Amphetamines

Overview

Amphetamines are stimulants that speed up the body’s system. Many are legally prescribed and used to treat attention-deficit hyperactivity disorder (ADHD).

Street names

Bennies, Black Beauties, Crank, Ice, Speed, Uppers

Looks like

Amphetamines can look like pills or powder. Common prescription amphetamines include methylphenidate (Ritalin® or Ritalin SR®), amphetamine and dextroamphetamine (Adderall®), and dextroamphetamine (Dexedrine®).

Methods of abuse

Amphetamines are generally taken orally or injected. However, the addition of “ice,” the slang name of crystallized methamphetamine hydrochloride, has promoted smoking as another mode of administration. Just as “crack” is smokable cocaine, “ice” is smokable methamphetamine.

Affect on mind

The effects of amphetamines and methamphetamine are similar to cocaine, but their onset is slower and their duration is longer. In contrast to cocaine, which is quickly removed from the brain and is almost completely metabolized, methamphetamine remains in the central nervous system longer, and a larger percentage of the drug remains unchanged in the body, producing prolonged stimulant effects. Chronic abuse produces a psychosis that resembles schizophrenia and is characterized by: Paranoia, picking at the skin, preoccupation with one’s own thoughts, and auditory and visual hallucinations. Violent and erratic behavior is frequently seen among chronic abusers of amphetamines and methamphetamine.

Affect on body

Physical effects of amphetamine use include increased blood pressure and pulse rates, insomnia, loss of appetite, and physical exhaustion.

Drugs causing similar effects

Drugs that cause similar effects include: dexamphetamine, phentermine, benzphetamine, phendimetrazine, cocaine, crack, methamphetamine, and khat.

Overdose effects

Overdose effects include agitation, increased body temperature, hallucinations, convulsions, and possible death.

Legal status in the United States

Amphetamines are Schedule II stimulants, which means that they have a high potential for abuse and limited medical uses. Pharmaceutical products are available only through a prescription that cannot be refilled.

Common places of origin

Amphetamine was first marketed in the 1930s as Benzedrine® in an over-the-counter inhaler to treat nasal congestion. By 1937 amphetamine was available by prescription in tablet form and was used in the treatment of the sleeping disorder, narcolepsy, and ADHD. Over the years, the use and abuse of clandestinely produced amphetamines have spread. Today, clandestine laboratory production of amphetamines has mushroomed, and the abuse of the drug has increased dramatically.
Drug Fact Sheet

Barbiturates

Overview
Barbiturates are depressants that produce a wide spectrum of central nervous system depression from mild sedation to coma. They have also been used as sedatives, hypnotics, anesthetics, and anticonvulsants. Barbiturates are classified as Ultrashort, Short, Intermediate, Long-acting.

Street names
Barbs, Block Busters, Christmas Trees, Goof Balls, Pinks, Red Devils, Reds & Blues, Yellow Jackets

Looks like
Barbiturates come in a variety of multicolored pills and tablets. Abusers prefer the short-acting and intermediate barbiturates such as Amytal® and Seconal®.

Methods of abuse
Barbiturates are abused by swallowing a pill or injecting a liquid form. Barbiturates are generally abused to reduce anxiety, decrease inhibitions, and treat unwanted effects of illicit drugs. Barbiturates can be extremely dangerous because overdoses can occur easily and lead to death.

Affect on mind
Barbiturates cause mild euphoria, lack of inhibition, relief of anxiety and sleepiness. Higher doses cause impairment of memory, judgment and coordination, irritability, and paranoid and suicidal ideation. Tolerance develops quickly and larger doses are then needed to produce the same effect, increasing the danger of an overdose.

Affect on body
Barbiturates slow down the central nervous system and cause sleepiness.

Drugs causing similar effects
Drugs with similar effects include alcohol, benzodiazepines like Valium® and Xanax®, tranquilizers, sleeping pills, Rohypnol®, and GHB.

Overdose effects
Effects of overdose include shallow respiration, clammy skin, dilated pupils, weak and rapid pulse, coma, and possible death.

Legal status in the United States
Barbiturates are Schedule II, III, and IV depressants under the Controlled Substances Act.

Common places of origin
Barbiturates were first introduced for medical use in the 1900s, and today about 12 substances are in medical use.
Drug Fact Sheet

Bath Salts or Designer Cathinones (Synthetic Stimulants)

Overview

Synthetic stimulants that are marketed as “bath salts” are often found in a number of retail products. These synthetic stimulants are chemicals. The chemicals are synthetic derivatives of cathinone, a central nervous system stimulant, which is an active chemical found naturally in the khat plant. Mephedrone and MDPV (3-4 methylene-dioxyprovalerone) are two of the designer cathinones most commonly found in these “bath salt” products. Many of these products are sold over the Internet, in convenience stores, and in “head shops.”

Street names


Looks like

“Bath salt” stimulant products are sold in powder form in small plastic or foil packages of 200 and 500 milligrams under various brand names. Mephedrone is a fine white, off-white, or slightly yellow-colored powder. It can also be found in tablet and capsule form. MDPV is a fine white or off-white powder.

Methods of abuse

“Bath salts” are usually ingested by sniffing/snorting. They can also be taken orally, smoked, or put into a solution and injected into veins.

Affect on mind

People who abuse these substances have reported agitation, insomnia, irritability, dizziness, depression, paranoia, delusions, suicidal thoughts, seizures, and panic attacks. Users have also reported effects including impaired perception of reality, reduced motor control, and decreased ability to think clearly.

Affect on body

Cathinone derivatives act as central nervous system stimulants causing rapid heart rate (which may lead to heart attacks and strokes), chest pains, nosebleeds, sweating, nausea, and vomiting.

Drugs causing similar effects

Drugs that have similar effects include: amphetamines, cocaine, Khat, LSD, and MDMA.

Overdose effects

These substances are usually marketed with the warning “not intended for human consumption.” Any time that users put uncontrolled or unregulated substances into their bodies, the effects are unknown and can be dangerous.

Legal status in the United States

On Friday, October 21, 2011, DEA published a final order in the Federal Register exercising its emergency scheduling authority to control three synthetic stimulants that are used to make bath salts, including: Mephedrone, 3,4 methylenedioxypyrovalerone (MDPV) and Methylone. Except as authorized by law, this action makes possessing and selling these chemicals, or the products that contain them, illegal in the United States. This emergency action was necessary to prevent an imminent threat to the public safety. The temporary scheduling action will remain in effect for at least one year while the DEA and the United States Department of Health and Human Services (DHHS) further study whether these chemicals should be permanently controlled. As a result of this order, these synthetic stimulants are designated as Schedule I substances under the Controlled Substances Act. Schedule I status is reserved for those substances with a high potential for abuse, no currently accepted use for treatment in the United States and a lack of accepted safety for use of the drug under medical supervision.

Drug Enforcement Administration • For more information, visit www.dea.gov
Benzodiazepines

Overview
Benzodiazepines are depressants that produce sedation, induce sleep, relieve anxiety and muscle spasms, and prevent seizures.

Street names
Benzos, Downers

Looks like
The most common benzodiazepines are the prescription drugs Valium®, Xanax®, Halcion®, Ativan®, and Klonopin®. Tolerance can develop, although at variable rates and to different degrees. Shorter-acting benzodiazepines used to manage insomnia include estazolam (ProSom®), flurazepam (Dalmane®), temazepam (Restoril®), and triazolam (Halcion®). Midazolam (Versed®), a short-acting benzodiazepine, is utilized for sedation, anxiety, and amnesia in critical care settings and prior to anesthesia. It is available in the United States as an injectable preparation and as a syrup (primarily for pediatric patients). Benzodiazepines with a longer duration of action are utilized to treat insomnia in patients with daytime anxiety. These benzodiazepines include alprazolam (Xanax®), chlordiazepoxide (Librium®), clorazepate (Tranxene®), diazepam (Valium®), halazepam (Paxipam®), lorazepam (Ativan®), oxazepam (Serax®), prazepam (Centrax®), and quazepam (Doral®). Clonazepam (Klonopin®), diazepam, and clorazepate are also used as anticonvulsants.

Methods of abuse
Abuse is frequently associated with adolescents and young adults who take the drug orally or crush it up and snort it to get high. Abuse is particularly high among heroin and cocaine abusers.

Affect on mind
Benzodiazepines are associated with amnesia, hostility, irritability, and vivid or disturbing dreams.

Affect on body
Benzodiazepines slow down the central nervous system and may cause sleepiness.

Drugs causing similar effects
Alcohol, barbiturates, sleeping pills, and GHB

Overdose effects
Effects of overdose include shallow respiration, clammy skin, dilated pupils, weak and rapid pulse, coma, and possible death.

Legal status in the United States
Benzodiazepines are controlled in schedule IV of the Controlled Substance Act.

Common places of origin
Benzodiazepines are only legally available through prescription. Many abusers maintain their drug supply by getting prescriptions from several doctors, forging prescriptions, or buying them illicitly. Alprazolam and diazepam are the two most frequently encountered benzodiazepines on the illicit market.
Cannabis

Overview

Cannabis sativa L. is a plant that grows wild throughout most of the tropic and temperate regions of the world. Three drugs that come from cannabis - marijuana, hashish, and hashish oil - are distributed on the U.S. illicit market. THC (delta-9-tetrahydrocannabinol) is believed to be the main chemical ingredient that produces the psychoactive effect.

Street names

Blubbers, Boom, Gangster, Ganja, Grass, Hashish/Chara, Herb, Pot, Reefer, Weed

Looks like

Marijuana is a dry, shredded green/brown mix of flowers, stems, seeds, and leaves from the Cannabis sativa plant. The mixture typically is green, brown, or gray in color and may resemble tobacco. Hashish is collected, dried, and pressed into a variety of forms, such as balls, cakes, or cookie-like sheets. Hashish oil is a viscous liquid ranging from amber to dark brown in color.

Methods of abuse

Cannabis products are usually smoked.

Affect on mind

Cannabis is abused for its euphoric effects. When cannabis is smoked, the THC passes from the lungs and into the bloodstream, which carries the chemical to the organs throughout the body, including the brain. In the brain, the THC connects to specific sites called cannabinoid receptors on nerve cells and influences the activity of those cells. Many of these receptors are found in the parts of the brain that influence pleasure, memory, thought, concentration, sensory and time perception, and coordinated movement. The short-term effects of cannabis include problems with memory and learning, distorted perception, difficulty in thinking and problem-solving, and loss of coordination. The effect of marijuana on perception and coordination are responsible for serious impairments in driving abilities. Long-term chronic use is associated with “Amotivational Syndrome”, characterized by apathy, impairment of judgment, memory and concentration, and loss of motivation, ambition and interest in the pursuit of personal goals. High doses can result in mental confusion, panic reactions and hallucinations.

Affect on body

Short-term physical effects may include sedation, blood shot eyes, increased heart rate, coughing from lung irritation, increased appetite, and decreased blood pressure. Like tobacco smokers, cannabis smokers experience serious health problems such as bronchitis, emphysema, and bronchial asthma. Extended use may cause suppression of the immune system. Because cannabis contains toxins and carcinogens, cannabis smokers increase their risk of cancer of the head, neck, lungs and respiratory track. Withdrawal from chronic use of high doses of cannabis causes physical signs including headache, shakiness, sweating, stomach pains and nausea, as well as behavioral signs including restlessness, irritability, sleep difficulties and decreased appetite.
Overdose effects

There have been no reported deaths by overdose.

