



Crystal Methamphetamine
*Trusted, evidence-based
information for the community*

 Cracks in the ice

 @cracksintheice

CRACKS IN THE ICE

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*Trusted, evidence-based
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www.cracksintheice.org.au

PRESENTATION OVERVIEW

1. What is ice?
2. Why do people use ice?
3. How does ice work?
4. Families and Friends: How can I support a loved one?
5. Resources for Health Professionals: Do's and Don'ts
6. Schools: Tools for Parents
7. When and where do I get help?
8. What type of help is available?



WHAT IS ICE?

- Ice, also known as Crystal Methamphetamine.
- Methamphetamine typically comes in three main forms – ice, base and speed.
- Ice is the most potent and pure form of methamphetamine.

WHAT IS ICE?

ICE	BASE	SPEED
		
APPEARANCE	APPEARANCE	APPEARANCE
Translucent crystals, sometimes shards.	Dampish, 'gluggy' substance. Colour varies from white to brown.	White or off-white powder.
ALSO KNOWN AS	ALSO KNOWN AS	ALSO KNOWN AS
Crystal meth, meth, shabu, tina, glass.	Pure, point, wax, meth.	Goey, meth.
METHOD	METHOD	METHOD
Smoking (e.g. with a glass pipe), injecting.	Swallowing, injecting.	Snorting, swallowing, injecting.
POTENCY: HIGH	POTENCY: Medium High	POTENCY: Low Medium

WHY DO PEOPLE USE ICE?

Common reasons for ice use include:

- To fit in/feel part of a social group
- To reduce inhibitions and increase confidence
- Out of curiosity or to experiment
- To manage mental health issues and the impacts of trauma
- To cope with problems (e.g. unemployment, stress)
- To escape reality
- Out of boredom
- To enhance work performance
- To enhance sexual experiences and intimacy

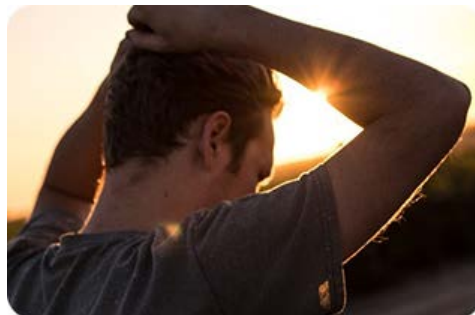


Although many people report that they use ice to feel more confident or lift their mood, in reality taking methamphetamines like ice often increases nervousness, agitation, and can trigger anxiety attacks.

[WHY DO PEOPLE USE ICE?](#)

HOW DOES ICE WORK?

- Ice triggers the release of two brain chemicals (or neurotransmitters): dopamine and noradrenaline.
- These chemicals are responsible for making us feel excited, alert and euphoric.
- However, consistent and heavy use of ice can deplete these chemicals.
- Prolonged use of ice can also damage or destroy the receptors for these chemicals in the brain.



[HOW DOES ICE WORK?](#)

PHYSICAL EFFECTS

The physical effects of ice can last between 4 and 12 hours, although it can take 1 to 2 days for ice to entirely leave the body.

Using methamphetamines can also increase mortality risk related to overdose, natural diseases, suicide and accidental injury.

SHORT TERM

- Headaches and dizziness
- Dilated (enlarged) pupils and blurred vision
- Dry mouth
- Jaw clenching, teeth grinding
- Insomnia
- Increased attention, alertness and talkativeness

- Trembling
- Sweaty, cold and clammy skin
- Increased breathing and body temperature
- Increased heart rate and blood pressure
- Reduced appetite
- Stomach cramps, nausea and vomiting
- Dehydration
- Aggressive behaviour
- Increased energy
- Changes in libido

LONG TERM

- Stroke
- Dental problems: increased tooth sensitivity, cracked teeth and cavities, gum disease
- **Dependence**
- Poor concentration and memory

- Increased risk of hepatitis C and **HIV** in injecting users
- Heart and lung problems, chest pains
- Kidney problems, including kidney failure
- **Malnutrition** and weight loss
- Exhaustion
- Movement problems

COME DOWN AND WITHDRAWAL SIDE-EFFECTS

THE COMEDOWN PHASE is experienced when ice starts to wear off.

- Feeling down or depressed
- Decreased appetite
- Exhaustion
- Increased need for sleep
- Irritability
- Feeling anxious.

WITHDRAWAL refer to unpleasant symptoms experienced by people who are dependent on ice:

- Headaches
- Anxiety
- Aggression
- Restlessness
- Cramps
- Vomiting.

