

# 48 factsheet Drug Watch

## AMT

### Drug overview:

Alpha-methyltryptamine (MT/AMT) is a currently legal new psychoactive substance. It is a long acting, synthetic psychedelic.

### Background:

AMT was originally developed as an antidepressant in the 1960s by the company UpJohn. In the 1990s AMT resurfaced as a drug of recreational use made available over the internet. It was first seen in the UK in February 2011.

### Appearance:

AMT is an off white or yellowish/orange powder. The consistency can be either clumpy or fine. It is also found in tablet form. These are commonly referred to as pellets to avoid accusations that they are medicinal products. They are small blue pellets typically containing 30mg freebase powder.

AMT or 5-IT has been discovered in tablets sold as Ecstasy including pale pink tablets with a cherry logo and white tablets with a Mitsubishi logo but due to the complications of distinguishing between the two in analysis it is not confirmed which is the definite active ingredient in these tablets.

### Cost:

Pellets cost approximately £5 per 30mg pellet. The powder form (purity unknown) costs approx £30 per gram and is available in amounts from 100mg at £7.50.

### Route of administration:

AMT is often consumed orally, either by swallowing pellets, wrapping powder in a cigarette paper (bombing) or by taking a small bit of powder from tip of a moistened finger (dabbing). The powder form can be smoked; the onset is much faster by this method.

It is possible to inject this substance or administer rectally, although these methods appear to be rare for this substance. Due to the intensity and or dose/response curve for AMT, IV administration would likely be very dangerous.

### Dosage:

Oral	Smoked
Threshold 5-15mg	Threshold 2mg
Light 10-20mg	Light 4-5mg
Common 20-40mg	Common 6-10mg
Strong 40-60mg	Strong 10-20mg
Heavy 60-100mg	

Pellets are reported to contain a dosage of 30mg.

### Typical effects and side effects

These are some of the typical effects and side effects experienced by people who use AMT, not everyone will experience all effects listed and many can be dose dependent.

#### Physical:

- Increase in energy
- Increased heart rate
- Blurred vision
- Restlessness
- Yawning
- Dilated pupils
- Decreased appetite and difficulty eating
- Vision obscuring visuals at high doses
- Nausea and vomiting
- Impaired coordination
- Muscle aches
- Headache
- Jaw clenching
- Insomnia

#### Mental:

- Mood enhancement
- Empathy
- Visual patterning
- Closed eye visuals (CEV)
- Mild open eye visuals (OEV)
- Music appreciation
- Anxiety
- Paranoia
- Agitation
- Panic
- Mental confusion
- Repetitive thoughts
- Racing mind
- Disturbed dreams

### Onset, duration and after effects:

Oral doses have an onset of 30-120 minutes and peak at 3-5 hours. The duration is generally 10-14 hours although higher doses can last longer. After effects can be felt for a further 1-5 hours. As the effects can take over 2 hours to fully develop orally, it is not uncommon for users to re-dose in error thinking they have not taken enough initially. When smoked, the onset is significantly quicker at 10-30 seconds with typical duration between 8-12 hours.

### Comedown effects

Some users report experiencing a stimulant-like comedown, where they

may feel an energy drain, low mood or experience flu-like symptoms and general tiredness/lethargy. This typically happens a day or two after use, which some users call the "Tuesday blues". Some anecdotal reports suggest AMT has less of a hangover than drugs such as MDMA although this is not an indication of long term safety.

### Patterns of use:

Patterns of use appear to be similar to drugs such as LSD. There seems to be little tendency to re-dose quickly unless a user believes they have not taken enough to experience full effects.

### Long term effects/known harms:

AMT is a relatively unknown substance and little is known about the long-term effects and potential harms. AMT has the potential to cause serotonin toxicity especially at high doses or when mixed with other substances especially stimulants. AMT in conjunction with anti-depressant/anxiety medications (SSRI/SNRI) has the potential to precipitate this condition.

Serotonin toxicity can be fatal if not recognised and dealt with both quickly and effectively. Symptoms include hyperthermia (overheating), hyperreflexia (over responsive reflexes), clonus (involuntary muscular contractions and relaxations), hypertension (high blood pressure), dysphoria (mental distress) and mydriasis (dilated pupils). Due to muscle tension being triggered by the condition, there is a potential of developing Rhabdomyolysis (muscle tissue breakdown) which can cause severe kidney damage and can be fatal. It is therefore dangerous to restrain individuals, as increased agitation will lead to increased muscle tension trying to break free from restraints. Treatment can include cooled IV fluids, benzodiazepines to control agitation, rapid cooling via ice packs, oral cyproheptadine (anti-histamine with anti-serotonergic properties) and anti-psychotic medication in severe cases.

Two alerts regarding AMT were issued in 2012 after information was received regarding deaths in the United Kingdom and Norway. Two cases indicated that AMT was the only drug found in the system and the other included multiple substances.