

N E W

P S Y C H O A C T I V E

D R U G S



Service availability

Drop-in: Monday – Wednesday: 1pm – 5pm, Thursday: 3pm – 7pm, Friday – Saturday: 1pm – 5pm, Sunday: Closed

Telephone information and support: Monday – Friday: 10am – 5pm

Online information and chatroom support: www.mycrew.org.uk
(check schedule online)

crew mind altering

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T: 0131 220 3404

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W (main): www.crew2000.org.uk

W (training): www.mindaltering.co.uk

W (support): www.mycrew.org.uk

Facebook | **Crew: Mind Altering**

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This booklet has been designed to expand worker knowledge and confidence in the area of NPS. It is most useful when discussed as part of Crew's NPS training.

Crew was established in 1992, in response to the rapid expansion of recreational drug use. We provide up-to-date information on the drugs that people are taking so they can make informed decisions about their own health. This is achieved using a stepped care approach and through collaboration with volunteers, service users and professionals.

Crew neither condemns nor condones drug use, but we believe there are ways to reduce harm to health.

As a national agency, **Crew is at the forefront of emerging drug trends** and we engage at all levels including service development, practice and policy. Our services include:

- **Support line:** non-judgmental drug and sexual health information and support.
- **Drop-in:** drug and sexual health information, condoms (NHS c:card service) and DJ workshops.
- **Outreach services:** we provide welfare at large events, such as clubs and festivals to educate revellers on partying safely. We also specialise in crisis intervention.
- **Drug counselling and recovery development work:** for those using psychostimulants (over 16) we offer one-to-one counselling sessions and services supporting people's recovery journey, including SMART recovery groups and acupuncture.
- **Volunteer development:** we have over 50 volunteers from all walks of life that keep the organisation running. If you would like to join us please contact Crew for an application pack.
- **Training:** Crew delivers both free training through Alcohol and Drug Partnerships and paid bespoke training to meet your needs.



CREW LEGAL HIGHS

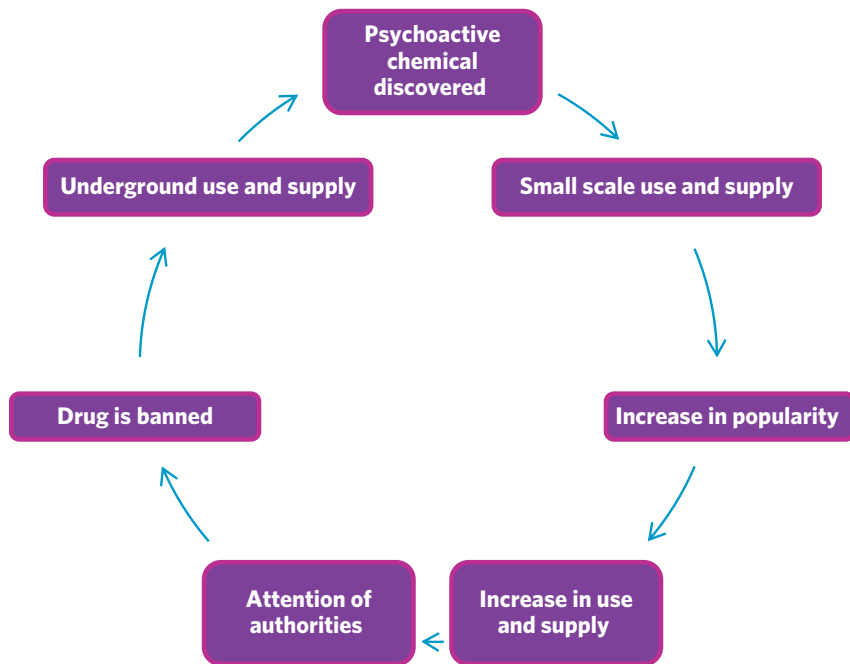
New psychoactive substances (NPS) are chemicals that can have mood enhancing properties but are not always controlled by drug laws. They are commonly known as 'legal highs' which can be misleading as it might imply that these substances are safe and legal which is not always true. They can be designed to mimic the effects of illegal drugs

such as cannabis, LSD and cocaine; the appearance will vary depending on the drug but most NPS are chemicals produced in a lab and come in powder, pill or herbal form.

They can be known as **new psychoactive substances, new drugs, legal highs, legal, herbal extracts, herbal highs, plant food, bath salts, novelty collector's items and research chemicals.**

A cycle of new drugs

Most drugs follow a cycle of supply and prohibition.



When one drug is banned another one can take its place and we are left knowing even less about the short and long term effects of the new drug. This can increase harm and makes treatment very difficult.

Why do people take NPS?

[Value for money - Some new drugs are cheaper than the illegal equivalent [average prices 22nd July 2014].

