

Chapter 12
Cocaine
The Big Lie

Depiction Suggestions

The following points for consideration on the portrayal of cocaine use and addiction were developed as a resource for entertainment development and production. They are not intended to limit the creative process.

Prevalence:

- ◆ Try to reflect, when possible, that the majority of people do not use cocaine. Avoid reinforcing the false image that cocaine use is an everyday activity.
- ◆ Attempt to show that cocaine use is highly addictive and has the potential for serious side effects (see Glossary, Chapter 27).
- ◆ Occasional lines of dialogue with people reacting negatively to someone's use of cocaine will help to cast a shadow on the drug itself.
- ◆ When appropriate, the use of educational posters in scenes can send a prevention and/or treatment message to the viewers.
- ◆ Attempt to show the long-term effects of cocaine abuse on a character when dealing with a user of the drug.

Health Consequences:

- ◆ Bear in mind the immediate impact of crack use. Due to the lack of purity of most crack available on the streets, which is frequently mixed with various cutting agents, even a single dose has been attributed to the deaths of some people.

- ◆ Remember that there are long-term effects of cocaine on a person even after he or she has been in recovery. High doses of cocaine and/or prolonged use can trigger paranoia and depression.
- ◆ When portraying someone injecting cocaine, remember that the individual is at increased risk for HIV and Hepatitis B and C.
- ◆ Consider that prolonged cocaine snorting can result in ulceration of the mucous membrane of the nose and can damage the nasal septum enough to cause it to collapse. Additionally, cocaine-related deaths are often caused by cardiac arrest or seizures followed by respiratory arrest.
- ◆ When portraying a user of cocaine or crack, remember that these drugs are not only used in the inner city, but also in very affluent and residential settings.

Spotlight on Depiction of Health and Social Issues

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Fact Sheet

Prevalence:

- ◆ Cocaine is a powerfully addictive stimulant that directly affects the brain.¹
- ◆ Pure cocaine was first extracted in the mid-19th century from the leaf of the Erythroxylon coca bush, which grows primarily in Peru and Bolivia.²
- ◆ Crack is the street name given to the freebase form of cocaine (see Glossary, Chapter 27) that has been processed from powdered cocaine hydrochloride into a smokeable substance.³
- ◆ The term “crack” refers to the crackling sound heard when the mixture is smoked.
- ◆ The percentage of eighth graders reporting crack use at least once in their lives changed from 2.7 percent in 1997 to 3.2 percent in 1998 to 3.1 percent in 1999.⁴
- ◆ In 1997, an estimated 1.5 million Americans (0.7 percent of those age 12 and older) were current cocaine users, according to the National Household Survey on Drug Abuse.⁵

Health Consequences:

- ◆ The effects of cocaine are pleasurable, immediate, and brief. It produces intense but short-lived euphoria and can make users feel more energetic. Cocaine produces wakefulness and reduces hunger. Psychological effects include feelings of well-being and a grandiose sense

of power and ability mixed with anxiety and restlessness. As the drug wears off, these temporary sensations of mastery are replaced by depression.⁶

- ◆ The short-term physiological effects of cocaine use include constricted blood vessels, dilated pupils, and increased temperature, heart rate, and blood pressure.⁷
- ◆ The long-term physiological effects of cocaine use include addiction, irritability and mood disturbances, restlessness, paranoia, and auditory hallucinations.⁸
- ◆ Medical consequences of cocaine abuse are cardiovascular, including disturbances in heart rhythm and heart attack; such respiratory effects as chest pain and respiratory failure; neurological effects, including strokes, seizure, and headaches; and gastrointestinal complications, including abdominal pain and nausea.⁹
- ◆ Cocaine abusers, especially those who inject, are at increased risk for contracting such infectious diseases as human immunodeficiency virus (HIV), as well as Hepatitis B and C.¹⁰

Sources:

- 1-3. National Institute on Drug Abuse (NIDA), Research Report, 1998.
4. L. Johnston, University of Michigan, 1999 *Monitoring the Future Survey*, 2000.
5. National Parents Resource Institute for Drug Education (PRIDE), *PRIDE Survey*, 1998.
6. Columbia University, <http://cpmcnet.columbia.edu>, April 1999.
- 7-10. NIDA, *Research Report*, 1999.

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