



BREAKING THE ICE IN OUR COMMUNITY

FACT SHEET

Withdrawal from crystalline methamphetamine (ice)

What is withdrawal?

Withdrawal or detoxification (also called detox) is the process of cutting back, or cutting out, the use of a drug. Withdrawal symptoms can range from mild to severe, and differ depending on how long someone has been using, their age, their physical and psychological state and the method of withdrawal. It is important to remember that withdrawal is the first step in a longer journey and that additional, ongoing treatment and support options should be considered as part of the treatment planning.

Dependence

Dependence can be physical, psychological, or both. When a substance is central to a person's life and they have trouble cutting down their use and/or experience symptoms of withdrawal when trying to cut down, they are said to be dependent on that substance.

What can I expect from withdrawal?

Your body will need to adjust to working without methamphetamine in your system, so you may experience a range of symptoms, some minor, some serious, when withdrawing. It can also affect your mental health.

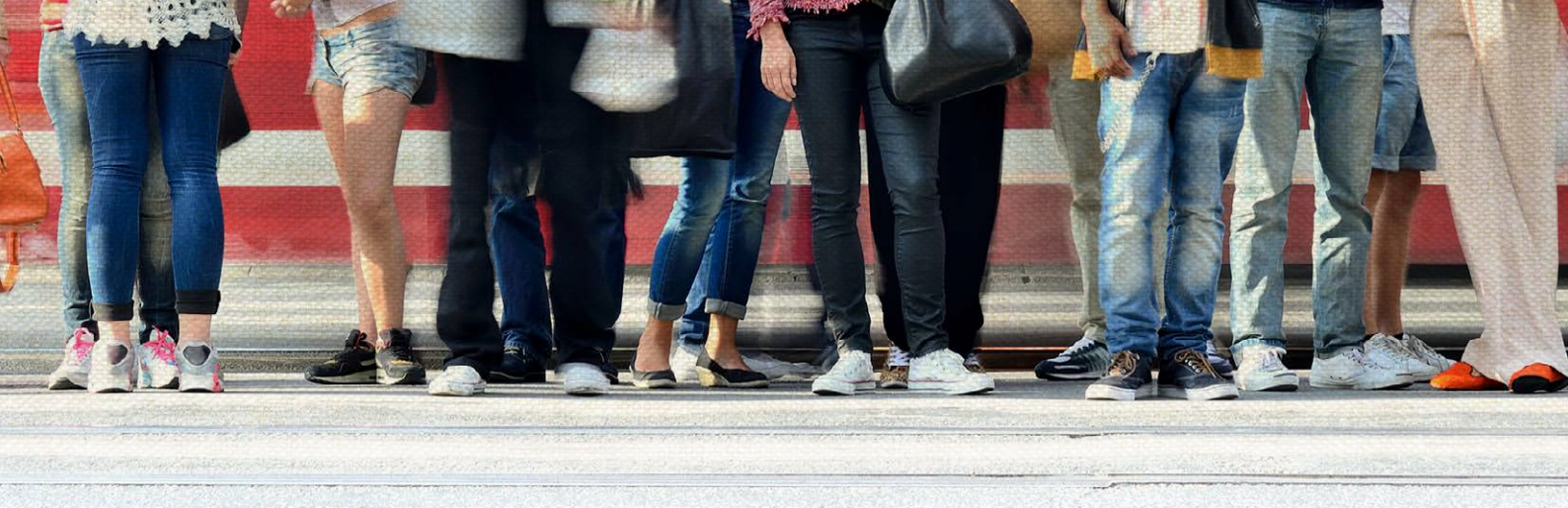
Methamphetamine withdrawal symptoms

Compared to other drugs, methamphetamine has a longer withdrawal. After use a person usually experiences a 'crash period', which can last for about 1 to 3 days, and people may experience extreme fatigue and lethargy (a 'hangover' effect) during this period.

Giving up methamphetamine after using it for a long time can be challenging because the body has to get used to functioning without it. The 'crash' withdrawal phase for crystalline methamphetamine lasts for around 1 to 3 days, while the 'acute' withdrawal phase lasts for around 7 to 10 days. Symptoms can include:

- Cravings for crystalline methamphetamine
- Changes in appetite
- Confusion, irritability and mood swings
- Aches and pains
- Exhaustion and fatigue
- Restless sleep and nightmares
- Anxiety, depression and paranoia

Methamphetamine users who have completed withdrawal may experience ongoing sleep or mood problems and cravings for several months after stopping. These symptoms eventually go away.



