A RADICAL GUIDE TO SAFER DRUG USE 2

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INTRODUCTION TO THE 3RD EDITION

We re-structured this zine from the 2nd edition to be more consistent and comprehensive and easier to read and reference for the end user. This zine is focused primarily on how to use drugs safer, not philosophy or community organizing efforts related to harm reduction. We hope this new edition is an easier and more helpful read for anyone looking to use drugs safer. May you be well and happy in all your pursuits.

"Beyond Narcan: Holistic Harm Reduction" can be considered a companion piece for this zine. Refer to it for a broader philosophical understanding of harm reduction.

HOW TO USE THIS ZINE

This zine serves as a reference for basic information about a variety of commonly used drugs and the ways to take them. Feel free to read the "Harm Reduction Approach" section and then skip to the specific drug section and the way you plan to take the drug. Don't be afraid to check back here or look up more information on the sites below

https://drugs-forum.com/wiki/
https://www.erowid.org/chemicals/
https://psychonautwiki.org/wiki/Responsible_drug_use
https://www.effectindex.com/

THE HARM REDUCTION APPROACH

Harm Reduction is a way of approaching pleasure to make it safer and more enjoyable. With drugs, it's about safer materials, information and destigmatization. Using the harm reduction mindset, we look out for our own pleasure and the pleasure of others.

- The more you take a drug, the more tolerant you become to its effects and the more you have to take. **A higher tolerance makes it easier to overdose without noticing**. Tolerance is both physical and psychological. Similar drugs can often create a "cross tolerance" between each other. Tolerance can form to any drug.
- **Don't use alone.** Always try to use drugs, especially new drugs, around people you trust. **If you pass out, fall, or need help, a friend can be the difference between life and death.**
- Help normalize using drugs in social settings, not alone at home or locked in a bathroom. Encourage your friends to be open and honest about their drug use. Tell people when you're dosing, especially opioids or other drugs that affect breathing or heart rate.
- **When in doubt, start with half. Half a pill, half a line, one tiny puff. You can always take more.**
- Carry naloxone (narcan), especially if you're using opioids. Fentanyl can contaminate many powdered drugs like cocaine, ketamine or MDMA.

- Keep condoms and lube or other safe sex tools with you. Discuss consent with your partners before getting high and be sensitive to how drugs can change comfort regarding sex. Consider starting PrEP to prevent HIV.
- Emergency medical services are essential. Calling 911 may expose people to the police. **Do not state there was an overdose or drug related activity when talking to the 911 dispatcher**. "My friend fell unconscious" can be sufficient to not have police dispatched. Be transparent with paramedics when they arrive!
- **If someone falls or passes out, place them in the recovery position** and keep an eye on them. If you feel yourself about to pass out, place yourself in the recovery position.
- Accurately measure drugs with a milligram scale, volumetric dosing or milligram spoons to avoid over or under dosing.
- **Do not swim, drive or operate machinery while intoxicated, this wildly increases your chances of serious injury or death.**
- Do not try to trick or persuade anyone to use a substance they are not willing to use, respect people's decisions to use or not use drugs.
- Test your substances, especially powdered drugs, for contamination with other drugs like fentanyl.

ORAL - SAFER SWALLOWS

Most drugs are taken orally - swallowed as liquids, crystals, powders or pills, and absorbed through our stomach and intestine lining. This can cause stomach upset and nausea. Much of the drug may be destroyed by stomach acid. However, taking things orally also gives your body a chance to protect itself by vomiting if you take too much

Some drugs can be pre-processed, such as crushing a pill down to a powder and swallowing it inside some tissue paper (parachuting). This lets the body absorb the drug faster. Some can be brewed into a liquid such as psilocybin tea, increasing absorption and reducing stomach strain. Most drugs absorb better on an empty stomach at the cost of nausea, although a few drugs are better taken with food.
Learning what works best for your body can take some practice.

Stomach upset can be reduced by taking drugs after eating fatty foods, and taking antacids. If you've ingested a dangerous amount of a drug, you can open an activated charcoal capsule into a cup of water and drink it to help absorb and neutralize the drug. Inducing vomiting can further prevent a dangerous overdose.

INTRARECTAL - SAFER BOOFING

Intrarectal administration, putting drugs up your butt (boofing or plugging), is an efficient and much safer way to take many drugs. The absorption is very close to injection with far less risks involved. Don't be afraid to catch the gay, there's nothing except happiness when you put things up that way! You'll need clean water, a 1ml syringe, and a small vessel (shot glass, cookers, spoon) to mix your dose in. Optionally gloves and lubricant make things cleaner and easier.

First, prepare by pooping and cleaning up thoroughly with a bidet or wipes. **Carefully measure out your dose.** Intrarectal absorption is very high, you usually

need a lot less than snorting or swallowing. Use a milligram spoon or milligram scale and double check! Dissolve dose into 1ml of water and draw into a syringe.

Lay in a comfy position, like on your back, and gently insert the syringe into your anus, ideally with lube. Once it's about an inch or so in, very slowly press the plunger down to gently dribble the dose into your rectum. You're aiming for the rectal wall, right past the opening. If go too far, the dose will hit your intestines and take longer to hit. A properly administered dose can will come on very quickly (minutes).

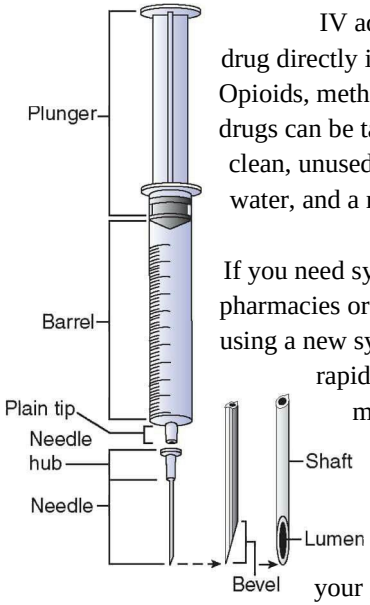
Leave the syringe in for a moment, then slowly pull it out. Discard the syringe and wash your hands. You can do another 1ml dose if needed, but first take a moment to be sure you didn't just hit the intestine.

Once you get the hang of it, boofing is a quick and easy way to avoid injections while getting the most out of your dose.

INJECTION -
SAFER INTRAVENOUS, SUBCUTANEOUS AND INTRAMUSCULAR INJECTION

Injection is extremely efficient, and the method of choice for many medications like norepinephrine (epi-pen's), insulin and testosterone. Although injection presents several risks, most of them can be mitigated with clean supplies, good technique, and adequately spaced use. Injected drugs are almost entirely absorbed by the body and bypass the digestive system. **Injection carries serious risks of infection, abscesses, blown out veins, nerve damage, rapid overdose, disease transmission and soft tissue damage**

SAFER INTRAVENOUS (IV)



IV administration means injecting the drug directly into your blood through a vein. Opioids, methamphetamine and many other drugs can be taken intravenously. You'll need a clean, unused needle, rubbing alcohol, sterile water, and a mixing/cooking vessel (spoon/cap)

If you need syringes, you can get them at some pharmacies or needle exchanges. We recommend using a new syringe for each shot as needle tips rapidly blunt after one use and cause more damage with each reuse.

Never share syringes or other injection supplies (danger of HIV or Viral hepatitis C). If you decide to anyway, at least bleach your gear to lessen the possibility of contracting a disease (not 0%).

