

THE TRUTH ABOUT **CRYSTAL METH**

and Methamphetamines:

**This vicious stimulant
lures users into a spiral
of debilitation
— or death**

Meth
Chrissy
Ice
Tweak
Tina
Speed
Glass

“SAY NO TO DRUGS, SAY YES TO LIFE”

The background of the entire page is a blue-tinted photograph of a long school hallway. On the left, there are rows of lockers. On the right, there are windows and a person is walking away in the distance. The text is overlaid on a white, torn-edge shaped area.

WHY THIS BOOKLET WAS PRODUCED

Drugs destroy millions of lives every year. The most disturbing aspect of this problem is the damage drug abuse does to our young people — and the threat this represents to the future of every country. With more and more young people being introduced to drugs, it is vital to provide educational materials with factual information about their dangers.

This booklet is dedicated to those individuals and organizations working to salvage others from the ravages of drug abuse. Society owes them a debt of gratitude for their cooperative efforts and we hope this booklet will assist them.

Sadly, some in society seek to promote and spread drug use for profit or gain — a fact that has been exposed too many times for anyone to be fooled.

WHAT IS CRYSTAL METH?

Crystal meth is short for crystal methamphetamine. It is just one form of the drug methamphetamine.

Methamphetamine is a white crystalline drug that people take by snorting it (inhaling through the nose), smoking or injecting with a needle. Some even take it orally, but all develop a strong desire to continue using it because the drug creates a false sense of happiness and well-being — a rush (strong feeling) of confidence, hyperactiveness and energy. One also experiences decreased appetite. These drug effects generally last from six to eight hours, but can last up to 24 hours.

The first experience might involve some pleasure, but from the start the methamphetamine begins to destroy people's lives.



WHAT IS METHAMPHETAMINE?

Methamphetamine is an illegal drug in the same class as cocaine and other powerful, street drugs. It has many nicknames — *meth*, *crank*, *chalk* or *speed* being the most common.

(See page 7 for a list of street names.)

Methamphetamine is inexpensive and *relatively* easy to produce, making it affordable and readily available.

Crystal meth, for example, is used by individuals of all ages, but is most commonly used as a “club drug,” taken while partying in night clubs or at rave parties. Its most common street names are *ice* or *glass*.

It is a dangerous and potent chemical, and, as with all drugs, a poison that

first acts as a stimulant, but then begins to systematically destroy the body. Thus it is associated with serious health conditions, including memory loss, aggression, psychotic behavior, and potential heart and brain damage.

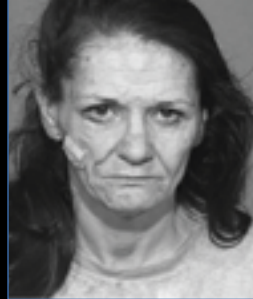
Highly addictive, meth burns up the body's resources, creating a devastating dependence that can only be relieved by taking more of the drug.

Crystal meth's effect is highly concentrated and many users report getting hooked (addicted) from the first time they use it. "I tried it once and BOOM! I was addicted," said one meth addict who lost his family, friends, his profession as a musician and ended up homeless.

Consequently, it is one of the hardest drug addictions to treat and many die in its grip.



Meth user in 2002

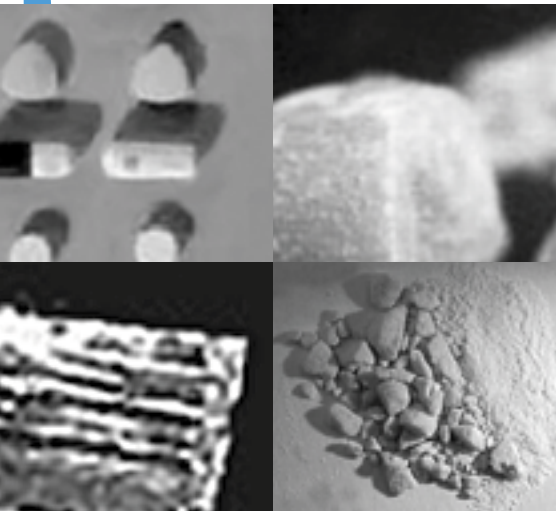


...and 2 1/2 years later

"My life spun out of control after a simple 'girls night out' to alleviate boredom. After being introduced to meth for the first time at age 40, within three years I was shooting meth. I left my husband and three children (10, 12 and 15) and ended up living on the street."

— Marie

WHAT DOES METHAMPHETAMINE LOOK LIKE?



