

To Rave or not to Rave
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Abstract

Club drugs, popular for years at all-night rave parties, are moving steadily mainstream, and the drugs, particularly Ecstasy, are easy to get in schools and neighborhoods. Club drugs are being used by Deaf teenagers, young adults who are in post-secondary programs as well as adults. These drugs, collectively termed "club drugs," include MDMA/Ecstasy(Rohypnol, GHB, and Ketamine). In recent years, certain drugs have emerged and become popular among teens and young adults at dance clubs and "raves." These presentation will give an overview on why these drugs have gained popularity, what club drugs are as well as the effects they have on the brain. A description of the characteristics, paraphernalia, signs of use related to the use of these club drugs will be shared along with information about raves.

Club drugs, popular for years at all-night rave parties, are moving steadily into the mainstream, and the drugs, particularly Ecstasy, are easy to get in schools and neighborhoods. Club drugs are being used by Deaf teenagers, young adults who are in post-secondary programs as well as adults. These drugs, collectively termed club drugs, include MDMA/Ecstasy(methylenedioxymethamphetamine), Rohypnol (flunitrazepam), GHB (gamma hydroxybutyrate), and Ketamine (ketamine hydrochloride). In recent years, certain drugs have emerged and become popular among teens and young adults at dance clubs and "raves."

Last year, more than 1.4 million people ages 18-25 reported taking Ecstasy at least once, the National Household Survey on Drug Abuse found. Among high school students, 9.2% of 12th graders, 6.2% of 10th 3.5% of 8th graders stated that they had used Ecstasy in the past year. Results from this survey also indicate that 11.7% of 12th graders, 8.0% of 10th graders, and 5.2% of 8th graders used Ecstasy at least once during their lives. In 1996, when Ecstasy use was first measured by this survey, 6.1% of 12th graders, 5.6% of 10th graders, and 3.4% of 8th graders reported lifetime use of the drug, and 9.1% of college students and 7.2% of young adults (ages 19-28) surveyed in 2000 reported that they had used Ecstasy at least once in the past year. This is up from 5.5% of college students and 3.6% of young adults surveyed in 1999 reporting past year Ecstasy use. Survey results also indicate that 13.1% of college students and 11.6% of young adults reported using MDMA at least once in their lifetimes. According to the *2000 National Household Survey on Drug Abuse*, more than 6.4 million people age 12 and older reported that they had used Ecstasy at least once in their lives. Among 12-17 year olds, 2.6% reported lifetime Ecstasy use, 9.7% of 18-25 year olds reported lifetime Ecstasy use.

Ecstasy, by far the most popular of the club drugs, produces both stimulant and psychedelic effects, and users often dance all night. Ecstasy users become bewitched by flashing lights and music with a steady bass beat. Teens may attend all-night rave parties featuring techno music and light shows that cater to an Ecstasy user's heightened sensitivities to light, sound and touch. To capitalize on their heightened senses, partiers wave light sticks, tape flashing "belly lights" to their navels or wear luminescent, flickering bracelets called Toobies. Users may wear fuzzy sweaters or other soft fabrics.

Some Ecstasy users coat surgical masks with vapor rubs for the cooling rush sensation. Ecstasy also causes involuntary jaw clenching, so users suck on pacifiers and candy necklaces to alleviate the effects. Abuse experts and law enforcement authorities say that as users get bored with Ecstasy alone, they are experimenting with dangerous drug combinations. Ecstasy users may snort a "bump" of ketamine to intensify the hallucinatory aspects of Ecstasy at the peak of a "roll." As the Ecstasy wears off, users may drink a shot glass or capful of GHB to ease off Ecstasy's speed effects.

Before it was made illegal in 1985, MDMA was used by psychiatrists as a therapeutic tool. Studies are currently underway in Spain and Israel assessing MDMA's effectiveness in the treatment of Post Traumatic Stress Disorder (PTSD). MDMA is a "mood elevator" that produces a relaxed, euphoric state. It does not produce hallucinations. MDMA takes effect 20 to 40 minutes after taking a tablet, with little rushes of exhilaration which can be accompanied by nausea. 60 to 90 minutes after taking the drug, the user feels the peak effects. Sensations are enhanced and the user experiences heightened feelings of empathy, emotional warmth, and self-acceptance. The effects of 'real' ecstasy subside after about 3-5 hours. Users report that the experience is very pleasant and highly controllable. Even at the peak of the effect, people can usually deal with important matters. The effect that makes MDMA different from other drugs is empathy, the sensation of understanding and accepting others. Ecstasy is almost always swallowed as a tablet or capsule. A normal dose is around 100-125 mg. Black market "ecstasy" tablets vary widely in strength, and often contain other drugs.

Ecstasy is not physically addictive. However, the drug can often take on great importance in people's lives, and some people become rather compulsive in their use. Taken too frequently, however, MDMA loses its special effect. MDMA releases the brain chemical serotonin, elevating mood and acting as a short-term antidepressant. Frequent or high doses have been linked to neurotoxic damage in laboratory animals. It is still unknown whether such damage occurs in humans or, if it does, whether this has any long-term, negative consequences. There have been some deaths associated with MDMA. Usually these have been a result of heatstroke from dancing for long periods of time in hot clubs without replenishing lost body fluids. Much of what is sold as "ecstasy" on the black market actually contains other drugs. Mixing ecstasy with alcohol or other drugs increases the risk of adverse reactions. When you take ecstasy (or any stimulant drug) your body temperature rises. When you take ecstasy in a hot place (like a rave) your body temperature rises even more. With body temperatures raised to these very high levels there is a risk of developing heat stroke. When your body overheats you lose fluid. Some ravers lose pints and pints of fluid when dancing in hot places. At a crowded indoor rave you could lose up to 6 pints in 6 hours. These fluids must be replaced. Sometimes "ecstasy" tablets do not contain real ecstasy. DXM, a cough suppressant that dries out the lungs, is often found in fake ecstasy tablets. In high doses DXM not only raises your body temperature but also dries out your skin and prevents you from sweating. Since sweating is the main way the body cools itself down, DXM is even more likely to cause heatstroke.

