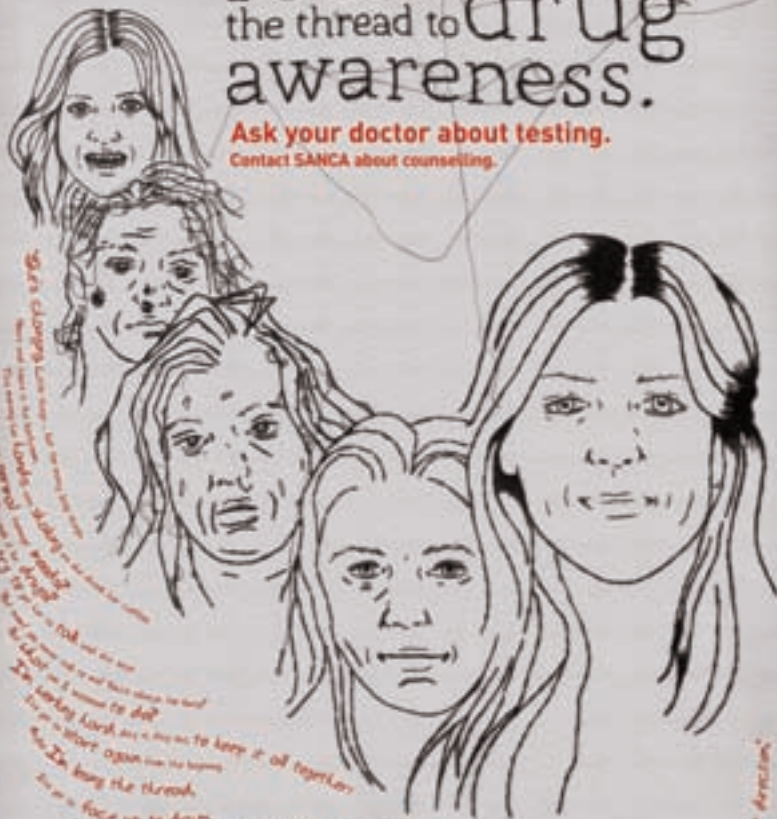


Follow the thread to drug awareness.

Ask your doctor about testing.
Contact SANCA about counseling.



She's changing her ways, but she still has the same old habits.
The only one who's changed is the way she looks.
She's got more than one life.
She's got more than one heart.

It's not just the drugs that are the problem,
it's the way they make you feel.
The way they make you feel like you're
falling apart, and it's hard to keep it all together.
It's the way they make you feel like you're
losing control, and it's hard to keep it all together.
It's the way they make you feel like you're
falling apart, and it's hard to keep it all together.
It's the way they make you feel like you're
losing control, and it's hard to keep it all together.

In facing the drugs,
I don't know where we're going yet, it's too early to tell, but I think we're heading in the right direction.

The most commonly used drugs in South Africa

This leaflet is written for parents and custodians to help them understand the facts regarding drug abuse. What follows is a guide to the most commonly used drugs in South Africa.

Drugs can be divided into three main groups: stimulants (uppers - stimulates heart rate, breathing and blood pressure), depressants (downers - depressed breathing heart rate and blood pressure) and hallucinogens (which create altered sensory perceptions). Users build tolerance towards the drug and will need more to obtain the same effect.

Stimulants (uppers)

Cocaine and crack cocaine

Street names for cocaine: Blow, coke, snow

Street names for crack: Rocks, zoom, gafief

Description: A white powder, small chips, chunks or cream coloured rocks

Cocaine is used in two forms: cocaine powder, which is usually sniffed (snorted) or injected, and crack, which is smoked as "rocks". Cocaine and crack are both psychologically and physically addictive.

Effects: Cocaine interferes with the neurotransmitters dopamine and serotonin and these accumulate to trigger the distinctive cocaine high. Other effects are feelings of superiority, over-confidence, increased libido and dilated pupils. The rush (effect) of snorting cocaine is felt within minutes, whereas the effect of smoking crack is felt within seconds. Users describe smoking crack as more intense than the high produced by cocaine. A crack high lasts between 10 and 20 minutes, whereas a cocaine high lasts for a few hours.

