

# Diman Regional Vocational Technical High School

## **Fall River – Somerset – Swansea – Westport**

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TO: All Faculty

FROM: Brian S. Bentley, *Assistant Superintendent-Director/Principal*

SUBJECT: Student Anti Drug/Alcohol Education Information

As a part of Diman's continuing Anti Drug/Alcohol Education program we need to stress the concept of not only "Drug Free Schools" but also "The Drug Free Workplace".

Please review the following information for detecting substance abuse.

## **Drugs of Abuse:**

Categories

Descriptions

Effects

Symptoms of Overdose

Withdrawal Symptoms

Indications of Misuse

Reproduced by the School & Community Access Center

If you suspect a student's involvement contact:

- Dean of Students 1210
- School Nurse 1770 or 1771
- PPS 1500 or 1550
- Poison Control 1-800 682-9211



National Clearinghouse for Alcohol  
and Drug Information



Substance Abuse and Mental Health Services Administration  
Center for Substance Abuse Prevention

# DRUG CATEGORIES

## SUBSTANCES OF ABUSE

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To assist you in locating substances in this document, the following cross reference by category is provided.

<b>NARCOTICS</b>	Alfentanil Cocaine* Codeine Crack Cocaine* Fentanyl Heroin Hydromorphone Ice Meperidine Methadone Morphine Nalorphine Opium Oxycodone Propoxyphene	<b>STIMULANTS</b>	Amphetamine Benzedrine Benzphetamine Butyl Nitrite Dextroamphetamine Methamphetamine Methylphenidate Phenmetrazine
		<b>HALLUCINOGENS</b>	Bufotenine LSD MDA MDEA MDMA Mescaline MMDA Phencyclidine Psilocybin
		<b>CANNABIS</b>	Lorazepam Marijuana Tetrahydrocannabinol
		<b>ALCOHOL</b>	Ethyl Alcohol
		<b>STEROIDS</b>	Dianabol Nandrolone

\* Cocaine, while classified under the Controlled Substances Act (CSA) as a narcotic, is also discussed as a stimulant.

## DEPRESSANTS

<b>Drug</b>	<b>Dependence</b> Physical/Psychological	<b>How Used</b>	<b>Duration</b> (hours)
Barbiturates	High/Mod.	Oral	1-16
Methaqualone	High/High	Oral	4-8
Tranquilizers	Low/Low	Oral	4-8
Chloral Hydrate	Mod./Mod.	Oral	5-8
Glutethimide	High/Mod.	Oral	4-8

<b>What are Depressants?</b>	<p>Drugs used medicinally to relieve anxiety, irritability, tension</p> <p>High potential for abuse, development of tolerance</p> <p>Produce state of intoxication similar to that of alcohol</p> <p>Combined with alcohol, increase effects, multiply risks</p>
<b>Possible Effects</b>	<p>Sensory alteration, anxiety reduction, intoxication</p> <p>Small amounts cause calmness, relaxed muscles</p> <p>Larger amounts cause slurred speech, impaired judgment, loss of motor coordination</p> <p>Very large doses may cause respiratory depression, coma, death</p> <p>Newborn babies of abusers may show dependence, withdrawal symptoms, behavioral problems, birth defects</p>
<b>Symptoms of Overdose</b>	<p>Shallow respiration, clammy skin, dilated pupils</p> <p>Weak and rapid pulse, coma, death</p>
<b>Withdrawal Syndrome</b>	<p>Anxiety, insomnia, muscle tremors, loss of appetite</p> <p>Abrupt cessation or reduced high dose may cause convulsions, delirium, death</p>
<b>Indications of Possible Misuse</b>	<p>Behavior similar to alcohol intoxication (without odor of alcohol on breath)</p> <p>Staggering, stumbling, lack of coordination, slurred speech</p> <p>Falling asleep while at work, difficulty concentrating</p> <p>Dilated pupils</p>

## HALLUCINOGENS

<b>Drug</b>	<b>Dependence</b> Physical/Psychological	<b>How Used</b>	<b>Duration</b> (hours)
PCP Angel Dust Loveboat	Unknown/High	Smoke, oral	Up to days injected
LSD Acid Green/Red Dragon	None/Unknown	Oral	8-12
Mescaline, Peyote	None/Unknown	Oral, injected	8-12
Psilocybin	None/Unknown	Oral, injected, smoked sniffed	Variable
Designer Drugs* Ecstasy - PCE	Unknown/Unknown	Oral, injected, smoked	Variable

**What are Hallucinogens?** Drugs that produce behavioral changes that are often multiple and dramatic  
 No known medical use, but some block sensation to pain and use may result in self-inflicted injuries  
 “Designer Drugs”, made to imitate certain illegal drugs, are often many times stronger than drugs they imitate

