

TIPS FOR TEENS

The Truth About

Hallucinogens

Slang—*Lysergic acid diethylamide*: LSD, Acid, Blotter. *Psilocybin*: Magic Mushrooms, Shrooms. *Phencyclidine*: PCP, Angel Dust, Boat, Ozone, Wack. *Ecstasy*: E, X, XTC.

Get the Facts...

Hallucinogens affect your brain. Hallucinogens alter how the brain perceives time, reality, and the environment around you. They also affect the way you move, react to situations, think, hear, and see. This may make you think that you're hearing voices, seeing images, and feeling things that don't exist.

Hallucinogens affect your heart. The use of hallucinogens leads to an increase in heart rate and blood pressure. Hallucinogens can put you in a coma. They can also cause heart and lung failure.

Hallucinogens affect your well-being. The use of hallucinogens may change the way you feel emotionally. They may cause you to feel confused, suspicious, and disoriented. Use of PCP may interfere with hormones related to normal growth as well as with the learning process.

Hallucinogens affect your self-control. The impact of hallucinogens varies from time to time, so there is no way to know how much self-control you might maintain. They can cause you to mix up your speech, lose control of your muscles, make meaningless movements, and do aggressive or violent things.

Before You Risk It...

Know the law. Hallucinogens are illegal to buy, sell, or possess.

Get the facts. Hallucinogenic drugs distort your perception of reality. Hallucinogens cause your sense of space and time to become distorted and cause you to see objects that aren't really there.

Stay informed. It's easy to quickly develop a tolerance to hallucinogens so that it takes more and more of the drug each time to get the same effect. This is dangerous because taking more and more of the same drug may lead to an overdose with severe effects.

Know the risks. Hallucinogens can cause flashbacks. Effects of the drugs, including hallucinations, can occur weeks, months, even years after use.

Look around you. The majority of teens are not using hallucinogens. According to a 1999 study, only 1 percent of teens use hallucinogens regularly and 94 percent of teens had never even tried hallucinogens.

Know the Signs...

How can you tell if a friend is using hallucinogens?

Sometimes it's tough to tell. But there are signs you can look for. If your friend has one or more of the following warning signs, he or she may be using hallucinogens:

- Depression
- Weakness and lack of muscular coordination
- Anxiety or paranoia
- Trembling
- Nausea
- Dizziness
- Facial flushing
- Dilated pupils

What can you do to help someone who is using hallucinogens? Be a real friend. Encourage your friend to stop or seek professional help. For information and referrals, call the National Clearinghouse for Alcohol and Drug Information at 800-729-6686.

For footnote references, see our Web site at www.health.org.

To learn more about hallucinogens or obtain referrals to programs in your community, contact one of the following toll-free numbers:

SAMHSA's National Clearinghouse for Alcohol and Drug Information
800-729-6686

TDD 800-487-4889

línea gratis en español
877-767-8432

CSAP Center for Substance Abuse Prevention

SAMHSA

Substance Abuse and Mental Health Services Administration
www.samhsa.gov

Info

The bottom line: If you know someone who uses hallucinogens, urge him or her to get help. If you're using them—stop! The longer you ignore the real facts, the more chances you take with your life.

It's never too late. Talk to your parents, a doctor, a counselor, a teacher, or another adult you trust.

Do it today!

Curious about the TV ads of the National Youth Anti-Drug Media Campaign? Check out the Web site at www.freevibe.com or visit the Office of National Drug Control Policy Web site at www.whitehousedrugpolicy.gov.

A. Don't try to handle this situation on your own; call 911 and a trusted adult immediately. While waiting, address the person by name, remind them who and where they are, talk to them calmly, make sure they're safe, and don't leave them alone.

A. There is no way to predict a "bad trip." There is no consistency in hallucinogenic drugs, so each "trip" may differ depending on the drug's strength and purity. The psychological effects of the hallucinogen are also dependent on the user's frame of mind.

A. Yes. In addition to flashbacks, long-term effects may include decreased motivation, prolonged depression, anxiety, increased delusions and panic, and psychosis.

Q. How can I help someone through a bad trip?

Q. Can I predict if I will have a "bad trip"?

Q. Do hallucinogens have long-term effects?

Q&A

TIPS FOR TEENS

The Truth About

Hallucinogens

Tips For TEENS

The Truth About

Cocaine

Slang—Coke, Dust, Toot, Snow, Blow, Sneeze, Powder, Lines, Rock (Crack)

Get the Facts...

Cocaine affects your brain. The word "cocaine" refers to the drug in both a powder (cocaine) and crystal (crack) form. It is made from the coca plant and causes a short-lived high that is immediately followed by opposite, intense feelings of depression, edginess, and a craving for more of the drug. Cocaine may be snorted as a powder, converted to a liquid form for injection with a needle, or processed into a crystal form to be smoked.

