

## Signs & Symptoms of Heroin Use

- ◇ Euphoria
- ◇ Drowsiness
- ◇ Impaired mental functioning
- ◇ Slowed down respiration
- ◇ Constricted pupils
- ◇ Nausea

## Signs of a heroin overdose

- ◇ Shallow breathing
- ◇ Pinpoint pupils
- ◇ Clammy skin
- ◇ Convulsions
- ◇ Coma

# HEROIN



*Papaver somniferum*

**Heroin addiction is progressive and if not treated, is fatal.**

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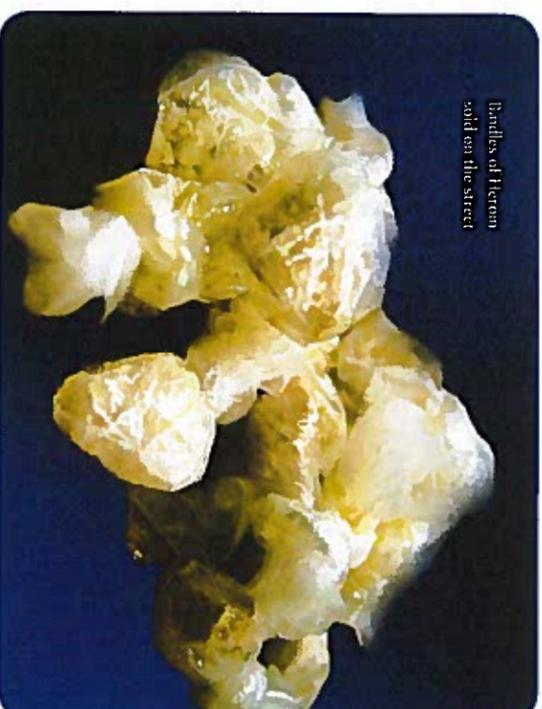
*Foreign sources of opium are responsible for the entire supply of heroin consumed in the U.S.*

# Heroin Has Many Faces

Heroin is a highly addictive opioid drug, and its use has repercussions that extend far beyond the individual user. The medical and social consequences of drug use—such as hepatitis, HIV/AIDS, fetal effects, crime, violence, and disruptions in family, workplace, and educational environments—have a devastating impact on society and cost billions of dollars each year.

Although heroin use in the general population is rather low, the numbers of people starting to use heroin have been steadily rising since 2007. This may be due in part to a shift from abuse of prescription pain relievers to heroin as a readily available, cheaper alternative and the misperception that highly pure heroin is safer than less pure forms because it does not need to be injected.

Like many other chronic diseases, addiction can be treated. Medications are available to treat heroin addiction while reducing drug cravings and withdrawal symptoms, and improving the odds of achieving abstinence. There are now a variety of medications that can be tailored to a person's recovery needs while taking into account co-occurring health conditions. Medication combined with behavioral therapy is particularly effective, offering hope to individuals who suffer from addiction and for those around them.



*Bindles of Heroin sold on the street*

*On the street, heroin is sold in bindles like this or small envelopes. A gram of heroin sells for approximately \$100.00*



*Tar Heroin*



*Powder Heroin*

# Heroin Is An Addictive Drug

Heroin is an illegal, highly addictive drug processed from morphine, a naturally occurring substance extracted from the seed pod of certain varieties of poppy plants. It is typically sold as a white or brownish powder that is “cut” with sugars, starch, powdered milk, or quinine. Pure heroin is a white powder with a bitter taste that predominantly originates in South America and, to a lesser extent, from Southeast Asia, and dominates U.S. markets east of the Mississippi River. Highly pure heroin can be snorted or smoked and may be more appealing to new users because it eliminates the stigma associated with injection drug use. “Black tar” heroin is sticky like roofing tar or hard like coal and is predominantly produced in Mexico and sold in U.S. areas west of the Mississippi River. The dark color associated with black tar heroin results from crude processing methods that leave behind impurities. Impure heroin is usually dissolved, diluted, and injected into veins, muscles, or under the skin.

**In the United States the number of people using heroin for the first time rose from approximately 90,000 in 2006 to 156,000 in 2012, and the trend continues as heroin prices fall and a shortage of prescription drugs continues.**

The impact of heroin use is felt all across the United States, with heroin being identified as the most or one of the most important drug abuse issues affecting several local regions from coast to coast. The rising harm associated with heroin use at the community level was presented in a report produced by the Community Epidemiology Work Group (CEWG). The CEWG is comprised of researchers from major metropolitan areas in the United States and selected foreign countries and provides community-level surveillance of drug abuse and its consequences to identify emerging trends.

