



CONTINUING EDUCATION (CE) COURSE MATERIAL

Course No. CE1303P1 – Illicit Drug Abuse: “Traditional” and “Designer” Drugs

COURSE OBJECTIVE

An examination of illicit drug use and abuse, including the use/abuse of Heroin, Crack cocaine, Marijuana, and “Club,” “Designer” and “Date Rape” drugs: Ecstasy, Rohypnol, Ketamine, GHB, LSD, and OxyContin.

COURSE MATERIAL

The leading health problem that plagues our society is drug and alcohol use, and the related abuse and addiction. From caffeine to nicotine to illegal drugs, throughout history people have always used some type of mood- or mind-altering chemical for pleasure, as well as plant extracts and narcotics to reduce pain. It appears today, however, that people are requiring and using a variety of mood- and mind-altering drugs just to get through day-to-day life.

Previously, when people would use drugs and alcohol, they considered them to be beneficial, rather than harmful, because they were derived from natural sources, such as plants. Over the past 120 years, however, technology has increased the availability of drugs utilized to satisfy “instant gratification” desires. Today, people want things bigger, better and faster, and, since thus far that seems to always be obtainable, they are always looking for the new excitement or the next thrill.

In that light, people today tend also to want, and demand, faster, more instantaneous and longer-lasting drugs to alter their mood and mind, in an effort to keep up with the pace of day-to-day living. To meet that demand, there must not only be a supply, but those who are willing meet such demand and provide the supply *on demand*. Today, neither the ability to meet the demand nor the supply of faster, longer-lasting drugs is lacking. The supply of drugs, narcotics and pharmaceuticals, and individuals willing to provide them, is without limit, so that many countries today are losing their “war” on drugs.

Background

There are many new trends in the 21st century scene of drug addiction, many old trends being revived, and even more on the horizon. Production, distribution, sale, and the use trends of some of these drugs span the world, with major markets both within and outside of the United States. Within the U.S., trends formerly found only on the East Coast have made their way to the West, and vice versa. Many of the old drugs, like heroin, opium, mushrooms, and LSD, are still available and are still being used, but new drugs like XTC, methamphetamine, and crack cocaine have emerged, and they are unlike the drugs of old. Rather than natural plant extracts and derivatives, many of these new drugs are manufactured and/or synthetics.

Yesterday's Illicit Drugs; Today's Devastating Addictions

Although we are now in the 21st century and a new millennium, while tending to fall by the wayside for lack of use, historically common illicit drugs are still widely used:

Heroin

Still a commonly used drug, heroin use is once again taking its toll. With white heroin being the most commonly used type, followed by the low purity injectable Mexican Black



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tar, heroin has such a high availability and low price that it is now even easier for dealers to dilute their products. According to law enforcement¹, adulterants are added to heroin in order to increase volume, some of which are benign but many of which are quite harmful.

And while heroin is still being "cut" (adulterated) with any type of powder substance available, from rat poison to powdered milk, baking soda, coffee creamer and, of course, cocaine², it is also now being mixed with "Tres Pesos" ("three steps"), which is a rat poison shipped from Santo Domingo. (NOTE: It is called it "three steps" because supposedly mice, after only inhaling it, take three steps and die). Users have been known to state that the reaction to heroin cut with Tres Pesos rat poison is intense: the rush is quicker and they feel like they're going to die.

Across the country, some of the common street names for heroin are "horse," "H," and "boy". The vast majority of users are adults over age 30; however, heroin is attracting users as young as 16. Though whites are the predominate users of heroin, Hispanic and African Americans representation, as well as use by women, has increased slightly. In addition, the patterns of heroin use across the country has slightly changed³: while injection use still predominates, the younger crowd prefers snorting and smoking it because they feel they can't get addicted and that smoking reduces the chances of contracting HIV. Heroin is also used mixed with crack cocaine, in cocktails called "speedballs" and is the most abused and rapidly acting of the opiate class of drugs.

Heroin is a Schedule 1 Substance (pursuant to the "Controlled Substances Act" (CSA), substances that have no accepted medical use in the United States) and is highly addictive.