Methamphetamine usually comes in the form of a crystalline white powder that is odorless, bitter-tasting and it dissolves easily in water or alcohol. Other colors of powder have been observed, including brown, yellow-gray, orange and even pink. It can also be compressed into pill form. As covered earlier it can be snorted, smoked or injected. Crystal meth comes in clear chunky crystals resembling ice and is most commonly smoked.



STREET NAMES FOR METHAMPHETAMINE

Methamphetamine and crystal methamphetamine are referred to by many names:

METH

- Beannies
- Brown
- Chalk
- Crank
- Chicken feed
- Cinnamon
- Crink
- Crypto
- Fast
- Getgo
- Meth
- Methlies quik
- Mexican crack
- Pervitin (Czech Republic)

- Redneck cocaine
- Speed
- Tick tick
- Tweak
- Wash
- Yaba (Southeast Asia)
- Yellow powder

CRYSTAL METH

- Batu
- Blade
- Cristy
- Crystal
- Crystal glass
- Glass
- Hot ice
- Ice
- Quartz
- Shabu
- Shards
- Stove top
- Tina
- Ventana

WHAT IS METH MADE FROM?

Methamphetamine is a synthetic, (man-made) chemical, unlike cocaine, for instance, which comes from a plant.

Meth is commonly manufactured in illegal, hidden laboratories using various forms of amphetamine or derivatives, mixed with other chemicals to boost its potency. Common pills such as cold remedies are often used as the basis for the production of the drug. The meth “cook” extracts the active ingredient in those pills, pseudoephedrine (a chemical that comes from another stimulant drug called amphetamine), and combines it with dangerous or even deadly ingredients such as battery acid, drain cleaner, lantern fuel and antifreeze to increase its strength.

Those manufacturing methamphetamine use dangerous chemicals that are potentially explosive. Because of the volatile nature of the materials they employ, and the fact that the meth cooks are drug users themselves and disoriented, they are often severely burned and disfigured or killed when their preparations explode. Such accidents endanger others in nearby homes or buildings.

The illegal laboratories create a lot of toxic waste as well — the production of one pound of methamphetamine produces five pounds of waste. People exposed to this waste material can become poisoned and sick.

“Welfare money was not enough to pay for our meth habit and support our son so we turned our rented home into a meth lab. We stored the toxic chemicals in our refrigerator not knowing that the toxins would permeate [go into] the other food in the icebox.

“When I gave my three-year-old son some cheese to eat — I did not know that I was giving him poisoned food. I was too stoned on meth to notice, until 12 hours later, that my son was deathly ill. But then I was so stoned it took me two hours to figure out how to get him to the hospital five miles away.

BY THE TIME I GOT TO THE EMERGENCY ROOM MY BOY WAS PRONOUNCED DEAD

of a lethal dose of ammonia hydroxide — one of the chemicals used to make meth.”

— Melanie

A clandestine crystal meth laboratory.



A WORLDWIDE EPIDEMIC OF ADDICTION

The United Nation's Office on Drugs and Crime estimated the worldwide production of amphetamine type stimulants, which includes methamphetamine, at 500 tons a year, with more than 40 million people having used them in the past 12 months.

The United States government reported in 2004 that more than 12 million people over the age of 12 in the United States have used methamphetamine. And 1.5 million of those are regular users.

In 2004, more than 6% of American high school seniors had reported lifetime use (meaning they have used it at least one

time in their life) of methamphetamine. Lifetime use was measured at more than 5% of 10th grade students.

In the United States, 59% of the people seeking help for substance (drug or alcohol) abuse in Hawaii in 2004, were methamphetamine users. The city of San Diego was second at 51%, with other cities across the United States showing an increase in abuse of this drug.

