Alcohol

Combining alcohol with other central nervous system depressants like Xanax or painkillers like Vicodin can slow your heartbeat and breathing and may result in death.

Class of drug: Depressant

Main active ingredient: Ethanol/Ethyl alcohol, which is made by fermenting or distilling grains, fruit and vegetables. Alcohol is found in beverages like beer, wine, and hard liquor like rum and vodka.

What it looks like: Liquid, either clear or colored

Street names: Booze, Juice, Spirits, Brew, Sauce

How it is used: Taken orally

Duration of high: Effects of high can last from one to four hours. The effect of alcohol on the body by volume is the same. It is the amount of ethanol consumed that affects a person most, not the type of alcoholic drink.

Withdrawal symptoms: Restlessness, sweating, tremors, insomnia, anxiety, convulsions, death

Detected in the body: With a healthy liver, an average person can eliminate one drink (.6 oz of alcohol) per hour. Detection time in urine is one to two days.

Effects: Physical—small amounts can produce relaxed muscles, headache, nausea; somewhat large amounts can cause slurred speech, double vision; very large amounts can cause respiratory depression, coma and death Mental—small amounts can impair judgment and decrease inhibitions and anxiety; large amounts can produce memory loss Long-term—liver and brain damage, heart disease, cancer, ulcers, pancreatitis

A standard drink is equal to .6 oz of pure alcohol, which is equal to 12 oz of beer, 8 oz of malt liquor, 5 oz of wine and 1.5 oz or a "shot" of 80-proof liquor (e.g. gin, rum, vodka).

Binge drinking is a pattern of drinking that brings a person’s blood alcohol concentration (BAC) to 0.08g/dL or above. This typically happens when men consume 5 or more drinks, and when women consume 4 or more drinks, in about 2 hours.

In 2013, 14.6 percent of high school students in Wisconsin reported that they drank alcohol for the first time before the age of 13. Approximately 66 percent of students said they had at least one drink of alcohol in their lifetime, compared to 71 percent in 2011 and 79 percent two decades ago.

(U.S. Centers for Disease Control Youth Risk Behavior Survey, 2013)

DRUG FACT SHEET

Bath Salts
It is illegal under federal law to sell the chemical compounds that have been created and sold as bath salts.

Class of drug: Synthetic Stimulant

Main active ingredients: MDPV (methylenedioxypyrovalerone) and mephedrone (which are found in a lower dosage in legitimate bath salts and plant foods)

What it looks like: White, powdery or crystallized substance packaged as bath salt

Street names: Ivory Wave, Bolivian Bath, Vanilla Sky, Legal Cocaine, Snow White, Hurricane Charlie, Bliss, Pure White, Purple Iris, XXX-rated plant food

How it is used: Inhaled, injected, eaten in food and swallowed in drinks. Bath Salt can be rolled into joints with marijuana and smoked, too (called Head Trip Potpourri).

Duration of high: The initial rush peaks within 15 minutes to one hour and can last for five hours. Many users re-dose to extend the effects for a few days.

Withdrawal symptoms: Fatigue, depression, anxiety, psychotic behaviors

Detected in the body: Yes, through quantitative testing for MDPV, Mephedrone and Methylone, but it is not detected in routine drug tests

Effects:

- Mimics the high of cocaine, ecstasy and amphetamines

  **Physical**—Chest pains, headaches, high blood pressure, increased pulse, muscle twitching, cravings, insomnia, seizures

  **Mental**—Agitation, delusions, anxiety, paranoia, hallucinations, violent rages, suicidality

  **Long-term**—Fairly new drug, no long-term effects have been recorded in humans.

“The synthetic cathinone products marketed as “bath salts” to evade detection by authorities should not be confused with products such as Epsom salts that are sold to improve the experience of bathing. The latter have no psychoactive (drug-like) properties.”

- National Institute on Drug Abuse

U.S. information

In 2013, The American Association of Poison Control Centers reported 996 calls related to exposure to bath salts, compared to 2,691 in 2012 and 6,137 in 2011.

Despite being illegal to sell in the U.S., many people are still purchasing bath salts on the internet.