Crack Cocaine

Crack cocaine is still quite popular, and its existence and use on the drug scene is rampant. It is considered one of the most common drugs by law enforcement, epidemiologists and ethnographers, and according to Pulse Check, crack is named as the drug with the most serious consequences. Crack is still relatively cheap to purchase: a hit can be purchased for approximately \$10-\$20. However, it is also considered one of the most costly drugs because people who use this drug need more than just one hit, for just one hit can cause addiction. Crack cocaine is still relatively easy to get and is manufactured locally in communities. The process combines cocaine and baking soda⁴; however, crack cocaine is also made with other additives such as Vitamin B12, Lidocaine, and even ammonia. Some of the slang names used for crack include "rock", "batman", "ghost", "gun" and "spotlight".⁵

There has been a slight decline in the number of young adults who use crack (ages 18-30); statistics now show that older adults are more likely to use this drug. The number of youth who are using crack, however, is on the rise in major cities such as Columbia,

¹ Law enforcement, New York Division

² Galea, John A, M.A. NY State office of alcoholism and substance abuse services

³ Office of national Drug Control Policy, Pulse Check 2001

⁴ Galea John A. M.A. NY State office of alcoholism and substance abuse services

⁵ Natley, Dennis PHD, Department of Alcohol and drugs Columbia SC



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SC, Los Angeles, CA, and Sioux Falls, IA. In these locations, youth under age 18 are the largest crack-using group. And even though crack has historically been a drug that has appeared to be used overwhelmingly by African Americans, it now appears that an equal amount of whites are using the drug and the number of Hispanics who use crack has increased.

The pattern of use for crack cocaine is still primarily smoking; however, it is also snorted, injected and mixed with heroin for "speedballs". Cocaine (and, therefore, crack cocaine) is a Schedule II substance and has a high abuse potential with severe psychic or physical dependence liability.⁶ Schedule II controlled substances consist of certain narcotic, stimulant and depressant drugs.

Marijuana

Marijuana is another drug that has been used for many years and is still widely used. The most commonly used illicit drug, marijuana is used by 75 percent of illicit drug users; however, law enforcement and epidemiologists believe that other drugs have come onto the scene and have replaced marijuana as a primary use drug. Some of the drugs that are being used in the place of marijuana are prescription drugs, LSD and "club drugs". The types of marijuana currently available on the street are usually locally produced and commercial grade, such a Sinsemilla and seedless marijuana.

Marijuana is widely used by youth because many youth believe it is God-given (and, therefore, should be legal), non-addictive and harmless. However, regular and long-term use of marijuana can have a permanent negative effect on attention span, memory, judgment, and logical thought processes. And it is believed that smoking one marijuana cigarette is as harmful to the lungs as smoking approximately 4-5 regular cigarettes, and smoking both greatly increases the risk of developing emphysema, cancer, and other lung diseases.⁷

Although considered under certain circumstances to have some medicinal benefits, under Federal law, marijuana is still considered a Schedule I substance and is, therefore, illegal in the United States.

"Club," "Designer" and "Date Rape" Drugs: Today's New Addictions

Over the past 20 years, there has been a surge of new drugs on the scene. Classified as "club drugs" (or "designer drugs" and synthetic opiates), these drugs are cheap and easily accessible. Just as crack cocaine was the street drug epidemic that took society by surprise during the 1980's, club drugs are the drugs of late 20th and early 21st century, and are once again taking society by surprise as it takes our youth, college students and young adults.

"Club drug" is a vague term that refers to a wide variety of drugs (including "Ecstasy" aka "XTC"), due to primarily to uncertainties about the drug sources: their pharmacological agents, the chemicals used to manufacture them, as well possible contaminants, which uncertainty

⁶ Drug Enforcement Administration

⁷ Drugs of Abuse," DEA, 1996; "Fast Facts: Marijuana



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makes it difficult to determine toxicity, consequences, and symptoms.⁸ Thus, they are called "club drugs" because they are generally taken when people are involved with music, dancing, and socializing (primarily at parties, nightclubs, etc.), which socializing has gained popularity among youth and usually lasts throughout the night. There are many other arenas, however, where such drugs are sold and/or used, such as concerts, college and high school campuses, shopping malls, and the Internet.

