

fact sheet: PCP

What is PCP?

Phencyclidine (PCP) is a dangerous drug that was originally developed in 1959 as a human anesthetic and was later used as a veterinary tranquilizer. Medical use in humans was discontinued in 1965 because patients often became agitated, delusional and irrational while recovering from PCP's anesthetic effects. In 1978, veterinary use also was discontinued. Today, PCP is manufactured primarily in illegal laboratories.

PCP is unique among drugs used for non-medical purposes because it affects the central nervous system in a variety of ways, acting at times as a stimulant, depressant and hallucinogen. PCP is so dangerous that only a relatively small number of users intentionally take it more than once or twice. However, even one use can prove deadly.

PCP often is referred to by many common "street" names. These include "angel dust," "crystal," "elephant tranquilizer," "hog," "horse tranquilizer," "killer joints," "ozone," "peace pill," "rocket fuel" and "wack."

Cox, T.C., Jacobs, M.R., LeBlanc, A.E., Marshman, J.A. 1987. *Drugs and Drug Abuse: A Reference Text, Second Edition*. Revised by Jacobs, M.R., Fehr, K.O'B. Toronto: Addiction Research Foundation.

Drug-Free Resource Net: PCP. 1996. New York: Partnership for a Drug-Free America. Interview. 1997. Columbia, S.C.: South Carolina Department of Alcohol and Other Drug Abuse Services.

METNET Drug Information Base: General Information About Phencyclidine (PCP). 1995. College Park, Md.: Center for Substance Abuse Research.

PCP. 1991. Toronto: Addiction Research Foundation.

PCP. 1996. Atlanta: National Families in Action.

"PCP: the chameleon of abused drugs." 1985. *The Drug Chromatographer*. 2(2):1-2.

How many forms of PCP are there?

PCP is a white crystalline powder in its original form, but on the street it can be found in pill, capsule, liquid, gum or powder form, often varying in color.

Because it can take many forms and is easily and inexpensively manufactured, PCP is frequently misrepresented on the street as methamphetamine ("speed"), mescaline, lysergic acid diethylamide (LSD) or other psychoactive substances such as delta-9-tetrahydrocannabinol (THC), the active ingredient in marijuana.

Cox, T.C., Jacobs, M.R., LeBlanc, A.E., Marshman, J.A. 1987. *Drugs and Drug Abuse: A Reference Text, Second Edition*. Revised by Jacobs, M.R., Fehr, K.O'B. Toronto: Addiction Research Foundation.

PCP. 1996. Jefferson City, Mo.: Platte County Sheriff's Department.

How is PCP ingested?

PCP can be snorted, smoked, taken by mouth or injected. Although all methods of ingesting PCP are risky, injection is the most dangerous because it bypasses natural safeguards against getting too much of the drug. For example, if a user takes too much PCP by mouth he might vomit before overdosing, but a user never knows when a single injection will be immediately lethal. In addition, injection drug users are at high risk of acquiring diseases that are transmitted by blood.

Smoking PCP in combination with marijuana or any other substance is also very dangerous because the lungs have a huge capacity for absorbing the drugs, which then reach the brain almost immediately and result in a high risk of overdose.

Drug-Free Resource Net: PCP. 1996. New York: Partnership for a Drug-Free America. Interview. 1997. Columbia, S.C.: South Carolina Department of Alcohol and Other Drug Abuse Services.

METNET Drug Information Base: General Information About Phencyclidine (PCP). 1995. College Park, Md.: Center for Substance Abuse Research.

What are the adverse effects of PCP use?

PCP is a very unpredictable drug that often produces more adverse than pleasurable sensations. "Bad trips" are very common. These include frightening hallucinations and "out-of-body" experiences; severely impaired motor coordination and mutism (the inability to speak); desensitization to pain; depression, sometimes severe enough to result in a suicide attempt; anxiety; disorientation; fear, panic, paranoia and even terror; aggressive behavior and violence; catatonic rigidity; and the release of hidden emotional or mental problems.

PCP also acts as a "dissociative anesthetic," meaning that users are temporarily numb, so they don't necessarily associate what is happening to their bodies with themselves. For example, a person high on PCP may see himself get shot but not feel any pain and, therefore, may not realize that he is injured.

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How common is PCP use?

In 1997, 3.3 percent of the U.S. population ages 12 and older — or almost 6.5 million individuals — reported using PCP at least once during their lives. Only 0.2 percent — or about 369,000 individuals — reported using PCP in the past year. However, in 1998, 1 percent of all high school seniors reported using PCP in the past 30 days.

An overwhelming majority of PCP users are white males. While PCP use is highest in the Northeastern and Western parts of the country, South Carolina is not immune to the problem. In 1995, 1.7 percent of all South Carolina eighth-, 10th- and 12th-graders reported using PCP or a similar hallucinogen (ecstasy, mushrooms or peyote) in the past 30 days.

