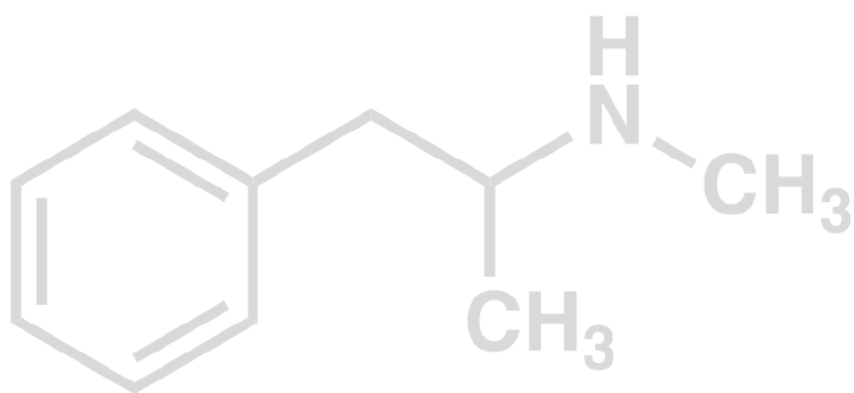


# THE METH BOOKLET



A harm reduction guide for people who use  
methamphetamine.

Researched and compiled by ANKORS  
in Nelson, BC.



## ABOUT THIS BOOKLET

This booklet is intended for people who use methamphetamine. It combines scientific research, harm reduction techniques, and advice provided by meth users themselves to help people make safer choices around their drug use. Through harm reduction we meet people where they are at without judgement, providing information and resources to help reduce the harm associated with inherently risky activities.

## ACKNOWLEDGEMENTS

ANKORS would like to thank the people in our community who openly shared their experiences and knowledge about the highs and lows of methamphetamine use. The information contained here would not be possible without their valuable input.

We would also like to acknowledge the following researchers, organizations, and online resources whose work we pooled in writing this booklet: Dr. Carl Hart (Columbia University), CATIE, Waterloo Region Integrated Drug Strategy, Tweaker.Org, The Drug Classroom, The Drug Policy Alliance, Toronto Vibe, ACT Toronto, and Erowid.

Finally, ANKORS respectfully acknowledges the Sinixt, Ktunaxa, and Syilx First Nations on whose traditional territories we work and reside.

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## WARNING

**Methamphetamine use can pose serious, life threatening health risks. Even while practicing the harm reduction techniques outlined in this booklet, one still runs the risk of contracting or transmitting blood borne infections such as HIV or Hepatitis C, as well as having a fatal overdose.**

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# METH 101

Methamphetamine is closely related to amphetamine. Amphetamines are classified as stimulant drugs. Stimulants amp central nervous system activity, increasing your heart rate and making your blood pressure go up. Meth crosses the blood/brain barrier faster than amphetamine, triggering a massive flood of dopamine, the brain's "feel good" chemical. The result is an intense high that can last up to 8 hours (or more) depending upon a person's tolerance.

## STREET NAMES

Side, Meth, Crystal Meth, Speed, Jib, Ice, Chris, Crank, Tweek, Glass, Crystal, Crissy, Tina



## APPEARANCE

Side usually comes in crystal form but can also be a powder. The powder is white, beige, orange, pink, and variations in between. As crystal it is often clear to white, but sometimes blue/green and looks like pieces of crushed ice.

Meth has a bitter, chemical taste, sometimes a strong smell, but you can't depend on smell or taste to determine purity.

*\*Always get drugs tested at your local harm reduction organization to find out what's in them! Carry Naloxone and know how to use it!*

## INGREDIENTS

Meth is a synthetic drug. Ephedrine and pseudoephedrine are main ingredients. Common chemicals used in the meth making process also include: hydroiodic acid, red phosphorus, iodine, benzene, ethyl ether, acetone, and lye.

Some of these are toxic and known carcinogens.

## LEGALITY

Meth is a Schedule 1 drug in Canada. It carries a maximum penalty

of seven years for possession. The maximum penalty for trafficking, producing, importing/exporting, or possession for the purpose of export is life imprisonment.

In the US, meth is a Schedule II drug and is only legal with a doctor's prescription.

## THE HIGH

On meth your pupils open wide, you feel alert, euphoric, and focused. You have increased energy, can become more talkative, or sometimes very introspective and self interested. Your temperature rises, digestion slows, and your appetite lowers. Meth users report feeling a strong sense of confidence on speed and may become super sexually aroused.

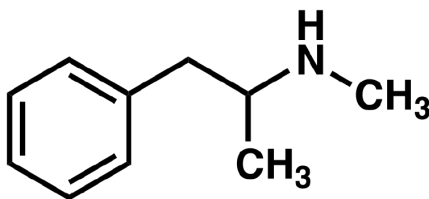
For certain people, especially with severe ADHD, side can mellow them out.

## RISKS

**Doing meth can result in serious health risks that include:**

- \*Death
- \*Overdose
- \*Dependency
- \*Heart Problems
- \*High Blood Pressure
- \*Sores (from picking/scratching)
- \*Dental Issues
- \*Paranoia
- \*Blood Borne Infections
- \*Anxiety
- \*Psychosis
- \*Insomnia
- \*HIV (from sharing gear)
- \*Hepatitis C
- \*Sexually Transmitted Infections (from having unprotected sex)

## MOLECULAR STRUCTURE of METHAMPHETAMINE



## HISTORY IN BRIEF

Methamphetamine was first synthesized in Japan during 1893. It was originally derived from ephedrine—a chemical found within the plant *Ephedra sinica*. Both methamphetamine and amphetamine were widely distributed to Japanese, German, and US troops during World War II to keep soldiers focused, awake, and alert for combat. Throughout the 1930s-60s, methamphetamine was prescribed around the world for fatigue, attention deficit, weight loss, and depression. It was also widely used by artists in the 50's and 60s—most notably within Jack Kerouac's Beat writer's scene.