Club drugs have many adverse affects including long- and short-term memory loss, hallucination and even death, and even more so when mixed with other drugs or alcohol. Unlike crack cocaine that targeted anyone and everyone, club drugs are targeting youth and young adults, age 25 and younger. The Drug Abuse Warning Network (DAWN) reports that Emergency Department statistics shows that the most ED cases involve patients age 25 and under.⁹

Club drugs or designer drugs are unlike other drugs, such as cocaine and marijuana, which are derived from herbs or plants. "Designer drug" is the term that is used for drugs that have been created by changing the form or make-up of other drugs to create a new substance. Designer drugs are not medically accepted and have no medicinal purposes; therefore, they are manufactured illegally in illicit laboratories, kitchens, hotels and other non-regulated places.

There are many drugs that fall into the category of "Club Drugs" and each one produces its own effects. MDMA (Ecstasy), GHB, Rohypnol, Ketamine, are some of the new club or party drugs gaining popularity. Illicit chemists who develop drug combinations that build on or mimic existing drugs produce these drugs. Some of the dangers associated with these new emerging drugs is that the quality varies significantly, and substitute drugs are sold when suppliers are unable to meet current demands.¹⁰ In addition to the quality of the drug, there is a myth among youth and young adults that club drugs are not dangerous. In fact, drug dealers push ecstasy as a drug that can be used without adverse effect. With the belief that these drugs are harmless, then, the demand for the drug is prevalent and is increasing, so that the widespread use of this drug not only includes youth and young adults but other older partygoers are also taking these drugs.

Because some club drugs are colorless, tasteless, and odorless, individuals who want to intoxicate or sedate others can add them unobtrusively to beverages, and 3 of the 4 drugs below are drugs that are considered Date Rape Drugs.

Methylenedioxymethamphetamine (MDMA)

Also known as "Ecstasy" "E" "X" and using the drug it is referred to as "rolling".¹¹ MDMA is a synthetic, psychoactive drug with both stimulant (amphetamine-like) and hallucinogenic (LSD-like) properties, and so can be known as "hug drug" or "feel good drug". MDMA is similar to methamphetamine and mescaline, in that these too are synthetic drugs known to cause brain damage, and is also known as a designer drug. Ecstasy is the most popular and the most frequently used club drug among youth and young adults. According to recent statistics, illicit drug use had actually began to level

⁸ Leshner, Alan I. Ph.D. Director of NADA

⁹ The DAWN report: Club Drugs, December 2000

¹⁰ Drug Intelligence Brief, February 2000

¹¹ The national Institute of Drug Abuse (NADA), INFOFAX



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off or decrease among the nations youth, when MDMA came on the scene and soared in popularity, and which use has increased significantly among 8th to 12th graders.

MDMA tablets often contain other drugs, such as ephedrine (a stimulant), and dextromethorphan (a cough suppressant), which results in a PCP-like effect at high doses.¹² A single milligram tablet usually contains between 75 and 125 milligrams of pure MDMA, and the tablets come in various forms and colors, and are often branded with symbols by the drug dealers to distinguish their products. Common symbols are the Playboy bunny, various cartoon characters, butterflies, lightening bolts, stars, and clovers, or they may have the letters "XTC" or "Y2K" on them. Their colors range in shades of blue, pink, yellow, green, and even other colors, and since there are so many different versions of this drug, there are a lot of look-alike products that can be and are sold in its place. As a result, many consumers have no idea what they are taking and, therefore, the risk of overdose and other dangerous effects are high. The price of MDMA can range from \$20-\$50 per tablet.

The following table denotes how Ecstasy and some Ecstasy combinations are referred to across the country:¹³

Two ecstasy pills	Double Stacking
The use of more than one ecstasy tablet sequentially	Piggybacking
Ecstasy adulterated with mescaline	Snackies
Adulterated with amphetamine	Speedies
Ecstasy + GHB+ Ketamine or nitrous oxide	E sitting, Sitting E
Ecstasy + Xanax	Zanybar
Ecstasy + Viagra	Hammerheading X's and O's
Ecstasy + LSD	Trolling
Ecstasy + Ketamine	Matrix
Ecstasy + Psilocybin mushrooms	Hippie flipping

The most common club drug combination is marijuana and Ecstasy.

