

THE TRUTH ABOUT

RITALIN ABUSE

MORNING

RITALIN

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Dr. SMOOKLER

R-ball
Rids
Smarties

drugfreeworld.org

WHY THIS BOOKLET WAS PRODUCED

There is a lot of talk about drugs in the world—on the streets, at school, on the Internet and TV. Some of it is true, some not.

Much of what you hear about drugs actually comes from those selling them. Reformed drug dealers have confessed they would have said anything to get others to buy drugs.

Don't be fooled. You need facts to avoid becoming hooked on drugs and to help your friends stay off them. That is why we have prepared this booklet—for you.

Your feedback is important to us, so we look forward to hearing from you. You can visit us on the web at drugfreeworld.org and e-mail us at info@drugfreeworld.org.



What is Ritalin?

Ritalin is the common name for *methylphenidate*, classified by the Drug Enforcement Administration as a Schedule II narcotic—the same classification as cocaine, morphine and amphetamines.* It is abused by teens for its stimulant effects.

Even when Ritalin is used as a prescription drug, it may have severe effects including nervousness, insomnia, anorexia, loss of appetite, pulse changes, heart problems and weight loss. The manufacturer says it is a drug of dependency.

In June 2005, the US Food and Drug Administration issued a series of public health advisories warning that Ritalin and drugs like it may cause visual hallucinations,

suicidal thoughts and psychotic behavior, as well as aggression or violent behavior.

One writer put it this way: “Parents are never told: ‘Oh, by the way, once in a while a child dies simply by taking their prescribed medication.’ Or ‘By the way, children on stimulant medications have twice the future rate of drug abuse.’ Or ‘By the way, one third of all children on these medications develop symptoms of obsessive-compulsive behavior within the first year.’”



* amphetamine: a powerful central nervous system (brain and spinal cord) stimulant, often called “speed.”

Where is it found?



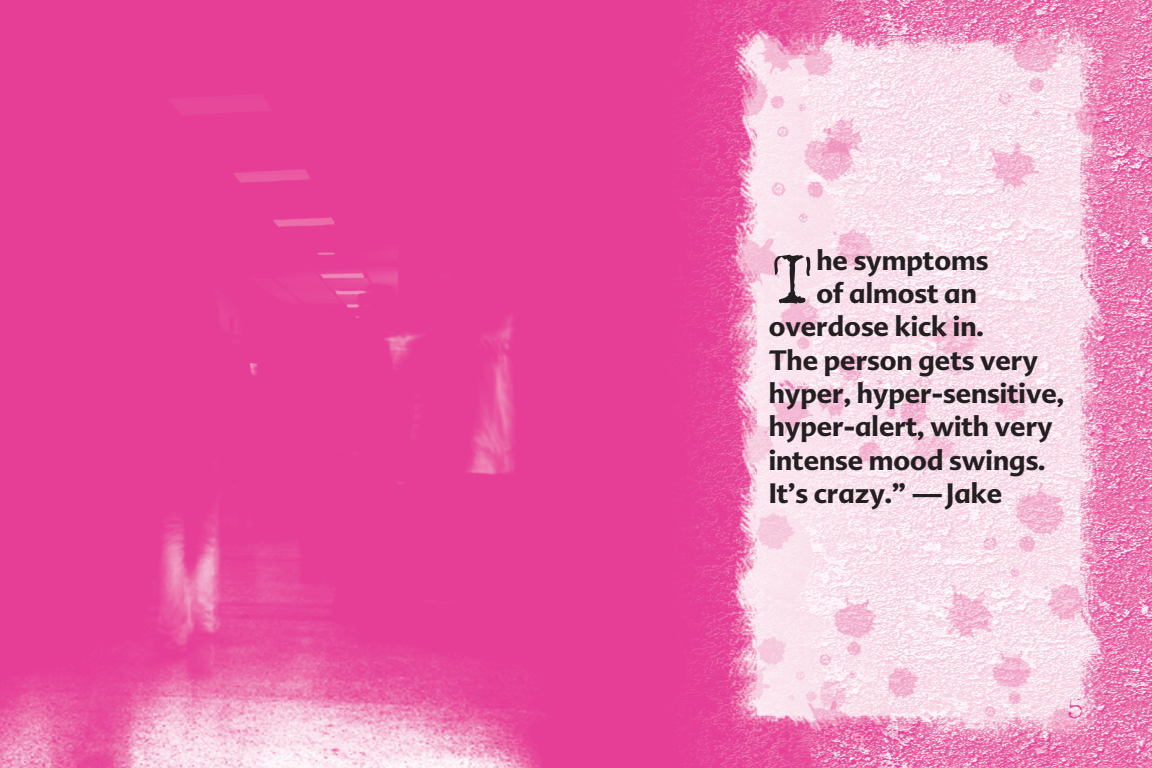
Unfortunately, Ritalin and related “hyperactivity” type drugs can be found almost anywhere. If you are in high school or college, you are likely to have a large supply readily to hand, with “pushers” (your fellow students) eager to make an easy profit from you.

