

NPS AT CREW ANNUAL REPORT 2015-2016



Version 1.1

24 May 2016

This report was created as a supporting document to the end of year report presented to the Scottish Government Drug Policy Unit (DPU). The NPS Coordinator post at Crew was funded by the DPU and this document provides an update of the NPS landscape in Scotland over the funded period (01 April 2015 – 31 March 2016).

Crew was established in 1992 in response to the rapid expansion of recreational drug use. We work throughout Scotland to provide credible, up-to-date information on the drugs that people are taking so they can make informed decisions about their own health.

This document is intended to represent the experiences of our front line services over the last year, and therefore contains few academic references in the main text. For further reading on NPS please see Annex 1. We thank our volunteers, service users and partners for sharing their experiences with us and our heartfelt thanks go out to everyone who has supported Crew. Thank you!

If you would like to support the work of Crew we would love to hear from you! Email us at: admin@crew2000.org.uk or visit www.justgiving.com/crew2000/

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Introduction

New Psychoactive Substances (NPS) are drugs that can have mind altering properties but are not always controlled by drug laws. They are commonly known as “legal highs”.

The effect, duration and appearance of the drug will vary but most NPS are chemicals produced in a lab and come in powder, pill, blotter or herbal form. A liquid version, containing synthetic cannabinoids, is available for use in e-cigarettes/vapourizers.

NPS are not directly marketed as recreational drugs and are usually branded with names which are euphemistic and misrepresentative. Examples would include herbal extracts, room incense, novelty collectors’ items and research chemicals. In the recent past, NPS were often sold under even more deceptive names, such as ‘plant food’ or ‘bathsalts’ but this is less common now and these products are not dual purpose.

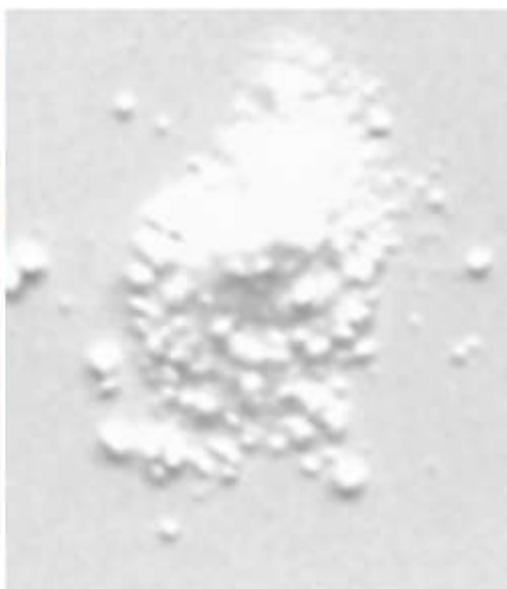
The term legal high might imply that these substances are safe but this is an incorrect assumption. This misconception extends to drugs in general and some people believe that alcohol and nicotine are less harmful than illegal drugs, which isn’t true in many cases. Although the term legal high is misleading, it is difficult not to use, especially when working with people who take them. Also, if we get caught up in blaming terminology, we fail to address the bigger issues regarding regulation and availability.

Although legislation is due to come into force from the 26th of May 2016, currently, there are no regulations on having these products out of sight, or in plain packaging; there is no regulation to limit purchasing hours or to prevent sale to minors and this combined with a lack of investment in education, has helped the market to flourish.

The appeal of NPS transcends many levels of society and this is not an issue confined to young people despite the UK Government's manifesto commitment to *"create a blanket ban on all new psychoactive substances, protecting young people from exposure to so-called legal highs"*.

We must avoid stereotypes but pockets of problematic NPS use have appeared in a range of settings including (but not limited to) those with no fixed address, those in recovery, those with mental health issues, LGBT groups and those subject to mandatory drug testing.

Despite there being hundreds of products and brand names in circulation, there are only a handful of popular chemicals being used in Scotland. One of the most common types of NPS are synthetic cannabinoid receptor agonists (SCRAs) or synthetic cannabinoids. As these terms are difficult to pronounce, they are commonly referred to as incense or spice. This can cause some confusion, as “Spice” is also used as a stimulant brand name.



The stimulant 'spice' | Crew | MAR16

Marketing

The marketing is clever and looks legitimate. It is not representative of potential harms and people may underestimate the drug.

NPS packaging is normally bright, colourful and appealing, although they can also be purchased in clear unmarked bags or wraps. The marketing of each category of drug can also follow common themes. For example cannabinoids often use brand names which describe the effect and may sound dark and sinister such as Voodoo, Black Mamba, Pandora's Box and Head Trip. Stimulants are normally branded with light and bright colours with names such as Pink Panthers, Go Gaine, Ching and Crystal.

In shops, online and from dealers, they can be marketed using special promotions including variety packs, free samples and buy two get one free offers.

Although most products are marketed as 'not approved for human consumption' they can be purchased in powder, capsule, pellet or joint form.

Despite clever marketing and warnings on most packets, manufacturers are prohibited from citing any safety information, such as how to take it, how many doses are in a packet, what the expected effect is or how long the effects will last.

Most products packaged in the UK list the ingredients on the back of the packet, albeit as a chemical formula. Last year 16 out of 17 packets tested by TICTAC for Crew contained the ingredients listed on the packet (Crew Annual NPS Report, 2014-2015). Although the chemical formula may not always be conventionally correct, it does generally allow the contents of a package to be determined and it is often not the case that 'we do not know what is in the packet'. It is easier to tell what you are taking with branded NPS, compared to most traditional drugs which are sold with no information. However, this year we have seen an increase in products from the USA (Annex 4). These products often list ingredients that they do not contain, rather than those that they do, and this may further increase harm as people will struggle to identify what the packet actually contains.

Price

Although they are generally cheaper and purer than illegal drugs, the price of NPS has continued to increase. The price varies across the country but in the last two years the average price of 1g of synthetic cannabinoids from a shop has increased from £7 per gram to £10 per gram and the average price of stimulants has increased from £10 per gram to £20 per gram. We believe this reflects the increase in demand.

The source price of many NPS is low, especially when bought in bulk, and their high profit margin makes them attractive to vendors. Although the price per dose may be a motivating factor for use, once someone builds up a tolerance to the drug they need to take more to achieve the desired effect. When someone is dependent on a substance they may find themselves regularly spending more than they can afford which brings additional complications related to debt.



An example of sophisticated NPS branding and design | Crew | JAN16

Effects

[The Drugs Wheel](#) categorises drugs based on effect. It is a guide to some of the most commonly-used recreational psychoactive substances in the UK and is regularly updated to reflect changes in law.

Details on individual substances are available by searching on [MY CREW](#). The most commonly recorded legal NPS at Crew are currently 3-FPM, diclazepam, 5F-AKB48 and 5F-PB22.

The use of drugs is widespread in our society and includes not just NPS and illegal substances but alcohol, caffeine and medicines, with each normally taken to achieve a desired effect.

People take legal and illegal drugs for many, often similar reasons, including: relaxation, addiction, insomnia, pain relief, escapism, social norms, to get high, self-medication, to have fun, to lower inhibitions, peer pressure, to increase connection with others and music, to increase creativity, increase sexual arousal, curiosity, tradition, religious or spiritual beliefs, to lose/gain weight, to cope with grief, loneliness, trauma and others.

In addition to the reasons above NPS use is incentivised due to their availability, lack of detectability, cost, purity and legal status.

The overall effect of a drug depends on a number of factors including the type of drug, how the person is feeling, where they take the drug, what dose is taken (packets contain multiple doses) and if they are mixing with other substances (including alcohol).

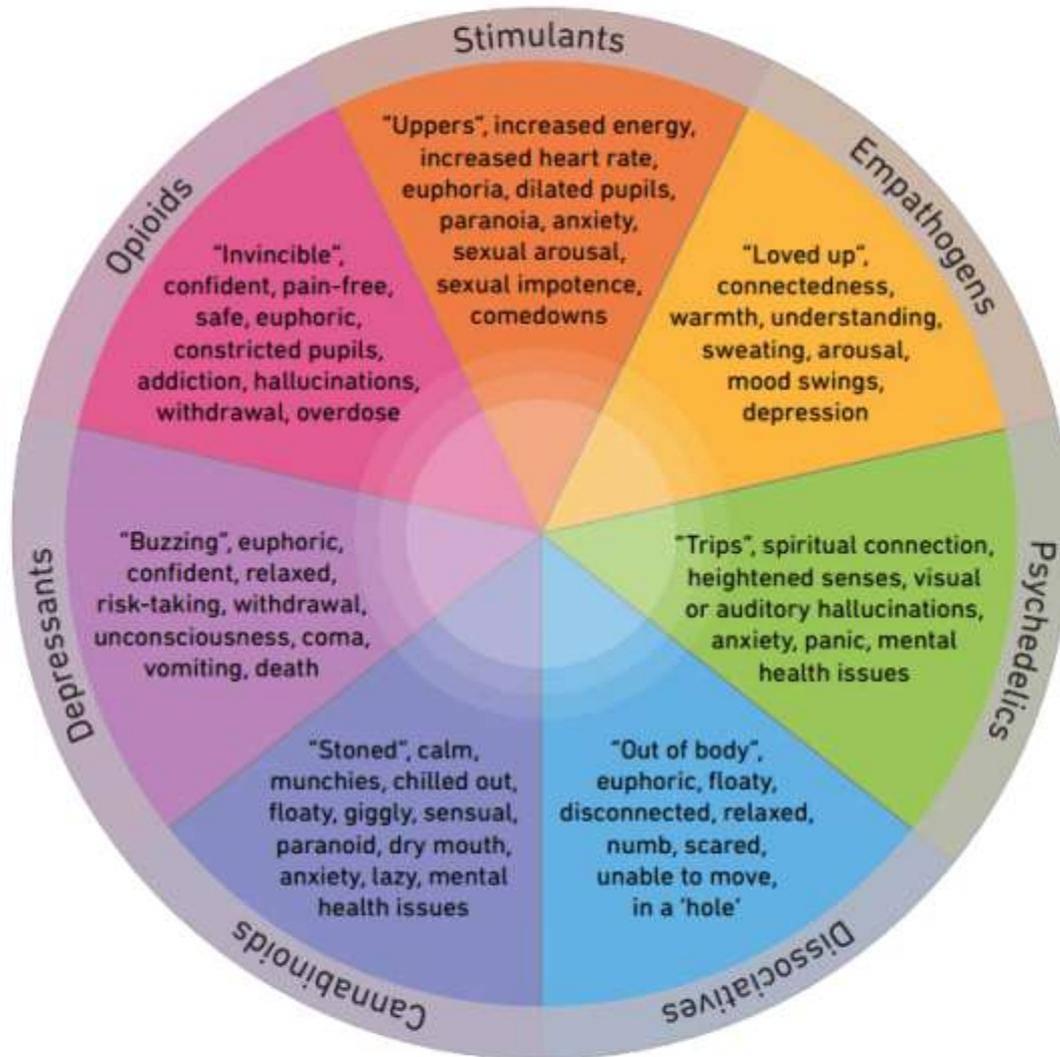
The most common NPS categories are stimulants ('uppers') and cannabinoids (see Annex 4).

Stimulants generally give effects similar to cocaine and amphetamines. They can increase heart rate, confidence, euphoria and energy.

Synthetic cannabinoids are chemicals broadly designed to mimic the effects of cannabis (i.e. they act on cannabinoid receptors) although this comparison is crude and used often as a marketing ploy rather than due to any real similarity. Desirable effects include relaxation and detachment from reality.

The Drugs Wheel

A new model for substance awareness



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Designed in collaboration with DrugWatch: an informal association of charities, organisations and individuals who share an interest in establishing a robust early warning system in the UK for all types of drugs.



Negative Effects

Many people who take drugs will experience few long-term negative effects. Short-term negative effects are common and in some cases, longer-term effects cause severe health issues. Both of these are discussed below. It is worth noting that, although they are currently legal, synthetic cannabinoids are particularly problematic.

Comedown

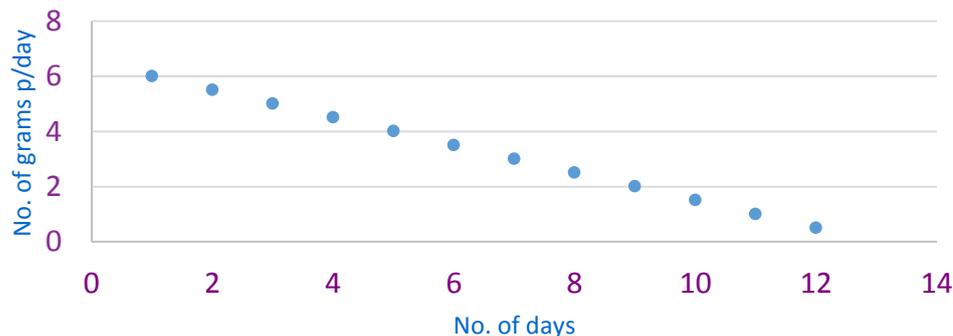
- A comedown is the process your body goes through when recovering from the effects of drugs, like a hangover is to alcohol.
- The severity of a comedown will depend on dose and type of drug but it normally involves feeling low and emotionally fragile for a few days.
- If someone is coming down they should eat well, keep hydrated, rest and try to resist taking more drugs.

Dependency

- It is possible to become physically and psychologically dependent on NPS and this must be taken as seriously as addiction to other drugs.
- Dependence can build up quickly with constant use. It is recommended that people take regular breaks from drug use and try to have at least a few drug-free days per week.

Withdrawal

- Withdrawal is the negative symptoms experienced after cessation of drug taking. Like a comedown, the severity will depend on the dose and type of drug.
- It can be painful and long-lasting and withdrawal symptoms can include anxiety, irritability, hallucinations, seizures, vomiting, diarrhoea, pain, fever, chills, shakes and a lack of appetite.
- There are no substitute drugs, like methadone, for any NPS although in some cases anti-psychotics, short-term benzodiazepines, anti-depressants and sleeping tablets may help.
- An individual may take other drugs cope with NPS withdrawal symptoms. Be aware of a reduced tolerance to other drugs and they may need a smaller amount than they think to achieve an effect. This is especially important with opiates and people should be encouraged to access naloxone (which will reverse an opiate overdose).
- Withdrawal symptoms can act as a motivation for continuing to take drugs.
- Some people may prefer to taper off drug use over the periods of a few weeks or months to try to lessen symptoms. An example from Drugs Action is shown below.



Physical health

- The effect on physical health depends on the type of drug and route of administration.
- Health is also affected by causes secondary to the drugs psychoactive effects. For example, some drugs will reduce the desire to drink, eat and sleep. This can lead to dehydration, rapid weight loss and people getting less rest than they require.
- Health can also be affected by contracting viruses and infections which can be spread by engaging in unsafe sexual practices and through sharing drug paraphernalia including needles, spoons, tooters/snorters and pipes.

Sexual health

- Inhibitions are lowered when under the influence of some NPS and this may lead to risky behaviour e.g. unprotected sex, rougher sex resulting in condoms breaking and abrasions.
- Some drugs may also interact with and reduce effectiveness of oral contraceptives.
- Workers should encourage the use of condoms, dams and lube and regular testing for blood borne viruses (BBVs) and sexually transmitted infections (STIs).
- If someone regularly has sex whilst under the influence they may lose the ability to enjoy 'sober sex' and become dependent on drugs for sexual functioning.
- Some drugs impair sexual functioning e.g. they reduce ability to establish/ maintain an erection.
- Chemsex (the use of drugs in a sexual context) can increase exposure to BBVs/STIs and lower inhibitions may lead to condom-less sex with multiple partners.

Mental health

- Crew's service users have reported that synthetic cannabinoids, dissociative and stimulant NPS have caused episodes of drug induced psychosis.
- The effect of synthetic cannabinoids can include aggression, depression, anxiety, paranoid delusions and suicidal ideation.
- Stimulant based substances can trigger hallucinations, delusions and thought disorders.
- In high doses NPS use has been linked to chaotic and out of character conduct, inappropriate and risky sexual behaviour and a lack of inhibitions. NPS can also exacerbate existing mental health conditions.
- If someone presents in a drug induced mental health crisis, drug services may not have the skills or facilities to help. Mental health services may be hesitant to help as it is 'drug induced'. This leaves little help available.
- The significance of dual diagnosis (combined mental health and drug issues) should not be underestimated.

Polydrug use

- Taking multiple substances (including medicines and alcohol) can increase the risk and frequency of side effects including injury and overdose.
- Many people may not consider medicines, alcohol and NPS to be drugs therefore it is important they are asked about all substances, not just illegal drugs.
- Naloxone should be administered to anyone suspected of having an opiate overdose, this includes methadone and other prescribed opiates.