MDMA is taken orally, usually in a tablet or a capsule and its effects last approximately 3 to 6 hours, although confusion, depression, sleep problems, anxiety, and paranoia have been reported to occur even weeks after the drug is taken. MDMA can produce a significant increase in heart rate and blood pressure and a sense of alertness like that associated with amphetamine use and the stimulant effects of MDMA, which enable users to dance for extended periods, may also lead to dehydration, hypertension, and heart or kidney failure. It suppresses the need to eat, drink or sleep, thus allowing users to party for 2-3 days. It reduces inhibitions and produces feelings of empathy for others, eliminates anxiety, and produces extreme relaxation.

An MDMA overdose is characterized by rapid heartbeat, high blood pressure, faintness, muscle cramps, panic attacks, and in more severe cases, loss of consciousness and/or seizures.¹⁴

¹² Hanson, Glen Dr. Division of Neuroscience and Behavioral Research

¹³ Law enforcement, epidemiologist, ethnographic as reported in Pulse check.



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The most critical, life-threatening effects are hypothermia or excessive body heat. MDMA abusers commonly take this drug with alcohol and while dancing in hot, crowded places put themselves at high risk for increased blood rates and high blood pressure that can last for hours. Mixing MDMA with alcohol and other drugs increase toxicity that could lead to such hypothermia, as well as dehydration, seizures, and heart or kidney failure. And studies increasingly show that regular MDMA use causes long-lasting damage to brain cells, which cells contain the critical neurotransmitter, serotonin, which helps regulate mood, pain, appetite, and sleep.¹⁵

MDMA is a dangerous drug and began to be used rapidly in 1996. Its use has led to an increase in drug related problems, including the fact that, according to recent data from the Substance Abuse and Mental Health Services Administration's Drug Abuse Warning Network, MDMA-related hospital emergency incidents increased from 253 in 1994 to 4,511 in 2000. MDMA is a Schedule I drug and most Ecstasy users tend to be white male and females age 13-30 years old.¹⁶

Rohypnol

Rohypnol, also known as " rophies," "roofies," "rochas," and "rope" is another "club drug" and belongs to that classification of drugs known as benzodiazepines. The trade name for Rohypnol is Flunitrazepam and it is not legal in the United States. However, Rohypnol is legally sold in Latin America and Europe as a short-term treatment for insomnia, and as a pre-anesthetic medication. The drug can cause profound "anterograde amnesia"; that is, individuals may not remember events they experienced while under the effects of the drug. This may be why one of the street names for Rohypnol is "the forget-me pill" and it has been reportedly used in sexual assaults (ex., when mixed with alcohol, Rohypnol has an incapacitating effect; thus, it is frequently used for date rape). Other adverse effects associated with Rohypnol include decreased blood pressure, drowsiness, visual disturbances, dizziness, confusion, gastrointestinal disturbances, and urinary retention.

Since Rohypnol is tasteless and odorless, it dissolves easily and is undetected in carbonated beverages. The sedative and toxic effects of Rohypnol are aggravated by concurrent use of alcohol. Even without alcohol, a dose of Rohypnol as small as 1 mg can impair a victim for 8 to 12 hours. It is usually taken orally, although there are reports that it can be ground up and snorted, as well as injected. It is available as .5 and 1-milligram oblong tablets and also an injectable solution. The tablet is olive green and is imprinted with the number "542". Adding to the popularity of this drug is its alleged ability to go undetected in urinalysis; however, 2-milligrams can be detected within 72 hours of ingestion, as it does breakdown quickly. In the case of date rape, therefore, it is important for victims to get to a doctor and have a toxicology test. Sold for \$5-\$20 per tablet, Rohypnol is a Schedule IV Substance, meaning it has an abuse potential less than drugs that are classified as a Schedule III.

¹⁴ Drug intelligence briefing, February 2000

¹⁵ National institute on Drug Abuse, NIDA Notes Volume 16, Number 5

¹⁶ National Institute of Mental Health, Bethesda Maryland 1998



Ketamine

Ketamine, also known as "K", "Vitamin K", "Special K", "Breakfast Cereal" and "cat tranquilizer", is also known to be used as a date rape drug. Ketamine is a liquid anesthetic used in medical settings for both humans and animals. Since it is a liquid, it is easy for people to pour into drinks undetected. Depending on the amount used, some of the effects of Ketamine include a dream-like state, hallucinations, delirium, amnesia, impaired motor function, high blood pressure, depression and potentially fatal respiratory problems.

