

# 10

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# Kava

## OVERVIEW

Kava is a depressant drug that can make you feel sleepy and calm (sedated). It is commonly used during ceremonies in the Pacific Islands and is used in some countries as a medicine. Kava is known by names including: wati (PNG); kawa, waka, lewena, grog (Fiji); ava (Samoa).

Harms from regular long-term use can include: scaly skin, weight loss and spending a lot of time using it. It is not clear if people become hooked on kava (dependent). Counselling is the best available treatment for people with problems with kava use.

### History of kava use

Kava was introduced to some Aboriginal communities in northern Australia as a safer alternative to alcohol. In some of these communities, kava continues to be used today. Among some Pacific Islanders who live in Australia, kava is used as a tradition. Some other Australians also drink kava, though we do not know how many people use and about their patterns of use.

### The law and kava use

Kava can be imported into Australia only for medical or other scientific purposes. When travelling to Australia, people aged 18 years or older are allowed to bring up to 2kg of kava in their luggage. Check with the police in your state or territory for more details on the law and kava.

## WHAT DOES KAVA LOOK LIKE AND HOW IS IT USED?

Kava looks like brown ‘muddy’ water and is made from the roots of a type of pepper plant called *Piper methysticum*. The roots are ground up or crushed, added to water and then drunk.

## EFFECTS ON THE BODY

The effects from kava on the body depend on the individual and how the drink is prepared (e.g. how much kava powder is added to water). Some effects from lower doses include: feeling relaxed, sleepy and happy. Some effects from higher doses include: nausea and being unstable on your feet (e.g. staggering).

Harms from using too much kava may include:

### **Physical**

- Dry and scaly skin (sometimes called ‘crocodile skin’)
- Loss of appetite that may lead to the person not getting the vitamins and nutrients they need (malnutrition) and eventually weight loss.

It may also cause:

- Sore and red eyes
- Loss of sexual drive
- Blood tests that show abnormal cholesterol or liver results.

### **Psychological**

- Loss of motivation and drive (apathy).

### **Social**

- Person may spend too much time drinking kava and not enough time doing the things they usually do in life (e.g. work, sport, music, spending time with family or friends)
- Spending too much of the family’s money on buying kava.

### **Can kava use lead to dependence and withdrawal?**

It is not clear if people get hooked (dependent) on kava, or if people experience withdrawal, though some communities report some people spending a lot of time using.

## **HOW TO HELP A CLIENT WHO USES KAVA**

There is no specific treatment for clients who may have problems from kava use or be hooked on it (dependent). Standard brief intervention and counselling approaches can be used.

## **REDUCING THE HARMS IF A CLIENT CANNOT OR WILL NOT STOP**

If the client cannot cut down or stop using kava, they should:

- Not mix kava with alcohol or other drugs
- Try to eat food that is well balanced in vitamins and nutrients
- Monitor the amount being used in each session, and wait until the effects start to wear off before using more
- Avoid driving or using work machinery after drinking kava
- Get help from a health professional if they are feeling bad effects from using.

# GHB

## OVERVIEW

GHB (gamma-hydroxybutyrate) is a depressant drug, also known by the street names GBH, grievous bodily harm, liquid E, liquid ecstasy and fantasy. One of the main harms of GHB use is the small difference in dose that can lead to overdose and unconsciousness. If a person overdoses on GHB, medical help should be sought straight away. People can become dependent on GHB and may experience withdrawal symptoms when they stop using. There are no routinely used medicines for GHB dependence. Counselling may help people with problems with GHB.

### History of GHB use

GHB was developed in the 1960s for use in surgery, but was stopped because of its side effects. In the 1980s it was used to help people sleep and also as a dietary supplement for body builders. GHB started to appear in Australian nightclubs in the mid-1990s. It was banned shortly after this.

### How common is GHB use?

Compared to other drugs, GHB use is not very common in Australia. Around 1 in 1,000 people have used GHB in the past year. GHB use is often used at nightclubs, 'raves' and other dance parties.

