

AKA: 2C-B, 2C-I, 2C-E, 2C-C, 2C-D, 2C-P, 2C-T-7 (+MORE), TRIPSTASY, BEES, TUCY, NEXUS, BROMO.

A vibrant illustration of a man with dark skin, wearing a bright orange tank top, light blue pants, and purple sneakers. He is wearing yellow sunglasses and has a joyful expression, with his right arm raised and holding a black musical note. The background is a solid green color, and it is scattered with various musical notes in black and yellow. The large, bold, yellow text '2C-X' is superimposed over the lower half of the illustration.

2C-X

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In an unregulated market it's impossible to know the purity or dose of any substance, educate yourself and practice harm reduction to reduce this risk.

For more information visit:

www.hi-ground.org

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2C-x is the general name for the family of psychedelic phenethylamines originally studied by Alexander Shulgin in the 1970s. Shulgin first synthesized most of the 2C-x chemicals and coined the term 2C, being an acronym for the 2 carbon atoms between the benzene ring and the amino group. The 2C-x chemicals vary in duration and effect from being totally inactive to fully psychedelic. Some of the most popular members of this group include 2C-B, 2C-E, and 2C-I. 2CB is a psychedelic stimulant and considered both a hallucinogen (similar to LSD) and a mild entactogen (similar to MDMA). 2C-B and the other 2Cs are usually sold as a white powder in baggies or gel caps, but are sometimes pressed into tablets resembling ecstasy tablets.

Compound: 4-bromo-2,5-dimethoxyphenethylamine (2C-B), 2,5-dimethoxy-4-iodophenethylamine (2C-I), 2,5-dimethoxy-4-ethylphenethylamine (2C-E) + More

ADMINISTRATION

Most commonly swallowed but can also be snorted or shelved/plugged

DURATION OF EFFECTS

Duration can vary greatly between members of the 2C-x family and by chosen route of administration

2C-B (SWALLOWED)

TOTAL	5-7HRS
ONSET	20-40MINS
PEAK	60-90MINS
COME DOWN	2-3.5HRS
AFTER EFFECTS	2-4HRS

2C-I & 2C-E (SWALLOWED)

TOTAL	6-10HRS
ONSET	15-45MINS
PEAK	3.5HRS
COME DOWN	2-3HRS
AFTER EFFECTS	6-24HRS

EFFECTS

2C-x substances like 2C-B, 2C-E, and 2C-I all have varying psychedelic and entactogenic effects and durations.

MOST COMMON EFFECTS

Strong visual hallucinations, Kaleidoscopic colours, Powerful rushing of sensations, Auditory hallucinations or buzzing sounds, Radical shift in perspective, Profound life changing spiritual experiences, Increased heart rate and blood pressure, Exacerbate existing mental illness, Distorted perception of time, Dry mouth, Jaw clenching and teeth grinding, Pupil dilation, Decreased appetite, Euphoria, Increased empathy.

LESS COMMON EFFECTS

Slight stomach discomfort, Difficulty integrating experiences, Lethargy (feeling heavy), Unusual body sensations (chills, goosebumps, tingling), Increased awareness and appreciation of music, Feeling of oneness with the universe and all beings within it, Insomnia, Nausea/vomiting, Confusion

RARE EFFECTS

Psychosis or psychotic episode, Paranoia, fear and panic, Anxiety, Overwhelming fear, Temporary inability to communicate, Reduced connection to ego (ego death)

POSSIBLE LONG-TERM EFFECTS

Psychedelic drugs may accelerate the onset of schizophrenia and other mental health issues if you are genetically predisposed.

DRUG TESTS

Roadside Police: Roadside saliva tests do not look for 2C-x but other substances can be detected that might have been cut into your 2C-x (Such as MDMA/amphetamines). It is illegal to drive under the influence of any illicit drugs, including 2C-x and any driver may be subject to a roadside behavioural impairment test. Wait at least 24 hours before driving.



SAFER USING

It is always recommended to start at a low dose and to wait before redosing recreational drugs (start low and go slow).

The strength of a dose of a recreational drug depends on various factors including body weight and metabolism, meaning some people require a smaller dose than others.

The effects of 2C-B can take up to 90 minutes to kick in, so it is important to wait for the full effects to come on before deciding whether to redose.

