Stimulant drugs

Professional guidance



Who is this for?

This guidance is aimed at professionals who come into contact with stimulant drug users through their work. This may include those in the community and voluntary sectors or in health and social care.

It aims to support you in your conversations about stimulants with people who use them and to help you give advice that will reduce the risks they face and help prevent stimulant-related deaths and illnesses.

Why is this needed?

Every year in Northern Ireland stimulants are a factor in around eight to ten deaths. In the UK 251 new psychoactive substances were identified in 2012 and since then new drugs are being identified at a rate of approximately one per week. It is often not clear what is contained within individual drugs – the quality and content of such drugs varies greatly and the name used may not bear any relation to their actual contents. While these drugs are all different, and therefore can have different effects and health risks, the majority of these drugs are stimulant type drugs. When you're working with people who take stimulants, you can give standard advice that may encourage them to reduce their risk.

What are stimulants?

A stimulant is a drug that speeds up the central nervous system to increase neural activity in the brain. Stimulants tend to make people feel more alert and awake, and can produce feelings of euphoria.

Many new psychoactive substances (sometimes called 'legal highs') contain stimulant drugs, usually in powder, capsule or pill form.

Examples of stimulants:

- caffeine
- cathinones
- cocaine
- crystal meth
- ecstasy
- ephedrine
- mephedrone
- phenethylamines
- piperazines
- PMA (para-Methoxyamphetamine)
- speed

However, the type of drug and the effects differ from batch to batch. This increases the risk to the user. For example, someone might take a pill one week which contains ecstasy, and an identical looking pill the following week which contains PMA. Since PMA is slower to take effect, the user may think it is weak ecstasy and take another pill, which could lead to a fatal overdose as PMA is more toxic.

Side effects

Physical: dizziness, tremor, headache, flushed skin, chest pains with palpitations, excessive sweating, vomiting and abdominal cramps. These effects may occur as a result of taking too large a dose at one time or taking large doses over an extended period of time.

Psychological: agitation, hostility, panic, aggression and suicidal tendencies. Paranoia, sometimes accompanied by both auditory and visual hallucinations, may also occur.

Overdose: can cause high fever, convulsions, stroke, or heart problems like cardiac arrest, sometimes leading to death. Because accidental death is partially due to the effects of stimulants on the body's cardiovascular and temperature-regulating systems, physical activity (such as dancing) can increase the risks.

What can I do?

- Ensure you are as well informed as possible.
 However, be realistic about what you can and cannot know. New drugs are emerging all the time, and nobody expects you to know the name and effects of every drug available.
- If you suspect an individual may be taking drugs, do ask the question in a nonjudgemental way, and advise them that if they are taking drugs, you may be able to give them useful advice on reducing the risks.
- If someone tells you they take stimulant type drugs, ask them about their current drug taking practices, and work with them to identify how they can reduce their risks (see advice under What can I say?). This should be a two way conversation.
- Encourage them to tell you what they already know about reducing risks – they may know a lot of harm reduction advice already, and getting them to talk about how to take drugs more safely may help them to act on it.
- Provide them with printed information. You can download harm reduction advice developed by the Public Health Agency and Council for the Homeless aimed at drug users, in particular

stimulant users, at www.publichealth.hscni.net/publications/harm-reduction-drug-users

What can I say?

Key questions to ask a stimulant user and points to discuss with them include:

- Do you take drugs alone or with someone else there? Taking drugs with someone else, who can seek help if things go wrong, could save your life.
- Do you start low and go slow? Do you wait until you have peaked before you take more? There are many new drugs which look identical to those that have been on the market for a while. So a drug which looks like something you have taken before may have entirely different contents, or have effects you weren't expecting, including unpleasant ones or overdose. Different drugs act at different speeds, and a slow response does not necessarily mean that the drug is weak it may mean you have taken a slow-acting drug, which could in fact be different from what you were expecting. Taking more could lead to overdose.
- When you take stimulants, do you mix them with alcohol or other depressant drugs? Are you aware of the information in the box below?

Mixing stimulants with other substances

- Mixing stimulants and depressants can be dangerous. Stimulants mask the effects of the depressant so you can end up taking much more, particularly with alcohol. The body's normal response to too much alcohol is to eventually pass out but because stimulants prevent this happening even more alcohol can be taken. If further depressant drugs such as benzos or opiates are added then the risk of coma is much increased because of the amount of alcohol consumed.
- Mixing cocaine and alcohol is particularly risky, as the alcohol alters the way the body normally breaks down cocaine. This results in a chemical called cocaethylene. Cocaethylene is

- more toxic than both drugs alone and it remains in the body longer. The heart and liver are put under prolonged stress; sudden deaths many hours later have been linked to this effect.
- Antidepressants, whether prescribed by a doctor or not, can be dangerous when taken with amphetamines (speed). Some combinations can cause dangerously high blood pressure and fast or irregular heartbeat. People prescribed antiepileptic medications should be very cautious as the levels of their prescribed medications in the blood may be altered. This means they are much more at risk of a seizure induced by the stimulant.

- If you or a friend had any worrying symptoms, would you call an ambulance immediately?
 If treatment is needed, the earlier you get it, the more likely it will save your life. Before you start, do you ever make a pact with your friends about calling an ambulance if needed?
- Do you plan how long you are going to take the drugs for in terms of hours? Bingeing (taking drugs continuously over a whole day or longer) can increase the effects of stimulants on the body's cardiovascular and temperatureregulating systems, and make death from stroke, or heart problems more likely. If you have a set idea of when you want to begin and end or a limited number of hours, this can help avoid the increased risks associated with bingeing.
- Do you plan your comedown? It may be helpful to plan beforehand where you want to go to relax and be safe, somewhere where you can stay hydrated and manage the light and sounds to suit your mood. Think about planning your comedown so you can reduce your dose towards the end of the session and come down more gently (parachute). Do you always carry the Lifeline 24 hour counselling helpline number 0808 808 8000 in case you come down harder than expected?
- Do you think carefully about the risks before you start? This is especially important if you have mental health problems, as using any drugs you have not been prescribed can put your mental health at greater risk.
- Do you know that these drugs are not controlled in any way? You can never know what you are taking. The only way to avoid all the risks is to not take any drugs unless prescribed for you by your GP.

If someone needs additional support or treatment

Stimulant drugs can be addictive. If someone would like to stop taking them or reduce how often they take them, their GP can refer them to relevant services.

A list of services can also be found at: www.publichealth.hscni.net/publications/drug-and-alcohol-directories-services

If someone is in distress or despair, Lifeline's counsellors are available 24 hours a day, seven days a week, to listen in confidence. Contact Lifeline on 0808 808 8000.

Information and advice on drugs can also be obtained by ringing the National Drugs Helpline (Frank) on 0800 77 66 00, or by going to www.talktofrank.com/drugs-a-z

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