1. Prepare your space. It's important to use clean and sterile gear in a clean area to prevent abscesses, infections, and vein damage. Use the cleanest water you can find. Water can be sterilized by boiling it in your cap. Wipe down a surface or put down some cardboard or paper to give yourself a cleaner spot.
2. Make sure your using space is accessible in the event of an overdose, **IV is the easiest way to accidentally overdose.**

3. Mix / cook your dose in your cap and draw it into the syringe. **Measure carefully.**
4. Pick an injection site: below the collarbone and above the wrists, often in the crux of the arm. If you have to you can shoot in the hip area. **Do not shoot into the back of the hands or wrists, legs, neck, groin, eyes, forehead, tongue, or genitals.** You will cause irreparable damage.
5. **Avoid arteries**: if you hit one, dark blood will gush out. Pull out, raise your arm, and apply pressure to stop the blood flow. If it doesn't stop see a doctor. To avoid arteries, feel for a pulse. **You want a blood vessel without a pulse.**
6. **Rotate veins**: using the same vein will damage it and cause it to collapse or abscess. Move towards the heart, if you shoot below a previous site you may break free an existing scab or blood clot, which may travel to the lungs or heart causing complications or death.
7. **Rolling veins**: A vein may roll/move if a tie is too thin and the needle is inserted incorrectly. To stop a vein from rolling, you can put your arm against a flat surface and apply pressure.
8. **Clean the site with alcohol.** Only wipe going one way (not in a circular motion or "back and forth" - this will recontaminate the site).
9. Tie off. This will raise the vein and slow the flow of blood. Use something at least 1" wide and have it about 4" above the injection site to tighten and raise the vein. Loosen the tie after inserting the needle and before injecting.

10. Insert the needle at a 45-degree angle with the hole in the needle (the bevel) pointing up. This causes less tearing to the vein and lowers the chances of going through it.
11. **Slowly push down the plunger.** Don't slam the shot, this increases the chances of an O.D. because the drug may be purer than you think or cut (once it's in, you can't take it out).
12. Injection Kit Disposal: Be considerate when you dispose of a syringe and be mindful of blood. Clean up after yourself. Keep a biohazard container on you to dispose of all materials. You can get one from medical offices or your doctor. Laundry detergent and thick plastic bottles work too.

CLEANING/MISSING

To clean a set (if re-using a syringe): draw up clean water (all the way) and shake. This will break down excess blood. Do this three times, then dump the water (it's loaded with bacteria). Then, use full-strength bleach 3 times, shaking for 30 seconds each time (to kill remaining bacteria including HIV). Then do clean water again 3 times to get all the bleach out (you don't want to inject bleach).

If you miss: (a) squeeze the shot into a clean vessel; (b) clean the point or use a clean set and draw the shot back up; (c) never reheat blood it can clot the blood and send parasites directly into the bloodstream; (d) move the shot up above the previous site and try again.

SAFER INTRAMUSCULAR (IM)

Some drugs like ketamine as well as hormones like estrogen or testosterone are taken by IM injection (injecting into a muscle rather than a vein). You'll need an alcohol wipe, a clean unused needle, a clean mixing container and sterile water.

1. Clean the injection site (most accessible sites are the thigh muscles, biceps, or glutes) by wiping in one direction with an alcohol wipe
2. Prepare and draw up your dose into the needle, turning the needle to face upwards and flicking the syringe will help separate air from the liquid and get air bubbles out of the syringe
3. You can gather the muscle you're injecting into by holding it with your hand and pulling it up slightly, although this isn't strictly required
4. In one quick motion, jab the needle into the muscle, a slower insertion is usually more painful and damaging
5. Slowly push the plunger down to inject the drug into the muscle
6. Pull the needle out and safely dispose of it into a sharps container or thick plastic bottle

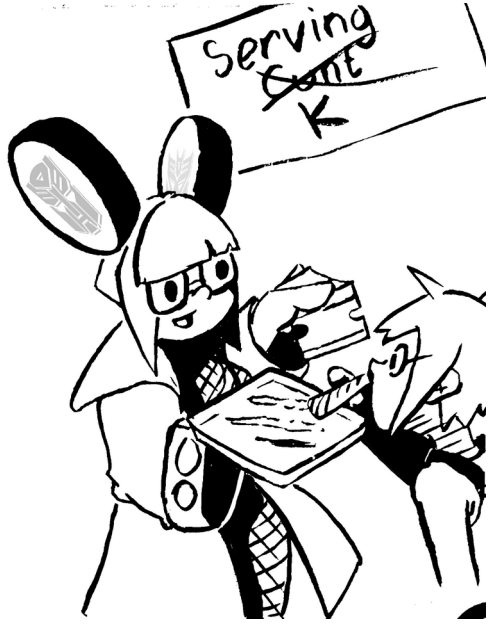
SAFER SUBCUTANEOUS (SUBQ)

SubQ injection uses a short needle to inject into the fatty tissue layer between your skin and muscle. Drugs delivered this way are absorbed by your body slowly, around 24 hours after the injection. The amount used for SubQ injection is typically small — around 1mL. SubQ injection sites include: abdomen, back of the upper arm, and the front of the thigh.

If using your abdomen, make sure you're injecting at least 2 inches away from your belly button. Change site between shots, not rotating will cause absorption issues, bruising and discomfort. You'll need an alcohol wipe, a clean unused needle, a clean mixing container and sterile water.

1. Clean the injection site by wiping in one direction with alcohol, let it dry.
2. Prepare and draw up your dose into the needle. Turn the needle upwards and flicking the syringe will help separate air from the liquid and get air bubbles out of the syringe
3. Hold a syringe in your hand like a pencil. With your other hand, gently pinch the injection site between your thumb and forefinger to make a fold, hold the skin fold throughout the injection.
4. Vertically insert the full length of the needle at a 90-degree angle into the skin fold.
5. Slowly press down on the plunger. Be sure to hold the skin fold throughout the injection.
6. Pull the needle straight out. Let go of the skin fold.
7. Put the needle in a disposable sharps container or thick plastic bottle.

INTRANASAL - SAFER SNORTING



Putting drugs up your nose (snorting/railing) is a popular and effective way to take many drugs. Intranasal works by coating your sinuses with the drug, where blood vessels are close to the surface and can easily absorb it, more than taking it orally. However, frequent or large volume intranasal drug use can damage your nasal passages, causing bleeding, tissue loss, deviated septums, and infections.

You can reduce this damage by mixing your drug with a saline solution and adding it to a nasal sprayer. Mix a larger amount (a gram) with about 5ml of saline. Many sprayers dispense a metered .1ml spray, so you can use this to calculate exact dosage per spray easily. Make the spray potent enough for 1-3 sprays per nostril to be enough.

Reducing your drug to a fine powder also helps. Crush drugs on a non-porous hard surface (glass, ceramic) using a razor blade for hard drugs (like a rock of cocaine) and plastic cards to powderize softer drugs (ketamine, cut cocaine). If your drugs are too coarse they can cause pain or bleeding. If trying to maximize dose efficiency, load your dose into the bend of a bendy straw, put one end in your nose and the other in your mouth, blow your dose into your nose with your mouth.

Use clean straws, **don't use dollar bills, they carry a ton of bacteria**, sharing straws can spread sinus infections like Hep C. **Give everyone their own straw. Use a measured milligram spoons not any shallow spoon.** Using a random knife or unmeasured spoon can result in accidental overdose. Milligram spoons are cheap and easily available online, they can be used to take bumps right out of the bag without worrying about wild dosing variations.

After taking drugs intranasally, rinse your nose with a saline spray or plain water. Try putting vitamin E oil on a cotton swab and spreading it around the inside of your nasal passage to help repair sinus tissue.

Intranasal steroids (like fluticasone, a common over the counter nasal spray) can help reduce inflammation from intranasal drug use if the surface tissue isn't overly damaged.

ALCOHOL

Alcohol aka ethanol is drank for a variety of different effects. Alcohol slows your heart rate and breathing, causes drowsiness and at high doses or when mixed with other drugs can risk stopping breathing, heart rate or other core body functions.

POSITIVE EFFECTS

Relaxation, mood lift, happiness, giddiness. Increased sociability and confidence, lowered inhibitions. Reduces pain, muscle relaxant.

NEUTRAL EFFECTS

Slurred speech, flushed skin, drowsiness. Eye twitching, difficulty focusing eyes. Increased or Decreased sexual response. Tolerance within a few days. Beautiful things seem ugly, ugly things seem beautiful. Others appear more attractive. visual distortions, reduced impulse control.

NEGATIVE EFFECTS

Decreased coordination, reduced ability to stand still. **Nausea, vomiting.** Reduced ability to judge own impairment. Bad decision making. Shit talking. Boozy talking, shouting. Emotional volatility. Reduced ability to attain/maintain erection and orgasm.

