

Awareness of street drugs and drug seeking behaviour

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Objectives

- ▶ Understanding of current trends in substance misuse – local, national and international
- ▶ Improve knowledge of novel psychoactive substances (NPS)
- ▶ Improve management of drug seeking behaviour

About Humankind



Our Vision

Our vision is for people of all ages to be safe, building ambitions for the future and reaching their full potential.

Mission

Humankind develop services & support to meet people's complex health & social needs, helping them to build healthier lives that have meaning & value for themselves & their families. We support local people to create stronger, better connected communities.

RECOVERY STEPS
BARNESLEY

Our Values:

Honest

We are open & realistic, building trusted relationships in which we challenge, collaborate & change

Committed

We are passionate about being the best we can be, and we do this by keeping people at the heart of everything we do.

Inventive

We are ambitious, drawing together skill and resources to innovate and adapt in determined pursuit of our mission.

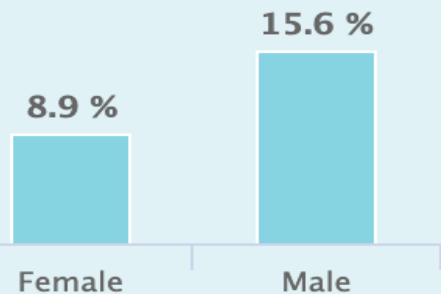


RECOVERY STEPS
BARNESLEY

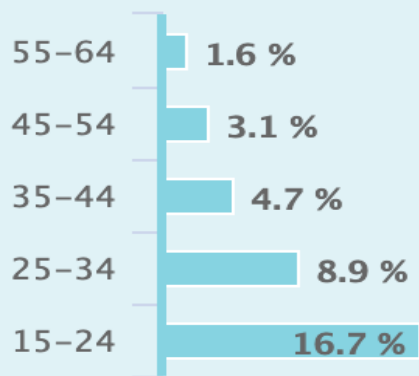
Estimates of last-year drug use among young adults (16-34) in England and Wales

Cannabis

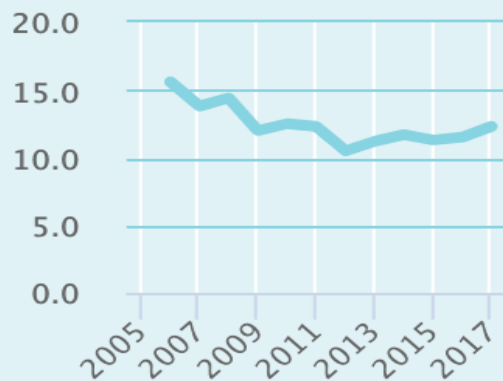
Young adults reporting use in the last year



Prevalence by age

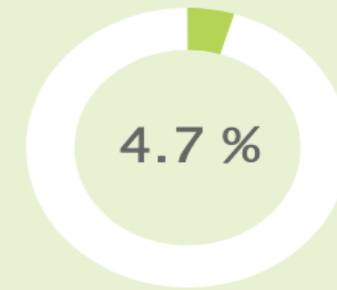
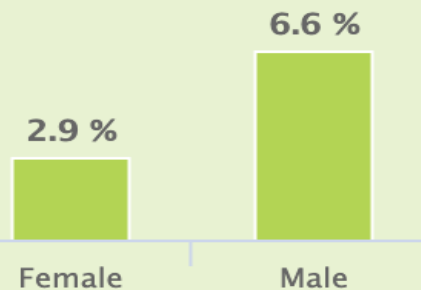


