Play Safe
A Guide to Safe Partying
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Introduction

This booklet contains straight-forward unbiased information on party and other drugs that are around. The idea is that this information might help you or your friends to make more informed and responsible decisions about drug use. There is also a lot of information about health and safety at parties in general.

It's important to say right here, right now that this booklet is not about how to get the most from taking or using any drug or what's the best drug to take where. It's not a user manual nor a list that you should try and work your way through. What you will find is unbiased and factual information that tell all sides of the story, information that can help you or your friends prevent or reduce the harm done by regular drug use or any experimentation.

Many experts say there is no such thing as safe drug use. In many ways they are right, since so much is unknown. Making sense of the subject of recreational drugs is a challenging one, since perceived views in society are generally skewed by culture, prejudices and ignorance. It's generally not possible to have a balanced discussion about recreational drugs with those who don't have any in sight or experience. Party/Recreational/Social Drugs are generally called intoxicants, and refer to both legal and illegal drugs. Most are Psychotropic in that they affect the functioning of your brain, whilst others primarily effect some other bodily function (like rate of blood flow) which then has a secondary effect on your brain.

Illegal does not always mean bad, and Legal does not always mean good. Prescription and Over The Counter (OTC) drugs account for many chronic drug problems. The biggest drug problems in most societies are Alcohol and Nicotine by a vast margin, both of which are legal and socially accepted. Yet even a few drags of a cannabis spliff can result in a positive drug test, and the condemning diagnosis of a 'drug problem' by some. If you are a scholar, this will probably mean expulsion and being sent to rehabilitation. The subject of drugs in society is a minefield, so please treat this information with respect and care since it is being given within a certain context. Avoid being an ambassador for drugs. Very few people have a balanced, let alone informed view on drugs, so generally it's a loose-loose situation to get involved in public discussions about drugs. However, that should not stop you helping your friends with factual and verifiable information that could be of assistance to them.
The information in this booklet is by no means complete guide to party, over-the-counter, licit or illicit drugs. But it has been compiled with love and care over the past 12 years from many different sources, including reference books, medical journals and feedback from the party people themselves and aims to be relevant, objective, accurate and factual. It’s origins are the RaveSafe Project, an informal organisation that grew with the early rave scene in South Africa and that pioneered and promoted the Harm Reduction approach towards drugs in South Africa. If you would like to contribute or comment for future editions, please get in contact with us via the web site address at the back of this booklet. We also welcome help in distributing this booklet, however this should only be done in circumstances and venues where people are being exposed to these drugs.

Drug Index

Alcohol

Alcohol is a natural chemical, and is produced by fermenting and distilling organic material such as hops, grapes, peaches etc. Its one of the oldest drugs used by mankind. Drinks vary in the percentage of alcohol present, from beer and wine, which contains anything up to 5-15 % alcohol by volume, depending on brand, to spirits, which can contain up to 80% alcohol. This concentration is normally published on the packaging or container.

Light to moderate drinking can contribute to relaxation and sociability. Inhibition follows. Excessive use causes dizziness, nausea and vomiting for some, heavy drinking can also bring on aggressive behaviour. It slows down your reflexes and confuses your mind, so you should not drive or operate any machinery when drunk. It’s very dangerous not only for you, but for your passengers and other road users. It can also make you clumsy, uncoordinated and a hassle to others.

Short-term effects of alcohol use include distorted vision, hearing, and coordination, altered perceptions and emotions, impaired judgment, bad breath and hangovers. Long-term effects of heavy alcohol use include loss of appetite, vitamin deficiencies, stomach ailments, skin problems, sexual impotence, liver damage, heart and central nervous system damage and memory loss. Alcoholic dependency is perhaps the gravest long-term concern.
Drinking alcohol is a widespread legal socially-accepted activity. However, alcohol is a poison that actually kills brain cells. After drinking lots of alcohol, your body sucks up vital fluids to relieve its effects from your organs to dilute this poison. It then activates the adrenal glands to speed up your metabolism, so as to remove this poison as fast as possible. This causes the euphoria associated with getting drunk. If you continue drinking, your body runs out of the vital fluids with which to dilute the alcohol, and becomes dehydrated. Too much alcohol generally makes you throw up, because your body is trying to reject the poison. Hangovers are caused by toxins and dehydration. Alcohol acts not as a stimulant, as is often supposed, but as a depressant. It switches off nerve impulses to areas of the brain involved in memory, judgement, and co-ordination.

Because alcohol is legal and widely marketed as desirable activity, it is abused with a high frequency and with little thought. In the long run excessive use can lead to an dependency, with serious physical and mental damage as well as social problems. Alcoholism, like many addictions, can be life-destroying and it's up there amongst the hard core. For most, alcoholism can set in later in life after a career of drinking (in your 30’s and 40’s), and is very difficult to shake off. But there is no guarantee it can’t set in earlier. Some people are more vulnerable than others eg. if your family has a history of alcoholism, you could especially be at risk. See the Dependency Chapter for more info.

Alcohol shouldn't be mixed with MDMA since it makes the danger of dehydration more severe or any other depressant drugs eg: Heroin and especially GHB.

**Anabolic Steroids**

Anabolic steroids are synthetic hormones that are derived from testosterone. They are also known as Anabolic-Androgenic Steroids (A-AS), and are not the same as the steroids which are used to treat conditions like eczema and asthma. Product names include Sustanon 250, Deca-Durabolin, Dianabol, Anavar and Stanozol. They are taken orally or injected into a muscle. They should never be injected into a vein. They come in tablets, phials and multi-dose bottles.

They are medically prescribed to treat chronic debilitating diseases, but are also used by bodybuilders and athletes seeking increased muscle mass and strength, or to train harder. Use is banned in sport now. Some people who take them do so just to look
good, since they promote muscle and bone growth. There are many side effects, which depend on the specific drug taken, the dosage level and frequency, the duration of use, the method of ingestion, and the age and health of the user. Steroid use has the potential to affect a number of body systems and organs including the reproductive system, the muscle and skeletal system, the cardiovascular system, the kidneys, liver, and the skin. Side-effects include excess fluid in body tissues, muscle spasms, nervous tension, increased urine output, headache, dizziness, nausea, euphoria, skin rash, inflammation of the urethra, scrotal pain and irritability.

Heavy, regular use of steroids can lead to many problems. In men, these include shrunken testicles, the development of breasts and acne as well as problems with sex (you can’t get it up!) Some of these effects are reversible when use is stopped. With woman, similar use can lead to the development of male features such as body hair and a deep voice as well as enlargement of the clitoris, which don’t go away when use is stopped. Young people who are not fully grown can stunt their growth through use.

There are also psychological effects: Aggressive wired up behaviour - the “roid rage”, mood swings and increased or decreased sex drive. There is a reason to believe that regular use of Anabolic Steroids is dependency producing, and that withdrawal symptoms can be experienced when trying to stop. Users might also experience manic and/or depressive effects.

**Atropine**

This is a natural occurring drug which is extremely poisonous. It is a member of the alkaloid family of drugs and is a ‘sympathetic cholinergic blocking agent’.

It is found in the plant Belladona, and can be produced synthetically as well. It appears on the market in some tablets which are white and imprinted with “HOPE” and “742”. They are intended for oral use only. It is also sold in an eye drop solution as well as an ointment.

Use of the drug increases heart rate by slowing down some parts of the nervous system while simultaneously speeding up other parts. It increases the rate of the heart by approximately 20 - 40 beats per minute. In poisonous doses, it causes paralysis, excitement
and delirium. It has a half-life of 2 to 3 hours. It has no action on the voluntary muscles, but the nerve endings in involuntary muscles are paralysed by large doses, the paralysis finally affecting the central nervous system. Atropine also enters the central nervous system (CNS) by crossing the blood-brain barrier. This central nervous system activity, which may be either stimulating or depressing depending on the dose, can cause hallucinations, excitement, delirium, sedation and even unconsciousness.

Atropine is used in several ways in medicine. It is used in eye surgery for the dilation of the pupil and is also used as an antidote to opium. It is also used as a pre-medication for anaesthesia as well as to lessen pain and inflammation. It has anti-spasmodic activity and is used for asthma and whooping cough. It is also used to revive a heart attack victim, as well as an antidote to nerve gas poisoning. It was also allegedly used in witches brews in ancient European cultures, and enabled the consumer to ‘fly’. It was applied by rubbing it on the pulse points on the hands and feet, as well as the genitalia.

The effect are up to 0.5 mg - Slight dryness of nose and mouth; 1 mg - Greater dryness of nose and mouth with thirst; slowing, then acceleration of heart; slight dilation of the pupils (mydriasis), 2 mg - Very dry mouth; tachycardia with palpitations; mydriasis, slight blurring of near vision; flushed, dry skin. 5 mg - Increase in above symptoms plus disturbance of speech; difficulty in swallowing; headache; hot, dry skin; restlessness with asthenia. 10 mg and over - Above symptoms to extreme degree plus ataxia, excitement, disorientation, hallucinations, delirium, and coma. Severe atropine poisoning may be treated by a trained doctor. Death from atropine poisoning is rare, and is usually due to internal paralysis.

Atropine has been found in pills sold as E in Europe. Use should never be combined with other stimulants such as the Amphetamines (speed): the results could be fatal.

**Cannabis (Dagga, Grass, Marijuana, Hash)**

Cannabis is also called Dagga, Grass, Dope, Ganja, Doob, Splif, Skunk, Majat, Marijuana, Zol or Weed, depending where you live in the world. It is usually smoked in a rolled paper (a joint), pipe, bottleneck, bhong or bubbly, but can also be ingested by eating. It is often mixed with tobacco and it's obtained from the dried leaves and flowers of the Cannabis plant. A resin extract is called Hashish (Hash). Cannabis has been used by different cultures around the world for thousands of years.
The active ingredient is a chemical called delta9-Tetrahydrocannabinol, or THC. The concentration of THC varies between 5% and 20%. This varies considerably with what part of the weed you smoke, the seeds from which it grew, and how and where the plant was grown. The weakest is known locally as Majat, the strongest is Skunk and lately specially cultivated ‘Super Weed’. The high may last from around 15 minutes to a number of hours depending on the quality and quantity. The effects include relaxation, light to mild euphoria, exhilaration, visual hallucinations sometimes, increased - but not necessarily realistic - perceptions, short-term memory loss, and even giggling. Both pleasant and unpleasant feelings are often intensified, which can be a problem if you not feeling that great. Sensations can be intensified as well, the perceptions of colours, sounds and time can be altered. The worst-case is feeling extremely paranoid and having a panic attack - this will pass with time. However with some of the latest hybrids, the high THC content can be quiet hectic, even dangerous, for the unsuspecting. If you have to help someone not handling it, head to the Bad Trip chapter has some advice.

Physical effects are pulse and heart rate increase, thirst and appetite increase (“the munchies”), red eyes and dry mouth. It also causes forgetfulness and aggression in some users, especially if taken with alcohol. The effects start soon after inhaling, and can last for a few hours. Eating “dagga cookies” should be treated with caution, as the high is reached more slowly than smoking, and misjudging the quantity and delayed effect can cause extreme sensations. Eating glucose and sugar rich substances is known to counteract the effect of Cannabis. If you are going to use it, make sure that you are in safe place and have reliable friends to look after you. Students should be careful about using it too often since not only does your memory suffer, it also has a negative effect on your concentration span. Heavy use can produce negative effects on intellectual performance. Ultimately it is considered to be physically dependency producing, although mildly so. Heavy and/or regular use can lead to a dependency, and you might need professional help. Often people get more hooked to the nicotine in the tobacco mix without realising it.

From a health aspect there is a popular belief that smoking weed is not as risky as tobacco. Certainly it’s not physically addictive like tobacco, but it’s got just as much (if not more) tar, and can cause lung & throat cancer. Cannabis, like a lot of other drugs, can trigger psychological problems in some people, even in small or moderate amounts, and especially the latest high THC hybrids. Especially at risk are those who are predisposed to these conditions, more info on this in the Drug Psychosis chapter.
Cocaine and Crack

Cocaine is also known as Coke, Nose Candy, Charlie, Snow and Schnaaf. It comes in various forms including crack, and freebase or rocks which are more concentrated. Its chemical name is Cocaine hydrochloride. Cocaine is a central nervous system stimulant, which was first used for its anaesthetic properties. It acts by blocking the reabsorption of the neurotransmitter dopamine into the presynaptic neuron. In its common form, it is a fine white powder usually sold per gram. A gram is roughly a level teaspoon in quantity. Most often it is mixed or cut with impurities to bulk it out. Cocaine powder is usually crushed finely and snorted, or taken intravenously. Freebase cocaine is smoked from a pipe. Crack is a crystal 'rock' that is formed by cooking the cocaine powder which is normally smoked. Everything in this section applies equally to cocaine powder and crack.

The effect of snorted coke lasts about 20 minutes. Smoking crack is followed by an intense high which last for about 2 minutes, followed by a pleasurable feeling lasting another 10-20 minutes: then the chase for MORE begins.

Cocaine increases the heart rate and constricts the blood vessels. When snorted, a feeling of well-being, mild rush and increase in body temperature is experienced within the first five minutes. The pleasure centres of your brain are stimulated. Usually the very next thing you feel is the need for more. Users feel confident and a feeling of invincibility will ensue, depending on the amount of cocaine ingested. Loss of appetite can occur.

Crack/freebase is an intensified form of powdered cocaine. The rush is much more intense and more highly addictive than snorting. Paranoia and aggressiveness occur with heavy use. Death through heart attacks, or seizures, is a very real danger. Constricted veins and increased heart rate could result in burst blood vessels causing brain damage. Overconfidence and paranoid psychoses are symptoms of overuse. Intensive use normally results in you becoming too selfish, aggressive and paranoid.

Because Cocaine is a local anaesthetic, when smoked it can cause scorched lungs. Because it constricts your blood vessels, unborn babies could suffer brain damage or death. Snorting causes permanent damage to the nasal passages and chronic sinusitis.

Although Cocaine is used as a recreational drug, it is regarded as an addictive substance
and the path to addiction is through regular use. This inevitably leads to a very expensive and hard to kick habit. Crack and freebasing are much more dangerous, the high is sky high and it's very addictive. The comedown is much more hectic as well, leading the chase for another high.

**Staying safe:**
* Avoid taking other stimulants;
* Avoid mixing with alcohol - the bad effects of both alcohol and cocaine are greatly magnified;
* Avoid taking cocaine or crack to put off coming down other drugs. You've got to come down sometime and the longer you leave it the worse it gets;
* If you are snorting with others, it is possible that viruses such as influenza can be passed from infected users;
* Make sure you set a limit on the money you spend on crack - try not to borrow or buy on credit.

**Diet Pills**

Also known as Obies, Nobies, O's, yellows, Thinz, Nobese No. 1 and Obex-LA. Diet pills (DP) can be capsules filled with granules or hard-coated tablets. Most DPs contain a form of ephedrine, pseudoephedrine or a similar compound. See the Ephedrine chapter for more info.

They are swallowed, and should not be chewed, otherwise a massive dose is released in a short time. Snorting can cause a bad nose bleed. It takes about 20-45 minutes to feel the effects, and they are designed to be released into the blood over a 12 hour period. One tablet or capsule is the common dose until tolerance occurs.