## WHAT DOES GHB LOOK LIKE AND HOW IS IT USED?

GHB usually comes as a bitter or salty-tasting liquid and is often sold in small vials (e.g. in small soy sauce containers shaped like fish). It is most commonly sold as a clear liquid, but food colouring is often added so it is not confused with water. Sometimes it is sold as a white powder, or as a capsule or tablet. People often mix GHB into an alcoholic drink or other drink (soft drink, juice etc.). Injecting has been reported.

## EFFECTS ON THE BODY

Only a small dose of GHB is needed to feel the effects. The effects come on quickly (5 to 20 minutes after taking it) and last for 1½ to 3 hours. Sometimes similar drugs are sold as GHB (e.g. GBL; 1,4-BD). These drugs convert to GHB in the body and the effects come on more slowly and last longer than GHB.

People report taking GHB because it:

- Is relaxing
- Makes you more sociable and confident
- Increases sex drive
- Can help ease the 'comedown' from stimulant drugs like ecstasy.

Other short-term effects include:

- Memory lapses
- Drowsiness
- Sleeping
- Headache
- Dizziness
- Tremor
- Feeling like you need to vomit (nausea)
- Diarrhoea.

## HOW TO RECOGNISE HARMS FROM GHB

High doses of GHB can be dangerous and can quickly cause overdose. Large doses can lead to:

- Hallucinations (e.g. hearing or seeing things that that other people cannot hear or see)
- Blackouts
- Seizures
- Unconsciousness (coma)
- Stopping breathing (respiratory arrest).

There is only a small difference between the amount of GHB that is taken to make a user 'high' and a dose that causes overdose. Overdose is quite common. Among Australians who had used GHB more than 15 times in their lifetime, three out of four had overdosed at least once. Mixing GHB with alcohol or other depressant drugs (e.g. opioids, benzos) increases the risk of overdose.

Someone who has overdosed on GHB will look asleep, but they cannot be woken (they are in a coma). If they are awake, they may sweat a lot, vomit, or have irregular or shallow breathing. They may also find it hard to stand up or have muscle spasms.

Not much is known about the long-term harms of GHB use.

## **HOW TO RECOGNISE GHB DEPENDENCE AND WITHDRAWAL**

People can become physically and psychologically dependent on GHB. Tolerance to GHB can develop, so that larger doses are needed to get the same effect.

GHB withdrawal symptoms are similar to alcohol withdrawal. Withdrawal usually starts two to 12 hours after the last time it is used, and lasts from three to 15 days.

## **HOW TO HELP A CLIENT WHO MISUSES GHB**

Standard brief intervention and counselling approaches can be used.

There is no routinely used medicine for GHB detox:

- Benzos (e.g. diazepam) are often used to manage some of the symptoms of GHB withdrawal, anti-psychotic or anti-convulsant medicines are also used.
- If delirium occurs the client may need supervised care in a hospital or clinic.

### **GHB overdose**

- If someone has overdosed on GHB and is unconscious, get medical help straight away by calling 000 or other local emergency contacts.
- While waiting for the ambulance or other medical help, put the person on their left side (the recovery position) so that if they vomit they do not choke and stop breathing. Also, check that their airway is clear and that their chin is not touching their chest (see CPR guide, p. 436).

## **REDUCING THE HARMS IF A CLIENT CANNOT OR WILL NOT STOP**

If the client cannot cut down or stop using GHB, they can try to reduce the risk of overdose by:

- Not mixing GHB with alcohol and other depressant drugs such as benzos and opioids
- Monitoring the amount of GHB they are using in a session, and wait for the effects of the GHB they have taken to reduce before taking any more
- Avoiding driving after taking GHB.

# Ketamine

## OVERVIEW

Ketamine (ketamine hydrochloride) is an anaesthetic drug that can make you feel like you are outside of yourself (a dissociative anaesthetic). It is also known by the street names: 'K', 'special K', 'cat tranquiliser' and 'vitamin K'. Harms from ketamine use include anxiety, paranoia, hallucinations, and falling unconscious. Ketamine dependence and withdrawal are not common. Counselling is the best available treatment for people with problems with their ketamine use.

### The law on ketamine use

Ketamine is used legally as an anaesthetic in animals. It used to be an anaesthetic for humans but it is rarely used for that purpose now because it can cause bad dreams. It is still sometimes used for pain relief or other reasons in hospitals. It is illegal to use ketamine recreationally.