*Ephedra sinica*

In 1971 the US government severely tightened regulations around the drug's legal production and distribution. Biker gangs controlled the illegal speed trade throughout the 70s. They called it "crank" in reference to the crankcases of their motorcycles where the drug was hidden.

Backyard meth labs emerged in the mid 80s and 90s. These enabled "cooks" to make crystal meth with over the counter pharmaceuticals such as ephedrine and pseudoephedrine, as well as industrial chemicals found in hardware stores. Further government crackdowns on the precursor chemicals necessary to make speed resulted in production shifting from the US to Mexico where the raw ingredients are easier to obtain.

Despite methamphetamine being one of the most widely used drugs worldwide, the people who use it are some of the most stigmatized.

## WAYS PEOPLE USE

People use meth in different ways. These are referred to as “routes of administration.”

### **Routes include:**

- 1) Swallowing
- 2) Booty bumping (or hooping)
- 3) Snorting
- 4) Smoking
- 5) Hot railing
- 6) Injecting

Each route influences the onset, duration, and intensity of the high, and impacts the body in specific ways. It is a good idea to regularly switch the route of administration to decrease the harms of repeatedly using in the same way. So if you usually inject meth, periodically give your veins a break and try smoking. If you usually smoke, change the route and go to swallowing for a while so your lungs can recover.

*\*If possible, avoid injecting as this is the most dangerous route.*

### **1) SWALLOWING**

Swallowing meth is considered the least harmful way to use. A gel cap (available at natural food stores) is filled with a dose that has been crushed into powder. The powder can be mixed with juice, coffee (trucker coffee), or wrapped in tissue paper (parachute) for swallowing. The come-on is slower than with snorting, smoking, or injecting, and the rush isn't as strong, but the high lasts the longest. Swallowing is considered a “less addictive” route because the brain doesn't make the association of getting an instant reward like it does with smoking or injecting.

**Onset:** 20-45 minutes

**Risks:** Nausea, stomach pain, vomiting. Damage to the stomach lining may occur with prolonged use. People with ulcers or digestive issues might experience problems with this route. Some users report that even though the immediate rush isn't so intense, the high is very strong. This can be overwhelming if you aren't expecting it.



**Harm Reduction:** If you experience stomach pain or nausea, consider switching your route, taking a break, or stopping altogether. For someone new to swallowing, it might be tricky to gauge how high you will get until it hits you. Start with a lower dose and see how it affects you.

## 2) BOOTY BUMPING (Hooping)

Booty bumping is taking meth up the butt. This route comes on faster than swallowing. People do it by mixing meth with water, drawing the liquid up into a 3ml or 5ml syringe barrel **without a needle**, then squirting the liquefied dose into the anus. Another way is to put powdered speed on a finger, insert it, then dab the rectal lining (dabbing). Others insert a shard of crystal into their anus. The blood vessels that line the rectum absorb the drug quickly.

**Onset:** 3-5 minutes

**Risks:** Crystal meth is abrasive. Inserting it into the anus can cause tiny cuts in the rectum. This increases the risk of contracting or transmitting HIV, hepatitis C, as well as other blood borne infections, especially for those having anal sex. Even with a condom, it is still risky to have anal sex after booty bumping since the abrasive powder or pieces of crystal can tear the condom. Regular booty bumping may also cause hemorrhoids, rectal bleeding, and damage to the mucous membranes of the rectum. Fecal matter on fingers can transmit parasites, hepatitis A, and other infections.

**Harm Reduction:** Use your own syringe barrel (without the needle) for booty bumping. **Don't share gear.** Use lube on syringe or on finger to reduce the risk of tearing rectal lining. Consider not having anal right after booty bumping. If you do, wear a condom but remember abrasive crystals can rip the condom's thin latex. Wash your hands before and after. If you can't, use hand sanitizer.

## 3) SNORTING

Speed is crushed into a powder then snorted into nostril through a straw, a rolled dollar bill (\$5, \$10, \$20), or off the back of your hand. The come on is fast and the rush is intense.

**Onset:** 3-5 minutes

**Risks:** Damage to the nasal passages, sinus infections, congestion, nose bleeds, contracting or transmitting HIV, hepatitis C, and other blood borne infections from sharing snorting gear. Dollar bills are covered in germs which can also cause infections.

**Harm Reduction:** Don't share snorting gear. Use your own straw or put a bump on the back of your hand to snort. If you must share a straw, clean before using with an alcohol pad. Crush meth into a fine powder to cut down on abrasive damage to the sinuses. Alternate nostrils to reduce sinus damage. A saline nasal spray can be used to keep sinuses moisturized if they are dry and scabbing. Steaming with water and clove oil can help soothe irritated nasal passages.

#### 4) HOT RAILING

Inhaling vaporized speed through the nose with a **bent** glass tube. One end of a bent glass tube is heated red hot; the hot end is placed over a line of powdered speed. The hot end vaporizes the drug which is then inhaled into the nostril through the cool end of the tube. The come on is fast and the high is intense.