Be aware of the dose-dependent nature of the effects, e.g. at a lower dose, 2C-B is more entactogenic (so you feel a little more affectionate and warm) and at higher doses, users report strong visual hallucinations.

The following is a rough dosage guide for 2C-B:

LOW DOSE – 5-15 mg
MODERATE DOSE – 5-25 mg
STRONG DOSE – 25-40 mg
HEAVY, POSSIBLE OVERDOSE – 40+ mg

The following is a rough dosage guide for 2C-I:

LOW DOSE - 5 - 10mg
MODERATE DOSE – 10 - 20mg
STRONG DOSE – 20 - 30mg
HEAVY, POSSIBLE OVERDOSE – 30+ mg

The following is a rough dosage guide for 2C-E:

LOW DOSE - 5 - 10mg
MODERATE DOSE – 10 - 15mg
STRONG DOSE – 15 - 30mg
HEAVY, POSSIBLE OVERDOSE – 30+ mg

AKA: AMYL, POPPERS, JUNGLE
JUICE, KIX, RAM, RUSH, THRUSH,
TNT.



ALKYL NITRATES

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Alkyl nitrites are a class of inhalant drugs that produce short-lasting psychoactive effects and strong muscle relaxants. They also dilate the blood vessels of the individual, allowing more blood to pass through and so lowering blood pressure. Alkyl nitrites are also known as poppers, There are multiple types of alkyl nitrites sold as poppers, but the most common are amyl nitrite. Poppers are usually found in the form of a liquid chemical sold in a small bottle that produce a vapour that can be inhaled. It is classed as a depressant. Lasting only around three minutes, poppers are often used during sex (primarily in the LGBTQ+ community) and also on the dance floor at events.

Compound: AMYL NITRITE (ISOAMYL NITRITE, ISOPENTYL NITRITE), ISOBUTYL NITRITE (2-METHYLPROPYL NITRITE), ISOPROPYL NITRITE (2-PROPYL NITRITE), PENTYL NITRITE.

ADMINISTRATION

Poppers are for inhalation only. Fatal if consumed orally – never drink – will result in coma/death. The most common method of use is to hold an open bottle to the nostril and sniff the vapour in.

DURATION OF EFFECTS

TOTAL	1-5MINS
ONSET	0-30SECS
PEAK	30SECS-2MINS
COME DOWN	1-3MINS
AFTER EFFECTS	1-5MINS

DRUG TESTS

Roadside Police: Roadside saliva tests do not look for poppers. It is so rapidly metabolised that it is not able to be tested for. It is illegal to drive under the influence of any illicit drugs, including poppers and any driver may be subject to a roadside behavioural impairment test. Wait at least 24 hours before driving.

MOST COMMON EFFECTS

Light headedness, Warm sensation, Relaxation of smooth muscles, Increased heart rate, Increased libido, Skin sensitivity, Increased body temperature, Impaired/decreased coordination & muscle control, Euphoria, Increased sensual awareness, Excitement, Visual distortions.

LESS COMMON EFFECTS

Dizziness, Nausea, Headache, Blurred vision

RARE EFFECTS

Vomiting, Hypotension, Dyspnea (shortness of breath), Hypoventilation, Syncope (fainting)

LONG-TERM EFFECTS

Effects of long term use of these substances can result in a range of clinical conditions varying from mild allergic reactions to life threatening.

OTHER LONG-TERM EFFECTS

- Skin lesions
- Dermatological problems particularly around the nose, mouth, lips and face, Increased intraocular (eye) pressure (risky for people with underlying glaucoma)
- Methemoglobinemia is a condition with life-threatening potential (a blood disorder which can lead to inadequate oxygen supply to body tissue).



SAFER USING

Use in a safe environment with friends and people you trust – somewhere you feel comfortable.

- Inhale through your nose by holding the open bottle up to one nostril.
- Start with a very small amount to gauge strength and assess your sensitivity.
- Dose is determined by the depth and length of the inhalation.
- It is a good idea to sit down when using and go easy until you get used to the effects
- If it comes into contact with skin, wash the area straight away with water to avoid a chemical burn. Poppers are corrosive.
- The liquid is highly flammable, so avoid smoking or open flames when using poppers.
- Mixing drugs can have unpredictable and possibly dangerous effects. Mixing poppers with other vasodilators can cause an excessive drop in blood pressure and lead to fainting. Examples of other vasodilators include sildenafil (Viagra/Kamagra), vardenafil, and tadalafil.

