

# DRUGS

## *of Abuse*

*An Identification Guide*



**Sunshine Coast  
Health Centre**

Residential Addiction &  
Mental Health Treatment Services

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**Cannabis:**  
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Cannabis  
sativa plant



**Depressants:**  
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Black tar  
heroin  
*Source: DEA*



**Hallucinogens:**  
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LSD on blotter  
paper



**Stimulants:**  
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Powder meth-  
amphetamine  
in foil  
*Source: DEA*

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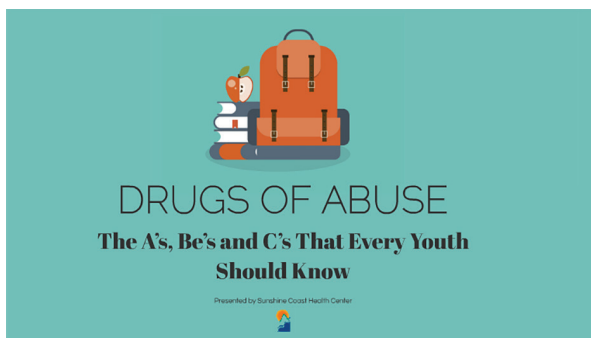
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# DRUG IDENTIFICATION GUIDE

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## SOURCES OF DATA

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## Disclaimer

This guide is intended to provide you, the reader, with information on drugs of abuse. Readers should be aware that this publication is not intended and should not be construed to be legal advice. Sunshine Coast Health Centre is not responsible for any problems that may develop from the use or misuse of the information provided in this guide.

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## WHY THIS GUIDE?

*"An ounce of prevention is worth a pound of cure."  
Benjamin Franklin*

The key to effective prevention is knowledge. This guide is designed to educate families, employers, and educators on the vast array of abused drugs now commonplace in our communities. Some of these drugs, such as inhalants, can be found in any supermarket or hardware store. Prescription drugs have legitimate medical applications, but are being increasingly diverted for illicit purposes. Other "hardcore" drugs, such as crack cocaine, have become regular features in many schools, work sites, and homes across North America.

### When Drug Use Becomes Drug Dependence

When drugs are used solely to create intensely pleasurable feelings, it is called drug use. Tolerance to the drugs' effects occurs with long-term use and users must take higher doses to achieve the same or similar effects as experienced initially.

Prolonged drug use can lead to physical dependence, psychological dependence, or both. Physical dependence means that the absence of the drug creates discomfort (withdrawal) until more of the drug is administered. Psychological dependence refers to a perceived "need" or "craving" for a drug. While physical dependence is typically treated in a few days, treatment for psychological dependence is much longer.

### Drug Categories Explained

There are four categories of drugs: hallucinogens, depressants, stimulants, and anabolic steroids. All controlled substances have the potential to be misused. With the exception of anabolic steroids, controlled substances are used to alter mood, thought, and feeling through their effect on the central nervous system (brain and spinal cord).

Drugs are distinguished by their effect on the central nervous system (depressants or stimulants), their primary ingredient (the poppy plant for opioids, testosterone for steroids), and how they are used (inhalants). Individual drugs within a class can have differing medi-

cal uses, effect duration, or methods of ingestion (oral, injected, smoked, or snorted). However, drugs within a particular class typically share similar effects, overdose risk, and withdrawal symptoms.

Although considered a hallucinogen, the prevalence and unique features of cannabis warrant a separate section. Inhalants are not controlled substances because of their widespread use for a number of legitimate purposes, but are discussed in this guide due to their abuse potential. Families and educators may want to pay particular attention to inhalants since most users are youth.

Please note we have organized substances listed in this guide by categories (referred to as classes) to improve individual and business use. These classes should not be confused with Canada's *Schedule of Drugs* under the *Controlled Drugs and Substances Act*.

### Prevalence of Drug Use in Canada

Of Canadians 15 years or older, a 2011 survey revealed that alcohol is, by far, the drug of choice with 78% reporting alcohol use in the past year. Of past-year drinkers, 17% are considered high-risk drinkers. Cannabis is the most widely used illicit drug followed in order by LSD and hallucinogens, cocaine and crack, and speed. Rates of past-year use of cannabis decreased in 2011 from 2004, going from 14.1% to 9.1%. Cocaine and crack use also decreased from 1.9% in 2004 to .9% in 2011. Rates of past-year use for all other substances (including steroids and inhalants) remained below 1 percent (Source: CADUMS, 2011).

In Canada, tobacco is the leading preventable cause of death. Its exclusion from this guide is not intended to minimize its impact on the well-being of Canadians.

# CLASS 1

## HALLUCINOGENS

### PCP (PHENCYCLIDINE)

*Angel dust, elephant, hog, rocket fuel (killer weed, super-grass: PCP mixed with marijuana).*

A white crystalline powder readily soluble in water or alcohol with a distinctive bitter chemical taste. Available in tablets, capsules, liquids, crystals, pastes, and coloured powders. Is frequently passed off as LSD and snorted, smoked, or eaten. When smoked, PCP is often used with a leafy material such as mint, parsley, oregano, tobacco or marijuana. PCP may be used unknowingly since it is often an additive in other drugs.

**Effects:** PCP is a “dissociative drug,” meaning it distorts perceptions of sight and sound and produces feelings of detachment from the environment and self. Most first-time users experience a “bad trip” and stop. Low dose effects include shallow breathing, flushing, and profuse sweating. High dose effects are nausea, vomiting, blurred vision, flicking up and down of the eyes, drooling, loss of balance, and dizziness. Speech is often sparse and garbled. Accidental death can result from drug-induced confusion. Long-term effects include:

- Addiction
- Memory loss
- Cognitive difficulties
- Depression
- Weight loss

Symptoms can persist up to a year after cessation of PCP use. Mood disorders also have been reported. Flashbacks may occur (see LSD section).

Sources: DEA; NIDA InfoFacts



(L) PCP in foil wrappers. (R) PCP tablets. Source: DEA

### KETAMINE

*Ketaset®, Ketalar® Cat valium, K, special-K, vitamin K.*

Manufactured as an injectable liquid or white powder sold in small baggies or gel capsules. In illicit use Ketamine is evaporated to form a powder that is snorted, swallowed, or injected. Ketamine is odorless and tasteless, so it can be added to beverages without being detected. Induces amnesia and is commonly used as a “date rape” drug. Popular at “raves” and night clubs.

**Effects:** A dissociative drug similar to PCP, but with milder respiratory depression, less confusion, irrationality and violent behaviour. Large doses may result in intense, unpleasant visual and auditory hallucinations. Since Ketamine is often mixed with other substances, it can be hard to determine the long-term effects. Common long-term effects can include:

- Bladder pain and ulcers
- Kidney problems
- Stomach pain
- Depression
- Poor memory



Ketamine is manufactured as a liquid or powder. Source: DEA



(T) LSD caps contain bright-coloured powder to attract young people. (B) Coloured LSD applied to sugar cubes. Source: DEA

## LSD (LYSERGIC ACID DIETHYLAMIDE)

*Blotter, cid, boomers, sunshine, doses, hits, microdot, sugar cubes, tabs, trips, or named after the image on the blotter paper.*

Manufactured from lysergic acid in ergot, a fungus that grows on rye and other grains. LSD is usually applied to "blotter" paper (paper perforated into small squares). The squares or "tabs" may be coloured or have images printed on them. Liquid LSD is a clear liquid, usually in a small container, tube or flask. LSD can also be found in thin squares of gelatin or applied to sugar cubes. Gelatin and liquid can be put in the eyes. LSD is taken orally.