Frequent urination, dizziness, confusion. Blackouts. **Passing out or inadvertent falling, coma and death at extreme doses.** Brain/liver damage (cirrhosis) with heavy use. Hangover, lasting 12-36 hours, from mild to severe after heavy use. Fetal damage in pregnant women.

DOSING

The amount of alcohol it takes to intoxicate a person varies dependent on hormones, weight and tolerance. A single drink can cause one person (lightweight, with an empty stomach) to become drunk after a single drink. Whereas someone (heavyweight, with a full stomach) might barely feel a single drink. Drinks vary in potency. A beer at 9.8% will affect you twice as much as drinking two 4.2% beers. Mixed drinks vary wildly in their strength. Start slow, most of a drink will hit you over the course of an hour or more depending on stomach content. It takes about two hours for a single drink to wear off.

Alcohol Duration	**Oral**
Total Duration	1.5 – 3 hrs
Coming Up	15 – 20 mins
Plateau	30 - 90 mins
Coming Down	45 – 60 mins
After Effects	1 – 2 hrs
Hangover	1 – 36 hrs

HARM REDUCTION GUIDANCE

- Start drinking after eating some fatty food to help protect your stomach and reduce nausea
- **The main thing to avoid when drinking is a painful hangover or injury while drunk.**
- Take activated charcoal pills to help reduce nausea
- Drink water before, during and after drinking to help reduce a hangover
- **Plan ahead of time how you're going to get around or who is going to drive**
- If you start vomiting and need to lay down, or you need to help someone else, put them in the recovery position where if they throw up while unconscious they won't choke on their own vomit and die
- Be very careful when mixing alcohol with other CNS depressants like opioids, sleeping pills, benzodiazepines, ketamine, nos, etc.. They can combine to knock you out without having to take nearly as much of any one drug.
- Take electrolytes in the form of fruit or sports drinks to help combat dehydration
- Some drug interactions might be rare, such as gabapentin severely reducing your alcohol tolerance. Look up any interactions with alcohol when you start a new medication or try a new drug.
- **There is no harmless amount of alcohol you can consume, wine is not healthy in any amount and does not mitigate the harm from ethanol**

CANNABIS

Cannabis aka weed, marijuana, bud etc. is a drug often in the form of plant buds or distilled concentrate. Cannabis affects the cannabinoid system of and doesn't affect core body functions (breathing, heart beat, etc.). **You cannot overdose on cannabis in a way that will kill you**. Cannabis is composed of a variety of different chemicals that all influence the body in different ways. THC is the primary psychoactive chemical in cannabis.

POSITIVE EFFECTS

Euphoria, laughing. Relaxation. Creative thinking. Increased appreciation of music. Increased awareness of senses. Pleasant body feel. Pain relief, reduced nausea. Boring tasks can become more interesting or funny. Reduced seizure frequency.

NEUTRAL EFFECTS

Increased appetite. Slowness (slow driving, talking). Change in vision, closed-eye visuals. Tiredness or stimulation, inability to sleep or falling asleep. Blood-shot eyes. Dry/sticky mouth. Memory problems. Facial tension / numbness. Racing

thoughts. Time altered (cars seem like they are moving too fast).

NEGATIVE EFFECTS

Coughing, asthma. Memory problems. Racing heart, anxiety, panic attacks. Headaches, dizziness, confusion. Fainting, clumsiness. Psychological dependence. Nausea, especially in combination with other drugs. After long enough use minor withdrawal can cause nausea. Can precipitate or exacerbate latent or existing mental disorders

DOSING

Cannabis is usually smoked or eaten. Low doses can feel relaxing and stimulating, big doses can feel psychedelic and trippy. Cannabis takes about fifteen minutes for the drug to peak when smoked. Without a tolerance, a single puff can send someone sky high for hours, with a developed tolerance a whole joint can feel like nothing. Be careful when sharing cannabis with people who don't consume it regularly. You can always take more, you can't take less.

Edible cannabis can take two to four hours for peak effects. When taking edible extracts (RSO) on their own on an empty stomach, absorption and effects will be much stronger compared to taking a baked THC brownie or taking a THC capsule on a full stomach. For best effects, take edible cannabis on a lighter or empty stomach. **For edibles/oral cannabis, users should dose anywhere from 2 to 10 mg, while experienced users can dose 10 - 30mg or more depending on their tolerance.**

THC Duration	Smoked	Oral
Total Duration	1 – 4 hrs	4 – 10 hrs
Onset	0 – 10 mins	30 – 120 mins
Coming Up	5 – 10 mins	30 -60 mins
Plateau	15 – 30 mins	2 – 5 hrs
Coming Down	45 – 180 mins	1 – 2 hrs
After Effects	0 – 24 hrs	0 – 48 hrs

HARM REDUCTION GUIDANCE

- Start low and slow, it's easy to get overwhelmed by cannabis
- CBD helps mellow out anxious side effects
- Bring healthy snacks to eat while smoking
- If you have asthma, keep your inhaler around.
- Chew peppercorns if feeling overwhelmed
- A fidget toy can help manage anxiety
- Sharing joints/pipes/bongs/etc. can get you sick or spread respiratory infections. Cleaning the mouth piece can help keep everyone healthy.
- You can get a hangover the day after and experience dry mouth, tiredness, red, dry, or itchy eyes. Joint stiffness, fatigue, foggy thinking, reduced memory, slower recall.
- Cannabis can intensify other drugs, especially psychedelics like LSD or Psilocybin Mushrooms
- Set alarms or create reminders on your phone to help manage forgetfulness while high
- Blunt wraps still contain tobacco, nicotine and all the pleasant and unpleasant side effects they entail

- Concentrates are generally the most potent, followed by hash and then bud
- Reduce lung/throat irritation by using bongs, vapes and edibles
- When taking cannabis concentrate take them on lower temperatures. You'll get more out of your hit and reduce damage to your lungs. **Don't hit red hot nails/nectar collectors!** Let it cool off after heating.
- Cannabis can create physical dependency and psychological addiction. Cannabis dependency can cause trouble sleeping, loss of appetite, anxiety and irritability. Withdrawals are never life threatening. If you're experiencing cannabis withdrawal taking CBD products can help curb anxiety and sleep aids can help get through the first few nights of withdrawal.
- Many drugs feel stronger when taken in social settings. Dose lower when you're with others
- Holding in your hit for a long time will not get you substantial higher than a single deep inhale and exhale
- Use a small clip or bit of wire to hold a joint or blunt as they become smaller to avoid burning your fingers
- **Be careful when using concentrate tools (nails, blowtorches, straws, etc.) as they get very hot and burning yourself on accident is easy**
- Mangos can potentiate the effects of cannabis, the important chemical is mostly in the skin of the mango. Eating a mango whole can get you noticeably more high from the same dose

NITROUS OXIDE

Nitrous Oxide aka laughing gas, NOS, galaxy gas, whippets, etc. is an inhaled dissociative drug. Nitrous is often sold by the balloon at raves and punk shows and commercially in a variety of different canisters. Long term use can cause motor nerve and neural damage. While using the intense feeling of nitrous makes falls easy. **The main way people hurt themselves with nitrous is by dosing while standing up, then falling over and injuring themselves.**

POSITIVE EFFECTS

Increased laughing, euphoria. Sound distortion, dreamy state, hallucinations & visualizations

NEUTRAL EFFECTS

Reduction of external stimuli, clumsiness, loss of balance. Pain relief, 'buzzing' sensation.

NEGATIVE EFFECTS

Nausea. Headaches. Reduction of vitamin B12 levels in the body, numbness in extremities with heavy, regular use. **Motor nerve damage with regular use.**

DOSING

Nitrous oxide dosage varies between individuals and within using sessions. Initially a single balloon can be intoxicating, after several balloons the effects feel much diminished. Nitrous requires frequent redosing to maintain a high. Nitrous can be particularly intensified by other dissociative drugs like ketamine and DXM, dose slowly when mixing with other drugs. Due to nitrous's short duration, nitrous inhaled from a balloon or whip cream dispenser is unlikely to cause a dangerous overdose. **When nitrous is combined with other drugs, the disorientation / vomiting can rapidly become dangerous.**

Inhale slowly, letting the effects come on over many inhales mixed with fresh air. **You need to keep getting fresh air while using NOS**. Don't exhale back (rebreathe) into a balloon as this can cause carbon dioxide poisoning. Dosing too quickly can cause vomiting, falls and loss of consciousness. **Taking one huge hit of nitrous will not get you higher than multiple smaller hits**. When inhaling, fill your lungs a little over halfway with nitrous and take in some fresh air to top things off.

