



## Recreational drugs and alcohol

Explains the mental health effects of recreational drugs, what might happen if you use recreational drugs and also have a mental health problem, and suggestions for where to find support.

If you require this information in Word document format for compatibility with screen readers, please email: [publications@mind.org.uk](mailto:publications@mind.org.uk)

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## What are recreational drugs and alcohol?

Recreational drugs are substances people may take:

- to give themselves a pleasurable experience
- to help them feel better if they are having a bad time
- because their friends are using them
- to see what it feels like.

They include [alcohol](#), [tobacco \(nicotine\)](#), substances such as [cannabis](#), [heroin](#), [cocaine](#) and [ecstasy](#), and some prescribed medicines.

*"All my experiences with recreational drug use started due to social influences, of wanting to 'fit in'."*

Recreational drugs may be:

- legal – such as nicotine and alcohol
- illegal – this means it is against the law to have them or supply them to other people; most recreational drugs are illegal
- controlled – these are drugs used in medicine, such as [benzodiazepines](#); it is legal to take controlled drugs if a doctor has given you a prescription for them but it is illegal to have them if not; it is also illegal to give or sell controlled drugs to anyone else.

A number of substances previously known as 'legal highs' are now illegal – for example, [mephedrone](#) ('meow meow').

## Drugs and the law

### Possession and supply

Most drugs come under the Misuse of Drugs Act 1971, which makes it illegal to possess certain drugs and to supply them to others. They are classified as class A, B or C, depending on the presumed risk of harm they may cause.

New synthetic versions of existing drugs (previously called 'legal highs') come under the Psychoactive Substances Act 2016. These are chemicals made to mimic the effects of existing illegal drugs, for example cannabis or cocaine. The Psychoactive Substances Act, which came into effect in May 2016, makes it illegal to produce or supply these types of substances, or to possess them with the intention of supplying them.

The way street drugs are legally classified does not reflect how harmful they are to your mental health. Legal, illegal and controlled drugs can all have a negative impact on you, whichever Act of Parliament they come under and whatever class they are given.

### Driving

- It is illegal to drive if you are not fit to do so because of a drug you have taken, whether it is a legal, illegal or controlled drug.
- It is illegal to drive with an illegal drug in your blood, whether or not it affects your driving.

### Medical uses

Some of the substances discussed on these pages have potential medical uses:

- synthetic versions of [cannabis](#) are available for use in some branches of medicine
- [ketamine](#), [psilocybin \(magic mushrooms\)](#) and [LSD](#) are being researched in the UK for possible use in treating mental health problems

The drugs discussed in these pages are those that are used most commonly. There are many others – information about these can be found on the [Frank](#) and [Erowid](#) websites.

## How can recreational drugs affect mental health?

All drugs have some kind of effect on your mental health. They affect the way you see things, your mood and your behaviour.

These effects may:

- be pleasant or unpleasant
- be short-lived or longer-lasting
- be similar to those you experience as part of a mental health problem
- go away once the drug has worn off
- continue once the drug has worn off

For some people, taking drugs can lead to long-term mental health problems, such as [depression](#) or [schizophrenia](#).

You may already have a mental health diagnosis, and use illegal drugs to help yourself cope.

### Dual diagnosis

If you have [mental health problems](#) and also have problems with drug or alcohol use, you will probably be described as having 'dual diagnosis'.

This may cause a large number of problems, and you may need help with many different parts of your life – see [support for dual diagnosis](#).

There is no standardised treatment for dual diagnosis. Treatment involves both mental health services and drug and alcohol services.

## How drugs may affect you

It is difficult to predict how you will react to a drug. You may react differently to the same drug at different times or in different situations.

This may differ depending on:

- the type of drug
- whether the drug has been mixed with other substances, and what these other substances are
- the amount you take
- the environment or social situation in which you take it
- how often you take it
- your previous experience of it
- what you want and expect to happen
- your mental state at the time

If you have a history of poor mental health, you may be more likely to experience negative effects with illegal drugs.

If you have previously had no mental health problems, you may still develop symptoms of a mental health problem from using these drugs.

### **Regular use**

If you use drugs a lot, or become dependent on them, this can have a negative impact on your day-to-day life. For example, it could lead to problems with:

- money
- education and employment
- relationships
- housing
- low self-esteem
- finding it hard to maintain commitments, including appointments related to your drug use or mental health
- crime – either in possessing an illegal substance or to finance a habit, leading to a criminal record
- imprisonment

**If you take drugs, remember:**

- you don't always know what is in them
- it can be difficult to predict how you will react
- they could contain additional harmful substances
- they may not contain any of the substance you are expecting
- even if you have taken something before, it could have different ingredients or be a different dose.