### Effects:

- Felt within an hour and can last 2-12 hours
- Colours can appear brighter and objects more sharply defined
- Changes in perception of time and distance
- Impaired short-term memory
- Extreme mood swings

### Physical Effects Include:

- Dilated pupils
- Higher body temperature
- Increased heart rate and blood pressure
- Sweating

- Loss of appetite
- Sleeplessness
- Dry mouth
- Tremors

Drug-induced confusion can cause accidental death.

Long-term effects of some LSD users can include sudden flashbacks and long-lasting psychoses such as schizophrenia or depression.

Sources: DEA; NIDA InfoFacts

## MDMA

*Ecstasy, Adam, E, roll, X, XTC, hug drug, CK, M&Ms.*

A synthetic drug with amphetamine-like and hallucinogenic properties. MDMA comes in a tablet form that is often branded (e.g. Playboy bunnies, Nike swoosh, CK). Considered a "club drug" as MDMA is often taken at raves, clubs, and other parties. MDMA is also available as a brown/beige powder in small baggies or gel capsules.

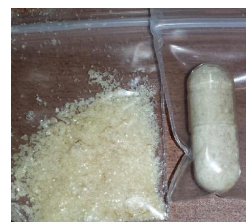
Users report intensely pleasurable effects including enhanced sense of self-confidence, energy, and sociability.

### Other Effects:

- Involuntary teeth clenching
- Loss of inhibitions
- Transfixion on sights and sounds
- Nausea, blurred vision, chills and/or sweating
- Increases in heart rate and blood pressure
- Seizures
- Death from kidney or heart failure due to dehydration or hyperthermia

After-effects can include sleep problems, anxiety, and depression.

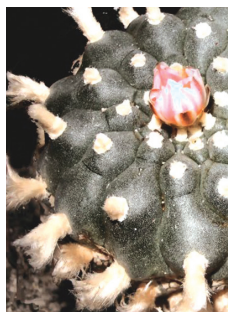
Long-term, repeated use may damage the cells that produce Serotonin (regulates mood, appetite, pain, learning and memory). May disrupt or interfere with memory. Sources: DEA; NIDA InfoFacts



Ecstasy tablets and as a beige/white powder. Source: DEA

## MESCALINE OR PEYOTE

*Buttons, cactus, mesc.*



Peyote cactus.

Peyote is a small cactus whose principal active ingredient is mescaline. Mescaline can be extracted from peyote or produced synthetically. Usually ingested orally as a powder, tablet, capsule or liquid. Most peyote and mescaline sold in Canada is actually PCP or LSD.

Peyote "buttons" are generally chewed or ground up and smoked.

**Effects:** Effects appear slowly, but can last 10–18 hours. The causes of these effects, which can occur after a single use, are not known. Most effects are similar to LSD.

## PSILOCYBIN

*Magic Mushrooms, mushrooms, shrooms.*

Psilocybin is the hallucinogenic principle contained in certain mushrooms. Psilocybin is structurally similar to serotonin and produces its effects by disrupting normal functioning of the serotonin system. Frequently, Psilocybin is sold in Canada as PCP or LSD. Mushrooms are typically eaten or brewed and consumed as tea, but

they can also be sniffed, smoked, or injected. Mushroom powder is often mixed with fruit juice.

**Effects:** Once ingested, mushrooms generally cause feelings of nausea before the desired mental effects appear. Other effects can include nervousness, paranoia, and distorted senses.

*Source: DEA*

## STP/DOM/MDA

These are chemical variations of amphetamines. They're produced in clandestine labs with no medical use. DOM, nicknamed STP (acronym for "Serenity, Tranquility, and Peace"), is usually sold as white or off-white powder that is ingested, sniffed, or injected. MDA is similar to MDMA (ecstasy) and is usually sold as a brown or white powder, capsule, or amber liquid, which are taken orally.

**Effects:** DOM may last 16 to 24 hours. Small doses produce mild euphoria and talkativeness, while higher doses produce LSD like effects. Adverse reactions may result in intense anxiety, panic, and psychosis.

MDA effects occur within an hour and last up to 8 hours. Produces a sense of well-being and heightened emotions. Pupils dilate and nose and throat become dry. Higher doses have effects similar to LSD. Overdose can cause death.

*Source: Health Canada*



Whole dried psilocybin.

**PMA (PARAMETHOXYAMPHETAMINE)***Death, Mitsubishi double stack, chicken yellow.*

PMA is sold in tablets or capsules containing beige, white or pink powder and often misrepresented as MDA. Made in clandestine labs with no medical use. Looks similar to MDMA. PMA is typically taken orally, but, although uncommon, may be inhaled or injected.

**Effects:** Similar to MDA and mescaline, though far more toxic. Symptoms include:

- Laboured breathing
- Muscle spasms
- High fever
- Vomiting
- Erratic eye movement

Moderate to high doses can lead to convulsions, coma and death. One of the most dangerous hallucinogens. Long-term effects are unknown.

Source: DEA

**DMT (DIMETHYLTRYPTAMINE)***Businessman's trip.*

A hallucinogenic tryptamine. Usually parsley is soaked in DMT, then dried and smoked. Can also be injected. Made in clandestine labs.

**Effects:** Similar effect to LSD, DOM, and MDMA. Hallucinogenic effects last for about 45 to 60 minutes so the experience is called a "businessman's trip." Snorting hastens effect. May produce nausea, chills, trembling, cramps, muscle tension, and shallow breathing in higher doses. Long-term effects are unknown. Source: DEA

Over the counter drugs such as Robitussin® (left) and Coricidin® (right) contain DXM.



2C-B tablet.

Source: Wikipedia

**2C-B OR DOB***Nexus, bromo, toonies, herox, synergy.*

Psychoactive or hallucinogenic compounds similar to mescaline. Produced in clandestine labs. Available as powder, purple/red or white pills, yellow capsules, or blotter papers (similar to LSD) that are taken orally or snorted. Structurally similar to DOM and has been sold as MDMA and LSD. No medical use.

**Effects:**

- Intense hallucinations
- Increased heartbeat
- Nausea
- Raised blood pressure
- Vomiting
- Confusion or disorientation
- Diarrhea
- Inability to concentrate
- Gas
- Dehydration
- Delirium
- Muscle tension & spasms
- Headaches

Long-term effects of both 2C-B or DOB are unknown.

Source: DEA

**DXM (DEXTROMETHORPHAN)***Dex, robo, DM, velvet, skittles, triple C, tussin.*

DXM is a cough-suppressing ingredient found in a variety of over-the-counter cold and cough medications. Available as a syrup, tablet, or gel cap that is usually swallowed. DXM can also be purchased in powder form, often over the internet.





Salvia Divinorum.

**Effects:** At higher doses, Dextromethorphan produces dissociative effects similar to PCP and Ketamine. Long-term effects include liver damage due to the consumption of large quantities of acetaminophen.

Source: DEA

## 5-MEO-DIPT

*Foxy methoxy, foxy, yum yum, roxy, dip foxy, muffy, five.*

A hallucinogenic tryptamine similar to Psilocybin. Usually found as tablets with imprints similar to ecstasy (heart, spider, alien heads, etc) or as capsules containing bright-coloured powder. Tablets are swallowed while capsule powders can be swallowed, smoked, or snorted. Popular among young partygoers.