Cravings

When someone is dependent on methamphetamine, their brain and body get used to functioning on the drug. If they stop using the drug they may get intense cravings (an overwhelming desire to use the drug). Cravings can come and go and can be triggered by certain situations or circumstances. They are sometimes weak, and sometimes quite strong. People need to learn to manage cravings as they can still occur many years after you have stopped using the drug. Managing cravings involves learning distraction and relaxation techniques such as reading, watching a movie, meditating or exercising. Cravings do eventually resolve, however.

Sometimes medication is used to treat withdrawal symptoms. Your doctor or treatment service can give you more information about what is available to help you.

Is withdrawal safe?

Methamphetamine withdrawal is relatively safe and most often occurs at home. However, if a person is using other drugs as well as methamphetamine, has psychotic symptoms, severe depression or other health issues that increase the risk of complications, then it may be safest for them to withdraw under medical supervision. If someone is considering withdrawal, they should discuss this with their doctor or a drug treatment service.

How long will it take to go through withdrawal?

This can depend on many factors, including how long the person has been using crystalline methamphetamine, whether other drugs have been used, the person's general health and the setting where the withdrawal takes place.

Generally, it will last from a few days to a few weeks, but some symptoms, such as cravings, sleep problems and mood swings, can continue much longer; in some cases they can last several months.

Where can I go for withdrawal?

It is important to be in a safe and supportive environment if going through withdrawal. Speak to a doctor, health practitioner or a drug and alcohol service for advice on which setting and service would be best for your particular needs. They will probably suggest one of the following:

- Withdrawal at home is usually provided by a team including your doctor, a nurse and a support person such as a friend or family member. This may be a good choice if the withdrawal is not likely to be complicated.
- Outpatient withdrawal may be the best choice if you don't need to be admitted to a residential service. It will involve individual consultations with a health professional over a short period of time, along with ongoing counselling and support.
- Residential withdrawal will involve 5 to 10 days in a residential withdrawal unit or hospital, with staff to help you 24 hours a day. They can help during withdrawal, and afterwards, to prevent relapse. Residential withdrawal may also take place as part of a longer-term rehabilitation program.

Some residential units do not allow any contact with partners, friends or family for a period of time. This helps a person to focus on their treatment, rather than worrying about what is happening at home. It also keeps them out of contact with people who use drugs, as this contact can cause cravings.

Preparing for and during withdrawal

To give yourself the best chance of a successful withdrawal, it is a good idea to take some time to prepare.

Doing some preparation before starting withdrawal will give you the best chance of success.

Talk with a doctor, or an alcohol and other drugs treatment service, and make sure you have a support person, and a supportive environment, during the withdrawal process. The NSW Alcohol and Drug Information Service is available 24 hours a day on (Sydney metropolitan) 02 9361 8000 or (regional and rural NSW) 1800 422 599.

Write down a personal list of reasons for going through withdrawal. List the advantages and disadvantages of using and giving up the drug. This can help to keep you motivated when the withdrawal seems too hard and you want to give up.

Plan for what to do if you end up using drugs during withdrawal. This does happen sometimes and is a critical stage in treatment. Some people may choose to give up treatment and go back to using the drug, while others think of it as a setback and continue with the withdrawal. It is important to talk about why it happened, what worked well, what did not, and what could be done differently next time.

Eat a healthy diet, even though you might crave junk food. This can reduce mood swings that are often part of withdrawal.

Get plenty of sleep. Regular use of methamphetamine can reduce your energy levels, and you may feel tired for a long time after withdrawal.

Stay hydrated by drinking between 1 and 2 litres of water per day, but not more than 3 litres.

Consider a multivitamin supplement if you are feeling unwell and can't eat much.

Keep busy so you don't have time to dwell on negative feelings. Remember you may not be able to concentrate for long periods, and your memory may not be working very well. Easy activities like watching TV or movies, walks, reading magazines and short trips may be good activities to try.

Learn some basic stress management techniques, such as relaxation, exercise, massage or just talking with others about how you are feeling to help you to overcome anxiety during this time.

