

It's Never Too Early... Talk to Your Kids About Drugs & Alcohol

As parents and guardians, we all have hopes and dreams that our children will have happy, healthy productive lives. We hold the greatest influence and impact on their future and we want to protect them from any harm that comes their way.

The challenges facing our children constantly change as they grow older. This can leave us feeling overwhelmed and powerless. When do we let them try out their wings? When do we step in to try to protect them?

There are no easy answers, but if we have resources to turn to for guidance, knowledge of what our children are facing and confidence in ourselves, we can face the issues and walk hand-in-hand with our children through any crisis.

Drug Paraphernalia

The items used for consuming drugs are commonly marketed specifically to youth. They are designed with colourful logos and often disguised as pretty trinkets to trick you into believing they are harmless. Other items include syringes, light bulbs, writing pens, pop cans, straws, spoons and lighters, to name a few.



Normal household items are often used to conceal illegal drugs. These items include, but are not limited to cell phones, pagers, CD players, magic markers, cosmetic containers, cans with false bottoms; basically, any item that can be carved or hollowed out can be utilized by a drug user.



Lipstick dispenser
hides a drug pipe

Hollow pager adapted
to
conceal drugs

Felt tip marker with internal
drug pipe

Soft drink can with false
bottom

Proper Handling of Psychoactive Substances Drugs – Alcohol – Tobacco

All adults play an important role in the lives of children. As a parent, guardian or caregiver, you are the role model that holds the greatest power, impact and influence on your child's attitude towards drug use.

What Can You Do?

Gain knowledge on the substances that are a danger to your children: what these substances look like, what they are known as, what the physical signs are if the child is using, and what to do if you find these substances in your home or property.

Keep prescription drugs, alcohol and tobacco products in a secure location that is not easily accessible to children. Keep track of these substances to ensure that they do not go missing without your knowledge.

DEPRESSANTS

NAME	DESCRIPTION	SHORT-TERM EFFECTS	LONG-TERM EFFECTS	TOLERANCE AND DEPENDENCE
<p>Alcohol (ethyl alcohol or ethanol)</p> 	<p>In Canada, a standard drink contains 13.6 g or 17 mL of absolute alcohol. This amount is contained in a 12-ounce (341 mL) bottle of regular (5%) beer, five ounces (142 mL) of (12%) table wine or 1.5 ounces (43 mL) of 80-proof liquor. Definitions of standards drinks are different in other countries.</p>	<p>Alcohol affects the central nervous system in proportion to the amount of alcohol in bloodstream. Usual effects of small doses are euphoria, drowsiness, dizziness, flushing, release of inhibitions and tensions. Larger doses produce slurred speech, staggering, double vision, stupor. Alcohol, even in fairly low doses, impairs driving or the operation of complex machinery. In combination with other drugs, small doses of alcohol may produce exaggerated effects. A "hangover" with headache, nausea, shakiness and vomiting may begin 8 to 12 hours after a period of excessive drinking. Very large doses can cause death by blocking the brain's control over respiration.</p>	<p>Regular consumption of more than two drinks a day may gradually bring about liver damage, brain damage, heart disease, certain types of cancer, blackouts (loss of memory), impotence, reproductive problems, ulcers, and disorders of the pancreas. Chronic heavy use may result in disruptions of the drinker's social, family and working life. Consumption of alcohol during pregnancy may result in babies with alcohol related pre and postnatal developmental and growth delays, learning and behavioural disorders, and other CNS problems and physical abnormalities. Since there is no definite information regarding a safe quantity of alcohol use during pregnancy, the prudent choice for women who are or may become pregnant is to abstain from alcohol.</p>	<p>Regular use induces tolerance, making increased doses necessary to produce desired effect. In the case of chronic use, people may drink steadily without appearing to get drunk. Their condition may go unrecognized, even by themselves for some time. Chronic drinkers are likely to become physically and psychologically dependent. Withdrawal symptoms may range from jumpiness, sleeplessness, sweating, nausea and vomiting, to tremors, seizures, hallucinations and even death.</p>
<p>Solvents/Inhalants (volatile solvents) <i>sniff</i></p> 	<p>Inhalants are found in many household and commercial products such as cleaning fluids, fast-drying glues, aerosols, paint thinners and removers. Inhalants also include gasoline and other fuels, anaesthetic gases (e.g., nitrous oxide) and some vasodilating nitrites (e.g., amyl nitrite).</p> <p>Most are poured into a bag and inhaled, or inhaled from a saturated cloth held over the nose. Aerosols are inhaled either directly from can or by spraying them into a plastic bag.</p>	<p>Effects include feelings of euphoria, light-headedness, exhilaration, vivid fantasies, and sometimes recklessness and feelings of invincibility. Depending on the type of inhalant and method of use, possibly irritation and watering of the eyes, sneezing, coughing and nasal inflammation may occur. Inhalants enter the bloodstream from the lungs and then go to other organs, particularly the brain and liver. Breathing, heart beat and other body functions are slowed down. If the person passes out with a plastic bag over the nose and mouth, death from suffocation can occur. Death can also occur if the person is startled or engages in strenuous activity while intoxicated. There are also situational hazards such as explosions, burns and aspiration of foreign particles or objects into the lungs.</p>	<p>Effects include pallor, fatigue, forgetfulness, inability to think clearly, tremors, poor coordination and difficulty walking, thirst, weight loss, depression, irritability, hostility, and paranoia. Kidney, liver and brain damage may occur. It is not known to what extent the damage is reversible. Simultaneous alcohol consumption may compound the damage. Elevated blood-lead levels and consequent brain damage have been found as a result of chronic sniffing of leaded gasoline.</p>	<p>Regular use induces tolerance, making increased doses necessary to produce the desired effect. Psychological and physical dependence can develop. Withdrawal symptoms include anxiety, depression, irritability, dizziness, tremors, nausea, abdominal pains and headaches.</p>