Long-term effects: After the high, the neurotransmitters in the brain are depleted, leaving the individual feeling anxious and depressed. Heavy use can result in a perforated septum from snorting cocaine powder. Cocaine and crack can cause heart attacks, strokes and seizures as a result of elevated blood pressure and increased heart rate. In some cases cocaine is known to trigger

the development of Parkinson's disease. Overdosing can result in panic attacks, cardiac arrest and death.

Crystal methamphetamine and Methcathinone (Cat)

Street names: Tik, tik-tik, straws, globes, ice, crystal meth, speed

Description: Crystal meth is found in many forms, from an odourless powder to large crystals. Cat is found in the form of a white powder.

In South Africa Tik is usually sold as "straws" and is smoked in a light bulb or glass pipe. It can also be snorted or injected, whereas Cat is snorted. Both drugs belong to the family of amphetamines that includes Ecstasy.

Effects: Exhilaration and euphoria that can last from four to 18 hours or even longer. It causes an increased libido and energy and feelings of increased self-confidence and sociability. It decreases the individual's appetite and causes insomnia, Effects also include irritability, aggression and excessive feelings of power.

Long-term effects: The effects can be devastating and addiction can develop in just a few weeks. Effects range from depression, anxiety, insomnia, paranoia, aggression, violence, severe depression and suicide. Chronic and long-term use is linked to heart disease, psychotic symptoms and severe brain damage. It is also linked to out-of-control rages and irrational violence.

Depressants (downers)

Alcohol

Street names: Dop, booze, drink, juice, African or home brew, imbamba

Description: Alcohol is the most popular substance of abuse in South Africa. Binge drinking is an unrecognised form of alcoholism, but is equally dangerous as daily drinking. Underage binge drinking is often not recognised as an addiction, as adults often believe that it is just a phase.

Effects: Initially alcohol affects individuals differently but alcohol consumption is usually characterised by an initial burst of energy, followed by uncoordinated movements, altered speech, lethargy, drowsiness and depression. It affects judgment and cognitive processes and is sometimes associated with aggression, violence and emotional outbursts. Alcohol abuse can lead to coma or death. Withdrawal from alcohol can be medically life threatening.

Long-term effects: Liver diseases, tremors, brain damage, addiction to other substances, seizures, related social problems, depression and cancer.

Cannabis

Street names: Dagga, dope, zol, weed, dube, ganja

Description: Green substance that looks like dry leaves, pips and stalks. Cannabis is smoked as a cigarette or in a hubbly bubbly. Also sometimes smoked with heroin

(nyope) or with Mandrax (white pipe). It is the most widely abused drug among teenagers. The drug paraphernalia includes cigarette papers, pips and stalks, bunched-up envelopes, hand-rolled cigarettes, sweet, pungent odour and items associated with the Rastafari movement.

Effects: Users describe being relaxed, episodes of giggling and a sense of being without a care in the world, whereas some users are overcome with feelings of lethargy. Some may experience sensory hallucinations. Some may experience dry mouth and increased hunger. Users tend to have glassy, red or bloodshot eyes.

Long-term effects: Mood swings, persistent lack of motivation and low drive. Users have yellow-brown stains on their fingers. Heavy users suffer cancer of the respiratory system. Some might develop psychosis, which if left untreated can progress to schizophrenia. Long-term users become addicted and develop a tolerance to cannabis, where they yearn for a more intense high.

Heroin

Street names: H, Thai, Thai white, nyope (dagga and heroin), wonga (dagga, heroin and ARV medication)

Description: Heroin is a white powder that is snorted, smoked or injected. Drug paraphernalia includes burnt spoons, tin foil, syringes, needles, pieces of plastic cut into squares and knotted, dagga, hand-rolled cigarettes and crushed tablets. Heroin is seldom sold in its pure form and it is usually diluted or cut with any other powdery substance. Users have needle marks on their bodies, usually the arms or hands.