### Effects:

- Hallucinations
- Euphoria
- Visual and auditory distortions
- Dilated pupils
- Talkativeness
- Nausea
- Vomiting
- Diarrhea
- Muscle tension
- Jaw clenching

Source: Center for Substance Abuse Research

## SALVIA DIVINORUM

*Diviner's sage, magic mint, sage of the seers, salvia.*

A hallucinogenic plant native to northeastern Mexico that is part of the mint family. Dried leaves can be smoked/vaporized then inhaled like marijuana or chewed then swallowed.

**Effects:** Can last up to 15 minutes when smoked and 1–2 hours when chewed.

### Common effects include:

- Hallucinations
- Slurred Speech
- Dizziness & nausea
- Decreased heart rate
- Lack of Coordination
- Chills

Source: Center for Substance Abuse Research

## 1-(3-TRIFLUOROMETHYLPHENYL) PIPRAZINE (TFMPP)

*Legal E, legal X, A2.*

A hallucinogenic piperazine typically used as an anti-parasitic (de-worming) agent. Usually found as tablets with imprints similar to ecstasy tablets (heart, spider, alien heads, etc) or in capsules containing an off-white powder.

**Effects:** Similar to MDMA, but taken in larger doses promotes hallucinogenic reactions. Source: DEA

# CLASS 2

## DEPRESSANTS

### OPIOID PAIN RELIEVERS

**Acetaminophen Oxycodone:** Tylox®

**Acetaminophen Hydrocodone:** Lorcet® Plus, Lortab®

**Codeine:** Codeine Contin®, Atasol®, Fiorinal®, Tylenol®

**Morphine:** MS-Contin®, Oramorph®

**Meperiding:** Demerol®

**Hydromorphone:** Dilaudid®, Hydromorph Contin®

**Hydrocodone:** Novahistex DH®, Vicodin®

**Oxycodone:** Percocet®, Oxycontin®, Oxyneo®

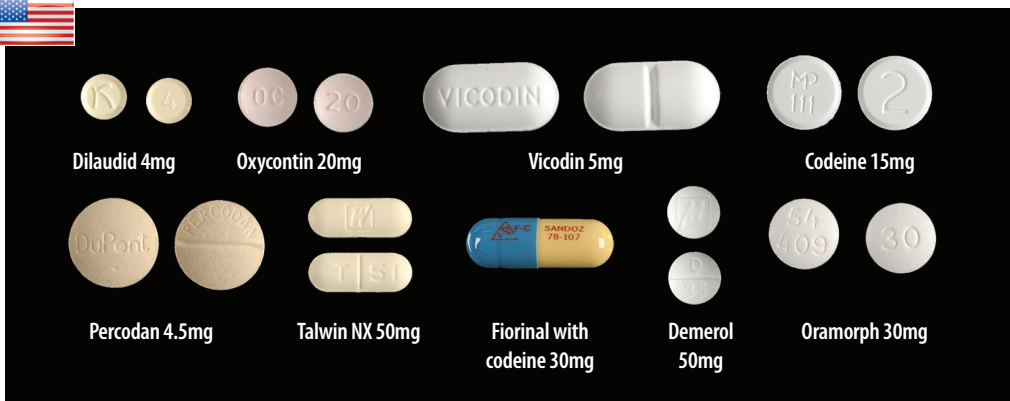
**Pentazocine:** Talwin®

**Fentanyl:** Duragesic®

**Propoxyphene:** Darvon®, Darvocet®

**Tramadol:** Tramacet™, Zytram XL®

Opioids are commonly prescribed as pain relievers. Sometimes referred to as narcotics, opioids effectively change the way a person experiences pain. Morphine



Source: DEA

is often used before or after surgery to alleviate severe pain. Codeine is used for milder pain and as a cough suppressant. Other examples of opioids that are often prescribed include oxycodone, hydrocodone, hydromorphone (a long-acting painkiller), and meperidine (used before and after surgery). Pentazocine produces effects similar to oxycodone.

When misused, prescription pain relievers pills are crushed to remove the sustained-release coating. This allows for a rapid release of the medication and causes a rush of euphoria similar to heroin. Crushed tablets can be orally ingested, sniffed, or dissolved in water and injected.

Recently, companies have begun changing the formula of certain opioid pain relievers to prevent misuse. For example, Oxyne<sup>®</sup> (Oxycodone) becomes a gummy substance when tampered with so that users cannot inject or snort. Users, however, have reported ways around this change (e.g. removing the pill's outer coating which causes the gummy-like substance). This change has also not necessarily led to reduced misuse or addiction, but increased use of illegally obtained prescriptions (e.g. Fentanyl) and unregulated substances (e.g. heroin).

## Effects:

### Low Doses

- Dizziness
- Drowsiness
- Droopy eyelids
- Impaired concentration
- Nausea
- Slowed breathing

### Large Doses

- Constricted pupils
- Cold, moist, and bluish skin
- Slowed or stopped breathing (may result in death)

When these drugs are injected intravenously, there is a surge of pleasure that surpasses hunger, pain, and sexual urges. Taken orally, the effects are felt more gradually.

### Long-term effects include:

- Severe constipation
- Constricted pupils
- Moodiness
- Menstrual irregularities

Tolerance and physical dependence may develop fairly rapidly with higher doses needed to maintain intensity



Actual photo of droopy eyes due to opioid use.

Source: California Highway Patrol



Opium can be swallowed or smoked. Source: DEA

of effects. Withdrawal symptoms include:

- Severe anxiety
- Insomnia
- Muscle and bone pain
- Diarrhea
- Vomiting
- Profuse sweating
- Tremors
- Cold flashes with goose bumps
- Kicking movements

These symptoms can occur 4-5 hours after last dose. The acute symptoms reach peak intensity after 36 to 72 hours and are usually over within 7 to 10 days.

Sources: DEA; NIDA InfoFacts.

## OPIUM

*Big O, black stuff, block.*

An opiate or narcotic made from the white liquid in the poppy plant with no current medical use. Used commercially as raw material for production of morphine and codeine. Appears as a fine brownish powder, black/brown tar-like substance, or liquid. Usually eaten or smoked.

**Effects:** see prescription pain relievers.

Source: DEA

## HEROIN

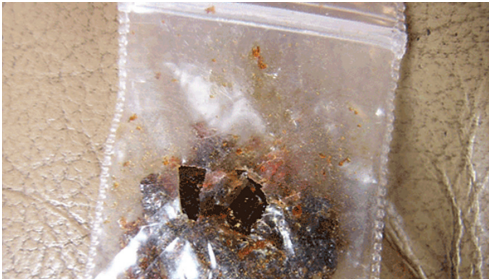
*Big H, black tar, brown sugar, dope, horse, junk, mud, smack.*

Derived from morphine and originally created as a cure for opium addiction. Heroin is an effective painkiller but,

since highly addictive, has limited medical use. Heroin from Asia is typically a powder, which can vary in colour from a white to dark brown powder. Black tar heroin, is often sold in chunks weighing about an ounce and has the colour and consistency of roofing tar or coal.



Heroin powder.