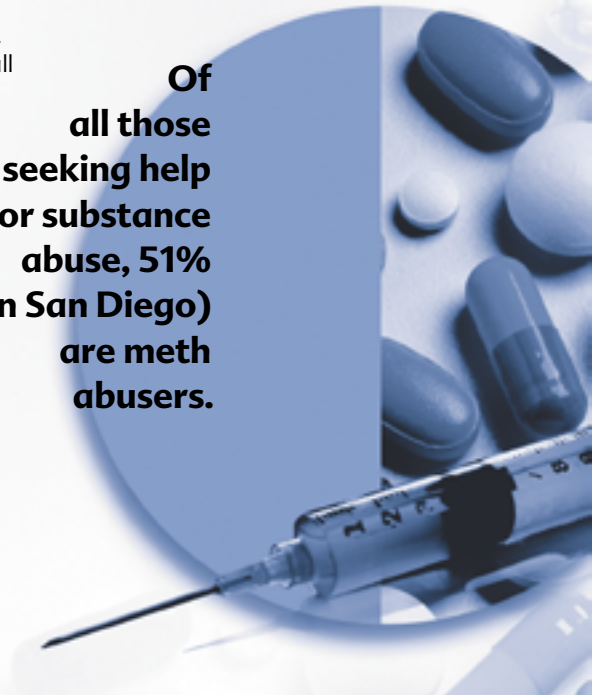
In July 2005, 58% of all U.S. local police and other law enforcement staff identified methamphetamine abuse as their biggest drug problem.

It is a drug widely abused in the Czech Republic. There it is called Pervitin and is produced in small clandestine laboratories and a limited number of larger ones. Consumption is primarily domestic but Pervitin is also exported to other parts of Europe and Canada. In the Czech Republic, 52% of all people entering drug treatment centers are for methamphetamine abuse.

Elsewhere in Europe, meth abuse ranged from 0.5% to 6% in EU member states. It is even higher in the UK where 12% of adults report having used it.

In Southeast Asia, the most common form of methamphetamine is a small pill called a Yaba in Thailand and a Shabu in the Philippines.

**Of
all those
seeking help
for substance
abuse, 51%
(in San Diego)
are meth
abusers.**



THE DEADLY EFFECTS OF METH

The short term and long term impact on the individual

When taken, meth and crystal meth create a false sense of well-being and energy, and so a person will tend to push his body faster and further than it is meant to go. Thus, drug users can experience a severe “crash” or physical and mental breakdown after the effects of the drugs wear off.

Since the continued use of the drug decreases the natural feelings of hunger, users can experience extreme weight loss. Negative effects can also include: disturbed sleep patterns; hyperactivity; nausea; delusions of power; increased aggressiveness and irritability.



1979



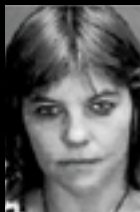
1989



1991



2001



1998



2004

The hideous look of crystal meth shows on the scarred and prematurely aged faces of those who abuse it.

Other worrying effects can include: insomnia; confusion; hallucinations; anxiety; paranoia and increased aggression. In some cases, use can cause convulsions that can lead to death.

Long-Range Harm

In the longer term, use of meth can cause irreversible damage. Increased heart rate and blood pressure, damaged blood vessels in the brain that can cause strokes or irregular heartbeat can in turn cause cardiovascular collapse or death. Can cause liver, kidney and lung damage.

There are strong indications that users suffer brain damage, including memory impairment and an increasing inability to grasp abstract thoughts. Those who recover are usually subject to some memory gaps and extreme mood swings.

METH HARM

SHORT TERM EFFECTS

- Loss of appetite
- Increased heart rate, blood pressure, body temperature
- Dilation of pupils
- Disturbed sleep patterns
- Nausea
- Bizarre, erratic, sometimes violent behavior
- Hallucinations, hyper-excitability, irritability
- Panic and psychosis
- Excessive doses may lead to convulsions, seizures and death
- Liver, kidney and lung damage
- Destruction of tissues in nose if sniffed
- Respiratory problems if smoked
- Infectious diseases and abscesses if injected
- Malnutrition, weight loss
- Severe tooth decay
- Disorientation, apathy, confused exhaustion
- Strong psychological dependence

LONG TERM EFFECTS

- Irreversible damage to blood vessels of heart and brain, high blood pressure, leading to heart attacks, strokes, and death
- Psychosis
- Depression
- Damage to the brain similar to Alzheimer's disease, stroke and epilepsy

HOW METHAMPHETAMINE AFFECTS PEOPLE'S LIVES

When people take methamphetamine, it takes over their lives in varying degrees. There are three categories of abuse.

LOW-INTENSITY METH ABUSE:

Low-intensity abusers swallow or snort methamphetamine. They want the extra stimulation methamphetamine provides so that they can stay awake long enough to finish a task or a job, or they want the appetite-suppressant effect to lose weight. They are one step away from becoming “binge” (meaning uncontrolled use of a substance) abusers.

BINGE METH ABUSE: Binge abusers smoke or inject methamphetamine with a needle. This allows them to receive a more intense

dose of the drug and experience a stronger “rush” that is psychologically addictive. They are on the verge of moving into high-intensity abuse.

