



TECH b.e.a.t

Dedicated to Reporting Developments in Technology for Law Enforcement, Corrections, and Forensic Sciences

Meth = Death

With a quiet, matter-of-fact manner, a man tells his story of methamphetamine addiction. His appearance at first seems almost ordinary, yet somewhat disconcerting. It's not until he recounts the night that he tried to shoot himself in the face that the viewer realizes the man's face shows the effects of extensive plastic surgery.

This sobering account is just one of many from a CD-ROM titled *Meth = Death*, produced by the Putnam County (Tennessee) Health Department, the 13th Judicial District Drug Task Force, and Tennessee Tech University's BusinessMedia Center. Putnam County, along with the National Institute of Justice's (NIJ) Rural Law Enforcement Technology Center (RULETC), is distributing the educational CD at no cost.

"It's one of the best programs we've ever seen on meth, and one of the best instructional aids we've seen overall," says Rod Maggard, director of RULETC, located in Hazard, Kentucky. According to Maggard, NIJ had directed his Center to either locate or produce an educational piece on methamphetamine. When he and his deputy director saw *Meth = Death* during a May 2005 law enforcement conference in Gatlinburg, Tennessee, they knew they could stop looking.

Meth = Death uses video and graphics in an interactive format that targets a number of different audiences: police, sheriff, fire, emergency medical services, public works, real estate, hotel/retail, environment, courts, public health, treatment, hospitals, child services, educators, grades K-2, grades 3-4, grades 5-8, and grades 9-12. For most audiences, information is broken down into the categories of meth facts, meth lies, medical impact, financial impact, and testimonials. However, the sections for younger children include only video clips and games. The CD also includes a video clip montage titled "Community Action," several games, stills from a poster contest, and a Get Help section that includes links and an overview.

"When I first became a health educator, I worked in probation, and I saw how meth had hit Tennessee," says Jerrod Wright of the Putnam County Health Department. He came up with the idea to create the CD, pulled together

a cooperative effort involving several State agencies, polled numerous experts, and gathered information from numerous resources. Students from Monterey High School helped put together the youth portion of the curriculum, and Putnam County received funding through the 6th Congressional District and Bill Gibson, District Attorney General, 13th Judicial District Attorney's Office.

MESSING WITH METH

Methamphetamine unfortunately may be one of the most poorly understood drugs of abuse in the United States—possibly due to its entirely synthetic nature and its lower national profile compared to marijuana and cocaine. However, according to the White House Office of National Drug Control Policy—

- Methamphetamine abuse can lead to psychotic behavior including intense paranoia, visual and auditory hallucinations, and out-of-control rages that can result in violent episodes.
- Chronic users at times develop sores on their bodies from scratching at "crank bugs," which describes the common delusion that bugs are crawling under the skin.
- Long-term use of methamphetamine may result in anxiety, insomnia, and addiction.
- Even after methamphetamine use is stopped, several withdrawal symptoms can occur, including depression, anxiety, fatigue, paranoia, aggression, and an intense craving for the drug.
- Psychotic symptoms can sometimes persist for months or years after use has ceased.
- Chronic methamphetamine abuse can result in inflammation of the heart lining and, for injecting drug users, damaged blood vessels and skin abscesses.

Continued on page 2

Messing With Meth (continued)

- Social and occupational connections progressively deteriorate for chronic methamphetamine users.
- Acute lead poisoning is a potential risk for methamphetamine abusers because of a common method of production that uses lead acetate as a reagent.
- Medical consequences of methamphetamine use can include cardiovascular problems such as rapid heart rate, irregular heartbeat, increased blood pressure, and stroke-producing damage to small blood vessels in the brain.
- Hyperthermia and convulsions can occur when a user overdoses and, if not treated immediately, can result in death.
- Research has shown that as much as 50 percent of the dopamine-producing cells in the brain can be damaged by prolonged exposure to relatively low levels of methamphetamine and that serotonin-containing nerve cells may be damaged even more extensively.
- Methamphetamine abuse during pregnancy can cause prenatal complications such as increased rates of premature delivery and altered neonatal behavior patterns, such as abnormal reflexes and extreme irritability, and may be linked to congenital deformities.
- Methamphetamine abuse, particularly by those who inject the drug and share needles, can increase users' risks of contracting HIV/AIDS and hepatitis B and C.
- Methamphetamine is easily produced in clandestine laboratories or meth labs using a variety of ingredients available in stores. The manufacturing of methamphetamine is called "cooking."
- Cooking a batch of meth can be very dangerous due to the fact that the chemicals used are volatile and the by-products are very toxic.
- Meth labs present a danger to the meth cook, the community surrounding the lab, and the law enforcement personnel who discover the lab.
- A Center for Disease Control and Prevention study on hazardous substance-release events found that methamphetamine labs caused injury to 79 first responders (police officers, firefighters, EMTs, and hospital personnel) in 14 States participating in the study. The most common injuries were respiratory and eye irritation, headache, dizziness, nausea and vomiting, and shortness of breath.
- In addition to the dangerous nature of methamphetamine production, the labs are often booby-trapped and workers are well armed.

Wright notes that although some of the information on the CD is specific to Tennessee, most of it is generic enough to be used anywhere. In addition to orders from 40 States, Putnam County has filled orders from Canada, Australia, the Netherlands, and New Zealand. In all, Putnam County distributed 6,000 CDs in the first 3 months the tool was available and has received much positive feedback, including feedback from rehabilitation centers.

"So many people worked on this that I can't possibly thank everybody. It was really a joint effort, and everyone did an excellent job," Wright says. "It shows what a community can do when they get behind a project."

Between June and August 2005, Maggard says, his Center distributed more than 1,300 copies free of charge to rural and small law enforcement agencies.

For more information about the Meth = Death CD-ROM, visit www.metheducation.com or contact the Rural Law Enforcement Technology Center, 866-787-2553 or ruletc@aol.com. Ordering information can be found on the website; however, material from the CD cannot be downloaded from the site.

For a comprehensive source of information about methamphetamine use and its physical and social consequences, visit MethResources.gov, a website sponsored by the White House Office of National Drug Control Policy, the U.S. Department of Justice, and the U.S. Department of Health and Human Services. The site provides information about publications and research, upcoming conferences, programs, funding, training and technical assistance, policies and legislation, and related links.

The National Law Enforcement and
Corrections Technology Center System
Your Technology Partner

www.justnet.org
800-248-2742



This article was reprinted from the Winter 2006 edition of *TechBeat*, the award-winning quarterly newsmagazine of the National Law Enforcement and Corrections Technology Center system, a program of the National Institute of Justice under Cooperative Agreement #2005-MU-CX-K077, awarded by the U.S. Department of Justice.

Analyses of test results do not represent product approval or endorsement by the National Institute of Justice, U.S. Department of Justice; the National Institute of Standards and Technology, U.S. Department of Commerce; or Aspen Systems Corporation. Points of view or opinions contained within this document are those of the authors and do not necessarily represent the official position or policies of the U.S. Department of Justice.

The National Institute of Justice is a component of the Office of Justice Programs, which also includes the Bureau of Justice Assistance, Bureau of Justice Statistics, Office of Juvenile Justice and Delinquency Prevention, and Office for Victims of Crime.