INHALANTS
WHAT YOU NEED TO KNOW

Australian Government
Department of Health
WHAT ARE INHALANTS?

Inhalants, also known as volatile substances or solvents, are chemicals that evaporate and give off fumes at room temperature. These vapours can be inhaled through the nose and/or the mouth to give the user an immediate ‘high’. These substances are easily absorbed through the lungs and carried around the body affecting areas such as the brain and liver.

There are four main types of inhalants:

1. **Volatile solvents** are liquids or semi-solids. Examples include paint thinners and removers, glues, petrol and correction fluid (liquid paper).
2. **Aerosol sprays** which contain intoxicating propellant chemicals. Examples include some spray paints, deodorants and hairsprays, fly sprays and vegetable oil sprays.
3. **Gases** include medical anaesthetics (e.g. nitrous oxide) and gases used in household or commercial products such as butane, propane, refrigerants and fire extinguishers.
4. **Nitrites** are liquids such as amyl, butyl and cyclohexyl nitrite found in room deodorisers and leather cleaner. While nitrites are inhaled like other substances discussed here, they have different effects and are associated with different harms.

The first three categories of inhalants are depressant drugs. Depressants do not necessarily make a person feel depressed, rather they slow down the activity of the central nervous system (CNS).

Nitrites such as amyl nitrite don’t slow down the CNS. Inhaling nitrites expands blood vessels, drops blood pressure and accelerates heart rate, causing a quick rush sensation.

Nitrous oxide is also known as laughing gas, nitrous, whippets and bulbs. Amyl and butyl nitrate are also known as ‘poppers’. Inhaling spray paint is also known as ‘chroming’.

Inhalants are usually highly flammable.

HOW MANY PEOPLE USE INHALANTS?

According to the 2016 National Drug Strategy Household Survey, one in one hundred (1%) Australians (aged 14 years or older) used inhalants in the past 12 months. In 2014, approximately one in six (15.9%) Australian students (aged 12 - 17 years old) reported having ever used inhalants.
WHAT ARE THE EFFECTS?

Once inhaled, the chemicals are rapidly absorbed into the bloodstream through the lungs and travel quickly to the brain and the rest of the body. Most inhalants have an immediate effect (within seconds) but usually only provide a ‘high’ for a few minutes (although sometimes the effects can last several hours depending on the inhalant used, the amount inhaled and the method of inhalation). Since the effects wear off quickly users often keep inhaling to prolong the ‘high’. In some cases this can lead to brain damage, loss of consciousness or death.

The following information applies to volatile solvents, aerosol sprays and gases. Some of the short-term effects produced by using these inhalants are similar to alcohol and other depressants, and can include:1 4 8–10

- Increased heart rate
- Feeling light-headed, dizzy, confused or drowsy
- Dulling of pain and reduction of anxiety
- Euphoria or a ‘high’
- Impaired judgement and loss of inhibitions (leading people to do things they wouldn’t normally do)
- Slurred speech and loss of coordination (e.g. staggering), loss of balance
- Headaches
- Nausea, vomiting
- Becoming irritable, agitated or aggressive
- Burning feeling or irritation to eyes, nose and throat
- Tremors or shakes
- Hallucinations (e.g. seeing or hearing things that aren’t really there)
- Dissociation (e.g. disconnected from feelings and surroundings)
- Death (see later section)

Nitrites such as amyl nitrite (poppers) cause a different set of effects and are associated with different harms, these include:

- Increased heart rate
- Hot flushes, dizziness/vertigo
- Feelings of warmth and excitement (that usually last several minutes)
- Headaches and blackouts
- A major risk of using these drugs is having unsafe sex, which puts people at risk of catching and spreading infectious diseases such as HIV and hepatitis1
WHAT ARE THE RISKS?

Some of the effects of inhalants can be unpleasant or even dangerous, especially if they are used heavily or often. People who have used a lot or more frequently find that they experience a lot more negative effects compared to new users or people who don’t use inhalants very often.¹

Many inhalants contain a mix of one or more compounds which impacts greatly on their overall effects. If used in combination with other drugs or medications, this may also lead to serious adverse effects including nausea, vomiting, increased heart rate, seizures, loss of consciousness and death.

Different inhalants have different effects and harms. For example, butane products seem to be particularly risky for ‘sudden sniffing death’. Toluene, a substance found in glues and other products, has been strongly linked to brain damage.² Hearing loss has been most strongly associated with the use of spray paints, glues, dewaxers, dry-cleaning chemicals and correction fluids. Use of correction fluids and dry cleaning chemicals is also especially risky for liver and kidney damage. While using nitrous oxide still involves a risk of death from overdose it does not seem to cause the same kind of brain injury as inhalants that contain chemicals such as toluene and butane. Because different inhalants are made up of variety of chemicals, it is difficult to be sure about the effects and harms of each.

All inhalants displace air in the lungs resulting in hypoxia (lowered oxygen level) which can damage organs in the body including the brain. Inhalants can also destroy myelin, a fatty tissue that surrounds nerve fibres in the brain. As myelin aids in carrying messages around the brain and to the body, damage from inhalants can lead to spasms, tremors and difficulty moving.

There is no safe level of inhalant use. The risks associated with inhalant use can include:¹ 4, 9-12

Short term risks:
- Increased heart rate
- Headaches
- Agitation
- Nausea, vomiting
- Increased risk of experiencing accidents and injuries while ‘high’
- Increased risk of serious burn injuries from using inhalants as some are highly flammable substances (e.g. butane and propane)
- Burning feeling or irritation to eyes, nose and throat
- Tremors or shakes
- Increased risk of pneumonia and breathing problems
- Coma
- Death (see later section)

Heavier or longer term use has been linked with:
- Dependence (addiction; see next page)
- Nose bleeds and sores around the mouth and nose
- Problems breathing
- Brain damage (leading to problems with movement, learning and cognitive processes such as attention, memory and decision-making)
- Neurological problems such as tremors, abnormal eye movements
- Hearing loss
- Sight loss
• Damage to other parts of the body including the immune system, bones, nerves, kidney, liver, heart and lungs
• Increased risk of leukaemia from petrol sniffing

Regular inhalant use is associated with higher rates of depression, anxiety disorders and problems with other drugs and/or alcohol. This doesn’t necessarily mean that inhalants cause these problems, users may already be prone to mental health problems, but the use of inhalants can bring on these issues or make them worse.

People who use inhalants are also more likely to experience stressful events such as having problems at school, at home or at work. There are reports of inhalant users committing serious crimes while intoxicated.

**DEATH**

All inhalants carry the risk of death through:1,13

• ‘Sudden sniffing death syndrome’. Inhaling the chemicals in solvents or aerosol sprays can cause an irregular and fast heart beat and can cause heart failure within a few minutes, even in people who are otherwise healthy
• Asphyxiation or suffocation (anything that blocks oxygen from going into the body including choking on vomit while intoxicated)
• Seizures
• Burns, accidents and injuries experienced while intoxicated can be fatal
• Coma

**ARE INHALANTS ADDICTIVE?**

It’s possible to be dependent on (addicted to) inhalants, particularly if the person uses a lot or regularly.12

People who are dependent on inhalants develop tolerance to the drug. This means that they need to take more of the drug to get the same effect. They may also become more sensitive to other drugs such as alcohol or cocaine.

People who are dependent on inhalants also find that using them becomes far more important than other things in their lives, such as work, sport, socialising or study. They crave the drug and find it very difficult to stop using it.

**INHALANT WITHDRAWAL**

People who use inhalants frequently can experience withdrawal symptoms when they stop using them. The time taken for these to subside can depend on how regularly the person has been using the inhalant and for how long. Withdrawal symptoms can include:2,4

• Headaches
• Cravings
• Irritability
• Sleep problems
• Dry mouth
• Muscle cramps
FOR MORE INFORMATION

For more information on inhalants, please see the National Inhalants Information Service
www.inhalantsinfo.org.au

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

**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.

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<tr>
<th>State/Territory</th>
<th>City contact</th>
<th>Regional/Rural contact (free call from landline)</th>
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<tbody>
<tr>
<td>New South Wales ADIS</td>
<td>02 9361 8000</td>
<td>1800 422 599</td>
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<tr>
<td>Queensland ADIS</td>
<td>1800 177 833</td>
<td>1800 177 833</td>
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<tr>
<td>Victoria Directline</td>
<td>1800 888 236</td>
<td>1800 888 236</td>
</tr>
<tr>
<td>Western Australia ADIS</td>
<td>08 9442 5000</td>
<td>1800 198 024</td>
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<tr>
<td></td>
<td>08 9442 5050 (for parents)</td>
<td>1800 653 203</td>
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<tr>
<td>Australian Capital Territory Alcohol &amp; Drug Program</td>
<td>02 6207 9977</td>
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<tr>
<td>Northern Territory Alcohol &amp; Other Drug Services</td>
<td>08 8922 8399 (Darwin)</td>
<td>1800 131 350</td>
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<td></td>
<td>08 8951 7580 (Alice Springs)</td>
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<tr>
<td>Tasmania ADIS</td>
<td>1800 811 994</td>
<td>1800 811 994</td>
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<tr>
<td>South Australia ADIS</td>
<td>1300 131 340</td>
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Callers in Victoria can also contact the Youth Substance Abuse Service (YSAS) on 1800 014 446 (24 hour toll free service)

**SOURCES**


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