HIGH-INTENSITY METH ABUSE: The high-intensity abusers are the addicts, often called “speed freaks.” Their whole existence focuses on preventing the crash, that painful letdown after the drug high. So in order to achieve the desired “rush” from the drug, they must take more and more of it. But as with other drugs, each successive meth high is less than the one before, urging the meth addict into a dark and deadly spiral of addiction.



THE STAGES OF THE METH “EXPERIENCE”

1 The Rush — A rush is the initial response the abuser feels when smoking or injecting methamphetamine. During the rush, the abuser’s heartbeat races and metabolism, blood pressure and pulse soar. Unlike the rush associated with crack cocaine, which lasts for approximately two to five minutes, the methamphetamine rush can continue for up to 30 minutes.

2 The High — The rush is followed by a high, sometimes called “the shoulder.” During the high, the abuser often feels aggressively smarter and becomes argumentative, often interrupting other people and finishing their sentences. The delusional effects can result in a user becoming intensely focused on a mundane or inconsequential item, such as repeatedly cleaning the same window for several hours. The high can last 4-16 hours.

3 The Binge — A binge is uncontrolled use of a drug or alcohol. It refers to the abuser's urge to maintain the high by smoking or injecting more methamphetamine. The binge can last 3-15 days. During the binge, the abuser becomes hyperactive both mentally and physically. Each time the abuser smokes or injects more of the drug, he experiences another but smaller rush until, finally, there is no rush and no high.

4 Tweaking — A methamphetamine abuser is most dangerous when experiencing a phase of the addiction called "tweaking" — a condition reached at the end of a drug binge when methamphetamine no longer provides a rush or a high. Unable to relieve the dreadful feelings of emptiness and craving, an abuser loses his sense of identity. Intense itching is common and a user can become convinced that bugs are crawling

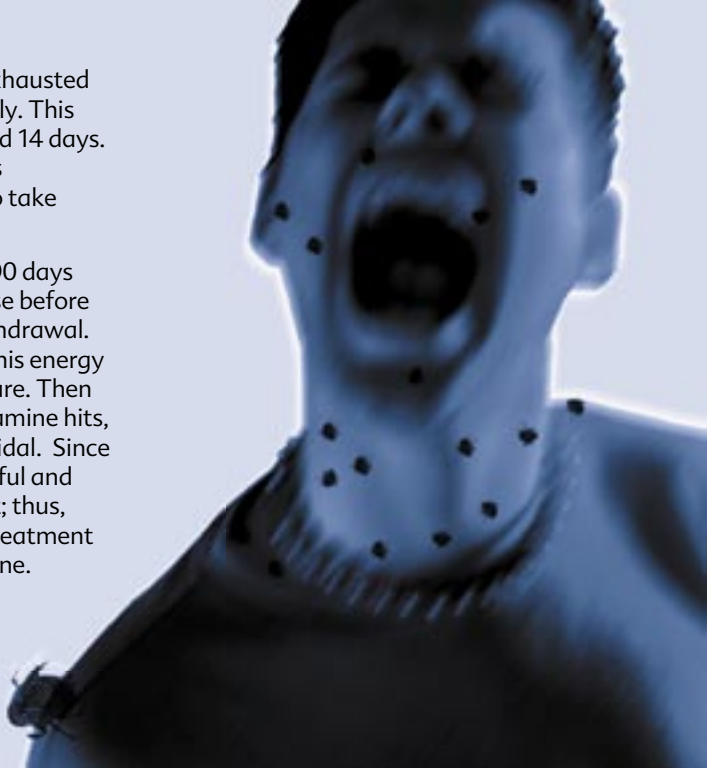
under his skin. Unable to sleep for days at a time, the abuser is often in a completely psychotic state and he exists in his own world, seeing and hearing things that no one else can perceive. His hallucinations are so vivid that they seem real and disconnected from reality, he can become hostile and dangerous to himself and others. The potential for self-mutilation is high.

5 The Crash — To a binge abuser, the crash happens when the body shuts down unable to cope with the drug effects coursing through it and it results in a long period of sleep for the person. Even the meanest, most violent abuser becomes almost lifeless during the crash and poses a threat to no one. The crash can last one to three days.

6 Meth Hangover — After the crash, the abuser returns in a deteriorated state,

starved, dehydrated, and utterly exhausted physically, mentally and emotionally. This stage ordinarily lasts between 2 and 14 days. This leads to enforced addiction, as the “solution” to these feelings is to take more meth.

7 Withdrawal — Often 30 to 90 days can pass after the last drug use before the abuser realizes that he is in withdrawal. First, he becomes depressed, loses his energy and the ability to experience pleasure. Then the craving for more methamphetamine hits, and the abuser often becomes suicidal. Since meth withdrawal is extremely painful and arduous, most abusers often revert; thus, 93 percent of those in traditional treatment return to abusing methamphetamine.



HISTORY OF METHAMPHETAMINE

Methamphetamine is not a new drug, although it has become more powerful in recent years as techniques for its manufacture have evolved.

Amphetamine was first synthesized in 1887 in Germany and methamphetamine, more potent and easy to make, was developed in Japan in 1919. The crystalline powder was soluble in water, making it a perfect candidate for injection.

Methamphetamine went into wide use during World War II, when both sides used it to keep troops awake. High doses were given to Japanese Kamikaze pilots before their suicide

missions and after the war, intravenous methamphetamine abuse reached epidemic proportions when supplies stored for military use became available to the Japanese public.

In the 1950s, methamphetamine was prescribed as a diet aid and to fight depression. Easily available, it was used as a non-medical stimulant by college students, truck drivers and athletes and abuse of the drug spread.

This pattern changed dramatically in the 1960s with the increased availability of injectable methamphetamine, increasing the abuse. Then, in 1970, the U.S. government

criminalized it for most uses. After that, American motorcycle gangs controlled most of the production and distribution of the drug. Most users at the time lived in rural communities and could not afford the more expensive cocaine.

In the 1990s, Mexican drug trafficking organizations set up large laboratories in California. While these massive labs are able to generate 50 pounds of the substance in a single weekend, smaller private labs have sprung up in kitchens and apartments, earning the drug one of its names, “stove top.” From there it spread across the United States and into Europe, through the Czech Republic. Today, most of the drug available in Asia is produced in Thailand, Myanmar and China.

**Kamikaze pilots
were given
methamphetamine
to sustain them
during suicide
missions.**



The Truth About Drugs

Drugs are essentially poisons. How much is taken determines the effect.

A small amount gives a stimulant (increases activity). A greater amount acts as a sedative (suppresses activity). A still larger amount acts as a poison and can kill one.

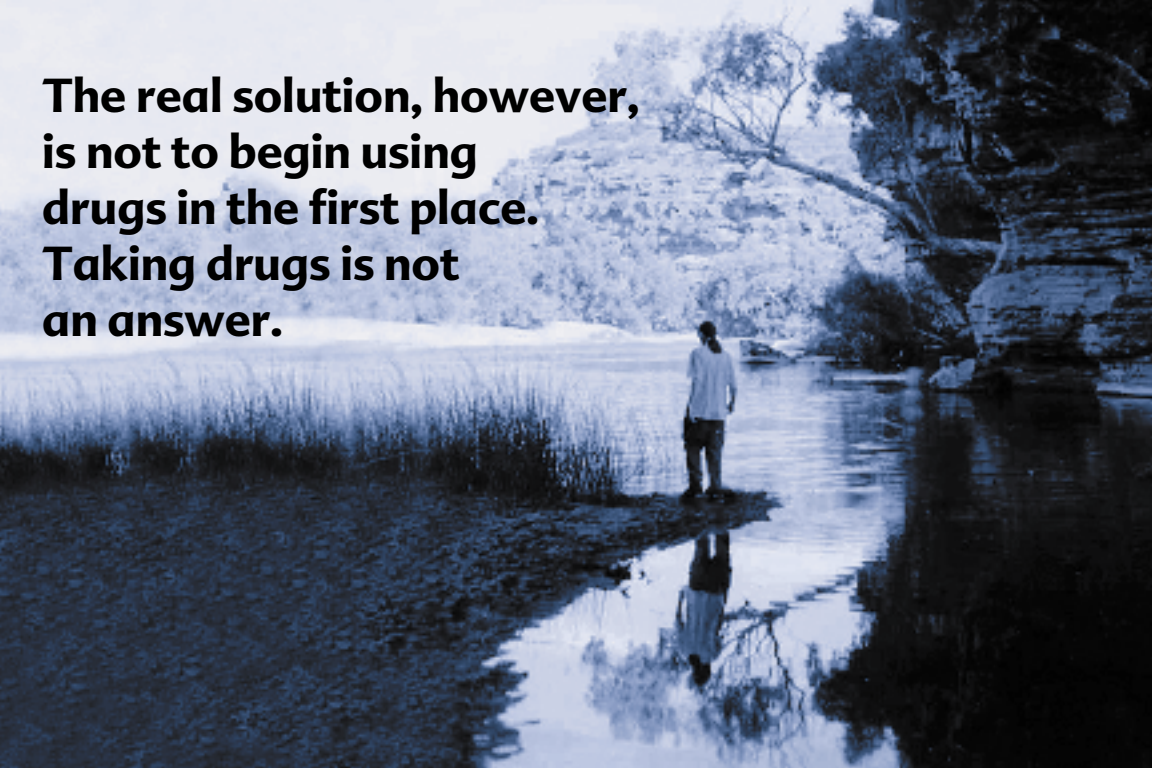
This is true of any drug. Only the amount needed to achieve the effect differs.