In some schools, as many as 20% of the students take the drug regularly. The Drug Enforcement Administration found that many of these schools had more of these drugs than the neighborhood pharmacy.

Why is it so common? It is all too easy for a “friend” to take some of his little brother’s prescription pills and turn around and sell them at \$5 a pop. Or a student eager for a quick fix tells a school nurse he has a “study disorder” and “can’t concentrate.” He gets a prescription and stocks up on the pills for future use, handing out extras to his friends.

While the law forbids unrestricted distribution of these powerful stimulants,* the sad fact remains that these substances are freely available almost anywhere. Kiddie Cocaine, as it has been called, is handed out like candy.

* stimulant: a drug that increases immediate energy and alertness but that is accompanied by increases in blood pressure, heart rate and breathing.



The symptoms of almost an overdose kick in. The person gets very hyper, hyper-sensitive, hyper-alert, with very intense mood swings. It's crazy." —Jake



How Ritalin abuse starts

It seems so simple at first. A student gets a little behind in his studies. An exam comes up and he needs to prepare. He'll have to stay up late to have even a chance of making the grade. Coffee gives him the jitters, but many of his friends use these pills to give the extra energy they need. Why not? A couple of bucks; one pill; an entire night of study; a feeling of "focus."

That may be where it starts, but it is very often not where it ends.

Some students are chopping up Ritalin and snorting it like cocaine for faster absorption. "It keeps you awake for hours," said one.

And just like cocaine or any other stimulant,

that nice “up feeling” is inevitably followed by a “crash,” a feeling of fatigue, depression and decreased alertness. One student on Adderall, another stimulant widely abused on college campuses, recounted that a feeling of “utmost clarity” turned into a state of being “crashed out and overdone” the next day. As one user put it, “I usually go into a crash coma afterwards.”

And, of course, the user soon comes to know that this “crashed out” feeling can be relieved with the “help” of another pill that gets him back up again. And so it goes.

Next may be larger doses, or snorting it for a bigger rush. Tolerance increases, so one has to use more. In these larger doses, Ritalin can lead to convulsions, headaches and hallucinations. The powerful amphetamine-like substance can even lead to death, as in the many tragic cases of children who have died of heart attacks caused by damage linked to the drug.

I first tried Ritalin when I was in 7th grade. It was prescribed to me—they thought I had slight ADD [attention deficit disorder], because I pretended to so I could have an excuse for not doing well in school (I was just lazy). I never realized that I was getting myself addicted, and then I was no different than any other habitual drug user.

“I took about 40 mg a day and I felt it put me at the top of my game. I would stay up for days in a row, to the point I suffered a severe psychotic episode. It was terrifying! Everything seemed to be melting and morphing and I was terrified.” — Andrea

What does Ritalin look like?

And other facts



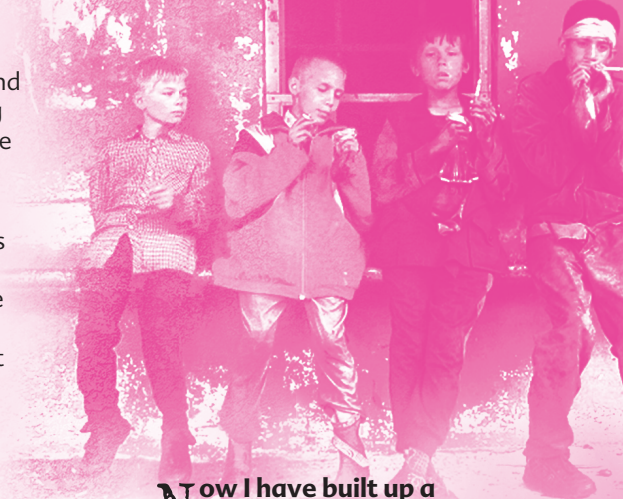
Ritalin comes in small pills, about the size and shape of aspirin tablets, with the word “Ciba” (the manufacturer’s name) stamped on it. The 5 mg tablets are pale yellow, 10 mg tablets are pale green, and the 20 mg tablets are both white and pale yellow.