Diet Pills (DPs) generally give the effect of increased energy, wakefulness and exhilaration (feeling good and mood elevation). The feeling of an altered state is enhanced by your heart rate going up, a dry mouth with a metallic taste, muscle tremors and giddiness. Obviously, appetite is also reduced. In some cases hallucinations can occur. You may experience nausea and vomiting, diarrhoea and stomach cramps or constipation. Pupils dilate and you may have increased nervousness and agitation.
Changes in the nerve cells result in tolerance (higher doses required for the same effect) and also withdrawal symptoms. The withdrawal symptoms are excessive sleep, increased appetite and depression. Very high doses over long periods (more than 4 weeks) can cause brain cells to die off, which is permanent. Diet pills can be physically and psychologically addictive.

They should not be taken by people with high blood pressure, over-active thyroid glands, glaucoma (too much pressure in the eye), an enlarged prostate, heart disease or if you are pregnant. They can be dangerous if taken together with anti-depressants. Avoid mixing with caffeine since this could lead to difficult breathing and heart palpitations. Remember, some cold drinks contain caffeine. Susceptible people may suffer anxiety, insomnia, paranoid psychoses and delusions.

Just because DPs are legal drugs, doesn’t mean they are without risk to your health. Legally Nobese and Thinz are Schedule 2 drugs, which means they are available over the counter, but only over 18’s are allowed to have them. Obex-LA is Schedule 7 and requires a prescription. It is highly illegal to have them without one.

**DOB**

DOB is a psychedelic, like LSD, but it’s a trip that lasts much longer. It’s scientific name is 2,5- Dimethoxy-4-bromoamphetamine. Low doses can be over in 6-12 hours but higher doses last for up to 16 hours, and heavy doses can last 24-30 hours. DOB takes a long time to come on: 2 hours is common, and it can be up to three hours. The dosage is very small compared to Ecstasy, but quite large compared to LSD. DOB can come on a blotter, or in small pills. A light dose is under 1 mg, and a heavy dose about 3 mg. Chemically it is closely related to Nexus (2CB) and to DOM (a.k.a. STP), and distantly related to MDMA (Ecstasy) and Methamphetamine (Speed). DOB’s effects are a lot like those of LSD, and not much like Ecstasy at all.

DOB by itself can be dissociative, but generally only becomes so at high doses. There are reports of people doing high doses of DOB and becoming extremely incoherent, delusional, taking off their clothes in public and running around, getting arrested, etc. Pretty much any psychedelic can become ‘dissociative’ at high doses, so this is not a unique phenomenon. Unlike with LSD, large doses can be medically
dangerous. Significant overdoses can cause serious constriction of the blood vessels in the extremities, possibly resulting in nerve damage and/or gangrene. The use of DOB can also be a problem for those with circulatory problems, heart ailments, glaucoma, hypertension, hepatic or renal disease, aneurism, or stroke history.

DOB can be dangerous if mixed improperly with other drugs, especially MAOI’s or other liver-enzyme affecting chemicals. Mixing with stimulants is not recommended. Is it illegal? In most places, yes. In South Africa, “4-meth1-2,5- dimethoxyamphetamine (DOM) and the derivatives thereof.” are illegal, which most likely means DOB as well.

**Ephedrine**

Ephedrine and its chemical cousins are derived principally from a Chinese plant called ma huang. It is found in quite a few products such as energy boosters that are legally sold, as well as in tablets and capsules. It is normally taken orally, but can also be snorted, which is painful and unpleasant. Midnight Flite contains Pseudo-ephedrine. Ephedrine’s actions is similar to that of adrenaline. It’s effects, although less powerful, are more prolonged. Users have reported increased energy levels; heightening of the mood and strange tingling sensations on the skull. It’s also like Methamphetamine (Speed) in way, but much weaker. Amphetamine effects the brain more directly whereas ephedrine is more physical. The base molecule is very similar, and in fact drugs like Speed and Kat are made from ephedrine family. One’s body has a bell-shaped response curve to ephedrine i.e. twice as much won’t make you twice as wired.

There are four different members in the ephedrine family. The different forms vary in the effects they show predominantly: nor-pseudoephehderine, nor-ephedrine and ephedrine shows amphetamine-like effects mostly. Nor-pseudoephehderine can be found in over the counter drugs such as Thinz, which is an appetite suppressor. It is derived from Qat, a leaf chewed by many people in countries such as Ethiopia, Somalia and Kenya.

Pseudo-ephedrine, the forth member, is weaker than the others but still exhibits amphetamine-like effects and has similar dangers. Its main effect is decongestion due to its vasoconstrictor effect. While this can promote drying of the mucous membranes, it can actually precipitate things like a runny nose if one is suffering from congestion. Sinumed, a hayfever and sinus treatment, contains this. Ephedrine acts
as a stimulant and can cause rapid or irregular heartbeats. Because it’s legal, many people use it, thinking it a safe alternative. However, this is not totally correct.

Ephedrine dilates the bronchial muscles, contracts the nasal mucosa, raises the blood pressure, and is a cardiac stimulant. Although these drugs may produce psychological and physical stimulation to enhance your physical performance, they produce adverse physiological effects. They may induce an aggressiveness, anxiety and tremor which can lead to poor judgement, potentially placing you at risk of injury. Heart rate and blood pressure can be increased causing dehydration and decreased circulation. Complications from these adverse effects may result in strokes and heart irregularities, that can result in cardiac arrest and even death.

Users have also reported that a dependency can develop through regular use.

**Staying Safe:**
- Do not mix Ephedrine with MDMA: it can put an enormous strain on your body, and the sensory blocking effects of MDMA will not let your mind know what’s happening. This could be fatal.
- Ephedrine should not be used by people with high blood pressure or any heart problems.

**GHB**

Otherwise known as Liquid E, Fantasy, Gamma-OH, GHB stands for Gamma-Hydroxy Butyrate.

Before you read further please note that this seemingly harmless fluid is very dangerous when mixed with alcohol! It is an odourless, colourless, salty tasting liquid. It is also available in a tablet or powder form, though uncommon. GHB is normally sold in small, 30 ml bottles.

Whilst GHB’s most noticeable effect is euphoria, it can also be a downer. A small dose - half a capful - of GHB will make you fell relaxed and uninhibited, kind of tipsy. More can cause sedation, and will slow you down until you fall asleep. No hallucinations or visual effects occur and GHB makes you extroverted rather than introspective. With larger doses, noticeable effects include verbal diarrhoea, slurring of speech, drowsiness, nausea, incoherence and difficulty focussing. The effects of GHB may become
apparent after about 10-15 minutes, and come up strongly after 20-30 minutes. The effects can last for up to 2 - 4 hours.

One of the biggest dangers of using GHB is the difficulty of determining a safe dosage. It all depends on the body weight, general state of health and mind at time of use and also the concentration of the liquid. Taking too much GHB can lead to amnesia, respiratory difficulties and loss of consciousness. If someone passes out on GHB put them in the recovery position and let them sleep it off. Check their vital signs regularly to see if they are OK. They will awake a few hours later with no recall of their sleep. Other side-effects are abnormal muscle movements, and occasional emergence delirium.

In high doses, GHB lowers muscle tone and slows reaction time. This interferes with co-ordination and the ability to operate mechanical equipment. Driving after taking GHB can be considered to be more dangerous than driving under the influence of alcohol. Some users have reported that it is habit-forming if used regularly. Reports have been received of GHB being used as an aphrodisiac since in moderate doses it can cause sexual arousement. This is one of the reasons why it has a reputation as a ‘date-rape’ drug, the other being the obvious danger of being unconscious for a few hours. People who suffer from hypertension, heart disorders, or epilepsy should avoid using GHB. It should not be mixed with opioids and other skeletal muscle relaxants - it enhances their effects and could be extremely dangerous.

DO NOT MIX GHB WITH ALCOHOL! Both alcohol & GHB have a sedative effect on your body. Hence mixing the two can lead to deep unconsciousness for a few hours, put you into a coma - even cause death!
Heroin

Heroin (Diacetylmorphine or Diamorphine) is one of the opiates, a group of pain killing drugs derived from the Opium poppy. Is also known as Junk, Smack, Brown, Skag, H, Gear.

Heroin is normally injected into a vein, a muscle, or subcutaneously (under the skin). If smoked or snorted, the effect is less intense and takes longer to come on. The effects are almost immediate, and whichever way administered, very similar. The user may initially feel nauseous. A feeling of calm and warmth spreads through the body. Any troubles or pains seem very distant, and unimportant. At higher doses, the user slips into a dreamlike experience where you are not asleep or awake, but somewhere between the two states.

Heroin also depresses Central Nervous System activity and has physical effects similar to depressants. Heart rate and breathing slow down and the cough reflex is suppressed. The activity of the bowel is depressed, which can cause constipation. Some blood vessels dilate, releasing heat through the body - this gives a feeling of warmth, although the heat is actually being given out. Women who use Opiates can have irregular menstruation, although they are still able to conceive.

At normal doses, someone who uses Heroin can talk and think coherently. At higher doses sedation occurs, and the user becomes drowsy, and may actually lose consciousness. Pupils become tiny (this is known as being pinned) and the user’s eyes roll back.

Overdosing on Heroin usually leads to death through respiratory failure. Using other depressant drugs at the same time as Heroin (for example alcohol) increases the depressant effects of each drug, and increases the risk of an accidental overdose. One of the biggest dangers is that the purity of each batch of heroin is unknown. Injecting a dose of Heroin which is purer than expected, is one of the main causes of an accidental overdose which can be lethal.

Sometimes the substances that Heroin is mixed with when it is sold can cause damage to the body if injected. Clean needles and syringes should always be used to keep the risk of infection to a minimum. Needles and syringes should never be shared, as this can directly transport viruses such as HIV and Hepatitis from one person to another. Your own needles should not be reused either without cleaning, otherwise harmful bacteria on the skin can be
introduced into the blood system, possibly causing death. A new fix is always best. Regular use will lead to severe addiction. This means that if you stop using it, you will suffer hectic withdrawal symptoms. These can last up to a week and include muscle spasms, sweating, nausea and vomiting, lots of physical pain, an inability to concentrate or do anything, extreme feelings of anxiety and insomnia. Thereafter insomnia can last for up to one month.

We haven’t been exposed to Heroin addicts on street corners in SA like the kids in Europe have, and can’t imagine how degenerated an older addict can look. We also don’t have a methedone (substitute) programme or a clean needle service. We are told all drugs are bad so we think that they are all equally dangerous. They are not. Some, like Heroin, pose much more of a serious threat to your life and well being, even with experimentation.

**Ketamine**

Ketamine is also known as Ket, Special K, Vitamin K or just K and its chemical name is Ketamine Hydrochloride. It is an anaesthetic which is commonly used for veterinary purposes. Normally comes in white powder, sometimes in capsules or even a clear liquid.

The powder is taken orally or snorted and the liquid, orally or by intramuscular or intravenous injection. If snorted, effects start after 5-10 minutes (almost immediate if injected), or about 20 minutes if swallowed: first a powerful hallucinatory trip which usually lasts between twenty minutes to an hour when taken orally, thereafter a soft trip which will linger for approx. 2-3 hours after that.

Physical effects are loss of motor control (difficulty in walking, standing and talking), temporary memory loss, numbness, drowsiness, nausea. Ketamine is a strong drug which produces an “out-of-body” experience: your mind dissociates itself from your body.

It blocks normal thinking, memory recall and most sensory input. In the absence of external input, the brain tends to fill the void with a “new reality” - extreme hallucinations known as “emergence phenomena”. It’s like you enter another world and can’t even see the people next to you. Ketamine causes physical incapacitation as well as very hard trips, and is unlikely to make you want to dance.
Be careful how much you take - Ketamine is much more powerful than equivalent amounts of speed or ecstasy, and is highly dose dependent. An overdose of Ketamine will result in unconsciousness, since overdoses can depress circulatory and respiratory systems to dangerous levels, sometimes causing death. Because ketamine produces loss of motor control, it is dangerous to use it in uncontrolled environments. There have been reports of confused Ketamine users wandering obliviously into traffic.

Since Ketamine is an anaesthetic, you may not notice if you fall and hurt yourself. It is extremely dangerous to mix ketamine with respiratory depressants such as alcohol, barbiturates and Valium. It's important to have friends around to look after you. Because tolerance to the drug takes a long time to develop, ketamine has a high abuse potential.

**LSD (Acid)**

LSD (Lysergic Acid Diethylamide), or Acid, was first discovered/invented by Dr Albert Hoffmann in Switzerland in 1938. It is a semi-synthetic drug which is an indolealkylamine hallucinogen, which means that it is structurally similar to the neurotransmitter serotonin. It works mainly on the 5HT-2 receptors (the serotonin receptor). It is one of the most potent mind-altering chemicals known. Not everything is known how it exactly works.

LSD comes on small pieces of paper with distinctive, often cartoon-based designs and names like Purple Ohms, Geminis, Batman’s, Bart Simpsons etc. Dosage and quality vary sharply according to type, but even within one type quality is still variable. These small squares (“Trips” or “Caps”) are assumed to be one dose - they can be cut up into halves, quarters or even smaller. First time users should be careful about taking a whole trip: rather try a quarter, at the most a half. Infrequent users even find a half to be substantial. Try not to be greedy with acid - that little piece of paper may look harmless but can literally really blow your mind away, especially for first time users. The effective dose is in the order of micrograms, rather than milligrams as is common with other drugs. Some people experience much stronger effects than others, and mood and health can play a big factor in its effectiveness.

LSD can also be found in the form of ‘microdots’, which are tiny pellets. These known for being extra-strong and are difficult to divide up. LSD comes in liquid form as well: Liquid A, which is normally a drop of liquid sealed in a straw, or in a small dispenser.
Many users regard this as much ‘cleaner’ than the dried version.

Effects begin about 30-60 minutes after ingestion, and the ‘trip’ can last for anything from 5 to 24 hours, although 8 - 12 hours is most common. Effects include a rush of thoughts, wild free association and visual effects such as intensified colours, distorted shapes and sizes and slight movements in stationary objects. Later in the trip, entoptic phenomena can occur: geometric patterns can emerge for any surface you are looking at. Perceptual changes like mixing or distortion of the senses (synesthesia) can occur, as well as changes in sense of time and place. LSD significantly alters perception, mood, and psychological processes, and can impair motor coordination, judgement and skills. The trip tends to get more intense after 2 to 4 hours. The experiences may be pleasurable or upsetting, or even damaging. It may be difficult to sleep after a trip, although using downers should be avoided because often these are addictive and can cause other problems.

You should remember that the effects you experience are due to the action of the drug on your brain and are not real, although you could forget this while tripping. True hallucinations (seeing things that aren’t really there) are rare, as LSD alters or distorts what already exists. However, some of these distortions might seem strange or surprising and can cause fear or panic. Anyone with psychological problems should be very careful about taking LSD since pathological conditions may be intensified, and in extreme cases have even led to suicide. There is also some evidence that it can cause the early onset of schizophrenia-like disorders, although it (and other drugs) have been known to bring out latent psychological conditions.

Tolerance (resistance to the drug’s effects) builds up rapidly so there’s no point in taking acid continually because you won’t get the same effect: Your brain needs time to rest and replenish itself, although it might not always bounce back completely to it previous state. This is what psychologists call the Kindling Effect (see Drug Induced Psychosis)

The “speedy” quality of LSD is due to the neurological actions of LSD itself, and not necessarily due to impurities. It can cause effects such as sweating, nervousness, jaw grinding and insomnia. It can also cause nausea, but this normally passes.