## WHAT DOES KETAMINE LOOK LIKE AND HOW IS IT USED?

Ketamine is a white powder that looks like crystals. It can also come as tablets or be dissolved into a liquid.

Ketamine is usually snorted in small amounts ('bumps'), rather than in larger 'lines'. Other ways it is taken include swallowing, or by injecting into veins or muscles.

## EFFECTS ON THE BODY

The effects usually last for around one hour if snorted or injected and up to two hours if swallowed. The mind-altering ('psychedelic') effects of ketamine usually stop within one hour, and so people may take repeated doses throughout a session.

People report using ketamine to:

- Feel relaxed
- Feel a 'rush' or 'high' (euphoria)
- Have their senses altered
- Get hallucinations
- 'See' sounds and 'hear' colours
- Feel like they are floating outside your body ('out-of-body experiences')
- Bring on the effects of other drugs faster or more intensely
- Stay up all night dancing.

Other short-term effects of ketamine include:

- Blurred vision and/or smaller pupils (constriction)
- Slurred speech
- Poor muscle coordination
- Numbness (especially in hands and feet)
- Unable to move (temporary paralysis) and/or speak
- Anxiety, agitation and/or panic
- Paranoia
- Increased heart rate and blood pressure
- Faster breathing
- Feeling like you need to vomit (nausea) or vomiting
- Sweating.

Users sometimes fall into a 'k-hole'. Usually involves the feeling of being outside your body, and can include hallucinations, and not being able to move or speak. Sometimes it is likened to a near-death experience.

## HOW TO RECOGNISE HARMS FROM KETAMINE USE

### Harms from high doses

The harms of high doses of ketamine include:

- Agitation
- Panic or terror
- Paranoia
- Depression
- Memory loss or memory disturbance (amnesia)
- Convulsions
- Abnormal heart rhythms (cardiac arrhythmia)
- Overdose.

### Harms from long-term use

Regular heavy use can result in problems with mood (e.g. feeling depressed or paranoid) as well as memory and reasoning. 'Flashbacks' have been reported, where an experience on the drug is strongly experienced again, after the drug was taken.

### Can ketamine use lead to dependence and withdrawal?

Tolerance to ketamine can develop quickly, so that people need larger doses to get the same effect. Regular use of ketamine can lead to psychological dependence, but this is not common. Withdrawal symptoms are not usually experienced.

## HOW TO HELP A CLIENT WHO USES KETAMINE

Ketamine users may need to go to a hospital emergency department if they feel very anxious, agitated, or have chest pain or palpitations. Most of the time these problems will go away without medical help because ketamine wears off quickly.

Standard brief intervention and counselling approaches can be used.

Sometimes benzos are used to treat symptoms like anxiety and agitation (on the one day only).

### Overdose

- Ketamine users can become unconscious if larger doses are taken. There is also a risk of stopping breathing (respiratory arrest) or heart failure.
- Because ketamine numbs feelings of pain and can lead to hallucinations, people may accidentally injure themselves.
- Eating or drinking before taking ketamine can cause vomiting, and there is a risk of choking if the person vomits and falls unconscious.
- Very few people have died from ketamine overdose alone and deaths have almost always involved another drug.
- Mixing ketamine with depressant drugs such as alcohol, benzos (e.g. diazepam), opioids (e.g. heroin) or GHB can increase the risk of overdose.
- If someone has overdosed on ketamine and is unconscious, get medical help by calling 000 e.g. after overdose a person may have kidney problems because of a breakdown of muscle fibres ('rhabdomyolysis').
- While waiting for the ambulance or other medical help, put the person on their left side (the recovery position; see CPR guide, p. 436).

## REDUCING THE HARMS IF A CLIENT CANNOT OR WILL NOT STOP

If the client cannot cut down or stop using ketamine, they should:

- Not mix ketamine with alcohol, benzos, opioids or GHB
- Monitor the amount they are using in a session, and wait until the effects reduce before deciding to take any more. This may reduce the risk of unpleasant effects and overdose.
- Use with someone who is sober or not using ketamine
- Avoid driving after taking ketamine.