This is more likely to be the case with illegal highs.

## What types of drug are there?

There are four main groups of drugs, divided according to their major effects, plus a few substances that do not easily fit into any category. The main categories are:

- [stimulants](#) (e.g. cocaine)
- [depressants](#) (e.g. alcohol)
- [opium-related painkillers](#) (e.g. heroin)
- [hallucinogens](#) (e.g. LSD)

### Stimulants

These make you feel:

- energetic
- alert
- talkative
- active
- very excited

They can be very dangerous (causing death) at high doses.

Repeated use can cause [psychosis](#) and [paranoia](#), which may be diagnosed as [schizophrenia](#). They are also addictive.

### Depressants (sedatives)

These make you feel:

- relaxed
- chilled out
- mellow
- possible paradoxical effects – anxiety, nightmares, aggression

They are dangerous at high doses. They are addictive.

## Opium-related painkillers

These make you feel:

- a rush of pleasure
- in a dreamy state
- drowsy

They are very dangerous at high doses. They are addictive.

## Hallucinogens

These vary a lot. The same drug may have different effects at different times.

These may make you feel:

- detached from your surroundings
- mood swings
- altered sense of space and time
- hallucinations, illusions and distortions of reality
- feelings of insight
- mystical or religious experiences

The experience may be powerful and not much fun.

### Remember

- You will not necessarily experience these effects.
- Someone showing symptoms like this will not necessarily be taking drugs – there may well be other causes.
- All these drugs can also cause physical side effects, some of which can be unpleasant or dangerous.



For more information about physical effects of illegal drugs, see the [Frank](#) or [Erowid](#) websites.

## **New psychoactive substances (illegal highs)**

These are synthetic substances created to try to mimic the effects of existing drugs in the categories above, to get around the law. They used to be called 'legal highs' but all such substances are now illegal.

Most have unknown effects in addition to their intended effect, and trying them is therefore extremely hazardous.

## What effect could different drugs have?

The possible mental health effects of the most commonly-used drugs are listed below. Not everyone will experience all of them.

- [alcohol](#)
- [amphetamines; methylamphetamine \(crystal meth\)](#)
- [anabolic steroids](#)
- [benzodiazepines](#)
- [buprenorphine](#)
- [cannabis](#)
- [cocaine](#)
- [ecstasy \(MDMA\)](#)
- [GHB](#)
- [heroin](#)
- [ketamine](#)
- [khat](#)
- [LSD](#)
- [mephedrone \(meow meow\)](#)
- [nicotine \(tobacco\)](#)
- [phencyclidine \(PCP\)](#)
- [pregabalin](#)
- [psilocybin/psilocyn \(magic mushrooms\)](#)
- [solvents](#)

### **alcohol**

Alcohol is legal but it is the most toxic of the commonly-used drugs.

Moderate use is not usually a problem. The long-term effects listed below are associated with drinking a lot over a long period of time. These effects will go away if you stop drinking.

*"I never drink when feeling even a little low as I think the alcohol enhanced my feelings and led to me feeling even worse."*

If you think you may be addicted to alcohol and want to give up:

- get advice and information
- seek medical help if possible – it can be dangerous to stop drinking suddenly

### Type of drug: depressant

Short-term effects

- feeling relaxed and more sociable
- feeling subdued, so that you drink more in order to recreate the pleasant effects
- large amounts – uninhibited behaviour or aggression

Long-term effects

- memory loss
- difficulty thinking clearly
- difficulty problem-solving
- poor concentration
- addiction

Dependency and withdrawal symptoms

- anxiety
- delirium (confusion, disorientation, hallucinations)

*"Alcohol is the main culprit for some terrible decision making at university. The overwhelming pressure to go out drinking most nights can and did get the better of many students in my first year."*

## **amphetamines; methylamphetamine (crystal meth)**

Amphetamines are a group of drugs which vary in how powerful they are and how they are classified legally.

The effects of crystal meth are similar to crack cocaine but they last longer. If you have experience of a mental health problem, you are more likely to experience negative effects.

**Type of drug:** stimulant

Short-term effects

- increased attention and alertness
- reduced tiredness
- increased energy and confidence

Long-term effects

- agitation
- confusion
- aggression
- psychosis; paranoia

Withdrawal symptoms

- anxiety
- depression
- tiredness
- irritability

## **anabolic steroids**

These are taken to increase muscle bulk and enhance sporting performance. They are slow to act, and do not cause an immediate buzz like other stimulants.

