What’s Wrong With Ecstasy & Other Club Drugs

Presenter’s RESOURCE GUIDE

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Drug education and prevention programs have been important tools in the war on drugs. However, new enemies have appeared on the battlefield. **Club Drugs**. These are so named because they are being used at all-night dance parties known as “raves.” Adolescent consumption of Club Drugs is rising. **Ecstasy, LSD, Ketamine, and GHB**, are gaining popularity among teenagers.

Ecstasy users say that this drug produces feelings of love and acceptance, higher self-confidence, and a general sense of well-being. GHB, or Liquid Ecstasy, is supposed to provide euphoria and calmness. Ketamine, an animal tranquilizer, puts users in a dreamy, surreal state. LSD is taken for the experience of a psychedelic high, complete with hallucinations. These are some of the reasons given why these drugs are so “attractive” to the user. What most teenagers don’t know or consider are the extreme dangers Club Drugs present. There is a common misperception that these are safe and “fun.” Some young people don’t think Club Drugs are “real” drugs. Many even think that these drugs are legal!

But as you will see in the video and resource materials, Club Drugs can cause serious psychological and physical problems for users. Paranoia, depression, instability, dehydration, heat stroke, heart attack, respiratory failure, kidney failure, brain damage, coma, and even death can result from the uninformed choice of using Club Drugs.

**What’s Wrong With Ecstasy and Other Club Drugs** will give your students information on these dangers to help them make the right decision to stay away from Club Drugs. It will dispel common myths associated with Club Drugs. It will give them a look at the lives of unfortunate teens who made a terrible mistake and will never be the same because they chose to use one of these Club Drugs. It will introduce the positive, social norms message that MOST KIDS DO NOT USE Club Drugs. This video, with its Presenter’s Guide will reinforce that much overlooked truth and message as a final strategy. In it students will see that Club drugs are too dangerous to try even once, and that only a minority of their peers in actuality are willing to take that gamble. Awareness and education is the beginning of a lifetime of prevention.
PROGRAM GOALS

After watching the video and completing the student activities, your students will know:

√ The physical and psychological effects of Club Drugs.
√ The damage Club Drugs do to their brain and bodies.
√ The most common street or slang names of Club Drugs.
√ About actual lives that have been shattered because of Club Drugs.
√ About the misperceptions of peer influence.
√ That experimenting with Club Drugs even once is always a big risk.
√ That most of the information they get from the Internet or from friends about Club Drugs is false.
√ That Club Drugs are made in dirty labs and other unsanitary places.
√ The extreme danger and the ease of overdose inherent with Club Drug use.
√ How to distinguish between the fictions and facts of Club Drugs.
What’s Wrong With Ecstasy
& Other Club Drugs

VIDEO SUMMARY

The video opens showing undercover D.E.A. footage of a “rave party.” Clips of frenetic dancing then intercut with EMTs wheeling out people on gurneys. Throughout the film Amanda, Rosie, Jenny, Sean, Lindsay, Dusty, Robyn, Buddy, Emily, Kristian, Christine, Michael and Muriel, drug-free teens, give their opinions on the rave experience.

The first drug presented is Ecstasy. Its slang names appear on screen: E, XTC, X, Rolling. Amanda relates a story about a girl who took Ecstasy for the first time. After going home to bed, she vomited in her sleep and died. Rosie tells a story about a guy who overdosed the first time he tried it.

D.E.A. Demand Reduction Coordinator Michael Streicher stresses the point that you never know what you are getting when you take Ecstasy. According to Streicher, “We once made two separate seizures within weeks of each other. In one seizure every Ecstasy tablet contained .10 milligram of Ecstasy. In the other seizure each tablet contained 193 milligrams of Ecstasy. That means the Ecstasy in the second seizure was 1,930 times stronger than those in the first seizure. This can lead to easy overdoses.”

Dr. Jorge Martinez tells us the long and short term effects of Ecstasy. “It increases blood pressure, which can lead to stroke, heart attack, and kidney damage. An increase in body temperature can cause brain damage. Intense activity can cause a breakdown of muscle tissue, which causes a release of potassium that can lead to cardiac arrest and kidney failure. Ecstasy also alters the brain every time you use it.”

The second drug presented is Ketamine. It’s slang term is Special K. Lieutenant Reginald Jacque of the Narcotics division at the New Orleans Police Department explains that Ketamine is an animal tranquilizer. It can be in powder or liquid form. Dr. Peter Sinor, a veterinarian, tells how Ketamine is used on animals in surgery.

Death from Ketamine can happen the first time it is ever used. This is almost what happened to Erin Rose. Erin was an intelligent and beautiful girl described by her mother as someone who “could have done anything” in life. After taking Ketamine once, she overdosed and went into a coma for two weeks. She suffered permanent brain damage and had to learn to talk, walk and even tie her shoes all over again.

The next drug covered is LSD. Its street names include Acid, Windowpane, and Blotter. LSD is a hallucinogenic drug. Dr. Martinez talks about some of the “stupid” things people do on LSD, including a story of one boy who stared at the sun too long, burned out his retinas and became blind.

GHB is the next drug in the video. Its slang names are Liquid X, Grievous Bodily Harm, and Max. Lt. Jacque explains that it is a liquid central nervous system depressant that can be deadly, especially when mixed with alcohol. According to Dr. Martinez, this
mixture can cause a person to stop breathing. He relates that he once treated eight rave-goers in one night, teenagers who had to be hooked up to respirators for twelve hours to save their lives.

One of the biggest problems with Club Drugs is that you don’t know where they came from or where they were made. Usually they were “cooked” in dirty labs, basements, garages, and mobile trailers. Because of that drug strength is inexact and cut with fillers such as rat poison. Another problem is misinformation. Teens often get information from the Internet or friends on how much of a certain drug to take. Much of that information is incorrect and can have grave consequences to the user. In addition to these problems is the obvious one of legality. Buying, selling, or taking Club Drugs can land you in jail.

In conclusion Mike Streicher reminds us that the good news is that most kids never take Club Drugs—ninety seven percent, in fact. This is the message we should strive to get across. By focusing on the positive and spreading the message that most kids don’t use drugs, we can avoid having kids try them just to “fit in.”

But we can’t forget that for the small percentage who do use Club Drugs there are many terrible consequences. In addition to attacking your physical health, these drugs deaden your emotions. They can lead to depression, a lack of motivation and disinterest in activities that keep you fit and in good health, both mentally and physically. Drugs destroy your sense of self worth. The best way to avoid these consequences is easy: Don’t start!
This Resource Guide is designed to supplement information from the video *What’s Wrong With Ecstasy and Other Club Drugs*. Like the video it is divided into four main sections:

**ECSTASY**

**KETAMINE**

**LSD**

**GHB**

Here are suggestions for using the material in this Presenter’s Resource Guide, based on how many class periods you have for your presentation.

**Two Class Period Presentation**

**First Class Period:**

1. Before you show the videotape, give each student the pre-test, *What’s Your Club Drug IQ?* to complete. Collect these for use during the next class period.

2. Show *What’s Wrong With Ecstasy and Other Club Drugs* video (25 minutes.)

3. When the video ends pass out the *Video Recap and Review* post-test questions. After your students have answered them, review correct answers to open discussion.

**Second Class Period**

1. Give each student the *What’s Your Club Drug IQ* pre-test they completed in the first class period. Distribute the *Fiction and Fact* pages from each of the Club Drug sections. *Fiction and Fact* statement numbers correspond to *What Is Your Drug IQ?* questions for each drug. Compare students’ pre-test answers with *Fiction and Fact* statements to stimulate discussion about what they have learned from *What’s Wrong With Ecstasy and Other Club Drugs*.

2. Give out the *Personal Choices* and *Setting Goals* handout for students to fill out. Discuss with students how the choices they make and the goals they set for themselves relate to what they have seen in *What’s Wrong With Ecstasy and Other Club Drugs*.

3. Distribute *Student Handouts* for each of the Club Drug sections for students to take home. Encourage them to talk to their parents about what they’ve learned from *What’s Wrong With Ecstasy and Other Club Drugs*. 
SUGGESTIONS FOR VIDEO PRESENTERS  
(Continued)

One Class Period Presentation

1. Show What’s Wrong With Ecstasy and Other Club Drugs video (25 minutes.)

2. When the video ends pass out the Video Recap and Review post-test. After students have answered these, review correct answers to open discussion.

3. Distribute Fiction and Fact sheets and Student Handouts from each of the Club Drug sections for students to take home. You may also want to copy and distribute the Personal Choices and Setting Goals pages at the end of this guide. Encourage your students to talk to their parents about what they’ve seen in What’s Wrong With Ecstasy and Other Club Drugs.

An Enrichment Activities page at the end of the Resource Guide lists suggestions for group projects as well as individual research assignments. These activities reinforce the information learned and motivate students to become drug-free advocates and peer leaders.
Pre-Test

To be used before showing the video and in conjunction with Fiction & Fact pages found in each Club Drug section
WHAT IS YOUR CLUB DRUGS I.Q.?
Pre-Test

ECSTASY

1) Have most teens across the country tried Ecstasy?