Legal status in the United States

Cannabis and THC are schedule I substances under the Controlled Substances Act. Schedule I drugs are classified as having a high potential for abuse, no currently accepted medical use in treatment in the United States, and a lack of accepted safety for use of the drug or other substance under medical supervision. Marinol, a synthetic version of THC, the active ingredient found in the marijuana plant, can be prescribed for the control of nausea and vomiting caused by chemotherapeutic agents used in the treatment of cancer and to stimulate appetite in AIDS patients. The FDA approved product, Marinol is a schedule III substance under the Controlled Substances Act. Schedule III drugs are classified as having less potential for abuse than the drugs or substances in Schedules I and II and have a currently accepted medical use in treatment in the U.S., and abuse of the drug may lead to moderate or low physical dependence or psychological dependence.

Common places of origin

Cannabis is grown in the United States, Canada, Mexico, South America and Asia. It can be cultivated in both outdoor and in indoor settings.
Drug Fact Sheet
Cocaine

Overview
Cocaine is an intense, euphoria-producing stimulant drug with strong addictive potential.

Street names
Coca, Coke, Crack, Flake, Snow, Soda Cot

Looks like
Cocaine is usually distributed as a white, crystalline powder. Cocaine is often diluted ("cut") with a variety of substances, the most common of which are sugars and local anesthetics. It is "cut" to stretch the amount of the product and increase profits for dealers. In contrast, cocaine base (crack) looks like small, irregularly shaped chunks (or "rocks") of a whitish solid.

Methods of abuse
Powdered cocaine can be snorted or injected into the veins after dissolving in water. Cocaine base (crack) is smoked, either alone or on marijuana or tobacco. Cocaine is also abused in combination with an opiate, like heroin, a practice known as "speedballing." Although injecting into veins or muscles, snorting, and smoking are the common ways of using cocaine, all mucous membranes readily absorb cocaine. Cocaine users typically binge on the drug until they are exhausted or run out of cocaine.

Affect on mind
The intensity of cocaine’s euphoric effects depends on how quickly the drug reaches the brain, which depends on the dose and method of abuse. Following smoking or intravenous injection, cocaine reaches the brain in seconds, with a rapid buildup in levels. This results in a rapid-onset, intense euphoric effect known as a "rush." By contrast, the euphoria caused by snorting cocaine is less intense and does not happen as quickly due to the slower build-up of the drug in the brain. Other effects include increased alertness and excitation, as well as restlessness, irritability, and anxiety. Tolerance to cocaine’s effects develops rapidly, causing users to take higher and higher doses. Taking high doses of cocaine or prolonged use, such as binging, usually causes paranoia. The crash that follows euphoria is characterized by mental and physical exhaustion, sleep, and depression lasting several days. Following the crash, users experience a craving to use cocaine again.

Affect on body
Physiological effects of cocaine include increased blood pressure and heart rate, dilated pupils, insomnia, and loss of appetite. The widespread abuse of highly pure street cocaine has led to many severe adverse health consequences such as: cardiac arrhythmias, ischemic heart conditions, sudden cardiac arrest, convulsions, strokes, and death. In some users, the long-term use of inhaled cocaine has led to a unique respiratory syndrome, and chronic snorting of cocaine has led to the erosion of the upper nasal cavity.

Drugs causing similar effects
Other stimulants, such as methamphetamine, cause effects similar to cocaine that vary mainly in degree.
Drug Fact Sheet
Cocaine - cont'd.

Overdose effects
Overdose effects include agitation, increased body temperature, hallucinations, convulsions and possible death.

Legal status in the United States
Cocaine is a Schedule II drug under the Controlled Substances Act, meaning it has a high potential for abuse and limited medical usage. Cocaine hydrochloride solution (4% and 10%) is used primarily as a topical local anesthetic for the upper respiratory tract. It also is used to reduce bleeding of the mucous membranes in the mouth, throat, and nasal cavities. However, better products have been developed for these purposes, and cocaine is rarely used medically in the United States.

Common places of origin
Cocaine is derived from coca leaves grown in Bolivia, Peru, and Colombia. The cocaine manufacturing process takes place in remote jungle labs where the raw product undergoes a series of chemical transformations. Colombia produces about 90% of the cocaine powder reaching the United States. According to the 2005 Colombia Threat Assessment, 90% of the cocaine shipped to the United States comes from the Central America-Mexico corridor.
Overview

Includes barbiturates (barbs), benzodiazepines (benzos) and sedative-hypnotics.

Depressants will put you to sleep, relieve anxiety and muscle spasms, and prevent seizures. Barbiturates are older drugs and include butalbital (Fiorina®), phenobarbital, Pentothal®, Seconal® and Nembutal®. You can rapidly develop dependence on and tolerance to barbiturates, meaning you need more and more of them to feel and function normally. This makes them unsafe, increasing the likelihood of coma or death. Benzodiazepines were developed to replace barbiturates, though they still share many of the undesirable side effects. Some examples are Valium®, Xanax®, Halcion®, Ativan®, Klonopin® and Restoril®. Rohypnol® is a benzodiazepine that is not manufactured or legally marketed in the United States, but it is used illegally. Ambien® and Sonata® are sedative-hypnotic medications approved for the short-term treatment of insomnia that share many of the properties of benzodiazepines. Other CNS depressants include meprobamate, methaqualone (Quaalude®), and the illicit drug GHB.

Street names

Barbs, Benzos, Downers, Georgia Home Boy, GHB, Grievous Bodily Harm, Liquid X, Nerve Pills, Phennies, R2, Reds, Roofies, Rophies, Tranks, Yellows

Looks like

Depressants come in the form of pills, syrups, and injectable liquids.

Methods of abuse

Individuals abuse depressants to experience euphoria. Depressants are also used with other drugs to add to the other drugs’ high or to deal with their side effects. Abusers take higher doses than people taking the drugs under a doctor’s supervision for therapeutic purposes. Depressants like GHB and Rohypnol® are also misused to facilitate sexual assault.

Affect on mind

Depressants used therapeutically do what they are prescribed for to put you to sleep, relieve anxiety and muscle spasms, and prevent seizures. They also: cause amnesia, leaving no memory of events that occur while under the influence, reduce your reaction time, impair mental functioning and judgment, and cause confusion. Long-term use of depressants produces psychological dependence and tolerance.

Affect on body

Some depressants can relax the muscles. Unwanted physical effects include slurred speech, loss of motor coordination, weakness, headache, lightheadedness, blurred vision, dizziness, nausea, vomiting, low blood pressure, and slowed breathing. Prolonged use of depressants can lead to physical dependence even at doses recommended for medical treatment. Unlike barbiturates, large doses of benzodiazepines are rarely fatal unless combined with other
Depressants

Drugs or alcohol. But unlike the withdrawal syndrome seen with most other drugs of abuse, withdrawal from depressants can be life threatening.

Drugs causing similar effects

Some antipsychotics, antihistamines, and antidepressants produce sedative effects. Alcohol’s effects are similar to those of depressants.

Overdose effects

High doses of depressants or use of them with alcohol or other drugs can slow heart rate and breathing enough to cause death.

Legal status in the United States

Most depressants are controlled substances that range from Schedule I to Schedule IV under the Controlled Substances Act, depending on their risk for abuse and whether they currently have an accepted medical use. Many of the depressants have FDA-approved medical uses. Rohypnol® is not manufactured or legally marketed in the United States.

Common places of origin

Generally, legitimate pharmaceutical products are diverted to the illicit market. Teens can obtain depressants from the family medicine cabinet, friends, family members, the Internet, doctors, and hospitals.
**Overview**

DXM is a cough suppressor found in more than 120 over-thecounter (OTC) cold medications, either alone or in combination with other drugs such as analgesics (e.g., acetaminophen), antihistamines (e.g., chlorpheniramine), decongestants (e.g., pseudoephedrine), and/or expectorants (e.g., guaifenesin). The typical adult dose for cough is 15 or 30 mg taken three to four times daily. The cough-suppressing effects of DXM persist for 5 to 6 hours after ingestion. When taken as directed, side-effects are rarely observed.

**Street names**

CCC, Dex, DXM, Poor Man's PCP, Robo, Rojo, Skittles, Triple C, Velvet

**Looks like**

DXM can come in the form of: cough syrup, tablets, capsules, or powder.

**Methods of abuse**

DXM is abused in high doses to experience euphoria and visual and auditory hallucinations. Abusers take various amounts depending on their body weight and the effect they are attempting to achieve. Some abusers ingest 250 to 1,500 milligrams in a single dosage, far more than the recommended therapeutic dosages described above. Illicit use of DXM is referred to on the street as “Robotripping,” “skittling,” or “dexing.” The first two terms are derived from the products that are most commonly abused, Robitussin and Coricidin HBP. DXM abuse has traditionally involved drinking large volumes of the OTC liquid cough preparations. More recently, however, abuse of tablet and gel capsule preparations has increased. These newer, high-dose DXM products have particular appeal for abusers. They are much easier to consume, eliminate the need to drink large volumes of unpleasant-tasting syrup, and are easily portable and concealed, allowing an abuser to continue to abuse DXM throughout the day, whether at school or work. DXM powder, sold over the Internet, is also a source of DXM for abuse. (The powdered form of DXM poses additional risks to the abuser due to the uncertainty of composition and dose.) DXM is also distributed in illicitly manufactured tablets containing only DXM or mixed with other drugs such as pseudoephedrine and/or methamphetamine. DXM is abused by individuals of all ages, but its abuse by teenagers and young adults is of particular concern. This abuse is fueled by DXM’s OTC availability and extensive “how to” abuse information on various web sites.

**Affect on mind**

Some of the many psychoactive effects associated with high-dose DXM include: confusion, inappropriate laughter, agitation, paranoia, and hallucinations. Other sensory changes, including the feeling of floating and changes in hearing and touch. Long-term abuse of DXM is associated with severe psychological dependence. Abusers of DXM describe the following four dose-dependent “plateaus”: Plateau Dose (mg) Behavioral Effects 1st 100-200 Mild stimulation 2nd 200-400 Euphoria and hallucinations 3rd 300-600 Distorted visual perceptions Loss of motor coordination 4th 500-1500 Out-of-body sensations
Affect on body

DXM intoxication involves: over-excitability, lethargy, loss of coordination, slurred speech, sweating, hypertension, and involuntary spasmodic movement of the eyeballs. The use of high doses of DXM in combination with alcohol or other drugs is particularly dangerous, and deaths have been reported. Approximately 5-10% of Caucasians are poor DXM metabolizers and at increased risk for overdoses and deaths. DXM taken with antidepressants can be life threatening. OTC products that contain DXM often contain other ingredients such as acetaminophen, chlorpheniramine, and guaifenesin that have their own effects, such as: liver damage, rapid heart rate, lack of coordination, vomiting, seizures, and coma. To circumvent the many side effects associated with these other ingredients, a simple chemical extraction procedure has been developed and published on the Internet that removes most of these other ingredients in cough syrup.

Drugs causing similar effects

Depending on the dose, DXM can have effects similar to marijuana or Ecstasy. In high doses its out-of-body effects are similar to those of Ketamine or PCP.

Overdose effects

DXM overdose can be treated in an emergency room setting and generally does not result in severe medical consequences or death. Most DXM-related deaths are caused by ingesting the drug in combination with other drugs. DXM-related deaths also occur from impairment of the senses, which can lead to accidents. In 2003, a 14-year-old boy in Colorado who abused DXM died when he was hit by two cars as he attempted to cross a highway. State law enforcement investigators suspect that the drug affected the boy’s depth perception and caused him to misjudge the distance and speed of the oncoming vehicles.

Legal status in the United States

DXM is a legally marketed cough suppressant that is neither a controlled substance nor a regulated chemical under the Controlled Substances Act.