**Onset:** 5-10 Seconds

**Risks:** Damage to nasal passages and lungs, burns from the hot end of the tube, transmitting or contracting HIV, hepatitis C, and other infections from sharing gear.

**Harm Reduction:** Don't share hot railing gear. Use your own glass tube every time. If you must share, clean the tube with an alcohol swab. Alternate nostrils to reduce damage. Saline nasal spray can be used to keep sinuses moisturized. Use a hot water steam with clove oil to help treat dried out or infected sinuses (be careful not to get clove oil in your eyes).

#### 5) SMOKING

Meth is placed into a bubble pipe, heated with a lighter, then vapor is inhaled through the mouth. Smokers generally use more meth

than people who snort or swallow.

**Onset:** 5-10 Seconds

**Risks:** HIV, hepatitis C, and other blood born infections if pipes are shared. Burns to the lips and fingers from hot pipes. Viruses are passed through cuts, blisters, burns, or sores on the lips or in the mouth from one user to another. Smoke of any kind will cause damage to the lungs.

**Harm Reduction:** Always use your own smoking gear. If you can't, use your own rubber mouth-piece. If you don't have a mouth-piece, at least use an alcohol swab to clean off smoking gear before placing it to your lips. If you are a heavy smoker, consider switching to swallowing for a while, or take a break.



## 6) INJECTING/SLAMMING

Injecting is the riskiest way to use meth.

A dose is crushed, mixed with sterile water in a spoon, cooker, or the syringe barrel itself, then injected into a vein. Evidence suggests shooting meth is more addictive than other routes. The high is very quick and intense, but it doesn't last as long as with smoking or swallowing. People who inject tend to do more speed more often. Tolerance builds quickly with injecting. The crash after slamming can be extremely hard.

**Onset:** 15-30 seconds

**Risks:** Injecting opens a direct path from the outside into the blood stream. Viruses like HIV, and hepatitis C can be passed from one user to the next by sharing needles, ties, filters, and cookers. Other injection related harms include:

- \*MSRA (potentially life threatening anti-biotic resistant staph infection)
- \*Cellulitis (swollen skin and tissue damage from missing the vein)
- \*Abscesses (pus filled infection at injection site)
- \*Blood Clots and Embolisms (free floating blood clot)
- \*Vein Damage

\*Cotton Fever

\*Endocarditis (infection of heart lining)

Injection drug use can result in circulation problems, heart attack, stroke, loss of limb, and death. *Injection drug use poses serious health risks!*

**Harm Reduction:** Learn safer injection techniques (watch ANKORS safer injection video in links section on pg. 29). Go to your local harm reduction organization and get trained!

### If you are going to inject, remember:

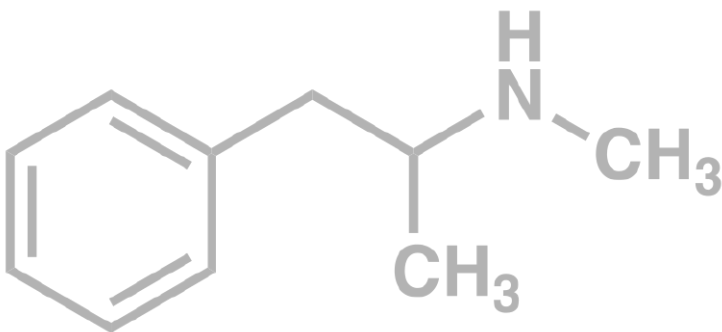
\*Get your drugs tested at a harm reduction organization! Don't use alone! If you do, keep door unlocked for rescue! Use overdose prevent site (OPS) whenever possible. Sometimes meth is tainted with Fentanyl. Get trained in using naloxone and carry it at all times (watch ANKORS naloxone video in links section).

\*Never share rigs - **use your own every time!** That means syringes, needles, ties, cookers, and filters. Always use sterile water. Clean hands with soap and hot water before injecting. If soap/hot water isn't available, use hand sanitizer, a handy wipe, or an alcohol pad.

\*Clean injection site with alcohol pad before shooting. Maintain a clean surface for all injection gear.

\*Rotate injection sites. Give veins a break and switch to another method such as smoking or swallowing for a while.

\*Dispose used rigs into a SHARPS container. Your local needle exchange/harm reduction organization will supply free slamming gear, SHARPS containers, and harm reduction info and supplies.



## REDUCING METH'S HARMS

On side it is easy to forget our bodies basic needs. We often stop eating and drinking water; we may neglect bathing and brushing our teeth, and we can stay awake for days without sleep. Our relationships get impacted - especially when we stop seeing family members, support workers, and friends. And because speed makes us feel invincible, we tend to engage in risky behavior like having unprotected sex, and sharing syringes, snorting, or smoking gear.

These facets of meth use can have a big impact on our health and well being, so it's important to reduce some of the harms by practicing self care.

### Our bodies essential needs are:

- \*Eating
- \*Sleeping
- \*Hydration (drinking water)
- \*Hygiene (cleaning ourselves)

Ignoring any of these makes us vulnerable. Our immune systems fail, we become more susceptible to sickness, and our mental/emotional health gets compromised. No matter where you are at in your relationship with speed, there are steps you can take toward maintaining your well being.

If you use meth, the following tips can help you take better care of yourself:

### TRACKING

Keeping track of your use can help you gauge where you are at with crystal. Tracking enables you to slow down or taper off before you get in too deep.

- \*Monitor your meth use - see **Where Are You At?** section, pg.14
- \*Moderate your meth use - take a break or quit before you lose control.

