Facts About Meth

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WE HAVE A PROBLEM

He spit in his mother's face. Then he called her F words and other vile names. He stole some of his step father's tools out of their garage to sell for money to buy more meth. He burglarized his own mother's bedroom stealing her $5,000 diamond wedding ring. At the same time he broke into her safe and stole her loaded pistol. He had sex with a Red Witch in a house trailer where he was living on the back lot of his mother's house. A steady stream of customers came and went from that house trailer. One customer was nicely dressed up in a suit and tie. He was selling meth from the trailer to help make money so he could support his own habit. He threatened to cut his mother's throat and kicked her cute little harmless dog. He got mad at his grown sister and chased her through his mother's house with a knife trying to stab her to death. She locked a door and he kicked it down but she was able to escape out of a bedroom window to safety.

I know this 27 year old man and I also know his mother and step father. He wasn't raised that way. This was my first exposure to the problem concerning crystal meth. I had heard about it previously but never gave it much thought. And this is not just an isolated case. This problem is now tearing away at American families all across the United States.

In the year 2006 more than 12 million Americans will have tried methamphetamine, and 1.5 million are meth addicts, according to federal estimates Attorney General Alberto Gonzales said that "in terms of damage to children and to our society, meth is now the most dangerous drug in America." We have a problem.

Today, meth is not only in America's colleges, not only in America's high schools, not only in American's junior high schools (or middle schools), but also in America's elementary schools (or grade schools).
What happened to the 27 year old man who was causing all of the problems? In 2006 a police SWAT team (special weapons and tactics) surrounded his house trailer, entered with guns drawn, hand cuffed him, and hauled him off to jail.

WHAT IS METH?

Meth used without a prescription from a doctor is considered to be just another kind of dope. The word meth is a shortened version of the word methamphetamine. It's chemical name in a powdered form is methamphetamine sulphate, however, it's chemical name in a crystalline form is methamphetamine hydrochloride.

"As a prescription drug, methamphetamine is currently sold under the name Desoxyn. Prior to the early 1960's methamphetamine was sold under the pharmaceutical brand name Methedrine."1
"During World War Two doctors used it to reduce battle fatigue and as a treatment for narcolepsy (a sleep disorder). But too many vets were getting hooked on it so it's use had to be reduced."\textsuperscript{2}

Methamphetamine is chemically related to amphetamine and is a derivative of amphetamine. Both drugs have some limited legitimate therapeutic uses, primarily in the treatment of obesity.\textsuperscript{3}

Sally Apgar in her article titled "Use of methamphetamine dates to early 1900s in Japan" had this to say: "Crystal methamphetamine, or "ice," is a concentrated derivative of its parent drug, methamphetamine, which was first synthesized in Japan in 1919.

As early as 1932, meth was used as a nasal decongestant and was one of the first antidepressants.

The drug was used by American and British fighter pilots, German tank troops, and Japanese soldiers and workers.

According to a study by Richard Rawson, associate director of the University of California at Los Angeles Integrated Substance Abuse Program, Japan produced large stockpiles of meth during and after World War II. Rawson said that after World War II, an estimated 3 percent to 4 percent of Japan's population was addicted, before occupying Allies eliminated the drug's use.

The Japanese collected the first data on the long-term effects of using the drug and found that 5 percent to 7 percent sustained long-term psychoses, he said.\textsuperscript{5}

What are different names for street meth? Street meth is called Crystal meth, crystal, speed, tina, poor man's cocaine, ice, glass, chalk, krank (crank), tweak, fire, speed, meth, P, go, fast, cat, and pure.

Back when bikers controlled the trade, legislators tried to restrict supplies of the core ingredient they were using to make crank, so nicknamed because they would hide meth in their motorcycles' crankcases.

Laws are in place in most states in America forbidding it's manufacture, sale, and use. Laws such as: "guilty to possessing meth with an intent to distribute" or
"conspiracy to manufacture meth" or "two counts of possession with intent to sell"
These laws can vary from state to state.
Then there are the federal laws that are very similar.

I want to mention what meth is not. Meth is not a designer drug. Officer Rick Crossen in Athens City, Ohio, had this to say:
"Designer drugs are a class of drugs often associated with "raves," all-night underground dance parties frequented by teens and college students. Designer drugs are modifications of restricted drugs, made by underground chemists in order to create street drugs that are not specifically listed as controlled (i.e., restricted) substances by the Drug Enforcement Administration.