Injecting related issues

- Injecting NPS is very risky and most NPS injectors are injecting stimulants (primarily mephedrone, mexedrone and 3-FPM).
- The process of injecting NPS differs from heroin as citric acid should not be used.
- Some NPS contain compounds which will not dissolve (such as microcrystalline cellulose) and injecting these substances blocks veins, causing wounds and abscesses.
- Poor injecting practice and/or hygiene also contributes to infections seen across Scotland.
- The high from injecting stimulants is short lived and people may inject more frequently (than they would with heroin).
- Discarded sharps pose a public health concern and people should be encouraged to dispose of needles responsibly.
- A harm reduction guide has been created by the Scottish Drugs Forum and NHS Greater Glasgow and Clyde and can be downloaded from [SDF's website](#).



Wounds related to injecting NPS | NHS Lothian | 2015

Drug related death (DRD)

- The definition of a 'drug-related death' is not straightforward although generally a drug related death can be defined as a death 'where a drug listed under the Misuse of Drugs Act (1971) was known to be present in the body at the time of death' (Drug-related deaths in Scotland in 2014 | National Records of Scotland | 25 August 2015). This means deaths related to legal NPS may not be reported.
- There are also other deaths associated with drug use which are not officially counted in statistics. Examples include death due to suicide, accidents, infection and organ failure.
- An excellent paper describing 19 deaths involving ethylphenidate was published in December 2015 (A review of ethylphenidate in deaths in east and west Scotland, Parks et al, 2015). It includes deaths, some of which are not included in statistics due to ethylphenidate being legal at the time and/or the cause of death not been related to the toxicity of the substance but secondary effects such as trauma and infections.
- In many DRDs more than one substance contributed to the cause of death and we must not underestimate the impact or prevalence of polydrug use.
- As the number of novel drugs in circulation continues to increase we may not have the chemical standards required to detect all substances in post-mortem toxicology, therefore some deaths related to NPS may also be missed as we do not have the necessary technology available.



Anchor Close | Edinburgh | July 2015

Acute Behavioural Disturbances

Although the condition is not officially recognised by some, there have been several instances of acute behavioural disturbances ('excited delirium') in Scotland.

Excited delirium is an acute behavioural disturbance which should be treated as a medical emergency rather than a public order offence. It was originally documented in the 1800s, as Bell's Mania, but recently there has been an increase in cases thought to be due to the use of NPS. In this situation inappropriate or excessive restraint can be fatal.

The condition can be triggered by the use of psychoactive drugs including cocaine, amphetamines, stimulant NPS and synthetic cannabinoids. In rare cases it is caused by a psychiatric condition.

Although the factor or factors that induce the condition are unknown, excited delirium will cause the patient to become agitated, which increases muscle activity and alters mental state. This may progress to hyperthermia and symptoms include dehydration, muscle breakdown, acidosis and kidney failure.

People should be aware of the following symptoms:

Symptoms

1. Sudden change in behaviour
2. Naked/partially clothed
3. Attraction to glass/reflective surfaces
4. Confusion/florid hallucinations – will not respond to reason
5. Agitation, constant pacing/movement
6. Destruction of property but non-suicidal (may harm themselves accidentally)
7. Significant pain tolerance (little response to traditional control and restraint measures)
8. Rapid breathing or panting, potential for cardiac arrest if restrained
9. Unusually strong
10. Sweating and hot to touch

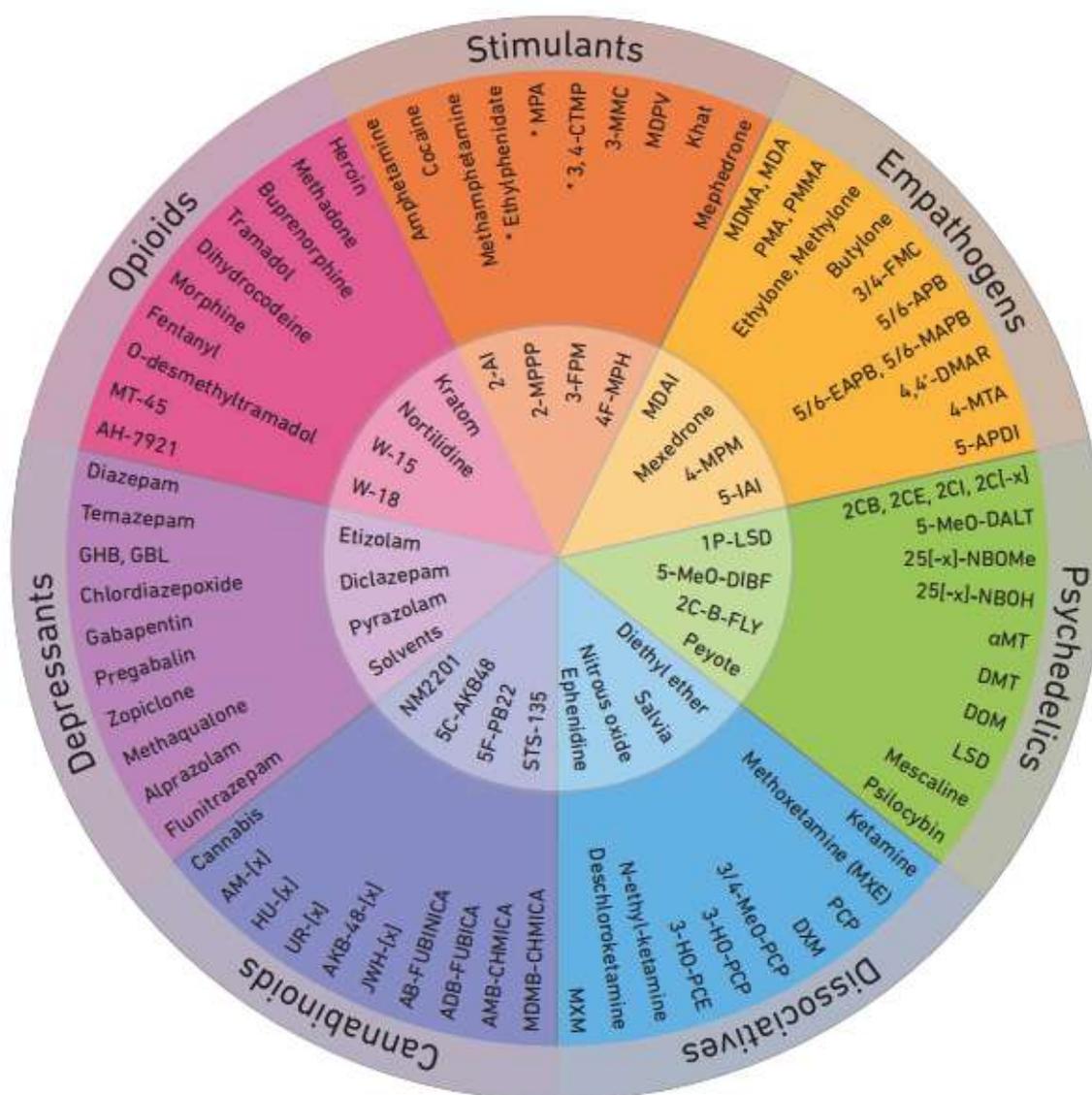
Guidance

1. Early identification and admission to A+E will save lives. Suggested treatment involves rapid sedation and cooling followed by emergency anesthetic
2. Treat as medical emergency not public order offence or mental health episode
3. Call ambulance rather than escorting in police vehicle
4. Maintain direct visual observation at all times
5. Direct to A+E rather than a psychiatric unit
6. If restraint is absolutely necessary do so for the shortest time possible and using the least restrictive method (e.g. secure temporarily at knees rather than thighs)
7. If you can't restrain upright, try to keep person on side rather than prone/facing down
8. If possible have observer directing those restraining to observe breathing and warn staff of risks e.g. biting

The Drugs Wheel

A new model for substance awareness

[UK version 2.0.2 colour • 26/05/2016]



Outer ring: Controlled under the Misuse of Drugs Act 1971
or The Human Medicines Regulations 2012

Inner ring: Controlled under the Psychoactive Substances Act 2016

* Temporary Class Drug Order

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Designed in collaboration with DrugWatch: an informal association of charities, organisations and individuals who share an interest in establishing a robust early warning system in the UK for all types of drugs.



Stimulants

The most common NPS stimulants seen at Crew are:

Mephedrone (class B), mexedrone, methiopropamine (under TCDO) and 3-FPM.

The following brand names have been associated with NPS stimulants:

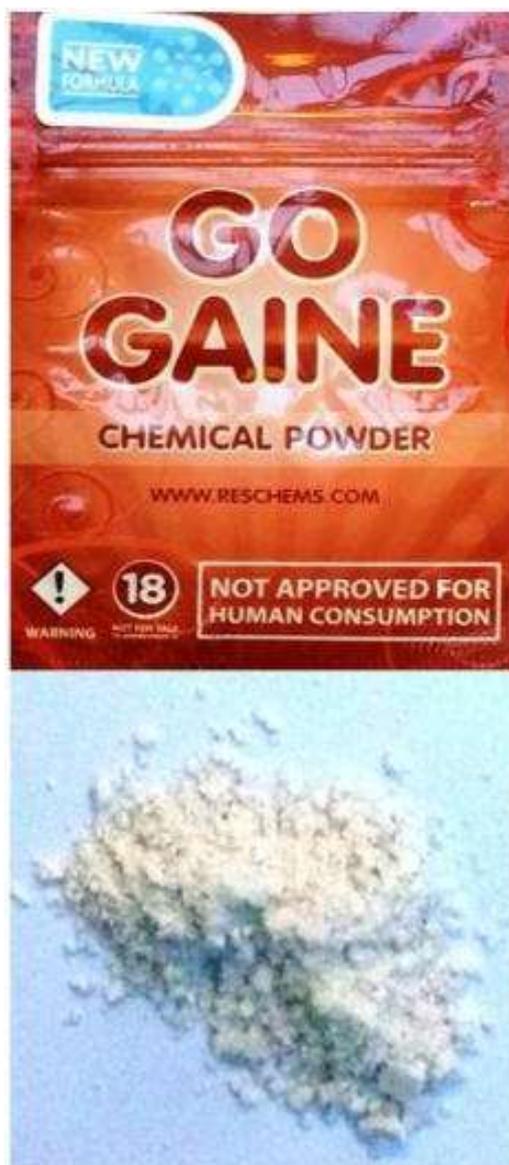
Air, Bingo, Blanca, Bliss Ultra, Blow, Blue Stuff, Bubblez, Bullet, Bumpin, Burst (ocean), Candy Flip, Chang, Charge, Charles, Charly Sheen (and/or MDAI), China White, Ching, Columbian (Gold), Crisstal, Crystal (clear), Doves, Dust till Dawn, El Blanco, Exotic (ultra/strong), Focus, Go Gaine, Gogo Dust, Green Beans, Happy Me (Euphor-e), Happy Rasta, High Grade, Ice-n-berg, Ivory Dove, Jumping Beans, Keep Calm and Sparkle On, Lady B's, M+Ms (and MDAI), Magic Crystals, MexeCat, Mexedrone Storm, Mind Melt, Mr White, NRGGen, Pablo, Pink, Pink Panthers (and/or MDAI, 5-IAI, 2-AI), Poke (extreme), Psyclone, Pulse, Quack, Quackers, Quicksilver, Red Rhino, Rush, SCHNIFF, Severe Amnesia, Snow Blind, Snow White, Snow, Space Rockets, Spangled, Sparkle, SparkleE, Speed Rush, Spice, Sub Zero, Synthacaine, White Breeze, Walter White, WhiteMM, X-plosiv, Yeah Bitch, YPDOUT

Appearance - Most stimulants come in a fine to crystalline white or off-white powder.

Effects - Stimulants are 'upper' drugs. Desirable effects include an improved sense of wellbeing, alertness, energy and motivation.

People taking stimulants can experience a feeling of 'coming up', increased heart rate and breathing as well as a reduced appetite, cravings to re-dose, intense sweating and insomnia.

High doses or long term use can cause memory and attention deficits and reduced decision making abilities. Stimulant NPS can increase sex drive and confidence but decrease the desire to sleep or eat. Repeated high doses of stimulants, combined with little rest, increases the chance of experiencing stimulant induced psychosis which is characterised by hallucinations, delusions and thought disorders.



Route of administration - They can be snorted, swallowed either in a cigarette paper (bombed), in a capsule/pill or diluted in juice, administered rectally (up the bum) or injected (this is the riskiest route of administration). They can also be smoked in pipes or from foil but this is less common. Powders and crystals are crushed to a fine powder before use.

Some stimulants are corrosive and can cause soft tissue damage. They may also be cut with analgesics (such as benzocaine and lidocaine) to mimic the natural pain-killing properties of cocaine. When taking drugs mixed with analgesics the area will feel numb and people may not feel any localised pain until this effect wears off.

The dose will depend on the purity, route of administration and type of stimulant.

Legality - Although some NPS stimulants are now illegal to possess and/or supply, newer ones (including mephedrone and 3-FPM) are legal. Illegal stimulants (including mephedrone) are generally Class B drugs; penalties for possession are up to five years in prison and/or an unlimited fine. Supply holds penalties of up to 14 years in prison and/or an unlimited fine.

Some stimulants (including ethylphenidate and methiopropamine) are controlled under a temporary class drug order. Recently the TCDO for ethylphenidate, which was meant to last 12 months, was extended to 24 months to give more time to fully assess potential harms.

Stimulants that are currently legal will be covered by the Psychoactive Substances Act.

Stimulant case study – Ethylphenidate | Female | 20

I'd go to house parties with my friends most weekends. We would drink and have a few lines of whatever was on offer but when ethylphenidate arrived things changed. It would make me feel amazing. Everyone would be buzzing on it whereas it just made me feel normal, it completed me. I bought it online and started to take it alone when I needed to relax, or focus to get my work done. I tried loads of other research chems but none really compared to it. I was doing design at college and could complete my work in a few hours freeing up the rest of my time to do other stuff, although most of the time I'd just ended up online for hours. I knew things changed when I went to a party and had to leave early cause no-one had any (drugs) but I knew I had some back at my flat. So I made my excuses. I had to leave. I was twitching, nervous and really angry. I still get it online but I think my use is under control now. Things are just a bit shit without it.



Stimulant NPS | Clear baggie inside silver packet | OCT 15

Empathogens

We rarely see empathogen NPS at Crew although 'Sparkle E' lists ingredients as MPA (stimulant) and MDAI (empathogen).

MDAI first became available online in 2009 as a legal alternative to MDMA. Some users report MDMA-like effects.

Appearance – It comes in a white or tan/brown powder with a crystalline look, or in capsule form.

Effects - MDAI is similar to MDMA but less potent and with less stimulant effects and therefore MDAI is commonly found mixed with stimulant NPS in branded packets.

It can make you feel a rush through your body and head, often experienced as a tingling sensation and it also increases your heart rate and blood pressure.

People taking it can experience a mild high, relaxation and increased enjoyment of music as well as stomach cramps, short term memory loss and problems sleeping. It may also make people feel chatty and euphoric and you may feel more connected to music and people and be able to have conversations more freely. Other effects include hallucinations, enhanced colour and sound, jaw tension/clenching, dilated pupils and difficulty urinating. It also increases your heart rate and body temperature.

Route of administration - The powder is often wrapped in cigarette paper and swallowed (bombed), 'dabbed' by finger, or diluted in orange juice which is said to minimise the bad taste. An average dose for swallowing will give around 10 bombs from a gram (this dose should not be taken as a recommendation).

Most reports indicate that people prefer the effects of MDMA to any of the currently legal NPS empathogens.

Legality - Although some NPS empathogens are now illegal to possess and/or supply newer ones (including MDAI) are legal. Illegal psychedelics (including 5-APB and 6-APB) are generally Class B drugs; penalties for possession are up to five years in prison and/or an unlimited fine. Supply holds penalties of up to 14 years in prison and/or an unlimited fine. Psychedelics that are currently legal will be covered by the Psychoactive Substances Act.



Psychedelics

The most common NPS psychedelics seen at Crew are:

Bk-2-CB and 1p-LSD.

The following brand names have been associated with synthetic psychedelic NPS:

Blast, Doves Ultra, B2 powder Bk-2-CB, 1p-LSD, Rainbow Pellets

Appearance – Psychedelic NPS can come in powder, pill or blotter (perforated paper infused with drug) form.

