

TIPS for TEENS

HEROIN

THE TRUTH ABOUT HEROIN



SLANG: SMACK/HORSE/BROWN SUGAR/JUNK/
BLACK TAR/BIG H/DOPE/SKAG/NEGRA/SKUNK/
WHITE HORSE/CHINA WHITE/CHIVA/
HELL DUST/THUNDER

GET THE FACTS

HEROIN AFFECTS YOUR BRAIN. Heroin, an illicit opioid, enters the brain quickly. It slows down the way you think, reaction time, and memory.¹ Over the long term, heroin can change the brain in ways that lead to addiction.

HEROIN AFFECTS YOUR BODY. Heroin slows down your heartbeat and breathing, sometimes so much that it can be life-threatening. Heroin poses special problems for those who inject it because of the risks of HIV, hepatitis B and C, and other diseases that can occur from sharing needles.²

HEROIN IS HIGHLY ADDICTIVE. Heroin enters the brain rapidly and causes a fast, intense high. Repeated heroin use increases the risk of developing an addiction; someone addicted to heroin will continue to seek and use the drug despite negative consequences.³

HEROIN IS NOT WHAT IT MAY SEEM. Other substances are sometimes added to heroin. They clog blood vessels leading to the liver, lungs, kidneys, and brain and lead to inflammation or infection.⁴ Powder sold as heroin may also contain other dangerous chemicals, such as fentanyl, that increase the risk of fatal overdose.^{5,6}

HEROIN CAN KILL YOU. Heroin slows—and sometimes stops—breathing, which can result in death. In 2015, there were 2,343 overdose deaths related to heroin or other illicit opioids among people ages 15 to 24.⁷

HEROIN ADDICTION IS TREATABLE. Medication, in combination with behavioral treatment, can help people stop using heroin and recover from addiction.⁸ Building a support system that helps people stop using heroin and other opioids is also important. Medications such as buprenorphine, methadone, and naloxone greatly increase the chance of recovery and reduce the risk of overdose. Friends and family members should have naloxone nearby if possible in case of overdose.⁹

* No official support of or endorsement by SAMHSA or HHS for the opinions, resources, and medications described is intended to be or should be inferred. The information presented in this document should not be considered medical advice and is not a substitute for individualized patient or client care and treatment decisions.

? Q&A

Q. IS IT TRUE THAT HEROIN ISN'T RISKY IF YOU SNORT OR SMOKE IT INSTEAD OF INJECTING IT?

A. NO. Heroin is very dangerous regardless of how it is used. While injecting drugs carries additional risk of infectious disease, taking heroin can be dangerous in any form. You can still die from an overdose or become addicted by snorting or smoking it. Heroin may also be mixed with synthetic opioids such as Fentanyl, which can be fatal in small doses regardless of how they are taken.⁹

Q. WHAT DOES HEROIN LOOK LIKE?

A. HEROIN CAN BE A WHITE OR DARK BROWN POWDER OR A BLACK TAR. People selling heroin often mix in other substances, such as sugar, starch, or more dangerous chemicals.¹⁰ Pure heroin is dangerous as well, despite the common misperception that it is safer.¹¹

Q. WILL HEROIN USE ALTER MY BRAIN?

A. YES. Heroin use alters brain circuits that control reward, stress, decision-making, and impulse control, making it more difficult to stop using even when it is having negative effects on your life and health. Frequent use also can lead to tolerance and withdrawal, so you need more of the drug just to feel normal.^{12,13}

THE BOTTOM LINE:

Heroin is illegal, addictive, and dangerous. Talk to your parents, a doctor, a counselor, a teacher, or another adult you trust if you have questions.

LEARN MORE:

Get the latest information on how drugs affect the brain and body at teens.drugabuse.gov.

TO LEARN MORE ABOUT HEROIN, CONTACT:

SAMHSA
1-877-SAMHSA-7 (1-877-726-4727)
(English and Español)

TTY 1-800-487-4889
www.samhsa.gov
store.samhsa.gov



SAMHSA
Substance Abuse and Mental Health
Services Administration



BEFORE YOU RISK IT!

