

THE TRUTH ABOUT

HEROIN

Smack

Skag

B

Junk

Horse

drugfreeworld.org

WHY THIS BOOKLET WAS PRODUCED

There is a lot of talk about drugs in the world—on the streets, at school, on the Internet and TV. Some of it is true, some not.

Much of what you hear about drugs actually comes from those selling them. Reformed drug dealers have confessed they would have said anything to get others to buy drugs.

Don't be fooled. You need facts to avoid becoming hooked on drugs and to help your friends stay off them. That is why we have prepared this booklet—for you.

Your feedback is important to us, so we look forward to hearing from you. You can visit us on the web at drugfreeworld.org and e-mail us at info@drugfreeworld.org.

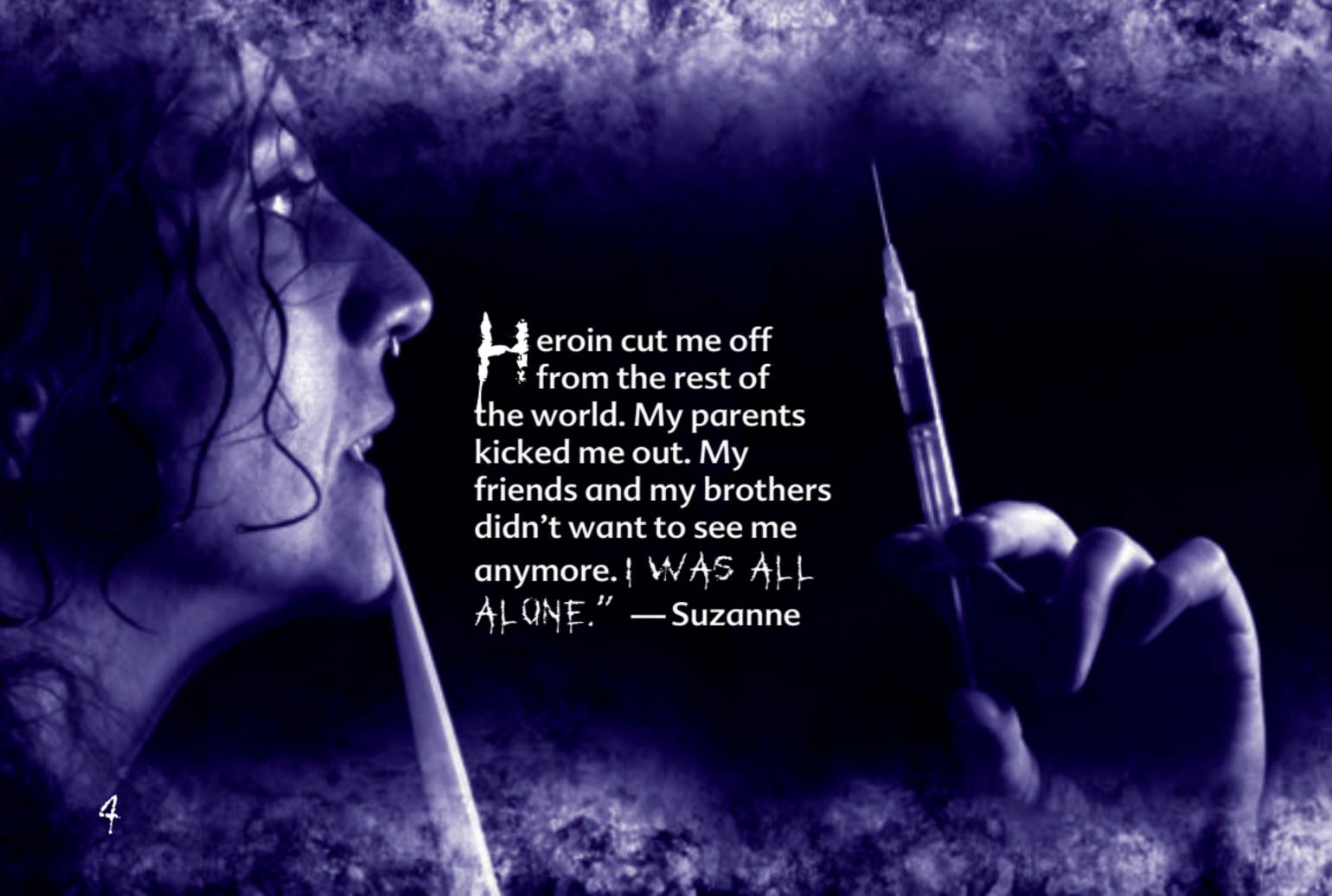
HEROIN: WHAT IS IT?