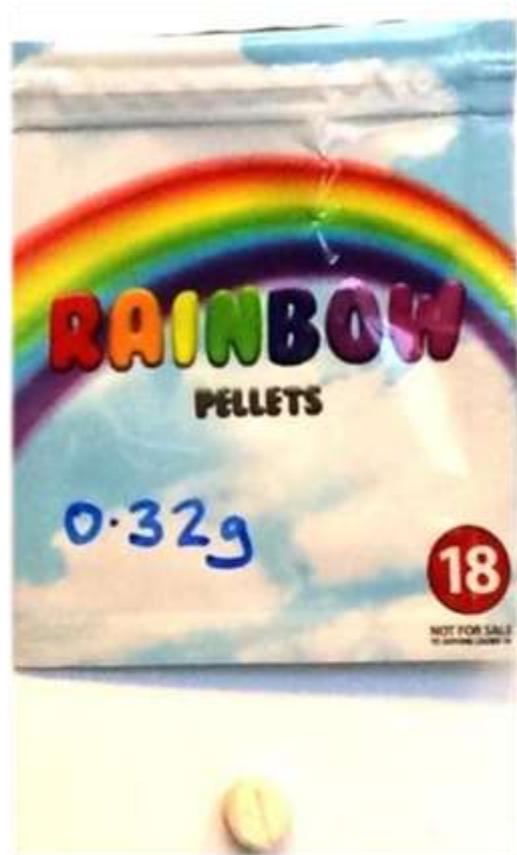
Effects - Psychedelics can alter your senses, causing colours to appear more vivid and music to sound clearer. They also increase your heart rate and blood pressure.

People using them can experience a high, altered perceptions, rushes, relaxation and creative thinking as well as a feeling of time slowing down. Negative effects include nausea, dizziness, sleeplessness, anxiety and confusion.

An average trip may last three to six hours but could be anything up to 24 hours and the more you take the longer it is likely to last. The effects may also take a while to kick in.

Route of administration – Psychedelics can be swallowed in paper or gel capsule. If in blotter form it is normally placed on, or underneath the tongue for a few minutes. Dose will depend on the purity, route of administration and type of psychedelic but many are active in the milligram range meaning one gram can give 1000 doses.

Legality - Although some NPS psychedelics are now illegal to possess and/or supply newer ones (including Bk-2-CB and 1p-LSD) are legal. Illegal psychedelics (including AMT and 5-MeO-DALT) are generally Class A drugs; penalties for possession are up to seven years in prison and/or an unlimited fine. Supply holds penalties of up to life in prison and/or an unlimited fine. Psychedelics that are currently legal will be covered by the Psychoactive Substances Act.



Dissociatives

The most common NPS dissociatives seen at Crew are:

salvia, nitrous oxide and MXP

The following brand names have been associated with dissociative NPS:

Rave, VIP, K-PAX, MonKey Dust, Go Cane

Appearance – Methoxphenidine (MXP) is normally found as an off-white lumpy powder.

Effects - MXP is a dissociative which can have a slight psychedelic effect that is somewhat similar to the illegal drug ketamine. The effects of the drug are dose dependant but include: feelings of euphoria, dissociation, time distortion, giggles, dizziness, loss of balance and numbed feeling or sensation.

Route of administration - MXP is usually snorted or swallowed in a gel cap or in cigarette paper (bombed). Snorting will mean the effects will come on more quickly than if swallowed (perhaps within 2-5 minutes). Injecting MXP is not recommended.

The anaesthetic qualities of MXP can make users more prone to injury and falls. Tolerance to MXP builds up quickly and those taking it regularly are likely to increase their dosage although taking a 1-2 week break from use can reset tolerance. Since MXP has not widely been used for a long time, the toxic dose is not yet known and those who have switched from taking ketamine (or similar drugs) are recommended to start with a much smaller dose than they are used to.

Nitrous Oxide

Nitrous oxide is a chemical commonly known as laughing gas or NOS. It was frequently used as a pain killer by dentists but can now most commonly be found in some food products (to keep them fresh). It is also sold in steel canisters or balloons and is usually inhaled.

Appearance - Nitrous oxide is a colourless gas. Some people say that it has a slightly sweet smell and taste.

Effects - It is a dissociative drug which means it slows down your brain and your body's responses. The effects of nitrous oxide vary depending on how much has been inhaled but they include: feelings of euphoria, relaxation and calmness as well as



dizziness, difficulty in thinking straight, altered hearing and fits of giggles/laughter. In higher doses it can also cause numb face/hands/feet and headaches as well as nausea and vomiting.

The high is short lived and is very more-ish. Some people report taking hundreds of 'whippets' per session and compulsively re-dose until they have none left.

Once inhaled the effects will normally come on within 15-30 seconds and the effects from a single breath of nitrous oxide will last between one and five minutes. Most people recommend one and five minutes between each dose allowing you to breathe normal air and restore oxygen levels.

Route of administration - Because nitrous oxide is a pressurised gas in the canister, there is a risk of harm if you inhale nitrous oxide straight from the canister and it can cause damage to the mouth, throat and lungs.

Inhaling gas from a mask strapped to the face can cause death due to a lack of oxygen and is one reason why nitrous oxide is sold to people in balloons.



Example of cream charger used to dispense N2O | FEB 16



Example of residue built up in cream charger used to dispense N2O | FEB 16

Most nitrous oxide from whippets is food grade and not designed for consumption by humans. As it is manufactured for food it can often be impure and inhaling these impurities increases harm to health.

Although it is commonly cited that nitrous oxide is not as harmful as other substances is not harmless. It depletes vitamin B12 levels and should be avoided by anyone with a deficiency. Repeated use has also been associated with numbness in the extremities, memory impairments and reduced coordination.

Legality - Dissociatives that are currently legal will be covered by the Psychoactive Substances Act. Nitrous oxide will remain legal when sold for food preparation but it will fall under the Psychoactive Substances Act if sold for human consumption.

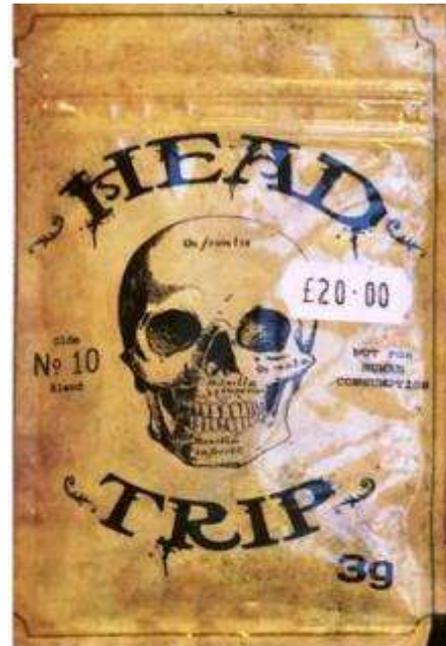
Synthetic Cannabinoids

The most common NPS cannabinoids seen at Crew are:

5F-AKB48 and 5F-PB22

The following brand names have been associated with synthetic cannabinoids:

4:20, Afghan Black, Algerian Blend, Annihilation, Armageddon, Atomic Blast, Atomic Bomb, Bamboo, Berries, Berry Bomb, Big Bang, Black Ice, Black Mamba, Black, Blue Cheese, Blue Magic, Bombay Blue, Bubble Blast, Bud Factory, Bud-a-licious, Buzz Haze, Cherry Bomb, Cherry Drop, Chillout, Clockwork Orange (Reloaded), Cotton Candy (Carnage), Critical Haze, Devils Mamba, Devil's Venom, Devil's Weed, Diablo, Diamond Black, Diesel, Doctor Green Thumb, Doob, Dutchy, Eclipse, Eccess, Epic, Exodus (Damnation, Nightshade, Reborn), EX-SES, Extreme Smoke, Extreme, Fiji, Funky Buddha Gold, (re)Genesis, Gold Seal, Green Crack, Green Dream, Gunslinger, Happy Joker, Hawaiian Haze, Haze, Head Trip, Herb, Herbal Haze, High Grade, Hipster, Holy Smokes, Hot Box, Hush, Iblaze, Ice Bud Supercold, Ja Rush, Jammin Joker, Joker Spice, Juicy Leaf, K2, Kanna, King B, King Cobra, King Joker, Kaos, Kronik, Kush, Layer Cake, Limitless, Loop, Low Rider, Mad Hatter, Magic Dragon, Mary J, Mary Jane, Mary Joy, Meadow Sweet, Moon Rocks, Mr Bad Guy, Mr Nice Guy, New Dimension, Obliteration, Oblivion, Odyssey, One Wish, Pandora's Box (Unleashed, Reborn), Paradox (Fusion), Phoenix, Pineapple Express, Platinum Caution, Psyclone, Rapture, Red Wall, Revolver, Scooby Snax, Sensate, Sirius, Sky High, Smokey, Sonic Boom, Spell Bound, Spice, Spike 99, Spun Out, Squidgy Black, Strawberry Cough, Sub Zero, Sweet Leaf (Obliteration), Tai High, Tangerine Dream, Thingy, Top Gear, Train Wreck, Ultimate, Vertex (Pirate Edition, Space Cadet), Viper, Voodoo (Gold, Mangled), Voyager, Warrior, Weed, White Widow, Wicked, X, XXX Extreme, Zeus, Zion, Zoot



These chemicals target the cannabinoid receptors in the brain. They are full agonists and therefore bind to many different receptors, resulting in powerful effects. They can also cause a range of side effects and are one of our biggest concerns at Crew.

Appearance - They can come in oil or powder form but are more commonly dissolved in liquid and sprayed onto dried plant material. They are then packaged and sold as 'herbal incense blends' using brand names such as Clockwork Orange, Voodoo and Psyclone.

The 'herbal' material is normally green but it can be dyed using food colouring.

They are also often blended with e-cigarette oil which gives a fruity or tea-like aroma but when burnt synthetic cannabinoids are reported to smell like 'burning chemically plastic'.

Effects - Synthetic cannabinoids can make you feel calm and relaxed. Effects normally come on within a few minutes and can last several hours, with the most intense of the effects lasting around 30 minutes.

People taking them can experience enhanced sensations and a feeling of heaviness as well as nausea, anxiety, paranoia, panic attacks, hallucinations and feeling withdrawn. Other negative physical effects include seizures, skin rashes, high blood pressure, difficulty breathing, rapid heart rate, nausea and a dry mouth. People have also reported a strong urge to re-dose, difficulty sleeping, intense withdrawal symptoms and an increase in mental health issues when using these substances.

Route of administration - They are usually smoked with tobacco or other herbs in a joint or a bong. The oil can be inhaled using a vaporizer. The dose varies depending on the contents. If taking synthetic cannabinoid powder, the required dose is normally very small.

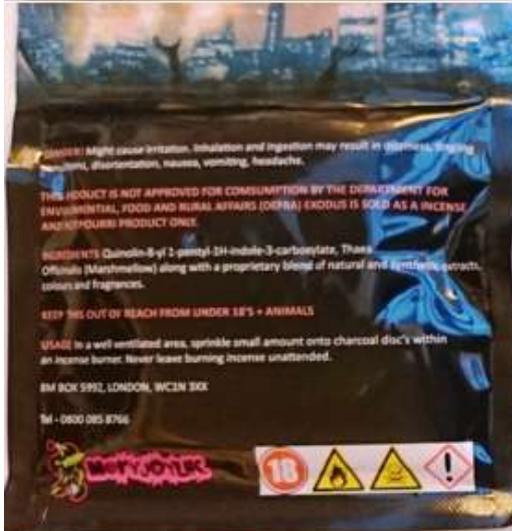
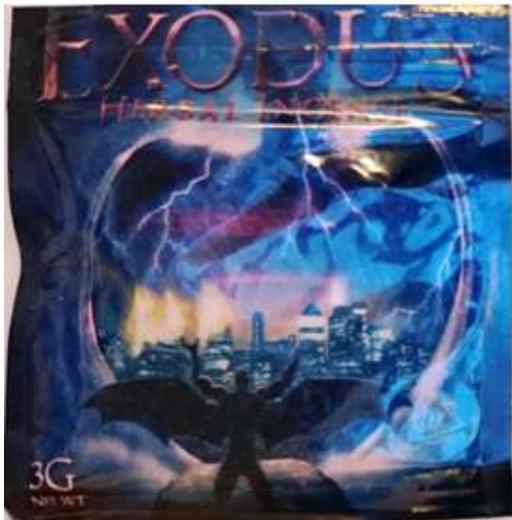
Legality - Although many synthetic cannabinoids are now illegal to possess and/or supply newer ones (including 5F-AKB48 and 5F-PB22) are legal. Illegal cannabinoids are Class B drugs; penalties for possession are up to five years in prison and/or an unlimited fine. Supply holds penalties of up to 14 years in prison and/or an unlimited fine. Cannabinoids that are currently legal will be covered by the Psychoactive Substances Act.

Synthetic cannabinoid case study – various brands | Male | 28

I've tried a few blends in the past and could take it or leave it but last year my mates started smoking it and since then my use has gotten out of control. I started buying K2 and a 1g bag would last me a week. It made me really agitated but it was better than nothing. It would give such a strong buzz but it wouldn't ground you like real weed did and it didn't last that long either. After a few months if I didn't have any I was angry all the time and couldn't really sleep. The only thing I could keep down was water and I lost loads of weight. I'd buy it from shop down the road but when they stopped selling I freaked out. I was scrapping the carpet to trying find any wee bits to roll into my j. One time I bought stuff online and smoked it at my friend's house. I blacked out and when I came around my hands were all cut. I can't remember anything but they said I was crawling around shouting, panting and scratching at the floor. It scared me a bit. We sat around talking about how bad the drug was but at the same time we were passing round js and I couldn't stop taking it. I would smoke in bed and think 'in the morning in going to chuck it all out' then an hour later I would roll again.

There is a lack of distinction between synthetic cannabinoids and cannabis and this could lead to inaccurate reporting of potential harms. Although cannabis is illegal if we compare only the health harms of cannabis and synthetic cannabinoids, cannabis is substantially less damaging to your health.

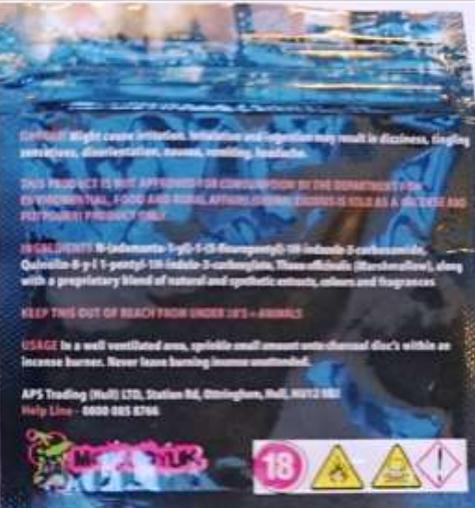
Ingredients listed as:



PB22



5F-AKB48, PB22 and 5F-PB22



5F-AKB48 and PB22

Synthetic cannabinoids NPS | Variations of Exodus brand | OCT 15

Depressants

The most common NPS depressants at Crew are:

etizolam, metizolam, diclazepam, flubromazepam and pyrazolam

The following brand names have been associated with depressant NPS:

Blues, Chillax, Get Calm and Carry On

Most NPS depressants are benzodiazepine (downer) drugs which have a sedative effect and can cause long periods of sleep and drowsiness. Some are known as unlicensed benzos as many are used as medicines in other countries.

Appearance - They usually come as a powder or in 0.5, 1, 2, 5 or 10 mg 'pellet like' pills.

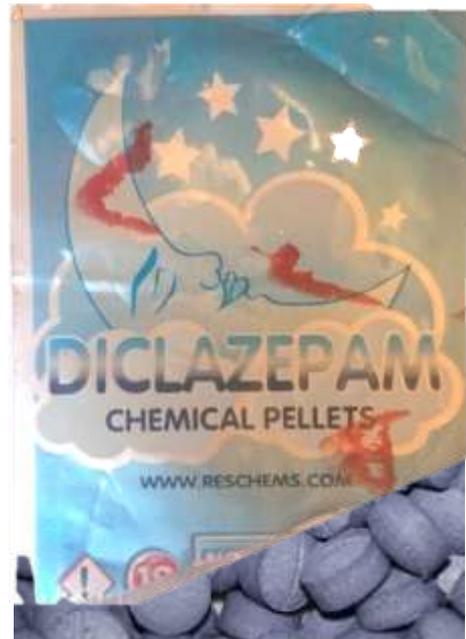
Effects - They slow down heart rate and breathing and people taking it can feel calm and relaxed with increased euphoria and reduced feelings of anxiety.

Negative effects include short term memory loss, reduced mental alertness, slow or slurred speech and double vision.

They are also described as being very more-ish and people may find they build up their tolerance to benzos meaning they need to take more to achieve the desired effect. This is a particular concern as they can be purchased cheaply online, especially before the impending act.

Route of administration - They are usually swallowed or left to dissolve in the mouth and doses and as little as 0.5 mg can have the desired effect (this dose should not be taken as a recommendation).

Legality – Although some NPS depressants are now illegal to possess and/or supply newer ones (including etizolam and diclazepam) are legal. Illegal depressants are Class B drugs; penalties for possession are up to five years in prison and/or an unlimited fine. Supply holds penalties of up to 14 years in prison and/or an unlimited fine. Depressants that are currently legal will be covered by the Psychoactive Substances Act.



Flubromazepam x 5'000
~~£1250.00~~
£350.00



Pyrazolam (0.5mg) x 1'000
~~£250.00~~
£100.00

Opioids

We have had no reports at Crew of people taking any synthetic opiates although they are reported in the media. At Crew we occasionally see use of kratom.