AKA: K, KET, KETTERS, KITKAT,
SPECIAL K, VITAMIN K



Ketamine

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Supported by: QuiVAA & QuiHN

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Ketamine is a dissociative anaesthetic with psychedelic properties, used for medical, therapeutic and recreational purposes. Ketamine is liquid in its original form but it is commonly sold as a white powder for recreational use.

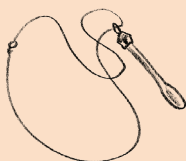
Compound: KETAMINE HYDROCHLORIDE
2-(2-CHLORO-PHENYL)-2-METHYLAMINOCYCLOHEXANONE

ADMINISTRATION

Most commonly intranasal (snorting) but can also be swallowed, intramuscular injected (less commonly intravenous) as well as sublingual.

DURATION OF EFFECTS

	INTRNASAL
TOTAL	1-2HRS
ONSET	5-15MINS
PEAK	20-60MINS
COME DOWN	30-60MINS



HALF LIFE

The felt effects of the drug wear off after approx 2 hours, but it's still active in your system for 3 hours. Remember this if mixing with other drugs.

POSSIBLE LONG-TERM EFFECTS

Risk of psychological dependency, Cognitive impairments including memory problems, Severe degeneration of the bladder and urinary tract including ketamine bladder syndrome.

DRUG TESTS

Roadside Police: Roadside saliva tests do not look for ketamine but other substances can be detected that might have been cut into your ketamine. Wait at least 24 hours before driving.

Drug Checking: Lab-quality testing is recommended for best results, however a Morris reagent can also be used and is the first reagent capable of distinguishing ketamine from other dissociatives.

MOST COMMON EFFECTS

Pleasant body and mental high, Numbness, Loss of coordination and motor skills, Slurred speech, Reduced heart rate and breathing, particularly when combined with central nervous system depressants, Euphoria / meaningful spiritual experiences, Increased feeling of disconnectedness from the world and people in it, A peculiar feeling of loneliness, Sense of calm and serenity, Abstract and disjointed thinking, Dissociation of mind and body, Confusion and disorientation, Distortion, loss of time.

LESS COMMON EFFECTS

Increased energy, Increased heart rate, Loss of consciousness, Increased or decreased blood pressure, Nausea and vomiting, Urinary incontinence, pain during urination, urinary tract infection, passing blood in urine, Anxiety or panic, caused by confusion or dissociation, Visual hallucinations, Paranoia, Shifted perception of reality, Enhanced sense of connectedness with the world and people in it, Change in sensory perception – can be frightening.

RARE EFFECTS

Seizure, Heart Palpitations, Headache, Amnesia, Delirium, Nightmares, Megalomania (feeling like the centre of the universe), Out-of-body experience.

SAFER USING

Taking drugs is never without risk. In an unregulated market it's impossible to know the purity or dose of any drug. Depending on administration and purity, a standard dose of ketamine is anywhere from 20 to 200mg. Because of this huge variation, it is best to:

- Start with a very small amount to test the strength.
- Give it time to feel the effects before redosing, it can quickly become too much.
- Due to its potency, ketamine is commonly used in small doses ('bumps') rather than larger amounts ('lines').
- If injecting- especially IV- only have SMALL amounts as it comes on IMMEDIATELY and you usually k-hole right away.
- Eating within 1½ hours prior to using ketamine can cause nausea & vomiting
- Have a sober friend present
- Be seated, especially with higher doses due to the effects on coordination
- If redosing, wait at least 2 hours
- Ketamine can increase the chance of developing problems with your urinary tract, do not use if you have an infection or sensitive to getting them.

There have been instances of methoxetamine (MXE) being sold as ketamine in Australia. MXE is much more potent and lasts much longer than ketamine.