Club Drugs

Club drugs like GHB and Rohypnol are used in date rapes, because they are sedatives and can make one unconscious and immobile.

Class of drug: MDMA (Stimulant), GHB (Depressant), Rohypnol (Benzodiazepines), Ketamine (Dissociative), LSD (Hallucinogen)

Main active ingredient: Varies as drug varies. Since club drugs are often manufactured in makeshift labs, it is impossible to know what chemicals are used to produce them and the consequences of each drug.

What it looks like: Most liquid club drugs are odorless, colorless and tasteless, which makes it easy to slip into a drink. Many of the powdered forms are easily dissolved in liquids. Club drugs are also available in pill/capsule form as well as blotter paper.

Street names: MDMA—Ecstasy, E, X, Molly; GHB—Liquid Ecstasy, Grievous Bodily Harm; Ketamine—K, Special K, Kit Kat; Rohypnol—Roofies, R-2; LSD—Acid, Blotter, Microdot

How it is used: Taken orally in pill form (MDMA, GHB, LSD), liquid form (GHB, LSD), powdered form (GHB) and blotter paper (LSD). Ketamine can be smoked, injected or snorted.

Duration of high: Most club drugs effects are felt within 10 to 20 minutes and last from three to six hours. Rohypnol is felt within 30 to 90 minutes and can impair a user for eight to 12 hours.

Withdrawal symptoms: Sleep problems, depression, anxiety

Effects:

- **Physical**—loss of muscle and motor control, blurred vision, dehydration, drowsiness, breathing problems, unconsciousness, increased heart rate, blood pressure and body temperature
- **Mental**—hallucinations, atrograde amnesia, euphoria, impaired senses, memory and judgment
- **Long-term**—sleep problems, heart and kidney failure, brain damage, paranoia, coma, death

Many of these “club drugs” are used recreationally, by choice, at all-night dance parties (raves), bars and concerts.

Studies by the National Institutes of Health suggest that risk of death associated with drugs such as ecstasy increases in hot conditions because the drug interferes with the body’s ability to regulate temperature.

**U.S. information**

The estimated number of emergency department visits involving Ecstasy in patients younger than 21 years old increased 128 percent, from 4,460 visits in 2005 to 10,176 visits in 2011 (Drug Abuse Warning Network)

**Wisconsin information**

In 2011, 5.1 percent of high school students in Wisconsin reported that they had tried ecstasy at least once in their lifetime, compared to 4.9 percent in 2009 and 6.7 percent in 2007. (U.S. Centers for Disease Control Youth Risk Behavior Survey, 2011)

Sources: National Institute on Drug Abuse (NIDA), US Substance Abuse and Mental Health Services Administration (SAMHSA)

University of Illinois, The Illinois Department of Human Services
Cocaine and Crack

Class of drug: Stimulant

Main active ingredient: Cocaine hydrochloride is extracted from the leaf of the Erythroxylon coca bush. Crack is processed from powdered cocaine (hydrochloride is removed).

What it looks like: Cocaine: fine crystalline powder
Crack: light brown or beige pellets or crystalline rocks (often packaged in small vials)

Street names: Cocaine: Coke, Snow, Blow
Crack: Freebase Rocks, Rocks

How it is used: Cocaine: sniffed or injected
Crack: smoked

Duration of High: Cocaine effects appear almost immediately and disappear within a few minutes or hours (depends on route of administration).
Crack effects are felt within 10 seconds and disappear within five to 10 minutes (very intense high). It is not uncommon for users to binge on crack to try to sustain the short, but intense high.

Withdrawal symptoms: Mood swings/changes, depression, anxiety—unpleasant but not life threatening

Detection in the body: Three to five days

Effects:

Physical—increased energy, dilated pupils, increased pulse rate, elevated blood pressure, insomnia, loss of appetite, sudden death

Mental—euphoria, tactile hallucinations, large amounts can cause bizarre and violent behavior

Long-term—mood disturbances, paranoia, heart attacks, respiratory failure, heart disease, strokes, seizures, death

In the late 1800s and early 1900s, cocaine was used primarily as medicine. The drug was officially banned in 1922. More than 50 years later, a new variation of the substance emerged. This substance, crack (above), became enormously popular in the mid-1980s due in part to its almost immediate high and that fact that it is inexpensive to produce and buy.

