

HEROIN

WHAT YOU NEED TO KNOW



Australian Government
Department of Health

WHAT IS HEROIN?

Heroin is the common name for diacetylmorphine or diamorphine. It belongs to a group of drugs known as opiates, so-called because they are natural products of the opium poppy (opiates also include opium, morphine and codeine). Heroin and other opiates form part of a larger family of drugs called 'opioids', the most well-known of which is oxycodone (OxyContin, Endone).

Heroin and other opiates are depressant drugs. Depressants do not necessarily make a person feel depressed. Rather, they slow down the activity of the central nervous system and messages going between the brain and the body. For example, breathing and heart rate get slower and can even stop.

Internationally, there are several types of heroin which differ in appearance, acidity (this affects how it can be used) and texture according to how they're processed. In Australia, heroin can be a fine powder, granules or rocks, and is normally white or off-white in colour although it is sometimes brown.¹ It is normally injected, but can also be snorted, smoked (e.g. in a joint or 'snow cone' with cannabis — many powder drugs are used this way), or heated and the vapours inhaled (called 'chasing the dragon').¹⁻³

Heroin is normally sold in 'caps' (a small amount, usually enough for one injection) or grams. It is usually packaged in 'foils' (aluminium foil packaging) or small, coloured balloons. It can be sold cut (mixed) with a range of substances that make it hard for the user to know the purity of what is being taken. These other substances can in themselves be harmful.

Heroin is also known by a variety of other street names, including hammer, H, smack, junk, and gear.

HAMMER SMACK JUNK & GEAR

HOW MANY PEOPLE USE HEROIN?

Heroin use is very low in Australia. According to the 2016 National Drug Strategy Household Survey, two in every one thousand (0.2%) Australians (aged 14 or over) had used it in the past 12 months.



WHAT ARE THE EFFECTS?

Heroin produces a 'rush' within seconds of injecting or smoking it,⁵ or up to about 5 minutes if it's snorted.⁶ The effects of heroin can last for approximately 3-5 hours.

Effects of taking heroin can include all the following:^{5,7}

- **Small ('pinned') pupils**
- **Drowsiness, becoming slow, sluggish, 'out of it',**
- **Feelings of warmth, relaxation and contentment, followed by a few hours of feeling very sedated**
- **Euphoria or a 'high'**
- **Feelings of detachment**
- **Nausea and vomiting**
- **Dependence (addiction), including withdrawals if use is stopped**
- **Coma**
- **Overdose (including death)**

WHAT ARE THE RISKS?

Heroin is considered to be the most harmful of all illegal drugs.⁵

There are many problems that can result from heroin use, especially if it's used heavily or regularly. Some effects result directly from the drug itself while others are part of the 'heroin use' lifestyle. These problems range from being unpleasant to life-threatening. They include:

Physical health risks:^{1, 5, 8}

- **Risk of blood-borne viral infections such as Hepatitis C or (sometimes) HIV if injected. Just over half (53%) of people who inject drugs have hepatitis C**
- **Lung infections and infections of the heart valves (if injected). These can be very serious and sometimes fatal**
- **Overdose (including death)**

Long term risks include:^{1, 5, 9}

- **Dependence (addiction) – including extremely unpleasant withdrawals if the person stops using (see later for more information)**
- **Dental issues – opioid use can lead to the user experiencing a dry mouth, which means that there's less saliva to help prevent tooth decay (that said, a range of other factors are also important. For example, people who use heroin also often have poor eating habits and dental hygiene)**
- **Irregular periods and infertility in women**
- **Loss of sex drive, erectile dysfunction and infertility in men**
- **Users are more at risk of dying from suicide or trauma (e.g. accidents, assaults)**

Psychological health and social risks:

- **Family and relationship issues, losing friends, losing jobs, poor performance at school or study and homelessness, are often experienced by regular users. For some people, these are reasons that led them to use, but for many users these can remain a problem or get worse once they start using**
- **If the user becomes dependent on (addicted to) the drug then the risk of getting into trouble with the law for dealing or other illegal activity (to support a habit) increases**
- **Heroin is probably the most stigmatised of all drugs, which can increase users' isolation from friends, family and the community**

Heroin is commonly injected by users, and injecting comes with many of its own risks. These include:⁵

- **Increased chance of experiencing vein and skin infections, endocarditis (an infection that effects the heart, it can be fatal) as well as blood borne viral infections like hepatitis B, hepatitis C and HIV**
- **Higher chance of overdose; overdose is more likely to occur using heroin than any other drug – see later for more information**

As with any illegal drug, one of the major risks is that users can't always be sure what they're using — what they are told is heroin may in fact be something quite different and, either way, it is usually cut (mixed) with other substances.¹⁰

HEROIN AND OVERDOSE

Heroin is a central nervous system depressant, meaning that it slows down the brain functions, and in particular the control of breathing (which can slow down or even stop). Accidental overdoses are common, as it is almost impossible for users to tell the purity of the heroin they are using.

Overdoses can happen if too much heroin is used or if the person also has other drugs in their system (e.g. alcohol, benzodiazepines such as Valium, or other opioids such as morphine and oxycodone).² Combining heroin with some kinds of antidepressant (tricyclics), and/or stimulant drugs (e.g. cocaine or methamphetamine) also increases the risk of overdosing.⁵

Signs of overdose include:²

- **Extreme drowsiness or the person may even be impossible to wake**
- **Small ('pinned') pupils**
- **Slowed breathing and heart rate**

Sometimes the person will also experience:²

- **Blue or purple coloured skin (cyanosis), usually starting on lips and fingers**
- **Low blood pressure**
- **A drop in body temperature to below 35 degrees (hypothermia)**

If caught in time, the effects of overdose can be reversed by administration of a drug called naloxone. However, people who survive an overdose can still experience serious health problems, including pulmonary oedema (fluid on the lungs), broncho-pneumonia, ongoing nerve problems from crush injuries (caused by lying still for a long period of time), kidney failure, and permanent brain damage.⁵

IS HEROIN ADDICTIVE?