They are class C drugs, legally available only from a pharmacist on prescription. Their use is banned by many sporting organisations.

The short- and long-term mental health effects of steroids will disappear if you stop taking them. However, the symptoms of dependency may continue.

**Type of drug:** stimulant

Short- and long-term effects

- increased energy
- excitement
- competitiveness
- aggression

- dramatic mood swings
- confusion
- sleeping problems
- depression
- paranoia

Dependency symptoms

- extreme tiredness
- depression

## benzodiazepines

These are prescribed for anxiety and as [sleeping pills](#). It is illegal to take them without a prescription written for you.

You might use them:

- to increase the effects of similar drugs, such as alcohol or opiates
- to counteract the effects of stimulants, such as ecstasy or amphetamines, or
- to help with stopping smoking

Benzodiazepines can be very addictive, and coming off them can be very difficult.

**Type of drug:** [depressant](#)

Short-term effects

- negative effects:
  - agitation
  - aggression
  - hostility
- positive effects:
  - reduced tension and anxiety
  - clear thinking
  - feeling calm and relaxed

### Dependency symptoms

- sleeping problems
- anxiety
- irritability
- heightened awareness

For a list of withdrawal symptoms see our full [benzodiazepines](#) section.

## **buprenorphine**

Buprenorphine and methadone are both prescription drugs that are used to treat heroin addiction. They are recommended by [NICE \(the National Institute for Health and Care Excellence\)](#).

Buprenorphine (trade name Temgesic) is less sedating than methadone, and so may be preferable if you are working or if you drive.

**Type of drug:** [opium-related painkiller](#)

### Short- and long-term effects

- depression
- loss of libido
- hallucinations and other psychotic symptoms
- feelings of detachment

## **cannabis (marijuana, hemp, hashish, grass, skunk)**

People take cannabis as a way of relaxing and getting high. The effects you experience will largely depend on:

- whether you are used to taking the drug
- how much you take
- the type of cannabis you use
- your genes

If you have experience of anxiety and depression, you are more likely to experience negative side effects.

**Type of drug:** stimulant, depressant and hallucinogen

Short-term effects

- feeling relaxed
- talkative
- finding things very funny and laughing a lot
- feeling excited by the things you see, hear and feel
- hunger

High doses may cause:

- distorted perceptions
- forgetfulness
- distress and confusion
- psychotic experiences (hallucinations or other unshared perceptions)

Long-term effects

- long-lasting symptoms of psychosis, that may be diagnosed as schizophrenia
- depression in later life, if you use it a lot as a teenager

### **Cannabis psychosis**

Whether or not you get psychotic effects when using cannabis depends on a gene which codes for a chemical called COMT (catechol-O-methyltransferase, a brain enzyme).

There are two versions of this gene, one of which is associated with a much greater chance of getting psychotic effects than the other.

You are more likely to have psychotic experiences if:

- you use cannabis such as skunk, which has a high level of tetrahydrocannabinol (THC, the component of cannabis that is hallucinogenic)
- you have two copies of the version of the COMT gene, which makes you more susceptible to psychotic experiences

## cocaine, crack cocaine

Cocaine comes in two forms:

- cocaine powder, which is snorted
- crack cocaine, which is smoked

Both forms may be injected. Cocaine is notoriously impure, and often contains other substances.

Type of drug: stimulant

Short-term effects

- feeling wide awake
- full of energy
- feeling confident

High doses may cause:

- hallucinations and delusions
- depression
- suicidal thoughts

Long-term effects

- depression
- anxiety
- panic attacks
- paranoia
- irreversible brain damage
- worsening of pre-existing mental health problems
- repetitive movements

Dependency and withdrawal symptoms

- loss of energy
- psychosis
- depression
- akathisia (a feeling of intense restlessness)



*"Cocaine – from a perceived non-addiction I realised that my intermittent use is addiction and is most prevalent in social situations."*

Cocaine is extremely addictive, and it is very difficult to stop taking it.

If you have a mental health problem, cocaine can make this worse.

## **ecstasy (MDMA)**

Ecstasy tablets are notoriously impure, and often contain substances other than MDMA. Although ecstasy is a stimulant, it has different effects from other stimulants (such as amphetamines) as it causes feelings of empathy rather than euphoria.