Ketamine gained its popularity for abuse in the 1980s, when it was realized that large doses cause reactions similar to those associated with use of phencyclidine (PCP), such as dream-like states and hallucinations. In fact, according to the Drug Enforcement Administration (DEA), users report that the experience is better than LSD or PCP, because the trip lasts an hour or less. It is produced in liquid form or as a white powder that looks similar to cocaine and thus is often snorted, or smoked with marijuana or tobacco products. In some cities (i.e., Boston, New Orleans, and Minneapolis/St. Paul, for example), Ketamine is also reportedly being injected intramuscularly. At higher doses it produces an effect referred to as "K-hole", an "out of body," or "near death" type experience. Low-doses of the drug produce an experience called "K-Land", a supposedly mellow, colorful, "wonderful world" type intoxication, and may result in impaired attention, learning ability, and memory. The current price for Ketamine averages \$20 per dose and Ketamine was placed on Schedule III of the CSA in 1999.

GHB (Gamma Hydroxybutyrate)

With the widespread use of Ecstasy and law enforcement's and other agency's resultant focus on it as a new drug on the scene, GHB was hidden. However, in the mid-1990's many women began reporting that they had been out partying and woke up the next day to find that they were bruised, and had even been raped, without any recollection of what happened the night before. With increasing reports of this type of behavior, police began to question the validity of the women's claims and in doing so uncovered that men had actually spiked their drinks and then raped them. And it was discovered that a legal drug displayed in health food stores to promote sleep, slow the aging process and build muscle was the culprit used to drug the women. This drug, GHB, was marketed under names such as "Enliven", "ReNewtrient" and "Blue Nitro". Known by its chemical components, Gamma Hydroxybutyrate (GHB) was available in the United States as an over the counter drug sold as a health food.

Used primarily by body builders to stimulate muscle mass, the FDA in 1990 banned GHB due to related incidents of death and serious illness.¹⁷ Since its banning, GHB has been made in "kitchen-sink" laboratories and is easily produced by combining Gamma Butyrolactone (GBL) with either sodium hydroxide or potassium hydroxide in nothing more than a cooking pot or bucket. GBL, a chemical used in industrial cleaning products, is the main chemical for manufacturing GHB. The ingredients to manufacture GHB can be bought on the Internet from \$48 to \$200, along with directions on the manufacturing process.

¹⁷ <http://www.nida.nih.gov/infobox/clubdrugs.html>



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GHB is also available in liquid form and when taken in various dosages produce an effect similar to alcohol. In large doses it produces euphoric effects and/or unconsciousness, and therefore is also widely known among the teenagers and young adults who use it as the date rape drug “Liquid X” and “Easy lay”, and is largely used to spike drinks of potential victims of rape. GHB is commonly used with alcohol and at times is also mixed with Ecstasy, making it more lethal, as those who die after taking GHB usually fall on their faces and smother to death or aspirate on their own vomit.

Many youth report that GHB gives them an alcohol-like buzz without their having to down several expensive cocktails, which they refer to as “G-ber daze”¹⁸. Unlike alcohol, GHB is odorless and can therefore be hidden; parents, teachers or police cannot detect it. In addition GHB is cheap and is easy to mix and recipes are readily available on the Internet. Usually abused for either its intoxicating/sedative properties or its growth hormone-releasing effects, which can build muscles, low dosages of GHB causes dizziness, drowsiness, nausea and may disturb visibility. However, since GHB is a central nervous system depressant that can relax or sedate the body, at higher doses it can slow breathing and heart rate to dangerous levels. GHB's intoxicating effects begin approximately 10 to 20 minutes after the drug is taken and typically last up to 4 hours, depending on the dosage. At lower doses, GHB can relieve anxiety and produce relaxation; however, as the dose increases, the sedative effects may result in sleep and eventual coma or death. Overdose of GHB can occur rather quickly, and the signs are similar to those of other sedatives: drowsiness, nausea, vomiting, headache, and loss of consciousness, loss of reflexes, impaired breathing, and ultimately death.

