



A USER'S GUIDE TO METHAMPHETAMINE

A self-help guide to reduce harm for people who use methamphetamine

1st Edition, March 2017

Acknowledgements

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This information does not constitute medical advice. Please seek the immediate help of a qualified medical practitioner about any personal health concerns. This booklet is being distributed for information purposes only.

In the current state of crisis related to crystal methamphetamine, this booklet is intended as a guide to reduce harm for people who use methamphetamine. It lists the most common features of methamphetamine use, ways to reduce harm associated with the use of meth, and strategies for cutting down and quitting. The best way to avoid problems with drugs is to not use them.

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The best way to avoid problems with drugs is to not use them. However, if you choose to use them it is important to do so in the safest way possible. This booklet aims to give information to current meth users about the drug and the risks involved, so that they can make more informed decisions.

This booklet does not have to be read from cover to cover. The first half gives the reader information on methamphetamine (also known as Meth and Crystal Meth) common features of meth use and ways to reduce problems associated with the use of meth. Users who want to cut down, or stop using altogether, will find the second half of the booklet useful.

Of course, not all the information that users need can be contained within one booklet. For further information about meth, or any other drug, contact your local telephone drug information service. The numbers for these services are listed at the end of this booklet.

WHAT IS METHAMPHETAMINE?

“METHAMPHETAMINE” is the name given to a range of different street drugs that, in chemical terms, are related to **AMPHETAMINE**. Amphetamines are drugs that are classed as **STIMULANTS**, or sometimes they are called psycho-stimulants. Stimulants are drugs that increase central nervous system activity – they basically change the way your brain does things, including making you breathe faster, making your heart beat faster, giving you more energy, and making you feel like you can handle anything that comes along. A variety of stimulants are used all over the world, some for many centuries. They vary in strength and effect, and may be legal or illegal. Amphetamine, ephedrine and cocaine are examples of strong stimulants while caffeine and nicotine are also stimulants, but have much weaker effects. Some stimulants occur naturally, like cocaine, which comes from the coca plant; however, amphetamine is a completely man-made substance that is related to adrenaline, a stimulant that occurs naturally in our bodies.

Meth most often comes in powder form. It varies in colour from white through to beige, orange and pink, and anywhere in between. The powder may be very fine and powdery, or more coarse and crystalline, depending on how much it's been cut and with what. Meth has a bitter, chemical taste and sometimes a pretty strong smell, so often people taste or smell it before they buy it to make sure they're actually getting what they pay for. But the smell and taste won't always guarantee that it is actually meth.

The chemicals that are used to make meth were banned in 2003, which means that backyard chemists or “cooks” making meth have since had to find new ingredients to put into it. It also means that now, what we call “meth” is really a whole family of different but related drugs, each with its own recipe using commonly available chemicals and over-the-counter medications such as ephedrine, pseudoephedrine, phenylpropanolamine, iodine, red phosphorous, hydrochloric acid, ether, hydriodic acid, and anhydrous ammonia.

The average purity has started to increase recently, but even so, chances are that if you buy a gram of powder meth, most of what you get is going to be things other than meth, like sugar or glucose, bicarbonate soda, ephedrine, pseudoephedrine, vitamins, Epsom salts or some other substance. There is NO quality control on street drugs, and no guarantee that what you're buying is safe.

Although powder is still the most common form of amphetamine available it does come in other forms, such as dexamphetamine or Ritalin.

One form of meth that has recently become more available is a crystal sort of meth. As with normal powder meth, there are many different recipes that are used to make the crystal form, and there are different sorts available that may look, smell and taste different. They have a lot of different names too, including "crystal", "crystal meth", "ice", "jib", "crank", and "glass". Although people may think that they are all different from each other, the fact is that they are all forms of meth and they all have pretty similar sorts of effects; it's the intensity of the effects that differs.

Generally, these types of meth come in the form of a crystalline powder, or crystals that look like bits of broken glass or crushed ice. They are usually colourless but may be lightly coloured pink, blue or green. People use these forms of meth in a number of different ways, including snorting or swallowing, but many people either inject them or smoke them through a special glass pipe a bit like a crack pipe. Most of the meth available in Canada is made here, but some of it also seems to be imported from countries like the Philippines and Thailand.

Although these forms of meth have only started to become more available within the region in the last few years, we know from the experiences of other countries that they are more dangerous than the older types of meth that have been around for decades.

In countries like Japan, the Philippines and parts of America like the West Coast and Hawaii, drugs with names like "ice" and "shabu" have been around for a while and have caused a lot of problems for people who use them. That's because these crystal forms of meth are a lot stronger and purer than many meth users are used to.

Everything that we say about meth in this book also applies to crystal forms of meth, no matter what name the dealer gives them. And actually, what we say about meth applies more to crystal, because all crystal is a stronger form of meth. So, when we say that meth keeps you awake it means crystal will keep you awake longer. When we say meth might cause you depression or anxiety when you're coming down, it means that crystal is more likely to do that and that the comedown will be more intense than with normal meth.

Keep in mind, whatever name you give to the crystal forms of meth that have become more widely available in the last couple of years, it is a strong form of meth that will cause the same sorts of effects and problems – just more intensely than would normal meth.

Meth is a drug that's pretty easy to get, and a wide range of people use it. Since the early 2000s, meth has been the third most popular illegal drug in Canada (after marijuana and cocaine). While we can't be sure how many people in Ontario are using meth, there are several indicators that tell us meth has become much more popular in recent years. These indicators include a larger number of people seeking help for amphetamine addiction, a larger number of people being admitted to hospital with illnesses or injuries related to amphetamine, and an increase in amphetamine-related arrests and drug seizures by police.