AKA: MXE, M-KET, KMAX, SPECIAL K, RHINO KET, MEXXY, NOVEL PSYCHOACTIVE SUBSTANCES (NSPS), RESEARCH CHEMICALS (RCS), DESIGNER DRUGS



METHUETHAMINE

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For more information visit:

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Methoxetamine (MXE) belongs to a class of compounds called Arylcyclohexylamines, which typically produce dissociation, anesthesia and hallucinogenic effects. Methoxetamine is chemically and pharmacologically similar to other dissociative substances, such as ketamine and phencyclidine (PCP). Some sources suggest it was initially synthesised by an underground chemist for treatment of chronic pain, but it has been present on the designer drug market since 2010 in the form of a white powder. There is very little information in the scientific literature on the pharmacology, toxicology and safety of this substance.

COMPOUND: METHOXETAMINE

ADMINISTRATION

MXE can be taken intranasal (snorted), oral (sublingual or swallowed) or injected (intramuscularly or IV).

	INTRNASAL
TOTAL	2-5HRS
ONSET	5-30MIN
PEAK	1-2HRS
AFTER EFFECTS	1-2HRS



DRUG TESTS

Roadside Police: Roadside saliva tests do not look for MXE however other substances can be detected that might have been cut into them. It is illegal to drive under the influence of any illicit drugs, including speed and any driver may be subject to a roadside behavioural impairment test. Wait at least 48 hours before driving.

Drug Checking: Lab-quality testing is recommended for best results and is available in Canberra (ACT) and in Brisbane & Gold Coast (QLD).

EFFECTS

MXE is a dissociative anesthetic, so high doses have the potential to cause the loss of a person's ability to move and loss of consciousness. MXE is notably more potent than ketamine and its effects last significantly longer. For this reason, it is important for a person taking them to let someone else know they've taken it or preferably to have a trusted, sober person nearby to assist them if needed (e.g., a trip sitter).

LONGER TERM EFFECTS

The toxicity and long-term health effects of recreational MXE use do not seem to have been studied in any scientific context. Similar to ketamine, there are risks of bladder problems and kidney damage with prolonged use of the substance.

MOST COMMON EFFECTS

Physical effects

Central Nervous System (CNS) depression, Unconsciousness/ Catatonia, Dizziness, Double vision/ Involuntary eye movement, Impaired coordination, Sweating, Muscle relaxation, Insomnia, Body load (tactile sensations in body), Nausea, Loss of balance and poor coordination/ unsteadiness on your feet, Slurred speech.

Psychological effects

Feelings of stimulation, Mild euphoria, Hallucinogenic effects, Dissociation, Anti depressant effects, Feeling of floating, Time dilation, Connection with music, Loss of inhibition, Cravings to re-dose, Disorientation, Mental confusion, Agitation, Amnesia, Delirium, Paranoia, Anxiety

HALF LIFE

The felt effects of the drug wear off after approx 4+ hours, but it's still active in your system for 3-6 hours. Remember this if mixing with other drugs.

SAFER USING & DOSING

Taking drugs is never without risk. In an unregulated market it's difficult to know the purity or dose of any drug.

- Start with a very small amount to test the strength. Give it time to feel the effects before redosing, it can quickly become too much.
- Due to its potency, these substances are commonly used in small doses ('bumps') rather than larger amounts ('lines').
- If injecting- especially IV- only have SMALL amounts as it comes on IMMEDIATELY and you usually k-hole right away.
- Eating within 1½ hours prior to using ketamine can cause nausea & vomiting
- Have a sober friend present, you may need a trip sitter to assist you!
- Be seated, especially with higher doses due to the effects on coordination
- If redosing, wait at least 2 hours
- Mixing MXE with opioids, benzos, GHB, GBL or alcohol has the risk of causing ataxia, sedation, vomiting and unconsciousness. Place a person in the recovery position to prevent vomit aspiration if they become unconscious.
- The dosage range for methoxetamine is lower than ketamine due to its higher potency.

Intranasal dose is approx 10-20mg (light) to 35-60mg (strong) and the effects would be felt between 10-30 minutes after ingestion.

Oral dose is approx 25mg to 45mg (common)

Intramuscular dose range is between 10mg to 50mg.

**AKA: BENZIMIDAZOLE
OPIOIDS, PROTONITAZENE,
ETONITAZENE, ISONITAZENE,
METONITAZENE, ETODESINITAZENE
(ETAZENE), CLONITAZENE,
N-DESETHYLETONITAZENE + MANY
MORE!**

NITAZENES

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and CAHMA.