Appearance - Kratom is a tropical tree native to areas of Southeast Asia. It is derived from *Mitragyna speciosa* and most commonly found as whole or crushed leaves which are brown/green in colour but may also be sold as a powder or resin.

Effects - Officially kratom is an opioid (see [The Drugs Wheel](#)) but it can also cause sedative and stimulant effects depending on the dose.



It can make people feel alert, calm, relaxed and deeply secure. It may also give feelings of sociability, empathy and euphoria and induce vivid waking dreams. Users also report increased alertness, physical energy, talkativeness and sociable behaviour.

Negative effects include drowsiness, nausea, anxiety, itching, constipation, sweating and feeling withdrawn. These normally come on with 30 minutes and last 2-3 hours.

Withdrawal of kratom is normally described as mild but symptoms can include hostility, mood swings as well as achy muscles and bones.

Route of administration - Normally sold as crushed leaves that can be smoked, chewed, steeped in tea and swallowed as gel caps. The dose depends on the route of administration and whether it is taken in leaf or extract form.

Legality - Kratom is currently legal to buy and sell in the UK but it will be covered by the Psychoactive Substances Act despite it not being clear where herbal drugs fit into the act. The Psychoactive Substances Act 2016: guidance for retailers, does not include the word 'herbal' nor gives advice for retailers selling health foods, nootropics, food supplements etc.

Other drugs

For information on other drugs, including many ways to reduce harm visit www.mycrew.org.uk



UK Legislation

For 45 years, drugs legislation in the UK has been ruled by The Misuse of Drug Act (1971). This act is a legal framework, structured to allow the control of dangerous or harmful drugs and includes laws surrounding licensing, production, supply and possession.

It controls drugs based on their chemical structure and since conception over 500 chemicals have been outlawed. Only recently have the Government realised it is not feasible to individually ban every psychoactive chemical, as chemistry is more flexible than current drug policy.

There are no signs of a slowdown in the development of these substances; 100 new substances were reported for the first time in 2015 and the EU Early Warning System is monitoring over 560 substances (EU Drug Markets Report | Strategic Overview | 2016).

The following changes were made regarding UK drug policy between April 2015 and March 2016:

10 APRIL 15	27 JUNE 15	27 NOV 15	28 JAN 16
<p>Ethylphenidate (EPH), 3,4-dichloromethylphenidate, methylnaphthidate, isopropylphenidate and propylphenidate, and their simple derivatives, subjected to a temporary class drug order under the Misuse of Drugs Act 1971.</p>	<p>Amendment to EPH TCDO so that the control is extended to all salts, stereoisomeric forms, preparations or products. It also includes two additional substances - 4-methylmethylphenidate + ethylnaphthidate</p> <p>Note – most EPH products were EPH HCl, therefore a salt form. This means the original TCDO did not encompass the most common form of the drug used and hence the requirement for an amendment to include 'salts'.</p>	<p>Methiopropamine (including any stereoisomeric forms, any salts of such compounds and any preparation or product containing such compounds) subjected to a temporary class drug order under the Misuse of Drugs Act 1971.</p>	<p>Following agreement by both the House of Lords and House of Commons on the text of the Psychoactive Substances Bill it received Royal Assent on 28 January 2016. The Bill is now an Act of Parliament (law) and was originally due to be implemented on 06APR16. This has been pushed back and implementation date is now 26MAY16.</p>

Ethylphenidate (and four other methylphenidate based compounds) were banned in April, partially as a result of serious and harmful effects experienced by those injecting in Edinburgh (and further afield), as reported to the Home Office by Police Scotland. Effects included paranoia, psychosis, hallucinations and reduced motor control. The effects of ethylphenidate were exacerbated by polydrug use, high doses and the risky route of administration.

Some of those injecting experienced soft tissue damage throughout the body, not only at the injecting site. This may have been caused due to the corrosiveness of the substances (especially in

high doses), incorrect preparation (including the unnecessary use of citric acid to dissolve substances), incorrect or lack of filtering prior to injecting, the constricting of veins caused by the stimulating effect of the drug and frequency of dosing, with some people injecting up to 15 times a day.

In this population, we saw an increase in *Staphylococcus aureus* (*S. aureus*) and *Streptococcus pyogenes* (*S. pyogenes*) bacterial infections resulting in abscesses, difficulty breathing, fever, confusion and in some cases, death. There was also a concurrent botulism outbreak in Greater Glasgow and Clyde amongst people who inject heroin.

Despite the control of ethylphenidate salt not being introduced until June, we saw a decline in use of all ethylphenidate type drugs in April. During the summer of 2015, increased use of ethylphenidate was reported in drug collection data at events where Crew provided drug information, support and welfare. This indicates market displacement from the shops to the festival scene, after the introduction of the TCDO.

We saw a small decrease in people injecting NPS after April 2015. Some people switched to methiopropamine (MPA) which was also commonly found in branded NPS packets.

After ethylphenidate was temporarily banned, we also saw an increase in two other NPS stimulants: 3-Fluorophenmetrazine (3-FPM) and mexedrone. 3-FPM appeared in our street collection data at the end of April 2015 and adopted brand names used by ethylphenidate including Magic Crystals and Go Gain. Mexedrone was first seen at Crew at the beginning of September and used brand names euphemistic to mephedrone including Quack and MexeCAT. Some reports from people taking mexedrone suggested the high was disappointing and not comparable to the intense, 'out of this world' rush experienced with ethylphenidate.

The prohibition of NPS and other drugs has fuelled the innovation of this new drugs market. It is also possible that the expansion of the current prohibitive framework has driven people to take less effective and more dangerous forms of NPS, which increases the risk of harm.

Despite our prohibitionist model directly contributing to the growth of the NPS market, the Government plans to take the same approach again and announced plans to blanket ban psychoactive substances regardless of harm. This was due to be implemented on the 6th of April 2015 but was delayed due to concerns regarding enforcement and forensic testing.

A blanket ban on psychoactive substances is now due to become law on the 26th of May 2016.

This will make it an offence to manufacture, import/export, supply, or offer to supply any psychoactive substance (with the exceptions listed in schedule 1 below). These regulations will ban the sale of NPS including those from shops and all UK-based websites. It is the biggest legislative change related to drugs since the introduction of the Misuse of Drugs Act (1971) and it is essential that all those affected are made aware.

The Human Medicines Regulations (2012) and the Misuse of Drugs Act (1971) including Temporary Class Drug Orders (TCDOs) will remain unchanged. The Intoxicating Substances Supply Act (1985) which was only in force in England, Wales and Northern Ireland, will be scrapped. This made it an offence to sell volatile substances, like glue, to under 18s if it was believed they would be inhaled. The act will make it an offence to sell volatile substance to anyone, regardless of age, if they believe it would be inhaled.

Under the new regulations, possession will not be an offence, except in a ‘custodial institution’ (e.g. prison, young offenders) but possession with intent to supply, importing or exporting a psychoactive substance will all become offences. Importation includes buying a psychoactive substance from a non-UK based website and it being delivered from another country.

The Police will also have increased powers to stop and search individuals and premises, and NPS may be treated like a controlled drug until proven otherwise.

Despite being psychoactive, alcohol, nicotine, tobacco and caffeine are exempt from the act. In addition, poppers or alkyl nitrites will also be exempt as it has been argued that they are not psychoactive, as defined in the act, as their primary effect is not on the central nervous system.

Nitrous oxide (laughing gas) will be exempt when used in food preparation (usually as a propellant for whipped cream). It will be illegal to sell if it is thought it is going to be inhaled for a psychoactive effect. The onus will be on the supplier to ensure the product is not sold for this purpose.

There will be various penalties that can be imposed under the act and these are based on severity of the offense.

Penalties will range from civil sanctions to a prison sentence but some offenses will be considered to be aggravated, including the sale to under 18s or around schools and children’s homes etc.

Offence	Summary	Indictment
Possession	Not an offence	Not an offence
- Possession in a custodial institution - Failure to comply with a prohibition notice	Up to 12 months and/or a fine	Up to 2 years and/or a fine
- Possession with intent to supply - Supply or offer to supply - Production - Importation - Exportation	Up to 12 months and/or a fine	Up to 7 years and/or a fine

SCHEDULE 1
EXEMPTED SUBSTANCES

Section 3

Controlled drugs

- 1 Controlled drugs (within the meaning of the Misuse of Drugs Act 1971).

Medicinal products

- 2 Medicinal products.

In this paragraph "medicinal product" has the same meaning as in the Human Medicines Regulations 2012 ([S.I. 2012/1916](#)) (see regulation 2 of those Regulations).

Alcohol

- 3 Alcohol or alcoholic products.

In this paragraph—

"alcohol" means ethyl alcohol, and

"alcoholic product" means any product which—

- (a) contains alcohol, and
- (b) does not contain any psychoactive substance.

Nicotine and tobacco products

- 4 Nicotine.

- 5 Tobacco products.

In this paragraph "tobacco product" means—

- (a) anything which is a tobacco product within the meaning of the Tobacco Products Duty Act 1979 (see section 1 of that Act), and
- (b) any other product which—
 - (i) contains nicotine, and
 - (ii) does not contain any psychoactive substance.

Caffeine

- 6 Caffeine or caffeine products.

In this paragraph "caffeine product" means any product which—

- (a) contains caffeine, and
- (b) does not contain any psychoactive substance.

Food

- 7 Any substance which—

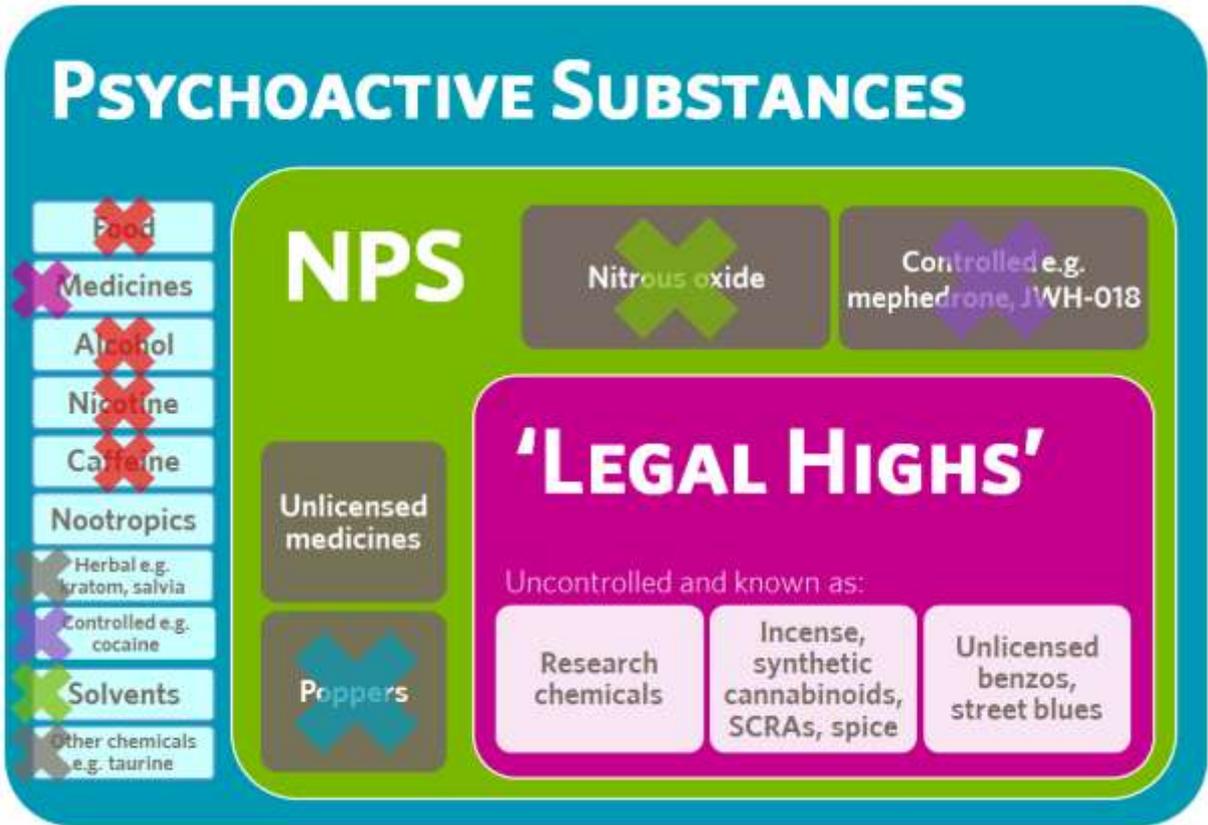
- (a) is ordinarily consumed as food, and
- (b) does not contain a prohibited ingredient.

In this paragraph—

"food" includes drink;

"prohibited ingredient", in relation to a substance, means any psychoactive substance—

- (a) which is not naturally occurring in the substance, and
- (b) the use of which in or on food is not authorised by an EU instrument.



Psychoactive Substances according to PSA



Exemptions. Note alcohol and nicotine (including tobacco) are only exempt if it does not contain any other psychoactive substances – see 'other chemicals'.



Covered by the Misuse of Drugs Act (1971).



Covered by the Human Medicines Regulations 2012.



Only covered if sold 'for human consumption'. Note - it is not proven how nitrous oxide produces a psychoactive effect.



Grey area. If all encompassing it would ban some food (if the ingredients aren't normally naturally occurring) and also all herbal remedies.



Exempt as primarily works out with the 'central nervous system'.

Note: This may not be exactly correct. We did contact the Home Office for clarification but we have not received any feedback to date.

The Psychoactive Substances Act is an example of what you get when you try to ban 'legal highs' without using the term 'legal highs'.

Although 'legal highs' are not mentioned in the Act itself, the explanatory notes do make two references:

Policy Background Section

Page 4 of 48–

7. These new substances - together with other substances that have been used as intoxicants for many years (for example, nitrous oxide) - are often referred to as "legal highs": which in the Government's view is inappropriate given that the chemicals in them are often neither legal nor safe for human consumption.

Page 7 of 48 –

*22. In May 2015, the Government was elected with a manifesto commitment to "create a blanket ban on all new psychoactive substances, protecting young people from exposure to so-called **legal highs**".*

The term 'psychoactive substance' is mentioned 174 times in the Act and a further 164 times in the explanatory notes.

Despite its extensive use the definition of a psychoactive substance is probably incorrect or at least incomplete.

2 Meaning of "psychoactive substance" etc

(1) In this Act "psychoactive substance" means any substance which—

(a) is capable of producing a psychoactive effect in a person who consumes it, and

(b) is not an exempted substance (see section 3).

B 2 Psychoactive Substances Act 2016 (c. 2)

*(2) For the purposes of this Act a substance produces a psychoactive effect in a person if, by **stimulating or depressing the person's central nervous system, it affects the person's mental functioning or emotional state**; and references to a substance's psychoactive effects are to be read accordingly.*

(3) For the purposes of this Act a person consumes a substance if the person causes or allows the substance, or fumes given off by the substance, to enter the person's body in any way.

Something psychoactive 'acts on the mind' which is subjective and difficult to measure. As this is open to interpretation, the act tries to clarify by including 'central nervous system'. As a result this encompasses harmless substances whilst omitting psychoactive substances such as poppers. There is no doubt poppers are psychoactive yet due to the fact that a substance can act on the peripheral nervous system (the nerves out with the brain and spinal cord) and not primarily on the 'central nervous stem' it is not covered by the definition used in the act. Crew highlighted this to the Scottish Government in June 2015 and written evidence was also submitted to the UK Government in August 2015.

LEGAL-HIGH-STORE

HOME/YOUR ACCOUNT/FOR WHOLESALERS/BLOG/CONTACT/FAQ'S

CALL



ITEMS £0.00
VIEW ITEMS CHECKOUT

Welcome To Legal Highs Store

POWDERS

PILLS & PELLETS

HERBAL INCENSE

C-LIQUIDS

TESTER PACKS



**THE REAL BLANKET BAN
DEADLINE HAS BEEN CONFIRMED!**

**LAST DAY OF TRADE IS MAY 24TH 2016.
STOCK YOUR FAVOURITES FOR THE LAST TIME.**

END OF AN ERA!

HUGE DISCOUNTS WHEN YOU BULK BUY - Free Next Day delivery on orders from £49, Discreet packaging & Bank Statements. Auto loyalty points.

Example of pre-act sale on NPS | Legal High Store

For every action there is an equal and opposite reaction (*Sir Issac Newton*)

Whilst the exact impact of the act cannot be determined we anticipate the following consequences -

Consequences of not doing anything:

While the new act has potentially serious loopholes and drawbacks, we must remember that not doing anything is also damaging. Without information, education and harm reduction people have limited access to information on dose, route of administration, effects and risks. With open supply and no education NPS have the potential to cause a range of harms.

