

RECEIVED

OFFICE OF OPERATIONS

DEC 24 1996

PLANNING AND RESEARCH
DIVISION

NOTICE NO. 53

December 13, 1996

TO: All Concerned Personnel, Office of Operations

FROM: Director, Office of Operations

SUBJECT: INFORMATION ON TWO NEW DRUGS POSING PROBLEMS FOR LAW ENFORCEMENT

EFFECTIVE: Immediately

PURPOSE

The purpose of this Notice is to provide Department personnel with information regarding two relatively new drugs impacting our communities and law enforcement, Flunitrazepam and Gamma Hydroxy Butyrate.

INFORMATION


Recently, the Department has been experiencing an influx of Flunitrazepam (Trade name Rohypnol) and Gamma Hydroxy Butyrate (GHB). As of January 1, 1997, Rohypnol will be a Schedule IV controlled substance and emergency legislation is pending for GHB. Both substances represent significant and growing problems for law enforcement agencies. In fact, sexual assault investigators are reporting an increasing number of cases involving the use of drugs such as Rohypnol (also called Roofies) and GHB. It is important that officers are aware of these drugs and their potential use in sexual assaults and other crimes.

PROCEDURE

The attached fact sheet is being provided as an interim means of assisting Department personnel in the recognition, packaging, effects, investigation and handling of the above drugs. Training

Division is currently preparing a Training Bulletin which will incorporate the information in the fact sheet and further address other concerns associated with both Flunitrazepam and Gamma Hydroxy Butyrate. Until such time as the Training Bulletin is distributed, Department personnel should refer to and use the attached fact sheet to assist them whenever it is suspected that the aforementioned drugs may be involved.

Information regarding possible manufacturing or distribution operations involving GHB and/or questions involving these drugs should be directed to Narcotics Group, at (213) 485-2126. In off-hours, Detective Headquarters Division may be contacted for advice.


BAYAN LEWIS, Assistant Chief
Director
Office of Operations

Attachment

DISTRIBUTION "A"

FACT SHEET

NEW DRUGS POSING PROBLEMS FOR LAW ENFORCEMENT

December 5, 1996

BACKGROUND

This fact sheet has been prepared by Narcotics Group to provide Department personnel with information on two relatively new drugs that are representing significant and growing problems for law enforcement. Currently, many officers are not familiar with these drugs and therefore are having difficulty conducting preliminary investigations. The information contained in the fact sheet is for informational purposes to assist Department personnel in conducting thorough investigations related to these new drugs.

INFORMATION

FLUNITRAZEPAM

Flunitrazepam (Trade name-Rohypnol) will be considered a controlled substance in California effective January 1, 1997. Prior to this date, there is no state level booking charge for possession or sales of this substance. It is, however, a federally controlled substance and may be seized as contraband and booked as evidence. A federal level arrest and filing will only be possible in cases involving very large quantities of Flunitrazepam. However, effective January 1, 1997, possession of Flunitrazepam will be covered by 11377 of the Health and Safety (H&S) Code, and possession for sale, sale and transportation will be covered by 11378 and 11379 H&S. This is as a result of legislation proposed by the Department.

During the past year and a half, the City of Los Angeles has been experiencing an influx of Flunitrazepam (Rohypnol). This drug is related to Valium (diazepam), but is 10 times more powerful in terms of its sedation effect. Both Valium and Flunitrazepam are classified as Benzodiazepines. Flunitrazepam is a small white tablet in a blister pack, manufactured by Hoffman La Roche. The pill will say Roche 2 or Roche 1, depending on the dosage and may be either single or double scored on the opposite side.

In California, it is most commonly encountered in blister packaging, however in other states it has been found unpackaged and even in containers marked "Roche Vitamins."

A central nervous system (CNS) depressant, Rohypnol is currently being used in conjunction with alcohol or other drugs or as an enhancer to, or a substitute for heroin. Rohypnol is neither manufactured nor sold legally in the United States. It is, however, produced and sold by prescription in 64 countries in Europe and Latin America.

Flunitrazepam is most commonly ingested orally, often along with alcohol or other drugs. The effects begin within 30 minutes (within three to ten minutes with alcohol), peak within two hours, and may persist for up to eight hours or more.

Adverse effects include decreased blood pressure, memory impairment, drowsiness, visual disturbances, dizziness, confusion, gastrointestinal disturbances, and urinary retention. Though classified as a depressant, this drug may induce excitability or aggressive behavior.

Ironically, while it is a popular teenage drug in other areas, in Los Angeles it is being encountered primarily among the hardcore users of heroin and cocaine. More recently, Rohypnol was being sold in Rampart Area by the Crazy Riders Gang. Sellers have been known to have homemade pouches inside their waistbands enabling them to casually dispense the pills individually or in a strip from the hidden pouches. The pills generally sell for 1-5 dollars each. This drug is also deeply entrenched in the Hollywood world of polydrug users.