Cocaine affects your body. People who use cocaine often don't eat or sleep regularly. They can experience increased heart rate, muscle spasms, and convulsions. If they snort cocaine, they can also permanently damage their nasal tissue.

Cocaine affects your emotions. Using cocaine can make you feel paranoid, angry, hostile, and anxious, even when you're not high.

Cocaine is addictive. Cocaine interferes with the way your brain processes chemicals that create feelings of pleasure, so you need more and more of the drug just to feel normal. People who become addicted to cocaine start to lose interest in other areas of their life, like school, friends, and sports.

Cocaine can kill you. Cocaine use can cause heart attacks, seizures, strokes, and respiratory failure. People who share needles can also contract hepatitis, HIV/AIDS, or other diseases.

Before You Risk It...

Know the law. Cocaine—in any form—is illegal.

Stay informed. Even first-time cocaine users can have seizures or fatal heart attacks.

Know the risks. Combining cocaine with other drugs or alcohol is extremely dangerous. The effects of one drug can magnify the effects of another, and mixing substances can be deadly.

Be aware. Cocaine is expensive. Regular users can spend hundreds and even thousands of dollars on cocaine each week.

Stay in control. Cocaine impairs your judgment, which may lead to unwise decisions around sexual activity. This can increase your risk for HIV/AIDS, other diseases, rape, and unplanned pregnancy.

Look around you. The vast majority of teens aren't using cocaine. According to a 1993 study, less than 1 percent of teens are regular cocaine users. In fact, 98 percent of teens have never even *tried* cocaine!

Know the Signs

How can you tell if a friend is using cocaine?

Sometimes it's tough to tell. But there are signs you can look for. If your friend has one or more of the following warning signs, he or she may be using cocaine or other illicit drugs.

- Red, bloodshot eyes
- A runny nose or frequently sniffing
- A change in groups of friends
- Acting withdrawn, depressed, tired, or careless about personal appearance
- Losing interest in school, family, or activities he or she used to enjoy
- Frequently needing money

What can you do to help someone who is using cocaine? Be a real friend. Save a life. Encourage your friend to stop or seek professional help.

For information and referrals, call the National Clearinghouse for Alcohol and Drug Information at 800-724-6366.

For footnote references, see our Web site at www.health.org

To learn more about cocaine or obtain referrals to programs in your community, contact:

SAMHSA's National Clearinghouse for Alcohol and Drug Information
800-729-6686

TDD 800-487-4889

linea gratis en español
877-767-8432

Web site: www.health.org

CSAP Center for Substance Abuse Prevention
Substance Abuse and Mental Health Services Administration

Info

The bottom line: If you know someone who has a problem with cocaine/crack cocaine, urge him or her to stop or get help. If you use it—stop! The longer you ignore the real facts, the more chances you take with your life.

It's never too late. Talk to your parents, a doctor, a counselor, a teacher, or another adult you trust.

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A. Any positive feelings are fleeting and often followed by some very bad feelings, like paranoia and intense cravings. Cocaine may give users a temporary illusion of power and energy, but it often leaves them unable to function emotionally, physically, and sexually.

A. No. Both cocaine and crack are powerfully addictive. The length of time it stays in your body doesn't change that.

A. Yes. While the number of cocaine users has decreased from 1980's, there have been nearly 2 million cocaine users every year since 1992.

Q. Isn't crack less addictive than cocaine because it doesn't stay in your body very long?

Q. Is cocaine really still a problem?

Q&A

TIPS FOR TEENS

The Truth About

Cocaine

TIPS FOR TEENS

The Truth About

Club Drugs

Slang—Ecstasy, E, X, XTC, GHB, Liquid Ecstasy, Liquid X, Gnevous, Bodily Brain, Georgia Home Boy, Ketamine, K, Special K, Ket, Vitamin K, Kit Kat, Rohypnol, Roopin' Bop

Get the Facts

Club drugs affect your brain. The term "club drugs" refers to a wide variety of drugs often used at all-night dance parties (raves), nightclubs, and concerts. Club drugs can damage the neurons in your brain, impacting your senses, memory, judgment, and coordination.

Club drugs affect your body. Different club drugs have different effects on your body. Some common effects include loss of muscle and motor control, blurred vision, and seizures. Club drugs like ecstasy are stimulants that increase your heart rate and blood pressure and can lead to heart or kidney failure. Other club drugs, like GHB, are depressants that can cause drowsiness, unconsciousness, or breathing problems.

