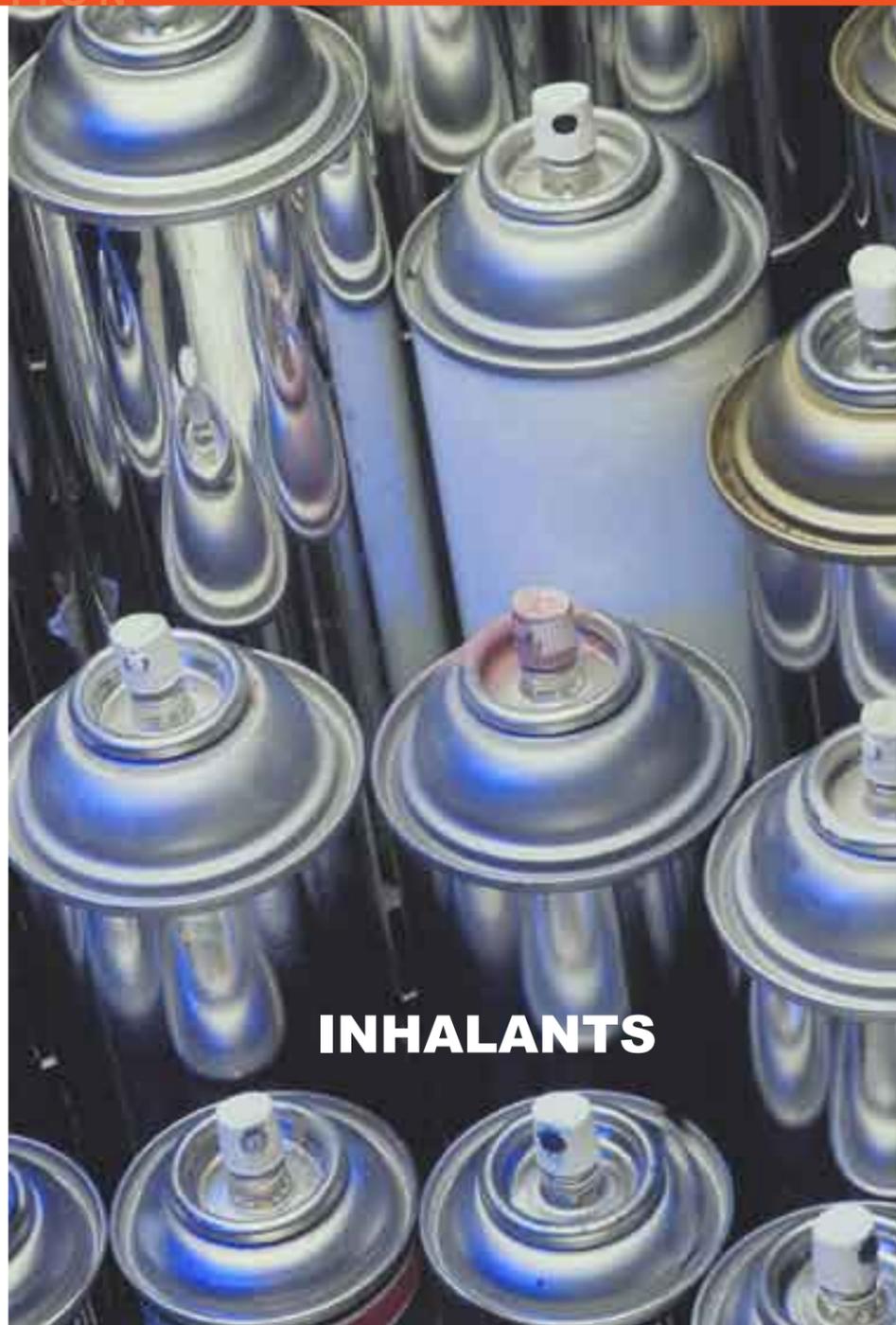


**WARNING! THIS FACT SHEET IS FOR PARENTS AND EDUCATORS AND IS NOT SUITABLE FOR CHILDREN**

**Inhalant sniffing is the common term for people becoming affected from breathing in the fumes from various solvents or gases. Studies of inhalant use in the USA date back to the 1940s. In Australia, reports in the 1970s of young people sniffing glue and petrol suggest that the use of inhalants has been going on for some time. In 1992, the World Health Organization recognised the use of inhalants for intoxication as an increasing problem world-wide.**



# INHALANTS

A common street name for inhalants is poppers, and the use of inhalants may also be referred to as sniffing, choofing and chroming. Inhalants are household or industrial products such as glues, aerosols, liquid paper thinners, butane gas (lighter refills) and petrol. Other inhalants are amyl nitrate and nitrous oxide.

Glues or aerosol can contents are commonly sprayed into a small plastic bag. The bag is then held over the mouth and nose, and the contents inhaled. Others are inhaled directly from their containers or soaked into a piece of cloth. Sometimes substances are sprayed directly into the nose or mouth – an extremely dangerous practice which can paralyse the airways, freeze the throat and cause suffocation.

## Drug effects

Inhalants are central nervous system depressants (like alcohol) and act in a similar way to alcohol. However, because they are inhaled and go directly into the bloodstream, solvents act much more quickly than alcohol. The short-term effects of using inhalants may include:

- Feelings of excitement and relaxation
- Less inhibition
- Bad breath
- Symptoms like the flu, including sneezing, coughing, glazed eyes or a runny nose
- Nose bleeds
- Loss of coordination and disorientation
- Mild hallucinations
- Anxiety and panic
- Black outs (temporary amnesia).