- **Physical health** harms include soft tissue damage, weight loss, kidney damage, muscle wastage.
- **Mental health** harms include depression, anxiety, psychosis, suicidal ideation.
- **Crime** is fuelled by lower inhibitions, out of character and erratic behaviour. This is further exacerbated if someone is dependent on a substance they cannot afford and they may commit crimes to purchase NPS.
- **Antisocial behaviour** includes areas such as discarded injecting equipment, graffiti and violence. Violence and abuse also extend from the streets into the homes and can part families.
- **Risky sexual behaviour** is more likely due to lowered inhibitions combined with increased sensuality and constricted veins. Whilst under the influences people are less likely to take appropriate precautions and more likely to take risks which increases the chance of BBV/STI transmission, sexual assault, regrets and unplanned pregnancies.

Consequences of the act:

Even with the new act, it is important not to become complacent and rely only on the new laws. If we are to effectively tackle the issues associated with NPS we need to combine efforts to reduce demand whilst continuing and expanding funding for services, regulation and education.

Consequences of the act may include, but are not limited to:

- People stop using NPS.
- They use alternative substances:
 - Alcohol.
 - Solvents and other glues/gases.
 - Opioids: if someone switches to opioids from non-opioid NPS they will have a reduced tolerance and increased overdose risk. Services need to be trained and the supply of naloxone increased.
 - Stimulants: as many NPS are stimulants this gives potential for increased appetite in stimulants and may subsequently cause a rise in amphetamine, cocaine and mephedrone use.
 - Homemade drugs - increase in physical harm.
 - Other controlled drugs – exposure to crime.
 - Medicines - increased pressure from patients on GPs and prescribing services to issue psychoactive drugs such as diazepam, gabapentin and pregabalin.
- People stockpile NPS.

- Vendors encourage people to buy up NPS stocks before the ban with many attractive deals to buy in bulk. This increases the chance of people taking more than they anticipated and also increases the likelihood of people dealing as they will have large quantities and the potential to make a profit.
- Increased pressure on health services, at least in the short term due to people needing support and withdrawing without any substitute prescription therapies or uniform clinical guidelines.
- People are less likely to know what drug they are taking. Legal NPS generally list the ingredients on the packet. Many controlled substances are sold in unlabelled, plain packaging.
- Increased exposure to criminality and exploitation due to a requirement to use dealer networks.
- Displacement of market to the internet provides access to more drugs and an increased choice will increase the array of drugs used.
- Workers knowledge will no longer be up to date due to changing trends and diversification of drug market. Retraining may be required.
- Use of substances in some settings (e.g. prisons) is likely to continue due to potency and lack of testing.
- It is impossible to monitor and regulate an illegal market.
- Negative impact on public health as people may be unable to buy products which also enhance wellbeing, such as herbal remedies.
- The UK Government will no longer make the 20% VAT which is charged on the sale of each NPS in a shop (and on a UK-based website).
- It reduces respect of the UK Government due to scientific illiteracy and failure to address wider societal issues.
- An increased market of illegal drugs funds crime.
- The legal status of NPS varies across the world and NPS may be pushed onto other countries resulting in an increase in use and harm elsewhere which highlights the importance of working at an international level.

Consequences of saying something is going to happen then nothing happens:

After gaining Royal Assent on the 28th of January 2016 the PSA was due to be introduced on the 6th of April but this was pushed back to 'Spring 2016'. Therefore:

- Services need more information as communication of changes has been poor and it is difficult to strategically plan while we are waiting on this legislation.
- Time has been wasted training and producing information on something that hasn't happened.
- Our counselling clients create goals to reduce their NPS intake in the run up the change in supply. When the goalposts are moved unexpectedly the targets can be difficult to stick to.
- Some service users have also stockpiled, gotten through the stock quicker than anticipated and because it's still legal they have purchased more.
- The delay in the act also gives more opportunities to exploit the act in a court of law so prosecution under this legislation will be a greater challenge.

The Psychoactive Substances Act aims to “bring to an end the open sale on our high streets of these potentially harmful drugs”. This was achieved in 2015, in Scotland, using General Product Safety Regulations (GPSR).

Scottish Legislation

Between October and December 2015 147 Scottish shops surrendered NPS stock to Trading Standards.

Within the boundaries of The City of Edinburgh Council there were 15 shops known to be selling NPS. On the 15th of October 2015 a Sheriff granted a forfeiture order (using General Product Safety Regulations) for NPS products from shops in Edinburgh. This was the first such order for NPS in Scotland.

This operation by Trading Standards was supported by Police Scotland and gave an opportunity for shops to voluntarily hand over their NPS supply for destruction and to agree to stop selling. If they did not comply they were warned further action would be taken.

Only two shops were initially targeted but after their stock was surrendered, enforcement agencies were surprised by the relative ease with which their goals were accomplished and issued the order to 15 shops in total.

Although this operation can be considered successful from an enforcement view point there are lessons to be learned:

1. Most of the action was taken on a Friday afternoon when many services were closing for the weekend. Removing the sale on NPS on this scale can cause withdrawal, a decline in mental health and a rapid switch to other substances and should have been carried out at a time where most services were open to maximise the support available to those affected.
2. As it was an 'enforcement operation', communication surrounding it was limited taking people and services by surprise and leaving them 'on the back foot' in their ability to respond.
3. Even after the action was taken information was embargoed, leaving people and services who take NPS in limbo as there was little information issued regarding the situation or ways to mitigate the consequences of such a change.

In December 2015 the same approach was used across Scotland, affecting 147 retailers in total.

The order tackled synthetic NPS, not herbal substances (such as Kratom) which are less harmful. We believe this is a sensible move; however the new act will encompass all substances regardless of how harmful they are.

Some local authority areas in England have also introduced similar restrictions.



Whiplash Trash Closed | APR 16

Since the action, outcomes have been mixed; some shops have closed, many have reduced their opening hours and some have rebranded into e-cigarette shops.

One headshop reported: *“on average we were making £20,000 a week, while since October we’ve taken in between £3000 and £4000”*. This is more than an 80% reduction in sales.

If on average each packet sells for £15 then £16,000 could buy 1,067 packets. If there is on average 20 doses per packet, this means over 21,000 doses of NPS were being sold every week from only one of 15 shops in The City of Edinburgh, which is only one of the 32 local authority areas in Scotland.

Despite the effectiveness of the action, these numbers evidence the scale of the issue. It is not possible that everyone who was taking these substances has stopped completely and it highlights the need to further invest in services and education.

As is shown above, there is a huge amount of money to be made in this trade and it is naive to think the problem has gone away. Instead the market has diversified and been swept up by a small number of less obvious shops (primarily newsagents selling under the counter), delivery services, street dealers and the internet.

The number of packets found littered on the streets has reduced and many services have reported a small decline in people presenting with NPS related issues although we haven’t experience a decline at Crew and demand for our services, especially training, remains high.

Some areas of the city have reported an increase in presentations. These areas also have the highest levels of social deprivation and it is reported the NPS trade in these locations is now being pushed by dealers.



Edinburgh Police Division

27 January · 🌐

ANOTHER CRACKING RESULT

On the 23rd January whilst carrying out enquiries in relation to a child protection matter in the Lochend area of the city, our officers attention was drawn to about 170 familiar looking packets. On closer inspection, and a bit of further enquiry, we can confirm £45,210 of NPS (so called legal highs) were seized. Another linked address was later searched, where scales, bags and tubs were found.

A 27 year old male and a 21 year old male were served a large dose of justice thereafter when they were hit with a number of various charges, including unrelated road traffic offences. No more road trips for them for a while!

On a sufficient high from this recovery, yesterday our Pro-Active Unit enforced another unrelated drugs warrant at an address in Leith. During the search a mega impressive quantity of heroin was recovered. We estimate a street value of around £150,000. Cha-ching!!

A 28 year old male and a 58 year old male have been arrested and were up at Edinburgh Sheriff Court today.

[#DrugsAintAllTheyreCrackedUpToBe](#)



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➦ Share



Example of changes to market after headshop action | Edinburgh Police Division | Facebook | JAN 16

Other Drugs

Whilst we do not argue that unregulated drugs pose a threat to our society, the novelty of NPS has distracted from the issues that still remain with alcohol, tobacco, illegal and prescription drugs. Other drug trends which have continued into 2016 include:

MDMA – Ecstasy remains common in both pill and crystal form. Pills can vary widely in MDMA content and high concentration pills have been seen across the country. Crystal MDMA can vary in purity and is normally sold by the gram for £40-60. Some people have reported adverse reactions mainly due to difficulty in dosing with crystals – most side effects are caused by the way people take ecstasy, rather than the drug itself. Because the concentration of MDMA found in the average pill has increased we must adapt and communicate harm reduction messages appropriately – dose low and go slow!

Cannabis – Cannabis remains to be the most popular illegal drug seen at Crew. In the last year the cannabis market has continued to diversify and we see an increasing amount of black resin and cannabis extracts which include shatter and oil. Both shatter and oil generally contain high levels of THC, increasing the intensity and duration of effect. Since January in Scotland, police officers have been given the opportunity to use their discretion when someone is found in possession of a personal amount of cannabis and they are over 16. Rather than seeking prosecution, the police may issue a ‘Recorded Police Warning’ under a new system with the aim of allowing courts to focus on more serious crimes.

Image enhancing drugs – These include fillers, anabolic steroids and tanning agents and many Scottish services have reported an increase in the use of anabolic steroids, primarily amongst males aged 16-25.

Study drugs – Drugs such as Adderall and Modafinil have been reported to Crew, mainly by those studying or in high pressure jobs. Most are stimulants, allowing people to stay awake and motivated for long periods of time. They have undesirable effects similar to NPS stimulants including restlessness, paranoia and anxiety.

Prescription drugs - Medicines such as tramadol, gabapentin, pregablin and diazepam, to name a few, continue to be used without a prescription and often in combination with other drugs. As with legal highs, people may underestimate the harm or potency of these drugs due to the misconception that they are ‘safer’.

Vapourisers – The use of vapourisers has increased and they are used, not only for vaping nicotine liquid but also to take other drugs, with cannabis being the most popular. We must research this area and create appropriate harm reduction messages.

Alcohol – The national alcohol low-risk guidelines were updated. They now suggest; 1. Men and women are advised not to regularly drink more than 14 units a week and 2. Spread your drinking over three days or more if you drink as much as 14 units a week (NHS, Change 4 Life, 2016).

In conclusion, whilst NPS have the potential to cause a great deal of harm, these harms have been exacerbated by an insufficient response from the UK Government.

A change in legal status does not stop use and if a desirable drug is made illegal it is driven underground with the consequence that it generally becomes more expensive, less pure and more difficult to control. While some people may stop taking drugs many, especially those with the highest dependency and other exacerbating circumstances will continue.

It is disappointing that in 2016 comments by ministers do not concentrate on education but on prohibition and powers of enforcement, the same powers that have failed so spectacularly in the past.

*“Minister for Preventing Abuse, Exploitation and Crime Karen Bradley said:
‘Psychoactive substances shatter lives and we owe it to all those who have lost loved ones to do everything we can to eradicate this abhorrent trade. This act will bring to an end the open sale on our high streets of these potentially harmful drugs and deliver new powers for law enforcement to tackle this issue at every level in communities, at our borders, on UK websites and in our prisons. **The message is clear – so-called ‘legal highs’ are not safe. This act will ban their sale and ensure unscrupulous traders who profit from them face up to 7 years in prison.’”***

Overall we have been disappointed with the lack of a coordinated response from the UK Government, the lack of communication surrounding the act and a lack of investment in services, harm reduction and education.

Because it does not address the wider impacts and drivers of drug use, does not consider a regulated market and does not address the issue of updating the Medicines Regulations and the Misuse of Drugs Act, this act is likely to fail to reduce the harm caused by new psychoactive drugs.

Crew’s aim is to reduce harm and although great progress is being made we cannot fully achieve this goal until a rational, evidence based approach to the regulation of NPS (and other drugs) is adopted.

Despite the issues discussed in this report we have also been humbled by the perseverance, dedication and integrity shown by the people we have worked with during the course of this project. They have worked (many with limited guidance and resources and in very difficult, upsetting and challenging circumstances) to help those in need, with the overall aim of helping the people of Scotland live longer, happier and healthier lives. Thank you.

Annex 1 - Further Reading

Worker booklet: [Crew's New Psychoactive Drug Booklet](#)

NEPTUNE: neptune-clinical-guidance.co.uk/wp-content/uploads/2015/03/neptune-guidance.pdf

NHS Lothian intranet site: <http://intranet.lothian.scot.nhs.uk/NHSLothian/Healthcare/A-Z/NPS/Pages/default.aspx>

NHS Drinking Guidelines: <http://www.nhs.uk/change4life/Pages/alcohol-lower-risk-guidelines-units.aspx>

Global Drugs Survey: <http://www.globaldrugsurvey.com/>

The Drugs Wheel: <http://www.thedrugswheel.com/>

SDF Drug Information, including injecting guide: <http://www.sdf.org.uk/index.php/drug-information/>

SDF's guide to the PSA: <http://www.sdf.org.uk/news-and-media/sdf-news/are-you-ready-for-the-psychoactive-substances-act-to-become-law-in-april-2016/>

Linnell Publication PSA Guide:

http://www.exchangesupplies.org/shopdisp_guide_to_thePsychoactiveSubstancesAct.php

Drug Related Deaths: <http://www.nrscotland.gov.uk/statistics-and-data/statistics/statistics-by-theme/vital-events/deaths/drug-related-deaths-in-scotland>

A review of ethylphenidate in deaths in east and west Scotland:

<http://www.ncbi.nlm.nih.gov/pubmed/26375622>

The Psychoactive Substances Act 2016 and Explanatory Notes:

<http://www.legislation.gov.uk/ukpga/2016/2/contents/enacted>

Psychoactive Substances Act 2016 policy documents:

<https://www.gov.uk/government/collections/psychoactive-substances-bill-2015>

Home Office Guidance for Researchers available at:

www.gov.uk/government/publications/psychoactive-substances-act-2016-guidance-for-researchers

Home Office Guidance for Responsible Retailers available at:

www.gov.uk/government/publications/psychoactive-substances-act-2016-guidance-for-retailers

EMCDDA Drug Market Report: <http://www.emcdda.europa.eu/start/2016/drug-markets>

Annex 2 - Sources of help

Crew | Drug information, advice and support | www.crew2000.org.uk | www.mindaltering.co.uk | **0131 220 3404**

MY CREW Online Support | Out of hours chat room for information and support, up to date drugs info and 'check it out' tool to find out how risky your drug use is www.mycrew.org.uk

Know the Score | <http://knowthescore.info/> | **0800 587 5879**

Scottish Drugs Forum | <http://www.sdf.org.uk> | **0141 221 1175** | **0131 221 1556**

Scottish Families Affected by Drugs | <http://sfad.org.uk/> | **0808 010 1011**

Lothians & Edinburgh Abstinence Programme (LEAP) | **0131 446 4400**

Angelus Foundation | <http://www.angelusfoundation.com/> | **0203 700 7185**

Mental Health Services | <http://www.wellscotland.info/about/partners/useful-contacts>

Narcotics Anonymous | <http://www.ukna.org/> | **0300 999 1212**

Drugs Action | <http://www.drugsaction.co.uk/> | **01224 594700**

For information on drugs services in your area please visit: **Scottish Drug Services Directory** | <http://www.scottishdrugservices.com>

COMMON NPS (LEGAL HIGH) BRAND NAMES

THE FOLLOWING CHEMICALS HAVE BEEN LISTED AS AN INGREDIENT IN THESE NPS BRAND NAMES. THESE MAY CHANGE OVER TIME + SHOULD ONLY BE USED AS GUIDANCE. WITHOUT CONFIRMATORY TESTING THERE IS NO WAY TO TELL WHAT DRUG IS IN YOUR PACKET.