Common places of origin

DXM abusers can obtain the drug at almost any pharmacy or supermarket, seeking out the products with the highest concentration of the drug from among all the OTC cough and cold remedies that contain it. DXM products and powder can also be purchased on the Internet.
Overview

MDMA acts as both a stimulant and psychedelic, producing an energizing effect, distortions in time and perception, and enhanced enjoyment of tactile experiences. Adolescents and young adults use it to reduce inhibitions and to promote: euphoria, feelings of closeness, empathy, and sexuality. Although MDMA is known among users as Ecstasy, researchers have determined that many Ecstasy tablets contain not only MDMA but also a number of other drugs or drug combinations that can be harmful, such as: methamphetamine, ketamine, cocaine, the over-the-counter cough suppressant dextromethorphan (DXM), the diet drug ephedrine, and caffeine. In addition, other drugs similar to MDMA, such as MDA or PMA, are often sold as Ecstasy, which can lead to overdose and death when the user takes additional doses to obtain the desired effect.

Street names

Adam, Beans, Clarity, Disco Biscuit, E, Ecstasy, Eve, Go, Hug Drug, Lover's Speed, MDMA, Peace, STP, X, XTC

Looks like

MDMA is mainly distributed in tablet form. MDMA tablets are sold with logos, creating brand names for users to seek out. The colorful pills are often hidden among colorful candies. MDMA is also distributed in capsules, powder, and liquid forms.

Methods of abuse

MDMA use mainly involves swallowing tablets (50-150 mg), which are sometimes crushed and snorted, occasionally smoked but rarely injected. MDMA is also available as a powder. MDMA abusers usually take MDMA by “stacking” (taking three or more tablets at once) or by “piggy-backing” (taking a series of tablets over a short period of time). One trend among young adults is “candy flipping,” which is the co-abuse of MDMA and LSD. MDMA is considered a “party drug.” As with many other drugs of abuse, MDMA is rarely used alone. It is common for users to mix MDMA with other substances, such as alcohol and marijuana.

Affect on mind

MDMA mainly affects brain cells that use the chemical serotonin to communicate with each other. Serotonin helps to regulate mood, aggression, sexual activity, sleep, and sensitivity to pain. Clinical studies suggest that MDMA may increase the risk of long-term, perhaps permanent, problems with memory and learning. MDMA causes changes in perception, including euphoria and increased sensitivity to touch, energy, sensual and sexual arousal, need to be touched, and need for stimulation. Some unwanted psychological effects include: confusion, anxiety, depression, paranoia, sleep problems, and drug craving. All these effects usually occur within 30 to 45 minutes of swallowing the drug and usually last 4 to 6 hours, but they may occur or last weeks after ingestion.
Affect on body

Users of MDMA experience many of the same effects and face many of the same risks as users of other stimulants such as cocaine and amphetamines. These include increased motor activity, alertness, heart rate, and blood pressure. Some unwanted physical effects include: muscle tension, tremors, involuntary teeth clenching, muscle cramps, nausea, faintness, chills, sweating, and blurred vision. High doses of MDMA can interfere with the ability to regulate body temperature, resulting in a sharp increase in body temperature (hyperthermia), leading to liver, kidney and cardiovascular failure. Severe dehydration can result from the combination of the drug’s effects and the crowded and hot conditions in which the drug is often taken. Studies suggest chronic use of MDMA can produce damage to the serotonin system. It is ironic that a drug that is taken to increase pleasure may cause damage that reduces a person’s ability to feel pleasure.

Drugs causing similar effects

No one other drug is quite like MDMA, but MDMA produces both amphetamine-like stimulation and mild mescaline-like hallucinations.

Overdose effects

In high doses, MDMA can interfere with the body’s ability to regulate temperature. On occasions, this can lead to a sharp increase in body temperature (hyperthermia), resulting in liver, kidney, and cardiovascular system failure, and death. Because MDMA can interfere with its own metabolism (that is, its break down within the body), potentially harmful levels can be reached by repeated drug use within short intervals.

Legal status in the United States

MDMA is a Schedule I drug under the Controlled Substances Act, meaning it has a high potential for abuse, no currently accepted medical use in treatment in the United States, and a lack of accepted safety for use under medical supervision.

Common places of origin

MDMA is a synthetic chemical made in labs. Seized MDMA in the U.S. is primarily manufactured in, and smuggled across our borders from, clandestine laboratories in Canada and, to a lesser extent, the Netherlands. A small number of MDMA clandestine laboratories have also been identified operating in the U.S.
Overview

Gamma-Hydroxybutyric acid (GHB) is another name for the generic drug sodium oxybate. Xyrem® (which is sodium oxybate) is the trade name of the Food and Drug Administration (FDA)-approved prescription medication. Analogues that are often substituted for GHB include GBL (gamma butyrolactone) and 1,4 BD (also called just “BD”), which is 1,4-butanediol. These analogues are available legally as industrial solvents used to produce polyurethane, pesticides, elastic fibers, pharmaceuticals, coatings on metal or plastic, and other products. They are also are sold illicitly as supplements for bodybuilding, fat loss, reversal of baldness, improved eyesight, and to combat aging, depression, drug addiction, and insomnia. GBL and BD are sold as “fish tank cleaner,” “ink stain remover,” “ink cartridge cleaner” and “nail enamel remover” for approximately $100 per bottle — much more expensive than comparable products. Attempts to identify the abuse of GHB analogues are hampered by the fact that routine toxicological screens do not detect the presence of these analogues.

Street names

Easy Lay, G, Georgia Home Boy, GHB, Goop, Grievous Bodily Harm, Liquid Ecstasy, Liquid X, Scoop

Looks like

GHB is usually sold as a liquid or as a white powder that is dissolved in a liquid, such as water, juice, or alcohol. GHB dissolved in liquid has been packaged in small vials or small water bottles. In liquid form, GHB is clear and colorless and slightly salty in taste.

Methods of abuse

GHB and its analogues are abused for their euphoric and calming effects and because some people believe they build muscles and cause weight loss. GHB and its analogues are also misused for their ability to increase libido, suggestibility, passivity, and to cause amnesia (no memory of events while under the influence of the substance) — traits that make users vulnerable to sexual assault and other criminal acts. GHB abuse became popular among teens and young adults at dance clubs and “raves” in the 1990s and gained notoriety as a date rape drug. GHB is taken alone or in combination with other drugs, such as alcohol (primarily), other depressants, stimulants, hallucinogens, and marijuana. The average dose ranges from 1 to 5 grams (depending on the purity of the compound, this can be 1-2 teaspoons mixed in a beverage). However, the concentrations of these “home-brews” have varied so much that users are usually unaware of the actual dose they are drinking.

Affect on mind

GHB occurs naturally in the central nervous system in very small amounts. Use of GHB produces Central Nervous
System (CNS) depressant effects including euphoria, drowsiness, decreased anxiety, confusion and memory impairment. GHB can also produce visual hallucinations and—paradoxically—excited and aggressive behavior. GHB greatly increases the CNS depressant effects of alcohol and other depressants.

**Affect on body**

GHB takes effect in 15 to 30 minutes, and the effects last 3 to 6 hours. Low doses of GHB produce nausea. At high doses, GHB overdose can result in unconsciousness, seizures, slowed heart rate, greatly slowed breathing, lower body temperature, vomiting, nausea, coma, and death. Regular use of GHB can lead to addiction and withdrawal that includes insomnia, anxiety, tremors, increased heart rate and blood pressure, and occasional psychotic thoughts. Currently, there is no antidote available for GHB intoxication. GHB analogues are known to produce side effects such as topical irritation to the skin and eyes, nausea, vomiting, incontinence, loss of consciousness, seizures, liver damage, kidney failure, respiratory depression, and death.

**Drugs causing similar effects**

GHB analogues are often abused in place of GHB. Both GBL and BD metabolize to GHB when taken and produce effects similar to GHB. CNS depressants such as barbiturates and methaqualone also produce effects similar to GHB.

**Overdose effects**

GHB overdose can cause death.

**Legal status in the United States**

GHB is a Schedule I controlled substance, meaning that it has a high potential for abuse, no currently accepted medical use in treatment in the United States, and a lack of accepted safety for use under medical supervision. GHB products are Schedule III substances under the Controlled Substances Act. In addition, GBL is a List I chemical. It was placed on Schedule I of the Controlled Substances Act in March 2000. However, when sold as GHB products (such as Xyrem®), it is considered Schedule III, one of several drugs that are listed in multiple schedules.

**Common places of origin**

GHB is produced illegally in both domestic and foreign clandestine laboratories. The major source of GHB on the street is through clandestine synthesis by local operators. At bars or “rave” parties, GHB is typically sold in liquid form by the capful or “swig” for $5 to $25 per cap. Xyrem® has the potential for diversion and abuse like any other pharmaceutical containing a controlled substance. GHB has been encountered in nearly every region of the country.
Overview

Hallucinogens are found in plants and fungi or are synthetically produced and are among the oldest known group of drugs used for their ability to alter human perception and mood.

Street names

Acid, Blotter, Blotter Acid, Cubes, Doses, Fry, Mind Candy, Mushrooms, Shrooms, Special K, STP, X, XTC

Looks like

Hallucinogens come in a variety of forms. MDMA or ecstasy tablets are sold in many colors with a variety of logos to attract young abusers. LSD is sold in the form of impregnated paper (blotter acid), typically imprinted with colorful graphic designs.

Methods of abuse

The most commonly abused hallucinogens among junior and senior high school students are hallucinogenic mushrooms, LSD, and MDMA or ecstasy. Hallucinogens are typically taken orally or can be smoked.

Affect on mind

Sensory effects include perceptual distortions that vary with dose, setting, and mood. Psychic effects include distortions of thought associated with time and space. Time may appear to stand still, and forms and colors seem to change and take on new significance. Weeks or even months after some hallucinogens have been taken, the user may experience flashbacks — fragmentary recurrences of certain aspects of the drug experience in the absence of actually taking the drug. The occurrence of a flashback is unpredictable, but is more likely to occur during times of stress and seems to occur more frequently in younger individuals. With time, these episodes diminish and become less intense.

Affect on body

Physiological effects include elevated heart rate, increased blood pressure, and dilated pupils.

Overdose effects

Deaths exclusively from acute overdose of LSD, magic mushrooms, and mescaline are extremely rare. Deaths generally occur due to suicide, accidents, and dangerous behavior, or due to the person inadvertently eating poisonous plant material. A severe overdose of PCP and ketamine can result in: respiratory depression, coma, convulsions, seizures, and death due to respiratory arrest.

Legal status in the United States

Many hallucinogens are Schedule I under the Controlled Substances Act, meaning that they have a high potential for abuse, no currently accepted medical use in treatment in the United States, and a lack of accepted safety for use under medical supervision.

Common places of origin

Hallucinogens can be synthetically produced in illicit laboratories or are found in plants.
Heroin

Overview
Heroin is a highly addictive drug and the most rapidly acting of the opiates.

Street names
Big H, Black Tar, Chiva, Hell Dust, Horse, Negra, Smack, Thunder

Looks like
Heroin is typically sold as a white or brownish powder, or as the black sticky substance known on the streets as “black tar heroin.” Although purer heroin is becoming more common, most street heroin is “cut” with other drugs or with substances such as sugar, starch, powdered milk, or quinine.

Methods of abuse
Heroin can be injected, smoked, or sniffed/snorted. High purity heroin is usually snorted or smoked.

Affect on mind
Because it enters the brain so rapidly, heroin is particularly addictive, both psychologically and physically. Heroin abusers report feeling a surge of euphoria or “rush,” followed by a twilight state of sleep and wakefulness.

Affect on body
One of the most significant effects of heroin use is addiction. With regular heroin use, tolerance to the drug develops. Once this happens, the abuser must use more heroin to achieve the same intensity. As higher doses of the drug are used over time, physical dependence and addiction to the drug develop. Physical symptoms of heroin use include: drowsiness, respiratory depression, constricted pupils, nausea, a warm flushing of the skin, dry mouth, and heavy extremities.