It is described as a central nervous system stimulant. However, even its manufacturer, in the drug’s package insert, admits that no one really knows how it affects the human body: “The mode of action in man is not completely understood.”

Abusers grind the tablets into a powder and snort it. The drug is water-soluble, making it easy to convert into a liquid which can be injected.

As noted by the Drug Enforcement Administration, “pharmaceutical products diverted from legitimate channels are the only sources of methylphenidate available

for abuse.” In other words, every tablet of the drug that is abused, either in its original form or ground into a powder or dissolved with water, originated from the manufacturer. None of it is manufactured on the streets.



Now I have built up a tolerance to taking two to three 20 mg pills to get the high. I recognize my dependence... I have become ‘cracked-out’ or zombie-like.” — Alex

names

Ritalin is called by a variety of names on the street, including:

Diet Coke

Kiddie Cocaine

Kiddie Coke

Vitamin R

R-ball

**Poor man's
cocaine**

Rids

Skittles

Smarties

Poor man's cocaine

Ritalin is easy to get, and cheap. Taken from someone's prescription, stolen from a sibling or obtained by a fraudulent prescription, these tablets are then broadly sold. The price runs from a dollar or two in school to \$20 per pill on the black market.

The comparison of Ritalin to cocaine is not just a slogan. Ritalin is chemically similar to cocaine. When injected as a liquid, it sends that "jolt" that addicts crave so much.

In 2000, the Drug Enforcement Administration (DEA) revealed the results of studies on both animals and humans who were given cocaine and Ritalin. The test subjects could not tell the difference. The DEA concluded that, "They produce effects that are nearly identical."

Test subjects who were given cocaine and Ritalin could not tell the difference.



Scope of Ritalin abuse

Abuse of prescription drugs such as Ritalin is increasing.

By 2006, nearly 7 million Americans abused prescription drugs, including Ritalin—more than the number who abused cocaine, heroin, hallucinogens, Ecstasy and inhalants, combined. That 7 million was just 3.8 million in 2000—an 80% increase in only six years. In 2007, 3.8% of 12th graders reported having used Ritalin without a prescription at least once in the past year.

A major factor contributing to the abuse is the huge increase in the number of prescriptions written for Ritalin and other stimulants.

Trends in the Prescribing of Psychotropic Medications to Preschoolers

Abstract Recent research on the use of psychotropic medications for preschool children with behavioral and emotional disorders suggests caution. Further examination of the risks and potential of drug therapy and non-drug interventions for preschool children is needed to ensure that the use of psychotropic medications is appropriate and safe.

Objective: To determine the prevalence of psychotropic medications use in preschool children and to examine the relationship between medication use and behavioral outcomes.

Design: A descriptive study of 1,000 preschool children in a large urban area. Data were collected from 1990 to 1995.

Setting and Participants: From 1990 to 1995, the number of medication prescriptions for 1,000 preschool children in a large urban area was tracked. The study was conducted in a large urban area.

Main Results: The prevalence of medication use in preschool children was 15.8%. The most commonly prescribed medications were stimulants (31.2%), antidepressants (21.2%), and antipsychotics (12.2%).

Conclusions: The use of psychotropic medications in preschool children is increasing. Further research is needed to determine the risks and benefits of these medications.

Keywords: Preschool children, psychotropic medications, behavioral disorders, emotional disorders.

PSYCHOTROPIC MEDICATION IN PRESCHOOLERS

The increased use of psychotropic medications in preschool children has raised concerns about the risks and benefits of these drugs. This study examined the prevalence of medication use in preschool children and the relationship between medication use and behavioral outcomes.

Changes in Drug Utilization and Off-Label Use

Changes in the use of drugs in children have been noted. For example, the use of stimulants has increased significantly since the 1970s. In 1995, 31.2% of 1,000 preschool children were prescribed stimulants, up from 12.2% in 1990. This increase is consistent with the overall trend of increasing use of psychotropic medications in children.

g May Be for Ritalin

Patricia O'Meara

Advocacy of the science behind mental health

DEA takes action to stop advertising: ADHD drug use rises

Continued from 10

Hyper-Drugging of Active Kids

By Kelly Patricia O'Meara

Legislatures are beginning to take action to rein in widespread practice of drugging hyperactive children. Control their undesirable behavior by

Back to school for ADHD drugs

aggressive

In the US, the number of stimulant prescriptions soared from around 5 million in 1991 to nearly 35 million in 2007.

In 2004, methylphenidate (Ritalin) was involved in an estimated 3,601 hospital emergency department visits, compared to 271 in 1990.

From 1990 to 2000, 186 deaths in the US were linked to Ritalin. The risk is highest for those who snort large amounts of the drug.