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to know the purity or dose of any
substance, educate yourself and practice
harm reduction to reduce this risks.

For more information visit:

www.hi-ground.org

[https://www.cahma.org.au/article/safer-
using-nitazenes/](https://www.cahma.org.au/article/safer-using-nitazenes/)

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Nitazenes, also known as benzimidazole opioids, are a highly potent class of synthetic opioids which vary widely in potency. Some nitazenes, including protonitazene and etonitazene, are more potent than fentanyl and thus pose a very high risk of overdose. Nitazenes were first synthesised in the late 1950s but never reached the market as medicines. Since the early 2010s, synthetic opioids have flooded the drug market in the United States and have significantly contributed to opioid-related overdoses and deaths. Beginning in 2019, nitazenes have been detected in forensic laboratories across the United States, Canada, Europe and Australia.

ADMINISTRATION

Most commonly swallowed but can also be shelved (rectal), snorted or injected (IV or IM liquids).

DURATION OF EFFECTS

Duration and Half Life is dependent on the type of nitazene and differentiate between onset, peak and total durations. Research the specific one you are taking. The duration of effects may also differ depending on the routes of administration.

Even though the apparent effects of the drug may have worn off, nitazenes can stay active for a long period of time (up to a couple of days) depending on what type. Do your research and remember this if taking other drugs!

EFFECTS

The effects of nitazenes are similar to other opioids, but they can be anywhere from 2 to 1000 times more potent than morphine. The effects of nitazenes vary from person to person but can include

MOST COMMON EFFECTS

Pain Relief, Euphoria, Feeling of wellbeing, Contentment, Decreased heart rate, Decreased blood pressure, Warm sensations in extremities, Lethargy, Drowsiness, Constipation, Relief of anxiety, A 'rush' of warmth, Confusion, Constricted ("pinpoint") pupil, Slowed breathing

LESS COMMON EFFECTS

Unconsciousness, Vomiting, Nausea, Sensitivity to light, Respiratory depression / failure, Muscle spasms, Death

RARE COMMON EFFECTS

Risk of coma, Bluish fingers, toes, lips, Brain damage due to respiratory depression

POSSIBLE LONG-TERM EFFECTS

These effects are possible with extended use:
Poor dental health with gum swelling and damaged teeth, Severe constipation, Malnutrition, Dependency and risk of acute withdrawal symptoms, Weakened immune system, Insomnia

DRUG CHECKING

Even with specialised chemistry equipment, detecting nitazenes in drug samples can be difficult since they are often present in extremely small amounts (e.g., a few milligrams). Unfortunately, fentanyl test strips are unable to detect nitazenes.

Nitazene overdoses in Australia have been linked to counterfeit pharmaceutical pills such as Xanax, Kalma pills and Oxycodone. They have also shown up in samples of heroin and ketamine.

SAFER DOSING

The active dose depends on the exact nitazene being ingested which is extremely difficult to verify. The relative potency of nitazenes compared to morphine is roughly as follows: Etonitazene > isonitazene > protonitazene > metonitazene > etodesnitazene (etazene) > clonitazene > morphine. The strength of the dose also depends on the route of administration, with intravenous, intramuscular, and subcutaneous injection being more potent than oral administration.

SAFER USING

- Use around friends/people you trust and in a safe environment - somewhere you feel comfortable
- Wait at least 30mins after eating before taking.
- Each nitazene is different, and strength can vary greatly so start with a small dose.
- When prescribed by a doctor, medications come with dosage instructions.
- **Carry naloxone.** Depending on your state you can either buy naloxone over the counter in a pharmacy with/without a prescription. QuHNS's NSP service also offer free naloxone training and then you receive a free take home one with you.
- If you're taking the drug orally, use as per recommended packaging if available, otherwise start with a very small amount.

SAFER INJECTING

Use around friends/people you trust and in a safe environment - somewhere you feel comfortable

- Injecting nitazenes may pose a greater risk of overdose as the lethal dose may be many times smaller than when ingested orally
- Avoid Blood Borne Viruses by using new & sterile syringes & equipment.
- Use sterile water to mix up.
- Wash your hands thoroughly before and after, you can also use an alcohol swab to clean your fingertips.
- Alcohol wipes can reduce the risk of skin infections if they are used correctly. For maximum effect, swab once, in one direction on the injection site, and leave to dry naturally.
- Dispose of syringes & equipment responsibly in a yellow disposal bin, all NSPs have bins available.

