



a drug user's guide to zopiclone

What is zopiclone?

Zopiclone is a drug with very similar effects to benzodiazepines (like diazepam, temazepam). It is prescribed by doctors for the treatment of insomnia (difficulty sleeping), and in the recommended dose brings on sleep for periods of 6 to 8 hours. However, this leaflet is about the use of zopiclone as a 'street drug' and the risks and likely problems this may cause for drug users.

Zopiclone

"You can't really worry about your problems when your brain has been zimmied into neutral"

Zopiclone and Z-drugs

Zopiclone is prescribed in tablet form, either as zopiclone or under the brand name Zimovane, which along with zolpidem (brand name Stilnoct) and zaleplon (brand name Sonata), are known as 'Z drugs' — that is, sleeping pills which begin with the letter 'z'. Zopiclone tablets go by the street names of 'zimmers' or 'zimmies' and in some parts of the country 'zim-zims'. As they have similar 'benzolike' effects, it is likely that other z-drugs are also sold as 'zimmers' - the main way of distinguishing between street bought Z-drugs is that zaleplon (Sonata) is a capsule and zopiclone leaves a distinctive metallic taste in the mouth (see page 5).

Why do drug users use zopiclone?

Some regular heroin users start out using zopiclone to get the old 'monging out' effect when the quality of the local heroin is poor. Crack users find zopiclone helps them sleep or takes the 'edge' off the come-down, while other people use it to get off their face and forget about their problems.

Doctor, I'm having trouble sleeping!

Doctors are beginning to wise up to the fact that zopiclone is being blagged off them and used as a street drug, so are becoming more cautious about prescribing them to known or suspected drug users. Tablets sold on the street go for about £1 each, although the price comes down if bought in bulk and goes up when there is a drought on.

Legal status

Zopiclone is not classified under the Misuse of Drugs Act, and so is legal to possess or use without a prescription. However, zopiclone is a prescription only medicine (POM) under the 1968 Medicines Act, and so supply is legally restricted to doctors (prescribing) and pharmacists (dispensing). Zolpidem (Stilnoct) is the only 'Z-drug' covered by the Misuse of Drugs Act - it was made a Class C drug in 2003.



Appearance

Zopiclone tablets are produced by at least half a dozen different companies in the UK. Zimovane is the original UK brand name, but there many other brand names used in other countries. The tablets are usually film-coated and come in two main doses: 7.5 mg and 3.75 mg. The tablets can be round or oval and although usually white, but can be blue, orange or various other colours (for imported tablets). They can be marked with the 7.5mg or 3.75mg dose and can have the letter Z or other letters on them. Some drug users have bought tablets thought to contain higher doses, which may have been either legally manufactured in another country or are fakes.



Physical effects and risks

"Trying to sit down can take a zimmer user half an hour – it has to be seen to be believed, if it wasn't so sad it would be funny"

Physical effects

Not surprisingly, given that it is a sleeping pill, zopiclone gives you a heavy feeling in the arms and legs, and makes you want to close your eyes and fall asleep. But experienced users often try to resist the urge to 'fall over and snooze', because once this has passed (after an hour or so) they can experience the desired effects of sedation and euphoria ('monged out and buzzing'). Being on 'zimmers' in public places increases your vulnerability to street predators (muggers, rapists, etc) — far more so than the effects of heroin or crack. That's why most users stay at home when getting 'off it' on zopiclone. It causes a loss of coordination (staggering, swaying, stumbling, etc..) and very slowed-down behaviour. It can take a great effort to carry out even the simplest actions.

Metal mouth

Zopiclone causes an unpleasant metallic after-taste in the mouth (dysgeusia), which is experienced by most users within an hour or so of swallowing the tablet(s). Although people using the drug to aid sleep generally do not experience this taste until after they wake up, people who stay awake after using zopiclone experience the metallic taste during this

semi-conscious state. Regular users say the metallic taste becomes less intense over time, although some say that strong memories of this taste come back to them when they have run out of zopiclone and are craving it.