Since 1995, it has ranked on the Drug Enforcement Administration's list of "most-stolen" medications.

**13 times more
Ritalin abusers
checked into
emergency rooms
in 2004 than
in 1990.**



I ended up doing a lot of stronger amphetamines that brought me down pretty quick, and I don't know if I would have gotten interested in them if I hadn't started using Ritalin." — Andy



The vicious effects of prescription stimulants

This amphetamine-like substance causes the same types of effects on the body as other forms of speed—loss of appetite, insomnia, increased heart rate. The abuse of this drug in larger doses, especially through injection or snorting, puts an even greater strain on the body. The stress on the heart can be fatal.

Take the case of a teenager—a long-term user of Ritalin—who collapsed one day while skateboarding. Dead of a heart attack.

An injection of Ritalin has an additional, horrible effect on the body. While the chemical compound methylphenidate dissolves completely in water, the tablets

also contain tiny particles of insoluble fillers. These solid materials block the small blood vessels when injected into the blood stream, causing serious damage to the lungs and to the eyes.

Aside from the physical impact, there are also severe emotional conditions caused by even short-term use of this drug. Hallucinations and psychotic behavior are not uncommon.

A researcher in Texas found that Ritalin use may heighten the danger of cancer. This study found every one of a dozen children treated with methylphenidate experienced genetic abnormalities associated with an increased risk of cancer.

SHORT-TERM EFFECTS

- Loss of appetite
- Increased heart rate, blood pressure, body temperature
- Dilation of pupils
- Disturbed sleep patterns
- Nausea
- Bizarre, erratic, sometimes violent behavior
- Hallucinations, hyper-excitability, irritability
- Panic and psychosis
- Convulsions, seizures and death from high doses

LONG-TERM EFFECTS

- Permanent damage to blood vessels of heart and brain, high blood pressure leading to heart attacks, strokes and death
- Liver, kidney and lung damage
- Destruction of tissues in nose if sniffed
- Respiratory (breathing) problems if smoked
- Infectious diseases and abscesses if injected
- Malnutrition, weight loss
- Disorientation, apathy, confused exhaustion


- Strong psychological dependence
- Psychosis
- Depression
- Damage to the brain including strokes and possibly epilepsy



Ritalin leads to other drugs

A study supported by the National Institute on Drug Abuse found that users of Ritalin and similar drugs “showed the highest percentage of cocaine abuse.”

Because a tolerance builds up, abuse of Ritalin can lead users to consume stronger drugs to achieve the same high. When the effects start to wear off, the person may turn to more potent drugs to rid himself

A black and white portrait of Kurt Cobain, the lead singer of Nirvana, looking slightly to the right with a serious expression. The image is partially obscured by the text on the right.

KURT'S STORY: Rock legend Kurt Cobain started on Ritalin at age 7. Cobain's widow, Courtney Love, believed that this drug led to his later abuse of stronger drugs. He committed suicide with a shotgun in 1994. Love was also prescribed Ritalin as a child. She described the experience this way: “When you're a kid and you get this drug that makes you feel that [euphoric] feeling, where else are you going to turn when you're an adult?”

of the unwanted conditions that prompted him to abuse the drug in the first place.

Ritalin itself does not lead the person to other drugs: people take drugs to get rid of unwanted situations or feelings. The drug masks the problem for a time (while the user is high). When the “high” fades, the problem, unwanted condition or situation returns more intensely than before. The user may then turn to stronger drugs since Ritalin no longer “works.”

A study of 500 students over a period of 25 years found those who used Ritalin and related drugs had a greater likelihood of using cocaine and other stimulants later in life.

According to a 2005 study, teens who abuse prescription drugs are 12 times likelier to use heroin, 15 times likelier to use Ecstasy and 21 times likelier to use cocaine, compared to teens who do not abuse such drugs.

Common

Justifications

(Don't fall into the trap):

There are many justifications for taking this powerful drug. Recognize them for what they are—Lies!

- **Everyone is using it.**
- **It's just for study.**
- **My brother takes it for a learning disorder, it can't be that bad.**
- **It's not addicting.**
- **You can control it. You don't have to use it again if you don't want to.**

Don't let others—including your friends—lead you into the trap.

DEATH from Ritalin

High doses of Ritalin lead to similar symptoms such as other stimulant abuse, including tremors and muscle twitching, paranoia,* and a sensation of bugs or worms crawling under the skin.