Heroin is a highly addictive, illegal drug. It is used by millions of addicts around the world who are unable to overcome the urge to continue taking this drug every day of their lives—knowing that if they stop, they will face the horror of withdrawal.

Heroin (like opium and morphine) is made from the resin of poppy plants. Milky, sap-like opium is first removed from the pod of the poppy flower. This opium is

refined to make morphine, then further refined into different forms of heroin.

Most heroin is injected, creating additional risks for the user, who faces the danger of AIDS or other infection on top of the pain of addiction.



Heroin cut me off from the rest of the world. My parents kicked me out. My friends and my brothers didn't want to see me anymore. I WAS ALL ALONE." —Suzanne

THE ORIGINS OF HEROIN

Heroin was first manufactured in 1898 by the Bayer pharmaceutical company of Germany and marketed as a treatment for tuberculosis as well as a remedy for morphine addiction.

A VICIOUS CIRCLE

During the 1850s, opium addiction was a major problem in the United States. The “solution” was to provide opium addicts with a less potent and supposedly “non-addictive” substitute—morphine. Morphine addiction soon became a bigger problem than opium addiction.

As with opium, the morphine problem was solved by another “non-addictive” substitute—heroin, which proved to be even more addictive than morphine. With the heroin problem came yet another “non-addictive” substitute—the drug now known as methadone. First developed in 1937 by German scientists searching for a surgical painkiller, it was exported to the US and given the trade name “Dolophine” in 1947. Renamed methadone, the drug was soon being widely used as a treatment for heroin addiction. Unfortunately, it proved to be even more addictive than heroin.

By the late 1990s, the mortality rate of heroin addicts was estimated to be as high as 20 times greater than the rest of the population.



WHAT DOES HEROIN LOOK LIKE?

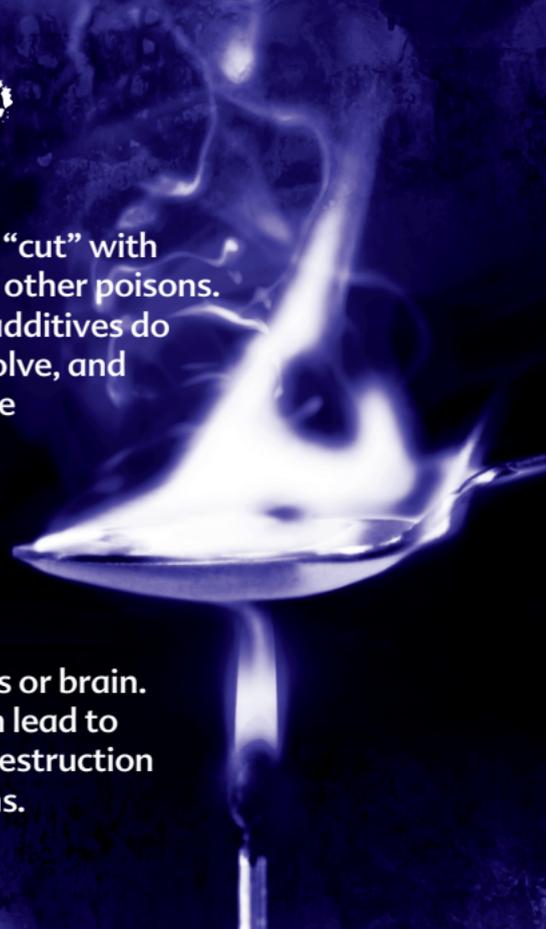
In its purest form, heroin is a fine white powder.

