or by using a fresh swab(s).

- Avoid vein damage by rotating injection sites. Be patient!
- Drink lots of water & warm up your body before injecting to make veins more visible.
- Dispose of syringes & equipment responsibly. Look for Needle & Syringe Programs (NSPs) that use this symbol for disposal. We have an NSP at HRVic!

## SAFFR HANDLING

Carrying drugs & paraphernalia puts you at greater risk of criminal charges. You can still be charged with trafficking even if you don't actually deal.

KNOW YOUR LOCAL LAWS.

## DRUG COMBINATIONS

\* Note: Any combination of three or more drugs can be extremely unpredictable and carry a high degree of risk.

#### DANGFROUS

Alcohol, ketamine, GHB/GBL/14-B, benzodiazepines & other depressants - increases sedation and can lead to unconsciousness, hypoxia (oxygen deficiency) and aspiration (breathing in vomit). Taking heroin with other depressants increases the risk of (fatal) overdose.

MXE - can increase the effects of heroin.

**DXM** – also a CNS depressant that can cause breathing difficulty, heart issues and a possible reduction in opioid tolerance (leading to an increased risk of overdose) when combined with heroin.

Cocaine - reduces the subjective effects of heroin, which may lead to an increased risk of overdose when the cocaine wears off.

Tramadol – also a CNS depressant that can increase the risk of seizures in people taking other opioids.

Lyrica and other anticonvulsants - can reduce breathing and heart rate, leading to hypoxia.

Some Antihistamines (Phnergan or Unisom) – also can reduce breathing and heart rate, leading to hypoxia.

### CAUTIOUS

PCP - can reduce opioid tolerance, increasing the risk of overdose.

N2O - increases the effects of both drugs. Leads to a higher risk of unconsciousness and memory blackouts are likely.

Meth/Amphetamines & other stimulants - reduces the subjective effects of heroin, which may lead to an increased risk of overdose when the stimulant wears off.

MAOIs - has been associated with rare reports of severe and fatal adverse reactions.

Taking heroin can be particularly dangerous if you have or are at risk of: •Asthma •COPD •Breathing issues

•Heart issues •Circulatory issues •Major depression/ anxiety

## DRUG TESTS & ROADSIDE TESTS

#### **Roadside Police Testing:**

Roadside saliva tests do not look for heroin, but other substances can be detected that might have been cut into your heroin. It is illegal to drive under the influence of any illicit drugs, including heroin and any driver may be subject to a roadside behavioural impairment test. Wait at least 24 hours before driving.

**Workplace:** : OHS law gives employers rights to test employees for drug use. This should be contained in workplace policy, it should be reasonable, and a risk assessment should be done to determine whether testing of employees is appropriate.

Urine: up to 3 days; Hair: up to 90 days; Blood: up to 2 days

Drug Checking (aka 'Pill testing'): Lab-quality testing has been trialed in Australia but is not vet available as a health service outside the ACT. However, DIY reagent testing is an option. Mandolin, Mecke and Marguis all give a reaction. Fentanyl testing strips are available in Australia and can detect the presence of fentanyl.

## MORF INFO:

This educational resource has been developed by people who use drugs for their peers and the wider community. The role of DanceWize is to provide practical, evidencebased, unbiased information to assist you to make educated choices and to promote harm reduction, community care. and wellbeing.

In an unregulated market it's impossible to know the purity or dose of any substance. Taking drugs from an unregulated market carries its own risk, and you can educate yourself and practice harm reduction to reduce this risk.

Knowledge is power.

### OTHER HELPFUL PEER BASED WEBSITES

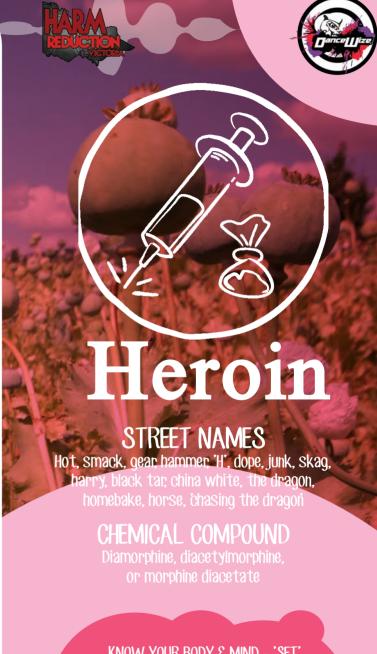
#### **AUSTRALIA**

www.dancewize.org.au www.dancewizensw.org.au www.tripsit.me www.hi-ground.org www.prism.org.au, www.consciousnest.info www.hrvic.org.au

### INTERNATIONAL

www.erowid.org www.dancesafe.org www.tripproject.ca https://www.kosmicare.org/ www.pillreports.com

Research your jurisdiction's Department of Health website for drug 'alerts' or 'warnings'. Both HRVic & DanceWize post these Drug Alerts on our socials.