STIMULANTS

NAME	DESCRIPTION	SHORT-TERM EFFECTS	LONG-TERM EFFECTS	TOLERANCE AND DEPENDENCE
<p data-bbox="69 215 294 300">Cocaine <i>C, coke, snow, nose candy, crack</i></p> 	<p data-bbox="342 215 743 760">Fine white crystalline powder often diluted with sugar, cornstarch, talcum powder or with substances which imitate its numbing effects, such as benzocaine. Can be sniffed, smoked or injected. As well as being sniffed through the nose, it can also be absorbed through other mucous membranes such as the mouth. Typical dose levels are 30-100 mg when sniffed; injected doses may be lower or higher, depending on the tolerance of the person. "Crack" is a smokable, freebase form of cocaine which has become increasingly available in recent years. It is made by adding baking soda to a cocaine solution and allowing the mixture to dry.</p>	<p data-bbox="743 215 1148 815">Effects resemble those of amphetamines with a shorter duration. The person feels euphoric, energetic, alert; has a rapid heart beat and breathing, dilated pupils, sweating, pallor, and decreased appetite. Large doses can cause severe agitation, paranoid thinking, erratic or violent behaviour, tremors, uncoordination, twitching, hallucinations, headache, pain or pressure in the chest, nausea, blurred vision, fever, muscle spasms, convulsions and death. Impurities in street cocaine may produce a fatal allergic reaction. People may experience depression, extreme tiredness and stuffy nose as a "hangover" from cocaine. The use of "crack" produces immediate and very intense effects.</p>	<p data-bbox="1148 215 1554 1024">High-dose, chronic users, who alternate cocaine "binges" with crashes (periods of abstinence) may show mood swings, restlessness, extreme excitability, restlessness, sleep disorders, suspiciousness, hallucinations and delusions, eating disorders, weight loss, constipation and impotence. Characteristic signs of chronic cocaine sniffing are stuffiness and runny nose, chapped nostrils, perforation of nasal septum. Cocaine abuse is also associated with cardiac arrhythmias, myocardial infarctions, strokes, seizures and sudden deaths. People who inject cocaine are at risk for HIV and hepatitis.</p> <p data-bbox="1148 773 1554 1024">Heavy use of cocaine by pregnant women is associated with reduced fetal weight and an increased risk of miscarriage, stillbirth, premature birth and malformation. Newborns exposed to cocaine in the uterus may also experience abnormal sleep patterns, poor feeding and irritability for several days or weeks after birth.</p>	<p data-bbox="1554 215 2007 532">Chronic use results in tolerance. Cocaine can produce very powerful psychological dependence leading to extremely compulsive patterns of use. In particular, the dependency-producing properties of cocaine are believed to be more powerful than any other psychoactive drug. Physical dependence may also develop. Withdrawal symptoms may include fatigue, long but disturbed sleep, strong hunger, irritability, depression, violence.</p>
<p data-bbox="69 1040 168 1065">Caffeine</p> 	<p data-bbox="342 1040 743 1498">White bitter-tasting crystalline substance found in coffee beans, tea leaves, cacao leaves and kola nuts. Available in tea, coffee, chocolate, cola drinks, medication. The caffeine content of coffee and tea used as beverages depends upon the type of brew or leaves used in preparation, and the manner of preparation. Caffeine in most headache remedies, pain relievers, cold remedies and stimulant mixtures is between 15-50 mg. Non-prescription medications to help in staying awake may contain considerably higher levels of caffeine.</p>	<p data-bbox="743 1040 1148 1498">Effects include mild mood elevation and reduced drowsiness and fatigue. Caffeine shortens sleep, stimulates secretion of stomach acid, decreases appetite, causes hand-tremor, and impairs fine coordination of movement, increases metabolic rate, blood pressure, urination and body temperature. Large doses of caffeine can produce headaches, nervousness, irritability, restlessness, agitation, rapid and irregular heart rate and delirium. Fatal dose of the pure substance is about 3.5 g taken intravenously or about 10 g taken orally.</p>	<p data-bbox="1148 1040 1554 1409">Chronic heavy users may develop malnutrition or amphetamine psychosis, a mental illness similar to paranoid schizophrenia. They may be prone to violence. If these tablets and capsules are used to prepare injectable mixtures, people are at risk from both infections from use of unsterile needles, syringes and other paraphernalia, and damage to kidney, lung and brain as a result of tablet particles entering the bloodstream.</p>	<p data-bbox="1554 1040 2007 1442">Chronic use results in tolerance to the euphoric and appetite suppressant effects, although tolerance does not appear to develop to the beneficial effects when used therapeutically to treat disorders such as attention-deficit hyperactivity disorder or narcolepsy. Regular use of amphetamine-type drugs at high doses can produce very powerful psychological dependence and extremely compulsive patterns of use. Withdrawal symptoms include fatigue, long but disturbed sleep, hunger on awakening, irritability, depression and violence.</p>

STIMULANTS (cont'd)