WHY DO YOU USE METH?

There are many reasons for first trying meth and for continuing to use it. The most common reasons reported by meth users are:

- To feel good
- To party and have fun, for energy and self-confidence
- Curiosity – maybe your friends have tried it and have told you about the good effects
- It can help you feel like one of the group – especially if all your friends are saying how much fun it is and you don't want to feel like you're missing out
- Availability – it's easy to get and cheaper than some other drugs
- It can suppress your appetite and help you lose weight
- Boredom – maybe you're just really bored and looking for a bit of action
- Believe it can help cope with stress, worries or a bad mood
- Believe it can help with work, university or school by giving more energy
- Some people use meth out of habit

**ASK YOURSELF,
"WHY DO I USE METH?"**



TIPS TO AVOID GETTING BAD METH

- **BE VERY CAUTIOUS** about what you're using; meth and other stimulants may be laced with Fentanyl, which can lead to overdose. Ask your pharmacist about receiving a free take-home Naloxone kit.
- If you don't already have a reliable dealer, try to find one and stick with them
- Listen to what other people say about new batches
- When you're using a new batch, only try a little at first... you can always use the rest later if you need to

PATTERNS OF METH USE

Experimental Use: Usually this pattern is seen in young adults who try meth a couple of times or on an irregular basis. You'll usually come down from it and may feel tired, depressed and irritable for a few days.

Occasional Use: Most meth users fall into this category, where you may use mainly for a big night out and the feelings of euphoria, confidence, alertness and energy help you feel really sociable. Too much may make you feel anxious and irritable, or suspicious and paranoid. If you use meth with alcohol or other drugs, or too much meth in one night, you increase your chances of a bad reaction. Also, you may feel confident or "invincible" – but be careful crossing the road, DON'T drive, DON'T pick fights, and ALWAYS use condoms if you have sex.

Situation Specific Use: Some groups of people use meth in certain situations, usually for energy and alertness. Truckers, students studying for exams, shift workers, sports people and soldiers at war have all used meth for these reasons. Be aware, though, that performance is not necessarily made better and it might even be made worse, especially if you use other drugs at the same time. If you use meth too often, no matter what for, you'll build up tolerance (get used to the dose), and you might start to use downers to get to sleep.

Intensive Use: In this pattern, meth is a major part of your life, although you might be handling other areas of your life OK – maybe you've still got friends and a job. Don't be fooled though, if you're using meth often enough, it's likely to be doing you some harm. Maybe all your weekdays are spent coming down, or all your money goes up your nose or in your arm, or you might not see old friends or your family as much as you'd like.

Compulsive Use: This is the least common but most harmful use pattern. Meth becomes the focus of your life, usually causing work, relationship, physical, mental, financial and legal problems. You might get into some pretty heavy binges (usually injecting which causes all sorts of problems in itself) and keep going until there's none left and you start coming down pretty intensely, sleep for a day or two and get up and do it all over again. All the harms discussed in the next section are more likely the more heavily you use meth. Also, you'll probably start to use other drugs more heavily to try to medicate all the meth side effects.

ASK YOURSELF, "WHICH PATTERN DO I FALL INTO?"

HOW DO YOU USE METH?

Most people snort or swallow meth the first time they try it. These are generally safer ways of using meth than injecting it, although people may report nasal problems if they snort a lot, or may not like the chemical taste of meth. Meth may also be sprinkled on top of weed and smoked (snow-cones), or inserted into the anus from where it is absorbed (plugging, booty bumping). People who buy the crystal forms of meth known by names like “ice”, “jib” or “crystal”, sometimes smoke these in a special glass pipe, a bit like a crack pipe.



TIPS TO AVOID PROBLEMS FROM SNORTING OR SWALLOWING METH

- Chop granules of meth with a knife or razor blade before snorting
- Alternate nostrils when snorting
- Switch to swallowing until any nasal irritation goes away if you don't like swallowing because of the taste of meth, wrap it in a cigarette paper and swallow it whole or mix it with a sweet drink like orange juice or coke
- Rubbing meth into your gums or tongue may give you mouth ulcers

Research shows that the **riskiest way of using meth is to inject it**. If you've got friends who inject meth, they might have told you how much better it is to whack it up – they'll tell you that it's easier and cleaner than snorting, that your nose doesn't hurt, that you get this amazing rush and that it's cheaper because you get a better bang for your buck (that is, quicker and better effects). But you're likely to use a lot more meth if you inject rather than snort or swallow it, so you'll build up tolerance much quicker, and you risk becoming addicted, which means you're more likely to have all sorts of health and other problems. People who inject use more other drugs to medicate meth side effects, also increasing the risk of health problems. They also end up spending more money on drugs and usually have worse comedowns.

Snorting meth brings the effects on slower than injecting it and they are not so intense, but it lasts longer and the comedown is nowhere near as intense. Swallowing meth brings it on slowest and weakest of all, but also lasts the longest and the comedown is more bearable. If you snort or swallow meth, you won't build up so much tolerance and you're also more likely to be able to resist the urge to use more if you think you should slow down. Injecting can also spread blood-borne viruses like **hep C**, **hep B** and **HIV**. This can happen when you share any injecting equipment which may have blood on it like needles, spoons, water, swabs, tourniquets, and filters, or when you stop the bleeding with your fingers. To avoid problems, having your own needle is not enough. Sharing any equipment can pass on these viruses. Many meth users also report vein problems like scarring and bruising from improper injecting. Tips for better injecting are listed in the next section.