Drugs causing similar effects
Other opioids such as OxyContin®, Vicodin®, codeine, morphine, methadone, and fentanyl can cause similar effects as heroin.

Overdose effects
Because heroin abusers do not know the actual strength of the drug or its true contents, they are at a high risk of overdose or death. The effects of a heroin overdose are: slow and shallow breathing, blue lips and fingernails, clammy skin, convulsions, coma, and possible death.

Legal status in the United States
Heroin is a Schedule I substance under the Controlled Substances Act meaning that it has a high potential for abuse, no currently accepted medical use in treatment in the United States, and a lack of accepted safety for use under medical supervision.

Common places of origin
Heroin is processed from morphine, a naturally occurring substance extracted from the seed pod of certain varieties of poppy plants grown in: Southeast Asia (Thailand, Laos, and Myanmar (Burma)), Southwest Asia (Afghanistan and Pakistan), Mexico, and Colombia. It comes in several forms, the main one being “black tar” from Mexico (found primarily in the western United States) and white heroin from Colombia (primarily sold on the East Coast).
Overview

Hydrocodone is the most frequently prescribed opioid in the United States and is associated with more drug abuse and diversion than any other licit or illicit opioid. It is an orally active agent most frequently prescribed for the treatment of moderate to moderately severe pain. Its analgesic potency is similar to morphine. Hydrocodone is also an antitussive (cough suppressant) agent with an efficacy similar to that of codeine. There are numerous brand and generic hydrocodone products marketed in the United States. All are combination products. The most frequently prescribed combination is hydrocodone and acetaminophen (for example, Vicodin®, Lorcet®, and Lortab®). Other examples of combination products include those containing aspirin (Lortab ASA®), ibuprofen (Vicoprofen®) and antihistamines (Hycomine®).

Street names

Hydro, Norco, Vikes

Looks like

Hydrocodone has a chemical structure that is related to that of codeine and morphine. Hydrocodone combination products are formulated in tablets, capsules, and syrups.

Methods of abuse

Most often these drugs are abused by oral rather than intravenous administration.

Affect on mind

Hydrocodone, like most other opioids, induces euphoria, sedation and alters the perception of painful stimuli.

Affect on body

Hydrocodone can cause drowsiness, dizziness, nausea, constipation, urinary retention and in higher amounts, depressed respiration. Long term use can lead to dependence and addiction. Withdrawal symptoms include restlessness, muscle and bone pain, insomnia, diarrhea, and vomiting.

Drugs causing similar effects

Morphine, heroin, oxycodone, codeine, propoxyphene, fentanyl, and hydromorphone.

Overdose effects

Like other opioids, hydrocodone overdose is associated with cold and clammy skin, severely constricted pupils, and slow breathing that can lead to a loss of consciousness and death. Large doses of hydrocodone in combination with acetaminophen may cause severe liver damage.
Legal status in the United States

Hydrocodone is a Schedule II narcotic that is marketed in multi-ingredient Schedule III products. The Schedule III drug products have accepted medical use in treatment and have a moderate to low physical dependence or high psychological dependence.

Common places of origin

A legitimate pharmaceutical, Hydrocodone is found in the illicit market most often in tablets, capsules, and liquid form. Tablets containing acetaminophen are the most frequently encountered products. Hydrocodone can be obtained from illicit internet sources, altered or fraudulent prescriptions, doctor-shopping, drug theft, and from friends or acquaintances.
Overview
Hydromorphone belongs to a class of drugs called “opioids,” which includes morphine. It has an analgesic potency of two to eight times that of morphine, but has a shorter duration of action and greater sedative properties.

Street names
D, Dillies, Dust, Footballs, Juice, Smack

Looks like
Hydromorphone comes in: tablets, rectal suppositories, oral solutions, and injectable formulations.

Methods of abuse
Users may abuse hydromorphone tablets by ingesting them. Injectable solutions, as well as tablets that have been crushed and dissolved in a solution may be injected as a substitute for heroin.

Affect on mind
When used as a drug of abuse, and not under a doctor’s supervision, hydromorphone is taken to produce feelings of euphoria, relaxation, sedation, and reduced anxiety. It may also cause mental clouding, changes in mood, nervousness, and restlessness. It works centrally (in the brain) to reduce pain and suppress cough. Hydromorphone use is associated with both physiological and psychological dependence.

Affect on body
Hydromorphone may cause: constipation, pupillary constriction, urinary retention, nausea, vomiting, respiratory depression, dizziness, impaired coordination, loss of appetite, rash, slow or rapid heartbeat, and changes in blood pressure.

Drugs causing similar effects
Drugs that have similar effects include: heroin, morphine, hydrocodone, fentanyl, and oxycodone.

Overdose effects
Acute overdose of hydromorphone can produce: severe respiratory depression, drowsiness progressing to stupor or coma, lack of skeletal muscle tone, cold and clammy skin, constricted pupils, and reduction in blood pressure and heart rate. Severe overdose may result in death due to respiratory depression.

Legal status in the United States
Hydromorphone is a Schedule II drug under the Controlled Substances Act with an accepted medical use as a pain reliever. Hydromorphone has a high potential for abuse and use may lead to severe psychological or physical dependence.

Common places of origin
Hydromorphone is legally manufactured and distributed in the United States. However, abusers can obtain hydromorphone from forged prescriptions, “doctor-shopping,” theft from pharmacies, and from friends and acquaintances.
Inhalants

Overview
Inhalants are invisible, volatile substances found in common household products that produce chemical vapors that are inhaled to induce psychoactive or mind altering effects.

Street names
Gluey, Huff, Rush, Whippets

Looks like
Common household products such as glue, lighter fluid, cleaning fluids, and paint all produce chemical vapors that can be inhaled.

Methods of abuse
Although other abused substances can be inhaled, the term “inhalants” is used to describe a variety of substances whose main common characteristic is that they are rarely, if ever, taken by any route other than inhalation. Inhalants are breathed in through the nose or the mouth in a variety of ways, such as: “sniffing” or “snorting”; “bagging” — sniffing or inhaling fumes from substances sprayed or deposited inside a plastic or paper bag; and “huffing” from an inhalant-soaked rag stuffed in the mouth, or inhaling from balloons filled with nitrous oxide. Inhalants are often among the first drugs that young children use. About 1 in 5 kids report having used inhalants by the eighth grade. Inhalants are also one of the few substances abused more by younger children than by older ones.

Affect on mind
Inhalant abuse can cause damage to the parts of the brain that control thinking, moving, seeing, and hearing. Cognitive abnormalities can range from mild impairment to severe dementia.

Affect on body
Inhaled chemicals are rapidly absorbed through the lungs into the bloodstream and quickly distributed to the brain and other organs. Nearly all inhalants produce effects similar to anesthetics, which slow down the body’s function. Depending on the degree of abuse, the user can experience slight stimulation, feeling of less inhibition or loss of consciousness. Within minutes of inhalation, the user experiences intoxication along with other effects similar to those produced by alcohol. These effects may include slurred speech, an inability to coordinate movements, euphoria, and dizziness. After heavy use of inhalants, abusers may feel drowsy for several hours and experience a lingering headache. Additional symptoms exhibited by long-term inhalant abusers include: weight loss, muscle weakness, disorientation, inattentive- ness, lack of coordination, irritability, depression, and damage to the nervous system and other organs. Some of the damaging effects to the body may be at least partially reversible when inhalant abuse is
stopped; however, many of the effects from prolonged abuse are irreversible. Prolonged sniffing of the highly concentrated chemicals in solvents or aerosol sprays can induce irregular and rapid heart rhythms and lead to heart failure and death within minutes. There is a common link between inhalant use and problems in school — failing grades, chronic absences, and general apathy. Other signs include: paint or stains on body or clothing; spots or sores around the mouth; red or runny eyes or nose; chemical breath odor; drunk, dazed, or dizzy appearance; nausea; loss of appetite; anxiety; excitability; and irritability.

**Drugs causing similar effects**

Most inhalants produce a rapid high that is similar to the effects of alcohol intoxication.

**Overdose effects**

Because intoxication lasts only a few minutes, abusers try to prolong the high by continuing to inhale repeatedly over the course of several hours, which is a very dangerous practice. With successive inhalations, abusers may suffer loss of consciousness and/or death. “Sudden sniffing death” can result from a single session of inhalant use by an otherwise healthy young person. Sudden sniffing death is particularly associated with the abuse of butane, propane, and chemicals in aerosols. Inhalant abuse can also cause death by asphyxiation from repeated inhalations, which lead to high concentrations of inhaled fumes displacing the available oxygen in the lungs, suffocation by blocking air from entering the lungs when inhaling fumes from a plastic bag placed over the head, and choking from swallowing vomit after inhaling substances.

**Legal status in the United States**

The common household products that are misused as inhalants are legally available for their intended and legitimate uses. Many state legislatures have attempted to deter youth who buy legal products to get high by placing restriction on the sale of these products to minors.

**Common places of origin**

There are more than 1,000 products that are very dangerous when inhaled — things like typewriter correction fluid, air conditioning refrigerant, felt tip markers, spray paint, air freshener, butane, and even cooking spray. See products abused as inhalants at www.inhalants.org/product.htm (National Inhalant Prevention Coalition).
K2 or “Spice” is a mixture of herbs and spices that is typically sprayed with a synthetic compound chemically similar to THC, the psychoactive ingredients in marijuana. The chemical compounds typically include HU-210, HU-211, JWH-018, and JWH-073. K2 is commonly purchased in head shops, tobacco shops, various retail outlets, and over the Internet. It is often marketed as incense or “fake weed.” Purchasing over the Internet can be dangerous because it is not usually known where the products come from or what amount of chemical is on the organic material.

Street names
Bliss, Black Mamba, Bombay Blue, Fake Weed, Genie, Spice, Zohai

Looks like
K2 is typically sold in small, silvery plastic bags of dried leaves and marketed as incense that can be smoked. It is said to resemble potpourri.

Methods of abuse
K2 products are usually smoked in joints or pipes, but some users make it into a tea.

Affect on mind
Psychological effects are similar to those of marijuana and include paranoia, panic attacks, and giddiness.

Affect on body
Physiological effects of K2 include increased heart rate and increase of blood pressure. It appears to be stored in the body for long periods of time, and therefore the long-term effects on humans are not fully known.

Drugs causing similar effects
Marijuana

Overdose effects
There have been no reported deaths by overdose.

Legal status in the United States
On Tuesday, March 1, 2011, DEA published a final order in the Federal Register temporarily placing five synthetic cannabinoids into Schedule I of the CSA. The order became effective on March 1, 2011. The substances placed into
Schedule I are 1-pentyl-3-(1-naphthoyl) indole (JWH-018), 1-butyl-3-(1-naphthoyl) indole (JWH-073), 1-[2-(4-morpholino)ethyl]-3-(1-naphthoyl)indole (JWH-200), 5-(1,1-dimethylheptyl)-2-[(1R,3S)-3-hydroxycyclohexyl]-phenol (CP-47,497), and 5-(1,1-dimethyloctyl)-2-[(1R,3S)-3-hydroxycyclohexyl]-phenol (cannabicyclohexanol; CP-47,497 C8 homologue). This action is based on a finding by the Administrator that the placement of these synthetic cannabinoids into Schedule I of the CSA is necessary to avoid an imminent hazard to the public safety. As a result of this order, the full effect of the CSA and its implementing regulations including criminal, civil and administrative penalties, sanctions, and regulatory controls of Schedule I substances will be imposed on the manufacture, distribution, possession, importation, and exportation of these synthetic cannabinoids.