Wisconsin information

During FY 2013, 45.4 percent of the federally-sentenced defendants in Wisconsin had committed a drug offense. Over half of the drug cases involved powder cocaine or crack cocaine.

In 2013, 4.3 percent of high school students in Wisconsin reported using cocaine at least once in their lifetime, compared to 9.9 percent a decade ago.

Sources: American Medical Association, National Institute on Drug Abuse, Drug Abuse Warning Network, National Drug Intelligence Center, U.S. Drug Enforcement Administration, Office of National Drug Policy
**DXM: Cough Medicine**

About one in 25 teens report using cough medicine to get high. Often, these teens are finding information about cough medicine abuse on the Internet.

Class of drug: DXM is a synthetically produced opioid chemically related to codeine, but does not directly stimulate opiate receptors in the brain. It acts as a hallucinogen/dissociative drug at high doses.

Main active ingredient: DXM (dextromethorphan)

What it looks like: It is available in liquid, tablet, capsule, gel cap and lozenge cough preparations. It is also available in powdered form.

Street names: Robo, Dex, Tussin, Skittles, Triple C, Velvet

How it is used: Orally in cough medicines; inhaled in powdered form

Duration of high: The effects can last up to six hours.

Withdrawal symptoms: Restlessness, muscle/bone aches, insomnia, diarrhea, vomiting, cold flashes

Effects:

**Recommended doses** (.17 – .33 oz of med. containing 15 mg to 30 mg DXM)—cough suppression

**DXM abusers describe different “plateau” effects.**

- **Small doses** (under 2 oz of med., first plateau)—mimic depressant effects: mild drunkenness
- **Medium doses** (2 oz - 4 oz of med., second plateau) mimic stimulant effects with distorted visual perceptions
- **Large doses** (4 oz - 10 oz or more of med., third and fourth plateaus)—mimic dissociative drugs: distorted perception of sight, time, body and sound, feelings of detachment, hallucinations, violence

**Physical**—flushing, sweating, increased body temperature, nausea, seizures, high blood pressure, blurred vision, irregular heartbeat, numbness

**Long-term**—Liver damage (from medicines also containing acetaminophen) brain damage, coma, death

Many teens are mixing cough medicine with soda and Jolly Ranchers to create a drink called “Lean,” “Sizzurp,” or “Purple Drank.” These drinks are usually made with prescription strength cough medicine containing Codeine or Promethazine. “Lean” has been popularized through hip hop and rap music.

U.S. information

In several states, including California and New York, it is illegal to sell DXM containing medicine to anyone under the age of 18. Many store chains have also implemented restrictions such as requiring signatures for DXM sale and limiting quantities allowable for purchase.

In 2013, 2.9 percent of 8th graders, 4.3 percent of 10th graders and 5 percent of 12th graders reported using cough/cold medicine to get high.

(Monitoring the Future Survey)


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Hallucinogens & Dissociative Drugs

Some effects of PCP including depression and memory loss may last six months to a year following prolonged daily use.

Class of drug: Hallucinogens (most common form is LSD) Dissociative drugs (most commonly form is PCP)

Main active ingredient: Hallucinogens: Lysergic acid diethylamide, mescaline, psilocybin, ibogaine Dissociative: Phencyclidine

What it looks like: LSD: Clear, odorless liquid, brightly colored tablets, impregnated blotter paper, thin squares of gelatin PCP: liquid, capsules, white crystalline powder, gum

Street names: Lysergic acid diethylamide: LSD, Acid, Blotter, Phencyclidine: PCP, Angel Dust, Loveboat, Wack

How it is used: Both hallucinogens and dissociative drugs can be swallowed, injected or smoked. LSD liquid and gelatin forms can be put in the eyes. PCP is often sprinkled or sprayed on cigarettes, parsley and marijuana.

