

NIDA NOTES

Tearoff

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Facts About Methamphetamine

Methamphetamine is a central nervous system stimulant with a high potential abuse and dependence. A synthetic drug, methamphetamine is closely related chemically to amphetamine, but produces greater effects on the central nervous system. The drug's euphoric effects are similar to but longer lasting than those of cocaine.

Methamphetamine takes the form of a white, odorless, and bitter-tasting crystalline powder, readily soluble in water or alcohol. Street methamphetamine is referred to by many names including "meth," "speed," "zip," "go-fast," "cristy," "chalk," and "crank." Pure methamphetamine hydrochloride, the smokable form of the drug, is called "L.A." or - because of its clear, chunky crystals- "ice" "crystal," "glass," or "quartz."

Methods and Effects of Use

Methamphetamine can be smoked, injected intravenously, snorted, or ingested orally. The drug alters mood in different ways, depending on how it is taken. Immediately after smoking or intravenous injection, the user experiences an intense "rush" or "flash" that lasts only a few minutes and is described as extremely pleasurable. Smoking or injecting produces effects fastest, within 5 to 10 seconds. Snorting or ingesting orally produces euphoria - a high but not an intense rush. Snorting produces effects within 3 to 5 minutes, and ingesting orally produces effects within 15 to 20 minutes.

Even small amounts of methamphetamine can produce euphoria, enhanced wakefulness, increased physical activity, decreased appetite, and increased respiration. Other central nervous system effects include athetosis (writhing, jerky, or flailing movements), irritability, insomnia, confusion, tremors, anxiety, aggression, hyperthermia, and convulsions. Hyperthermia and convulsions sometimes can result in death.

Cardiovascular side effects include chest pain and hypertension and sometimes can result in cardiovascular collapse and death. In addition, methamphetamine causes increased heart rate and blood pressure and sometimes can cause irreversible damage to blood vessels in the brain, producing strokes. Methamphetamine abuse during pregnancy may result in prenatal complications, increased rates of premature delivery, and altered neonatal behavioral patterns.

Psychological symptoms of prolonged methamphetamine abuse can resemble those of schizophrenia and are characterized by paranoia, hallucinations, repetitive behavior patterns, and formication (delusions of parasites or insects on the skin). Methamphetamine-induced paranoia can result in homicidal or suicidal thoughts. Although no characteristic physical signs of withdrawal are associated with methamphetamine abuse, users report drug craving, depressed mood, sleepiness, and hunger.

Extent of Use

NIDA's 1996 Monitoring the Future study, which assessed the extent of drug use among 8th-, 10th-, and 12th-graders across the country, reports that:

- When high school seniors were asked if they had used crystal methamphetamine at least once in their lifetimes, 4.4 percent said they had-an increase from 2.7 percent in 1990;
- In that same year, when high school seniors were asked if they had used crystal methamphetamine in the 12 months prior to the survey, 2.8 percent said they had-an increase from 1.3 percent in 1990.

The Substance Abuse and Mental Health Services Administration's Drug Abuse Warning Network reports that from 1991 to 1994, the number of methamphetamine-related visits to hospital emergency departments more than tripled, from 4,887 to 17,397.

More Information

For more information about methamphetamine, contact the **National Clearinghouse for Alcohol and Drug Information (NCADI)**, P.O. Box 2345, Rockville, MD 20847, at 1-800-729-6686. Information is also available at the NCADI Web site at <http://www.health.org> or at the NIDA Web site at <http://www.nida.nih.gov/>

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