Effects: Heroin's effects are felt almost immediately if it is injected. The high includes an intense feeling of relaxation, euphoria and lowered anxiety, followed by a long period of drowsiness and then withdrawal symptoms. Heroin mimics the body's own feel-good sensations, but the effects are usually short-lived and within about six hours the user experiences nausea, vomiting and flu-like chills. Other effects are weight-loss, poor appetite and ulcers. The withdrawal symptoms are severe, including muscle cramps, aching joints and bones, tremors, diarrhoea and insomnia. Users are often involved in petty crime.

Long-term effects: Liver disease and damage. Tolerance makes addicts increase the quantity needed to prevent withdrawal symptoms and to get high. Heroin is severely physically addictive and it results in decreased immunity, malnutrition, insomnia, depression, general organ damage and suicide risk. The addict uses merely to prevent withdrawal symptoms. Heroin addiction is difficult to treat as medical intervention is required.

Methaqualone (Mandrax)

Street names: Buttons, white pipe, drugs, pille

Description: The crushed tablets are smoked with cannabis in a broken bottle neck used as a pipe. It is used as a secondary drug. The pipe is usually shared and smoked in groups.

Effect: Intense feelings of relaxation and euphoria, change in complexion. Users describe intense cravings for more of the drug. Users suffer nightmares, mouth sores, slowed breathing leading to respiratory failure, coma or death.

Long-term effects: Depression, weight loss, decreased immunity, and insomnia.

Inhalants

Street names: Glue, benzene, petrol, aerosol, for example, deodorant

Description: Any substance with a pungent smell can be used to obtain a high, which makes the user feel light-headed. The high is short lived. The fumes evaporate rapidly and inhalant goes undetected. Abuse of inhalants is very common among teenagers and their use can go unnoticed for some time.

Effect: Light headedness, hallucinations, headache and disorientation. Users develop a persistent cough, they smell of the inhalant and can have runny noses

Long-term effects: Long-term users can develop psychosis, lung diseases, respiratory problems, cough up blood, they have frequent respiratory tract infections.

Prescription and over-the-counter (OTC) medication

Street names: Drugs usually go by their commercial names.

Description: In general medication containing benzodiazepines (tranquilisers), certain sleeping tablets, ephedrine, alcohol and codeine are abused.

Effects: Medication containing alcohol, benzodiazepines and codeine have a depressant effect, i.e. blood pressure, breathing and heart rate are lowered. People using this

medication tend to become drowsy, have slowed and uncoordinated movements when intoxicated. When they are not using, they may suffer from anxiety and depression. Medication containing ephedrine serves as a stimulant (increased heart rate, blood pressure and breathing). Ephedrine can cause hyperactivity, anxiety, palpitations, feeling flushed and high-energy levels for long periods.

Long-term effects: Addiction, poor motivation, health deterioration, malnutrition, insomnia, depression and anxiety.

Where to go for help

SANCA Horizon Boksburg 011 917-5015-8

SANCA Castle Carey Pretoria 012 542-1121

SANCA Phoenix House Johannesburg 011 673-0400

SANCA Durban 031 202-2274

Lancet Laboratories offers drugs-of-abuse testing

Testing should be done with the assistance of a specialised service provider. Testing should be conducted within context of intervention and counselling.

The content has been reviewed by the South African National Council on Alcoholism and Drug Dependence.

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SANCA Horizon Alcohol and Drug Centre

The stages of drug abuse



"She's changing. Little things ... but too many little things.

Hours and hours in the bathroom. This morning her hands were shaking as she drank her coffee.

Is it just normal teenage moods? Or could it be drugs?

Experimentation

Substance use usually starts with occasional use and is voluntary. The perception is that it is fun, everybody does it, and it is done out of curiosity. Substances are used to feel good and there are few negative consequences. Substances are used occasionally with friends. With teenagers, casual experimentation is not easy to spot.