Synthetic cannabis (1 g)
£6.00-£8.00



Cannabis (1 g of grass)
£10.00-£13.00

Research stimulants (1 g)



£10.00-£20.00

Amphetamines (1 g)

£10.00-£30.00

Cocaine (1 g)

£40.00-£100.00

MDMA powder (1 g)

£30.00-£50.00

'Party pills' (1 pill or capsule)

£5.00-£10.00



Ecstasy (1 pill)

£5.00-£15.00

[Less chance of detection - People may think new drugs are less likely to be detected by drug dogs and also drug screening tests (e.g. urine analysis). This does not mean they **cannot** be detected.

[Availability - Packets are branded in colourful and exciting ways and vendors use loyalty schemes and discounted prices to encourage sales. Drugs can be purchased online and in shops, which are generally known as 'head shops' that also sell drug paraphernalia. Additionally, in Scotland new psychoactive substances are available from some chip shops, hardware stores, newsagents and tattoo parlours. There are very few restrictions on the sale of new drugs meaning products are unregulated and some establishments may sell NPS to minors. Like traditional drugs, NPS can often be purchased from street dealers after they become illegal.

[Quality - Reduced quality and purity of traditional drugs may have fuelled the expansion of the NPS market. People may think new drugs are of better quality, partly as they are less likely to be 'cut'; this is not always true as manufacturers (often laboratories in Europe, China or India) may not use appropriate quality and regulatory methods.

Prefer effect - People take drugs for a number of reasons and they usually have a preferred effect in mind. NPS can cause a range of different effects including euphoria, relaxation, increased confidence, empathy (connection with others) and altered perceptions.

Think they are safer - A common misconception is that these drugs are safer because they are legal. This may not be true and these drugs are not legal because they are safe, they are legal because of a legal loophole.

Legal status - Many psychoactive drugs were created (or marketed, if already existed) to bypass drug laws either by modifying the molecular structures of existing drugs or by developing new drugs with similar effects to illegal ones. These products are not classified by existing legislation and vendors are able to avoid existing laws by labelling these drugs with terms such as 'not for human consumption'. However this can cause greater harm as it prevents the shop employees from giving out information regarding the product. By law they cannot disclose what the effects may be or even what could be considered as a dose, although many do. The following legislation relates to the use of drugs in the UK:

Misuse of Drugs Act (1971)

This act was designed to make new provisions regarding dangerous or harmful drugs and includes laws surrounding licensing, production, supply and possession. Some new drugs are not controlled as their chemical structure is not covered by this legislation.

Temporary Class Drug Orders

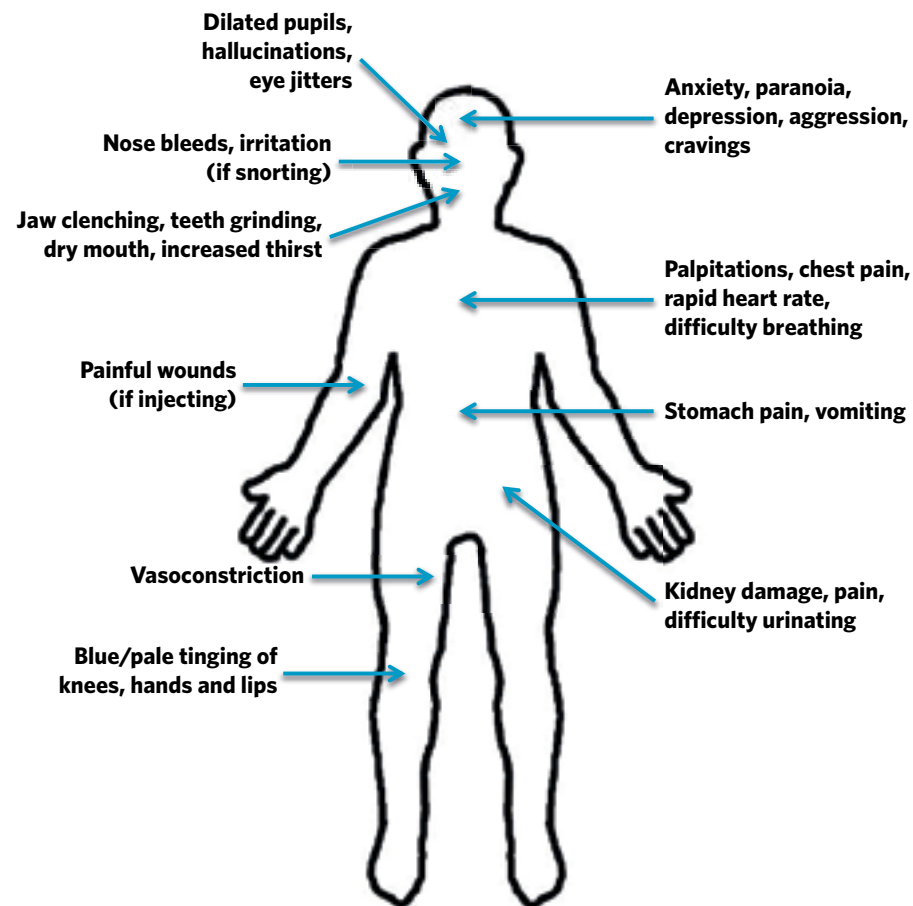
In 2011, Temporary Class Drug Orders were introduced for new drugs that cause concern. They can be implemented quickly and can last for a period of up to 12 months while a decision is made whether to permanently control them. Possession for personal use during this time is not illegal but anyone caught importing, producing or supplying will be subject to penalties of up to 14 years imprisonment and a fine.