Depressant: Blues, Chillax, Get Calm and Carry On

Psychedelic: Blast, Doves Ultra, B2 powder Bk-2-CB, 1p-LSD, Rainbow Pellets

Dissociative: MXP (methoxphenidine) - Rave, VIP, K-PAX, MonKey Dust, Go Cane

Stimulant: various (including 3-FPM, MPA, NM-2-AI, mexedrone) - 4:20Air, Bingo, Blanca, Bliss Ultra, Blow, Blue Stuff, Bubblez, Bullet, Bumpin, Burst (ocean), Candy Flip, Chang, Charge, Charles, Charly Sheen (and/or MDAI), China White, Ching, Columbian (Gold), Cristal, Crystal (clear), Doves, Dust till Dawn, El Blanco, Exotic (ultra/strong), Focus, Go Gaine, Gogo Dust, Green Beans, Happy Me (Euphor-e), Happy Rasta, High Grade, Ice-n-berg, Ivory Dove, Jumping Beans, Keep Calm and Sparkle On, Lady B's, M+Ms (and MDAI), Magic Crystals, MexeCat, Mexedrone Storm, Mind Melt, Mr White, NRGEn, Pablo, Pink, Pink Panthers (and/or MDAI, 5-IAI, 2-AI), Poke (extreme), Psyclone, Pulse, Quack, Quackers, Quicksilver, Red Rhino, Rush, SCHNIFF, Severe Amnesia, Snow Blind, Snow White, Snow, Space Rockets, Spangled, Sparkle, SparkleE, Speed Rush, Spice, Sub Zero, Synthacaine, White Breeze, Walter White, WhiteMM, X-plosiv, Yeah Bitch, YPDOUT

Synthetic Cannabinoids: various (including 5F-AKB48, 5F-PB22) - 4:20, Afghan Black, Algerian Blend, Annihilation, Armageddon, Atomic Blast, Atomic Bomb, Bamboo, Berries, Berry Bomb, Big Bang, Black Ice, Black Mamba, Black, Blue Cheese, Blue Magic, Bombay Blue, Bubble Blast, Bud Factory, Bud-a-licious, Buzz Haze, Cherry Bomb, Cherry Drop, Chillout, Clockwork Orange (Reloaded), Cotton Candy (Carnage), Critical Haze, Devils Mamba, Devil's Venom, Devil's Weed, Diablo, Diamond Black, Diesel, Doctor Green Thumb, Doob, Dutchy, Eclipse, Ecsees, Epic, Exodus (Damnation, Nightshade, Reborn), EX-SES, Extreme Smoke, Extreme, Fiji, Funky Buddha Gold, (re)Genesis, Gold Seal, Green Crack, Green Dream, Gunslinger, Happy Joker, Hawaiian Haze, Haze, Head Trip, Herb, Herbal Haze, High Grade, Hipster, Holy Smokes, Hot Box, Hush, Iblaze, Ice Bud Supercold, Ja Rush, Jammin Joker, Joker Spice, Juicy Leaf, K2, Kanna, King B, King Cobra, King Joker, Kaos, Kronik, Kush, Layer Cake, Limitless, Loop, Low Rider, Mad Hatter, Magic Dragon, Mary J, Mary Jane, Mary Joy, Meadow Sweet, Moon Rocks, Mr Bad Guy, Mr Nice Guy, New Dimension, Obliteration, Oblivion, Odyssey, One Wish, Pandora's Box (Unleashed, Reborn), Paradox (Fusion), Phoenix, Pineapple Express, Platinum Caution, Psyclone, Rapture, Red Wall, Revolver, Scooby Snax, Sensate, Sirius, Sky High, Smokey, Sonic Boom, Spell Bound, Spice, Spike 99, Spun Out, Squidgy Black, Strawberry Cough, Sub Zero, Sweet Leaf (Obliteration), Tai High, Tangerine Dream, Thingy, Top Gear, Train Wreck, Ultimate, Vertex (Pirate Edition, Space Cadet), Viper, Voodoo (Gold, Mangled), Voyager, Warrior, Weed, White Widow, Wicked, X, XXX Extreme, Zeus, Zion, Zoot

Summary

The following tables show photos of packets of NPS gathered by Crew from various sources throughout Edinburgh and the Lothians.

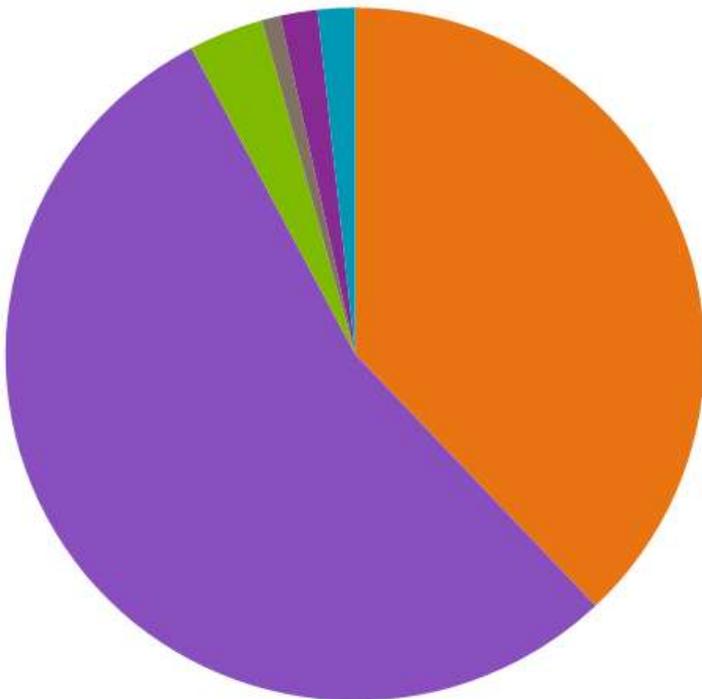
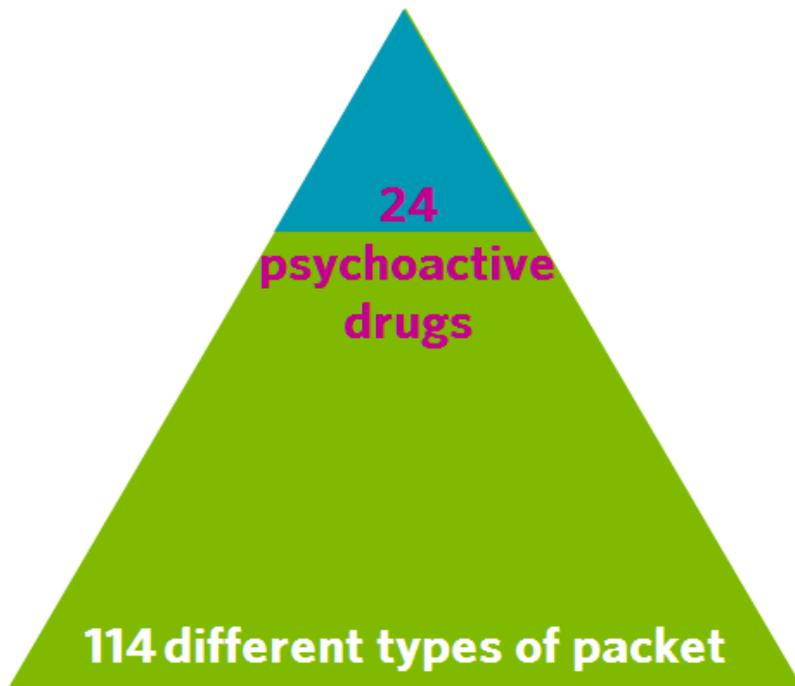
None of the substances below have been tested and the ingredients listed have been translated using the chemical formula listed on the back of the packet. This information is to act as a guide only and the listed ingredients may be incorrect or change over time.

Photos have been compressed to reduce file size but higher resolution photos of some packets may be available on request.

There were **24** psychoactive substances (including caffeine) present across the **114** different packets (according to listed ingredients).

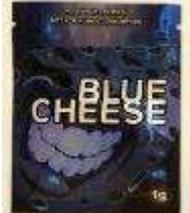
These drugs can be categorised according to effect and **92%** were either a stimulant or a cannabinoid (**38%** and **54%** respectively).

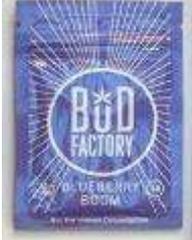
We had many duplicates and over 500 empty packets were sent around the world to help with training and education.

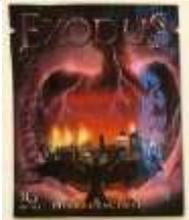


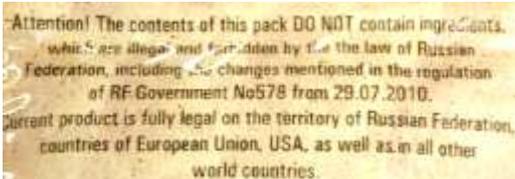
Number of brands per category	Chemicals Listed
Stimulant (44)	Ethylphenidate Methiopropamine (MPA) 3-FPM Mexedrone Caffeine 2-AI NM-2-AI Phenmetrazine
Cannabinoid (63)	AKB48 5F-AKB48 BB-22 5F-AKB48 (cumyl analogue) 5F-PB-22 PB-22 STS-135 AB CHMINACA MDMB-CHMINACA
Empathogen (1 mixed with stimulant)	MDAI
Depressant (2)	Diclozepam
Psychedelic (4, 1 mixed with stimulant)	1p-LSD Bk-2-CB 5-MeO-DALT
Dissociative (2)	Methoxphenidine (MXP) Nitrous oxide
Opioid (n=0)	N/A
Other (ingredients with no psychoactive properties)	Benzocaine (analgesic) Lidocaine (analgesic) Dimethocaine (analgesic)

Cannabinoids

Name	Picture	Approx. weight - price	Listed ingredients	Notes
Annihilation Vol II		1g - £10	5F-PB-22, 5F-AKB48, BB-22	
Berries		1g - £10 3g - £20	5F-PB-22, 5F-AKB48	
Berry Bomb		1g - £10	5F-PB-22, 5F-AKB48	
Black Mamba		1g - £10 3g - £20	5F-PB-22, 5F-AKB48	
Blueberry Kush		1g - £10	5F-AKB48	
Blue Cheese		1g - £10	5F-PB-22, 5F-AKB48	
Bombay Blue		1g - £10 3g - £20	Unknown	

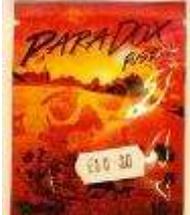
Bubblegum Kush		3g - £20.00	5F-AKB48	
Bud Factory – Blueberry Boom		1g - £7.50	5F-PB-22, 5F-AKB48	
Bud Factory – Classic Bud		1g - £7.50	5F-PB-22, 5F-AKB48	
Bud Factory – Pineapple Haze		1g - £7.50	5F-PB-22, 5F-AKB48	
Clockwork Orange		1g - £12-15 3g - £20	5F-AKB48	
Cotton Candy		1g - £10	5F-PB-22, 5F-AKB48	
Diablo – Gold		0.5g 1g	None listed	From USA. Packet states '100% legal + cannabinoid free. Does not contain JWH-

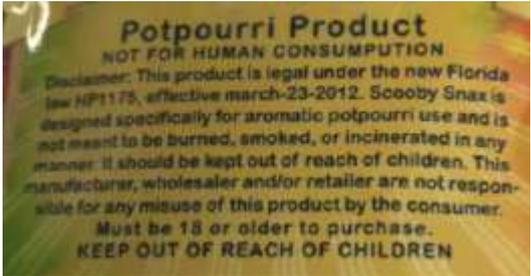
Diablo – Platinum		0.5 g 1 g	None listed. Sticker on back with Dutch address.	018, JWH-073, HU-210, HU-211, CP47, 497'
Exodus		1 g - £10 3g - £20	PB-22	Listed as 5F-PB-22 last year
Exodus Damnation		1 g - £10 3g - £20	PB-22, 5F-AKB48	
Exodus Nightshade		1 g - £10 3g - £20	PB-22, 5F-AKB48, 5F-PB22	
Fiji Wave		3g - £20	5F-PB22, AB CHMINACA	
Fiji Wild		3g - £20	5F-AKB48	
Genesis		1g - £10	1 pack listed as 5F-PB22, 5F-AKB48 1 pack listed as 5F-PB22, AKB48	
(re)Genesis		1g - £10	5F-PB22, AKB48	

Gold Seal		1g - £8	PB22, 5F-AKB48	Incorrect chemical formulas on packet
Gunslinger – Apocalyptic Orange		1g	5F-PB22. May be trace of AKB48 and BB22.	
Gunslinger – Blueberry Macabre		1g	5F-PB22. May be trace of AKB48 and BB22.	
Gunslinger – Raspberry Rage		1g	5F-PB22. May be trace of AKB48 and BB22.	
Head Trip		3g - £20	5F-AKB48 and 5F-PB22 	Packet design from Russia.
Herbal Haze Vol II		1g - £8	STS-135, PB-22	
Hipster		1g - £10	5F-PB22, AB CHMINACA	

Holy Smokes		1g - £10 3g - £15	Unknown	
(happy) Joker - blueberry		1g - £8 3g - £15	5F-PB-22, 5F-AKB48	
(happy) Joker – juicy fruit		1g - £8 3g - £15	5F-PB-22, 5F-AKB48	
(insane) Joker		1g - £8 3g - £15	5F-PB-22, 5F-AKB48	
K2 – Black Edition		1g - £10	5F-PB-22, 5F-AKB48, PB22	
K2 – Blueberry		1g - £8	5F-PB22. May be trace of AKB48 and BB22.	
K2 – Orange		1g - £8	5F-PB22. May be trace of AKB48 and BB22.	

K2 - Summit		1g - £10	AKB48, MDMB-CHMICA	
Kaos		1g - £10 3g - £20	5F-PB22	
Kronic – Black Label		0.5g - £7 1.5g - £11.50 3.5g - £20	5F-AKB-48 (cumyl ring analogue)	
Kronic – Pineapple Express		0.5g - £7 1.5g - £11.50 3.5g - £20 7g - £35	5F-AKB-48 (cumyl ring analogue)	
Layer Cake		3g - £15	5F-PB-22, 5F-AKB48, AB CHMINACA	Smells like bad chocolate. Incorrect chemical formula.
Lemon Haze		1.5g - £10	5F-PB-22, 5F-AKB48	

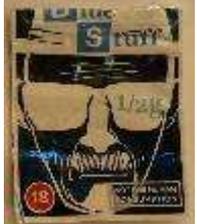
New Dimensions		1g - £6		From USA. Packet states 'Lab certified does not contain JWH-018, JWH-073, JWH-250, HU-210, HU-211, CP47'
Pandora Reborn		1g - £12.50 3g - £25	Unknown	
Pandora's Box		1g - £10 3g - £20	5F-PB-22, 5F-AKB48	
Pandora's Box Unleashed		1g - £10 3g - £20	5F-PB-22, 5F-AKB48, BB22	
Paradox Fusion		1g - £10	PB22, 5F-AKB48. May be trace of BB22.	
Psyclone (clown design)		1g - £10	5F-PB-22, 5F-AKB48	
Psyclone (pink and white)		1g - £10	5F-PB-22, 5F-AKB48	

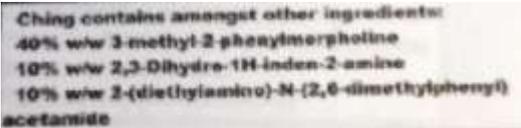
Rapture		3g - £15	5F-PB-22, 5F-AKB48	
Scooby Snax Blueberry Bliss		4g - £20 10g- £35	 <p>Potpourri Product NOT FOR HUMAN CONSUMPTION Disclaimer: This product is legal under the new Florida law HP1175, effective march-23-2012. Scooby Snax is designed specifically for aromatic potpourri use and is not meant to be burned, smoked, or incinerated in any manner. It should be kept out of reach of children. This manufacturer, wholesaler and/or retailer are not responsible for any misuse of this product by the consumer. Must be 18 or older to purchase. KEEP OUT OF REACH OF CHILDREN</p>	From USA
Scooby Snax Original				
Scooby Snax Watermelon				
Spellbound		1g - £10	5F-AKB48	
Spike 99		400mg - £6	STS-135	
Sweet Leaf		10mL - £20	5F-AKB48 (30mg/mL)	For use in e-cigs/vapurisers

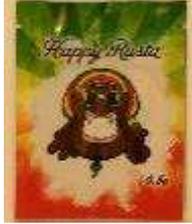
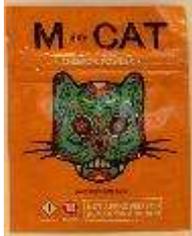
Sweet Leaf Obliteration		1g - £10 3g - £20	MDMB-CHMICA	
Vertex		1g - £10	5F-AKB48	
Viper		1g - £8 3g - £12	5F-PB-22, 5F-AKB48	Herbal material is coloured red
Voodoo		1g - £10 3g - £20	5F-AKB48	
Voodoo Gold		1g - £10 3g - £20	5F-PB-22, 5F-AKB48	
Warrior		400mg - £6	5F-PB22	
White Widow		1g - £10 3g - £20	5F-PB-22, 5F-AKB48	
<p>Summary</p> <p>Number of cannabinoid brand names – 63</p>				

Number of chemicals listed - 9
 Most common bag size – 1g
 Most common address listed – London, UK
 Average price for 1g - £10
 Average price for 3g - £20
 Most commonly reported chemical – 5F-AKB48

Stimulants

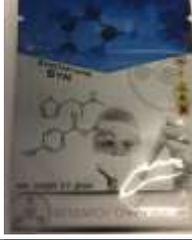
Name	Picture	Approx. weight - price	Listed ingredients	Notes
Bingo		1g - £15	MPA and 'synthacaine'	
Blow		1g - £20	MPA	
Blue Stuff		0.5g - £12 1g - £20	Ethylphenidate	
Bullet		950mg	MPA, lidocaine, caffeine	Comes in a 2mL eppendorf tube
Charge		0.5g - £12 1g - £20	Ethylphenidate, 2-AI, lidocaine	
Charley Sheen		0.5g - £12 1g - £20	MPA, 2-AI, lidocaine	