A baggie containing black tar heroin. Source: California Highway Patrol

Heroin can be used in a variety of ways depending on user preference and the purity of the drug. Heroin can be injected into a vein ("mainlining") or a muscle, smoked in a water pipe or standard pipe, mixed in a marijuana joint or regular cigarette, inhaled as smoke through a straw ("chasing the dragon"), or snorted as powder. Heroin can also be injected under the skin ("skin popping"). Heroin injection can be done either by (1) the traditional method of heating heroin mixed with water in a spoon over a flame ("cooking") or by (2) dropping the heroin powder and water directly into a syringe, shaking the mixture to expedite dissolving of solids, and applying flame from a lighter directly to the syringe ("shake and bake").

At safe-injection sites, a typical kit supplied to the heroin user will include: (1) a tourniquet (blue band) used to raise arm veins; (2) a blue package of distilled water



Heroin users often have "pinned" or constricted pupils that do not respond to poor lighting. Other depressants often have similar effects.



Track marks from an infection that has spread under the skin due to needle injection.



Typical supplies provided at a safe-injection site include (from left to right): metal vestibule (or "cooker"), alcohol swab, water pack (blue container), rubber tie, and insulin syringe (needle). Not visible is the small cotton filter that is placed in the cooker to prevent solids from being drawn into the needle.

to dissolve the heroin; (3) a small aluminum vestibule to mix, heat, and hold the mixture; (4) cotton filters to prevent impurities being drawn into the needle; (5) matches; (6) candles; and (7) an insulin syringe.

**Effects:** Similar to prescription pain relievers, but riskier because the purity and contents of dose is not known to the user. Heroin users often inject intravenously, which increases the risk of harm due to (1) the substance (injecting any drug increases the likelihood of dependence,



An "8-ball" of heroin.

experiencing psychosis, and overdose), (2) the injecting behaviour (damage to skin and veins such as infections, scars, abscesses, ulcers, collapsing veins, and possible stroke if injecting into the neck), and (3) sharing injection equipment such as needles/syringes, spoons, and filters (greater likelihood of spreading blood borne virus infections such as Hepatitis B, Hepatitis C, and HIV). Long-term effects include tolerance, withdrawal, and physical dependence (see prescription pain relievers).

Sources: DEA; NIDA InfoFacts, Heroin, April 2006

## FENTANYL

Duragesic®, ratio-Fentanyl, Actiq® *Lethal injection, drop dead, fat Albert, the bomb, incredible hulk, greenies.*

Used extensively for anaesthesia and analgesia. Duragesic® and ratio-Fentanyl are transdermal patches used in chronic pain management. Actiq® is intended for opiate-tolerant individuals and is effective in treating breakthrough pain in cancer patients. Carfentanyl (Wildnil®) is used in veterinary practice to immobilize certain large animals. Fentanyl is also available as a white powder that is often mixed with other substances to resemble prescription opioids such as Oxycodone or Alprazolam. Can be smoked or snorted.

With increased restrictions and changes in accessing prescription opioids, such as Oxycodone, illicit Fentanyl

use has spiked in Canada. It is used knowingly and unknowingly since Fentanyl is tasteless and scentless. Substances, such as ecstasy, marijuana, and heroin, are often found laced with Fentanyl. Fentanyl's strength and ability to go undetected in other substances has resulted in a high percentage of overdoses and deaths among users.

**Effects:** See opioid pain relievers.

## METHADONE

Dolophine®

Can be legally prescribed in Canada by authorized doctors for the treatment of narcotic addiction and chronic pain management. Methadose™, a stronger formula (10 mg/ml), has been replacing Methadone (1 mg/ml) since February 2014.

**Short-term Effects:** Can last up to 24 hours, thereby permitting once-a-day oral administration for heroin detoxification and maintenance programs.

**Long-term Effects:** Prolonged use can result in tolerance and dependence. Withdrawal is slower and less severe, but more prolonged than heroin withdrawal.

## SUBOXONE (BUPRENORPHINE/NALOXONE)

Suboxone is a medication-assisted treatment for opioid addiction. It is a combination of two medications—buprenorphine, a partial opioid agonist, and naloxone, an opioid antagonist. It is considered safer and more stable than Methadone because of its high affinity—it will replace other opioids if forced to compete with them for receptors in the brain—and ceiling effect—taking more than prescribed will not result in a full opioid effect or stronger high. Suboxone is prescribed in pill form



A variety of prescription tranquilizers and sleeping pills. Source: DEA

and taken sublingually (dissolves underneath tongue). A soluble film form is also available in the US. Unlike Methadone, Suboxone can be taken home and does not require individuals visit a pharmacy daily to take it. This makes it a more desirable and practical choice for many.

**Effects:** Mouth numbness, mouth redness, mouth pain, headache, dizziness, numbness or tingling, drowsiness, sleep problems (insomnia), stomach pain, vomiting, constipation, feeling drunk, or trouble concentrating.

## W-18

W-18 is an unregulated man-made substance that was developed in the 1980s. It is not currently used or prescribed by physicians. There is currently disagreement on whether W-18 is an opioid as it has slightly different effects. Because there is no regulated use of W-18, there is no official form it appears as. Current reports show that W-18 comes in a loose white powder similar to heroin and Fentanyl and is most often mixed in with other illicit opioids.

**Effects:** Similar to Opioid Pain Relievers (p. 13)

## CARFENTANIL

Carfentanyl, Wildnil™

Carfentanyl is currently the most potent commercially-used opioid. It is a synthetic opioid 100 times stronger than Fentanyl. It is used most commonly in veterinary practices for large animals (e.g. elephant tranquilizer). Carfentanyl is not considered appropriate or safe for human use.

**Effects:** See Opioid Pain Relievers

## PRESCRIPTION TRANQUILIZERS & SLEEPING PILLS

### Benzodiazepines used as tranquilizers:

Diazepam (Valium®), Oxazepam (Serax®), Lorazepam (Ativan®), Alprazolam (Xanax®)

**Benzodiazepines used as sedatives:** Temazepam (Restoril®); Flurazepam (Dalmane®); Triazolam (Halcion®); Flunitrazepam (Rohypnol®) *Roofies, rope, the forget pill.*

Benzodiazepines are prescription medications that slow down brain function. They produce calm without sleep. Benzodiazepines can also be used to aid sleep, but may

produce morning and daytime drowsiness. Benzodiazepines have replaced barbiturates in the treatment of many disorders. Benzodiazepines are usually prescribed to treat anxiety and nervousness, relax muscles, and control certain types of muscle spasms. Benzodiazepines are recommended for short-term use only since users can become dependent.

Rohypnol is also a benzodiazepine used as a sleeping pill. While not approved in Canada or the United States, it is smuggled in primarily from Mexico. Rohypnol is odourless, colourless, and tasteless and often used as a “date rape” drug because it produces sedation and memory loss.

Benzodiazepines are very dangerous when consumed with other depressants such as alcohol.

Sources: DEA and NIDA InfoFacts

## GHB

*G, Georgia home boy, grievous bodily harm, liquid ecstasy.*

GHB is predominantly a depressant and produced as a clear liquid, white powder, tablet, or capsule. It is colorless and odourless. GHB has a salty taste, but is virtually undetectable when diluted in liquids. GHB is often manufactured in homes with recipes and kits found and purchased on the Internet.