I try to get her to talk and she says

"But mom! you never talk to me! You're always too busy!"

Social use

The social user becomes comfortable with substance abuse and experiments with effects and frequency of use. Using is still enjoyable, increased use becomes more frequent with episodes of severe intoxication. Drinkers are still able to drink responsibly. Some users start to use their drug of choice or combination of substances as often as every weekend. Tolerance to the substance increases and more is used to try to achieve the initial effect. Social users start to plan ahead to access the drug. The consequences of misuse usually start to show with mood swings, deterioration in school or work performance, decreased motivation in activities otherwise enjoyed, negative behaviour, a change in dress and friends. At this stage, psychological addiction develops.





But what am I supposed to do? I'm working hard, day in, day out, to keep it all together!
Maybe I'm losing the thread. I've got to start again from the beginning. I've got to face up to drugs.

Regular use

Behaviour changes and mood swings become more severe. Tolerance continues to increase. Internal conflict and conflict with others becomes more frequent. Individuals become involved in petty crimes, using more frequently and alone. Users begin to crave for the substance and make clear plans to use. Their choice of friends changes completely. Frequent disciplinary issues start to emerge at school or work as a result of the user's absenteeism. Psychological addiction becomes stronger and physical addiction develops. Users borrow money or sell what they deem as insignificant possessions to buy the substance.

Where do I go to from here? Maybe the doctor. There are tests aren't there?

Dependence and addiction

At this stage the user has developed total physical addiction. They use their drug of choice to prevent withdrawal symptoms or emotional discomfort. Using is seldom enjoyable and they often become more involved in more serious crimes. They struggle to keep school or work performance up and often drop out of school. Addicted users use daily and will substitute with another drug if they fail to access their drug of choice. Addicts suffer severe physical deterioration, weight loss and their immunity is severely compromised. Users often suffer depression, feel suicidal and risk overdosing. They also suffer memory loss, become aggressive and violent, show emotional outbursts, are constantly without money and will sell any possessions to obtain their drug of choice.





Treatment and recovery

Drug addiction is a complex and chronic disease and treatment is not simple. There is no single treatment that works for everyone. An addict has to be motivated to stop using drugs and need to be willing to change to do so.

Effective treatment does not treat the addiction in isolation. It has to incorporate other elements of the individual's life, for example, relationships, families, health, spirituality, life skills, self-image, changes and their identity development. Treatment has to enable the addict to physically stop taking substances, support the addict on a medical level and guide the addict to a change in thoughts, attitude, behaviour and lifestyle. It should support maintenance of a clean and healthy lifestyle and efficient functioning in the family (family counselling), at school or work, and in society. It should motivate continuity with regards to long-term care, for example, with after care, as addiction is a life-long disease that has to be managed daily.

Drug abuse results in permanent changes to brain chemistry and most addicts need long-term or repeated episodes of treatment and therapy by a specialised person or institution to achieve sustained abstinence and recovery. Not every addict needs to be admitted as an in-patient to a rehabilitation facility. They can recover at home with therapeutic and family support. It is essential to build a sober support network to assist with recovery.

Relapsing is part of the disease and refers to regression back to addiction-type behaviour. It doesn't have to mean complete regression to the previous behaviour. Relapse has to be dealt with as soon as it is identified. Relapse does not mean failure but addicts need to learn to avoid or manage the triggers to using. The good news is that addiction is treatable in all its stages. A recovering addict can live a full productive life, but should always be aware of the risk of relapse.

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SANCA Horizon Alcohol and Drug Centre

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Follow the thread to drug awareness.

Ask your doctor about testing.

Contact SANCA about counselling.

Contact details

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Lancet Corner

Ground floor

Cnr Menton and Stanley roads

Richmond, Johannesburg

(011) 358 0800

24-hour emergency service

www.lancetcares.co.za



South African National Council on
Alcoholism and Drug Dependence