ADVICE AND INFORMATION FOR PEOPLE WHO USE PERFORMANCE ENHANCING DRUGS.





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IF YOU USE PEDS, THE INFORMATION IN THIS BOOKLET, WILL PROVIDE ADVICE ABOUT STEROIDS, SAFER INJECTING AND HOW TO REDUCE THE HARM.

Anabolic steroids are synthetic substances that mimic the effects of the male sex hormone testosterone.

They are prescription-only medications that are taken illegally to increase muscle mass, strength and athletic performance. If abused, anabolic steroids can result in serious side effects and, in some cases, addiction.

Anabolic Steroid work by mimicking the effects of the male hormone testosterone. They are not to be confused with corticosteroids, which is a different

type of steroid commonly used to treat a number of conditions, for example, psoriasis and eczema.

Anabolic steroids do have limited medicinal uses. They are often used to treat conditions resulting from steroid deficiency, for example, delayed puberty, as well as other conditions that result in muscle loss, such as cancer and AIDS. Some bodybuilders, athletes and members of the public abuse these drugs in an attempt to improve their physical appearance, performance, or both.

STREET NAMES

There are a number of street names for anabolic steroids. They include:

- Roids
- Gear
- Juice
- Sauce
- Slop

- Product, Stacking
- Hammer
- Junk
- Arnolds

THE HISTORY OF ANABOLIC STEROIDS DATES BACK TO THE 1930'S, BEFORE THE TERM STEROIDS WAS USED

IN THE 1930'S, A TEAM OF SCIENTISTS CREATED A SYNTHETIC FORM OF TESTOSTERONE (A MALE HORMONE) FOR MEDICINAL PURPOSES.

The treatment helped men who were unable to produce the typical quantities of the hormone themselves and was used successfully to treat those suffering from stunted growth, development and sexual functioning.

Scientists soon realised that this 'artificial' form of testosterone had other uses. During World War II, it was found that this form of testosterone could be used to help undernourished soldiers gain weight and improve their overall performance. After the war, steroid became popular amongst athletes who regularly used them to compete.

In the 1956 Olympics it was noticed that Soviet athletes performed exceptionally well and was later discovered that the athletes were using testosterone. An American doctor called Dr Zeigler, heard about the Soviet Athletes using testosterone and created a more selective form of what we now call anabolic steroids.

From this point until the early 1970s steroids became increasing popular amongst many professionals including sports players and athletes.

The International Olympic Committee soon realised that steroid use was putting those who had chosen not to take them at an unfair advantage and decided to ban them from the Olympic competition. The black market benefited from this ban and sales continued.

Illicit use of steroids is still prevalent today and surveys/polls highlight that adolescent use of steroids is on the increase and that a greater number of people are actively using them in an attempt to improve body image. Both society and the media often promote body image and looks by showing famous people on TV, newspapers and magazines with defined figures. Steroids are often seen as a 'quick fix' to blend into society but with very little consideration of the consequences.



ANABOLIC STEROIDS ARE CLASS C DRUGS AND ARE ONLY AVAILABLE ON PRESCRIPTION FOR THE TREATMENT OF CERTAIN TYPES OF CONDITIONS.

IT'S NOT ILLEGAL TO POSSESS OR IMPORT STEROIDS AS LONG AS THEY'RE FOR PERSONAL USE.

The law was amended on April 23rd 2012 on the importation and exportation to and from the UK; it is now illegal to buy anabolic steroids from websites or other mail order services even when it's only for personal use.

You will be able to travel to other countries yourself and bring your own anabolic steroids into the UK, but only for personal use. This also carries risks as there is no guidance on what is deemed by customs officers as personal use.

Possession or importing steroids with intent to supply carries a maximum sentence of 14 years in prison and an unlimited fine.

If you give steroids to friends, this is also classed as dealing and is illegal.

ANABOLIC STEROIDS ARE AVAILABLE IN TWO FORMS; LIQUID FOR INJECTING AND TABLETS TO SWALLOW, BOTH OF VARYING STRENGTHS.