A designer drug is created by changing the molecular structure of an existing drug or drugs to create a new substance. The street names of designer drugs vary according to time, place, and manufacturer. Because designer drugs are created in clandestine laboratories by unlicensed and untrained amateurs, they can be extremely dangerous. In many cases, the designer drugs are more dangerous and more potent than the original drug. The most well-known designer drug is MDMA, or ecstasy."

WHY WOULD A PERSON WANT TO USE METH?

The number one reason is sex. High levels of serotonin heighten mood and emotional responses- particularly one's sex drive. It makes one "feel horny" with the result that their sexual inhibitions and limits are seriously curtailed. This, in combination with increased self-confidence and aggressiveness, may lead persons to engage in unprotected sex. As a consequence a woman might wind up with an unwanted pregnancy. A person might wind up with an unwanted venereal disease. A person might wind up infected with AIDS (HIV positive).

"Amphetamines are potent stimulants with disinhibitory qualities. The anticipated sensations after taking methamphetamine are euphoria, increased alertness, and sense of energy. Users describe a giddy
wakefulness and a sense of well-being. You might find you have a boost in your self-esteem and self-confidence and feel more aggressive and confident."¹²

However, different individuals want to get high for different reasons. Why do some sniff glue or inhale gasoline fumes? Why do some press on their throat arteries until they pass out? It could be that some do it just because they are not supposed to do it. It could be that some want the good feeling of being high for awhile. It could be that some want to medicate the emotional pain of horrible childhood memories. It could be that some want to escape from reality or escape from a present stressful situation. It could be that some have to use it because it is an addiction or compulsion for them to do so. And there may be a number of other reasons that vary with individuals.

Many people who are bipolar or depressed use meth to treat their symptoms. Some truck drivers use it to stay awake on long trips. Some college students use it to stay awake all night long while cramming for exams. Some housewives in some parts of the country use meth to energize them, and some teens at clubs and raves use the drug to fight fatigue and dance till morning.

Officer Rick Crossen in Athens City, Ohio, had this to say, "Athletes and students sometimes begin using meth because of the initial heightened physical and mental performance the drug produces. Initially, small doses of meth do increase the ability to concentrate. Scientific research has shown that methamphetamine releases high levels of the neurotransmitter dopamine, which stimulates brain cells, causing enhanced mood and increased body movement.

Meth enables people to work around the clock, often for days on end. Meth suppresses appetite and because of this, meth appeals to young women trying to lose weight. Meth is addictive, and users can develop a tolerance quickly, needing more and more to get high, and going on longer and longer binges. Some users avoid sleep for 3 or more days while binging."

For some women, weight loss is a big draw. There was one 5-foot-8 patient who weighed less than 90 pounds when she came to a clinic for help. "People call it the Jenny Crank diet," says Patrick Fleming, head of the Salt Lake County Division of Substance Abuse Services, which now sees more women with addictions to meth than to alcohol.
WHAT DOES METH LOOK LIKE?

It comes in one of two forms. Either it comes as a powder or it comes in crystal form.

In color it can be white, brown, pink, red, or yellow depending on the ingredients used to make it.

It can be placed in small plastic tubes or small flat plastic baggies - smaller than a sandwich baggie.

Officer Rick Crossen says this, "Meth is a crystal-like powdered substance that sometimes comes in large rock-like chunks. When the powder flakes off the rock, the shards look like glass, which is another nickname for meth. Meth is usually white or slightly yellow, depending on the purity."

WHERE DOES A PERSON BUY METH?

Since street meth is illegal in the U.S.A. then most users go to the streets to buy it from a local drug pusher. Some branches of organized crime sells it. Some Satanic cults sell it. Some individuals who want to get rich quick sell it. Some individuals who think they are above the law sell it. Some
individuals who think that they never will get caught by the law sell it. And your neighbor may sell it without you knowing it. So all of this is done on the underground market. Some of this may be done right in your own community. Some of this may be done right in your own neighborhood without you knowing about it.

HOW DOES METH MAKE A PERSON ACT?

The first few separate doses make one high, however, it made the true account of the 27 year old man above hostile, aggressive, and dangerous. The effects are similar to amphetamines in that users report being more alert, increased physical activity and speech, heightened respiration and a decrease in appetite and fatigue. Many users feel euphoric or an intense rush of pleasure. Other effects include confusion, apprehension, anxiety and irritability, as well as an inability to sleep. Users may experience physical side effects including tremors, convulsions, high blood pressure, a dangerously high body temperature, breathing problems, irregular heartbeat and extreme anorexia.