But more often, it is found to be rose gray, brown or black in color.

The coloring comes from additives which have been used to dilute it, which can include sugar, caffeine or other substances. Street heroin

is sometimes “cut” with strychnine or other poisons.

The various additives do not fully dissolve, and when they are injected into the body, can clog the blood vessels that lead to the lungs, kidneys or brain. This itself can lead to infection or destruction of vital organs.



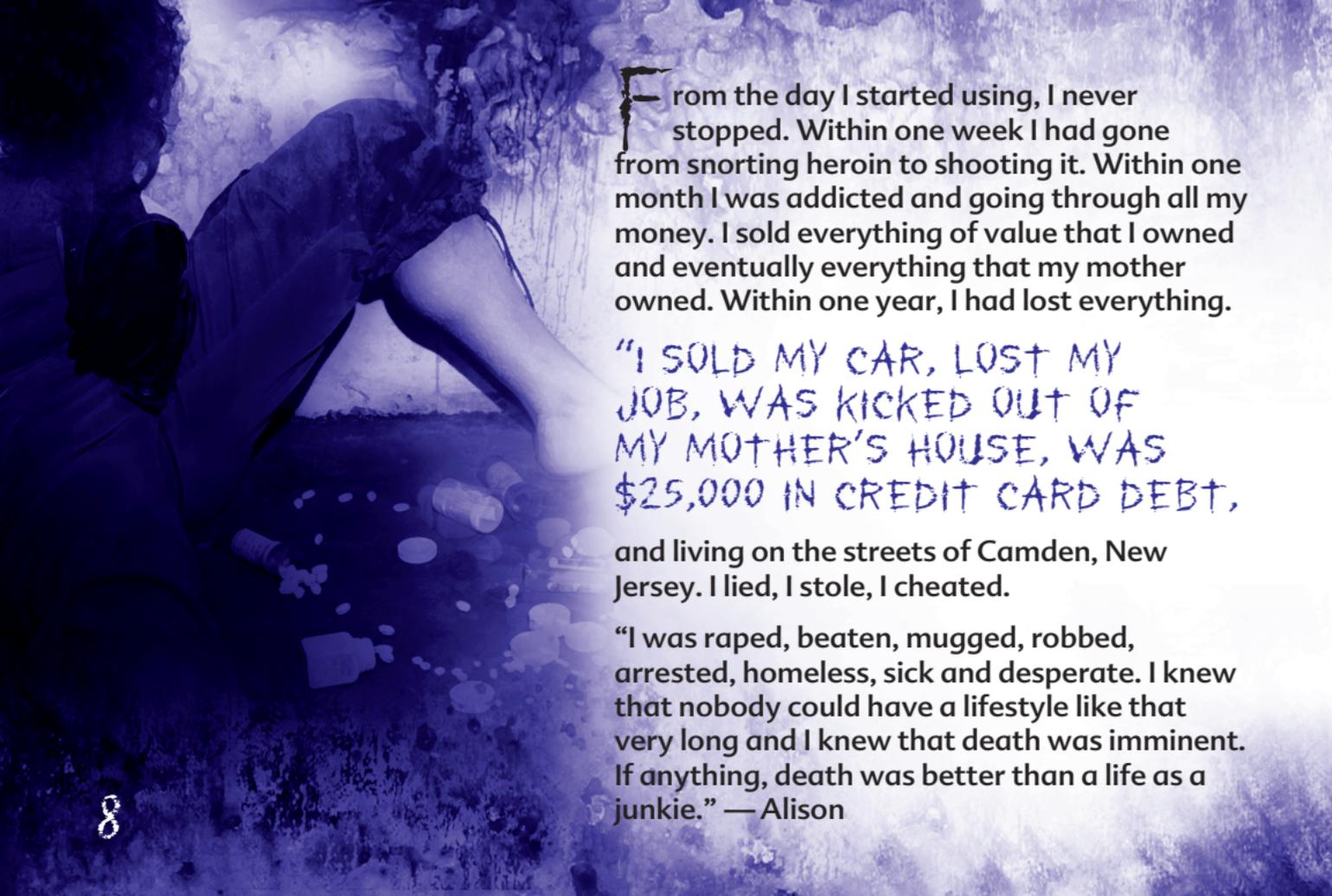
The user buying heroin on the street never knows the actual strength of the drug in that particular packet. Thus, users are constantly at risk of an overdose.

