

[Drugs](#)

Why Some Meth and DMT Users Are Using Vapes

By Richard Greenhill

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“I was flying through a space tunnel while I saw an RPM gauge—like those on your car—that measured my brain activity. It got to the highest point and I was afraid that I was going to have a seizure when it suddenly dropped to zero with the sound of a wheel releasing air,” Lautaro*, a 22-year-old man from Argentina, tells me. “I thought I was dead and had moved on to some kind of other plane. At the end, I woke up in what felt like an orgasm and was crying of joy from the experience.”

If you're familiar with psychedelics, then you probably have a solid idea of what Lautaro's talking about—he's describing his first DMT trip. What might mark him out from other DMT users, is that he doesn't smoke his DMT; he vapes it.

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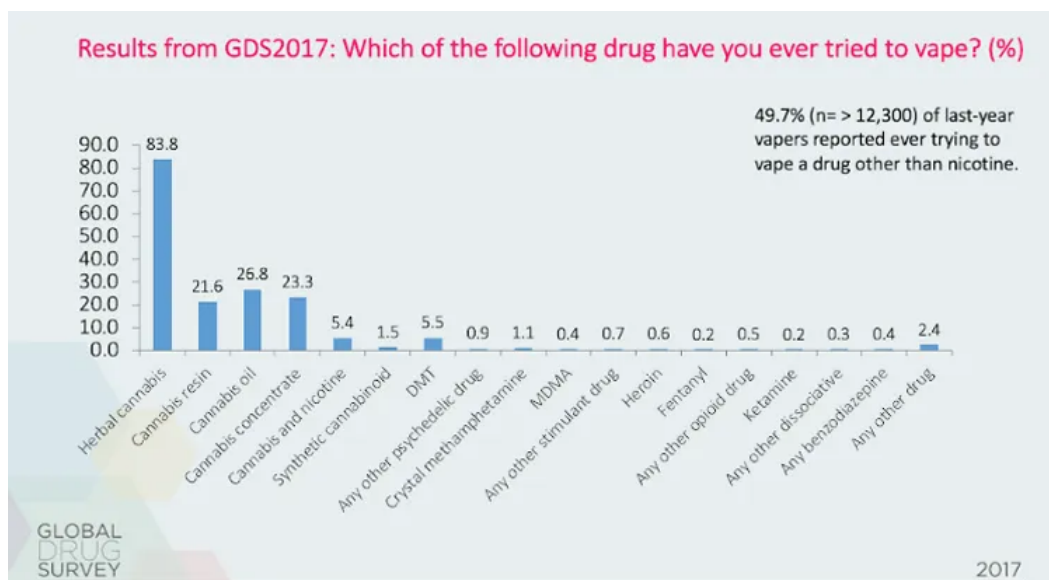
Lautaro's not alone here. There's a solid crowd of [marijuana vapers](#), and millions of people have put down cigarettes in favour of tasty e-liquid flavours like [unicorn milk](#) and [alien piss](#). Among recreational drug users, there's also

individuals—some of whom might call themselves psychonauts—dedicated to trying out all sorts of chemicals....in their vapes. And, as Guy Jones, technical lead at drug testing kit supplier Reagent Tests UK and senior scientist at drugs harm reduction NGO The Loop explains, drugs such as methamphetamine, crack cocaine and heroin are traditionally vaped anyway, albeit not through an electronic device. “As a rule of thumb, if one has to continuously apply heat then it’s not actually smoking but vaping,” he says. This means that some drug users with more serious dependencies are also turning to vaping, often as a means of harm reduction. We caught up with a few vapers to find out exactly why they decided to switch DMT and meth into their e-cigs.

As Lautaro’s trip illustrates, the psychoactive effects of vaping DMT are largely identical to those experienced smoking it—other vapers also reported typical visuals like spaceships and machine elves. Their reasons for vaping appear to be mixture of portability, ease of use, and dosage control. “The main advantages of vaping DMT are the ease and the control you have whilst vaping,” Sean*, a 35-year-old seasoned DMT and psychedelics user from the UK tells me. “It’s up to you how far down the rabbit hole you want to go, instead of messing around with lighters, bongs, machines, and other glassware.” Nils*, a 22-year-old German guy, explains to us that with the aforementioned traditional routes of smoking DMT, you run the risk of burning yourself, dropping the item, or not maintaining enough heat on the drug. “You can’t burn your fingers and don’t have to concentrate on how to operate things,” he says, “which gets pretty hard after a good first hit. With vaping, you just press the button and inhale till you have enough.”

Dale*, a 17-year-old American, emphasizes the sheer practicality of vaping DMT. “It’s far more concealable, easy to prepare, and easy to ingest.” Both Sean and Nils share Dale’s perspective. Nils tells me that he had his most intensely positive DMT experience sitting in a local park with nothing more than his headphones on and a yellowy brown liquid in his e-cigarette, while Sean recommends using a DMT-filled vape “on a nice walk in nature, at a festival, or around your mate’s house.”

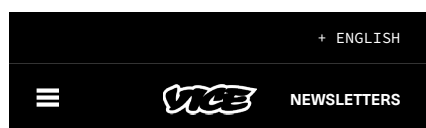
As a relatively novel route of administration, there is little research on the safety of vaping drugs beyond nicotine and cannabis. Nonetheless, for those with a vape pen, access to an online drugs forum, and an aptitude for (risky) experimentation, the possibilities to vape pretty much anything are wide open. We spoke to people who have vaped everything from ketamine and PCP, to Percocet and valerian root; there’s reports of cocaine, MDMA, and morphine e-liquids for sale on the darknet. Jones explains that this carries some risks—drugs such as GBL are irritant, meaning that inhaling their vapour may cause coughing or choking.