Other relevant legislation

There are no bespoke laws for NPS but there are many laws that can potentially be used to stem the supply of new drugs such as:

- Intoxicating Substances (Supply) Act 1985
- Consumer Protection Legislation
- General Product Safety Regulations 2005

Unwanted effects



Crew's service users have reported that both synthetic cannabinoids and stimulant NPS have caused episodes of drug induced psychosis.

Synthetic cannabinoids (page 16) can be very strong and Crew's service users have reported feeling detached from reality and other negative effects on their mental health.

Stimulant NPS can increase energy and confidence. They also decrease appetite and may lead to lack of sleep, weight loss and bad skin. Repeated high doses of stimulants, combined with little rest, increase the chance of experiencing stimulant psychosis which is characterised by hallucinations, delusions and thought disorders.



Don't forget the comedown!



A comedown is the process your body goes through when recovering from the effects of drugs, like a hangover is to alcohol. If you or anyone you know has that sinking feeling after a night out the following information may help.

1 - Starting to comedown

Try to resist taking more drugs

If you are worried or anxious speak to friends you feel safe with

If dehydrated, sip water or an isotonic drink

2 - Trying to get to sleep

You may be irritable and bad tempered so do something that will relax you

Take a shower and drink some hot sweet decaffeinated tea or herbal tea

3 - The next day

If you feel low, chill out with a friend

Eat healthy balanced meals; if you're not hungry try to eat fruit - especially bananas

Take multi-vitamins

4 - The next week

Your emotions could be up and down

Try not to compensate by redosing

Try ear acupuncture at Crew!

What's in the packet?

Most branded legal high packets list the main ingredients using the full chemical name. The table below lists the most common chemicals as well as the shortened chemical name for simplicity.

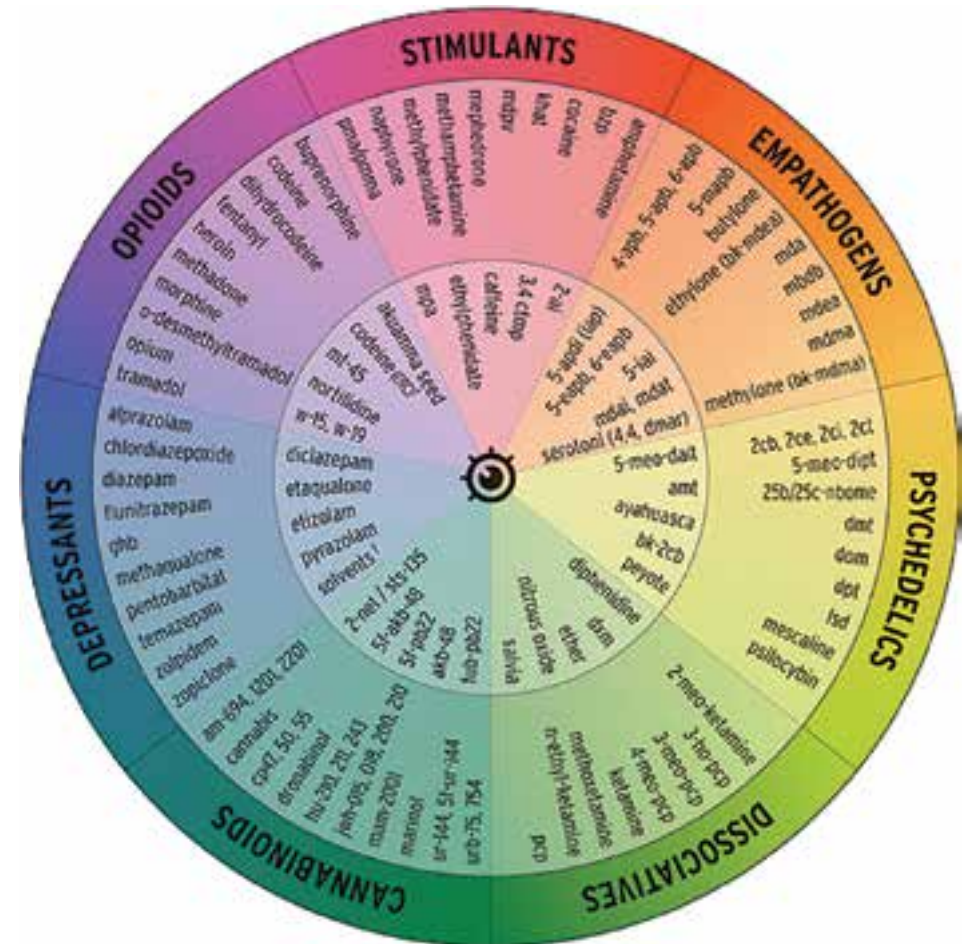
Full chemical name	Shortened chemical name
Cutting agents	
2-(diethylamino)-N-(2,6-dimethylphenyl)acetamide	Lidocaine
Ethyl 4-aminobenzoate	Benzocaine
Calcium hydrogen phosphate dihydrate	Dicalcium Phosphate
Magnesium octadecanoate	Magnesium Stearate
Microcrystalline cellulose	Derived from plant material
Stimulants	
ethyl 2-phenyl-2-piperidin-2-ylacetate	Ethylphenidate
1-(thiophen-2-yl)-2-methylaminopropane	Methiopropamine (MPA)
Methyl(2R)-2-(3,4-dichlorophenyl)-2-[(2R)-piperidin-2-yl]acetate	3,4-Dichloromethylphenidate (3,4 ctmp)
2,3-dihydro-1H-inden-2-amine	2-Aminoindane (2-AI)
Empathogens	
1-(Benzofuran-5-yl)-N-ethylpropan-2-amine	5-eAPB
1-(Benzofuran-6-yl)-N-ethylpropan-2-amine	6-eAPB
5-iodo-2,3-dihydro-1H-inden-2-amine	5-Iodo-2-aminoindane (5-IAI)
6,7-dihydro-5H-cyclopenta[f][1,3]benzodioxol-6-amine	5,6-Methylenedioxy-2-aminoindane (MDAI)
5,6,7,8-tetrahydrobenzo[f][1,3]benzodioxol-7-amine	6,7-Methylenedioxy-2-aminotetralin (MDAT)
N-methyl-6,7-dihydro-5H-cyclopenta[f][1,3]benzodioxol-6-amine	5,6-Methylenedioxy-N-methyl-2-aminoindane (MDMAI)
Psychedelics	
5-(2-Aminopropyl)indole	5-IT
2-(1H-indol-3-yl)-1-methyl-ethylamine	Alpha-Methyltryptamine (AMT)
N,N-diallyl-5-methoxytryptamine	5-MeO-DALT