Heroin can be injected, smoked or sniffed. The first time it is used, the drug creates a sensation of being high. A person can feel extroverted, able to communicate easily with others and may experience a sensation of heightened sexual performance—but not for long.

Heroin is highly addictive and withdrawal extremely painful. The drug quickly breaks down the immune system, finally leaving one sickly, extremely thin and bony, and, ultimately, dead.

STREET NAMES for HEROIN

- Big H
- H
- Junk
- Skag
- Horse
- Smack
- Thunder
- Hell Dust
- Nose Drops



From the day I started using, I never stopped. Within one week I had gone from snorting heroin to shooting it. Within one month I was addicted and going through all my money. I sold everything of value that I owned and eventually everything that my mother owned. Within one year, I had lost everything.

"I SOLD MY CAR, LOST MY JOB, WAS KICKED OUT OF MY MOTHER'S HOUSE, WAS \$25,000 IN CREDIT CARD DEBT,

and living on the streets of Camden, New Jersey. I lied, I stole, I cheated.

"I was raped, beaten, mugged, robbed, arrested, homeless, sick and desperate. I knew that nobody could have a lifestyle like that very long and I knew that death was imminent. If anything, death was better than a life as a junkie." — Alison

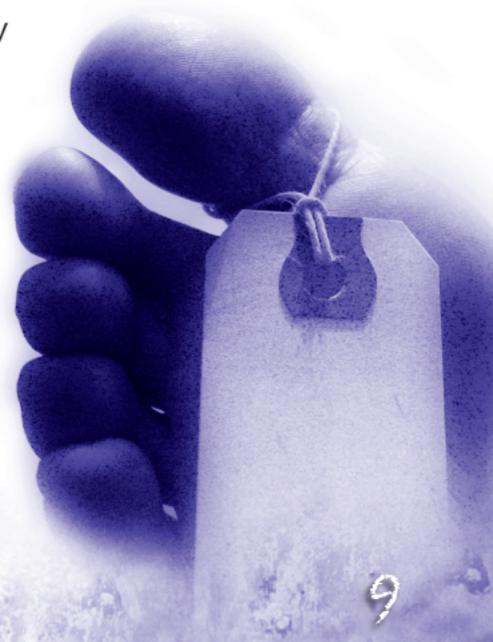
INTERNATIONAL STATISTICS

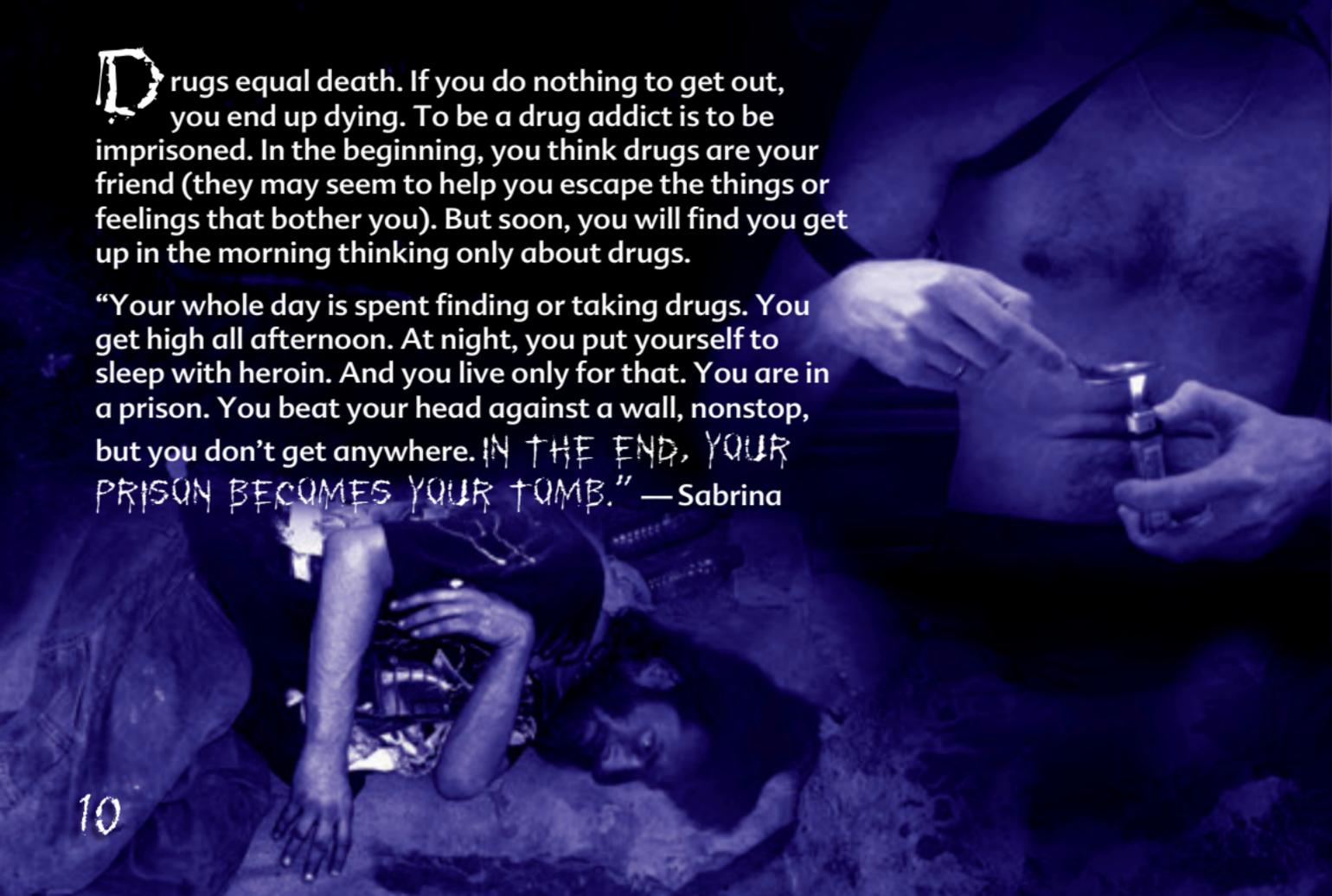
An estimated 13.5 million people in the world take opioids (opium-like substances), including 9.2 million who use heroin.

- In 2007, 93% of the world's opium supply came from Afghanistan. (Opium is the raw material for heroin supply.) Its total export value was about \$4 billion, of which almost three quarters went to traffickers. About a quarter went to Afghan opium farmers.
- The 2007 National Survey on Drug Use and Health reported 153,000 current heroin users in the US in 2007. Other estimates give figures as high as 900,000.
- Opiates, mainly heroin, were involved in four of every five drug-related deaths in

Europe, according to a 2008 report from the European Monitoring Centre on Drugs and Drug Addiction.

- Opiates, mainly heroin, account for 18% of the admissions for drug and alcohol treatment in the US.





Drugs equal death. If you do nothing to get out, you end up dying. To be a drug addict is to be imprisoned. In the beginning, you think drugs are your friend (they may seem to help you escape the things or feelings that bother you). But soon, you will find you get up in the morning thinking only about drugs.