It is very dangerous to take ecstasy at the same time as [MAOI antidepressants](#).

**Type of drug:** [stimulant](#)

Short-term effects

- feeling happy and relaxed
- feelings of empathy, openness and caring

Long-term effects

- depression, which does not respond to antidepressants
- loss of confidence
- anxiety
- confusion
- agitation and teeth clenching
- panic attacks after repeated use
- hallucinations and paranoia after repeated high doses

## **GHB – gammahydroxybutyrate (GBH)**

GHB is an anaesthetic liquid, which may be mixed with solvents or caustic soda. As it is very sedating, it has been associated with sexual assaults.

It is dangerous, potentially causing seizures, coma and death.

It is very dangerous to take GHB with alcohol.

**Type of drug:** depressant

Short-term effects

- loss of inhibitions
- calmness
- sedation
- confusion

Long-term effects

- the above effects can last for up to seven hours

## **heroin (diamorphine)**

Heroin is a painkiller, prescribed as diamorphine. The main effects are pain relief and euphoria but also depression.

It is very addictive, and leads many people to crime to fund their use of it.

The main problems with heroin arise because it is very addictive. Many drug treatment programmes are geared to helping people who are addicted to heroin and other opioid drugs.

Naltrexone (Nalorex) is a prescribed drug that eliminates the positive experiences associated with opioid use. If you are being treated for heroin addiction, naltrexone may be prescribed to help you stay off it.

**Type of drug:** opium-related painkiller/depressant

Short-term effects

- rush of pleasure followed by calm, warm, dreamy contentment
- drowsiness
- talkativeness
- loss of appetite

- insomnia
- lethargy

#### Long-term effects

- loss of appetite
- apathy
- neglect of personal safety and hygiene
- generalised pain when the level of drug in your system drops

#### Dependency and withdrawal symptoms

- a craving that can lead to serious social problems including crime
- severe physical withdrawal symptoms
- tolerance of the drug, meaning you need to take more of it to achieve the same effect

## **ketamine (Special K)**

Ketamine is an anaesthetic that is mainly used in animals. It is similar to [PCP](#).

It has antidepressant effects and is being researched for use in treatment-resistant [depression](#) and [PTSD](#).

**Type of drug:** [hallucinogen](#)

#### Short-term effects

- poor concentration
- changed perception of surroundings – things not 'looking right' or 'feeling right'
- feeling out of touch with reality and your surroundings
- delusions
- paranoia
- dream-like states
- nightmares
- feeling you have no thoughts
- a 'bad trip' may make you violent, suicidal or likely to harm yourself

#### Long-term effects

- difficulty thinking clearly
- depression
- panic attacks
- anxiety

#### Dependency and withdrawal symptoms

- tiredness
- depression

## **khat**

Khat is a green, leafy plant that has been chewed in East Africa for thousands of years. The effects are similar to amphetamine but less strong.

Khat was made a class C drug in 2014, meaning that it is illegal to possess or supply to others. It is used socially in much of east Africa, in much the same way that alcohol is used in the UK. Like alcohol, it becomes a problem with overuse.

#### Type of drug: stimulant

#### Short-term effects

- feeling elated and energetic
- not being able to sleep
- loss of appetite
- relaxation
- feeling sociable
- hearing voices (associated with high doses)
- paranoia (associated with high doses)

#### Dependency and withdrawal symptoms

- tiredness
- depression
- anxiety
- irritability

## LSD (lysergic acid diethylamide, acid)

LSD is a synthetic drug that was first made in the 1940s. It causes random and sometimes frightening effects, known as a 'bad trip', which may be delayed.

As LSD causes you to hallucinate and lose touch with your surroundings, it can cause you to do dangerous things (such as attempting to fly, for example). In some cases, people have died due to dangerous behaviour as a result of taking LSD.

**Type of drug:** [hallucinogen](#)

Short-term effects

- detachment from surroundings
- altered sense of space and time
- hallucinations
- feelings of insight, mysticism and spirituality
- feeling that you can fly
- anxiety (associated with a bad trip)
- feeling panicky (associated with a bad trip)

Long-term effects

- likely to worsen existing symptoms of schizophrenia
- flashbacks of bad trips, when you feel you are re-living them

## mephedrone (meow meow)

Mephedrone is similar to amphetamines, ecstasy and the active ingredients of khat.

Do not confuse mephedrone with [methadone](#).