Use over extended periods of time may lead to deep depression due to damage of neurotransmitters in the brain. Long-time users have been known to develop symptoms of tremor or uncontrolled motor activity, violent and/or paranoid behavior, mood disturbances, including homicidal or suicidal thinking, psychosis, aggression, hallucinations and delusions. Withdrawal symptoms include depression, fatigue, aggression, intense drug craving, and the inability to enjoy pleasurable experiences. As with amphetamines, psychological dependence can develop with regular use.⁴
Like amphetamine, it causes increased activity, decreased appetite, and a general sense of well-being. The effects of methamphetamine can last 6 to 8 hours. After the initial "rush," there is typically a state of high agitation that in some individuals can lead to violent behavior.

Methamphetamine is a Schedule II stimulant, which means it has a high potential for abuse and is available only through a prescription that cannot be refilled. Of course, like any drug, there are its nice peak and its flip side. Meth is a dangerous drug and it is sometimes very dangerous to be around someone who is under the influence of Meth. For example, they might use meth to have a good time at a party or wherever, but after that, they have the down mode, which makes them feel irritable, and they can be excessively violent towards others.

During the 1950s and 1960s, Swedish clinics used meth as a treatment for heroin addiction, much the same way methadone has been used in the United States. Doctors quit the treatments after recognizing that patients developed psychoses on relatively low doses of the drug.

During the late 1960s and early 1970s, pharmaceutical companies in the United States introduced legitimate meth as a prescription drug for weight loss.

Officer Rick Crossen had this to say, "Psychological symptoms of prolonged meth use are characterized by paranoia, hallucinations, repetitive behavior patterns, and delusions of parasites or insects under the skin. Users often obsessively scratch their skin to get rid of these imagined insects.

Long-term use, high dosages, or both can bring on full-blown toxic psychosis (often exhibited as violent, aggressive behavior). This violent, aggressive behavior is usually coupled with extreme paranoia.

When users come off a meth binge (while still in the intoxication phase), nonpurposeful, repetitious, compulsive behavior is common. Some behavior characteristic of tweaking is picking at skin, pulling out one's hairs, and compulsively cleaning."
HOW DOES A PERSON USE METH?

There are five different ways to use meth: Meth can be snorted (inhaled), swallowed, injected, inserted rectally, or smoked.

However, it comes in two different forms: powder form or crystal form.

Methamphetamine sulphate, the powdered form, is like small granulated sugar crystals. It usually appears as an odourless, bitter-tasting powder, which easily dissolves in water or alcohol.

It is snorted in small bumps or lines.

But crystal meth is a little different. Crystal methamphetamine requires an added manufacturing step to convert powder meth to crystals. "Ice" is most often produced by dissolving the powder with a solvent such as methanol, acetone, ethanol or isopropanol and then slowly letting it recrystallize.
Methamphetamine hydrochloride, or crystal Meth, comes in a larger crystallized form known as "ice". Those who choose to smoke methamphetamine prefer crystal methamphetamine.

Low-intensity users swallow or snort meth, using it the same way many people use caffeine or nicotine. Low-intensity users want the extra stimulation the methamphetamine provides so that they can stay awake long enough to finish a task or a job, or they want the appetite suppressant effect to lose weight. These people frequently hold jobs, raise families, and otherwise function normally. If snorted or swallowed, the onset is not as extreme as a binge user.

Binge users smoke or inject meth and experience a euphoric rush that is psychologically addictive called a "rush" or "flash." The rush is the initial response the user feels when smoking or injecting meth and is the aspect of the drug that low-intensity users do not experience when snorting or swallowing the drug. During the rush, the user's heartbeat increases and metabolism, blood pressure, and pulse soar. Meanwhile, the user can experience heightened feelings. Unlike the rush associated with crack cocaine, which lasts for approximately 2 - 5 minutes, the meth rush can continue for 5-30 minutes. If smoked or injected, users report increased energy and motivation often coupled with a false sense of invincibility.

Heavy users are called "tweakers." 

WHAT CAN METH BE CUT WITH?

A pusher may want to dilute the strength of the meth that he or she is selling. That way they can sell more and the user gets less. This is called
cutting (the product). Usually, pushers will "cut down" or "down cut" their product.

What can meth be cut with? Like any street drug, crystal meth can be cut with anything from baking power, chalk, or talc, to other drugs.

Years ago some pushers "cut up" or "up cut" their marijuana cigarettes with cocaine to enhance it's power. This was done with the goal of hooking their client on the stuff so they would have a steady customer. Then once he or she was hooked they could down cut their product and get the same amount of money for it.

