

21 Most Frequently Asked Questions about Drugs

Questions provided by MIT Students and Answers by:

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List of Questions

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- **Sometimes I take Vivarin or No-Doz to help me stay awake when I need to study. Is this OK?**
- **My roommate drives me crazy! He drinks and uses drugs in the room all the time. What can I do to make him be more considerate?**

Q: What are the consequences of alcohol both short and long term?

A: Most of the serious short-term effects of alcohol are the result of the behavior and poor judgment that people can have when drinking. In young people, most of the toxic effects reverse themselves. For example after a heavy binge, a person can have temporary liver damage (which can be seen on lab test) but this will resolve in a few days. A very rare but very serious medical complication is alcohol poisoning, which is a direct effect of large consequences of alcohol on the central nervous system which can result in death. The other severe medical consequence is inhaling vomit while lethargic, which can cause suffocation or pneumonia.

There are a number of long-term effects of alcohol use. One is tolerance, which means that one needs more and more alcohol to get the same behavioral effect. It also means that when the person doesn't get alcohol, he or she can have a "withdrawal" reaction: sweats, shakes, high pulse and blood pressure, and sometimes a seizure or a change in consciousness known as delirium. An unfortunate consequence of tolerance is that in order to get the same effect, the person is consuming larger and larger amounts of alcohol which has toxic effects on several organ systems. There can be liver

damage, ultimately resulting in scarring of the liver and severe liver disease. The heart can be damaged, and also the brain resulting in memory difficulties. Inner city hospitals often treat many of the medical consequences of "end stage" alcoholics, but even a chronic long term user who functions highly will not escape the long term effects, especially on the liver.

Q: What happens when you black out?

A: Blackouts appear to be the result of the parts of the brain that store "autobiographical" memories being affected in a way that they do not work properly (it is a general effect, similar to general anesthesia). Some people have blackouts where they have partially recorded events and will remember them when reminded; other people will have recorded nothing at all. Remember, blacking out is not the same as passing out which is why people tell you things you did that you might not have remembered.

Q: Is there truth to "Beer before liquor, never sicker. Liquor before beer, have no fear!"?

A: Beer and Liquor both contain alcohol. Beer has substantially less (about 4-6 % depending on the brand). Hard alcohol is roughly 40-60% alcohol. Being sick from alcohol occurs when you have too much of it in your system. If you drink beer before and are not "chugging" but rather sip, the alcohol goes into your system slower. That in combination with hard alcohol alone does not make you feel sick, but drinking too much alcohol in general does. The only truth to the statement, "beer before liquor, never sicker" is that you might drink more hard liquor if your judgment is impaired rather than if you started out drinking harder alcohol, where your judgment might be intact and drink the hard alcohol slower.

Q: How can I drink to have fun and minimize the negatives?

A: Alcohol is an interesting drug. In low doses it actually causes feelings of euphoria (nice tingly feeling usually called a "buzz"). This is about 1 to 3, 12oz beers (depending on your gender, size, and other biological factors). After that buzz feeling your body starts to become more depressed. The thought is to drink more to get back to that buzzed feeling. Unfortunately, the more you drink the more depressed your body becomes. Drinking water or another non-alcoholic drink between alcoholic drinks, counting your drinks, eating before and while

drinking, and avoiding drinking games are some of the ways to keep you from experiencing the negative consequences of alcohol use.

Q: When should I call for help for a drunk friend? How should I take care of them when they are sick?

A: There is an excellent website describing how to get help for a drunk friend. (<http://cdsa.mit.edu/help/>), If someone is so intoxicated that they do not know where they are, or cannot be aroused or has a low respiratory rate, it is a good idea to get medical help immediately. If you are feeling uncomfortable with how someone looks, or feel as though you have to stay up all night with them, then it is better to have them transported to MIT medical for observation.

Q: How dangerous is it to mix alcohol with prescription drugs?

A: Mixing alcohol with antidepressants can result in a lowered alcohol tolerance, people can get more drunk on less alcohol. As well, since people are on antidepressants because they are depressed, you have to worry about the dangers of alcohol lowering inhibitions in a person who may already have self-destructive impulses. Mixing alcohol with sedatives can be more dangerous since both the alcohol and the sedative can suppress respiratory drive. Opiates, such as oxycontin, can be particularly dangerous as people may take them when they are already quite intoxicated and then be hit by the synergistic sedative effect of the alcohol and the opiate and become comatose. Mixing stimulants with alcohol presents the special danger of an energized person with poor impulse control and impaired judgment, not a good mix!

