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LSD

Situation Report

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Drug Enforcement Administration Office of Intelligence Strategic Intelligence Section **Domestic Unit**

February 1992

ADMINISTRATOR'S MESSAGE

This report presents the Drug Enforcement Administration (DEA) assessment of the current LSD situation in the United States. It is the product of reports from DEA field offices and Federal health care agencies.

Although LSD abuse accounts for a small portion of the overall drug abuse problem in the United States, it is nevertheless a cause for serious concern. Due to the ability of LSD traffickers to control dosage potencies, today's LSD is relatively low-potency compared to the LSD available in the 1960s and 1970s. As a result, many users now believe the LSD of the 1990s is "safe." This false perception, coupled with LSD's increased availability and low cost, has enhanced its appeal--especially among many younger people.

DEA must continue working to dispel the deceptive sense of security that surrounds this powerful hallucinogen and to deter its use by a new generation.

MITC. Bonner

Robert C. Bonner Administrator of Drug Enforcement

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EXECUTIVE SUMMARY

DEA reporting indicates that LSD is available in at least retail quantities in virtually every state in the United States and that availability is increasing in a number of states. The sources of supply for most of the LSD available in the United States are located in the northern California area.

Retail-level distribution networks in the United States are generally comprised of young adults who have known each other through long years of association and common interests. At the wholesale production and distribution level, LSD remains tightly controlled by California-based organizations which have operated with relative impunity for over two decades.

DEA reporting indicates that an increasing number of individuals are attempting to manufacture LSD. Many of these individuals are not associated with the traditional northern California groups that are believed to have produced most of the LSD available in the United States since the late 1960s.

Public and private mail systems appear to be the primary means used for the transportation and distribution of retail and wholesale quantities of LSD.

LSD is relatively inexpensive with an average dosage unit or "hit" costing approximately \$5, and often as little as \$1 or \$2. Retail-level doses are seen primarily in blotter paper form.

Current LSD potency or strength, which ranges from 20 to 80 micrograms per dosage unit, is considerably below levels reported during the 1960s and early 1970s when potency ranged from 100 to 200 micrograms (or higher) per dosage unit.

LSD-related arrests by DEA increased 101 percent from FY 1989 to FY 1991. Additionally, arrests of LSD Class I and II major violators rose from 19 to 85 during that same period--more than a fourfold increase. Arrest data indicate that LSD violators are overwhelmingly young white males (under 30 years of age).

Analysis of Drug Abuse Warning Network (DAWN - see Appendix 3) data reflects a precipitous increase (44%) in the number of LSD-related hospital emergency room episodes from 1986 to 1987, and moderate increases each year from 1987 to 1989. From 1989 to 1990, the number of LSD-related hospital emergency room episodes remained stable. DAWN data indicate that nearly 50 percent of LSD-related emergency room episodes involved individuals who were young, under the age of twenty, white (80%), and male (76%).

The National Institute on Drug Abuse (NIDA)-sponsored National Household Drug Use Survey estimates that over 10 million people (mostly under 35 years of age) have used LSD at least once.

In 1990, the National High School Senior Survey reported for the first time that more students used LSD than cocaine during the year.

The National High School Senior Survey also found that 55 percent of the seniors who responded felt that people who ingested LSD only once or twice were not at great risk of harming themselves. Additionally, over 40 percent of the seniors reported that it would be either "fairly easy" or "very easy" to obtain LSD.

The American College Student Survey also reflected an increased use of LSD by its sample population during 1990.

Chapter 1 - Availability, Distribution, and Trafficking

DEA reporting indicates that LSD is available in at least retail quantities in virtually every state in the United States and that availability is increasing in a number of states.

In the last two years, DEA seized or purchased LSD in 33 states and the District of Columbia. LSD availability has been reported by either DEA offices or state and local police authorities in many of the remaining 17 states. Northern California appears to be the source of supply for most of the LSD available in the United States.

LSD is available in several forms, including blotter paper, tablets, gelatin, sugar cubes, and liquid. Most of the retail-level doses are in the blotter paper form, and tablets can be purchased in several areas. Microdots are available in California, Vermont, Indiana, Illinois, Michigan, and New Jersey. Gelatin in the "windowpane" variety has been reported in Michigan and sugar cubes are available in Colorado and the Washington, D.C. area. Personal use doses of liquid LSD in vials have also been reported in Illinois, New York, West Virginia, and Colorado.

See Appendices 1 and 2 for highlights of LSD availability throughout DEA's 19 Field Divisions.

LSD Availability

DEA reporting indicates that LSD is available in at least retail quantities in virtually every state and that availability is increasing in a number of states. Reporting also indicates that an increasing number of individuals/groups are manufacturing and distributing or attempting to manufacture and distribute LSD in the United States.

A Model for Measurement of LSD Distribution

(1) Retail or user level quantities range from 1 to 10 dosage units.

(2) Low-level distributors sell 50 to 100 dosage unit quantities.

(3) Mid-level distributors sell 1,000 dosage unit quantities as well as multiples of 1,000. These distributors normally have more than one source of supply and sell to several lower-level dealers.

(4) The sources of supply for gram distributors are in all likelihood located in northern California. These sources normally convert LSD from powder or liquid form to blotter form.

(5) Multigram distributors travel to California to obtain LSD personally and are in association with numerous lower-level dealers.

(6) LSD producers fall into two groups. The first is composed of chemists, manufacturers, and distributors located in northern California who work together in close association. These violators are normally major manufacturers capable of distributing LSD nationwide. The second group is composed of producers who work independently, and these producers are encountered in almost any part of the country. However, their product is intended for local consumption only.

Distribution and Trafficking

Lower-level distribution of LSD usually occurs in one of three ways. In the first, an individual attends a rock concert, meets a source of supply, and exchanges phone numbers. Normally, these purchases are for retail quantities up to 100 doses. Secondly, should this individual decide to continue distributing, he/she then calls the source for additional amounts. Usually the source has either continued on the concert tour or has returned home. which is frequently northern California. If the source intends to stay on the tour--thus making subsequent communication difficult--the source provides the phone number of an associate for future orders. After the initial purchase, almost all transactions are made via the public and private mail systems. Payments to a source of supply are usually

made through legitimate money wiring services. Thirdly, some dealers travel directly to California to meet their sources of supply.

Reporting indicates that shipment methods used to transport both large and small quantities of LSD are often similar. LSD is frequently concealed in greeting cards, cassette tapes, or articles of clothing that are mailed to a post office box established by the recipient. This post office box is usually listed under a fictitious name or business. Normally, no return address is provided on the package or envelope. Moreover, it is suspected that some multigram distributors will travel to their source in order to obtain supplies.

Theories on LSD Trafficking

LSD trafficking and distribution occur on several levels. Local distributors sell retail quantities of up to 100 doses, and local wholesalers traffic in quantities from 100 to 1,000 doses. Gram and multigram dealers convert the powder to useable forms and sell to local distributors.

Law enforcement organizations have been largely unsuccessful at targeting the upper echelon of LSD trafficking organizations during the last 15 years or so. In most instances, when lower and midlevel dealers are arrested, they cannot or will not identify their sources of supply, who are generally multigram dealers.

Patterns at the highest wholesale trafficking/ distribution levels are not well understood. However, three models exist which outline patterns at these higher levels, and these may help explain how this activity occurs. These are the independent entrepreneurial model, the inner/outer circle group model, and the association model.

LSD Entrepreneurs

In the independent entrepreneurial model, LSD manufacturers and distributors are not part of the northern California group. These people entered the market due to increased demand and the oppor-

tunity for high returns on a small investment. Examples of this type of loosely structured organization have been noted in cases in Austin, Texas; New Orleans, Louisiana; Hartford, Connecticut; and Denver and Boulder, Colorado. The common feature in each of these cases is an individual or small group of individuals manufacturing LSD independent of any California source of supply. While the presence of some entrepreneurs who manufacture or attempt to manufacture LSD has been known for years, their number appears to have increased recently.

Inner Circle/Outer Circle or Single Group Model

Proponents of these models maintain that one closely-knit group exists which controls the vast majority of LSD manufacturing and distribution in the United States. Furthermore, they contend that the "inner circle" is composed of five to ten principal individuals who possess specialized func-These specialists include chemists, bulk tions. storage custodians, financial/transportation specialists, and executives who manage overall operations. The "inner circle" controls the means of manufacture. They assemble, run, disassemble, and store laboratory equipment and keep a reserve amount of LSD on hand for distribution. They sell from 10 to 200 gram lots to a limited number of multigram distributors. This "inner circle" presumably accrues multimillion dollar profits and only conducts business with the next level of distribution referred to as the "outer circle."

The "outer circle" consists of multigram distributors who supply a number of teams, groups, or individuals. They sell LSD at \$1,000-3,000 per gram and accrue an estimated \$300,000-600,000 per year.

LSD Association Model

An alternative to the Inner Circle/Outer Circle or Single Group Model is the Close Association Model. This model suggests that a small group of people located in northern California who have known each other for over two decades controls the manufacture and distribution of LSD. However, as

contrasted to the Inner Circle/Outer Circle theory, these people do not work in one structured organization. They come together as needed to acquire chemists, chemicals, working capital, etc. They work as consultants or advisors to one another in order to meet their common goal of producing and distributing LSD. They may work together to prepare and distribute one batch of LSD, but then leave the association until another opportunity arises. They have strong loyalty to each other and are living comfortably but are not thought to be motivated primarily by profit.