Duration of high: Hallucinogens: effects begin within 30 to 90 minutes and last from six to twelve hours PCP: effects begin within minutes and last for hours

Withdrawal symptoms: Depression, memory loss

Effects:

Physical (both)—increased heart rate and blood pressure, elevated body temperature, loss of appetite, loss of muscle coordination, slurred speech

Hallucinogens
Mental—hallucinations; intensified senses; distortion of time, reality and environment; confusion; mood swings; panic; suicidal thoughts
Long-term—heart and lung failure, flashbacks, coma

Dissociative
Mental—detachment/disconnection of environment and self, distorted perceptions of sight and sound, violence
Long-term—memory loss, speech difficulties, paranoia, convulsions, coma

There are hundreds of synthetic hallucinogens on the market today including 25I-NBOMe (N-Bomb) and 2C-I (Smiles) which have been attributed to multiple deaths and significant injuries. They are generally found as powders, liquids, soaked into blotter paper or laced on something edible. Both drugs are classified as Schedule I substances, making possession, distribution and manufacture illegal.

U.S. information

In 2012, more than 180,000 Americans aged 12 and older reported current (past-month) use of LSD and 32,000 reported current use of PCP. The average age at first use was about 17 for PCP and 19 for LSD.

Heroin overdose is a particular risk because the amount and purity of the drug cannot be accurately known.

Class of drug: Narcotic/Opiate

Main active ingredient: Morphine, which is processed and extracted from the seed pod of certain poppy plants

What it looks like: Powder (white to dark brown), tar-like substance

Street names: Smack, Horse, Brown Sugar, Junk, Mud, Big H, Black Tar, White Boy

How it is used: Injected, inhaled or smoked

Paraphernalia used: Needles/syringes; burned or dirty spoons/bottle cap tops; small plastic baggies with white powdery residue; small glass or metal pipes; lighters; belts/shoelaces missing (used to tie off injection sites); aluminum foil or gum wrappers with burn marks

Duration of high: Euphoria sets in within seven seconds (intravenous injection), two to five minutes (intramuscular injection) or 10 to 15 minutes (sniffed or smoked). The high lasts from 10 to 30 minutes. Euphoria is followed by lethargy, sleepiness and apathy.

Effects: Immediate—A rush, accompanied by a warm flushing of the skin, dry mouth and heavy feeling in the extremities, slowed breathing, slowed cardiac function, suppression of pain, clouded mental functioning, constricted (small pupils, slowed/slurred speech, nodding out (alternating between wakeful and drowsy state), droopy eyes, constipation, vomiting, runny nose, needle track marks visible on arms

Long-term—contaminated injection equipment may transmit diseases such as HIV and hepatitis, collapsed veins, infection of heart lining and valves, tuberculosis

Withdrawal symptoms: Restlessness, yawning, muscle and bone pain, cold flashes with goose bumps, diarrhea, vomiting and insomnia. Major withdrawal symptoms peak between 24 to 48 hours after the last dose and subside after a week. Heroin withdrawal is never fatal in otherwise healthy adults.

Overdose symptoms: Blue lips, not breathing right, won’t wake up, unresponsive to pain

Wisconsin information

Heroin overdoses in Wisconsin accounted for 227 deaths in 2013 and 206 in 2012. From 2000 to 2007, the state averaged about 30 heroin deaths per year. Milwaukee county reported the most deaths followed by Dane County.

In 2013, 7.4 percent of high school students in Milwaukee reported trying heroin at least once in their lifetime. The state average was 1.3 percent of all high school students surveyed.

Inhalants
The primary users of household inhalants are pre-teenagers and young teenagers because the products are readily available, cheap and legal.

Class of drug: Psychoactive

Main active ingredient: There are more than 1,400 common household products that can be misused as inhalants. Active ingredients vary, but most common ones are nitrous oxide, amyl nitrite, butyl nitrite, chlorohydrocarbons (aerosol sprays) and hydrocarbon (solvents). Most are volatile chemicals.