NAME	DESCRIPTION	SHORT-TERM EFFECTS	LONG-TERM EFFECTS	TOLERANCE AND DEPENDENCE
<p>Tobacco (<i>Nicotiana tabacum</i>)</p>  	<p>Shredded, cured (dried) leaves of the tobacco plant, which can be smoked in cigarettes, cigars or pipes, or chewed, or inhaled. New regulations will require manufacturers to display health warnings, health information and toxic constituent information on packages of all tobacco products. The health warnings will occupy 50 percent of the package and will include graphic images of the consequences of tobacco use. New regulations will also require manufacturers to collect and report on 43 of the over 4,000 chemicals found in tobacco smoke. Of these, tar, nicotine, carbon monoxide, benzene, formaldehyde and hydrogen cyanide will be listed on the package with a range of emissions, depending upon smoking patterns.</p>	<p>Effects include increased heart rate and blood pressure, drop in skin temperature, faster breathing, and decreased appetite. First-time smokers may feel dizzy and energized and may experience diarrhea and vomiting. Tar accumulates in the lungs. Inhaling smokers subject themselves to very high carbon monoxide levels. They also subject people around them to smoke effects. Two or three drops of pure nicotine, the plant's most potent ingredient, may rapidly kill an adult. A single cigarette puts about 1-2 mg of nicotine into the bloodstream of the 15-20 mg found in tobacco. When eaten, nicotine is absorbed slowly in stomach, which is why small children sometimes survive after eating cigarettes.</p>	<p>Chronic heavy users may develop malnutrition or amphetamine psychosis, a mental illness similar to paranoid schizophrenia. They may be prone to violence. If these tablets and capsules are used to prepare injectable mixtures, people are at risk from both infections from use of unsterile needles, syringes and other paraphernalia, and damage to kidney, lung and brain as a result of tablet particles entering the bloodstream.</p>	<p>Chronic use results in tolerance to the euphoric and appetite suppressant effects, although tolerance does not appear to develop to the beneficial effects when used therapeutically to treat disorders such as attention-deficit hyperactivity disorder or narcolepsy. Regular use of amphetamine-type drugs at high doses can produce very powerful psychological dependence and extremely compulsive patterns of use. Withdrawal symptoms include fatigue, long but disturbed sleep, hunger on awakening, irritability, depression and violence.</p>

PSYCHOTROPIC DRUGS

NAME	DESCRIPTION	SHORT-TERM EFFECTS	LONG-TERM EFFECTS	TOLERANCE AND DEPENDENCE
<p>GHB, and any salts thereof (gamma-hydroxybutyrate) <i>liquid ecstasy, liquid X, grievous bodily harm, Scoop</i></p>  	<p>Usually available as a colourless, odourless and tasteless liquid, but it is also available as a powder or as a capsule.</p>	<p>Effects of lower doses may include lowered inhibitions, euphoria, calmness progressing to drowsiness, dizziness and amnesia. Higher doses may produce confusion, hallucinations, nausea, vomiting, diarrhea, tremors, combative and self-injurious behaviours, seizures, shortness of breath, loss of consciousness and coma. GHB is currently circulating at dances and raves, and is often used in conjunction with alcohol, which increases the degree of disinhibition and the risk of central nervous system and respiratory depression. GHB has been used to aid sexual assaults on women.