Club drugs affect your self-control. Club drugs like GHB and Rohypnol are used in "date rape" and other assaults because they are sedatives that can make you unconscious and immobilize you. Rohypnol can cause a kind of amnesia—users may not remember what they said or did while under the effects of the drug.

Club drugs are not always what they seem. Because club drugs are illegal and often produced in makeshift laboratories, it is impossible to know exactly what chemicals were used to produce them. How strong or dangerous any illegal drug is varies each time.

Club drugs can kill you. Higher doses of club drugs can cause severe breathing problems, coma, or even death.

Before You Risk It...

Know the law. It is illegal to buy or sell club drugs. It is also a federal crime to use any controlled substance to aid in a sexual assault.

Get the facts. Despite what you may hear, club drugs can be addictive.

Stay informed. The club drug market is constantly changing. New drugs and new variations of old ones appear all the time.

Know the risks. Mixing club drugs, especially with alcohol, is extremely dangerous. The effects of one drug can magnify the effects of another. Combining club drugs with other substances can be lethal.

Look around you. The vast majority of teens are not using club drugs. While ecstasy is considered to be the most frequently used club drug, less than 2 percent of 8th-12th graders use it, according to a survey by the U.S. Department of Health and Human Services. In fact, 94 percent of teens have never used ecstasy.

Know the Signs

How can you tell if a friend is using club drugs?

Something is tough to tell, but there are some signs you can look for. If your friend has one or more of the following warning signs, the odds are they're using club drugs:

- Problems remembering what happened
- Loss of coordination
- Depression
- Confusion
- Sleep problems
- Chills or overheating
- Slurred speech

What can you do to help someone who is using club drugs? Be a real friend. Save your friend from the trouble of stopping a bad profession. Call the FBI and refer to it as the National Clearinghouse on Alcohol and Drug Abuse, National Alcoholism Clearinghouse, 29-66

Tips For Teens

Q&A

Q. If somebody slipped a club drug into your drink, wouldn't you realize it immediately?

A. Probably not. Most club drugs are odorless and tasteless. Some are made into a powder form that makes it easier to slip into a drink and dissolve without a person's knowledge.

Q. Are there any long-term effects of taking ecstasy?

A. Yes. Studies on both humans and animals have proven that regular use of ecstasy produces long-lasting, perhaps permanent damage to the brain's ability to think and store memories.

Q. If you took a club drug at a rave, wouldn't you just dance off all of its effects?

A. Not necessarily. Some of ecstasy's effects, like confusion, depression, anxiety, paranoia, and sleep problems, have been reported to occur even weeks after the drug is taken.

Info

To learn more about club drugs or obtain referrals to programs in your community, contact:

SAMHSA's National Clearinghouse for Alcohol and Drug Information

800-729-6686

TDD 800-487-4889

línea gratis en español

877-767-8432

CSAP
Center for Substance Abuse Prevention
Substance Abuse and Mental Health Services Administration
www.samhsa.gov

Curious about the TV ads of the National Youth Anti-Drug Media Campaign? Check out the Web site at www.freevibe.com or visit the Office of National Drug Control Policy Web site at www.whitehouse.gov/drugpolicy.

Do it today!

The bottom line: If you know someone who uses club drugs, urge him or her to get help. If you're using them—stop! The longer you ignore the real facts, the more chances you take with your life. It's never too late. Talk to your parents, a doctor, a counselor, a teacher, or another adult you trust.

TIPS FOR TEENS

The Truth About

Marijuana

Slang: Weed, Pot, Grass, Reef, Ganja, Mary Jane, Blunt, Joint, Herb, Hash

Get the Facts

Marijuana affects your brain. THC (the active ingredient in marijuana) affects the nerve cells in the part of the brain where memories are formed.

Marijuana affects your self control. Marijuana can seriously affect your sense of time and your ability to make important decisions like driving. In 1998, nearly 77,000 people were admitted to emergency rooms suffering from marijuana-related problems. It is the cause for more than 275 percent since 1991.

Marijuana affects your lungs. There are more than 400 known chemicals in marijuana. A single joint contains four times as much tar and causes twice as a filtered cigarette.

Marijuana affects other aspects of your health. Marijuana can limit your body's ability to fight off infections. Long-term marijuana use can even increase the risk of developing certain mental illnesses.

Marijuana is not always what it seems. Marijuana can be laced with other dangerous drugs without your knowledge. "Blunts"—rolled-out cigars filled with marijuana—sometimes have substances, such as tar, lead, or gamma-PIC, or embalming fluid added.

Marijuana can be addictive. Not everyone who uses marijuana becomes addicted, but some users do develop signs of dependence. In 1995, over 400,000 people entered drug treatment programs to kick their marijuana habit.