Serious damage caused directly by acid is rare, however every user should know that it can cause a severe anxiety reaction: the Bad Trip. This can happen if you are worried, scared or upset about something before taking it, or if something frightening
suddenly happens while you're tripping (like violence, a car crash or getting arrested!). A bad trip may be brought on by use of other substances including cannabis. The feelings can grow in an overwhelming manner. The key factors are your mood, who you are with and where you are. The effect of Acid wears off in time, but this can take several hours. A really bad trip is so scary, it could leave you with Post Traumatic Stress Disorder (PSTD) of which flashbacks are one symptom. See the Bad Trip chapter for more info. If you are tripping in a club, you may experience a great place full of happy dancing people, or you may find the music lights and crowd frightening. LSD is a very powerful mind-altering drug and you should take care of yourself after taking it.

**Staying Safe:**
*Make sure you take it with someone you know and trust, preferably someone who has used it before and knows how strong the effects can be;
*Make sure you are somewhere where you feel safe, secure and comfortable;
*Avoid taking LSD if you are upset, have worries, feeling low or insecure - this could lead to a bad trip;
*Avoid taking more if nothing happens initially. The effects come on stronger after a while, and you could end up having a much stronger trip than you can handle;
*If you’re having a bad time avoid flashing lights and visuals, get a friend to take you to a chill out space, outside and away from the action.

**Mandrax (Whites)**

Mandrax (methaqualone) sometimes comes in light and dark blue capsules or white scored tablets. It is sometimes crushed and smoked with dagga in a “White Pipe”. Its has its origins in medicine from a time when barbiturates (which are also called “downers” and which were developed to treat sleeplessness, anxiety, tension, high blood pressure and convulsions) were found to produce dependence, and barbiturate-like drugs such as methaqualone and flurazepam were introduced as substitutes, but they too have been found to produce dependence.

The short-term effects is the slowing down of activity of central nervous system. Small dose relieves tension; large dose produces staggering, blurred vision, impaired thinking, slurred speech, impaired perception of time and space, slowed reflexes and breathing, reduced sensitivity to pain. Overdoses cause unconsciousness, coma and death.
Many of the deaths due to drugs (excluding alcohol) are caused by barbiturates and barbiturate-like drugs. Accidental overdoses occur when children swallow pills or when adults with increased tolerance are unsure of how many to take. Use with alcohol can be very dangerous.

The long-term effects include anaemia, impairment of liver function, chronic intoxication (headache, impaired vision, slurred speech) and depression. Smoking chemicals will obviously damage your lungs. Babies of chronic users may have difficulty in breathing and feeding, disturbed sleep patterns, sweating, irritability and fever.

Regular use results in tolerance, making increased doses necessary to produce desired effect. Since less tolerance develops to harmful effects rather than to desirable effects, the margin between effective dose and lethal dose gradually narrows. Psychological dependence can occur with regular use, as can physical dependence. Withdrawal symptoms include restlessness, anxiety, insomnia, delirium, convulsions and even death.

**Magic Mushrooms**

Magic mushrooms are organic hallucinogens that have been used by people for thousands of years. Also known as Mushies, Shrooms, Mexican Magic mushrooms, they can be one of several species of mushroom, most commonly one of the following: Stropharia (Psilocybe) cubensis, Panaeolus sphinctrinus, subbalteatus (benanosis), Psilocybe baeocystis, caerulescens, cyanescens, mexicana, pelliculosa, semilanceata, stuntzii.

What all these have in common is that they contain the mind-altering chemicals psilocybin and psilocin as well as traces of related chemicals. Psilocybin and psilocin are similar in structure to serotonin, a neurotransmitter chemical in your brain that is also affected by MDMA and LSD.

They are usually found as a small packet of dried vegetable matter, mainly grey in colour, with bluish and brownish bits, looking a bit like tree bark. They are often broken into small pieces, or sometimes ground into a grey powder. Magic mushrooms have a distinctive smell and taste, which most people find unpleasant. Occasionally they are available as fresh or semi-wilted whole mushrooms. It is possible to extract the active ingredients to make powder, capsules or pills, though this is not common.
**Dosage:** The minimum dose to feel any effect seems to be around a gram of dried mushroom. Usual doses are one and a half grams or more. A level teaspoon is about two grams. More than six grams can cause temporary loss of contact with reality so take care with large doses. As with any organic substance, the potency will vary with the variety of mushroom, the way it was grown, how it was prepared, how it was stored, age etc. Fresh mushrooms are usually stronger than dried mushrooms and have a slightly different feel to them due to differing ratios of the active ingredients.

Magic Mushrooms are swallowed, sometimes with food or a liquid. The advantages of tea or juice is that you can swallow it quickly and experience the bad taste for only a short time. They are absorbed quickly, and therefore come on quickly. The advantages of putting it on food is that the bad taste is disguised. Small quantities of Mushrooms are occasionally smoked, giving a very hectic trip!

The effects usually lasts around six hours and are similar to LSD, but are often described as “more natural” and “organic”. Visual and mental hallucinations occur. Visual distortions, especially seeing abstract patterns with eyes closed, and patterns in the arrangement of objects with eyes open. There can be regression to a childish or childlike state. There are often feelings of oneness with everything, melting into your surroundings, or union with the universe. You can experience affection and feeling of unity with things such as trees and rocks, loss of ego, looking at your self seemingly from outside. Sometimes intense introspection and self-examination occurs as well as profound relaxation and the lack of desire to move. Time may pass without you noticing it. It is even possible to sleep whilst on mushrooms.

Side effects include nausea during the early stages, and loss of co-ordination. The after effects: Mushrooms have low toxicity on your body, so there are no physical after-effects. Some depression and frustration with everyday life may occur in the days following the mushroom trip. This is believed to be purely psychological.

Do not go out and pick and eat wild mushrooms unless you know exactly what you are doing. It is most likely that you will find something poisonous or useless rather than “Magic Mushrooms”. Mushroom identification can be difficult as many different species look similar. People sometimes die from mushroom poisoning after eating the wrong mushroom.
**Safe Party Tips:** Mushrooms are not a “dance drug” as such, they do not give you energy. Some people like to dance whilst on mushrooms, but many like to lie down. Your response may vary. Take mushrooms on an empty stomach. Drinking water helps the body to flush itself. Make sure that you have warm clothes as cold can be unpleasant.

**Mental safety:** As with any other psychedelic, try a small dose first to get used to the experience. Do not use mushrooms if you are undergoing any emotional problems, are depressed or have serious issues that are on your mind. The things that are worrying you can seem greatly magnified during the trip, and you may spend a long time in anguished introspection.

**MDMA (Ecstasy, E, Pills)**

MDMA is a semi-synthetic compound called Methylenedioxy-methamphetamine (MDMA). It popularly referred to as Ecstasy and was synthesised by a German drug company around 1912 for reasons that had nothing to do with its psychological effects. It was rediscovered by the US Military in the 1950’s and tested along with many other psycho-tropic drugs for use as ‘brainwashing’ weapons. American chemist Alexander Shulgin synthesised it again 1976 and then it became more widely known and used. It found use as an aid for psychotherapy in the 1970’s & 1980’s in the USA, where the first recreational use was also recorded. It was made illegal in 1985 there, but that didn’t stop it from spawning the phenomenon of rave culture of the late 1980’s in the UK and elsewhere via Ibiza, as the legend goes.

MDMA usually comes in the form of small pressed pills, as powder in capsules, or as loose powder. Ecstasy generally refers to MDMA in tablet form. Tablets are taken orally and one pill normally contains an active dose, which is rough 2mg per kg body weight. It’s effectiveness is related to body mass, so a small framed person should be very careful about dosage. First timers should be careful about dose and shouldn’t take more than half a pill. Many brands/labels of pills come and go but they mean little since quality can, and generally does, vary considerably between batches. Popular brand names are rapidly counterfeited. Sometimes substitutes or adulterants are used, and these can be very dangerous although these can be screened by an easy to use home testing kit. There is a whole range of drugs sold as MDMA, such as MDEA, MDA, Amphetamine, Ephedrine but sometimes more dangerous substitutes such as PMA.
MDMA is a hallucinatory amphetamine and the effects usually begin 30-60 minutes after dropping, depending on how full your stomach is. Physical effects include raised blood pressure (so anyone with high blood pressure or a heart condition should not take it), with a noticeable rise in body temperature, faster heartbeat, skin tingles, sudden sweating and dilated pupils. Some people may also experience unsteadiness, nausea and possibly vomiting, though these unpleasant effects usually pass quickly.

MDMA is a profound mood-changing drug that can alter the way you see the world. It works by causing the massive release of the neurotransmitter serotonin from storage in the axons to the synapses where it acts on the next axon (see Pharmacology 101 Chapter for an illustration). It also blocks the recycling of the serotonin molecules as well as causing the neurotransmitter dopamine to be released. Once all the serotonin stored in the axons is released, it is finished and there is little point in taking more MDMA. There is reason to believe that MDMA does damage to the system that produces serotonin.

The subjective effects of MDMA vary according to whom you are with, where you are and how you are feeling. MDMA can make you feel profoundly relaxed as well as energetic, happy, calm, exhilarated, warm and loving and sensitive to other people’s vibes. It can also open up your emotions: this can be positive but sometimes can cause panic and anxiety as a result, so be sure to have friends around. If the rush is too intense find a quiet spot to sit down with a friend. Try to relax and not to panic.

The peak effects can last 2 to 4 hours, which is followed by a smooth, not unpleasant come down feeling lasting several more hours. After effects may include tiredness or feeling spaced out for up to 24 hours. This is also an effect of staying awake all night - sleep deprivation - so chill out afterwards. Let the after effects wear off naturally. Secondary effects (afterglow or exhaustion) may be felt for a few days afterwards. Users also report side effects such as the dreaded “Steak Knife Tuesday”, when a few days afterwards you feel ratty, intolerant and short tempered. Extreme lethargy can also be felt for a few days afterwards as well.

Your brain and body (especially your liver) takes a lot of strain with regular use, and this can cause chronic health problems. Although it is regarded as being not physically addictive, the temptation to do it often should be resisted, since it depletes the serotonin stores and that is responsible for your mood and a whole lot of other things. If you don’t give your body time to recover, the lack of serotonin may make you feel lethargic, depressed
and moody. Your body will produce more to replace the serotonin used, but it may take some time to get it back to the normal levels, during which time your will feel lethargic, even depressed. Some ‘Experts’ recommend taking serotonin precursors like 5HTP to help restore or boost levels, however professional medical opinion does not support this for a variety of reasons, so one should be cautious about this, or any other miracle remedy or antidote.

Because MDMA is illegal, there is no quality control, so you cannot be sure of what you are taking. Tablets may include impurities, sometimes harmless powders but can include other drugs such as speed. Rumours abound about E tablets containing Heroin, however many pills have been tested in laboratories, and with very few exceptions, no trace of heroin has been found. It doesn't make any sense to use expensive heroin when other bulking agents and other stimulants like caffeine and ephedrine are common.

**Staying Safe**  MDMA is thought by many to be a relatively safe drug if used in moderation, however there are serious concerns about long term health issues, and users are taking a chance with the unknown in this regard. But if you are going to take it regardless, you should keep track of what your body is telling you whilst you are on it. The euphoria that it makes you feel can make it easy to ignore bodily distress signals. Be careful about dehydration, muscle cramping, dizziness, exhaustion, injuries or overexertion. Reports from the past tell of e-ed up ravers dancing themselves into severe dehydration and heat exhaustion that required hospitalisation, and in a few cases resulted in death. When dancing for long periods of time, sip about half a litre of water every hour. It is also good to replace lost sugars and salts with an energy drink.

- Not everything called a ‘Pill’ contains MDMA. Be sure to find out as much as possible before dropping! You might consider doing a test on a new batch: please see the Drug Testing chapter for more info on tests you can do.
- Avoid drinking lots of alcohol because it dehydrates you, and on top of MDMA since this can be dangerous.
- Make sure you feel well rested and in good shape in the first place. MDMA puts a lot of physical strain on your heart, liver and kidneys. Make sure you rest often and use the chill out area to do just that.
- If you suffer from diabetes, asthma, epilepsy, depression or psychosis, the dangers associated with the use of MDMA increase.
- There have been confirmed reports of just one dosage of MDMA being fatal for a first timer, so it can happen!. There could be a lot of reasons for this, one is that certain people (about 5-9% of the population) don’t have a certain liver enzyme (CYP2D6) that breaks down the MDMA. Thus these people are at an increased toxic risk when taking MDMA.
- Deaths have been reported of some MDMA users who were also taking Monoamine Oxidase Inhibitors (MAOI’s), which are often prescribed as antidepressants. Therefore MDMA is not recommended to anyone taking any MAOI.
- Overheating is one of the main dangers of taking Ecstasy since it causes the internal organs to fail. Sweating is essential to avoid overheating and water is essential in order to sweat. Neurotoxicity has also been linked to high body temperatures, so try keep cool in a well-ventilated spot whilst dancing the night away, or at the very least make sure you take regular rests to cool down. There is also a serious risk of renal (liver) failure due to increase body heat.
- Drinking too much water can be harmful, even fatal. If you drink more than you can get rid of by sweating or urinating, it gets into your blood and swells your brain. You can go into a coma ... or even worse. You shouldn’t drink more than a litre of water an hour.

**What are the long term effects of MDMA?**
More is slowly becoming known about the long term effects of regular use. However the research and data are still inconclusive, some studies contradict each other BUT there is a lot of reason for concern about negative long term effects of regular use. Research has shown that users are altering their brain by using MDMA. It is not yet known how this ‘damage’ manifests itself, but this could be permanent (or at least long lasting) and this may affect you psychologically and in other ways. Research has shown that use adversely effects memory, attention and bring about depression disorders as well. Although some of this research that claimed serious brain damage has now been discredited (Ricaurte et al), there is a growing amount of research that shows negative effects in the long term, even for moderate users. The low down is that it’s a big unknown, and most research has shown some sort of negative long term impact.

**What about teeth grinding?**
The serotonin release can also over-stimulate muscles and dental damage from teeth grinding is something you should be careful of. Research in the UK has shown teeth damage amongst Ecstasy to be high amongst clubbers.
I am on Prozac. Can I take MDMA?
Prozac blocks out the action of MDMA, so generally one will not feel the effects of the MDMA. The action of Prozac and other similar SSRIs is to block the re-uptake of serotonin. This normally gets recycled into the storage area after it’s done its job. This means that one won’t feel the effects of the massive serotonin release that MDMA normally causes. Because Prozac has a half-life of several weeks, you can’t just stop taking it for a few days and expect to feel the effects of E. But there is a more important consideration: Prozac is normally proscribed by a doctor to help address a serotonin deficiency, which is one of the causes of depression. MDMA can aggravate this, and the chances are that the post-E depression and lethargy people normally feel could be so hectic one could go into clinical depression following use.

How does MDMA effect you psychologically?
It’s generally considered that recreational dance drug experimentation or casual use is something one can dabble in without serious dangers. But this is not always the case, and we have always strived to present all the facts in an unbiased and factual way. There is a danger that use of any psycho-active drugs (like e, speed, acid) can bring out a range of psychological conditions. For example, the activation of some serious psychological conditions that are latent. In other words, you could have a mental condition like paranoia psychosis and schizophrenia that is dormant and generally not a problem but any psychoactive drug use can activate this, and make it a real problem. This predisposition is generally genetic (that is passed down through the family). The only way you can find out if there is a possibility of this is to examine your family tree to see if any of your ancestors have had any of these conditions. If you have any doubts, it’s best to see a professional psychologist. Psychoactive drug use can also cause other psychological problems as well, like self-perpetuating panic attacks for instance. Sometimes it is possible to recover from these conditions with professional psychological counselling, other times its more serious like requiring hospitalisation. See the chapter on Drug Induced Psychosis for more information.