Dissociatives	
(4)-1-[1-(2-methoxyphenyl)-2-phenylethyl] piperidine	Methoxphenidine (MXP)
<i>Salvia divinorum</i>	Salvia
(4bS,8aR,9S)-3-Methoxy-11-methyl-6,7,8,8a,9,10-hexahydro-5H-9,4b-(epiminoethano)phenanthrene	Dextromethorphan (DXM)
(4)-1-(1,2-Diphenylethyl)piperidine	Diphenidine
Cannabinoids	
N-(Adamantan-1-yl)-1-(5-fluoropentyl)-1H-indole-3-carboxamide	5F-AKB48
1-pentyl-N-tricyclo[3.3.1.1 ^{3,7}]dec-1-yl-1H-indazole-3-carboxamide	AKB48
quinolin-8-yl 1-(4-fluorobenzyl)-1H-indole-3-carboxylate	FUB-PB22
1-(5-Fluoropentyl)-1H-indole-3-carboxylic acid 8-quinolinyl ester	5F-PB22
Depressants	
7-(2-Chlorophenyl)-4-ethyl-13-methyl-3-thia-1,8,11,12-tetraazatricyclo[8.3.0.0] trideca-2(6),4,7,10,12-pentaene	Etizolam
7-chloro-5-(2-chlorophenyl)-1-methyl-1,3-dihydro-2H-1,4-benzodiazepin-2-one	Diclozepam
3-(2-ethylphenyl)-2-methyl-quinazolin-4-one	Etaqualone
8-bromo-1-methyl-6-(pyridin-2-yl)-4H-[1,2,4]triazolo[4,3-a][1,4]benzodiazepine	Pyrazolam
Opioids	
3,4-dichloro-N-[(1-dimethylamino)cyclohexylmethyl]benzamide	AH-7921
1-Phenylethylpiperidylidene-2-(4-chlorophenyl)sulfonamide	W15

Once we know the shortened chemical name we can cross reference this with the Drugs Wheel to categorise the drug based on effect. Workers are then encouraged to treat service users based on category of drug rather than specific substance. This is to simplify treatment, increase worker confidence and also because many clients are poly drug users.

The Drugs Wheel

A guide to some commonly-used recreational psychoactive substances in the UK.
[Version 1.2.0, 06.07.14.]



Outer ring: controlled or regulated in the UK.

Inner Ring: legal in the UK.

† Regulations apply to the sale of these substances.



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Designed in collaboration with DrugWatch, an internet association of charities, organisations and individuals who share an interest in establishing a robust early warning system in the UK for all types of drugs.