**Possible Effects** Rapidly changing feelings, immediately and long after use  
 Chronic use may cause persistent problems, depression, violent behavior, anxiety, distorted perception of time  
 Large doses may cause convulsions, coma, heart/lung failure, ruptured blood vessels in the brain  
 May cause hallucinations, illusions, dizziness, confusion, suspicion, anxiety, loss of control  
 Delayed effects – “flashbacks” may occur long after use  
 Designer drugs – one use may cause irreversible brain damage

**Symptoms of Overdose** Longer, more intense “trip” episodes, psychosis, coma, death

**Withdrawal Syndrome** No known withdrawal syndrome

**Indications of Possible Misuse** Extreme changes in behavior and mood; person may sit or recline in a trance-like state; person may appear fearful  
 Chills, irregular breathing, sweating, trembling hands  
 Changes in sense of light, hearing, touch, smell, and time  
 Increase in blood pressure, heart rate and blood sugar  
 \*Phencyclidine analogs, Amphetamine variants

# ALCOHOL

<b>Drug</b>	<b>Dependence</b> Physical/Psychological	<b>How Used</b>	<b>Duration</b> (hours)
Ethyl Alcohol	Possible/Possible	Oral	1-4
Ethanol	Possible/Possible	Oral	1-4

**What is Alcohol?** Liquid distilled product of fermented fruits, grains and vegetables  
Used as solvent, antiseptic and sedative  
Moderate potential for abuse

**Possible Effects** Intoxication  
Sensory alteration  
Anxiety reduction

**Symptoms of Overdose** Staggering  
Odor of alcohol on breath  
Loss of coordination  
Slurred speech, dilated pupils  
Fetal alcohol syndrome (in babies)  
Nerve and liver damage

**Withdrawal Syndrome** Sweating  
Tremors  
Altered perception  
Psychosis, fear, auditory hallucinations

**Indications of Possible Misuse** Confusion, disorientation, loss of motor nerve control  
Convulsions, shock, shallow respiration  
Involuntary defecation, drowsiness  
Respiratory depression and possible death

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## **Substances of Abuse – Brief Profiles**

This section contains Brief Profiles for eight substances that are commonly abused. These profiles describe some, but not all, of the actions and side effects of these drugs.

These substances of abuse are covered in the following pages:

**Alcohol**

**Marijuana**

**Inhalants**

**Steroids**

**Crack**

**Cocaine**

**Ice**

**Hallucinogens**

### **MARIJUANA**

Also known as:

Pot, Grass, Joints, Roaches, Reefer, Weed, Mary Jane

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*You probably know why marijuana is abused –*

- Relaxation
- Euphoria

*But did you know that –*

- Marijuana may cause impaired short-term memory, a shortened attention span and delayed reflexes.
- During pregnancy, marijuana may cause birth defects.
- Repeated use of marijuana may cause breathing problems.
- Possession of marijuana is illegal in all fifty states.
- Marijuana may cause relaxed inhibitions, disoriented behavior.

## STEROIDS

Three types of steroids –

Anabolic (male hormone) – steroids most frequently abused

Cortical

Estrogenic (female hormone)

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*You probably know why steroids are abused –*

- Increase strength
- Increase muscle size
- Help muscles recover

*But did you know that abuse of steroids may cause –*

- Severe acne, rashes, stunted growth
- Sexual function problems
- Women to take on masculine traits, develop hairiness
- Behavioral changes, aggressiveness (“roid rages”)
- Long-term effects, such as cholesterol increases, heart disease, liver tumors, cancer, cataracts and death

# COCAINE

Also known as:

Coke, Dust, Snow, Flake, Blow, Girl

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*You probably know why cocaine is abused –*

- Carefree Feeling
- Euphoria
- Relaxation
- In control

*But did you know that –*

- A cocaine “high” lasts only about 5 to 20 minutes.
- Cocaine use may cause severe “mood swings” and irritability.
- You need more and more cocaine each time you want a “high.”
- Cocaine increases your blood pressure and heart rate – particularly dangerous if you have a heart condition.
- One use can cause death!
- Possession and use are illegal and can result in fines and arrest.

# HALLUCINOGENS

Some types of hallucinogens –

- LSD (Acid, Red/Green Dragon) • Ecstasy (designer drug) • PCP (Angel Dust, Loveboat) • PCP & Cocaine (Beam me up Scottie) • Mescaline • Psilocybin
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*You probably know why hallucinogens are abused –*

- Fun
- Stimulation or depression
- Behavioral changes

*But did you know that –*

- One use of LSD or PCP can cause multiple and dramatic behavioral changes.
- Large doses of hallucinogens may cause convulsions, ruptured blood vessels in the brain and irreversible brain damage.
- Many hallucinogens cause unpleasant and potentially dangerous “flashbacks,” long after the drug was used.
- Most hallucinogens cause “hallucinogens,” i.e., changes in perception of time, smell, touch, etc.