Several LAPD rape investigations have involved allegations of Rohypnol or other drugs being used on the victim. Rohypnol generally causes retrograde amnesia, limiting recall of the crime. Thus, these allegations are difficult to verify.

The Department's Scientific Investigation Division (SID) is not currently equipped to run definitive tests for this drug in body fluids. The Crime Lab can however test for the drug itself (e.g., pill or powder form). The scientific community is responding to this new concern by focusing on more efficient, definitive testing procedures. Labs are available for testing of blood and urine; SID will handle sending out samples as needed.

Terminology for Rohypnol in California includes: Mexican Valium, Roofies, Ruffies, Roches (for the manufacturer), Roaches, Poor Man's Quaaludes, the "forget pill."

Flunitrazepam is a hypnotic sedative prescribed outside the United States for diminishing anxiety, skeletal and muscle relaxation and sleep deprivation. According to the manufacturer, it is also used in "conscious surgery" where patient cooperation

is needed. The patient will respond to simple instructions, such as opening or closing eyes and turning the head. Rohypnol has no pain relieving properties, and the patient will actually "feel" the pain but will be unable to physically resist it (this is comparable to the feeling rape victims describe in waking briefly and being unable to move and resist). Thus, the amnesia effect of this drug is desirable in this case so that the patient will not recall anything about the surgery, especially the unpleasant aspects, such as pain.

Especially in combination with alcohol or other drugs, Flunitrazepam may cause disinhibition, amnesia and prolonged blackouts. Sexual assault victims occasionally report brief periods of lucid recall during the blackout, but find they are unable to physically resist or escape and lapse back into the blackout. Many report that they awaken in approximately 10 to 12 hours, but may be fatigued, confused and unable to focus attention for up to two days after ingestion. Ongoing use of Rohypnol may lead to dependence. Chronic users experience a lessening effect of the amnesia and unconsciousness.

GAMMA HYDROXY BUTYRATE

The Department has also been experiencing an increased presence of the drug Gamma Hydroxy Butyrate (GHB) in driving under the influence cases and sexual assault and overdose incidents. A CNS depressant and hypnotic, GHB is being used in conjunction with alcohol or other drugs, with detrimental effects in an increasing number of cases. The drug GHB is an anesthetic (sleep inducer) without analgesic (pain relieving) properties that has been found naturally occurring in minute quantities in brain and other tissue in the human body.

Side effects from ingested doses typically include nausea, coma, uncontrollable seizures and respiratory depression. It is available internationally as an anesthetic (sold in glass ampules). It is currently legitimately available in the United States solely on a restricted basis as an "orphan drug" for experimental treatment of narcolepsy. Nearly all of the GHB encountered in California is illicitly produced and is primarily distributed as a liquid.

Gamma Hydroxy Butyrate was originally used and then abused by bodybuilders who believed it would stimulate the body's production of growth hormone. This drug does induce slow-wave sleep, the stage of sleep in which the body produced growth

hormone. It has now become the drug of choice on the party scene, primarily in Hollywood area and the West San Fernando Valley.

Unlike the use of Rohypnol where the victims are more likely to be totally unsuspecting and unable to taste the drug slipped into their drink, victims of GHB sexual assaults or overdose are typically convinced to try GHB as an "energy drink" or are talked into trying an unusual concoction. The salty taste is still noticeable, but the victim may simply not sense the danger.

While Rohypnol is known for its paralyzing effect and anterograde amnesia, obvious benefits to an attacker, GHB is known for its intense intoxication and enhancement of sexual interest. Sexual assault investigators are reporting an increasing number of cases involving the use of drugs such as GHB, Rohypnol, Ketamine (an animal tranquilizer which is a behavioral analog of PCP), Halcion (controversial sleeping pill from which Rohypnol was derived), etc.

INVESTIGATIVE CONSIDERATIONS, PROCEDURES AND STRATEGY

All officers should be aware of these drugs and their potential use in sexual assaults or other crimes such as robberies. All officers should also consider this an officer safety issue when eating in public places and especially for those working in an undercover capacity. Most of these drugs must be identified through urinalysis by current technology and within a relatively short time span, while blood has been the common item associated with evidence testing for sexual assault cases in the past.

This has created a need for law enforcement to re-think and re-write protocols for handling sexual assault cases, at least where drug use is a possible factor. Patrol officers handling sexual assaults cases in which allegations of possible drugging are involved should consider obtaining urine samples for testing in addition to blood samples already typically taken and should be alert at the crime scene for any loose pills, vials, empty blister pack fragments, drink glasses, milk jugs or sports-type bottles, for example, that might harbor important evidence of drug involvement.

The drug GHB may be readily detected in drinks and residue, but is very difficult to identify in body fluids. Analysis for GHB is particular difficult as it remains in the blood for only four to seven hours and is then oxidized to carbon dioxide. It does not metabolize out through the urine in significant amounts as does Rohypnol (over a 36-hour period).