Drug information



MY CREW is a project funded by the Scottish Government to offer our information, advice and support online. This service has been developed to provide accessible information about drugs, an assessment tool to check out use of any substance and a chat room with support by trained volunteers.

The list below is an overview of the most commonly used new drugs seen at Crew. The list is not exhaustive and information can only be considered current on date of issue. For up to date information or more detail on NPS brand names visit www.mycrew.org.uk

[5-MeO-DALT]

5-MeO-DALT (five-mee-o-dalt) is a psychedelic (trippy) drug. Blast is an example of a branded packet claiming to contain 5-MeO-DALT. People taking it can experience a rush, greater appreciation of music and visual hallucinations as well as nausea and vomiting, aching muscles, sleeplessness and anxiety.

It comes in a white or tan/brown fluffy powder and effects normally last 2-4 hours. It is often smoked, swallowed in a cigarette paper (bombed) or mixed with juice as it is reported to have a very unpleasant taste. An average dose for swallowing is around 35 bombs from a gram (this dose should not be taken as a recommendation).

Legal Information: Currently legal in the UK. The legal status of 5-MeO-DALT is under review and it may be placed under a Temporary Class Drug Order in the future.

[AMT]

Alpha-Methyltryptamine (alfa-meth-ill-trip-ta-meen) also known as AMT was originally developed as an antidepressant in the 1960s but resurfaced as a recreational drug in the 1990s. Its popularity has grown in recent years and it has been found in some tablets in Scotland marketed as ecstasy.



AMT is a long lasting (14-24 hours, depending on dose) psychedelic (trippy) and stimulant (upper) drug similar to LSD and MDMA. It can make you feel energetic and it also increases your heart rate and breathing. People taking it can experience a rush, greater appreciation of music and visual hallucinations as well as nausea and vomiting, aching muscles, sleeplessness and anxiety. It comes in an off white, pale pink/orange or bright orange powder and is reported to have a distinctive plastic smell. It is often swallowed (bombed), snorted or smoked. An average dose for swallowing will give around 50 bombs from a gram and for smoking around 160 doses (these doses should not be taken as recommendations). Snorting often causes effects to come on quicker than swallowing. Smoking AMT is reported to produce more stimulant type effects, with faster onset and shorter duration.

Legal Information: Currently legal in the UK. The legal status of AMT is under review and it may be placed under a Temporary Class Drug Order in the future.

[Ethylphenidate]

Ethylphenidate (eth-il-fen-i-date) is found in branded packets such as Burst and Ching. It is one of the most commonly found substances in research chemical powders after appearing on the NPS market in 2011.

Ethylphenidate is a stimulant (upper) drug closely related to methylphenidate (brand name Ritalin). Effects include increased energy and rapid heart rate as well as increased sociability and sex drive. People taking it can experience restlessness, panic attacks, insomnia, pain and an urge to re-dose.

It comes in a white crystalline powder which is usually snorted or swallowed in a cigarette paper (bombed). An average dose for snorting will give around 25 lines from a gram (this dose should not be taken as a recommendation). Snorting can cause damage to the nasal passages and often causes effects to come on quicker than swallowing. Snorting can cause a more intense experience although effects tend to last longer when the drug is swallowed.

Legal Information: Currently legal in the UK. There are currently no plans to place ethylphenidate under a Temporary Class Drug Order.

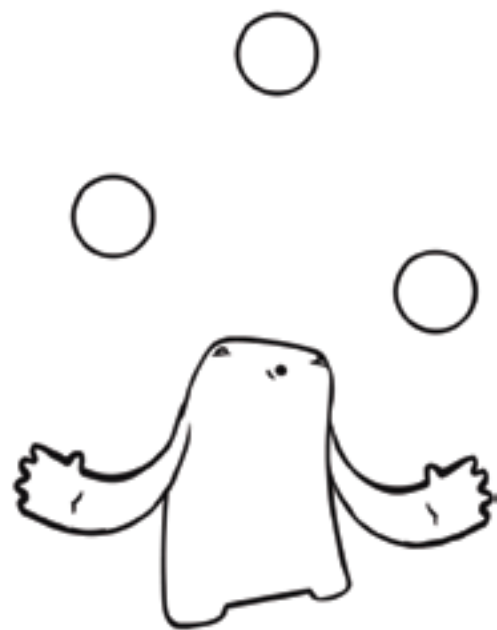


[Etizolam]

Etizolam (et-iz-o-lam) is a very strong benzodiazepine (downer) drug which has a sedative effect and can cause long periods of sleep and drowsiness. It also slows down your heart rate and breathing. People taking it can feel calm and relaxed with reduced feelings of anxiety as well as experiencing short term memory loss, reduced mental alertness and double vision.

It usually comes in 1 mg (blue) or 2 mg (pink) 'pellet like' pills which are usually swallowed or left to dissolve in the mouth and doses as little as 0.5 mg can have the desired effect (this dose should not be taken as a recommendation).