National Household Survey on Drug Abuse. 1997. Chicago, Ill: Substance Abuse and Mental Health Services Administration.

PCP Use in Last 30 Days: High School Seniors, United States. 1998. Rockville, Md.: National Institute on Drug Abuse.

South Carolina Prevention Needs Assessment Survey: Grades 8, 10 and 12. 1997. Columbia, S.C.: South Carolina Department of Alcohol and Other Drug Abuse Services.

Is PCP addictive?

According to the *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV)* published by the American Psychiatric Association, the symptoms of addiction fall into three categories: (1) compulsion or loss of control — taking more than intended, unsuccessfully trying to stop and spending too much time under the influence or recovering from the drug's effects; (2) tolerance — including withdrawal symptoms when drug use is discontinued; and (3) impairment — using the drug despite adverse effects and preoccupation with the drug over everything else.

PCP can meet all three criteria. Although PCP withdrawal signs and symptoms have only been observed among laboratory animals and infants born with PCP in their systems, "cravings" have been reported by individual heavy users.

Tolerance can occur because regular PCP users usually need to increase their intake of the drug in order to maintain the "high."

Psychological dependence can develop with prolonged use of PCP, and use may continue despite medical or psychological problems associated with the drug. It should be noted that, because of its extremely unpredictable nature, even occasional users of PCP are at

high risk of developing social and legal difficulties associated with drug use.

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Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition. 1994. Washington: American Psychiatric Association.

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Does PCP have medicinal value?

Not any longer. Although PCP was developed as a human anesthetic and later used as a veterinary tranquilizer, the drug is no longer used for these purposes by either physicians or veterinarians. Nevertheless, PCP is still classified by the U.S. Drug Enforcement Administration and the South Carolina Code of Laws as a Schedule II drug. This means that PCP is legal only with a prescription (although prescriptions are rarely if ever written for the drug); it has a high potential for abuse; and its use can lead to severe psychological dependence. Interestingly, however, there are four common PCP analogs, or variations of the drug, that exist today, all of which are classified as Schedule I drugs. This means that these substances, known as PCE, PCPy, TCP and TCPy, have a high potential for abuse and can lead to severe psychological dependence like PCP, but they have no currently accepted medical use in the United States.

Cox, T.C., Jacobs, M.R., LeBlanc, A.E., Marshman, J.A. 1987. *Drugs and Drug Abuse: A Reference Text, Second Edition.* Revised by Jacobs, M.R., Fehr, K.O'B. Toronto: Addiction Research Foundation.

Inciardi, J.A. 1992. *The War on Drugs II.* Mountain View, Calif.: Mayfield Publishing Co. South Carolina Code of Laws. 44-53-210.

Telephone interview. 1997. Washington, D.C.: U.S. Drug Enforcement Administration.

Telephone interview. 1997. Columbia, S.C.: U.S. Drug Enforcement Administration.

Can PCP use cause medical problems?

Yes. Many medical problems are associated with PCP use. These include memory loss; speech difficulties; weight loss; birth defects in children born to PCP users; HIV/AIDS and hepatitis (among injection users); and kidney failure. Furthermore, use of PCP among adolescents can interfere with hormones related to normal growth and development as well as with the overall learning process.

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Can PCP cause psychological problems?

Yes. PCP can produce “very severe traumatic psychic effects” even at low doses. In addition to releasing hidden emotional or mental problems, effects of the drug sometimes mimic primary symptoms of schizophrenia — such as delusions, mental turmoil and a sensation of distance from the environment — and can last up to two weeks. Users may also experience “flashbacks” weeks, months or even years after using PCP just once.

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PCP. 1991. Toronto: Addiction Research Foundation.

What is the link between PCP and violent behavior?

Violence and severe agitation occur in about one-third of all PCP users, many of whom have no history of psychological problems. Suicides, homicides and self-mutilation all have been associated with use of the drug. The reported “feelings of power” combined with the anesthetic and dissociative effects of PCP often cause extreme behavior. Examples of PCP-induced violent behavior include a man who mutilated his eyeballs with his own hands and a woman, claiming she was “covered with insects,” who literally ripped the skin off her face. There is no way of knowing which PCP “trip” will lead to violent behavior; therefore, there is no way of preventing it.

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Drug-Free Resource Net: PCP. 1996. New York: Partnership for a Drug-Free America.
Johnson, J. 1990. *PCP Spells Trouble: The Listen Drug Fact Series*. Silver Spring, Md.: The Health Connection.
METNET Drug Information Base: General Information About Phencyclidine (PCP). 1995. Rockville, Md.: Center for Substance Abuse Research.

Is PCP dangerous?

Yes, for several reasons.

First, the disorientation and numbness that accompany PCP can lead to serious accidents. Many PCP users have frozen to death because they couldn't feel the cold literally freezing the life out of their bodies; others have drowned because they failed to notice the water filling their lungs.