**Common places of origin**

Manufacturers of this product are not regulated and are often unknown since these products are purchased via the Internet whether wholesale or retail. Several websites that sell the product are based in China. Some products may contain an herb called damiana, which is native to Central America, Mexico, and the Caribbean.
Ketamine

Overview

Ketamine is a dissociative anesthetic that has some hallucinogenic effects. It distorts perceptions of sight and sound and makes the user feel disconnected and not in control. It is an injectable, short-acting anesthetic for use in humans and animals. It is referred to as a “dissociative anesthetic” because it makes patients feel detached from their pain and environment. Ketamine can induce a state of sedation (feeling calm and relaxed), immobility, relief from pain, and amnesia (no memory of events while under the influence of the drug). It is abused for its ability to produce dissociative sensations and hallucinations. Ketamine has also been used to facilitate sexual assault.

Street names

Cat Tranquilizer, Cat Valium, Jet, Jet K, K, Kit Kat, Purple, Special K, Special La Coke, Super Acid, Super K, Vitamin K

Looks like

Ketamine comes in a clear liquid and a white or off-white powder. Powdered ketamine (100 milligrams to 200 milligrams) typically is packaged in small glass vials, small plastic bags, and capsules as well as paper, glassine, or aluminum foil folds.

Methods of abuse

Ketamine, along with the other “club drugs,” has become popular among teens and young adults at dance clubs and “raves.” Ketamine is manufactured commercially as a powder or liquid. Powdered ketamine is also formed from pharmaceutical ketamine by evaporating the liquid using hot plates, warming trays, or microwave ovens, a process that results in the formation of crystals, which are then ground into powder. Powdered ketamine is cut into lines known as bumps and snorted, or it is smoked, typically in marijuana or tobacco cigarettes. Liquid ketamine is injected or mixed into drinks. Ketamine is found by itself or often in combination with MDMA, amphetamine, methamphetamine, or cocaine.

Affect on mind

Ketamine produces hallucinations. It distorts perceptions of sight and sound and makes the user feel disconnected and not in control. A “Special K” trip is touted as better than that of LSD or PCP because its hallucinatory effects are relatively short in duration, lasting approximately 30 to 60 minutes as opposed to several hours. Slang for experiences related to Ketamine or effects of Ketamine include: “K-land” (refers to a mellow and colorful experience), “K-hole” (refers to the out-of-body, near death experience), “Baby food” (users sink in to blissful, infantile inertia), and “God” (users are convinced that they have met their maker). The onset of effects is rapid and often occurs within a few minutes of taking the drug, though taking it orally results in a slightly slower onset of effects. Flashbacks have been reported several weeks after ketamine is used. Ketamine may also cause agitation, depression, cognitive difficulties, unconsciousness, and amnesia.
Affect on body
A couple of minutes after taking the drug, the user may experience an increase in heart rate and blood pressure that gradually decreases over the next 10 to 20 minutes. Ketamine can make users unresponsive to stimuli. When in this state, users experience: involuntarily rapid eye movement, dilated pupils, salivation, tear secretions, and stiffening of the muscles. This drug can also cause nausea.

Drugs causing similar effects
Other hallucinogenic drugs such as LSD, PCP, and mescaline can cause hallucinations. There are also several drugs such as GHB, Rohypnol and other depressants that are misused for their amnesiac or sedative properties to facilitate sexual assault.

Overdose effects
An overdose can cause unconsciousness and dangerously slowed breathing.

Legal status in the United States
Since the 1970s, ketamine has been marketed in the United States as an injectable, short-acting anesthetic for use in humans and animals. In 1999, ketamine including its salts, isomers, and salts of isomers, became a Schedule III non-narcotic substance under the Federal Controlled Substances Act. It has a currently acceptable medical use but some potential for abuse, which may lead to moderate or low physical dependence or high psychological dependence.

Common places of origin
Ketamine is produced commercially in a number of countries, including the United States. Most of the ketamine illegally distributed in the United States is diverted or stolen from legitimate sources, particularly veterinary clinics, or smuggled into the United States from Mexico. Distribution of ketamine typically occurs among friends and acquaintances, most often at raves, nightclubs, and at private parties; street sales of ketamine are rare.
Khat

Overview
Khat is a flowering evergreen shrub that is abused for its stimulant-like effect. Khat has two active ingredients, cathine and cathinone.

Street names
Abyssinian Tea, African Salad, Catha, Chat, Kat, Oat

Looks like
Khat is a flowering evergreen shrub. Khat that is sold and abused is usually just the leaves, twigs, and shoots of the Khat shrub.

Methods of abuse
Khat is typically chewed like tobacco, then retained in the cheek and chewed intermittently to release the active drug, which produces a stimulant-like effect. Dried Khat leaves can be made into tea or a chewable paste, and Khat can also be smoked and even sprinkled on food.

Affect on mind
Khat can induce manic behavior with grandiose delusions, paranoia, nightmares, hallucinations, and hyperactivity. Chronic Khat abuse can result in violence and suicidal depression.

Affect on body
Khat causes an immediate increase in blood pressure and heart rate. Khat can also cause a brown staining of the teeth, insomnia, and gastric disorders. Chronic abuse of Khat can cause physical exhaustion.

Drugs causing similar effects
Khat’s effects are similar to other stimulants, such as cocaine and methamphetamine.

Overdose effects
The dose needed to constitute an overdose is not known, however it has historically been associated with those who have been long-term chewers of the leaves. Symptoms of toxicity include delusions, loss of appetite, difficulty with breathing, and increases in both blood pressure and heart rate. Additionally, there are reports of liver damage (chemical hepatitis) and of cardiac complications, specifically myocardial infarctions. This mostly occurs among long-term chewers of khat or those who have chewed too large a dose.

Legal status in the United States
The chemicals found in khat are controlled under the Controlled Substances Act. Cathine is a Schedule IV stimulant, and cathinone is a Schedule I stimulant under the Controlled Substances Act, meaning that it has a high potential for abuse, no currently accepted medical use in treatment in the United States, and a lack of accepted safety for use under medical supervision.

Common places of origin
Khat is native to East Africa and the Arabian Peninsula, where the use of it is an established cultural tradition for many social situations.
Overview

Kratom is a tropical tree native to Thailand, Malaysia, Burma, and other areas of Southeast Asia. Consumption of its leaves produces both stimulant effects (in low doses) and sedative effects (in high doses) and can lead to addiction. The leaves from Kratom trees are widely available on the internet and sold as crushed leaves that can be smoked or steeped for tea and as gel caps.

Street names

Thang, Kakum, Thom, Ketum, Biak

Looks like

The kratom tree can reach heights of 50 feet with a spread of more than 15 feet. Forms available through the Internet include leaves (whole or crushed), powder, extract, encapsulated powder, and resin "pies," (pellets made from reduced extract).

Methods of abuse

Kratom is mainly abused orally as a tea. Chewing kratom leaves is another method of abuse.

Affect on mind

At low doses, kratom produces stimulant effects with users reporting increased alertness, physical energy, talkativeness, and sociable behavior. At high doses, users experience sedative effects. Effects occur within 5 to 10 minutes of ingestion and last for 2 to 5 hours. Kratom consumption can lead to addiction. Several cases of psychosis resulting from use of kratom have been reported, where individuals addicted to kratom exhibited psychotic symptoms, including hallucinations, delusion, and confusion. Withdrawal effects include symptoms of hostility, aggression, mood swings, runny nose, achy muscles and bones, and jerky movement of the limbs.

Affect on body

Kratom’s effects on the body include nausea, itching, sweating, dry mouth, constipation, increased urination, and loss of appetite. Long-term users of kratom have experienced anorexia, weight loss, insomnia, skin darkening, dry mouth, frequent urination, and constipation.

Drugs causing similar effects

The dominant effects of kratom are similar to those of psychostimulant drugs.

Overdose effects

Kratom has been abused as a recreational drug around the world. In low doses, Kratom works as a stimulant and in high doses as a sedative. In low doses (10 grams) kratom induces mild euphoria and reduces fatigue, and generally does not interfere with ordinary activities. With strong doses (20-50 grams) the effects are said to be profoundly euphoric and immensely pleasurable.

Legal status in the United States

Kratom is not controlled under the Controlled Substances Act. There is no legitimate medical use for Kratom in the United States. However, it is marketed on the internet as “alternative medicine” for use as a pain killer, medicine for diarrhea, and other ailments and for the treatment of opiate addiction. Kratom is legal in the United States but is on the DEA list of Drugs and Chemicals of Concern.

Common places of origin

The kratom tree grows in areas of Southeast Asia, but various forms of kratom are widely available on the Internet.
LSD Overview
LSD is a potent hallucinogen that has a high potential for abuse, but currently has an accepted medical use in treatment in the United States.

Street names
Acid, Blotter Acid, Dots, Mellow Yellow, Window Pane

Looks like
LSD is sold on the street in tablets, capsules, and occasionally in liquid form. It is an odorless and colorless substance with a slightly bitter taste. LSD is often added to absorbent paper, such as blotter paper, and divided into small decorated squares, with each square representing one dose.

Methods of abuse
LSD is abused orally.

Affect on mind
During the first hour after ingestion, users may experience visual changes with extreme changes in mood. While hallucinating, the user may suffer impaired depth and time perception accompanied by distorted perception of the shape and size of objects, movements, colors, sound, touch and the user's own body image. The ability to make sound judgments and see common dangers is impaired, making the user susceptible to personal injury. It is possible for users to suffer acute anxiety and depression after an LSD "trip" and flashbacks have been reported days, and even months, after taking the last dose.

Affect on body
The physical effects include: dilated pupils, higher body temperature, increased heart rate and blood pressure, sweating, loss of appetite, sleeplessness, dry mouth, and tremors.

Drugs causing similar effects
LSD's effects are similar to other hallucinogens, such as PCP, mescaline, and peyote.

Overdose effects
Longer, more intense "trip" episodes, psychosis, and possible death.

Legal status in the United States
LSD is a Schedule I substance under the Controlled Substances Act, meaning that it has a high potential for abuse, no currently accepted medical use in treatment in the United States, and a lack of accepted safety for use under medical supervision.

Common places of origin
LSD is produced in clandestine laboratories in the United States.
Marijuana Overview

Marijuana is a mind-altering (psychoactive) drug, produced by the Cannabis sativa plant. Marijuana contains over 400 chemicals. THC (delta-9-tetrahydrocannabinol) is believed to be the main chemical ingredient that produces the psychoactive effect.

Street names

Aunt Mary, BC Bud, Blunts, Boom, Chronic, Dope, Gangster, Ganja, Grass, Hash, Herb, Hydro, Indo, Joint, Kif, Mary Jane, Mota, Pot, Reefer, Sinsemilla, Skunk, Smoke, Weed, Yerba

Looks like

Marijuana is a dry, shredded green/brown mix of flowers, stems, seeds, and leaves from the Cannabis sativa plant. The mixture typically is green, brown, or gray in color and may resemble tobacco.

Methods of abuse

Marijuana is usually smoked as a cigarette (called a joint) or in a pipe or bong. It is also smoked in blunts, which are cigars that have been emptied of tobacco and refilled with marijuana, sometimes in combination with another drug. Marijuana is also mixed with foods or brewed as a tea.