Before You Risk It

Know the law. It is illegal to buy or sell marijuana. In most states, holding even small amounts of marijuana can lead to fines or arrest.

Get the facts. There is NO proof that marijuana improves mental health and lots of evidence that it is not healthy.

Smoking any substance, including cocaine—has your and other illnesses.

Stay informed. Marijuana is not just for people who use it. Many teens who smoke or ingest marijuana are people who abuse and self-

Know the risks. Use marijuana, your risk of growing and other bad

Keep your records. Marijuana is not just for people who use it. Many teens who smoke or ingest marijuana are people who abuse and self-

Indication. In 1995, according to a 1997 survey, 10 percent of 12- to 17-year-olds who had had

Know the Signs

How can you tell if a friend is using marijuana? Some signs include looking for the "marijuana look" or the "marijuana smell."

- Stumbling
- Slurred speech
- Red, watery eyes
- Increased heart rate
- Acting silly

What can you do if you suspect a friend is using marijuana? You can talk to your parents or a trusted adult. You can also call the National Drug Information Center at 1-800-729-

Tips For Teens

Q&A

Q. Isn't smoking marijuana less dangerous than smoking cigarettes?

A. No. It's even worse. One joint affects the lungs as much as four cigarettes.

Q. Can people become addicted to marijuana?

A. Yes. Research confirms you can become hooked on marijuana.

Q. Can marijuana help cure cancer?

A. No. Some people with cancer, HIV/AIDS, and other diseases claim to experience relief from pain and other symptoms that they attribute to marijuana use. Scientific research has not yet confirmed these benefits and more research on this topic is being done.

Info

The bottom line: If you know someone who smokes marijuana, urge him or her to stop or get help. If you're smoking marijuana—stop! The longer you ignore the real facts, the more chances you take with your health and well-being. It's never too late. Talk to your parents, a doctor, a counselor, a teacher, or another adult you trust. Do it today!

Curious about the TV ads of the National Youth Anti-Drug Media Campaign? Check out the Web site at www.freeibc.com or visit the Office of National Drug Control Policy Web site at www.whitehouse.gov/drugpolicy.

To learn more about marijuana or obtain referrals to programs in your community, contact:

SAMHSA's National Clearinghouse for Alcohol and Drug Information

800-729-6686

TDD 800-487-4889

línea gratis en español

877-767-8432

Web site: www.health.org

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TIPS FOR TEENS

The Truth About

Alcohol

Slang—Booze, Sauce, Brews, Brewskis, Hooch, Hard Stuff, Juice

Get the Facts...

Alcohol affects your brain. Drinking alcohol leads to a loss of coordination, poor judgment, slowed reflexes, distorted vision, memory lapses, and even blackouts.

Alcohol affects your body. Alcohol can damage every organ in your body. It is absorbed directly into your bloodstream and can increase your risk for a variety of life-threatening diseases, including cancer.

Alcohol affects your self-control. Alcohol depresses your central nervous system, lowers your inhibitions, and impairs your judgment. Drinking can lead to risky behaviors, including having unprotected sex. This may expose you to HIV/AIDS and other sexually transmitted diseases or cause unwanted pregnancy.

Alcohol can kill you. Drinking large amounts of alcohol can lead to coma or even death. Also, in 1998, 35.8 percent of traffic deaths of 15- to 20-year-olds were alcohol-related.

Alcohol can hurt you—even if you're not the one drinking. If you're around people who are drinking, you have an increased risk of being seriously injured, involved in car crashes, or affected by violence. At the very least, you may have to deal with people who are sick, out of control, or unable to take care of themselves.

Before You Risk It...

Know the law. It is illegal to buy or possess alcohol if you are under 21.

Get the facts. One drink can make you fail a breath test. In some states, people under the age of 21 who are found to have any amount of alcohol in their systems can lose their driver's license, be subject to a heavy fine, or have their car permanently taken away.

Stay informed. "Binge" drinking means having five or more drinks on one occasion. About 15 percent of teens are binge drinkers in any given month.

Know the risks. Mixing alcohol with medications or illicit drugs is extremely dangerous and can lead to accidental death. For example, alcohol-medication interactions may be a factor in at least 25 percent of emergency-room admissions.

Keep your edge. Alcohol can make you gain weight and give you bad breath.

Look around you. Most teens aren't drinking alcohol. Research shows that 70 percent of people 12-20 haven't had a drink in the past month.

Know the Signs...