Cutting with chalk:
When you were a kid did you ever break off a small piece of dry wall or sheetrock and then write your name on the side walk with it. It was just like the chalk that your teacher used to write on the blackboard with, wasn't it! It was fun. Would you ever consider eating it? Of course not, that would be absurd. Well, if one takes a sheet of dry wall (gypsum board) and grinds it into a white powder it can be used to place with the meth- used to cut it. It's called chalk- a fitting name. I don't want to tell you what this stuff will do to your lungs if you go around sniffing or snorting it up your nose.

Cutting with talcum powder:
"Talc is closely related to the potent carcinogen asbestos. Talc particles have been shown to cause tumors in the ovaries and lungs of cancer victims. For the last 30 years, scientists have closely scrutinized talc particles and found dangerous similarities to asbestos. Responding to this evidence in 1973, the FDA drafted a resolution that would limit the amount of asbestos-like fibers in cosmetic grade talc. However, no ruling has ever been made and today, cosmetic grade talc remains non-regulated by the federal government. This inaction ignores a 1993 National Toxicology Program report which found that cosmetic grade talc, without any asbestos-like fibers, caused tumors in animal subjects. Clearly with or without asbestos-like fibers, cosmetic grade talcum powder is a carcinogen.

Talc is toxic. Talc particles cause tumors in human ovaries and lungs. Numerous studies have shown a strong link between frequent use of talc in the female genital area and ovarian cancer. Talc particles are able to move through the reproductive system and become imbedded in the lining of the ovary. Researchers have found talc particles in ovarian tumors and have
found that women with ovarian cancer have used talcum powder in their genital area more frequently than healthy women.

Talc poses a health risk when exposed to the lungs. Talc miners have shown higher rates of lung cancer and other respiratory illnesses from exposure to industrial grade talc, which contains dangerous silica and asbestos. The common household hazard posed by talc is inhalation of baby powder by infants. Since the early 1980s, records show that several thousand infants each year have died or become seriously ill following accidental inhalation of baby powder.\(^7\)

**WHAT DOES METH DO TO A PERSON'S BODY AND MIND?**

When a person places meth crystals up their rectum it is called "hooping" and can lead to tissue damage there. It places this person at increased risk when having unprotected anal sex for contracting HIV and other venereal diseases.

Snorting any drug can damage the membranes and tissues inside the user's nose. Sharing "bullets" or "doing a rail" from a shared rolled dollar bill or straw can put a user at risk of contracting viral hepatitis and damaged nasal tissues are likely to increase any chance of transmission.

Smoking crystal meth can burn the tissue lining of a user's mouth, throat, and lungs.

Injecting it can be painful, lead to problems with a user's veins, and infection not to mention the risk of HIV and hepatitis B and C. If a user injects crystal, he or she should be sure that their syringes and needles (rigs) are clean. There is a higher chance of overdosing if a user injects.\(^{15}\)

"Meth mouth" is caused when meth partially dries up the saliva from a person's mouth. Saliva is alkaline and is needed to balance any acid from
natural foods. When this balance is disrupted the high concentration of acid can start a decay process on the teeth. Meth also reduces the flow of blood to a user's gums. Meth mouth is characterized by rotted and destroyed teeth in a user's mouth.

Meth has been linked to irreversible brain damage. "Methamphetamine is an addictive stimulant drug that strongly activates certain systems in the brain.

Methamphetamine releases high levels of the neurotransmitter dopamine, which stimulates brain cells, enhancing mood and body movement. It also appears to have a neurotoxic effect, damaging brain cells that contain dopamine as well as serotonin, another neurotransmitter. Over time, methamphetamine appears to cause reduced levels of dopamine, which can result in symptoms like those of Parkinson's disease, a severe movement disorder.

Animal research going back more than 20 years shows that high doses of methamphetamine damage neuron cell endings. Dopamine- and serotonin-containing neurons do not die after methamphetamine use, but their nerve endings ("terminals") are cut back, and regrowth appears to be limited.

The central nervous system (CNS) actions that result from taking even small amounts of methamphetamine include increased wakefulness, increased physical activity, decreased appetite, increased respiration, hyperthermia, and euphoria. Other CNS effects include irritability, insomnia, confusion, tremors, convulsions, anxiety, paranoia, and aggressiveness. Hyperthermia and convulsions can result in death.

Methamphetamine causes increased heart rate and blood pressure and can cause irreversible damage to blood vessels in the brain, producing strokes. Other effects of methamphetamine include respiratory problems, irregular heartbeat, and extreme anorexia. Its use can result in cardiovascular collapse and death."