Emergency room admissions involving GHB nearly quadrupled nationwide from 1998 to 2000, when 4,969 cases were reported; however, GHB is cleared from the body relatively quickly, so it is sometimes difficult to detect in emergency rooms and other treatment facilities.¹⁹ In addition, SAMHSA states that U.S. officials do not keep statistics on how many people use particular drugs, but states that “survey data and anecdotal evidence – such as drug seizures and activity by drug traffickers indicate that while Ecstasy easily remains the most popular drug”, more people are turning to GHB.

Generally used in liquid form, GHB also comes in a powder. It is soluble and is often added to bottled water or concealed in mouthwash bottles.²⁰ GHB has a salty taste and a flavoring is added to enhance the flavor, and as a result is sometimes passed off as a high-carbonated health drink. GHB is believed to be addictive and doctors are trying to set protocols to treat GHB addiction and ease the excruciating withdrawal effects that addicts face. Those being treated for addiction experience symptoms of anxiousness, sleepless and delirium and often attempt suicide. GHB is sold by the capful and sells for \$10 per capful. It is a Schedule 1 drug under CSA and its main ingredient, GBL, was a List 1 chemical but as of 2000, was also put in the Schedule I category.

¹⁸ USA Today 1/28/02

¹⁹ USA Today 1/28/02

²⁰ Drug intelligence brief, February 2000



LSD

D-lysergic acid diethylamide (LSD) is another drug used in the club scene but is not new. A powerful hallucinogenic, LSD has been used for years and is still being used at concerts, raves and other parties. LSD is the most common hallucinogen and is one of the most potent mood-altering chemicals. Although not as easily made as GHB, LSD can be manufactured at home and the recipe is also sold on the Internet. Produced in liquid or crystal form, with the liquid mixed with binding agents and made into pills (microdots) or placed in thin gelatin squares, breath mints, sugar cubes, dissolved and diluted and applied to paper, the common method of production of LSD is blotter paper. And depending on the designs on the paper, LSD can have as many as 80 different names.

There has been a decrease in LSD related emergencies and that could be contributed to the lower potency of LSD today then when it was rampant in the 1960's. The effects of LSD produced are hallucinations, panic attacks, confusions, flashbacks, suspicions and anxiety and LSD is listed as a Schedule I drug.

OxyContin

Another drug that Ecstasy and other club drugs are beginning to be mixed with is OxyContin, a synthetic prescription opiate prescribed for severe and persistent pain. OxyContin is the trade name for a high-dose, 12-hour time released form of oxycodone. OxyContin is a Schedule II drug and is also the active ingredient in other Schedule II prescription drugs such as Percodan, Percocet and Tylox.

Due to its heroin-like effect, OxyContin is often referred to as "Hillbilly heroin" or "poor man's heroin" and initial abuse of the drug is usually found in low rural areas²¹. OxyContin is referred to as "Oxy" or "OC's" and the pills are referred to as "blues", "forties" and "horse pills". However, because it is a legal prescription (often obtained illegally by fraudulent prescriptions, the commonest way the drug is obtained), OxyContin is high on the list of legal drugs that are illegitimately obtained, sold illicitly, and included in many pharmaceutical robberies. So widespread is the demand, that many patients go "doctor shopping", going from doctor to doctor complaining of chronic pain in order to obtain a prescription.

In Miami, some organized diversion efforts are conducted by drug dealers who, first recruit patients from substance abuse clinics and mental health treatment facilities, and then use vans to drive the patients to doctors who prescribe OxyContin.²² After the prescription is filled, patients return to the vehicles, give most of the pills to the dealers, and keep a few pills for themselves. Dealers often target and recruit methadone and other treatment clients because of their vulnerability to addiction.

OxyContin is prescribed in tablet form, and abusers will chew the pill or, for faster results, grind it into a powder to be injected or snorted. "Oxycotton", the name used by people who inject the OxyContin pill, is dissolved and/or cook in water and injected through a cotton ball. Abusers begin using drugs occasionally and/or on weekends, but

²¹ Executive Office of The President, National Drug Policy 2001

²² Hall, James N, Up front Drug Information Center, Miami Florida



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they often quickly progress to daily use. Heroin users may take OxyContin as a substitute for heroin when heroin is scarce, or use it to tide them over until their next hit of heroin or dose of methadone. In addition, some OxyContin users prefer using this drug over heroin because they feel it to be more potent. Many abusers may not use heroin, but may start using heroin if they cannot get OxyContin.