“Your whole day is spent finding or taking drugs. You get high all afternoon. At night, you put yourself to sleep with heroin. And you live only for that. You are in a prison. You beat your head against a wall, nonstop, but you don’t get anywhere. **IN THE END, YOUR PRISON BECOMES YOUR TOMB.**” — Sabrina

THE DESTRUCTIVE EFFECTS OF HEROIN

IMMEDIATE HARM: The initial effects of heroin include a surge of sensation—a “rush.” This is often accompanied by a warm feeling of the skin and a dry mouth. Sometimes, the initial reaction can include vomiting or severe itching.

After these initial effects fade, the user becomes drowsy for several hours. The basic body functions such as breathing and heartbeat slow down.

Within hours after the drug effects have decreased, the addict’s body begins to crave more. If he does not get another fix, he will begin to experience withdrawal. Withdrawal includes the extreme physical and mental symptoms which are experienced if the body is not

supplied again with the next dose of heroin. Withdrawal symptoms include restlessness, aches and pains in the bones, diarrhea, vomiting and severe discomfort.

The intense high a user seeks lasts only a few minutes. With continued use, he needs increasing amounts of the drug just to feel “normal.”

SHORT-TERM EFFECTS

- **“Rush”**
- **Slowed breathing**
- **Clouded mental functioning**
- **Nausea and vomiting**
- **Sedation; drowsiness**
- **Hypothermia**
(body temperature lower than normal)
- **Coma or death (due to overdose)**

LONG-TERM EFFECTS

The effects on the body from continued use of this drug are very destructive. Frequent injections can cause collapsed veins and can lead to infections of the blood vessels and heart valves.

Tuberculosis* can result from the general poor condition of the body.

Arthritis is another long-term result of heroin addiction.

Heroin withdrawal is a terrifying experience that begins to torture the body within hours of the last fix.

The addict lifestyle—where heroin users often share their needles—leads to AIDS and other contagious infections. It is estimated that of the 35,000 new hepatitis C2 (liver disease) infections each year in the United States, over 70% are from drug users who use needles.

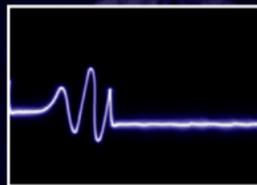
“People believe that heroin is super, but you lose everything: job, parents, friends, confidence, your home. Lying and stealing become a habit. You no longer respect anyone or anything.” — Pete

* tuberculosis: an infectious disease affecting the lungs and other organs.

LONG-TERM EFFECTS

- Bad teeth
- Inflammation of the gums
- Constipation
- Cold sweats
- Itching
- Weakening of the immune system
- Coma
- Respiratory (breathing) illnesses
- Muscular weakness, partial paralysis
- Reduced sexual capacity and long-term impotence in men
- Menstrual disturbance in women
- Inability to achieve orgasm (women and men)
- Loss of memory and intellectual performance
- Introversion
- Depression
- Pustules on the face
- Loss of appetite
- Insomnia

Abscesses from use of needles pockmark the body of a 16-year-old addict



HEROIN ABUSE brings about physical and mental destruction.

"I'LL JUST TRY IT ONCE."

WARNING: EVEN A SINGLE DOSE OF HEROIN CAN START A PERSON ON THE ROAD TO ADDICTION.

Many people experiment with heroin thinking, "I'll try it once or twice. I can always stop." But those who start down that road find it nearly impossible to turn back. Consider the words of Sam, a 15-year-old addict: "When you first shoot up, you will most likely puke and feel repelled, but soon you'll try it again. It will cling to you like an obsessed lover. The rush of the hit and the way you'll want more, as if you were being deprived of air—that's how it will trap you."

The threat of addiction is not the worst consequence of experimenting with heroin. Jim was 21 years old and usually spent his evenings drinking beer with friends. He had already experimented with heroin so when friends offered him a line to sniff, he accepted. Fifteen minutes after inhaling, he passed out, then dropped into a deep coma which lasted more than two months. Today, he is confined to a wheelchair, unable to write, barely able to read. Whatever dreams and aspirations he once had are gone.