What about pre and post-loading?
Some people use widely available substances like 5-HTP to “pre-load”, that is in the belief that they are boosting the serotonin levels before taking E. Some believe this works, perhaps so, perhaps it’s the placebo effect, however professional advice given to us by doctors is that this is not recommendable and can cause other serious problems such as a serotonin syndrome. Another argument is that if one is altering the brains functioning with
one agent, it's risky to think that introducing another to compensate is completely predictable, especially when not everything is known about the serotonin system in the brain anyway. The same goes for post-loading techniques. There’s a lot of uncertainty and myths about this, one thing for sure is it does not make taken MDMA any safer.

**Mescaline (San Pedro, Peyote)**

Mescaline is a naturally occurring psychedelic with the chemical name of 3,4,5-trimethoxyphenethylamine. It's chemically similar to norepinephrine. Traditionally it derives from the Peyote and San Pedro cactus, and comes in a foul-tasting powder or liquid extract. Pure mescaline is a white powder which can be made in a laboratory. Mescaline is a relative weak drug in terms of how much you have to take: the effective dosage is 200–400 milligrams, based on 3.75 mg per kg of body mass. It lasts up to 12 hours and is not considered to be physically addictive

The mescaline-rich tips of the peyote cactus were used ritually in the Americas for thousands of years BC. The Aztecs regarded the peyote as sacred. It resurfaced in the Native American community towards the end of the 19th century, after which it became popular as a medicine and tonic. The active ingredient of the Peyote, Mescaline was isolated from in the 1890’s and started finding a niche in psychiatric practice and experimentation with reality. It was first synthesised in 1919. Aldous Huxley famously wrote up his mescaline experiences in his highly influential book *Doors of Perception* (1954).

An active dose of Mescaline has a profound effect on the mind and can radically alter your reality. It also energises you, leaving you feeling quite wired. Low doses cause increased self-awareness, whilst with high doses it’s a full-on psychedelic trip with visuals and psychotic effects. You can enter a dream-like state, experience euphoria and mystical experiences.

On the down side, you might feel nauseous and dizzy, but this does pass although vomiting sometimes cannot be avoided. For someone not experienced with psychedelics, Mescaline can be overwhelming and cause a lot of stress and confusion, leading to a bad trip or psychotic episode. See the Bad Trip chapter for some advice on how to try and deal with this.
Methcathinone (Kat)

Kat commonly refers to two types of drugs. Although similar, one is the leaf from the shrub *catha edulis* which contains the chemical Cathinone and is called khat, quat, kat, gat, and tchat. The other type of Kat is a powder which contains Methcathinone which is synthetic and also has the street names Kat, Cat and Jeff (in Russia). The Kat leaf has been chewed for centuries by the people of eastern and central African and parts of the Arabian peninsula. They are bought in bundles which one chews on for a few hours after which you get a speed-like buzz.

The active ingredient was isolated in the late 1970’s as Cathinone and it was just a matter of time before a synthesised version was made. Methcathinone has a very similar chemical structure and is easily made from over the counter ingredients, and this is where Kat powder comes from. It has been on the dance scene in South Africa for a while, sometimes sold in capsules or pressed into tablets, but most often as powder which is snorted. Its use is widespread and growing at clubs since many believe that it is safe to use.

Cathinone is a natural occurring amphetamine-like substance, Methcathinone is chemical variation and is a much more potent form. Both are psychoactive central nervous system stimulants and part of the amphetamine family of drugs. Amphetamines work by triggering the release of dopamine molecules from their storage vesicles in the neurons in the brain. This causes the dopamine to flow out to the next neuron in massive quantities. Amphetamines also block the re-uptake of dopamine but it's understood that this is not the principle mechanism of its effects. Dopamine is the neurotransmitter that regulates motor behaviour.

Leaf chewers need their leaves to be fresh since during the maturation and decomposition of the kat leaves, Cathinone is converted to the less powerful cathine. The conversion of Cathinone can happen within 48 hours after the leaves are harvested. Stimulation from Kat can occur within first 15 minutes of chewing, though the peak is reached in the third hour. Effects can remain for up to 24 hours. Respiratory and pulse rate are accelerated and blood pressure tends to rise. Following the high, a slight depression, or melancholy, sets in and remains for a few hours.

The Methcathinone powder form is much quicker and stronger; the effects are much more condensed and heightened. Many compare it to crystal meth as well as cocaine.
Blood pressure and heart rate rise, sometimes causing a lot of cardiac strain. It produces feelings of euphoria, stimulation, heightened awareness, increased confidence, alertness and energy. Kat can also result in increased aggression and acts as an appetite inhibitor. Reports are also that the comedown takes long and depression and mood swings are common following use, and sleep is hard to come by. Regular snorting of powder can damage the sinuses. Because Kat powder is mostly home brewed, quality can vary substantially.

One of the biggest dangers of using Kat is developing a dependency, especially the Methcathinone powder. This dependency is psychological and similar to cocaine dependency in some ways because one often feels the urge to do another line soon after the first. Daily use is a sure sign of trouble - one has to use it just to chase away the lows and to remain functional. Treating the dependency requires professional counselling and sometimes clinical treatment. Please see the Dependency chapter for more info.

Another significant danger that users run is the risk of developing Amphetamine Psychosis. This has a range of symptoms which are similar to schizophrenia and include paranoia and panic attacks, delusions, auditory illusions and often seriously lost plots. Even in mild cases, people will notice a change in your personality, you become more paranoid, suffer mood swings and things can get a bit messy. For most people these conditions will go away when you stop using the drug, possible with the help of psychological therapy. In the worst case, the psychological damage is permanent and the only treatment is lifetime use of antipsychotic prescription drugs. Please the Drug Induced Psychosis for more information on this.

If Kat powder is used, it should be done so with extreme caution and severe moderation. There are reports of the dependency setting in quite quickly, as well as many psychological casualties.
Methamphetamine (Speed, Meth, Tik)

Methamphetamine is a strong central nervous system stimulant derived from Amphetamine. It has many street names, most popularly known as Speed, Meth or Crystal Meth. It has many other street names in different parts of the world: Shabu, Batak, Yaaba, Whizz, and locally as Tik.. It’s sold as crystals, chunks, tablets, capsules, or powder, white to off-white or yellow in colour. It can be snorted, smoked, injected, or taken orally in tablets or capsules, or by mixing it in liquid and drinking. Generally it is very impure by the time you buy it, bulked out by substances that don’t easily dissolve in water: like chalk or flour. When injecting this drug, these particles can cause problems like blocking blood vessels, resulting in kidney damage, lung problems or even strokes. Speed generally refers to the powder or tablet form.

Speed gives you a big kick and keeps you going for hours. Many people feel very confident and alert, and feel that they can dance on and on, without resting. It can elevate your mood, induce euphoria, increase alertness, reduce fatigue, increase energy, decrease appetite, increase movement and speech, and provide a sense of increased personal power and prowess. This is the high - you feel the “life of the party”. And, unlike a Cocaine high which is brief, the effect of Speed can last for up to six or eight hours or more, depending how much you do. Smoking it produces more intense effects. Speed and other amphetamines have become popular on the dance scene and elsewhere, with great concern. It’s easy to understand the attraction of even moderate doses. But there are many reasons for concern over regular, or even infrequent use.

Amphetamine was first synthesised in Germany in 1887, after the active ingredient of the Chinese energising herb Ma-huang was isolated, giving the secrets of its actions to chemists. Methamphetamine came a bit later in Japan. Amphetamine was first marketed as a nasal decongestant in 1932, and fuelled by raving reviews in medical literature, found an ever increasing range of uses including treatment for asthma, obesity, narcolepsy, depression, apathy in old age as well as an appetite suppressant. The unwanted side effect of sleeplessness did not deter its wide-scale social acceptance. It was also a matter of time before the mood-altering effects became widely known. It was eagerly taken up by the military to counter fatigue: first in the Spanish Civil War and then the armies of WWII where was routinely used to keep troops awake and alert for long periods of time. Use was not confined to keeping the troops: it was reported that Hitler received regular injections of
methamphetamine (and barbiturates). Following the war, civilian use spread and several amphetamine epidemics swept through the world: firstly in Japan where large military stocks became freely available to civilians. At the height of the epidemic over 3% of the population were users. Similar epidemics swept through Sweden in the 50’s, the USA and UK in the 60’s, Thailand, the Philippines and continue to the present, with the Tik epidemic in the Western Cape one of the most recent. Associated with these epidemics are chronic addictions and crime waves, amongst other personal and socially destructive side effects.

The amphetamine molecule has a chemical structure that is much the same noradrenaline and dopamine, and works by interfering with the transporting and recycling of the neurotransmitter dopamine. After the powder form is swallowed or sniffed, the peak starts within an hour or two. The effects last typically for 8-10 hours. At low doses, the physical effects are rapid breathing, increased heart rate, dilated pupils, high blood pressure, increased body temperature and loss of appetite. Higher doses may cause irritability, sweating, headaches, chest pains, shortness of breath, confusion, anxiety and jaw tension. Very high doses result in blurred vision; dizziness; upset stomach; hypothermia; paranoia; aggression; an irregular heartbeat; tremors and convulsions. Coming down off speed usually involves physical and mental exhaustion and may include chills, nervous twitching, sweats and fatigue, and depression. Bouts of insomnia can follow as well.

Regular use of the amphetamines results in tolerance, meaning that you’ll need to take more to get the same effects. Like many other drugs, it effects the immune system but there are more serious concerns about addiction and mental health. Amphetamines also cause serious physical health problems including damage to the liver, kidneys or stomach. Users lose weight up to the point of severe malnutrition. Since amphetamines interfere with the calcium supply of the body they can cause damage to bones and loss of teeth.

Besides the onset of chronic addiction through regular use, the problem of Amphetamine Psychosis is grim reality. This can be one or more of a range conditions: schizophrenia (the voices), delusional and paranoia psychosis. Simply put, the delicate threads of reality snap and you loose the plot, big time! In most cases it's reversible with abstinence and counselling but some people do completely flip out and lose everything. Some people are more vulnerable to this psychological damage than others, but that threshold is a big unknown for most. One of the most notorious examples of
Amphetamine Psychosis was Charles Mansion and his Helter Skelter delusions. See the chapter on Drug Induced Psychosis for more general information on this condition.

How does casual recreational use of stimulants lead to such chronic problems and social plagues? One way might be that early in use, low-doses often induce positive responses from others to the user’s energy and enthusiasm, complimenting and reinforcing the drug-induced euphoria. However, in an effort to intensify the euphoria and overcome tolerance, larger and larger doses are used. Repeated use and higher doses, and the chase for the intense euphoria never stops and use becomes compulsive. The psychosis sets it. High-dose binges lasts days, followed by exhaustion and withdrawal. It’s similar to the self-destructive spiral generally associated with the likes of Crack.

Certainly not all casual Speed users are going to become addicted violent psychopaths, but reports of amphetamine-related problems at local treatment clinics, psychologists and institutions have increased to chronic levels. Symptoms of the onset of Amphetamine Psychosis are apparent even after mild use, and although they pass, users should be aware what causing them to feel aggressive, paranoid and delusional. The common wisdom is that if Speed (or Kat) is used in the same context and frequency that many party people use MDMA in the dance scene, it's likely to result in some of these problems. Whatever opinions might be as to what “good” and “bad” drugs are, it would be perilous to ignore the body of knowledge and experience of the problems caused by Methamphetamine.

Besides all the other problems discussed above, there is a growing body of knowledge (ie scientific research) that shows long term brain changes happening with chronic use. It is particularly toxic to the dopamine system, and linked to diseases that typically occur with old age. This suggests premature ageing effects. There are also links to Parkinson's disease. Also associated is a slowing down of brain metabolism, which means poorer performance in cognitive tests, mental dulling, etc. There is also evidence linking speed use to risky sexual behaviour (and thus increasing HIV proliferation!)

Keep in mind that when used in combination with MDMA, speed can cause body temperature to soar, causing overheating, putting strain on the heart especially, which can lead to cardiac failure. Therefore it is not a good idea to mix the two.
Nexus (2CB)

Nexus is a hallucinogen and is also known as 2CB or just N. Its chemical name is 4-Bromo-2,5-Diethoxyphenethylamine or 4-bromo-2,5-DMPEA. It has been described as somewhere between MDMA and LSD. This in a sense is true but also misleading: Nexus is more body-oriented than LSD, and more hallucinogenic than MDMA.

It’s most commonly available in pills or small capsules containing +/- 5 mg. Nexus is sensitive to dosage - this means that the experience changes depending on the dose rather than varying in intensity. The higher the dose the more trippy the experience - taking too much can cause LSD-type bad trips. The effect starts 15 to 20 minutes after consumption, and may last several hours. The comedown is rapid and after effects are few.

The effect of a low dose includes a rushy come up, with sensory enhancement, particularly visual, touch and taste. Aphrodisiac qualities can also be felt.

High doses can cause visual distortions in the form of patterns, colours and lights. Strong imagery, often sexual, when eyes are closed can occur. Feelings of being in touch with your emotions are common. Verbalization may become difficult.

Taking too much can cause fear or panic and hallucinations to the point where you can’t see straight. Body reactions can include nausea, muscle clenching, anxiety, claustrophobia, trembling, cramps, nervousness, shallow breathing & stuffiness.

If you don’t like what’s happening to you while on Nexus, you can change it simply by changing your environment. If you are having a bad time on ecstasy, taking Nexus won’t make you feel any better - it’ll probably be worse. Moving around (walking or dancing) may help you feel better if the reaction symptoms get too much.
Nicotine (Smokes, Ciggies, Tobacco)

Although many people smoke because they believe cigarettes calm their nerves, smoking releases epinephrine, a hormone which creates physiological stress in the smoker, rather than relaxation.

Once inhaled, the nicotine produces a warm feeling of well being: the nicotine “rush”. This is almost immediate, but is very short lived. Most users develop tolerance for nicotine and need greater amounts to produce the desired effect.

Risks associated with smoking cigarettes include diminished or extinguished sense of smell and taste, frequent colds, smoker’s cough, gastric ulcers, chronic bronchitis, increase in heart rate and blood pressure, premature and more abundant face wrinkles, emphysema, heart disease, stroke, cancer of the mouth, larynx, pharynx, esophagus, lungs, pancreas, cervix, uterus, and bladder.

Smoking is particularly dangerous for teens because their bodies are still developing and changing and the 4,000 chemical (including 200 known poisons) in cigarette smoke can adversely affect this process.

Most importantly smoking cigarettes is highly addictive. As most smokers will testify, the habit of smoking creeps up on you quickly without you realising it. Giving up smoking takes considerable will power, but can be done. Withdrawal symptom include changes in body temperature, heart rate, digestion, muscle tone, and appetite. Psychological symptoms include irritability, anxiety, sleep disturbances, nervousness, headaches, fatigue, nausea, and cravings for tobacco that can last days, weeks, months or even years. However, the cravings do fade with time.
Nitrous Oxide (Laughing Gas)

Nitrous Oxide (N2O) is gas which is inhaled. Also known as Laughing Gas, it's been used as a anaesthetic since the late 18th century. It comes in small cylinders or large tanks and generally decanted into balloons before inhaling. The medical use as an inhalation anaesthetic by dentists has been largely discontinued because of side effects and other dangers. It’s also used in the dairy industry as a mixing and foaming agent. It’s used as ‘rocket’ fuel for racing cars as well!

