

COCAINE / CRACK

WHAT IS COCAINE?

Cocaine is a powerful stimulant drug made from the leaves of the South American coca plant. Cocaine in its pure form is a white powder (cocaine hydrochloride). As sold on the street, it is mixed with various materials that increase the quantity for the sellers' profit.

Most users "snort" cocaine, sniffing the powdered mixture into the nose. It can also be injected. "Freebase" (sometimes called "crack") is heated and the vapors are inhaled.

WHAT IS CRACK?

"Crack" is a smoked form of cocaine. When crack is vaporized and inhaled, very high doses of the drug pass into the small blood vessels of the lungs. This rapid effect is like an intravenous injection.

WHAT ARE THE SHORT-TERM EFFECTS OF COCAINE?

Cocaine stimulates the central nervous system and other body systems. The immediate effects include increases in blood pressure, heart rate, breathing rate, and body temperature. The drug triggers pleasure sensations in the brain. The user feels a sense of excitement and well-being and may feel more energetic, anxious or alert.

Cocaine's immediate effects on the heart can be very serious. Cocaine can overtax the heart and may be fatal.

When cocaine is snorted, the effects begin in a few minutes, peak in 15 to 20 minutes, and disappear within an hour. When injected or smoked, cocaine effects occur faster and are over sooner.

Once the effects of a dose wear off, users often feel a depression that is sometimes called "coke blues." Users often take more cocaine to counter the low, and get caught in cycles of cocaine use, depression, and more cocaine use.

Cocaine users may take other drugs to get rid of the depression that follows the short cocaine high. Combining drugs like this adds to the danger.

CAN COCAINE CAUSE DEATH?

Overdoses of cocaine can be fatal. Even small amounts of cocaine may cause convulsions, heart and respiratory failure, and death. Sensitivity can develop in those who have used the drug before, so prior use is no guarantee of safety.

WHICH TYPE OF USE IS MOST DANGEROUS?

Cocaine use is physically risky in all forms. It can result in heart failure and death.

Smoking crack has an added risk because very large doses reach the brain within seconds. Because it is absorbed quickly, crack's effects on the heart, brain, and nervous system are rapid, powerful, and can be life threatening. Overdose is frequent, and many deaths have occurred.

Injecting cocaine also delivers a large dose quickly, with the resulting danger of overdose. Use of non-sterile needles also carries the hazards of infection with HIV/AIDS, hepatitis, and blood stream infections.

DOES LONG-TERM PHYSICAL DAMAGE OCCUR?

Regular cocaine use can produce weight loss, chronic runny nose, and damage to the nose and sinus. It can also cause lowered resistance to infections and disease, bronchitis and respiratory problems, high blood pressure, and seizures.

Regular use of cocaine can also cause heart problems—palpitations, angina, arrhythmia, and heart attack.

Long-term health risks increase as the amount and frequency of use increase. These risks also vary depending on how the drug is taken, and individual sensitivity.

WHAT ARE THE LONG-TERM PSYCHOLOGICAL PROBLEMS?

Problems include increased irritability, short temper, and paranoia. Some users have trouble concentrating or remembering things, lose interest in sex, or have panic attacks. Users can also develop chronic depression, hallucinations, and signs of psychosis.

CAN COCAINE USE BY THE MOTHER HARM AN UNBORN CHILD?

Cocaine or crack taken by the mother has a profound effect on the fetus. Health damage may be caused by the effect of the drug directly on the fetus, and indirectly if the mother's overall health is impaired as described above.

Women who use cocaine are at greater risk to miscarry or have spontaneous abortions. Babies born to cocaine mothers are often premature or have low birth weight. They frequently suffer from tremors, and are less responsive than other newborns. Research suggests that the mother's cocaine use may be linked with birth defects. Babies affected by cocaine often show brain and nervous system problems. They may experience withdrawal symptoms. These children can require treatment long after birth.

Women who are pregnant, considering pregnancy, or breastfeeding should not use cocaine in any form.

WHO ABUSES COCAINE?

Cocaine abuse occurs in all levels of our society and in ages from youth through adult. It occurs in large and small cities and in rural areas. Crack cocaine use is most prevalent in urban centers, but also occurs in many rural areas and small towns.

In 1999, 1.2 percent of adults aged 26 to 34 reported using cocaine in the past month. Levels of use have ranged between .9% and 1.5% between 1994 and 1999. Among adults aged 18 to 25, 1.9 percent report use in the past month. Levels of use in this age group

declined from 1988 to 1994, but have increased since.

Among 2000 United States high school seniors, 2.1% reported use of cocaine in the past month. Cocaine use in the past month declined from a 1985 peak of 6.7 percent to a 1992 and 1993 low level of 1.3 percent. Cocaine use rose each year until 1999, and decreased during 2000.

HOW DO ADULTERANTS INCREASE THE RISK IN COCAINE USE?

Cocaine may be from 30% to 95% pure, because other materials (adulterants) are added to the drug to increase its quantity. These adulterants also increase the risks to a person taking the drug. Users cannot know how much of the drug they are taking, and some adulterants are themselves dangerous.

CAN PEOPLE BECOME DEPENDENT ON COCAINE?

Yes. Cocaine in any form causes a strong craving for further use. Physical and psychological dependence occur quickly. Tolerance is developed so that a user needs to use more of the drug to get the same effects. Dependent users need the drug to feel normal or to avoid the severe depression and fatigue that occur when they stop using.

Withdrawal symptoms occur when people stop using cocaine. These include exhaustion, irritability, sleepiness, loss of energy, depression, and an intense craving for more cocaine.

DOES A COCAINE-DEPENDENT PERSON NEED TREATMENT?

Most dependent users need treatment to stop using cocaine. Craving may persist for long periods, and relapse is common.

IS IT DANGEROUS TO USE COCAINE WITH OTHER DRUGS?

Yes. Cocaine combined with depressants such as heroin, barbiturates, or sedatives, as in a cocaine-heroin "speedball," may result in the build-up of either drug to toxic levels. Combining cocaine with other stimulants is also dangerous.

Alcohol, marijuana, or any other drug that impairs judgment can increase the risk of overdose when used with cocaine.

Finally, using cocaine regularly in combination with other drugs can result in dependence on several drugs at the same time.

COCAINE MYTHS

DOES COCAINE IMPROVE CONCENTRATION AND PERFORMANCE?

Studies show that cocaine use actually reduces performance. Users often feel that their abilities are improved, but in fact the drug has only changed their perceptions.

Between doses, a user feels distracted, anxious, and depressed. This does not improve concentration or performance.

LEGAL INFORMATION

Cocaine and Crack are Controlled Substances under Michigan and federal law. Use, possession, delivery, possession with intent to deliver, and manufacture of the drug are all illegal. Penalties include imprisonment and fines. Certain penalties are mandatory.

Penalties are increased if a person eighteen years or older distributes the drug to a person under eighteen who is at least three years younger than the distributor, or distributes the drug to a minor who is a student on or near school property, or possesses the drug on or near school property. (sect. 333.7410)

For details on the legal penalties, refer to the Michigan Law Fact Sheet in this series.

DOES COCAINE ENHANCE SEXUAL PLEASURE?

Cocaine does heighten sexual interest, but sexual problems are also common. Regular users generally care more about their cocaine use than about sex.

DOES COCAINE GET RID OF DEPRESSION?

No. Using cocaine creates a form of depression after use. A user may take cocaine again to reduce the depression, but this leads to another "low." Cycles of cocaine use and depression result.

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