## Hallucinogens (magic mushrooms and LSD)

### OVERVIEW

Hallucinogens are drugs that change the way a person perceives and experiences things around them. Hallucinogens affect all the senses, and can make a person see and hear things that are not there (hallucinations), can change the way they experience time, and the way they think about things and experience emotions. ‘Magic mushrooms’ and LSD are the most common hallucinogens in Australia.

People generally do not become dependent on hallucinogens. Some people who use hallucinogens may experience a ‘bad trip’ and become very distressed. Counselling may help people who are having problems with hallucinogen use.

### WHAT DO HALLUCINOGENS LOOK LIKE AND HOW ARE THEY USED?

#### Magic mushrooms

Magic mushrooms contain the hallucinogenic substance ‘psilocybin’. There are more than 12 different types of magic mushroom in Australia. They grow wild, and often appear after heavy rain. While some people pick them wild, they usually are sold as dried mushrooms, and sometimes come as a dried powder or in capsules.

Mushrooms are normally eaten (either on their own or mixed into food) or brewed into a tea. Some people smoke mushrooms, mixing them with cannabis or tobacco. Magic mushrooms are also known as ‘mushies’ and ‘shrooms’, or by the type of mushroom (e.g. gold tops, blue meanies).

#### LSD

LSD is a man-made hallucinogen that usually comes as small squares of blotting paper that have been soaked in LSD. The small squares usually have a picture printed on them (e.g. a strawberry or a yin yang symbol). LSD can also come as a liquid, a powder (white, if pure), capsules or tablets.

LSD is usually swallowed, but some people may snort or inject. LSD is often known by the street names acid, trips or microdots.

### How common is hallucinogen use?

Around 1 in 70 Australians have used hallucinogens in the last year. Use is most common in people aged 20 to 29 years.

## EFFECTS ON THE BODY

People typically use hallucinogens for their mind-altering ('psychedelic') effects. These effects include:

- Seeing or hearing things that are not there (hallucinations)
- Distorted sense of time and space
- Experiencing the body and emotions in a different way
- Spiritual experiences (e.g. having new insights about the world and existence).

Other effects include:

- Strong sense of happiness (euphoria)
- Relaxed and sense of wellbeing
- Poor coordination
- Dilated pupils
- Increased body temperature and sweating
- Faster breathing
- Increased heart rate and blood pressure
- Dizziness.

The effects of LSD usually come on in the first half hour but can take up to two hours. The effects are strongest in the first three to eight hours, while reduced effects can be felt for up to 12 hours afterwards.

The effects of hallucinogens can vary greatly in different people. Even if the same person takes the same dose every time they use hallucinogens, the effects can be very different, especially the psychological effects.

Other drugs or alcohol used at the same time can change the way the drugs affect the person and can increase the risk of harm.

## HOW TO RECOGNISE HARMS FROM HALLUCINOGEN USE

### Bad trips

People who take hallucinogens may sometimes experience what is known as a 'bad trip'. A bad trip normally includes:

- Scary or unpleasant hallucinations
- Anxiety
- Panic
- Paranoia.

Someone who is intoxicated with hallucinogens or is having a bad trip may do things they normally would not do that might lead to accidents and injury (e.g. jumping out of a window, running across a road without looking).

Negative effects may be more likely to happen if hallucinogens are combined with alcohol or other drugs.

### Injecting

Injecting LSD can be frightening for users because the hallucinogenic effects come on so fast.

### Mushroom poisoning

Magic mushrooms in the wild often look the same as poisonous mushrooms. Accidentally taking a poisonous mushroom can make you very sick and cause kidney failure, permanent liver damage and in some cases death.

### Comedown

Sometimes people experience a bad comedown after taking hallucinogens. This can last for several days, and may include:

- Low mood
- Anxiety
- Panic
- Psychosis.

## Flashbacks

Flashbacks are when people re-experience parts of their hallucinogen experience, without having taken the drug. They are usually visual (e.g. changed perception, hallucinations) and usually last from a few seconds to a few minutes but may last longer. Flashbacks can happen days, weeks, or even years after the drug was taken. Some flashbacks can make the person very anxious while other flashbacks may be enjoyable. Drugs like cannabis may bring on a flashback. Being stressed, tired or anxious may also increase the chance of a flashback.