Legal Information: Currently legal in the UK. There are currently no plans to place etizolam under a Temporary Class Drug Order.



[MDAI]

MDAI first became available online in 2009 as a legal alternative to MDMA. 'Sparkle' and 'Sparkle Gold' are examples of branded packaging claiming to contain MDAI. Some users report MDMA-like effects.

MDAI is similar to MDMA but less potent and with less stimulant effects and therefore MDAI is commonly found mixed with stimulant NPS in branded packets. It can make you feel a rush through your body and head, often experienced as a tingling sensation and it also increases your heart rate and blood pressure. People taking it can experience a mild high, relaxation and increased enjoyment of music as well as stomach cramps, short term memory loss and problems sleeping.

It comes in a white or tan/brown powder with a crystalline look, or in capsule form. The powder is often wrapped in cigarette paper and swallowed (bombed), 'dabbed' by finger, or diluted in orange juice which is said to minimise the bad taste. An average dose for swallowing will give around 10 bombs from a gram (this dose should not be taken as a recommendation).

Legal Information: Currently legal in the UK. There are currently no plans to place MDAI under a Temporary Class Drug Order.

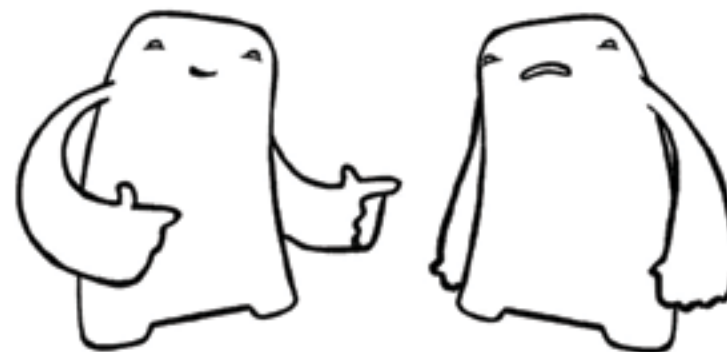
[Mephedrone]

Mephedrone (mef-i-drone) also known as Drone, M-CAT, Magic and Meph, appeared on the market in 2007 and rapidly became the fourth most popular drug in the UK.

Mephedrone is a stimulant (upper) drug similar to MDMA, amphetamine and cocaine which can give you a rush and make you feel high. It also increases your heart rate and breathing. People taking it can experience a feeling of 'coming up', alertness and an intense connection with music as well as cravings to re-dose, intense sweating with an odour and insomnia.

It comes in a fine or crystalline white powder and is usually snorted or swallowed either in a cigarette paper (bombed), in a capsule/pill or diluted in juice. An average dose for snorting will give around 16 lines from a gram and for swallowing around 8 bombs from a gram (these doses should not be taken as recommendations).

Legal Information: Class B drug. Penalties for possession are up to five years in prison and/or an unlimited fine. Supply holds penalties of up to 14 years in prison and/or an unlimited fine.



[MPA (Methiopropamine)]

Methiopropamine (meth-eye-o-prop-a-meem), also known as MPA, is found in many branded products such as China White. It appeared on the NPS market in 2010 and has grown in popularity since.

Methiopropamine is a stimulant (upper) drug which can make you feel alert and more energetic. It also increases your heart rate and breathing. People taking it can experience a mild high, sexual arousal and loss of appetite as well as difficulty urinating (peeing), chest pain, breathing problems and an urge to re-dose.

It comes in a fine white powder which is usually snorted or swallowed in a cigarette paper (bombed). An average dose for snorting will give around 50 lines from a gram and for swallowing around 25 bombs from a gram (these doses should not be taken as recommendations).

Legal Information: Currently legal in the UK. There are currently no plans to place Methiopropamine under a Temporary Class Drug Order.

[Synthetic Cannabinoids]

Synthetic cannabinoids (sin-thet-ic can-a-bin-oids) contain chemicals such as 5F-AKB48 and PB-22. These chemicals target the THC receptors in the brain and are often sprayed onto dried plant material. These are then packaged and sold by brand names such as Clockwork Orange, Voodoo and Psyclone.

Synthetic cannabinoids can make you feel calm and relaxed. People taking them can experience a high, enhanced sensations and a feeling of heaviness as well as nausea, anxiety, paranoia, panic attacks and feeling withdrawn. People have also reported a strong urge to re-dose and an increase in mental health issues when using these substances.

They come in a variety of herbal blends and occasionally as a white powder or oil. They are usually smoked with tobacco or other herbs in a joint or a bong. The dose varies depending on the contents and they are often much stronger than cannabis.

Legal Information: Many synthetic cannabinoids are now illegal to possess and/or supply although newer ones may be legal. Illegal cannabinoids are Class B drugs; penalties for possession are up to five years in prison and/or an unlimited fine. Supply holds penalties of up to 14 years in prison and/or an unlimited fine.