TIPS TO AVOID PROBLEMS FROM INJECTING METH

- **Snort or swallow meth if at all possible**
- If you inject, use a new needle every time and don't share any other injection equipment like spoons, water, swabs, tourniquets, or anything with blood on it. Don't stop anyone else's bleeding with your finger – use a fresh tissue or cotton wool and then a band-aid
- Always keep a stock of new needles at home, and take needles in a safe container with you when you go out – carrying clean needles is legal
- Get plenty of needles/paraphernalia *before* you score or when planning a big night
- Do not use cigarette filters as some brands contain glass fibres which can damage your heart and veins. A corner torn from an alcohol swab, a Q-tip or a tampon is safer
- If you don't have a new needle, try snorting or swallowing meth, or if you must inject, clean the needle thoroughly with full-strength bleach and water.
- If you must re-use mixing equipment (e.g., spoons, bowls), clean them with bleach, alcohol swabs or soapy boiled water. **Never re-use filters or swabs because they cannot be cleaned properly**
- **Wash hands with soap**, or use an alcohol swab before injecting
- Take breaks from using meth (e.g., try using every second weekend instead of every weekend)
- Reduce the amounts of meth you use on each occasion
- It is dangerous to mix other drugs with meth – **and especially dangerous to inject pills or methadone because they can block your veins**
- Dispose of needles safely e.g., In a sharps container, screw top jar or via a needle exchange



SAFER INJECTION TECHNIQUES

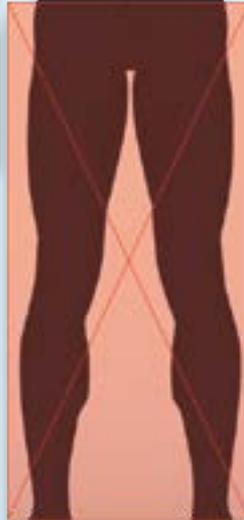
AVOID HEAD AND NECK

Overdosing is more likely when you inject near areas closest to the heart and brain. Abscesses are more dangerous here, too.



AVOID WRISTS AND HANDS

Nerves, veins, and arteries are all close together in the wrists. Injecting here is dangerous. It's also dangerous injecting into veins in your hands; they are more likely to break and clot.



DO

- Warm your arm before injecting. Slap the skin over the injection site **BEFORE SWABBING.**
- Let your arm hang down for a minute before injecting to build up blood pressure.
- Always use a tourniquet (buy one from a pharmacy or use elastic, rope, a tie or a stocking. Using a belt may cause you to miss the vein). Loosen the tourniquet as you inject.
- Pump the muscles in your arm **AFTER** the tourniquet is on.

DON'T

- Never inject deeper than one centimeter (5mm) or you may hit an artery. Arteries are deeper, harder to pierce than veins, and the blood is brighter and will spurt rather than 'ooze'.
- Never inject into a site that is sore, swollen or tender – this area may be infected or the vein may be blocked. Injecting here will only increase infection and could end up making you sick.
- Don't inject into a vein that is hard or that you've had trouble getting blood from before. It probably has a clot in it and injecting here will only risk pushing the clots into your bloodstream.
- Don't inject into the same vein twice in a row. Rotate injection sites to give the vein a break and a chance to recover.
- Don't bend your elbow to stop the bleeding - apply pressure and hold up the bleeding site.



AVOID BELOW THE WAIST

Injecting below the waist can cause blood clots, which can be fatal. Never inject into or around the genitals.



Get Smart Smoke Meth Safer

what you need to
smoke meth safer



if someone overdoses call 911



1. clean your hands and your pipe with alcohol swabs



2. pour meth into your pipe



3. tap pipe to move drugs into the bowl



4. apply heat to bowl, hold pipe halfway down the stem



5. keep heat source moving, heat will vaporize drugs



6. inhale slowly



7. exhale immediately

signs of overdose

feels like

your heart is pumping fast
you're short of breath
your body is hot, sweaty and shaky
you have chest pain
you can't talk or walk

looks like

fast pulse or no pulse
fast or no breathing
hot and sweaty skin
confusion, hallucinations
unconscious, can't talk, can't walk, vomiting, seizures

modified © Vancouver Coastal Health, August 2014

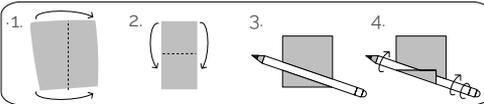


Reduce Your Harm

what you need to
make a tinfoil pipe



if someone overdoses call 911

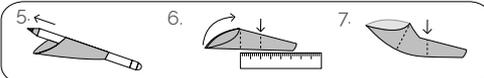


1. fold square tinfoil in half

2. fold in half again

3. roll into cone with pencil/pen

4. roll into cone with pencil/pen



5. roll into cone with pencil/pen

6. form cone into bowl at one end

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safer smoking tips

smoke in a safe place with people you trust

have condoms with you - you may want to have sex while high

take vitamins and eat something before you smoke - you won't feel like eating after - keep hydrated, chew gum, eating will also help you sleep after

know your limits - once you are high stop smoking

avoid infection don't share your pipe, keep pipe clean by burning off residue then scrubbing with alcohol swabs

don't be alarmed by feelings of extreme depression once you're sober - it's your body reacting to the drug

ADDICTION

Did you know that meth can be JUST AS ADDICTIVE as other drugs such as heroin or alcohol? Lots more people have been going to drug treatment centres for help with meth problems in the past few years. Research has found that most regular meth users have tried to cut down or stop at some stage. Regular users build up tolerance to meth, which means that they need to use more than when they first started, and start coming down a lot harder. If meth is starting to take up more and more of your time, you may feel that your use is out of control, and really stressed when you can't get any meth. Using in the morning and throughout the day, or needing to use it before you go out, are other good indicators that you might be having problems with meth. If you've had the thought lurking in the back of your mind that you should take a break for a while, then trust your instincts – they might be right.