Meth use may lead one to imagine they have bugs under their skin called formication. A person can actually scratch or pick large sores on their arms while under the influence of this drug. It may also lead one to jaw grinding called bruxism.

Here is a list of the Health effects concerning meth abuse published in 2002 by the National Institute on Drug Abuse (NIDA):
Immediate (short-term) effects of methamphetamine abuse may include:
- Increased attention and decreased fatigue
- Increased activity
- Decreased appetite
- Euphoria and rush
- Increased respiratory rate
- Dangerously high body temperature
- Convulsions

Long-term (chronic) effects of methamphetamine abuse may include:
- Anxiety and anxiousness
- Severe weight loss
- Changes to brain and central nervous system
- Damage to heart or other major organs
- Tremor or uncontrolled motor activity
- Hallucinations
- Mood disturbances, including homicidal or suicidal thinking
- Violent and/or paranoid behavior
- Amphetamine psychosis

Symptoms of withdrawal may include:
- Depression
- Anxiety
- Fatigue
- Paranoia
- Aggression
- Intense drug craving

If a user shares an infected hyperdermic needle with someone who is infected with Hepatitis C, the most common form of hepatitis, the user will get the disease. Hepatitis C is a chronic liver disease that can cause the scarring known as cirrhosis and lead to death.

It is predominantly spread blood-to-blood, and has infected 4 million people nationwide. There is neither a vaccine nor a cure for it.
"How long will the effects last?"
Onset time is quickest with smoking or injecting effects will be experienced in less than 30 seconds. Unless injected intra-muscularly (not encouraged as IM injection of vasoconstricting substances, like crystal meth, causes muscle necrosis), effects will take about 5 minutes. Snorting produces effects within 3 to 5 minutes. Ingesting crystal meth produces effects within 15 to 20 minutes. The effects can last 12 to 16 hours, but some users report effects for as long as 36 hours."

Officer Rick Crossen in Athens City, Ohio, had this to say: "Ice" is a slang term for a very pure, smokeable form of methamphetamine. It is an extremely addictive stimulant. Its effects are similar to those of cocaine but longer-lasting. "Ice" can cause erratic, violent behavior among its users. The nickname "ice" is derived from its translucent rock-like appearance.

The "ice" high can last anywhere from 2 to 24 hours depending on how much is used. After taking "ice," users (especially those binging) experience a crash or depression that can last as long as 3 days."

"Although both cocaine and methamphetamine are psychostimulants that trigger the release of dopamine, the drugs are quite different. For one thing, methamphetamine produces a stronger and longer-lasting high than the high produced by cocaine. The high that is produced by meth is 4 times
higher than the high produced by cocaine. Similarly, smoking meth produces a high that lasts from six to 24 hours, while smoking cocaine produces a high that lasts only 20 to 30 minutes. And it takes the human body about 12 hours to remove about 50 percent of methamphetamine, compared to only one hour for cocaine. Cocaine is a natural drug derived from plants whereas meth is a synthetic drug made from chemicals.

The reason for the methamphetamine rush is that the drug, when smoked or injected, triggers the adrenal gland to release a hormone called epinephrine (adrenaline), which puts the body in a battle mode, fight or flight. In addition, the physical sensation that the rush gives the user most likely results from the explosive release of dopamine in the pleasure center of the brain.

**WHAT'S THE DOWN SIDE OF METH?**

The sexual down side of meth leads to sexual impotence in a man not being able to get and maintain an erection or to experience orgasm.

A person doesn't want to use meth and then drive a motor vehicle. If the person does, that person is not only endangering their own life, but others on the road way. Penalties are severe when that person gets caught driving under the influence (DUI) (of a controlled substance).

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Long-term use, high dosages, or both can bring on full-blown toxic psychosis (often exhibited as violent, aggressive behavior). This violent, aggressive behavior is usually coupled with extreme paranoia.
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**HOW IS METH MADE?**

Meth is made by "cooking down" pseudoephedrine, a chemical in pills used to fight colds and allergies.

Methamphetamine is a synthetic (or man-made) drug. The meth that is used illegally is made from dangerous chemicals, and sold in the form of pills, powder, or chunks. Illegal meth is made in clandestine laboratories (meth labs) in homes, vehicles, motels, and many other locations.

