

# Cocaine and crack

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Cocaine and crack are drugs that stimulate the central nervous system. Cocaine hydrochloride i.e. cocaine salt is derived from the coca leaf, found mainly in Peru and Bolivia. Cocaine became known in the mid 19th century when it was marketed as a miracle cure for various diseases, real or imaginary. Later it was used as a local anaesthetic. When the poisonings and mental health problems caused by cocaine as well as its addictive qualities became public, its popularity quickly subsided. Cocaine became popular again in the 1960's when, due to its high price, it was considered a luxury drug.

On the streets cocaine is sold as white, translucent powder. It can be snorted up the nose, injected and taken orally e.g. mixed with alcohol. Through a chemical process, pure cocaine alkaloid ("freebase") can be extracted from cocaine. Freebase is more effective and can be smoked in cigarettes or water pipe. The result of a simpler chemical process is a beige substance called crack. It is used in the same way as freebase.

The effects of cocaine, like those of other intoxicants, depend on the user's state of mind and the company the user is in. Whether cocaine is used on its own or together with other intoxicants and whether the user is a novice or an experienced user also have an influence on the effects of the drug. The immediate rush caused by cocaine wears off quickly, and this is why some users take several doses consecutively ("run"). The user feels euphoric, energetic, talkative and alert. The opposite effects are also possible: the user becomes thoughtful, nervous or timid. The physical effects include faster breathing, elevated heart rate, blood pressure and body temperature. Appetite and sleep may be suppressed. With larger doses the effects are more intensive and the user may become unpredictable and aggressive. Cocaine poisoning is similar to amphetamine poisoning. Its symptoms include trembling, dizziness, twitching of the muscles and paranoia. Cocaine can cause death from convulsions or heart or respiratory failure.

When cocaine is used regularly, its effects change. The user becomes restless, tense and has trouble sleeping. The delusions and hallucinations caused by cocaine are similar to those of amphetamine psychosis and paranoid schizophrenia. The psychotic symptoms usually disappear rather quickly after the user has stopped taking cocaine. Continuous snorting can cause the nose to block, the nostrils to chap and the nasal septum to become perforated. Smoking cocaine may severely irritate the respiratory tracts. When cocaine is injected, dirty needles and unhygienic conditions may damage the body and cause infections. A person using shared needles is at risk of contracting viral infections, like AIDS and hepatitis B or C.

Cocaine use leads to a strong psychological dependence. High-scale users may suffer from severe depression after they have stopped using cocaine. Whether cocaine is physically addictive is still debated. However, when the user stops taking cocaine after several consecutive doses, he "crashes": the symptoms can be referred to as withdrawal symptoms and include restlessness, depression, disturbed sleep and weakness. The body's tolerance to cocaine does not seem to increase. On the other hand, some of the users do take increasing doses the longer they use cocaine.

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