

Methamphetamine

- 1. "Illicit synthesis and use of methamphetamine is the chief type of amphetamine abuse in North America. Amphetamine and methamphetamine are available by prescription, but the once widespread use of amphetamine for appetite suppression has stopped. Prescribing it for other indications (eg, narcolepsy, attention-deficit hyperactivity disorder) is limited."**

Source: "Amphetamine Dependence", The Merck Manual of Diagnosis and Therapy, Section 15.Psychiatric Disorders, Chapter 195.Drug Use and Dependence, Merck & Co. Inc., from the web at
<http://www.merck.com/pubs/mmanual/section15/chapter195/195g.htm>
last accessed November 30, 2000.

- 2. "Methamphetamine is made in illegal laboratories and has a high potential for abuse and dependence. Street methamphetamine is referred to by many names, such as 'speed,' 'meth,' and 'chalk.' Methamphetamine hydrochloride, clear chunky crystals resembling ice, which can be inhaled by smoking, is referred to as 'ice,' 'crystal,' and 'glass.'"**

Source: National Institute on Drug Abuse, Infofax: Methamphetamine No. 13552 (Rockville, MD: US Department of Health and Human Services), from the web at
<http://www.nida.nih.gov/Infofax/methamphetamine.html>
last accessed November 16, 2000.

- 3. "Smokeable methamphetamine (ice) has received much publicity, although its use is largely limited to Hawaii and, to a lesser degree, California; the hydrochloride salt rather than the base is volatile. The effects are intense and persist longer than the brief 'high' of crack cocaine."**

Source: "Amphetamine Dependence", The Merck Manual of Diagnosis and Therapy, Section 15.Psychiatric Disorders, Chapter 195.Drug Use and Dependence, Merck & Co. Inc., from the web at
<http://www.merck.com/pubs/mmanual/section15/chapter195/195g.htm>
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- 4. "Methamphetamine releases high levels of the neurotransmitter dopamine, which stimulates brain cells, enhancing mood and body movement. It also appears to have a neurotoxic effect, damaging brain cells that contain dopamine and serotonin, another neurotransmitter. Over time, methamphetamine appears to cause reduced levels of dopamine, which can result in symptoms like those of Parkinson's disease, a severe movement disorder."**

Source: National Institute on Drug Abuse, Infofax: Methamphetamine No. 13552 (Rockville, MD: US Department of Health and Human Services), from the web at
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5. **"Methamphetamine is taken orally or intranasally (snorting the powder), by intravenous injection, and by smoking. Immediately after smoking or intravenous injection, the methamphetamine user experiences an intense sensation, called a "rush" or "flash," that lasts only a few minutes and is described as extremely pleasurable. Oral or intranasal use produces euphoria - a high, but not a rush. Users may become addicted quickly, and use it with increasing frequency and in increasing doses."**

Source: National Institute on Drug Abuse, Infofax: Methamphetamine No. 13552 (Rockville, MD: US Department of Health and Human Services), from the web at <http://www.nida.nih.gov/Infofax/methamphetamine.html> last accessed November 16, 2000.

6. **"The psychologic effects of using amphetamine or methamphetamine are similar to those produced by cocaine. Although no stereotypical withdrawal syndrome occurs, EEG changes occur, considered by some to fulfill the physiologic criteria for dependence."**

Source: "Amphetamine Dependence", The Merck Manual of Diagnosis and Therapy, Section 15.Psychiatric Disorders, Chapter 195.Drug Use and Dependence, Merck & Co. Inc., from the web at <http://www.merck.com/pubs/mmanual/section15/chapter195/195g.htm> last accessed November 30, 2000.

7. **"Amphetamine induces tolerance that develops slowly; dose can increase progressively, so that amounts several hundredfold greater than the original therapeutic dose may eventually be ingested or injected. Tolerance to various effects develops unequally, so that tachycardia and enhanced alertness diminish but psychotoxic effects, such as hallucinations and delusions, may occur. However, even massive doses are rarely fatal. Long-term users have reportedly injected as much as 15,000 mg of amphetamine in 24 h without observable acute illness."**

Source: "Amphetamine Dependence", The Merck Manual of Diagnosis and Therapy, Section 15.Psychiatric Disorders, Chapter 195.Drug Use and Dependence, Merck & Co. Inc., from the web at <http://www.merck.com/pubs/mmanual/section15/chapter195/195g.htm> last accessed November 30, 2000.