China White		0.5g - £15 1g - £25	MPA, benzocaine	
Ching		0.5g - £15 1g - £25	Phenmetrazine, 2-AI, lidocaine 	Used as a brand name for ethylphenidate in 2014-2015. Phenmetrazine has been a Class B drug in the UK since 1971, perhaps meant to mean its close relative 3-FPM?
Crisstal		0.5g - £11.50 1g - £20	3-FPM	
Crystal: bath salts of the future		1g - £15	MPA	Clear bag stapled to cardboard cover.
Crystal Clear		0.5g - £11.50 1g - £20	MPA	
Dust Till Dawn		0.5g - £12 1g - £18	MPA, benzocaine	

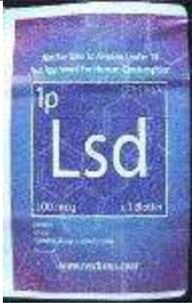
El Blanco		0.5g - £12 1g - £20	Ethylphenidate, benzocaine	Incorrect chemical formula for ethylphenidate
Go Gaine		0.5g - £12 1g - £20	3-FPM, lidocaine	Used as a brand name for ethylphenidate in 2014-2015 and MPA in 2015.
Green Beans		1 powder filled pink gel cap - £7.50	MPA, NM-2-AI	
Happy Rasta		Unknown	MPA	Also brand of synthetic cannabinoids
Keep Calm and Sparkle On		0.5g - £11.50 1g - £20	NM-2-AI	First time reported to Crew
Lady B's		1 powder filled red capsule - £8	MPA	
MexeCAT		1g - £25	Mexedrone	

Magic Crystals		1g - £25	3-FPM	Used as a brand name for ethylphenidate in 2014-2015.
Methiopropamine		1g - £20	MPA	
Mind Melt		0.5g - £12 1g - £20	MPA, benzocaine	
MPA		0.5g - £12 1g - £20	MPA	
MPA		Unknown	MPA	
Mr White		0.5g - £12 1g - £20	Ethylphenidate	
NRGen		1 pellet - £7.50	MPA	
Pink		0.5g - £11.50 1g - £20	MPA, caffeine	

Pink Panthers		1 powder filled pink gel cap - £7.50	MPA	
Poke		0.5g - £12 1g - £20	MPA, lidocaine	
Poke Extreme		0.5g - £12 1g - £20	MPA	
Pulse		1g - £15	MPA	Clear bag stapled to cardboard cover.
Quack		0.5g - £11.50 1g - £20	Mexedrone	
Quackers		0.5g - £11.50 1g - £20	Mexedrone, lidocaine	
Severe Amnesia		3g	Unknown	Clear bag stapled to cardboard cover.
Snow White		0.5g - £11.50 1g - £20	MPA, NM-2-AI	
Snow White		0.5g - £15 1g - £25	MPA, ethylphenidate	

Space Rockets		1 powder filled gel capsule - £7	MPA	
Sparkle E		1 powder filled white/blue gel capsule - £7.50	MPA, MDAI	MDAI is classed as an empathogen
Spice		0.5g - £11.50 1g - £20	MPA, lidocaine	May cause confusion as 'spice' is a common umbrella term to describe synthetic cannabinoids.
Synthacaine		0.5g - £12 1g - £20	MPA, lidocaine	
Synthacaine		0.5g - £12 1g - £20	Ethylphenidate, NM-2-AI, lidocaine	
White Breeze		0.5g - £11.50 1g - £20	3-FPM, benzocaine, dimethocaine	First dimethocaine seen listed in NPS at Crew
White MM		0.65g	MPA, caffeine	

X-plosiv		1 pellet - £7.50	MPA, 5-MeO-DALT	5-MeO-DALT is a psychedelic Class A drug in the UK as of 7 th January 2015.
<p>Summary</p> <p>Number of stimulant brand names – 44</p> <p>Number of chemicals listed – 8 stimulants 3 analgesics (not psychoactive) 1 empathogen MDAI 1 psychedelic 5-MeO-DALT Total = 13 (10 psychoactive)</p> <p>Most common bag size – 1g</p> <p>Most common address listed – London, UK</p> <p>Average price for 0.5g - £10</p> <p>Average price for 1g - £20</p> <p>Most commonly reported chemical – Methiopropamine (MPA)</p>				

Psychedelics				
Name	Picture	Approx. weight - price	Listed ingredients	Notes
Bk-2-CB		One capsule filled with 140mg for £7.50	4% w/w Bk-2-CB	
1p-LSD		1 x 100mcg blotter for £6	1p-LSD	

Rainbow Pellets		Unknown	Bk-2-CB	Name misleading as packet only contains one pressed pill.
<p>Summary</p> <p>Number of psychedelic names – 3</p> <p>Number of chemicals listed – 2</p> <p>Most common address listed – London, UK</p> <p>Most commonly reported chemical – Bk-2-CB</p>				

Depressants				
Name	Picture	Approx. weight - price	Listed ingredients	Notes
Diclazepam		Packets of 5,10 or 20 pressed pellets	Diclazepam	
Get Calm and Carry On		5 pressed pellets - £5	Diclazepam	
<p>Summary</p> <p>Number of depressant names – 2</p> <p>Number of chemicals – 1</p> <p>Most common bag size – 5 small pressed pellets</p> <p>Most common address listed – London, UK</p> <p>Average price for 5 pellets - £5</p> <p>Most commonly reported chemical – Diclazepam</p>				

Dissociatives

Name	Picture	Approx. weight - price	Listed ingredients	Notes
MXP		One capsule filled with 145mg for £7.50	95% w/w Methoxphenidine (MXP)	
Nitrous Oxide		1 x 8g whippet circa 30p	Food grade nitrous oxide	
<p>Summary</p> <p>Number of dissociative names – 2</p>				

Annex 5: NPS Concerns 01 April 2015 – 31 March 2016

This annex contains drug trend data gathered by Crew from April 2015 - March 2016. Data is anecdotal but very meaningful and has been shared to us through service users, volunteers and staff. For confidentiality and where possible the location, gender, service and age have been removed from reports.

It does not contain every report of NPS or drug use but only where a concern has been raised. Many people use drugs without experiencing problems.

This report only includes New Psychoactive Substances (including legal highs) and for that reason the following drug reports are exempt: alcohol, solvents, MDMA, amphetamine, methamphetamine, cocaine, cannabis, LSD, psilocybin, ketamine, medicines (including those prescribed), steroids (and other image enhancing drugs), except when reported as part of polydrug use. For the purpose of this report illegal NPS include GHB/GBL and mephedrone.

Data cannot be compared month on month, or year on year as the number of reports received was directly proportionate to how much time was being invested by Crew to gather data.

Outreach and other drug stats will be reported separately. NPS (primarily NPS stimulants) are present in nightlife settings but they have failed to have an impact on the popularity of traditional club/party drugs like MDMA and cocaine.

If you or someone you know needs help you can find a drug service in your area by searching: www.scottishdrugservices.org

KEY

SU | service user

SC | synthetic cannabinoid

p/ | per

g | gram

mg | milligram

L | litre

mL | millilitre

N2O | nitrous oxide

MDMA | 3,4-methylenedioxy-methamphetamine

LSD | lysergic acid diethylamide

GHB | gamma-hydroxybutyric acid

[Italics] | text added after initial report received

Care has been taken to ensure the accuracy and reliability of the information provided, however the notes do not necessarily represent the opinions of Crew and are solely intended for educational purposes.

Summary

99 concerns were reported in total. Where reported **89%** of NPS were legal. The recording of legal status was based upon any brand or chemical names reported. They were searched using MY CREW and cross-referenced with The Misuse of Drugs Act (1971).

74.4% involved polydrug use, meaning the service user was taking more than one drug at a time and therefore increasing risk. The most commonly used drugs in addition to primary NPS were other types of NPS, alcohol, cannabis and diazepam (commonly reported as Valium).

83% (n=82) were taking either stimulants or synthetic cannabinoids (42.5% (n=42) and 40.5% (n=40) respectively). The other 17% was made up by 7% depressant (n=7), 6% dissociative (n=6), 2% empathogen (n=2), 1% psychedelic (n=1) and 1% 'various' (n=1).

The most commonly reported side effects are issues with mental health (such as low mood and paranoia) and difficulty sleeping.

9 of the 99 reports (**9%**) were regarding a child under the age of 16.

Information regarding user profile has been removed for confidentiality. There is no emergent archetype NPS user and usage patterns depend on the type of substance they are taking, route of administration and socio-economic factors including age, disposable income and family setting.

APRIL 2015 – 9 REPORTS								
DW category of effect	Details of primary drug	Legality	Amount	Route of Administration	Appearance	Polydrug Use	Second drug	Notes
Cannabinoid	Various blends	Legal	1 g p/day	Smoke in joint and pipe	Herbal	No	N/A	Rapid weight loss, black outs, feeling of helplessness, can't sleep, suicidal ideation.
Stimulant	Pink Panthers	Legal	3-4 pills p/day	Swallow	Capsule	Yes	Prescribed 5mg diazepam	Paranoid, believed friends were out to get them, can't sleep or eat.
Stimulant	Pink Panthers	Legal	2-4 pills p/day	Swallow	Capsule	Yes	Other stim NPS and alcohol	Loss of memory, agitation, weight loss, uncontrollable eye twitching.
Cannabinoid	Pandora's Box, Mamba, K2	Legal	6-7 g p/day	Smoke in joint	Herbal	Yes	Prescribed various anti-psychotics	Mental health issues, sense of detachment, loss of motor control. Described people chasing them and tapping phone. Constant 'black tar' like diarrhoea.
Cannabinoid	AKB48	Legal	Small 'spoonful'	Swallowed	Powder	Yes	Other NPS	Thought it would be like ethylphenidate. Doesn't know how much they taken. Spent 5 days in hospital with psychosis and kidney failure.
Stimulant	Crystal Clear	Legal	~300mg	Inject	Blue crystals	Yes	Methadone, diazepam	Black out, no memory of the event but friends said they had fit.
Cannabinoid	Clockwork Orange, Kronic	Legal	3 g p/day	Smoke in joint	Herbal	Yes	NPS (various) and cannabis	Feeling like they are going to die. Whiteys frequently, can't eat or drink, violent, aggressive and angry. Worse when they don't have it. Pal came off it and started having seizures.
Cannabinoid	Clockwork Orange	Legal	Few draws	Smoke in joint	Herbal	Yes	Cannabis, MDMA, ketamine	First time they used it they think they had a seizure. Has since tried another few times.
Stimulant	Posh, Burst, Ching	Legal	1.5 g p/'session' 250-500 mg p/injection	Inject	White powder, metallic/chemically smell	Yes	Alcohol	Has pre-existing mental health conditions – sometimes it can make them feel much better, sometimes much worse. Difficult to stop. Effects include alertness, talkative, paranoia, anxiety, psychosis, hallucinations, connection with music, excessive energy, increased sex drive, abscesses.
MAY 2015 – 12 REPORTS								
DW category of effect	Details of primary drug	Legality	Amount	Route of Administration	Appearance	Polydrug Use	Second drug	Notes
Cannabinoid	Psyclone,	Legal	8-10 g/day	Smoke in joint	Herbal	Yes	Caffeine,	PTSD and other issues. Life has become unbearable. Constant

	Annihilation, Black Mamba						cannabis, various prescribed medicines but taking with regularity	itching, feels uncomfy, stomach and back ache, chest pain. Coughing blood. Emotional when they don't have it.
Stimulant	Burst, blue stuff	Legal	Lots	Inject	Powder	Yes	'vallies'	SU injecting, bad wound sites, 10-20 times per day, mainly in groin but also neck and feet.
Stimulant	Ethylphenidate	Under TCDO	2-3 g p/day	Swallow, snort	Powder	No	N/A	SU looking to cut down use but anxious. Dealer wanting £50 p/gram. Mood low. Nose, throat and mouth red and painful with sores. Gets worse if they don't take it.
Psychedelic	Unknown	Unknown	½ blotter	Blotter on tongue	Blotter	Yes	Alcohol (small amount), 1 joint of cannabis	Sold as 'legal' LSD but lasted over 16 hours.
Cannabinoid	Clockwork Orange, Layer Cake, Gold Seal	Legal	'Few' packets p/week	Smoke in joint	Herbal	Yes	Other NPS (Exodus)	Can't sleep, feels lost and doesn't like it but keeps taking it as soon as effect wear off. Rapid heart rate, paranoia, depression, spaced out. Other drugs have no effect. Also concerned about group of friends.
Cannabinoid	Unknown	Legal	Unknown	Smoke in joint	Herbal	Unknown	N/A	Mother found packet in child's room. Concerned as become distance, out house for days at a time. Not attending school.
Cannabinoid	Diesel	Legal	2 g p/day	Smoke in joint	Herbal	Yes	Alcohol, cannabis	Wants to cut down, smokes every day. Still working but can't focus or can't sleep at night without it and feels lost when doesn't have it.
Stimulant	Crystal	Legal	Unknown	Snort	Powder	Yes	Speed	Violent and aggressive behaviour. Hallucinations.
Empathogen	MDEA	Illegal	Unknown	Swallow	White or tan powder with no smell	No	N/A	Class A but said they bought £15 p/gram from headshop. Effects unpredictable, bad comedown.
Stimulant	Mephedrone	Illegal	Few g/weekend	Snort	White powder	Unknown	N/A	Feel tired and fatigued when stop taking. Can't stop taking it until all supplies are gone.
Stimulant	Burst	Legal	Unknown	Inject	Powder	Yes	Methadone,	Psychotic behaviour, weeping wounds, sores on hands and face,

							Valium	restlessness, self-harming but says worth it for 'out of this world high'.
Cannabinoid	Synthetic cannabinoid	Legal	1 g p/day	Smoke in joint	Herbal	No	N/A	Wants to stop but been taking for 3 years, health has declined, don't recognise themselves anymore. Smashed mirror and door. Lost family and friends. Went for assessment but send away as 'drug induced'.
JUNE 2015 – 15 REPORTS								
DW category of effect	Details of primary drug	Legality	Amount	Route of Administration	Appearance	Polydrug Use	Second drug	Notes
Stimulant	Mephedrone	Illegal	Unknown	Swallow, snort	Powder filled capsule	Yes	Alcohol	Professional concerned about young people at service using daily. Having to turn them away to protect others. Effects include jaw clenching, spitting, pale looking, nausea, sweating, eye jitters, aggressive, shouting. Worried for their own and YP safety.
Cannabinoid	Pandora's	Legal	Unknown	Smoke in joint	Herbal	Yes	Cannabis	YP painted room by throwing paint at walls. No recollection of event and became aggressive when they saw the damage. Blamed other people.
Dissociative	Nitrous oxide	Legal	100-200 whippets 3-4 times p/week	Inhale	Silver canisters	Yes	Cannabis	Used N2O for the last year. Feels zoned out. Loves high but concerned about effects on memory. Describes failings in the world and how they no longer feel part of it. Severe irritation to throat and lungs.
Stimulant	Ching, Go Gaine	Legal	2-3g p/day	Smoke, snort	Crystally powder	No	N/A	Used to take burst and blue stuff but they are no longer in shops. Concerned about the amount they are taking. Much higher doses than previously. More anxious. Used to be motivated when high but now tremors and shakes which make simple tasks difficult. Children moved to grandparents.
Cannabinoid	Happy Joker, Kush	Legal	0.5 g p/day	Smoke	Herbal	No	N/A	Moved from cannabis but now cannabis gives no effect.
Cannabinoid	Clockwork Orange	Legal	Few draws	Smoke in joint	Herbal	No	N/A	Ended up in hospital, had seizures and kidneys failed.
Depressant	Etizolam	Legal	N/A	N/A	N/A	N/A	N/A	Aggression.
Stimulant	Mephedrone	Illegal	Couple of lines p/day	Snort	White powder, smells chemically	Yes	Alcohol (10 units)	Buys from friends for £10 p/gram. Felt stimulation, disorientation, nausea.
Stimulant	Green Beans	Legal	1 pill p/day	Swallow	Pill	No	N/A	Been taking 1-2 pills per day for about a year. Nausea, bad stomach pains, shakes.