The following chart represents a traditional LSD distribution chain using the <u>Inner Circle/Outer</u> <u>Circle or Single Group</u> Model.



LSD: A SITUATION REPORT

Chapter 2 - Abuse Indicators

Drug Abuse Warning Network (DAWN)

Analysis of DAWN data¹ reflects a precipitous increase (44%) in the number of LSD-related hospital emergency room episodes from 1986 to 1987 and moderate increases each year from 1987 to 1989. From 1989 to 1990, the number of LSDrelated hospital emergency room episodes remained stable.

A closer analysis of DAWN data indicates an overwhelmingly youthful group of LSD users who are generally younger than users of the major illicit drugs of abuse, such as marijuana, cocaine, and heroin. Almost half of LSD emergency room episodes (EREs) are comprised of individuals who are under the age of 20. (Marijuana was the illicit controlled substance with the second greatest percentage of users under twenty). Furthermore, over 80 percent of the LSD EREs are composed of people under 30 years of age.

National Household Drug Use Survey

The U.S. Department of Health and Human Services' National Institute on Drug Abuse (NIDA) sponsors a survey of illicit drug use by members of the U.S. household population aged 12 and older. The most recent survey was conducted in 1990.

LSD lifetime use--which is defined as the use of LSD at least once--was found to be 5.3 percent during the most recent survey. This figure indicates that over 10,500,000 people are estimated to have tried LSD at least once. In 1985, the percentage of people who reported using LSD at least once was 4.4.

LSD lifetime use is considerably less than that for marijuana or cocaine, but more than that for heroin. During 1990, approximately 33 percent of the population (about 66.5 million people) reported having used marijuana at least once, while more than 11 percent (over 22 million people) reported using cocaine at least once. Less than one percent, or approximately 1.6 million people, used heroin at least once.

National High School Senior and American College Student Survey

The University of Michigan conducted the "16th National Survey of American High School Seniors" and the "11th Annual Survey of American College Students" in 1990 for the Department of Health and Human Services.

According to the "National High School Senior Survey", the percentage of high school seniors reporting use of LSD at least once in their lifetime rose from 7.2 percent in 1986 to 8.7 percent in 1990--an increase of 21 percent. Moreover, the number of seniors using LSD in the past year increased by 20 percent, from 4.5 percent in 1986 to 5.4 percent in 1990. Additionally, for the first time since the survey was initiated in 1975, a slightly higher percentage of high school seniors reported using LSD at least once in the past year (5.4 percent) as opposed to cocaine (5.3 percent). An equal percentage (1.9 percent) of LSD and cocaine users reported monthly use in 1990.

The survey also found that 85 percent of the seniors sampled believe that people who take LSD regularly are at great risk of harming themselves. Despite this finding, over half (55 percent) of the seniors felt that people trying LSD only once or twice were not at great risk of harming themselves. And over 40 percent of the group stated that obtaining LSD would be either "fairly easy" or "very easy."

The "11th Annual Survey of American College Students" reported an increase of almost one-fifth (18 percent) in lifetime use of LSD from 1986 to 1990. Moreover, yearly use was higher in 1990 (4.3 percent) than in any of the previous four years. However, monthly use of LSD has remained relatively stable and fairly low during the last five years.

¹ Estimates are based on DAWN data and generated by a DEA-developed mathematical model.

Parents Resource Institute for Drug Education (PRIDE) Surveys

The Atlanta-based PRIDE survey of 6th through 12th graders queried students about hallucinogenic use but not specifically about LSD use. Because relatively few students abuse phencyclidine (PCP) or other hallucinogens, the inference is that users are most likely to abuse LSD. In the 1990-91 survey, 4.9 percent of the students surveyed reported using a hallucinogen at least once during their lifetime, and this figure represents the highest percentage in the last four years. Weekly use was 1.4 percent and an increasing percentage of weekly users was noted at each year of schooling after the 6th grade.

Chapter 3 - Enforcement Indicators

Arrest Information

From FY 1986 through FY 1990, an average of approximately 119 defendants per year was arrested by DEA for LSD violations. During that same time frame, the number of Class I and II arrestees (i.e., major violators) averaged approximately 31 per year. These figures increased significantly during FY 1991 when a total of 205 defendants, 85 of whom were either Class I or II violators, were arrested for LSD violations.

LSD Violator Profile

An analysis of recent arrest data indicates that LSD violators are overwhelming young white males. From FY 1987 through FY 1991, approximately 69 percent of all LSD violators were under 30 years of age, 97 percent were white, and 81 percent were male. Analysis also reveals that the average age of violators has steadily declined since FY 1987 when 58 percent of all LSD violators were under 30 years of age. This compares to a figure of 77 percent reported during FY 1991. Moreover, the average age of Class I and II violators has also declined since 1987 when only 12 percent were under the age of thirty. This compares to a figure of 30 percent during FY 1991.

One arrest trend of note concerns the increasing percentage of LSD violators who are being charged with conspiracy and the concomitant decline in the percentage who are charged with possession, to include both single possession and possession with intent to distribute. During FY 1991, 32 percent of all LSD violators were charged with conspiracy, compared to 13 percent and 1 percent during FY 1988 and FY 1989, respectively. During FY 1991, less than 16 percent of all LSD violators were charged with possession, constant to 35 percent and 44 percent during FY 1988 and FY 1989, respectively.

Drug Removals

Preliminary FY 1991 LSD seizure removal statistics indicate that slightly over 300,000 dosage units were confiscated. This total is approximately 4 percent higher than that reported during the previous year.

In the last two years, DEA has confiscated LSD in 33 states and the District of Columbia. States in which DEA seized more than 10,000 dosage units of LSD in a single investigation during that same time frame include California (13 investigations), Maine, Montana, Colorado, Louisiana, and Washington, D.C. with one each. (The twenty largest LSD seizures made by DEA since 1980 are listed in Appendix 4.)

Price

LSD is relatively inexpensive. Its average price is approximately \$5 per retail dosage unit and costs less than \$1 in wholesale lots of 1,000 dosage units or more. When compared with marijuana (which sells from \$40-250 per ounce) or cocaine (which sells from \$40-175 per gram), LSD is perceived by many drug users as a bargain, especially if one considers the duration of its effects. Although there has been some fluctuation in the price of LSD nationally during the past several years, overall prices remain relatively low.

Potency

LSD potency or strength is measured in micrograms.¹ In the 1960s and early 1970s, LSD potency generally ranged from 100 to 200 micrograms per dosage unit or higher. Analysis of exhibits during the late 1970s indicated an average potency in the 30 to 50 microgram range. From the mid-1980s to the present, LSD potency has remained considerably below levels reported during the 1960s and early 1970s, and has generally been in the range of 20 to 80 micrograms per dosage unit. As a result of this comparatively low dosage level, many users perceive LSD as "safe", thus enhancing the drug's attractiveness.

¹Potency data should be viewed cautiously as a trend indicator because of the minute amounts of the substance analyzed and the resultant variations inherent in the testing procedures.

Chapter 4 - Conclusions

The availability of LSD has increased in the United States during the last two years. The vast majority of the users and distributors are young white males under age 25.

The sources of supply for most of the LSD available in the United States are located in northern California. However, increasing numbers of independent individuals and organizations are attempting to manufacture LSD.

In the northern California area, it is believed that a few individuals and organizations are working in a close association--but not necessarily on a permanent basis--which may control the manufacture and distribution of the majority of the LSD in the country.

The mail systems, both public and private, are the primary means used for distribution of retail and wholesale quantities of LSD.

Appendix 1 - Overview of LSD Availability in Domestic Field Divisions

Atlanta: Supplies are becoming more available, primarily at the retail level.

Boston: Availability varies with quantities ranging from retail to multi-thousand dosage units.

Chicago: Retail quantities are available.

Dallas: Supplies are becoming more readily available, primarily at the retail level.

Denver: Wholesale quantities are becoming increasingly available.

Detroit: Retail quantities are available throughout the Division. Wholesale quantities are also available in some areas.

Houston: Supplies are becoming more available at the retail and, to a lesser extent, wholesale level.

Los Angeles: Supplies are generally scarce throughout most of the Division. Retail quantities are available in Santa Ana, Santa Barbara, and Riverside.

Miami: Availability is limited except in some northern Florida cities where wholesale quantities are available.

Newark: Retail quantities are available throughout the Division. Wholesale quantities are also available at beach communities in southern New Jersey.

New Orleans: Retail and wholesale quantities are becoming increasingly available.

New York: Retail and, increasingly, wholesale quantities are available in New York City. Wholesale quantities are also available in some upstate areas.

Philadelphia: Retail quantities are available throughout the Division. Wholesale quantities are available in central and western Pennsylvania. Phoenix: Retail quantities are available.

San Diego: Retail quantities are available.

San Francisco: Source of supply for most of the LSD available in the United States. Both wholesale and retail quantities are available.

Seattle: Retail quantities are available.

St. Louis: Retail quantities are available.

Washington, DC: Limited availability except in northern Virginia and the Eastern Shore of Maryland, where wholesale quantities are available.