Q: How bad are those caffeine pills you buy over-the-counter?

A: Caffeine is a commonly used drug. In the short term it can increase alertness. People become tolerant to it very quickly so it is not particularly suitable for long term use. People rapidly get to the point where they need it to function, but only have the side-effects of not being able to sleep and anxiety, without the benefits. Every year, a couple of students are admitted to the infirmary because they can't study and can't sleep and feel panicky because they have been taking high doses of caffeine for several days. So be careful!

Q: What about Red Bull and other caffeine drinks?

A: Caffeine has the same effect whether it is in coffee, Red Bull, or a pill. You can look at the dosages to compare the strength. A recent fad has been to mix Red Bull and alcohol to keep alert when drinking. Keep in mind that a stimulant and depressant together can cancel some of the warning signs out and cause you to drink more than you ordinarily would have. There have been students at MIT who report that when the caffeine wears off they feel much drunker than they wanted to be or are more likely to throw up at the end of the night.

Q: Is pot really addictive?

A: People do not develop a physiological dependence to marijuana to the point where they have physical withdrawal. (as they do with alcohol or opiates). However, some people do experience some "psychological" aspects of addiction. Like any drug, some people can have it occasionally without any consequences and another person (or even the same person in a different setting) find that they begin to crave the drug in situations that may cause them negative consequences, i.e. at work.

Q: Is Salvia a hallucinogen? I hear it is legal, is that true?

A: There are many types of the Salvia Herb. The Salvia that you are referring to is Salvia divinorum. Salvia divinorum is an herb that is native to Mexico. Salvia divinorum is chewed or smoked to induce illusions and hallucinations, the diversity of which is described by users as similar to those induced by ketamine, mescaline, or psilocybin (Department of Justice). As for the legality as of right now it is legal in the US but illegal in some states. There is talk about making it illegal in Massachusetts.

Q: What are the dangers of Methamphetamine?

A: The short-term effects of methamphetamine can include addiction, agitated and violent behavior, and damage to the brain and heart. Long term effects include intense paranoia, visual and auditory hallucinations, and out-of-control rages.

Q: What are the dangers and legal implications in producing your own drugs?

A: Producing drugs in general is illegal and depending on the drug and the amount you have produced, can get you into trouble with the local, state, and/or federal law. Some of the dangers reside in the bi-

products of the drugs made. These bi-products could be dangerous to breathe and/or be combustible and flammable. In the case of Methamphetamine physical injury can result from explosions, fires, chemical burns, and toxic fumes.

Q: Are prescription medications like Vicodan better for you than illegal drugs?

A: Any drug can be abused whether it is prescription, over the counter, or purchased on the street. Both illicitly produced and licit drugs can be dangerous in large amounts and can have addictive potential. Opiates are the most commonly abused prescription drug. Alcohol is the most commonly abused drug of all and by virtue of its wide use has the greatest number of adverse consequences.

Q: Can LSD permanently alter the brain? What exactly are the effects of LSD?

A: Not much is known about what LSD does to the brain in the long term. It is known that some people can have flashbacks after LSD use. It is also thought anecdotally that people with a personal or family history of schizophrenia may be more likely to be permanently affected by the drug.

Q: If a student has a bad experience with a drug and seeks help from administration, will the student get in trouble?

A: Providing no other laws have been broken, no. GETTING HELP should be your priority. If you don't get help for a person in need not only are you harming the person but you might get in trouble with local, state, and/or MIT Police. For more information about the MIT Alcohol policy for students go to: <http://cdsa.mit.edu/goodsamaritan/>

Q: Is there any way to cure a hangover?

A: A hangover is the awful feeling that sometimes occurs the next morning after an episode of excessive drinking. As part of a hangover, some people may experience headache, body aches, fatigue, heartburn, nausea, dehydration, etc. When the body takes in more alcohol than it can metabolize, blood alcohol levels remain higher longer, and the likelihood of a hangover increases. Basically, a hangover is your body telling you that you've had too much to drink. Many people wrongly believe that remedies like coffee, cold showers, or taking Tylenol can cure a hangover. NEVER take Tylenol while

drinking it could react adversely with the alcohol in your body and cause permanent damage to your liver. Nothing can cure a hangover except time! However, drinking lots of water can help rehydrate your system and ease the discomfort.

Q: Taking ecstasy or "shrooms" allows me to expand my mind. If they do good things for me, what's the big deal?

