Mixing uppers with downers — Bad idea? [1]

Hello Alice,

Recently, many of my friends have been doing methamphetamines. Often when they start to come down, want to come down, want to "level" out their high, etc. they take Xanax!!! Now I know Xanax is an anti-anxiety drug, and meth speeds your heart up. So can mixing the two ("reds" with "blues") be especially bad? I keep trying to tell them that it doesn't sound like a good idea...but they know that I hate pills so they DON'T listen. "They know better!" But I haven't been able to find any info specific to my question in other places. CAN YOU HELP?

— Stuck in the middle

Answer

Dear Stuck in the Middle,

Given that over 62 percent of emergency room visits involving the use of methamphetamines also involve the use of a downer, such as Xanax, (generic name: alprazolam), it's no wonder you're concerned about your friends' habits! Methamphetamines ("uppers") and benzodiazepines ("downers") produce opposite effects — methamphetamines speed up heart rate and elevate blood pressure, while alprazolam slows the central nervous system. As you may expect, mixing the two can be confusing to the body and can have serious, if not fatal, effects. You may not be able to convince your friends to change their behavior; however, it's certainly within your power to learn more about these substances and how to approach them about this in a non-judgmental way. Read on to learn more about "uppers," "downers," and mixed encounters!

Methamphetamines are psychostimulants, which are drugs that trigger the release of dopamine, serotonin, and norepinephrine in the brain. This cascade of neurotransmitters helps induce intense feelings of euphoria, which is what makes it so hard for people using meth to stop. Like other stimulants, meth arouses the central nervous system, increasing heart rate and elevating blood pressure and body temperature. Methamphetamines can be highly addictive, and with repeated use or high dosage can cause nausea, tremors, dizziness, hyperthermia (atypically high body temperature), heart failure, and stroke. What's more, methamphetamines are often manufactured in underground labs without quality control. Both strength of dosage and inclusion of other drugs can vary widely from batch to batch, even if the supplier remains the same, so it
can be hard to tell just how much of the drug a person is taking. Benzodiazepines (such as alprazolam), on the other hand, are a group of drugs that slows the central nervous system down, essentially performing the opposite function of methamphetamines. These drugs are typically prescribed to treat anxiety or panic attacks and, like methamphetamines, benzodiazepines may also be habit-forming, especially when taken for a long time or in high doses.

Given what’s known about the effects of these drugs, it makes sense that people would assume that benzodiazepines would counteract the effects of methamphetamines. While one drug tells the body to speed up heart rate and elevate blood pressure, the other tells the body to do just the opposite. However, rather than helping them through the come down, the combination tends to increase both drugs’ effects and can lead to a positive feedback loop that encourages the increased use of both substances, particularly together (as the body’s been conditioned to having both in it). Using a “downer” following an “upper” may also lead to several other negative and unpredictable effects within the body, primarily heart condition and liver failure, and even overdose and death. Of course, it’s incredibly challenging to get someone else to change a behavior they believe is assisting or working for them. Even if they decided to stop using a “downer” following an “upper,” they may need help doing so safely, as stopping benzodiazepine use cold turkey can cause intense side effects when used for long periods of time and in large doses. They may consider speaking with a health care provider to guide and support them through this process.

It can be challenging to get people to change their behavior, and you may not have control over the changes that they do or don’t decide to make. However, as their friend, you can share your concerns with them without telling them what to do. You can let them know how much you care about them and what you’re noticing, without accusing them of specific behaviors or making comments on their character. You can also let them know why this behavior concerns you and check in with them to see if they understand your perspective. You can offer to support them if they decide to make any changes. However, if they decide they’re interested in making changes, they need to be the ones making those changes, rather than you. If they aren’t interested in changing their behaviors, at least they’ll be aware that you’ll be there to support them if they ever want to make changes in the future.

Watching friends risk their health and safety can lead to feelings of frustration and powerlessness. However, informing yourself and others, as you’ve done here, is a meaningful and worthwhile step that’s completely within your power!

Alice!

Category: 
Alcohol & Other Drugs [2]  
Cocaine, Speed, & Other Stimulants [3]  
Sedatives, Tranquillizers, & Other Depressants [4]  

Related questions

Safe to take expired prescription medication? [5]  
Bath salts: Not your average bubbly [6]
Milk + Alcohol: Does a body good? [7]

Resources

Medical Services (Morningside) [8]
Columbia Health BASICS program (Morningside) [9]
Medical Services (CUIMC) [10]
Student Health Service BASICS program (CUIMC) [11]
Addiction Information & Management Strategies (AIMS) (CUIMC) [12]

Published date:
Jun 05, 2009
Last reviewed on:
Nov 23, 2018