GHB is a very thick liquid that forms air bubbles when shaken. How thick a liquid (usually a beverage such as fruit juice) is and how many air bubbles form can allow users to determine how much (if any) GHB is present.

**Effects:** At lower doses, GHB can relieve anxiety and produce relaxation. Combining use with other drugs such as alcohol can result in nausea and difficulty breathing. GHB may also produce withdrawal effects including insomnia, anxiety, tremors, and sweating.

Sources: DEA; NIDA InfoFacts

## INHALANTS

*Air blast, bolt, boppers, buzz bomb, climax, glading (using inhalant), gluey (person who sniffs or inhales glue), hippie crack, kick, medusa, moon gas, oz, poor man's pot, poppers, quick silver, rush, shoot the breeze.*

Inhalants are ordinary household and commercial



(Far left) Fumes from rags soaked with liquid inhalants are inhaled from a bag in a process known as “huffing.” (Left) Like contact cement, many inhalants are inhaled directly from their original container.

products used in one of three ways: (1) inhaled directly from its container (“sniffing” or “snorting”), (2) placed in a substance-soaked rag over nose and mouth and inhaled (“huffing”), or (3) poured into a plastic bag where the fumes are inhaled (“bagging”). Aerosols and other pressurized liquids may be inhaled directly from the container or out of an alternative container such as a balloon filled with nitrous oxide. Some volatile substances release intoxicating vapors when heated. Many substances leave tell-tale stains or odors on clothing. Their easy accessibility, low cost, and ease of concealment makes them popular among youth. There are hundreds of household products available today that can be misused as inhalants. Examples of products kids use to get high include model airplane glue, nail polish remover, cleaning fluids, hair spray, gasoline, the propellant in aerosol whipped cream, spray paint, and cooking spray.

**Effects:** Within seconds of inhalation, the user experiences intoxication along with other effects similar to those produced by alcohol. Alcohol-like effects may include slurred speech, poor coordination, dizziness, confusion, and delirium. Nausea, vomiting, light-headedness, hallucinations, and delusions are other common side effects.

Sources: DEA; NIDA InfoFacts

## ALCOHOL (ETHYL ALCOHOL OR ETHANOL)

*Beer, spirits, wine, coolers, hard liquor, liqueurs, booze, moonshine, shooters, brew, hooch.*

Alcohol is produced naturally by fermentation of fruits, vegetables, or grains. One shot (1 oz) of distilled spirits

(40% alcohol) has the same amount of alcohol as one 5-ounce glass of wine (13% alcohol) or one 12-ounce beer (5% alcohol) (see image on p. 19). Alcohol is also found in many toiletries (e.g. mouth wash and after shave), cooking products (vanilla extract) and household cleaners (Lysol®). Alcohol is a contributing factor in many drug overdoses.

### Effects:

#### Low Doses

- Euphoria
- Drowsiness
- Dizziness
- Flushing
- Lowered inhibitions

#### Large Doses

- Slurred speech
- Staggering
- Double vision
- Stupor

A “hangover” (e.g. headache, nausea, shakiness and vomiting) may begin 8 to 12 hours after a period of excessive drinking. Long-term effects of daily drinking can lead to liver damage, brain damage, heart disease, loss of memory, ulcers, pancreatic disorders, and infertility.

Chronic drinkers are likely to become physically and psychologically dependent. Withdrawal symptoms may include:

- Tremors
- Agitation
- Anxiety
- Panic attacks
- Elevated blood pressure
- Faster heart rate
- Seizures
- Delirium tremens
- Hallucinations

Source: Health Canada

# Blood Alcohol Concentration (BAC) and Alcohol Impairment

Blood alcohol concentration, or “BAC,” is a way to determine the concentration of alcohol in a person’s bloodstream. For example, a BAC of 0.04% means 0.04 grams of alcohol per 100 grams of blood. In most provinces and states in North America, the BAC at which a person is considered to be legally impaired is 0.08%. BAC is the most common way for law enforcement to determine whether a person can safely operate a motor vehicle. BAC can be measured within 30 to 70 minutes after a person has had a drink.



Different beverages with the same amount of alcohol.

The rate at which alcohol enters the bloodstream may vary depending on (1) the number of drinks consumed, (2) how fast you drink, (3) the amount of food in your stomach (food slows absorption), (4) your weight, and (5) gender. As a general rule of thumb, the average person will eliminate 0.5 ounces (15 ml) of alcohol per hour. Factors such as age and gender affect the body’s ability to metabolize alcohol. The chart to the right shows common symptoms people exhibit at various BAC levels and the effects on a driver/operator of a motor vehicle.

Blood Alcohol Concentration (BAC)	
Typical Effects	Predictable Effects on Driving
<b>.02%</b>	
<ul style="list-style-type: none"> <li>• Some loss of judgment</li> <li>• Relaxation</li> <li>• Slight body warmth</li> <li>• Altered mood</li> </ul>	<ul style="list-style-type: none"> <li>• Decline in visual functions (rapid tracking of a moving target)</li> <li>• Decline in ability to perform two tasks at the same time (divided attention)</li> </ul>
<b>.05%</b>	
<ul style="list-style-type: none"> <li>• Exaggerated behavior</li> <li>• May have loss of small-muscle control (e.g., focusing your eyes)</li> <li>• Impaired judgment</li> <li>• Usually good feeling</li> <li>• Lowered alertness</li> <li>• Release of inhibition</li> </ul>	<ul style="list-style-type: none"> <li>• Reduced coordination</li> <li>• Reduced ability to track moving objects</li> <li>• Difficulty steering</li> <li>• Reduced response to emergency driving situations</li> </ul>
<b>.08%</b>	
<ul style="list-style-type: none"> <li>• Muscle coordination becomes poor (e.g., balance, speech, vision, reaction time, and hearing)</li> <li>• Harder to detect danger</li> <li>• Judgment, self-control, reasoning, and memory are impaired</li> </ul>	<ul style="list-style-type: none"> <li>• Concentration</li> <li>• Short-term memory loss</li> <li>• Speed control</li> <li>• Reduced information processing capability (e.g., signal detection, visual search)</li> <li>• Impaired perception</li> </ul>
<b>.10%</b>	
<ul style="list-style-type: none"> <li>• Clear deterioration of reaction time and control</li> <li>• Slurred speech, poor coordination, and slowed thinking</li> </ul>	<ul style="list-style-type: none"> <li>• Reduced ability to maintain lane position and brake appropriately</li> </ul>
<b>.15%</b>	
<ul style="list-style-type: none"> <li>• Far less muscle control than normal</li> <li>• Vomiting may occur (unless this level is reached slowly or a person has developed a tolerance for alcohol)</li> <li>• Major loss of balance</li> </ul>	<ul style="list-style-type: none"> <li>• Substantial impairment in vehicle control, attention to driving task, and in necessary visual and auditory information processing</li> </ul>

Source: National Highway Traffic Safety Administration (NHTSA)

**Caution:** alcohol intoxication can amplify the effects of medication, fatigue and mood states such as depression. Extra care is recommended when operating a motor vehicle or heavy equipment.