Nitrous Oxide Duration	**Inhaled – Single Breath**
Total Duration	1 – 5 mins
Onset	0 – 1 mins
Coming Up	15 – 30 secs
Plateau	1 – 5 mins
Coming Down	10 mins
After Effects	15 – 30 mins

HARM REDUCTION GUIDANCE

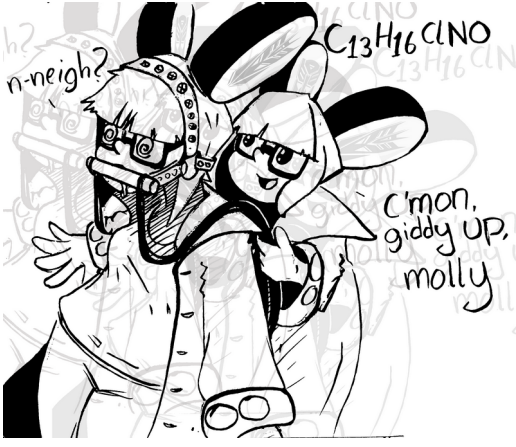
- **Supplement methyl-B12**. Most B12 sold in stores is cyanocobalamin which is harder for the body to absorb after using nitrous. Methyl-B12 is easier for absorb and helps prevent long term nerve damage. Take in combination with a multi-vitamin and complete amino acid supplements
- **Don't use nitrous while standing, falling over is the most dangerous part of nitrous**
- Sharing balloons spreads sickness and bacteria, give everyone their own balloon
- It's better to do a binge of nitrous over a weekend than to take small amounts daily, because of how nitrous inhibits B vitamin absorption it's better for your body to do a lot of it in a short period and then stop for a few weeks
- **Never take a hit directly off a cracker or tank, very cold temperatures can freeze the lips and throat if inhaled directly**
- Be incredibly careful if using a mask connected to a tank, make sure there is an oxygen intake valve to prevent a lethal overdose
- **Never use nitrous in a way that doesn't include oxygen and regular breathing**
- Nitric Oxide, is occasionally mistaken for Nitrous Oxide. Users should be careful they know what they are inhaling. Inhaling Nitric Oxide can permanently damage the lungs or kill.
- **There is no evidence nitrous oxide causes brain lesions**

KETAMINE

Ketamine aka horse tranquilizer, K/Ket is a dissociative anesthetic drug. Ketamine often produces feelings of bodily and mental disconnection. Ketamine is usually snorted or injected intramuscularly. Ketamine puts strain on the kidneys/bladder and can cause damage if used long term. Ketamine slows core body functions like breathing and heart rate and should be used cautiously with other drugs that impact core body functions like alcohol or opioids.

POSITIVE EFFECTS

Increase in energy. Euphoria, sense of calm. Meaningful spiritual experiences, sense of connection with the world. Visual, dream-like, hallucinatory ideations. Reduced or eliminated pain.



NEUTRAL EFFECTS

Distortion/loss of sensory perceptions, visuals. Dissociation of mind from body, numbness, loss of coordination. Significant change in perception of time and reality. "K-hole"; intense mind-body dissociation, out-of-body experiences, visuals. Slurred speech, sedation at high doses. Increase in heart rate.

NEGATIVE EFFECTS

Psychological dependency. Nasal discomfort (snorting), pain or numbness at injection site (with IM). Severe confusion, paranoia. Frightening loss of sensory perception. **Nausea, vomiting, loss of consciousness, susceptibility to accidents (from falling or being unable to react).** Severe dissociation, depersonalization. Depression of heart rate and breathing. **Bladder damage from long term use.**

DOSING

When taken at lower doses, ketamine can produce a floaty/dissociative effect. In high doses users can experience total body disconnection and a loss of sense of self. When snorting ketamine, slowly dose with smaller lines or bumps from a milligram spoon. **An average line is about 1/20th of a gram, or four scoops from a 10 - 15mg spoon**. Dose with some food in your stomach to help with nausea, take antacids or other anti nausea meds to help prevent vomiting. Grapefruit juice can increase the potency of ketamine Let each hit slowly come on before dosing more to avoid accidentally taking too much, you can always take more, but you can't take less!

When dosing intramuscular ketamine, use a milligram scale or milligram spoon to accurately dose. **Injection too much ketamine can quickly cause you to pass out and potentially vomit before you know what's going on, killing you.**

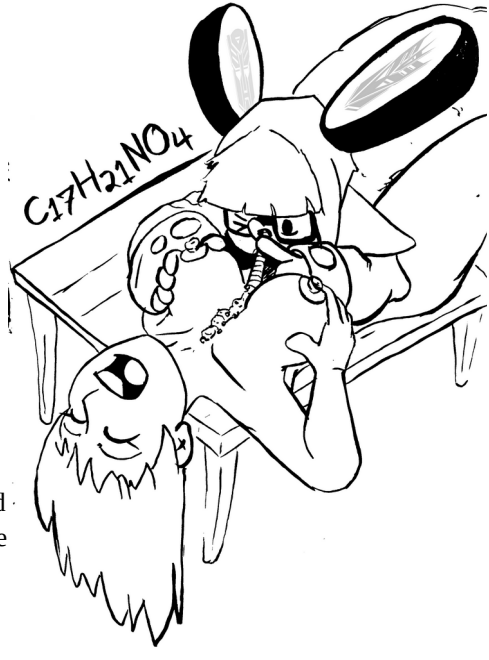
Ketamine Duration	Intranasal	Intramuscular
Total Duration	45 - 60 mins	30 – 60 mins
Onset	5 – 15 mins	1 – 5 mins
Coming Up	10 – 30 mins	5 – 20 mins
Plateau	20 – 40 mins	20 – 45 mins
Coming Down	30 – 60 mins	20 – 60 mins
After Effects	1 -3 hrs	2 – 4 hrs
Hangover	Possible	Possible

HARM REDUCTION GUIDANCE

- Ketamine causes vomiting and passing out, **use ketamine with others to prevent a dangerous overdose**
- Rinse your nose with saline and apply vitamin e oil with a cotton swab after snorting to help prevent nasal damage
- **Be careful when combining with other downers like alcohol, opioids and sleeping pills as these can combine to slow or stop your breathing**
- Sometimes consuming sugar reduces the high.
- Crush with a plastic card to help fully powderize it
- Nicotine can induce strong nausea while on ketamine
- Ketamine can radically warp how one feels about consent regarding sex or sexual activity.
- Be prepared to have a space to crash and lay down
- If using alone, make sure to place yourself in a recovery position if k-holing or injecting or at least have a raised surface to fall back on. **Passing out on your back can kill you by choking on your own vomit.**

COCAINE

Cocaine, aka blow, crack, snow, or nose candy is a stimulant drug that is usually snorted. Cocaine outside South America is consumed as a white powder that was processed from the coca plant. While physical dependency is weak, cocaine can be mentally addicting. Cocaine, due to its highly processed supply chain is usually cut with a variety of fillers that can be damaging on their own



POSITIVE EFFECTS

Euphoria, stimulation. Sexual thoughts and sensations, sociability. Reduced altitude sickness, reduced physical fatigue. Euphoric rush.

NEUTRAL EFFECTS

Numbness, increased heart rate and blood pressure, appetite suppression. General change in consciousness.

NEGATIVE EFFECTS

Desire to do more cocaine. (Snorted) post-nasal and back of throat drip, numbness, and irritation, dry mouth. Sensation of throat closing up (snorted). Rapid changes in mood: anxiety, panic, annoyance, agitation, anger, paranoia, fear, insomnia. Feeling over stimulated, shaking. Tolerance, habituation, psychological addiction

OVERDOSE

Heart arrhythmias, acute psychosis. Rapid heart rate, hypertension, overheating, shaking, clenching, muscle spasms, seizure. Kidney damage and death from heart attack.

