

Our Futures – Year 10

MDMA and Emerging Drugs: Lesson 3

Parent Summary

Effects of MDMA: Lesson 3

What is polydrug use?

Polydrug use involves using two or more drugs at the same time or on the same occasion.

Why might some people mix drugs?

People may mix drugs together for several reasons:

- To enhance the effects of another drug.
- To counteract the effects of another drug e.g. some people may use cannabis or benzodiazepine (a minor tranquilliser with sedative effects) to try to lessen the come down after taking MDMA or speed.
- As a substitute for an unavailable drug.
- To conform to what other people are doing

What effect can mixing drugs have?

It is not always possible to predict the exact effects of a single drug, so when people mix drugs, the effects are even more unpredictable, depending on which drugs are mixed together.

1. The combination of drugs can produce an intensified effect (“**additive reaction**”),
2. One drug may increase the effect of another drug, i.e. the combination of drugs result in a greater effect than just the additive effects (“**potentiation**”).
3. The second drug can lessen the effect of the first (“**antagonism**”).

Depressant + depressant drugs

E.g. Alcohol + heroin

Mixing two depressants can be very dangerous as these drugs slow down the central nervous system (CNS), and decrease a person's heart rate and breathing. Slowing these functions down too much increases the risk of coma or death.

Stimulant + stimulant drugs

E.g. MDMA + speed

Mixing two stimulants as these drugs speed up the CNS and increase your heart rate and breathing. Taking more than one type of stimulant places strain on the body's organs, and increases the risk of psychosis, anxiety, panic attacks and heart problems.

Depressant + stimulant drugs

E.g. MDMA + alcohol

Mixing a depressant and stimulant drug can lead to unpredictable reactions and places great pressure on the body. The two types of drugs work in opposite ways i.e. the depressant tries to slow the body down, while the stimulant tries to speed it up. Combining alcohol and MDMA is especially dangerous as they both raise body temperature and blood pressure, and can result in severe dehydration, which in rare cases can cause death.

It is not just the effects of a known drug that are of concern...

As your child has learnt, you can never be sure what is in a pill/capsule/powder, even if you think it's MDMA or another drug. If a person mixes two drugs, there is no way of knowing what chemicals they are actually mixing. This can lead to unpredictable reactions and could be fatal.

Making Choices and Effective Communication Skills

In some situations, or with some people it can be difficult to resist the pressure to use drugs. Many people your age find it difficult to express their opinion or say "no". There are several different skills you can use to help resist social pressure such as: assertiveness, making an excuse, using delay tactics, taking the 'broken record' approach, walking away and avoiding the situation.

Skill 1

Being assertive

There are three main ways we can communicate:

1. Assertive communication: a person clearly states their needs, wants and feelings whilst still being respectful of others.
2. Aggressive communication: a person puts their needs, wants and feelings on others - usually in an intimidating way - whilst completely disregarding the needs, wants and feelings of others.
3. Unassertive/passive communication: a person gives in to other people's requests at the expense of their own rights and feelings. Unassertive behaviour appears to be timid and lack self-confidence.

While in most cases it is better to communicate assertively, there are a few occasions in life (often involving unhealthy relationships) where it may be appropriate and useful to use either aggressive or unassertive communication. Remember that you have a choice about how you respond to different situations and learning to be assertive takes practice!

Emphasise to your child that learning to be assertive takes practice, and that in most cases it is better to communicate assertively. However, in some instances in life (often involving unhealthy relationships) it may still be appropriate and useful to use either aggressive or unassertive communication. The most important thing is that they recognise they have a choice about how they respond to different situations.

Assertive communication includes three steps:

1. Stating your answer
2. Giving your reason
3. Being understanding

Step 3 – being understanding - is particularly important, as it allows your child to demonstrate to the other person that they understand and have considered their point of view, but the answer is still “no”.

There will still be the odd person who will keep trying, but most people will stop exerting pressure when they receive an assertive response.

The following is an example of assertive communication

- **Luke:** Hey, I've got some awesome pills, want one?
- **Rachel:** No thanks Luke. - 1. Stating your answer
- **Rachel:** I'm keeping away from that stuff now that I'm not hanging around you. - 2. Giving your reason
- **Luke:** Come on!
- **Rachel:** No, I've made up my mind. You can do what you like. - 3. Being understanding

Couple assertive language with assertive body language:

- Keep a clear firm voice – Speak clearly and deliberately
- Keep eye contact
- Have a facial expression that says what you mean
- Face the person with their body so it does not look like you are hiding

Skill 2

Make an excuse

As the title implies, this strategy involves making an excuse to avoid something. For example:

- “No thanks, my parents are picking me up soon”
- “Last time I had it I reacted really badly”
- “My new girlfriend hates drugs”
- “My brother’s best friend is here, he’ll tell my parents”
- “I’ve got to go soon”
- “I can’t take any tonight, I’m on medication”
- “No thanks, I’ve got a big day tomorrow”