What it looks like: Varies; common household products include glue, paint, lighter fluid, whipping cream cans or whipping cream chargers, and canned air dusters

Street names: Bolt, Bullet, Laughing Gas, Whippets, Poppers, Snappers, Locker Room, Huffing, Sniffing

How it is used: Breathed into the lungs through the mouth or nose by sniffing, spraying, bagging, huffing (a soaked rag) or inhaling (from a balloon)

Duration of high: Inhalants reach the brain almost instantly, producing an immediate high (euphoria). It usually lasts a few minutes; however, sometimes users extend this effect for several hours by breathing in inhalants repeatedly.

Withdrawal symptoms: Irritability, agitation, increased heart rate, chills, hallucinations

Effects: Physical—slurred speech, seizures, nosebleeds, nausea, loss of appetite, decreased heart rate, death Mental—feelings of euphoria, impaired judgment, violent behavior, hallucinations Long-term—paranoid psychosis, brain, liver and kidney damage, hepatitis, brain hemorrhage, cancer, bone marrow damage

Whippets (top right) are small canisters of nitrous oxide used to make whipped cream. They have become a popular inhalant for teenagers because they are easy to obtain. They can be purchased at grocery stores and in bulk on the internet.

Experimentation with inhalants should not be taken lightly. Even a single session of repeated inhalant abuse can disrupt heart rhythms and cause death from cardiac arrest or lower oxygen levels enough to cause suffocation.

U.S. information
Inhalants are the fourth most abused substance after alcohol, tobacco, and marijuana. Over 2.6 million kids, aged 12 to 17, have used an inhalant to get high. Inhalant abuse usually begins around age 10.

(Alliance for Consumer Education)

Wisconsin information
In 2013, 5.9 percent of high school students in Wisconsin reported using inhalants at some point during their lifetime.

(U.S. Centers for Disease Control Youth Risk Behavior Survey, 2013)

DRUG FACT SHEET

K2 Herb

The Food and Drug Administration Safety and Innovation Act, signed into law in July of 2012, permanently bans the deadly chemical compounds marketed and sold as “herbal incense” in all states.

Class of drug: Synthetic Cannabis

Main active ingredients: Cannabicyclohexanol, JWH-073, JWH-200, CP-47, 497, and JWH-018, similar to THC (Tetrahydrocannabinol) but more potent. All of these ingredients are considered Schedule I Controlled Substances.

What it looks like: In its pure state, these synthetic chemical compounds are solids or oil; but are usually sprayed on a mixture of dried herbs and spices

Street names: K2, K2 Herb, Spice, K2 Incense, K2 Summit, K2 Standard, K2 Blond, Fake Weed, Black Mamba

How it is used: Smoked, inhaled, ingested

Duration of high: Smoked—effects begin immediately after the drug enters the brain and last from one to three hours

Withdrawal symptoms: Irritability, headaches, nausea, anxiety, depression

Detected in the body: K2 can now be detected more readily through urinalysis. Tests have been developed to detect specific synthetic cannabinoid compounds found in K2.

Effects:

Physical—sleepiness, relaxation, reduced or elevated blood pressure, heart palpitations

Mental—hallucinations, delusions, paranoia

Long-term—This drug is fairly new; the DEA is still studying its long-term effects. No long-term effects have been recorded in humans.


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U.S. information

Spice is the second most popular illegal drug used by high school seniors, with marijuana being the first. Easy access and the misunderstanding that Spice is “natural” have likely contributed to these high use rates.

(University of Michigan, 2013 Monitoring the Future Study)
Marijuana

Marijuana is the most widely available and used illegal drug in the U.S.