Appendix 2 - LSD Availability Report by DEA Field Division

1. Atlanta Field Division

a. Area of Responsibility. The Atlanta Field Division is responsible for DEA Resident Offices (ROs) located in Georgia, North Carolina, South Carolina, and Tennessee.

b. Summary. During 1991 LSD cases became more prevalent throughout the Division, but the drug is still seen most frequently in retail amountsexcept in Charlotte and Nashville where wholesale quantities are available. Intelligence information from state and local police organizations also indicated that LSD is becoming more readily available. College students and enlisted military personnel are the main abusers of LSD within the Division. LSD is usually sold in the blotter form.

c. **Prices.** LSD is usually sold on blotter papers which range in price from \$3-5 per dose, \$135-150 for 100 doses, \$500 for 1,000 doses, and \$1,900 to \$2,400 for a gram of crystal LSD powder, which can be dissolved in liquid for application to blotter paper. The blotter type is the form encountered most frequently within the Division.

d. Abuse.

(1) While use of marijuana and cocaine among students in the Atlanta area is down, the popularity of LSD and other hallucinogens has increased. The Parents Resource Institute for Drug Education (PRIDE) surveyed students in the Atlanta area in grades six through twelve regarding their drug use. The study found that the number of seniors who reported using LSD or other psychedelic drugs had increased from 4.1 percent in 1987 to 5.8 percent in 1989.

(2) The Community Epidemiology Working Group (CEWG) indicated that none of the available data resources in the Atlanta area keeps records of detected or self-reported use of LSD. Grady Memorial Hospital and other medical institutions in the Atlanta metropolitan area have ceased checking for hallucinogens due to their relatively low incidence. However, DAWN estimated EREs for the last three years show an increasing trend. There were an estimated 43 mentions in 1988, 56 in 1989, and 77 in 1990.¹

e. Availability and Trafficking.

(1) Some enlisted military personnel have been reported as LSD users at Fort Benning, Georgia, and Fort Bragg, North Carolina.

(2) In 1990, the Division reported infrequent encounters with LSD. However, at the same time, the Diversion Group conducted an informal telephone survey of state, local and municipal police agencies in Georgia regarding the abuse of controlled substances. The results showed that several rural counties in the state reported LSD availability in relatively small amounts within their jurisdictions. The survey found the following:

(a) In the rural Georgia counties, the Warner Robins PD, Monroe County Task Force, Glynn County Metropolitan Drug Squad, Bulloch County Sheriff's Department, Lowndes County, and the Bibb and Twiggs County Drug Squad, reported the presence of LSD. Usage varied from reports of occasional LSD encounters to a resurgence of availability.

(b) The (Drug) Task Force Commander for rural Monroe, Lamar, Pike, and Upson counties reported, "There is a resurgence of LSD and it is selling for \$3-5 per dose."

¹ Estimates contained in the "Abuse" section for all the Divisions are based on DAWN data and generated by a mathematical model developed by DEA.

2. Boston Field Division

a. Area of Responsibility. The Boston Field Division is responsible for DEA Resident Offices (RO) located in Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont.

b. Summary. The Division reported that LSD in both blotter and microdot forms is available in varying quantities throughout New England, especially in Rhode Island, Vermont, and Maine. During 1991, LSD availability in Vermont was reported to be in the thousand and multi-thousand dose quantities. Western Massachusetts, southern Connecticut and New Hampshire also report some LSD availability. LSD continues to gain popularity with the high school and college student population.

c. Prices. LSD is available in both microdot and blotter paper form. LSD prices range from \$2-8 per dose, \$80-250 for 100 doses, and \$3,700-4,000 for 5,000 doses.

d. Abuse. The CEWG for Greater Boston and Massachusetts noted that emergency room references to LSD have been steady since the middle of 1988, except for a surge during the second and third quarters of 1989. DAWN estimated ERs were 70 in 1988, 96 in 1989 and 89 in 1990. Massachusetts State Police reported that LSD activity has increased. A very small percentage (less than 2 percent) of clients admitted to treatment between FY 1988 and FY 1990 had used hallucinogens in the past month.

e. Availability and Trafficking.

(1) <u>Maine</u>.

(a) In Maine, the successful prosecution of a significant violator has effectively eliminated the supply within the state. This investigation was coordinated with eight other field divisions (Atlanta, Chicago, Detroit, Miami, Philadelphia, San Francisco, Seattle, and St. Louis). The blotter paper designs most frequently distributed were those of noted artist Michael Escher, and referred to as "Escher heads" (two heads surrounded by planets) and "Tropical Islands."

(b) Previously, Maine law enforcement authorities reported a moderate resurgence in LSD use during the 1989/1990 school year, but availability lessened somewhat after school adjourned.

(c) In October 1989, a cooperative case between DEA and the Maine State Police led to the arrest of two suspects and the seizure of 123,000 doses of LSD. The suspects' source of supply was traced to California.

(2) <u>Vermont</u>. LSD remains available in multithousand dose quantities in all major population centers in Vermont. Blotter paper with design of a star has been reported in the Burlington, Vermont area, and is available in 100 dose sheets. LSD tablets, in the purple microdot form, are also available in Vermont.

(3) <u>Massachusetts, New Hampshire and Rhode</u> <u>Island</u>.

(a) In 1990, during a joint investigation conducted by the Massachusetts and New Hampshire State Police Departments, approximately 5,000 doses were purchased from an organization distributing LSD in northern Essex County, Massachusetts and southern New Hampshire. The source of supply was believed to be in California.

(b) The Division reports that LSD continues to remain available in small quantities throughout the Hyannis and Cape Cod areas and is being sold in numerous high schools. Intermediate source cities for blotter LSD in the Cape Cod area are Worcester, Massachusetts and Providence, Rhode Island. LSD in blotter form with the "Silver Star" markings was encountered in the Cape Cod area. The source of supply was reported to be in the Berkeley, California area.

(c) In the Manchester, New Hampshire area several independent entrepreneurs were reported to be receiving and distributing quantities of LSD in blotter form. (d) In 1990, three cases in Massachusetts produced seizures of LSD. Blotter paper depicting the popular television character Bart Simpson has been encountered in Pittsfield, Massachusetts. Other designs encountered included unicorns, rainbows, and the Statue of Liberty. In another case, the Barnstable Task Force (a county located in southeastern Massachusetts) made undercover purchases of 1,000 doses. The Plymouth (Mass.) PD arrested two defendants and seized 500 doses of LSD as well as a quantity of marijuana.

(4) <u>Connecticut</u>. During 1990, the Connecticut Statewide Narcotics Task Force reported seizures of liquid LSD for the first time in years. In another Connecticut case, the Darien PD reported the seizure of 2,500 doses of LSD.

3. Chicago Field Division

a. Area of Responsibility. The Chicago Field Division is responsible for Resident Offices (RO) located in Illinois, Indiana, Minnesota, North Dakota, and Wisconsin.

b. Summary. Retail quantities of LSD, in blotter paper form, are available throughout the Division, with the exception of Indianapolis and Hammond (Ind.), where wholesale quantities are also available. LSD was available in limited quantities in Chicago, Minneapolis, Springfield, Milwaukee, and Fargo.

c. Prices. LSD prices ranged from \$2-4 per dose in the Chicago area and \$3-8 in the ROs.

d. Abuse. In Chicago, DAWN-estimated LSD emergency-room mentions increased from an estimated 110 in 1988, to 184 in 1989, and then dropped sharply to 65 in 1990. The Minneapolis RO reports limited demand for LSD. However, there was an increase in the estimated number of hospital ER mentions for LSD from 82 in 1988 to 139 in 1989, before a significant decline to 74 in 1990. The cause of these declines could not be determined.

e. Availability and Trafficking.

(1) The Indianapolis, Indiana RO reported blotter and microdot quantities available up to 1,000 doses and retailing for \$3 per dose; however, distribution is sporadic.

(2) The Hammond RO reported that demand for LSD is increasing and blotter and microdot forms of LSD are abundantly available.

(3) The Fargo RO reported that small quantities of LSD blotter paper are available at prices ranging from \$5-7 per dose, which is substantially more than six months previously.

(4) The Milwaukee RO also reported that small amounts of LSD are available in its area.

(5) The Springfield RO reported availability of blotter LSD. In 1990, the office immobilized a trafficking group that was capable of dealing 20,000 doses per month. The blotter form of LSD presently sells for between \$5-8 per dose.

4. Dallas Field Division

a. Area of Responsibility. The Dallas Field Division is responsible for Resident Offices (RO) located in Alpine, Amarillo, El Paso, Fort Worth, Lubbock, Midland, and Tyler, Texas, as well as the state of Oklahoma.

b. Summary. LSD appears to be making a moderate comeback within the Division. The Division reports that in the Dallas area local police departments and citizens are concerned about LSD abuse. The increased usage is centered among high school students from the more affluent areas. LSD has surfaced on some college campuses and is popular among white students.

c. Prices. The retail price is \$10 per dose.

d. Abuse. DAWN estimated data for Dallas displayed an initial decline--from 129 in 1988 to 77 in 1989--and then an increase to 84 in 1990.

e. Availability and Trafficking.

(1) The Dallas area is believed to be only a consumer area. No manufacturing or trafficking organizations have been identified or targeted. The Division believes that the introduction of LSD into the area is made by small, tight-knit groups who are usually associated socially or culturally.

(2) The Oklahoma City and Lubbock ROs have found LSD surfacing on college campuses among white students.

(3) In 1991, the Midland Post of Duty participated in a cooperative case which resulted in a seizure of LSD that had originated in Albuquerque, New Mexico.

5. Denver Field Division

a. Area of Responsibility. The Denver Field Division is responsible for DEA Resident Offices (RO) located in Colorado, New Mexico, Utah, and Wyoming.

b. Summary.

(1) The Division noted that there is a "resurgence" of LSD which dates back to 1988. LSD is available throughout the Division, but more readily in certain areas--specifically Boulder, Denver, Salt Lake City, and Steamboat Springs--than others. Boulder serves as a regional source of supply with northern California the original supply site. In two separate investigations, attempted LSD manufacturers were arrested.

(2) Two cases concluded within Wyoming revealed that one of the sources of supply was in Boulder and the other was located in San Francisco. Most of the LSD was believed to have originated from a trafficking group located in the San Francisco Bay area.

c. Prices. LSD retails for \$3-5 per dose, wholesales for \$100 for 100 doses, and \$.75-1.00 per dose for 1,000 doses or more. Small quantities of LSD are available in the Salt Lake City area for \$3-5 per dose.

d. Abuse.

(1) LSD use by some military personnel has been reported. Investigations at the Advanced Air Training Facility at Lowry Air Force Base reported that LSD is the drug of choice among trainees.

(2) Most use continues to be by children and young adults in grade school, junior and senior high school, and college. DAWN estimated ERs for Denver originally rose from 89 in 1988 to 123 in 1989, and then remained stable at 127 in 1990. The Colorado Department of Health (Alcohol and Drug Abuse Division) reported that emergency room mentions for hallucinogens reached 92 for 1989, up from 68 for 1988. e. Availability and Trafficking.

(1) LSD is available in liquid, sugar cubes, and blotter paper forms. The prices range from \$3-5 per dose.

(2) LSD is and has been reported available in Boulder and Salt Lake City. Boulder serves as a regional distribution center.

(3) In August 1991, two investigations resulted in the arrest of individuals attempting to manufacture LSD.

(4) In 1990, the Cheyenne RO reported an increase in trafficking of LSD in the Sheridan and Casper, Wyoming areas.

6. Detroit Field Division

a. Area of Responsibility. The Detroit Field Division is responsible for DEA Resident Offices (RO) located in Michigan, Ohio, and Kentucky.

b. Summary. Retail and wholesale quantities of primarily the blotter paper form of LSD are available in several areas covered by the Division. While the blotter paper form is the most frequently encountered type of LSD, the CEWG reported that tablets (aka "microdots") and gelatin varieties (aka "windowpanes") are also available. Bulk quantities of liquid LSD are being imported from San Francisco and then applied locally onto blotter paper for distribution.

c. Prices. LSD costs \$2.50-7 per dose at the retail level. At the wholesale level, LSD has been sold for \$2-4 per dose in 100 dose quantities, and between \$.70-1.25 per dose in lots of 1000 or more.

d. Abuse.

(1) At the start of 1991, an incident was reported in which a high school student in a Detroit suburb put LSD in a teacher's cup of coffee. This event heightened the area's public awareness of the LSD problem. DAWN estimated ERs were 37 in 1988, 43 in 1989, and 29 in 1990.

(2) In June 1990, the CEWG reported that LSD, particularly in the form of microdots or small pills called "barrels", continued to reappear periodically in small amounts in the Detroit area. The Michigan Office of Substance Abuse Services reported that there had been 107 patient admissions in 1990 for treatment for hallucinogen abuse, compared with 96 such admissions in 1989. Most patients were white males, and their average age at admission was 22 years.

e. Availability and Trafficking.

(1) The Detroit, Columbus, Cleveland, and Saginaw Offices are reporting increased availability of LSD, with multi-hundred and multi-thousand dose quantities available. (2) The Saginaw RO reported that LSD is available in both microdot and blotter form. Prices range from \$2.50-7 per dose and retail to \$.70-.90 per dose for wholesale quantities of 1,000 or more.

(3) LSD is available in the Columbus area for
\$6-7 per dose retail, \$2-4 in 100 dose quantities, and
\$1 per dose for quantities of 2,000 or more.

(4) In June 1990, LSD began to appear in significant quantities in Akron, Ohio.

(5) In 1990, the Michigan State University police completed an investigation that resulted in the seizure of a few hundred LSD tablets in a case involving several present and former students.

7. Houston Field Division

a. Area of Responsibility. The Houston Field Division is responsible for DEA District (DO) and Resident Offices (RO) located in Austin, Beaumont, Brownsville, Corpus Christi, Eagle Pass, Galveston, Laredo, McAllen, and San Antonio, Texas.

b. Summary. The Division indicated that LSD was becoming more available, but usually at retail levels. Youths and white males and females under 25 years of age are the primary users.

c. Prices. Average retail prices have not changed from approximately \$5 per dose, with a range from \$3-6; however, wholesale prices have dropped recently to \$.80-.90 per dose for quantities of 1,000 doses or more.

d. Abuse. Houston is not included in the DAWN system, and no other abuse information was available.

e. Availability and Trafficking.

(1) Throughout the Houston area LSD is available in varying amounts. Throughout Harris county it is available in small quantities; however, larger quantities are being purchased in both the north and south ends of the county. Several local Houston-area PDs report having made undercover buys of LSD. The Houston DO has also bought LSD in blotter form in quantities of 1,000 doses. Initial reports indicate that the LSD exhibits are of high quality.

(2) LSD has been encountered in Laredo, northeastern San Antonio suburban schools, and in Austin. However, there is an absence of intelligence or investigative leads to indicate widespread use or clandestine manufacturing of LSD in the area. LSD prices were from \$3-5 per dose at the retail level and \$1 per dose at the wholesale level.

8. Los Angeles Field Division

a. Area of Responsibility. The Los Angles Field Division is responsible for DEA Resident Offices (RO) located in Riverside, Santa Ana, and Santa Barbara, California, in addition to Hawaii, Nevada, and Guam.

b. Summary. Within the Division, we have seen sporadic reporting and limited availability of LSD during the past several years, especially in the Los Angeles area. However, there have been reports of LSD availability in some of the resident offices, specifically Santa Barbara and Riverside.

c. Prices. Retail amounts of LSD sold for \$3-5 per dose, and 100-dose quantities for \$1-2.

d. Abuse. DAWN estimated ERs for Los Angeles were 189 in 1988, 205 in 1989, and 194 in 1990, and these totals are higher than the other DAWN cities. The CEWG reported that in 1990 LSD use among Japanese youths in Honolulu, Hawaii had increased and that it was being substituted for "Ice."

e. Availability and Trafficking.

(1) <u>California</u>. The Santa Barbara and Riverside ROs reported in 1991 that one dose of blotter acid was selling for about \$5. LSD is also available in the Santa Ana area, where one dose of blotter acid costs between \$3 and \$5.

(2) <u>Guam</u>. In 1990, the Guam RO reported making purchases of LSD. The drug had not been available for the past several years, but the RO reports it is making its way back into the Guam market.

(3) <u>Nevada</u>.

(a) The Reno RO reported that LSD was available in small quantities in the third quarter of 1991. Retail prices were \$4-5 per dose, for LSD in blotter form, which is referred to as "sheet acid." (b) In 1991, the Las Vegas RO reported that an arrested dealer revealed he was receiving LSD from a California source. The LSD was sent through the U.S. postal system and the payments returned via Western Union.

(c) In 1990, an increase of LSD availability was reported by the Las Vegas Police Department, the North Las Vegas Police Department, and the Nevada Division of Investigation. In July, negotiations for 500 doses of LSD at \$300 per sheet were conducted. The Las Vegas RO seized 6,500 doses of blotter acid, which had a potency of 38 micrograms and retailed for between \$5-10 per dose. The clandestine laboratory producing the LSD is reported to be somewhere in California.

(4) <u>Hawaii</u>. The Honolulu RO reported that LSD is occasionally available and costs approximately \$5 per dose.

9. Miami Field Division

a. Area of Responsibility. The Miami Field Division is responsible for DEA District (DO) and Resident Offices (RO) located in Florida, and Country Offices located in Haiti, Jamaica, Barbados, the Dominican Republic, the Bahamas, and Puerto Rico.

b. Summary. Some availability of LSD existed within the Division in 1991, specifically in the Ft. Lauderdale, Gainesville, Tallahassee and Jacksonville areas. Most investigations reveal that the source of supply was either in the San Francisco area or in Colorado. In 1990 LSD cases were conducted in the Miami area and in Panama City, Florida.

c. **Prices.** Currently, a single dose of LSD retails for between \$2 and \$4.

d. Abuse. Miami's DAWN estimated ER totals have increased significantly, but are still low: five in 1988, 22 in 1989, and 34 in 1990.

e. Availability and Trafficking.

(1) The Jacksonville RO reports fluctuating availability of LSD, which can be attributed to the large number of college students coming to Florida on spring break. In the Jacksonville area LSD is used primarily by young, white adults.

(2) In 1991, the Gainesville RO reported an investigation of a student attending a local community college who was suspected of manufacturing LSD and MDMA. Intelligence indicated that the suspect was capable of making approximately 600 doses of LSD at a time, and that each dosage unit was sold for \$4-5.

