

ANABOLIC STEROIDS

Rimrock
Foundation

FACT SHEET

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Scope of the problem

Since the 1950's, some athletes have taken anabolic steroids to build muscles and boost their athletic performance. Increasingly, other segments of the population also have been taking these synthetic substances. A recent National Institute of Drug Abuse survey of drug abuse among middle and high school students across the country showed a significant increase from 1998 to 1999 in anabolic steroid abuse among middle schoolers. During the same time period, the percentage of 12th graders who believed that taking these drugs causes "great risk" to health declined from 68 percent to 62 percent.

Studies show that, over time, anabolic steroids can indeed take a heavy toll on a person's health. Abuse of oral or injectable anabolic steroids is associated with increased risk for heart attacks and strokes, and the abuse of most oral anabolic steroids is associated with increased risk for severe liver problems, including hepatic cancer.

What are anabolic steroids?

Anabolic steroids" is the familiar name for synthetic substances related to the male sex hormones (androgens). They promote the growth of skeletal muscle (anabolic effects) and the development of male sexual characteristics (androgenic effects), and also have some other effects. The term "anabolic steroids" will be used throughout this Fact Sheet because of its familiarity, although the proper term for these compounds is "anabolic-androgenic" steroids. The primary medical uses of

these compounds are to treat delayed puberty, some types of impotence, and wasting of the body caused by HIV infection or other diseases.

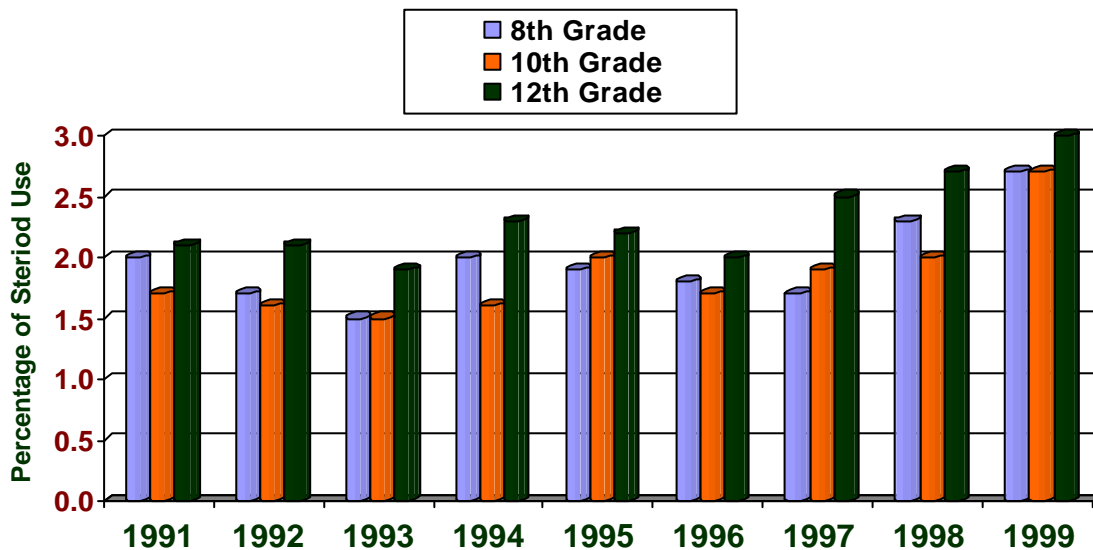
During the 1930's, scientists discovered that anabolic steroids could facilitate the growth of skeletal muscle in laboratory animals, which led to use of the compounds first by bodybuilders and weightlifters and then by athletes in other sports. Steroid abuse has become so widespread in athletics that it affects the outcome of sports contests.

How are anabolic steroids taken?

- Orally as tablets or capsules, or by injection directly into muscles.
- In combinations, a practice called “stacking”. Abusers frequently take two or more anabolic steroids together, mixing oral and/or injectable types and, sometimes adding drugs such as stimulants or painkillers. The rationale for stacking is a belief—which has not been tested by science—that the different drugs interact to produce a greater effect on muscle size than could be obtained by simply increasing the dose of a single drug.
- In cyclic dosage regimens, a practice called “pyramiding”. At the beginning of a cycle, the person starts with low doses of the stacked substances and then gradually increases the doses for 6 to 12 weeks. In the second half of the cycle, the doses are slowly decreased to zero. Abusers erroneously believe that pyramiding allows the body time to adjust to the high doses, and the drug-free cycle allows time for the body’s hormonal system to recuperate.

Extent of abuse?

