THE LAW

Illegal use, possession, manufacture or supply of amphetamines carries heavy fines and/or a prison sentence. Penalties range from a $2,000 fine and/or two years in prison to a $100,000 fine and/or imprisonment for 25 years. In addition, any person convicted of a drug offence will receive a criminal record, which can lead to difficulties in getting a job, credit or visas for overseas travel.

WHAT ARE AMPHETAMINES?

Amphetamines are a group of drugs commonly known as speed. They increase the activity of certain chemicals in the brain and are classed as stimulant drugs.

Some examples of amphetamines include:

- dexamphetamine, which is used for medical purposes to treat conditions such as Attention Deficit Hyperactivity Disorder (ADHD)
- methamphetamine, which is another form of amphetamine that is more potent than dexamphetamine. It can also be known as crystal, meth or rock.

WHERE DO AMPHETAMINES COME FROM?

Amphetamines were first developed in Germany in 1887. During the 1930s, they were introduced as a treatment for asthma and low blood pressure. During World War II they were used to help soldiers fight fatigue.

HOW ARE AMPHETAMINES USED?

Amphetamines can be swallowed, injected, smoked or inhaled (snorted). The effects of amphetamines can last from four to eight hours. Sometimes a person may experience a hangover effect that can last up to three days.
HOW MANY PEOPLE USE AMPHETAMINES?

The 2004 National Drug Strategy Household Survey reported that 12% of Western Australians aged 14 years and over had ever used amphetamines (for non-medical purposes). Overall, 4% of Western Australians aged 14 years and over had used amphetamines in the last year and 2% had used amphetamines in the last four weeks. Amphetamine use was highest among 20- to 29-year-olds. In total, 30% of 20- to 29-year-olds had ever used amphetamines, 15% had used amphetamines in the last year and 7% had used amphetamines in the last four weeks.

HEALTH EFFECTS OF USING AMPHETAMINES

The effects of amphetamines will vary from person to person depending on characteristics of the:

- **Individual (user)** – Mood, physical size, health, gender, previous experience with amphetamines, expectations of the drug, personality, whether the person has had food and whether other drugs have been taken.

- **Drug** – The amount used, its purity, and whether it is smoked, swallowed, snorted or injected.

- **Setting (environment)** – Whether the person is using with friends, on his/her own, in a social setting or at home, at work or before driving.
<table>
<thead>
<tr>
<th>SHORT-TERM EFFECTS</th>
<th>SHORT-TERM EFFECTS OF HIGHER DOSES</th>
<th>LONG-TERM EFFECTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>irritability</td>
<td>sweating</td>
<td>malnutrition and weight loss</td>
</tr>
<tr>
<td>suspiciousness</td>
<td>headaches</td>
<td>reduced resistance to infection</td>
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<tr>
<td>anxiety</td>
<td>pale skin</td>
<td>violent behaviour</td>
</tr>
<tr>
<td>increased alertness</td>
<td>restlessness</td>
<td>emotional disturbances</td>
</tr>
<tr>
<td>threatening manner</td>
<td>dizziness</td>
<td>periods of psychosis</td>
</tr>
<tr>
<td>increased confidence</td>
<td>feelings of being powerful or superior</td>
<td>paranoia</td>
</tr>
<tr>
<td>panic attacks</td>
<td>shaking</td>
<td>delusional thoughts and behaviour</td>
</tr>
<tr>
<td>increased energy</td>
<td>repetitive movement</td>
<td>mood swings</td>
</tr>
<tr>
<td>talkativeness</td>
<td>irregular breathing</td>
<td></td>
</tr>
<tr>
<td>inability to sleep</td>
<td>very rapid or irregular heartbeat</td>
<td></td>
</tr>
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<td>reduced appetite</td>
<td>hostility</td>
<td></td>
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<tr>
<td>increased breathing rate</td>
<td>aggression</td>
<td></td>
</tr>
<tr>
<td>enlarged pupils</td>
<td>hallucinations</td>
<td></td>
</tr>
<tr>
<td>increased pulse rate</td>
<td>delusions</td>
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<td>increased blood pressure</td>
<td>jaw clamping/teeth grinding</td>
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As methamphetamine is more potent than dexamphetamine, users are likely to experience more severe side-effects.

The effects of methamphetamine include anxiety, depression, paranoia, aggression and psychotic symptoms. Methamphetamine also increases the risk of mental health problems, so people with an existing mental health condition should be even more cautious about using this drug.