Answer each of the following questions and add up your scores (the numbers in brackets)

1. Have you ever thought your meth use is out of control?
Never (0) Sometimes (1) Often (2) Always (3)
2. Has the thought of not being able to get any meth really stressed you at all?
Never (0) Sometimes (1) Often (2) Always (3)
3. Have you worried about your meth use?
Never (0) Sometimes (1) Often (2) Always (3)
4. Have you wished that you could stop?
Never (0) Sometimes (1) Often (2) Always (3)
5. How difficult would you find it to stop or go without?
Not at all (0) A little (1) Difficult (2) Impossible (3)

Higher scores, especially over four, indicate that you might be dependent, and that you should consider cutting down or at least having a break to prevent or reduce problems.

HEALTH RISKS

Common physical and psychological health problems reported by meth users include a poor appetite, anxiety, depression, fatigue and loss of energy, trouble sleeping, heart flutters and tremors. Some regular users also have symptoms like hallucinations (seeing or hearing things that aren't there), paranoia (feeling like you are being followed or stared at), violent behaviour, panic and suicidal thoughts. All of these problems are more likely to happen if you use large amounts of meth (eg. more than 1 gram) at a time, binge on meth for several days, regularly use meth more than two or three days a week, inject it, or use the stronger crystal forms of meth which have recently become more available. Problems can also increase when you drink alcohol or use other drugs with meth, so **BE CAREFUL ABOUT MIXING DRUGS.**

ASK YOURSELF, "WHICH METH-RELATED HEALTH PROBLEMS WORRY ME THE MOST?"

HOW TO AVOID THESE PROBLEMS

- Try to switch from injecting to snorting or swallowing
- Have a break, even just a couple of weeks
- Use less often
- Give your body and mind plenty of rest, and make sure you get enough sleep
- Warm aromatherapy baths may help you relax and get to sleep
- Drink at least eight glasses of water a day to get rid of toxins
- Good food strengthens your immune system so that you can handle problems and the stress they cause a lot better. Fresh fruit and veggies, cereals and brown bread, lean red meat or lots of spinach and brown rice for iron, and dairy products for calcium are all very important. Try to eat regularly
- Take vitamins and minerals, and your health food shop may recommend something to help you get rid of toxins
- Talk to a counsellor or a good friend if you feel you have problems

OTHER METH RELATED PROBLEMS

People who use meth regularly may also have other problems like relationship problems with a partner, friends or family (eg. arguments, jealousy, break-ups), work or study problems (eg. trouble concentrating, reduced performance or getting fired), financial problems (eg. being in debt, not having money for food or rent, committing crimes to buy drugs), and legal problems (eg. being busted for possessing, using or dealing meth). Dealing meth may also result in violent disputes.

TIPS FOR REDUCING THESE PROBLEMS

- Budget for food, rent and bills BEFORE you spend money on drugs
- If you can, use 'direct debit' banking systems for rent, loans or other repayments
- Don't buy drugs on credit
- Avoid dealing meth or other drugs
- Allow time to come down from meth so that it doesn't interfere with work or study
- Carry the phone number of legal aid at all times
- Know your legal rights
- Don't drive while you're high on meth or on any other drugs
- Always carry condoms and make sure you use them if you have sex, including oral sex
- Try to always have at least one person around who is straight. Take it in turns. If the straight person thinks that things are getting out of control, then believe them and take their advice – they probably have better judgment if they're not out of it and you are
- Keep in touch with good friends, especially those that don't use drugs, so that you have a good support network to help you out if things are tough. Just talking about problems can help them seem more manageable. If you can't talk to your friends, why not see a counsellor if your problems seem to be getting worse. Your local addiction and mental health crisis service can recommend counsellors (see back page for local services and organizations).



OVERDOSE

You may overdose on meth when you use too much of it. This is different from a dirty hit which makes you feel sick. When you overdose, you're likely to get headaches, chest pains, really fast breathing and pounding heart, and you might also feel paranoid, agitated, panicky, shaky and hot and sweaty. While you can die from a meth overdose, it's quite unlikely.

If a friend overdoses, DON'T just think "they'll get over it."

- GET TO A DOCTOR STRAIGHT AWAY – either call an ambulance or go to a hospital emergency department. Remember everything your friend took and when, so you can tell the doctor
- Stay with the person; try to keep them in a calm, quiet room away from other people, loud music and bright lights. The more there is happening around them, the more panicked they may get. See if they want sips of water as they're probably dehydrated, but don't force them or this may upset them
- Reassure them in soothing tones that you're there, that the ambulance is coming and that everything will be OK. If you can convince them that everything is under control the panic and anxiety might die down. Try to get them breathing slowly and deeply. Count out the breaths with them. They may feel the need to talk and it might be pretty garbled, but try to avoid arguing with them, which may only make things worse.

PSYCHOSIS

True meth psychosis is a temporary state brought on by using too much meth. The main symptom is paranoia (eg. extreme jealousy, feeling like you're being followed, feeling like people are plotting against you). This and other symptoms like hallucinations (hearing voices and seeing things that aren't there) usually go away after a period of time if you stop using. Sometimes downers are used to calm psychotic people if they've really lost it. When people first start experiencing symptoms of meth psychosis they know it's just their mind playing tricks on them from all the meth. But if they keep using, they may start to believe these things, and they can no longer see it's because of meth. People in this state get more paranoid, scared and even aggressive.