Heroin use no longer predominates solely in urban areas. Several suburban and rural communities near Chicago and St. Louis report increasing amounts of heroin seized by officials as well as increasing numbers of overdose deaths due to heroin use. Heroin use is also on the rise in many urban areas among young adults aged 18-25.



SOURCE: NIDA



**NARCAN (naloxone) may be used for the complete or partial reversal of opioid depression, including respiratory depression, induced by natural and synthetic opioids, including propoxyphene, methadone and certain mixed agonist-antagonist analgesics: nalbuphine, pentazocine, butorphanol, and cyclazocine. NARCAN is also used for diagnosis of suspected or known acute opioid overdose. Many police departments have issued NARCAN to their officers for emergency use to save the lives of individuals who have overdosed on opioids.**

Courtesy: Hennepin County Minnesota Sheriff's Office

## Effects of Heroin on your body

Heroin binds to and activates specific receptors in the brain called mu-opioid receptors (MORs). Our bodies contain naturally occurring chemicals called neurotransmitters that bind to these receptors throughout the brain and body to regulate pain, hormone release, and feelings of well-being. When MORs are activated in the reward center of the brain, they stimulate the release of the neurotransmitter dopamine, causing a sensation of pleasure. The consequences of activating opioid receptors with externally administered opioids such as heroin (versus naturally occurring chemicals within our bodies) depend on a variety of factors: how much is used, where in the brain or body it binds, how strongly it binds and for how long, how quickly it gets there, and what happens

afterward.

Once heroin enters the brain, it is converted to morphine and binds rapidly to opioid receptors. Abusers typically report feeling a surge of pleasurable sensation—a “rush.” The intensity of the rush is a function of how much drug is taken and how rapidly the drug enters the brain and binds to the opioid receptors. With heroin, the rush is usually accompanied by a warm flushing of the skin, dry mouth, and a heavy feeling in the extremities, which may be accompanied by nausea, vomiting, and severe itching. After the initial effects, users usually will be drowsy for several hours; mental function is clouded; heart function slows; and breathing is also severely slowed, sometimes enough to be life-threatening. Slowed breathing can also lead to coma and permanent brain damage.

## Long Term Effects of Heroin Use

Repeated heroin use changes the physical structure and physiology of the brain, creating long-term imbalances in neuronal and hormonal systems that are not easily reversed. Studies have shown some deterioration of the brain's white matter due to heroin use, which may affect decision-making abilities, the ability to regulate behavior, and responses to stressful situations. Heroin also produces profound degrees of tolerance and physical dependence. Tolerance occurs when more and more of the drug is required to achieve the same effects. With physical dependence, the body adapts to the presence of the drug and withdrawal symptoms occur if use is reduced abruptly. Withdrawal may occur within a few hours after the last time the drug is taken. Symptoms of withdrawal include restlessness, muscle and bone pain, insomnia, diarrhea, vomiting, cold flashes with goose bumps (“cold turkey”), and leg movements. Major withdrawal symptoms peak between 24–48 hours after the last dose of heroin and subside after about a week. However, some people have shown persistent withdrawal signs for many months. Finally, repeated heroin use often results in addiction—a chronic relapsing disease that goes beyond physical dependence and is characterized by uncontrollable drug-seeking no matter the consequences. Heroin is extremely addictive no matter how it is administered, although routes of administration that allow it to reach the brain the fastest (i.e., injection and smoking) increase the risk of addiction. Once a person becomes addicted to heroin, seeking and using the drug becomes their primary purpose in life.

## Heroin is Linked to Prescription Drug Abuse

Harmful health consequences resulting from the abuse of opioid medications that are prescribed for the treatment of pain, such as Oxycontin®, Vicodin®, and Demerol®, have dramatically increased in recent years.

**Research now suggests that abuse of these medications may actually open the door to heroin use.** Nearly half of young people who inject heroin surveyed in three recent studies reported abusing prescription opioids before starting to use heroin. Some individuals reported switching to heroin because it is cheaper and easier to obtain than prescription opioids.