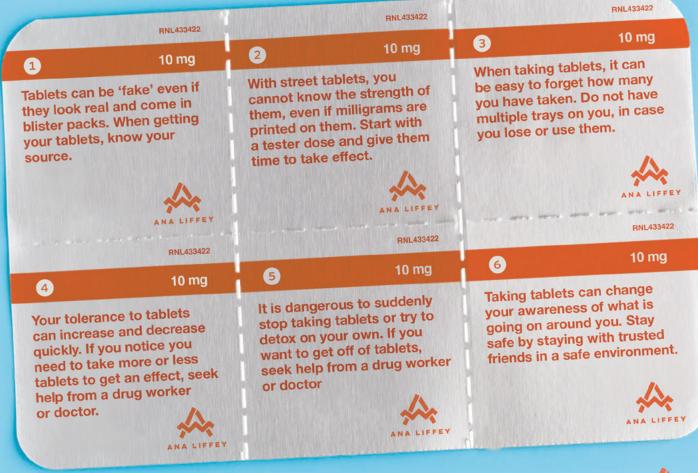
DO YOU USE STREET TABLETS?

This factsheet is part of the Ana Liffey Drug Project's 'Do you use street tablets?' campaign.

It is aimed at people who use street tablets and those who provide drug, or other support services, to people who use street tablets. It has been produced with the support of North Inner City Drug and Alcohol Task Force and is aimed in particular at Dublin's North Inner City.





WHAT ARE'STREET TABLETS'?

'Street tablets' is a generic term used to describe drugs that come in either tablet or capsule form. Street tablets can be thought of as any tablets or capsules which are not obtained directly by the individual through a doctor / pharmacist.

If you're working with someone around their tablet use, it's important to know if any of the tablets a person is using are street tablets, as there is no way of guaranteeing what the drug in a street tablet is, or how much of the drug is present simply by looking at it.

It's important for people struggling with their tablet use to know their source. It could be that the tablets are:

- genuine prescription tablets which are prescribed to them
- genuine prescription tablets which are acquired from a person who is prescribed them and are now on the black market
- 'fake' or counterfeit tablets which are not genuine prescription tablets. In particular, there are reports or organised crime gangs obtaining benzodiazepines and 'Z-drugs' in powder form, which is then tableted or 'pressed' before being sold on. Some counterfeit tablets which are circulating on the black market in Dublin North Inner City at present are Tranax (Nikes, blue), Benzo 'sticks' or so-called 'Xanax'.
- any combination of the above

Tablets or capsules are used as an oral delivery mechanism for many different drugs to treat many different ailments. They can also be misused - that is, used in a manner that is inconsistent with how they would typically be prescribed by a medical professional.

In Ireland, drugs which are commonly misused in tablet form are:

- Benzodiazepines
- Z-drugs (Z-hypnotics)
- Pregabalin

WHAT ARE BENZODIAZEPINES, Z-DRUGS AND PREGABALIN?

Benzodiazepines

Benzodiazepines are a group of central nervous system (CNS) depressants which induce feelings of calm (anxiolysis), drowsiness and sleep. They are widely used in medicine for the treatment of anxiety (anxiolytics) and insomnia (sedative/hypnotics), as well as other psychological conditions such as panic attacks and panic disorders.

Benzodiazepines come in tablets, capsules, injectable and suppository form. In tablet form, counterfeit benzodiazepines can look very similar to the prescribed ones and often have a brand name stamped onto them, increasing their appearance of authenticity. Recently in Ireland, counterfeit tablets have had the following appearance:

- had the 'Nike' logo on them, or
- have been blue and peach in colour, or
- have been sold in blister packs

While benzodiazepines can relieve stress, anxiety and tension and can make you calmer and more relaxed, they can also cause you to become drowsy, forgetful and confused, which can lead to accidents.

Remember that 'benzodiazepines' refers to a class of drug, not a single drug. There are many different benzodiazepines, and the time it takes for the drug to take effect and how long the effects of the drug will last can vary widely. Always try to learn about the particular drug the person is taking, and not just benzodiazepines generally.

Benzodiazepines are not recommended for long term use. People can develop tolerance and dependence quickly with continuous use, and the drugs rapidly lose their efficacy, and are no longer effective in inducing sleep or controlling anxiety.

People taking benzodiazepines should not stop taking the drug suddenly, and should seek medical advice, because of the risk of benzodiazepine withdrawal syndrome. Benzodiazepine withdrawal syndrome may develop at any time up to three weeks after stopping a long-acting benzodiazepine, but may occur within a day in the case of short-acting agents. It is characterised by insomnia, anxiety, loss of appetite and of body-weight, tremor, perspiration, tinnitus and perceptual disturbances; there is also a risk of convulsions ('benzo fits'). Some symptoms may be similar to the original complaint and encourage further prescribing; some symptoms may continue for weeks or months after stopping benzodiazepines. The risk of withdrawal symptoms is greater with the short-acting benzodiazepines.

