

Harm Reduction for crystal methamphetamine

What is harm reduction?

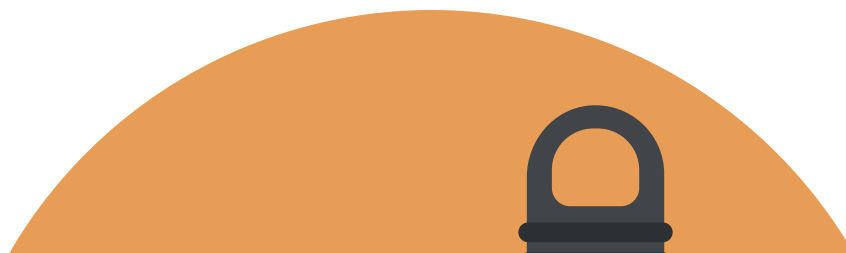
Harm reduction aims to reduce the risks and adverse effects associated with drug use. Using crystal methamphetamine ('Ice') carries a number of risks to both your physical and mental health. As it is an illicit drug, the manufacturing of crystal methamphetamine is unregulated and there is no way for you to know exactly what is in each batch or what other drugs may be mixed in, further increasing risks of unknown side effects. Risks can be associated with any level of methamphetamine use, even using small amounts may lead to serious effects, **dependence**, or overdose, but there are strategies you can use to reduce harm and look after your health. This factsheet has practical information on strategies that may help you or people you know, to stay as safe as possible while using ice.



Have someone with you that you trust, so you can both keep each other safe, including monitoring for signs of a bad reaction and calling for help if an overdose occurs. Ice may also make you feel anxious and/or **paranoid**, so having someone you can trust/feel safe with can help.

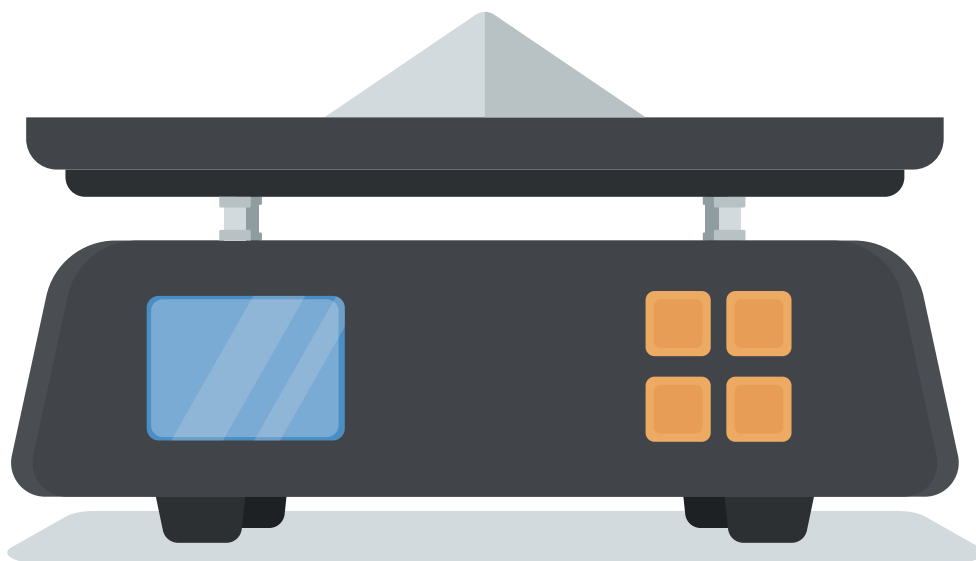


Alternatively, have the phone numbers of friends or family handy, or have contacts for your local generalised and specialist services (these may include GP/ED/health centres and AOD centres).