One 17-year-old, after snorting crushed Ritalin pills and staying awake for days, went psychotic, killed his parents and severely injured his brothers and sister

MATTHEW'S STORY:

Matthew was a teenager who had been on Ritalin for 7 years. He died suddenly in March 2000. Although he had no history of heart problems, the autopsy revealed clear signs of small-vessel damage. His parents were told by one of the medical examiners that the heart of a healthy, fully grown man weighs about 350 grams. Matthew's heart weighed 402 grams. His death certificate reads: "Death caused from long-term use of methylphenidate (Ritalin)."



¹⁸ * paranoia: suspicion, distrust or fear of other people.

with a hatchet. A 14-year-old, on Ritalin since he was 7, beat another boy to death with a baseball bat.

Ritalin can cause aggression, psychosis and an irregular heartbeat that can lead to death.

IT'S A CRIME TO ABUSE IT

In the United States, Ritalin is subject to severe criminal penalties for abuse. The penalties for a first trafficking offense (which you would be guilty of even if you just shared one or two pills with a friend) includes up to 20 years in prison and a fine of up to \$1 million.

If death or serious injury results from a first offense, the penalty is 20 years to life in prison.

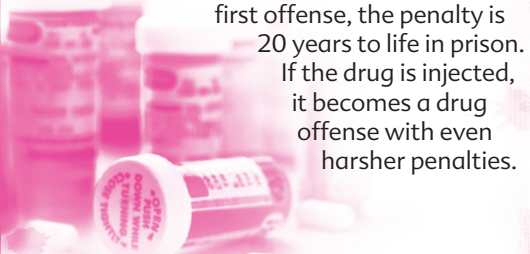
If the drug is injected, it becomes a drug offense with even harsher penalties.

I realize that my interest in and resulting dependence on speed started when I was prescribed Ritalin. At first it was every weekend, then it was every day.

“I began to get hallucinations of birds flying overhead, feelings of people in the same room as me when I was alone, and the beginnings of paranoia. I used up [my friend’s] entire Dexedrine prescription within a week. Then I went back to my Ritalin and went on from there.

“I don’t remember much of 12th grade. But I do remember overwhelming depression and an inability to understand what exactly was the reason I was doing worse than ever in school. I barely graduated, and made absolutely no college plans.

“At the last minute I enrolled in the local college. I was able to stay clean for about 17 days before the need for speed overcame all. I attended class for one week, and failed miserably.” — Sam



The Truth About Drugs

Drugs are essentially poisons. The amount taken determines the effect.

A small amount acts as a stimulant (speeds you up). A greater amount acts as a sedative (slows you down). An even larger amount poisons and can kill.

This is true of any drug. Only the amount needed to achieve the effect differs.

But many drugs have another liability: they directly affect the mind. They can distort the user's perception of what is happening around him or her. As a result, the person's actions may be odd, irrational, inappropriate and even destructive.

Drugs block off all sensations, the desirable ones with the unwanted. So, while providing short-term help in the relief of pain, they also wipe out ability and alertness and muddy one's thinking.

Medicines are drugs that are intended to speed up or slow down or change something about the way your body is working, to try to make it work better. Sometimes they are necessary. But they are still drugs: they act as stimulants or sedatives, and too much can kill you. So if you do not use medicines as they are supposed to be used, they can be as dangerous as illegal drugs.

**The real answer is to
get the facts and not
to take drugs in the
first place.**



WHY DO PEOPLE TAKE DRUGS?

People take drugs because they want to change something in their lives.

Here are some of the reasons young people have given for taking drugs:

- To fit in
- To escape or relax
- To relieve boredom
- To seem grown up
- To rebel
- To experiment

They think drugs are a solution. But eventually, the drugs become the problem.

Difficult as it may be to face one's problems, the consequences of drug use are always worse than the problem one is trying to solve with them. The real answer is to get the facts and not to take drugs in the first place.



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Millions of copies of booklets such as this have been distributed to people around the world in 22 languages. As new drugs appear on the streets and more information about their effects becomes known, existing booklets are updated and new ones created.

The booklets are published by the Foundation for a Drug-Free World, a nonprofit public benefit organization headquartered in Los Angeles, California.

The Foundation provides educational materials, advice and coordination for its international drug prevention network. It works with youth, parents, educators, volunteer organizations and government agencies—anyone with an interest in helping people lead lives free from drug abuse.

FACTS YOU NEED TO KNOW

This booklet is one in a series of publications that cover the facts about marijuana, alcohol, Ecstasy, cocaine, crack cocaine, crystal meth and methamphetamine, inhalants, heroin, LSD and prescription drug abuse. Armed with this information, the reader can make the decision to live a drug-free life.



For more information or to obtain more copies of this or other booklets in this series, contact:

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