How can you tell if a friend has a drinking problem? Sometimes it's tough to tell, BUT there are signs you can look for. If your friend has one or more of the following warning signs, he or she may have a problem with alcohol:

- Getting drunk on a regular basis
- Lying about how much alcohol he or she is using
- Believing that alcohol is necessary to have fun
- Having frequent hangovers
- Feeling run down, depressed, or even suicidal
- Having "blackouts" (forgetting what he or she did while drinking)
- Having problems at school or getting in trouble with the law

What can you do to help someone who has a drinking problem? Be a real friend. You might even save a life. Encourage your friend to stop or seek professional help. For information and referrals, call the National Clearinghouse for Alcohol and Drug Information at 800-729-6636.

For footnote references, see our Web site at www.health.org.

Alcohol

The Truth About

TIPS FOR TEENS

Q&A

Q. Aren't beer and wine "safer" than liquor?

A. No. One 12-ounce beer has about as much alcohol as a 1.5-ounce shot of liquor, a 5-ounce glass of wine, or a wine cooler.

Q. Why can't teens drink if their parents can?

A. Teens' bodies are still developing and alcohol has a greater impact on their physical and mental well-being. For example, people who begin drinking before age 15 are four times more likely to develop alcoholism than those who begin at age 21.⁵

Q. How can I say no to alcohol? I'm afraid I won't fit in.

A. Remember, you're in good company. The majority of teens don't drink alcohol. Also, it's not as hard to refuse as you might think. Try: "No thanks," "I don't drink," or "I'm not interested."

Info

To learn more about alcohol or obtain referrals to programs in your community, contact:

SAMHSA's National Clearinghouse
or Alcohol and Drug Information
800-729-6686

TDD 800-487-4889

línea gratis en español

877-767-8432

Web site: www.health.org

CSAP
Center for
Substance Abuse
Prevention

Substance Abuse and Mental
Health Services Administration

The bottom line: If you know someone who has a problem with alcohol, urge him or her to stop or get help. If you drink—stop! The longer you ignore the real facts, the more chances you take with your life.
It's never too late. Talk to your parents, a doctor, a counselor, a teacher, or another adult you trust.
Do it today!

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Anabolic ("building")-androgenic (masculinizing) steroids, commonly known as steroids, include the male hormone, testosterone, and its artificial derivatives. Steroids are used for treatment of certain diseases such as specific types of anemia, some breast cancers, and testosterone deficiency. Non-medical use of steroids is strictly illegal. However, because of their performance-enhancing and body-building properties, steroids have been illegally used by both athletes and nonathletes since the late 1950s to improve their athletic ability and to look better.

Steroids are taken orally or injected into the muscles. Both males and females use steroids, though males account for higher rates of use.

According to a recent study, adolescent steroid users also are likely to use other drugs and to share needles. People who inject steroids run the risk of acquiring HIV/AIDS from sharing needles.

Side Effects

Numerous health hazards are associated with short-term use of steroids, many of which are reversible. Long-term effects are largely unknown, but there is growing concern over possible psychiatric effects. Researchers report that steroid use can cause severe mood swings which can lead to violent behaviors. Users also may suffer from paranoid jealousy, extreme irritability, delusions, and impaired judgment stemming from feelings of invincibility. Fatalities due to suicides, homicides, liver disease, heart attacks, and cancer have been reported among illicit users. Further, because the true quality of "off the street" steroids is not known, users place themselves at even greater risk for harm if they choose to use these.

Major side effects include:

Liver tumors

Jaundice

Fluid retention

High blood pressure

Severe acne

Yellowing of skin and eyes

Trembling

Weakening of tendons which may result in tearing or rupture

Males:

Testicular shrinkage

Reduced sperm count

Infertility

Baldness

Development of breasts

Females:

Facial hair

Irregular menstrual cycle

Enlargement of the clitoris

Deepened voice

Adolescents:

Stunted growth due to damaged growth areas on ends of bones

Steroids are not all they're stacked up to be!

Steroids do more than pump you up. They damage your body.

You have enough to worry about in life without adding the complications of steroids.

True strength and beauty come from a combination of your physical, mental, and spiritual abilities **naturally** developed to their full potential; anything else is artificially induced.

When you use steroids, you are not only cheating yourself, but you're also cheating everyone around you.