2) Are there any negative short or long-term side effects from taking Ecstasy?

3) Is Ecstasy addictive?

4) Are parties that don’t sell alcohol usually drug-free?

5) Is Ecstasy generally safe?

6) Where is Ecstasy made?

7) What medical uses does Ecstasy have?

KETAMINE

1) What is Ketamine used for?

2) Is Ketamine legal?

3) Can someone die from taking Ketamine?

4) Is Ketamine considered a “date rape drug?”

5) How much Ketamine is too much?
WHAT IS YOUR CLUB DRUGS I.Q.?
Pre-Test

LSD

1) What does LSD look like?

2) Where is LSD made?

3) How fast is LSD absorbed by your body?

4) Are there any benefits to taking LSD?

5) How long does LSD last?

6) Can LSD cause people to see or hear things that aren’t really there?

7) Are there any side effects from taking LSD?

GHB

1) What are the medical uses for GHB?

2) Is GHB a safe substance?

3) What does GHB overdose look like?

4) Is GHB addictive?

5) Is Liquid X just another form of Ecstasy?

6) Has anyone ever died from taking GHB?
Post-Test

To be used after the video has been shown
VIDEO REVIEW & RECAP
Post-Test

ECSTASY

True/False:

_____ 1) No one has ever died from taking Ecstasy.

_____ 2) You don’t have to worry about getting hurt at a rave because other people there will take care of you.

_____ 3) It isn’t possible to overdose on Ecstasy.

_____ 4) Ecstasy can have effects on the body that can last for life.

_____ 5) If you know the person you get Ecstasy from, you should feel confident and safe.

_____ 6) All Ecstasy tablets have the same ingredients.

_____ 7) Users do things on Ecstasy that they would never do otherwise.

Fill in the blank:

1) Ecstasy alters the __________ every time you use it.

2) According to Lt. Jacque, Ecstasy is classified in the __________ drug family.

3) Ecstasy has no __________ value. It isn’t used legitimately in the healthcare field.

4) A slang term for Ecstasy is __________.

5) The acronym for Methylenedioxymethamphetamine, the main ingredient in Ecstasy, is __________.
VIDEO REVIEW & RECAP
Post-Test
KETAMINE

True/False

_____1) Ketamine is used for animal surgeries.

_____2) Ketamine is a legal drug.

_____3) According to the video, Erin Rose has to learn to walk and tie her shoes all over again.

_____4) Erin Rose will eventually go back to normal.

_____5) Erin Rose thought Ketamine was harmless.

_____6) It isn’t possible to overdose on Ketamine.

_____7) Erin stopped breathing for eight full minutes.

Fill in the blank:

1) Ketamine is an __________ tranquilizer.

2) Ketamine comes in powder or __________ form.

3) Erin Rose suffered __________ damage from taking Ketamine.

4) Erin was in a __________ for two weeks.

5) A slang term for Ketamine is __________.
VIDEO REVIEW & RECAP

Post-Test

LSD

True/False:

____1) Most high school kids have tried LSD.

____2) LSD can cause distorted perception and loss of control of your actions.

____3) As long as you take care of your responsibilities, LSD can’t hold you back from reaching your full potential.

____4) In the video, Rosie testifies that no one she knows has had any problems from taking LSD.

____5) LSD is an hallucinogenic drug.

____6) Taking LSD can put you in dangerous situations.

____7) Repeatedly taking LSD can cause a person to be “burnt out” or “spaced out.”

Fill in the blank:

1) A slang name for LSD is __________.

2) LSD can cause people to see things that aren’t there. These are called _________.

3) Taking too much LSD can cause a bad ________, with severe paranoia and horrifying hallucinations.

4) Dr. Martinez tells a story of a boy who burned out his __________ from staring at the sun too long while on LSD.

5) __________ poison is sometimes added to LSD.
VIDEO REVIEW & RECAP
Post-Test

GHB

True/False:

  _____1) GHB is a central nervous system depressant.
  _____2) GHB abusers thought to be sleeping, were actually found dead at raves.
  _____3) GHB is produced in safe, legitimate medical laboratories.
  _____4) According to Michael Streicher of the DEA, some people smuggle drugs in body cavities.
  _____5) You will have a lot more friends and be much more popular if you take GHB.
  _____6) The best way to avoid the risks of GHB is not to use it in the first place.
  _____7) People who are “strung out” on drugs always get help and acceptance from others.

Fill in the blank:

1) A slang name for GHB is __________.
2) GHB is short for the chemical name __________.
3) GHB is often mixed with __________ to intensify the effects of the drug.
4) Because it is a respiratory depressant, GHB can cause the user to stop __________.
5) Dr. Martinez tells about one night when eight rave-goers were admitted to the ER and put on respirators because they had __________ ___________ after taking GHB.
VIDEO REVIEW & RECAP

ANSWER KEY
ECSTASY ANSWER KEY

1) FALSE  An increase in the number of emergency room visits because of Ecstasy are being reported each year. As the use of Ecstasy increases, so do death statistics because of the drug.

2) FALSE  Most rave-goers will not call emergency services for fear of getting in trouble with their parents or the law.

3) FALSE  Because of the wide variety and strength of each dose, plus unknown ingredients used as fillers, overdose is a big problem.

4) TRUE  Research shows that MDMA causes damage to those parts of the brain critical to thought and memory.

5) FALSE  The only person who knows what is put into Ecstasy is the one who made it. As a user, your life depends on the mood they were in that day.

6) FALSE  Because ingredients for the drug can be hard to get, harmful additives are often substituted.

7) TRUE  Ecstasy has been found to cause hallucinations, lowered inhibitions, and poor judgment.

1) BRAIN

2) METHAMPHETAMINE

3) MEDICINAL

4) E, ADAM, TABS, XTC, X, BEAN

5) MDMA
1) TRUE  Ketamine is used as a general anesthetic to “knock-out” animals in preparation for surgery. The animals lose most bodily functions and feeling, and are able to undergo any kind of surgical procedure necessary.

2) FALSE  It is illegal to possess, distribute, or consume Ketamine. Only veterinarians are licensed to use Ketamine.

3) TRUE  Erin was in a coma and had to relearn everyday functions because of the damage done to her brain.

4) FALSE  She has permanent brain damage and will never be the same again.

5) TRUE  Erin was unaware of the dangers of Ketamine. She says “I am very, very mad at myself for what I did to my brain.”

6) FALSE  It is very easy to overdose on Ketamine. Non-medical professionals have no way of knowing how much of a dosage is too much. There is much misinformation among youth and on the Internet.

7) TRUE  This is probably what caused the majority of damage to Erin’s brain.

1) ANIMAL

2) LIQUID

3) BRAIN

4) COMA

5) K, SPECIAL K, VITAMIN K
LSD ANSWER KEY

1) FALSE Statistics show that the majority of teens have never tried LSD, nor will they. Some teens make up stories about using LSD to be “cool” or impress others.

2) TRUE LSD has caused users to jump from buildings because they think they can fly, or cut themselves to see how “beautiful” their blood is.

3) FALSE Even if you take care of your responsibilities, LSD can cause you to lose focus, become depressed, or feel indifferent toward life.

4) FALSE Rosie talks about people she knows who are “burnt out, spaced out, or even dead” from taking LSD.

5) TRUE It is the most common hallucinogenic drug.

6) TRUE LSD puts you in danger because of distorted perceptions and loss of control.

7) TRUE Some repeated users of LSD become afflicted with long-term psychoses such as severe depression, paranoia and schizophrenia.

1) ACID, BLOTTER, WINDOWPANE, MICRODOT

2) HALLUCINATIONS

3) TRIP

4) RETINAS/EYES

5) RAT
1) TRUE  This makes it especially dangerous because the central nervous system controls all body functions. GHB affects the respiratory system the most.

2) TRUE  GHB has an extreme sedative effect, especially when mixed with alcohol. Sometimes the “sleep” turns into coma, then death.

3) FALSE  It is produced in “dirty labs,” unsanitary, unsafe places such as garages, basements, and mobile trailers.

4) TRUE  This could mean body fluids contaminating the drug even further. Who knows what diseases they could carry?

5) FALSE  Most kids never use GHB. You have had friends your whole life without taking drugs. Drug friends are no friends at all.

6) TRUE  GHB has been shown to cause withdrawal effects in users.

7) FALSE  No one wants anything to do with someone who is “strung out” on drugs.

1) LIQUID X, GRIEVOUS BODILY HARM, MAX

2) GAMMAHYDROXYBUTERATE

3) ALCOHOL

4) BREATHING

5) RESPIRATORS
Because interviews with misinformed teen Club Drug users are included in the following article, we recommend that it be distributed to teachers and parents only. Taken out of context by teen readers, quotes from these interviews will exacerbate the misperceptions most teens have about peer Ecstasy and other Club Drugs use.
Teens Find ‘Club Drugs’ Anywhere
by
Nancy L. Othon, Staff Writer
Fort Lauderdale Sun-Sentinel

Accessibility Makes Them A Chief Threat

People say ecstasy makes them feel enlightened and loving. The anesthetic GHB gives people a profoundly intoxicating effect. Ketamine can put people in a dreamy state.