AKA: SPEED, ADDS, ADDERALL,
DEXAMPHETAMINE (DEXIS),
FAST, GOEY, LOUIS, VYVANSE,
OX BLOOD, PEP, UPPERS, WHIP,
WHIZZ

AKA: METH, CRYSTAL, FROSTY, ICE,
ROCK, SHABU, SHARD, T, TINA



AMPHETAMINES METHAMPHETAMINES

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Amphetamines are stimulant drugs, which means they act to speed up heart rate and breathing. Methamphetamine stimulates the release of dopamine and noradrenaline from nerve cells in the brain. Some types of amphetamines are legally prescribed by doctors to treat conditions such as attention deficit hyperactivity disorder (ADHD), narcolepsy and Parkinson's such as. Other types of amphetamines such as speed are produced and sold illegally.

The more potent form is crystal methamphetamine (ice), speed now mostly contains methamphetamine of varying purity. Chemically, methamphetamine and amphetamine have very similar structures. There is one small structural difference that allows meth to enter your brain more quickly than an amphetamine can, which is why the onset of the high is faster and more intense.

ADMINISTRATION

It can be smoked, swallowed, snorted, injected, or plugged.

DURATION OF EFFECTS

TOTAL	4-8HRS
ONSET	0-10MIN
PEAK	1-5HRS
COME DOWN	4-12HRS
AFTER EFFECTS	2-24HRS



*Remember depending on the route of administration duration of effects differ, also the effects of meth are stronger and last longer than speed.

HALF LIFE

Even though the apparent effects of the drug wear off after 6+ hours, the drug is still active in your system for up to 12-14 hours after you have taken it. Try to remember this if using other substances or redosing.

MOST COMMON EFFECTS

Effects vary person to person - Increased energy
Insomnia/restlessness, Dilated pupils, Increased heart rate/blood pressure, Increased body temperature, Decreased appetite, Tightening jaw muscles, Grinding/clenching teeth, Stomach cramps, Dehydration, Shortness of breath, Euphoria, Increased confidence, Increased focus.

LESS COMMON EFFECTS

Dizziness, Headache, Compulsive picking or scratching skin, Nausea and vomiting, Irritability/Aggression, Diarrhoea, Irregular heartbeat, Tooth decay and gum disease, Anxiety/Panic attacks, Paranoia Mania/Excited delirium, Hyperactivity.

RARE EFFECTS

Risk of seizure, stroke, heart attack or coma, Suicidal thoughts, especially when coming down, Psychosis
Depression, Collapse.

DRUG CHECKING

Roadside Police: Roadside saliva tests do look for meth/amphetamines. It is illegal to drive under the influence of any illicit drugs, wait at least 48-72 hours before driving.

Drug Checking: Lab-quality testing is recommended for best results however DIY reagent testing is an option. Marquis and Mandelin give a reaction with amphetamines whereas Mecke and Robadope do not give a reaction which can be used to cross-reference results. Mandolin, Marquis, Mecke and other reagents produce reactions with Methamphetamine.



SAFER USING

- Start with a very small amount to check the strength and assess your sensitivity.
- For many irregular users the effects of amphetamines and methamphetamines can last a lot longer than people who use them regularly.
- Remember to eat well then wait 20-30 minutes before using.
- Be aware of overheating and try to cool down & chill out regularly.
- Remember to keep your fluids up but don't drink too much - 1 cup of water (250ml) p/h when resting & up to 500ml p/h when dancing or active.
- After 2-3 hours remember to keep your electrolytes up
- If you're finding it hard to eat try a smoothie or a soup!
- Sleep! Or lay down and cover your eyes during a 24-hour period. Many of the negative effects of ice are caused by sleep deprivation.
- Factor in and plan recovery time before you need to do another activity.
- See our website for all the safer using tips regarding ingesting, snorting, shelving and injecting.
- Depending on purity, amphetamine doses will vary. Prescription based amphetamines, like Adderall, Dexies and Vyvanse contain their own prescribed dosage information.
- Standard dose ranges for meth and amphetamines are somewhere between 5mg (low), 10-30mg (moderate-strong), and 30-50mg (high dose).