THE HEROIN "LOOK"

Once heroin frightened people. More recently, some people have tried to make heroin use "fashionable."

In the past decade, the "heroin addict look"—blank expression, waxy complexion, dark circles under the eyes, sunken cheeks, excessive thinness, greasy hair—was promoted in popular magazines and fashion circles as "chic."

Just as rock stars helped popularize LSD during the

1960s, so have some fashion designers, photographers and advertising people of today influenced an entire generation of youth, by portraying heroin use in magazines and music videos as fashionable and even desirable.

It is grimly ironic that Davide Sorrenti (right)—the fashion photographer whose work was synonymous with "heroin chic"—reportedly died at the age of 20 from heroin overdose.



A VERY SLIPPERY SLOPE

Some children smoke cigarettes and drink alcohol when still very young.

By the time they graduate from high school, nearly 40% of all teens will have tried marijuana. Some later move on to more addictive substances.

We cannot assume that all children who smoke marijuana today will become heroin addicts tomorrow. But the danger does exist. And long-term studies of high school students show that few young people use other drugs without first having tried marijuana. Once a person can no longer get the initial “rush” he seeks, he begins to increase drug consumption or to look for something stronger.

LET'S FACE REALITY

Children increasingly are coming into contact with illegal drugs.

The 2007 National Survey on Drug Use and Health found that more than 9.5% of youths aged 12 to 17 in the US were current illegal drug users. In 2008, the National Center on Addiction and Substance Abuse at Columbia University reported that daily marijuana use among college students had doubled, and use of cocaine and heroin was on the rise as well.

According to the UN Office on Drugs and Crime, in 2008 an estimated 16 million people worldwide used opiates—opium, morphine, heroin and synthetic opiates.

THE NEW FACE OF HEROIN

The image of a listless young heroin addict collapsed in a filthy, dark alley is obsolete. Today, the young addict could be 12 years old, play video games and enjoy the music of his generation. He could appear smart, stylish and bear none of the common traces of heroin use, such as needle marks on his arm.

Because it is available in various forms that are easier to consume and more affordable, heroin today is more tempting than ever.

Between 1995 and 2002, the number of teenagers in America, aged 12 to 17, who used heroin at some point in their lives increased by 300%.

A young person who might think twice about putting a needle in his arm may more readily smoke or sniff the same drug. But this is falsely reassuring and may give one the idea that there is less risk. The truth is that heroin in all its forms is dangerous and addictive.



CHEESE HEROIN

A highly addictive drug known as “cheese heroin” is a blend of black tar Mexican heroin (called “black tar” because of its color) and over-the-counter cold medication, such as Tylenol PM.

The drug costs only a couple of dollars a hit and children as young as 9, hooked on cheese heroin, have been rushed to hospital emergency rooms for heroin withdrawal.

The combination of the two drugs can cause vital body functions such as breathing and heartbeat to slow down and result in death. Since 2004, cheese heroin is responsible for at least 40 deaths in the North Texas region, according to local authorities.

WHAT DEALERS WILL TELL YOU



When teens were surveyed to find out why they started using drugs in the first place, 55% replied that it was due to pressure from their friends. They wanted to be cool and popular. Dealers know this.

They will approach you as a friend and offer to “help you out” with “something to bring you up.” The drug will “help you fit in” or “make you cool.”

Drug dealers, motivated by the profits they make, will say anything to get you to buy their drugs. They will tell you that “heroin is a warm blanket” or “heroin will be your best high.”

They don’t care if the drugs ruin your life as long as they are getting paid. All they care about is money. Former dealers have admitted they saw their buyers as “pawns in a chess game.”

Get the facts about drugs. Make your own decisions.

The Truth About Drugs

Drugs are essentially poisons. The amount taken determines the effect.

A small amount acts as a stimulant (speeds you up). A greater amount acts as a sedative (slows you down). An even larger amount poisons and can kill.