## EATING

Meth decreases your appetite while simultaneously speeding your heart rate. This increases your body's energy needs. If you don't replace the calories meth burns, your body takes it from other places like your fat reserves, muscle mass, and bones.

### **Remember:**

\*Regularly eat nutritious meals: fruit, vegetables, protein.

\*Smoothies are a great way to quickly nourish yourself!

\*Take multi-vitamins - they will help replenish what drugs take from your body.

**Pro Tip:** if you know your going on a run with Crystal, binge on good food before you get high-this will help your body get through.

## HYDRATION

Maybe you don't feel thirsty, but body functions like digestion, absorption, saliva creation, circulation, and the transportation of nutrients all depend on you being hydrated to function properly. If you're dehydrated you can't efficiently flush toxins out of your system, your kidneys get stressed, and you're more susceptible to tooth decay caused by dry mouth.

### **Below are a few hydration tips:**

\*Drink plenty of water (not sugary soda or alcohol) - eight glasses a day!

\*Fortify water with electrolyte/vitamin packets like Emergen-C. These boost your immune system and taste good!

\*Saliva contains substances that fight cavities - **remember - a dry mouth is more susceptible to tooth decay.**

\*Chewing sugar-free gum will also help keep your mouth moist.

## HYGIENE

Side can make us forget to keep clean. Without proper hygiene we become vulnerable to skin infections. Skin infections can become serious, life threatening health problems especially if they enter and infect our blood stream through injection drug use. The risk of developing an infection greatly increases if you don't keep your body clean.

Here are a few ways to practice good hygiene:

\*Shower regularly (if you don't have access to a shower, sponge bath).

\*Wash hands with soap/water, handi-wipes, or hand sanitizer.

\*Clean injection site with an alcohol pad before you slam.

## SLEEP

Your body needs it. Go 24 hours without sleep and your memory slips and decision making becomes impaired. Go 48 hours or more without sleep and you will exhibit the signs of **psychosis**. Sleeping allows your body to heal itself and gives your brain a reset.

**Pro Tip:** if you are planning to binge on side, prepare for it by resting up.

## RELATIONSHIPS

Try and maintain at least one supportive relationship with a person who doesn't use meth. They can be a friend, family member, or support worker. Having someone to lean on will help when you are going through a rough time. Check in with them when you aren't sure if you are losing touch with reality. This person can also help connect you with resources like housing, food, medical care, detox/treatment, and mental health support.

## SKIN PICKING

Do enough meth and you may feel like bugs are crawling on or under your skin. These sensations are known scientifically as *formication*, a condition which is common for heavy meth users. As real and as strong as the urge is, try not to scratch or pick!

Picking and scratching makes you vulnerable to contracting or spreading blood borne infections.

### Here are some helpful ideas if you get the urge to pick:

\*Drink something with electrolytes - juice, coconut water, Emergen-C. These will help ground you and take your mind off the creepy sensations.

\*Nibble on some food like fruit or nuts.

\*Put a thick rubber band around your wrist and snap it when you get the urge to pick.

\*Ask a friend who isn't high for confirmation - if they can't see the bugs you believe are there, trust their eyes!

**Pro-Tip:** if your sober friend isn't by your side, take a picture of the body part you believe is infested and text it to them. If they don't see the bugs in the picture, believe them!

\*If you have picked, clean your wounds with soap and water, apply antibiotic ointment, and cover them with band-aids.

\*Keeping sores clean and covered will help prevent spreading infections.

*\*Sores that are hot, swollen, and oozing with puss should be checked out by a street nurse or doctor immediately!*

## ORAL HEALTH

On meth we crave sugary treats and soft drinks. At the same time, we often forget to brush and floss our teeth. Furthermore, dehydration gives us dry mouth and shuts our salivary glands down. All of this can spell disaster for our oral health.



## Tips to help keep your teeth healthy and in your mouth:

\*Remember - **dry mouth is dangerous!** Saliva contains substances that fight tooth decay.

\*Drink plenty of non-sugary liquids to help maintain oral health.

\*Brush and floss twice a day.

\*Chew sugar-free gum to keep your mouth moist.

\*Take calcium/magnesium supplements to replace minerals depleted from teeth and bones.

\*Visit a dentist if you can afford it. Some communities have dentists who offer low income dental care. Ask your harm reduction provider if this service is offered in your town.



## WHERE ARE YOU AT?

People use meth for various reasons. Some do it strictly for recreational purposes, to study for exams, to escape from problems, or just to feel good for a change.

Not everyone who tries meth will become addicted. Still, methamphetamine does provide a very powerful high. This fact places some people at greater risk of dependency.

If you're doing side, it's a good idea to keep track of your use. Tracking can help you modify your intake before you lose control. Below are some ways to gauge where you're at with meth.

Which category do you fall into?

**Experimental:** You've tried speed once or twice; it really isn't your thing.

**Periodic:** You party on meth occasionally and enjoy the high, but you can take it or leave it. When you use speed, you find it relatively easy to keep things in check.

**To Get Shit Done:** You use crystal to study for exams, write a paper, to drive all night, or complete a project. Students, artists, workers, and truckers can fall into this category.

If this sounds familiar, be mindful. You may trick yourself into believing that without Tina you can't perform.

**Sex:** You take meth to enhance sex. Do you use a few times a year, several times a month, every weekend?

If you mix sex and meth often, be careful. This type of use can lead to dependency, erectile dysfunction in men, loss of interest in sober sex, as well as contracting or transmitting HIV, hepatitis C, or other STI's through unprotected sex.