# CLASS 3

## STIMULANTS

### COCAINE

*Big C, blow, coke, flake, freebase, lady, nose candy, rock, snow, snowbirds, crack, white crack.*

Cocaine is a drug extracted from leaves of the coca plant. It is a potent brain stimulant and one of the most powerfully addictive drugs. Cocaine is distributed on the street in two main forms: cocaine hydrochloride and “crack” cocaine. Cocaine hydrochloride is a fine powder often diluted with sugar, cornstarch, or talcum powder. Cocaine hydrochloride is usually snorted or dissolved in water and injected. “Crack,” the “rock” form of cocaine, is a smokable form of cocaine made by adding baking soda to a cocaine solution and allowing the mixture to dry.

**Effects:** Cocaine’s intensity depends on the dose and rate of entry to the brain. When snorted, cocaine reaches the brain in 3–5 minutes. Intravenously

injecting cocaine produces a rush in 15 to 30 seconds and smoking produces an almost immediate intense experience. However, the faster the absorption, the shorter the high lasts. The high from snorting may last 15 to 30 minutes, while that from smoking may last 5 to 10 minutes. Once the drug leaves the brain, the user experiences a “coke crash” that includes depression, irritability, and fatigue. To avoid withdrawal, frequent and repeated doses are taken.

Long-term effects or high doses of cocaine can trigger paranoia. Smoking crack cocaine can produce particu-



Actual photo of dilated pupils due to stimulant effect.



Cocaine powder is chopped with a razor blade to a fine grain then snorted using a straw, small spoon or a rolled-up bill.



Crack cocaine is different from cocaine powder since it is typically smoked and has a shorter but stronger euphoric effect.

Early aggressive paranoia behaviours in users. When addicted individuals stop using cocaine, they often become depressed. Prolonged cocaine snorting can result in ulcers in the nose.

Injectable cocaine users are at risk for infections such as hepatitis and HIV. There is some evidence that people who use cocaine may participate in HIV-related risky behaviours, such as sharing needles and unprotected sex, more often than people who inject other types of drugs.

Sources: DEA; NIDA InfoFacts

## PRESCRIPTION STIMULANTS

Adderall®; Dexedrine®, (*dexies*); Ritalin® (*kibbles and bits, pineapple*); Tenuate®; Ionamin®

A class of drugs usually found in tablets and capsules

that enhance brain activity. Medically, they are now prescribed for only a few health conditions. Ritalin, Adderall, and Dexedrine are used to treat attention deficit disorders (ADHD and ADD). Prescriptions are commonly sold illegally to high school and college students trying to focus while studying for exams. Ritalin, Adderall, and Dexedrine are also prescribed to treat narcolepsy. Tenuate, Ionamin and Dexedrine have limited use as an aid in treating obesity.

### Effects:

- Nervousness and insomnia
- Loss of appetite
- Nausea and vomiting
- Dizziness
- Palpitations
- Headaches
- Changes in heart rate and blood pressure
- Skin rashes and itching
- Abdominal pain
- Weight loss and digestive problems
- Toxic psychosis and psychotic episodes

### Long-term Effects:

- Compulsive use
- Feelings of hostility
- Paranoia
- Hallucinations
- Excessive repetition of movements
- Formication (sensation of bugs and worms crawling under the skin)



Dexedrine 10mg



Ritalin 10mg



Tenuate 25mg



Ionamin 15mg

Source: DEA



Adderall XR 15mg



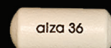
Biphentin 10mg



Ritalin SR 20mg



Dexedrine 5mg



Concerta 36mg

Taking high doses of a stimulant may result in dangerously high body temperatures and an irregular heartbeat. There is also the potential for heart failure or lethal seizures.

Source: DEA, Indiana Prevention Resource Center (IPRC)

### METH-AMPHETAMINE

Desoxyn®, chalk, crank, croak, crypto, crystal, crystal meth, fire, glass, meth, tweek, tina, white cross, shard, ice.

Methamphetamine (“meth”) is an addictive stimulant that activates certain systems in the brain. “Crystal meth” is a pure, smokeable form of methamphetamine that looks like clear crystal chunks or ice. It is usually white or slightly yellow, depending on the purity.

**Effects:** Crystal meth has similar effects to cocaine, but longer. Immediately after smoking or injection, users experience an intense sensation—or a “rush”—that lasts only a few minutes. Snorting or swallowing meth produces a less intense euphoria and after the initial “rush,” there is usually a state of high agitation that can lead to violent behaviour.



“Meth mouth.” Source: Christopher Heringlake

#### Other Possible Effects Include:

- Increased wakefulness and insomnia
- Decreased appetite
- Anxiety
- Nervousness
- Convulsions
- Heart attack

Long-term effects include tolerance and dependence. In some cases, users forego food, sleep, and hygiene and take meth every few hours for days (“binging”) until



Crystal meth. Source: DEA



Ice. Source: DEA

they run out of the drug or become too disorganized to continue. Smoking can also lead to “meth mouth”: permanently damaged teeth and gums caused by inhaling ingredients used to make amphetamine (anhydrous ammonia, battery acid, drain cleaner, camp fuel, etc).

Chronic use can cause paranoia, hallucinations, repetitive behaviour (e.g. compulsive cleaning, grooming, or disassembling/assembling objects), and delusions of parasites or insects crawling under the skin. Users may obsessively scratch their skin to get rid of these imagined insects. High dosages can bring on full-blown toxic psychosis (often exhibited as violent, aggressive behaviour) and extreme paranoia. Meth can also cause strokes and death.

Sources: DEA; NIDA InfoFacts

## METHCATHINONE

*Cat*

Methacathinone is a white or off-white crystalline powder most commonly snorted, although it can be taken orally when mixed with a beverage or injected intravenously when diluted in water. This stimulant is structurally similar to Methamphetamine and Cathinone. It is manufactured from readily available chemicals and occasionally confused with Khat (they share a similar chemical structure). The addictive properties and side effects of this synthetic drug are more intense than that of Khat substances.

**Effects:** Methcathinone produces amphetamine-like activity. Long-term effects are unknown.

Source: DEA

## KHAT

*(Catha edulis) qat, kat*

For centuries, Khat, the fresh young leaves of the *Catha edulis* shrub, has been consumed in East Africa and the Arabian Peninsula. It contains a number of chemicals among which are two controlled substances, cathinone and cathine.

Khat is typically chewed like tobacco. The fresh leaves, twigs, and shoots of the khat shrub are chewed and then retained in the cheek, where they are chewed intermittently to release the active drug. Dried Khat can be made into tea or a chewable paste, but it is not as potent as the fresh plant product. Khat can also be smoked and even sprinkled on food.

**Effects:** Compulsive use may result in aggressive behaviour with grandiose delusions. Psychological dependence may result from continued use. Withdrawal symptoms include:

- Lethargy
- Depression
- Nightmares and tremors

Long-term effects are unknown.

Source: DEA



Khat is often chewed. Source: DEA

# CLASS 4

## ANABOLIC STEROIDS

### ANABOLIC STEROIDS

*Juice, rhoids.*

A group of powerful compounds closely related to the male sex hormone testosterone. Current legitimate medical uses include treatment of certain kinds of anaemia. Body builders and many competitive athletes claim that steroids give them a competitive advantage and/or improve their physical appearance. Steroids are taken orally or injected. Users frequently combine several different types of steroids to maximize their effectiveness while minimizing negative effects. This process is known as "stacking."

