Inhalants

What are inhalants?

Inhalants are common household, industrial and medical products that produce vapours, which some people inhale (breathe in) to make them feel intoxicated or high.¹

Some common inhalants include:
- aerosol spray
- chrome-based paint
- paint and paint thinner
- felt-tipped pens
- correction fluid (e.g. ‘Liquid Paper’)
- gas from lighters or barbecues (butane)
- cleaning fluid
- glue
- petrol
- nitrous oxide.¹

Other names
Glue, gas, gasoline, sniff, huff, chroming, poppers.

How are they used?
Inhalants are breathed in through the nose or mouth.

They may be sprayed into a plastic bag, poured into a bottle or soaked onto a cloth or sleeve before being inhaled.

Sometimes they are inhaled directly from the container or are sprayed directly into the mouth or nose. This method is very dangerous because it can cause suffocation.²

Effects of inhalants

There is no safe level of drug use. Use of any drug always carries some risk. It’s important to be careful when taking any type of drug.

Inhalants affect everyone differently, based on:
- size, weight and health
- whether the person is used to taking it
- whether other drugs are taken around the same time
- the amount taken
- the strength of the drug
- amount of fresh air breathed while sniffing
- amount of physical activity before and after sniffing.

Sniffing can cause:
- intoxication
- nausea
- headaches
- injuries
- delirium
- seizures
- pneumonia from inhaling vomit
- dependence
- brain damage
- coma
- abnormal heart rhythm
- sudden death
- asphyxiation (if using a plastic bag).³
Sniffing is always risky, but some situations make it even more dangerous:

- sniffing in an enclosed space or indoors
- running or doing other physical activity after sniffing (could cause death due to cardiac sensitisation)
- mixing sniffing with medicines or illegal drugs
- sniffing when the person has other health problems.

**Overdose**

If you inhale a substance many times or use a particularly strong inhalant, you could overdose. If you have any of the symptoms below, call an ambulance straight away by dialling triple zero (000). Ambulance officers don’t need to involve the police.

- nausea, vomiting and diarrhoea
- irregular heartbeat
- chest pain
- hallucinations
- blackout, seizures and coma.

Find out more about overdose at adf.org.au/insights/overdose

**Long-term effects**

Regular use of inhalants may eventually cause:

- irritability and depression
- memory loss
- reduced attention span and ability to think clearly
- pimplles around the mouth and lips
- pale appearance
- tremors
- weight loss
- reduced growth potential (height)
- tiredness
- excessive thirst
- loss of sense of smell and hearing
- problems with blood production, which may result in anaemia, irregular heartbeat, heart muscle damage
- chest pain and angina
- indigestion and stomach ulcers
- liver and kidney damage
- needing to use more to get the same effect
- dependence on inhalants
- financial, work and social problems.

Most of these long-term effects can be reversed if use is stopped. However, some inhalants, such as cleaning products, correction fluid, aerosol sprays and petrol can cause permanent damage.

Some chemicals can build up in the body and damage the stomach, intestines, brain, nervous system, kidneys and liver.

**Using inhalants with other drugs**

The effects of taking inhalants with other drugs – including over-the-counter or prescribed medications – can be unpredictable and dangerous, and could include:

- Inhalants + alcohol, benzodiazepines or opiates: enormous strain on the body, and can affect breathing rate and may increase the risk of passing out and suffocating or choking on vomit.
Withdrawal

Giving up inhalants after using them for a long time is challenging because the body has to get used to functioning without them. Withdrawal symptoms usually start 24–48 hours after the last use, and may last for 2 to 5 days. These symptoms can include:

- hangover
- headache, nausea and stomach pain
- tiredness, shakiness, tremors
- cramps
- hallucinations and visual disorders, such as seeing spots.

Find out more about withdrawal at adf.org.au/alcohol-drug-use/supporting-a-loved-one/withdrawal/

Getting help

If your use of inhalants is affecting your health, family, relationships, work, school, financial or other life situations, you can find help and support.

Help and support services directory:
adf.org.au/help-support/support-services-directory/

Information about treatment:
adf.org.au/alcohol-drug-use/supporting-a-loved-one/treatment/

Inhalants and the law

Inhalant use is not a criminal offence in any Australian state or territory.

In recent years, some Australian states and territories have revised police powers to intervene in inhalant use in two main ways. Police are authorised to:

- take away inhalants and related equipment
- pick up young people who are misusing inhalants, and release them into the care of a responsible person, or a place of safety.

It is also illegal in some states and territories to sell or supply products to someone if they believe they are to be used for inhaling.

State/territory legislation on inhalant sales

It is an offence in Queensland, Western Australia, Victoria, South Australia, New South Wales and the Northern Territory to knowingly supply an inhalant to a person for the purpose of intentional inhalation.

Queensland
Section 23 of the Summary Offences Act 2005]
Section 603 – 607 of the Police Powers and Responsibilities Act 2000
Part 2 Section 10 of the Drugs Misuse Act 1986

Western Australia
Section 206 (1) of the Criminal Code Act 1913.
Sections 5-14 of the Protective Custody Act 2000
Section 7 (1) (g) of the Aboriginal Communities Act 1979

Victoria
Sections 57-60T of the Drugs, Poisons and Controlled Substances Act 1981
Drugs, Poisons and Controlled Substances (Volatile Substances) Regulations 2004

South Australia
Section 19 of the Controlled Substances Act 1984.
Section 42D of the Anangu Pitjantjatjara Yankunytjatjara Land Rights Act 1981.
Section 7 of the Public Intoxication Act 1984

New South Wales
There is no specific legislation in NSW that refers directly to inhalant abuse only legislation referring to intoxicated persons.
Part 14 and 16 of the Law Enforcement (Powers and Responsibilities) Act 2002
Section 9 of the Summary Offences Act 1988

Northern Territory
Part 2, Part 4 and Part 5 Sections 52 of the Volatile Substance Abuse Prevention Act 2005

Australian Capital Territory
There is no specific legislation in the ACT that refers directly to inhalant abuse, only legislation referring to intoxicated persons.

Inhalants statistics

National
- 4.2% of Australians aged 14 years and over have used inhalants one or more times in their life.
- 1% of Australians aged 14 years and over have used inhalants in the previous 12 months.

Young people
- Around 1 in 6 12-17 year olds have deliberately sniffed inhalants at least once.
- Young Australians (aged 14—29) first try inhalants at 17.2 years on average.
References

Always call an ambulance on triple zero (000) if an overdose is suspected: tell the paramedic exactly what has been taken. Paramedics are there to help and will not involve the police unless there is a danger to themselves or others.

Other help, support services and resources
Links to further help and support - adf.org.au/help-support/

● Further information
DrugInfo • 1300 85 85 84
Free confidential information and advice about alcohol and other drugs (9am - 5pm, Mon-Fri)

Family Drug Help • 1300 660 068 • www.familydrughelp.com.au (Victorian-based)
Services are available to support those around you who may be affected by your drug use. As well as providing understanding, they can provide information about how best to help during treatment.

Family Drug Support • 1300 368 186 • www.fds.org.au (Australia-wide)

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