

The Campus Assistance Program

The Campus Assistance Program can help. A counselor will be available to assist you in finding the answers and resources that can help. The CAP is a free service provided to you by the university. The CAP counseling services are short term. However, if long term services are required and a referral to an outside agency is appropriate, the CAP counselor will work with you to find the services that would best help you. Any contact that you have with the Campus Assistance Program is **Confidential**.

How Do I Contact the CAP?

For more information or for an appointment with a counselor, please call: **568-8888**. A counselor is on call and available to you 24 hours a day, seven days a week. The CAP is located in the Clinical Education Building 1542 Tulane Ave. Office 866.



For Help. Call Today.

Campus
Assistance
Program

1542 Tulane Ave.
Office 866
Clinical Education Building
New Orleans, LA
70112

Phone: 504-568-8888
Fax: 504-568-3892

LSU
Health Sciences
Center

Campus
Assistance
Program

Facts About Drugs: Heroin



Prepared by The LSUHSC
Campus Assistance Program.
568-8888

<http://www.lsubsc.edu/no/organizations/campushealth/>

What is Heroin?



In the United States in 1999 there were 104,000 new heroin users.

Heroin is a highly addictive drug, and its use is a serious problem in the United States. In recent studies we have seen a shift from injecting heroin to

snorting or smoking because of increased purity and the misconception that these forms of use will not lead to addiction.

According to the National Institute on Drug Abuse there are currently 600,000 heroin addicts needing treatment. Heroin has many serious health hazards associated with its use, these hazards include, HIV/AIDS, Hepatitis C, Fatal Overdose, Collapsed Veins and Infectious Diseases. In addition to the effects of the drug itself, street heroin may have additives that do not readily dissolve and result in clogging the blood vessels that lead to the lungs, liver, kidneys, or brain. This can cause infection or even death of small patches of cells in vital organs.

In a report from SAMHSA's 1995 Drug Abuse Warning Network (DAWN), which collects data on drug-related hospital emergency room episodes and drug-related deaths from 21 metropolitan areas, heroin was ranked second as the most frequently mentioned drug in overall drug-related deaths. From 1990 through 1995, the number of heroin-related episodes doubled. Between 1994 and 1995, there was a 19 percent increase in heroin-related emergency department episodes.

Tolerance, Addiction, and Withdrawal

Aside from the debilitating effects of long-term use, the heroin user will most likely suffer from three factors: Tolerance, Addiction and Withdrawal.

Tolerance

When we say tolerance, we mean that the more a person uses a drug the more the person has to take to experience the high. Heroin has a very high rate of tolerance, which in turn, makes the drug that much more addictive and dangerous.

Addiction

As higher doses are used over time, physical dependence and addiction develop. With physical dependence, the body has adapted to the presence of the drug, and withdrawal symptoms may occur if use is reduced or stopped.

Withdrawal

One of the most troubling aspects of heroin addiction is the withdrawal period. Users often call this "dope sickness". With long-term users, this may be a daily exercise in desperation. Withdrawal may occur in as few as two hours after the last dose, and symptoms include drug craving, restlessness, insomnia, cramping, vomiting and diarrhea, cold flashes and kicking movements. These symptoms occur most visibly between 48 and 72 hours after last use and may continue up to a week or more. Among long-term dependent users, withdrawal may require hospitalization, because its results can be fatal.

Treatment

There are four basic approaches to heroin abuse treatment, they include:

- Detoxification (supervised withdrawal from drug dependence, either with or without medication) in a hospital or as an outpatient
- Therapeutic communities where patients live in a highly structured drug-free environment and are encouraged to help themselves
- Outpatient drug-free programs which emphasize various forms of counseling as the main treatment
- Methadone maintenance which uses methadone, a substitute for heroin, on a daily basis to help people lead productive lives while still in treatment

According to the State Alcohol and Drug Abuse Profile, a survey of the state of resources, services, and needs related to alcohol and drug abuse, heroin abuse accounted for the second largest number of all publicly funded drug treatment admissions in 1995. In California, Connecticut, Maryland, Massachusetts, New Jersey, Puerto Rico, Rhode Island, and Washington, heroin was the primary drug of abuse reported in publicly funded drug treatment admissions.

If you, or anyone you know, has a problem with heroin, or any other drug, please contact the **LSUHSC Campus Assistance Program** at **568-8888** for a **free and Confidential** evaluation.