Other physical effects

Some long-term heavy users may eventually find that they experience stimulant-type effects from the drug too — including constantly talking, fidgeting, lack of appetite, and sleep disturbances. Vomiting and constipation/diarrhoea can occur when using, while some people report experiencing hangover-like symptoms (e.g. headaches) when 'coming down' from zopiclone use.

Cancer and other physical problems

Research has shown that, even at recommended doses, prolonged use of zopiclone may cause cancer (affecting brain, lung, bowel, breast and bladder). Zopiclone can also have an adverse effect on the immune system (increasing rates of colds and infections), and is not recommended for people with liver or kidney disease, pregnant or breast-feeding women, or children.

Mental effects and risks

Mental effects

Zopiclone helps you sleep, though users who manage to stay awake on it can feel drowsy and calm. Zopiclone can 'turn down' the intensity of your emotions, and this makes it desirable to people trying to escape from unpleasant feelings and memories — although zopiclone can also block or lessen good feelings as well as bad ones.

"Eventually, it makes you lose all your feelings, it makes you feel totally numb"

This can include sexual feelings, which users say are almost totally eradicated when under the influence of zopiclone.

"A girl could strip naked in front of you, and you would not want sex with her, you have no strength or energy for sex, and no interest in it - or anything at all really".

Amnesia and invisibility

Zopiclone users often say that one of the worst things about using the drug is the inability to think rationally or clearly; along with memory problems (e.g. 'constantly forgetting what you were saying'); and partial or total amnesia. Some people report hiding things (like drugs or money) when 'wrecked on zimmers' and then having no memory of where they had hidden them once the drug has worn off. Like heavy users of temazepam, zopiclone users can

get over-confident, with the worst cases becoming deluded that they are more-or-less invisible – perhaps reflecting their shrunken sense of self-awareness. Combined with fuzzy thinking and minimal memory, this can lead users into unplanned risky activities, believing that they won't get caught – like shoplifting in a store from which they are banned.

"I necked a handful of zimmers, then a few hours later I came round in my flat to find myself surrounded by leather jackets — but I had no memory of how they had come to be there".

Aggressive and violent behaviour

Zopiclone misuse may increase aggression and violence - among women as well as men — and some users become insensitive to pain. Heroin and crack users who usually fund their habits by doing crimes like shoplifting and credit card fraud often say that periods of zopiclone use led them into carrying out more violent crimes like 'mugging' — with some admitting to outbursts of random violence. Also, when waking up from the deep slumber which ended zopiclone sessions, users commonly had no memory of their violent actions (amnesia).

"I often forgot about violent behaviour until friends with wounds and bruises reminded me later on what I had done to them".



"The risk of overdosing on zopiclone increases when: higher doses are used; when it is injected and when it is mixed with other drugs"

Zopiclone deaths

About 40 to 50 British people die each year due to poisoning by either zopiclone or zolpidem — though other drugs are usually involved. The risk of overdose on zopiclone increases (a) with higher doses, (b) when it is injected rather than swallowed, and (c) when it is mixed with depressant drugs like alcohol, sedatives (tranquillisers and sleeping pills), or opioids (notably heroin or methadone).

Higher doses

The doses of zopiclone prescribed by doctors for the treatment of insomnia usually range from 3.75 mg to 7.5 mg a day for adults (zopiclone is not recommended for children). By contrast, the number

of tablets generally taken in a session by drug users can range from three (about 20 mg) for new users up to 20 (150 mg) for regular users — with some long-term users taking even higher doses.

The higher the dose you use, the greater the risk of overdose and death.

