### **GENERAL MEDICATION SAFETY TIPS**

- Regardless of medication, partying is not always the best idea when you are unwell, whether it's a mental or physical health issue. If it's physical, give your body a chance to rest and recover. If you suffer from poor mental health, think about how recreational drugs might affect you.
- If you are prescribed medication, follow your doctor's instructions.
- Discuss recreational drug use with your doctor to help them find the medication to suit you.
- If using medications recreationally or self-medicating, start with a small dose and allow plenty of time for it to work.
- Effects vary from person to person; sharing your prescription may seem like a nice way to help your friends recover from a bender, but their tolerance may be different from your own, so start with a smaller dose.
- Just because your friend is experiencing similar symptoms, does not mean it's a good idea to share your prescription with them.
- It's easy to forget to take your meds when partying; set a reminder in your phone.

### **UNSAFE COMBINATIONS**

- Benzos/antipsychotics + depressants (opiates, GHB, alcohol) = risk of overdose, loss of consciousness, difficulty breathing, respiratory failure leading to death
- Benzos/antipsychotics + stimulants/psychedelics = partially counters effects of stimulants/psychedelics. Both drugs remain active in the body
- Benzos + antipsychotics = excessive sedation, saliva production, and loss of coordination
- Benzos/antipsychotics + antihistamines = possible excessive sedation
- SSRI/SNRI + MAOI = extreme risk of serotonin syndrome

   always taper completely off one antidepressant before
   starting on another
- SSRI + MDMA/DXM = SSRI can counter the effects of MDMA. Risk of serotonin syndrome
- MAOI + MDMA/DXM/cocaine = extreme risk of serotonin syndrome
- SSRI/SNRI + alcohol = increased effects of alcohol
- MAOI + 2C-x/DOx/amphetamines/ketamine/MXE = unpredictably intensified effects
- Antibiotics + MDMA = amoxicillin, clarithromycin, doxycycline, erythromycin, ketoconazole, lansoprazole, primaquine, tetracycline, and troleandomycin may be dangerous to take with MDMA as they inhibit an enzyme that breaks down MDMA



### **MORE INFO**

This resource is not a complete guide so do some further research. The following websites may help:

www.dancewizensw.org.au

www.nuaa.org.au

www.prism.org.au

www.erowid.org

www.hrvic.org

www.dancesafe.org

www.tripproject.ca

www.yourroom.health.nsw.gov.au

This resource has been developed for people who use or intend to use drugs. Our role is to provide factual, relevant and practical information so you can make informed decisions. We promote harm reduction and safer partying.

This resource has been developed and adapted by DanceWize NSW with support from DanceWize, Harm Reduction Victoria, PRISM, and DanceSafe.

DanceWize NSW is a program of NSW Users and AIDS Association (NUAA)





### **JUST SAY KNOW.**



# **MEDICATIONS**

BENZODIAZEPINES, ANTIPSYCHOTICS, ANTIDEPRESSANTS

Know your mind, know your body, know your substance, and know your limits

This resource offers an introduction to three common medication classes. It is not a complete fact sheet for these drugs, but a guide to help you make safer decisions around medication and recreational drug use. If you are prescribed any medication, chat to your doctor about effects, side effects, and drug interactions to help you stay safe. Remember, these drugs may not mix well with other substances and getting drunk or high while you're unwell can also impact your body's healing processes.

# BENZODIAZEPINES

### XANAX, VALIUM, TEMTABS, KLONOPIN, ETC.

Benzodiazepines, or benzos, are a class of central nervous system depressant drugs that are generally prescribed for the management of anxiety disorders, insomnia, alcohol withdrawal, and seizures. There are several different drugs that are included in this class, and they each have different effects. Some benzos are often used to self-medicate, particularly at the end of a big weekend, or for recreational purposes.

#### CHEMICAL COMPOUNDS

Alprazolam (Xanax) Diazepam (Valium)

Clonazepam (Klonopin) Temazepam (Temtabs)

#### **DOSAGE AND SAFER USING TIPS**

- Benzos vary in their effects; just because you've had Valium, does not mean you know what Xanax is like.
   Approach all new benzos with caution.
- Benzos generally remain in your system (bloodstream) long after the apparent effects have worn off. Keep this in mind before considering re-dosing or using other drugs.
- Avoid driving under the influence of benzos as the effects on awareness, wakefulness, and coordination can make this very dangerous.
- There is a significant risk of developing a dependence on benzos, especially with extended use. Withdrawal from benzos can be very difficult.

### Benzo use is not recommended if you suffer (or have suffered) from:

- Liver problems
- Sleep apnoea syndrome
- Severe breathing problems
- · Myasthenia gravis
- Narrow angle glaucoma
- · Alcohol or other substance dependence

# **ANTIPSYCHOTICS**

### SEROQUEL, ABILIFY, ZYPREXA, RIXADONE, ETC

Antipsychotics include a very wide variety of drugs that are generally prescribed for the management of bipolar disorder, schizophrenia, psychosis, and related illnesses. All antipsychotics act on dopamine receptors in the brain, while some also act on serotonin receptors as well. They are usually split into two groups: typical (or first generation) antipsychotics and, the more popularly prescribed, atypical (or second generation) antipsychotics.

### CHEMICAL COMPOUNDS

Quetiapine (Seroquel) Olanzapine (Zyprexa)
Aripiprazole (Abilify) Risperidone (Rixadone)

### **DOSAGE AND SAFER USING TIPS**

- Many antipsychotics have a sedating effect, so they will
  probably put you to sleep and affect your coordination. Take
  this into consideration before making the decision to use
  them get nice and comfy and make sure you have nothing
  important to do for the next 6-12 hours.
- Some antipsychotics come in extended release form (usually denoted by 'XR' on the label). This formulation will affect you longer than the regular formulation.
- Antipsychotics generally remain in your system (bloodstream) long after the apparent effects have worn off.
   Keep this in mind before considering re-dosing or using other drugs.

### Antipsychotic use is not recommended if you suffer (or have suffered) from:

- Diabetes
- Hypertension
- Thyroid issues
- Obesity

## **ANTIDEPRESSANTS**

### ZOLOFT, LEXAPRO, PROZAC, EFFEXOR, CYMBALTA, ETC.

Antidepressants include a wide variety of drugs including, but not limited to, selective serotonin reuptake inhibitors (SSRIs), serotonin-norepinephrine reuptake inhibitors (SNRIs), and monoamine oxidase inhibitors (MAOIs). They are generally prescribed for depression and anxiety disorders, among other conditions. They are rarely used recreationally but they do interact with many recreational drugs.

### **CHEMICAL COMPOUNDS**

Sertraline (Zoloft)

Escitalopram (Lexapro)

Fluoxetine (Prozac)

Duloxetine (Cymbalta)

Moclobemide (Aurorix - MAOI)

Venlafaxine (Effexor) and many more...

### DOSAGE AND SAFER USING TIPS

- It's important to take antidepressants every day, as prescribed, to experience the positive effects on your mental health.
- Some people report reduced sex drive, difficulty reaching orgasm, and erectile dysfunction.
- Antidepressants have been linked to increased suicidal thoughts and behaviours, especially in people under 25.
- Abruptly quitting antidepressants or missing multiple doses can lead to some nasty withdrawal symptoms. If considering discontinuing your use of antidepressants, speak to your doctor about how you can taper off safely.

### Antidepressant use is not recommended if you suffer (or have suffered) from:

- Seizure disorders
- Hyponatremia
- · Renal dysfunction
- Psychosis
- Hypotension