- 1 KNOW THE LAW.** Heroin is an illegal Schedule I drug, meaning that it is addictive and has no accepted medical use.¹⁴
- 2 GET THE FACTS.** Any method of heroin use—snorting, smoking, swallowing, or injecting the drug—can cause immediate harm and lead to addiction or death.¹⁵
- 3 KNOW THE RISKS.** Using heroin can change the brain, and the changes may not be easily reversed.¹⁶
- 4 LOOK AROUND YOU.** The majority of teens are not using heroin. According to a 2015 national study, fewer than 1 out of 1,000 adolescents ages 12 to 17 were current heroin users.¹⁷



KNOW THE SIGNS

HOW CAN YOU TELL IF A FRIEND IS USING HEROIN?

Signs and symptoms of heroin use are:^{18,19,20}

- Euphoria
- Drowsiness
- Impaired mental functioning
- Slowed movement and breathing
- Needle marks
- Boils

Signs of a heroin overdose include:

- Shallow breathing
- Extremely small pupils
- Clammy skin
- Bluish-colored nails and lips
- Convulsions
- Coma

The drug naloxone can save the life of someone overdosing on heroin. Naloxone can be administered by anyone witnessing an overdose or by first responders.

For more information on naloxone training and availability, visit www.drugabuse.gov/related-topics/naloxone.



WHAT CAN YOU DO TO HELP SOMEONE WHO IS USING HEROIN?

BE A FRIEND. SAVE A LIFE.

Encourage your friend to stop using or seek help from a parent, teacher, or other caring adult.

For 24/7 free and confidential information and treatment referrals in English and Spanish, call SAMHSA's National Helpline at:

1-800-662-HELP (1-800-662-4357)
or visit the SAMHSA Behavioral Health Treatment Services Locator at findtreatment.samhsa.gov

^{14,15,16,20} National Institute on Drug Abuse. (2014). *Research report series: Heroin*. (NIH Publication Number 14-0165). Retrieved from <http://www.drugabuse.gov/sites/default/files/rheroin-14.pdf>

^{3,8,9,12,15} National Institute on Drug Abuse. (2017). *Drug facts: Heroin*. Retrieved from <http://www.drugabuse.gov/publications/drugfacts/heroin>

⁵ Drug Enforcement Agency. (2016). DEA warning to police and public: Fentanyl exposure kills. *Headquarters News*. Retrieved from <https://www.dea.gov/divisions/hq/2016/hq061016.shtml>

⁶ National Institute on Drug Abuse. (2016). *Drug facts: Fentanyl*. Retrieved from <https://www.drugabuse.gov/publications/drugfacts/fentanyl>

⁷ National Institute on Drug Abuse (NIDA). (2017). Drug overdoses in youth. *NIDA for Teens*. Retrieved from <https://teens.drugabuse.gov/drug-facts/drug-overdoses-youth>

^{10,14,18} U.S. Department of Justice and Drug Enforcement Administration. (2015). *Drugs of abuse: A DEA resource guide*. Retrieved from https://www.dea.gov/pr/multimedia-library/publications/drug_of_abuse.pdf

¹³ National Institute on Drug Abuse. (2007). Drugs on the street (Module 5). *Brain Power: Grades 6-9*. Retrieved from <http://www.drugabuse.gov/publications/brain-power/grades-6-9/drugs-street-module-5>

¹⁷ Center for Behavioral Health Statistics and Quality. (2016). *2015 National Survey on Drug Use and Health: Detailed tables*. Retrieved from <http://www.samhsa.gov/data/sites/default/files/NSDUH-DeTabs-2015/NSDUH-DeTabs-2015/NSDUH-DeTabs-2015.htm>

¹⁹ National Institute on Drug Abuse. (n.d.). Heroin (smack, junk) facts. *Easy-to-Read Drug Facts*. Retrieved from <https://easyread.drugabuse.gov/content/heroin-smack-junk-facts>

MORE INFORMATION

SAMHSA

Substance Abuse and Mental Health
Services Administration

FOR MORE INFORMATION OR FOR RESOURCES USED IN THIS "TIPS for TEENS,"
visit store.samhsa.gov or call 1-877-SAMHSA-7 (1-877-726-4727) (English and Español).
PEP NO. 18-02 REVISED 2018

SAMHSA complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.
SAMHSA cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo.