

Cocaine and crack

Coca paste - basuco, cocaine, C, charlie, coke, dust, Gianlucca, gold dust, Percy, lady, snow, toot, white...

...crack - base, freebase, gravel, rock, stones, wash.

What is cocaine?

Cocaine is made from the leaves of the coca shrub, which grows in the mountainous regions of South America in countries such as Bolivia, Colombia and Peru.



Cocaine is used in a number of different forms. South American Indians who live in the Andes mountains where the shrub grows will chew or suck a wad of leaves pushed into the cheeks.

A popular South American tea called mate de coca is also made from the leaves of the coca shrub.

Coca paste (also known as **basuco**) is a smokeable form made from the leaves and mainly used in countries where the plant grows.

In Britain and America the most common form of cocaine is as a white crystalline powder. Most users sniff it up the nose, often through a rolled banknote or straw, but it also sometimes made into a solution and injected.

Crack

Crack is a smokeable form of cocaine made into small lumps or 'rocks'. It is usually smoked in a pipe, glass tube, plastic bottle or in foil. It gets its name from the cracking sound it makes when being burnt. It can also be prepared for injection.



Crack and related equipment

Freebasing is the manufacturing process whereby cocaine hydrochloride powder is dissolved in water and heated with a chemical reagent such as baking soda or ammonia to 'free' the cocaine alkaloid 'base' from the salt. Without salt the drug can combust better and provide more cocaine-containing smoke.

The term 'freebase' covers not only this process, but the action of smoking cocaine that has undergone this process as well as all varieties of smokeable cocaine whatever the production method.

Drug users in America (and Britain) have been smoking and freebasing cocaine for many years. Cocaine and crack are strong, but short acting, stimulant drugs. Crack in particular has strong but short lived effects.

Price

Cocaine is to some an expensive drug and closely associated with the rich lifestyle enjoyed by rock and film stars. This is largely true, though things appear to be changing. The price of cocaine has seen a drop, particularly in the South East and London, where a gram that cost 70 seven years ago, can now be bought for 40. There also appears to be more of it

about, with seizures increasing year on year.

Prevalence

Large amounts of cocaine are seized in the UK, but relatively few people present to services for the treatment of cocaine dependency. There may be many reasons for this including the fact that those who can afford to have a cocaine problem can often afford to attend a private clinic.

There appears to be an increase in more general use of the drug. Cocaine use is appearing in more clubs around the dance and party scene alongside ecstasy and other drugs, possibly replacing the use of ecstasy in some cases. Recent surveys show that seven per cent of 20 to 24 year olds have taken cocaine in England and Wales.

Cocaine powder costs between 40 and 80 per gram. In urban areas such as London and Manchester, cocaine tends to sell for 45 a gram or 25 a half gram. A gram of cocaine can make between 10 and 20 lines for snorting, depending on its strength, which can last two people anything from a couple of hours to a whole night, depending on their tolerance, appetite for the drug and its strength. Crack is around 20-25 for a small rock the size of raisin, but a rock may have slivers cut from it which are sold for perhaps 10.

Although the UK crack problem is not as significant as predicted some years ago, crack use is on the increase in certain inner city areas bringing with it reports of problems of dependence, drug-related crime and violence.

Crack, like heroin, still remains a relatively uncommon drug among the general population. General prevalence figures from the British Crime Survey (BCS 2004/05) (PDF) show that crack use is still very rare with only 0.1% of 16-59 year olds reporting having used it. Crack is also the only drug more prevalent among black people, particularly young black men, than whites or other ethnicities. Use of crack, unlike cocaine, is often localised and linked with social exclusion and deprivation in inner city areas. For example, seizures and arrests for crack are greatest in the London area, making up 60 per cent of the UK's seizure figures.

Recent figures also show arrests and seizures are on the increase. Since 1994, for example, the number of seizures for crack for the UK rose from 1,321 to 2,507 in 1999 and 4,260 in 2002.

History

Coca leaf chewing as an aid to work may have been common amongst South American Indians as long ago as 2500BC.

Cocaine was first extracted from the leaves in 1855 and by the 1870s it was a popular stimulant and tonic and used in a range of patent medicines for all sorts of ailments. The famous psychoanalyst, Sigmund Freud, recommended its use for a range of medical and psychological problems, including [alcohol](#) and [morphine](#) addiction. However, he changed his mind after he recommended cocaine to his friend for morphine addiction and the friend died of a cocaine [overdose](#)

Doctors also used cocaine as a local anaesthetic for eye surgery and in dentistry.

Sherlock Holmes, the fictional detective in Arthur Conan Doyle's books, was a regular cocaine user. Coca laced wines were enjoyed by popes and royalty in the 19th century. Vin Mariani, for example, was popular in the 1800s, receiving enthusiastic endorsements from Pope Pius X and the Grand Rabbi of France, extolling its 'life giving properties'. Coca Cola was originally sold as 'a valuable brain tonic and cure for all nervous afflictions' and until 1904 contained small quantities of cocaine.

At the turn of the century doctors began to warn of possible [dependence](#) and problems with its use. In America fears developed among white people about 'cocaine crazed' black people who were rebelling against new discriminatory laws. In Britain concerns arose about the use of cocaine by troops during the First World War. Hysterical press reaction claimed that this was a German plot to destroy the British Empire. In 1916 emergency laws were rushed in to ban possession of cocaine (and [opium](#)) and limit its medical use.