IF A FRIEND GETS METH PSYCHOSIS

- Give them PEACE and QUIET away from people (even friends) and noise
- Try to stop them using more meth even if they want to
- Don't argue with them no matter what they say – stay calm and quiet
- Seek help from a sympathetic doctor you feel you can trust
- If they are really out of control and might hurt themselves or someone else, call 911, take them to a hospital or contact Here 24/7 at 1-844-437-3247.

If you learn to recognize the early signs of meth psychosis, you can reduce or stop your meth use and prevent full blown psychosis.

HAVE A BREAK FROM METH IF YOU:

- Keep having odd thoughts that won't go away
- Feel overly suspicious of your friends or other people
- Are imagining things that aren't really there – either seeing things that other people can't see or hearing things that other people can't hear
- Often feel like you are being noticed by other people so that you begin to avoid people, especially strangers, in public places
- Feel extreme jealousy
- Have used meth for more than three days in a row or have used it more than three weekends in a row
- In addition to meth psychosis, users often experience anxiety and depression. Sometimes these symptoms come before psychosis and should be taken as a warning to cut back or take a break
- A few nights of good sleep may also help

METH AND YOUR BRAIN

When you take meth it is absorbed into your bloodstream, travels to your brain, and once there it activates chemicals (neurotransmitters) that produce its effects. When these brain chemicals are released or activated, they make you feel euphoric, alert or energetic. After the meth wears off, these chemicals are depleted or run down. This is what causes you to feel depressed, irritable, flat and disinterested when you're coming down – all the opposite things to feeling high. It can take days to several weeks for these chemicals to be fully restored, and as before, days to weeks for you to feel normal again. Using meth all the time can lead to a total depletion of these neurotransmitters. This is what has happened to people who need to use meth 'just to feel normal'. If you keep using meth to avoid coming down or feeling shitty, you'll only reduce the neurotransmitters more, and end up worse off.

CAN METH CAUSE BRAIN DAMAGE?

- Lab research has shown that large amounts of meth can kill rat brain cells, and the same thing might happen in heavy meth users
- Besides the 'pure meth' you get when you buy your street meth, you also get other crap that is the by-product of meth manufacture. These by-products can also be toxic to the brain, maybe even more so than meth
- Meth can also cause brain damage if you overdose or take too much at once, because your body temperature gets really high
- Apart from actually killing the brain cells, meth can affect the way that brain cells work. In other words, your brain adapts to meth just like your body does. This can affect the way you think, your ability to concentrate, and especially your mood. These changes may take weeks to months to get back to normal – that's why you may feel moody and lousy for a month or two when you give up using
- Meth can cause strokes by the pressure it puts on the heart and veins. This may cause long-term problems like paralysis or even death



METH AND THE LAW

The Controlled Drugs and Substances Act regulate certain dangerous drugs and narcotics known as controlled substances in Canada. An important part of the legislation is the schedules to the Act: Schedule I – it includes the most dangerous drugs and narcotics, such as meth.

Possession of meth can be an indictable offence (for which you can get up to 7 years in prison) or a summary offence (for which you can get up to a year in prison and be fined between \$1000 and \$2000).

Other offences to consider:

Trafficking: Which means to sell, administer, give, transfer, transport, send or deliver meth or other drugs. This also includes offering to do any of these things. The mere act of giving the meth to someone to hold counts as trafficking. If you help someone else sell meth, you may be charged with Conspiracy to Commit Trafficking.

Possession For the Purpose of Trafficking means that you have meth in your possession and are planning to make it available to others.

Production: There are lots of different ways to make meth, and they are all illegal. It is also illegal for you to offer to be part of making meth. Carrying needles or other using paraphernalia (spoons, tourniquets, pipes, etc.) is NOT illegal however you can be arrested if police believe there is a trace or residue of drugs in/on them, so it's best to dispose of used gear quickly and safely when you can.

If you are arrested, police can search you without a warrant. If you are arrested in a vehicle, police can also search the vehicle without a warrant. If you are arrested, police must tell you why you are being arrested and they must also tell you that you have the right to get a lawyer.

Remember:

- You have the right to ask for an officer's name and the offence they suspect you have committed
- You do not have to answer any questions except your name and address
- You should seek legal advice before making a statement
- Try to keep calm and be as polite as possible

YOU WANT TO CHANGE YOUR METH USE

Many meth users say that they want to change their pattern of meth use in some way. Some want to cut down the amount they are using or take a break for just a while, some want to change from injecting to snorting or swallowing, or alternating the way they use meth, and others want to quit using meth altogether. The next section outlines some ways to help you make these changes.

STRATEGIES TO HELP YOU CUT DOWN

No one way works best for everyone – it's up to you to decide what suits you. Two options are listed below:

Take a short break: This will give you time to work out why you use meth, and when you're likely to want to use, so that you know when it's going to be the hardest to control. Following a short break, try using at a safer level, say twice a week, only on weekends, or by snorting rather than injecting or alternating these methods. Use the tips listed below to help you feel better while coming off meth, and follow this plan for about six weeks or so if you can – the longer the better. Then decide, does this work for you? Is controlled use of meth what you really want?

Maybe the second way, gradually cutting back on meth is easier to do.

Gradually cutting back on meth: Set a realistic short-term goal of how much you will cut down. Maybe at first you could cut down by one day per week, and by a quarter of a gram at a time. Make a date to review this goal two weeks later. See cutting down as a step-wise process, a bit like a ladder. Once you've successfully climbed down one rung and stayed there a while, you may wish to try stepping down to the next rung. You can also use the tips listed below to help you feel better while coming off meth.