ORAL STEROIDS

Most oral steroids contain a chemical called 17-alpha alkylation. This chemical prevents the steroid from becoming inactive by attempting to halt the digestive system from breaking it down. A major drawback to this is that it puts a huge strain on the liver and can result in Jaundice. Research has shown that using this type of steroid can interfere with the livers normal functions and can increase the risk of liver cancer.

Research has also proved that injectable steroids are less harmful than their oral counterparts since they are chemically designed to bypass the human body's digestive system. Using needles comes with all the risks associated with injecting.

All steroids come with side effects and potential health risks regardless of the way in which it's administered.

INJECTABLE STEROIDS

Injectable steroids can be water or oil-based. They are often used to increase energy levels during workouts, speed up recovery times and to enhance muscle size & strength.

However, they may come with side effects such as decreased blood clotting ability, premature hair loss, stunted growth, acne, water retention, cysts, aggression, high blood pressure, impotence, low sperm reduction, suppression of the immune system, anxiety and hepatitis to name a few.



TYPES OF STEROIDS

INJECTABLE STEROIDS INCLUDE:

Chemical name	Trade Name	Common Term
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Nandrolone-Decanoate Deca-Durabolin Deca Boldenone-Undeclynate Equipoise EQ

Drostanolone Masteron only trade name used

Nandrolone- Phenylpropionate Often called

numerous common NPP

trade names

Methenolone Primobolan Depot Primo

Trenbolone no common trade name Tren

Testosterone Sustanon, Testoviron etc. Test

Stanozolol Winstrol Depot Winny

ORAL STEROIDS INCLUDE:

Chemical name Trade Name Common Term

OxandroloneAnavarVarOxymetholoneAnadrolDrolMethandrostenoloneDianabolDbol

MethenolonePrimobolanPrimoStanozololWinstrolWinny

Fluoxymesterone Halotestin Halo

AN ANABOLIC STEROID CYCLE REFERS TO THE PERIOD OF ACTUAL STEROID USE, WHEN STEROIDS ARE TAKEN.

THIS CYCLE IS OFTEN REFERRED TO AS THE "ON-CYCLE" AND WHEN THEY ARE NOT, AS "OFF-CYCLE".

Cycles vary and are generally 6-12s week on and off cycles. This is not definitive as there is no medical guidance on what is construed as a safe cycle.

There are hundreds of different types of anabolic steroids on the market and no two cycles are the same.

When it comes to the on-cycle there are a number of different steroids that are used in combination with non-steroidal drugs that are sometimes included in this phase. Steroid users typically "stack" the drugs, meaning that they take two or more different anabolic steroids, mixing oral and/or injectable types, and sometimes even including compounds that are designed for veterinary use

Advice on cycles tends to come from 'a friend at the gym' or it could be the person who sold the steroids.

There is no safe way of taking anabolic steroids and no definitive advice on how they should be taken. The full effects from commencing a cycle are not truly known until the cycle is underway. A common misconception is "my friend has been taking steroids for years and he's had no side-effects. I'll be fine". Steroids affect people differently and there is no way to be sure how they will affect the body. Some people experience one or more side effects after the first on-cycle others do not. Some experience side effects months or years after their very first oncycle. There is no way of knowing how they will affect you.



DRUGS USED IN CONJUNCTION WITH STEROIDS

There are many other drugs taken alongside anabolic steroids to further increase weight gain, strength, muscle mass and to attempt to counteract some of the side effects. It is important to note that there is no scientific evidence to suggest that taking these drugs as part of a cycle will give the desired outcome and may result in adverse effects. An explanation is provided for each below.

Human Growth Hormone (HGH)

Insulin

Human Growth Hormone is produced by the pituitary gland and spurs growth in children and adolescents. It also helps to regulate body composition, muscle and bone growth, sugar and fat metabolism, bodily fluids and heart function. The drug a number of medicinal uses in both children and adults and is often used to treat poor growth, HGH deficiency or insufficiency, chronic kidney insufficiency and muscle wasting disease associated with HIV/ AIDS.

HGH is sometimes used by steroid users along with other performance-enhancing drugs such as anabolic steroids to build muscle and improve athletic performance. HGH's effect on athletic performance is not yet known.