Z-drugs

Z-drugs are the non-benzodiazepine hypnotics such as zolpidem, zopiclone and zaleplon. While they differ structurally from benzodiazepines, they have similar pharmacological properties. Z-drugs were developed with the intention of overcoming some of the disadvantages of benzodiazepines in therapeutic contexts, such as next day sedation, dependence and withdrawal.

Like benzodiazepines, Z-drugs have hypnotic qualities and are used as a front line treatment for insomnia. They can also have side effects including psychomotor impairment and increased risk of motor vehicle accidents and falls, impairment in judgement and dexterity, forgetfulness, confusion, irritability, as well as paradoxical effects such as aggression and disinhibition.

As with benzodiazepines, the Z-drugs are not all the same – take the time to learn about the particular drug the person is taking, and not just z-drugs generally. Tolerance can also develop rapidly with Z-drugs, and efficacy diminishes with prolonged use.

People taking z-drugs can also experience withdrawal symptoms if they stop suddenly, ranging from mild dysphoria and insomnia to a withdrawal syndrome that may include abdominal and muscle cramps, vomiting, sweating, tremors, and convulsions.

• Pregabalin

Pregabalin is a prescription drug used to manage a number of long-term conditions including epilepsy, neuropathic pain and generalised anxiety disorder. Pregabalin has anxiolytic (relaxing) effects, but as with benzodiazepines and z-drugs, it can also have unwanted side effects, including dizziness and confusion, mood changes and swelling in the hands or feet. As with z-drugs and benzodiazepines, people should avoid sudden discontinuation of Pregabalin, and should seek medical advice.

Pregabalin typically comes in tablet form, in 25 mg, 50 mg, 75mg, 100mg, 150mg, 200mg and 300mg hard capsules. Colour varies depending on manufacturers.

ADMINISTRATION

Tablets are usually swallowed, but there are some reports of other forms of use such as crushing and snorting, or crushing for injection. These forms of administration can result in risks that are not present when tablets are swallowed. For example, injecting tablets carries injecting related risks such as vein damage, skin infections, circulation problems and transmission of blood borne viruses. Snorting tablets carries risks like damage to nose tissue, respiratory problems and transmission of blood borne viruses.

OVERDOSE AND DRUG RELATED DEATHS

Benzodiazepines, z-drugs and pregabalin are all CNS depressants. CNS depressants work by affecting neurotransmitters in your brain, causing brain activity to slow. In turn, your heart beats slower and your breathing becomes shallow. Signs of a CNS depressant overdose include slurred or slowed speech, shallow breathing, drowsiness, loss of consciousness and cyanosis (bluing of the lips, indicating poor oxygen circulation). CNS depressant overdoses can result in respiratory arrest and death. Specific responses to CNS depressant overdoses depend on the drug that has been taken – for example, naloxone can be administered for an opioid overdose, or flumazenil in a benzodiazepine overdose. However, in all circumstances, there are practical steps which can be taken in dealing with an overdose. If a person is unresponsive and you think they may be experiencing an overdose, you should:

- Check the person's airways are clear and put them into the recovery position
- Contact the emergency services
- Assess the person every couple of minutes while you are waiting for the emergency services to arrive. This involves:
 - Making sure their AIRWAYS are clear. Are you confident there is nothing blocking their airways?
 - Monitoring their BREATHING. Is their breathing very shallow or laboured?
 - Assessing their CIRCULATION. Are their lips turning blue?
- If, at any time, the person stops breathing, or appears to be breathing very irregularly, commence CPR.
- Try to gather as much information that will be useful to the emergency services when they arrive, such as:
 - What has the person taken? How much did they take, and when?
 - O Does the person have any known allergies?
 - Is the person on any prescribed medication?

Fatal overdoses from taking a single type of benzodiazepine, or a single type of z- drug or Pregabalin by itself do occur, but they are infrequent. However, all three types of drugs pose significant risk when used with other drugs in the context of polydrug use. Using different CNS depressants at the same time can have additive effects and polydrug use is a significant risk factor for fatal overdose. For example, almost two thirds of poisoning deaths in Ireland in 2015 involved polydrugs. Benzodiazepines were most commonly implicated in polydrug deaths, and pregabalin-related deaths increased by 69% from 26 in 2014 to 44 in 2015. Hence, street tablets should not be combined with each other, or with other CNS depressants like alcohol or heroin.

OTHERHEALTHRISKS

Aside from overdose, dependence can be a significant risk in people using tablets for extended periods. Broadly speaking, dependence can be understood as a cluster of physiological, behavioural and cognitive phenomena in which the use of a substance or class of substances takes a much higher priority for the person than other behaviours that once had greater value.