Whether the whole range of drugs will actually get you high when vaped is a different question. Jones says that “vaping works by heating molecules to give them enough energy to detach from the surface of a liquid and float into the air. The key difference between smoking and vaping is that the temperatures are kept low enough that there is almost no reaction with oxygen in the air.” The drugs that are easiest to vape effectively are those with lower boiling points—in other words, those with smaller molecules.

One such drug is methamphetamine. Lee*, a 27-year-old from the US, first started using meth in his early twenties. He experiences bi-polar episodes, and after his high-school sweetheart cheated on him, he decided that meth would best help him manage the emotions arising from a depressive phase. “It seems like a good hit is an instant mood lift, at least during the first couple of days,” he says. “So if I felt depressed or stressed, I’d score some ice and after a few hits I felt like I could handle anything in the world.” After developing a dependency, Lee sought therapeutic help, but still dabbles with a half gram of meth a few times across the year.

Last year, he vaped meth for the first time and has now switched entirely to this method. He first did this simply because it was more discreet, especially in the factory where he works producing aluminum. “I don’t have to go to the bathroom at work and hit a pipe in the stall,” he explains. “It makes you feel like a junkie when you sink to that level.” Through doing this, he also discovered that he was addressing aspects of meth use that may be behaviourally addictive—the ritual of watching the crystals melt in a glass pipe, twirling the pipe to get the puddle rolling, watching the vapour fill up then hitting it and seeing the meth recrystallize after. “Take the meth pipe out of the equation and I only smoke as much as I need and don’t overindulge.”



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Professor Adam R Winstock, a consultant psychiatrist and addiction medicine specialist who is also the founder & CEO Global Drug Survey, explains that alongside individual user differences there are three main drug properties that influence dependence risk: speed of onset, intensity of drug effects, and how long the peak effect lasts. In this respect, he suggests that there’s little difference between vaping and smoking meth—both have the same potential for dependency. The flipside of vaping, according to Winstock, is that the discretion it affords could reduce environmental barriers and possibly lead to increased use in some situations. “Many would not consider pulling out a meth pipe at a concert, but a vape pen?”

Mac*, a 29-year-old from the US, experimented with a large range of drugs—such as weed, alcohol and hallucinogens—through his late adolescence. He was also prescribed lorazepam and SSRIs for anxiety and depression, but he first came across amphetamine-type drugs when he discovered that phentermine might help him with ongoing weight issues. Mac followed the recommended daily dosage, shedding 120 pounds in a year and then coming off of the drug. A year later, a college friend introduced him to Adderall and he loved it, finding that he could focus much better on his college assignments. At some point, Mac’s use of Adderall became problematic, as he found himself bingeing, developing a dependency on cuckold-fetish porn, and alienating his girlfriend to the point that

they split up.

A few years down the line, Mac was at a friend's house, where he was introduced to meth. "And wow, this was exactly like Adderall, except strangely smoother, and the onset was exceptionally quicker," he remembers. This quick onset may account for why meth is so addictive and potentially destructive. When you smoke meth, it enters the bloodstream through the lungs. This provides a much quicker uptake than that achieved through oral or nasal administration—something which we can also observe in the difference between crack cocaine and cocaine powder dependencies, according to Jones.

Meth was supposed to be a one-time thing for Mac, but it quickly spiralled. "I had this idea in my head that the focus and energy I would get would be used for getting things done around the house, working, being productive. It never was." Mac turned to vaping meth after six months, when he finally acknowledged that he had a serious problem. In part, he was motivated by the discretion that Lee describes, and tells us that carrying an e-cig instead of meth paraphernalia lifted a giant cloud of paranoia. However, his primary aim was to dilute his meth (in the e-liquid) and gradually taper himself off of the drug. Like smoking, vaping also delivers meth through the lungs and consequently might have presented an equally addictive method for Mac.

When Mac first started vaping meth, he experienced a diminished intensity of drug effects, which was difficult for him. In the long run, he believes that diluting the meth was key in helping him become sober, alongside the use of e-liquid that still had nicotine in it. "There is only so much nicotine I would want before I put the device down for longer periods of time," he says. "It helped me slow everything down while I tried harder and harder to convince myself it was time to finally put this stuff down for good." This gave him the willpower to attend Narcotics Anonymous, and he's now sober. "I am confident that over the next few months everything will continue to normalize in my life as I stay free of the shackles that meth chained me down with."

Winstock says that it makes sense that Mac had more control over use and gradual dose reduction through vaping, and that this may have aided his path to sobriety. "That is because the basic and overriding principle of coming off any drug is that slower is easier / less uncomfortable / risky—it's more tolerable," he says. "Whether you see a doctor like me or you try and DIY it yourself in the community (as many people do very successfully), the key is to cut down the amount of the drug your brain is exposed to very slowly (months, weeks, not days), change to a less addictive route (e.g. oral or snorting instead of smoking /vaping, or injecting), and allow the adaptive changes in your brain that have occurred because of chronic drug exposure to gradually and very quietly return to normal."

**Names have been changed to protect anonymity.*

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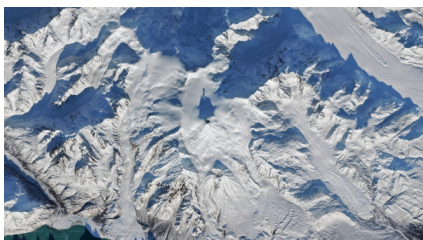
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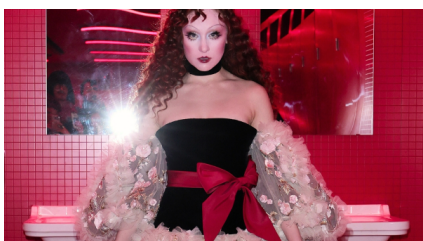
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