"Making methamphetamine is a multi-step cook process. The key ingredient is ephedrine or its cousin, pseudoephedrine. Both are chemicals once found in over-the-counter cold, cough and allergy medicines. Additional chemicals are used to isolate the ephedrine or pseudoephedrine, cook it into meth, and process it into a form for consumption. These chemicals can be cheap, everyday household items like ammonia, lye, and red phosphorus scraped from matchbook covers. Start to finish, the cook process takes about 48 hours and can be hazardous because at one or more stages, the solution needs to be heated, producing toxic fumes and the chance of explosion."

Sally Apgar had this to say: "Depending on the recipe, other ingredients used to make meth can be found in lithium camera batteries, matches, tincture of iodine and hydrogen peroxide. Some recipes also use ingredients such as charcoal lighter fluid, paint thinner, gasoline, kerosene, rubbing alcohol and mineral spirits.

Corrosive products are used during the "cooking process," such as sulfuric acid in battery acid or sodium hydroxide from lye-based drain cleaners.
Crystal methamphetamine requires an added step to convert powder meth to crystals. "Ice" is most often produced by dissolving the powder with a solvent such as methanol, acetone, ethanol or isopropanol and then slowly letting it recrystallize.\textsuperscript{13}

The Koch Crime Institute had this to say about how to recognize a possible chemical lab in your neighborhood:

"Periodically The Air District Receives Residential Chemical Odor Complaints."

" IS THERE A METH LAB COOKIN' IN YOUR NEIGHBORHOOD?"

Many people may be unaware that they're living near a methamphetamine lab. Here are some things to look for:

- Unusual, strong odors (like cat urine, ether, ammonia, acetone or other chemicals).
- Residences with windows blacked out.
- Renters who pay their landlords in cash. (Most drug dealers trade exclusively in cash.)
- Lots of traffic - people coming and going at unusual times. There may be little traffic during the day, but at night the activity increases dramatically.
- Excessive trash including large amounts of items such as: antifreeze containers, lantern fuel cans, red chemically stained coffee filters, drain cleaner and duct tape.
- Unusual amounts of clear glass containers being brought into the home.

The presence of the following items could indicate the existence of a methamphetamine lab:

- Alcohol
- Ether
- Benzene or (gasoline)
- Toluene/Paint Thinner
- Freon or (anhydrous ammonia)
- Acetone
- Chloroform
- Camp Stove Fuel/Coleman Fuel
- Starting Fluid
- "Heet"
- White Gasoline
- Phenyl-2-Propane
- Phenylacetone
- Phenylpropanolamine
Iodine Crystals  
Red Phosphorous  
Black Iodine  
Lye (Red Devil Lye)  
Drano  
Muriatic/Hydrochloric Acid  
Battery Acid/Sulfuric Acid  
Epsom Salts  
Batteries/Lithium  
Sodium Metal  
Wooden Matches  
Propane Cylinders  
Hot Plates  
An over abundance of cold and asthma medications containing ephedrine or pseudoephedrine  
An over abundance of Cold Tablets  
Bronchodilator  
Energy Boosters  
Rock Salt  
Diet Aids  

If you suspect a meth lab in your neighborhood  
CALL THE LAW.16

The process involves the use of these chemicals to change the base compound Ephedrine or Pseudoephedrine into the active drug.

HOW DOES A PERSON GET OFF OF METH?

A urinalysis will tell if a person is using meth.

An individual may go to a treatment center of some kind. In treatment, clients are given tranquilizers to bring them down fast. Afterwards, they
are prescribed antidepressants to regulate the chemicals in their brain. In addition, they undergo cognitive and behavioral therapy. Meth may not be physically addicting, like alcohol or heroin, but the psychological dependence is huge. Dr. Kohl explains, "Because the meth-user's brain does not create the feel-good chemicals any more, there is an overwhelming urge to use again."

In the U.S.A. each county of each state has a clinic that offers help. Check with your local county agency for help nearest you. Each of these agencies can also refer you to other organizations that might be able to help.

One place of help might be:
The Drug Abuse Resistance Education Program (D.A.R.E.)

One doctor describes what it is like to deal with a meth overdose patient: "When a meth crisis patient is brought in (to the hospital) usually by police it requires a closed room and a security guard because patients are very volatile and unpredictable. A medical team evaluates the patient, treats the symptoms and monitors the patient during the six to eight hours it takes to come down.

"This is the longest drug to come off of," Doctor Behrens says.

"The patient may be sent to recovery or taken to the residential treatment center for detoxification or a mental health evaluation may show a need for involuntary treatment.

Often, patients either recover enough to go home with relatives or friends, or must be released because there isn't a bed available," Behrens says.