Trends

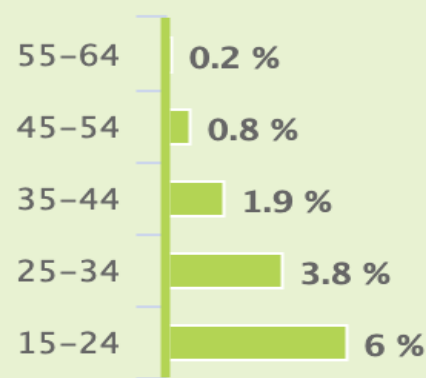


Cocaine

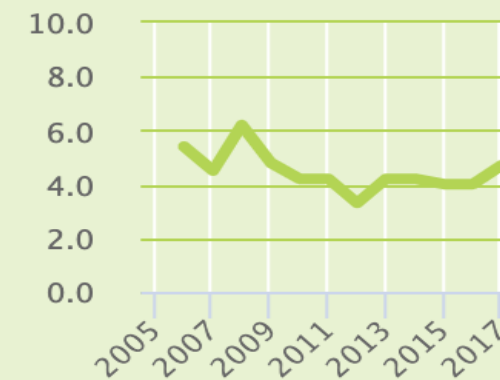
Young adults reporting use in the last year



Prevalence by age



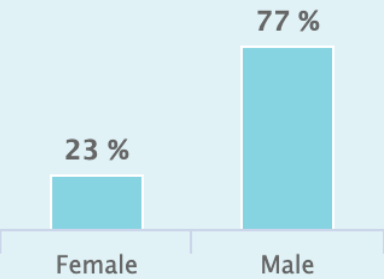
Trends



Characteristics and trends of drug users entering specialised drug treatment in the United Kingdom

Cannabis

users entering treatment

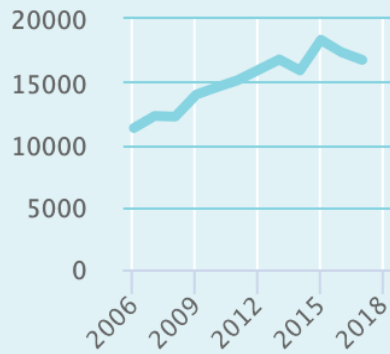


All entrants **27920**

First-time entrants **16733**

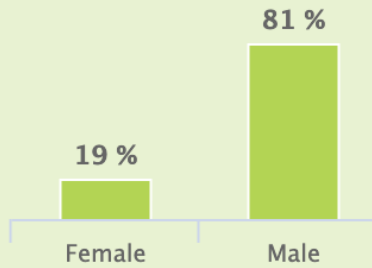
Mean age at first use **15**

Mean age at first treatment entry **22**



Cocaine

users entering treatment

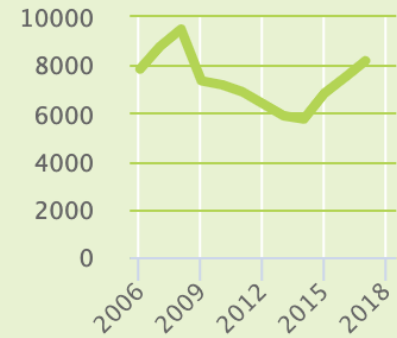


All entrants **20290**

First-time entrants **8185**

Mean age at first use **22**

Mean age at first treatment entry **31**



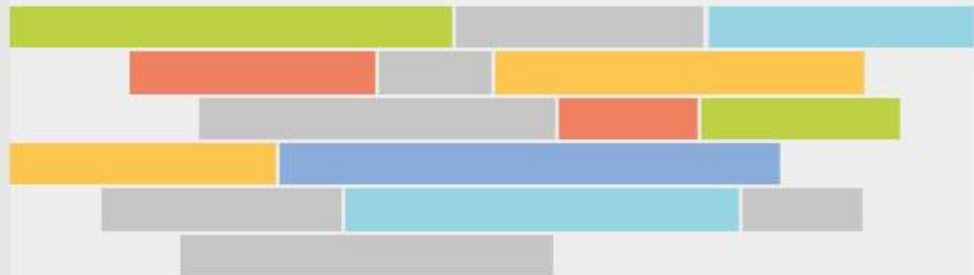


European Monitoring Centre
for Drugs and Drug Addiction

EN

European Drug Report

KEY ISSUES





AT A GLANCE — ESTIMATES OF DRUG USE IN EURO

Cannabis

Adults (15-64)

Last year use



Lifetime use



Young adults (15-34)

Last year use

National estimates
of use in last year**Cocaine**

Adults (15-64)

Last year use



Lifetime use



Young adults (15-34)

Last year use

National estimates
of use in last year**MDMA**

Adults (15-64)

Last year use



Lifetime use



Young adults (15-34)

