A desire to experience an altered state of consciousness has been a feature of human culture from time immemorial. In the search for mood and mind altering substances, people have experimented and taken risks. Today we are surrounded by legal drugs in coffee, alcohol and cigarettes, let alone prescribed medications and recreational drugs. Using these can be a temptingly easy way to change or control our mood and psychological state. Advertising and marketing may enhance the appeal of substance use and fashions in drug use may lead to the association of a certain drug with a particular and perhaps desirable lifestyle or subculture.

It is estimated that at least 60% of students will try cannabis at some point and about 33% will experiment with other substances. The majority of occasional users come to no long-term harm. Some will, however, run into problems if their drug or alcohol use causes health problems or interferes with work or relationships.

**Substances Used**

Recreational drugs can be classified as stimulants, depressants and hallucinogens. Some drugs however can overlap these categories, for example ecstasy is both a stimulant and a hallucinogen, and, while low grade cannabis or hash works as a depressant, stronger versions such as skunk may also have hallucinogenic properties.

**Stimulants**

Stimulants work by increasing neural activity in the brain. They have the short-term effect of making one feel lively, talkative, confident and euphoric. They are attractive to club and party-goers because they enhance sensory experience and postpone the need for sleep. As their effect wears off, however, they can leave you feeling restless, irritable or washed out. There may, therefore, be a temptation to avoid these ‘coming down’ feelings by taking more of the drug. Long-term use or high doses can lead to extreme agitation, insomnia, delusions, hallucinations and paranoia particularly in susceptible individuals.

The most common stimulants are:

- Amphetamines (speed)
- Ecstasy (a hallucinogenic amphetamine)
- Tobacco
- Anabolic steroids - used illegally to enhance strength and performance in sport
- Amyl nitrite (poppers)
- Cocaine
- Crack cocaine
Depressants
Depressants work by depressing the central nervous system. They can induce a state of relaxation or sedation as well as reducing the intensity of pain and of emotions such as fear, anger or anxiety. They can also in the short-term diminish intellectual ability, the capacity to concentrate or retain information and reduce motivation, energy and manual dexterity.

Examples of depressants are:
- Opiates such as heroin/diamorphine (smack) morphine, pethidine and methadone
- Benzodiazopines (tranquillizers such as Valium and Temazepam). These may be prescribed for short-term use to combat anxiety but they also have an illegal market
- Cannabis (hash, dope, weed, gear). Long-term use or high doses may lead to depression, increased anxiety, an inability to deal effectively with emotions, short-term memory loss, and insomnia
- Alcohol

Regular use of some of these drugs may lead to physical dependency since withdrawal may result in unpleasant physical symptoms. There is also the danger of a serious, or even fatal, overdose.

Hallucinogens
These drugs enhance sensory perceptions - sight, sound, smell and touch. On a ‘good trip’ a person may experience increased self-awareness, and mystical or ecstatic feelings. On a ‘bad trip’ there may be unpleasant feelings of disorientation, panic, and/or paranoia lasting up to several hours. People can also suffer ‘flashbacks‘ where they relive experiences when tripping. This can be intensely disorientating and anxiety provoking. A bad experience is more likely in someone who is already anxious, depressed or unstable, or who takes the drug in an insecure environment.

Hallucinogens include:
- LSD
- Hallucinogenic stimulants such as Ecstasy
- Magic mushrooms
- High potency cannabis such as ‘skunk’.
Side effects and dangers of drugs
All drugs have the potential for unwanted and often unexpected effects.

- Effects may vary according to the mental state of the person taking it. For example, a strong mood altering substance may trigger or exacerbate an underlying emotional instability.
- Withdrawal from a drug in regular, or high dosage use may lead to physical symptoms and so foster dependency
- Pleasurable effects followed by less pleasant after-effects tempt people into repeated use. Crack cocaine can induce addiction quickly because it gives a very strong but short-term burst of euphoria followed by an equivalently intense coming-down which may include high anxiety and physical malaise. In some drugs, physiological tolerance may build up so that more is needed to induce the desired effect.
- Drugs may interact with each other, including legal ones such as alcohol. Some mixtures may prove life-threatening.
- With any illicit drug there is no quality control so there is a constant danger of variable strength and of adulteration with undesirable substances. Sources of cannabis may vary in potency by 10-fold, from 2% hash to 20% skunk. In the case of heroin, in particular, it is the unexpectedly pure drug which may kill someone.
- Injecting drugs involves the risk of introducing infections directly into the blood-stream. Sharing of needles is particularly dangerous as it may lead to cross-infections like HIV and hepatitis.
- Drugs taken during pregnancy may damage the foetus.

People may turn to drugs in an attempt to avoid confronting problems or internal distress. This may lead to physical, emotional, financial, social or legal consequences in the future.