CRYSTAL MYTHS – The BIG LIE drug!!

Is Faster Better?

A basic premise in North America is that faster is better. From instant tea to dinners, & super fast computers; if there's a way to do something faster, we'll figure how to do it, and not miss a beat – or a coffee break – in the bargain.

That's the big reason why stimulant drugs hold so much fascination for us all.

Speed seems as natural as mom and apple pie – maybe even more so, since today most people are on a diet and the only apple pie in town is made by machines.

But speedy drugs aren't Mom's apple pie, not by a long shot. They're a complex group of chemicals with one thing in common: They can cause all sorts of problems for people who take them – and all kinds of people are taking them these days.

And not only are more people using speed, they're also using its most hyper charged form – **crystal meth** – and some are running into problems they never expected.

Points to Ponder:

Before we say anything about crystal and other forms of "real" speed, though, we'll say something that might seem a little unusual, by lumping together all stimulants as controlled substances and everyday chemicals like caffeine – under the general classification of "real" speed.

If that sounds funny (or morally-ambiguous) to you, we should explain that one basic property shared by all stimulants – prescription diet pills, over-the-counter stay-awake tablets, caffeinated colas or the overpriced Triple Mocha Latte at the local espresso bar – is their ability to rev up the action of neurons in the central nervous system.

They all do it in similar ways, too.

In fact, stimulants differ only to the degree that they act in the brain and the extent which they affect behavior – increasing alertness and confidence (or anxiety), decreasing appetite and fatigue.

And while it's hard to find fault with wanting to eat less and stay awake more, wanting to do either behind a hit or two of prescription speed or crystal meth can be a bigger problem than being overweight or tired. Way bigger.

Crystal Myth:

The most potent form of speed available – with or without a prescription – is methamphetamine, A.K.A. crystal, crank, tweak, go-fast, ice, and dozens of other names.

In medicine, it comes in tablet form, as the prescription drug, Desoxyn.

More often, though, it's cooked in makeshift labs and sold on the street as a powder, which is injected, snorted or swallowed. A smokeable form of methamphetamine called "crystal" is more common in Canada.

Widely available in the 1960's, crystal faded in the '70's, as controls were tightened on legal production, which reduced its diversion onto the black market.

But in the early '90's, crystal made an amazing comeback. And it's been back in a big way ever since.

The result? Crystal became a hot new high to a new 'Pepsi One' generation of users too young to know firsthand, or to have heard secondhand the downside to of uppers.

And what a downside they have. Risks are so extreme because the drug works so well at overamping the central nervous system and zapping feelings of hurt and fatigue.

The result is the same sort of physical stress that follows any extreme exertion – bungee jumping, for example, or skydiving.

But instead of giving the old body/mind a chance to chill between jumps (like any self-respecting bungee-jumping/skydiver would do), crystal users extend speed "runs" for days or weeks, without food or rest, putting impossible demands on their bodies and brains.

For needle users, add in the hazards that come with injecting any drug. And for Crystal Meth smokers, multiply it all by the still large unknown risk of exposing lung tissue to vaporized meth crystals.

A.K.A. 'crank':

Know the big difference between crystal and crank?

"Crystal" has seven letters; "crank" has only five.

A term once used mostly to distinguish down-and-dirty bootleg meth from its crystal-clean sibling; "crank" has become a generic nickname for all forms of

speed. And that includes the tablets and capsules that find their way out of the local pharmacy and onto the street.

At this point, we'll add other speedy drugs to the mix, including nonamphetamine prescription stimulants (like Ritalin and phentermine), and such non- crystal forms of street speed as "white cross" and "black beauties."

Effects match up, in most ways, to the effects of crystal. Dangers are similar, too, although oral use carries fewer short-term risks, since the risk of lung or injection-site damage and overdose is reduced or eliminated.

Still, a speed habit of any kind is a hazardous hobby for a lot of reasons, including simple wear and tear on the body and mind.

In a lot of ways, the human body is like a Timex watch – built to take a licking and keep on ticking. Still, we aren't exactly indestructible. And speed, more than any other drug group, pushes the mind and body faster and further than either was meant to go.

The long-term physical toll can be massive, including any or all of the following:

- Vitamin and mineral deficiencies.
- Lowered resistance to disease.
- Organ damage (particularly to the lungs, liver, and kidneys) after long-term use.

And if the physical hazards aren't bad enough, there's a ton of mind-and-mood problems that speed can bring on, or worsen. Examples:

- o Anxiety
- o Depression
- Chronic fatigue
- Delusions (thinking you are being watched by enemies or police, for example – unless you are being watched by the police, which is even worse.)
- Toxic psychosis after prolonged, heavy use.

And that's still only part of the story, because amphetamines also cause a serious form of dependency, which means that giving up speed can be a difficult process. One reason why is that ex-users get very depressed.

Other Speedy Stuff:

Because of their risks, you might think that amphetamines would have disappeared as medical drugs by now.

But you'd be wrong. Because prescription speed is back on the medical beat big time, and getting bigger all the time.

Dexedrine (dextroamphetamine) and Ritalin (methylphenidate) are used by millions of American kids and adults every day to treat attention-deficit disorder.

Others take a prescription stimulant, phentermine, which used to be half of the diet-drug duo "fen-phen." (The other half, fenfluramine, was pulled off the market in 1997, due to health hazards linked to it.) Now phentermine's a solo act again.

Taken at prescribed doses, Ritalin, Dexedrine and phentermine *usually aren't dangerous*. Still, they are real forms of speed, too, and deserve all the respect you can give them.