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

But many drugs have another liability: they directly affect the mind. They can distort the user's perception of what is happening around him or her. As a result, the person's actions may be odd, irrational, inappropriate and even destructive.

Drugs block off all sensations, the desirable ones with the unwanted. So, while providing short-term help in the relief of pain, they also wipe out ability and alertness and muddy one's thinking.

Medicines are drugs that are intended to speed up or slow down or change something about the way your body is working, to try to make it work better. Sometimes they are necessary. But they are still drugs: they act as stimulants or sedatives, and too much can kill you. So if you do not use medicines as they are supposed to be used, they can be as dangerous as illegal drugs.

**The real answer is to get
the facts and not to take
drugs in the first place.**



WHY DO PEOPLE TAKE DRUGS?

People take drugs because they want to change something in their lives.

Here are some of the reasons young people have given for taking drugs:

- To fit in
- To escape or relax
- To relieve boredom
- To seem grown up
- To rebel
- To experiment

They think drugs are a solution. But eventually, the drugs become the problem.

Difficult as it may be to face one's problems, the consequences of drug use are always worse than the problem one is trying to solve with them. The real answer is to get the facts and not to take drugs in the first place.



REFERENCES

United Nations Office on Drugs and Crime World Drug Report 2008

White House Office of National Drug Control Policy

National Institutes of Health (U.S.)

Drug Enforcement Administration (U.S.)

“Research Report Series—Heroin Abuse and Addiction,” National Institute on Drug Abuse (U.S.)

Department of Health and Human Services (U.S.)

Center for Substance Abuse Research (U.S.)

“Treatment Episode Data Set (TEDS) Highlights—2006,” Substance Abuse and Mental Health Services Administration

“Results from the 2007 National Survey on Drug Use and Health: National Findings,” Substance Abuse and Mental Health Administration (U.S.)

National Library of Medicine (U.S.)

American Council for Drug Education’s Annals of Internal Medicine (April 1999)

The Lancet (UK)

Laboratory of the Municipal Police Amsterdam

Columbia University Medical Center

World Health Organization

European Monitoring Centre on Drugs and Drug Addiction

“Teen Charged in ‘Cheese Heroin’ Death, Jeremy Landers, AP, 28 Feb 2008

“Message from the Chairman,” The National Center on Addiction and Substance Abuse of Columbia University, Fall 2008

PHOTO CREDITS:

Page 5, 12: [istock.com/Peeter Viisimaa](https://www.istock.com/PeeterViisimaa);

Page 6: [istock.com/Stephanie Horrocks](https://www.istock.com/StephanieHorrocks);

Page 13: Stockxpert;

Page 13: U.S. Treasury Department, Bureau of Narcotics/heroin addict;

Page 15: Courtesy of Francesca Sorrenti

Millions of copies of booklets such as this have been distributed to people around the world in 22 languages. As new drugs appear on the streets and more information about their effects becomes known, existing booklets are updated and new ones created.

The booklets are published by the Foundation for a Drug-Free World, a nonprofit public benefit organization headquartered in Los Angeles, California.

The Foundation provides educational materials, advice and coordination for its international drug prevention network. It works with youth, parents, educators, volunteer organizations and government agencies—anyone with an interest in helping people lead lives free from drug abuse.

FACTS YOU NEED TO KNOW

This booklet is one in a series of publications that cover the facts about marijuana, alcohol, Ecstasy, cocaine, crack cocaine, crystal meth and methamphetamine, inhalants, heroin, LSD and prescription drug abuse. Armed with this information, the reader can make the decision to live a drug-free life.



For more information or to obtain more copies of this or other booklets in this series, contact:

Foundation for a Drug-Free World
1626 N. Wilcox Avenue, #1297
Los Angeles, CA 90028 USA

drugfreeworld.org • e-mail: info@drugfreeworld.org
Phone: 1-888 NOTODRUGS (1-888-668-6378)