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The National Alliance of Advocates for Buprenorphine Treatment Time for Change - a fundamental description of the recovery process

"All great changes are preceded by chaos."

- Deepak Chopra

If the process of addiction recovery could be summed up in one word, it would be *change*. After all, it is changes to the brain which produce addiction's cravings, and recovery is essentially reversing those changes through changes in behavior. Without change, there is no recovery.

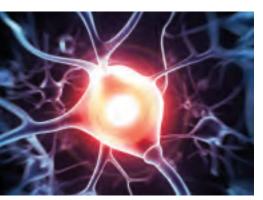


"You could not step in the same river twice."

- Greek Philosopher Heraclitus

The changing brain.

The brain is a fluid network of connected cells. With every thought and experience new connections form as others dissolve, some



strengthen while others weaken. As with a river, the brain is always changing, it is not the same brain today as it was yesterday, nor will be tomorrow. Navigating this brain evolution with deliberate changes in behavior, thinking, and environment, is what a

successful recovery is all about. Treatment medications, support, counseling and therapy are simply tools for realizing these changes.

Before we can fix the problem, we need to understand it.

The slow, sinister change which leads to addiction. When we are hungry or thirsty, we naturally crave food or water. These cravings motivate us to eat or drink to ensure our survival. This behavior is reinforced with a reward of feel-good brain chemicals which associate

pleasure with a good meal or refreshing gulp of water. A memory is created relating the satisfaction of hunger and thirst with pleasure. The memory is triggered the next time we become hungry or thirsty which prompts us to satisfy the cravings in the same way. This learning process helps us prioritize essential needs crucial for survival.

However, some drugs can cause the release of the same feel-good chemicals, but in unnaturally high levels. If the brain misinterprets this rush of reward chemicals as a signal that the drug is a high-priority essential need, the destructive addiction cycle begins.

Once the drug-induced euphoria passes, related memories trigger cravings to re-experience the effect of the drug. These cravings are unusually strong, as they are proportional to the brain's perceived importance of the drug. In time, stress, anxiety, and depression can also trigger the cravings, which apply strong influence to repeat the behavior of seeking and taking drugs.

Each time a craving is satisfied, a new memory is formed or an old one strengthened, thus reinforcing the diseased structures of the brain. As the cycle repeats and builds upon itself, the cravings become constant, drug use becomes compulsive, control is lost, and even severe negative consequences don't curtail drug use. Ultimately, the drug loses its ability to elicit euphoria, yet the uncontrollable craving and accompanying need for satisfaction remains. The addiction has fully developed.

This change to the biology of the brain is unhealthy and abnormal. In other words it is diseased – same as when other organs develop unhealthy, abnormal biology. Since these biological changes can be long-lasting, addiction is considered a chronic brain disease.

Change your thoughts and you change your world.

- Norman Vincent Peale

"It's not that some people have willpower and some don't. It's that some people are ready to change and others are not."

- James Gordon, MD

"They always say time changes things, but you actually have to change them yourself."

- Andy Warhol

How change relates to addiction remission.

The memories created or strengthened during the craving/reward cycle can also be triggered by environmental cues such as people, places and things. Such reminders recall the euphoria and trigger



a craving to re-experience it.
Breaking these connections by disassociating related memories with active addiction is the goal of recovery-focused change.
Replacing behaviors and avoiding environmental cues can make triggering cravings less likely and long-term addiction remission possible.

In basic terms, recovery can

be thought of as the process of learning new behaviors that are less likely to trigger the memories which lead to cravings.

and replaces the drug-seeking behavior. In time, the trigger-causing memories fade as they are replaced with new memory chains unrelated to active addiction.

When things don't go as planned.

Not everyone succeeds on the first attempt. In the case of relapse, avoid repeating the behaviors which led to relapse. Instead, make changes to the process and situation. That might be as simple as keeping your treatment medication in a different place, changing brands or form factors of medication, and changing any rituals associated with taking the medication. The smell, feel, or taste of the treatment medication taken prior to a recent relapse, might be enough to trigger some of the same memories and cravings which prompted the relapse. By changing as many aspects associated with relapse as practicable, triggering cravings becomes less likely as does the prospect of future relapse.

The power of change.

For years it was assumed that the constant cravings of addiction were a lifelong reality. But recently scientists have discovered that the brain is far more pliable than once thought. Scientists believe that many underlying brain structures responsible for the cravings of addiction can be changed - perhaps to the point where cravings are significantly diminished and no longer impact quality of life

How to change.

Identifying and then making changes to those behavior associated with active addiction is the real work of recovery. A therapist, counselor or life coach can be very helpful in implementing these changes. Support from peers, family and friends can also help realize change and maintain motivation. Medication, such as buprenorphine, can suppress cravings that would otherwise interfere with making changes. As dealing with stress anxiety and depression in normal healthy ways is continually repeated, it becomes the reflex reaction

The results of change.

In the 1970s servicemen returning from Vietnam, who had been addicted to heroin, had 1/10 the relapse rate of addicted people treated locally in the states. One clear difference was that by simply coming home, the Vets changed practically all aspects of their life,

including environment and behavior; while locally treated patients likely returned to the same environment and situation as prior to treatment.

Meaningful change comes about by identifying triggers related to active addiction and then consciously working to



change associated behaviors. By repeating healthy behaviors unrelated to addiction, the craving-causing brain structures diminish and have less influence, restoring control and quality of life. Eventually, craving-suppressing medication may no longer be necessary to maintain sustained addiction remission and can be discontinued.

"Things do not change; we change." - Henry David Thoreau