MENTAL HEALTH EFFECTS

SHORT-TERM EFFECTS

Aggression, irritability, mood swings

Insomnia

Substance-induced psychosis

A "comedown"

Anxiety and panic attacks

Feelings of euphoria (a high)

LONG-TERM EFFECTS

Dependence on ice

Anxiety

Poor memory

Paranoia

Depression

Psychosis

Damage to attention span



For some people, the symptoms experienced while using ice, or during the 'comedown' or 'crash' phase, persist and develop into mental disorders in their own right.

MENTAL HEALTH EFFECTS

MENTAL HEALTH EFFECTS

Below are common side effects of ice use, however, if these effects persist, a mental illness may be present.

SIGNS OF ANXIETY:

- Restlessness
- Trembling
- Dizziness
- Sweating
- Dry mouth
- Muscle aches
- Headaches
- Nausea
- Vomiting.

SIGNS OF DEPRESSION:

People who use the drug regularly can experience depressive symptoms when they are not using ice because it can deplete brain chemicals which are responsible for making us feel happy and excited.

SIGNS OF PSYCHOSIS:

- Feeling suspicious or paranoid
- Hallucinations
- Unusual thoughts
- Repetitive compulsive behaviour
- Muddled thoughts or incoherent speech.

WHAT HAPPENS WHEN YOU USE ICE WITH OTHER DRUGS?

Combining ice with other drugs carries extra risks and makes its use even more dangerous. The more drugs a person takes (or is affected by) at a time, the more chance there is of something going wrong.

COMBINING ICE AND STIMULANTS

E.G. ICE AND COCAINE



+



=

SEROTONIN SYNDROME
PSYCHOSIS
ANXIETY OR PANIC ATTACKS
HEART PROBLEMS

COMBINING ICE AND DEPRESSANTS

E.G. ICE AND ALCOHOL



+



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HEART PROBLEMS
RISK OF OVERDOSE
PSYCHOSIS

USING ICE WITH OTHER DRUGS

HOW CAN I SUPPORT A LOVED ONE?

I WANT TO START THE CONVERSATION – HOW CAN I RAISE THE ISSUE?



"A close friend I had made really helped me out millions. I came clean with everything to my family and friends and let them back into my life. I couldn't have done it without the right people around me."

HOW CAN I SUPPORT A LOVED ONE?

I WANT TO START THE CONVERSATION – HOW CAN I RAISE THE ISSUE?


Tips for starting a conversation about ice and other drugs:

- Gather information about ice.
- Have a clear idea of what it is that concerns you about ice.
- Arrange a suitable time to talk when you will have some privacy.
- Ask questions; don't make assumptions about their knowledge of ice.
- Don't tell them what to do and try not to be judgemental.
- Let them know you care about them.
- Be trustworthy and supportive so they know that they can rely on you in a time of need.

STARTING THE CONVERSATION

RESOURCES FOR HEALTH PROFESSIONALS

QUICK TIPS FOR MANAGING AND WORKING WITH CLIENTS

A blurred photograph of a hospital or emergency department setting. Several people, likely medical staff or security, are visible in the background, moving quickly. The image is out of focus, emphasizing the text overlay.

"This is just one story of many, which includes chairs and equipment being thrown across ED rooms, four to five police officers and four or five security guards; for one man under the influence of ice."

Example: DO'S AND DON'TS OF MANAGING ANGER AND AGGRESSION

RESOURCES FOR HEALTH PROFESSIONALS

DO'S AND DON'TS OF MANAGING ANGER AND AGGRESSION

The following signs may indicate that a client could potentially become aggressive or violent:

- Appearance
- Physical activity
- Mood
- Speech
- Worker's reaction.

Marel, C et al. (2016). *Guidelines on the management of co-occurring alcohol and other drug and mental health conditions in alcohol and other drug treatment settings (2nd edition)*. Available at: www.comorbidityguidelines.org.au

DO'S AND DON'TS OF MANAGING ANGER AND AGGRESSION

DO

- ✓ Stay calm and keep your emotions in check.
- ✓ Adopt a passive and non-threatening body posture (e.g. hands by your side with empty palms facing forward, body at a 45 degree angle to the aggressor).
- ✓ Let the client air his/her feelings and acknowledge them.
- ✓ Ask open-ended questions to keep a dialogue going.
- ✓ Be flexible, within reason.
- ✓ Use the space for self-protection (position yourself close to the exit, don't crowd the client).
- ✓ Structure the work environment to ensure safety (e.g. have safety mechanisms in place such as alarms and remove items that can be used as potential weapons).
- ✓ Make sure other clients are out of harm's way.