Resources

American Academy of Sports Physicians
17113 Gledhill Street
Northridge, CA 91325
818-886-7891

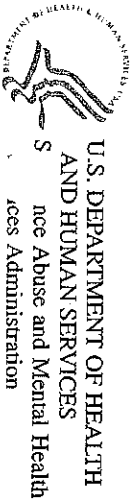
American College of Sports Medicine
P.O. Box 1440
Indianapolis, IN 46206
317-637-9200

American Orthopedic Society for Sports Medicine
2250 E. Devon Avenue
Suite 115
Des Plaines, IL 60018
708-803-8700

American Osteopathic Academy of Sports Medicine
7611 Elmwood Avenue
Suite 201
Middleton, WI 53562
608-831-4400

Joint Commission on Sports Medicine and Science
Oklahoma State University
Student Health Center
Stillwater, OK 74078
405-744-7031

National Clearinghouse for Alcohol and Drug Information
P.O. Box 2345
Rockville, MD 20847-2345
1-800-729-6686



ABOUT STEROIDS

Quick Facts

Anabolic steroids make the tendons weak, and that may result in tearing or rupture of the tendon.

According to a recent survey, perception of the harmfulness of steroid use has decreased among both 12th graders and 8th graders. This fact is particularly disturbing because a person's usage of any substance is highly dependent on his or her understanding of how harmful it is.

Many professional athletes have ruined their careers and lives due to steroid use. Do you want to make that same mistake?



SAMHSA
National Center for Substance Abuse Prevention
Prevention WORKS!

TIPS FOR TEENS

TIPS FOR TEENS

The Truth About

Get the Facts...

AIDS—*Acquired Immunodeficiency Syndrome*—is caused by HIV, the *Human Immunodeficiency Virus*. HIV impairs your immune system, making it less resistant to diseases and infections. HIV is transmitted through exposure to the bodily fluids of someone infected with HIV. This exposure most commonly occurs during unprotected sex, by sharing needles, through blood transfusions, or by contact with open wounds. Babies born to women with HIV can also become infected.

It's not a "gay thing." HIV infections among all teenagers and young adults are increasing. Also, nearly one-fourth of AIDS cases among adolescents and adults under age 25 stem from injection drug use.

Alcohol and drugs affect your self-control. Alcohol and illicit drugs lower your inhibitions and impair your judgment. Drinking and drug use can lead to risky behaviors you're less likely to do if sober, including having unprotected sex. This increases your risk for exposure to HIV/AIDS and other sexually transmitted diseases (STDs).

Any drug use increases the risks for HIV/AIDS. Non-injection drugs also contribute to the spread of HIV/AIDS when users trade sex for drugs or money or when their judgment and decision-making skills are impaired.

Before You Risk It...

Get the facts. Not having sexual intercourse is the most effective way to avoid STDs, including HIV/AIDS. For those who choose to be sexually active, the following HIV prevention activities can be effective:

- Engaging in sexual activity that does not involve vaginal, anal, or oral sex
- Having intercourse with only one uninfected partner
- Using latex condoms every time you have sex

Stay informed. Even though more effective drugs are now used to treat HIV/AIDS, there is no cure or vaccine.

Know the risks. Even tobacco use impacts HIV/AIDS. Smokers with the HIV virus develop full-blown AIDS twice as quickly as nonsmokers.

Know the Signs...

How can you tell if you or someone else may already have HIV?

If you have not shared a needle or had unprotected sex, it is very unlikely that you have HIV. The only way to be certain is to be tested. Most people with HIV do not have any visible symptoms for many years. Once symptoms do begin to show, some of the more common ones include:

- Rapid weight loss
- Profuse night sweats
- Ongoing, unexplained fatigue
- Swollen lymph glands
- Diarrhea that lasts longer than a week
- White spots or blemishes in the mouth or throat
- Pneumonia

Do not assume you are infected if you have any of these symptoms. Each of these symptoms can easily be related to other illnesses. Again, the only way to determine for sure whether you are infected with HIV is to be tested.

What can you do to help someone whose substance abuse problem is putting them at risk for HIV/AIDS? Be a real friend. You might even save a life. Encourage your friend to stop using substances or seek professional help. For information and referrals, call the National Clearinghouse for Alcohol and Drug Information at 800-729-6686.

For more information go to www.health.org



TIPS FOR TEENS

Q&A

Q. Can you get HIV/AIDS from deep kissing or from someone's sweat?

Q. If you already have the HIV virus, does it really matter whether you drink and use drugs?

Q. Who is most likely to get HIV/AIDS?

Yes. There are many ways to get HIV/AIDS. You can get it from blood, semen, or vaginal fluids. Deep kissing and sweat are not considered high risk activities.

Yes. Drinking and using drugs can increase the risk of getting HIV/AIDS. It can also make it harder to see if you have the virus.

People who are most likely to get HIV/AIDS are those who have unprotected sex, share needles, or have a blood transfusion from someone who has HIV/AIDS.

Curious about the TV ads of the National Youth Anti-Drug Media Campaign? Check out the Web site at www.freevibe.com or visit the Office of National Drug Control Policy Web site at www.whitehouse.gov/ondcp.

