



CORBIN & ASSOCIATES, INC.

Corbin & Associates, Inc.
Lesson Plan of the Month
December 2000

Topic: GHB / Ecstasy

Target Group: Grades 10-12

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Objectives: After this block of instruction the student will be able to;

- I. Recognize the terms "party" or "club" drug, and know some of the street terms for GHB and MDMA
- II. Identify some of the symptoms caused by use of the drugs GHB and MDMA
- III. Compare the health hazards attributed to use of these party drugs
- IV. Recognize some ways to protect self from exposure to these drugs what

Introduction:

My name is Officer Neil Wagstrom, I will be working as the new School Resource Officer here at Glenwood Springs High School. I have been a police officer for the City of Glenwood Springs for approximately two and one-half years. Prior to Glenwood Springs I worked as a police officer for the City of Rifle for a little over two years and the City of Boulder for two years. I have a Bachelor of Arts Degree with a Political Science Major. I am married with three children, a daughter twenty-one, daughter fourteen and a son nine.

Today, I'll explain what is meant by the term "party or club drug".

I. We'll confine our discussion to MDMA and GHB, although club drugs include ketamine and rohypnol.

II. Briefly describe drug categories (stimulant or depressant) of MDMA and GHB

III. Present overview of health hazards attributed to MDMA or GHB

IV. Describe methods of use, extent of use, and ways to avoid

Body:

I. Methylendioxyamphetamine (MDMA is:

A. Street names (e.g. Adam, Ecstasy, XTC, Clarity, Essence

B. Synthetic, Psychoactive (Mind Altering) Drug

1. Was originally developed & patented in Germany by pharmaceutical company

2. No purpose in mind (actually a by product of drug development process

3. Been around since early 1900's, but dormant use until 1970's

4. Initial uses by psychotherapists to enhance communication in therapy sessions

C. Has Hallucinogenic and Amphetamine-Like Properties

1. Chemical structure similar to hallucinogen mescaline and stimulant methamphetamine (both of which are known to cause brain damage)

D. Popularity is increasing

1. "Raves" & Dance Parties

2. Stats show use by 12th graders to have jumped by 2% between 1998 and 1999

E. Illegal Drug; currently listed as Schedule 1 by USDEA

1. No accepted medical use for MDMA

F. Methods of Use

1. Most often ingested orally as tablet
2. Available as powder and may be snorted or smoked. Rarely injected.
3. Effects last three to six hours

G. Extensive Health Hazards

1. Risks similar to those associated with cocaine and amphetamine use
 - a. Psychological difficulties (e.g. confusion, depression, anxiety, paranoia, sleep problems, drug craving) possible psychotic episodes
 - b. Increases in heart rate and blood pressure
2. Physical Symptoms
 - a. Muscle tension, nausea, involuntary teeth clenching, rapid eye movement, blurred vision, faintness, chills and sweating
3. Duration of Effects
 - a. Immediate effects three to six hours
 - b. Psychological affects may last for weeks
 - c. Fatalities have been reported
4. NIDA Supported Study has provided direct evidence that MDMA use causes brain damage
 - a. Advanced brain imaging shows MDMA use harms neurons that release serotonin (brain chemical important in regulating memory and other functions)
 - b. Memory problems persist over two weeks after last dosage
 - b. Johns Hopkins University study found heavy MDMA users to have significant visual and verbal memory impairments.
5. Additional study suggests MDMA use may lead to impairments in other

cognitive functions such as ability to reason, verbal skills, and sustain attention.

6. Long term damage is still unknown. Animal studies suggest effects last several years and may be permanent.

II. Gamma-Hydroxybutyrate (GHB) is:

- A. Known by street names Grievous Bodily Harm, G, Liquid Ecstasy, Georgia Home Boy.
- B. Can be produced in clear liquid, white powder, tablet, capsule
 1. Most often used in conjunction with ETOH.
 2. Has increasingly been involved in poisonings, overdoses, date rapes, fatalities
 2. Often manufactured in homes with the use of dubious recipes and ingredients of questionable quality.
- B. Usually abused for its toxicating, sedative, or euphoric properties, also has growth hormone releasing properties.
- D. Is a central nervous system depressant
 1. Slows heart rate, blood pressure, and breathing to dangerous levels.
 2. Effects began 10-20 minutes after ingestion.
 3. Lasts up to 4 hours depending on dose.
 4. Heavier doses result in sleep, coma, or death.
 5. Overdose occurs quickly with signs of sedation: drowsiness, nausea, vomiting, loss of consciousness, headache, impaired breathing.
- E. Clears from body quickly, so can be difficult to detect in emergency and treatment facilities if reported use isn't timely.

III. Methods to avoid unintentional exposure

- A. Avoid attending publicized all night dance parties or "raves"
- B. Don't go to parties alone (without trusted friends)
- C. Don't accept drinks from anyone that you don't know well

- C. Avoid experimenting with these drugs because of their dubious quality and extensive health hazards

Review:

I. Party or "Club" drugs include both stimulants and depressants

A. MDMA also has hallucinogenic properties

B. None are manufactured under controlled circumstances

1. can be easily overdosed, with fatal consequences

C. Stimulants (MDMA) elevate heart rate and blood pressure, while GHB (depressant) lowers heart rate, breathing and blood pressure

1. GHB is used for "Date Rape"

II. Ways to avoid unintentional use

Practice:

1. What are some common "street" terms for MDMA and HGB?
2. What category of drug is MDMA? HGB?
3. What are some of the harmful effects of MDMA? How do these effects compare with the harmful effects caused by GHB use?
4. What are the best ways to protect a person from unintentional use?

Documentation:

National Institute On Drug Abuse

