

Club Drugs: An Overview



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Overview

In recent years, certain drugs have emerged and become popular among teens and young adults at dance clubs and "raves." These drugs, collectively termed "club drugs," include MDMA/Ecstasy (methylenedioxymethamphetamine), Rohypnol (flunitrazepam), GHB (gamma-hydroxybutyrate), and ketamine (ketamine hydrochloride).

Producing both stimulant and psychedelic effects, MDMA is often used at parties because it enables partygoers to dance and remain active for longer periods of time. The tasteless and odorless depressants Rohypnol and GHB are often used in the commission of sexual assaults due to their ability to sedate and intoxicate unsuspecting victims. Rohypnol, a sedative/tranquilizer, is legally available for prescription in over 50 countries outside of the U.S. and is widely available in Mexico, Colombia, and Europe. Although usually taken orally, recent reports have shown that users are also grinding Rohypnol into a powder and snorting the drug.

GHB can be found in an odorless, colorless liquid form or as a white powdered material and is taken orally, frequently being combined with alcohol. It can be used to incapacitate women for the commission of sexual assaults and is also sometimes used by body builders for its alleged anabolic effects.

Ketamine, a tranquilizer most often used on animals, has also recently been found at parties and produces hallucinatory effects similar to those of PCP and LSD. Ketamine, which has gained popularity over the last 5 to 10 years, can be produced as a liquid or a powder. The liquid form can be injected, mixed into drinks, or added to smokable materials. The powder form can also be mixed into drinks as well as snorted or smoked.

Prevalence Estimates

Among high school students surveyed in 2000, 8.2% of 12th graders, 5.4% of 10th graders, and 3.1% of 8th graders stated that they had used MDMA in the past year. 9.1% of college students and 7.2% of young adults (ages 19–28) surveyed in 2000 reported that they had used MDMA in the past year. This is up from 5.5% of college students and 3.6% of young adults surveyed in 1999 reporting MDMA use in the past year. In the 2000 survey, 13.1% of college students and 11.6% of young adults reported using MDMA at least once in their lifetimes. 2.5% of the college students surveyed and 1.9% of the young adults reported using this drug in the 30 days prior to the survey. According to the 2000 National Household Survey on Drug Abuse, more than 6.4 million people age 12 and older reported that they had used MDMA at least once in their lifetime. Among 12-17 year olds, 2.6% reported lifetime MDMA use. 9.7% of 18–25 year olds reported MDMA lifetime use.

According to data from the *2000 Monitoring the Future Study*, 1.5% of 12th graders, 1.3% of 10th graders, and 1.0% of 8th graders surveyed reported using Rohypnol at least once in their lives. The percentages of students reporting lifetime Rohypnol use has decreased since 1998 when 3.0% of 12th graders, 2.0% of 10th graders, and 1.4% of 8th graders reported using this substance during their lifetimes.

Consequences of Use

Using MDMA can cause serious psychological and physical damage. The psychological effects can include confusion, depression, anxiety, and paranoia and may last weeks after ingesting MDMA. Physically, a user may experience nausea, faintness, and significant increases in heart rate and blood pressure. MDMA use can also cause muscle breakdown and kidney and cardiovascular system failure, and may be responsible for several fatalities that have occurred at dance clubs.

Rohypnol, GHB, and Ketamine are all central nervous system (CNS) depressants. Lower doses of Rohypnol can cause muscle relaxation and can produce general sedative and hypnotic effects. In higher doses, Rohypnol can cause a loss of muscle control, loss of consciousness, and partial amnesia. When combined with alcohol, Rohypnol can be deadly. The sedative effects of Rohypnol begin to appear approximately 15 to 20 minutes after the drug is ingested. These effects usually last from four to six hours after administration of the drug, but some cases have been reported in which the effects were experienced 12 hours or more after administration.

GHB has been shown to produce drowsiness, nausea, unconsciousness, seizures, severe respiratory depression, and coma. GHB has also increasingly become involved in poisonings, overdoses, "date rapes," and fatalities. During 2000, there were 4,969 emergency department mentions of GHB reported to the Drug Abuse Warning Network (DAWN). There were also 4,511 MDMA mentions, 469 Rohypnol mentions, and 263 Ketamine mentions during 2000.

Ketamine produces effects similar to PCP and the visual effects of LSD. Lasting approximately an hour or less, the overt hallucinatory effects of Ketamine are relatively short acting. Despite this, the user's senses, judgement, and coordination can be affected for up to 18 to 24 hours after the initial use of the drug. Ketamine has also been involved in fatalities across the U.S. In 1999, Ketamine HCl was mentioned 21 times by Medical Examiners in DAWN cities nationwide.

Adjudication

The Drug Enforcement Administration as well as the U.S. Customs Service have seen an increase in the number of arrests and seizures of MDMA. The DEA seized more than 3 million MDMA tablets in 2000, up from 196 tablets in 1993. The number of seizures made by U.S. Customs officials numbered approximately 9.3 million MDMA tablets in 2000, up from 3.5 million in 1999.

Production, Trafficking, and Distribution

GHB and GHB kits can be found on the Internet and the steroid black market and are marketed as strength training aids or anti-depressants. The distribution of GHB is handled by local operators due to the ease of manufacturing.

MDMA is produced in clandestine laboratories the majority of which are located in Europe, although some labs have been seized in the United States. Israeli organized crime syndicates and Western European organizations are the major traffickers of MDMA to the United States and are capable of smuggling large quantities of the drug.

Rohypnol is produced legally outside the country; however, it is illegal in the United States. Sources of Rohypnol include Brazil, Colombia, Ecuador, Mexico, and Peru. Smugglers try to disguise the drug in bottles marked as vitamins or in its original packaging as cold medicine.

Ketamine, legitimately used by veterinarians, is stolen or diverted from its legitimate use to the street. Burglaries of veterinarian clinics where ketamine has been stolen have been increasingly reported.

Legislative History

All of the club drugs have been scheduled under the Controlled Substances Act (CSA), Title II of the Comprehensive Drug Abuse Prevention and Control Act of 1970. On February 18th, 2000 the Hillory J. Farias and Samantha Reid Date-Rape Prohibition Act of 2000 was signed by the President. The legislation is named after two girls that died after unknowingly ingesting GHB. This legislation makes GHB a Schedule I drug. MDMA is a Schedule I substance, Rohypnol is Schedule IV, and Ketamine is a Schedule III drug. Also, in response to the Ecstasy Anti-Proliferation Act of 2000, the U.S. Sentencing Commission increased the guideline sentence for trafficking ecstasy. This new amendment, which became permanent on November 1, 2001, increases sentences for trafficking 800 pills of MDMA by 300 percent, from 15 months to 5 years. It also increases the penalties for trafficking 8,000 pills by almost 200 percent from 41 months to 10 years

Street Terminology

GHB	MDMA	Rohypnol	Ketamine
Soap	XTC	R-2	Jet
Scoop	Go	Mexican Valium	Super Acid
Max	Ecstasy	Rophies	Special "K"
Liquid Ecstasy	Disco Biscuit	Rope	Honey Oil
Grievous Bodily Harm	Cristal	Roofies	Green
Goop	X	Roaches	K
Georgia Home Boy	Adam	Forget Me Drug	Cat Valium
Easy Lay	Hug Drug	Circles	Super C