Second, because PCP is manufactured in illegal and often unsanitary laboratories and sold on the street, users have no way of knowing how much PCP each dose contains. The purity and potency of street PCP is questionable. For example, in one analysis of street samples, PCP content ranged from 1.3 mg to 81 mg per unit dose.

Third, PCP is inexpensive to manufacture and comes in many forms. Dealers often pass it off as other drugs, most commonly THC (the active ingredient in marijuana), methamphetamine, mescaline and LSD. Therefore, a person taking a THC pill to “mellow out” or “get stoned” may start behaving very violently.

Finally, people who inject PCP and share needles are at high risk of acquiring HIV/AIDS and hepatitis.

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How great is the risk of PCP overdose?

Because single doses of “street” PCP vary greatly, overdoses can easily occur. A little too much PCP causes an individual to enter a state of surgical anesthesia and, at very high doses, coma, convulsions and death — usually from respiratory arrest — can occur.

In addition to death due to respiratory arrest, PCP overdoses can cause heart failure, dramatic increases in body temperature (above 105 degrees Fahrenheit) leading to brain damage and/or death, hemorrhaging of the brain's blood vessels and kidney failure.

The risk of overdose increases dramatically when PCP is used with other drugs, particularly nitrous oxide or central nervous system depressants including alcohol, benzodiazepines and narcotics. Five out of six people who die from a PCP overdose in the United States have been taking at least one other drug.

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Do PCP users typically use other drugs?

Yes. Despite obvious dangers, PCP is used with virtually every other drug. It is taken with alcohol or other central nervous system depressants, often with

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deadly results. Sometimes, PCP is taken in conjunction with LSD, nitrous oxide, cocaine, crack, tobacco and marijuana, all of which are dangerous combinations. When PCP is combined with other drugs, the risk of overdose can increase significantly (See *How great is the risk of PCP overdose?*).

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METNET Drug Information Base: *General Information About Phencyclidine (PCP)*. 1995. College Park, Md.: Center for Substance Abuse Research.

Street Terms: *Drugs and the Drug Trade*. 1996. Washington: Office for National Drug Control Policy.

Is PCP a sexual stimulant?

No. PCP is an anesthetic that deadens nerve endings throughout the body for up to 24 hours after use. Sexual activity is partly dependent on nerve stimulation, and this does not occur when an individual is numb.

METNET Drug Information Base: *General Information About Phencyclidine (PCP)*. 1995. College Park, Md.: Center for Substance Abuse Research.

How long can PCP use be detected by urine and/or blood tests?

Although PCP is rapidly metabolized so that plasma and urine levels are generally low in occasional users, the drug can be reliably detected for up to seven days after a single use and *may* be detectable for as long as 21 days following the last use. In more regular users, PCP that has been stored in the body's fat cells can be released as the result of stress or exercise and can be detected for up to several months after the last use.

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How can you tell if someone is using PCP?

Physical symptoms of PCP use include slurred speech; shallow and rapid breathing; increased blood pressure and heart rate; a rise in body temperature; profuse sweating; numbness; nausea; vomiting; blurred

vision; dizziness; and muscle spasms that can cause jerking movements and bizarre postures.

Behavioral symptoms of use include distinct changes in body awareness; impaired concentration; inability to think logically or articulate; and violent behavior.

Drug-Free Resource Net: *PCP*. 1996. New York: Partnership for a Drug-Free America.
PCP. 1991. Toronto: Addiction Research Foundation.

Can you get into trouble if someone you know is using PCP in your home?

Yes. In South Carolina, possession of PCP is illegal. To avoid punishment, you must prove the drug is not yours. South Carolina law regarding the possession and distribution of drugs makes it illegal to have, make or intend to distribute any controlled substance, including PCP. Penalties vary. For example, a first offense for the manufacture, distribution or possession with intent to manufacture or distribute PCP is a misdemeanor punishable by up to five years in prison and/or fines of up to \$5,000.

Simple possession of PCP is also punishable under South Carolina law. Possession of PCP is a misdemeanor punishable by up to six months in jail and/or fines up to \$1,000.

South Carolina Code of Laws. 44-53-370. 44-53-210.

Where can I get more information?

In South Carolina, the Department of Alcohol and Other Drug Abuse Services (DAODAS) operates a statewide toll-free telephone line that provides information and assistance on a variety of topics related to alcohol and other drug abuse. The number is **1-800-942-DIAL (3425)**. DAODAS also offers an online clearinghouse of alcohol and other drug information on the Internet at www.scprevents.org.

The county alcohol and drug abuse authorities and other public and private service providers offer local information and assistance as well.

Nationally, the National Institute on Drug Abuse operates a hotline. That number is **1-800-662-HELP**.



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toll-free: 1-800-942-DIAL (3425)
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