Last year use

National estimates
of use in last year**Amphetamines**

Adults (15-64)

Last year use



Lifetime use



Young adults (15-34)

Last year use

National estimates
of use in last year**Heroin and other opioids**

High-risk opioid users

1.3 million

660 000

opioid users received substitution
treatment in 2018

Drug treatment requests

Principal drug in
about 34 % of all
drug treatment
requests in the
European Union

Fatal overdoses

Opioids are
found in
82 % of total
overdoses

ViewIt - some local data rounded (more information)

Adult profiles: Clients in treatment - Barnsley - Total - All in treatment

+ Supporting information

View data Download data

Numbers in treatment Geographic comparison

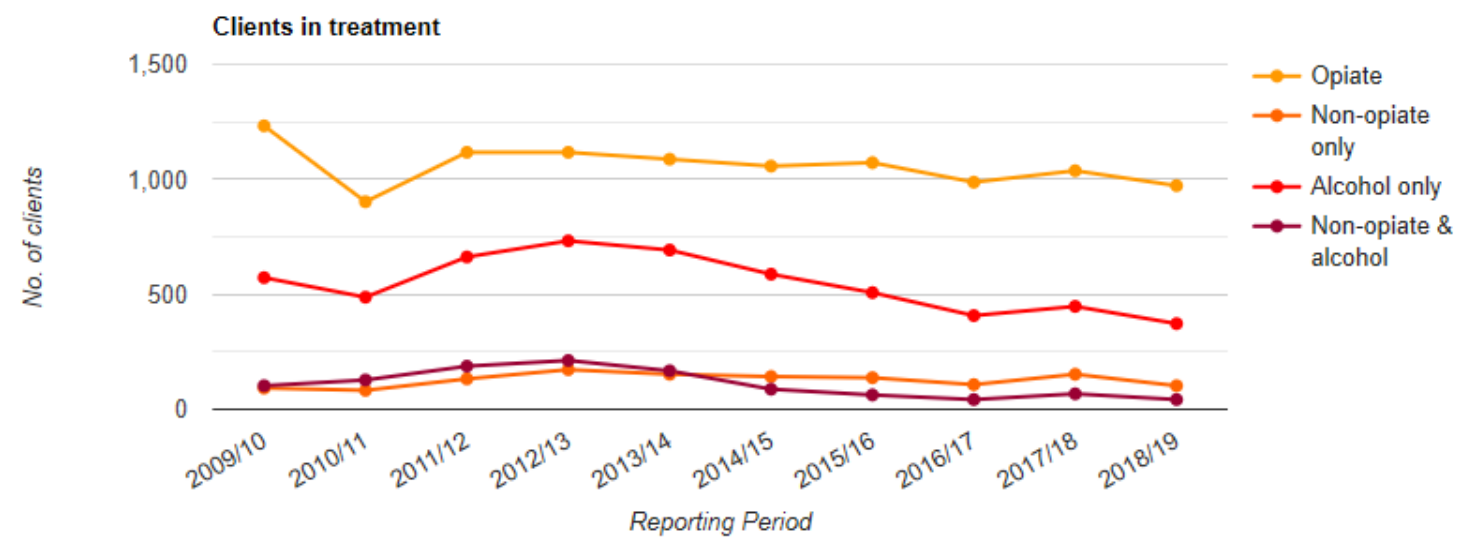
- Geographic area: Yorkshire & the Humber
- Local Authority: Barnsley
- Key Indicator Categories: Headline figures
- Key Indicator: Clients in treatment
- Substance category: All
- Sex: All

Substance categories

Opiate Non-opiate only Alcohol only

Non-opiate & alcohol

Apply Filters





The Effects legal highs

The main effects of almost all 'psychoactive' drugs, including, can be described using three main categories:

- **Stimulants**
- **Depressants**
- **Psychedelics or hallucinogens.**

Whilst drugs in each of the categories will have similarities in the kinds of effects they produce, they will have widely different strengths and effects on different people.



Stimulant legal highs

- These include
- Mephedrone
- MPDV
- Benzo Fury
- Cocaine



These act like amphetamines (speed), cocaine, or ecstasy, in that they can make you feel energised, physically active, fast-thinking, very chatty and euphoric.