The dose

Don't underestimate new drugs. They can be stronger than illegal drugs.

A high dose increases risk. In a recent workshop Crew asked participants to measure out what dose of a mock legal high they would take, if they had no previous experience using the drug. On average participants weighed out 500 mg. This was many times greater than the amount required to gain the preferred effect. Some NPS are active at doses of less than 10 mg!

Where possible, try to weigh drugs rather than 'eyeballing' a dose and be aware new drugs may be active in lower dosages than we are used to. Do your research and dose low!

Different chemicals have also been reported in packets of the same name so users can never be certain of what they are taking and what the effects may be. Some packets contain incorrect or no information, increasing risk to people who may use them.

If you choose to take drugs...

Drugs generally exaggerate emotions. In order to reduce harm, users should try to use in a safe environment, in trusted company.

People who take drugs come from many walks of life but there are people who fall into **high risk groups** including **young people, new users, people with underlying trauma, those with existing medical conditions (including mental health issues), those using to excess, thrill seekers, those using more than one drug and those injecting drugs.**

Some people who take drugs experience little negative effect. However this is not always the case and some NPS are stronger and more potent than traditional drugs. If you or anyone you know is experiencing problematic drug use, the following sections detail ways to reduce harm and provide support.

Overdose and emergencies

If someone takes too much of a drug they may overdose and you may need to get the casualty medical help as quickly as possible.

Signs to look out for

- [Unconsciousness
- [Seizures/fitting
- [Hyperthermia (overheating)
- [Severe nausea and vomiting
- [Rapid heart rate/chest pains
- [Hallucinations

Serotonin toxicity

Some drugs, such as MDMA, AMT and 5-MeO-DALT have serotonergic properties, meaning they effect the levels of the neurotransmitter serotonin. Too much serotonin can cause serotonin syndrome which can be potentially life threatening.

Main symptoms

Rigid, jerky, twitchy unusual movements, often involving the legs shaking; fully dilated pupils; overheating; shivering; racing heart; the person appearing agitated and confused. If in doubt, ring for an ambulance.

It is important if they have rigid, jerky movements, not to hold people down because of the risk of muscle tissue breaking down (rhabdomyolysis). As with people who have been using volatile substances (solvents) it can also be risky to startle or frighten people as this can lead to heart failure [UK Drug Watch, Overdose and Emergencies Sheet, 2014].

Do	Don't
[Shout for help	[Leave them
[Call 999	[Inflict excessive pain to wake them
[Be honest with medical staff	[Give them stimulants or any other drug
[Stay with the casualty	[Put them in a cold bath/shower
[If unconscious put in the recovery position (or on their side)	[Walk them about
[If they stop breathing perform CPR (chest compressions)	

Drug induced psychosis

If you are required to deal with a psychosis situation **ensure you have minimised danger. Your safety is the priority and it is essential in this situation you get another person's help.**

- Do not attempt to restrain the person. This can increase strain on the heart.
- Establish a safe environment and support them.
- Ask about their own resources for managing anxiety i.e. what have they done before?
- Use relaxation techniques e.g. breathing, muscle relaxation, use of quiet music etc.
- Try to maintain calmness (further stress can exacerbate or prolong symptoms).

If symptoms start to reduce you can provide additional support by:

- Helping with sleep management (e.g. encourage them not to force sleep, ensure comfortable environment, engage in relaxing exercises, avoid stimulants inc. caffeine).
- Encouraging engagement in alternative therapies (Reiki, acupuncture, massage) and regular support until symptoms subside.

Withdrawal

When someone stops taking drugs, or takes a reduced amount, they may experience withdrawal. Many people have experienced a painful withdrawal from NPS. To reduce harm try a tapered reduction in substance use, rather than going 'cold turkey' and to help the body recover we would recommend a healthy diet, light exercise and lots of rest.

Skills and techniques

Once initial interventions are over and the client is safe we can look at how to best support them in their recovery. The quality of the relationship is more important than your knowledge of particular drugs and the client should feel supported to find the best way forward for them. The following tips can help with this:

- Ask the client why they are using NPS and what is good about it.
- Set small goals based on the client's strengths and skills.
- Track patterns of use and identify strategies for managing triggers.
- Manage cravings. Try natural highs such as light exercise and meditation.
- Work with the client's motivation for change; good side and less good side of drug use.
- Use scaling questions e.g. "on a scale of 1-10, with 10 being happy and 1 being not happy, how do you feel about your current drug use". If the client answered 5, for example, you would then ask, "what would you have to do to move towards 6?"