Affect on mind

When marijuana is smoked, the THC passes from the lungs and into the bloodstream, which carries the chemical to the organs throughout the body, including the brain. In the brain, the THC connects to specific sites called cannabinoid receptors on nerve cells and influences the activity of those cells. Many of these receptors are found in the parts of the brain that influence pleasure, memory, thought, concentration, sensory and time perception, and coordinated movement. The short-term effects of marijuana include problems with memory and learning, distorted perception, difficulty in thinking and problem-solving, and loss of coordination. The effect of marijuana on perception and coordination are responsible for serious impairments in driving abilities. Long-term chronic marijuana use is associated with Amotivational Syndrome, characterized by apathy, impairment of judgment, memory and concentration, and loss of motivation, ambition and interest in the pursuit of personal goals. High doses of marijuana can result in mental confusion, panic reactions and hallucinations. Researchers have also found an association between marijuana use and an increased risk of depression; an increased risk and earlier onset of schizophrenia and other psychotic disorders, especially for teens that have a genetic predisposition.

Affect on body

Short-term physical effects from marijuana use may include sedation, blood shot eyes, increased heart rate, coughing from lung irritation, increased appetite, and decreased blood pressure. Like tobacco smokers, marijuana smokers experience serious health problems such as bronchitis, emphysema, and bronchial asthma. Extended use may cause suppression of the immune system. Because marijuana contains toxins and carcinogens, marijuana smokers increase their risk of cancer of the head, neck, lungs and respiratory track. Withdrawal from chronic use of high doses of marijuana causes physical signs including headache, shakiness, sweating, stomach pains and nausea, as well as
behavioral signs including restlessness, irritability, sleep difficulties and decreased appetite.

**Drugs causing similar effects**

Hashish and hashish oil are drugs made from the cannabis plant that are like marijuana, only stronger. Hashish (hash) consists of the THC-rich resinous material of the cannabis plant, which is collected, dried, and then compressed into a variety of forms, such as balls, cakes, or cookie like sheets. Pieces are then broken off, placed in pipes or mixed with tobacco and placed in pipes or cigarettes, or smoked. The main sources of hashish are the Middle East, North Africa, Pakistan and Afghanistan. Hashish Oil (hash oil, liquid hash, cannabis oil) is produced by extracting the cannabinoids from the plant material with a solvent. The color and odor of the extract will vary, depending on the solvent used. A drop or two of this liquid on a cigarette is equal to a single marijuana joint. Like marijuana, hashish and hashish oil are both Schedule I drugs.

**Overdose effects**

No death from overdose of marijuana has been reported.

**Legal status in the United States**

Marijuana is a Schedule I substance under the Controlled Substances Act. Schedule I drugs are classified as having a high potential for abuse, no currently accepted medical use in treatment in the United States, and a lack of accepted safety for use of the drug or other substance under medical supervision. Marinol, a synthetic version of THC, the active ingredient found in the marijuana plant, can be prescribed for the control of nausea and vomiting caused by chemotherapeutic agents used in the treatment of cancer and to stimulate appetite in AIDS patients. Marinol is a Schedule III substance under the Controlled Substances Act. Schedule III drugs are classified as having less potential for abuse than the drugs or substances in Schedules I and II, and have a currently accepted medical use in treatment in the U.S., and abuse of the drug may lead to moderate or low physical dependence or psychological dependence.

**Common places of origin**

Marijuana is grown in the United States, Canada, Mexico, South America and Asia. It can be cultivated in both outdoor and in indoor settings.
Methadone

Overview
Methadone is a synthetic (man-made) narcotic.

Street names
Amidone, Chocolate Chip Cookies, Fizzies, Maria, Pastora, Salvia, Street Methadone, Wafer

Looks like
Methadone is available as a tablet, disc, oral solution, or injectable liquid. Tablets are available in 5 mg and 10 mg formulations. As of January 1, 2008, manufacturers of methadone hydrochloride tablets 40 mg (dispersible) have voluntarily agreed to restrict distribution of this formulation to only those facilities authorized for detoxification and maintenance treatment of opioid addiction, and hospitals. Manufacturers will instruct their wholesale distributors to discontinue supplying this formulation to any facility not meeting the above criteria.

Methods of abuse
Methadone can be swallowed or injected.

Affect on mind
Abuse of methadone can lead to psychological dependence.

Affect on body
When an individual uses methadone, he/she may experience physical symptoms like sweating, itchy skin, or sleepiness. Individuals who abuse methadone risk becoming tolerant of and physically dependent on the drug. When use is stopped, individuals may experience withdrawal symptoms including: anxiety, muscle tremors, nausea, diarrhea, vomiting, and abdominal cramps.

Drugs causing similar effects
Although chemically unlike morphine or heroin, methadone produces many of the same effects.

Overdose effects
The effects of a methadone overdose are: slow and shallow breathing, blue fingernails and lips, stomach spasms, clammy skin, convulsions, weak pulse, coma, and possible death.

Legal status in the United States
Methadone is a Schedule II drug under the Controlled Substances Act. While it may legally be used under a doctor's supervision, its non-medical use is illegal.

Common places of origin
German scientists synthesized methadone during World War II because of a shortage of morphine. Methadone was introduced into the United States in 1947 as an analgesic (Dolophine).
Methamphetamine (meth) is a stimulant. The FDA-approved brand-name medication is Desoxyn®.

Street names
Batu, Bikers Coffee, Black Beauties, Chalk, Chicken Feed, Crank, Crystal, Glass, Go-Fast, Hiropon, Ice, Meth, Methlies Quick, Poor Man’s Cocaine, Shabu, Shards, Speed, Stove Top, Tina, Trash, Tweak, Uppers, Ventana, Vidrio, Yaba, Yellow Bam

Looks like
Regular meth is a pill or powder. Crystal meth resembles glass fragments or shiny blue-white “rocks” of various sizes.

Methods of abuse
Meth is swallowed, snorted, injected, or smoked. To intensify the effects, users may take higher doses of the drug, take it more frequently, or change their method of intake. In some cases, meth abusers go without food and sleep while taking part in a form of binging known as a “run.” Meth users on a “run” inject as much as a gram of the drug every two to three hours over several days until they run out of meth or become too disorganized to continue.

Affect on mind
Meth is a highly addictive drug with potent central nervous system (CNS) stimulant properties. Those who smoke or inject it report a brief, intense sensation, or rush. Oral ingestion or snorting produces a long-lasting high instead of a rush, which reportedly can continue for as long as half a day. Both the rush and the high are believed to result from the release of very high levels of the neurotransmitter dopamine into areas of the brain that regulate feelings of pleasure. Long-term meth use results in many damaging effects, including addiction. Chronic meth abusers exhibit violent behavior, anxiety, confusion, insomnia, and psychotic features, including paranoia, aggression, visual and auditory hallucinations, mood disturbances, and delusions — such as the sensation of insects creeping on or under the skin. Such paranoia can result in homicidal or suicidal thoughts. Researchers have reported that as much as 50% of the dopamine-producing cells in the brain can be damaged after prolonged exposure to relatively low levels of meth. Researchers also have found that serotonin-containing nerve cells may be damaged even more extensively.

Affect on body
Taking even small amounts of meth can result in increased wakefulness, increased physical activity, decreased appetite, rapid breathing and heart rate, irregular heartbeat, increased blood pressure, and hyperthermia (overheating). High doses can elevate body temperature to dangerous, sometimes lethal, levels as well as cause convulsions and even cardiovascular collapse and death. Meth abuse may also cause extreme anorexia, memory loss, and severe dental problems.

Drugs causing similar effects
Cocaine and potent stimulant pharmaceuticals, such as amphetamines and methylphenidate, produce similar effects.
Overdose effects
High doses may result in death from stroke, heart attack, or multiple organ problems caused by overheating.

Legal status in the United States
Methamphetamine is a Schedule II stimulant under the Controlled Substances Act, which means that it has a high potential for abuse and limited medical use. It is available only through a prescription that cannot be refilled. Today there is only one legal meth product, Desoxyn®. It is currently marketed in 5-milligram tablets and has very limited use in the treatment of obesity and attention deficit hyperactivity disorder (ADHD).

Common places of origin
Mexican drug trafficking organizations have become the primary manufacturers and distributors of methamphetamine to cities throughout the United States, including in Hawaii. Domestic clandestine laboratory operators also produce and distribute meth but usually on a smaller scale. The methods used depend on the availability of precursor chemicals. Currently, meth is mainly made with diverted products that contain pseudoephedrine. The Combat Methamphetamine Epidemic Act of 2005 requires retailers of non-prescription products containing pseudoephedrine, ephedrine, or phenylpropanolamine to place these products behind the counter or in a locked cabinet. Consumers must show identification and sign a logbook for each purchase.
**Morphine**

**Overview**

Morphine is a non-synthetic narcotic with a high potential for abuse and is the principal constituent of opium. It is one of the most effective drugs known for the relief of severe pain.

**Street names**

Dreamer, Emsel, First Line, God's Drug, Hows, M.S., Mister Blue, Morf, Morpho, Unkie

**Looks like**

Morphine is marketed under generic and brand name products, including: MS-Contin®, oramorph SR®, MSIR®, Roxanol®, Kadian®, and RMS®.

**Methods of abuse**

Traditionally, morphine was almost exclusively used by injection, but the variety of pharmaceutical forms that it is marketed as today support its use by oral and other routes of administration. Forms include: oral solutions, immediate- and sustained-release tablets and capsules, suppositories, and injectable preparations. Those dependent on morphine prefer injection because the drug enters the blood stream more quickly.

**Affect on mind**

Morphine’s effects include euphoria and relief of pain. Chronic use of morphine results in tolerance and physical and psychological dependence.

**Affect on body**

Morphine use results in relief from physical pain, decrease in hunger, and inhibition of the cough reflex.

**Drugs causing similar effects**

Drugs causing similar effects as morphine include: opium, codeine, heroin, methadone, hydrocodone, fentanyl, and oxycodone.

**Overdose effects**

Overdose effects include: cold, clammy skin, lowered blood pressure, sleepiness, slowed breathing, slow pulse rate, coma, and possible death.

**Legal status in the United States**

Morphine is a Schedule II narcotic under the Controlled Substances Act.

**Common places of origin**

In the United States, a small percentage of the morphine obtained from opium is used directly for pharmaceutical products. The remaining morphine is processed into codeine and other derivatives.
Overview

Also known as “opioids,” the term “narcotic” comes from the Greek word for “stupor” and originally referred to a variety of substances that dulled the senses and relieved pain. Though some people still refer to all drugs as “narcotics,” today “narcotic” refers to opium, opium derivatives, and their semi-synthetic substitutes. A more current term for these drugs, with less uncertainty regarding its meaning, is “opioid.” Examples include the illicit drug heroin and pharmaceutical drugs like OxyContin®, Vicodin®, codeine, morphine, methadone, and fentanyl.

Street names

Big H, Black Tar, Brown Sugar, Dover's Powder, Hilbilly Heroin, Horse, Junk, Lean or Purple Drank, MPTP (New Heroin), Mud, OC, Oxy, Oxycontin, Paregoric, Sippin Syrup, Smack

Looks like

Narcotics/opioids come in various forms, including: tablets, capsules, skin patches, powder, chunks in varying colors (from white to shades of brown and black), liquid form for oral use and injection, syrups, suppositories, and lollipops.

Methods of abuse

Narcotics/opioids can be swallowed, smoked, sniffed, or injected.

Affect on mind

Besides their medical use, narcotics/opioids produce a general sense of well-being by reducing tension, anxiety, and aggression. These effects are helpful in a therapeutic setting but contribute to the drug’s abuse. Narcotic/opioid use comes with a variety of unwanted effects, including drowsiness, inability to concentrate, and apathy. Use can create psychological dependence. Long after the physical need for the drug has passed, the addict may continue to think and talk about using drugs and feel overwhelmed coping with daily activities. Relapse is common if there are not changes to the physical environment or the behavioral motivators that prompted the abuse in the first place.