N2O is used recreationally brings about a sense of well-being, disinhibition and euphoria. Mild hallucinations have been reported as well but the effects last only a few minutes., Although its known that anaesthetics may alter the binding of neurotransmitter to specific receptor proteins, the exact mechanisms that causes these effects are unknown. N2O is a unique psychoactive substances in that reverse tolerance can be experienced. This means getting more intense or prolonged feelings with the same or lower quantities of a drug.

Moderate recreational use of Nitrous Oxide is considered relatively harmless, but there are several issues users should know about. Firstly, you should not inhale a complete breath of Nitrous Oxide - at least a quarter of your breath should be air, otherwise you are starving your lungs of the oxygen you need to live. This will cause hypoxia and may result in irreversible brain damage. Therefore it should not be taken directly through a face mask either. The gas should not be taken direct from the storage cylinders or canisters, since this is freezing and can cause frostbite of the nose, lips and vocal cords. Being anaesthetised, the user will be unaware of this damage until it’s too late. After the effects come on, you can rapidly lose motor control and your limbs will collapse under you. So you should be sitting comfortably and far away from any open window, and definitely not operating machinery or driving. Use may cause nausea, especially if you have just eaten.

It has been shown that Nitrous Oxide interacts with the vitamin B12, causing interference with the synthesis of DNA. This does not happen for short exposures, but it builds up with continued use. The ultimate effect is damage to the bone marrow and nervous system. Clinical data has shown exposure of over 2 hours of continuous use to cause these type of problems. You also need a break of at least three days between bouts for the accumulated effects to subside. There are also reports of immunological and reproductive problems in professionals who have been chronically
exposed to N2O in surgeries. The Nitrous Oxide used for racing cars should not be inhaled because it contains Sulphur which will cause a lot of problems.

There have been reports of severe addiction to N20, as well as serious mood and personality changes amongst heavy users. Lastly, once inhaled it dissolves out of blood into air filled spaces (e.g. the intestines, the middle ear). In the gut, this will just give you a pain, but if you have ever had middle ear disease, or damaged ear drums, you could be in for permanent hearing loss.

**Poppers**

Also known as Amyl Nitrate; Butyl Nitrate; n-Nitrate; Amys or Rush, Poppers is a highly flammable, yellowish liquid, usually sold in small, glass screw-top bottles. Amyl Nitrate is packaged in small glass capsules, which were crushed, or “popped” to release the vapour. Bottles, containing Butyl Nitrate, are the more common form of poppers nowadays. Once opened, the poppers evaporates and the vapours are inhaled. The effects can be felt about fifteen seconds after sniffing, but are short lived, lasting only two or three minutes.

The muscles of the body relax, giving a warm sensation over the body. Blood vessels enlarge, lowering blood pressure and increasing the heart rate, sending large amounts of oxygenated blood rushing through the heart and brain. Present emotions are intensified. The user may feel light-headed, dizzy, a sensation of falling, or even that the room is spinning. A feeling of well-being follows. Some people experience mild nausea and a headache afterwards.

**Staying Safe:**

*Avoid poppers if you suffer from heart problems, low blood pressure, anaemia or breathing problems.*

*People with suppressed immune systems should also avoid poppers, as it inhibits the immune system.*

*Poppers is extremely toxic when swallowed or injected - seek medical help quickly.*

*Avoid using poppers while smoking or around candles, since you could end up in flames!*

*Wash liquid off immediately if it gets on the skin.*

Make sure you take a break from poppers if you experience unpleasant sensations, headaches, swelling of the nasal passages, skin problems or if it loses its effect.
Ritalin

Ritalin is a stimulant used to treat hyperactivity in children. It’s chemical name is methylphenidate. It comes in the form of prescription tablets intended for oral use, which produce mild stimulant effects when taken as directed and at usual prescription doses. For medicinal purposes, Ritalin is used in the treatment of Attention Deficit Disorder (ADD) which is also known as Attention Deficit/Hyperactive Disorder (ADHD), and in the treatment of narcolepsy, which is a sleeping disease.

Ritalin is a central nervous system stimulant, similar to amphetamines. It is believed that it works by activating the brain stem arousal system and cortex. It works on the neurotransmitter dopamine, and in that respect, resembles the stimulant characteristics of cocaine. When taken in accordance with usual prescription instructions, it would be classified as having mild to moderate stimulant properties, but when snorted or injected it has a powerful stimulant effect. It can result in serious health risks when crushed and then snorted like cocaine, or injected like heroin.

Even when taken according to the prescription directions, there is a risk of developing dependence and tolerance to it. The adverse effects include nervousness and insomnia, loss of appetite, nausea and vomiting, dizziness, palpitations, headaches, changes in heart rate and blood pressure, skin rashes and itching, abdominal pain, weight loss, and digestive problems, toxic psychosis, psychotic episodes, drug dependence syndrome and severe depression upon withdrawal.

High doses are even more dangerous, and as well as the above, include fevers, convulsions, and headaches (may be severe), irregular heartbeat and respirations, which may be profound and life threatening, anxiety, restlessness, paranoia, hallucinations, and delusions, excessive repetition of movements and meaningless tasks and formication (sensation of ants or worms crawling over the skin).

While death due to non-medical use of Ritalin is not common, it has been known to occur. Certain “inert” ingredients added to the dose tablets. These are safe when taken by mouth however, they can cause serious problems when injected or snorted.

There are numerous reports in medical journals about permanent and irreversible lung tissue damage related to the injection of crushed Ritalin tablets. When snorted, the salts
used in Ritalin tablets turn into hydrochloric acid when they come into contact with moisture. While this is not a problem in the stomach, in the nasal passages the acid can “burn” the delicate nasal tissues, resulting in open sores, nose bleeds, and possibly in deterioration of the nasal cartilage.

**Rohypnol**

Rohypnol (pronounced row-hip-nole) is a prescribed tranquilliser used mainly for the short-term treatment of sleep disorders. It is the brand name of flunitrazepam, and is a benzodiazepine like the tranquillizer diazepam (Valium), yet is 10 times more potent. Street names for Rohypnol include rophies, rphies, ruffies, roofies, roche, R-2, mexican valium, rib, and rope.

It produces sedative effects, including amnesia, muscle relaxation, and the slowing of physical performance. You feel sedated 20 to 30 minutes after taking just one tablet and this lasts for approximately 8 hours.

Typically, Rohypnol is used along with alcohol and other drugs. Users report mixing it with beer to enhance the feeling of drunkenness. This combination also makes you lose your inhibitions and you can suffer from amnesia (loss of memory). It has also been reported to be used in combination with marijuana and cocaine, as well as heroin. It is also used to ease the come down from a cocaine or crack binge.

The use of Rohypnol is dangerous, leading to physical and psychological dependence, which increases with dose and duration of use. Withdrawal symptoms include headaches, muscle pain and confusion. Severe withdrawal involving hallucinations and convulsions can occur. Seizures have been reported a week or more after last use. There are many other dangers linked to the use of this substance. Rohypnol is typically sold in its original bubble packaging, conveying a sense of legality and security in its use.

A serious danger is the reported use of Rohypnol as a drug of choice for “date rape”. Sources in the USA report that the drug is given to females without their consent in order to produce dis-inhibition. While this specific use may not be pervasive, it is cause for concern.

See the Tranquilliser section for more general info on this and other benzodiazepines.
“Smart” Alternatives

Usually marketed in bottles, cans, powders or capsules; they contain natural substances, mostly herbal, and vitamins, and most often guarana, ephedrine or caffeine. They generally boost energy levels, increase stamina, refresh, quench thirst and aid concentration. If isotonic, they replace electrolytes lost while sweating, and the sugar content gives a quick-fix, but it is a temporary boost. Most products contain stimulants which basically speed the body up.

Time of onset is 10-20 minutes and the effects can last up to a couple of hours depending on the ingredients. It is important to realize that just because they are natural and legal, doesn’t mean they are 100% safe. Little research has been done concerning the long-term effects. Taken in quantities exceeding manufacturers recommendations may result in nausea, loss of appetite, insomnia, increased heart rate, visual and sensory impairment and discomfort in the bladder and urinary tract. Most products have warnings to dissuade people who are under 8, have heart or kidney problems, high/low blood pressure, asthma and diabetes. Also not recommended for pregnant women. They should NOT be mixed with alcohol, as this can be dangerous and often results in vomiting.

There are many different substances used either as main ingredients or additives.

Some of these are:

- **Caffeine** A stimulant found in coffee.
- **Guarana** A stimulant herb from the Amazon, similar to caffeine.
- **Ma-Huang** A Chinese herb containing the stimulant ephedrine (See Ephedrine)
- **Sucrose, glucose and sugars** Carbohydrate (they provide energy).
- **Ginseng** A Chinese herb known for improving mental and physical well-being.
- **Amino acids** Building blocks of protein.
- **Taurine** A substance derived from the adrenal gland of oxen.
- **Vitamins and minerals** Aid and maintain health, thereby increasing energy. High doses of vitamin B can cause a hot flush.

It is important to realize that some of the herbs used have powerful properties, and are beneficial in moderate amounts. Advice on specific ingredients can be obtained from health shops.
Tranquillisers

These are mostly based on the benzodiazepine group of drugs, under various generic and brand names like Nitrazepam (Mogaden), Temazepam (Normison), Diazepam (Valium), offlunitrazepam (Rohypnol) and Lorazepam (Ativan). They are central nervous system depressants, Downers. They are prescribed for anxiety and difficulty with sleeping. They are sometimes used to come off uppers or LSD.

They are generally in tablet form, and the effects last anything from 4 to 12 hours. The effects are much like opium & heroin, as are the dangers of regular use. Tolerance sets in quickly, so you have to take more to get the same effect. Amongst the problems you will encounter with regular and heavy use are extreme mood swings, paranoia, depression and fatigue. It doesn't take long to get severely physically and psychologically dependent on them, this is perhaps the biggest danger of use.

Overdosing is a danger, as it is with all downers. See the First Aid chapter for info on how to deal with this.

Rohypnol gets own entry in the Drug Index because of its use as a date dape drug, and a lot of the info there applies to most tranquilisers.

Wellconal

Otherwise known as Pinks, Inxs or Inkiltins, Wellconal is a prescription painkiller. It contains dipipanone, which is a derivative of methadone and a potent analgesic (pain relieving) drug. It is classed as Narcotic Analgesic, along with Heroin, and is a central nervous system depressant. It is prescribed when people are suffering extreme pain, such as terminal diseases like malignant cancers. It also contains cyclizine (3/4 by mass) to stop vomiting.

Wellconal comes in a pink, scored tablet, marked ‘Wellcome’ after the company that makes it. If taken orally, it produces a euphoric state. However if crushed and mixed with water and injected, a rush is experienced. Within seconds of being injected, it produces an overwhelming, inexplicable feeling. This last for a 20/40 seconds after which you subside into a euphoric bliss which gradually wears off over an hour or so. Auditory and visual hallucinations have also been reported.
In the beginning users mix 1-2 Wellconal tablets with clean boiled or ampoules of sterile water, and this solution is then injected into a vein. The medical dosage for relieving pain is one tablet per 6 hours. Physical and psychological dependency occurs rapidly, as well as tolerance. Addiction is almost inevitable. Not using for any period will result in loss of tolerance, and doses should be adjusted accordingly to prevent overdose.

Signs of intoxication include pin-prick pupils (miosis), slurred speech and drowsiness, confusion nausea, scratching, verbal diarrhoea and sweating. Side effects include weight loss, loss of appetite, loss of libido, long periods of sleep, apathy, mood swings, constipation, hypotension (low blood pressure), respiratory depression (inability to breath), vertigo and delirium.

Health risks include liver and kidney damage, abscesses at the injection sites, danger of infections such as AIDS and hepatitis from sharing needles. Septicaemia often sets in and can result in terrible abscesses forming usually on the legs of the user. Death by over dose is a very real risk as well.

Wellconal collapses veins extremely easily and users soon find themselves shooting deep veins such as the groin and throat. Poor nutrition, personal neglect, and polluting the body lead to poor health.

Many Wellconal users die from an over dose. It is unusual for a user to live longer than the two to five years after becoming dependent. Users often slip into a coma and die even after having doses smaller than their usual. They often forget having had a shot directly after having it, and so they may have another and overdose. Because of this, Wellconal users should never use alone.

Signs of overdose include respiratory depression, hypotension, circulatory failure and a deepening coma as well as pin prick pupils. The pupils might dilate as asphyxia (lack of oxygen in the blood) starts. Urgent medical attention must be sought.

Further dangers arise when combined with other CNS depressants as well as alcohol and sedatives, which increase the risk of over dose, specifically respiratory depression. Combining with a CNS Stimulant will reduce its effects and increase the temptation to up the dose, increasing the chance of over dose. It should not be taken within 14 days of taking a Monoamine Oxidase Inhibitor (MAOI).
If you are going to take drugs ...  

Of course the absolutely safest way to party is not to take ANY drugs at all. However, if you are going to take intoxicating drugs, for whatever reason, whether its peer pressure or just plain personal curiosity, consider the following before you take anything:

- Know as much as possible about the drug you are going to take, and the risks involved. Speak to people who have experience, find a trusted source, search the Internet, even read some books: we believe Knowledge is Power. But what is Knowledge then? The stuff you see on TV and the newspapers? Perhaps, and perhaps not. Knowledge and truth are not always in sync, but as far as party drugs, look around you in society to see the effects of drugs such as Alcohol and Methamphetamine, look at the history of those drugs and the effects they have had on Society. With the Internet now, that's just so easy to do, but just remember that anyone can be publishing info there, so be careful who you choose to believe.

- Be careful of those around you who pretend to know everything about drugs, often their knowledge is very superficial and biased by their own preferences. It's very easy to verify what goes around as a fact (ie by an Internet search). Often you will find such facts are hearsay and urban legends!

- Be prepared if you are going to use or experiment: take warm and cool clothes, and most important of all make sure you have a friend who knows what you have taken and that can look after you;

- Eat well beforehand, but give lots of time for digestion. Food = Energy + Stomach protection;

- Effects of drugs are influenced by your mood, feelings, environment & how much you take (Site&Setting). The same drugs will not always have the same effect.

- Remember that there is no quality control with illegal drugs. Drugs could be stronger/purer or more polluted than expected. This is how lethal overdoses happen.

- NEVER drive or operate any machinery when you're on a drug. And don't drive with people who are either! Rather wait until chemical levels subside or get a taxi!
-Depressed, anxious or having problems? Taking drugs will probably make you feel worse. Also check family history for mental or psychiatric disorders - many are genetic and even mild use or experimentation can trigger serious problems - see the Psychosis Chapter.

Most of all: If you do drugs, don’t let drugs do you!

**Mixing Drugs**

Each individual is different and drug interactions are complex. The best advice - avoid mixing drugs, including alcohol and prescription drugs.

However, if you do mix, remember when you take what, and allow time for the effects to kick in and wear off. Be comfortable with how you feel, before you start mixing. Some combinations can be deadly.

*Don’t mix:*

MDMA or LSD or Smart drinks
  with Thinz (nor- pseudo ephedrine) or Bioplus or Ephedrine
  = dehydration, heart palpitations and fainting

MDMA
  with large amounts of Alcohol or DXM
  = dangerous

Ketamine or GHB or anti-depressants
  with alcohol
  = possibly lethal

Poppers
  with MDMA or Speed or Coke
  = heart palpitations
Bad Trips - Dealing with one

Sometimes, certain drugs can induce a ‘bad trip”. This can be either physical (eg: severe nausea or convulsions) and/or psychological. It can happen with any drug, but more commonly with LSD and MDMA/Ecstasy.