</p>	<p>Long-term, high-dose use may result in effects similar to chronic intoxication (impaired vision, memory and judgment, and slurred speech), as well as depression or mood swings. Changes in liver function may result in faster metabolism of other drugs. Babies of chronic users may have difficulty in breathing and feeding, disturbed sleep patterns, sweating, irritability and fever.</p>	<p>Regular use induces tolerance, making increased doses necessary to produce the desired effect. Tolerance develops more quickly to the mood-altering effects than to the effects on the respiratory system. Thus, the margin between an effective dose and a lethal dose gradually narrows. Psychological dependence can occur with regular use, as can physical dependence. Withdrawal symptoms including restlessness, anxiety, insomnia, delirium, seizures and may result in death.</p> <p>Withdrawal symptoms have been reported after chronic high-dose use.</p>
<p>Flunitrazepam, and any salts or derivatives thereof Rohypnol® roofies, rope, the forget pill</p> 	<p>Available as tablets (but tablets may be crushed to yield a powder which dissolves more rapidly in liquids). Often sold on the street in "bubble" packs. It is odourless, colourless and tasteless when added to alcoholic or non-alcoholic beverages.</p>	<p>Rohypnol is an extremely potent benzodiazepine, which produces drowsiness, dizziness, memory loss, muscle relaxation, impaired thinking and motor coordination. It can also produce aggressive behaviour. It is absorbed very rapidly after oral administration with effects occurring after about 20 to 30 minutes. It has been associated with data rape because it produces sedation and memory loss. Also, because it is odourless and tasteless, the victim may have no idea that anything has been added to his/her drink. The amnesia produced by Rohypnol ("the forget pill") means a rape victim may not remember the circumstances of the sexual assault or how the drug was taken. Combined with alcohol or other CNS depressants, the effects of Rohypnol can be dangerously increased.</p>	<p>Some benzodiazepines which are eliminated slowly (such as diazepam) accumulate in body tissues during sustained use. Chronic abuse of benzodiazepines may result in impairment in thinking, memory and judgement, confusion, disorientation, and impaired motor coordination. Prolonged use may also lead to increased, rather than reduced, aggressiveness in some people. When benzodiazepines are used by pregnant women, they cross the placenta and are distributed to the fetus. After birth, babies exposed to benzodiazepines in the uterus may show withdrawal symptoms. There is some research evidence indicating an increased risk of major malformations and cleft palate.</p>	<p>Tolerance to the sedative, but not anxiety-relieving effects of benzodiazepines can develop with regular use over a few months, as can psychological and physical dependence. Stopping use abruptly may result in symptoms such as sleep disturbances, headache, tension, difficulty concentrating, trembling, anxiety, and feeling tired. During withdrawal from very high doses, there is a risk of seizures, depression, paranoia, agitation and delirium. Withdrawal symptoms may be greater for benzodiazepines that are eliminated rapidly from the body.</p> <p>Like other benzodiazepines, regular use can induce tolerance making increased doses necessary to produce the desired effect.</p>