Analyst's Note: This case probably involved an individual who was applying liquid LSD to blotter paper and not manufacturing it.

(3) In the Tallahassee RO more than 1500 doses originating from a source of supply in Colorado were seized during 1991.

(4) In 1990, the Panama City RO encountered LSD in blotter form in sheets of 100 doses. The source of supply for the drug is reportedly from the San Francisco area.

10. Newark Field Division

a. Area of Responsibility. The Newark Field Division is responsible for DEA Resident Offices (RO) located in Atlantic City and Camden, New Jersey.

b. Summary. The Division reported in 1991 that LSD is becoming popular again in New Jersey, mainly among high school students and young adults. Philadelphia and New York City are reported to be the source areas for the LSD seen within the Division.

c. Prices. The price of LSD at the wholesale level ranges from 0.70-2.00 per tablet, while LSD in the blotter form is selling for 1.25-3.50. The retail price range of a dose of blotter paper ranges from 5-10, with LSD tablets ranging from 3-5 each.

d. Abuse. The CEWG reported that the abuse of LSD and other hallucinogens is seldom reported to any of the health indicator systems for the Newark area. DAWN estimated ERs for Newark were 35 in 1988, 33 in 1989, and 12 in 1990.

e. Availability and Trafficking.

(1) Philadelphia and New York City are believed to be the main source cities for LSD in New Jersey, where it is being distributed in blotter and microdot forms. LSD's popularity is concentrated among high school students and young adults up to the age of thirty.

(2) A popular LSD blotter stamp in New Jersey depicts the television character Bart Simpson. Several sightings of this blotter design have been made throughout the state as well as in other geographic areas (New England and Sweden).

Analyst's Note: This example demonstrates that LSD organizations attempt to appeal to youth, and possess the ability to adapt quickly to fads and trends that appeal to potential youthful users.

(3) Other blotter designs noted include unicorns with a picture of a dragon on the back, and a picture of a globe. LSD has also been found on plain blotter stamps without a design.

11. New Orleans Field Division

a. Area of Responsibility. The New Orleans Field Division is responsible for DEA Resident Offices (RO) located in Alabama, Arkansas, Louisiana, and Mississippi.

b. Summary. The Division reported that in 1991 LSD availability and abuse in the New Orleans area had "increased significantly," especially among college students and the "night club" crowd. However, the user groups also include high school students and older counterculture types or "hippies." LSD has replaced MDMA as the drug of choice for these two user groups. San Francisco is believed to be the source area for LSD found within the Division. The New Orleans DO arrested an individual who was attempting to manufacture LSD.

c. Prices. LSD prices range from \$1-10 per dose at the retail level, \$100-250 per sheet of 100 doses, and \$1,300-1,600 per book of 1,000 doses. LSD is considerably less expensive than MDMA in the New Orleans area. (MDMA, when available, currently sells for \$20-25 per tablet.)

d. Abuse. In 1991, the CEWG indicated that LSD in the blotter form is more available than in the past in the New Orleans area. DAWN estimated data for New Orleans ERs indicates a consistently low pattern, 36 in 1988, 42 in 1989, and 36 in 1990.

e. Availability and Trafficking.

(1) The reemergence of LSD appears to be linked to enforcement efforts to suppress MDMA trafficking in the New Orleans area. Many of the new LSD users were formerly MDMA users.

(2) LSD is flown to the area in crystal form, then converted locally to the blotter form by a process often referred to as "dipping." Three designs often encountered are plain white blotter stamps, palm trees, and lighting bolts. In June 1991, a new design was introduced to the area. It is referred to as "Lucky Charms" and is described as white blotter paper containing designs of hearts, clovers, stars, and moons. The paper used is also reported to be larger than most of the paper used in the area.

(3) In the Birmingham, Alabama area LSD retail prices range from \$1-3 per dose.

(4) The Baton Rouge RO reports that local police departments have noted the presence of retail quantities of LSD selling for \$5-10 per dose.

12. New York Field Division

a. Area of Responsibility. The New York Field Division is responsible for DEA Resident Offices (RO) located in Albany, Buffalo, Rochester, and Long Island.

b. Summary. With the exception of PCP, dangerous drugs are not a significant problem in the New York City area, where LSD investigations at the Federal, state, or local levels are rare. However, the Division reports that LSD availability is growing in the suburban and semi-rural towns of upstate New York, where LSD arrests are also increasing. The New York State Police Laboratory, which serves upstate New York primarily, reported that the number of LSD exhibits examined is the third in frequency, following cocaine and cannabis.

c. Prices. Individual doses, which are almost always in blotter form, retail for \$2-5.

d. Abuse. The CEWG indicated that LSD barely surfaced on the streets of New York City or in the indirect indicators that a emonitored. DAWN estimated data for New York indicates an increasing (although relatively low when the size of the population is considered) number of ERs. There were 85 ERs in 1988, 91 in 1989, and 117 in 1990. Within the Division, abuse is highest among teenagers who tend to use LSD as a party drug.

e. Availability and Trafficking.

(1) LSD is reportedly available in upstate New York, especially in Buffalo and Rochester; however, it is not considered the drug of choice of serious drug users. It is used mainly by high schoolers and college-age people who generally consider it a safe drug. LSD is frequently used on an occasional basis (e.g. on weekends) and is often used in combination with alcohol.

(2) The Rochester RO reports that the southern tier (the city of Elmira, Livingston County and five other rural counties) in their area appears to contain the most trafficking. The RAIC said, "In the rural areas LSD is prevalent and is a real problem." LSD

continues to be available in multi-hundred dose lots at a wholesale price of \$1.75-2.00 per dose. According to a chemist at the Monroe County Crime Laboratory (where Rochester is located), "The exhibits of LSD are almost always blotter acid and average 35 to 40 micrograms in strength."

(3) The Albany RO reported that LSD trafficking in the capital district is increasing slightly.

13. Philadelphia Field Division

a. Area of Responsibility. The Philadelphia Field Division is responsible for DEA Resident Offices (RO) located in Delaware and Pennsylvania.

b. Summary. Some LSD is available within the Division, specifically in Allentown and Pittsburgh. However, LSD abuse is not a major problem, except in the central Pennsylvania areas of Hershey and Cumberland County. LSD is used mainly by high school students.

c. Prices. LSD prices range from \$2.50-5 per dose retail, \$1-4 per dose for 100 doses, and \$.75-1.25 for quantities of 1,000 doses or more.

d. Abuse. DAWN estimated data indicated a declining pattern in the Philadelphia area over the last three years: 83 ERs in 1988, 75 in 1989, and 49 in 1990.

e. Availability and Trafficking.

(1) In the Hershey area, LSD has become a major drug of abuse and sells for a wholesale price of \$2.50-4.00 per dose (when purchased in lots of 100). Single doses sold for \$4-5.

(2) In the Dauphin County area, LSD is being used primarily in suburban and college town areas. The majority of the users are 16 to 25 years of age and are middle to upper-class Caucasians.

(3) Minimal amounts of LSD are available in western Pennsylvania. Prices for LSD in blotter form ranged from \$.75-1.25 for wholesale quantities of 1,000 doses or more.

(4) Several DEA sources as well as the Philadelphia Police Department were consulted regarding LSD availability, and the sources agree that it has not been seen on a regular basis in the area. One contact from the Philadelphia PD stated that "We have not seen hallucinogens in over a year."

14. Phoenix Field Division

a. Area of Responsibility. The Phoenix Field Division is responsible for DEA Resident Offices (RO) located in Sierra Vista, Tucson, and Yuma, Arizona.

b. Summary. LSD is not frequently encountered within the Division; it's available in retail amounts but few cases reach the Federal level.

c. Prices. Blotter paper is available for \$1 to \$4 per dose and \$100 to \$120 per sheet of 100 doses.

d. Abuse. The CEWG indicated that state and local police departments reported that LSD is readily available in retail quantities. Blotter form was the most common and is inexpensive at \$1-1.50 per hit. Among high school students, Blotter acid is called "Sid Vicious." DAWN estimated mentions for Phoenix indicated 75 ERs in 1988, 60 in 1989, and continued a steady, slight decline to 53 in 1990.

e. Availability and Trafficking. In Phoenix, state and local PDs report that LSD is infrequently available, and liquid LSD has been reported as occasionally available. Users are principally in high school and in the under-20 age group. Prices range from \$1-4 per dose.

15. San Diego Field Division

a. Area of Responsibility. The San Diego Field Division is responsible for Resident Offices (RO) located in Calexico, Tecate, and San Ysidro, California.

b. Summary. A recent cursory assessment of the availability of LSD within the Division indicated that there is a marginal increase at the retail level.

c. Prices. LSD prices for a sheet of 100 hits of 1/4" squares of blotter acid cost \$75 and one dose, which is 1" by 1" and referred to as a "tab" in this area, costs from \$3-5.

d. Abuse. The Division reported that the user population continues to consist primarily of transient types. They consist predominantly of older hippies and beach bums who tend to frequent northern San Diego county. Sources indicated that some in the "jet set" group and in private cocktail clubs were also users. DAWN estimated data for San Diego indicated few overall ERs with sharp fluctuations: 31 ERs in 1988, 9 in 1989, and 49 in 1990. The CEWG reports did not mention LSD in the San Diego area.

e. Availability and Trafficking. LSD is currently popular among some individuals in the military. The periodic use of LSD by enlisted military personnel reportedly occurs at Camp Pendleton, a Marine Corps installation located in northern San Diego county. This abuse is not widespread, but typically involves newcomers to the base or occurs on a weekend fling.