And don't forget look-alikes and herbal ecstasy, which look and act (vaguely) like amphetamines and ecstasy, but contain only legal stimulants.

Still, just because the drugs are legal doesn't mean they're safe. They're not – not always, anyway.

Most contain giga-jolts of caffeine and ephedrine, which can cause problems (even stroke or cardiac arrest) when overused, or when used at all by people who are hypersensitive to individual ingredients.

Running on Empty:

The speed scene has undergone major changes over the past few years with the resurgence of crystal, the introduction of ice, and a renewed interest in stimulants as a medical treatment for obesity and attention-deficit disorder.

Not only that, but the definition of what speed is and what it isn't has been subject to a lot of revisions as look-alikes and act-alikes and legal herbal stimulants have come and gone and come around again.

But one thing hasn't changed and isn't likely to. That's the idea that overamping on speed – any type of speed – is a risky way to live your life.

And while it may be stylish to look like you've never lusted after a leftover, and fatigueless might rank alongside cleanliness and godliness in your pantheon of personal values, you might also want to rethink your priorities if you think you need speed to put you where you want to be.

Getting Unstrung Out: How to Get Off Speed:

What if your interest in speed goes beyond simple curiosity? What if you already have a problem – or someone you care about has a problem? Begin by admitting the truth. It's hard to overcome anything until you recognize it for what it is. Then do something about it – or help the person do something. Namely, quit.

Since the main pull methamphetamines have on users is psychological, the biggest barrier you'll need to overcome is yourself. Here are two ways around common speed-recovery pitfalls:

Depression. Expect to feel more down than up, especially during the first few weeks or months. Just don't let depression surprise you or beat you. Recognize the funky feelings for what they are, the effects of withdrawal, and keep on staying straight.

Anxiety. When you look at your life, you may find more to be bummed than buzzed about. Your body may carry some scars of speed use, either from disease or from general disrepair. Your head may be worse. Don't panic. The body and mind have a remarkable ability to heal themselves – especially if you help them along.

So do what you have to do to pull yourself back together. Find another way to generate the energy and excitement that you used to get from speed. See a doctor if you suspect health problems, and visit a treatment program if you think you can't do it alone. But do it – and keep it done.

And do it now. It's never going to be easier than it already is – and, sometimes, it gets a whole lot worse.

Crystal Meth Treatment

Crystal meth treatment is in some ways less physically demanding on the recovering user because crystal meth treatment does not require a lot of detoxification. Crystal meth treatment consists mainly of addressing damaging emotional and behavioral patterns. The physical body need only process the last dosage taken before crystal meth treatment can begin; this usually takes about a day. Studies have shown that no pharmaceutical treatment is particularly effective for crystal meth treatment although in some cases antidepressants are administered if necessary. The most effective crystal meth treatments are therapeutic cognitive behavioral interventions.

Cognitive behavioral therapy means that a therapist speaks one on one or in a group setting with the crystal meth user to explore causes, symptoms and results of using crystal methamphetamine. Crystal meth treatment includes a personal examination of the events leading up to dependency on crystal meth.

The first several months of recovery are critical as the user comes to terms with life without the drug. This can be a time of obsession about using coupled with the shame and guilt that often accompanies the consequences of using crystal meth. Treatment will address the client's current situation and work together with the client to lie out a future plan that does not include drug use.

Another important part of successful crystal meth treatment is the introduction to the recovery community. This may consist of the many people in 12-Step programs who continue to live successfully without crystal meth and other drugs.

Crystal Meth Treatment: Treatment Programs

Crystal meth usage has increased as more crystal meth labs have sprung up to meet the increased demand for the drug. Crystal meth, also known as speed, crank, ice and other names can be manufactured locally unlike other similar stimulants such as cocaine. A good treatment facility or home treatment facility can treat many people who have become addicted to crystal meth. Successful treatment for crystal meth addiction is founded on the principle practice of structured living. The primary purpose of structured living is to reestablish a life without crystal meth by retraining the mind and body to cope with daily living in constructive ways.

Crystal meth is a completely man-made drug that is created by combining various stimulants. Often crystal meth labs will take over-the-counter medications with derivatives of amphetamine and cook the drugs with other elements to make a potent concentrated white powder. Crystal meth users can then smoke the powder, snort the powder or dilute the powder in water and inject it. Crystal meth stimulates the brains limbic system and dopamine receptors that cause a long lasting high. The high is different depending on how the drug is ingested. Smoking or injecting the drug causes an initial euphoric rush that snorting delivers to a lesser extent. The triggering of the brains reward system causes this rush. The brain, however, adapts to the influence of the drug immediately so that another "hit" or dose of crystal meth will have a lesser effect than the last. This process is called tolerance and is one of the indicators of addictive behavior.

Tolerance helps explain why crystal meth users will often use the drug for long periods of time. Smoking a "hit" or "slamming" a needle every ½ hour more or less for hours or days on end. The drug removes the desire to sleep or eat as it speeds up the mind and body creating a state of anxiousness and hypersensitivity. Even small doses of crystal meth can cause feelings of paranoia and hallucinations. Users often report that they feel they are being watched by authority figures or see shadows moving nearby. Chronic usage of the drug causes damage to the brain and makes living a normal life exceedingly difficult.

Crystal meth users can find that they need help when they have lost their job or are unable to work. Perhaps loved ones and friends have become frustrated and demand the user seek help. Money problems continue to worsen with no relief in sight and legal difficulties become overwhelming.

Treatment settings should be effective in helping the person reestablish structured living in order to remove influences that allowed for crystal meth use. These negative influences need to be replaced with positive, constructive new habits that reestablish a life without drugs.