DON'T

- × Challenge or threaten the client by tone of voice, eyes or body language
- × Say things that will escalate the aggression.
- × Yell, even if the client is yelling at you.
- × Turn your back on the client.
- × Rush the client.
- × Argue with the client.
- × Stay around if the client doesn't calm down.
- × Ignore verbal threats or warnings of violence.
- × Tolerate violence or aggression.
- × Try to disarm a person with a weapon or battle it alone.

Marel, C et al. (2016). *Guidelines on the management of co-occurring alcohol and other drug and mental health conditions in alcohol and other drug treatment settings (2nd edition)*. Available at: www.comorbidityguidelines.org.au

TOOLS FOR PARENTS

I'M A PARENT – HOW CAN I REDUCE THE RISK OF ICE USE IN THE FAMILY?

A photograph showing a group of young people, likely students, looking down at something out of frame, possibly a screen or a document. The image is slightly blurred, focusing on the foreground.

"if we can offer support through teenage years, we can help... if we offer education on ice we can prevent its use."

[TOOLS FOR PARENTS](#)

TOOLS FOR PARENTS

I'M A PARENT – HOW CAN I REDUCE THE RISK OF ICE USE IN THE FAMILY?

1. BE A ROLE MODEL

- Avoid contradictions between what you tell them and what you do.
- Try to find fun ways to deal with problems that don't involve drugs.

2. BE INVOLVED IN THEIR LIVES

- Show an interest in their hobbies and activities.
- Spend time with your child regularly where you can give them your undivided attention.
- If they go out, ask them about where they are going and who they are going with.
- Restrict internet access to central areas in the house.
- If you pick your child up from school or after school activities, be open to inviting their friends to your house.
- Build a support network by getting to know your child's parents.

TOOLS FOR PARENTS

3. ESTABLISH AND MAINTAIN GOOD COMMUNICATION

- Encourage them to share their thoughts, feelings, and opinions.
- Try not to lecture them, it is important to listen to their thoughts and concerns and offer help and support.
- Try and make yourself somehow available most of the time.



WHEN AND WHERE DO I GET HELP?

The National Alcohol and Other Drug Hotline

- Free and confidential advice about alcohol and other drugs
- Support, information, counselling and referral to services
- 24 hour service
- Ph: 1800 250 015



FOR OTHER HELP OPTIONS VISIT [WHEN AND WHERE DO I GET HELP](#)

WHEN AND WHERE DO I GET HELP?

[Home » When and where do I get help?](#)

RELATED CONTENT

- Concerned about someone using ice?
- Starting the conversation
- How to protect yourself and others
- View more content

A number of services throughout Australia can provide information, support and treatment options for people who are experiencing problems with ice and other drugs. Although it can be difficult to seek help, in most cases the sooner you reach out for support, the better.

Your local doctor can be a good starting point – they can discuss your concerns with you and provide referrals to other services that you might need.

If you need **emergency support**, call **Lifeline** on **13 11 14** (a free and confidential 24-hour crisis helpline) or **dial '000'** for the police or an ambulance.

QUICK LINKS

- Download PDF
- Share Resource

Like 14
Tweet

WHAT TYPE OF HELP IS AVAILABLE?



DO I NEED HELP? CLICK HERE TO GET FEEDBACK ABOUT YOUR USE OF ICE

KEY SUPPORT SERVICES IN AUSTRALIA

WHAT TYPE OF HELP IS AVAILABLE?

Seeing a Psychologist

- Psychologists create a safe space for people to come and talk about things they might not feel comfortable talking about with families/friends.
- They can assist people who are trying to understand their thoughts and feelings, and help them to learn skills and techniques to manage these thoughts and feelings.

Outreach Support

- Outreach Support can be provided by a trained health professional who visits a person's home to help them complete daily activities and supports them in tasks such as securing safe housing and attending health check-ups.

Online Treatment Programs

- Online Treatment Programs can involve 'chatting' to a trained counsellor over the internet in real-time or by email, or a pre-programmed online "course" that is offered with or without support from a trained professional.

Residential Rehabilitation

- 'Rehab', 'detox' or 'withdrawal' clinics are places where people can stay for a few days or up to a few months at a time.

[TYPES OF HELP](#)

WANT MORE INFORMATION?

Visit the Cracks in the Ice community toolkit: www.cracksintheice.org.au for more information or to download a copy of the Cracks in the Ice companion booklet.

You can also keep updated by:



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