A Schedule II substance, OxyContin is mostly used by white males between the ages of 13-30, with low- to middle-class social economic status. OxyContin is sold for approximately \$1-\$2 per milligram, and is usually sold primarily in 40-milligram tablets, then in 20- or 80-milligram tablets.

CONCLUSION

According to the Drug Abuse Warning Network (DAWN), most emergency department (ED) episodes involving club drugs also involve other drugs. More than 70% of ED episodes involving GHB, Ketamine, MDMA or Rohypnol involve more than one substance. Alcohol is the most frequently substance used with club drugs.²³ The common wisdom is that club drugs tend primarily to be used by young people and DAWN data supports this view.²⁴ Whereas 29% of DAWN ED cases overall involve patients age 25 and under, at least 80% of all Ketamine, LSD, MDMA and Rohypnol mentions, and 59% of GHB mentions, are attributed to ED patients 25 and under. White patients account for 61% of all ED episodes, followed by 26% black, and 11% Hispanic. With the exception of Rohypnol, the majority (69-80%) of ED mentions of club drugs involve a white, non-Hispanic youth population. However, a disproportionate share (56%) of Rohypnol ED mentions involves Hispanic patients.

The long lasting effects of club drugs are unknown at this time. There have been tests done on animals that have had persistent effects for many years; thus, the long-term effects that these drugs could cause on humans may include, but not be limited to, memory impairments, disrupted sleep cycles, mood disorders such as anxiety, and depression.

While Ecstasy is not considered the most widely used drug or the one that has the most serious consequences by law enforcement, it is considered the second most widely abused drug and the most widely used club drug, with GHB being the second most widely used club drug²⁵. In this the beginning of the 21st Century, the presence of Club drugs, and people who make a living off the people who use club drugs, are even more prevalent and vicious.

“Club Drugs” are addictive, deadly, and rampant, and it appears that the people who are willing to provide supply on demand will not cease to target our youth. In addition, statistics have shown that adults who first used drugs at a young age were more likely to be dependent on drugs than adults who initiated use at a later age.²⁶ In this light, therefore, club drugs may have even more serious consequences than other drugs. Club drugs are not just used for forms of entertainment but it is used for criminal activity, including rape, and with rape comes the risk of unwanted pregnancy, sexually transmitted infections (STIs), and HIV, the latter which may result

²³ SAMSHA, Office of Applied Studies 1999

²⁴ The DAWN Report: Club Drugs December 2000

²⁵ Office of National Drug Control Policy, Washington DC

²⁶ Summary of findings, 1999 National Household Survey. DHHS publication No. (SMA) 00-3466



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in an increase in AIDS cases. It is important, therefore, that our youth are not exposed to or enticed to use drugs at an early age.

To combat this potentially lethal epidemic, there are things that all of us can do to assist in the reduction of supply and demand. First, it is important that we all learn all we can about club and other drugs being manufactured and targeted toward youth. Parents, school personnel, friends and families need to be educated on what the signs are and what to look for when a person is using drugs. It is also important that people do not just turn their backs on our youth, but do what they can to become an integral part of a youth's life. Everyone has a voice and can be an advocate, and the media in particular is a great means for getting the messages to our youth and the community.

There will always be people who will take advantage of someone's kindness and weakness, and their inexperience with life. We need to work together, therefore, to build the strengths of our youth and community. "Club Drugs" are here now, and just as marijuana, heroin, and LSD have taken their toll, if we don't educate our children and show love to them, these Club Drugs will be the beginning of manufactured mood and mind altering chemicals that will overtake the lives of our most precious gift, our youth!

SUGGESTED ADDITIONAL READING

American Psychiatric Association, *Diagnostic and Statistical Manual of Mental Disorders*, Fourth Edition (DSM-IV). Washington DC: American Psychiatric Association, 1994.