Side effects of HGH use include:

- Overgrowth of the bones
- Carpal tunnel syndrome
- Numbness and tingling of the skin
- High cholesterol levels
- Nerve, muscle, or joint pain
- swelling due to fluid in the body's tissues (edema)

HGH can also increase the risk of diabetes and contribute to the growth of cancerous tumours.

Insulin is a small polypeptide hormone which is synthesized and stored in the pancreas. Insulin is important as it's needed for the regulation of blood sugar. When the blood sugar levels increase in the blood, the pancreas senses this and releases insulin into the blood. The insulin lowers the blood sugars by allowing it to enter the body cells where it is used up as energy.

Diabetes is a disorder where the levels of insulin are either absent, low or the body has developed a resistant to it. There are two types of diabetes. Type 1 diabetes is congenital and usually presents in childhood. The pancreas never makes insulin. Type 2 diabetes the onset tends to be later in life and is seen in individuals who are overweight, do not exercise and eat a high sugar diet. The body does have insulin but in some cases the insulin is not adequate. The recommended treatment is to lose weight, exercise, eat a balanced diet and take medications to stimulate the release of insulin from the pancreas.

Steroid users believe that insulin possess anabolic properties and can improve muscle mass. Excess insulin is a common cause of hypoglycemia in diabetics but in healthy individuals any dose of insulin can cause complications. If there is even a slight miscalculation in the dose of insulin this can result in a hypoglycemic attack which can lead to coma and death.

Insulin Growth Factor (IGF-1)

Human Chorionic Gonadotrophin

Insulin-like Growth Factor (IGF-1) is the most predominant growth factor hormone, with a very similar structure to insulin although it is released by the liver. It plays an important role in growth and development in children and is thought to have anabolic effects in adults.

During the 1990's, researchers began studying the benefits of IGF-1 supplementation, which reportedly included improvements in muscle hypertrophy, tissue repair and recovery times, among others. Soon, a variety of manufacturers were marketing products containing IGF-1 and labeled as nutrition supplements.

Due to perceived anabolic effects IGF-1 is used to increase muscle mass and strength, although clinical studies have not shown any increases. It is thought that it is actually the IGF binding protein-3 which is responsible for growth rather than the growth factor itself. IGF-1 does, however, inhibit cell death and so may have a role in reducing recovery times.

Side-Effects include

Acromegaly in adult athletes (a condition where the pituitary gland produces too much HGH, resulting in the growth and swelling of body parts, typically hands, feet, nose but can progress to brow and jaw protrusion and swelling of internal organs)

- Organomegaly (the abnormal enlargement of organs)
- Hypoglycemia (lower than normal levels of glucose in the blood)
- Cancer (prostate, lung and colorectal cancers have all been reported)

Human Chorionic Gonadotrophin (HCG) is secreted by the pituitary gland and acts in the body by stimulating the formation of luteinizing hormone (Ih). Lh stimulates the testes to produce testosterone even when natural LH is not present or is deficient. It therefore is useful for maintaining testosterone production and/or testicle size during a steroid cycle.

HCG is used to increase or kick-start natural testosterone levels after using steroids. When taking steroids the body naturally stops producing hormones because it's receiving them from another source. Testicular size, sperm count and testosterone production greatly decrease. Steroid users take HCG in an attempt to restore natural testosterone levels and to maintain the muscle size and strength gained.

Side effects include:

- Increased testosterone levels
- Increased estrogen and progesterone levels
- Breast tenderness
- Growth of breast tissue (Gynocomastia)

Tamoxifen Clenbuterol

Tamoxifen (Nolvadex) is a nonsteroidal that blocks the effects of estrogen. It is used to treat certain types of breast cancer in women and men. It is also used to prevent breast cancer in women who have had ductal carcinoma in situ (abnormal cells in the ducts of the breast) and are at a high risk of developing breast cancer.

Tamoxifen is used after coming off an anabolic steroid. Since most anabolic steroids suppress the testosterone production, Tamoxifen is sometimes added near the end of a cycle. Some use Tamoxifen, others prefer Arimidex. The effects of both drugs are similar. Since Tamoxifen also blocks the estrogen activity, it is sometimes added to a regimen to prevent gynecomastia and water retention in men.