Stimulant	Magic and Gogaine	Legal	1 g p/session	Snort	Powder	Yes	Alcohol and prescribed anti-psychotics	Diagnosed with schizophrenia previous to NPS use. Voice tells him to take it enjoys it but suffering from anxiety and panic attacks.
Stimulant	Mephedrone	Illegal	Unknown	Inject	Powder	Yes	Poppers, cannabis, other NPS	Been injecting MCAT on a weekly basis for the last 5 years.
Cannabinoid	Voodoo, Viper, Kronik and many more	Legal	10 joints p/day	Smoke in joint	Herbal	No	N/A	Problematic use, SU struggling to control. Partner left them. Saved up hundreds of packets they had tried. Can't sleep or eat, blacked out last week and woke up to find they had smashed the TV.
Cannabinoid	Exodus Damnation, Vertex	Legal	Unknown	Smoke in pipe	Herbal	Yes	Valium, sleeping tablets	Stopped taking all NPS last month but having anxiety attacks flashbacks and bad dreams. Wondering how long this will last and looking for support. Tempted to take some more to see if that helps.
Stimulant	Various – charge, synthacaine	Legal	Few packets p/weekend	Snort	Powders	Yes	Alcohol, NPS depressants	Relapsed with alcohol and now takes NPS when not working. Sore nose and throat. Can't smell or taste and has no appetite. Lost 3 stone.
Depressant	Poppers	Legal	Few 'sniffs'	Inhale	Clear liquid	Yes	Alcohol	Felt sick when inhaled too much the first time. Can feel tired and fatigued after using.
JULY 2015 – 7 REPORTS								
DW category of effect	Details of primary drug	Legality	Amount	Route of Administration	Appearance	Polydrug Use	Second drug	Notes
Cannabinoid	Synthetic cannabinoid	Legal	Unknown	Smoke in joint	Herbal	No	N/A	Addicted, violent, suicidal and having panic attacks. Had to call police after assault. Parent of someone who is taking cannabinoids.
Stimulant	MPA	Legal	1 g p/day	Inject	Powder	Unknown	N/A	Use is escalating. Injected for the first time last week, by someone else.
Stimulant	Ching	Legal	1 g p/1-2 days	Snort	Powder	Unknown	N/A	Concerned ingredients have changed and isn't as good as it used to be.
Cannabinoid	Spice, mamba, red exodus	Legal	3 g p/day	Smoke in joint	Herbal	Yes	Methadone	Enjoys use most of the time but thinks they should cut down. Doesn't want to because their friend stopped and had seizures. Scared they are going to die. Smokes in group.
Cannabinoid	Exodus Damnation	Legal	3 g p/2 days	Smoke	Herbal	No	N/A	In recovery for other drugs but nervous about coming off this. Had a few seizures in the past. Smoking every day. Pains in chest, loss

								of bladder control on occasion.
Cannabinoid	Herb	Legal	All day, every day	Smoke	Herbal	Yes	Other NPS	Very disorientated, hallucinating voices and seeing things coming out of the TV. Doesn't see the point in life anymore. Looking for a way out. Has tried to stop a few times but withdrawal is bad.
Dissociative	Monkey Dust	Legal	2-3 tablets p/week	Swallow	'Tablet'	Yes	Heroin, amphetamine, other NPS	Has used speed for 20+ years but moved to NPS a few years ago and can no longer deal with side effects. Would like help to stop.

AUGUST 2015 – 7 REPORTS

DW category of effect	Details of primary drug	Legality	Amount	Route of Administration	Appearance	Polydrug Use	Second drug	Notes
Stimulant	Mephedrone	Illegal	1-3 g p/day	Snort	Yellow/white, crystal powder sometimes brown liquid	Yes	Alcohol, MDMA	Mental health problems, chaotic behaviour. Set hand on fire. Not engaging with other services.
Cannabinoid	Scooby Snax	Legal	3g in a week	Smoke in joint	Herbal	Yes	Salvia x20	Not smoked it in the last week as they have no money. Terrified something bad is going to happen to them or their family.
Depressant	Etizolam	Legal	10 x 1 mg p/day	Swallow	Small, blue, pressed pill	Yes	Alcohol, valium	Increase in use of 'legal vallies'. But also buying diazepam in blister packs and can take 2 packs per day.
Dissociative	Monkey Dust	Legal	½ packet	Swallow	Powder	No	N/A	Psychotic behaviour, didn't recognise friends when high and tried to run away from them. Broken wrist.
Cannabinoid	Bombay Blue	Legal	1 g p/day	Smoke	Herbal	Unknown	N/A	Don't like it but feels they need to use and it's better than nothing. Takes them to places in their head they can't access when sober. Emotional and feels 'weak'. Wants them to be banned.
Cannabinoid	Sky High, Bubble Bud, Rudolph	Legal	1.5 g p/'session'	Smoke	Green, herbal. Smells like orange hamster food.	Yes	Other NPS, alcohol, cannabis	Gets it from dealer, sometime in original packets, sometimes in clear baggie. Effects include difficulty speaking, concentration and thinking, sweating, dry mouth, no appetite, paranoia, depression, anxiety. Cravings when not using. Warned not to use in a bong or blunt as too strong and 'I nearly died'.
Depressant	GHB	Illegal	Few mLs p/day	Swallow	Clear liquid	Yes	Mephedrone cannabis	Overdosed a few weeks ago. Looking for safer dosing advice and help to reduce.

SEPTEMBER 2015 – 7 REPORTS

DW	Details of primary	Legality	Amount	Route of	Appearance	Polydrug	Second drug	Notes
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category of effect	drug			Administration		Use		
Cannabinoid	Clockwork Orange	Legal	3 g p/day	Smoke in joint/pipe	Herbal	No	N/A	Smoking every day since the first time they tried it. Waking every two hours during the night to re-dose.
Stimulant	Magic Crystals	Legal	1 g/session	Snort	Powders	Yes	Alcohol, cocaine, MDMA, amphetamine, valium	Suffering from anxiety and panic attacks.
Dissociative	Methoxphenidine	Legal	1 g/week	Inject	White powder	Yes	Ketamine, when they can get it	After short term use they needs loads to get an effect. Feel depressed if they don't have any.
Cannabinoid	Various	Legal	2 g p/day	Smoke in joint	Herbal	Yes	Cannabis	Concerned parent. Had to throw them out to protect other children after their use has spiralled out of control. Parent was not concerned initially but they started stealing, behaving weirdly and didn't want to wear clothes.
Stimulant	Blue, Ching	Legal	Few packets per week	Smoke, swallow	White/blue crystal and brown powder	Yes	Other NPS	Wanted info on changing chemical compounds. Started to buy online as cheaper but has since up dose and feeling very low.
Cannabinoid	Cherry Bomb	Legal	3 g p/day	Smoking	Herbal	Unknown	N/A	Worker wanted info young people passed out at service and they had to phone ambulance.
Stimulant	Quackers, Charge, Snow White	Legal	1 g p/day	Swallow	Pills and powder	Yes	Anti-depressants	Has been using legal highs for about 2 years. Has affected sleep patterns and coordination. Poor short term memory.
OCTOBER 2015 – 9 REPORTS								
DW category of effect	Details of primary drug	Legality at time of report	Amount	Route of Administration	Appearance	Polydrug Use	Second drug	Notes
Cannabinoid	Clockwork Orange, Herbal Haze - vol II/III	Legal	1-3 g p/day	Smoke in joint	Herbal	Yes	Alcohol	Experienced drug user. Been taking SC for over a year. Problem with mental health, feeling depressed and paranoid. Crashed car whilst high. Wants to stop but experiencing cravings.
Stimulant	DDD	Unknown	200 mg p/dose	Rectally	Crystal	Yes	Alcohol	Auditory hallucinations, sleeplessness, insomnia. Comedown lasts a week.

Stimulant	MPA	Legal	Few g p/weekend	Snort, swallow	Powder	Yes	MDMA	Withdrawal, shaking, spasms, sweating, anxious, appeared to but under the influence but said they hadn't had any in a week.
Empathogen	Green Beans	Legal	Up to 5 packets p/session	Swallow	Pills	No	N/A	Stomach and back pain.
Cannabinoid	Happy Joker	Legal	N/A	N/A	N/A	N/A	N/A	Concern from worker about the mental health impact of this substance. Information given.
Various	Various	Legal	N/A	N/A	N/A	N/A	N/A	Concern from worker about restricted access and looking for more info as SU are 'kicking off'. Concerned about the mental health impact of this.
Cannabinoid	Various	Legal	N/A	N/A	N/A	N/A	N/A	Concerned about limited access. Shop by their flat is now charging £40 p/gram and they hope to stop. Been using daily for 5 years.
Cannabinoid	Various	Legal	Few g p/day	Smoke in joint	Herbal	Yes	Cannabis	Worried about friends who are 'all crazy about it'. Smoking 'all day, every day'.
Stimulant	Space Rockets, Monkeys	Legal	Unknown	Unknown	Unknown	Unknown	N/A	Worker looking for info after concerns about young person.
NOVEMBER 2015 – 9 REPORTS								
DW category of effect	Details of primary drug	Legality at time of report	Amount	Route of Administration	Appearance	Polydrug Use	Second drug	Notes
Depressant	Diclazepam	Legal	5 p/day	Swallow	Small, blue pill	Unknown	N/A	Concerns over withdrawal.
Stimulant	Bullet	Legal	Everyday	Swallow	Unknown	Unknown	N/A	Concerns around use of weird and erratic behaviour, loss of memory, lack of self-regard.
Cannabinoid	Various synthetic cannabinoids	Legal	N/A	N/A	N/A	N/A	N/A	Side effects such as paranoia and anxiety. Also, real issues when trying to stop with withdrawal symptoms such as sweats and shakes. No sex drive or desire to leave flat.
Cannabinoid	Synthetic cannabinoid	Legal	On occasion	Smoke in joint	Herbal	Yes	Methadone	Stomach pains. Enjoys it when high but 'freaks out' when they don't have any. Confused at effects as it wasn't a 'real drug'.
Cannabinoid	Kaos	Legal	Unknown	Unknown	Green herbal material with bits. Smells pleasant but	Unknown	N/A	Likes it but causing issues with memory, can't concentrate.

					sticks to everything.			
Stimulant	Ethylphenidate	Legal	100 - 300 mg p/session	Snort	White powder	Yes	NO, diazepam	Sore nose, very harsh if snorting. Effects included excitement, picking at skin, poor memory, depression, anxiety, irritability, teeth grinding, burst blood vessels in eye.
Cannabinoid	Voodoo, Voodoo Gold	Legal	Unknown	Smoke	Herbal	Yes	NPS stimulants	Used to take heroin but stopped. Now use NPS is becoming an issue. Causing incontinence, low mood, suicidal ideation.
Stimulant	Ching, Charly Sheen	Legal	Few packets p/day	Inject	Powder	Yes	Valium	Gotten worst in last few months. Parent concerned about child. Found packets in room.
Stimulant	Bumped	Legal	3 g p/day	Swallow	Yellowy powder	No	N/A	Bought from dealer. Chaotic, aggressive, panicking, twitches, stomach pain.

DECEMBER 2015 – 5 REPORTS

DW category of effect	Details of primary drug	Legality at time of report	Amount	Route of Administration	Appearance	Polydrug Use	Second drug	Notes
Stimulant	MexeCat	Legal	Few packets a week	Inject	Powder	Yes	Alcohol, methadone	Extreme delusions, bad skin, sores, vomiting brown liquid, incontinence of urine, eye jitters
Stimulant	Crystal Clear	Legal	0.5–1.5 g p/day	Snort	Powder	No	N/A	Worried after experiencing a psychotic episode. Still experiencing headache and chest pains. Thinks they have been sexually abused but can't remember.
Stimulant	Mephedrone	Illegal	10 g p/weekend	Snort	White powder, smells like bleach	No	N/A	£15 p/gram. Effects include: hallucinations, jaw clenching, twitches, dry mouth, intense sweating. Bad comedown that would take a few day to get over and felt like the flu, with low mood, cravings, emotional, anxiety.
Cannabinoid	Herbal Haze, Kush	Legal	2 g p/day	Smoke	Herbal	Yes	Valium	Legals have a 'control over life'. Breathing problems and teeth falling out. Extreme weight loss. Punched walls.
Stimulant	White Stuff	Legal	1 g p/day	Smoke, swallow	White crystal	No	N/A	Suicidal ideation and self-harming. Taking more NPS to cope. Not sleeping.

JANUARY 2016 – 8 REPORTS

DW category of effect	Details of primary drug	Legality at time of	Amount	Route of Administration	Appearance	Polydrug Use	Second drug	Notes
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		report						
Stimulant	Burst	Legal	Few packets a day	Inject	White powder	Yes	Valium	Buying from dealer, injecting frequently, experiencing delusions, suicidal thoughts, bad skin, red, hot lumps on wrist and arm which is sore to touch.
Dissociative	MXP	Legal	Few lines p/weekend	Snort	White powder, sometimes crystal	Yes	MDMA, Alcohol, ketamine	Concerned about escalating doses.
Cannabinoid	Sweet Leaf	Legal	3-5 g p/day	Smoke in joint	Herbal	Yes	Alcohol, gabapentin, pregablin	Loss of control, aggressive behaviour, shouting about dying.
Stimulant	Pink Panthers	Legal	3-4 pills p/day	Swallow	Pink capsule	Yes	Alcohol, Valium	Experience comedown/withdrawal. Self-harming.
Cannabinoid	Mamba	Legal	1 g p/day	Smoke in joint and bong	Herbal. Green with red bits	Yes	Cannabis	Nauseous, vomiting, shaky, panicky, sweaty and emotional. Worried that they were going to get banned and they didn't know what to do.
Stimulant	Various	Legal	1 - 2 g p/day but only at weekends	Injecting	Crystal, powders	Yes	Methamphetamine, cocaine, alcohol	High sex drive. Sleeping with multiple partners without protection. Very remorseful.
Cannabinoid	Synthetic cannabinoid	Legal	Couple of grams p/day	Smoke in joint	Herbal	Yes	Alcohol	Parent worried about challenging and aggressive behaviour. Stolen stuff from the house. Smashed up room. Self-harming.
Stimulant	Charly Sheen	Legal	30-50 mg p/1-2 hours	Snort	White powder, strong chemical like smell	Yes	Alcohol, cannabis, ecstasy, cocaine	Still getting it in a shop but comes in a little clear plastic bag with no info on it. Good effects are stimulation, alertness, more energy and rushes but lots of side effects including increased heart rate, dilated pupils, teeth grinding, dry mouth, increased thirst, changes in body temperature, suppressed appetite (ready hot then really cold), muscle cramping, sleeplessness, irritation to nose, unable to orgasm, irrational, cravings, anxiety paranoia.
FEBRUARY 2016 – 4 REPORTS								
DW category of effect	Details of primary drug	Legality at time of report	Amount	Route of Administration	Appearance	Polydrug Use	Second drug	Notes
Stimulant	Synthacaine	Legal	0.5 g over a night	Snort	Crystalline powder	Yes	Alcohol (lots)	Taken at weekend after friends told them it was legal. Very emotional and low on Wednesday. Stronger than they thought

								and thought they might die.
Depressant	Various	Legal	4 pills p/day	Swallow	Pills	Yes	Cannabis, amphetamine, mephedrone	Feels terrible when doesn't take them, would like help to stabilise.
Cannabinoid	Various 'cannabis like legal highs'	Legal	N/A	N/A	Unknown	Unknown	N/A	Concerned parent. Feels like 'they have lost their child'. Had to throw them out for fear they would attack them and others. Child keeps denies use.
Stimulant	Burst	Legal	0.5 g p/day	Inject	Powder	Yes	Valium, sleeping tablets	Tried to stop taking in January but withdrawal is difficult. Been 'dying'. Restlessness, no sleep, no appetite, head ache, stomach ache, kidney pain, difficulty peeing. Occasionally paying £40 per gram from dealer.
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DW category of effect	Details of primary drug	Legality at time of report	Amount	Route of Administration	Appearance	Polydrug Use	Second drug	Notes
Stimulant	Ching	Legal	0.5 g	Snort	Crystalline powder	Yes	Alcohol (lots)	Been taking on and off for a year. Concerned about ban and want to stop before he no longer can get it.
Depressant	Flubromazepam	Legal	Unknown	Swallow	Blue pills	No	N/A	Friend looking for info after they said their friend died after taking them for a few months. Wanted support.
Dissociative	Nitrous oxide	Legal	600 whippets in one week	Inhaled from canister and balloon	Silver 'bullets'	No	N/A	Ordered online but ended up taking them all in one week. Couldn't stop when they had started. Confused. Difficulty thinking and walking. Had to call in sick to work.
Cannabinoid	Funky Buddha, Insane Joker	Legal	8-9 g p/day	Smoke in joint and pipe	Herbal	Yes	Other NPS	Aggressive behaviour, quite jumpy, paranoia, 'look unwell'. Dealer selling them on their estate for £5 per gram.
Stimulant	Poke	Legal	1 g p/day	Smoke	White powder	Unknown	N/A	Every day use for 18 months. Unwell and tired.
Cannabinoid	'Legal herbs'	Legal	Few pipes per day	Smoke in pipe	Brown sticky paste	No	N/A	Paranoid. Coughing up mucus. Suicidal ideation.
Stimulant	Crystal	Legal	150 mg p/dose	Inject, smoke	Crystal	Yes	MDMA	Bought online with little info. Uses up to 500 mg p/session. Bad comedown for a few days after. Cold/flu like symptoms.

END