

Gamma-hydroxybutyrate (GHB)/Sodium Oxybate

 Alternative names: liquid ecstasy, liquid X, liquid F, goop, GBH= Grievous Bodily Harm, Easy lay, Ghost Breath, G, Somatomax, Gamma-G, Growth Hormone Booster, Georgia home boy, nature's Quaalude, G-riffick, Soapy, Salty Water



Characteristics

- Produced naturally in the body and is a metabolite of gamma aminobutyric acid (GABA)¹
- Stimulates slow-wave sleep (stages 3 and 4) and decreases stage 1 sleep; with continued use, decreases REM sleep. ¹
- Shown to increase dopamine levels in the basal ganglia
- At 10mg/kg produces anxiolytic effect, muscle relaxation, and amnesia
- At 20-30mg/kg increases REM and slow-wave sleep
- Doses > 60mg/kg can result in anesthesia, respiratory depression and coma
- Onset of action is within 30min
- Elimination half-life is approximately 20-30min; no longer detected in blood after 2-8h and in urine after 8-12h ¹
- GHB is absorbed rapidly and reaches peak plasma concentrations in 20–60 minutes.

Presentation during intoxication (Symptoms usually resolve within 7 hours, but dizziness can

persist up to 2

weeks)

Common signs and symptoms during intoxication can include ³

Disinhibition Confusion Amnesia Euphoria Hallucinations Agitation

Placidity Feeling of well-being Poor concentration

Relaxation of voluntary

muscles

Adverse reactions may include³

DrowsinessHeadacheAtaxiaDizzinessHypotensionNystagmusNauseaBradycardiaHypotoniaVomitingHypothermiaTremors

Muscle spasms Seizures Decreased respiration

Extreme intoxication signs and symptoms may include³

- Bradycardia, seizures, apnea, sudden (reversible) comma with abrupt awakening and agitation¹
 - *Overdoses can occur due to unknown purity and concentration of ingested product

Goal¹¹

Prevent severe respiratory depression

Monitor^{1,2,3,4,11}

Monitoring and support during intoxication

- Assess level of disorientation and if possible time of last ingestion and amount consumed
- Monitor for falls risk
- Monitor vitals every 15 minutes initially and less frequently as acute symptoms subside
- Ensuring adequate respiratory function
- Maintain comprehensive physiological and cardiac monitoring

Supportive Interventions

• Ensure a quiet private space



Monitoring and	 Frequently orient client to reality and surroundings Promote fluid and food intake as tolerated 			
support during intoxication	Atropine may be used for persistent symptomatic bradycardia			
(Continued)	If breathing is laboured, refer to an intensive care unit.			
(537737722)	No known antidote for	or toxicity		
Withdrawal	Symptoms may include ¹			
presentation ¹	Nausea	Insomnia	Confusion	
symptoms occur 1-6 hours after	Vomiting	Anxiety	Tremor	
abrupt cessation	After chronic use ¹ • Mild tachycardia and hypertension			
and can last 5-15				
days after chronic use	Can progress to delirium with auditory and visual hallucinations			
cilionic use	Monitor ^{1,11}			
	Mental Status (include risk of self-harm and suicide, agitation, anxiety)			
Monitoring and	Physical status (vital signs, GI distress, respiratory and cardiological function)			
Monitoring and support during	Risk for falls And the second secon			
withdrawal	 Hydration/Nutrition Supportive Interventions^{1,11} 			
	 Provide reassurance and calming techniques. 			
		Encourage fluids and nutrition as tolerated		
	Coma reported in doses > 60mg/kg ¹			
	 GHB overdose is a real danger, usually occurring within 15–20 minutes of ingestion. Most 			
	fatalities associated with GHB occur when it is taken with other substances, most notably			
Potential Complications	alcohol. ^{3, 4}	. 24		
Compileations	 Overdose may present Nausea and vomiting 	t as ^{3, 4} : Respiratory depression	Aggressive outbursts	
	Seizures	Coma	Slowed heart rate	
	HIV medications (Ritonavir and Saquinavir) ⁵			
	 Interferes with the metabolism of GHB via CYP3A4 enzymes, amplifying GHB-depressant effects which may lead to loss of consciousness 			
	With Benzodiazepines ⁵			
	GHB may alter the response of midazolam at the GABA receptors, leading to agitation			
	and confusion			
	 Enhance CNS depressant effects of GHB With Sedating antidepressants, Antipsychotics, General anesthetics, Hypnotics, Opioids, 			
Notable Drug	Muscle Relaxants ⁶			
interactions	May enhance the CNS depressant effect of GHB leading to impaired consciousness and			
	respiratory depression			
	With Valproate and Ethosuximide ^{7,8} • Inhibition of GHB-dehydrogenase			
	 Increased serum concentration of GHB> Increased sleepiness, dizziness, nausea and 			
	cognitive impairment			
	With Alcohol ⁹			
	• Enhanced respiratory depression, greater decreases in O ₂ sat, and hypotension			
 Adverse effects are more pronounced at higher GHB doses With Topiramate¹⁰ 			nb uoses	
	with rophamate			



Notable Drug interactions (Continued)	 Topiramate increases GABA activity at its neuroceptors May increase serum concentration of GHB> Myoclonic jerks, miosis, rapid onset of coma With Cannabis Increased pharmacological effects¹ With Stimulants Increased pharmacological effects ¹ 	
Psychiatric effects	 In small doses, it leads to feelings of well-being, lowered inhibitions, sedation, poor concentration, confusion, amnesia, euphoria and hallucinations. It may lead to agitation and aggression¹ 	



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