NPS in Scotland – Health Impacts
What do we know?

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A national resource of expertise on drug issues
NPS in Scotland – Health Impacts

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Typical A&E Presentation

• Self-presentation

• Brought by friends / family / concerned others/ the police

• Concerned by symptoms and/or extraordinary behaviour or ‘incident’.
Reported symptoms on presentation stimulant/dissociative/empathogen overdose

• Overstimulation
• Confusion – paranoia, anxiety (sometimes provoked by physical symptom)
• Hallucination - possibly visual and/or auditory
• Cardiac arrhythmia
• Control of body temperature
Acute Settings

Overdose –

- Treated symptomatically on advice of the CMO
- Reassurance, benzodiazepines, ice
- Many need no medical treatment
- Admission to hospital is very unusual
Mental health presentation

• Possibly after prolonged or heavy use of either stimulants etc. or synthetic cannabinoids
• Self-presentation / brought by friends / family / concerned others/ the police
• Either patients rests and eats and recovers or develop mental health issues
• Difficult to prove causal link. Complex issue
But remember...

No systematic data collection on -

• people presenting to A&E who have used drugs / are UTI (note: motivation for patients not to disclose accurate info)

• people presenting to A&E with drug-related problems

No systematic recording of these issues

We are dependent on the personal and professional interest of a few key staff in Scotland... or on a major incident.
Hidden populations of concern?
Binge drinkers

People taking ‘any white powder’ stimulant and using it to assist their alcohol consumption.

“It’s great – you can drink as much as you like and keep going”
Hidden populations of concern?
Younger polydrug users

- Not presenting at drug services but perhaps very obvious in others
- Involved in polydrug use – alcohol, benzodiazepines, stimulants / cannabis
- Are we identifying and supporting this group?
- What will become of them?
Hidden populations of concern? Problem drug users

• Reports of heroin users injecting stimulants
• Reports of people using needle exchanges with unusual injecting wounds (injecting stimulants?)
• Reports of people in recovery using legal highs ‘because they are not drugs’
Health impacts of long term use

• Unknown

• Possibly similar to the drugs they imitate

• Should not be speculated on imagined / exaggerated as a prevention measure
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