Injecting zopiclone

All prescribed users swallow zopiclone tablets, as do most 'street' users. Sniffing or smoking zopiclone tablets is highly impractical and rarely heard of. The tablets are 'practically insoluble' — which means that they do not dissolve, even after boiling — and so injecting is extremely messy and dangerous. Those people that do inject the tablets, do so by scraping



off the film coating, chopping up the remaining tablet very finely then adding water, stirring and heating in a spoon or cooker. Although some add dissolving agents like citric acid or Vitamin-C powder, this doesn't really dissolve the powder. The thick chalky sludge that results is difficult to inject and is much more likely than heroin or crack to cause damage to the veins, resulting in abscesses, deep vein thrombosis (DVT), aneurysm, ulcers, varicose veins and gangrene.

Injecting zopiclone greatly increases the risk of overdose and death, vein damage and picking up viruses like hepatitis C and HIV.

Zopiclone mixed with other drugs

Zopiclone is sometimes crushed and mixed with heroin before it is sold (without the users knowledge), increasing (you guessed it) the chances of overdose. Those who choose to use zopiclone sometime use it together with crack, and/or heroin, to increase their main effects and reduce their after-effects. Some people use zopiclone with

booze as this substantially magnifies the effects (and the risk of overdose) of both the alcohol and the zopiclone. Even at prescribed doses it is advised not to 'mix' zopiclone with other depressant drugs, particularly other sleeping pills and alcohol as this greatly increases the risk of overdose and death. But some people will use zopiclone with anything they can get hold of.

"When I've had zimmers, they make me feel open to taking just about anything, even stuff I wouldn't usually touch".

This state of mind is very similar to the disinhibition brought about by heavy alcohol use. Bad reactions have also been reported when zopiclone has been taken at the same time as erythromycin (antibiotic for people allergic to penicillin), trimipramine (tricyclic anti-depressant), or carbamazepine (anticonvulsant and mood stabiliser).

Mixing zopiclone with other drugs greatly increases the risk of overdose and death.

Dealing with zopiclone overdose

Signs of overdose

Overdose from zopiclone (and other z-drugs) is a result of excessive sedation and depressed respiratory function (falling into a sleep so deep your breathing slows down or stops) which may progress to coma and death. Knowing when a drug user has overdosed on zopiclone is very difficult, as most of the signs of overdose listed in the medical books - drowsiness, swaying and staggering, clumsiness and slurred speech - are 'normal' for people using at higher doses. However, if a friend is having difficulty breathing, you notice any strange noises or gurgling sounds, their mouths or lips turn blue or they can't be woken - it is still best to put them in the recovery position (to stop them choking to death on their vomit) and call an ambulance.

Calling an ambulance

The ambulance service do not automatically call the police to overdose situations. Zopiclone overdose can be treated with the benzodiazepine receptor antagonist flumazenil, which rapidly reverses the effects of zopiclone, so you should tell paramedics if you know or suspect the person has taken zopiclone.

The recovery position



1. Put the right hand by the head (as if they were waving).



2. Put the left arm across the chest, so that the back of the hand rests against the cheek.



3. Hold the hand in place and lift up the left knee.



4. Turn them on their side by pushing down on the knee.

Addiction

"Zimmers are really addictive, and the rattle is about five times worse than the rattle from gear"

Addiction

When they are used in prescribed doses to treat insomnia (one or two tablets per day) - dependence to zopiclone is fairly rare and takes a 'month or longer'. Drug users often start on a dose of about three tablets a day, which increases to about 10 to 20 tablets a day over a period of one or two weeks before many say they feel 'hooked on zimmers'.

Cravings

Cravings for zopiclone (an overwhelming compulsive desire to use) are said to be stronger than cravings for other drugs, even crack or heroin.

"I made sure that I always had credit on my phone, so that I did not miss any calls from dealers about new batches of zimmers ... but waiting for the dealer to turn up with the tabs was agonising — you end up pacing the floor, smashing things, and cursing them"

Once a zopiclone habit is well established, users say they much preferred to travel several miles on buses or trains to the source of the drugs rather than wait for them to be delivered, because the

anxiety experienced while waiting for dealers to turn up at their homes is too unbearable.

