

Cocaine ●

What is cocaine?

Cocaine is a stimulant drug, which means that it speeds up the messages travelling between the brain and the rest of the body.

Cocaine comes from the leaves of the coca bush (*Erythroxylum coca*), which is native to South America. The leaf extract is processed to produce 3 different forms of cocaine:

- **Cocaine hydrochloride:** a white, crystalline powder with a bitter, numbing taste. Cocaine hydrochloride is often mixed, or ‘cut’, with other substances such as lactose and glucose, to dilute it before being sold.
- **Freebase:** a white powder that is more pure with less impurity than cocaine hydrochloride.
- **Crack:** crystals ranging in colour from white or cream to transparent with a pink or yellow hue, it may contain impurities.¹

Other names

C, coke, nose candy, snow, white lady, toot, Charlie, blow, white dust or stardust.

How is it used?

Cocaine hydrochloride is most commonly snorted. It can also be injected, rubbed into the gums, added to drinks or food.²

Freebase and crack cocaine are usually smoked.¹

Indigenous people of South America have traditionally chewed the leaves of the coca bush, or brewed them as a tea, for use as a stimulant or appetite suppressant.³

Effects of cocaine

There is no safe level of drug use. Use of any drug always carries some risk. It’s important to be careful when taking any type of drug.

Cocaine affects everyone differently, based on:

- size, weight and health
- whether the person is used to taking it
- whether other drugs are taken around the same time
- the amount taken
- the strength of the drug (varies from batch to batch).

You may experience:

- happiness and confidence
- talking more
- feeling energetic and alert
- quiet contemplation and rapture
- feeling physically strong and mentally sharp
- reduced appetite
- dry mouth
- enlarged (dilated) pupils
- higher blood pressure and faster heartbeat and breathing (after initial slowing)

- higher body temperature
- increased sex drive
- unpredictable, violent or aggressive behaviour
- indifference to pain.²

Overdose

If you take a large amount or have a strong batch, you could overdose. If you have any of the symptoms below, call an ambulance straight away by dialling triple zero (000). Ambulance officers don’t need to involve the police. Symptoms of overdose may include:

- nausea and vomiting
- extreme anxiety
- chest pain
- panic
- extreme agitation and paranoia
- hallucinations
- tremors
- breathing irregularities
- kidney failure
- seizures
- stroke
- heart Problems.^{2,4}

High doses and frequent heavy use can also cause ‘cocaine psychosis’, characterised by paranoid delusions, hallucinations and out of character aggressive behaviour. These symptoms usually disappear a few days after the person stops using cocaine.

If injecting drugs there is an increased risk of:

- tetanus
- infection
- vein damage.

If sharing needles there is an increased risk of:

- hepatitis B
- hepatitis C
- HIV and AIDS.

Find out more about overdose at adf.org.au/insights/overdose/

Coming down

In the days after cocaine use, you may feel:

- tension and anxiety
- depression
- mood swings
- total exhaustion.^{2,5}

Long-term effects

Regular use of cocaine may eventually cause:

- insomnia and exhaustion
- depression
- anxiety, paranoia and psychosis
- sexual dysfunction
- hypertension and irregular heartbeat
- heart disease and death.^{1,5,6}

Snorting cocaine regularly can also cause:

- runny nose and nose bleeds
- nose infection
- a hole in the tissue separating the nostrils
- long term damage to the nasal cavity and sinuses.⁵

Withdrawal

Giving up cocaine after using it for a long time is challenging because the body has to get used to functioning without it.

It’s therefore important to talk to your GP or another health professional before trying to give up.

Phases of withdrawal

Withdrawal symptoms usually start around 1–2 days after last use and can last for approximately 10 weeks – days 4 to 7 will be the worst.

Withdrawal usually happens in 3 phases:

- **Crash** – agitation, depression or anxiety, intense hunger, cocaine cravings, restless sleep, extreme tiredness (experienced in the first few days).
- **Withdrawal** – cocaine cravings, lack of energy, anxiety, angry outbursts and an inability to feel pleasure (can last for up to 10 weeks).
- **Extinction** – intermittent cravings for cocaine (ongoing).⁷

Find out more about withdrawal at adf.org.au/alcohol-drug-use/supporting-a-loved-one/withdrawal/

Getting help

If your use of cocaine is affecting your health, family, relationships, work, school, financial or other life situations, you can find help and support.

Help and support services directory adf.org.au/help-support/support-services-directory/

Information about treatment adf.org.au/alcohol-drug-use/supporting-a-loved-one/treatment/

Cocaine and the law

Federal and state laws provide penalties for possessing, using, making or selling cocaine, or driving under the influence

Cocaine statistics

National

- 9% of Australians aged 14 years and over have used cocaine one or more times in their life.⁸
- 2.5% of Australians aged 14 years and over have used cocaine in the previous 12 months.⁸

Young people

- The 1.9% of 12-17 year olds who take cocaine have only used it once or twice.⁹
- Young Australians (aged 14–24) first try cocaine at 23.9 years on average.⁸

References

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2. Cocaine and mental health, (2017), retrieved from <https://www.healthdirect.gov.au/cocaine-and-mental-health>
3. Weiss, R., Mirin, S., & Bartel, R. (1994). Cocaine (2nd ed.). Washington: Psychiatric Press Inc.
4. Kaye, S., & Darke, S. (2004). Non-fatal cocaine overdose among injecting and non-injecting cocaine users in Sydney, Australia, *Addiction* 99(10), 1315–1322.
5. Campbell, A. (2001). *The Australian illicit drug guide*. Melbourne: Black Inc.
6. Morentin, B., Ballesteros, J., Callado, L. & Meana, J. (2014). Recent cocaine use is a significant risk factor for sudden cardiovascular death in 15-49 year old subjects: a forensic case-control study [PDF:12KB].
7. Gawin, F., & Kleber, H. (1986). Abstinence symptomatology and psychiatric diagnosis in cocaine abusers. *Archive of General Psychiatry*, 43(2), 107–113.
8. Australian Institute of Health and Welfare. (2017). *National Drug Strategy Household Survey detailed report 2016*. Canberra: AIHW.
9. White, V., & Williams, T. (2016). *Australian secondary school students’ use of tobacco, alcohol, and over-the-counter and illicit substances in 2014*. Melbourne: The Cancer Council, Victoria.

Always call an ambulance on triple zero (000) if an overdose is suspected: tell the paramedic exactly what has been taken. Paramedics are there to help and will not involve the police unless there is a danger to themselves or others.

Other help, support services and resources

Links to further help and support • adf.org.au/help-support/

● **Further information**

DrugInfo • 1300 85 85 84

Free confidential information and advice about alcohol and other drugs (9am - 5pm, Mon-Fri))

Family Drug Help • 1300 660 068 • www.familydrughelp.com.au (Victorian-based)

Services are available to support those around you who may be affected by your drug use. As well as providing understanding, they can provide information about how best to help during treatment.

Family Drug Support • 1300 368 186 • www.fds.org.au (Australia-wide)



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