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

Source: National Institute on Drug Abuse, Infofax: Methamphetamine No. 13552 (Rockville, MD: US Department of Health and Human Services), from the web at <http://www.nida.nih.gov/Infofax/methamphetamine.html> last accessed November 16, 2000.

9. **"The central nervous system (CNS) actions that result from taking even small amounts of methamphetamine include increased wakefulness,**

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increased physical activity, decreased appetite, increased respiration, hyperthermia, and euphoria. Other CNS effects include irritability, insomnia, confusion, tremors, convulsions, anxiety, paranoia, and aggressiveness. Hyperthermia and convulsions can result in death."

Source: National Institute on Drug Abuse, Infofax: Methamphetamine No. 13552 (Rockville, MD: US Department of Health and Human Services), from the web at <http://www.nida.nih.gov/Infofax/methamphetamine.html> last accessed November 16, 2000.

10. "Abusers of amphetamine are prone to accidents because the drug produces excitation and grandiosity followed by excess fatigue and sleeplessness. Taken IV, amphetamine may lead to serious antisocial behavior and can precipitate a schizophrenic episode."

Source: "Amphetamine Dependence", The Merck Manual of Diagnosis and Therapy, Section 15. Psychiatric Disorders, Chapter 195. Drug Use and Dependence, Merck & Co. Inc., from the web at <http://www.merck.com/pubs/mmanual/section15/chapter195/195g.htm> last accessed November 30, 2000.

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

Source: National Institute on Drug Abuse, Infofax: Methamphetamine No. 13552 (Rockville, MD: US Department of Health and Human Services), from the web at <http://www.nida.nih.gov/Infofax/methamphetamine.html> last accessed November 16, 2000.

12. "Continued high doses of methamphetamine produce anxiety reactions during which the person is fearful, tremulous, and concerned about his physical well-being, an amphetamine psychosis in which the person misinterprets others' actions, hallucinates, and becomes unrealistically suspicious; an exhaustion syndrome, involving intense fatigue and need for sleep, after the stimulation phase; and a prolonged depression, during which suicide is possible."

Source: "Amphetamine Dependence", The Merck Manual of Diagnosis and Therapy, Section 15. Psychiatric Disorders, Chapter 195. Drug Use and Dependence, Merck & Co. Inc., from the web at <http://www.merck.com/pubs/mmanual/section15/chapter195/195g.htm> last accessed November 30, 2000.

13. "Persons use use high IV doses usually accept that sooner or later they will experience paranoia and often do not act on it. Nevertheless, with very intense drug use or near the end of weeks of use, awareness may fail and the user may respond to the delusions. Recovery from even prolonged amphetamine psychosis is usual. Thoroughly disorganized and paranoid users recover slowly but completely. The more florid symptoms fade

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within a few days or weeks, but some confusion, memory loss, and delusional ideas commonly persist for months."

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14. "In 1997, 4.4 percent of high school seniors had used crystal methamphetamine at least once in their lifetimes - an increase from 2.7 percent in 1990. Data show that 2.3 percent of seniors reported past year use of crystal methamphetamine in 1997 - an increase from 1.3 percent in 1990."

Source: National Institute on Drug Abuse, Infobox: Methamphetamine No. 13552 (Rockville, MD: US Department of Health and Human Services), from the web at <http://www.nida.nih.gov/Infobox/methamphetamine.html> last accessed November 16, 2000.

15. "According to the 1996 NHSDA, 4.9 million people (aged 12 and older) had tried methamphetamine at least once in their lifetimes (2.3 percent of population). This is not a statistically significant increase from 4.7 million people (2.2 percent) who reported using methamphetamine at least once in their lifetime in the 1995 NHSDA."

Source: National Institute on Drug Abuse, Infobox: Methamphetamine No. 13552 (Rockville, MD: US Department of Health and Human Services), from the web at <http://www.nida.nih.gov/Infobox/methamphetamine.html> last accessed November 16, 2000.

For a more complete perspective, view Drug War Facts sections Drug Use Estimates, Ecstasy, and Treatment