Prolonged use of benzodiazepines, z-drugs or pregablin can result in dependence. For benzodiazepine and z-drug classes, dependence is thought to be more of a risk with short acting formulations. Dependence can present in a number of ways, including:

- The person "needs" the drug to carry out normal day-to-day activities
- With a prescribed medication, the person continues to take the drug even though the original indication for the prescription is no longer relevant
- The person has difficulty in reducing the dosage due to withdrawal symptoms

As noted previously, there are significant risks associated with sudden cessation of benzodiazepine use in particular. If someone taking street tablets wants to stop, they should seek medical advice first.

Overdose and dependence are just two of the health risks associated with tablet use. People using tablets also report issues like blackouts or forgetfulness arising from tablet use as well as the risk of injury from losing your balance while affected. As with all drugs, advice should be sought from a medical professional around each person's own particular circumstances, especially with regard to tablet use and any comorbid physical and mental health issues.

PREVALENCEAND TRENDS

The latest (2014/2015) national prevalence dataset does not provide separate analysis for benzodiazepines, z-drugs and pregabalin. However, treatment admission data indicates that there has been a large increase in people seeking treatment for benzodiazepine use over the last decade with, 873 individuals entering treatment in 2015 compared to 98 in 2006. Figures in relation to drug related deaths can also give some insight into the increasing prevalence of problematic tablet use in recent years. As previously noted, pregabalin-related deaths increased by almost 70% from 26 deaths in 2014 to 44 in 2015. Also in 2015, zopiclone was implicated in 62 drug related deaths, up from 7 in 2006, but down from a high of 73 deaths in 2014. Diazepam is implicated in the most deaths of any benzodiazepine – 101 in 2015. The second most implicated benzodiazepine was flurazepam, which was present in 33 deaths in 2015.

REDUCETHE HARMS

It is always safest not to take unknown or illicit drugs at all. However, if you do decide to use street tablets, remember to reduce the potential harms:

Know as much as you can about the drug.

While you can't know for sure what's in street tablets, it makes sense to get as much knowledge as you can if you're going to use. Useful things to know include:

- What drug do you think is in the tablet? Drugs often found in tablet form are benzodiazepines, z-drugs and drugs for neuropathic pain, like gabapentin. They all affect you differently, so take some time to learn about the different drugs and their effects.
- How much of the drug is in the tablet? Drugs in tablet form often come in different strengths.

• Think before you buy.

If possible, know your source. Even if you know the person well, remember that you can never be fully sure of the contents of illicit drugs. There is always a risk of adulterants in street drugs, and there is never a guarantee that you are buying what you think you are buying. Remember that tablets that come in blister packs and look legitimate can also be fakes. Also, there is no guarantee that all tablets from the same batch are the same – drugs from the same batch can vary in strength and purity.

• Avoid using alone.

Always use with trusted friends and in a safe environment. Plan in advance when, where and who you intend to use with. There is no way of knowing how you will react to the drugs that are in street tablets, and you could react differently in an unfamiliar environment.

• Take a test dose first.

You don't know for sure what's in the tablets, and different drugs take different periods of time to take effect. Take a small dose first, and wait at least two hours before using again. This is much safer than using a lot in one go, and if you're having difficulty with your drug use, planning ahead like this will also help you manage your use.

Avoid bingeing.

Try to avoid going on binges – bingeing on tablets can be very dangerous, especially if you are using other drugs as well or if you are using a lot of tablets and stop suddenly. Take some time to plan your use, especially around times when the risk of bingeing may be higher.

Don't stop suddenly.

If you find yourself using frequently, don't stop suddenly – seek help instead. Stopping tablet use suddenly can lead to other health consequences, so reach out and seek help from a health professional who can advise further.

• Think about your health.

Mind yourself. Remember that drugs affect your body and your health. Learn about these affects before you use and make sure you can minimise any harm. If you're using street tablets, remember to:

- Be aware of possible side effects, especially memory loss and loss of balance.
- Stay well hydrated, and try to make sure you are eating a good diet
- Only use one drug at a time and never mix drugs
- Avoid injecting or snorting tablets

If you are crushing and snorting tablets, remember to:

- Place tooter high up nostril
- Use your own tooter
- Bank notes are likely dirty; safer to use rolled up cardboard/clean straw cut in half
- Alternate nostrils

If you are injecting crushed tablets, remember to:

- Use a filter
- Use your own injecting equipment
- Start low and go slow
- Sterile water and, if possibly, no citric

Finally, if you are using street tablets, remember to seek help.

Using street tablets can be dangerous. It's important to talk to someone who can give you support, even if you don't feel ready to stop using - that's ok, the important thing is to reach out and get connected with people who can help you with your drug use or any other issues you are facing in your life.

DO YOU NEED SUPPORT WITH YOUR TABLET USE?

Talk to us. Freephone **ANA LIFFEY ON**

1800786828 to get in contact with our staff who will work with you to help you.

There are lots of other drug support services in the North Inner City who can help. You can find a list of them and how to get in contact with them here **WWW.NICDTF.IE**. You can also call the **NORTH INNER CITY DRUG AND ALCOHOL TASK FORCE** for this information on **01 8366592**.