methylphenidate
Biphentin®, Concerta®, Daytrana®, Ritalin®, Ritalin SR®, Quillichew ER®, Quillicheck ER®, Aptsensio XR®, PMS-methylphenidate®, Ratio-methylphenidate®, Teva-Methylphenidate-ER-C®, Apo-Methylphenidate ER®, PMS-Methylphenidate ER® and others.

Alcohol
(Booz, ethyl or ethanol, adult beverage, brew, brawski, liquor, drink, shot, sauce, rot gut, hauch, giggles juice, moonshine, jello shots, wobbly pop)

- **Serious Risk for Harm**
  Methylphenidate makes some people feel more awake and alert. If you have been drinking alcohol, taking methylphenidate might fool you into feeling alert enough to drive, or do other activities requiring alertness. This would be false. You may still be impaired, and it would be unsafe to drive.

- **Think First**
  Alcohol may increase the levels of methylphenidate in your blood to unsafe levels, potentially causing more unwanted effects such as jittery or irritable feelings, trembling hands, or trouble sleeping.

- **Think First**
  If you are depressed, blue, or moody, alcohol is a 'downer' and will make you feel worse.

Tobacco
(smokes, butts, cigs, cigars, darts, stogies, cancer sticks, chew, dip)

- **Think First**
  If you take methylphenidate you may find you want to smoke cigarettes less often. More information is needed to figure out if the combination of tobacco and methylphenidate is safe.

Caffeine
(coffee, java, tea, energy drinks (Red Bull®, Monster®, Rock Star®, Amp®, NOS®, Full Throttle®, 5-hour Energy Drink®, Beaver Buzz®), chocolate, cocoa)

- **Think First**
  Lots of caffeine could make the side effects of methylphenidate worse. This includes jittery or irritable feelings, trembling hands, or trouble sleeping.

Cannabis/ Hash
(marijuana, mary jane, BC bud, blunt, chronic, J, jay, joint, hemp, pot, grass, herb, 420, dope, THC, weed, reefer, ganja, gangster, skunk, hydro, hash oil, weed oil, hash brownies, grease, boom, honey oil, K2, spice, poppers)

- **Think First**
  Using cannabis while taking methylphenidate could make your heart beat too fast.

Cocaine/ Crack
(coke, snow, flake, nose candy, blow, lady white, stardust, rock, crystal, bazooka, moon rock, tar)

- **Serious Risk for Harm**
  Cocaine and methylphenidate have some things in common, like the way they can affect your heart and blood pressure if you have too much. Taken together, we think the risk is greater. You could get a dangerously fast heart beat, or too high blood pressure. There is a risk of you getting heart damage, seizures, or even a stroke.

- **Think First**
  Using cocaine while you are taking methylphenidate may cause you to have a milder high.
**Opioids**
(codine, Tylenol #3®, cody, meperidine, Demerol®, DIXM, dextromethorphan, robo, skittles, morphine, morph, monkey, methadone, bupe, sub, or dollys, oxycodone, Oxycontin®, hillbilly heroin, OxyNeo®, OC, oy, rasy, percs, fentanyl, Sublimaze®, Duragesic®, china white, hydrocodone, Hycodan®, Vicodin®, suboxone®, buprenorphine, vika, heroin, H, horses, junk, smack, brown sugar, black tar, down, china white, purple drank, W18, carfentanil, elephant tranquilizer, loperamide, lope, lean)

**Unknown Dangers**
Unknown dangers. Sometimes doctors prescribe methylphenidate for patients taking opioids, but this is done carefully, with close monitoring.

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**Amphetamines/ Stimulants**
(upper, ecstasy, X, O, Molly, xtc, love drug, MD, MDE, Eve, MDMA, adam, disco biscuit, bennies, black beauties, Dewedrine®, Adderall®, dextex, Ritalin®, speed, crystal, meth, ice, glass, crank, tweak, cat, qat, khat, bath salts, Ivory Wave, Vanilla Sky, Cloud 9)

**Serious Risk for Harm**
Methylphenidate and amphetamines have some things in common, kind of like cousins in the 'chemical family'. Taking methylphenidate and street amphetamines together could put you at risk of severe side effects. It could cause dangerous heart problems, high blood pressure, or even seizures. It would be like taking too much amphetamine.

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**Phencyclidine/ Ketamine**
(PCP, angel dust, PeaCe Pill, rocket fuel, love boat, embalming fluid, elephant tranquilizer, hog, ill, wet, wet stick, dipper, toe tag, cadillac, snorts, or surfer, Special K, vitamin K, CVR, cat tranquilizer, cat valium, jet, kit kat, Ketalar®)

**Unknown Dangers**
Unknown dangers.

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**LSD/ Hallucinogens**
(acid, blotter, cartoon acid, hit, purple haze, trip, white lightning, raggedy ann, sunshine, window-pane, microdot, boomers, buttons, mesc, peyote, salvia, morning glory seeds, flying saucers, licorice drops, pearly gates, magic mushrooms, shrooms)

**Unknown Dangers**
Unknown dangers.

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**Benzodiazepines**
(benzos, downers, tranquilizers, tranks, Ativan®, Halcion®, Klonopin®, Rivotril®, Restoril®, Serax®, Valium®, Xanax®, Rohypnol® (roofies, rope, the forget or date rape pill))

**Serious Risk for Harm**
Methylphenidate makes some people feel more awake and alert. If you have been using benzodiazepines, taking methylphenidate might fool you into feeling alert enough to drive, or do other activities requiring alertness. This would be false. You may still be impaired, and it would be unsafe to drive.

**Think First**
Benzodiazepines may reduce the stimulant effects of methylphenidate.

**Think First**
Doctors sometimes prescribe benzodiazepines to patients taking methylphenidate to help treat some illnesses, but this is done very carefully.

Benzodiazepines are 'downers'. If you are depressed, blue, or moody, benzodiazepines can make this worse.

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The Drug Cocktails website – “Facts for Youth about mixing Medicine, Booze and Street Drugs” (the “Site”) has been developed as a resource for youth and staff within Children’s & Women’s Health Centre of British Columbia Branch (C&W) for Provincial Health Services Authority and its branch agencies (PHSA)(C&W and PHSA together the “Societies”). There are support systems at the Societies which may not exist in other clinical settings and therefore adoption or use of this manual is not the responsibility of the Societies. Agencies other than the Societies should use Cocktails as a guideline for reference purposes only. The contents of this website were current at the time of development in July 2013. The Societies are not responsible for information that has changed after that time, whether incorporated into the Site or not.

The Site contains best practice knowledge, but practice standards may change as more knowledge is gained. Decision making in a specific context remains the responsibility of attending professionals. Nothing on the Site should in any way be construed as being either official or unofficial policy of the Societies.

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