DOSING

Prepare cocaine by cutting it into a fine powder on a nonporous surface using a clean sharp edge. Cocaine can be dosed about one “line” (1/20th of a gram/50mg) or large bump every hour. Use a clean straw, milligram spoon or sanitized surface and snort your dose. At the end of your session, clean your nose with a saline rinse and vitamin e oil.

Cocaine Duration	**Nasal Single Dose**	**Nasal Multi-dose**
Total Duration	1 -2 hrs	2 – 4 hrs
Onset	0 – 5 mins	0 – 5 mins
Coming Up	1 – 15 mins	1 – 15 mins
Plateau	10 – 20 mins	20 mins – 6 hrs
Coming Down	15 – 60 mins	60 – 120 mins
After Effects	1 – 2 hrs	3 – 6 hrs

HARM REDUCTION GUIDANCE

- Be careful combining cocaine with other stimulants as the effects can be much stronger than a larger dose of a single drug and cause an accidental overdose
- Cocaine and other stimulants can mask the effects of drugs like alcohol or opioids, leading to a false perception of being more sober than you are
- Cocaine mainly injures our heart, avoid cocaine if you have a history of heart issues
- Keeping your heart healthy will help reduce the potential dangers of regular cocaine use
- Don't share straws, keys or other snorting aides as this can transmit diseases like Hepatitis C
- Cocaine can numb parts of the body and lead you to be unaware if they're damaged
- **When cocaine is combined with alcohol it produces a new chemical that is both highly euphoric and highly toxic to your heart**
- Freebase cocaine/crack causes long term lung damage when smoked

CRACK VS COCAINE

"Crack" is freebase cocaine in the form of harder rocks. Powdered cocaine is generally insufflated (snorted) and crack /freebase cocaine is generally smoked. Smoking freebase cocaine causes a strong, short-lived peak of about 3-5 mins, while snorting cocaine provides a lower high with effects lasting closer to 15 - 30 mins. Prolonged powdered cocaine use diminishes the high while crack can keep the same high but gradually shortens the duration.

KRATOM

Kratom is a plant that grows in South East Asia, the leaves are consumed for a variety of effects from pain relief to stimulating energy. Kratom partially works on the opioid system and the primary psychoactive chemical is mitragynine, although there are a variety of chemicals in the plant. Kratom can cause physical dependency and psychological addiction. Kratom outside Southeast Asia is usually sold as powdered leaf, sometimes enhanced with extracts.

POSITIVE EFFECTS

Simultaneous stimulation & sedation. Empathy, euphoria. Aphrodisiac. "Nodding", vivid waking dreams. Physical energy. Increased sociability. Reduction of opioid withdrawal symptoms

NEUTRAL EFFECTS

Relatively short duration, change in ability to focus eyes, pupil pinning / miosis, pain reduction.

NEGATIVE EFFECTS

Very bitter taste. **Dizziness, nausea and/or vomiting.** Mild depressed mood during and/or after. Feeling hot and sweaty. Hangover similar to alcohol. Itchiness. Reduced sexual desire. Desire to use more than intended. Opioid withdrawal symptoms. Addiction. Tolerance building quickly after a few days of repeated use. May cause liver or other organ damage but more research is needed.

DOSE

At a low dose (1 - 3 grams), kratom can be stimulating, at higher doses (4 - 6 grams) it can put you to sleep. Dosage can vary wildly depending on if extracts were added, how old the powder is or how potent the original leaf was. Make sure there's at least a little food in your stomach to help reduce nausea, high fat foods like peanut butter can particularly help.

To consume kratom, it can be put inside capsules and swallowed, mixed with water or juice and drank, or brewed into a tea. Kratom does not mix well with water, mixing kratom with water and drinking it requires good mixing right before drinking. Using a thick vegetable juice like V8 can help mask the texture of powdered kratom while capsules can eliminate any bad taste at all.

Kratom Duration	**Oral**
Total Duration	4 – 6 hrs
Onset	15 – 20 mins
Coming Up	30 – 60 mins
Plateau	2 – 4 hrs
Coming Down	1 – 2 hrs
After Effects	3 – 6 hrs

HARM REDUCTION GUIDANCE

- Dextromorphan or DXM, commonly sold as cough medicine, will intensify/potentiate the effects of kratom
- **Kratom is dangerous to combine with an MAOI**
- Turmeric, a root commonly used in cooking and sold as a supplement, will drastically slow the absorption of kratom, extending its effects but making them less powerful. Taking a turmeric shot at the height of kratom's effects can help extend your dose
- Kratom can make you nauseous and cause vomiting
- Kratom potentiates the other downer or sedative drugs like alcohol, opioids and sleeping medication, be very careful when combining kratom and downers
- If using kratom as a pain management tool, it's easy to push yourself too hard while on the drug, leading to a painful recovery
- Kratom can cause constipation, drinking a lot of water and taking a stool softener and laxative can help maintain regular bowel movements
- Taking kratom creates cross tolerance with opioids, if you have opioid tolerance then kratom will be weaker, while a kratom tolerance will make opioids weaker
- Taking benadryl or another anti-itch medication on the comedown can help alleviate itchiness
- Be careful when combining with other drugs that are hard on your stomach like ibuprofen (Advil) or alcohol as this can cause worse vomiting or even stomach bleeding at high doses

MDMA

MDMA, Ecstasy, E, X, XTC, Rolls, Beans, Adam or Molly is a commonly used stimulant drug, known for causing a lot of pleasurable social feelings while “rolling”. MDMA is commonly taken at raves and other parties, either snorted or swallowed. MDMA is often prepared as a tablet sold as Ecstasy or a crystal sold as Molly. MDMA is very frequently used as a label to sell research chemicals and is often cut with other drugs or filler, especially in Ecstasy tablets. **Snorting molly is less effective than taking it orally.**

POSITIVE EFFECTS

Euphoria, sociability, energy. Feelings of comfort, belonging, and closeness to others, feelings of love and empathy, forgiveness of self and others. Increased appreciation of music, increased awareness of senses. Life-changing spiritual experiences. Urge to hug and kiss people, decreased pain perception

NEUTRAL EFFECTS

Decreased appetite, visual distortion, rapid, involuntary eye jiggling. Mild visual hallucinations. Increased heart rate and blood pressure. Nervousness, shivering, change in body temperature. Upwellings of unexpected emotion. Stong desire to do more when coming down.

NEGATIVE EFFECTS

Inappropriate emotional bonding, tendency to say things you might feel uncomfortable about later. Anxiety. Jaw clenching, tongue and cheek chewing, and teeth grinding. Difficulty concentrating, short-term memory loss & confusion (including transient global amnesia). Short periods of disconnection from the external world.

Impaired ability to focus eyes / blurred vision, muscle tension, insomnia, inability to fall asleep when physically tired, erectile disfunction and difficulty reaching orgasm. **Increase in body temperature, hyperthermia, dehydration** (drink water), hyponatremia (don't drink too much water). Nausea and vomiting, headaches, dizziness, loss of balance. Sadness on coming down, sense of loss or immediate nostalgia, harsh crash from the peak effect

Hangover the next day**, mild to severe depression and fatigue lasting days to weeks**. Possible strong urge to repeat the experience, though not physically addictive. Possible psychological crisis requiring hospitalization (psychotic episodes, severe panic attacks, etc). Possible liver toxicity and neurotoxicity. Small risk of death.

MDMA Duration	Oral
Total Duration	3 – 5 hrs
Onset	20 – 90 mins
Coming Up	5 – 20 mins
Plateau	2 – 3 hrs
Coming Down	1 – 2 hrs
After Effects	2 – 24 hrs
Day After	2 – 72+ hrs

DOSING

MDMA generally comes in the form of small tablets, capsules, or white powder. When found in tablet form (often referred to as "ecstasy"), it is common for MDMA to be combined with other drugs. Trying to calculate dosages from tablets can be difficult as MDMA content varies wildly. Although a common dose is between 75 – 150 mg, note that most Ecstasy and even crystalline MDMA is not 100% pure and may contain fillers or other drugs. Some people are considerably more sensitive to MDMA than others. Be careful if you are using MDMA for the first time or using material of an unknown purity and strength. Always start low.

