

PHENCYCLIDINE

(Street Names: PCP, Angel Dust, Super Grass, Love Boat, Shermans)

Introduction:

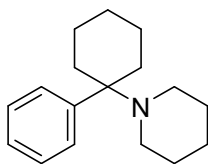
Phencyclidine (PCP) is a dissociative drug that is abused for its hallucinogenic effects. Examples of street names for PCP include Angel Dust, Hog, Ozone, Rocket Fuel, Shermans/Sherm, Wack, Crystal, and Embalming Fluid. Street names for PCP combined with marijuana include Zoom and Wet. Street names for PCP combined with cocaine include Whack and Space. The street name for PCP combined with LSD is Black Acid.

Licit Uses:

PCP was originally developed in the 1950s as an intravenous anesthetic for veterinary use and discontinued in the late 1970s. It was clinically tested for use in human anesthesia around 1960; however, it was discontinued due to the high incidence of patients experiencing postoperative delirium with hallucinations. PCP is no longer used for medical purposes in the United States.

Chemistry:

PCP is chemically known as 1-(1-phenylcyclohexyl)piperidine and belongs to a class of drugs called arylcyclohexylamines. PCP in its purest form is a white crystalline powder that is readily soluble in water or alcohol. It has a distinctive bitter chemical taste. Illicitly produced PCP often contains contaminants, resulting in a color ranging from tan to brown and a consistency that can vary from powder to a gummy mass. The CAS number for PCP is 77-10-1. The chemical structure for PCP is shown below:



Pharmacology:

PCP is classified as a hallucinogen and induces distortion of sight and sound, while producing feelings of detachment. PCP's effects—which vary by route of administration and dose—include sedation, immobility, amnesia, and marked analgesia. These intoxicating effects can be produced within 2–5 minutes after smoking and 30–60 minutes after swallowing the drug. PCP intoxication may last 4–8 hours, and some users report experiencing subjective effects 24–48 hours after use. While higher doses of PCP produce hallucinations, low to moderate doses may induce feelings of detachment from the surroundings and oneself, numbness, slurred speech, and loss of coordination accompanied by a sense of strength and invulnerability. Observable effects include a blank stare; rapid, involuntary eye movements; and catatonic posturing resembling that observed with schizophrenia. PCP use has been associated with agitation, psychosis, and bizarre behavior resulting in harm. Physiological effects include increased blood pressure, rapid and shallow breathing, elevated heart rate, and elevated temperature.

Chronic use of PCP can result in dependency and, upon

cessation, withdrawal syndrome. In addition, chronic abuse of PCP can impair memory and thinking. Other effects of long-term use include persistent speech difficulties, suicidal thoughts, anxiety, depression, and social withdrawal.

Illicit Uses:

PCP first appeared as a drug of abuse in the late 1960s. PCP abuse peaked in the 1970s and declined in the 1980s and 1990s. Routes of administration include smoking (most common), snorting, injecting, or swallowing. Leafy material (e.g., mint, parsley, oregano, tobacco, or marijuana) is saturated with PCP, then subsequently rolled into a cigarette and smoked. A marijuana joint or cigarette dipped in liquid PCP is known as a “dipper.”

User Population:

The National Survey on Drug Use and Health (NSDUH) indicates that in 2020, 6.14 million individuals aged 12 years or older (2.2% of the population) reported ever using PCP at least once in their lifetimes, 95,000 of whom (<0.1%) reported illicit use within the past year. The 2021 estimates are 6.57 million (2.3%) ever used with 123,000 (<0.1%) past year use; 6.49 million (2.3%) ever used with 203,000 (0.1%) past use in 2022; 5.8 million (2.0%) with 134,000 (<0.1%) past year use in 2023. In 2024, 5.91 million individuals (2.1%) reported ever used with 123,000 (<0.1%) of whom reported illicit use in the past year.

The American Association of Poison Control Centers National Poison Data System indicates 234 PCP exposure case mentions, single exposures, and 1 death in 2023. Most cases corresponded to individuals aged 20 or older.

The 2026 Monitoring the Future survey indicates that past-year use of PCP among 12th graders was 0.7% in 2021, 1.2% in 2022, 0.5% in 2023, 0.7% in 2024, and 1.2% in 2025. Prevalence has not risen above 2% in over two decades.

Illicit Distribution:

PCP is available in powder, crystal, tablet, capsule, and liquid forms; however, PCP is most sold in powder and liquid forms. PCP distribution and use appear to be localized to select metropolitan areas in the United States.

DEA's National Forensic Laboratory Information System (NFLIS) drug database collects scientifically verified data on drug items and cases submitted to and analyzed by participating federal, state, and local forensic drug laboratories. NFLIS-Drug has received over 104,000 reports of PCP since 1997, including over 5,400 in 2011; over 3,500 in 2020; nearly 2,300 in 2024, and over 2,400 in 2025 (reports still pending).

Control Status:

PCP is controlled in schedule II of the Controlled Substances Act.

Comments and additional information are welcomed by the Drug and Chemical Evaluation Section; Fax 571-362-4250, Telephone 571-362-3249, or Email DPE@dea.gov.