Ecstasy also can increase heart rate and cause dehydration. GHB easily can send someone into a coma. Ketamine, better known as "Special K," a dissociative anesthetic, can practically immobilize users.

Whether mixed with other drugs or alone, these drugs and other so-called club drugs are killing at a scary pace, say substance abuse and drug policy experts.

And while ecstasy, GHB and Rohypnol were once the drugs of choice at clubs or raves, all of them now have made their way into teenage hands.

"It's alarming. Teens are doing it like people used to drink beer," said Mary Naples, a licensed mental health counselor in Boca Raton. "These kids can use these drugs anywhere, and they are."

State Drug Control Policy spokesman Tim Bottcher said the situation with club drugs, or designer drugs, is "absolutely" at a crisis mode.

"We consider club drugs to be the chief threat to the younger kids," Bottcher said.

Ecstasy, or MDMA, a mixture of a stimulant and hallucinogen, was listed as the direct or related cause of one death in Palm Beach County, four deaths in Broward County and eight deaths in Miami-Dade County in the past three years.

The Drug Control Policy office, which collected the data from the past three years of autopsy reports, says the numbers could be higher because different medical examiners have different record-keeping systems, and some did not test for designer drugs in the past.

The anesthetic GHB, or gamma-hydroxybutyrate, is blamed for two deaths in Broward and one death in Miami-Dade in the same three-year period.

Methamphetamine, ketamine and nitrous oxide were the direct or related cause of 10 deaths in Broward and Miami-Dade counties.

All the designer drugs combined were responsible for or contributors to 230 deaths in Florida, according to statistics.

Wrong Combination

Authorities say these designer drugs are popular among people in their early 20s and increasingly popular among teenagers.

"Having these kids use a single drug is one thing, but what we've found is kids like to mix these drugs," Bottcher said. "If you mix GHB and alcohol, there's a good chance you're going to go into a coma and die."

Last month, four young adults almost overdosed after taking GHB at a Hollywood party.

Davie resident Richard Julian and his three friends ended up on life support; their conditions later improved. "I don't know that much about 'G,'" Julian told the Sun-Sentinel last month. "But I know I won't do it again. GHB sucks."

Teenagers, college students and other party attendees frequently take GHB for its immediately intoxicating effects and its relatively low price. It is also easy to find, according to police and several users interviewed.

"What's worrisome about GHB is if you have the raw ingredients, you can make it at home," Bottcher said. "You don't have to be a chemist."

Timothy Condon, associate director of the National Institute on Drug Abuse, said GHB is one of the easiest and cheapest drugs to make.

"I've heard reports from people in Florida that they were literally giving it away," Condon said.

Federal agents arrested a Boca Raton man less than two weeks ago after he received a 55-gallon shipment of the controlled substance GBL -- enough to make 98,000 doses of GHB. GBL is sold through the Internet as a natural supplement that breaks down into GHB.

GHB and Rohypnol, known as roofies, can easily be slipped into drinks without detection because they are odorless and tasteless. Both are referred to as "date rape" drugs because they can render someone helpless and produce amnesia in a victim.

Rohypnol belongs to the benzodiazepine class of drugs and has never been approved for medical use in the United States, making it more difficult to find.

Condon said he thinks GHB has taken the place of roofies among teenagers because of its accessibility.

McAfee said designer drugs such as ecstasy are now "just as prevalent" in Palm Beach County as other drugs such as cocaine and marijuana.

A small faction of psychotherapists who prescribed MDMA before it was outlawed in the mid-1980s has long argued that there is no proof that ecstasy is harmful. But the latest research shows otherwise, Condon said.

Brain imaging research at Johns Hopkins University shows that ecstasy damages brain cells that produce serotonin.

Heavy ecstasy users also had memory problems that persisted for at least two weeks after they stopped using the drug, according to a study. Immediate effects are dehydration.

The challenge for police and substance abuse experts lies with convincing teenagers and adults of those long-term effects, which continue to be studied.

"One reason we're having such a problem is that people find it hard to believe that something that makes you feel so good can be bad for you," Condon said. "But you don't really want to have your brain changed."

'Hug Drug' A Favorite

Ecstasy, sold in tablets for $20 to $30, is not physically addicting, but many people are hooked on its psychedelic effects, which include feelings of peacefulness and acceptance. Ecstasy sometimes is referred to as the "hug drug" because users experience feelings of closeness and have desires to touch others.
One ecstasy user, a 25-year-old Hollywood resident, said she has researched the drug’s effects and doesn’t think enough studies have been conducted to deem it dangerous. She uses the drug about six times a year, she said.

She does ecstasy because of the “euphoric high,” she said, and has never had a bad experience other than vomiting once.

“It’s not something I want to do all the time. I see people that overuse,” she said. “It’s like they lose their soul after a while.”

The Hollywood woman said she always does the drug with friends and would never promote it for teenagers.

But teenagers across South Florida already have been exposed to designer drugs, and ecstasy seems a favorite.

One 18-year-old from Boca Raton said she first did ecstasy two years ago with friends, most of them white, upper-to-middle-class teenagers.

“Some nights, we’ll plan a big night out and we know we need to get our stuff,” she said. “It just depends on how much money we have.”

The teenager said she has done ecstasy, cocaine and GHB, but she doesn’t plan to do GHB anymore after seeing one acquaintance overdose.

**Parental Advisory**

Even though she has undergone drug rehabilitation therapy and said she isn’t addicted to ecstasy, the high school senior said, “mentally, you just keep wanting that feeling.

It sounds ignorant and stupid, but it’s kind of hard to stop,” she said.

Her mother said she missed the signs though she considers herself educated about drug abuse.

“the thing parents need to realize is to stop looking for typical signs,” said the mother, 44, adding that her daughter has a “B” average in school.

“This is a serious problem,” she said. “People need to wake up. This isn’t going away.”

Mary Naples, the therapist, is conducting a "Rave Clubs & Deadly Drugs" seminar Saturday at the Boca Raton Marriott. She decided to organize the seminar after hearing shocking stories from several teenagers she counsels.

“What I found is that many of these adolescents are suffering from depression,” Naples said. “Taking the drugs is one way they feel medicated.”

Naples said some parents and educators have never even heard of GHB or ecstasy.

They don’t know the lingo, so if they hear their daughter or son tell a friend "let’s roll tonight," the parent might not know they plan to do ecstasy. In turn, teenagers aren’t aware of the dangers because only the message “don’t drink and don’t smoke” has been ingrained into their heads.

Parents should notice differences in their children’s behavior, Naples said, and they should make a trusting relationship with their teenagers a priority.

“What to look for isn’t so clear as someone lighting up a joint or drinking alcohol,” she said.

One Wellington teenager said he has been doing ecstasy and Special K for the past three years and his parents are oblivious.

He said most high school students have tried designer drugs at least once.

"It’s like this collective, ‘Let’s do drugs,’” the 18-year-old said. "Mainstream kids have moved from keg parties to rolling parties.”

Even though the Wellington student said he doesn’t rule out doing ecstasy again, he agrees that designer drugs are a threat to young people.

"But they shouldn’t be targeting raves, it’s at our schools,” he said. "They shouldn’t be targeting something that’s weird to them.”

Bottcher, from Florida’s drug control policy office, said the "rave culture is largely responsible for a good part of what’s happening out there.”

McAfee, the narcotics agent, said that even though club drugs aren’t street-corner drugs, they are easy to find outside raves.

GHB is part of the bar scene in larger cities, he said.

"If you’re a college-age individual, you’re going to be able to get it really easy at a bar, just as at a gym you can get steroids.”
ECSTASY
1) Most students have tried Ecstasy at parties or just hanging out. FICTION!

The FACT is, a recent survey reported that only 12% of 12-18 year olds have tried Ecstasy. Most students DO NOT do Ecstasy.

2) It’s a fun, safe drug. You can party all night with no side effects. FICTION!

The FACT is, Ecstasy has many terrible negative effects that the users may not know, or choose to ignore. Ecstasy can cause immediate problems like dehydration, or long term problems such as depression, paranoia, and brain damage. Refuse it!

3) Ecstasy isn’t addictive. FICTION!

The FACT is, Ecstasy is addictive. Users build a tolerance over time, causing them to take more to get the same high, increasing their addiction.

4) Clubs that don’t serve alcohol are drug-free. FICTION!

The FACT is, these clubs are prime targets for drug dealers. While alcohol is unavailable, Ecstasy and other Club Drugs are easy to find there.

5) “I’m afraid of the dangers of using cocaine, but Ecstasy is a safe drug.” - a rave goer. FICTION!

Many young people believe Ecstasy is a harmless “fun drug.” The FACT is, recent research has shown Ecstasy is extremely harmful to humans. It’s been linked to brain damage, memory loss, depression, and other learning impairments.