16. San Francisco Field Division

a. Area of Responsibility. The San Francisco Field Division is responsible for DEA Resident Offices (RO) located in Fresno, Sacramento, and San Jose.

b. Summary. The Division reported that large amounts of LSD in the microdot, blotter, liquid, and crystal forms are readily available in the San Francisco area. This resurgence of LSD availability can be traced back to the start of 1990, when substantial numbers of LSD investigations were conducted by local law enforcement organizations. The presence of LSD conversion laboratories was noted within the Division. High schoolers, collegeage users, as well as military personnel are involved in abuse of the drug. The major distributors for most of the LSD supplied to the rest of the country are believed to be located in this area.

c. Prices. Prices of LSD range from \$1-8 per single dose; 1,000 doses sell for between \$0.25 and \$2.00 per dose; grams sell for \$2,400-6,000 each.

d. Abuse. DAWN estimated ERs for San Francisco have shown a relatively high but stable pattern over the last three years. There were 164 ERs in 1988, 135 in 1989, and 173 in 1990.

e. Availability and Trafficking.

(1) In 1991 the Division indicated that there is a vast conspiracy centered in the city of Berkeley and Main and Sonoma counties, which distributes LSD throughout the country utilizing the mail system.

Analyst's Note: This information has been confirmed countless times in LSD investigations throughout the country.

(2) Information indicates the presence of LSD laboratories. Intelligence information also suggests that these labs are conversion laboratories that transfer the liquid LSD onto various types of blotter paper. It is assumed that crystal LSD is produced outside the Bay area.

(3) The San Jose RO reports that LSD use is centered around the Santa Cruz area and is distributed mainly among transients. However, the RO also noted that "some LSD usage is found among the lower-ranking enlisted military personnel from Fort Ord." Wholesale prices range from \$0.25 or less --a decreasing price--to \$3-5 per dose at the retail level.

(4) The Fresno RO noted that isolated cases of personal LSD use had occurred in FY-1991; however, the Naval Investigative Service at Lenmoore Naval Air Base, which is within the Fresno RO's jurisdiction, reported that naval personnel are purchasing 300-dose quantities of LSD from a source in the San Francisco Bay area.

(5) In 1990, the Division provided an early warning, when it reported that "it appears LSD is reemerging in the San Francisco area evidenced by substantial seizures by local law enforcement (agencies)." This conclusion was influenced by the comprehensive "Narcotics Situation in Northern California", which is summarized below.

(6) In 1989, due to the Division's concern about the escalation of the dangerous drug abuse problem in northern California, a survey was initiated and was distributed to all police and sheriffs' departments within that area. The responses from 107 of these agencies follow.

The Narcotics Situation In Northern California (Published by the San Francisco Field Division in February 1990)

Analysis of the survey concluded that "LSD abuse appears to be on the rise again," and also that "young people from grade school to high school are experimenting with the hallucinogen." Its popularity, however, extends to adults and all age groups. In most communities, LSD was available in retail amounts, but was found in gram quantities in Marin County. Most of the police departments who responded stated that LSD brought into their areas originates in the San Francisco Bay area, frequently from Berkeley. Other sources included Stockton, Santa Cruz, Sacramento and San Jose.

LSD prices varied widely within the state. The price of a dose ranged from \$1-10. A sheet with 100 hits sold for between \$40 and \$300, with a gram selling for \$2,000.

17. Seattle Field Division

a. Area of Responsibility. The Seattle Field Division is responsible for DEA Resident Offices (RO) located in Alaska, Oregon, Idaho, Montana, and Washington state.

b. Summary. LSD is available in retail quantities in some of the Resident Offices, but is not a serious problem within the Division. LSD availability in western Washington and Idaho has risen and local police departments in Seattle report detecting more street quantities. LSD is available in retail quantities in southern Oregon and in other parts of the state of Washington.

c. Prices. LSD retails for between \$2.50 and \$5 per dose and \$250-400 per 100 doses.

d. Abuse. The CEWG disclosed that all area enforcement agencies reported increasing availability of LSD in local high schools and on college campuses. The 24-Hour <u>Helpline</u> reported that calls concerning problems with hallucinogens increased 150 percent from 1988 to 1989. LSD was the second most frequently mentioned illicit drug (after marijuana) among youths calling the <u>Teen</u> <u>Hotline</u> since its inception in 1990. In contrast, DAWN estimated ERs for Seattle declined over the three-year period from 1988-1990 (from 122 to 113 to 78), but the overall number of ER mentions also declined during this period. Local prices remained consistent at \$2-5 per single dose and \$250-400 per 100 dose quantities.

e. Availability and Trafficking.

(1) LSD availability in western Washington and Idaho has increased. Local police departments in Seattle report detecting more street quantities than in the past. LSD is available in retail quantities in other parts of Washington as well as in southern Oregon.

(2) LSD is sporadically available in the Vancouver, British Columbia area.

18. St. Louis Field Division

a. Area of Responsibility. The St. Louis Field Division is responsible for DEA Resident Offices (RO) located in Illinois, Iowa, Kansas, Missouri, Nebraska, and South Dakota.

b. Summary. In 1991, LSD was available throughout the Division. Specifically, its presence was noted in retail quantities in the St. Louis area, Wichita, Kansas, throughout Iowa, and in the Sioux Falls, South Dakota area. Blotter paper with a purity in the 40-50 microgram range was most frequently encountered in this area.

c. **Prices.** Prices range between \$2.50 and \$7 per dose, with wholesale prices varying between \$150 and \$200 for a lot of 100 doses, when available.

d. Abuse. CEWG reported that LSD blotter paper is sporadically available in St. Louis, but is not seen with any frequency in the abuse indicators. DAWN estimated data indicated a low, stable pattern for St. Louis: 40 ERs in 1988, 38 in 1989, and 27 in 1990.

e. Availability and Trafficking.

(1) The Des Moines RO reports that "LSD is still available in small quantities throughout Iowa, particularly in blotter form, and within the college community. There does not appear to be any organized trafficking of this drug and quantities available are small." The area's source for LSD is usually San Francisco.

(2) Between March 27, 1990 and June 22, 1990 the Des Moines RO reported that the Iowa Division of Narcotics examined five exhibits of LSD in the blotter form.

(3) The Wichita RO reports that LSD is sold for between \$2.50 and \$4 per dose.

(4) Retail amounts (ten doses) have been encountered by the Sioux Falls RO. In 1990, LSD has been sold for \$150-200 for a lot of 100 doses and \$3-7 per single hit.

19. Washington Field Division

a. Area of Responsibility. The Washington, D.C. Field Division is responsible for Resident Offices (RO) located in Maryland, Virginia, and West Virginia.

b. Summary. The Division reported generally limited availability of LSD, with the exception of northern Virginia and Maryland's Eastern Shore.

c. **Prices.** Prices of LSD ranged from \$2-7 per dose and \$100-500 for a sheet of 100 doses of blotter paper.

d. Abuse. DAWN estimated ERs for Washington, D.C. show fluctuations from 99 in 1988, declining to 65 in 1989, then surpassing 1988 levels to 105 in 1990.

e. Availability and Trafficking.

(1) Use of LSD appears to be sporadic within the nation's capital.

(2) The Baltimore area has encountered limited LSD availability. In 1990 increased availability was noted in the military community of Ft. Meade. The source of the LSD is believed to be in California, with the laboratory(s) located in California or Nevada. LSD samples were purchased retail from \$3-5 per dose and wholesale from \$100-400 for 100 doses.

(3) In other parts of Maryland, Howard County and in the areas surrounding Ocean City, LSD has been reported as plentiful. In fact, the Howard County PD reported that LSD is making a comeback in its area. In contrast, limited availability has been reported in Anne Arundel County. Law enforcement authorities on Maryland's Eastern Shore reported a resurgence of LSD during the past six months, and blotter forms bearing the images of "eyeballs" and "camouflage" patterns are most prevalent. Primary user groups are junior and high school students.

(4) While the Charleston, WV RO noted that it does not regularly encounter LSD, it did purchase 4,500 hits of "cosmic" design blotter LSD in July 1990. The LSD had been acquired in Massachusetts and transported to West Virginia. The RO also seized a small number of vials of liquid LSD. The drug generally sells for \$3-5 per single dose and ranges from \$300-500 for 100 dose quantities.

(5) The Richmond RO noted limited availability of LSD. Single doses sold for between \$3 and \$7, while 100 microdots brought \$100-250. The price for 100 doses of blotter form ranged from \$200-350.

(6) In northern Virginia and in Fairfax and Prince William counties, law enforcement officials have noted a resurgence of LSD use. In a recent highly-publicized case at a local high school, several youths allegedly distributed more than 100,000 doses. California appears to be the source for this LSD.