**Type of drug:** [stimulant](#)

Short-term effects

- alertness, confidence, talkativeness
- agitation
- anxiety
- hallucinations (hearing and seeing things, and strange touch sensations)
- paranoid delusions (even if taking antipsychotic medication)

- depression
- suicidal feelings

*"The effects of this drug [mephedrone] were at the beginning the most enjoyable. My problem with this became very detrimental to my mental wellbeing, leading to psychosis and becoming a danger to myself."*

## nicotine (tobacco)

You would not normally experience mental health effects from using nicotine. However, it is extremely addictive, and stopping nicotine can cause negative effects.

If you are taking part in a smoking cessation programme, you may be offered a medication such as bupropion (Zyban), varenicline (Champix) or a benzodiazepine to help cope with the withdrawal effects and reduce dependency.

**Type of drug:** [stimulant](#)

Dependency and withdrawal symptoms

- irritability
- restlessness
- depression

## phencyclidine (PCP)

PCP is an anaesthetic, mainly used in animals. It is similar to [ketamine](#). The symptoms you experience from taking PCP may be confused with schizophrenia.

PCP can make you feel good but may also make you panicky, paranoid and low. Some people have died as a result of injuries they caused themselves after taking it.

**Type of drug:** [hallucinogen](#)

Short-term effects

- poor concentration
- changed perception of surroundings – things not 'looking right' or 'feeling right'
- feeling out of touch with reality and your surroundings
- hallucinations

- delusions
- paranoia
- dream-like states
- nightmares
- feeling that you have no thoughts
- feeling violent (associated with a 'bad trip')
- feeling suicidal or wanting to self-harm (associated with a 'bad trip')
- psychosis

#### Long-term effects

- depression

#### Dependency and withdrawal symptoms

- depression

## pregabalin

Pregabalin is a prescription-only medication used for anxiety, neuropathic pain and epilepsy.

See our full [pregabalin](#) listing for further details.

#### Type of drug: depressant

#### Short-term effects

- calmness
- relaxation
- happiness and excitement
- sleeping problems
- hallucinations
- panic attacks
- agitation

#### Dependency and withdrawal symptoms

- anxiety
- depression

- difficulty sleeping
- nausea
- pain
- seizures
- sweating

## psilocybin/psilocyn (magic mushrooms)

The effects of magic mushrooms are similar to LSD.

If you have mental health problems, magic mushrooms may make them worse.

**Type of drug:** [hallucinogen](#)

Short-term effects

- hallucinations, which could be pleasant or frightening
- feeling disconnected from your surroundings and out of control

Long-term effects

- flashbacks (if you had a 'bad trip')

## solvents

Solvents, glues, gases and aerosols can affect the heartbeat and cause death. Repeated sniffing can cause a hangover effect, making you pale, very tired, forgetful and unable to concentrate.

They are used mainly by (a small percentage of) young people, usually only for a short period.

It is illegal to sell glues and solvents to young people under 18 if you suspect they may be using them to sniff.

**Type of drug:** [depressant](#)

Short-term effects

- feelings similar to getting drunk
- dizziness



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- feeling unreal
- euphoria
- loss of inhibition
- mood swings
- pseudo-hallucinations (hallucinations that you know are not real)
- depression
- aggression

Dependence

- rare

## Can recreational drugs and medication affect each other?

When two or more drugs are taken at the same time (whether they are legal or illegal) they are likely to interact with one another, so that one drug changes the effects of the other. This means:

- one or both of them may become toxic
- their effects may be decreased or increased.

Your age, weight, genes, general health and liver or kidney function will make a difference to the way the drugs work. However, there are some common interactions that many people experience. This page has information about:

- [interactions between different recreational drugs](#)
- [interactions between recreational drugs and prescribed medication](#)

## Interactions between different recreational drugs

Mixing different drugs, or mixing drugs with alcohol, is always dangerous. The effects can be hard to predict, but there are some known interactions:

- Two or more [depressants](#) – e.g. [heroin](#) plus a [benzodiazepine](#) or [alcohol](#): the depressant effect will be increased, slowing your heart and breathing – this may be fatal.
- Two or more [stimulants](#) – e.g. [cocaine](#) plus [ecstasy](#): can cause your heart to race (and can be very frightening) – this may be fatal.
- [Depressant](#)(s) and [stimulant](#)(s) – can put a strain on your heart. This can be fatal.
- [Cocaine](#) and [alcohol](#) – produces a substance called coca-ethylene, which is poisonous. Alcohol may also suppress the effect of cocaine, so you may take more and overdose.
- [Ecstasy](#) and [cannabis](#) – can make you anxious and paranoid.
- [Heroin](#) and [cannabis](#) – very dangerous and easily fatal.
- [Pregabalin](#) – can increase the euphoric effects of other drugs (such as opiates).