Info

To learn more about HIV/AIDS or obtain referrals to programs in your community, contact one of the following toll-free numbers:

SAMHSA's National Clearinghouse for Alcohol and Drug Information
800-729-6686

línea gratis en español
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CSAP
Center for Substance Abuse Prevention

SAMHSA
Substance Abuse and Mental Health Services Administration

www.samhsa.gov

Deciding when or even if to become a parent is one of the most important choices you will make — for you, for your partner, and for your future. Maybe you are having sex and don't want to have a baby right away. Maybe you want to learn about how to space your children in the future. Maybe you are just curious about contraception. The points-of-care contraceptive methods help you plan when you will become a parent. This brochure tells you about one of the methods, so you can choose the one — or two — that seem right for you.

These choices matter to both men and women. Although most contraceptive methods are used by women, men are just as involved. Contraception seems to work best when a man and woman choose a method together and use it together.

What you should know about:

THE MALE CONDOM



U.S. Department of Health and Human Services
Office of Public Health and Science
Office of Population Affairs

For additional copies, please contact:
Office of Population Affairs Clearinghouse
130 E. 90th St., Bethesda, MD 20827
Phone: (301) 654-4190 Fax: (301) 416-4771

What is it? A male condom is a latex, plastic, or "animal skin" sheath that covers the penis. It may be prelubricated and/or contain a spermicide.

How does it work? The male condom creates a barrier between the penis and the vagina. It collects and holds semen so that an egg and sperm do not meet and fertilization does not occur.

How is it used? The condom is unrolled over the erect penis before sex. The penis must be withdrawn from the vagina while it is still erect while the male holds the base of the condom in place. The condom is then removed from the penis and discarded without spilling the semen near the vagina. It cannot be reused.

How well does it work? A condom is 84% effective with typical use* and 97% effective with perfect use.** A condom can be up to 99% effective if it contains spermicide.

Does it reduce the risk for HIV/AIDS and STDs? Yes and no. A latex male condom reduces the risk for HIV/AIDS and most STDs. An "animal skin" condom does not.

What are its main advantages? The condom has no health risks or side effects (except possible allergy to the latex). The latex condom is the only currently approved contraceptive method that effectively reduces the risk of contracting or transmitting HIV/AIDS and STDs. It can be used with other contraceptive methods to increase effectiveness and protect against infection. It does not require a prescription and can be purchased at most drugstores. And it delays premature ejaculation.

What are some possible problems? A condom can slip off or break, causing leakage. Using a condom correctly can inhibit spontaneity and reduce sexual sensations. A latex condom can cause irritation, discomfort, and severe allergic reactions (in which case a plastic condom can be used). A latex condom should not be used with an oil-based lubricant.

* Typical Use Effectiveness—How well the method works for the average person.

** Perfect Use Effectiveness—How well the method works when used correctly all of the time.

Deciding when to have children is one of the most important choices you will make — for you, for your partner, and for your future. Maybe you are having sex and don't want to have a baby right away. Maybe you want to learn about how to space your children in the future. Maybe you're just anxious about conceiving. The job of a contraceptive method is to help you plan when you will become a parent. It's important that you choose one of the methods so you can choose the one — of two — that's best for you.

There are many different contraceptive methods available. Each has its own advantages and disadvantages. Some are reversible, some are not. Some are used before sex, some are used after sex. Some are used in the vagina, some are used in the mouth, some are used in the rectum. Some are used in the skin, some are used in the muscle, some are used in the eye. Some are used in the ear, some are used in the nose. Some are used in the hair, some are used in the skin. Some are used in the mouth, some are used in the rectum. Some are used in the skin, some are used in the muscle, some are used in the eye. Some are used in the ear, some are used in the nose. Some are used in the hair, some are used in the skin.

What you should know about:

DEPO-PROVERA



U.S. Department of Health and Human Services
 Office of Public Health and Science
 Office of Population Affairs

U.S. Department of Health and Human Services
 Office of Population Affairs
 120 Bay Street, Baltimore, MD 21201
 Phone: (410) 605-1180 • Telex: (61) 246-1151

What is it? Depo-Provera is a long-acting form of the hormone depotroxyprogesterone acetate (progestin).

How does it work? Depo-Provera works in several ways. It thickens cervical mucus, which blocks sperm; it prevents ovulation; and it prevents implantation.

How is it used? Depo-Provera is injected into a woman's upper arm or buttock once every 12 weeks.

How well does it work? Depo-Provera is almost 100% effective for 12 weeks. Failure rates increase when the shot is not given on time.

Does it reduce the risk for HIV/AIDS and STDs? No. A male latex condom should be used with Depo-Provera to reduce the risk of HIV/AIDS and STDs.