Appendix 3 - An Explanation of the Drug Abuse Warning Network (DAWN)

DAWN is a Federally-funded program co-sponsored by the Drug Enforcement Administration and the National Institute on Drug Abuse. It collects information relating to drug abuse occurrences that have resulted in a medical crisis and subsequently have been identified as drug abuse episodes by participating hospital emergency room and medical examiner offices nationwide.

Participants

<u>Emergency Rooms</u>. Only those which are located in non-Federal, short-term general hospitals and provide service 7 days a week, 24 hours a day are considered. They are located in large metropolitan areas known as standard metropolitan statistical areas (SMSAs) along with a panel of facilities outside these areas which are referred to as the "National Panel." Approximately 700 facilities report to the system and the SMSAs account for about one third of the U.S. population.

<u>Medical Examiners</u>. Only those located in metropolitan areas (approximately 80) are considered. Data from the New York City SMSA does not include medical examiners from the city, but does include data from the outlying suburbs.

Reportability

<u>Emergency Rooms</u>. Four criteria must be met for a case to be reported: (1) the patient must be treated in the hospital emergency room; (2) the problem must be induced by or related to drug abuse; (3) the medical use of a legal drug or any use of an illegal drug must be involved; and (4) the reason for taking the substance was to induce psychic effects, a result of dependence, or a suicide attempt. In addition, the patient treated must be at least 6 years old.

Medical Examiners. The same criteria used for emergency rooms is also used for medical examiners.

Non-Reportability

The following are examples of non-reportable cases: (1) the use of alcohol alone; (2) adverse reactions from prescription medication; and (3) non-compliance with directions for taking legal drugs.

Episodes and Mentions

If a case meets the reportability criteria, it is considered an episode. For an emergency room incident, up to four drugs (excluding alcohol) can be mentioned per episode. In an episode involving a medical examiner, up to six drugs can be mentioned (excluding alcohol). As a direct consequence of this method, one cannot simply add the "mentions" for two or more drugs and conclude the number episodes in that manner. For example, if there were 10 "mentions" for cocaine and 10 "mentions" for heroin, 5 may have involved both drugs and thus only 15 episodes would have occurred.

Reported Characteristics

For each episode or "mention" some of the most useful characteristics recorded are SMSA, date, age, sex, race, reason for taking substance, route of administration, form of substance, source, and CSA schedule.

System Objectives

The data collected by the DAWN system serve four basic objectives. These objectives are to (1) identify substances associated with drug abuse episodes; (2) monitor drug abuse patterns and trends and identify new drugs or combinations of drugs being abused; (3) assess health hazards associated with drug abuse; and (4) provide data for national, state, and local drug abuse policy or program planning.

Data Limitations

Emergency Rooms. Two major limitations exist.

(1) <u>Incomplete Reporting</u>. Occasionally, facilities may not report for varying periods of time. This situation results in an artificial data variance. As a result, trends in the data may be masked, which is contrary to the system's primary objectives. One approach in the attempt to eliminate this problem is to create a "consistent panel" for the trending period, and using a facility's data only if it has reported for a high percentage (in most cases 90 percent) of the period in question. While this method does eliminate the artificial variability, it also has two major deficiencies. First, it does not provide a continuous database. For different periods of time, different panels with different facilities cannot be compared properly. In addition, this method eliminates reliable data from the facilities which do not report consistently. The net effect is that actual conditions are not represented realistically.

DEA's approach to the problem was to develop a mathematical model to predict ER data when a facility does not report. The data are then presented in terms of estimated emergency room episodes or "mentions," which are a combination of the data actually reported and that which is estimated for the non-reporting facilities.

(2) <u>"Select" Population</u>. Data is still collected for only that "select" but highly important portion of the population which seeks emergency room treatment as a result of drug abuse. However, good reasons exist to support the belief that trends in the data will parallel actual changes in the abusing population. Still, when possible, the information should be used in conjunction with other sources in order to enhance the reliability of the database.

DAWN Reporting Areas			
Code	SMSA		
01	Boston		
03	New York		
05	Philadelphia		
07	Newark		
08	Baltimore		
09	Washington		
10	Miami		
11	Atlanta		
12	Detroit		
13	Cleveland*		
17	Chicago		
19	Indianapolis*		
21	New Orleans		
25	Kansas City*		
28	Minneapolis		
31	Oklahoma City*		
32	Denver		
34	Seattle		
36	Los Angeles		
37	San Diego		
38	San Francisco		
39	Buffalo		
40	Dallas		
41	Phoenix		
43	San Antonio*		
45	Norfolk, VA*		
46	St. Louis		
90	National Panel		

* These SMSAs are no longer in the system as of January 1, 1988.

LSD: A SITUATION REPORT

Appendix 4 - Top Twenty Domestic LSD Removals By the Drug Enforcement Administration (FY 1980 - FY 1991)

	Location	Dosage Units	Date
1.	Bellingham, Washington	25,004,862	February 11, 1981
2.	Bellevue, Washington	9,263,078	February 11, 1981
3.	Milwaukie, Oregon	7,910,400	July 26, 1985
4.	Bellevue, Washington	2,410,320	September 23, 1980
5.	Clyde Hill, Washington	1,830,000	September 10, 1980
6.	San Francisco, California	1,560,980	February 2, 1983
7.	Baltimore, Maryland	1,544,400	November 16, 1987
8.	San Francisco, California	1,504,520	August 15, 1985
9.	Charleston, West Virginia	1,424,555	September 8, 1987
10.	Mount Prospect, Illinois	859,560	July 1, 1983
11.	Salem, Oregon	757,871	September 2, 1981
12.	Chicago, Illinois	715,200	May 20, 1985
13.	Baltimore, Maryland	572,000	September 13, 1988
14.	Boston, Massachusetts	518,048	October 15, 1982
15.	Fort Lewis, Washington	512,200	September 21, 1988
16.	Cocoa Beach, Florida	503,847	July 15, 1989
17.	Springfield, Missouri	418,940	October 27, 1982
18.	Brockport, New York	320,000	May 12, 1981
19.	Berkeley, California	312,258	January 24, 1986
20.	Brockport, New York	280,740	April 30, 1981

Appendix 5 - "The Blue Star" Hoax

A false rumor which is believed to have originated in 1981 warns parents that LSD is being sold in the form of children's washable transfer tattoos. This rumor, which is usually referred to as the "Blue Star Hoax," warns parents that the LSD can be absorbed through the skin. Warning letters supposedly sponsored by police officials or parents' groups have appeared often; however, no LSD-laden "tattoo" incidents have ever been documented.

LSD is sold on various forms of paper, usually known as "blotter paper," "stamps," or "blotter acid." This form is the most common form of distribution and it is intended for oral ingestion. In the past, LSD manufacturers have placed (and continue to do so) pictures of Disney and other cartoon characters, as well as television characters, on the blotter paper. However, no evidence of a child being injured by touching an LSD-laden "tattoo" has been recorded, though hundreds of incidents of the "Blue Star Hoax" have been documented.
Appendix 6 - Glossary of Terms

acid: slang term for LSD

blotter/blotter paper: the most frequent type of LSD presently available

CEWG: Community Epidemiology Working Group, a group of health professionals who report on drug abuse in various U.S. cities

Country Office (CO): DEA Country Office

conversion lab: a lab that changes LSD from wholesale to street quantities, usually by applying liquid LSD to blotter paper

DAWN: is a Federally-funded large-scale drug abuse information system collecting data from participating emergency rooms and medical examiners

DEA: Drug Enforcement Administration

District Office (DO): DEA District Office

dosage unit/d.u.: d.u. is the abbreviation for dosage unit; the DEA standard dosage unit for LSD is 50 micrograms

dose: a single quantity of LSD

gelatin: a type of LSD, often called "windowpanes"

gram: equivalent to approximately 1/28 of an ounce. A gram is a common amount of LSD sold to distributors; if pure, it can be converted to 20,000 d.u.'s

hit: a single dosage unit of LSD

kilogram: equal to about 2.2 pounds

LSD/LSD-25: lysergic acid diethylamide

manufacturing lab: a lab that manufactures LSD in the crystalline form

microdots: a tablet form of LSD

microgram (mcg): the unit of measure to gauge the strength of LSD; standard dosage units of LSD are 50 micrograms

NIDA: National Institute of Drug Abuse

Resident Office (RO): DEA Resident Office

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sheet: normally 100 d.u. of blotter paper, but sometimes sold in 50 d.u. amounts
sugar cubes: an early form of LSD, still occasionally seen
tablets: a form of LSD, often called microdots
windowpanes: a gelatin form of LSD

Appendix 7 - The LSD Statute and Sentencing

Since the late 1960s LSD has been a controlled substance under Schedule I of the Controlled Substances Act with no legitimate recognized use. The present statute, 21 U.S.C. 841(b)(1)(A)(v) and (B)(v), under which lysergic acid diethylamide (LSD) traffickers are sentenced, allows for mandatory minimum sentences of from five to 20 years (Table 21).

Specifically, the statute prescribes the following for first-time offenders:

1. A mandatory minimum term of five years imprisonment will be set for selling or conspiring to sell more than one gram of "a mixture or substance containing a detectable amount" of LSD.

2. A mandatory minimum term of ten years imprisonment will be set for selling or conspiring to sell more than ten grams of "a mixture or substance containing a detectable amount" of LSD.

