

(INJECTING CONTINUED)

- Wash hands & the injection site with soap & water
- Wipe down the mixing up area with a swab
- Swab your injection site

Keep your OWN equipment for your OWN use and DONT SHARE.

Use only **NEW** syringes/needles, swabs, filters, and use sterile water if possible. Where it isn't possible to get *sterile* water, use filtered water or cooled down, boiled kettle water.

***Bottled water IS NOT STERILE.**

If available use a wheel filter for injecting pills. These can be bought at some NSPs for around \$2-\$3 each.

SNORTING

- Cut or crush pills as finely as possible
- Avoid sharing straws or 'pipes' for snorting
- Rinse your nostrils out with water or a saline solution before snorting

SWALLOWING

Use as per recommended on packaging if available.

CONTRAINDICATIONS - What **NOT** to use it with **TRAMADOL and SSRIs**- Many case reports exist of patients taking SSRIs or SNRIs who developed serotonin syndrome while taking concurrent tramadol. Reported cases involved combining tramadol with citalopram, fluoxetine, paroxetine, nefazodone, sertraline, and venlafaxine.

MORPHINE- should not be used by anyone with bronchial asthma

OVERDOSE INFO

Anyone who takes an opioid regularly should have NALOXONE on hand. It is available on prescription and reverses the effects of opioids in the event of an overdose. If you do not have naloxone, **CALL 000** immediately and initiate CPR. HRVic provides naloxone training and gives participants a free naloxone kit.

PLEASE NOTE:

Seek medical attention immediately if negative side effects are experienced.

SAFE DISPOSAL OF EQUIPMENT

Sharps from injecting equipment and glass tubes used for smoking should always be disposed of responsibly to avoid unnecessary accidents ie. breaks and cuts and needle prick risks. Where possible, use the yellow sharps disposal containers available from NSPs. If you don't have a proper yellow bin, put the used sharp or glass into a solid plastic or glass bottle/jar/container and put the lid on before returning to NSP or putting in a rubbish bin -if necessary.

MORE INFO

This resource is designed to give a brief overview and it is recommended that you do further research. The following websites may provide you with useful information.

www.hrvic.org.au/dancewize	www.bluelight.ru
www.erowid.org	www.dancesafe.org
www.bluebelly.org.au	www.tripproject.ca

This OPIOID resource is produced by DanceWize®, a program of Harm Reduction Victoria (HRVic)

www.hrvic.org.au



**KNOW YOUR MIND, KNOW YOUR BODY,
KNOW YOUR SUBSTANCE AND
KNOW YOUR LIMITS!**

This resource has been developed for party goers and people who are **already** using drugs.

The role of DanceWize is to provide factual, relevant and practical information to assist you to make informed choices about different drugs and to promote harm reduction, safer partying and safer drug use.

DESCRIPTION

Opioids are a class of medication that takes its name from the opium poppy, where opioids were originally derived. One of the main functions of opioids is to relieve pain and they have been the mainstay of analgesia for thousands of years. An opioid is a synthetic chemical, that works by binding to the opioid receptors in the central nervous system (brain and spinal cord). Our bodies produce their own natural opioids, called endorphins.

Opioids reduce the nerve transmission to the brain and reduce feelings of pain and affect those brain areas controlling emotion. They are used to treat moderate to severe pain.

DOSAGE TIPS

Taking drugs is never without risk. Mentioned doses are based on the information available to DanceWize© and we can not give any guarantee of safety as the effects can vary greatly from one person to another.

There are multiple forms of opioids used to treat pain. These include “weak” opioids which can be often combined with other medications such as paracetamol.

These include:

- **Codeine** - *ie. Panadeine, Nurofen Plus, Mersyndol, Dolased, Panafen Plus*
- **dihydrocodeine**- *ie. Paramol*
- **Tramadol**
- **oxycodone**- *ie. Endone, Percocet*

“Stronger” opioids include:

- **morphine sulfate**- *ie. MS Contin*
- **methadone**- *ie. Biodone, Physeptone*
- **buprenorphine**- *ie. Suboxone, Subutex*
- **hydromorphone**- *ie. Dilaudid*

The recommended dose of opioids differ between the types. There is a lot of information available online around doses.

- *A single pill generally contains a dose within the effective (therapeutic) range.*
- *If unsure what the strength of the tablet is, or to test for possible hypersensitivity to opioids, it is safer to take half a pill to test the effects.*

“Maximum safe dose” is person-specific and dependent on current and previous opioid exposure, as well as on whether the person takes opioids regularly or is dependant on them.

ADMINISTRATION

Most commonly swallowed but can also be shelved (rectal), snorted or injected (IV or IM liquids).

DURATION

Duration is dependent on the type of opioid and differentiate between onset, peak and total durations.

HALF LIFE:

Opioids can stay active for a long period of time (up to a couple of days) dependent on what type.
Do your research.

For example, the half life of OxyContin (extended release oxycodone) is 4.5 hours compared to 3.2 hours for immediate release oxycodone.

ROADSIDE DRUG TESTS:

Opioids are not tested for in roadside drug tests.

STREET NAMES

Oxy, OC, grey nurses, MS Contin, lean, purple drank, hillbilly heroin, subbies, kickers, bupe, ox, grapes, greys, oranges

SAFER USING TIPS

INJECTING

It is a contentious and often debated issue among injectors of whether to ‘cook’ the solution or “cold shoot” it—to extract the target drug with cold water. It seems, however, that those advocating cold water extraction were right, at least in part. A group of Australian scientists determined that heating the solution causes no higher solution concentration of the drug.

In fact, adding heat to the mixture actually increases the amount of particulate matter in the solution by causing melted wax to pass through the filter, which produces particles when it cools and solidifies within the syringe.

EFFECTS

The following is a list of possible effects, which may vary from person to person.

Physical

Itchiness
Sedation & drowsiness
Lethargy
Nausea
Respiratory depression
Constipation
Euphoria
Increased energy
Decreased libido
Increased perspiration
Decreased or increased appetite

Irregular menstruation
Pinned pupils
Decreased heart rate

Emotional

Moodiness
Depression
Euphoria

Psychological

decreased sexual desire

Withdrawal Symptoms can begin within hours of last use. Sneezing, excessive yawning, coughing, sweating, chills, restless legs, irritability, moodiness, insomnia, severe muscle & bone pain, diarrhea, increased urinating, dehydration, anxiety, nausea, vomiting, cramps, involuntary spasms, sensitive genitals (females)