Mephedrone became a Class B drug in 2010

The Risks Stimulants

NPS

These substances act like amphetamines, Mephedrone, cocaine or ecstasy.

- Feelings of overconfidence and disinhibited
- Induce feelings of anxiety, panic, confusion, paranoia, and even cause psychosis
- Strain to the heart and nervous system.
- Weaken the immune system which can lead to more colds, flu and sore throats.
- Low mood
- Stimulant drugs can also lead to long term mental health issues.

Depressant or sedative legal highs

Act similarly to heroin, alcohol, cannabis and benzodiazepines in that they can make you feel euphoric, relaxed or sleepy.

The Risks

Depressant DRUGS

- **Downer' or depressant 'legal highs'** similar to cannabis, benzodiazepines (drugs like diazepam)
- Reduce inhibitions and concentration
- Slow down your reactions and make you feel lethargic, forgetful or physically unsteady
- Drowsiness leading to accidents
- Unconsciousness, coma and death
- Negative lifestyle changes
- BBVs
- Recent PHE alert on fake benzodiazepines – Bensedrin, dangerously potent



Hallucinogens

- LSD
- Magic Mushrooms (Psilocybin)
- PCP (Phencyclidine)
- Ketamine
- Mescaline

What Is Spice?

Spice is the nickname for a herbal mixture containing one or more of **a group of drugs called synthetic cannabinoids**. Spice was originally a brand name of a drug, sold as a 'legal high' along with other brand names like Black Mamba, Annihilation, Exodus Damnation and Happy Joker. They contained a non-psychoactive herbal smoking mixture that had been mixed with one or more of a group of drugs known as **Synthetic Cannabinoid Receptor Agonists or SCRA**s for short. Spice (and Mamba) are now used as nicknames for any type of herbal mixture that has been coated with an SCRA. SCRA can appear as **powders or liquids** for use in e-cigarettes although in the UK SCRA are now almost always smoked in a herbal form. Spice mixtures are now almost always sold in clear snap bags for **around £10 per gram**.



Synthetic Cannabinoid Receptor Agonists (SCRAs)

Cannabis only partially stimulates CB1 and CB2 receptors, whereas SCRAs can fully stimulate them. SCRAs have been described as 'Super stimulators' and can be **up to 800 times more potent than cannabis**. SCRAs also may lack the calming effect of CBD/CBN found in cannabis.

There are hundreds of different SCRAs, some much stronger and more toxic than others. The potency of a packet of Spice depends on which SCRAs are used and how much is added to the herbal mixture. Spice is potent even at very low doses.

A pinch the size of a match-head is an active dose.

How Do People Use Synthetic Cannabinoids

The most common way to use synthetic cannabinoids is to smoke the dried organic material. Users also mix the sprayed plant material or brew it as tea. Other users buy synthetic cannabinoid products as liquids to vaporize in e-cigarettes



Physical Effects of Spice

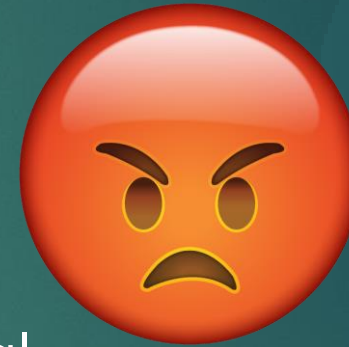
- Breathing difficulties
- Chest pain
- Collapse, dizziness
- Racing & irregular pulse
- Seizures
- Skin rashes
- Hypertension (high blood pressure)
- Hypokalaemia (low potassium levels)
- Affects the sympathetic nervous system
- Vomiting
- Renal injury (kidneys)
- Heart attack
- Cardiac toxicity (damage to the heart muscle)



Mental Effects of Spice

There are a wide range of mental effects described:

- Anxiety
- Irritability and psychosis-like effects
- Inappropriate or uncontrolled laughter
- Anger
- Sadness, flat affect, depression and suicidal thoughts
- Excitability, agitation, combativeness, aggression
- Thought disorganisation
- Panic attacks, paranoid thinking



Mental Effects of Spice Cont....