NB: If at any stage you feel overwhelmed, or if you or a friend is experiencing severe physical or emotional reactions - do not hesitate to get professional help!

The best way to prevent a bad trip is to follow the guidelines set out in the ‘If’ section in this booklet. There may however be times when a bad trip still happens. People having bad trips can feel a number of things: confused, overwhelmed by crowds and attention, fear they are losing their minds, have hallucinations and can become paranoid. They can also become dangerously violent. Some describe it as being stuck in a nightmare that you can’t wake up from. If you have to help someone, remember to stay calm, as anxiety and fear will worsen the situation.

Most people will respond to the A R R T guidelines listed here:

Acceptance: Try to gain the person’s trust and confidence by keeping calm. Try not to make them do anything they don’t want to do.

Reduce Stimuli: It is best to take the person to a quiet place, where they feel safe and comfortable, away from loud noise, crowds and bright lights. Sunglasses may help. Keep your movements slow and smooth, and don’t crowd the person - let them move freely.

Reassure: Reassure the person that the drug is causing the effect, that it will go away with time and if they try to accept the feelings rather than fight them, things will look better, sooner. A positive attitude can often turn a trip around.

Rest: Make sure they are comfortable and use simple techniques for relaxation such as massage or even holding hands. If the person becomes violent or aggressive - call for help. Someone flipping out on a bad trip seems to have enormous strength.
**Talkdown:** Talk constantly in a soothing tone. It may help to remind them who they are, and try discussing peaceful, pleasant topics. If they are having difficulty grounding themselves, get them to focus on your face. By getting them to think simple and happy thoughts, and creating a positive attitude, bad trips can often be turned around.

**Coming down**

Try not to put off the comedown from the use of a stimulant or upper. Avoid using downers like heroin, mandrax, or benzodiazepines like Valium to take the edge off or put you to sleep. These drugs are much more addictive than the common party drugs. Your drug-taking could evolve from a party experience to a daily need. Come down by chilling out, replenish your body with food, fluids and sleep, videos, music whatever makes you comfortable. The high could be followed by feelings of depression or anxiety for days after use - prolonging the comedown could make it worse. Your experience with drugs could turn into a nightmare. If you are spinning out, ask for help from a friend, or someone working at the club or party. If someone collapses, call for help immediately but try not to panic.

If you’re using too many drugs too often, you are likely to end up feeling spaced out, paranoid and depressed. It’s the Law of Drug Gravity: What goes “up” must come “down” and for every High, there is an equal and (often more hectic) Low. Your body and mind needs rest, relaxation and nourishment to replace the things that drugs take out. So if you feel you’re losing the plot and you’ve been overdoing it, give the drugs a miss and see how you feel.

**Detox**

After all the strain and abuse your body goes through on a hectic party or festival, it’s no wonder you feel like you’ve been hit by a bus on Monday or Tuesday. No-one enjoys feeling like that and you owe it to yourself to replace what the weekend took out of you. The section will help combat the depression and general hangover following a party.

Before going out: Not many people like to eat before a party, so try drinking a protein shake, this will line your stomach and give you energy. Banana’s and pasta will do the same. Liquid carbohydrates are great too.
When you get home: Start the ‘flushing’ process before you go to bed.
- Drink some water - preferably non-sparkling mineral water;
- Vitamin C - contains anti-oxidants;
- Protein shakes are good as you probably won’t be hungry!
- Yoghurt and banana’s are good too.

The morning after: One of the reasons you feel fuzzy-headed is because of all the chemical and mineral imbalances in your body, and lack of sleep. After you’ve eaten, take an anti-oxidant. These push all the toxins out of your blood. These are available at any chemist or supermarket. Take a good multi-vitamin containing Vitamin A, C, E, Coenzyme Q10.

- The idea is to flush your system so drink fluids (no coffee / tea) and eat lots of fruit;
- Rest and Relaxation are important to restore your strength;
- Heavy foods must be avoided (eg bread, potatoes, meat) as these sit in your system for days;
- Foods high in fibre (cereal, veg.) are a good idea.

Exercise is one of the best ways to get your blood circulating however be careful of the gym soon after as your heart and body has been through enough! However, mild aerobic exercise will do you wonders. If you have access to a sauna or steam bath: sit inside for 10 / 15 minutes until you’re really hot, then go and have a cold shower. Then go back to the sauna and back to the shower. This causes your blood vessels to dilate - constrict - dilate - constrict and this will get those toxins out of your blood.

**Drug Induced Psychosis**

There is considerable likelihood that sustained and/or excessive use of any psychoactive drugs can result in psychological problems. Some of these problems are much worse than others, some will go away easily and others not so easily. These problems can include flashbacks and post traumatic stress disorder, paranoia, depression, mood swings, delirium, auditory hallucinations (“the voices”), visual hallucinations and sometimes full-on psychotic conditions. Generally these are what are referred to as Drug Induced Psychosis a.k.a. Losing the Plot. Psychosis by the way is defined as “severe mental derangement ... resulting in delusions and loss of contact with external reality”. This
normally ends up in an impaired ability to function in work and social situations. Once triggered, these conditions can be very difficult to treat. If you are lucky the symptoms go away when you stop using the drug, the worst case is that you have to take anti-psychotic prescriptions drugs for the rest of your life. Most at risk are people with existing personality disorders, pre-psychotic personalities, an unstable ego balance, or a great deal of anxiety. There might also be a certain psychological condition that is latent, that is you don’t know about it, it’s sitting there hidden in the intricate web of your neurons and brought out to become a real problem by psychoactive drug use. Other problems are caused when some people who feel psychic distress or are having problems self-medicate themselves with drugs. Generally drug use under these circumstances can only make the situation worse.

A complete treatment of this important topic of drug-induced psychosis is beyond the scope here: many books have been written, people spend their lives studying and trying to understand just one aspect of it. But it’s important that users are aware of these issues and risks, even if it’s just an overview, since these are amongst the biggest dangers of dance drug use. The two most prominent kinds of drugs that are responsible for these conditions are hallucinogens like LSD, Mescaline and Psilocybin and stimulants like Kat, Speed and Cocaine. Amphetamine Psychosis is a serious condition which is related specifically to use of any amphetamine. But it’s not only these drugs that can cause problems. For instance, there are reports of serious psychological problems even from regular cannabis use. MDMA has also caused problems. Some people say that because magic mushrooms are natural, they are safe. Not true - they are psychoactive and although milder than LSD, can still trigger psychosis or cause problems. The same with cannabis. Some times these problems only start after an extended period of use (like a few years). The results of the drug use survey we have done over the last few years at raves in South Africa have shown that most recreational users experience psychological problems such as mood swings, depression, emotional instability, personality changes and other negative long terms effects.

Even one dose can cause a permanent mental disorder - perhaps you have heard stories of someone who never came back from an acid trip? Some of those stories are true. If you have tripped out on psychoactive drugs several times before, and think that you are no more unbalanced than the rest of the human race, perhaps you’re safer. Many people see tripping as an adventure, but one must still be very careful. Every time you trip, you are
causing stress on the fragile fabric of your reality, and perhaps one day it might not bounce back. Some people have more resilience and a stronger mental framework than others, but no one can claim that they are completely invulnerable.

Psychologists describe this as the ‘kindling’ effect. Imagine your reality to be a dense and intricate forest. Every time you take a psychoactive drug-induced trip out of reality, you are tramping a path through this structure of your psyche. When you come down, those filaments rebound and reconnect. How often you take that walk will mean the more times your reality is tramped on, and the less time it has to recover. And some people have a much weaker structure, that is not so resilient. They have smaller and more fragile kindling, which is more easily and perhaps permanently damaged, whilst others have more hardy kindling that’s stronger. But tramp on that kindling enough and hard enough, it’s going to get damaged. This also means that over a period of time, the changes might be subtle and you might not even notice them happening, but others might so its really worthwhile listening to others who can give you an objective opinion or assessment.

Strong stimulants can put you at risk of Amphetamine Psychosis. The more you use them, the more the risks. Regular Methamphetamine/Speed or Kat use can make you colder, more aggressive and paranoid. It may progress to more extreme symptoms like permanent visual and auditory hallucinations, full-blown paranoia, in some ways similar to schizophrenia. Some will say that you have completely lost the plot and even try and tell you that but because you are so severely delusional, you will think that nothing’s wrong.

It’s fair to say that excessive use of any drug can make you feel that you’re losing the plot and can aggravate existing worries. If you are spending all your time and energy dealing with the drug’s issues, you don’t get to deal with your own issues and personal development at all, especially if you are young. It should be up to you to decide when you would be happier taking a break from the drugs, but don’t leave it to late. If you think you have a problem, or know someone that does, it’s best to get professional help from a psychologist as soon as possible. They know about all these things. Most of these conditions can be treated successfully. If you don’t know where to find a psychologist to visit, see your family or any other medical doctor for a referral.
Dependency

Even if you consider yourself an occasional recreational drug user and you don’t think you have any problems, it’s worth understanding what dependency is all about (especially the warning signals). The thing about developing a dependency is that generally you are not aware of the condition until it has developed into a problem.

Dependency is a medical term which is defined as “impaired control of substance use and continuous use despite adverse consequences”. That means the drug use is out of control, despite the damage it is doing to you. Addiction is a more common term, but that refers more specifically to a “physical bodily need that results in withdrawal symptoms if not satisfied” i.e. it’s very hard to kick the habit due to the hectic cravings. There are so many facets and aspects to this dependency thing, not even the medical community can agree amongst itself as to exactly what’s what.

However with drugs that we see, there are broadly two types of dependency. One is a physical dependency which is about those blood-curdling cravings and the other is a psychological dependency, which is more to do with the psychological processes in your brain where the pleasure mechanisms keep calling for more. Generally it’s easier to beat a psychological dependency than a physical one, but that varies from person to person and from drug to drug.

Some drugs are more dependency producing potential than others, but ultimately you can get hooked on anything. Repeated use of certain drugs like Nicotine, Cocaine, Methamphetamine/SPEED, Kat, Heroin and others can result in a dependency as described above. Other drugs such as LSD and Cannabis don’t necessarily cause withdrawal symptoms, although you can still develop a habit. With some drugs, we can say that the dependency onset rate is much quicker. For instance, its said by many that one only has to use Heroin a couple of times before the cravings start. It’s also very important to know that the treatment data shows that the full recovery rate of people who have developed severe dependencies is low. There is also the issue of tolerance, that is the more often you use that drug, the more you have to take to have the same effect.

Environment plays a big part - even if you don’t have a dependency as above, some times you will associate use of a drug or substance with a place or social ritual, for instance drinking if you go to a bar, dropping a pill at a rave, snorting lines in the toilets, ... the list goes
You might feel out of place if you are not doing a certain thing in this social context since you can’t seem to enjoy yourself without it. These habits can form part of, or lead to a dependency, but sometimes it means that the drug use is contained. Problems can really start when you bring the drugs home and they become part of your everyday lifestyle.

Alcoholism is the biggest drug problem many countries face, certainly in South Africa yet society generally does not see alcohol as a ‘drug’. What’s different about Alcoholism is that it generally the condition of lifestyle deterioration and dependency only becomes apparent later in life. Treatment data shows most chronic patients are around 40 years old, yet they probably have been drinking regularly most of their lives. You might have heard someone saying that alcoholism is a disease - that’s because it took a while for the medical profession to understand addiction. Eventually they came up with the ‘Disease Model of Addiction’. Them in this case was the American Medical Association (AMA). Ultimately the mainstream medical community has accepted addiction as a disease. This means that these conditions fall within a framework for professional treatment. In the USA, it also means people under treatment have more rights in certain circumstances.

Some people talk about having an addictive personality - perhaps some people are more vulnerable to dependency than others, perhaps its genetic but this where it gets messy. Essentially if you use an addictive drug often enough, chances are that you will end up with a dependency problem. Smoking cigarettes is an example. The odd fag will not mean you are hooked but start smoking every weekend, the hard-to-resist cravings will kick in and it will soon become a pack-a-day affair. There are a few people who claim to use drugs like Heroin recreationally (that is every now and again), and perhaps they can, but these people are extremely few and far between, they are the exception rather than the rule, do not take them as role models. Age is also a factor here, perhaps because most people get wised up as they get older. Resisting the urges and cravings for more takes considerable will power. Hindsight is also useful. But be careful of drug bravado!, just because you can handle one, does not mean you can handle all. Not all drugs are the same!

The bottom line is: KNOW what is transpiring in your life, be honest with yourself at all times, be on the lookout for problems and make changes if necessary.
Other Random Information

Having a Safe Party - *some general tips*

- Always have water with you on the dance floor. Drink some even if you're not thirsty but nor more than a litre per hour.

- Establish fresh taps, exit points, the location of the paramedics and security before you start to party.

- Because of the good vibes some drugs like MDMA create within people, there unfortunately tend to be people who realise the potential for taking advantage of this. Be careful of going of with strangers, and look out for your friends as well.

- One of the most important things is to have trustworthy friends with you. Make sure they know what's going on and what you have taken. If you feel unsafe or uncomfortable at any time you should feel confident that they are there for you.

- If you get tired and you feel drowsy, go to a chill area - girls, take a friend with you. If you're tired and by yourself & someone is giving you major hassles, find the closest place to sit down amongst a lot of people.

- It's important to feel comfortable with yourself, your clothing, attitude and environment before taking any drugs. Try to keep a clear head at all times and remember that this is not some eternal euphoric paradise. Feel confident that you can handle whatever comes your way and remember what the consequences could be.

**Asthma & Drugs**

If you are an asthmatic, you should be aware of the additional risks that you are exposed to with dance drug use. While most dance drugs don’t seem to affect asthma directly, there are dangers. An asthma attack can be triggered by several factors:

- Smoke: Hot, smoky nightclubs are not friendly environment for your lungs. Stick to well ventilated areas if possible. Also remember that it is not a good idea for asthmatics to
smoke anything, as this impairs lung function.
-Exercise: Many forms of asthma are triggered by aerobic exercise, such as dancing.
-Panic attack: Some drug users (especially first time users) experience panic attacks as a result of the onset of the drug. Panic can sometimes trigger an asthma attack. If this happens to you, calm down, rest and wait for the feelings of fear to pass.
-Adulterants: Many ecstasy pills contain other substances besides MDMA. Some of these, like ephedrine, have been used in the treatment of asthma. Atropine has also been found in a few pills, and is particularly dangerous for asthmatics. So you should be particularly careful about new and untested pills or capsules.

Staying Safe:
-If you are on medication, make sure that you take it, and always carry an inhaler with you in case of attack. Pay attention to your body’s warning signs. If in doubt, find somewhere to rest and chill out;
-If you are taking any substances, remember that moderation is always safer;
-If you are with friends, ensure that they know of your condition and how to respond if you do have an attack. If you have chronic asthma, you might also consider getting a Medic Alert bracelet;
-Many asthmatics have been raving safely for years: just take the necessary care and precautions.

Drug Tests

Although not so common here in South Africa as say in the USA, the dreaded Drug Test can be sprung on a student or worker, with sometimes devastating results. Just one toke of a joint can result in the positive, and the next thing you know you classified a drug addict and sent off to rehab.

There are various drugs tests that are used to detect the different classes of drugs. These are Urine Tests, Saliva Tests, Hair Tests, Blood Tests and Sweat Tests. With Blood or Saliva tests, they can detect use going back a few days, but with the Hair test, this can go back much further, up to 90 days. However, this test is expensive and has to be done in a lab. The Blood Test is the most accurate, and also the most expensive.

