs or alcohol. They see during those 10 days a licensed professional, a certified addiction counselor, or a licensed social worker or a psychiatrist. We have many that we are contracted with that come in on a case by case basis to assess where that person is, what their resources are and what the next phase of recovery should look like for them. That may be residential, that may be intense outpatient with someone that's in the geographical area, that may be 12 steps or any combination of all of those, but that's determined prior to day 10. So on day 11, they take that next step into whatever that phase of recovery looks like.

BHC Journal: Mike, let's say that a professional listening to this were to refer a patient to the program from out of state, there would be coordination with that provider to get the patient back into their care once they return home?

MS: Absolutely. In fact, the first step would be to talk to the intake coordinator who would actually begin to established what the game plan was, from how the person arrived to their flight

information, where they would stay. We have 8 or 9 hotels right within a mile of our clinic. We'd determine how they would be transported back and forth each day and what their entire schedule would look like during the course of those 10 days. And looking at what those individual's resources were it's important because many of these professionals have employee assistant programs, EAPs, that their companies are already contracted with, some may want to use those service some may not, some may not want their company to know about it. Either way, we are going to fulfill whatever the individual wants, but we are going to let them know what they have available through their EAP so that we can coordinate back with them or find them a therapist or intense outpatient programs in their area. What we found is that people will come from all over. We've had patients come from Dubai, from Canada, from the west coast to get this treatment. But they need services that are more convenient for ongoing care, whether that be a 12-step meeting, a celebrating recovery meeting or an individual or group therapy. They need to be tied back into that before they leave our clinic on day 10.

BHC Journal: Okay, so it's not like their done in 10 days and adios?

MS: Not at all.

BHC Journal: Mike is there anything else that I haven't asked you that you think is important for the professionals listening to this or to anyone who may have a family member or an acquaintance who may need this type of service?

MS: What we do and do great is help an individual discontinue the use of drugs or alcohol or any combination of those, whether they're illegal drugs, or prescription drugs, or just alcohol or any combination of those. We will have them not using those in 10 days and feel good. We don't use any drug replacement therapy to get them off of those drugs, it's all natural amino acids, minerals and vitamins. It's not a lockdown, it's an open door policy, it's 10 consecutive days, they go home at night or back to their hotel and I would say probably the most important thing is they're not going to have the same experience that they have when they quit using drugs or alcohol normally in that they don't suffer from the post acute withdrawal symptoms. They're going to be more cognitively ready for that next step and we're going to help organize what that next step is going to look like. It's going to take a 10 day period of time for our treatment, but of course recovery is a life-long journey and we're going to be a resource to them going forward and helping them find those channels that they need.

BHC Journal: Well Mike I want to thank you for the overview about NTR and ExecuCare. Listeners who want more can go to www.execucarearc.com. Mike thanks again.

MS: Thank you.

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