

The Difference is Research

Ketamine

What is Ketamine?

Ketamine (Ketamine hydrochloride) is a dissociative general anaesthetic. Doctors and vets use this drug because it produces analgesia (pain relief) and amnesia. It is considered a safer alternative to general anaesthetic for some people (e.g. older people and children) because it doesn't slow down a person's breathing or heart rate.

Ketamine is usually manufactured as a liquid, which is then evaporated to form a powder that can be snorted or dissolved in other liquids and swallowed. It is usually sold in 'bumps' (a small amount of powder) or grams. Ketamine is usually snorted (a bump is snorted through a small glass nasal inhaler called a 'bumper') although it can also be swallowed, smoked or injected.





How many people use ketamine?

The **2013 National Drug Strategy Household Survey** found that 1.7% of Australians aged 14 and over have ever tried ketamine, while 0.3% used it in the year preceding the survey.

What are the effects?

Ketamine produces a feeling of detachment from one's body and the external world. It does this by reducing or blocking signals to the conscious mind from other parts of the brain, typically the senses.

The short-term effects of ketamine include:

• a sense of euphoria and well-being • hallucinations

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- increased libido
- drowsiness
- slurred speech
- dissociation

- Handomations
- a sense of floating
- amnesia
- · nausea and vomiting

Used in small doses, it produces feelings of dissociation, making the user feel separated or detached from their body and/or environment. It also has hallucinogenic effects and can impact on the senses and on a person's perception of reality.

At higher doses, ketamine users can experience an 'emergent state' also called a "K-hole", which is a trip-like experience that varies from person to person.

The effects of the emergent state can begin as soon as 5-10 minutes after first taking the drug and can begin with the user being unable to move followed by a total disconnect from physical sensations as hallucinations start to manifest. Risks of this dissociative state include: hallucinations, disorientation, sense of invincibility, inability to communicate with others and a limited awareness of surrounding environment.

What are the risks?

The effects of ketamine can be unpleasant or even dangerous when used in the wrong situations or by people with pre-existing conditions or susceptibilities.

The risks of using ketamine include:

- Increased heart rate and blood pressure this is extremely dangerous for people who have pre-existing problems such as hypertension (high blood pressure), severe heart disease, or who are at risk of a stroke. This risk is even greater when ketamine is used alongside drugs that have stimulant effects (e.g. ecstasy or methamphetamine).
- Users are also more likely to experience **injury**. Injuries can occur due to ketamine's anaesthetic properties. People often injure themselves but do not realise it until much later
- Distress, anxiety, panic attacks
- Paranoia (usually among regular users)
- Nausea, vomiting
- Psychotic symptoms can be triggered in some people (e.g. those with schizophrenia)
- Overdose, especially if the user is also using other depressant drugs (e.g. alcohol), tranquillisers/ benzodiazepines (e.g. Valium), some types of painkillers (e.g. opioids including morphine or OxyContin) or heroin.

Ketamine use over the longer term can also lead to:

- Problems with memory, attention and decision-making abilities. These may remain even after the person stops using ketamine
- More fragile mental health
- Ulcerative cystitis symptoms include frequent and painful urination, cramps and urinary urgency
- Incontinence Some people have also developed kidney problems
- 'K-cramps' if the person uses a lot over a long period of time, they could experience **intense abdominal** pains known as K-cramps. These usually stop when the person stops using

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