## Death

There have been very few deaths where hallucinogens overdose has been found to be the cause. Deaths normally occur because other drugs are used with hallucinogens, or because of suicide or accidents that happen when the user is intoxicated.

## CAN PEOPLE BECOME DEPENDENT ON HALLUCINOGENS?

There is no physical dependence or withdrawal syndrome associated with magic mushrooms or LSD. However, regular use can lead to a short-term tolerance, where larger doses are needed to feel the effects.

Some people may become psychologically dependent, and find it difficult not to use hallucinogens in some situations, but this is not common.

## HOW TO ASSESS A CLIENT WHO USES HALLUCINOGENS

People who are experiencing a bad trip may sometimes attend a hospital emergency department. They may be very distressed and anxious, confused and disoriented. Some people may present with acute psychosis, where they may experience very unpleasant hallucinations, severe paranoia, and a loss of reality ('disassociation'). You can ask which hallucinogens they use, how often they use, what kind of situations they use in, and any problems that they have had with using.

## HOW TO HELP A CLIENT WHO USES HALLUCINOGENS

Standard brief intervention and counselling approaches can be used.

People who have taken hallucinogens and are very distressed may be given benzos (e.g. diazepam) to relieve these symptoms. Anti-psychotic medicines are sometimes given to people who are very agitated.

### Clients having a bad trip

If your client has taken hallucinogens and is very distressed, it is important to make sure that the environment around them is calm and safe. You can speak calmly and reassure them that everything will be okay. Try not to leave clients in this situation on their own.

You may also need to call an ambulance if they are very distressed, showing signs of acute psychosis, or are at risk of putting themselves or others in danger.

## REDUCING THE HARMS IF A CLIENT CANNOT OR WILL NOT STOP

To reduce the harms from hallucinogen use, you can offer your client the following advice:

- Do not use hallucinogens on your own. Always use with people you trust, and preferably with someone who is not using hallucinogens at the same time as you.
- Do not mix hallucinogens with alcohol or other drugs.
- Try not to use hallucinogens when you are unhappy or going through a difficult time. Using hallucinogens at such times can increase negative feelings.
- People who have underlying mental health problems or a family history of mental health problems are best to avoid using hallucinogens.
- Driving after taking hallucinogens is not safe as the senses are not operating as they normally do.

## Other sedatives

### BARBITURATES

Barbiturates are depressant drugs that cause people to become sleepy and relaxed (sedated). They are misused for these effects, and ongoing use can lead to dependence and withdrawal. Overdose is common and can lead to death.

### 'Z DRUGS'

'Z drugs' (e.g. 'Stilnox' or zolpidem, zopiclone) are sedative drugs that cause people to become sleepy and relaxed. They can also cause strange behaviour, confusion, sleep driving, sleep walking and for people to be more forward than they usually would in a sexual way (disinhibited). When these drugs first came out, people thought they were not addictive, but alcohol and drug treatment units all over the world report seeing clients who are addicted. Treatment of dependence is usually for a doctor to swap the client onto diazepam (e.g. Valium) instead. This is handed daily to the client and then they are slowly weaned off.

## Betel nut ('areca nut')

### WHAT IS BETEL NUT AND HOW IS IT USED?

Betel nut (or areca nut) is the seed from the fruit of a type of palm. The nut is usually sliced into thin pieces and wrapped in a betel leaf with slaked lime (a white powder) and flavourings. This mix is known as 'betel quid', and it is chewed. In some places, tobacco is added to the mix.

#### How common is use?

Betel nut is commonly used in Papua New Guinea, Indonesia, India and other parts of Asia. It is not known how common betel nut use is in Aboriginal Australians. It is more commonly used in Torres Strait Islander people because of their closeness to Papua New Guinea. In Papua New Guinea, around 4 in 5 people who live on the coast chew betel nut.

### EFFECTS ON THE BODY

People chew betel nut for its stimulant effects. Common effects include:

- Feeling relaxed
- Feeling of happiness and wellbeing (mild euphoria)
- Better concentration
- Increased satisfaction after eating.

Other effects include raised skin temperature, faster pulse, and sweating. The effects normally start within a few minutes and last for a few hours.