## Interactions between recreational drugs and prescribed medication

These are some of the known interactions between drugs and psychiatric medication. Drugs may also interact with any other type of prescribed medicines, as well as those bought over the counter.

- [MAOI antidepressants](#) with many other drugs – can cause very dangerous effects, including very high blood pressure, chest pain, neck stiffness, rigid muscles, flushing, vomiting and severe headaches.
- [Reversible MAOI \(moclobemide\)](#) with [stimulants](#) – may cause life-threatening effects, as above.
- [Chlorpromazine](#) with [amphetamine](#) – the effect of both drugs may be reduced.
- [Lithium](#) with [cocaine](#) – effect of cocaine reduced.
- [Lithium](#) with [amphetamine](#) – effect of amphetamine blocked.
- [Lithium](#) with [alcohol](#) or [ecstasy](#) – dehydration may cause lithium levels to become toxic.
- [Carbamazepine](#) with [cocaine](#) – effect of cocaine reduced.
- [Carbamazepine](#) with [methadone](#) – reduces methadone levels.
- [Ketamine](#) with [depressants \(sedatives\)](#) – breathing reduced.
- Most [antidepressants](#), [antipsychotics](#) and [tranquillisers](#) with [alcohol](#) – increases sedative effects, and the loss of co-ordination and fine movement.
- [First generation antipsychotics](#) with [ecstasy](#) – increases risk of [movement disorders](#).
- [Cannabis](#) with [clozapine](#) and [olanzapine](#) (antipsychotics) – reduces amount of antipsychotic in body.
- [Citalopram](#) (SSRI antidepressant) with [cocaine](#) – may cause brain haemorrhage (bleeding), high blood pressure and risk of bleeding – this effect was reported in July 2016 and may also apply to other SSRI antidepressants.
- [Tobacco](#) with [clozapine](#) and [olanzapine](#) – smoking reduces the effect of clozapine and olanzapine, so your dose of these drugs will need to be adjusted if you stop or start smoking (this is an effect of the hydrocarbons in the smoke, rather than the nicotine).
- [Risperidone](#) with [cocaine](#) – reduces 'high' of cocaine.

## What support is available?

If your drug use is affecting your mental health, you could:

- contact a drug organisation (see [Useful contacts](#))
- see [your local NHS drug and alcohol service](#)
- see a GP

They can:

- discuss your drug use and how it is affecting you
- explain your options for treatment
- refer you to a specialist if necessary

You may feel anxious about discussing your use of recreational drugs with your doctor, but your treatment is likely to be more successful if they have all the information about your drug use.

Be honest about how you use drugs. For example, if you have psychotic symptoms, a doctor may be less likely to prescribe antipsychotic [medication](#) if they know these may have been caused by a recreational drug.

Before you start any treatment, your doctor should discuss your options with you, and take your opinions into account.

If you are seen by your local drug and alcohol service, you should be given a key worker (a doctor, nurse or drug worker) who will make a care plan with you and see you regularly.

[Guidance](#) from NICE (the National Institute for Health and Care Excellence) on the psychological treatment and social help for people with problems related to drug or alcohol abuse recommends:

- all treatment should:
  - be person-centred
  - take into account your individual needs and preferences
  - take into account your cultural background and any special needs

- you should have a good support worker to co-ordinate your care plan and build a good therapeutic relationship with you, discussing your options with you
- you should be offered '[motivational interviewing](#)' and '[contingency management](#)', which aim to encourage you to stop taking street drugs
- if you are being treated for heroin addiction with methadone, buprenorphine or naltrexone, you should be offered a [talking treatment](#).

## Talking treatments

You may be offered psychological therapies, such as cognitive behavioural therapy (CBT) or psychodynamic therapy.

You and your family may be offered behavioural family intervention therapy. If you and your partner both use recreational drugs, you may also be offered behavioural couples therapy.

See [talking treatments](#) and [cognitive behavioural therapy](#) for further information.

## Medication

Medication is unlikely to help with mental health problems that are directly caused by your use of alcohol or recreational drugs. For example:

- [antipsychotic medication](#) may not be effective for psychosis caused by an illegal drug
- [SSRI \(selective serotonin reuptake inhibitor\)](#) antidepressants are not effective for treating depression caused by using ecstasy

But if you were already diagnosed with a mental health problem before you started using other substances, you may be prescribed drugs to treat it.