6) Ecstasy is made in real medical laboratories. FICTION!

The FACT is, Ecstasy is made in “dirty labs,” which are dangerous, unclean, toxic places.

7) Ecstasy has real medical benefits and is used for things like marriage counseling and psychotherapy.

The FACT is, there are NO medical benefits or uses for Ecstasy.
ECSTASY
STUDENT HANDOUTS
Ecstasy Drug Information Sheet

Ecstasy is the street name for Metylenedioxymethamphetamine (MDMA), a chemically man-made psychoactive drug with amphetamine-like and hallucinogenic properties. Usually taken orally in pill form, Ecstasy accelerates the release of serotonin in the brain. This produces an intense high, often characterized by extreme feelings of love and acceptance, higher self-confidence, and a general feeling of well being. However, when the drug wears off the brain cannot produce serotonin fast enough. This usually causes the person to become tired and depressed.

Slang Terms

Ecstasy, X, XTC, E, Adam, Bean, Lovers Speed, Eve, Clarity, Essence

How It’s Used

MDMA is usually distributed in tablet form and taken orally. Individual tablets are often imprinted with graphic designs or commercial logos. Users often take Ecstasy at “raves” for mood enhancement and to dance for extended periods of time. However, its use is spreading to suburban and rural areas and there are even reported cases of it being taken at schools.

Effects of Ecstasy

Short-term effects include psychological difficulties. These include confusion, depression, sleep problems, drug craving, severe anxiety, and paranoia. During and sometimes weeks after taking Ecstasy, physical symptoms such as muscle tension, involuntary teeth clenching, nausea, blurred vision, rapid eye movement, faintness, and chills or sweating can occur.

Long-term effects have been recently researched and link Ecstasy to damage to those parts of the brain critical to thought and memory. Chronic use of Ecstasy was found to produce long lasting, perhaps permanent damage to the neurons that release serotonin, and consequent memory impairment.
WASHINGTON - The name of the hottest party drug among teen-agers is 29 letters long: MDMA or methe-nymethamphetamine.

Users know it by a sexier name: Ecstasy. They say it induces euphoria and happiness and gives them the energy to dance and enjoy themselves during all-night parties called raves. Many young people consider the club drug harmless.

But drug researchers and lawmakers say Ecstasy is dangerous, pointing to increasing scientific evidence showing the drug has long-term debilitating effects on users' health, including death among those who overdose.

Alarmed by the exploding popularity of Ecstasy since the mid-1990s among grade-school children, lawmakers have introduced bills in the House and the Senate to educate people about Ecstasy, increase money for research and steer federal grants to communities actively curbing the drug's spread.

The chief sponsors are Democratic Sen. Bob Graham and GOP Rep. John Mica, both of Florida. More than a dozen other lawmakers are co-sponsoring the bills. Congress didn't act on the bills before adjourning for the Christmas break on Thursday.

The move marks the second time Congress has moved to crack down specifically on Ecstasy, which has been in use for decades and was banned by the federal government in 1985.

Last year, Congress directed the U.S. Sentencing Commission to increase criminal penalties for users and traffickers of Ecstasy. But federal law doesn't specify penalties for the use of Ecstasy.

"It's hard to turn your back on something that has such an epidemic increase in use, particularly by our youths," Mica said. "It doesn't have the stigma of heroin and cocaine, but it appears to have the same dangers."

Carol Reeves, director of the Greenville Family Partnership, said studies are beginning to show there are long-term effects attached to Ecstasy use. "We're setting up a whole future generation of problems that are going to be psychiatric problems," she said.

Reeves said Ecstasy is the cocaine of this generation and that children need to be educated about its dangers at a young age. She said enforcement and education efforts are lagging behind because the drug has swept into popular culture very quickly.

"There's not been anything ugly attached to it: no needles, no fights, no shootings," she said. "It's just slipped in there as a very acceptable and polite way to party."

_Evidence of Ecstasy's rising popularity_

The Drug Enforcement Administration seized 3 million Ecstasy tablets last year, up from 1 million in 1999.

DEA arrested 1,500 people in Ecstasy-related offenses in 2000, more than double the previous year.

U.S. Customs has seen a 430 percent jump in seizures of Ecstasy shipments from overseas since 1997.

Twenty-seven states have anti-Ecstasy laws, most of which mandate prison time and fines for abusing and trafficking, according to the National Conference of State Legislatures.

Numerous local governments also have adopted ordinances allowing police to arrest users and club owners who permit the sale of Ecstasy on their premises.

Some Greenville County Council members openly talked about putting new laws on the books to help the Sheriff's Office battle the growth of raves, which are all-night parties that attract Ecstasy users. Greenville County Sheriff Sam Simmons, though, pointed out that deputies were able to make more than 50 arrests at two raves without new laws.

"I don't want to make it illegal to have a party," he said. "What I'm trying to do is stop illegal drug use."

The drug is sold as a pill. Millions of Ecstasy pills are imported into the United States, particularly from Western Europe.

Moderate use could lead to problems such as dehydration, overheating, nausea, hallucination and blurred vision. Overdoses can cause fatal heart failure and heat stroke, Joseph Keefe of the DEA told a Senate panel this summer.

The drug reduces the supply of serotonin in the brain that regulates mood, emotion, learning, sleep and memory, and initial studies show brain damage could be permanent, according to Donald Vereen of the White House's Office of National Drug Control Policy.

Federal officials say no national numbers have been tallied on the number of Ecstasy-related deaths.

Emergency-room admissions linked to the drug jumped from 250 in 1994 to 2,850 in 1999, according to the federal Drug Abuse Warning Network.

About 140 medical examiners have linked Ecstasy to nine deaths in 1998, the last year for which numbers are available, three deaths in 1997, eight in 1996, six in 1995 and one in 1994, according to the warning network.

Some critics argue that more federal legislation won't reduce Ecstasy's popularity. Authorities have been locking up people for Ecstasy-related crimes for years, but the demand remains higher than ever, they note.

Educatings people about the dangers of Ecstasy is the best way to curb society's appetite for it, said Amu Ptah of the Harm Reduction Coalition, a network of drug-law reformers.

Making users criminals won't do much good, she said. "Let's move forward to edu-cate people in a nonjudgmental way, show them ways to prevent the harm," Ptah said. "In this country, we go through phases of drugs we want to demonize. It (was) crack in the '80s. It's Ecstasy in the '90s."

Pharmacy professor Tony Tommasello of the University of Maryland-Baltimore said youngsters are attracted to Ecstasy because it allows them to escape the rigors of growing up in a complicated and sometimes harsh world.

Parents must become more involved in their children's lives and confront them if they suspect their children are using drugs, however painful that might be, said Tommasello, who researches substance abuse.

"Parents don't want to rock the boat. Rather than setting the limit, they are giving tacit approval to very dangerous or destructive behaviors," he said.
KETAMINE
1) Ketamine is good to take when you are stressed out. FICTION!

The FACT is, Ketamine is used on animals in surgery. Unless you are a medical professional, it is impossible to know what is or isn’t a lethal dose. It is more likely that you will lose all muscular control. Does that sound fun?

2) Ketamine is a legal drug. FICTION!

The FACT is, it is legal ONLY for medical purposes. Outside of a surgical setting, it is illegal to possess, distribute, or consume Ketamine.

3) Ketamine is harmless. FICTION!

The FACT is, you can’t know what is or isn’t a lethal dose. For some people, ANY dose is lethal, so taking Ketamine is high risk. Don’t believe the information you get from the Internet or friends. Just a little too much will land you in the hospital, possibly with permanent brain damage.

4) Ketamine is not a “date rape” drug. FICTION!

The FACT is, Ketamine can cause a total loss of body control and amnesia. This is just what a sexual predator wants. Because it commonly comes in liquid form, it can easily be slipped into your drink without you knowing it.

5) If it is used to tranquilize animals, then it can’t hurt me. FICTION!

The FACT is, it is used on animals in surgery to sedate them completely. They lose ALL feeling and bodily functions, releasing waste from bladder and bowels. Your risk is easy overdose, which causes brain damage. Even a small dose can put you in dangerous situations, with partial loss of both muscular and mental control of yourself.
KETAMINE
STUDENT HANDOUTS
Ketamine Drug Information Sheet

Ketamine is a central nervous system depressant that produces a rapid acting disassociative effect. This means that the user feels “detached” from feelings and from his/her environment. Ketamine was developed in the 1970s as a medical anesthetic for both humans and animals in surgery. It is almost exclusively used as an animal tranquilizer today.

Slang Terms

K, Special K, Vitamin K, Super Acid, and Kit Kat

How It’s Used

Ketamine is available in tablet, powder, and liquid form. Because of its appearance, Ketamine is often mistaken for cocaine or methamphetamine. Sometimes it is mixed with other drugs such as ephedrine or caffeine and passed off as Ecstasy.