Affect on body

Narcotics/opioids are prescribed by doctors to treat pain, suppress cough, cure diarrhea, and put people to sleep. Effects depend heavily on the dose, how it’s taken, and previous exposure to the drug. Negative effects include: slowed physical activity, constriction of the pupils, flushing of the face and neck, constipation, nausea, vomiting, and slowed breathing. As the dose is increased, both the pain relief and the harmful effects become more pronounced. Some of these preparations are so potent that a single dose can be lethal to an inexperienced user. However, except in cases of extreme intoxication, there is no loss of motor coordination or slurred speech. Physical dependence is a consequence of chronic opioid use, and withdrawal takes place when drug use is discontinued. The intensity and character of the physical symptoms experienced during withdrawal are directly related to the particular drug used, the total daily dose, the interval between doses, the duration of use and the health and personality of the user. These symptoms usually appear shortly before the time of the next scheduled dose. Early withdrawal symptoms often include: watery eyes,
runny nose, yawning, and sweating. As the withdrawal worsens, symptoms can include: restlessness, irritability, loss of appetite, nausea, tremors, drug craving, severe depression, vomiting, increased heart rate and blood pressure, and chills alternating with flushing and excessive sweating. However, without intervention, the withdrawal usually runs its course, and most physical symptoms disappear within days or weeks, depending on the particular drug.

**Drugs causing similar effects**

With the exception of pain relief and cough suppression, most central nervous system depressants (like barbiturates, benzodiazepines, and alcohol) have similar effects, including slowed breathing, tolerance, and dependence.

**Overdose effects**

Overdoses of narcotics are not uncommon and can be fatal. Physical signs of narcotics/opioid overdose include: constricted (pinpoint) pupils, cold clammy skin, confusion, convulsions, extreme drowsiness, and slowed breathing.

**Legal status in the United States**

Narcotics/opioids are controlled substances that vary from Schedule I to Schedule V, depending on their medical usefulness, abuse potential, safety, and drug dependence profile. Schedule I narcotics, like heroin, have no medical use in the U.S. and are illegal to distribute, purchase, or use outside of medical research.

**Common places of origin**

The poppy papaver somniferum is the source for all natural opioids, whereas synthetic opioids are made entirely in a lab and include meperidine, fentanyl, and methadone. Semi-synthetic opioids are synthesized from naturally occurring opium products, such as morphine and codeine, and include heroin, oxycodone, hydrocodone, and hydromorphone. Teens can obtain narcotics from friends, family members, medicine cabinets, pharmacies, nursing homes, hospitals, hospices, doctors, and the Internet.
Opium

Overview

Opium is a highly addictive non-synthetic narcotic that is extracted from the poppy plant, Papaver somniferum. The opium poppy is the key source for many narcotics, including morphine, codeine, and heroin.

Street names


Looks like

Opium can be a liquid, solid, or powder, but most poppy straw concentrate is available commercially as a fine brownish powder.

Methods of abuse

Opium can be smoked, intravenously injected, or taken in pill form. Opium is also abused in combination with other drugs. For example, “Black” is a combination of marijuana, opium, and methamphetamine, and “Buddha” is potent marijuana spiked with opium.

Affect on mind

The intensity of opium’s euphoric effects on the brain depends on the dose and route of administration. It works quickly when smoked because the opiate chemicals pass into the lungs, where they are quickly absorbed and then sent to the brain. An opium “high” is very similar to a heroin “high”; users experience a euphoric rush, followed by relaxation and the relief of physical pain.

Affect on body

Opium inhibits muscle movement in the bowels leading to constipation. It also can dry out the mouth and mucous membranes in the nose. Opium use leads to physical and psychological dependence, and can lead to overdose.

Drugs causing similar effects

Drugs that cause similar effects include: morphine, codeine, heroin, methadone, hydroquinone, fentanyl, and oxycodone.

Overdose effects

Overdose effects include: slow breathing, seizures, dizziness, weakness, loss of consciousness, coma, and possible death.

Drug Enforcement Administration • For more information, visit www.dea.gov
Legal status in the United States

Opium is a Schedule II drug under the Controlled Substances Act. Most opioids are Schedule II, III, IV, or V drugs. Some drugs that are derived from opium, such as heroin, are Schedule I drugs.

Common places of origin

The poppy plant, Papaver somniferum, is the source of opium. It was grown in the Mediterranean region as early as 5,000 B.C., and has since been cultivated in a number of countries throughout the world. The milky fluid that seeps from its incisions in the unripe seed pod of this poppy has been scraped by hand and air-dried to produce what is known as opium. A more modern method of harvesting for pharmaceutical use is by the industrial poppy straw process of extracting alkaloids from the mature dried plant (concentrate of poppy straw). All opium and poppy straw used for pharmaceutical products are imported into the United States from legitimate sources in regulated countries.
Overview

Oxycodone is a semi-synthetic narcotic analgesic and historically has been a popular drug of abuse among the narcotic abusing population.

Street names

Hillbilly Heroin, Kicker, OC, Ox, Oxy, Perc, Roxy

Looks like

Oxycodone is marketed alone as OxyContin® in 10, 20, 40 and 80 mg controlled-release tablets and other immediate-release capsules like 5 mg OxyIR®. It is also marketed in combination products with aspirin such as Percodan® or acetaminophen such as Roxicet®.

Methods of abuse

Oxycodone is abused orally or intravenously. The tablets are crushed and sniffed or dissolved in water and injected. Others heat a tablet that has been placed on a piece of foil then inhale the vapors.

Affect on mind

Euphoria and feelings of relaxation are the most common effects of oxycodone on the brain, which explains its high potential for abuse.

Affect on body

Physiological effects of oxycodone include: pain relief, sedation, respiratory depression, constipation, papillary constriction, and cough suppression. Extended or chronic use of oxycodone containing acetaminophen may cause severe liver damage.

Drugs causing similar effects

Drugs that cause similar effects to oxycodone include: opium, codeine, heroin, methadone, hydrocodone, fentanyl, and morphine.

Overdose effects

Overdose effects include: extreme drowsiness, muscle weakness, confusion, cold and clammy skin, pinpoint pupils, shallow breathing, slow heart rate, fainting, coma, and possible death.

Legal status in the United States

Oxycodone products are in Schedule II of the federal Controlled Substances Act of 1970.

Common places of origin

Oxycodone is synthesized from thebaine, a constituent of the poppy plant.
PCP

Overview
PCP is an illegal drug abused for its hallucinogenic effects.

Street names
Angel Dust, Embalming Fluid, Killer Weed, Rocket Fuel, Supergrass

Looks like
In its pure form, PCP is a white crystalline powder that readily dissolves in water. However, most PCP on the street is tan/brown in color, powdery or gummy in consistency, and is typically transported in small foil wraps. PCP is most commonly sold as a powder or liquid, and applied to a leafy material such as oregano, parsley, mint, or marijuana and then smoked.

Methods of abuse
Smoked, injected, snorted, taken orally

Affect on mind
PCP use often causes a user to feel detached, distant and estranged from his surroundings. Auditory hallucinations and severe mood disorders can occur. In some users, acute anxiety, paranoia and hostility, as well as psychosis can occur.

Affect on body
Numbness, slurred speech, and loss of coordination can be accompanied by a sense of strength and invulnerability. A blank stare, rapid and involuntary eye movements, and an exaggerated gait are among the more observable effects.

Drugs causing similar effects
PCP’s effects are similar to other hallucinogens, such as mescaline and peyote.

Overdose effects
Longer, more intense “trip” episodes, psychosis and possible death.

Legal status in the United States
Originally designed as a human anesthetic and later produced only as a veterinary anesthetic, PCP is no longer produced or used for legitimate purposes.

Common places of origin
PCP is generally produced in clandestine laboratories in the United States.
Peyote is a small, spineless cactus. The active ingredient in peyote is the hallucinogen mescaline.

Street names
Buttons, Cactus, Mesc, Peyoto

Looks like
The top of the peyote cactus is referred to as the “crown” and consists of disc-shaped buttons that are cut off.

Methods of abuse
The fresh or dried buttons are chewed or soaked in water to produce an intoxicating liquid. Peyote buttons may also be ground into a powder that can be placed inside gelatin capsules to be swallowed, or smoked with a leaf material such as cannabis or tobacco.

Affect on mind
Abuse of peyote and mescaline will cause varying degrees of: illusions, hallucinations, altered perception of space and time, and altered body image. Users may also experience euphoria, which is sometimes followed by feelings of anxiety.

Affect on body
Following the consumption of peyote and mescaline, users may experience: intense nausea, vomiting, dilation of the pupils, increased heart rate, increased blood pressure, a rise in body temperature that causes heavy perspiration, headaches, muscle weakness, and impaired motor coordination.

Drugs causing similar effects
Other hallucinogens like LSD, psilocybin (mushrooms), and PCP.

Legal status in the United States
Peyote and mescaline are Schedule I substances under the Controlled Substances Act, meaning that they have a high potential for abuse, no currently accepted medical use in treatment in the United States, and a lack of accepted safety for use under medical supervision.

Common places of origin
From earliest recorded time, peyote has been used by natives in northern Mexico and the southwestern United States as a part of their religious rites. Mescaline can be extracted from peyote or produced synthetically.
Psilocybin is a chemical obtained from certain types of fresh or dried mushrooms.

**Street names**
Magic Mushrooms, Mushrooms, Shrooms

**Looks like**
Mushrooms containing psilocybin are available fresh or dried and have long, slender stems topped by caps with dark gills on the underside. Fresh mushrooms have white or whitish-gray stems; the caps are dark brown around the edges and light brown or white in the center. Dried mushrooms are usually rusty brown with isolated areas of off-white.

**Methods of abuse**
Psilocybin mushrooms are ingested orally. They may also be brewed as a tea or added to other foods to mask their bitter flavor.

**Affect on mind**
The psychological consequences of psilocybin use include hallucinations and an inability to discern fantasy from reality. Panic reactions and psychosis also may occur, particularly if a user ingests a large dose.

**Affect on body**
The physical effects include: nausea, vomiting, muscle weakness, and lack of coordination.

**Drugs causing similar effects**
Psilocybin effects are similar to other hallucinogens, such as mescaline and peyote.

**Overdose effects**
Effects of overdose include: longer, more intense “trip” episodes, psychosis, and possible death. Abuse of psilocybin mushrooms could also lead to poisoning if one of the many varieties of poisonous mushrooms is incorrectly identified as a psilocybin mushroom.

**Legal status in the United States**
Psilocybin is a Schedule I substance under the Controlled Substances Act, meaning that it has a high potential for abuse, no currently accepted medical use in treatment in the United States, and a lack of accepted safety for use under medical supervision.

**Common places of origin**
Psilocybin mushrooms are found in Mexico, Central America, and the United States.
Drug Fact Sheet

Rohypnol

Overview

Rohypnol® is a trade name for flunitrazepam, a central nervous system (CNS) depressant that belongs to a class of drugs known as benzodiazepines. Flunitrazepam is also marketed as generic preparations and other trade name products outside of the United States. Like other benzodiazepines, Rohypnol® produces sedative-hypnotic, anti-anxiety, and muscle relaxant effects. This drug has never been approved for medical use in the United States by the Food and Drug Administration. Outside the United States, Rohypnol® is commonly prescribed to treat insomnia. Rohypnol® is also referred to as a “date rape” drug.

Street names


Looks like

Prior to 1997, Rohypnol® was manufactured as a white tablet (0.5-2 milligrams per tablet), and when mixed in drinks, was colorless, tasteless, and odorless. In 1997, the manufacturer responded to concerns about the drug's role in sexual assaults by reformulating the drug. Rohypnol® is now manufactured as an oblong olive green tablet with a speckled blue core that when dissolved in light-colored rinks will dye the liquid blue. However, generic versions of the drug may not contain the blue dye.