If you are prescribed psychiatric drugs, it's important to be careful about taking them with recreational drugs. The different drugs may interact with each other and cause adverse effects – see [drugs and medication](#).

## Heroin addiction

If you are addicted to [heroin](#), you are likely to be offered treatment with [methadone](#), buprenorphine or naltrexone.

## What help is available if I have a dual diagnosis?

If you have severe mental health problems and problematic substance misuse, you may be given what is known as a 'dual diagnosis' – when both problems are diagnosed.

If you have a dual diagnosis, a range of services can help you:

- [mental health and social services](#)
- [housing](#)
- [self-help groups](#)
- [support in the criminal justice system](#)
- [drug and alcohol support services](#)

### Mental health and social services

Important: if you have a dual diagnosis, mental health services should be responsible for your treatment, rather than drug or alcohol services.

They should be able to refer you for help you with:

- suitable housing
- employment
- benefits

The professionals will need to make a full assessment of your needs, so tell them as much as you can about your circumstances.

You may:

- be referred to your Community Mental Health Team (CMHT)
- be referred to an Assertive Outreach Team (AOT)
- be allocated a care co-ordinator, and
- have a written care plan under the [Care Programme Approach \(CPA\)](#)

If you find it difficult to get the support you need, you may find an [advocate](#) helpful.

## Housing

If you have dual diagnosis, finding somewhere to live can be very difficult. Many housing agencies and supported housing trusts will not accept drug users.

However, a number of housing associations and trusts do provide suitable schemes.

See [Housing and mental health](#) for further information.

## Self-help groups

A self-help group, where you can talk about your mental health problems and drug use with other people who are having similar experiences, can be very helpful.

Many organisations run self-help groups, including some [local Minds](#). For more information see [Useful contacts](#).

## Support in the criminal justice system

If you have been in contact with the criminal justice system linked to your drug use, this should not make any difference to the type of treatment you are offered.

If you are in prison, you may be offered a 'therapeutic community', developed to help people with drug problems in a prison environment.

## Drug and alcohol support services

You may be offered help from drug and alcohol support services to encourage you to stop taking drugs or alcohol. This usually means you are allocated a support worker, and receive quite intensive one-to-one support.

The programmes recommended by NICE (the National Institute for Health and Care Excellence) are:



- **Motivational interviewing** – this aims to help you decide what to do about your drug use, and to follow up the decisions you make. You may be offered one or two sessions.
- **Contingency management** – under contingency management, you may be offered incentives (such as shopping vouchers) to encourage you to stay off drugs. You will have to agree to urine or saliva testing as part of this.

If stopping alcohol, you are likely to be admitted to hospital because stopping suddenly after a long period of heavy drinking is dangerous. You may also be given medication to treat withdrawal symptoms – this may be an [antipsychotic](#), a [benzodiazepine](#) or a combination.

## **Bipolar and alcohol**

[Watch Jonny's vlog](#) on how he has coped with bipolar and alcoholism.

## How can friends and family help?

This section is for friends and family members who want to help:

- someone with a mental health problem who also uses recreational drugs or alcohol
- someone who is experiencing mental health problems as a result of taking recreational drugs

It can be very difficult to know how to help people who take drugs, especially if they are addicted.

If they have severe problems, the reality may be that there is a limit to the amount of support you can give them and how much you can get them to change.

However, there are some things you can do that might be helpful.

### Encourage them to seek help

This can be difficult, particularly if they are seeking help for the first time.

They may be worried about being judged for their drug use, or concerned about what will happen if the drugs they use are illegal.

You can:

- reassure them that it is OK to seek help
- help them decide where to go for support

### Support them to use services

You can:

- help them find out what services are available locally
- go with them if they would like you to (especially for a first visit)
- support them to make the most of the services they are using

If the support offered is not helpful, or they are reluctant to attend, you may be asked to attend meetings with their support workers and doctors to help both you and them

provide the most suitable care.

NICE (the National Institute for Health and Care Excellence) [guidelines](#) suggest that if you are involved in your friend or relative's care in this way, they should be shown a copy of the record of the meetings and what you have said.