With both of these strategies, feel proud about small changes – they may not seem like much to other people but they take a good deal of planning and effort from you. Also, be prepared for others' reactions. Be confident in your decision to change even though some people (like relatives) may want you to give up all together, and others (like friends who use) may not want you to change at all. The main thing is for you to be happy with your use.

TIPS TO HELP YOU FEEL BETTER WHEN YOU'RE COMING OFF METH

- Remember that the mood swings you're having are a normal part of meth withdrawal and that **they will eventually go away**. Light exercise (a walk in a park or swimming), healthy food, relaxation techniques and regular sleep can help you to deal with mood swings. Figure out when bad moods are likely – what triggers them – so you can plan something else to do apart from using. You may find it useful keeping a mood diary – an example of this is provided below. Reduce your use of caffeine and other drugs, which can also affect moods. Try to combat the negative thoughts that are a normal part of coming off. For example, say to yourself “I can cope if I relax and breathe evenly” instead of “This is too hard, I'll never make it.”
- When your appetite starts returning, try to eat healthy food – lots of fresh fruit and veggies – and stay away from greasy take-out. Your body is working hard to get rid of all the toxins that were mixed with your meth, so don't make it work hard on digesting unhealthy food as well. Try to drink at **least eight glasses of liquid a day** (NOT ALCOHOL – water, fruit juice or herbal teas are the best)
- For your headaches and aches and pains, a massage from a friend (or a professional if you can afford it) will do wonders. Warm baths (use lavender, ylang ylang or sandalwood for relaxation) are great. Light exercise – even just stretching – may also help. You may also want to see a herbalist, acupuncturist or a naturopath if you can.
- Get a relaxation tape that goes through tensing and relaxing each muscle group, and use it regularly, at least once a day or more if need be. **Meditating, yoga and tai-chi** are also great for helping you learn to relax – look up your local Community Health Centre and see what things you can learn to help you relax
- If it all seems too much and you think you'll never make it, then you may find it useful to get help from a doctor, a counsellor, or an NA (Narcotics Anonymous) group. All of these are confidential and could work wonders – **just having someone who understands what you're going through can make the difference between getting through your withdrawal or not.**
- Remind yourself of how far you've come. You made it through the first few days or weeks – what techniques did you use to help you cope then?
- If you have a panic attack where you hyperventilate (ie. take very quick, short breaths), try breathing deeply and slowly into a paper bag or cupped hands for a few minutes until it passes.

EXAMPLE OF MOOD DIARY

When you use meth, you are making a link between the situation and using. This means that certain situations, people and places, moods, times of the day and so on, which were there when you use meth, can trigger your desire to use again. In the space provided, list the places where you usually use meth, the other people around, and your mood (how you're feeling) just before you use. Also note down something else you could do rather than use meth when that situation happens again. These are just examples – make it relevant to you.

WHERE	WITH WHOM	MOOD	ALTERNATIVE
Eg. Living room	Alone	Bored, down	Go for a walk in the park
Eg. At home before work	Roommates	Tired/shitty from night before	Don't go out when you have work the next day
Your situation...			

STRATEGIES TO HELP YOU STOP

One of the best ways you can help yourself quit (even if just for a while), is to know what to expect when you do. Dependent meth users do go through “withdrawal” from meth when they stop using. As with other drugs, if you've used meth regularly and for a long time, your body adapts or gets used to having meth in your system on a regular basis, and will only function “normally” when there is meth in your system. When you stop using, your body has to re-adapt, this time to not having meth in your system. Withdrawal is this period of readjustment, where the body “learns” to work normally again without meth.

Meth withdrawal symptoms are likely to be much more psychological than, say, heroin withdrawal. When a heavy meth user decides to stop using meth, what they will experience over the next few months while withdrawing can be roughly divided into four stages. The table below shows what these stages are, about how long the systems may last for, and what to expect from each stage. Not everyone will get these symptoms. Some people may get symptoms that aren't listed, but the ones listed are the most common features of meth withdrawal.

COMMON FEATURES OF METH WITHDRAWAL

Time since last meth use	Common Symptoms
Day 1 - 3 (Comedown)	<ul style="list-style-type: none"> • Exhaustion • Increased sleep • Depression • Decreased appetite • Restlessness • Irritability
Day 2 - 10 (Withdrawal)	<ul style="list-style-type: none"> • Strong urges (cravings) to use meth • Mood swings, alternating between feeling irritable, stressed, agitated, restless and anxious, to feeling tired, lacking energy and feeling generally run down • Very disturbed sleep • Poor concentration (feeling scattered) • General aches, pains and stiffness • Headaches • Increased appetite • Strange thoughts, such as feeling paranoid • Misunderstanding things around you, such as seeing things that aren't really there • Easily upset
Day 7 - 28 (Symptoms start to settle down, although some still occur)	<ul style="list-style-type: none"> • Mood swings, alternating between feeling anxious, irritable or agitated, to feeling flat, a bit depressed and run down • Disturbed sleep • Cravings for meth • Feeling bored • Increased appetite
1 to 3 months	<ul style="list-style-type: none"> • Return of normal sleep, mood and activity levels • Major improvements in general health and mood

MEDICATION

There is no magic pill that's going to take away all the symptoms when you stop. Rohypnol, Valium, dope, a hit of smack or a bottle of bourbon might make you feel a bit better for a while, but be careful about how many pills you use or how much alcohol you drink while you're coming off meth, or you might just end up swapping habits. Don't forget – withdrawal means your body is learning to function without meth... huge doses of other drugs delay this process. If you feel that pills are the only way you can get through it, don't take them for more than a week at a time, or you may have real problems trying to get to sleep without them. It's also worth pointing out that, just like heroin and meth, you can get addicted to pills. Try to find a doctor who you trust, and talk to him/her about what pills will be best and for how long.