#### Effects:

- Increases in lean muscle mass
- Strength
- Ability to train longer and harder

#### Long-term Effects:

- Liver tumours
- Jaundice
- Fluid retention
- High blood pressure

#### Additional side effects:

##### Men

- Shrunken testicles
- Reduced sperm count
- Infertility
- Male-pattern balding
- Development of breasts

##### Women

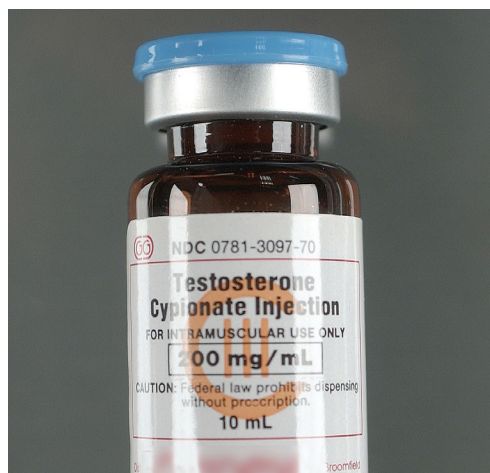
- Growth of facial hair
- Deepened voice
- Changes in or cessation of the menstrual cycle

##### Adolescents

- Halted growth due to premature skeletal maturation
- Accelerated puberty changes



Source: DEA



Testosterone Cypionate 200mg/ml. Source: DEA

Researchers report that users may suffer from paranoid jealousy, extreme irritability ("roid rage"), delusions, and impaired judgment stemming from feelings of invincibility.

Long-term effects or high-dose effects of steroid use are largely unknown.

Sources: DEA; NIDA InfoFacts

# CLASS 5

## CANNABIS

### MARIJUANA

*Boom, chronic, dope, joint, blunts, ganja, grass, hash, herb, Mary Jane, pot, reefer, skunk, weed.*

### HASHISH OR HASH OIL

*Hash, oil, honey oil.*

Products of the hemp plant, *Cannabis sativa*. The main active chemical in marijuana and hashish is THC (Tetrahydrocannabinol, Marinol, delta-9-tetrahydrocannabinol). Hashish is a reddish brown or black coloured THC-rich resinous material. Hashish is collected, dried, and then compressed into a variety of forms such as balls, cakes, or cookie-like sheets. Hash oil is the refined extract of the cannabis plant and varies in colour from amber to dark green or brown.



A bud of marijuana.

### Cannabis Oil, Wax, & Shatter

Concentrated oil forms of THC extracted from marijuana's main ingredients. Cannabis oil is the least refined concentrate that comes as a gooey, sticky liquid. Shatter has a peanut brittle or taffy-like appearance (smooth, clear, and solid) and is the most potent concentrate since fats, lipids, and waxes have been removed. Wax or budder has a soft, creamy consistency due to cannabinoids crystallizing. Because of these products' higher potency, users require much less than standard marijuana to experience a high. Psychosis and brain damage can be a result of exposure to high THC concentrates.

### Medical Use

Cannabis for medical purposes has been under frequent debate in North America. All Cannabis use, including recreational, will be legalized in Canada by July 2018.

### Effects:

- Memory and learning problems
- Distorted senses
- Loss of motor coordination
- Increased heart rate
- Anxiety
- Dry mouth and throat

These effects are even greater when other drugs are



Top to bottom: Cannabis shatter, wax and oil.



Hash oil applied to rolling paper and rolled with tobacco (or marijuana).

mixed with marijuana. Studies have shown that a single marijuana joint can cause more damage than 2.5 – 5 cigarettes and result in chronic bronchitis and airflow obstruction<sup>1</sup>. This comparatively greater damage of cannabis may be explained, in part, by the way it is smoked—without a filter, to a shorter butt length (“roach”), deeper inhalation, and delayed exhalation. Studies have shown a link between marijuana and psychotic disorders, particularly schizophrenia<sup>2</sup>.

Source:

<sup>1</sup> Aldington S, et al. (2007). *Effects of cannabis on pulmonary structure, function and symptoms*.

<sup>2</sup> Castle, D. J., & Murray, R. (2004). *Marijuana and Madness*.



Chunks of hashish stored in a “stash box.”

## SPICE OR K2

*Bliss, black mamba, fake weed, genie.*

Spice—or “synthetic marijuana”—is typically sold as dried leaves (similar to potpourri) in small, plastic bags and smoked in a pipe or joint. Sometimes it is mixed with marijuana or infused into drinks.

### Effects:

- Increased heart rate and blood pressure
- Elevated mood and giddiness
- Relaxation
- Altered perceptions
- Paranoia and panic attacks
- Hallucinations

Long term effects are unknown.

Source: Streetdrugs, NIDA

**Cannabis Paraphernalia:** Marijuana is typically smoked. Most users roll marijuana into a cigarette called



Blunts are flavoured, pre-fabricated hollow tobacco leaves that are stuffed with marijuana then smoked.

a "joint". Marijuana can also be smoked in a bong or a blunt (a pre-made, hollow tobacco leaf product with a pre-fabricated filter on one end). These products are commonly sold in tobacco shops across North America.

Hashish pieces are broken off, placed in a metal or glass pot pipe and smoked. It can also be smoked by heating two table knives until they are red hot then squeezing the hash between them (look for black burn marks) and inhaling the smoke through a plastic pop bottle with the bottom removed. Many of the same methods used to smoke marijuana can also be applied to hash. Hashish is sometimes mixed into food, most commonly as "hash brownies".

Hash oil is mixed with tobacco or marijuana as a joint or applied directly to a glass pipe and smoked. With increased THC content in marijuana, the demand for hashish and hash oil has diminished.

Other cannabis paraphernalia includes rolling papers (e.g. Zig Zag brand), scissors (look for sticky resin on scissor blade from chopping marijuana), herb grinders (to break up the marijuana bud so it can be rolled into a joint), roach clips (small alligator clips to hold the joint butt to prevent finger burns), and film canisters (used to keep marijuana and hash moist and conceal the smell). Smoke shops sell a variety of storage devices and pipes that are disguised as regular household items and food products.



Ceramic, glass, and metal pipes (from left to right) for smoking pot or hash. The ceramic pipe resembling a cigarette is a type of pipe (often called a "one-hitter," or "hitter") that is used when smoking pot in public.



More pipes (from left to right) for smoking pot including a glass "bong," a glass "chillum," and a converted pop can.



Smoke shops sell many products disguised as consumer products designed to conceal (i.e. pop can with inside storage) or consume (i.e. highlighter that doubles as a pot pipe) drugs.

## DRUG PARAPHERNALIA

Drug paraphernalia is any equipment, product, or material modified for making, using, or concealing illegal drugs.

**Drug Containers:** Many drugs sold in powder form are often sold in “flaps” (small square pieces of magazine or lottery paper folded into an envelope). Other containers include small glass vials, re-sealable plastic baggies, and tiny sacks called “8-balls”.



An “8-ball” of cocaine powder. Package is made from small squares of garbage bag plastic that are bound tight with dental floss. Any excess material above the dental floss is cut off using scissors.

8-balls are used when drug dealers work in close proximity to law enforcement. 8-balls are small, tight and round to make it easier to swallow and avoid detection. There are two layers of garbage bag to prevent the package from exploding in the stomach if the product has to be quickly swallowed or kept from getting wet since dealers often hide 8-balls between the cheek and gum. Heroin 8-balls are typically in black garbage bags while cocaine 8-balls are sold in white garbage bags. Another advantage of 8-balls for dealers is that users often end up using the drug in one session since the package design makes it impossible to reuse the wrapping once it is opened.

