

# NARCOTIC DRUGS

The most effective pain relievers are narcotic drugs. They are extremely valuable to physicians who prescribe them to relieve short-term acute pain. Narcotics enable the body to rest and restore itself after an injury, and they reduce suffering from terminal illness. These drugs, mainly heroin, morphine, codeine and the synthetic narcotics such as methadone, demerol and talwin, are both physically and psychologically addicting. Therefore, the use of these drugs is controlled by law.

## HEROIN

D.P. Wright, an English researcher, first produced heroin in 1874 by chemically modifying morphine. Wright experimented with heroin as a non-addicting substitute for morphine. In 1898, the Bayer Chemical Company of Germany produced this drug using the brand name of "Heroin." It soon became a popular patent medicine.

In the United States, heroin was distributed as free samples to physicians. In 1906, the American Medical Association approved heroin for general use, advising that it be used in place of morphine to treat painful infections. Thereafter, a widespread drug addiction problem arose due to its unrestricted use by pharmacists and physicians. The importation and manufacture of heroin was prohibited in the United States in 1924.

There are several varieties of heroin currently being used. The first widely used type is called "Mexican Brown." This heroin is found exclusively in the western states and is usually pink-brown in color. It is a fine powder and has dark brown fleck or white particles. The



*Left to right, two types of street heroin: white and brown.*

color may vary from a dark coffee color to very light brown. This heroin does not always come from Mexico, although originally, because of a distinctive manufacturing method, most brown heroin did. Both the color and the name make brown heroin more easily sold, and this particular type of heroin is sought by users.

Another popular type of heroin used here is called "China White." This form first was found on the street in 1980. It is a synthetic narcotic thought to be manufactured in Southern California and has caused numerous overdoses in various parts of the state. This drug is actually fentanyl and is extremely potent.

Black Tar Heroin is the third type of heroin often found on the street. It began to appear in 1979 and most originates in Mexico. It is becoming increasingly popular, probably because of its high purity at the street level. It has a tar-like appearance and is usually sticky and often pressed flat. Hardened tar heroin may resemble roofing tar or charcoal. Mexican Brown heroin is now usually tar heroin that has been cut and blended. Because of its purity, tar heroin often causes sudden instances of overdoses or deaths.

Heroin can be snorted in the nose, taken orally or injected. By far the most common method is to inject heroin directly into the vein. The equipment used to inject heroin is often referred to as an



*Mature opium poppy ready for harvest.*



**Hype kit, commonly associated with heroin use.**

"outfit" or "kit." It includes a spoon or bottle cap, syringe, needle and covering, cotton, matches and a tourniquet. The heroin is placed in the spoon and heated until it dissolves. It is then drawn through the cotton into the syringe and injected. The injection is made easier by tying a rag, belt or other tourniquet-like device around the arm above the elbow. This causes the veins to stand out. Common injection sites include the inner elbow, inner forearm and the backs of the hands.

The main psychological effect of heroin is a feeling of extreme pleasure and euphoria lasting several minutes. The intensity of this feeling, called a "rush," depends on the addict's level of tolerance, the purity of the heroin being used and the addict's state of mind. An addict who is heavily addicted may take a much larger amount of heroin to experience this pleasurable feeling and may only feel a slight euphoric effect after injecting or only feel the lessening of withdrawal pains. Other psychological effects are the feeling of mental sluggishness, relief from responsibilities or problems and a feeling of floating and drowsiness, often called "nodding."

Some of the effects of heroin on the body are slow breathing,

slurred speech, constricted pupils and droopy eyelids, lowered skin temperature, constipation, and infrequent urination, slow heart beat, dry mouth and skin, itching of the skin and the presence of needle marks at injection sites, commonly called "tracks."

Addicts usually are not careful to use clean needles and syringes when injecting themselves. Most heroin addicts have scabs, inflamed skin and scar tissue over their veins at injection sites. Improper injection often causes abscesses and infections of the skin and veins. Because of poor nutrition, poor hygiene, use of other contaminated drugs and many injections at the same point, most addicts experience various health problems and do not heal or recuperate at a normal rate.

Addiction to heroin is a condition that requires regular use of this drug, at increasingly higher doses, to prevent withdrawal symptoms. Addiction can occur in one to two weeks of using heroin regularly. If an addicted person does not receive his usual dose, withdrawal symptoms will begin within 8 to 12 hours. Some of the early symptoms are excessive yawning, runny nose and sweating. Within 14 hours the addict may fall into a restless sleep and wake after sev-



**Brown tar Heroin looks like and has the consistency of a Tootsie Roll.**

eral hours, feeling nervous and agitated. As the withdrawal progresses, other symptoms occur: loss of appetite, dilated pupils, irritability, gooseflesh, shaking, sneezing, nausea, and vomiting, diarrhea, cramping of the stomach and muscle spasms. These symptoms may last from seven to 10 days.

A heroin addict's life span is 10 to 15 years shorter than the average, usually because of heroin overdoses. The second most common cause of death is from accidents, such as suicide, auto accidents and murder. Because addicts tend to share contaminated injection equipment, they have a very high incidence of infection of the heart membranes, hepatitis, AIDS and other infections.

Several of the more damaging effects of heroin addiction occur after withdrawal. Research has shown that many former addicts suffer from inability to cope with stress, are overly concerned with minor discomforts and have a poor self-image. These factors seem to contribute to the compulsive user returning to addictive use at the earliest opportunity. ★