CANNABIS

NAME	DESCRIPTION	SHORT-TERM EFFECTS	LONG-TERM EFFECTS	TOLERANCE AND DEPENDENCE
<p>Marijuana (marihuana) cannabis, pot, grass, weed, reefer, ganja, joint</p>  	<p>Flowering tops and leaves of the cannabis plant. Ranges in colour from grey-green to greenish-brown; in texture, it resembles oregano or coarse tea. It usually contains seeds and stems. It has a strong odour and is smoked in a pipe or hand-rolled cigarette. There are greater concentrations of the active ingredient, THC, now than in the past.</p>	<p>Effects of smoking are felt within a few minutes and last two to four hours. Effects from ingestion (e.g., eaten in baked or cooked foods) appear more gradually and last longer, and the person may feel dull and sluggish for some time afterwards. The person feels calm, relaxed, talkative and sometimes drowsy. Concentration and short-term memory are markedly impaired, and sensory perception seems enhanced, colours are brighter, sounds are more distinct, and the sense of time and space is distorted. Appetite increases, especially for sweets. Some people withdraw, or experience</p>	<p>Signs of chronic, heavy use may include decreased motivation and interest, as well as difficulties with memory and concentration. These problems tend to clear when regular use stops. However, there is increasing research evidence of lasting harmful effects on mental function in some people. The respiratory system is damaged by smoking; a single joint of marijuana yields much more tar than a strong cigarette. Tar in cannabis smoke contains higher amounts of cancer-producing agents than tar in tobacco smoke. Studies suggest that developmental delays may occur in children whose mothers used drugs heavily during pregnancy.</p>	<p>There is some evidence that tolerance develops in regular high-dose users. Psychological and physical dependence on cannabis can occur in people who use heavily or regularly. Withdrawal symptoms include anxiety, irritability, sleeping problems, sweating and loss of appetite.</p>
<p>Hash Oil oil, honey oil</p> 	<p>Thick, greenish-black, reddish-brown or yellow oil, obtained by extracting hashish with an organic solvent. Usually wiped onto a cigarette or rubbed into tobacco and smoked.</p> <p>Hash oil is much more potent than other forms of cannabis and only a small amount is required to achieve an effect.</p>	<p>few experience panic, terror or paranoia, particularly with larger doses. Some experience hallucinations with larger doses and symptoms worsen in persons with psychiatric disorders, particularly schizophrenia.</p>		
<p>THC (tetrahydrocannabinol)</p> 	<p>Active ingredient in cannabis. Pure, synthetic THC is seldom available on the street. What is sold as THC is almost always PCP or LSD (see Hallucinogens).</p>	<p>Physical effects include impaired coordination and balance, rapid heartbeat, red eyes, dry mouth and throat. Usual doses impair motor skills; especially when used in combination with alcohol; cannabis use before driving is particularly dangerous. THC, the active ingredient, has been detected in many bodies of fatally-injured drivers and pedestrians in Canada and the United States.</p>		