For tests other that the Hair Test, most drugs stay in your system for a few days, 3 -
5 is the general estimate. The exceptions are cannabis, with regular users this can be detected for up to 12 weeks, the Barbiturate up to 21 days and the Benzodiazepines up to 42 days.

As to avoidance tricks, urban legends abound. Approach with caution and scepticism is all the advice we can give in this regard.

**Epilepsy**

The chances of an epileptic seizure are exaggerated at a party with strobes, computer graphics and drugs. It could happen to you, or any of your friends or even the person dancing next to you. However, if handled correctly, the danger soon passes.

**Causes:** Epilepsy occurs when nerve cells in the brain fire electrical impulses at a rate of up to four times higher than normal. This causes a sort of electrical storm in the brain, known as a seizure. A pattern of repeated seizures is referred to as epilepsy. Medication controls seizures for the majority of patients, who are otherwise healthy and able to live normal lives. For some individuals with epilepsy, stimulus-sensitive or reflex-attack seizures are most commonly triggered by visual stimuli, such as strobe lights and even computer graphics.

Most seizures occur when there are repetitive, high-intensity, multicolored or white flashes; appearance of line patterns; rolling or flickering patterns or swift displacements of images across the screen. Fatigue and sleep deprivation may also be contributing factors. Epilepsy is in no way contagious and in most cases, Epilepsy is not inherited. Epilepsy can be the result of an infection or disease. Alcohol can increase the tendency to have a seizure. Also, some drugs like Ecstasy, Cocaine and Amphetamines, can cause seizures. Some prescription medications when taken in large doses can also bring on seizures.

Epilepsy is a chronic condition of recurrent unprovoked seizures. Isolated seizures and provoked seizures (e.g. drug or alcohol-induced) are not Epilepsy even though the events are real seizures. There are many types of non-epileptic seizures. Non-epileptic seizures differ from epileptic seizures in that there is usually no evidence of abnormal electrical activity in the brain after the seizure, and they do not occur repeatedly. Some of
the more common causes of non-epileptic seizures are low blood sugar, fainting, heart disease, stroke, migraine headaches, kinked blood vessels, narcolepsy, withdrawal, sleep depravation and extreme stress or anxiety.

Recognising a seizure:
There are two major kinds of seizures known as a “partial” and “generalised”. Partial seizures can cause a range of unusual sensations including sudden, jerky movements of one body part, distortions in hearing or seeing, stomach discomfort, or a sudden sense of fear. Consciousness is not impaired. Generalised absence seizures are characterized by 5 to 15 second lapses in consciousness. During this time the person appears to be staring into space and the eyes may roll upwards. The tonic-clonic seizure is a generalised convulsion involving two phases. In the tonic phase, the individual loses consciousness and falls, and the body becomes rigid. In the clonic period, the limbs jerk and twitch. After the seizure, consciousness is regained slowly. While the tonic-clonic seizure is the most visible, obvious type of Epilepsy, it is not the most common. Partial seizures are more frequent.

Dealing with a seizure:
During a partial seizure do NOT restrain the person. Protect them by moving sharp or hot objects away. If wandering occurs, stay with the person and talk quietly.

During a tonic-clonic seizure do the following:
* Keep a cool head and calm others around you. You cannot stop a seizure once it has started. Let the seizure run its course. Do not try to revive the person.
* Ease the person to the floor and loosen clothing.
* Try to remove any hard, sharp, or hot objects that might injure the person. It may be necessary to place a cushion or soft item under their head.
* Turn the person on his or her side in the Recovery Position, so that the saliva can flow from the mouth.
* Do NOT put anything in the person’s mouth.
* After the seizure the person should be allowed to rest or to sleep if necessary.
* After resting most people carry on as before. If the person is not at home and still seems groggy, weak, or confused, it may be better to accompany them home.
* If the person undergoes a series of convulsions, with each successive one occurring before he or she has fully recovered consciousness, or a single seizure lasting longer than 10 minutes, you should immediately seek medical assistance.
Drugs that give you a buzz or make you trip are called Psychoactive drugs, that is drugs that change the way mind works. These drugs generally affect the Neurotransmitters that are important in transmitting signals and information in the brain. The most prominent neurotransmitters in the brain are dopamine, norepinephrine, serotonin, enkephalin, GABA, glycine, nitric acid, glutamic acid, and acetylcholine (which was the first to be discovered). These are the chemical messengers of the brain and are ‘biogenic amines’, a characteristic being a positively-charge nitrogen atom.

They start their journey up in the presynaptic neuron, and after receiving an electric impulse, they have to pass through a gap between brain cells called the Synapse, to end up on the postsynaptic neuron, where they cause a further reaction. Then they get recycled through ‘reuptakers’.

This is part of the process of making you do, think or feel something. Neurotransmitters are generally recycled, so there is a lot of ways of interfering with the way they work. They are responsible for many different bodily and psychological functions: for example dopamine regulates motor behaviour, and serotonin which determines your mood but is also found in muscles. Drugs only stay in your body for a certain amount of time and this is measured by the ‘half life’, that is the time it takes for the concentration to reach half the original level. In the table below, and many of the drug entries in this booklet, we explain how that drug works by looking at how they affect the neurotransmitters.
<table>
<thead>
<tr>
<th>Drug Class</th>
<th>Effects</th>
<th>Action</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opiates</td>
<td>Euphoria, suppression of pain, sedation</td>
<td>Binds to Opiate receptors</td>
<td>Morphine, Heroine</td>
</tr>
<tr>
<td>Neuroleptics</td>
<td>Sedative, antischizophrenic,</td>
<td>Blocks dopamine receptors</td>
<td>Chlorpromazine Haloperidol</td>
</tr>
<tr>
<td>Stimulants</td>
<td>Heightened state of mental alertness, boosted self-confidence</td>
<td>Increase flow of dopamine or norepinephrine</td>
<td>Speed, Amphetimines, Cocaine, Kat</td>
</tr>
<tr>
<td>Anti-anxiety agents</td>
<td>Ease anxiety, induce sleep, generally addictive</td>
<td>Affect the GABA receptor</td>
<td>Diazepan (Valium), Librium, Paxipam, Seconal</td>
</tr>
<tr>
<td>Barbiturates Convulsants</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anti-depressants</td>
<td>Lowers depression incidence</td>
<td>Interferes with serotonin or norepinephrine</td>
<td>Amitriptyline, Imipramine, Fluoxetine (Prozac)</td>
</tr>
<tr>
<td>Psychedelics</td>
<td>Change in sensory perceptions, distorts reality, hallucinations, synesthesia, transcending of ego boundaries</td>
<td>Affect serotonin, norepinephrine and dopamine</td>
<td>LSD, Mescaline, MDMA, psilocybin (mushrooms)</td>
</tr>
</tbody>
</table>
First Aid

Some drugs can make people very drowsy. Others can lead to people being very tense and panicky. With some drugs people can overheat and become dangerously dehydrated. And in some situations people can take too much or have a bad reaction to a drug and fall unconscious. Drug use can be dangerous and it is important that you know what to do in an emergency. The lives of friends and people around you could depend on you knowing basic first aid.

Some people who have got into problems on drugs are only alive today because their friends knew what to do in an emergency. Others have died because the people around them panicked and didn’t know what to do. Many organisations such as the Red Cross and St Johns offer free courses. Have a look in your local phone book for contact numbers.

Here is some basic First Aid information:

If a person is tense & panicky
This tends to occur with hallucinogenic drugs like LSD and magic mushrooms but it also happens with drugs like amphetamines and ecstasy as well as high doses of cannabis, or combinations of these. If someone is really tense and panicky on drugs take the following steps:
- Calm them down and reassure them. Talk to them quietly and explain that the panicky feeling will gradually go.
- Keep them away from loud noises and bright lights.
- Help them if they over breathe (hyperventilate). When someone breathes very quickly and gasps for breath, they often get dizzy and feel sick.
- Take a look at our guidelines for dealing with a bad trip

If a person is faint or loses consciousness
This happens mainly with downer drugs like alcohol, heroin and tranquillisers but is also quite common with solvents (glue and gas) and poppers and can happen to people who react badly or overheat on amphetamine or ecstasy. If it happens take the following steps:
- Put the person in the recovery position.
- Loosen any tight clothing that might restrict their breathing.
- Keep them warm by use of blankets or a coat (but not too warm). This does not apply if
loss of consciousness is due to overheating as described below.
-Check their breathing. If they are not breathing be prepared to do mouth to mouth resuscitation.
-Call an ambulance as soon as possible. Explain to the ambulance crew what has happened and what you have done.

If a person overheats or dehydrates
This tends to happen with drugs like amphetamine and ecstasy when people really exert themselves. These drugs raise body temperature. If people use these drugs in hot places, like clubs, body temperature goes even higher. These drugs give an energy boost and people often dance for long periods getting even hotter. As they get hotter they lose a lot of body fluids - as much as a 1/2 a litre or pint an hour. Overheating and dehydration can result. This can be very dangerous and has been the main reason for ecstasy-related deaths.

The warning signs include:
- Cramps in legs, arms and back.
- Failure to sweat.
- Headaches and dizziness, vomiting.
- Suddenly feeling very tired.
- Feeling like urinating but not doing so when you go.
- Fainting.

It can be prevented by:
- Not dancing for long periods at a time.
- Taking regular rests and relaxing in a cool area.
- Drinking water, fruit juice or a sports drink at no more than about the rate of half a litre or pint an hour, (sipping the drink regularly) and avoiding alcohol.
- Be careful of drinking too much water, this too can cause major problems, and can even be lethal.
- Drinking or eating something that keeps the salt levels in the body up. Salty snacks, fruit juice, and sports drinks will all help to keep the body provided with the minerals it needs.
- Wearing cool clothes and not wearing hats (hats keep heat in).
The Recovery Position

If someone is overheating:
- Move the person to a cool area - possibly outside.
- Splash them with cold water to cool them down.
- Remove unnecessary clothing and fan them.
- Call an ambulance.

Explain to the ambulance crew, or anyone one else taking over, what has happened and what you have done.

If a person has an epileptic seizure: See the Epilepsy chapter for more information.

Hear! Hear! Protect your ears!

The sound systems at clubs & festivals are normally very big and powerful. Whilst it is fun (for some) to dance in front of the speakers, you should be careful about the damage that excessive sound pressure levels can produce. This is measured in dB's and levels above 85dB for over 8 hours carries a serious risk of causing permanent hearing loss. As the decibels rise, so the safe listening period shortens. Ringing and inner ear tickling is a sign that damage is happening to your cochlear hair cells, so be careful. This can cause deafness, which only occurs 10 - 20 years later. This damage is irreversible and permanent. Take regular breaks from the dance floor. Wearing ear plugs greatly reduces the risks of damage. There are special ear plugs available which let in part of the sound, but these are expensive and have to be specially made up, but are worth it if it means your ears are safe from long term damage.
Sex & Parties

Self-expression embraces all aspects of the self, including sexuality. Dance Parties & Raves resonate with love, warmth and affection. It stands to reason that at times one would want to express this love with complete physical surrender - making love. Keep it a beautiful memory, not a bitter regret.

-Babies are forever and so is Herpes. HIV is a killer. Genital warts contribute to cervical cancer. Chlamydia causes infertility. The list goes on. Safe sex is better than remorse. Always ensure a condom is used.

-Whilst on E and other drugs, it becomes easier to have unsafe sex. You may “forget”, judge that the risk of infection is small, or not such a terrible thing after all. If you think you might have sex whilst tripping, make sure you have safe sex supplies available beforehand.

-Also it may seem right to make immediate changes in relationships such as increasing or decreasing commitment of all kinds. These fresh points of view can be useful, but it is probably unwise to make lasting relationship changes until you have a chance to see how you feel about them after the drug and its afterglow wear off.

Testing Drugs

One of the biggest dangers of using drugs is the issue of quality control. For instance, pure Ecstasy tablets are made of 100% MDMA. But so many pills keep coming out with other substances in them. Some don’t have any MDMA in them at all. Even pills with the same logo (e.g. Mitsubishis) can be very different since they come from different batches/manufacturers. Sometimes other chemicals and compounds are substituted, some less harmless than others. This might to be to bulk out pure MDMA so the dealer can make more money. In this case, an inert bulking agent is usually used, and the effect is a low intensity E trip and that ripped-off feeling. In other cases, other drugs/poisons such as DXM, Ketamine, Strychnine, Atropine and PMA have been found. These are used because they are more readily available or easier to produce. Some of these are more dangerous than others. For instance with PMA, one dose produces some E-type feelings, but two doses can be fatal. And because it takes longer to come on than E, people tend to drop another thinking it’s a weak pill. There have been many deaths in the USA, Australia and Europe due to PMA.
Ideally it should be the public health service that has pills properly tested and certified. In Europe, the Dutch model has shown that one consequence of systematic testing is to introduce an element of ‘quality control’ into the ecstasy market, and fatalities are minimal as a result. However, due the illicit status of E, we have to work around this.

**What can we do to get a pill tested?**
The easiest way, but not the most thorough, is to do the testing yourself. There is a very simple testing method available. This will help you find out what the pill contains. Although this test is limited, it will tell you whether or not the pill contains MDMA. You should try and do this test where you have the clarity of mind to do it properly in well-lit conditions. It will also be a good idea to share your results with others before the party or wherever else you are going to use it. The test can also be done at a club or rave, but in low light conditions it can be tricky to get reliable results.

**How do Testing Kits work?**
These ‘home’ testing kits use a chemical solution called Marquis Reagent. This is made up of the chemicals formaldehyde, sulphuric acid and methanol. A drop of the solution is added to a scraping from a pill. The solution changes colour indicating the presence of MDMA or similar substances (MDEA, MBDB, MDA), Methamphetamine and 2CB. You then compare the colour the liquid turns to an indexed Colour Chart. The testing solution contains a strong corrosive chemical so you must be careful. If spilt, flush away with lots of water.

**How reliable are these Reagent test kits?**
A DIY testing kit is not in the same league as professional laboratory testing, which generally use a technique called gas chromatography. The home test can only indicate the presence of the main active ingredient. It cannot give any indication of quantity or other, secondary, ingredients. However, experienced testers in Holland claim that very subtle variations in pills can be detected, such as relative purity. The test is good for indicating you’ve been sold a complete dud or stuff like PMA.

There are limitations with the test - for instance a pill containing PMA and MDMA will test positive for MDMA, and you won’t know there is PMA in it. Same goes for DXM, which can be very dangerous if taken together with MDMA. Although these combinations do occur, they are rare. It will also turn dark with other prescription drugs, so it’s not entirely reliable but many would say it’s ‘better than nothing’. The Marquis Reagent doesn’t last
forever either. The agent can go off in as little as six months, although if it’s kept in a dark glass bottle, this may help to extend its shelf life.

**Caution:** If you test shows up MDMA or a variant, it does not mean that other harmful substances are not in there because the test is not looking for them. But generally, manufacturers do not mix PMA and MDMA.

**Is it legal to test pills?** It is legal to possess an ecstasy testing kit. It is, of course, illegal to possess ecstasy. Be discreet when testing in an open venue such as a club or festival - it would be illegal for you to test a pill, find out it contained any illegal substances and then hand it back to the person. You could be arrested for dealing. Suggest that the pill-owner scrapes a sample off their pill themselves, rather than handing you the pill. You will need to be responsible about handing over any sharp instrument to do it with, especially if they are jittery or completely out of it.

**The Law & Drugs**

“I fought the law, and the law won” - The Clash

**Disclaimer:** We do not accept liability for any errors, opinions which are based on an undeveloped constitutional jurisprudence, or changes to the law after this information was compiled.