### **WHAT ARE THE HARMS OF BETEL NUT USE?**

- Regular use of betel nut stains the mouth, teeth, and gums a deep red colour. Long-term use can lead to mouth (e.g. tongue, lips, inside mouth), teeth, and gum damage. There is an increased chance of getting mouth cancer.
- Chewing betel nut with tobacco can lead to mouth and throat cancer (pharynx and oesophagus).
- High doses can cause an upset stomach (nausea), vomiting, diarrhoea, and dizziness.
- Pregnant women should avoid using betel nut as it may harm the unborn baby.

### **DOES BETEL NUT USE LEAD TO DEPENDENCE AND WITHDRAWAL?**

Regular, ongoing use can lead to tolerance (needing more drug to get the desired effect) and dependence.

Withdrawal symptoms are often reported, but are usually mild. They include:

- Craving
- Anxiety
- Irritability
- Dry mouth
- Low mood
- Difficulty concentrating
- Sleep problems.

### **HOW TO HELP A CLIENT WHO WANTS TO STOP**

There are no specific treatments for people who would like to stop using betel nut. Counselling (e.g. motivational interviewing, cognitive behavioural therapy) may help some clients to reduce or stop using.

## Khat

### WHAT IS KHAT AND HOW IS IT USED?

Khat (qat, qad) is a plant whose fresh leaves are chewed for their mild stimulant effect. The active ingredient in khat is cathinone, which is structurally similar to amphetamine. The plant comes from the Middle East and East Africa, where it has been used for centuries. In NSW, Victoria and Tasmania, individuals can obtain a permit to import 5kg per month for personal use. Khat is illegal in the other states and territories.

#### How common is use?

Khat use in Australia is most common among people who have immigrated from north east Africa and the Middle East.

### EFFECTS ON THE BODY

Common effects include:

- Feel more alert, have more energy, feel excited
- Feel happier (mild euphoria)
- More talkative
- Better concentration
- Less appetite.

Other effects include raised body temperature, faster pulse and breathing, and sweating.

## WHAT ARE THE HARMS OF KHAT USE?

Some of the harms from use include:

- Dental problems
- Mouth cancer
- Trouble sleeping
- Constipation
- Existing heart problems can get worse
- Psychosis.

People often smoke more tobacco than they usually would when chewing khat, which can increase the harms from tobacco. Some people use alcohol after using khat to calm themselves down and get to sleep.

Pregnant women should avoid khat as it may harm their unborn baby.

## DOES KHAT USE LEAD TO DEPENDENCE AND WITHDRAWAL?

People who use khat every day may become dependent. Mild withdrawal symptoms may happen after stopping regular use. Symptoms include anxiety, low mood, feeling tired with no energy (fatigue), and sleep problems.

## WHAT TREATMENTS ARE AVAILABLE?

There are no specific treatments for people who would like to stop using khat. Counseling may help some clients reduce or stop using. Khat users experiencing psychosis may be given anti-psychotic medicines. Khat users experiencing withdrawal symptoms like anxiety and sleep problems may be given benzos (e.g. diazepam).

## **Steroids (i.e. anabolic steroids)**

Anabolic steroids work in the same way as the male hormone 'testosterone'. They are often used illegally by bodybuilders and athletes to gain muscle and improve performance. They are sold as tablets or a liquid, which is injected into muscle.

Injecting increases the risk of becoming infected with a blood-borne virus (e.g. hep C, hep B, HIV) if injecting equipment is shared (see Safer injecting, p. 296). There is also an increased risk of liver damage, liver cancer and heart problems.

Psychological effects of steroid use include aggression ('roid rage') and depression. People who regularly use steroids may become psychologically dependent and may get distressed when they stop using.

There are no standard treatments for anabolic steroid misuse, although medicines may be used to relieve some symptoms. Counselling may help clients reduce or stop using.

### **FURTHER READING**

NSW Health (1999). *Anabolic steroids: Let's get the facts right*. Available from: [www.druginfo.nsw.gov.au/\\_\\_data/page/1228/anabolic-steroids\\_handout.pdf](http://www.druginfo.nsw.gov.au/__data/page/1228/anabolic-steroids_handout.pdf).