But many drugs have another liability: they directly affect the mind. By reactivating incidents from a person's past, below his conscious awareness,

they can distort the drug user's perception of what is happening around him. As a result, the person's actions may be odd, irrational, inappropriate and even destructive.

Drugs block off all sensations, the desirable ones with the unwanted. So, while providing short-term help in the handling of pain, they also wipe out ability, alertness and muddle one's thinking. Long-term drug use robs life of the pleasures and joys which are the only reasons for living anyhow.

**The real solution, however,
is not to begin using
drugs in the first place.
Taking drugs is not
an answer.**



In the end, one has a choice between being dead with drugs or being alive without them.

As terrifying as the consequences of drug use are and as hopeless as they can seem to the addict, there are solutions to the drug problem and, on a broader scale, the war on drugs can be won.

The first step is to understand why a person becomes trapped by drugs. In May 1969, when the international drug crisis was reaching its peak, author and humanitarian L. Ron Hubbard wrote, "When a person is depressed or in pain and where he finds no physical relief from treatment, he will eventually discover for himself that drugs remove his symptoms.

"In almost all cases of psychosomatic pain, malaise or discomfort the person has sought some cure for the upset.

"When he at last finds that only drugs give him relief he will surrender to them and become dependent upon them often to the point of addiction."

Growing up and living in this world can be very hard. Exercise, diet or simply taking a long walk to look at things until one can focus one's attention outward and again feel relaxed can work wonders. Talking problems over with a friend or a minister or trusted family member can also help.

And for the person with a drug problem, there are also real solutions to their addiction. Narconon, a drug rehabilitation program that utilizes the methods of L. Ron Hubbard has a success rate of more than 75 percent. (See www.narconon.org.)

The best solution, however, is not to begin using drugs in the first place. Taking drugs

is not an answer. As difficult as it can be to confront one's problems, the consequences that come with drug use are always worse than the problem one is trying to avoid when he or she begins to take drugs.

And the long slide into hell that comes as a result of taking drugs is even worse.

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PHOTO CREDITS: Page 2: Corbis; Page 3: Alamy; Page 5: Faces of Meth; Page 6: DEA/bottom right: crystal meth; Page 12: Courtesy Attorney General's office, Taswell County, Illinois/right: meth user 1998-2004; Page 19: Corbis.

"Say No to Drugs, Say Yes to Life" is a community drug education and drug prevention program initiated by the Church of Scientology International. It educates children and youth about the dangers of drugs and challenges them to remain drug-free and to set a good example to their friends and family.

The program acts through clubs run by and for young people. These clubs reinforce a positive message of drug-free living through the distribution of educational literature that provides facts about illicit drug use and the effects of drugs on the spirit, mind and body, through group activities to popularize drug-free living, and through the support of civic leaders and members of other groups with similar aims.

Experience has taught us that people in general, and youth in particular, when they understand the destructive effects of drugs, and when they are provided with positive role models and the support of their peers to remain drug-free, they inevitably come to the conclusion: "I don't want to take drugs" — which is of course the ultimate purpose of the program.

“SAY NO TO DRUGS, SAY YES TO LIFE”

This booklet is presented as a public service by the Church of Scientology International. It is part of a series of booklets to educate young people in the truth about drugs. The booklets in this series provide the facts about cannabis, crack and cocaine, crystal methamphetamine, ecstasy, heroin, LSD, prescription painkillers and other addictive drugs, allowing the reader to decide for himself to live a drug-free life.

To obtain more copies of this or the other booklets in this series, or to learn more about the discoveries of L. Ron Hubbard and his workable technologies that rid people of the harmful effects of drugs, visit or contact:



www.notodrugs-yestolife.org

Or contact:

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