The effects of MDMA can increase non-linearly, increasing dosage from 100mg to 120mg (a 20% increase in dosage) can cause more than a 20% increase in experiential effects level. Gradually increase your dosage over time. **Snorting molly is less effective than taking it orally.** If you’re trying to get more out of your dose, consider rectal administration (boofing) and cut your desired dose in half.

HARM REDUCTION GUIDANCE

- When taking MDMA at a party or rave, take regular breaks from dancing to let your body rest. Even if you don't feel tired, MDMA can mask exhaustion and cause feinting, overheating or dehydration
- Drink electrolyte beverages and consume fruit while rolling to prevent dehydration
- Be aware how MDMA can strongly increase sexual desire and libido and influence sexual consent
- Be careful mixing MDMA with other stimulant drugs like cocaine as this can increase heart strain
- Bring gum or a baby pacifier to chew on
- **Be prepared for a hard crash from taking MDMA, depression usually follows a night of using MDMA, so prepare your next day(s) to be comfortable and supportive of your mental health**
- Don't take MDMA on an empty stomach, MDMA can irritate your stomach if taken without food
- **Do not take MDMA with an MAOI (many psychiatric medications) as this can cause fatal serotonin syndrome**
- MDMA can cause overheating, have a plan and make time to cool off if you're active while rolling
- Taking 5-HTP 24 hrs after rolling can help your brain recover, take with green tea to help absorption
- If you redose, limit it to once 1 – 2 hrs after your initial dose, multiple redoses multiplies the crash

PSYCHEDELICS

Psychedelic drugs such as LSD, Psilocybin Mushrooms and Mescaline are drugs that affect the serotonin and dopamine systems of the brain. These drugs affect brain connectivity, our perceptions of reality and ourselves. Psychedelic experiences can be as religious and transcendent as they are deeply pleasurable and ecstatic. Different psychedelics affect us differently and there are a variety of preparations and less common psychedelics. Psychedelics generally are not addiction forming and users tend to self-regulate or find psychedelics helpful for managing other drug addictions. We'll primarily focus on LSD and Psilocybin Mushrooms.

POSITIVE EFFECTS

Stimulation, associative & creative thinking, mood lift. Appreciation of music, sensory

enhancement. Visuals hallucinations, including trails, color shifts, brightening, etc. Profound life-changing spiritual experiences or personal revelations, psychological reflection, oceanic connectedness; blurring of boundaries between self/other.

NEUTRAL EFFECTS

General change in consciousness, looping, recursive, out of control thinking, unusual thoughts and speech, change in perception of time. Pupil dilation, increased salivation and mucus production (causes coughing in some people), unusual body sensations (facial flushing, chills, goosebumps, body energy). Difficulty focusing, quickly changing emotions. Slight increase in body temperature, slight increase in heart rate, increase in yawning

NEGATIVE EFFECTS

Anxiety, tension, dizziness, confusion, paranoia, unwanted and overwhelming feelings. Increased perspiration, difficulty regulating body temperature, nausea. Delusions and fanciful ideation taken as fact. Insomnia, megalomania, over-awareness & over-sensitization to music and noise. Unwanted or unexpected life-changing spiritual experiences or personal revelations. PTSD-style flashbacks or vivid memories of unpleasant visions, memories, or thoughts

LSD VS PSILOCYBIN

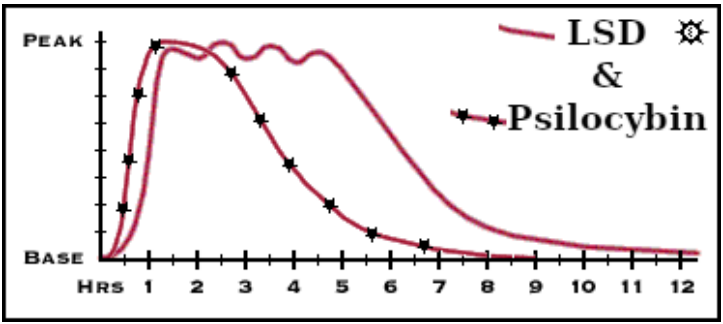
LSD and Psilocybin are the most commonly consumed psychedelics as of the mid 2020s. While similar, they differ: LSD lasts longer, is easier to take and affects dopamine in a way psilocybin doesn't. Taking Psilocybin often means eating dried

mushrooms or preparing tea. LSD can feel “speedy” compared to Psilocybin. Sleeping on Psilocybin is often easier than LSD. Neither drug is “better” than the other, they both feel different yet similar, you’ll have to experiment to see which you like.

SET, SETTING & DOSE

A psychedelic experience is made of the user’s mindset and attitude (set) and the environment they’re taking the drug in (setting) and the dose. When taking psychedelics, it’s important to have supportive and comforting people around and be in a environment supportive of your trip. Taking psychedelics when around unpleasant people or in scary or oppressive environments can be a recipe for a bad trip.

Don’t dose if you’re feeling acute mental distress like dissociation, depersonalization or derealization as psychedelics can worsen these feelings. If using psychedelics to try and manage or treat addiction or other mental illness, talk with an educated professional about the best way to help yourself with psychedelics. **The first few times you use psychedelics, create a supportive and welcoming environment with good friends**.



DOSE

Dosing Psilocybin and LSD can be variable. LSD is often sold as “tabs/blotters” aka small squares of paper that have been soaked in liquid LSD. A blotter will often contain anywhere from 80 to 200 micrograms (ug). Dosing LSD at a moderate dose is about two tabs, although preparations like gel-tabs, capsules, sugar cubes and pure liquid vary, ask your local scene or dealer for help dosing your LSD. Start slow and consider taking a second dose after an hour or two once the effects begin.

Dosing psilocybin mushrooms can be done with a scale, although mushrooms vary wildly in potency even within mushrooms that grew from the same pot. Regular dosages for mushrooms vary between 1 and 4 grams. To normalize your dosage, consider powderizing a larger amount of mushrooms to mix their potency. Mushrooms can be prepared by breaking up the dried mushrooms and brewing them in warm water with lemon juice. A mushroom tea will be easier on the stomach, hit harder but last for a shorter period. Mushrooms can also be eaten straight away. Dried mushrooms can be ground up and mixed with peanut butter to make eating easier and reduce nausea.

Oral Duration	**Mushrooms**	**LSD**
Total Duration	4 – 7 hrs	6 – 11 hrs
Onset	15 – 60 mins	20 – 60 mins
Coming Up	15 – 30 mins	15 – 30 mins
Plateau	2 – 4 hrs	3 – 6 hrs
Coming Down	1 – 3 hrs	3 – 5 hrs
After Effects	2 – 5 hrs	2 – 5 hrs
Day After	12 – 72 hrs	12 – 72 hrs

HARM REDUCTION GUIDANCE

- Taking a sedative like a benzodiazepine (Xanax), benadryl, and CBD can help reduce anxiety and calm you down
- Don't make major life changes for at least a week after your trip, even if you feel like you need to right now. Psychedelics can lead to profound changes in how we live our lives, yet those changes should be enacted slowly and thoughtfully to avoid any regret or mistakes.
- If you're feeling completely overwhelmed, putting your body in a supportive posture can help ride it out. This can mean putting your head on your knees while lying down, spreading out like a starfish, or curling up into a ball.
- **Antidepressant and other mental health medications severely impact psychedelics. SSRIs like Zoloft and other antidepressants can cause serotonin syndrome, a potentially lethal condition due to too much serotonin stuck in the brain. Antipsychotics like Seroquel can completely block psychedelics.** Discuss with your prescriber if pausing your medication to consume psychedelics is right for you and your goals.
- Having fidget toys, calming activities or a quiet space to go to can help manage anxiety while on psychedelics
- Drink water even if you don't feel thirsty, psychedelics alter hunger and thirst, especially when dancing!
- Setup things to do, but don't worry about having a strict schedule or plan, leave yourself flexibility to do whatever feels best in the moment

POPPERS

Amyl-Nitrites, Poppers or the brand Rush is a inhalant drug commonly used during sex to relax muscles and give a rush. The popper high is short and intense. Poppers are a liquid stored in a bottle that is held under the nostrils and inhaled. Poppers are very safe and their biggest risk from long term use is vision damage.

