

Mental disorders caused by stimulants and hallucinogens use

Hallucinogens

- **Classification**
 - Classical hallucinogens (psychedelics), deliriants, dissociatives
- **Effect**
 - as the name suggests → change in perception: visual hallucinations and illusions
 - behavior can be unpredictable and dangerous (to other or to self)
 -

1. Classical hallucinogens

- LSD (Lysergic acid diethylamide), psilocybin
 - → perceptual (synesthesia, derealization, depersonalization, illusions), behavioral (paranoid, anxiety, fear of going crazy, impaired judgement)
 - MDMA: serotonin receptor and D2 receptor agonist → grinding teeth (bruxisms), hyponatremia (cave: cerebral and pul. edema), mental changes (euphoria, hyperactivity)

2. Deliriants

- The term is generally used to refer to anticholinergic drugs
- Common examples of deliriants include plants of the genus *Datura* as well as higher than recommended dosages of Diphenhydramine (Benadryl).

3. Dissociatives

- Ketamine
- phencyclidine (angel dust, peace pill, elephant tranquilizer, hog) → psychosis

Stimulants

- **Cocaine**
 - insufflated, smoked or injected
 - MoA
- **Methamphetamines (crystal meth, pervetin, molly (MDMA))**
 - Autonomic symptoms: diaphoresis, HT, tachycardia, hyperthermia...
 - Neuropsychiatric sx: agitation, psychosis, **euphoria**, paranoia, sleep disorders (staying awake), megalomania, disorganized thinking (delusional parasitosis), seizures
 - Complications
 - risk of ongoing anxiety, mood disorders or psychosis
 - memory impairment (esp. with chronic use)
- **MDMA (Molly, ecstasy)**