- Delusions
- Auditory and visual hallucinations, changes in perception
- Acute psychosis.
- Short-term memory and cognitive deficits,
- Confusion,
- Sedation and drowsiness, somnolence
- Nonsensical speech,
- Amnesia and increased focus on internal unrest are also reported.



Spice with Alcohol/drugs

Little is known about the risks of using SCRA's with other drugs, alcohol or medicines.

Mixing synthetic cannabinoids with alcohol or other drugs including medications can be especially dangerous. It can increase the risks of both drugs or the effectiveness of some medications and can lead to an greater risk of accidents or even death.

Because synthetic cannabinoids can **overstimulate** the **serotonin system**, it is important to avoid mixing them with antidepressants as they both stimulate serotonin activity in the brain, which can lead to **serotonin syndrome**, causing high fever, rapid pulse, sweating, agitation, confusion, convulsions, **organ failure**, coma and even **death**



Spice Withdrawal Effects

- Unrest and Agitation
- Anxiety and Panic attacks
- Tremors
- Heart palpitations
- Nausea and vomiting
- Sweating
- Nightmares
- Cravings
- Depression

This list is not exhaustive and can vary from person to person as can the intensity of withdrawals

Screening and Detection

Although Spice does have a smell when smoked, it is far less noticeable than cannabis and often is undetectable by smell alone when mixed with tobacco

SCRAs cannot be detected by screening tests for THC. There are a number of specific drug screens for particular SCRAs but many new ones may not appear in simpler tests.



Working With Spice Users

- Spice treatment options are usually community based.
- Psychosocial interventions (talking Therapies)
- Understanding the function of use
- Reduction plans
- Relapse prevention-looking at triggers and high risk situations. Building strategies and escape plans.
- Working to make positive lifestyle changes
- Building recovery capital
- Harm reduction work.



Spice Overdose

Dealing with Spice overdose

- Continuing high temperature above 38.5c feels hot and flushed
- Seizures(similar to epileptic fit) make area safe so cant hurt themselves
- Breathing difficulties, fast breathing, laboured breathing
- Severe chest pains
- Abnormal (snoring sound) or no breathing **CPR should be attempted**

Unconsciousness: it can be risky to startle or frighten people intoxicated on Spice as this can lead to heart failure. If they can't be woken by gentle shaking and calling. If you notice a blueness of the skin, including lips or fingernails (or greyish with paler lips for darker complexions), make sure they are lying on their side so they don't choke on vomit an

In the event of any of the above ring for an ambulance

Indicators of drug seeking behaviour

- ▶ Requesting a named drug persistently and forcefully, may include branded products
- ▶ Requesting dose increments
- ▶ Claiming allergies or sensitivities to alternatives
- ▶ Anger or irritability when questioned in detail
- ▶ Frequently calling the practice
- ▶ Requesting early prescriptions as “run out”
- ▶ Doctor shopping, may call out of hours services, seeking a specific clinician who they believe will prescribe

Dealing with Drug Seeking Behaviour: Which drugs?

- ▶ Benzodiazepines
- ▶ Opioids
- ▶ GABA drugs
- ▶ Newer antipsychotics e.g. quetiapine
- ▶ Stimulants e.g. methylphenidate
- ▶ OTC drugs e.g. painkillers containing codeine

Dealing with drug seeking behaviour

- ▶ Team work and consistency within the practice
- ▶ Joint work with local pharmacists
- ▶ Practice policy should be explained to patient embarking on treatment for misuse of prescription medication
- ▶ Setting ceilings for prescribing doses which trigger a review
- ▶ Adopting zero tolerance of abuse towards staff

When prescribing controlled drugs at risks of misuse

- ▶ Controlled quantities
- ▶ Controlled dispensing, e.g. only 7 days at a time
- ▶ Use one pharmacy for consistency
- ▶ See same GP for reviews

References

- ▶ <https://addiction-to-medication.org/atomic/> - 4 x e-learning modules
- ▶ [Dealing with drug-seeking behaviour - Australian Prescriber \(nps.org.au\)](http://www.nps.org.au)
- ▶ Frank - www.talktofrank.com