The side effects for women include:

- Vaginal bleeding
- Irregular menstrual cycles
- Changes in vision
- Sudden or gradual shortness of breath
- Leg swelling
- Pain in the pelvic area
- Lower abdominal fullness
- New breast lumps

It is recommended that women taking tamoxifen have their breasts regularly examined by health care professionals. Female steroid users should also be aware that birth control will not work in the presence of tamoxifen.

Clenbuterol (Clen) was designed with the intent of treating chronic asthma. Clenbuterol is used as a fat burner with some similar properties to Ephedrine. While designed to treat respiratory conditions it is thought that the drug greatly increases total metabolic activity thus burning stored fat for energy. The direct aim of using clenbuterol is fat burning, steroid users take the drug to burn off excess weight and 'cut up' their bodies.

Side effects include:

- Heart problems (palpitations, increased heart rate and blood pressure).
- Sleep problems including insomnia
- Nervousness and anxiety (Clenbuterol has shown to cause emotional side effects, including severe nervousness, edginess, paranoia and anxiety).
- Weight gain (weight loss is often temporary).

Diuretics Creatine

A diuretic is a drug that can increase the rate of water excretion from the body. It is used by steroid users to shed 'extra' water to enhance the definition of their muscles. Athletes in sports such as wrestling and boxing need to be at a certain weight to compete. Therefore, the tactical use of a diuretic on the weigh in date can make a difference. Some look at this as an unfair advantage, but dropping weight will always be entertained by competing athletes.

Side effects include:

- Dehydration
- Hypotension (low blood pressure)
- Muscle Cramps
- Electrolyte disturbances (alterations in the levels of electrolytes such as sodium, potassium and chloride)
- Muscle weakness
- Seizures (or fits/convulsions)
- Gout (caused by a build-up of uric acid)
- Fatigue

Creatine is a type of amino acid naturally found in the body. It is also found in foods but is typically consumed in supplement form.

Creatine's main function in the body is to produce adequate energy for muscles to properly work. Over the last few years, creatine monohydrate has become one of the most popular types of supplements used to improve physical performance as well as increase muscle mass.

While many steroid users are aware of the benefits gained with using creatine, most do not know the harm it can cause in the body.

Side effects include:

- Muscle cramps
- gastrointestinal problems
- dehydration and water retention
- kidney problems
- Mental health problems

ANABOLIC STEROID FAQs

ARE THERE ANY SIDE EFFECTS FROM USING ANABOLIC STEROIDS?

There are many side effects associated with anabolic steroid use, some of which can lead to high blood pressure or even a heart attack.

In men, physical effects include:

- Baldness
- Infertility
- Reduced sperm count
- Shrinking of testicles
- Gynecomastia (breast tissue)
- Splayed teeth and
- Overgrowth of forehead
- Acne
- Increased risk of developing prostate cancer

In women, physical effects include:

- Loss of breasts
- Enlarged clitoris
- Deepened voice
- Acne
- Growth of facial and body hair
- Hair loss
- Irregular periods
- Skin roughness

Men and women can develop any of the following conditions:

- High blood pressure/cholesterol
- Blood clots
- Fluid retention
- Liver or kidney tumours
- Heart attack or stroke

ARE ANABOLIC STEROIDS ADDICTIVE?

An undetermined percentage of steroid users become addicted as evidenced by their continuing to take steroids in spite of physical problems, negative effects on social relations, or nervousness and irritability.

Also, they spend large amounts of time and money obtaining the drugs and experience withdrawal symptoms such as mood swings, fatigue, restlessness, loss of appetite, insomnia, reduced sex drive and the desire to take more steroids.

ARE THERE ANY MENTAL HEALTH SYMPTOMS RELATED TO ANABOLIC STEROID USE?

Yes. The most dangerous of the withdrawal symptoms is depression, because it sometimes leads to suicide attempts. Untreated, some depressive symptoms associated with anabolic steroid withdrawal have been known to persist for a year or more after the abuser stops taking the drugs.

Anabolic steroids, particularly in high doses can increase irritability, aggression, mood swings, manic behavior and hallucinations and delusions. If you add recreational drugs to the mix, for example, cocaine, this can increase further, leading to physical violence such as fighting committing offences, using force to obtain something and domestic violence.