How can I help someone through withdrawal?

If you are supporting a friend or family member through the withdrawal process, it's a good idea to do some preparation beforehand.

Understand the process

Talk to the health practitioner supervising the withdrawal to make sure you are clear about your role and understand what you will need to do to help the person through their withdrawal.

Get support for yourself

Have support organised for yourself, and make sure there is someone you can talk to if things get difficult.

The NSW Alcohol and Drug Information Service can direct you to counselling, additional information and referral to services. This service can put you in touch with specialist family help lines and support groups. These are often run by friends and family members of people who use drugs, so they will understand your situation.

Be there during the tough times

Try to stay positive for your friend or family member if they begin to question why they are going through the process. Challenging any illogical thoughts during withdrawal is a very important function of a support person.

Encourage them to read through their personal list of reasons for going through withdrawal if they begin to have unpleasant symptoms, or if they are questioning whether withdrawal was really a good idea.

Help them to deal with their relapse if they begin to use the drug again during withdrawal. It can be useful to make a plan for how they will deal with relapse before they begin withdrawal.

Know the rules of the service. If your friend or family member is preparing for residential withdrawal at a hospital or withdrawal unit, make sure you find out whether there are restrictions on visiting or contacting them, and what items may be brought into the unit.

Further information

Help and support lines (24 hours, 7 days a week)

Alcohol and Drug Information Service

Sydney metropolitan: 02 9361 8000
Regional and rural NSW: 1800 422 599

Stimulant Treatment Line

Sydney metropolitan: 02 9361 8088
Regional and rural NSW free call*: 1800 10 11 88

Please note free call numbers are not free from mobile phones, except Telstra mobiles

Family Drug Support – www.fds.org.au

Australia-wide: 1300 368 186

Other help and support services and resources

If there are concerns about the health or emotional safety of children within the home, call the **Child Protection Helpline on 132 111**.

Where children are old enough to recognise they would like assistance or to talk to someone the **Kids Helpline – 1800 55 1800** is Australia's only free, private and confidential phone counselling service specifically for young people aged between 5 and 25.

Aboriginal Health & Medical Research Council of NSW

02 9212 4777

Contact AH&MRC for details of your local Aboriginal Community Controlled Health or Residential Rehabilitation Service

NSW Users and AIDS Association – www.nuaa.org.au

Sydney metropolitan: 02 8354 7343
Regional and rural NSW: 1800 644 413

ACON – www.acon.org.au

ACON's Substance Support Service offers specialist LGBTI-friendly counselling for stimulant and crystalline methamphetamine users.

NSW Intake Line: 02 9206 2000

Breaking the Ice (Australian Drug Foundation) website www.adf.org.au/breakingtheice

A joint project by the Australian Drug Foundation and NSW Health aiming to reduce harms from crystalline methamphetamine (ice) in NSW.

Your Room website – yourroom.com.au

Website providing access to confidential counselling, information and resources for people in NSW, including a range of Indigenous resources.

Stimulant Health Check

An LGBTIQ-friendly resource with information about discussing your stimulant use in regular GP health check-ups.

ACON: 02 9206 2000

Links to further help and support

www.health.nsw.gov.au/crystallinemethamphetamine/Pages/treatment.aspx
www.druginfo.adf.org.au/contact-numbers/help-and-support

Statistics

NSW statistics on crystalline methamphetamine

www.healthstats.nsw.gov.au/Indicator/beh_illimethed/beh_illimethed

Australian statistics on crystalline methamphetamine

www.druginfo.adf.org.au/topics/quick-statistics#amphetamines

Online resources

Crystalline methamphetamine

Background paper – NSW data (NSW Health)
www.health.nsw.gov.au/crystallinemethamphetamine/Publications/background-paper.pdf

Crystalline methamphetamine

Key messages (NSW Health)
www.health.nsw.gov.au/crystallinemethamphetamine/Publications/key-messages.pdf

Crystalline methamphetamine (ice) (NSW Health)

www.health.nsw.gov.au/crystallinemethamphetamine/Documents/crystalline-methamphetamine.pdf

Ice: family and friends support guide

www.druginfo.adf.org.au/infographics/ice-family-friends-support-guide


For information on treatment

see www.adf.org.au/cdat-breaking-the-ice-resources


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