**Regular:** You get high several times a week. You've binge and know what it's like to go for a few days without eating or sleeping. Sometimes you choose speed over other things you care about. Your tolerance is growing which means you need to spend more money

to get high. If you're at this stage, you may want to consider getting things under control before they get totally out of hand.

**Habitual:** Getting high is your priority. Relationships, school, housing, job, health, and hygiene takes a back seat to it. When you're out of speed you get stressed. Sometimes you tweak from regular binges where you stay awake for days, hearing voices, seeing shadow people, staring into the mirror, and digging or scratching your flesh. You crash hard. Sleep for 24 hours straight then wake up and start all over again. Meth has become the only thing that makes you happy; without it you wonder: what's the point?

If this is where you're at and you want to stop doing meth, getting into detox and a treatment center can help. Your local Mental Health and Substance Use office can connect you with supports.

If you aren't interested in taking a break or stopping, use harm reduction techniques to lessen some of meth's impacts on your health (see **Reducing Meth's Harm** pg. 9).

**\*Remember practicing self care is showing love for yourself!**



# METH PSYCHOSIS // OVER AMPING

Meth psychosis happens when you take too much meth (over amping). It can be terrifying for the person experiencing it.

## Common Symptoms

**Paranoia:** You feel people are out to get you; that you are being followed, or under surveillance. Trusted friends, family, or support workers suddenly seem like enemies conspiring against you. A feeling of distrust takes over. The paranoia can lead to aggressive behavior towards self or others.

## Hallucinations/Sensations:

These vary, but commonly appear as:

- \*Blue lines streaking across your hands
- \*Bugs crawling on or under your skin
- \*Black crystals stuck in the back of your mouth
- \*Bruises that appear from merely touching your flesh
- \*Shadow people
- \*Buildings moving from beneath you
- \*Hearing voices that others can't



## Dealing with Psychosis

The symptoms of meth psychosis don't last forever. They will subside and eventually go away if you take a break from using or quit entirely. How long this takes depends on the individual, how much meth they use, and for how long. In the meantime, here are a few things that can help get you through when you're tweaking:

\*Doing more meth when you are over amped will make psychosis worse!

\*Remember that meth psychosis is temporary - **it will pass!**

\*Try to find a mellow and safe place to ride out the episode in peace and quiet.

\*Sip water or juice (not sugary soft drinks).

\*Putting a packet of vitamin C powder like Emergen-C in your water will help ground you and flush toxins out of your system (**remember to pee often**).

\*Nibble something nourishing (not junk food) like fruits, vegetables, or nuts (the thought of eating will seem disgusting but eating helps a person ground out).

\*Practice the 4x4 breathing technique.

(inhale for a count of 4 seconds, hold breath for 4 seconds, exhale for count of 4 seconds, hold for 4 seconds, repeat).

\*Try smudging yourself with sage, cedar, or juniper.

\*If you have access to a tub, take an Epsom salts bath (use 1 cup or more of salts-your skin will absorb the magnesium which helps alleviate anxiety and tension); a few drops of essential oil in the water - like lavender oil - will help calm you.

\*Avoid triggering environments like busy streets, shopping malls, or city centers as much as possible while you're trying to mellow out.

\*Try not to pick or scratch your flesh.

\*Using Fentanyl (down) to take the edge off puts you at high risk of fatal overdose. Carry Naloxone and know how to use it!

## Calling for Help

If you are tweaking too hard to deal with it on your own, time to call for help. It is a good idea to plan ahead. Make an agreement with a trusted friend who doesn't use meth or a support worker. Create an emergency plan and commit to it!

If no one is available to help call 911.

## Preventing Meth Psychosis

Learn to spot the warning signs of meth psychosis early on, respond accordingly, and reduce the chances of having an episode.

Take a break from Tina if you experience the following:

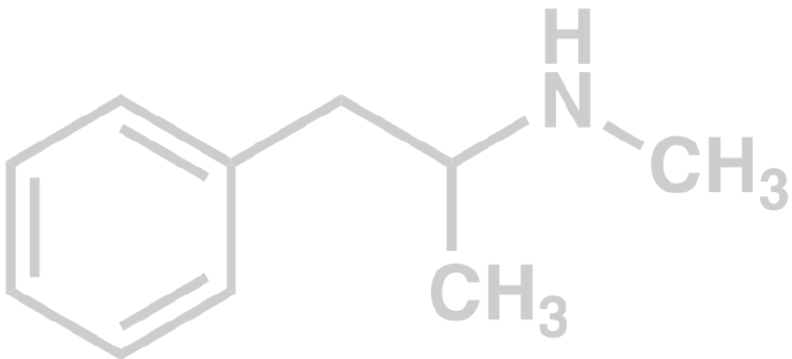
\*Suddenly become suspicious of friends, family, support workers, or people on the street.

\*See or hear things that other people can't.

\*Feel increasingly anxious, agitated, fidgety, or depressed.

\*You've been bingeing on meth for two or more days in a row.

\*You have lost more than one full night of sleep.



## THE CRASH

What goes up must come down. After experiencing that “ultimate high,” crashing sucks!

### **Common symptoms include:**

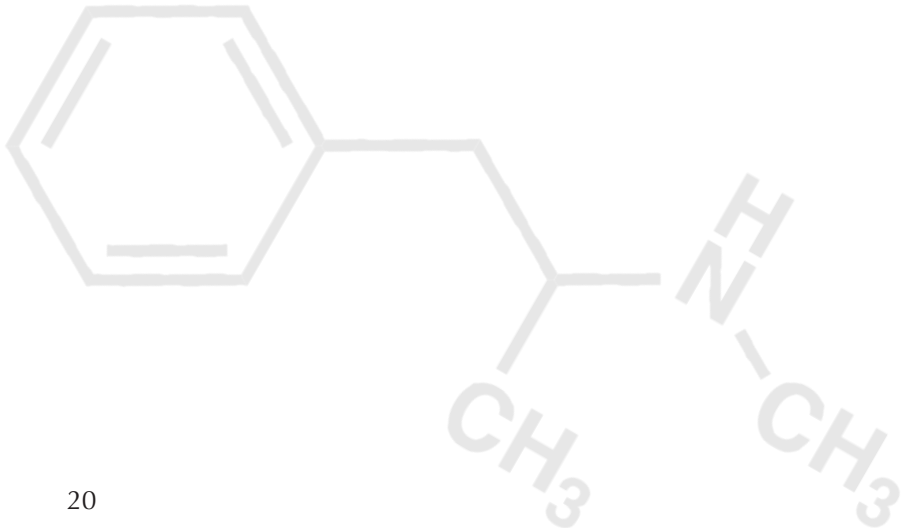
- \*Fatigue
- \*Depression
- \*Emotional/Physical Exhaustion
- \*Mood Swings

Everything is dull; everyone is annoying. You may even feel that without speed there is no point to life. Biologically speaking, it makes sense. Your brain's feel good chemicals are spent. All you can do now is aim for the softest possible landing.



## Here are some tips to get you through the rough time:

- \*Remember the symptoms of a crash are your body's way of resetting - they will eventually pass.
- \*Give your body a break and don't use more speed for a few days, consider taking a longer break, or quitting.
- \*Eat nutritious food (not junk food).
- \*Drink plenty of fluids (juice, water, chamomile tea).
- \*Take calcium-magnesium supplements (these will ease tension and anxiety).
- \*Find a safe place where you can chill out for a while; rest and sleep.
- \*Reach out to a trusted friend, family member, or support worker-let them know what you are going through, and ask for help (food, a place to rest, a shower).
- \*Avoid triggering situations and people.
- \*Find a peaceful place in nature where you can sit and relax.
- \*Consider talking to a councillor if the depression is overwhelming.
- \*Maybe now is the time for detox and treatment?



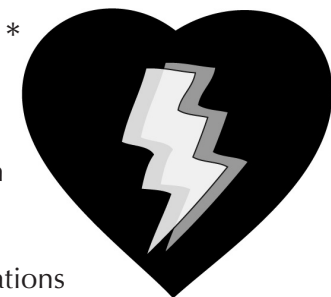


# OVERDOSE

Overdose occurs when the body has more drugs in it than it can deal with. Meth overdose can lead to death. Fatal meth related overdoses are on the increase in both Canada and the US.

## **SYMPTOMS of METH OVERDOSE:**

- \*Red face
- \*Stroke or heart attack
- \*Racing or irregular heartbeat
- \*Extreme paranoia, anxiety, or aggression
- \*Body shakes/trembling
- \*Fever
- \*Profuse sweating
- \*Hallucinations
- \*Rapid breathing and/or eye movement



## **If you suspect someone is having an overdose:**

- \*Call 911 right away! Remain with person until paramedics arrive.
- \*Stay calm, don't argue or try to restrain the person - this can lead to aggressive behavior.
- \*Be re-assuring - let the person know help is coming and everything will be okay.
- \*Try to create a mellow environment-turn off loud music and bright lights.
- \*If they are receptive, a cool cloth to the neck, forehead, or wrists can decrease temperature and sooth the person.
- \*If the person has stopped breathing or there is no pulse, get someone with training to perform CPR.
- \*Be especially careful if you're combining meth with opiates like down/fentanyl/heroin! The signs of opiate overdose are different than with stimulants. Learn to identify the signs, make sure to have a Naloxone kit on hand, and know how to use it. Also, remember to get your drugs tested by your local harm reduction organization.**

## TAKING A BREAK // TREATMENT

Unlike treatment for opioid dependency, currently there are no pharmaceutical substitutes for methamphetamine addiction. Ongoing research does aim to find a replacement drug in the future. In the meantime, treatment options for meth do exist. Treating meth addiction is similar to treating other stimulant addictions like cocaine, with similar success rates. Visit your local harm reduction organization or Mental Health and Substance Use office for advice on how to get started with a detox and treatment program.

If you are thinking about taking a break or quitting, this info adapted from ACT Toronto will give you an idea of what to expect.

Meth withdrawal is more mental than physical. Hard as it is, coming down from it is the body's way of resetting.

### **You'll probably feel:**

\*Moody                      \*Sleep a lot                      \*Experience intense cravings

**Remember: if you can stick it out, withdrawal symptoms will pass.**

Below is a general idea of what the early stages of taking a break or quitting meth is like:

### **0-2 Weeks:**

Acute Withdrawal Phase.

This is the hardest part to get through.

### **Some of the symptoms include:**

\*Exhaustion                      \*Depression                      \*Irritability

\*Anxiety                      \*Intense cravings for speed

\*Sleeping a lot                      \*Excessive hunger                      \*Paranoia

\*Swinging emotions (from anger to hopelessness)

\*Scattered thoughts                      \*Inability to concentrate or focus

\*Aches, pains, headaches                      \*Hopelessness

## Coping With It

Your body and mind are resetting. Take it easy on yourself. Getting through will take some time.

\*Sleep as much as you can.

\*Minimize stressful situations or people that trigger you.

\*Hydrate and eat plenty of nourishing foods (see Crash section pg.19)

\*Call on supportive people to help you.

\*Talk to an addictions councillor.

\*Join a support group.

**\*Remember - as hard as this stage is, it will pass!**

### 3 Weeks-1 Month:

The worst of withdrawal is likely over, but cravings for meth remain.

You are probably still dealing with:

\*Depression

\*Restlessness

\*Difficulty sleeping

\*Anxiety

\*Boredom

On the flipside, you are starting to put some weight back on and feel healthier. Mental clarity is coming back and the mood swings are a bit more manageable.

\*Now is a good time to start building a routine. Re-engage with life, celebrate what you have accomplished so far, and set some new goals for yourself.

**\*Get physical - exercise and use your body!**

### 1-3 Months:

Cravings are still there, but they are more manageable. Mood still fluctuates, but maybe not so extremely. You might be re-establishing connections with family and friends. Housing and income might also be getting more secure by now. Sense of confidence in your

ability to cope without meth is increasing but be careful: **many people relapse at this point because they believe they have their addiction under control.**

The importance of talking to an addictions councillor/joining a support group cannot be overstated!

\*Contact your local harm reduction organization or Mental Health and Substance Use office to get connected with supports.



## SEX & METH

Meth stimulates sexual activity. It is known to lower inhibitions, boost sexual confidence, heighten the sense of pleasure, and increase sexual stamina. When we're high on side it's easy to make risky sexual choices we might not make while sober, like having unprotected sex, or choosing partners we normally wouldn't. This makes people who mix sex and meth vulnerable to contracting or transmitting HIV, hepatitis B and C, sexually transmitted infections (STIs) like syphilis and gonorrhea, and unwanted pregnancy.

\*If you plan on getting laid while high on Tina, do it safely!

\*Use condoms and lube

### CHEMSEX

Chemsex is a gay, bi-sexual, and men who have sex with other men (gbMSM) sub-culture. It uses drugs to enhance and sustain sexual encounters. The scene began in England but is now on both sides of the Atlantic.

In North America, Chemsex is sometimes called Party and Play (PnP). Hook-ups between two people, or entire groups, are often arranged through online dating apps like Grindr. Willing participants are directed to a private house, apartment, or other discrete location where they use drugs and have sex, sometimes non-stop, for days.

#### **Some of the key words used in online profiles for Chemsex hook ups include:**

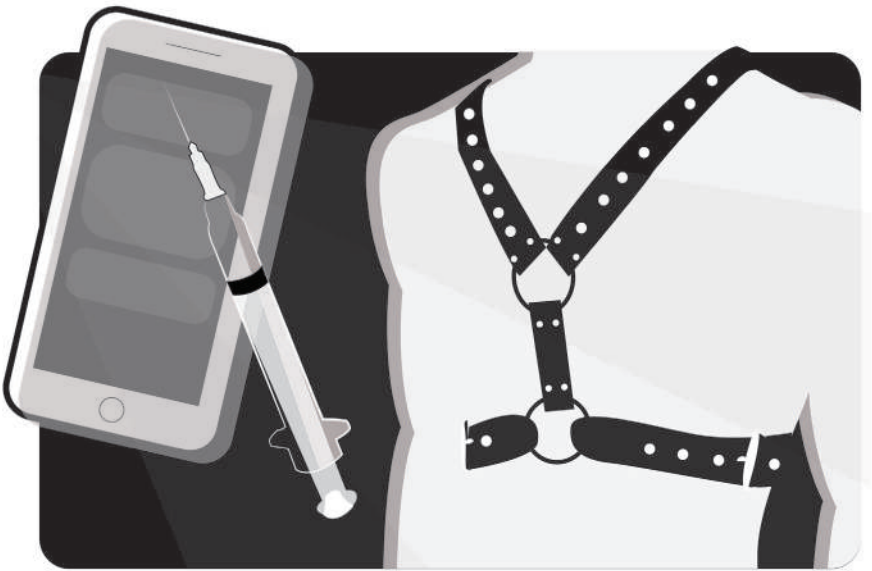
\*Chems

\*HnH (High and Horny)

\*PnP (Party & Play)

\*Favs

While doing drugs and having sex is nothing new, in the past decade, drug use trends among men who have sex with men have shifted. "Club drugs," such as cocaine and ecstasy, appear to be less popular than drugs associated with Chemsex, which include methamphetamine, mephedrone, gamma-hydroxybutyrate (GHB), and gamma-butyrolactone (GBL). Crystal meth is one of the primary PnP drugs because it kicks sexual desire into overdrive and increases sexual stamina. But using meth for sex has its risks.



## RISKS

\*Research shows gbMSM who PnP are more likely to have condomless anal sex with multiple partners (even if they are HIV positive).

\*The chance of contracting sexually transmitted infections such as syphilis, gonorrhoea, and chlamydia are higher for men who engage in Chemsex than for those who don't.

\*Sexually transmitted infections such as syphilis, gonorrhea, and chlamydia are higher for gbMSM who engage in Chemsex than gbMSM who don't do Chemsex.

Interactions between different drugs used in Chemsex can also be problematic. For example, mixing GHB and alcohol is a dangerous combination that can be fatal.

Sharing injection, smoking, snorting, booty bumping, or hot railing gear increases the risk of spreading or contracting:

\*HIV

\*Hepatitis B, C

\*Blood borne infections

\*Used syringes left laying around can cause needlestick injuries and spread disease.

