



Speech by

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HEALTH AND OTHER LEGISLATION AMENDMENT BILL

Ms CROFT (Broadwater—ALP) (4.17 pm): I rise to speak in support of the Health and Other Legislation Amendment Bill 2007. The amendments to the bill I wish to highlight today are the changes to the Tobacco and Other Smoking Products Act 1998 to prohibit the sale and commercial display of bongs and ice pipes, including their component parts. At the outset, I wish to thank and commend the Parliamentary Library staff for the excellent briefings supplied to members on the bill's amendments.

Before reading the brief, I knew very little about the drug ice, its effects and, most importantly, the enormous cost to communities and governments that its sale and usage will generate. I now understand that the drug ice is a highly purified crystalline form of methamphetamine that is usually smoked or injected and that stimulates the central nervous system and stimulates messages going to and from the brain. I now also understand that the users of this drug tend to smoke this drug thinking this will decrease the potential of its dependency. People perceive smoking as social and think they will not get addicted even by trying it just once. The National Drug and Alcohol Research Centre's fact sheet on ice explains that, as smoking of this drug causes a rapid and intense drug effect, there is no less dependency level than if the drug were injected. I was disturbed after reading the brief about the recent statistics showing an alarming number of people using ice. To read about the listed immediate and long-term effects ice addiction and use can have on one's health made me feel quite sick.

From the immediate effects of itching, picking, scratching, irritability and aggression to the long-term effects of kidney failure, and damage to the lungs and the brain, there are also other obvious effects associated with drug use such as contracting hepatitis B and C, and HIV. After viewing the drug-free web site I was horrified at the effects of this drug. The web site shows how ice use changes the appearance of people even after just short-term use. The pictures are incredible and present the hard-hitting message about how drugs ruin lives.

Further to the disturbing facts about ice and its use, it appears treatment options for ice addicts are still being developed. But the impact drug use is having on our society is indeed travelling at an alarming pace. It is out of control. Local health workers on the Gold Coast describe the growing trend of ice usage being of astronomical proportions.

At the coalface of this terrible situation are those hardworking professionals working in accident and emergency departments in public hospitals. I understand that regardless of the time of day the number of people affected by drugs, most of which is ice or crystal meth, presenting at the accident and emergency ward at the Gold Coast Hospital who have either brought themselves in, had a friend bring them in, or were brought in by ambulance or police is overloading resources.

I have been advised by local health workers that this drug problem is creating a huge strain on our mental health system. The effects of psychosis caused by methamphetamine use is what I find most alarming. While I understand that some people can suffer mild visual disturbances and hallucinations, other psychotic symptoms can cause people to be extraordinarily aggressive and powerful.

The scenario read about in the research brief attributed to Mr Gordian Fulde of St Vincent's Hospital's accident and emergency ward in Sydney is typical of what health professionals in all accident

and emergency wards are experiencing in trying to treat patients suffering the effects of ice. To quote the brief, Mr Fulde states—

The police car is rocking in the ambulance bay, we need 6 people to get anywhere near the patient to physically restrain them, to sedate them.

It makes me somewhat angry that our dedicated health professionals are constantly being subjected to such violent and frightening situations and that their skills are being spent assisting people who, despite all the education about the damaging effects of drugs, continue to feed their belief that drugs will make them feel better, more capable of coping and more sociable.

I am advised by health workers that ice achieved its enormous popularity as it is readily available in Australia, it is cheap to manufacture and it is cheap to buy. The ages of people most affected by ice are 15 to 40. By prohibiting the sale of an ice pipe or a component of an ice pipe, prohibiting the supply of an ice pipe or a component as part of a business activity, prohibiting the display of an ice pipe or a component either in a shop or near and in connection with a shop, the means by which the drug can be taken are reduced significantly. The perception by users that smoking ice socially is not an issue—when clearly it is as detrimental as injecting—can also be addressed.

The state government has initiated the Ice-Breaker Strategy, which includes the establishment of a task force, and Project Stop, which involves the Queensland Police Service and the Queensland Pharmacy Guild working together to deal with the problem of people shopping around for legal cold and flu medications containing pseudoephedrine for the purpose of manufacturing drugs like ice. It is impressive that this strategy is already getting results. I understand that, by late 2006, there have been 36 arrests connected to over-the-counter pharmacy sales of medications, 195 charges laid and 17 clandestine laboratories closed down. However, I support the view of the Gold Coast health workers that a complete national ban on drugs such as Sudafed is one simple solution to the complex problem of treating ice addiction.

In closing today I wish to pay tribute to the wonderfully dedicated health professionals who see every day of their working lives the horrible effects of drugs on people, the staff of the accident and emergency ward at the Gold Coast Hospital, the ambulance workers and police officers. Their jobs are not easy but they are made a lot harder with the growing use of ice and other drugs. I will continue to advocate for resources for these departments to deal with the ice epidemic. I congratulate the minister for introducing this legislation and commend the bill to the House.