Harm reduction

General

1. Research the substance before trying it
2. Plan how you are getting home before you start your night
3. Don't use drugs alone and preferably with a 'straight/sober' friend
4. Tell someone what you have taken
5. Try not to accept/buy drugs from people you don't know
6. Avoid mixing with other drugs, including alcohol
7. If using for the first time or using a new batch/packet take a test dose first
8. Use scales to measure dose
9. Start by taking small amounts – this might be half a pill, one small line, a single skin joint
10. Pace yourself and wait at least two hours before taking any more
11. Keep hydrated, drink small sips of water (about one pint per hour)
12. If experiencing issues with jaw clenching chew gum or soft sweets
13. Take regular breaks when dancing
14. Use safe sex practices
15. If you start to feel unwell, get medical assistance, be honest about what has been taken
16. If the effects are too extreme try to relax and take small sips of flat sugary juice
17. If the person taking drugs is sleeping or unconscious place them in the recovery position (on their side)
18. If you are looking to cut down your use do so gradually to reduce withdrawal symptoms
19. Try to have a few drink/drug free days a week to allow your body to recover
20. Get regular health check-ups and tests for blood borne viruses (e.g. hepatitis B, hepatitis C, HIV)

In addition the following harm reduction advice can be used when using certain routes of administration:

Smoking

21. If using rolling papers use as little paper as possible
22. Use low strength tobacco
23. Use a non-printed, long roach
24. Avoid holding smoke in your lungs as this can damage tissue without giving a better 'hit'
25. Use glass or metal pipes where possible as these give off less fumes than wood and plastic
26. If smoking from foil use clean foil each time. This is available from needle exchanges



Snorting

Snorting often causes effects to come on quicker than swallowing and it can be a more intense experience. Effects tend to last longer when the drug is swallowed.

27. Grind substances before snorting (some new drugs are harsher and more crystalline than traditional drugs)
28. Use a straw as a 'tooter' rather than money and throw away after use
29. Position the 'tooter' as high up the nostril as possible
30. Don't share your 'tooter' with anyone else (this could spread viruses)
31. Alternate nostrils
32. Rinse out your nose with water afterwards. Some powders, like ketamine, clump in the nose and drip down the throat. Where possible spit this out as it won't improve your experience but may cause more harm

Injecting

This route of administration poses the highest risk.

33. Only use clean needles and supplies. Free, clean needles are available from needle exchanges services. Alternatively they can be bought online
34. Follow good hygiene practice and wash injection sites (before and after)
35. Always filter your drugs
36. Use a fresh needle if you fail to find a vein first time; needles become blunt after one use
37. Never share equipment (inc. needles, filters, containers, spoons and water)
38. Do not use citric acid or heat to dissolve NPS if it is not needed. This is unnecessary and it may cause greater harm to injection sites
39. Use the smallest needle you can without it becoming blocked
40. Rotate injection sites
41. Dispose of needles responsibly. These can be returned to a needle exchange
42. Seek medical assistance if site becomes painful, tender or hot, or there is swelling for more than a few days





Sources of help

Crew | Drug information, advice and support | www.crew2000.org.uk | www.mindaltering.co.uk | 0131 220 3404

MY CREW Online Support | Out of hours chat room for information and support, up to date drugs info and 'check it out' tool to find out how risky your drug use is www.mycrew.org.uk

Support services and recovery development work

If the client would like help with their drug use a number of services are available.

Crew defines recovery as anyone wishing to reduce, stabilise or cease drug use.

If someone wishes to use Crew's support services they can self-refer by calling 0131 220 3404 or visiting our drop-in.



- [One-to-one drug counselling
- [Auricular (ear) acupuncture
- [Support groups
- [Cognitive based therapies

Other treatment (Not available from Crew)

- [Massage
- [Reiki
- [Residential treatment
- [Fellowships and self help
- [Prescription: most new drugs do not have a current prescriptive therapy (such as methadone for heroin use), but many drugs can be given that may help to alleviate symptoms of withdrawal such as insomnia and paranoia. These drugs include: benzodiazepines, anti-anxiety medications, beta blockers, anti-psychotics and sleep medication.



Know the Score | <http://knowthescore.info/> | 0800 587 5879

FRANK | <http://www.talktofrank.com/> | 0300 123 6600

Scottish Drug Services Directory | <http://www.scottishdrugservices.com>

Narcotics Anonymous | <http://www.ukna.org/> | 0300 999 1212

Scottish Drugs Forum | <http://www.sdf.org.uk> | 0141 221 1175 | 0131 221 1556

Scottish Families Affected by Drugs | <http://sfad.org.uk/> | 0808 010 1011

Lothians & Edinburgh Abstinence Programme (LEAP) | 0131 446 4400

Angelus Foundation | <http://www.angelusfoundation.com/> | 0203 700 7185

The Drugs Wheel | Model for substance awareness | <http://www.thedrugswheel.com/>

Choices for Life | <http://choicesforlifeonline.org/>



Hard copies are available for a suggested donation of £1 per booklet and can be obtained by emailing admin@crew2000.org.uk

Help Crew reduce drug harm:

**To donate,
text "Crew12 £1"
(or £2, £5 or £10)
to 70070**



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