At the time there was very little [recreational use](#) of cocaine in Britain, although when a young actress died of an overdose in 1918, it provoked the beginnings of what became the typical exaggerated press reaction to drugs and drug using that we see today. Cocaine was always available in this country, but it was not until the mid 1970s that cocaine became more commonly used. Sniffing cocaine became fashionable among the 'smart and successful' middle classes and was seen as a glamorous and expensive drug.

Meanwhile in America cocaine use was much more widespread and in the mid 1980s, a new more powerful form of the drug became available, smokable cocaine or crack. This became a major problem for those living in the most deprived areas of the inner city America. Gang warfare, shootings and drug related crime hit the headlines. In Britain the authorities braced themselves in anticipation of a similar situation. But while crack has come to Britain with related violence and criminal activity, it has not been anywhere near the scale of what happened in America.. However, cocaine use has increased among young people in recent years, especially among those attending all-night dance clubs.

The law

Cocaine and crack are controlled as Class A drugs under the [Misuse of Drugs Act](#). It is illegal to be in possession of either crack or cocaine or supply them to other people. Maximum penalties for possession are 7 years imprisonment plus a fine and for supply life imprisonment plus a fine.

Effects/risks

Cocaine and crack are strong but short acting [stimulant](#) drugs. They tend to make users feel more alert and energetic. Many users say they feel very confident and physically strong and believe they have great mental capacities. Common physical effects include dry mouth, sweating, loss of appetite and increased heart and pulse rate. At higher dose levels users may feel very anxious and panicky. The effects from snorting cocaine start quickly but only last for up to 30 minutes without repeating the dose. The effects come on even quicker when smoking crack but are even more short lived.

"It makes you feel great and powerful and all that. The trouble is it can make you really wired. And it doesn't last that long so the temptation is to have another go. That's why I found it so moorish and it cost me a fortune".

Large doses or quickly repeating doses over a period of hours can lead to extreme anxiety, paranoia and even hallucinations. These effects usually disappear as the drug is eliminated from the body. The after-effects of cocaine and crack use may include fatigue and depression as people come down from the high. Excessive doses can cause death from respiratory or heart failure but this is rare.

Cocaine may be [adulterated](#) with other substances and this may make it particularly dangerous to inject.

There is some debate as to whether [tolerance](#) or [withdrawal symptoms](#) occur with regular use of cocaine or crack. While it is true cocaine and crack are not physically addictive like heroin, it is misleading to define and therefore measure the existence of physical addiction using withdrawal symptoms associated with heroin. Each drug has its own unique physical effects, which in the case of cocaine and crack are very powerful.

A chronic user of cocaine or crack will become very tolerant to the drug and their body also very used to the drug keeping them awake and functional. Once the user stops, which can prove very difficult for a regular or chronic user, they will very quickly start to feel tired, panicky, exhausted and unable to sleep, often causing extreme emotional and physical distress. This can manifest itself in symptoms such as diarrhoea, vomiting, the shakes, insomnia, anorexia and sweating, which for some can prove unbearable. Many chronic users are well aware of these symptoms and, in an attempt to avoid them as well as ensuing fatigue, are very reluctant to stop its use.

As far as crack is concerned, claims have been made that, unlike cocaine, it is instantly addictive making occasional or intermittent use impossible. Certainly, crack appears to induce an intense craving in some users which can rapidly develop into a 'binge' pattern of drug use. However, studies of people who have ever used crack show that nowhere near all go on to daily, dependent use and that when this happens it usually takes a few months. To become a dependent user of cocaine hydrochloride would usually take longer.

For both crack and cocaine, dependency is not inevitable. Whether people become dependent, and if so how quickly it happens, will vary depending on the individual user's mental state and circumstances. The fact that cocaine and crack are expensive means that people who become dependent may spend vast amounts of money. Those who are not wealthy may find themselves involved in crime or prostitution to fund a habit.

With everyday use restlessness, nausea, hyperactivity, insomnia and weight loss may develop. Some regular users become very 'wired' and paranoid. Lack of sleep and weight loss may lead to exhaustion and being very run down.

"Everyone who tries crack will not like the high and everyone who likes the high will not become instantly and hopelessly addicted."

M.G. Beattie, Crack: the facts. Hazelden Foundation, 1987.

"The first hit is always the best...I've never had anything like it. With crack once you've got that hit of the day, no matter how much you take you don't get it back. If the rock is there, I can't leave it, even though I don't get anything off it. But you can't just have one (rock) and leave it, you've got to have more".

Quoted in Crack and cocaine in England and Wales. Home Office 1992

Repeated snorting of cocaine damages the membranes which line the nose. Repeated smoking of crack may cause breathing problems and partial loss of voice. Long term injecting may result in abscesses and infection with the added risk of [hepatitis](#) and [HIV](#) if injecting equipment is shared.

Pregnant women who heavily use cocaine or crack may experience complications and find that their babies are adversely effected. Much has been made in the American press of so called 'crack babies' and although some babies of crack using mothers may be irritable, difficult to comfort and feed poorly the extent to which this happens has often been exaggerated.

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