What are its main advantages? Depo-Provera lasts for 12 weeks. It does not interfere with sex. And it can be used by women who have a history of seizures (reduces seizures) and sickle-cell anemia. It also can be used while breastfeeding.

What are some possible problems? The Depo-Provera shot must be administered every 12 weeks. It can cause menstrual changes, including irregular bleeding, spotting, missed periods, or no periods. It can cause weight gain, depression, breast tenderness, headaches, and allergic reaction. These side effects can last up to 6 months after the last injection. Depo-Provera also may delay a woman's ability to become pregnant after it is discontinued. And it may cause bone density changes or bone loss and adverse effects on lipid levels in the blood.

What you should know about:

THE PILL

Deciding when or even if to become a parent is one of the most important choices you will make — for you, for your partner, and for your future. Maybe you are having sex and don't want to have a baby right away. Maybe you want to think about how to space your children in the future. Maybe you're just curious about contraception. The pills, contraceptive methods help you plan when you will become a parent. This brochure tells you about one of the methods so you can choose the one — or two — that seem right for you.

These choices matter to both men and women. Although most contraceptive methods are used by women, men are just as involved. Contraception seems to work best when a man and woman choose a method together and use it together.



U.S. Department of Health and Human Services
Office of Public Health and Science
Office of Population Affairs

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What is it? The pill is a prescription drug containing the hormones estrogen and progestin.

How does it work? The pill works in several ways: It thickens cervical mucus which blocks the sperm; it prevents ovulation; and it prevents implantation.

How is it used? A pill is taken by mouth every day for 21 or 28 consecutive days of the menstrual cycle. It should be taken at the same time each day and should be taken on schedule, month after month.

How well does it work? The pill is 95% effective with typical use* and 99.9% effective with perfect use.** The pill is more likely to fail if pills are missed or taken late. Some medications also cause the pill to be less effective. A backup method such as a condom should be used during the first cycle on the pill, when taking some medications, if pills are missed, or if discontinuing use of the pill.

Does it reduce the risk for HIV/AIDS and STDs? No. It may actually increase the risk for chlamydia and cervicitis. A male latex condom should be used with the pill to reduce the risk of contracting HIV/AIDS and STDs.

What are its main advantages? The pill is reversible. It does not interfere with sex. It is medically safe for most women. It regulates and lightens periods and decreases menstrual pain and PMS. It may improve acne. And it decreases the risk for ovarian and endometrial cancer.

What are some possible problems? Mild side effects include nausea, weight gain, headaches, dizziness, breast tenderness, and break-through bleeding (spotting between periods). It can also cause more serious complications including depression and liver tumors. It may increase the risk of stroke, heart attack, blood clots, and high blood pressure for some women, especially women over 35 who smoke. It also may increase the risk for breast cancer and cervical cancer.

* Typical Use Effectiveness—How well the method works for the average person.

** Perfect Use Effectiveness—How well the method works when used correctly all of the time.

Deciding when or even if to become a parent is one of the most important choices you will make — for you, for your partner, and for your future. Maybe you are having sex, and don't want to have a baby right away. Maybe you want to learn about how to space your children in the future. Maybe you're just curious about contraception. The Johns Hopkins contraceptive methods help you plan when you will become a parent. This brochure tells you about one of the methods, so you can choose the one — or two — that seem right for you.

These choices matter to both men and women. Although most contraceptive methods are used by women, men are just as involved. Contraception seems to work best when a man and woman choose a method together and use it together.

What you should know about:

ABSTINENCE



U.S. Department of Health and Human Services
Office of Public Health and Science
Office of Population Affairs

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What is it? Abstinence is a decision to not have sex (vaginal, oral, or anal).

How does it work? Abstinence works because sex, which enables sperm to fertilize an egg, does not occur.

How is it used? An individual makes a decision not to have sex and sticks to it. Assertiveness, negotiation, and planning skills help an individual remain abstinent.

How well does it work? Abstinence is 100% effective.

Does it reduce the risk for HIV/AIDS and STDs? Abstinence from vaginal, oral, and anal sex eliminates the risk for sexually transmitting or contracting HIV/AIDS and STDs. Abstinence from vaginal sex *only* does not reduce the risk of HIV/AIDS and STDs if other types of sex (such as oral and anal sex) occur.

What are its main advantages? Abstinence has no health risks or side effects. It can be used at any time, regardless of prior sexual experience. It allows users to focus on nonsexual aspects of relationships. And it supports the values of some individuals, families, and religious groups.

What are some possible problems? Abstinence may be hard to stick with. It requires learning and using decision-making, negotiation, and planning skills.