Steroid users who have committed aggressive acts or crimes generally report that they engage in these behaviours more often when they take steroids than when they are drug-free.

Body Dysmorphia

However, people of all ages have been known to abuse these drugs, including adolescent boys who suffer from body dysmorphia (when the way someone thinks of their body doesn't match the way it looks). Teenage boys and young men may take the drugs because they have reverse anorexia, meaning they don't see themselves as being physically big enough or strong enough.

Some people believe that taking anabolic steroids is a way of getting healthy and fit. This is not true.



HOW TO REDUCE THE HARM CAUSED BY ANABOLIC STEROIDS

INJECTING ANABOLIC STEROIDS CARRIES A NUMBER OF RISKS AND IF ADMINISTERED INCORRECTLY CAN RESULT IN INJURY AND IN SOME CASES DEATH.

There are some basic principles that can be adopted to reduce the risk of harm. If you are considering injecting steroids the advice is to visit your local needle exchange and/or GP for professional advice.

1. NEVER SHARE NEEDLES.

Always use sterile injecting equipment. Sharing increases the risk of HIV and Hepatitis C Infection. It's not ok to share with friends, how do you know they are not infected with a blood borne virus?

2. MAKE SURE YOU USE THE CORRECT EQUIPMENT.

For intra-muscular injection of oil based steroids you should use a long green needle ($21g \times 1.5$ ") or a long blue ($23g \times 1.25$ "). It is important to remember that you can't just use any needle! For example, if you decide to use orange needles they are not always long enough to reach the muscle, their narrow width makes it difficult to draw up an oily solution and they may snap.

3. BE CAREFUL NOT TO INJECT STEROIDS INTO THE VEIN

They are for intra-muscular injection only! Recommended sites for intramuscular injections are the Gluteus maximus (the upper outer quadrant of the buttocks). Another site is the Vastus lateralis (middle outer muscle of the thigh). Care must be taken when injecting into the Gluteus maximus since the sciatic nerves live around this area. Hitting this nerve is extremely painful and dangerous.

4. 2ML SYRINGE

It is recommended that a 2ml syringe is used and should always be the maximum amount of steroid injected at any one time.

5. SITE INJECTING

It's pointless site injecting and can result in infections and abscesses. Steroids are distributed around the body therefore it is advisable to stick to the two areas identified above.

6. BE AWARE OF COUNTERFEIT DRUGS.

There are many copies in circulation, and it's sometimes hard to tell which ones are genuine. It's impossible to say what's in counterfeit steroids and can increase the risks of side effects.

7. SMALL DOSES

If you are determined to use steroids use the smallest dose for your cycles. Do not follow other users' regimes, particularly those that are on unusually long cycles and stacking many different drugs.

8. CYCLES

Keep the length of on-cycles to a minimum.

9. STACKING

Stacking different steroids has minimal benefits and increases the risk of side effects.

10. DISPOSE OF USED NEEDLES

Always dispose of used needles, syringes, empty ampoules and swabs in a sharps container. These are available from your local needle exchange.

11. LOOK AFTER YOURSELF

Follow a balanced diet, sleep regularly and don't overdo training regimes.

12. SIDE EFFECTS

Be aware of the side effects. Seek medical advice if you have any concerns.

13. SEE YOUR GP

If you decide to take anabolic steroids inform you GP so that you can be monitored regularly.

14. DO YOUR RESEARCH

Don't take everything you read by face value. There is lots of conflicting information available on the internet and from other steroid users.

HELP, ADVICE & CLEAN NEEDLES



Help and advice

It is advisable that you visit your local needle exchange service for information about steroid use.

Most of them will have a confidential helpline number which you can call and talk through your decision and the reasons for wanting to use steroids, with a practitioner. It will help you weigh up the pros & cons and make an informed choice.

If you still decide to use steroids, they can supply you with equipment and harm reduction information.

Clean needles

There are over 1,000 needle exchange schemes in the United Kingdom, which include Drug Action Teams, pharmacies, and specialist services.

The easiest way to find the location of your nearest needle exchange is to ask at your local pharmacy (who may have one) or ask your doctor (general practitioner)