

FACT SHEET THIRTY FIVE

COCAINE

Classification: Stimulant

Methods of use: Sniffing or snorting, inhalation, smoking or injecting.

Dependence potential: psychologically and physically addictive.

What is cocaine?

Cocaine is a short acting powerful, central nervous system stimulant that comes from the coca bush which grows widely in South America.

The cocaine most commonly used in the UK is the white crystalline powder extracted from the coca leaves (actually a compound called cocaine hydrochloride). The drug bought on the streets is a mixture of pure cocaine and other substances such as flour, talcum powder, sugar and any other stimulants or powders that are added to increase the bulk of the supply.

Cocaine is often snorted through the nose. Razor blades are used to crush any large pieces or lumps of cocaine and to form 'lines' that make snorting easier. A rolled up bank note or plastic outer of a biro is often used. Some users inject cocaine into a muscle or vein; or it is converted into a smokable form called freebase.

Freebase is street cocaine that is converted to a pure base by removing the hydrochloride salt and many of the added adulterants (talc, flour, etc). The end product, freebase, is not water soluble - the only way to get it into the body system is to smoke it.

What is Crack?

Crack is a light brown or beige pellet of ready to smoke freebase cocaine. It is formed when powdered cocaine is melted with water. When the liquid cools it is mixed with baking soda and cold water and then cut into small pieces which then harden.

Other ways of using cocaine.

The most dangerous form of smokable cocaine is coca paste made by using petrol or sulphuric acid to extract a smokable paste that is dried and then smoked in a pipe or crushed into a rolled-up cigarette.

Cocaine may be used with other drugs to produce a variety of effects. 'Speedballing' is a combination of cocaine and heroin injected by syringe. 'Spaceballing' is a sprinkling of liquid PCP (phencyclidine) on crack cocaine before snorting.

Short-term effects of cocaine

When cocaine is snorted the effects begin within a few minutes, peaking at fifteen or twenty minutes and disappearing after a few hours. Low doses are used to produce a short period of euphoria and feelings of increased energy, alertness, self-esteem and sensory awareness. While artificially depleting the body's energy supply, cocaine reduces the perceived need for food and sleep and can cause imported behaviour and mood changes.

Smoking freebase produces a two to five minutes intense high. It takes a larger amount to get to the brain quickly. Smoking also increases the risks of using the drug. Risks include confusion, anxiety, slurred speech and psychological problems.

Smoking crack produces an intense and rapid euphoria commonly known as a 'flash high'. Cocaine molecules reach the brain in a few seconds. The resulting five minute high is followed by an unpleasant crash. The user feels irritable and agitated and has an intense craving for more cocaine caused by the high concentration of the drug in the bloodstream. This initial high is never reached again and subsequent lows get lower. This cycle reinforces the craving.

Injecting cocaine produces an effect within thirty seconds that peaks in five minutes and last for about half an hour. Users injecting run the risk of contracting Hepatitis, HIV/Aids and other infections when sharing contaminated needles.

Long-term effects of cocaine.

Cocaine and Crack constrict the heart's blood vessels making it work harder and faster. In some users this may trigger chest pain or even a heart attack. Cocaine can interfere with the signals controlling the heart's pumping action causing it to beat so irregularly it may stop. Cocaine in all of its forms has been associated with sudden heart attacks in people under thirty, many of whom have used the drugs for the first time.

Cocaine and Crack can cause brain seizure, a disturbance in the brain's electrical signals some of which regulate the heart and muscles controlling beating. Over time the brain appears to become more and more sensitive to cocaine. As a result, the threshold at which the seizure occurs is lowered. Repeated use of the drug without experiencing problems does not guarantee that seizures will not occur. Some users have suffered strokes after using cocaine.

Other effects of cocaine and Crack use include:

- Suicidal tendencies

- Dramatic mood swings
- Chronic nose bleeds, runny nose or very sore throat
- Birth defects
- Weight loss from loss of appetite
- Chronic headaches
- Respiratory ailments
- Vitamin deficiency

Addiction, tolerance and withdrawal

The obsessive drug seeking behaviour of cocaine and crack users is due to the drugs overwhelming influence on the reward centres in the brain which is associated with an individual's drive for food, water and sex.

Cocaine use triggers the release of dopamine, a chemical that transmits feelings of pleasure and well-being in the brain. The brain requires more and more dopamine to be released to satisfy its needs, which in turn requires greater amounts of cocaine to be used. An individual becomes more tolerant of the effects and has to use greater amounts to achieve the same high. Repeated compulsive use of cocaine may lead to highs that produce no pleasurable feelings.

Violent paranoid behaviour, called cocaine psychosis, can accompany any of these drugs but may appear more rapidly in crack. Effective users become anxious, believe they have super human powers or become suspicious and very paranoid to the point that they believe they are in danger and react in bizarre or violent ways. Hallucinations are not uncommon. Users may feel or see things that do not exist, or experience 'coke bugs' - sensation of imaginary insects crawling over the skin.

A cocaine high is often followed by a crash lasting thirty to sixty minutes or longer while leaving the user feeling tired, anxious and irritable. Cocaine use provides immediate relief from these symptoms, creating a cycle of use.

Generally the higher a person gets on cocaine the worse the effects of the crash. Whether or not an individual experiences a crash depends on that individual and the amount of cocaine used.

Withdrawal following extensive and prolonged use of cocaine can cause irritability, nausea, agitation, sleep disorders, severe depression, muscle ache, and intense craving for the drug.

Signs and Symptoms of cocaine use

- Dilated pupils
- Dry nose and mouth
- Bad breath
- Frequent licking of the lips
- Excessive activity and difficulty in sitting still

- Talkative but conversation lacks continuity
- Runny nose, colds or chronic sinus and nasal problems
- Sudden drop in work performance
- Frequently in trouble and accident prone
- Use or possession of paraphernalia including small spoons, razor blades, mirrors, glass bottles of white powder, plastic glass or metal straws, glass pipes and miniature blow torches

A long lasting craving for cocaine makes addiction hard to treat without assistance. The first step is into detoxification to rid the body of the drug. Detoxification is sometimes followed medication, with anti-depressants, to help control the craving and treat severe depression.

A treatment programme can help the recovering user to find alternatives to curb the craving for the drug. Often this help is offered through the combination of individual, group and family counselling in addition to other techniques aimed at changing behaviour.