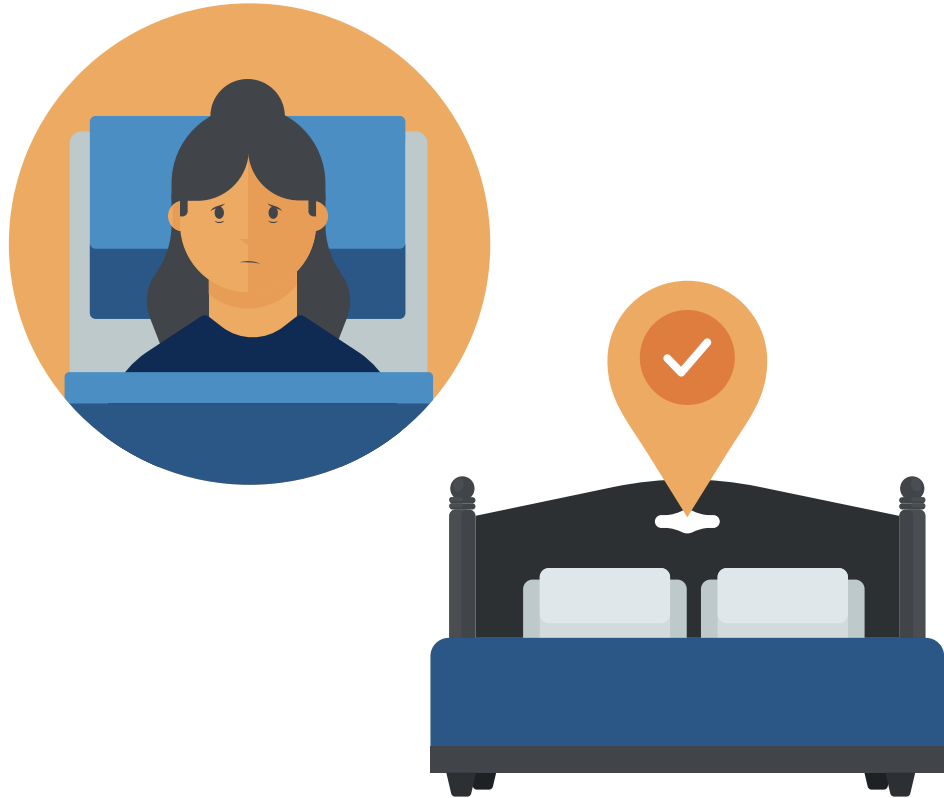




Ice can reduce your appetite, cause your body to overheat or become dehydrated, so try to eat before you use ice and keep water with you. Try to have a well-balanced diet and avoid relying on fast food. Look for are easy to eat, healthy foods if you are having trouble eating - like smoothies, yoghurt, pasta or soup.



Ice is the purest form of methamphetamine and is very **potent**. Especially with a new batch, start off using a small amount and wait a while before using more.



Ice can cause disrupted sleep patterns which may develop into insomnia-like sleep problems. If your body starts feeling tired, it may be time to rest and take a break. Having a good sleep routine as well as a safe, comfortable, and quiet place to rest may aid in trouble sleeping and/or restlessness.

Information on smoking and injecting

Injecting





Wash your hands and sterilise the injection site with an alcohol swab before injecting



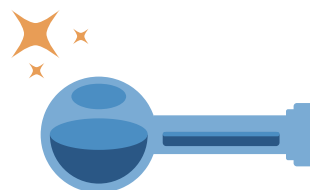
Always use clean equipment (needles, syringes) when injecting any drug, including ice



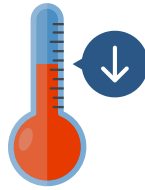
Check local/state governments websites for information on safe injecting rooms, as well your state or territory's Needle and Syringe Program website. Here you will find information about where you can get free sterile injecting equipment.

All Australian states and territories have an NSP in place, click on your state/territory for more information:

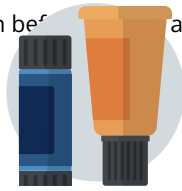
Smoking



Clean and use your own pipe, avoid sharing with others to minimise the risk of infections



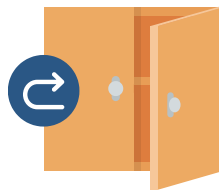
Let the pipe cool down before use to avoid burns and blisters



Use lip balm to prevent chapped lips as dry, cracked lips increase the risk of infections spreading



Smoking ice can dry out the saliva glands, stimulating bacteria growth as well as tooth and gum decay. Staying hydrated, chewing sugar-free gum and getting into a regular routine of brushing/flossing can help protect against this.



It can be easy to smoke too much, too quickly. Take breaks in between pipes and put away your pipe after smoking so you don't have too much.