J. Kinney and G. Leaton, *Loosening the Grip*, Fifth Edition. St. Louis, Missouri: Mosby-Year Book, Inc, 1995.

A. Radcliffe, P. Rush, C. Ferror Sites, and J. Cruse, *The Pharmar's Almanac*. Denver, Colorado: MAC Publishing.

ACKNOWLEDGEMENTS

This course material was prepared by Breining Institute graduate student V. Vanessa Brown-Lindsey, RAS, candidate for the Master of Arts in Addictive Disorders degree. Ms. Brown-Lindsey is a Registered Addiction Specialist, and is the Chief Executive Officer of *Another Choice, Another Chance*, an outpatient drug and alcohol counseling agency. Breining Institute has edited the original material for the purpose of presentation in this course.



CONTINUING EDUCATION (CE) EXAMINATION QUESTIONS

Course No. CE1303P1 – Illicit Drug Abuse: “Traditional” and “Designer” Drugs

You are encouraged to refer to the Course Material when answering these questions. Choose the best answer based upon the information contained within the Course Material. Answers which are not consistent with the information provided within the Course Material will be marked incorrect. A score of 70% correct answers is required to receive Continuing Education credit. GOOD LUCK!

QUESTIONS

1. Many of the “old” drugs are natural plant extracts and derivatives, while the “new” drugs are:
 - a. Directly from the seeds of plants.
 - b. Manufactured and/or are synthetic.
 - c. Substantially more expensive.
 - d. None of the above.

2. The vast majority of heroin users are:
 - a. 13 to 21 years old.
 - b. Under 25 years old.
 - c. Over 30 years old.
 - d. Over 40 years old.

3. DAWN reports that Emergency Department statistics show that most “club drug” emergency cases involve users who are:
 - a. 13 to 21 years old.
 - b. Under 25 years old.
 - c. Over 30 years old.
 - d. Over 40 years old.

4. The most common “club drug” combination is:
 - a. Ecstasy and alcohol.
 - b. Ecstasy and marijuana.
 - c. Ecstasy and Xanax.
 - d. Ecstasy and LSD.

5. An MDMA overdose includes which of the following:
 - a. Rapid heartbeat.
 - b. Muscle cramps.
 - c. Loss of consciousness and/or seizures.
 - d. All of the above.

6. The most critical, life-threatening MDMA effects are:
 - a. Hypothermia or excessive body heat.
 - b. Hyperthermia or low body heat.
 - c. Both A and B above.
 - d. Neither A nor B above.



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7. Rohypnol can cause profound “anterograde amnesia”:
 - a. Which means that individuals may not remember events that they experienced while under the effects of the drug.
 - b. Which may be why one of the street names is “the forget-me pill,” reportedly used in sexual assaults.
 - c. Both A and B above.
 - d. Neither A nor B above.

8. GBH:
 - a. Has, in the past, been available as an over-the-counter drug, displayed in health food stores to promote sleep, slow the aging process and build muscle.
 - b. Can produce euphoric effects and/or unconsciousness, and is a culprit in “date rape” cases.
 - c. Is odorless (and, thus, more difficult to detect), inexpensive, and relatively easy to produce.
 - d. All of the above.

9. OxyContin:
 - a. Is available legally through prescription, and is prescribed for severe and persistent pain.
 - b. Is subject to organized efforts to obtain the drug illegally from doctors.
 - c. Both A and B above.
 - d. Neither A nor B above.

10. While Ecstasy is not considered the most widely used drug:
 - a. It is the one considered to have the most serious consequences by law enforcement.
 - b. It is considered the most widely used club drug.
 - c. It is considered the second most widely used club drug.
 - d. None of the above.

This is a ten-question examination. Answer Questions 1 through 10 for full CE credit in this course. Questions 11 through 21 have been omitted.



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Answers (circle correct answer):

- | | | |
|------------|-------------|-------------|
| 1. A B C D | 8. A B C D | 15. A B C D |
| 2. A B C D | 9. A B C D | 16. A B C D |
| 3. A B C D | 10. A B C D | 17. A B C D |
| 4. A B C D | 11. A B C D | 18. A B C D |
| 5. A B C D | 12. A B C D | 19. A B C D |
| 6. A B C D | 13. A B C D | 20. A B C D |
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