Lifetime Use of Steroids



Recent evidence suggests that steroid abuse among adolescents is on the rise. The 1999 Monitoring the Future study, a NIDA-funded survey of drug abuse among adolescents in middle and high schools across the United States, estimated that 2.7 percent of 8th and 10th graders and 2.9 percent of 12th graders had taken anabolic steroids at least once in their lives. For 10th graders, that is a significant increase from 1998, when 2.0 percent of 10th graders said they had taken anabolic steroids

at least once. For all three grades, the 1999 levels represent a significant increase from 1991. Among both adolescents and adults, steroid abuse is higher among males than females. However, steroid abuse is growing most rapidly among young women.

Why do people use anabolic steroids?

One of the main reasons people give for abusing steroids is to improve their performance in sports. Among competitive bodybuilders, steroid abuse has been estimated to be very high. Among other athletes, the incidence of abuse probably varies depending on the specific sport.

Another reason people give for taking steroids is to increase their muscle size and/or reduce their body fat. This group includes some people who have a behavioral syndrome (muscle dysmorphia) in which a person has a distorted image of his or her body. Men with this condition think that they look small and weak, even if they are large and muscular. Similarly, women with the syndrome think that they look fat and flabby, even though they are actually lean and muscular.

Consequences of steroid abuse?

Anabolic steroid abuse has been associated with a wide range of adverse side effects ranging from some that are physically unattractive, such as acne and breast development in men, to others that are life threatening, such as heart attacks and liver cancer. Most side effects are reversible if the abuser stops taking the drugs, but some remain permanent. Steroid abuse disrupts the normal production of hormones in the body causing adverse reactions which can include:

- In boys and men, reduced sperm production, shrinking of the testicles, impotence, difficulty or pain in urinating, baldness, and irreversible breast enlargement.
- In males and females of all ages, potentially fatal liver cysts and liver cancer, blood clotting, acne, cholesterol changes, and hypertension, which can promote heart attack and stroke. Some interpret available evidence to show that anabolic steroid abuse—particularly in high doses—promotes aggression that can manifest itself as fighting, physical and sexual abuse, armed robbery, and property crimes. Upon stopping anabolic steroids, some abusers experience symptoms of depressed mood, fatigue, restlessness, loss of appetite, insomnia, reduced sex drive, headache, muscle and joint pain, and the desire to take more anabolic steroids.
- Many abusers who inject anabolic steroids use nonsterile injection techniques or share contaminated needles with other abusers. In addition, some steroid preparations are manufactured illegally under non-sterile conditions. These factors put abusers at risk for acquiring life-threatening viral infections, such as HIV and hepatitis B and C.

Are steroids addictive?

An undetermined percentage of steroid abusers become addicted to the drugs, as evidenced by their continuing to take steroids in spite of physical problems, negative effects on social relations, or nervousness and irritability. Also, they spend large amounts of time and money obtaining the drugs and experience withdrawal symptoms such as mood swings, fatigue, restlessness, loss of appetite, insomnia, reduced sex drive, and the desire to take more steroids. The most dangerous of the withdrawal symptoms is depression, because it sometimes leads to suicide attempts.

What can be done to avoid steroid abuse?

We need to present a balanced picture to adolescents of what these drugs can do for them and to them. Most adolescents know that anabolic steroids build muscles and can increase athletic prowess. Research has shown that failure to acknowledge these potential benefits creates a credibility problem and can actually make youths more likely to try these drugs.

We should be making use of the authority of coaches and the team ethos. In the most promising program currently under study, coaches and team leaders are trained to educate team members about the effects of anabolic steroid abuse, both desirable and adverse, in the general context of training. They also provide information about nutrition and, of course, exercise and other training techniques for improving performance without the use of anabolic steroids. Assessments of these programs suggest that it lowers anabolic steroid abuse by as much as 50 percent and also reduces alcohol abuse among teammates.

The path to healing

Few studies of treatments for anabolic steroid abuse have been conducted. Current knowledge is based largely on the experiences of a small number of physicians who have worked with patients undergoing steroid withdrawal. The physicians have found that supportive therapy is not always sufficient in some cases. Patients are educated about what they may experience during withdrawal and are evaluated for suicidal thoughts. If symptoms are severe or prolonged, medications or inpatient treatment may be needed.



Rimrock Foundation has pioneered the Advanced Integrated Model of Addiction Treatment (AIMAT). This model focuses education and therapy on the always-present psychological core of the addiction experience: psychological dependency, mental obsession, emotional compulsion, and the complex pattern of safeguarding behaviors that hide the reality of the illness from both patient and family.

We directly address the physical and psychological elements of dependency disorders, as well as the defeating beliefs that accompany addiction. We give our patients and family members an unparalleled understanding about themselves, their disease, their thinking patterns, and alternative behaviors necessary for abstinence from mood-altering chemicals or experiences.

For further information about treatment for abuse of anabolic steroids and other drugs, call Jen Porter, Rimrock Foundation Admissions Supervisor, at 1-800-227-3953 or 1-406-248-3175, or visit our website at www.rimrock.org. For more educational information on anabolic steroids and other drugs, contact the Rimrock Foundation Library at the above numbers.

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