Ketamine, an anesthetic used mostly on animals, is a disassociate drug that produces hallucinations, GHB is a tasteless, odorless depressant that sedates and intoxicates users and may be used to come down from Ecstasy. GHB also has been used by rapists to subdue their victims. The tasteless and odorless depressants Rohypnol and

GHB are often used in the commission of sexual assaults due to their ability to sedate and intoxicate unsuspecting victims. Rohypnol, a sedative/tranquilizer, is legally available for prescription in many countries outside of the U.S. and is widely available in Mexico, Colombia, and Europe. Although usually taken orally in pill form, reports have shown that users are also grinding Rohypnol into a powder and snorting the drug.

GHB usually comes as an odorless liquid, slightly salty to the taste, and sold in small bottles. It has also been found in powder and capsule form. It is classified as a sedative-hypnotic, and was originally developed as a sleep-aid. At lower doses GHB has a euphoric effect similar to alcohol, and can make the user feel relaxed, happy and sociable. Higher doses can make the user feel dizzy and sleepy, and can sometimes cause vomiting, muscle spasms, and loss of consciousness. Overdoses will always cause loss of consciousness (temporary coma), and will slow down breathing. Sometimes, and particularly if mixed with alcohol, GHB can slow breathing down to a dangerously low rate, which has caused a number of deaths. A teaspoon or capful by mouth is usually considered a normal dose, but strength can vary from batch to batch. Careful users start with half a teaspoon and wait at least an hour before deciding whether to take more. The effects are usually felt between ten minutes and one hour after ingestion. The primary effects last about 2-3 hours, but residual effects can last up to a whole day. It's hard to find the proper dose with GHB. A teaspoon might be perfect one time, but an overdose the next time. It depends on body weight, and how much food is in the stomach, and other random factors. The effects may not peak for up to two hours, and many overdoses have occurred from people not waiting long enough before taking more. Mixing GHB with alcohol or other depressants is extremely dangerous and has caused many deaths due to respiratory failure. Passing out on GHB by itself is also dangerous and potentially life-threatening. Don't drive on GHB. One dose can impair motor coordination by as much as six drinks of alcohol. Also, the effects come on fast and, unlike alcohol, cannot be controlled or paced. Regular, daily use of GHB can cause physical dependency with harsh withdrawal symptoms.

The abuse of ketamine, a tranquilizer most often used on animals, became popular in the 1980s, when it was realized that large doses cause reactions similar to those associated with the use of PCP, such as dream-like states and hallucinations. The liquid form of ketamine can be injected, consumed in drinks, or added to smokable materials. The powder form can also be added to drinks, smoked, or dissolved and then injected. Legitimately used by veterinarians, ketamine is sometimes stolen from animal hospitals and veterinary clinics. DEA reporting also indicates that some of the ketamine available in the U.S. has been diverted from pharmacies in Mexico.

Using MDMA can cause serious psychological and physical damage. The psychological effects can include confusion, depression, anxiety, and paranoia and may last weeks after ingesting the substance. Physically, a user may experience nausea, faintness, and significant increases in heart rate and blood pressure. MDMA use can cause hyperthermia, muscle breakdown, seizures, stroke, kidney and cardiovascular system failure, and may lead to death. Also, chronic use of MDMA has been found to produce long-lasting, possibly permanent, damage to the sections of the brain critical to thought and memory.

Rohypnol, GHB, and ketamine are all central nervous system depressants. Lower doses of Rohypnol can cause muscle relaxation and can produce general sedative and

hypnotic effects. In higher doses, Rohypnol causes a loss of muscle control, loss of consciousness, and partial amnesia. When combined with alcohol, the toxic effects of Rohypnol can be aggravated. The sedative effects of Rohypnol begin to appear approximately 15–20 minutes after the drug is ingested. These effects typically last from 4–6 hours after administration of the drug, but some cases have been reported in which the effects were experienced 12 or more hours after administration. The use of ketamine produces effects similar to PCP and LSD, causing distorted perceptions of sight and sound and making the user feel disconnected and out of control. The overt hallucinatory effects of ketamine are relatively short-acting, lasting approximately one hour or less. However, the user's senses, judgement, and coordination may be affected for up to 24 hours after the initial use of the drug. Use of this drug can also bring about respiratory depression, heart rate abnormalities, and a withdrawal syndrome.

SIGNS THAT SOMEONE MAY BE USING CLUB DRUGS

1. Staying out very late. Most “RAVE” parties begin late and end at daybreak. “RAVE” parties are the primary distribution point for Club drugs
2. Extreme or moderate irritability the day after consuming these drugs. Ecstacy is called the hug drug because it heightens a users sensory purceptors and lowers inhibitions. It triggers the release of serotonin in the brain, which governs mood. A depletion of serotonin in the brain causes irritability the day after use.
3. Possessing a baby pacifier or a pacifier made of candy. Some Club drugs cause the users to clench their teeth tightly which causes discomfort. The pacifier eliminates the discomfort.
4. Inability to sleep.
5. Possession of flourescent light sticks. Because drug users sensory purceptors are heightened with drugs such as ecstacy, flourescent light sticks are popular with club drug users.
6. Alcohol is not synonymous with club drug use. When alcohol is mixed with club drug use, it compounds the effects of the drug. GHB and Rohypnol are considered date rape drugs and the date rape effect is heightened with the introduction of alcoholic beverages.

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