

THE Clinical Advisor

A FORUM FOR NURSE PRACTITIONERS

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HOW TO SPOT AND TREAT METH ABUSERS

Homemade meth labs tend to explode, inflicting serious burns, as shown here.

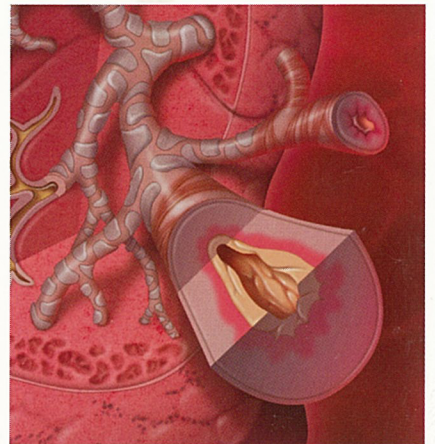


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The crystal meth users in your practice

It's not just the rural poor who abuse this dangerous drug. Meth has spread into mainstream society. Here's how to spot and treat patients at risk.

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Glass, ice, crank, crystal, Tina, devil's dandruff, and methlies quick are just a few of the colorful monikers given to methamphetamine, or "meth," a colorless crystalline solid or powder that dissolves easily in water or alcohol and is one of the most addictive and dangerous drugs available. It is also one of the most popular. In the past decade, use of this potent central nervous system stimulant has spread to many parts of the United States, especially rural areas.

Surveys have shown that more than 12 million Americans have tried meth at least once and that some 1.5 million people use it on a regular basis. Athletes and students often start using meth to boost their physical and mental stamina. Waitresses and long-distance truckers use it to rev themselves up for work, and young women often begin using meth to lose weight. Some men use meth recreationally to heighten sexual performance and sensation. Most meth users are between the ages of 18 and 34.

When people first try meth, they feel euphoric — supercharged with energy and confidence, needing neither food nor sleep. While these initial effects are highly pleasurable, meth-induced euphoria can lead to impulsive and risky behaviors that include violence and unsafe sex. But when users "crash" after a high, they feel drained and depressed.

In an attempt to avoid negative mood-states, users are likely to enter into a vicious cycle, turning to the drug again and again. Recently, *The Clinical Advisor* spoke with substance-abuse expert Richard A. Rawson, PhD, associate director of