

How would I recognise a 'P' user?

I just don't know what signs to look for.....

You may not even recognise a 'P' user, as there are various patterns and levels of use as there are with any other drug. Some use recreationally with few obvious ongoing signs. Signs and symptoms do become increasingly apparent as use increases or intensifies. Being aware of the various effects of 'P' use will help you to identify if someone is using 'P' and will make the 'red flags' more apparent.

Methamphetamine has three patterns of use: low intensity, binge, and high intensity.

- **Low-intensity** use describes a user who is not psychologically addicted to the drug and who administers the drug by swallowing or snorting it.
- **Binge** users are psychologically addicted and prefer to smoke or inject meth to achieve a faster and stronger high.
- **High-intensity** users are also psychologically addicted and prefer to smoke or inject methamphetamine to achieve a faster and stronger high. The difference between binge and high-intensity patterns of use is the frequency with which the drug is used.

While the binge pattern of abuse has seven stages within its cycle: rush, high, binge, tweaking*, crash, normal and withdrawal, the high-intensity abuse pattern usually does not include a state of normalcy or withdrawal.

** Note: Many of these signs are equally relevant to use of other drugs – particularly cannabis. Many of the warning signs for drug use can also be the same as those for the 'ups and downs' of being a teenager- or even depression. There's also the possibility of a physical or emotional problem.*

The most dangerous stage of use for users, Police and others is "Tweaking".

This meth user probably has not slept in 3-15 days and consequently, the symptoms would be irritability and paranoia. A 'tweaker' needs no provocation to behave or react violently and confrontation increases the chances of a violent reaction. If the 'tweaker' is also using alcohol, negative feelings and associated dangers intensify.

Several hours after the last meth use, the individual experiences a drastic drop in mood and energy levels. Sleep begins and may last for a long period and, upon awakening, severe depression may last for days, during which time, suicide can be a major concern. These symptoms may be reversed by taking another dose of methamphetamine, thereby fitting the definition for a withdrawal syndrome.

When coming off meth use or "crashing", users are likely to experience withdrawal symptoms such as, severe cravings, insomnia, restlessness, mental confusion or depression, as the meth is exiting their system.

Meth use also has psychological effects: disturbed sleep, excessive excitation, excessive talking, panic, anxiousness, nervousness, moodiness and irritability, false sense of confidence and power, delusions of grandeur, aggressive and violent behaviour, uninterested in old friends, food, and severe depression.

Excessive meth use can also cause long term effects such as fatal kidney and lung disorders, possible brain damage, depression, hallucinations, disorganised lifestyle, permanent psychological problems, violent and aggressive behaviour, weight loss, insomnia, behaviour resembling paranoid schizophrenia, decreased social life, malnutrition, poor coping abilities, disturbance of personality development, lowered resistance to illnesses, liver damage, stroke and the inevitable, death.