Class of drug: Cannabis

Main active ingredient: THC (delta-9-tetrahydrocannabinol), which causes the mind-altering effects

What it looks like: Greenish-gray mixture of dried, shredded leaves, stems, seeds and flowers of Cannabis sativa, the hemp plant

Street names: Pot, Grass, Weed, Reefer, Dope, Mary Jane, Sinsemilla, Acapulo Gold, Thai Sticks, Ganga

How it is used:
- Smoked in hand-rolled cigarettes (joints), water pipes (bongs) or cigars (blunts)
- Eaten in foods or used to brew tea
- Concentrated into a resin called hash oil that is made with butane and other flammable chemical solvents. Hash oil is usually smoked in vaporizers or e-cigarettes

Duration of high:
- Smoked—effects begin immediately after the drug enters the brain and last from one to three hours
- Ingested—effects begin one-half to one hour after ingested and last as long as four hours

Withdrawal symptoms:
- Irritability, difficulty sleeping, anxiety, depression

Detected in the body:
- Occasional use—one to seven days
- Chronic use—one to four weeks

Effects:
- THC concentrations in marijuana are much higher today than in the past causing harsher effects leading to psychosis, hallucinations and more hospitalizations
- Physical—increased heart rate, bloodshot eyes, dry mouth and throat, increased appetite
- Mental—pleasant sensations and colors, intensified perception of sounds, impaired or reduced short-term memory and comprehension, altered sense of time, reduced ability to perform tasks requiring concentration and coordination
- Long-term—damage to the tissue of the lungs and pulmonary system, cancer, negative effect on the development of adolescents, impaired immune system


U.S. information

In 2013, 39.5 percent of 12th graders viewed regular use of marijuana as harmful, while 6.5 percent reported daily marijuana use. In 1993, 72.5 percent of 12th graders viewed regular use of marijuana as harmful, while 2.4 percent reported daily marijuana use.

(Monitoring the Future Survey)

Wisconsin information

In 2013, 6.3 percent of high school students in Wisconsin reported that they tried marijuana for the first time before the age of 13. Approximately 31 percent of students said they had used marijuana at least once in their lifetime, compared to 37 percent in 2011 and 23 percent two decades ago.

(U.S. Center for Disease Control Youth Risk Behavior Survey, 2013)
Methamphetamines

High doses of methamphetamines can elevate body temperature to dangerous and sometimes lethal levels, as well as cause convulsions.

Class of drug: Psychostimulant

Main active ingredient: It is a derivative of amphetamine. Over-the-counter drugs containing ephedrine or pseudoephedrine and other materials are cooked in clandestine laboratories inexpensively to produce the drug.

What it looks like: White powder, pills or a rock which resembles a block. The white powder is odorless, bitter-tasting and dissolves in water or alcohol.

Street names: There are more than 300 street names including Crank, Crystal Meth, Crystal, Ice, Speed

How it is used: Orally, injected, inhaled or smoked. It is also a Schedule II stimulant. There are few accepted medical reasons for its use.

Duration of high: An initial, intense rush lasts from five to 30 minutes for most methamphetamines smoked or injected. Oral ingestion or snorting produces effects in three to 15 minutes. The effects of methamphetamines can last up to 12 hours or more.

Withdrawal symptoms: Depression, fatigue, aggression and paranoia

Detection in the body: Up to five days

Effects: Immediate—increased activity, decreased appetite, euphoria, increased respiration, elevated body temperature

Long-term—addiction, violent behavior, anxiety, insomnia, stroke, weight loss, paranoia, hallucinations, delusions, toxic effects on the brain

Long-term—sleep problems, heart and kidney failure, brain damage, paranoia, coma, death

U.S. information

Although the availability of meth has been increasing in the U.S., there has been a downward trend in the prevalence of use among teenagers. In 2013 3.8 percent of high school students reported ever using meth in their lifetime, compared to 7.6 percent in 2003.

(W.U.S. Centers for Disease Control Youth Risk Behavior Survey, 2013)

Wisconsin information

Between 2008 and 2013 there were a reported 1,565 meth cases in Wisconsin. Areas reporting the most cases were all in the northwestern region of the state including, Douglas, Polk, St. Croix and Barron Counties.

(Wisconsin Department of Justice)
Prescription Drugs

More teens abuse prescription drugs than any illicit drug except marijuana.

Classes of drug:

- **Painkillers**: Vicodin, Tylenol with Codeine, OxyContin, Percocet
- **Depressants**: Klonopin, Nembutal, Soma, Valium, Xanax
- **Stimulants**: Adderall, Concerta, Dexedrine, Ritalin

What it looks like:
They come in tablet and capsule form (some depressants are also available in liquid and suppositories). They are taken orally or crushed, dissolved in water and injected.