Drugs usually sold in liquid form include GHB and steroids. Look for small glass bottles or plastic squeeze bottles.

**Smoked Drugs:** Drugs sold as powders are often smoked. For example, PCP, heroin, crack cocaine, and crystal meth require various devices used to hold the

substance while it is being heated:

- Metal foil
- Glass or metal smoking pipe
- Misc. items such as pop can, bottle cap, broken light bulb

The fumes are then inhaled directly from the pipe using a hollow hard plastic or glass tube. Crystal meth and crack cocaine do not burn on their own so a flame has to be held to these drug during inhalation. When cocaine is smoked it leaves a white residue (most noticeable where the vapour is delivered to the mouthpiece).

Refer to the Cannabis Drug Paraphernalia Section (p. 26) for information on marijuana, hashish, or hashish oil paraphernalia.

**Injected Drugs:** To prevent spillage, spoons are the primary device to hold injectable substances while being heated. Disposable syringes are used to inject the liquid and often contain trace amounts of blood. Elas-



Crack paraphernalia includes (from l to r) a used crack pipe fitted with a mouthpiece, a small and large glass tube (“straight shooter”), yellow plastic mouth piece to prevent lip burns, brillo pad (filter), a pipe cleaner, and a poker for air passage.



Crystal meth paraphernalia includes (from left to right) a torch lighter, meth pipe, a test tube converted into a meth pipe, and a broken light bulb.

tics, rubber ties, or surgical tubing are used to inflate the vein for easier injection. Users often wear long-sleeved shirts to cover track marks on arms.

**Snorted Drugs:** Powders can be “snorted” (inhaled) up the nostril via a thin straw or tiny “coke” spoon (holds powder under the nose). Another common method of snorting is using a rolled up bill as a straw. Powder cocaine is often “cut” into lines with a razor blade and then snorted on a mirror or glass surface.

**Oral Drugs:** Prescription drugs often come in capsule, tablet, or liquid form (look for empty cough medicine bottles). Club drugs often come in tablets with a rough edge and imprint (such as a Nike swoosh or butterfly) that resemble children’s candy. Club drug users often experience involuntary jaw clenching and use baby soothers to ease it.



Various packages for storing powder drugs. “Flaps” are small envelopes made from folded squares of lottery paper or glossy magazine stock that will not stick to the substance. Small zip-loc bags (“baggies”) are used for powder and rocks.

## FIRST AID FOR A DRUG OVERDOSE

Remember, when someone overdoses their body is responding just like it would to any other poison. Poisonous consumer products (such as inhalants) have poison symbols on their labels, but there are many other substances that don’t carry warnings. Examples include alcohol, unregulated substances, and medications when not taken as prescribed. Many drugs that are not harmful in small amounts are poisonous in large amounts.

### Types of Drug Overdoses

The three types of drug overdoses are classified according to how they enter the body:

- **swallowed** drugs – through the mouth
- **inhaled** drugs – through the lungs
- **injected** drugs – through the skin using a hollow needle

An important part of first aid for drug overdoses is contacting the Poison Information Centre for advice on what to do. Before calling, the first aider must quickly gather as much information about the incident as possible. Use the scene and the person’s signs and symptoms to gather the information you’ll need to answer

the questions asked by the Poison Information Centre.

### History of the Scene

When drug overdosing occurs, act quickly but do not panic. You need to know four basic facts to give appropriate first aid for a drug overdose:

- **What drug was taken** – Container labels may identify the drug. Otherwise, save vomit and give it to medical attendants for analysis.
- **How much drug was taken** – Estimate the quantity that may have been taken based on what you see or are told (The number of pills originally in the container, the amount of drug in the bottle, etc). Estimate the size/age of the user.
- **How the drug entered the body** – First aid may differ for drugs taken by the mouth, injected into the blood, or breathed into the lungs.
- **When the drug was taken** – The length of time the drug has been in the body will help determine the first aid and medical care needed.

### Signs and Symptoms of a Drug Overdose

If the history does not reveal what drug was used or how it was taken, signs and symptoms may be helpful in answering these questions. All drugs affect

consciousness, breathing, and circulation. Other signs and symptoms may vary depending on how the drug was taken. Drugs that have been:

- Swallowed usually cause nausea, abdominal cramps, diarrhea and vomiting. They may discolour the lips, cause burns in or around the mouth or leave an odour on the breath.
- Injected through the skin usually irritate the point of entry and may cause an allergic or behavioural reaction.
- Inhaled may cause problems with breathing. Signs and symptoms may include coughing, chest pain, and difficulty breathing. Prolonged lack of oxygen will cause headache, dizziness, unconsciousness, stopped breathing and cardiac arrest.

## General First Aid for a Drug Overdose

**1** Begin Emergency Site Management (ESM) – do a scene survey. Gather any information about the suspected drug. Determine the user's responsiveness.

- If the casualty is responsive, call the Poison Information Centre in your region or your hospital emergency department. Answer any questions and follow their advice on first aid.
- If the casualty is unresponsive, call 911 immediately and go to step 2.

**2** Do a primary survey. If breathing is stopped begin CPR. Check for poisonous material around the mouth first. Use a barrier device if you have one.

**3** Place the unconscious, breathing person into the recovery position (see below).

**4** Give ongoing care until medical help takes over.

*Extracted and revised from "First on the Scene: the Complete Guide to First Aid and CPR"; 2000.*



The recovery position.

**Poison Information Centre**  
 The phone number for your local Poison Information Centre is listed at the beginning of your telephone directory.

## Tips to Help Reduce the Risk of Overdose

If you or a loved one use depressant drugs like heroin, the following tips will help you reduce the risk of overdose:

- Avoid using other drugs, especially sedatives or alcohol, on the same day
- Use a small amount and always have a trial "taste" of new batch, especially if you are returning to use after a period of abstinence
- Have someone with you when you are using
- Avoid injecting in places where no-one can get to you if you do overdose
- Know the telephone numbers of the ambulance service
- If possible, have the anti-overdose drug, Naloxone, nearby and accessible when using depressants, especially opioids and opiates

## A Final Note on Naloxone

Naloxone is a safe, highly effective chemical compound—also called an "opioid antagonist"—that reverses the effects of opioids (e.g. oxycodone) and opiates (e.g. heroin). It is used as an emergency treatment for opiate overdose. In the USA and Europe, Take Home Naloxone programs have been linked with reductions in drug deaths of up to 34%. Naloxone has been approved for use in Canada for over 40 years and has no potential for misuse since it exhibits essentially no pharmacologic activity in the absence of narcotics.

Naloxone will work only for drugs in the opiate/opioid family - it is not effective for overdose of other drugs such as cocaine. With the rise in opiate overdoses in Canada since 2015, Naloxone is now available for over-the-counter purchase at all pharmacies in Canada. Some provinces and territories may offer free take-home kits. Individuals no longer need to identify themselves as a person using opiates. Naloxone is available in both injectable and nasal spray form, although the injection is more commonly available (and less expensive). Although traditionally administered by emergency response personnel, Naloxone can now be administered by anyone simply by following a Naloxone Kit's instructions.



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2174 Fleury Road, Powell River, BC Canada V8A 0H8

Admissions Toll Free 866.487.9010 | Administration Toll Free 866.487.9050 | Fax: 1.888.875.0511

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