PHENCYCLIDINE
(Street Names: PCP, Angel Dust, Supergrass, Boat, Tic Tac, Zoom, Shermans)

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Introduction:
After a decline in abuse during the late 1980s and 1990s, the abuse of phencyclidine (PCP) has increased slightly in recent years. Street names include Angel Dust, Hog, Ozone, Rocket Fuel, Shermans, Wack, Crystal and Embalming Fluid. Street names for PCP combined with marijuana include Killer Joints, Super Grass, Fry, Lovelies, Wets, and Waters.

Licit Uses:
PCP was developed in the 1950s to be used as an intravenous anesthetic in the United States, but its use was discontinued due to the high incidence of patients experiencing postoperative delirium with hallucinations. PCP is no longer produced or used for medical purposes in the United States.

Chemistry and Pharmacology:
Phencyclidine, 1-(1-phencyclohexyl) piperidine, is a white crystalline powder which is readily soluble in water or alcohol. PCP is classified as a hallucinogen. PCP is a “dissociative” drug; it induces distortion of sight and sound and produces feelings of detachment.

PCP’s effects include sedation, immobility, amnesia, and marked analgesia. The effects of PCP vary by the route of administration and dose. The intoxicating effects can be produced within 2 to 5 minutes after smoking and 30 to 60 minutes after swallowing. PCP intoxication may last from 4 to 8 hours; some users report experiencing subjective effects from 24 to 48 hours after using PCP. Low to moderate doses (1 to 5 mg) induce feelings of detachment from surroundings and self, numbness, slurred speech and loss of coordination accompanied by a sense of strength and invulnerability. A blank stare, rapid and involuntary eye movements are the more observable effects. Catatonic posturing, resembling that observed with schizophrenia, is also produced. Higher doses of PCP produce hallucinations. Physiological effects include increased blood pressure, rapid and shallow breathing, elevated heart rate and elevated temperature.

Chronic use of PCP can result in dependency with a withdrawal syndrome upon cessation of the drug. 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 is abused for its mind altering effects. It can be abused by snorting, smoking or swallowing. Smoking is the most common method of abusing PCP. Leafy material such as mint, parsley, oregano, tobacco, or marijuana is saturated with PCP, and subsequently rolled into a cigarette and smoked. A marijuana joint or cigarette dipped in liquid PCP is known as a “dipper.” PCP is typically used in small quantities; 5 to 10 mg is an average dose.

User Population:
PCP is predominantly abused by young adults and high school students. In 2010, there was an estimated 53,542 emergency department visits associated with PCP use, according to Drug Abuse Warning Network (New DAWN ED). This is a significant increase from an estimated 37,266 PCP-associated visits in 2008. The American Association of Poison Control Centers (AAPCC) National Poison Data System reports 747 PCP exposure case mentions and 350 single exposures in 2010. According to the 2011 National Survey on Drug Use and Health (NSDUH), 6.1 million (2.4%) individuals in the U.S., aged 12 and older, reported using PCP in their lifetime. The Monitoring the Future (MTF) survey indicates that PCP use among 12th graders in the past year increased from 1.0% in 2010 to 1.3% in 2011 and then decreased to 0.9% in 2012.

Illicit Distribution:
PCP is available in powder, crystal, tablet, capsule, and liquid forms. It is most commonly sold in powder and liquid forms. Tablets sold as MDMA (Ecstasy) occasionally are found to contain PCP. Prices for PCP range from $5-$15 per tablet, $20-$30 for a gram of powder PCP, and $200-$300 for an ounce of liquid PCP. The “dipper” sells for $10-$20 each.

According to the System to Retrieve Information from Drug Evidence (STRIDE) and the National Forensic Laboratory Information System (NFLIS), 5,374 PCP reports were from Federal, state, and local forensic laboratories in 2011. In the first six months of 2012, there were 2,748 PCP reports from forensic laboratories.

Control Status:
On January 25, 1978, PCP was transferred from Schedule III to Schedule II under the Controlled Substances Act.

Comments and additional information are welcomed by the Drug and Chemical Evaluation Section; Fax 202-353-1263, telephone 202-307-7183, or Email ODE@usdoj.gov.