Sources of drug for nonmedical use:

Of people who abuse prescription painkillers, 56 percent say they get them free from relatives and friends; 19 percent from one doctor; 9 percent bought them from friends or relatives; 5 percent bought from drug dealer; 4 percent stole from friends or relatives and 7 percent from other sources.

Withdrawal symptoms:

- **Painkillers**: Restlessness, muscle and bone pain, insomnia
- **Depressants**: Anxiety, irritability, insomnia, nausea, tremors, seizures
- **Stimulants**: Mood changes, sleep and appetite disturbances

Effects:

- **Painkillers**: Decrease motor skills and judgment, difficulty breathing, death
- **Depressants**: Depressed heart rate, difficulty breathing, death
- **Stimulants**: Irregular heart beat, high body temperature, hostility, paranoia, heart failure, fatal seizures

Every day in the United States, an average of 2,000 teenagers use prescription drugs without a doctor’s guidance for the first time. Youth who abuse prescription medications are also more likely to report use of other drugs.

Prescription opioid pain medications such as OxyContin and Vicodin have effects similar to heroin when taken in doses or in ways other than prescribed, and research now suggests that abuse of these drugs may open the door to heroin abuse because heroin is cheaper and easier to obtain than prescription opioids.

**Wisconsin information**

More teens abuse prescription drugs than any illicit drug except marijuana. In 2013, 14.9 percent of high school students in Wisconsin report taking prescription drugs without a doctor’s prescription during their lifetime, compared to 18.1 percent in 2011.

(U.S. Centers for Disease Control Youth Risk Behavior Survey, 2011)

Sources: United States Department of Health and Human Services, Substance Abuse and Mental Health Services Administration Office of Applied Studies, NIDA Info Facts, Office of National Drug Control Policy
DRUG FACT SHEET

Tobacco

Tobacco contains 4,000 chemicals and byproducts that make it harmful. The most dangerous byproducts are nicotine, tar and carbon monoxide.

Class of drug: Stimulant (but also acts as a sedative)

Main active ingredient: Nicotine

What it looks like: It is a brownish mixture of dried, cured and processed leaves. Nicotine is a naturally occurring colorless liquid that turns brown when burned and acquires the odor of tobacco when exposed to air.

Street names: Smokes, Cigs, Butts, Chew, Snuff

How it is used: Tobacco is smoked in the form of cigarettes, cigars, pipes, and e-cigarettes (vaporized nicotine); chewed, dipped or sniffed in the form of chewing or spit tobacco or snuff.

Duration of high: Tobacco effects are felt within 10 seconds of inhalation (cigarette smokers). Cigar, pipe and smokeless tobacco users absorb the nicotine more slowly. The acute effects of nicotine dissipate in a few minutes. Nicotine stays in your system three to four days.

Withdrawal symptoms: Headaches, dizziness, anxiety, irritability, coughing, dry throat, hunger (weight gain)

Effects:
- Physical—rush of adrenaline, drop in skin temperature, suppressed appetite and increased blood pressure, respiration and heart rate
- Mental—reduced anxiety and increased relaxation
- Long-term—diseases and conditions, such as: cancer, coronary heart disease, chronic lung disease, stroke, emphysema, chronic bronchitis, gastric ulcers, premature wrinkling

Wisconsin information

In Wisconsin, tobacco use claims 7,900 lives and costs the state $2.7 billion in health care bills a year. Approximately 10.9 million packs of cigarettes will be smoked by kids under the age of 18 in Wisconsin this year.

Cigarette use by teens has been declining over the last 20 years. In 2013, 33 percent of high school students in Wisconsin reported they had tried smoking cigarettes, compared to 69 percent in 1993. Frequent cigarette use among students dropped from 16 percent to 4 percent over the same period of time.

(Campaign for Tobacco-Free Kids; U.S. Center for Disease Control Youth Risk Behavior Survey, 2013)


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