Methods of abuse

The tablet can be swallowed whole, crushed and snorted, or dissolved in liquid. Adolescents may abuse Rohypnol® to produce a euphoric effect often described as a “high.” While high, they experience reduced inhibitions and impaired judgment. Rohypnol® is also abused in combination with alcohol to produce an exaggerated intoxication. In addition, abuse of Rohypnol® may be associated with multiple-substance abuse. For example, cocaine addicts may use benzodiazepines such as Rohypnol® to relieve the side effects (e.g., irritability and agitation) associated with cocaine binges. Rohypnol® is also misused to physically and psychologically incapacitate women targeted for sexual assault. The drug is usually placed in the alcoholic drink of an unsuspecting victim to incapacitate them and prevent resistance to sexual assault. The drug leaves the victim unaware of what has happened to them.

Affect on mind

Like other benzodiazepines, Rohypnol® slows down the functioning of the CNS producing drowsiness (sedation), sleep (pharmacological hypnosis), decreased anxiety, and amnesia (no memory of events while under the influence of the substance). Rohypnol® can also cause increased or decreased reaction time, impaired mental functioning and judgement, confusion, aggression, and excitability.
Affect on body
Rohypnol® causes muscle relaxation. Adverse physical effects include slurred speech, loss of motor coordination, weakness, headache, and respiratory depression. Rohypnol® also can produce physical dependence when taken regularly over a period of time.

Drugs causing similar effects
Drugs that cause similar effects include GHB (gamma hydroxybutyrate) and other benzodiazepines such as alprazolam (e.g., Xanax®), clonazepam (e.g., Klonopin®), and diazepam (e.g., Valium®).

Overdose effects
High doses of Rohypnol® particularly when combined with CNS depressant drugs (e.g., alcohol and heroin) can cause severe sedation, unconsciousness, slow heart rate, and suppression of respiration which may be sufficient to result in death.

Legal status in the United States
Rohypnol® is a Schedule IV substance under the Controlled Substance Act. Rohypnol® is not approved for manufacture, sale, use or importation to the United States. It is legally manufactured and marketed in many countries. Penalties for possession, trafficking, and distribution involving one gram or more are the same as those of a Schedule I drug.

Common places of origin
Rohypnol® is smuggled into the United States from other countries, such as Mexico.
Salvia Divinorum

Overview
Salvia divinorum is a perennial herb in the mint family that is abused for its hallucinogenic effects.

Street names
Maria Pastora, Sally-D, Salvia

Looks like
The plant has spade-shaped variegated green leaves that look similar to mint. The plants themselves grow to more than three feet high, have large green leaves, hollow square stems, and white flowers with purple calyces.

Methods of abuse
Salvia can be chewed, smoked, or vaporized.

Affect on mind
Psychic effects include perceptions of bright lights, vivid colors, shapes, and body movement, as well as body or object distortions. Salvia divinorum may also cause fear and panic, uncontrollable laughter, a sense of overlapping realities, and hallucinations. Salvinorin A is believed to be the ingredient responsible for the psychoactive effects of Salvia divinorum.

Affect on body
Adverse physical effects may include: loss of coordination, dizziness, and slurred speech.

Drugs causing similar effects
When Salvia divinorum is chewed or smoked, the hallucinogenic effects elicited are similar to those induced by other hallucinogenic substances.

Overdose effects
Adverse physical effects may include lack of coordination, dizziness, and slurred speech.

Legal status in the United States
Neither Salvia divinorum nor its active constituent Salvinorin A has an approved medical use in the United States. Salvia is not controlled under the Controlled Substances Act. Salvia divinorum is, however, controlled by a number of states. Since Salvia is not controlled by the CSA, some online botanical companies and drug promotional sites have advertised Salvia as a legal alternative to other plant hallucinogens like mescaline.

Common places of origin
Salvia is native to certain areas of the Sierra Mazateca region of Oaxaca, Mexico. It is one of several plants that are used by Mazatec Indians for ritual divination. Salvia divinorum plants can be grown successfully outside of this region. They can be grown indoors and outdoors, especially in humid semitropical climates.
Overview

Anabolic steroids are synthetically produced variants of the naturally occurring male hormone testosterone that are abused in an attempt to promote muscle growth, enhance athletic or other physical performance, and improve physical appearance. Testosterone, nandrolone, stanozolol, methandienone, and boldenone are some of the most frequently abused anabolic steroids.

Street names

Arnolds, Juice, Pumpers, Roids, Stackers, Weight Gainers

Looks like

Steroids are available in: tablets and capsules, sublingual-tablets, liquid drops, gels, creams, transdermal patches, subdermal implant pellets, and water-based and oil-based injectable solutions. The appearance of these products varies depending on the type and manufacturer.

Methods of abuse

Steroids are ingested orally, injected intramuscularly, or applied to the skin. The doses abused are often 10 to 100 times higher than the approved therapeutic and medical treatment dosages. Users typically take two or more anabolic steroids at the same time in a cyclic manner, believing that this will improve their effectiveness and minimize the adverse effects.

Affect on mind

Case studies and scientific research indicate that high doses of anabolic steroids may cause mood and behavioral effects. In some individuals, steroid use can cause dramatic mood swings, increased feelings of hostility, impaired judgment, and increased levels of aggression (often referred to as “roid rage”). When users stop taking steroids, they may experience depression that may be severe enough to lead one to commit suicide. Anabolic steroid use may also cause psychological dependence and addiction.

Affect on body

A wide range of adverse effects is associated with the use or abuse of anabolic steroids. These effects depend on several factors including: age, sex, the anabolic steroid used, amount used, and duration of use. In adolescents, anabolic steroid use can stunt the ultimate height that an individual achieves. In boys, steroid use can cause early sexual development, acne, and stunted growth. In adolescent girls and women, anabolic steroid use can induce permanent physical changes, such as deepening of the voice, increased facial and body hair growth, menstrual irregularities, male pattern baldness, and lengthening of the clitoris. In men, anabolic steroid use can cause shrinkage of the testicles, reduced sperm count, enlargement of the male breast tissue, sterility, and an increased risk of prostate cancer. In both men and women, anabolic steroid use can cause high cholesterol levels, which may increase the risk of
coronary artery disease, strokes, and heart attacks. Anabolic steroid use can also cause acne and fluid retention. Oral preparations of anabolic steroids, in particular, can damage the liver. Abusers who inject steroids run the risk of contracting various infections due to non-sterile injection techniques, sharing of contaminated needles, and the use of steroid preparations manufactured in non-sterile environments. All these factors put users at risk for contracting viral infections such as HIV/AIDS or hepatitis B or C, and bacterial infections at the sight of injection. Abusers may also develop endocarditis, a bacterial infection that causes a potentially fatal inflammation of the heart lining.

Drugs causing similar effects
There are several substances that produce effects similar to those of anabolic steroids. These include human growth hormone (hHGH), clenbuterol, gonadotropins, and erythropoietin.

Overdose effects
Anabolic steroids are not associated with overdoses. The adverse effects a user would experience develop from the use of steroids over time.

Legal status in the United States
Anabolic steroids are Schedule III substances under the Controlled Substances Act. Only a small number of anabolic steroids are approved for either human or veterinary use. Steroids may be prescribed by a licensed physician for the treatment of testosterone deficiency, delayed puberty, low red blood cell count, breast cancer, and tissue wasting resulting from AIDS.

Common places of origin
Most illicit steroids are smuggled into the U.S. from abroad. Steroids are also illegally diverted from legitimate sources (theft or inappropriate prescribing). The Internet is the most widely used means of buying and selling anabolic steroids. Steroids are also bought and sold at gyms, bodybuilding competitions, and schools from teammates, coaches, and trainers.
Stimulants

Overview
Stimulants speed up the body’s systems. This class of drugs includes prescription drugs such as amphetamines (Adderall® and Dexedrine®), methylphenidate (Concerta® and Ritalin®), diet aids (such as Didrex®, Bontril®, Preludin®, Fastin®, Adipex P®, Ionomin®, and Meridia®) and illicitly produced drugs such as methamphetamine, cocaine, and methcathinone.

Street names
Bennies, Black Beauties, Cat, Coke, Crank, Crystal, Flake, Ice, Pellets, R-Ball, Skippy, Snow, Speed, Uppers, Vitamin R

Looks like
Stimulants come in the form of pills, powder, rocks, injectable liquids.

Methods of abuse
Stimulants can be pills or capsules that are swallowed. Smoking, snorting, or injecting stimulants produces a sudden sensation known as a “rush” or a “flash.” Abuse is often associated with a pattern of binge use—sporadically consuming large doses of stimulants over a short period of time. Heavy users may inject themselves every few hours, continuing until they have depleted their drug supply or reached a point of delirium, psychosis, and physical exhaustion. During heavy use, all other interests become secondary to recreating the initial euphoric rush.

Affect on mind
When used as drugs of abuse and not under a doctor’s supervision, stimulants are frequently taken to: produce a sense of exhilaration, enhance self esteem, improve mental and physical performance, increase activity, reduce appetite, extend wakefulness for prolonged period, and “get high.” Chronic, high-dose use is frequently associated with agitation, hostility, panic, aggression, and suicidal or homicidal tendencies. Paranoia, sometimes accompanied by both auditory and visual hallucinations, may also occur. Tolerance, in which more and more drug is needed to produce the usual effects, can develop rapidly, and psychological dependence occurs. In fact, the strongest psychological dependence observed occurs with the more potent stimulants, such as amphetamine, methylphenidate, methamphetamine, cocaine and methcathinone. Abrupt cessation is commonly followed by depression, anxiety, drug craving, and extreme fatigue, known as a “crash.”

Affect on body
Stimulants are sometimes referred to as uppers and reverse the effects of fatigue on both mental and physical tasks. Therapeutic levels of stimulants can produce exhilaration, extended wakefulness, and loss of appetite. These effects are greatly intensified when large doses of stimulants are taken. Taking too large a dose at one time or taking large doses over an extended period of time may cause such physical side effects as dizziness, tremors, headache, flushed skin, chest pain with palpitations, excessive sweating, vomiting, and abdominal cramps.

Drugs causing similar effects
Some hallucinogenic substances, such as Ecstasy, have a stimulant component to their activity.

**Overdose effects**

In overdose, unless there is medical intervention, high fever, convulsions, and cardiovascular collapse may precede death. Because accidental death is partially due to the effects of stimulants on the body’s cardiovascular and temperature-regulating systems, physical exertion increases the hazards of stimulant use.

**Legal status in the United States**

Many stimulants have a legitimate medical use for the treatment of conditions such as obesity, narcolepsy, and attention deficit and hyperactivity disorder. Such stimulants vary in their level of control from Schedules II to IV, depending on their potential for abuse and dependence. A number of stimulants have no medical use in the United States but have a high potential for abuse. These stimulants are controlled in Schedule I. Some prescription stimulants are not controlled, and some stimulants like tobacco and caffeine don’t require a prescription — though society’s recognition of their adverse effects has resulted in a proliferation of caffeine-free products and efforts to discourage cigarette smoking. Stimulant chemicals in over-the-counter products, such as ephedrine and pseudoephedrine can be found in allergy and cold medicine. As required by The Combat Methamphetamine Epidemic Act of 2005, a retail outlet must store these products out of reach of customers, either behind the counter or in a locked cabinet. Regulated sellers are required to maintain a written or electronic form of a logbook to record sales of these products. In order to purchase these products, customers must now show a photo identification issued by a state or federal government. They are also required to write or enter into the logbook: their name, signature, address, date, and time of sale. In addition to the above, there are daily and monthly sales limits set for customers.

**Common places of origin**

Stimulants are diverted from legitimate channels and clandestinely manufactured exclusively for the illicit market.