It is possible to become dependent on (addicted to) heroin and other opioids, particularly if the person uses a lot, regularly, or if they smoke or inject. Heroin is considered to have a very high dependence liability, meaning it is one of the most 'addictive' drugs there is — second only to tobacco.¹ Around one in four people who use heroin will get 'hooked'.⁵

Heroin dependence is often called a 'chronic relapsing disorder', as many people, once hooked on it, go through a cycle of several 'quit attempts', lapses and relapses into use.⁵ For most people who become dependent on it, it is a difficult habit to kick. People who are dependent on heroin develop a tolerance to the drug,¹¹ meaning that more is required to get the same effect.

The lifestyle of many people who are dependent is a difficult and often stressful one and often leads to:⁵

- **Loss of jobs or problems finding work**
- **Fights with friends, family and loved ones**
- **Losing touch with friends, family and loved ones**
- **An inability to pay rent and bills, which can result in homelessness**
- **Impaired physical health, which often means getting sick more often due to a poorer lifestyle (e.g. malnutrition, health problems from injecting)**
- **An increased likelihood of being assaulted (and experiencing other violent and traumatic events)**
- **Increased mental health problems (sometimes people use because it helps them forget their problems, but then find themselves caught up in a cycle of use they had not planned on)**
- **Involvement in crime which can lead to being arrested, getting a criminal record and going to prison**

Other long-term problems can be a result of other factors, such as the user neglecting their general health, being affected by drug impurities and contaminants, and the contraction of a blood-borne virus. Where impurities and contaminants are present in heroin this can lead to collapsed veins, tetanus, abscesses and damage to the heart, liver, lungs and brain.²

HEROIN WITHDRAWAL

If a dependent person suddenly stops taking heroin, or drastically reduces the amount they use, they will experience withdrawal symptoms as their body readjusts to functioning without the drug. Symptoms usually appear 8-12 hours after stopping use, although they can take up to 24 hours, and usually peak 2-4 days later.^{5,7}

Heroin withdrawal symptoms may include:^{5,7}

- **Cravings**
- **Restlessness**
- **Anxiety**
- **Low blood pressure**
- **Increased heart rate and blood pressure**
- **Muscle spasms, headaches, backaches, stomach and leg cramps**
- **Goose bumps, dilated (enlarged) pupils**
- **Hot and cold flushes**
- **Loss of appetite**
- **Nausea, vomiting**
- **Increased need to urinate, diarrhoea**
- **Runny nose and watery eyes**
- **Sweating**
- **Increased irritability, aggression**
- **Insomnia, disturbed sleep**
- **Low mood (dysphoria)**

Withdrawal symptoms usually subside after six to seven days but can sometimes last up to ten days.^{5,7} Tolerance drops quickly also, so people who stop using for a while are at a much higher risk of overdosing if they start again. Often the user does not realise that the amount they used before can now cause them to overdose.⁵

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FOR MORE INFORMATION

We have listed some of the national telephone helplines and websites below.

Australian Drug Foundation

Provides information about drugs and links to services in each state and territory

www.adf.org.au

DrugInfo Line

Provides information about drugs and alcohol. Open 9am–5pm, Monday to Friday

1300 85 85 84 or **03 8672 5983**. Or visit www.druginfo.adf.org.au

Just Ask Us

Provides information about drugs, alcohol, health and well-being

www.justaskus.org.au

Kids Helpline

Free, private and confidential telephone and online counselling service for young people aged 5–25 years

Open 24 Hours **1800 55 1800**

Lifeline

24 hour crisis line **131114**

Also available is one-on-one chatlines for crisis support, visit

www.lifeline.org.au/Find-Help/Online-Services/crisis-chat

Counselling Online

Free, confidential counselling service for people using drugs, their families and friends

www.counsellingonline.org.au

National Drugs Campaign

Australian Government website provides information about illicit drugs and campaign resources.

www.australia.gov.au/drugs

Family Drug Support

For families and friends of people who use drugs or alcohol

1300 368 186

Some state and territory based helplines are listed below.

Alcohol and Drug Information Service (ADIS)(free, confidential advice about drugs and alcohol).
Some services operate 24 hours.

| State/Territory | City contact | Regional/Rural contact (free call from landline) |
|--|---|---|
| New South Wales ADIS | 02 9361 8000 | 1800 422 599 |
| Queensland ADIS | 1800 177 833 | 1800 177 833 |
| Victoria Directline | 1800 888 236 | 1800 888 236 |
| Western Australia ADIS | 08 9442 5000 08 9442 5050 (for parents) | 1800 198 024 1800 653 203 |
| Australian Capital Territory Alcohol & Drug Program | 02 6207 9977 | |
| Northern Territory Alcohol & Other Drug Services | 08 8922 8399 (Darwin) 08 8951 7580 (Alice Springs) | 1800 131 350 |
| Tasmania ADIS | 1800 811 994 | 1800 811 994 |
| South Australia ADIS | 1300 131 340 | 1300 131 340 |

Callers in Victoria can also contact the Youth Substance Abuse Service (YSAS) on 1800 014 446
(24 hour toll free service)

sydney.edu.au/matilda-centre

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