Effects of Ketamine

Ketamine chemically most closely resembles PCP and thus creates similar effects. One dose can cause convulsions and death. Eating or drinking before taking Ketamine can cause vomiting. Other reported side effects are: slurred speech, increased heart rate, increased blood pressure, lack of coordination, muscle rigidity, breathing difficulty, hallucinations, paranoia, aggressive behavior, paralysis, coma, and death. Its effects last from 4-6 hours, but it will take 24-48 hours before the user will feel completely normal again.
KETAMINE NEWS ARTICLE EXCERPT #1

Ketamine Drug Use Increases Nationwide

by

Lee Hill Kavanaugh

He is 25 years old, with dyed blond hair, earrings and striking blue eyes. But those eyes look away now, embarrassed, as he talks about sticking a straw into a bag of "Special K" and snorting a spoonful up his nose.

This former Kansas City art student, who asked that his name not be used, is not talking about a spoonful of half-inch wheat flakes fortified with iron.

He's talking about the drug Ketamine, known on the street as "Special K," or simply "K," an anesthetic drug commonly used by veterinarians while declawing, neutering or spaying cats. But humans are taking the drug, too.

The drug in its original form looks like water and can be injected. But the most popular way to take it is to cook it down into a white powder. Then users snort, swallow or smoke it to achieve a dreamlike state and experience hallucinations similar to the effects of using phencyclidine (PCP), Ketamine's chemical cousin.

"If you're on K, and someone's sawing your arm off, although it will still hurt -- you won't care," said the former art student. "That describes it exactly."

Ketamine is one of several club drugs nationwide that people, mostly young teens, are snorting, ingesting and shooting into themselves.

Since August, four veterinary hospitals in the metropolitan area have reported break-ins in which vials of Ketamine were stolen. Police suspect the thieves either sell the drug in clubs or use it themselves.

Veterinary offices across the United States have been reporting similar break-ins since 1997. Three years ago, the American Veterinary Medical Association encouraged its members to install burglar alarms and keep all drugs locked away after a rash of Ketamine thefts.

In late January of this year, police in Illinois arrested five persons in a Ketamine sting at a veterinary clinic. The five were connected with 20 burglaries of clinics throughout Illinois, Wisconsin, Indiana and Minnesota.

Although use of the drug in Kansas City appears to lag behind use in other cities, that may be changing with the area's recent break-ins, said Jayne Tomko of the Drug Enforcement Administration.

"Unfortunately, with these thefts my guess is that we'll be seeing a lot more of the drug than we had before," she said.

The Jackson County Drug Task Force is also monitoring the drug's popularity here.

"What's trendy first in the clubs of New York City and Los Angeles eventually finds its way here. We've heard about it, but it's only in limited usage here, so far," said Jeff Seever, a member of the task force.

The art student said in his experience with the drug, use in the area is sporadic. The drug's availability in Kansas City comes in waves. "There have been K-famines (last) summer in Kansas City. Most people have to go to St.Louis or Chicago if they want to score some," he said. "In the gay clubs people are doing trail mix, which is a combination of Ecstasy and Ketamine. But K is nowhere as easy to get as cocaine is in Kansas City."

Obtaining the drug may be more difficult since the penalties for possessing it changed last year. That's when Attorney General Janet Reno approved the DEA's endorsement of classifying Ketamine as a controlled substance after Ketamine use began increasing at rave parties, schools, college campuses and nightclubs. Now, illegal possession of Ketamine could land a person in prison for five years.

Although Ketamine is thought of as a relatively new drug, it is older than most of its users realize. The drug was developed at the University of Michigan in 1965 as a safer anesthesia for human surgeries. At moderate doses, it does not affect breathing or the circulatory system.

The drug quickly found use on the battlefields of Vietnam as an anesthesia that soldiers could carry in their packs to relieve pain from severe wounds. But just as quickly, human patients began reporting short-term hallucinations as the drug wore off.
Recently, our community and nation have been shocked by the use of a new "recreational" drug, nicknamed the "date-rape drug." Reports regarding this compound, ketamine, which is more dangerous and unpredictable than "angel dust," have become all too common items on the evening news. The spotlight of the national media and the attention of all levels of law enforcement add to the "heat" that this drug generates.

The procurement and use of illegal drugs in our society is indeed a sad chapter of the American story. With the dangerous drug ketamine, veterinarians have become the targets for its theft. For many years, ketamine has been widely used by veterinarians. However, veterinarians are doctors well-schooled and trained in the safe, proper and legal use of this controlled and dangerous substance.

The Denver Area Veterinary Medical Society, which is our local professional organization, would like everyone to know how disruptive and troubling the recent break-ins and subsequent media coverage have been to us. We believe that our businesses and hospitals are in some ways becoming targeted for criminals with all the increased media attention. We, as the medical specialists in this field, would truly appreciate having a small degree of input in the interest of balanced reporting on this alarming problem.

For example, the drug used in veterinary medicine can be extremely dangerous and that its dose variance is wide. By that I mean that any amount used by someone illegally would be very harmful to them or their victim. Seizures, violent hallucinations and permanent neurological defects such as blindness can readily occur especially if this drug is used in a non-controlled situation. During my 20 years of practice, I have seen a half-dozen cases that have unavoidably injured from the use of ketamine in the clinical situation while directly under the veterinarian's care. I cannot emphasize strongly enough how unstable ketamine usage can be.

In conclusion, we ask that the other side of the story be told. This is not a safe drug and without question not worth the risk of jail time or permanent personal injury.
LSD
LSD FICTION & FACT

1) LSD only comes in paper form. FICTION!

   The FACT is, LSD comes in perforated paper, microdot tablets, or liquid.

2) LSD is made by the government. FICTION!

   The FACT is, LSD is made in unsafe “dirty labs,” just like other Club Drugs. LSD is almost always mixed with harmful chemicals such as rat poison.

3) You can pretend to take LSD by putting it in your mouth, then spitting it out. FICTION!

   The FACT is, LSD is quickly absorbed into the bloodstream through the inner lining of the mouth. It can even be absorbed through the skin. Even if you spit it out, most of the drug will already be absorbed.

4) LSD provides true psychological insights and benefits. FICTION!

   The FACT is, LSD causes visual images or hallucinations, often making the user think they have gained insights or “revelations.” The problem is that these images and thoughts aren’t real.

5) You can sleep off LSD if the experience is too intense. FICTION!

   The FACT is, the LSD high is uncontrollable once the drug is ingested. There is no antidote. Users will feel LSD’s effects for many hours, unable to sleep or “sober up.”

6) There is no such thing as a “bad trip.” FICTION!

   The FACT is, powerful LSD-induced hallucinations can lead to severe panic reactions. When the mental effects cannot be controlled, the user wants to end the drug-induced experience. This is what is referred to as a “bad trip,” which cannot be stopped because there is no antidote.

7) There are no long term side effects from taking LSD. FICTION!

   The FACT is, “flashbacks” are common and dangerous long term consequences of LSD use. Flashbacks are recurrences of images or effects that were experienced during previous LSD trips. Their unexpected effect can disorient the former user, particularly those with psychological problems.
LSD
STUDENT HANDOUTS
LSD Drug Information Sheet

LSD is short for Lysergic Acid Diethylamide. It is the most common hallucinogenic drug and is one of the most potent mood changing chemicals. It is manufactured from Lysergic Acid, which is found in ergot, a fungus that grows on rye and other grains.

Slang Terms

Acid, Blotter, Microdot

How It’s Used

LSD comes in small tablets (microdots), blotter paper, clear liquid, or thin squares of gelatin. It is taken orally and licked off of blotter paper. Sometimes people put the liquid or gelatin forms in their eyes to be absorbed into the bloodstream.

Effects of LSD

The effects of LSD are unpredictable. They depend on the amount taken, the user’s personality, mood, expectations, and the surroundings in which the drug is used. The physical effects include dilated pupils, increased body temperature, increased heart rate and blood pressure, sweating, loss of appetite, sleeplessness, dry mouth, and tremors. Often the drug produces delusions and visual hallucinations. This can be frightening and cause panic. Some fatal accidents have occurred during states of LSD intoxication.

The long term effects center around flashbacks. A flashback can occur suddenly, without warning, within a few days or years after LSD use. But flashbacks are only part of the risks of LSD. Users may also experience relatively long lasting psychoses, such as schizophrenia or severe depression.
Teen Allegedly Took LSD Before Rampage
Youth Thought He Had Died And Gone To Hell, Attorney Says
by
Patrick S. Pemberton
San Luis Obispo County Tribune

The teen-ager who allegedly stole a vehicle and ran down pedestrians at the San Luis Obispo Farmers Market last month was likely high on acid and "out of his mind" as he drove, his attorney said Friday.

Lawyer Duffy Littlejohn said the 16-year-old was hallucinating, and thought he had died and gone to hell. "Based on all the evidence before us at this time, it appears as if Casey Henderson had taken two hits of LSD for the first time in his life."

Henderson, of Avila Beach, appeared in Superior Court briefly Friday for confirmation of a preliminary hearing on Monday. He faces nine felonies stemming from the April 20 incident that left one man seriously hurt and injured three others. The charges are two counts of assault, two counts of hit-and-run driving, driving under the influence, auto theft, disobeying a police officer, evading arrest and burglary.