These effects are experienced within two to five minutes of inhaling. Repeated sniffing sustains these feelings.

## Inhalants and young people

Inhalants tend to be more commonly used by young people because they are more obtainable and cheaper than alcohol or other drugs. Some young people experiment with inhalants, and for the most of those the practice is done to fit in with a group or for 'kicks'. This behaviour usually passes fairly quickly.

A small number of users go on to become 'long term' or 'dependent' users of inhalants. Generally speaking these people have more challenges in their lives and less support and ability to deal with these problems. They may sniff alone or with other users, and may be

using a variety of other drugs and alcohol. Sniffing inhalants can be very dangerous, and young people have died or experienced permanent damage as a result of use.

Problems associated with using inhalants may include:

### Physical problems

- Breathing difficulties
- Dry sore throat and nose
- Sores
- Suffocation from plastic bags is common
- Risk of 'Sudden Sniffing Death' where the heart can suddenly stop, a risk increased if the person has a sudden shock when using; these deaths are often associated with stress during or soon after sniffing, so sniffers should never be chased or frightened
- Injuries arising from loss of coordination, judgment and inhibitions
- Loss of control of body movements and speech (this is often temporary) and convulsions
- Organ damage particularly to kidneys and liver due to the toxic build up in the body.

### Emotional problems and social problems

- Increased risk taking and dangerous behaviour which may cause serious accidents
- Poor work and study performance
- Relationship and family problems, isolation from friends who aren't into sniffing
- Increased risk of legal problems.

### Mental health problems

- Inhalants may cause hallucinations, paranoia and suspicion
- Affect memory and cause confused thinking and disorientation
- Increase anxiety about the risk of panic attacks
- Confusion about reality
- Aggravate symptoms of depression
- Damage to memory and concentration, brain damage.

## Dependency

Regular users develop a tolerance to inhalants which may lead to an increase in the frequency of "sniffing", as the length and intensity of the effect is reduced.

Those with a dependency may experience feelings of confusion, fatigue, depression, irritability, hostility or paranoia.

## Withdrawal

If a person who been regularly using inhalants suddenly stops then withdrawal may be experienced.

Symptoms can include:

- Anxiety
- Chills and shakes, tremors
- Depression, hallucinations
- Stomach aches, headaches
- Loss of appetite
- Nausea and dizziness
- Irritation and aggressive behaviour.

## Overdose

Death from inhalant use is a very real risk and can occur whether a person has used inhalants before or for the first time. If a person experiences blurred vision, disorientation and convulsions (fits), seek medical attention.

What to do if someone has been using inhalants passes out:

- Remove the bag from the user's mouth. If the person is drowsy, rouse them regularly to ensure they do not slip into unconsciousness.
- If the person is unconscious, turn them on their side to reduce the risk of them vomiting and choking. Make sure their airways are clear. Do not leave them alone. Call an ambulance immediately on 000 or 112 from a mobile phone (don't need credit or to be in range).
- If breathing has stopped, give mouth to mouth resuscitation. If there is no pulse, commence CPR if you are trained. Check

if there is toxic residue around their mouth – may need to use a resuscitation mask or light cloth.

## Treatment options

Phone the Alcohol & Drug Information Service in your State (see rear cover), your local Area Health Service, or Community Health Centre, for details of services providing detox and support programs. Different treatments and approaches will suit different people and more than one option may need to be tried. Detoxification from inhalants takes much longer than from alcohol; short-term detoxification requires from two weeks to 30 days. By this time, mental function starts to return to normal and participation in conventional treatment programs and counselling may become possible. A gradual longer term reduction detoxification program can be done over a period of about six months.

## Tips for families

Some tips for supporting a loved one with a problem with inhalants are:

- Find out all you can about inhalants
- Despite its long history, the use of inhalants is not widely discussed about and the person may need lots of reassurance before they feel comfortable talking about their problem
- Don't panic – remember that the young person may be experimenting
- Keep communicating, avoid pleading or nagging, and choose your moment to express concern – acknowledge that change is hard and make it clear that you are concerned because you love them and want them to be safe
- Learn what to do in the case of an overdose and have emergency numbers available
- It's OK to talk about it – get support for yourself even if they don't want help.

Thanks to the National Drug and Alcohol Research Centre (NDARC) for this information.

## Reducing the risks

There are practical harm reduction strategies for people who insist on using inhalants:

- Don't sniff alone, and use in a safe place where there is less risk of sudden events or shocks
- Use paper bags instead of plastic bags, or spray into a drink bottle
- Smaller bags are better than large ones, to reduce the risk of suffocation
- Don't smoke while sniffing as the substances used are highly flammable
- If using aerosol cans, turn the can upside before spraying into the bag to reduce inhaling other poisons – this will not reduce the intoxication effect
- Avoid exercise immediately after using inhalants
- Don't use other drugs while sniffing as this increases the risks.

**If the person using inhalants is concerned about a friend or themselves for any reason, they should call an ambulance immediately. The ambulance officers will need to be told that the person has been inhaling so they can provide the best treatment.**