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Heroin and other opiates, HIV and your health



Information for users, families
and friends

[Field test draft]



Opiates, sometimes referred to as narcotics, are a group of drugs which are used medically to relieve pain, but also have a high potential for abuse. Some opiates come from a resin taken from the seed pod of the Asian poppy. This group of drugs includes opium, morphine, heroin, and codeine. Other opiates, are synthesized or manufactured. Opium appears as dark brown chunks or as a powder and is usually smoked or eaten.

Heroin can be a white or brownish powder which is usually dissolved in water and then injected. Most street preparations of heroin are diluted, or "cut," with other substances such as sugar or quinine. Other opiates come in a variety of forms including capsules, tablets, syrups, solutions, and suppositories.

Which opiates are abused?

Heroin ("junk," "smack") accounts for 90 percent of the opiate abuse in the United States. Sometimes opiates with legal medicinal uses also are misused. They include morphine, meperidine, paregoric (which contains opium), and cough syrups that contain codeine [or a synthetic narcotic, such as dextromethorphan].

What are the effects of opiates?

Opiates tend to relax the user. When opiates are injected, the user feels an immediate "rush." Other initial and unpleasant effects include restlessness, nausea, and vomiting. The user may go "on the nod," going back and forth from feeling alert to drowsy. With very large doses, the user cannot be awakened, pupils become smaller, and the skin becomes cold, moist, and bluish in color. Breathing slows down and death may occur.

Does using opiates cause dependence or addiction?

Yes. Dependence is likely, especially if a person uses a lot of the drug or even uses it occasionally over a long period of time. When a person becomes dependent, finding and using the drug often becomes the main focus in life. As more and more of the drug is used over time, larger amounts are needed to get the same effects. This is called tolerance.

What are the physical dangers?

The physical dangers depend on the specific opiate used, its source, the dose, and the way it is used. Most of the dangers are caused by using too much of a drug, the use of unsterile needles, contamination of the drug itself, or combining the drug with other substances. Over time, opiate users may develop infections of the heart lining and valves, skin abscesses, and congested lungs. Infections from unsterile solutions, syringes, and needles can cause illnesses such as stronger approximately 24-72 hours after they begin, and subside within 7-10 days. Sometimes symptoms such as sleeplessness and drug craving can last for months

What are the dangers for opiate-dependent pregnant women? Researchers estimate that nearly half of the women who are dependent on opiates suffer anemia, heart disease, diabetes, pneumonia, or hepatitis during pregnancy and childbirth. They have more spontaneous abortions, breech deliveries (babies come out the wrong way), caesarean sections, premature births, and stillbirths. Infants born to these women often have withdrawal symptoms which may last several weeks or months. Many of these babies die.



What are opiates?

What treatment is available for opiate addiction?

The four basic approaches to drug abuse treatment are: detoxification (supervised withdrawal from drug dependence, either with or without medication) in a hospital or as an outpatient, therapeutic communities where patients live in a highly structured drug-free environment and are encouraged to help themselves, outpatient drug-free programs which emphasize various forms of counseling as the main treatment, and methadone maintenance which uses methadone, a substitute for heroin, on a daily basis to help people lead productive lives while still in treatment.

How does methadone treatment work?

Methadone, a synthetic or manufactured drug, does not produce the same "high" as illegal drugs such as heroin, but does prevent withdrawal and the craving to use other opiates. It often is a successful treatment for opiate dependence because it breaks the cycle of the need for illegal drugs such as heroin. When patients are receiving methadone in treatment, they are not inclined to seek and buy illegal drugs on the street, activities which are often associated with crime.

What are narcotic antagonists or "blockers"?

Narcotic antagonists are drugs which block the "high" and other effects of opiates without creating physical addiction or producing a "high" of their own. They are extremely useful in treating opiate overdoses and may prove useful in the treatment of opiate dependence (addiction).

Heroin Use and Pregnancy

Heroin use can cause serious complications during pregnancy, including miscarriage and premature delivery. Children born to addicted mothers are at greater risk of SIDS (sudden infant death syndrome).

Pregnant women should not be detoxified from opiates because of the increased risk of spontaneous abortion or premature delivery; rather, treatment with methadone is strongly advised. Although infants born to mothers taking prescribed methadone may show signs of physical dependence (addiction), they can be treated in an antenatal care hospital or specialist drug treatment service.

HIV and Heroin

Sharing injecting equipment can make it easier for heroin users who inject to catch HIV or pass on HIV if infected.

Using heroin may prevent you from using condoms, and you may either to get HIV or pass it on to others.

ARVs called NNRTIs (Efavirenze and Nevarapine) and PI (Ritonavir contained drugs) can significantly cause more rapid drug withdrawal. The result can be increased, dangerous self-use of higher doses of opioids and overdose, toxicity and death.