POSITIVE EFFECTS

Muscle relaxation, euphoria. Libido, music appreciation, tactile enhancement.

NEUTRAL EFFECTS

Feelings of blood rushing to the brain and a sensation of heat throughout one's body. Time distortion. Increased heart rate. Disinhibition.

NEGATIVE EFFECTS

Headaches. Vertigo, the spins. Decreased blood pressure. Thought loops.

DOSE

To dose poppers, uncap bottle and hold under your nose and gently inhale, alternating nostrils. Effects will come on

quickly. Be very careful not to spill the liquid as it will burn skin. **Never swallow or drink poppers as this is fatal**. It's hard to overdose while inhaling poppers this way, the most common injury from poppers is spilling the liquid on your skin or face. Many people develop a headache after 2-4 inhalations, which is a good indicator to pause.

Poppers Duration	**Inhaled**
Total Duration	5 mins
Onset	15 secs
Coming Up	30 – 60 secs
Plateau	3 mins
Coming Down	2 mins
After Effects	10 mins

HARM REDUCTION GUIDANCE

- **Do not mix poppers with viagra/erectile medication, this can cause dangerously low blood pressure**
- Stop poppers if blood oxygen levels become lowered. Pale or blue skin or lips, or a headache identifies low oxygen levels. Seek medical attention if the subject does not recover.
- Pulse oximeters should not be used to monitor oxygen level when poppers are used. Oximeters estimate oxygenation and poppers skew the results towards a fixed number 85%, regardless of actual oxygenation.
- Avoid poppers which are known to contain isopropyl nitrite. **If any vision impairment is observed, stop using the poppers immediately, avoid that type of popper again.**
- Secure containers to prevent spills. Spilled poppers can cause exposure to higher concentrations than intended. **To avoid spills, transfer a small amount of poppers onto a piece of absorbent cotton or paper in an empty poppers bottle, ensuring that the bottle contains no free liquid. The poppers will evaporate from the absorbent material and can be used as usual.**
- Poppers pose extra risks for pregnant people and people who have heart problems, abnormal blood pressure, a history of cerebral hemorrhaging, or anemia.
- Since both poppers and stimulants (like amphetamine or cocaine) increase heart rate, mixing them can increase the risk of overheating or heart and blood pressure related issues.

METH

Methamphetamine or Meth, Speed, Crystal, Crank, Tweak, Yaba, Glass, Sisa, Desoxyn, or Tina, is a stimulant drug. Meth is often snorted, injected and smoked. Meth is directly toxic to the brain's dopamine system and wears on a variety of the body's vital organs.

POSITIVE EFFECTS

Increased energy and alertness, decreased desire for sleep. Sociability, euphoria, increased sexuality.

NEUTRAL EFFECTS

Excessive talking, decreased appetite, weight loss, sweating

NEGATIVE EFFECTS

Poor sleep. Tightened jaw muscles, grinding teeth. Loss of appetite. **Visual & auditory hallucinations, hearing voices**. Reduced enjoyment of eating, loss of interest in sex over time. Itching, welts, nausea, vomiting, diarrhea, dry mouth. Serious tooth decay with chronic use. Hyperactivity, shortness of breath, anxiousness & paranoia. Irritability, aggressive behavior, severe depression, suicidal tendencies. Involuntary body movements, false sense of confidence and power

LONG TERM EFFECTS

Fatal kidney and lung disorders, possible brain damage, permanent psychological problems. Lowered resistance to illnesses. Liver damage, stroke, cardiovascular crises, chest pains, heart attacks.

DOSE

Street meth dosages vary by how pure the drug is, by individual tolerance based on past usage, how frequently it is used, and by differences in individual reaction. Dosages for pure meth for an infrequent user is anywhere between 10 - 50mg across different ways of taking meth.

Meth Duration	**Oral**	**Intranasal**	**Smoked**	**IV Injection**
Onset	20 – 70 mins	5 – 10 mins	0 – 2 mins	0 – 2 mins
Plateau	3 -5 hrs	2 – 4 hrs	1 – 3 hrs	4 – 8 hrs
Coming Down	2 – 6 hrs	2 – 6 hrs	2 – 4 hrs	2 – 4 hrs
After Effects	up to 24 hrs	up to 24 hrs	up to 24 hrs	up to 24 hrs

HARM REDUCTION GUIDANCE

- **Methamphetamine without harm reduction is extremely dangerous**
- Toxicity to the brain's dopamine system occurs with high (or repeated) methamphetamine use
- Long term methamphetamine use is directly toxic to the brain and tends to cause paranoia and other psychotic symptoms
- Dental decay (aka meth mouth) occurs independent of how much dental care happens
- **Make sure you sleep between using sessions. Staying up and avoiding sleep can rapidly lead to delusions, psychosis and overdosing.**
- MAO inhibitors and CYP450-2D6 inhibitors (grapefruit) can increase the effects of methamphetamine and can dangerously inhibit the metabolism of all amphetamines. Some prescription pharmaceuticals are known for producing this effect and new users or users combining herbs, smart drugs, prescriptions, or psychoactive chemicals should be extremely careful of possible interactions.
- Meth can cause dependency if used frequently and can cause dangerous withdrawals if stopped suddenly. If stopping meth use after a long period, seek medical support to avoid the worst consequences of withdrawal like psychosis and paranoid delusions
- Do not share pipes or using supplies to prevent transmitting bacteria or diseases between users

PRESCRIPTION STIMULANTS

Prescription stimulants aka ADD medication, uppers, speed, amphetamine salts, etc. are stimulant drugs. Often used by students and workers, these drugs are usually swallowed or snorted. These drugs vary from amphetamine salts (Adderall, Vyvanse) to methylphenidate (Ritalin, Concerta). **In order for some of the formulations to be used recreationally, users must process the pills to remove time release mechanisms.**

POSITIVE EFFECTS

Alertness, motivation, increased sociability. Sense of well-being, euphoria, increased sex drive.

NEUTRAL EFFECTS

Reduced appetite, dilated pupils, flushing, loss of coordination, restlessness.

NEGATIVE EFFECTS

Aggressiveness, paranoia. Dry mouth, headache. Increased heart rate, breathing rate and blood pressure, irregular heartbeat. Fever and sweating. Diarrhea or constipation. Blurred vision, impaired speech, dizziness, uncontrollable movements, insomnia, numbness. Inability to achieve erection. With chronic use: dry, itchy skin, acne, sores, paleness. Psychosis.

DOSE

Stimulant Dose	Amphetamine (Instant Release)	Methylphenidate (Instant Release)
Therapeutic	5 – 10 mg	5 – 20 mg
Moderate	10 – 20 mg	15 – 40 mg
Strong	20 – 30 mg	35 – 60 mg
Dangerous	More than 30mg	More than 60mg

Prescription stimulants are usually swallowed or snorted. If snorting, some formulation will require processing to be snorted. Extended release formulations will have to be crushed and in some cases this makes the result very unpleasant to snort, but can intensify the oral effects. For example, extended release Adderall often uses beads that must be individually crushed up. The effects of snorting will be stronger than equal oral doses, but last for a shorter period. Take orally with food for the smoothest ride.