The District Attorney's Office said Henderson broke into the British Sports Cars shop on Marsh Street, stole a Land Rover and took off on a reckless ride through the downtown.

Steve Sketo, a San Luis Obispo man, has not been able to walk since the wreck because both of his legs were broken when the Land Rover struck him.

Deputy District Attorney Karen Gray said she did not want to talk about the details of the case while it is pending. But she has previously told the court that the allegations are serious because they entail using a vehicle as a deadly weapon resulting in injuries.

Littlejohn said Henderson's bizarre behavior may have resulted from LSD that the teen acquired at Mission Plaza the night the crime occurred. He would not say how his client may have obtained the drug.

LSD, discovered in 1938, is an extremely potent hallucinogenic, according to the U.S. Drug Enforcement Agency. The illegal psychedelic drug can cause panic and distortions in vision, sometimes leading users to feel anxious, confused or terrified. "The results are obvious," said Littlejohn. "LSD is a dangerous drug because it is so obviously unpredictable." Littlejohn said Henderson may have been hallucinating when the alleged event occurred.

"With the information that I have now, it appears as if he was completely out of his mind."

Drug use can be a defense in certain crimes that entail intent. But the District Attorney's Office said it did not file charges that involve intent.

Henderson is the first San Luis Obispo County minor charged directly in adult court under Proposition 21, which allows prosecutors to skip prior juvenile court hearings in some cases involving minor defendants.

Littlejohn said the law violates Henderson's constitutional rights and he plans to contest it to the state Supreme Court if necessary. "We plan to take this issue all the way," he said.

Under the proposition, Littlejohn will have an opportunity after the preliminary hearing to tell a judge why the case should be sent back to juvenile court.

While Henderson faces a preliminary hearing Monday, his family also faces a $5.4 million civil lawsuit that was filed by Sketo last week.

Henderson had previously worn an orange jail jumpsuit at his court appearances, but the high school sophomore arrived in court Friday wearing a sport coat and a tie. He sat with his father during the proceeding. Outside of court, Henderson appeared upbeat, talking with his attorney.

His family posted bail after Superior Court Judge Barry LaBarbera lowered the amount from $100,000 to $75,000 last week.

"We are extremely happy to see Casey out of custody," Littlejohn said, "and we are hoping he can pick up the pieces of his young life as we hope the community can pick up the pieces."
LSD NEWS ARTICLE EXCERPT #2

The ABC's Of LSD
by
Peggy Farrell
Bucks County Courier Times

Where Did LSD, One of the Most Hallucinogenic Substances Ever Invented or Consumed By Man, Come From?

LSD comes in a variety of forms and has just as many names. It can be found laced on sugar cubes, absorbed into thin squares of paper (pictured), in gelatin squares (window panes), and in tiny tablets known as microdots.

Where did LSD, one of the most hallucinogenic substances ever invented or consumed by man, come from?

Lysergic acid diethylamide was synthesized by Dr. Albert Hoffman in 1938, according to the Drug Enforcement Agency's Web site. It was considered an effective tool in early efforts to learn more about mental illness because of its ability to mimic a chemical in the human brain. However, the hallucinogenic effects of the drug were unknown until Hoffman ingested some of the drug himself in 1943.

LSD comes in a variety of forms and has just as many names. It can be found laced on sugar cubes, absorbed into thin squares of paper, in gelatin squares (window panes), and in tiny tablets known as microdots, according to the Web site.

DEA public information officer Mary Vaira said "LSD was popular during the 60s, but today it can be found on the club scene. Young teen-agers and people in their early 20s are the most likely age bracket to be using the drug."

The drug is produced in a crystalline form and then diluted to a liquid, which is laced onto ingestible forms.

Acid, blotter, California sunshine, cid, blue microdot, doses and trips are a few of the more popular names that LSD users have for the drug. But LSD also can be smoked, inhaled through the nose or injected. It is so potent that a normal dose is considered to be about one millionth of a gram.

LSD is manufactured in makeshift chemical labs often hidden in northern California, and then distributed to other parts of the United States from the San Francisco Bay area, according to the DEA.

If parents suspect their child is using the drug, they can be on the lookout for a number of physical signs: dilated pupils, excessive perspiration, a rapid heart rate, changes in body temperature, shivering and goose bumps, a loss of appetite, sleeplessness and mood swings.

LSD users often have high blood sugar levels, as well as a distorted sense of perception. Users can experience visual changes, and their ability to correctly interpret depth, time and movement can become extremely impaired. Even judging the size and shape of an object, or judging the abilities of their own bodies can be distorted to dangerous levels. If a user attempts to drive a car or use machinery, he or she could cause injury to others and to themselves, the Web site said.

The effects of an LSD trip can last as long as 12 hours, and even after the effects begin to wear down, the user can suffer from extreme feelings of anxiety and depression. Although LSD is not addictive, users can develop a psychological dependence on the drug, medical experts said.

While some people believe it is difficult to detect kids using the drug, others say detection should be easy.

According to Adarsh Soni, director of emergency medicine at St. Mary Medical Center in Middletown, detecting LSD use is easier than discovering the use of some other drugs. "In a way, it is easy to spot because children using LSD usually can't act normal. With other drugs like cocaine or speed, a child can try to hide it, but with LSD they have hallucinations. They see things that aren't there. They hear things that aren't there. It is basically a drug-induced psychosis," said Soni.

But, long after a trip from LSD appears to be over, users can have a sudden reoccurrence. According to the National Institute on Drug Abuse, flashbacks and bad LSD trips are part of the risk for those who use LSD. And, chronic users run the risk of long-lasting psychoses, severe depression and even schizophrenia.
1) GHB is a commonly used dietary supplement. FICTION!

The FACT is, this is a common myth spread by GHB proponents, who include what appears to be real medical research on their websites and printed information. The problem with this is that it is biased information, not actual medical research. In other words, lies!

2) GHB isn’t dangerous when used by itself. FICTION!

The FACT is, GHB is most dangerous in combination with alcohol or other drugs, but it is false to say that GHB alone can’t kill. It can kill and has. ANY ABUSED SUBSTANCE CAN KILL BOTH IN COMBINATION WITH OTHER DRUGS AND ALONE!

3) If someone passes out on GHB you don’t need to call 911. They will just sleep it off and wake up in a few hours. FICTION!

The FACT is, many teenagers have been put on life support after using GHB. It suppresses breathing - the body “forgets” to breath. Get medical help immediately! Take them to the emergency room! You can save their life!

4) GHB is not addictive. FICTION!

The FACT is GHB is highly addictive. Withdrawals are horrible, sometimes life-threatening. Addicts often take two weeks in intensive care to get off of it.

5) GHB is not the same thing as “Liquid X.” FICTION!

The FACT is, there is no such thing as Ecstasy in liquid form. Liquid X is GHB.

6) Anti-GHB information is the result of people overreacting. FICTION!

The FACT is, if you ask medical professionals or poison control centers, you will find the above statement completely false. If you look up “GHB” on the Internet you will see a list of websites that begin “In loving memory of......”
GHB
STUDENT HANDOUTS
GHB Drug Information Sheet

GHB is short for Gamma-hydroxybutyrate, a fast acting central nervous system depressant. It was once available over the counter at health food stores and was widely used by bodybuilders as an anabolic steroid to lose fat and build muscle. In 1990 the FDA banned the use of GHB because of the severe side-effects being reported.

Slang Terms

Liquid Ecstasy, Greivous Bodily Harm, Georgia Home Boy, Liquid E, G

How It’s Used

GHB can be produced in clear liquid, powder, tablet, and capsule form. In liquid form it is colorless and odorless with a salty taste. GHB has been increasingly involved in poisonings, overdoses, “date rapes,” and fatalities.

Effects of GHB

Although one may experience euphoria and calmness immediate adverse effects can occur fifteen minutes to an hour after ingestion. Users have experienced nausea, drowsiness, difficulty breathing, dizziness, seizures, amnesia, coma, and death. Extended use of GHB can cause a horrible withdrawal syndrome. The withdrawal symptoms include sweating, insomnia, muscular cramping, tremors, and anxiety. There have been reports of users with withdrawals so bad that they committed suicide.

GHB presents a serious overdose threat. Since it is a depressant, it can be fatal when mixed with alcohol. Unfortunately, many teens believe it is supposed to be mixed with alcohol to maximize its effects. This is a deadly combination. Another problem is that because it is made in “dirty labs,” strength can vary from batch to batch. Sometimes GHB is slow to show its effects, so users take more. This could prove to be a fatal mistake.
GHB NEWS ARTICLE EXCERPT #1

More People Dying After Using Illegal GHB Drug
by
Sharon Turco
News-Press

George Bravo lay in his bed one night praying sleep would come. At that point, Bravo hadn't slept in a week. Finally, sweating and shaking, he crawled from bed and chugged a clear liquid. The liquid looks like water but is really the barbiturate gamma-hydroxybutyrate (GHB). The drug didn't bring sleep, only hallucinations.

The 20-year-old Bravo has tried to break his GHB habit since he was 16 and started taking the then legal drug to bulk up. Even a law passed earlier this year making GHB illegal didn't help. Finally, the Fort Myers house painter said he feels he is on the road to recovery.

Bravo said lots of people looked to GHB as a way to get a perfect physique. Now, they're addicted to it. He wants to warn other people about the dangers of the drug, dangers no one ever told him. "It's been hell trying to kick the habit," said Bravo, who at one point drank a quart every day. "Harder to kick than cocaine," he said.

GHB is sweeping the nation as the newest high, and law enforcement officials warn it's being used as a date-rape drug. For years, nutritionists and bodybuilders touted GHB's positive effects. Now illegal, they're fighting the addiction, turning to underground sources and trolling the Internet where knock-off GHB is for sale on dozens of Web sites.

A review of Florida autopsy reports showed GHB caused or played a part in 33 deaths between 1997 and 1999. Another 12 people died after using GHB between January and July of this year. GHB was found in the blood of a Lee County man who died of a multiple drug overdose in 1998.

Experts say those numbers are conservative because tests used by law enforcement and health professionals do not routinely screen for GHB.

The Lee County Sheriff's Office made its first GHB-related arrests this year, arresting six people since January.

The Houdini-like drug is quickly metabolized by the body into carbon dioxide and water, then vanishes with barely a trace in about 12 hours, making it difficult to detect. Bodybuilders like the drug for two reasons, said Dr. Bruce A. Goldberger, co-director of The University of Florida's William R. Maples Center for Forensic Medicine.

The first is the theory that GHB increases the time in a person's normal sleep cycle when growth hormones are secreted, and that helps rebuild lost muscle tissue.

Others say that there is no real anabolic effect, but weight lifters enjoy a high and the euphoria contributes to better workouts. "It's all word of mouth," Goldberger said. "There is no study confirming an anabolic or bodybuilding effect from the drug."

Problems related to GHB are recent discoveries, found after people began mixing it with alcohol, Goldberger said.

Prior to 1990, GHB was available as an over-the-counter pill or powder sold mostly in health food stores as a sleep aid and as a body-building supplement. After that, people mixed up knock-offs at home or bought it through the Internet. The deadly effects have become so apparent, it is now considered a dangerous drug by the federal government, as illegal as heroin and crack cocaine.

A bill signed by President Clinton in February makes possessing, manufacturing or distributing it punishable by up to 20 years in prison. The Florida Legislature went further and enacted a law Oct. 1 that not only made the drug illegal but made trafficking it punishable by mandatory sentences.

Bravo said making the drug illegal now doesn't erase years of addiction. Bravo experimented with drugs at an early age, smoking marijuana and snorting cocaine at age 13 with friends near his home on Florida's East Coast. By 16, with encouragement from a girlfriend, he quit. "It was the right thing to do, but the fallout was hard," he said. "I was real thin, I wasn't sleeping."

When doctors couldn't help Bravo, a friend suggested GHB. "I heard it released growth hormones and makes you gain weight," Bravo said. From a supply that the friend gave him in 1996, Bravo swallowed a capful, which is equal to about a tablespoon, it worked. Bravo eventually bulked up from 115 pounds to 170 pounds.

"It did everything my friend said it would," Bravo said. "But, I was addicted. It got to the point that I needed six caps just to get up in the morning." Friends were his primary source of obtaining the drug. "It was harder to get, but I couldn't stop," Bravo said.

Users report a tolerance to GHB's euphoric and sedative effects, and developing a physical dependence, according to Dr. Stephen Zuzkin of the National Institute on Drug Abuse. Zuzkin testified before Congress in 1999 about GHB's harmful effects.

Dependence is evidenced by withdrawal that includes insomnia, muscle cramps, shaking and anxiety, Zuzkin said.

Bravo said he has experienced all of the symptoms. Especially loss of sleep. "The only way I can sleep is by taking Xanax or going back to the G," Bravo said. Bravo said he needs the drug to survive. At one point he was drinking a quart every day. At $75 per quart, it was expensive. "That's the way I dealt with life," Bravo said. "I was happy when I took it. It made me feel normal."

Eventually though, Bravo tired of his dependence on the chemical and made the decision to quit. He moved to south Lee County to get away from the influences that hooked him.

After moving here, he found GHB knock-offs are readily available on the Internet. "I ate Xanax by the handful trying to quit," he said. "But, it's hard knowing I can order GHB any time I want." His high tolerance to GHB meant he had a high tolerance to sedatives like Xanax. Realizing he could not wean himself from the drug, Bravo turned to doctors for help.

A Fort Myers doctor prescribed Ambien, but Bravo said the $95 prescription didn't help either. He then tracked down a doctor in Tampa who offered to treat his addiction for $4,500, instead of the $95 prescription. He then tracked down a doctor in Tampa who offered to treat his addiction for $4,500, a price out of Bravo's range.

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So little is known about the drug, there is no medical protocol for treatment, said Janice Cook, director of Southwest Florida Addiction Services.

The agency does not treat GHB addicts. Instead, it refers calls to a counselor, Cook said.

Six times this year people have called the center saying they need help freeing themselves from GHB. "We're hearing more and more stories about GHB," she said. Over the last month, Bravo has whittled his usage down. It started when his roommate watered down his supply without Bravo realizing it. "That made me realize maybe I don't need it as much as I thought I did," Bravo said.

His goal is to be drug-free by Christmas.

When I was younger I didn't think about the future," Bravo said. "But I have a lot to live for and I plan on doing it without using drugs."

MAP posted-by: Terry Liittschwager
While the drug ecstasy might be known as a path to euphoria, the club drug GHB is a road to agony.

What clubbers call GHB (short for gamma-hydroxybutyrate) is largely dismissed by young ravers as " grievous harm to body" and viewed by law enforcement as the latest date-rape drug.

How did something originally developed as a sleep aid get marketed as "liquid ecstasy" and grow so dangerous, so quickly?

A simple formula, recipes available on the Internet and kids looking for a powerful high helped bring GHB into vogue. But its quick-acting power has also proved devastatingly effective in the hands of would-be criminals.

"GHB is the ideal drug for the rapist," said Linda Ebbert, a sexual assault nurse at University Medical Center. "The person is down within 5 to 15 minutes and within four hours we can't even detect it in the urine. It's extremely scary."

The mere mention of GHB at a recent rave led one young girl who overheard the initials to frantically advise: "Don't take G! That stuff is nasty!"

The Drug Enforcement Administration has documented 65 GHB-related deaths nationwide and local medics say that they suspect the increasing number of overdoses they treat are related to the hypnotic sedative.

Although lower doses of the odorless liquid are said to produce an effect similar to an alcohol buzz, the line between happy and social and life-threatening can quickly blur by the capful.

"The index between the amount that will make you feel really, really good and the amount that will make you unconscious is very small," said Dr. Steven Karch, a San Francisco-based drug death researcher who has written the text "The Pathology of Drug Abuse."

GHB overdoses cause loss of consciousness and if coupled with alcohol, the drug can cause respiratory arrest, coma and death. Since it is sold mostly in liquid form, it can easily be slipped into drinks.

A 24-year-old Las Vegas woman who asked to be identified only by her first name, Jen, fell victim to what she believes was GHB after only half a drink.

"I went out with my friend after work on a Friday and ordered a rum and Coke," said Jen, a casino cocktail waitress. "I remember after about four sips I got entirely woozy and just felt like I wanted to sleep."

"I looked over at my friend and she was saying something, but I didn't hear her 'cause it was like in slow motion," she added. "Then it felt like I was under water trying to come up for air."

"Next thing I knew I was lying in a hospital bed with a curtain around me," Jen said.

Were it not for her friend's presence and quick thinking 911 call, Jen thinks she could have been assaulted and left for dead.

"I don't even remember seeing anyone near my drink, but I know I didn't exactly have it in my hand the whole time," Jen said.

Chris Parker, a paramedic for 11 years with American Medical Response, has responded to numerous calls like Jen's.

"We had one 30-year-old female who was out with friends in one of the clubs in town," Parker said.

"Basically her friends told us that she became more and more loopy and started getting sleepy." Parker said when his ambulance arrived a short time later, "We found her unresponsive with very shallow breathing."

Many victims of GHB overdose require immediate emergency room attention and often need to be intubated -- a procedure in which a breathing tube is inserted through the larynx.

Just as a dose can affect the body quickly -- sometimes in as fast as 5 or 10 minutes -- the drug also leaves the body rapidly, usually within three hours.

"When these people recover it really is quick," Parker said. "Sometimes these folks pull the tube out and try to leave the hospital." Ebbert, who herself conducts about 900 sexual assault exams a year, said she has never examined a woman who knowingly took GHB.

"Usually if they remember anything, they say they knew somebody was doing something to them," Ebbert said.

More sexual assaults are reported in July and August in Las Vegas than in any other months -- a statistic attributed to summer's carefree attitude. Ebbert, one of two sexual assault nurses on call at UMC, examined 10 victims in one four-day period this month.