Most of the substances mentioned in this booklet are illegal to possess and consume, and if you choose to take or distribute certain drugs, you are breaking the law. If you have chosen to break the law, it is your responsibility and you will have to live with the consequences of your actions. If you are convicted of possession or dealing in drugs (either by pleading guilty when charged or by being found guilty after a trial), you will have a criminal record and you will be punished. The nature of the punishment will depend on many things - your age, previous convictions, the seriousness of the offence and so on. You will either be given a fine or a jail sentence or both. In some cases, the fine or the jail sentence may be suspended, which means that you can go free, but if you do the same thing again, you will be sentenced for the new offence and the suspended sentence will be brought into effect. A criminal record counts very heavily against you when applying for a job, a gun licence, or even for a visa to travel overseas.
The punishments for possessing or consuming these substances are severe and can lead to you spending time in jail. Do not be fooled into thinking you will get away with it if you only have a small quantity of a drug on you. The law does not distinguish between small and large quantities and neither will the police.

The distribution of illegal substances is known as dealing, and the sentences for anyone found guilty of dealing are much higher than those for possessing or consuming them. In short, dealers face a very real possibility of winding up in jail.

It is important to note that the word “dealing” has a very wide meaning in law. It includes:
- Importing drugs (even if these are sent to you for your own use);
- Exporting;
- Distributing (even where this is not for profit or gain. For example, if you give a friend an Ecstasy tablet for free, you can be convicted of dealing);
- Selling (obviously);
- Manufacturing or growing drugs of any sort;  - transporting (so be careful of carrying these in your car!)

Obviously, the best way to avoid the consequences of breaking the law is not to do anything illegal. It is your responsibility to know the law, so educate yourself - knowledge is power.

About searches: The South African Constitution has a Bill of Rights which protects your human rights. One of these rights is the right to privacy, which says that you cannot have your person or property searched or your things taken away from you by the government (which includes the police). BUT none of the rights in the Bill of Rights is absolute. Under certain circumstances, all of these rights can be limited (changed, restricted or even taken away). This means that you can still be searched under certain conditions.

There is a law (the Criminal Procedure Act) which allows the police to search people and take their property if this is necessary for them to stop criminals. Because possession of drugs is against the law, the police are allowed to search you, your possessions and your home if they have a good reason to think that you have drugs.
Although the police would normally need a search warrant to search you, your possessions or your home, they do not need to get a search warrant if the delay would mean that the reason for the search would be defeated. If the police reasonably think you have drugs on you (for example, if you are obviously under the influence of drugs) and they believe that you would get rid of these before they could go and get a search warrant, they will be allowed to search you for drugs.

Note: A female may only be searched by a female. If no female police officer is present and the police want to search a female, they may request a female member of the public to assist them.

The police may also want to take a blood, sweat or urine sample from you. Whilst this appears to go against your right to privacy, if you give consent, this is allowed. If you do not give consent, the police can arrest you.

If you are Arrested: If the police find drugs on you or catch you dealing, you will most probably be arrested. Never resist arrest - it is an extremely serious offence. Also, you will give the police the right to use reasonable force to arrest you - and you do not want this to happen!

Once arrested, you have certain rights. You have the right:
- To remain silent. However, you are required to tell the police your name and address. Failure to do so is an offence.
- To be taken to court within 48 hours (NOT including weekends and public holidays - so if you get arrested on Friday you're out of luck);
- To be released on bail or on warning or in the care of a parent or guardian (if you are under 18), unless there is a good reason to keep you in jail;

If the police decide to detain you for a while (which will most probably happen until you can apply for bail or release), they must:
- Tell you, in a language you understand, why they are detaining you;
- Allow you to contact your family, a doctor and a lawyer, or assist you to get a lawyer if you cannot afford one;
- Keep you in proper conditions and give you food, water, something to read, and medical attention if you need it; and
- If you are under 18, keep you in a place separate from people over 18.
The police will probably ask you to make a statement. You do not have to do so. It is in your best interests to speak to an attorney before making or signing any kind of statement about the alleged offence. Remember that you have the right to remain silent, and cannot be penalised for refusing to make a statement. The right to keep silent is very important and any good lawyer would advise you not to say anything about anything to the police (except to tell them your name and address).

Insist on contacting your attorney as soon as possible, and instruct him/her to bring an immediate bail application. When you apply for bail, the police must take you to court for a hearing. If the magistrate decides to grant bail, or releases you on warning, or into the custody of a parent or guardian (if you are under 18), it may save you a night inside. It’s unlikely, but depending on the nature and seriousness of the offence, bail may even be granted by the police themselves, so ask them about that first.

On your first appearance in court, you might or might not be asked to plead. It is not advisable to enter a plea before consulting a lawyer. If you do not yet have a lawyer, you should ask for the case to be postponed while you find one. If you cannot afford a lawyer, you can apply for Legal Aid. (There is a Legal Aid office in every court).

When consulting with your attorney, remember that it’s not whether you “did it” that counts, it’s whether the state is able to prove it or not. If your attorney advises you to plead guilty, get a second opinion. A criminal record will last for the rest of your life.

**Safe Party Project**

Organisers of Dance Parties have immense public responsibilities, no matter how small or large the party is. Back in the days of the big Raves, we came up with this Project with the objective is that it serve as guide lines for party organisers, promoters and venue owners to help them ensure a safe party as much as possible, the ultimate aim being public safety.

This is not an attempt to condone illicit drug taking at parties: it simply raises the important issues of public safety that pertain to the dance culture, recognising that certain drugs such as MDMA/Ecstasy are popular, and are being consumed at such events. While no drug is safe in itself, the opinion is that injury and death may be averted if venue owners and promoters act in a responsible manner.
A Safe Party will undertake to:
* Offer free and unrestricted access to a cold water drinking tap or fountain, close to the dance floor;
* Have adequate ventilation and/or air conditioning;
* Have a relaxed dress code, to allow people to cool off if necessary;
* Have a separate area for a chill out room;
* Prevent overcrowding - never exceeding the maximum permitted number of people and take steps if areas get too cramped;
* Provide well marked and easily accessible emergency exit points, that are kept clear at all times;
* Have at least one staff member present who is qualified in First Aid, and if the event expects over 400 people, a fully equipped and trained Paramedic on duty. These persons should be on site and trained in the effects of drugs;
* Provide a private room or area where emergency cases can be taken for attention of the above;
* Allow drug education and harm reduction workers free access to give advice, assistance and distribute information;
* Provide secure and efficient cloakrooms

Security and Searching:
* Employ trained and courteous security staff who wear name tags so you can get their names if you need to;
* Have a clearly displayed policy about searching;
* Have the right to refuse entry if you refuse to be searched;
* Can insist on searching your outside clothes, pockets or bags;
* Will not insist on a more intimate search without your permission;
* Will only conduct strip searches or searches inside your clothes in private with an independent witness;
* Security Staff should be trained to assist with First Aid.

Temporary Venues. Good temporary venues will follow as many of these good practice guidelines as they can, with the exception of the First Aid worker/Paramedic, which should not be compromised on. Water and ventilation should also be a priority.

Show the Safe Party Project guidelines to the clubs and organisers in your area. It could make a difference!
Women: Drugs and You

Clear reliable information on how illegal drugs affect women’s health is hard to come by. Findings are often based on inadequate information about the women involved, or on animal studies. Drugs can affect appetite, weight and appearance, moods and ability to cope with everyday matters. But this section concentrates on how they affect your body cycle and your security.

-After taking some drugs like E, you may experience heavier, irregular periods: some reports say that periods have stopped altogether. In fewer cases, women have experienced light spotting after taking a drug. This may be caused by the drug or by other factors like lack of food or sleep or because of increased exercise. Dancing a lot, staying up all night, and not resting enough could affect your weight and general health, which in turn could affect your period and mood.
-As far as it is known, illegal drugs, like Ecstasy, do not interfere with the workings of the contraceptive pill, though other impurities in the drugs may decrease it’s effectiveness. If your periods stop, that does not necessarily mean that you have stopped producing eggs and you could still get pregnant.
-The effect of some drugs might make you feel less inclined to practice safe sex. Always have a condom handy and make sure it is used if need be!
-If you are worried that you have risked it in the last 5 days, you can get emergency contraception from the family planning clinic. You don’t have to be over 16.
-The use of all drugs, including alcohol and tobacco, during pregnancy is considered highly dangerous. Please see Pregnancy below.
-Some drugs, like Rohypnol, Ketamnine and GHB, have the capacity to knock you out cold for a few hours: you should remember the risk of date rape. As you probably know, there are a lot of guys out there who will take advantage of you, the second you let them. If you are going to take these drugs, be extra sure that you have trustworthy and caring friends to look out for you.
-If someone does give you unpleasant vibes, ignore them. If that doesn’t deter them, stick to your friends or move somewhere else. Even though it is a hassle to move because of someone else’s inconsideration, it will be for the best. A useful tip is to turn your back on someone when you feel too strong a vibe from them - this is a clear message. Don’t be afraid of offending anyone - it is you who matters and it’s your right to do so anyway. If all else fails, ask for help at a security area or organisers office.
Pregnancy Drug use during pregnancy should be reduced to a minimum, if not stopped completely. The rapidly developing tissues of the embryo and foetus are particularly sensitive to the effects of ALL drugs. The placenta is not a barrier to the passage of most drugs, so it should be assumed that drugs taken during pregnancy will reach the foetus in at least small amounts.

The risks associated with non-medical drug use during pregnancy include:
- Low birth weight, which may affect how able a baby is to stay healthy;
- Developmental delay;
- Increased incidence of miscarriage;
- Higher incidence of congenital abnormalities, such as cleft palate, microcephalus and club foot;
- Higher incidence of Sudden Infant Death Syndrome.

Sudden stopping of tranquillisers, barbiturates, heroin or methadone can be very dangerous to yourself and your baby, so withdraw slowly. Speak to a doctor or drug counsellor for advice. It’s safe to stop using ecstasy, speed, LSD, solvents or cannabis immediately.

MDMA/Ecstasy and Pregnancy: Many women’s’ menstrual cycles are affected by taking ecstasy. Periods may become quite irregular, but this does not mean that the women are infertile. Ecstasy does not stop ovulation and cannot be used as a contraceptive.

Health risks of taking MDMA during pregnancy include:
- Increased risk of miscarriage
- A higher risk of congenital abnormalities, such as a cleft palate
- Rupturing of the placenta
- Premature labour
- Foetal distress
- Low birth weight and growth-retarded babies, which may affect how able a baby is to stay healthy
- Excessive sleep
- Decreased interactive behaviour
- Poor feeding

Although the risk of miscarriage is high when taking ecstasy during pregnancy, there is also a high risk of the foetus developing to full term, but experiencing birth complications. In
desperate cases, women have been known to take excessive amounts of drugs to induce a miscarriage. This is not only harmful to the woman, but also to the developing foetus, which may survive, and be badly affected. There have been reports of severe permanent damage to the women, such as burst fallopian tubes, which results in one not being able to have any more children. It is far safer to visit a clinic or hospital to terminate an unwanted pregnancy. Most major hospitals and clinics can now perform a legal and confidential service in this regard. Lifeline can help with advice and counselling: you can find their number is in the back of this booklet.

**HIV & AIDS**

We live in country with the highest HIV rate in the world (over 10%), and it shows little sign of abating. Because it is an invisible disease, most of us think that it is not our problem, but it is! Anyone can get HIV. It can be transmitted through body fluids like blood, semen, vaginal and menstrual fluids, and breast milk. The risks come from what you do, and who you do it with.

- Don’t share needles & syringes when injecting drugs or other substances.

- Avoid unprotected sex, especially with casual partners. Use a condom, or abstain. If it’s really a desperate situation and you don’t have protection, consider non-penetrating sex (like mutual masturbation) which is a bit safer, but not totally without risk.

- Kissing or getting another persons semen or vaginal fluids on your skin will not spread HIV. The HIV virus will not enter the body unless there is a cut or break in the skin. There is no scientific evidence that HIV is passed through saliva, tears, or sweat.

- Digit Sex (Fingering) can be risky if you have small cracks or cuts on your fingers. If in doubt, use protection like a latex glove or if desperate, a condom on your finger(s).

- Oral sex and Cunnilingus is considered high risk. The virus can be passed to and from the mouth if there are cold sores and cracked/bleeding gums, and from infected vaginal fluids. Use a barrier like cling wrap if you are in doubt and really want to do this.

- Be aware that use of some drugs can result in more promiscuous and often regrettable
sexual behaviour. There are statistics to show links between use/abuse of drugs like alcohol and methamphetamine and the spread of HIV.

- GET TESTED! Ignorance of the virus is a killer, since its getting passed around without the carriers knowing it, often with lethal consequences. An HIV Test is blood sample that can be done quickly and cheaply at clinics and hospitals, which also offer the counselling necessary (although this can be waived). If you are tested HIV positive, its not the end of the world, providing you catch it in time. It usually takes years for the HIV virus to break down the immune system and cause AIDS. Many HIV+ people live healthy and long lives on the right medicines (antiretrovirals) that prevent it from becoming AIDS.

- Share important information about exposure to HIV/AIDS with new sexual partners.

- Spread knowledge and awareness of HIV/AIDS around, and never get complacent.

Further Reading

- Nicholas Saunders, ‘Ecstasy reconsidered’ (BPC Wheatons, 1997)

- Solomon Snyder, ‘Drugs and the Brain’ (Scientific American Library, New York, 1996)


- Julie Holland, ‘Ecstasy: The complete guide’ (Park Street Press, Vermont, 2001)

- Philp Robson. ‘Forbidden drugs’ (Oxford University Press, Oxford, 1999)


- Aldous Huxley ‘The Doors of Perception’ (1954)
Information Web Sites

There are loads of web sites on drugs out there - ‘experts’ abound, so be careful who you choose to believe. What you should look for is references to other sources of published information, that suggests the information offered is built upon the proven knowledge of others. Here are just some of the web sites we have found useful:

The Vaults of Erowid www.erowid.org
Erowid is a very comprehensive reference to most recreational and other drugs. It contains a lot of subjective user reports, factual and chemical and cultural information although it sometimes lacks in critical objectivity.

Wikipedia en.wikipedia.org
Wikipedia is a unique on-line encyclopedia. It has become an incredible source of information and a creditable reference, its vast bank of knowledge compromised of user-submitted content.

MAPS www.maps.org
The Multidisciplinary Association for Psychedelic Studies is a extensive resource with lots of information on the latest research on a variety of drugs dealt with here.

RaveSafe www.ravesafe.org
You will find most of the info from this book on the web site - mainly because they come from the same source. But there is more! There are a lot of stories submitted by people which have had experiences you might learn from.

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Need Some Help?

Web Sites

Lifeline www.lifeline.org.za
Narcotics Anonymous www.na.org.za

Gauteng

Cocaine Helpline 011 726 4212
Houghton House Recovery Centre 011 728 0850
POWA (People Opposing Women Abuse) 011 642 4345
Riverfield Lodge Treatment Centre 011 460 1970
SANCA / Phoenix House 011 726 4210
Lifeline 24-hour emergency counselling 011 728 1347
Narcotics Anonymous 011 485 5248
Wits Law Clinic 011 716 5644

Cape Town

Cape Town Drug Counselling Centre 021 447 8026
Family Planning Youth Health Services 021 762 6468
Lifeline 24-hour emergency counselling 021 461 1111
Narcotics Anonymous 088 130 0327
UCT Legal Aid Clinic 021 650 3551

Durban

Lifeline 031 323 2323
Narcotics Anonymous 088 127 8832

Thanks

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