PLANNING A SAFE, SUPPORTIVE ENVIRONMENT

Find a place where people around you won't be using meth, or hassling you for money, drugs or whatever. If that means going to a relative's or a friend's house for a week or so while you get through the worst of it, then do it. If you stay at home, then spread the word that you're having a break and people should stay away for a while – not forever, just for a few weeks. Make sure there are no drugs or drug equipment left in the house to tempt you.

The other important thing is to get at least one person who you trust, who you know will be supportive, will spend time with you and will help you through the hard times, and to enlist that person's help over the next few weeks. Don't make it a dealer or someone who will want you to score for them, or someone who pisses you off at the best of times. It might be a relative, an old friend from before your drug use, a good doctor or community nurse, or an NA "sponsor". Explain to your support person(s) what's going on, how you're going to be feeling, and what they can do to support you. If you don't explain it to them, they're not going to be able to help – reading this booklet might be helpful for them. The role of these support people is to get you over the feelings of isolation, loneliness, depression and boredom. If your partner uses, you may like to try giving up together – you can both stop at the same time, make an agreement not to buy meth, and change your lifestyle together.

COPING WITH CRAVINGS

- “Cravings” are urges to do drugs. They are a normal part of any addiction, and everyone gets them during withdrawal, even though some people may be unsure about what they are
- Cravings are NOT caused by a lack of willpower or motivation, and they don’t mean that the withdrawal isn’t working
- Cravings are not constant; they come and go and vary in intensity. Cravings are only really severe for short periods of time – usually less than one hour, and then they settle down to a more bearable level
- Cravings can be triggered by physical or psychological discomfort. You will have cravings as you go through uncomfortable withdrawal symptoms, but as you start to get over the withdrawal, the cravings become fewer and easier to deal with
- You will get more cravings if something or someone upsets you, or if the opportunity to use or score comes up. So if you really want to get through this withdrawal, the safest thing is to avoid these high risk situations for a while
- You will probably still get cravings even after you’ve gone through withdrawal, but they usually become easier to cope with after withdrawal, just because you’re feeling a lot better generally. The longer you can go without using, the less severe the cravings become. It’s kind of like a stray cat – if you feed it, it will come back, but if you don’t, it will eventually go away



It is really important that you be aware that you are going to get cravings, so you can be prepared for them. Different people have different ways of coping. Remember, cravings are only severe for short periods of time – then the severity of the craving reduces to a level that is easier to deal with. The goal is to get through the severe period. Many people find the “**three Ds**” helpful: **delay, distract, decide**.

1. DELAY the decision as to whether you will use for one hour

When a craving is severe, the big question is, “Am I going to use?” Everyone who gets cravings goes through the struggle between the desire to use and the desire to remain drug free. The more you try to battle this out, the more anxious you get and the more intense your craving gets. So, delay the decision – make a deal with yourself that you will put it off for one hour. Don't try to decide one way or the other. You may use, you may not... that's something you can decide after an hour. By breaking your withdrawal up into short periods in this way, it becomes more manageable. In other words, **take it one day, or even one hour if necessary, at a time**. If you're busy thinking “I'm never using ever again”, that can seem like a pretty massive thing to get through. Think, “I'll decide whether I'll use again in one hour.”

2. DISTRACT yourself with some activity during this hour

Cravings can occupy your thoughts a lot, and because they do, they seem to get worse and worse. The only way to avoid this is by putting your energy into other things, like maybe listening to your favourite music, watching TV or a video, cleaning out the fridge or the bathroom, talking to someone (but not about drugs), or going for a walk with someone “safe” (drug-free). Remember, concentration can be difficult during withdrawal, so don't try anything complicated in this hour (like reading anything too heavy) or you'll only get frustrated.

3. DECIDE whether it's worth it to use after the hour is up

At the end of the hour, the craving should have settled down, especially if you're good at distracting yourself, although it probably won't have gone away. Before you make the final decision, go over in your mind all the reasons why you want to stop using, why you are trying to withdraw, and most important, what you will be returning to if you get back into using again. Look at your list of the pros and cons that you wrote at the start of the detox.

REMEMBER: No one uses just because they have cravings – only because of the way they deal with the cravings.

ASK YOURSELF, “WHAT THINGS WILL I DO TO HELP ME STAY OFF METH?”

COPING WITH A LAPSE

Learning to reduce or stop meth use is like anything else – trial and error. Most people slip-up along the way – it's normal. Slip-ups are NOT failures. They don't mean you have lost control. They are important chances to learn. If you use when you didn't want to or more when you only wanted a little, take time to think about why. What led up to the slip? How could you have avoided the slip, in hindsight? What will you do next time in a similar situation? By learning from slip-ups you'll prevent lapses turning into huge binges or returning to old patterns of use.



Alcohol and Drug Information Services Across Waterloo and Wellington:

HERE 24/7 - www.here247.ca

Here 24/7 is your front door to the addictions, mental health and crisis services provided by 12 agencies across Waterloo – Wellington – Dufferin. All you need to do is reach out. They do the intake, assessment, referral, crisis, wait list and appointment booking work for these important programs. It's their job to be your guide, figure out your needs and help you navigate the system. This leaves you free to focus on maintaining hope and pursuing recovery.

Phone: 1-844-437-3247

ALCOHOLICS ANONYMOUS - www.centralwest2district3aa.org

Alcoholics Anonymous is an international fellowship of men and women who have had a drinking problem. It is non-professional, self-supporting, multi-racial, apolitical and available almost everywhere. There are no age or education requirements. Membership is open to anyone who wants to do something about his or her drinking problem.