Long Term and Short Term Risks

Nasal (Snorting)

SHORT TERM RISK

- Swelling on the inner lining of the nose
- Lung infection
- Nasal blockages
- Compromised respiratory tracts

LONG TERM RISK

- Chronic runny nose and/or bleeding
- Sinus infections
- Holes in the septum or on the roof of the mouth
- Losing your sense of smell
- Difficulty swallowing or speaking

Smoking

SHORT TERM RISK

- Chapped lips
- Mouth sores
- Inflammation of the gums

LONG TERM RISK

- Tooth decay
- Gum disease (which can lead to heart problems)

- Long term damage to throat and lungs
- Pulmonary injuries

Injecting

SHORT TERM RISK

- Damage of blood vessels due to chemicals used to make crystal methamphetamine
- Bruising around injection site
- Particle blockages in vital organs

LONG TERM RISK

- Scarring
- Shrinking and collapsing of veins
- Infection of heart and skin tissue
- Sharing needles puts individuals at a greater risk for:

Tips for cutting down

- Know that it is possible to reduce or stop using ice.
- Everyone is different, and it is ok to seek help from family and friends, or from health professionals.
- You are not alone; don't be afraid to talk to your GP or speak to a counsellor at a drug and alcohol clinic.
- The National Alcohol and Other Drug Hotline provides a 24/7 drug support hotline: 1800 250 015
- If you use ice regularly, you can experience **withdrawal** symptoms when you reduce your usage. These symptoms might include cravings, **anxiety**, low mood, low energy, and difficulty sleeping.
- Sometimes people feel worse before they feel better. It can take a while and quitting can sometimes take more than one try. There is support available to help you if you want to quit or cut down.

Key Sources

Cunningham, J. K., Liu, L.-M., & Muramoto, M. (2008). Methamphetamine suppression and route of administration: precursor regulation impacts on snorting, smoking, swallowing and injecting. *Addiction (Abingdon, England)*, 103(7), 1174-1186.

<https://doi.org/10.1111/j.1360-0443.2008.02208.x>

Hunter, C., Strike, C., Barnaby, L., Shepherd, S., & Hopkins, S. (2012). Reducing widespread pipe sharing and risky sex among crystal methamphetamine smokers in Toronto: Do safer smoking kits have a potential role to play? *Harm Reduction Journal*, 9, 9.

<https://doi.org/10.1186/1477-7517-9-9>

Imtiaz, S., Strike, C., Elton-Marshall, T., & Rehm, J. (2020). Safer smoking kits for methamphetamine consumption. *Addiction*, 115(6), 1189-1190.

<https://doi.org/10.1111/add.14914>

Insight Clinical Support Services. (2016). Meth Check: 'Ways to Stay Safe' Harm Reduction Booklet. Retrieved from

<https://insight.qld.edu.au/shop/meth-check-booklet>

Leslie, K. M. (2008). Harm reduction: An approach to reducing risky behaviours in adolescents. *Paediatric Child Health*, 13(1), 53-56.

<https://doi.org/10.1093/pch/13.1.53>

McKetin, R., Ross, J., Kelly, E., Lubman, D. I., & Mattick, R., (2008). Characteristics and harms associated with injecting versus smoking methamphetamine among methamphetamine treatment entrants. *Drug and Alcohol Review*, 27(3), 277-285.

<https://doi.org/10.1080/09595230801919486>

McKetin, R., Sutherland, R., Peacock, A., Farrell, M., & Degenhardt, L. (2021). Patterns of smoking and injecting methamphetamine and their association with health and social outcomes. *Drug and Alcohol Review*. <https://doi.org/10.1111/dar.13364>

National Center for Biotechnology Information (2021). PubChem Compound Summary for CID 10836, Methamphetamine. Retrieved from <https://pubchem.ncbi.nlm.nih.gov/compound/Methamphetamine>.

Rawson, R. A., Gonzales, R., Marinelli-Casey, P., & Ang, A. (2007, Jul-Aug). Methamphetamine dependence: A closer look at treatment response and clinical characteristics associated with route of **administration** in outpatient treatment. *American Journal on Addictions*, 16(4), 291-299.

<https://doi.org/10.1080/10550490701389864>

Rigoni, R., Woods, S., & Brecksema, J. J. (2019). From opiates to methamphetamine: building new harm reduction responses in Jakarta, Indonesia. *Harm Reduction Journal*, 16(1), 1-13. <https://doi.org/10.1186/s12954-019-0341-3>

Strang, Bearn, M., Farrell, E., & Finch, P. (1998). Route of drug use and its implications for drug effect, risk of dependence and health consequences. *Drug and Alcohol Review*, 17, 197-211.

Zorick, T., Nestor, L., Miotto, K., Sugar, C., Helleman, G., Scanlon, G., Rawson, R., & London, E. D. (2011). Withdrawal symptoms in abstinent methamphetamine-dependent subjects. *Addiction*, 105(10), 1809-1818. <https://doi.org/j.1360-0443.2010.03066.x>