A: While taking drugs like ecstasy (MDMA) or doing "magic mushrooms" reportedly allows some people to experience feelings of heightened physical and emotional sensation, increased empathy, and communicative ability, they are not without their concerns. Ecstasy ("X"), a hallucinogenic amphetamine drug, is often taken at dance clubs (raves) and concerts. Because ecstasy is an amphetamine, it can cause delusions, feelings of anxiety, and paranoia. Additionally, tolerance to ecstasy develops quickly and overdose is possible. Moreover, during those all-night raves, dancers on ecstasy risk extreme dehydration, heat exhaustion, and dangerously high body temperature. Recent evidence also states that ecstasy can cause neurological damage over time (it attacks areas in the brain cells that produce the neurotransmitter serotonin). Psilocybin mushrooms ("shrooms"), naturally-occurring hallucinogens, vary in potency and effects based on the amount taken (dose). Tolerance to psilocybin drug effects develops rapidly. Side effects include sudden, acute anxiety reactions, nausea, feelings of numbness, and increased body temperature, pulse rate, and blood pressure. In some cases, psilocybin can result in more prolonged episodes of visual illusions and hallucinations that resemble psychotic states.

Q: Is nitrous oxide use a problem at MIT?

A: Nitrous oxide (also known as "laughing gas" or "whippets") is a colorless, sweet-smelling gas that produces giddiness, a floating sensation, and a mild, pain-free state. Recreational use of nitrous oxide can be hazardous, even fatal, because of the risk of asphyxiation and accidents due to decreased motor control. Despite misperceptions, nitrous oxide use at MIT is not higher than the national average (2% of MIT students report using inhalants such as nitrous oxide compared to 2.2% of college students nationally; 2000 data).

Q: What is the deal with drug testing?

A: Drug testing is becoming a common practice in the military, sports, and business worlds. Although there are some concerns around "false positive" results (positive test results when no drugs are present), medical laboratories can perform drug tests with up to 97% accuracy. The following are the average lengths of time that various substances will be detectable in the urine:

- Alcohol: 2-14 hours
- Amphetamines: 48 hours
- Barbiturates: 24 hours (short-acting) or 2-3 weeks (long-acting)
- Cocaine: 2-4 days
- Narcotics: 48 hours
- Marijuana: 1-5 days (casual use) or up to 30 days (chronic use)
- PCP: 8-14 days (casual use) or up to 30 days (chronic use)
- Benzodiazepines: 3 days (single dose) or 4-6 weeks (long-term use)

Q: Sometimes I take Vivarin or No-Doz to help me stay awake when I need to study. Is this OK?

A: "Alertness tablets" like Vivarin and No-Doz are over-the-counter drugs that are comprised of large amounts of caffeine. In fact, Vivarin contains 200 mg. of caffeine - that's the same amount as a demitasse espresso and two times as much as a cup of brewed coffee! Although caffeine is a legal and widely-consumed stimulant drug, caffeine abuse, dependence, and withdrawal are serious problems. Tolerance to caffeine develops quickly and excessive use is associated with nervousness, mental confusion, irritability, muscle twitches, and insomnia. Withdrawal symptoms occur after long-term or high-dose use and can include headaches, fatigue, depression, sleep problems, and irritability.

Try to avoid using these over-the-counter drugs if possible. When the crunch of schoolwork demands a great deal of your time, give these a try to help you study:

- **Exercise** (especially late in the day)
- **Eat** a late-night snack
- **Go outside** for some fresh air
- **Take a shower** or splash some water on your face
- **Get sleep!** You can't function mentally and physically if you're sleep-deprived.

Q: My roommate drives me crazy! He drinks and uses drugs in the room all the time. What can I do to make him be more considerate?

A: One of the most challenging aspects of college life is learning how to coexist with other people living within such close proximity. This can be an especially difficult task when there is a lack of respect for each other's space and living habits. It can help to make your roommate aware of how you are feeling and of your concerns. Although you may think that it is easier to just ignore the problem, it will only bother you more if you let an unhealthy situation continue. Do not neglect your needs - talk with your roommate! Remember to stay calm, pick an appropriate time, use "I" statements to focus your feelings so you don't sound like you're blaming your friend and try to offer a solution (e.g., "I'm often unable to study because you're partying in the room." "Could we try to work something out?") Hopefully, you can have an open discussion about your needs and come to a compromise that will foster a healthier living environment. If speaking to your roommate directly doesn't do the trick, inform your GRT or Housemaster about your situation. They can help you decide what needs to be done so that you can have a positive living experience while you're here at MIT