The mandatory minimum terms of imprisonment are doubled for second offenders. Therefore, a second-time offender distributing or conspiring to distribute one to ten grams would receive ten years, while a second-time offender distributing or conspiring to distribute ten grams or more would receive twenty years. The sentencing guidelines are based on these penalties. These guidelines consider a number of factors, which include the value and weight of the drug.

In the Seventh Circuit (Indiana, Illinois, and Wisconsin) an appeal was filed in 1989 regarding the application and constitutionality of the statute and sentencing guidelines that apply to LSD violators. In two separate cases (Chapman et al. and Marshall) and their appeals, defendants were found guilty and sentenced to five-year and twenty-year mandatory minimum terms of imprisonment for selling 1,000 dosage units (5.7 grams) and 11,751 dosage units (more than 10 grams), respectively.

The defendants appealed to the Court of Appeals on three grounds:

1. Was the statute intended to exclude the weight of the carrier medium?

2. Were the sentencing guidelines also intended to exclude the weight of any carrier?

3. Are the statute and the sentencing guidelines unconstitutional to the extent that their computations are based on anything other than the weight of the pure drug?

In a six-to-five decision, the appeals court rejected the defendant's arguments that the carrier medium's weight should not be included for sentencing purposes or in interpreting the law. The defendants then appealed to the Supreme Court.

The Supreme Court heard the appellants' case (<u>Chapman v. United States</u>), on March 26, 1991 and decided on May 30, 1991. The Supreme Court held (seven to two) that the statute requires that the weight of the carrier medium be included when determining the appropriate sentencing for trafficking in LSD. The court reasoned that the statute refers to a "mixture or substance containing a detectable amount," thus the entire mixture or substance is to be weighed when calculating the sentence.

The high court ruling in this case has a significant impact not only for successful prosecution of LSD violators, but also on many other cases involving various controlled substances. Moreover, the successful application of this statute as a law enforcement tool may aid in providing the leverage needed to gain a entree for the investigation of more prolific LSD traffickers.

Traditionally, LSD defendants have rarely been willing to cooperate, thus making the penetration of their organizations extremely difficult. Some of the violators who have already been arrested--most of whom are young--are risking potentially long sentences. This situation may provide DEA with the opportunity to extend cases to these higher levels of LSD organizations.

Appendix 8 - The United States as a Source to Foreign Countries

LSD's European Renaissance

While LSD is primarily an American problem, Europe and some other countries (chiefly Englishspeaking) have reported availability of LSD and a resurgence in LSD use. In two international conferences in Europe during 1990 and 1991, concern arose regarding an increasing number of LSD seizures since 1987. The United States was also mentioned significantly as an LSD source of supply to Europe.

In March, 1991 an International LSD Working Meeting was convened at New Scotland Yard regarding LSD trafficking. At this meeting British law enforcement authorities indicated that there had been a 400 percent increase in LSD seizures during 1990. They also indicated that in an investigation culminating in February, 1991 they seized an LSD conversion laboratory and recovered over 100,000 dosage units of LSD in a house located in a remote part of England. The three principals in the operation were American citizens. British authorities estimated that the seized lab produced over one million dosage units per year.

A cursory review of other countries reporting seizures of LSD was undertaken and included a review of DEA Reports, cables from DEA's foreign and domestic offices, and Interpol LSD drug removal data. This review found 18 countries reporting LSD seizures in 1990 or 1991.¹ Most of the LSD seizures were retail amounts for personal use. These included seizures from an American citizens traveling abroad and a seizure of a small quantity of LSD that was sent by a U.S. citizen.

The only countries where significant LSD seizures occurred that could be documented were England, Canada, New Zealand, and Australia. Americans were involved in each of these countries, either as the suspected or confirmed source of supply, or were arrested with the drug on their person.

At an October 1990 Interpol meeting on psychotropic substances, a representative of the United Kingdom National Drugs Intelligence Unit reported that since the early 1980s, there has been a resurgence in the use of LSD in Europe. He also noted that because the average strength of a dose had dropped from the early 70s, LSD was now viewed by many as a "safe" drug, and was very popular at music festivals.

In England and Holland "acid house parties" take place occasionally in abandoned warehouses or empty buildings. One person usually serves as a point of contact and then invites interested persons to meet at a prearranged site and time. They proceed in a convoy to the "party" site, where LSD and often methamphetamine are provided. The interior of the building is usually decorated with psychedelic posters and music is provided. British authorities have reported the attendance of thousands of persons--mostly in their late teens to mid-20s--at individual parties. In Holland, upcoming acid house parties are sometimes advertised on tee shirts.

¹ LSD seizures were made in Argentina, Australia, Belgium, Canada, France, Germany, Italy, Luxembourg, the Netherlands, New Zealand, Norway, South Africa, Spain, Sweden, Switzerland, Thailand, the United Kingdom and Yugoslavia.







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These charts do not include those individuals who do not respond to given characteristics. Source: NIDA Analytical Episodes File.



EMERGENCY ROOM EPISODES BY AGE GROUP Drug Abuse Warning Network (DAWN), Calendar Year 1990

Source: National data; NIDA Analytical Episodes File.



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LSD REMOVALS BY STATE Fiscal Year 1991





NOTES:

Seizures are credited by Case File Number, but may have occurred in another area.
Washington, D.C., removed over 10,000 DU during 1991.

10,000 or more

Dosage Units

Source: DEA Stastical Services Section, STRIDE data, 1991.

1,000-9,999

Dosage Units

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LSD LIFETIME USAGE BY AGE GROUP

(at least one usage)



NOTE: Survey based on projected population of 201 million. Therefore, 5.3% equals 10.6 million users.

Source: NIDA, National Household Survey on Drug Abuse, 1990.

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Last Month

1.8%

1988

1.8%

1989

1.8%

1987

Reporting (%)

1.7%

1986

2 -

1.5

1-

0.5



The percentage of High School Seniors using LSD at least once in their lifetime increased to its highest level in five years during 1990.

The percentage of High School Seniors using LSD in the last year has remained stable over the last five years.

The percentage of High School Seniors using LSD in the last month remained constant over the last five years.



1990

1.9%

TRENDS IN LSD USAGE BY HIGH SCHOOL SENIORS Calendar Years 1986 through 1990



Last Month

1.1%

1988

Reporting (%)

1.4%

1986

1.4%

1987

1.6 -

1.4

1.2 -

1.0 -

0.8 -0.6 -0.4 -

0.2





The percentage of College Students using LSD at least once in their lifetimes increased to its highest level in five years during 1990.

The percentage of College Students using LSD in the last year has remained stable over the last five years.

The percentage of College Students using LSD in the last month remained low and stable over the last five years.

Source: HHS, University of Michigan, 11th Annual Survey of American College Students.

1989

1.4%

1.1%

TOTAL DEA DOMESTIC LSD ARRESTS

Fiscal Year 1986 through November 4, 1991



Source: DEA Statistical Services Section, Offender Based Transaction System.

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LSD EMERGENCY ROOM EPISODES

Drug Abuse Warning Network (DAWN), Calendar Years 1986 to 1990

LSD VIOLATORS ACCORDING TO DEA ARREST PROFILE

Five Year Trend for Fiscal Year 1987 through Fiscal Year 1991 (9 months)



LSD: A SITUATION REPORT



Source: DEA Statistical Services Section, Offender Based Transaction System, 1991.

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Source: DEA Statistical Services Section, Offender Based Transaction System, 1991.

LSD PRICE RANGES per Dosage Unit Wholesale - Retail Data Calendar Year 1987 through June 1991



Source: DEA, Illegal Drug Price/Purity Report - United States



¹Wholesale prices are per dose in quantities of 1,000 or more.

²Retail prices are per dose. ³Data are for first 6 months.

LSD POTENCY

Drug Enforcement Administration Fiscal Years 1986 through 1991*



Source: DEA Statistical Services Section, STRIDE data base.

1

* 1991 figures are through the first 9 months.

LSD PURCHASE PRICES

(by DEA Division) Wholesale-Retail Data Calender Year 1991 (through June)

DEA Division	1 D.U.	100 D.U.	1,000 D.U.	1 GRAM
Atlanta	\$3-\$5	\$135-\$150	\$500	\$1900-\$2400
Boston	\$2-\$8	\$80-\$250	\$740-\$800	
Chicago	\$2-\$8			
Dallas	\$10	ee .eu		
Denver	\$3-\$5		\$750-\$1000	
Detroit	\$2-\$7		\$700-\$1000	
Houston	\$4-\$6		\$800-\$1000	
Los Angeles	\$3-\$10	\$200-\$300	\$1000	
Miami	\$2-\$5	••••		
Newark	\$3-\$10	\$70-\$350		
New Orleans	\$5-\$10	\$160-\$250	\$1300-\$1600	
New York	\$2-\$5	\$175-\$200		
Philadelphia	\$2.50-\$5	\$100-\$400	\$750-\$1250	
Phoenix	\$1-\$4	\$100-\$120		
San Diego	\$3-\$5	\$75		
San Francisco	\$1-\$8		\$250-\$2000	\$2400-\$6000
Seattle	\$2.50-\$5			
St. Louis	\$2.50-\$7	\$150-\$200		
Washington, DC	\$2-\$7	\$100-\$500	\$1000-\$2000	

Source: DEA Quarterly Trends in the Traffic Reports and personnal communication with domestic DEA Field Divisions

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