If an emergency patient isn't on Medicaid or a health plan, the hospital pays the cost of the care. It is recommended that they go to a Recovery Center."
ADDITIONAL INFORMATION

Can a person overdose on Meth?
Yes, Meth intoxication can occur when the body is presented with an overwhelming amount of the drug. The amount needed varies according to tolerance and the characteristics of each batch.

How does meth work?
Meth is a class A drug. It is a powerfully addictive synthetic stimulant. It was developed from its parent drug amphetamine with the base compound being derived from Pseudoephedrine. Meth works by stimulating the release of Dopamine, noradrenaline, and serotonin. The ability of Meth to stimulate and limit the re-uptake of Dopamine in the brain is the reason for the high.

How much does meth cost?
Did you ever take a chemistry class in school and have to weigh a certain chemical for an experiment by the gram on a weight scale? Meth is sold the same way. Generally speaking, one hit of meth is about a quarter of a gram in weight and this will cost a user about $25. But this price is not set in concrete. It can change depending on it's availability. And, as with most drugs, the price depends on the drug's purity, the amount, and where it is sold.

Those addicted to crystal meth face significant health problems, ruined relationships, financial problems, and lost employment.

Bartow Against Meth had this to say:

The Basic Problem of Addiction:
"Methamphetamine causes false feelings of well-being. More and more confidence is placed in the drug while other survival feelings are ignored
and bypassed. The result is a lack of concern for, and confidence in, other areas of life.

It is at this point that physical dependence settles in. In the beginning, the pleasure impressions in the memory are quite small. But as the natural chemistry becomes more and more suppressed, the survival mechanism receives a greater and greater feeling of pleasure through the use of the drug. Furthermore as the drug starts to relieve the withdrawal, the addicted person feels, "I needed that." And so the subconscious memory is learning through the body that the drug is not only something that is pleasurable, but something that is needed just to make it through the day.

Why Does Crystal Methamphetamine Take Over Your Life?
Methamphetamine, like other addictive drugs, is able to short-circuit your survival system by artificially stimulating the reward center, or pleasure areas in your brain, WITHOUT ANYTHING BENEFICIAL HAPPENING TO YOUR BODY. As this happens, it leads to increased confidence in methamphetamine, and LESS confidence in the normal rewards of life. This first happens on a physical level. Then, it affects you psychologically. The big methamphetamine lie results in decreased interest in other aspects of life, as you increase your reliance and interest in methamphetamine. People, places and activities involved with using methamphetamine become MORE IMPORTANT. People, places and activities or lifestyles that worked through your normal reward system, before using methamphetamine, become LESS important to you. In fact, after awhile, a heavy methamphetamine user will actually RESENT people, places and activities not able to fit in with methamphetamine use.

In certain studies, animals would press levers to release methamphetamine into their blood stream, no longer concerned about eating, mating or other natural drives. They will, in fact, die of starvation in the process of giving themselves methamphetamine even though food is available.

Abuse Patterns- Meth abuse has three patterns:

Low-Intensity Meth Abuse:
Low-intensity abusers swallow or snort methamphetamine, using it the same way many people use caffeine or nicotine. Low-intensity abusers want the extra stimulation the methamphetamine provides so that they can stay awake long enough to finish a task or a job, or they want the appetite suppressant effect to lose weight. These people frequently hold jobs, raise families, and otherwise function normally. They may include people such
as truck drivers trying to reach their destination, workers trying to stay awake until the end of their normal shift or an overtime shift, and housewives trying to keep a clean house a well as be a perfect mother and wife.

Even though a law enforcement officer is not likely to encounter low-intensity abusers, these individuals are one step away from becoming binge abusers. They already know the stimulating effect that methamphetamine provides them by swallowing or snorting the drug, but they have not experienced the euphoric rush associated with smoking or injecting it and have not encountered clearly defined stages of abuse. However, simple switching to smoking or injecting methamphetamine offers the abusers a quick transition to a binge pattern of abuse.

**Binge Meth Abuse:**
Binge abusers smoke or inject methamphetamine and experience euphoric rushes that are psychologically addictive. Rush- The rush is the initial response the abuser feels when smoking or injecting methamphetamine and is the aspect of the drug that low-intensity abusers do not experience when snorting or swallowing the drug. During the rush, the abuser's heartbeat aces and metabolism, blood pressure, and pulse sore. Meanwhile, the abuser can experience feelings equivalent to ten orgasms. Unlike the rush associated with crack cocaine, which lasts for approximately 2 - 5 minutes, the methamphetamine rush can continue for 5-30 minutes.