Skill 3

Delay tactics, put someone off until later

As the title implies, this involves putting the person off until later and trying to avoid the situation. For example:

"I'll just go and chat to Sarah first"

"I'm just going to the toilet - won't be long"

Skill 4

The 'broken record' approach

This strategy involves continually saying "no" in the politest possible way. Just like a broken record, the person never changes their tune. For example:

- **Jess:** Come with me tonight It's going to be awesome!
- **Olivia:** No thanks, I don't really want to go to a dance party
- **Jess:** Just this once?
- **Olivia:** No thanks.
- **Jess:** But you're normally such fun.
- **Olivia:** Thanks, but I don't feel like it.
- **Jess:** Go on, you're my best friend.
- **Olivia:** Yeah I am! But I don't feel like going out tonight.

Skill 5

Walk away

'Walking away' involves a person politely leaving the situation, by saying something along the lines of "I need to go the bathroom" or "Is that Josh over there? I haven't seen him in ages!".

Skill 6

Avoid the situation

If a person does not think they will be able to resist the pressure to take drugs then it may be best to avoid that situation or group of people altogether. They need to realise if they do go into the situation and concede to using drugs, then it will be harder to say "no" to any drug offers in the future.

The long-term effects of drugs

'Long-term effects' can refer to two different things:

1. The effects a person may experience if they use a drug for a long period of time, or
2. Effects that a person may experience for a long time after using a drug, even though they are no longer taking the drug. These long-term effects will be referred to as "irreversible effects".

What are the long-term effects of MDMA?

In addition to clear long-term physical, mental, work, family, social and legal consequences of ongoing drug use, the following long-term physical and mental effects have been identified, with concerning evidence suggesting that these effects may sometimes be irreversible:

- **Memory problems**
- **Learning problems**

- **Depression**
- **Anxiety**
- **Liver problems**

Can you become dependent on MDMA?

One of the obvious long-term consequences of drug use is **dependence**. Dependence is another word for being addicted. This occurs when a person feels that they need greater quantities of a drug to achieve the same effect (known as **tolerance**) and if they stop taking the drug, they experience horrible side effects (known as **withdrawal symptoms**). These withdrawal symptoms occur because the body is trying to adjust to working without the drug. When a person becomes dependent on a drug they also experience **cravings** to use the drug.

To date, very few people have become dependent on MDMA. However, unlike some other drugs, those who use MDMA frequently report that the more they increase the dose, the more likely they are to experience negative side effects.

What are the long-term effects of emerging drugs?

Virtually nothing is known about the long-term effects of emerging drugs. Since these drugs are so new and are being produced at such a rapid rate, they have not undergone any scientific testing and there is very little research on them.

Not knowing the long-term effects of emerging drugs is one of the factors that makes them particularly dangerous to use. Until there is substantial research on the different types of substances found in emerging drugs, we cannot be sure that they will not have a harmful effect in the long run, and whether people can become addicted to them, although there have been increasing reports of synthetic cannabis addiction.

Useful Resources

Below are some links to good sources of information for parents who may be interested in reading further.

For information and statistics on MDMA and other drug use among Australian students:

Australian Government Department of Health (2018). Australian secondary school students' use of tobacco, alcohol, and other drugs in 2017.

<https://www.health.gov.au/resources/publications/secondary-school-students-use-of-tobacco-alcohol-and-other-drugs-in-2017>

For information and statistics on MDMA and other drug use in Australia:

The Australian Institute of Health and Welfare (2020). 2019 National Drug Strategy Household Survey report.

<https://www.aihw.gov.au/reports/illicit-use-of-drugs/national-drug-strategy-household-survey-2019/contents/table-of-contents>

For information about drugs and the law in Australia:

<https://positivechoices.org.au/teachers/drugs-and-the-law>

For detailed information on the Australian legislation about emerging drugs:

The Crimes Legislation Amendment (Psychoactive Substances and Other Measures) Act 2015:

<https://www.legislation.gov.au/Details/C2015A00012>

For general information on emerging drugs:

<https://positivechoices.org.au/teachers/emerging-drugs-factsheet>

For up-to-date monitoring on emerging drugs (new psychoactive substances):

<https://www.unodc.org/LSS/Home/NPS>

Alcohol Drug Information Service (webchat and helpline):

<https://yourroom.health.nsw.gov.au/getting-help/Pages/adis.aspx>

For more information about the effects of polydrug use and effects of MDMA and emerging drugs:

Karila, L., Megarbane, B., Cottencin, O., & Lejoyeux, M. (2015). Synthetic Cathinones: A New Public Health Problem. *Current Neuropharmacology*, 13(1), 12-20.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4462036/>

Price, J. S., Shear, P., & Lisdahl, K. M. (2014). Ecstasy Exposure & Gender: Examining Components of Verbal Memory Functioning. *PLOS ONE*, 9(12), e115645.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4278706/>

