

Hallucinogens Fact Sheet

Common Hallucinogens

- LSD (acid, blotter), PCP (angel dust, horse tranquilizer, elephant, hog), DMT, MDMA (ecstasy, euphoria, x, xtc, Adam)
- Also includes mescaline (from peyote cactus) and psilocybin (from magic mushrooms/shrooms)

Description/Overview

- Affects, in a dramatic way the perception, thought/mental processes, self-awareness, sensations and emotions/mood
- LSD is the most well known, and most powerful of this class of drugs
- Also known as “psychedelic drugs” for their mind-altering effects (for example hallucinations, both visual and auditory)
- Most commonly taken orally, but can also be smoked, sniffed or injected

Short – Term Side Effects

- Each hallucinogen has specific effects, and effects are variable, but generally speaking:
 - Short-term memory impaired
 - Thinking and concentration impaired
 - Intensification of smells, vision and hearing
 - Can experience “depersonalization”, where a person can feel as though they are observing themselves from outside their body
 - Effects have been described as pleasant, with a sense of insight
 - Effects have been described as unpleasant, causing feelings of panic and/or distress

Long –Term Effects

- *Flashbacks* (experiencing the same sensations without actually taking the drug) can occur days, weeks, or months after use (usually do not occur longer than 6 months)
- Frustration,
- Apathy and a lack of interest in the future

Dependence Potential

- Although more research is required, *tolerance* (needing more of the drug to produce the same effect) of hallucinogens does not generally develop.
- Users can develop *psychological dependence* (feeling like they need the drug)

Withdrawal

- There has been no withdrawal reactions observed after long term use stops.