"Much worse than when waiting for rocks or gear".

Withdrawals

After cravings, the other withdrawal symptoms most commonly mentioned included fatigue and muscular weakness ("body like jelly"); aching limbs ("dead legs"), sweats, appetite problems (reduced or increased hunger), and insomnia. Withdrawal symptoms listed in medical reports include anxiety, increased heart rate, sweats, flushes, palpitations and fits. Users often say that coming off zopiclone is far more unbearable than a heroin-related 'cold turkey'. The duration of the zopiclone withdrawal syndrome is comparable to the duration of the heroin withdrawal syndrome.

"You rattle for about three to five days . . . after the worst is over, the craving and other stuff - like thinking about the metal taste - go on for weeks and weeks".

Coming off

Zopiclone withdrawal

As with withdrawals from heroin, one of the worst symptoms of zopiclone withdrawals is insomnia (difficulty sleeping), because the lack of sleep magnifies the unpleasantness of the other withdrawal symptoms, and reduces your will to deal with them. People addicted to zopiclone prescribed to them by their doctor may be advised to switch to an equivalent dose of the longer lasting diazepam and then slowly reduce over several months.

However, doctors and drug clinics do not usually prescribe benzo-like sleeping pills to drug users recovering from zopiclone dependence (or for any other reason). This is because of the risk of overdose and dependence on benzos. The main medication prescribed tends to be Nytol.



Getting help

Some users have tried reducing the symptoms of withdrawal on their own by using opiates or other drugs over several months. However, this is extremely unpredictable and may well cause more problems than it solves. If you want to cut down, stop or get some advice, contact your local drug service and get some specialist help (see back page for details).

Drug testing

The available body fluid tests for illicit drug use (including urine, saliva and sweat tests) do not usually include zopiclone. Diazepam and temazepam are the only hypnosedatives (sleeping pills) routinely covered by drug testing devices at present. Drug users attending some criminal justice/drug services as part of a court order are required to be drug free. It has been noticed that even though some people are testing negative they are still turning up heavily intoxicated on zopiclone.

Nytol contains diphenhydramine an (OverThe Counter) antihistamine, which is not so habit forming - although a lot of drug users complain it doesn't get them to sleep unless they take, way over the recommended dose.

Summary and reducing risk

- Zopiclone tablets come in a variety of different shapes and colours, usually in 3.75mg and 7.5mg doses. Beware of imported tablets as these may be counterfeit, adulterated, or higher doses.
- Using bigger doses of zopiclone over time increases the risk of dependence and overdose, as does regular use of high doses.
- Regular use for long periods can reduce immunity (more colds and infections), and even increase the risk of various kinds of cancer.
- Avoid driving or attempting anything hazardous like cooking or going out when 'zimmied'. In fact the safest place to use zopiclone is at home in bed.
- Looking after children should also be avoided when on zopiclone.
 Zopiclone passes into breast milk, so should not be used by nursing mothers.
- Users who return to taking high doses of zopiclone after a period of abstinence
 when their tolerance has dropped face a high risk of overdosing.
- Zopiclone overdose can be treated with the benzodiazepine receptor antagonist flumazenil, which rapidly reverses its effects. So call an ambulance and tell the paramedics what has been taken. The police are not routinely called to overdoses.
- It is a bad idea to inject zopiclone. The tablets are 'practically insoluble' so there is a very high risk of vein and tissue damage along with the usual risk of picking up and passing on infectious diseases like hepatitis C and HIV.
- Most deaths from zopiclone involve more than one drug. In particular, using zopiclone in combination with alcohol, benzodiazepines and opiates increases the risk of overdose. Adverse reactions can occur if zopiclone is mixed with any of three prescription drugs, namely erythromycin, trimipramine, or carbamazepine.

 $\label{thm:chemical} The chemical structure of zopiclone.$ The full chemical name is chloropyridinoxotriazabicyclononatrienylmethylpiperazinecarboxylate