



Methoxetamine (MXE, MKET, Special K)

This is an edited version of the Factsheet produced by Crew 2000.
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What is it?

Methoxetamine is chemically similar to ketamine. Some sources suggest it was initially synthesised by an underground chemist for treatment of chronic pain, but it has been present on the designer drug market since 2010 and use has increased in 2011.

What does it look like?

Often found in white or off white crystalline powder form and as pellets.

How is it taken?

Powder form most commonly sniffed, but can be swallowed in a cigarette paper ('bombed'). Other routes, such as rectal ingestion or injecting appear rare in the UK.

How much does it cost?

Around £25 per gram although sold in smaller amounts. The cost for pellet form is around £6 per pellet.

What is the average dosage?

The dosage range for methoxetamine, is lower than ketamine due to its higher potency. For the most common route – sniffing – it might range from 10-20mg (light) to 50-90mg (strong) and the effects would be felt between 10-30 minutes after ingestion.

How long do the effects last?

Generally up to 2 – 4 hours with the main peak of effects lasting approx 1 ½ – 2 hours. Some reports suggest that re-dosing even small amounts whilst experiencing after effects can trigger an intensity similar to that of the original peak. Most people report that methoxetamine is longer lasting than ketamine with after effects lasting a further 1-2 hours and effects gradually lessening in intensity.

Some user reports suggest there is less 'hangover' with methoxetamine although many suggest methoxetamine is longer lasting than ketamine. User reports also suggest that tolerance can build quickly. Where someone has repeatedly dosed, effects are likely to be much more prolonged and returning to baseline has been described as "long and arduous".

What are the patterns of use?

It seems common for users to re-dose every 1½ – 2 hours. Dosing before this time is thought to have potential to induce negative side effects. There have been several reports of a compulsion to re-dose, referred to as "fiending". Methoxetamine has the potential for addiction and dependency.

What are the physical effects?

- Central Nervous System (CNS) depression
- Unconsciousness
- Dizziness
- Double vision
- Impaired coordination
- Sweating
- Muscle relaxation
- Insomnia
- Body load (tactile sensations in body)
- Nausea

What about the psychological effects?

- Feelings of stimulation
- Mild euphoria
- Hallucinogenic effects
- Dissociation
- Anti depressant effects
- Feeling of floating
- Time dilation
- Connection with music
- Loss of inhibition
- Cravings to re-dose
- Disorientation
- Mental confusion
- Agitation
- Amnesia
- Delirium
- Paranoia
- Anxiety

The list above is some of the main effects and side effects that have been reported, not all these effects will be experienced by all users and the more serious effects tend to be reported in cases of higher dosages. Similar to ketamine, some users describe the more intense experiences as an 'MXE hole' however, anecdotal reports on drugs-forum suggest that methoxetamine is mentally a 'cleaner' dissociative than ketamine, and less physically impairing as well.

There have been drug related deaths involving ketamine so this could be a risk for methoxetamine. Death could be due to a reaction to the drug itself, a combination of the drug mixed with other substances or from an accident that occurred whilst under the influence. As methoxetamine is a dissociative drug, it affects your inhibitions and coordination so accidents are more likely to occur. Similar to ketamine, it is possible there may be a risk of psychosis.

What about longer-terms effects?

Similar to ketamine, there may be risks of bladder problems and kidney damage with prolonged use of the substance. Some sources claim that methoxetamine has less risks to urinary system and online vendors have marketed MXE as a "bladder friendly ketamine" but more research needs to be done in this area to establish the accuracy of this claim.

Is it legal?

MXE will be subject to a Temporary Banning Order under the Misuse of Drugs Act. The Medicines Act would apply to supply if a vendor was selling and making a medicinal claim about the product.