Slamming also increases chances of vein damage, blood born infections and addiction (see WAYS PEOPLE USE - INJECTION/SLAMMING section pg. 7).

### **Repeated crystal meth use in Chemsex can lead to:**

- \*Impotency for some men (crystal dick).
- \*Loss of interest in sober sex
- \*Dependency.

There is also the issue of consent. With so many drugs and sleep deprivation influencing a person's behavior, the lines of consent can get blurry. At certain PnP gatherings, just being there can imply consent.

- \*Get clear on the rules of the party **before** you play.
- \*Reports of rape and robbery have occurred within certain PnP circles.

### **HARM REDUCTION for CHEMSEX (Written by Joe Reiner)**

For harm reduction tips on safer injection, smoking, snorting, hot railing, swallowing, and booty bumping see **Ways People Use** section of this guide (pgs.4-8).

- \* One of the best resources we have to keep one's self and others safe in a Chemsex environment is EACH OTHER. Knowing the signs and symptoms of overdose is critical (See overdose section pg. 21). In case of opioid overdose, know the signs, have Naloxone on hand, and know how to use it.
- \* Use of traditional condoms or internal condoms with personal lubricant and/or PrEP are still some of the most effective barrier methods to prevent the transmission of HIV, Hepatitis and other STI's such as chlamydia, gonorrhea and syphilis.
- \* Although it may seem basic, remaining hydrated is critical. Rule of thumb should be to have a glass of water or sports drink every hour.

\* If you have a Prince Albert piercing, consider removing it while having Chemsex as to avoid injury and hence bleeding. The same thing goes for rings, bracelets and long fingernails.

\* If possible, use your own rectal douche. Otherwise, wipe any that you use clean of oil or grease and disinfect it in a bleach solution before use.

\* Take breaks often and especially between partners if in group situations. Have a chat or take a nap. Start a conversation about your HIV status and viral load.

\* Keep used and unused sex toys separated. It's advisable for everyone to bring their own sex toys. Otherwise, make sure all toys are properly disinfected in bleach and water for at least 5 minutes.

\* Do not share syringes, needles or snorting equipment. Invisible particles of blood can transmit Hepatitis C which can survive for up to six weeks outside the body on materials such as plastic, rubber, steel, etc.

\* Wash your cock, balls, ass and groin with a mild soap and rinse with lots of water. Wash your pubic hair too; lubricant residue containing blood particles can stick to your pubic hair quite easily.

\* Party and Play form. Keep a record of what you are taking, when and how much. This is handy for knowing when it's okay to take more, but it's also useful to know what you've taken in case something goes wrong.

## **A Word about PrEP (Pre Exposure Prophylaxis)**

For men who have sex with other men, PrEP can help prevent the transmission of HIV. PrEP is used by people who are HIV negative to help prevent acquiring HIV. PrEP stands for pre-exposure prophylaxis; and is a once daily oral pill (or taken as prescribed by your doctor) that enhances the immune system to inhibit the virus from replicating or establishing a permanent infection within the bloodstream.



Taking PrEP involves seeing a doctor or nurse practitioner every three months for HIV testing and screening for other sexually transmitted infections (STI's), monitoring for possible side effects, and on-going support to remain well informed around ones sexual health.

PrEP only helps to prevent HIV - it does not protect against other STI's (such as chlamydia, gonorrhea and syphilis) or other infections such as hepatitis A, B and C. Nor does PrEP protect against pregnancy. PrEP is now publicly funded for individuals identified at high risk of contracting HIV. If you feel that getting on PrEP might be a good option in protecting your health, talk to your doctor or nurse practitioner. More information on PrEP can be found at:  
[www.catie.ca/en/prep](http://www.catie.ca/en/prep)

## LINKS FOR FURTHER READING

### **ANKORS Safer Injection Video Series:**

[www.youtube.com/channel/UCWWTISYQM58JKm9R5q3ZVnvQ/featured](http://www.youtube.com/channel/UCWWTISYQM58JKm9R5q3ZVnvQ/featured)

### **ANKORS Naloxone Training:**

[www.youtube.com/watch?v=JyFq4aZzdM](http://www.youtube.com/watch?v=JyFq4aZzdM)

### **Tweaker (dot) Org is a San Francisco based source of info on meth and the gay party scene:**

[www.tweaker.org](http://www.tweaker.org)

### **The Drug Policy Alliance is a US based resource on the Four Pillars Approach to Methamphetamine:**

[www.drugpolicy.org/resource/four-pillars-approach-methamphetamine](http://www.drugpolicy.org/resource/four-pillars-approach-methamphetamine)

### **CATIE is Canada's leading source for harm reduction information:**

[www.catie.ca/en/home](http://www.catie.ca/en/home)

### **AIDS Committee of Toronto published the guide, Staying Off Crystal For a Day or Longer:**

[www.actoronto.org](http://www.actoronto.org)

## **ABOUT ANKORS**

**ANKORS** provides a multitude of services, with offices in Nelson and Cranbrook BC as well as rural outreach and education throughout the Kootenay region. ANKORS programs are based on the belief that services are provided in a non-judgmental manner without prejudice that ensures individuals' right to anonymity and confidential access. We serve those living with and at the greatest risk of acquiring HIV / AIDS and/or HCV, who have difficulty obtaining services elsewhere, especially due to substance use, mental illness, sexual orientation, gender identity, race and ethnicity, and/or other social barriers. ANKORS was established in 1992 as a non-profit society.

Please feel free to email us with any comments or suggestions on what we are presenting here.

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# ANKORS