Guelph: 519-836-1522

Kitchener-Waterloo: 519-742-6183

Orangeville: 1-866-715-0005

AL-TEEN

Al-teen is part of the Al-Anon fellowship designed for younger relatives and friends of alcoholics through the teen years.

Phone: 1-888-425-2666

THE BRIDGES - www.cambridgesheltercorp.ca

Located in Cambridge, this is a facility that includes a year round emergency shelter, a drop-in centre, and 20 affordable, transitional, bachelor apartments. It is designed to offer a continuum of housing services, and to offer a wide variety of supporting programs, including addiction services, to help clients address the issues facing them to move forward.

Phone: 519-624-9305

Sanguen Health Centre - <http://sanguen.com>

Sanguen Health Centre is a non-profit, community-based organization that provides services for the treatment and support of those living with Hepatitis C. Sanguen provides specialized assessment and treatment, and coordinates access to allied health services for individuals living with Hep C or at risk for Hep C. Additionally, extensive harm reduction-based outreach support is provided, including housing support, and assistance navigating and accessing various social health services.

Phone: 1-877-351-9857

GRAND RIVER HOSPITAL - www.grhosp.on.ca

All Sites

Phone: 519-749-4300 (automated attendant)

519-742-3611 (switchboard)

Withdrawal Management Services

Address: 52 Glasgow Street, Kitchener ON N2G1G3

Phone: 519-749-4318

HOMEWOOD HEALTH CENTRE - www.homewoodhealth.com

Homewood Health Centre is a leader in mental health and addiction treatment, providing specialized psychiatric services to all Canadians.

Main Site

Address: 150 Delhi Street, Guelph ON N1E6K9

Phone: 519-824-1010

1-866-839-2594 (Admitting Referrals)

Community Alcohol and Drug Services

Address: 49 Emma Street, Guelph ON N1E6X1

Phone: 519-836-5733

THE HOUSE OF FRIENDSHIP - www.houseoffriendship.org

A non-profit Christian organization that provides support to low-income children, youth and adults. Services include addiction treatment programs, community programs, family programs and housing services (including the Charles Street men's hostel).

Address: P.O. Box 1837, Station C, Kitchener ON N2G4R3

Phone: 519-742-8327

NARCOTICS ANONYMOUS - www.orscna.org

NA is a nonprofit fellowship of men and women for whom drugs have become a major problem. They hold regular meetings to help each other stay clean. Membership is open to anyone who wants to do something about his or her drug problem.

Tri-Cities Area: 1-888-811-3887

PORTAGE - www.portage.ca

Portage is a non-profit organization that offers programs for adults and youth suffering from substance abuse-related problems to overcome their dependencies and live healthy, happy and productive lives.

Address: 6681 Irvine Street, Elora ON N0B1S0

Phone: 519-846-0945

RAY OF HOPE - www.rayofhope.net

Ray of Hope provides Youth Justice Services, Youth Employment Services, Youth Addiction Services, Community Support Services and Refugee Support Services.

Address: 658 King Street East, Kitchener ON N2G2M4

Phone: 519-578-8018

ST. MARY'S COUNSELLING - www.smgh.ca

An organization providing confidential outpatient services for people concerned with alcohol, drugs or gambling. Services include assessments, referrals to residential and community resources, and support for family members and friends of individuals with alcohol, drugs or gambling issues.

Phone: 519-745-2585 (Kitchener and Cambridge)

Cambridge

Address: 1145 Concession Road, Cambridge ON N3H4L5

Kitchener-Waterloo

Address: 30 Duke Street West, Suite 600, Kitchener ON N2H3W5

STONEHENGE THERAPEUTIC COMMUNITY - www.stonehengetc.ca

Stonehenge Therapeutic Community offers a long-term, intensive residential treatment program (four to six months) for people 18 and older who lives have been devastated by alcohol and drug abuse. Stonehenge also offers a range of community-based support services.

Address: 60 Westwood Drive, Guelph ON N1H7X3

Phone: 519-837-1470

REGION OF WATERLOO PUBLIC HEALTH - www.chd.region.waterloo.on.ca

Region of Waterloo Public Health provides harm reduction strategies and services, including counselling, referrals, access to clean equipment, HIV and STI testing, overdose prevention training and naloxone distribution.

Phone: 519-575-4404

DROP-IN CENTRES

WELCOME IN DROP IN CENTRE

Located in Guelph, the Welcome in Drop in Centre is a haven and a caring community for homeless persons, those suffering from mental illness, isolation and economic marginalization.

Phone: 519-837-0080

oneROOF - www.oneroof.org

oneROOF Youth Services is committed to providing the safety, support, and overall well-being of youth (age 12-25) experiencing or at-risk of homelessness in the Waterloo Region. In accomplishing our objective of maintaining their health and safety of these individuals, we provide resources and services that will enable them to make positive choices to end the cycle of homelessness.

Phone: 519-742-2788

THE WORKING CENTRE/ST. JOHN'S KITCHEN

www.theworkingcentre.org

The Working Centre is a nonprofit organization established in response to unemployment and poverty in downtown Kitchener. St. John's Kitchen is a thriving community of hundreds of people who gather in a spirit of cooperation and mutual support to produce and share a daily meal, to connect with a range of community resources, and to explore inclusion together and as part of the cities of Kitchener and Waterloo.

Phone: 519-743-1151



Wellington Guelph Drug Strategy
www.wgdrugstrategy.ca

Waterloo Region Integrated Drugs Strategy
www.waterlooregiondrugstrategy.ca