## Encourage them to carry on with treatment

If your friend or relative is taking part in a drug treatment programme or receiving a talking treatment, you may be able to encourage them to:

- stick to their treatment plan
- go to appointments
- meet their targets

## Spend positive time with them

It can greatly help your friend or relative if you:

- be there for them
- be honest with them
- listen to them if they want to talk
- spend time together, perhaps joining in with activities they enjoy

## Help in an emergency

If your friend or relative doesn't seek help, and you think they are putting themselves or others at risk, their '[nearest relative](#)' (as defined under the [Mental Health Act \(MHA\)](#)) can ask for a [mental health assessment](#) to be carried out.

Under the MHA, they can be compulsorily detained in hospital for further assessment and treatment if necessary. You may wish to discuss the consequences of taking this action with other friends or family members first. For more information, see [Mental Health Act](#) and [Sectioning](#).

## Look after yourself

It can be very difficult to try to support someone whose problems are associated with their use of recreational drugs or alcohol.

You may find it helpful to discuss your feelings and concerns with someone else, such as a counsellor, or to join a support group, such as those provided by your local [Adfam](#) or [Families Anonymous](#).

## Useful contacts

### Mind's services

- [Helplines](#) – our Infolines provide information and support by phone, email and text.
- [Local Minds](#) – provide face-to-face services across England and Wales. These might be talking therapies, peer support and advocacy.
- [Side by Side](#) – our supportive online community for anyone experiencing a mental health problem.

### Other organisations

#### Adfam

[adfam.org.uk](http://adfam.org.uk)

Information and support for friends and family of people with drug or alcohol problems.

#### Alcoholics Anonymous (AA)

[0800 9177 650](tel:08009177650)

[help@aamail.org](mailto:help@aamail.org) (email helpline)

[alcoholics-anonymous.org.uk](http://alcoholics-anonymous.org.uk)

Help and support for anyone with alcohol problems.

#### British Association for Behavioural and Cognitive Psychotherapies (BABCP)

[babcp.com](http://babcp.com)

Information about cognitive behavioural therapy and related treatments, including details of accredited therapists.

#### Club Drug Clinic

[020 3317 3000](tel:02033173000)

[clubdrugclinic.cnwl.nhs.uk](http://clubdrugclinic.cnwl.nhs.uk)

Information and support for people worried about their use of recreational drugs. The clinic offers help in the London boroughs of Kensington & Chelsea, Hammersmith & Fulham and Westminster.

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## **Cocaine Anonymous UK**

[0800 612 0225](tel:08006120225)

[helpline@cauk.org.uk](mailto:helpline@cauk.org.uk)

[cauk.org.uk](http://cauk.org.uk)

Help and support for anyone who wants to stop using cocaine.

## **DrugWise**

[drugwise.org.uk](http://drugwise.org.uk)

Information about drugs, alcohol and tobacco.

## **Erowid**

[erowid.org](http://erowid.org)

Information about psychoactive substances, including prescribed drugs.

## **Families Anonymous**

[0207 4984 580](tel:02074984580)

[famanon.org.uk](http://famanon.org.uk)

Support for friends and family of people with drug problems.

## **FRANK**

[0300 123 5600](tel:03001235600)

[talktofrank.com](http://talktofrank.com)

Confidential advice and information about drugs, their effects and the law.

## **GOV.UK**

[gov.uk](http://gov.uk)

Lists government services and information.

## **Marijuana Anonymous**

[0300 124 0373](tel:03001240373)

[helpline@marijuana-anonymous.org.uk](mailto:helpline@marijuana-anonymous.org.uk)

[marijuana-anonymous.co.uk](http://marijuana-anonymous.co.uk)

Help for anyone worried about cannabis use.

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### **Narcotics Anonymous**

[0300 999 1212](tel:03009991212)

[ukna.org](http://ukna.org)

Support for anyone who wants to stop using drugs.

### **National Institute for Health and Care Excellence (NICE)**

[nice.org.uk](http://nice.org.uk)

Produces guidelines on best practice in healthcare.

### **NHS UK**

[nhs.uk](http://nhs.uk)

Information about health problems and treatments, including details of local NHS services in England.

### **Progress – National Consortium of Consultant Nurses in Dual Diagnosis and Substance Use**

[dualdiagnosis.co.uk](http://dualdiagnosis.co.uk)

Website for nurses, which includes information for people with dual diagnosis.

### **Turning Point**

[turning-point.co.uk](http://turning-point.co.uk)

Health and social care services in England for people with a learning disability. Also supports people with mental health problems, drug and alcohol abuse or unemployment.

### **We Are With You**

[wearewithyou.org.uk](http://wearewithyou.org.uk)

Supports people with drug, alcohol or mental health problems, and their friends and family.