OPIOID ANALGESICS

NAME	DESCRIPTION	SHORT-TERM EFFECTS	LONG-TERM EFFECTS	TOLERANCE AND DEPENDENCE
<p>Codeine</p>  	<p>Available as tablets, capsules, elixirs, suppositories and solutions. Often sold in combination product, e.g., 222®, 292®, Tylenol with Codeine®, Benylin Codeine 3.3 mg-D-E®.</p>	<p>At low doses, as well as suppression of pain and cough reflex, effects include dizziness, light headiness, reduced mental alertness, drowsiness, mild anxiety or euphoria.</p> <p>At higher doses, effects include increased sedation or euphoria, impaired concentration, reduced respiration and blood pressure and in some cases, rapid and irregular heart rate. Additional effects with overdoses can include seizures, delirium, coma, depression and fluid in the lungs.</p>	<p>At high doses, severe constipation, contracted pupils, moodiness and menstrual irregularities can occur. These effects disappear after a person stops taking the drug. People who use chronic high doses may develop lung problems due to the effects of high-dose opioids on respiration. Hepatitis and HIV/ AIDS and other infections can be caused by unsterile needles, syringes and other drug paraphernalia. Abscesses, cellulitis, liver damage, tetanus, brain damage can also result. Perhaps half of all opioid dependent women have complications during pregnancy and birth.</p> <p>Existing health problems such as anaemia, cardiac disease, diabetes, pneumonia and hepatitis may require special management during the pregnancy, and may complicate the pregnancy. Opioid dependence increases the risk for miscarriage, premature labour, breech delivery, Caesarian section, and low birthweight. Because opioids cross the placenta, the infant may also be born dependent and may suffer withdrawal because of the mother's use. However, the mother's withdrawal from opioids prior to birth can cause stillbirth.</p>	<p>Tolerance develops fairly rapidly, making higher doses necessary to maintain intensity of effects. Most opioids are highly addictive, and regular use may result in physical dependence.</p> <p>Withdrawal symptoms include severe anxiety, insomnia, profuse sweating, muscle spasms, chills, shivering, tremors, and can occur four to five hours after last dose. The acute symptoms reach peak intensity after about 36 to 72 hours and are usually over within 7 to 10 days. It may be 6 months or longer before total recovery from withdrawal occurs.</p> <p>Dependence on opioids taken in tablet or capsule form (such as Percodan® or codeine) can go undetected by a person for some time. People may respond to discomfort of withdrawal by taking another dose, without realizing they have become addicted</p>
<p>Pentazocine Talwin® <i>Ts and Rs: Talwin® and Ritalin®</i></p> 	<p>Available as tablets and injectable Solution.</p>	<p>Produces similar effects to oxycodone. However higher doses may produce changes in heart rate and blood pressure and Hallucinations/delusions, disorientation and confusion. Respiratory depression is usually less severe than with other opioids.</p>	<p>Chronic high dose use of pentazocine may result in emotional disturbances, most commonly depression and disordered thinking, as well as nightmares, sleep disturbances including dizziness upon awakening and problems with concentration. Because of the risk to the developing fetus, pregnant women should use pentazocine only in accordance with physician advice.</p>	

OPIOID ANALGESICS (cont'd)