There are also dangerous effects associated with the method of use. Snorting can damage the fragile mucous membrane in the nasal passages. It produces burns and sores on the membranes that line the interior of the nose. Injecting amphetamines can result in blocked blood vessels that can cause major damage to the body’s organs, such as inflamed blood vessels and abscesses, blood poisoning, bacterial infections which may damage the heart valves, vein collapse, infection at injection site, bruising or more serious injuries if users inject into an artery or tissue.

**AMPHETAMINES AND OTHER DRUGS**

Amphetamine users may use other drugs such as minor tranquillisers, cannabis, alcohol or heroin to cope with some of the undesirable effects of amphetamines. These users may develop a rollercoaster dependence on several drugs. For example, some people may need amphetamines each day to get them going and minor tranquillisers each night to get them to sleep. This type of dependence can lead to a variety of very serious physical and psychological problems. Using more than one drug (poly-drug use) increases the harm associated with drug use.

If amphetamines are combined with alcohol, users may not feel the effects associated with alcohol straightaway. However, blood alcohol concentration still goes up and their motor skills (such as coordination and reflexes) are still impaired.
Combining amphetamines with other stimulants such as ecstasy or cocaine can greatly influence the immediate effects. The result can be unpredictable and the effects may be similar to taking a very large dose of amphetamines.

**AMPHETAMINES AND MENTAL HEALTH PROBLEMS**

Amphetamine use can cause anxiety, depression, paranoia and psychosis in those people who have vulnerability to mental health problems.

**RELATIONSHIPS**

Drug use can lead to social and emotional problems and can affect a person’s relationships with family and friends. For example, users may develop paranoid behaviour and become difficult to live with. They may become focused only on drugs and have no time for friends, or may argue over money with friends and family.

**TOLERANCE, DEPENDENCE AND WITHDRAWAL**

Regular, heavy amphetamine use can lead to tolerance and dependence.

- **Tolerance** – This means that a person needs more of the drug to achieve the same effects they experienced previously with smaller amounts.

- **Dependence** – This means that the drug becomes central to a person’s life and they feel they cannot function properly without it.
Withdrawal – Unlike regular and dependent users of alcohol and heroin, some regular users of amphetamines do not use every day. Rather, they binge for a day to a week, before crashing for a couple of days. Physiologically speaking, a speed binge results in neurotransmitter depletion (dopamine, serotonin, noradrenalin), which combined with lack of sleep and inadequate nutrition, results in exhaustion, paranoia, anxiety, and depression. When eventually they do choose to stop the same crash pattern follows.

Withdrawal for heavy users usually begins two to three days after the crash, and can last for a period of months, depending on the degree of involvement with amphetamines prior to stopping use. Common short-term symptoms include aggression, mood swings, irritability, sleeping disorders and cravings. Long-term symptoms include dysthymia, a mood disorder which features a chronic depressed or irritable mood. Other symptoms may include eating and sleeping disturbances, fatigue and poor self-esteem, depression, mood swings, cravings, lethargy and sleeping difficulties. Many of these symptoms are primarily related to the re-establishment of normal neurotransmitter levels in the brain, which can take a much longer period of time.

It is important that both users and clinicians alike understand this process. It can take a long period of time (six months to a year) before the body is sufficiently replenished and normal functioning returns.
OVERDOSE

Overdose occurs when the level of intoxication from the drug reaches a point where it begins to produce physical and/or psychological harm. Overdose from amphetamines usually results from the drug’s stimulatory properties and can cause strokes, heart failure, seizures and death.

The risk of overdose generally increases with a larger dose. As the strength and content of street amphetamines is unknown it can be difficult to judge the dose, increasing the risk of overdose.

AMPHETAMINES, PREGNANCY AND BREASTFEEDING

Amphetamine use has been linked with bleeding, early labour and miscarriage and can affect the baby’s development before birth. Amphetamines also cause the heart rate of mother and baby to increase.

If amphetamines are used close to birth, the baby may be born directly affected, and may be over-active and agitated. Babies of mothers who regularly use amphetamines may also experience withdrawal symptoms in the first few weeks after birth.

It is not yet known whether children of mothers who used amphetamines during their pregnancy experience long-term problems in mental or physical growth, but initial studies give some cause for concern.

Not much is known about the effects of amphetamines on the baby during breastfeeding. There is evidence that babies feed poorly and may be irritable.

Injecting amphetamines also increases the risk of HIV infection and other disease for both the mother and the baby.
It is recommended that women check with their doctor (or other health professional) if they are using or planning to use drugs while pregnant or breastfeeding, including prescribed and over-the-counter medicines.