The Drug Enforcement Administration (DEA) has been working on documentation for placing this drug into Schedule I at the federal level. At this time, it is in fact a federal felony under Food and Drug Administration (FDA) rules to manufacture GHB (with interstate involvement in obtaining chemicals or with evidence of intended interstate movement) and to transport it across state lines for purposes of sales. The FDA will prosecute manufacturing and/or transportation cases when appropriate quantities and circumstances are involved.

This drug is easily made and involve just two basic ingredients, which can be purchased at any chemical supply house: Gamma Butyl Lactone (i.e., solvent used for de-greasing engines or cement) and sodium hydroxide.

Prior to January 1, 1997, any officer encountering the drug Flunitrazepam should seize the drug as federal contraband (under Title 21, 841 (a)1, Code of Federal Regulations, the Federal Controlled Substance Act) and book it as evidence. The person in possession of the pills should be booked on any other charges in accordance with existing policy. If no other charges exist, the officer shall include field identification information in the narrative section of the property report. The drug should be entered into the automated property system under the recently established codes for either "Flunitrazepam" or "Rohypnol" to assure retrievable statistics.

Effective January 1, 1997, any suspect in possession of Flunitrazepam should be booked under 11377 H&S for mere possession or under 11378 or 11379 H&S for sales, possession for sale and transportation cases.

The drug GHB is an uncontrolled drug, but presents a dramatic safety hazard, especially when given to victims who are unaware of its presence. Depending on the circumstances, this could constitute poisoning; in which case an Injury Report should be taken. Officers should contact Area detectives for advice if a possible attempt murder or other charges are appropriate. The substance should be booked for identification purposes.

In sexual assault cases potentially involving either drug, the officer should ensure that a urine sample is obtained from the victim as soon as possible. If fairly recent ingestion of GHB is suspected, a blood sample and test for that purpose would also be appropriate.

Every effort should be made to conduct a thorough investigation that would assist in determining if Flunitrazepam, GHB or any other drug is involved in the assault.

INVESTIGATIVE STRATEGY WHEN DRUGS ARE SUSPECTED IN SEXUAL ASSAULT SITUATIONS

As with all investigations and in accordance with existing Department policies, procedures and practices, sexual assault cases where ingestion of drugs such as Rohypnol (Flunitrazepam) or GHB or any other similar substance is suspected, whether willfully or unknowingly taken, officers shall conduct a very thorough investigation. The following informal checklist is offered merely as a starting point in dealing with this difficult type of investigation. Any details which will assist in establishing whether or not drugs were given and by whom may be extremely critical in supporting (or disproving) the victim's account, and in establishing and prosecuting a case.

- * Do not underestimate the potential seriousness and truthfulness of the case just because the victim seems disoriented or confused and has what seems to be an unusually limited recall of events. That is key to the nature of these drugs. Carefully detailing what the victim does recall is important in determining/demonstrating what drug was used, in establishing the pattern of that drug's effect on the victim and even in potentially disproving a victim's allegations.
- * Obtain a urine specimen as soon as possible. If ingestion has been within five to seven hours, a blood sample would also be significant. Urine specimens should be frozen. Refrigeration during interim storage is acceptable.
- * Whenever possible, check both the location where the victim woke up and the location where the victim last remembers being present for any evidence and/or witnesses.
- * Interview any bartenders, waitresses, patrons, parking lot attendants, security officers and neighbors who may have noticed anything unusual about the victim's departure or arrival.

These potential witnesses could be important in establishing routine behavior on the part of the victim (i.e., a waitress' account might be very useful in verifying the victim's allegations that she only drank two glasses of wine and that, in fact, she normally drinks two glasses and is not visibly intoxicated at that level). It may also be important that on the occasion in question, the victim either walked out exhibiting no unusual behavior or that she was clearly intoxicated and/or behaving in an unusual manner, etc.

- * Whenever possible, retrieve any glass that the victim drank from, or unexplained, unmarked bottles (possible GHB container) where the drinks were being mixed.
- * Check trash cans anywhere near where drinks were being mixed or near where the victim and/or suspect were sitting or in the restrooms (public or in a private house) for unexplained, unmarked liquid containers or for remnants of narcotics packaging, such as the blister pack from Rohypnol. Even if custody and control are not clearly evident, this would assist in establishing what drug to test for, would help to demonstrate a pattern and might even yield fingerprints in some situations.
- * If there is a potential suspect or suspects to be interviewed, be alert for the presence of empty blister packs or additional pills in their pockets or secreted in their wallets, clothing or vehicle. This could entail anything from such evidence being visible during the initial investigation, to a consent search, to details leading to the need for a search warrant being developed either in the field or by the assigned detective at a later time.
- * Carefully document the statements of any potential suspect who is interviewed or any associates of that potential suspect.
- * Be alert to possible books, articles or computer printouts regarding drugs such as GHB that might be found at a crime scene, in a vehicle or house during the course of the investigation.