<p>Butalbital with Codeine, ASA and Caffeine Fiorinal-C®</p> 	<p>Available as tablets.</p>	<p>At low doses, produces state of relaxation, euphoria, dizziness, drowsiness, mild impairment of motor and cognitive functions and occasional vomiting, nausea and constipation. At higher doses, may result in increased central nervous system depression with effects similar to alcohol; very high doses may result in coma and death. Both codeine and butalbital contribute to these effects. With overdoses of products that contain acetylsalicylic acid (ASA), as well as an opioid, use of very high doses may result in salicylate intoxication, as well as opioid intoxication. Caffeine-containing products used in high doses may result in caffeine intoxication.</p>	<p>Chronic high dose use of oxycodone may result in unstable mood; visual impairments such as constricted pupils, blurriness, reduced night vision; constipation; menstrual irregularities and respiratory problems. These effects disappear after the person stops taking the drug. Use of oxycodone by pregnant women may result in harm to the fetus and the infant being born dependent as occurs with use of other opioids.</p> <p>Chronic high dose use of pentazocine may result in emotional disturbances, most commonly depression and disordered thinking, as well as nightmares, sleep disturbances including dizziness upon awakening and problems with concentration. Because of the risk to the developing fetus, pregnant women should use pentazocine only in accordance with physician advice.</p> <p>The effects of chronic high doses of butalbital with codeine, ASA and caffeine may be a combination of the effects of the individual drugs in this product – see barbiturates, codeine and caffeine. Because of the risk to the developing fetus, this drug should only be used by pregnant women in accordance with physician advice</p>	<p>Tolerance to opioids develops fairly rapidly, making higher doses necessary to maintain intensity of effects. Most opioids are highly addictive and regular use may result in physical dependence. Withdrawal symptoms include severe anxiety, restlessness, insomnia, profuse sweating, runny nose and eyes, muscle spasms including stomach cramps, chills, shivering, tremors and can occur four to five hours after last dose. The acute symptoms reach peak intensity after about 36-72 hours and are usually over within 7 to 10 days. It may be 6 months or longer before total recovery from withdrawal occurs. Dependence on opioid analgesics taken in tablet or capsule form (such as Percodan® or codeine) can go undetected by the person for some time. People may respond to the discomfort of withdrawal by taking another dose, without realizing they have become addicted. Because pentazocine is a less potent opioid, withdrawal symptoms are somewhat milder than other opioids.</p> <p>Because butalbital with codeine, ASA and caffeine is a combination product, the development of tolerance and dependence may vary greatly with dosage and duration of use - see barbiturates, codeine and caffeine for further information on tolerance and dependence</p>
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OPIOID ANALGESICS (cont'd)

<p>Oxycodone Percodan® <i>Percs</i></p> 	<p>Available as tablets.</p>	<p>As well as suppression of pain, effects may include dizziness, light headedness, reduced mental alertness, drowsiness, mild anxiety and depression or euphoria, contraction of pupils, blurred vision, nausea, vomiting, constipation, itchy skin. With high doses, effects include increased sedation, impaired concentration, reduced respiration and blood pressure, and in some cases, very high doses may result in coma and death. With overdoses of products that contain acetylsalicylic acid (ASA) use of very high doses may result in salicylate intoxication, as well as opiate intoxication</p>	<p>Chronic high dose use of oxycodone may result in unstable mood; visual impairments such as constricted pupils, blurriness, reduced night vision; constipation; menstrual irregularities and respiratory problems. These effects disappear after the person stops taking the drug. Use of oxycodone by pregnant women may result in harm to the fetus and the infant being born dependent as occurs with use of other opioids.</p>	<p>Tolerance to opioids develops fairly rapidly, making higher doses necessary to maintain intensity of effects. Most opioids are highly addictive and regular use may result in physical dependence. Withdrawal symptoms include severe anxiety, restlessness, insomnia, profuse sweating, runny nose and eyes, muscle spasms including stomach cramps, chills, shivering, tremors and can occur four to five hours after last dose. The acute symptoms reach peak intensity after about 36-72 hours and are usually over within 7 to 10 days. It may be 6 months or longer before total recovery from withdrawal occurs. Dependence on opioid analgesics taken in tablet or capsule form (such as Percodan® or codeine) can go undetected by the person for some time. People may respond to the discomfort of withdrawal by taking another dose, without realizing they have become addicted. Because pentazocine is a less potent opioid, withdrawal symptoms are somewhat milder than other opioids.</p>
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