"People are letting their guards down," said Renata Cirri, executive director of Community Action Against Rape. "Most of us are still very trusting and still very vulnerable to people who don't intend to do nice things."

Metro Police Sgt. Keith Carter was partly responsible for getting GHB classified as an illegal drug in Nevada.

"It's being used in clubs by guys who try to talk to a girl, start BS-ing her and if they see it's not going well, they slip her some GHB and then they can make inroads," Carter said.

Depending on a person's weight, and even the amount of food in their stomach, a teaspoonful of GHB one night could simply create a high when the same dose could result in seizures, vomiting and coma on another night.

"GHB is the only thing that time after time after time I don't even remember seeing anyone near my drink, but I know I didn't exactly have it in my hand the whole time," Jen said.

"I went out with my friend after work on a Friday and ordered a rum and Coke," said Jen, a casino cocktail waitress. "I remember after about four sips I got entirely woozy and just felt like I wanted to sleep."
At the end of *What’s Wrong With Ecstasy and Other Club Drugs*, Sean advises middle school students: “You don’t need to use drugs to make new friends. You’ve made friends all your life without drugs and you don’t need to change now that you are starting high school.” Think about this statement and answer the following questions:

What kind of person do you think of as a “true friend?”

Would true friends want you to try drugs that could kill you or cause serious damage to your body and brain? Why or why not?

What do the following statements mean to you?

“In order to make a friend, you must first be a friend.”

“Show me your friends and I’ll tell you who you are.”
SETTING GOALS

You all know what goals are, especially in sports like soccer, basketball and football. The object in these games is to get the ball into your opponent’s goal and defend your own goal from intrusion by your opponent. The same is true in your life. You must learn to set goals for yourself, always remember what they are, and know what it takes to reach them.

There are two kinds of goals: **short term goals** and **long term goals**.

Short term goals include things you want to accomplish soon, such as bring up your grades, join a club, practice playing a musical instrument, and read a book.

Long term goals include things you want to accomplish in the future, like getting your driver’s license, graduating from college, getting married and raising a family.

You can adjust or change your goals at any time, but only after careful consideration. List your goals and look at them from time to time.

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SETTING GOALS
(Continued)

Once you have listed your goals, answer these questions:

Are the goals I’ve set for myself attainable?

What will you have to do to achieve one of your short term goals?
Be specific.

What will you have to do to achieve one of your long term goals?
Be specific.

How might getting involved with people who use Ecstasy and other Club Drugs prevent you from meeting your goals?
ENRICHMENT PROJECTS

1. Create an “Ecstasy and Club Drugs” web site that tells the truth about the dangers of these drugs. On this site make a list of the misinformation found on the many web sites, especially the Ecstasy sites that minimize these drugs by calling them “love drugs,” playing up the “fun logos” on the pills themselves.

2. Research long term medical and psychological consequences of one of the following Club Drugs.

   Ecstasy (MDMA)
   Ketamine
   LSD
   GHB

3. Prepare and make a presentation on the dangers of Club Drugs to a grade level below your own. Think about yourself when you were that age. What influenced you? What information would have helped you make good choices about staying away from the drug scene? How do you want these younger students to look upon you as a role model? Share your own experiences with them. Share Erin Rose’s story with them. Be sure to adapt to the age group in your presentation.

4. In The News
   Check the newspapers in your area for stories about teens who have suffered consequences from Club Drug use, or even died. Write a biography about them that draws meaning from their experience. Contact them. Interview them in person or on the phone if possible. Talk to their friends and family members as well.
The video features student peer leaders who have signed drug-free contracts at their schools. Parkway School District’s (St. Louis, MO) Drug Free Council and Aspen High School’s Captains Club members represent the actual majority of American teens who do make healthy choices in their lives. But even they have difficulty believing that they are in the majority. Therefore it must be stressed to students. There is indeed strength in numbers. Surveys polling tens of thousands of teens across America show that the healthy majority does not use Club Drugs. *What's Wrong With Ecstasy and Other Club Drugs* repeats this message.

Students need information to make informed choices, especially when that information is support from peers. Because Club Drugs can be lethal even the first time used, it is important to tell tragic stories like Erin Rose’s. At the same time students should know that her bad choice is not one most kids make. Peer education works. Giving the healthy majority a voice is an effective prevention strategy because teens will listen to other teens. *What's Wrong With Ecstasy and Other Club Drugs* presents the realities of a few students who made bad choices in stark contrast to the healthy majority of teens who have chosen not to use Club Drugs.

For information on implementing social norms strategies into your drug prevention program, see www.hws.edu/alcohol/consultation/schools.htm.
The Social Norms Approach To Drug Prevention

Incorporating the social norms approach into prevention programs is an effective way to discourage Club Drug use among teens. Simply put, using “peer pressure in reverse,” i.e., correcting the misperceptions teens have about the frequency of Club Drug experimentation among their peers, is effective in dissuading them from beginning a drug-use lifestyle. The truth is that a very small minority of teens have ever tried Club Drugs. In fact, most will never use them. However, teens misperceive this about their peers, thinking that most other teenagers have tried Club Drugs. Individually teens will admit that they have never used nor have any interest in using Club Drugs. Nevertheless they believe that a majority of their peers do have such an interest and have experimented with Club Drugs.

Dr. David Craig, Director of the Alcohol and Other Drug Prevention Program at Hobart and William Smith Colleges, where social norms strategies were implemented in the 1980’s to reduce college alcohol use, says, “Sociological research is clear in multiple findings that young people are very strongly influenced by their peers. The more a young person believes that the majority of peers is using a substance and expects that use of them the more likely they too will use. It doesn’t matter if that belief is in error. If the belief is believed to be real it will be real in its consequences.”

Dr. Craig continues: “The principal objective of the social norms approach to prevention is to correct peer misperceptions of substance use. The strategy is to educate youth on the majorities of young people who have healthy attitudes and practices. We don’t have to preach at students or tell them to “Just say no.” We’ve tried that and we know that it doesn’t work. We just have to let young people know that they have very strong values and attitudes and that the majority of them do not engage in unhealthy practices. When we do this, we allow the peer environment to work correctly as a social control. We give young people the freedom to act on their own personal values because they realize that they are not alone. We give young people a voice to speak out when they see someone engaging in unhealthy practices because they realize that they are not alone. We make it more uncomfortable for those engaging in unhealthy practices because they no longer believe, along with everyone around them, that they are in the majority. Young people can feel good about themselves and their peers when they realize the truth. This strategy is very uplifting. It does not dwell on the negative; rather it focuses on growing the positive. And, it works.”
SOURCES & RESOURCES

Internet References

“Club Drugs - Community Drug Alert Bulletin”

“MDMA(Ecstasy)”
www.drugabuse.gov/infofax/lsd.html

“MDMA & Other Phenethylamines”
www.usdoj.gov/dea/concern/mdma/mdma.html

“Prevention Works! Club Drugs: Ecstasy”
www.health.org/govpubs/prevalert/v3i25.htm

“Basic Facts About Drugs: Ecstasy”
www.acde.org/common/ecstasy.htm

“Ketamine”
www.usdoj.gov/dea/concern/ketamine.html

“Ketamine: A Fact Sheet”
www.health.org/nongovpubs/ketamine/index.htm

“LSD”
www.drugabuse.gov/Infofax/lsd.html

“Lysergic Acid Diethylamide(LSD)”
www.usdoj.gov/dea/concern/lsd.html

“Prevention Works! - Club Drugs: GHB, an Anabolic Steroid”
www.health.org/govpubs/prevalert/v3i27.htm

“Special Issues Surrounding GHB and Rohypnol”
www.acde.org/common/ghb-rohypnol.htm

“Tips for Teens: The Truth about Club Drugs”
www.health.org/govpubs/phd852i/index.htm


Cynthia Knowles, *Up All Night: A Closer Look At Club Drugs And Rave Culture*; Red House Press, 2001


SOURCES & RESOURCES

Information Agencies

SAMHSA’s National Clearinghouse for Alcohol and Drug Information Center for Substance Abuse Prevention (CSAP)
5600 Fishers Lane
Rockwall II Building, Suite 800
Rockville, MD 20857
800-729-6686
e-mail: info@samhsa.gov
http://www.samhsa.gov/csap

Centers for Disease Control and Prevention (CDC)
1600 Clifton Road
Atlanta, GA 30333
http://www.cdc.gov
202-512-1800 General Public (annual subscription of single copies)
800-843-6356 Government Employees (free copies from CDC)

Drug Enforcement Administration
Publications may be downloaded from the Internet.
202-307-1000 Information: Voice menu system (M-F 8:30-5 EST)
202-307-7977 Press Office
Drug Enforcement Administration
Information Services Section (CPI)
2401 Jefferson Davis Highway
Alexandria, VA 22301
http://www.dea.gov

National Council on Alcoholism and Drug Dependence, Inc. (NCADD)
20 Exchange Place
Suite 2902
New York, NY 10005
212-269-7797 National Office
national@ncadd.org
http://www.ncadd.org/