KNOW YOUR BODY & MIND - 'SET' KNOW YOUR ENVIRONMENT - 'SETTING' KNOW YOUR DRUG - 'PRACTISE HARM REDUCTION SAY 'KNOW' TO DRUGS.

## DESCRIPTION

Heroin is an analgesic (*pain-relieving*) depressant that acts on the central nervous system (CNS), slowing down breathing and heart rate.

It is an opiate drug made from morphine; a natural substance taken from the seed pod of various opium poppy plants.

Heroin is most commonly a light beige powder in Australia, although it can also be a white or brown colour. It can sometimes come in a black sticky substance known as 'black tar' heroin, usually seen in Europe and North America.

When taken, heroin enters the brain rapidly and binds to opioid receptors on cells located in many areas, especially those involved in feelings of pain/pleasure and in controlling heart rate, sleeping, and breathing.

C.R. Alder Wright first synthesised this compound in 1874 while trying to find a "less physically dependent alternative" to Morphine.

In recent years, it is often adulterated by various fillers and cut with the extremely potent fentanyl, carfentanyl and xylazine causing an epidemic of overdose deaths worldwide. Luckily in Australia, we have not **yet** experienced any of this.

### **ADMINISTRATION** (MOST COMMON ROUTES)

Note: dosage can vary greatly from person to person and depending on the strength of the batch. Know your personal dose to avoid overdose.

- Injected (IV)
- Smoked

# **DURATION OF EFFECTS**

For heroin when injected IV-Total Duration: 4-5 hours

Onset: 15 seconds

Peak: 30 minutes - 2 hours Coming Down: 6 - 12 hours After Effects: 3 - 5 days

HALF LIFE (the time it takes for the amount of a drug's active substance in your body to reduce by half.)

The half life of heroin is around 2-3 minutes because of it's immediate conversion to morphine which has a half life of approx 6 hours. As the morphine continues to metabolise, it is estimated that approx. 1/8 will remain in your system after 18hrs even though you may not feel any effects. Remember this if using other substances or redosing.

# **FFFECTS**

='Set' (your mind & body)+'Setting' (environment) + Drug

KEY: A LESS COMMON A RARE

### PHYSICAL

- Itchiness
- Sedation
- Drowsiness
- Lethargy
- Nausea/vomiting
- Slowed breathing
- Dry mouth
- Constipation
- · Increased sweating
- Analgesia (numbness)
- Decreased heart rate
- · Decreased appetite
- Pupil constriction
- Increased energy
- Irregular menstruation
- Increased appetite
- Hypoxia (not enough oxygen)
- Seizure 🔌

### **EMOTIONAL**

- Euphoria
- Moodiness
- Emotional numbness
- Depression

#### **PSYCHOLOGICAL**

- Decreased sexual desire
- Paradoxical reaction (energetic movements & noises)

#### LONG TERM EFFECTS

- · Collapsed veins from repeated injecting.
- Long term or poor injecting practices & poorly cut gear can lead to the risk of abscesses, infected heart valves, pneumonia and the spread of blood borne viruses such as HIV or Hep B&C.
- Dependence both physical and psychological.

### WITHDRAWAL EFFECTS

Withdrawal Symptoms can begin within hours of your last use and include; sneezing, excessive yawning, coughing, sweating, chills, restless legs, irritability, moodiness, insomnia, severe muscle & bone pain, diarrhea, increased urination, dehydration, anxiety,

nausea, vomiting, cramps, involuntary spasms and sensitive genitals (women).

## SAFER USING

- Remember 'Set' (your current mindset & body), and 'Setting', (other people & environment around you),
- Try using around people you trust and somewhere you feel safe. If you can't avoid using alone, ask a friend to call or check in on you.
- Naloxone is a safe and freely available medication that can completely reverse a heroin overdose.
  Learn about and carry naloxone if you, or anyone you know, uses opioids.
- A "safe" dose of heroin is person specific, and heroin will affect everyone differently. What could be fun for one person could be dangerous for another.
- Everyone will rapidly build tolerance to heroin with repeated use, (meaning you have to take more of it to get the same effects). If there has been any amount of time between your last use, you may no longer have this tolerance and will only require a fraction of the amount you used to take. Be careful as your previous dose may now be enough to cause an overdose without any tolerance.
- Heroin strength varies from deal to deal and batch to batch. If you are unsure of the strength of a new score, it's better to take less than your usual amount than to risk an overdose.

### WHEN SMOKING

- Avoid sharing smoking devices to prevent sharing blood borne viruses such as Hep C.
- Keep your lips moisturised to avoid cracking & bleeding.
- Clean your smoking devices by soaking in boiling water.

### WHEN INJECTING

- Use your own, new/sterile injecting equipment, (inc. water). Where it isn't possible to get sterile water, use filtered or cooled down, boiled kettle water.
  Please Note: Bottled water is NOT sterile!
- Avoid sharing any of your equipment, (water, spoon, filters, etc), not just needles.
- Wash your hands AND your injecting site thoroughly before and after with soap and water or a fresh alcohol swap.
- Wipe down the mixing area with warm soapy water