COST

The street price of amphetamines changes depending on availability and market trends. The cost of purchasing amphetamines can lead to financial problems for both occasional and regular users.

AMPHETAMINES AND DRIVING

Using amphetamines affects a person’s driving ability by:

- increasing the driver’s confidence
- giving a false sense of increased driving ability
- increasing risk-taking behaviour
- increasing the risk of having a crash.

In Western Australia, it is against the law for anyone to drive under the influence of drugs, including amphetamines. The Road Traffic Act 1974 Section 63 states that ‘a person who drives or attempts to drive a motor vehicle while under the influence of alcohol, drugs, or alcohol and drugs to such an extent as to be incapable of having proper control of the vehicle commits an offence, and the offender may be arrested without warrant’. Breaking this law carries penalties including disqualification from driving, fines and/or imprisonment.
A person convicted of an offence under the Road Traffic Act 1974 is liable for the following:

**First Offence:**
- a fine ranging from $400 to $2,500
- disqualification from holding or obtaining a driver’s licence for up to six months.

**Second Offence:**
- a fine ranging from $800 to $3,500 or imprisonment for six months
- disqualification from holding or obtaining a driver’s licence for up to two years.

**Third or Subsequent Offence:**
- a fine ranging from $800 to $5,000 or imprisonment for eighteen months
- permanent disqualification from holding or obtaining a driver’s licence.

**TAKING CARE**

To be safe, amphetamine use should be avoided. However, if you use the drug or know someone who does, remember the following:

- It is important to eat and sleep before and after a drug use episode or binge.
- Because using amphetamines can have harmful effects, users can be in dangerous situations. Therefore, they should not be left alone.
• If you suspect any bad effects, call an ambulance immediately. Don’t delay, you could save a life. The ambulance officers are there to help you. Be sure to describe what drug the person has taken. If the user is unconscious and you know first aid, place them in the recovery position and ensure the airway is clear. If they have stopped breathing, perform Expired Air Resuscitation (EAR). The police are not required to attend unless a death has occurred or the ambulance officers are threatened.

  – It is safer not to inject drugs. However, if you do inject, use clean equipment (needle, syringe, swab, tourniquet, spoon, glass, filter and sterile water) and do not share gear. Fitpacks® which contain clean syringes are available from:

    – most pharmacies

    – needle and syringe exchange programs (For information on opening times and locations of these programs phone the Alcohol and Drug Information Service, contact details are outlined at the back of this booklet)

    – some regional hospitals, health centres and nursing posts.

TREATMENT PATHWAYS

There are a variety of treatment pathways available for people with amphetamine-related problems. The drug(s) used and the availability of services, as well as the user’s health, desired outcome, support network and unique circumstances need to be taken into consideration. Deciding on the best treatment pathway, or combination of pathways, is best done in consultation with a drug and alcohol counsellor.
MORE INFORMATION

For up-to-date information about amphetamines or other drugs call the Alcohol and Drug Information Service or Parent Drug Information Service, or visit www.drugaware.com.au

Alcohol and Drug Information Service

- Access information about drugs confidentially and quickly.
- Talk to a professionally trained counsellor about alcohol or other drugs.
- Find out about other services.
  
  (08) 9442 5000
  1800 198 024 toll free country callers

Parent Drug Information Service

- Drug information and support for parents and family members.
- Talk to a professionally trained counsellor about alcohol and other drugs.
- Talk confidentially to another parent for strategies and support.
- Find out where to go for further help.
  
  (08) 9442 5050
  1800 653 203 toll free country callers

www.drugaware.com.au

- Access detailed information about drugs.
- Find out about the latest issues.
- Post questions and have them answered anonymously by health professionals.
- Find links to other useful sites.

For further information about the Drug and Alcohol Office’s Prevention Directorate programs, publications or resources call (08) 9370 0358 or visit www.dao.health.wa.gov.au
REFERENCES


While every reasonable effort has been made to ensure the accuracy of this brochure, no guarantee can be given that its contents are free from error or omissions. The Minister for Health, the Drug and Alcohol Office, the State of Western Australia and their employees and agents expressly disclaim liability for any act or omission occurring in reliance on the information in this brochure and for any consequences of any such act or omission.

Changes in circumstances after the date of publication of this brochure inevitably will result in this brochure becoming outdated in some respects. It is the responsibility of readers of this brochure to keep themselves updated with any changes or developments.
For information on amphetamines, visit www.drugaware.com.au
or for confidential advice and counselling call the Alcohol and Drug Information Service 24 hour helpline
on 9442 5000 or 1800 198 024 (country callers).