The binge is the continuation of the high. The abuser maintains the high by smoking or injecting more methamphetamine. Each time the abuser smokes or injects more of the drug, a smaller euphoric rush than the initial rush is experienced until, finally, there is no rush and no high. During the binge, the abuser becomes hyperactive both mentally and physically. The binge can last 3-15 days.

The reason for the methamphetamine rush is that the drug, when smoked or injected, triggers the adrenal gland to release a hormone called epinephrine (adrenaline), which puts the body in a battle mode, fight or flight. In addition, the physical sensation that the rush gives the abuser most likely results from the explosive release of dopamine in the pleasure center of the brain.

**High-**
The rush is followed by the high, sometimes called the shoulder. During
The high, the abuser often feels aggressively smarter and becomes argumentative, often interrupting other people and finishing their sentences. The high can last 4-16 hours.

The high-intensity abusers are the addicts, often called speed freaks. Their whole existence focuses on preventing the crash, and they seek that elusive, perfect rush—the rush they had when they first started smoking or injecting methamphetamine.

With high-intensity abuser, each successive rush becomes less euphoric, and it takes more methamphetamine to achieve it. Each high is not quite as high as the one before. During each subsequent binge, the abuser needs more methamphetamine, more often, to get a high that is not as good as the high he wants or remembers.

Tweaking - Tweaking occurs at the end of the binge when nothing the abuser does will take away the feeling of emptiness and dysphoria, including taking more methamphetamine. Tweaking is very uncomfortable, and the abuser often takes a depressant to ease the bad feelings. The most popular depressant is alcohol, with heroin a close second.

Tweaking is the most dangerous stage of the methamphetamine abuse cycle to law enforcement officers and other individuals near the abuser. If the abuser is using alcohol to ease the discomfort, the threat to law enforcement officers intensifies. During this stage, law enforcement officers must clearly identify the underlying dangers of the situation and avoid the assumption that the tweaker is just a cocky drunk.

Tweaking for the high-intensity abuser is still the most dangerous time to confront him because tweakers are extremely unpredictable and short-tempered. The crash is often spoken of in terms of I never sleep, or I sleep with one eye open. In an attempt to appear normal, perhaps because of an appointment with a doctor, lawyer, or court official, high-intensity abusers will make themselves take short naps; otherwise, they see no need to come down from the high.

Crash - To a binge abuser, the crash means an incredible amount of sleep. The body’s epinephrine has been depleted, and the body uses the crash to replenish its supply. Even the meanest, most violent abuser becomes
almost lifeless during the crash and poses a threat to no one. The crash can last 1-3 days.

Normal-
After the crash, the abuser returns to normal--a state that is slightly deteriorated from the normal state before he used methamphetamine. This stage ordinarily lasts between 2 and 14 days. However, as the frequency of binging increases, the duration of the normal stage decreases.

Withdrawal-
No acute, immediate symptoms of physical distress are evident with methamphetamine withdrawal, a stage that the abuser may slowly enter. Often 30-90 days must pass after the last drug use before the abuser realizes that he is in withdrawal. First, without really noticing, the individual becomes depressed and loses the ability to experience pleasure. The individual becomes lethargic; he has no energy. Then the craving for more methamphetamine hits, and the abuser often becomes suicidal. If the abuser, however, takes more methamphetamine at any point during the withdrawal, the unpleasant feelings will end. Consequently, the success rate for traditional methamphetamine rehabilitation is very low. Ninety-three percent of those in traditional treatment return to abuse methamphetamine.

The severity and length of the symptoms vary with the amount of damage done to your normal reward system through amphetamine use. The most common symptoms are: drug craving, irritability, loss of energy, depression, fearfulness, wanting to sleep a lot, or, difficulty in sleeping, shaking, nausea and palpitations, sweating, hyperventilation, and increased appetite. These symptoms can commonly last several weeks after you stop using amphetamine. With medical treatment, these symptoms can be handled and eliminated much more quickly.

So we see that as more of the drug comes into the body, more of the body's natural chemistry is suppressed. Eventually, natural reward messenger chemical production is almost shut down completely. If the drug is removed at this time, there will be a feeling of panic. This extreme state of irritability, tension and anxiety is what is called withdrawal.

During this time attempts at meeting normal survival needs don't register satisfaction in the brain's reward system because, the messenger for satisfaction has been suppressed by the drug. Instead, the central survival
mechanism sends out a panic signal screaming that the body is in extreme distress."

The Box Elder County Sheriff’s Office would like to thank Kraig J. Rice for this work and his permission to use it on our website.