Duration (Oral)	Amphetamine (Instant Release)	Methylphenidate (Instant Release)
Total Duration	4 – 6 hrs	3 - 4 hrs
Onset	30 – 90 mins	30 – 90 mins
Plateau	1.5 – 2 hrs	1 – 3 hrs
Coming Down	1 hr	1 hr
After Effects	1 – 4 hrs	1 – 4 hrs

HARM REDUCTION GUIDANCE

- Acidic beverages like juice and vitamin C supplements can shorten the duration of amphetamines. Conversely basic food and drugs that reduce stomach acid like Omepraloze can increase the duration of amphetamines
- **When combined with MAOIs (commonly prescribed antidepressants), amphetamines can cause "serotonin syndrome" with fever, hypertension, arrhythmias and death**
- Some antidepressants, such as venlafaxine (Effexor), also inhibit the reuptake of noradrenaline, which can cause feelings of agitation and panic attacks when combined with methylphenidate
- Be careful drinking alcohol while using stimulants, as they can mask the sedative effects of alcohol and make it easier to black out or consume lethal amounts of alcohol
- **Stimulants can make it easy to ignore dehydration and exhaustion, make sure to take breaks from activities like dancing and drink water**
- Stimulants can prevent sleep, prioritize sleep to prevent the worst negative side effects
- Having a task or project to do can help have a more productive and enjoyable trip
- Use gum, a pacifier or other squishy object to help manage jaw clenching and grinding
- Stimulant drugs can cause dependency if used frequently and cause dangerous withdrawals if stopped suddenly

OPIOIDS

Opioids are a group of drugs derived from the poppy plant, including natural, semi-synthetic and synthetic formulations. Often prescribed for pain, opioids are one of the most commonly used drugs medically and recreationally. Due to fentanyl contaminating many street sources for opioids, the actual strength of a given drug can vary wildly even between doses even within the same bag. Opioid overdoses are common and lethal but reversible using naloxone (Narcan).

POSITIVE EFFECTS

Pain relief, reduced anxiety, relaxation, talkativeness. Warm sensations, euphoria.

NEUTRAL EFFECTS

Itchiness, constricted pupils, sedation.

NEGATIVE EFFECTS

Forgetfulness. Nausea and vomiting. Constipation. Dizziness and blackouts. Withdrawal is common with frequent use. Withdrawal can include shaking, body aches, cold.

DOSE

Opioid dosage varies depending on type. Opioids like Tramadol are dosed much higher compared to Morphine because of differences in potency. In order to properly dose opioids, they have to be looked up individually. Many opioids sold on the street are variously cut or contaminated with other drugs, making dosing difficult. **Do not use opioids alone, especially untested bags. Overdosing alone will kill you and is easy to do by accident.** Grapefruit and DXM (Cough medicine) will potentiate opioids, reduce your dose to prevent an overdose while using cough medicine or eating grapefruit

To combat fentanyl in your supply, mix your bag thoroughly before dosing. Fentanyl likes to stick to itself, creating a "chocolate chip" effect where one dose can have little or no fentanyl while a subsequent dose can be very high in fentanyl. If possible, mixing your entire supply in sterile water can equalize the dosage. **Be careful dosing after a long period without using opioids (like a hospital stay, jail time, vacation, etc.), returning users can accidentally overdose due to a new lower tolerance.**

DURATION

The duration of opioids varies between different types, although most last a few hours at least. Look up your specific opioid to get an idea of how long it will last. Opioid duration varies wildly depending on how it's taken. Swallowing your opioid will last longer and we be less powerful, while injecting or boofing will be more powerful and shorter.

HARM REDUCTION GUIDANCE

- **Always have naloxone (narcan) around when using opioids.**
- **Do not mix opioids with other downers like alcohol, sleeping pills, and benzodiazapines, this can cause a fatal overdose. Opioids are dangerous to combine with other drugs.**
- When using regularly, take a laxative and stool softener to prevent painful constipation
- Stimulant drugs can mask the sedative effects of opioids and increase risk for an overdose
- When using opioids in a group, stagger everyone's dosage so if someone overdoses someone else can treat them with naloxone
- Give yourself time between doses to fully feel the effects, redosing too early can cause an overdose
- Don't share needles, this rapidly increases your chance for HIV and other serious infections. Local needle exchanges are a great resource and bulk needles can be ordered online.
- Don't lock doors in case of overdose. Always carry naloxone) if you can. If you're trying out new dope, shoot with a friend or if in an establishment, tell someone outside the bathroom you feel sick from the flu and to check on you in 10 minutes in case it is stronger than you expect and you O.D.

OTHER DRUGS

There are many other commonly used drugs in the world and many more being discovered or manufactured every day. Always approach a novel drug slowly and do a little research to keep yourself safe. Here is a brief intro to a few of the more popular drugs we didn't cover already.

BENADRYL – DPH

Benadryl or DPH is an anti-allergy drug that results in hallucinations at high doses (above 200mg). Users often report the experience to be wildly unpleasant, scary and disorienting. In the long term, DPH causes memory issues and psychosis and increases the chance for dementia. DPH in therapeutic doses (25 – 75 mg) is a safe drug to occasionally treat itchiness, nausea, insomnia and anxiety.

INHALANTS – DUST-OFF, FREEON, ETC.

Inhalants like dust-off, freeon, hair spray and spray paint can be inhaled for a short high. Inhalants are often incredibly toxic to the brain and lungs. **Inhalants can paralyze your throat and cause you to suffocate to death, even on a first time use. There is no such thing as safe use** of most volatile solvents, aerosols or other street inhalants and their psychoactive effects may be inseparable from nerve and organ damage.

COUGH SYRUP – DXM

Cough syrup/DXM is dissociative drug that also potentiates many other drugs like opioids. DXM is sold combined with acetaminophen and other cold medicine, **do not try to use mixed cold medicine to trip, high doses of acetaminophen (Tylenol) are fatal and painful**. High doses cause hallucinations and vomiting. Frequent use can cause brain damage. **Some medications like Wellbutrin potentiate DXM, a therapeutic dose can cause tripping, check interactions if you are on any medications.**

NICOTINE – CIGARETTES, VAPES, ETC.

Nicotine is the main psychoactive in cigarettes and vapes. **Disposable nicotine vapes contain much more nicotine than cigarettes, lozenges or cigars. Nicotine is highly addictive in all forms especially at high doses.**

KAVA

Kava is a tropical shrub. Its thick roots are ground and made into a cold beverage used similarly to alcohol. It has a long history of ritual and recreational use in Pacific Polynesia. Kava can be obtained as an extraction or brewed naturally in some kava bars. Kava places strain on the liver similar to alcohol and can cause serious damage if consumed frequently and in high doses.

SALVIA DIVINORUM

Sometimes sold in smoke shops, salvia is a potent hallucinogen that is either smoked or eaten. When smoked, salvia causes complete bodily dissociation and vivid complete hallucinations. Make sure you're seated when smoking salvia. When prepared as a drink the effects are milder and longer.

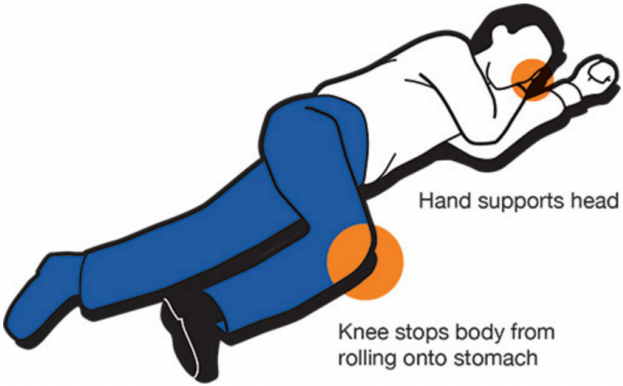
RESEARCH CHEMICALS/DESIGNER DRUGS

New drugs have been synthesized in laboratories in the last hundred years. Every year new chemicals are created to skirt legal enforcement, develop new medications and create more enjoyable or cheaper to produce drugs. These new drugs are often called research chemicals or designer drugs. The effects of these drugs are undocumented and based on comparison to a different drug they are emulating/chemically related to. Research chemicals include 25i and 2C-B and are often sold as "spice" or "bath salts".

Many powdered/crystal drugs sold today as LSD, MDMA, Ketamine and Cocaine are actually research chemicals. Often closely chemically related to the drug they're sold as, their effects can be similar. However, we have little to no documentation or study on their effects. Research chemicals are often limited to anonymous online testimonies of their effects. If you decide to take novel designer drugs, knowyou're taking a risk with no way to examine how the drug might affect you in the long or short term. **When trying a new research chemical, start low and slow, keep friends around who know what you're using.**

The Recovery Position

Keep the Airway Clear



Stay with person. If you must leave them alone at any point, or if they are unconscious, put them in this position to keep airway clear and prevent choking.

Read "A Radical Guide To Safer Drug Use 2" Online:

Read "Beyond Narcan: Holistic Harm Reduction" Online: