Whoonga dealers are 'peddling poison'

THOSE peddling Whoonga, the deadly drug sweeping through KwaZulu-Natal townships, should face murder charges as they are deliberately poisoning people.

This is according to Dr Thavendran Govender who tested samples of Whoonga and found that it was based on rat poison and heroin—not antiretroviral medication.

While it is widely believed that Whoonga is based on the ARV called Stocrin, Govender from the University of KwaZulu-Natal's chemistry department found that it was a mix of heroin, morphine and strychnine, which is used to kill rats.

According to Govender, it's a clever mix that catches the addict in a vicious cycle that keeps him or her coming back for more. The heroin or morphine initially masks the effects of the strychnine, which cause terrible muscle spasms.

"Patients now have this excruciating body pain and the only way to relieve this body pain is to smoke more Whoonga because they now want to take in the heroin and the morphine to mask the strychnine," says Govender.

"They are peddling a poison, because strychnine is a known poison. Therefore my belief is that they should not be tried for drug peddling but for attempted murder or even murder itself, because there are people dying from this and the dealers know they are putting poison into it."

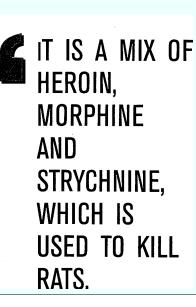
Anton, a former user and dealer, describes the withdrawal: "You will feel like you are sick, you can't even walk from here to market. Next week, you can't even eat, you can't even smoke, even a cigarette. You can't drink the water you can't eat—you can't do anything. You can't even sleep at night. You don't smoke—you look like you're crying."

Despite popular belief, there were only trace amounts of ARVs in one of the sample.

"It's a matter of what's available to dilute the sample and it also could even be a marketing ploy, that some dealers are saying they have a better product than others," says Govender.

"But Stocrin has no proven psychoactive effects and its molecular weight is also so heavy, that it doesn't vaporise easily, making it almost impossible to smoke."

Whoonga is sold as a powder that is usually mixed with marijuana and smoked.





Strychnine, a deadly poison, is a component of whoonga.

According to Carol du Toit of the SA National Council of Alcohol and Drug Abuse (Sanca), a few years ago Whoonga was a mixture of marijuana and Stocrin.

"However, we have noticed that with our admissions of Whoonga patients, both at outpatient and inpatient level, the mixture now seems to have progressed more to having a heroin content," says Du Toit.

Agrinet Khuzwayo's only son, Nduduzo, is a Whoonga addict.

"He is very angry. He doesn't want to talk to us. He is doing a lot of funny things. He is selling his clothes. He is stealing at home, everything, even our clothes and my dishes," says Agrinet.

Nduduzo, who started smoking Whoonga four years ago, said: "Another friend of mine was smoking it. So, [he] said 'just get into it' and I just smoked it like that.

"It's breaking up families. I want to stop," he says, but despite promising to stop this month, he simply doesn't seem to be able to kick the habit.

In Durban, the drug is easily available in the city and in townships, sometimes for merely R20 for a twist of the powder that will last an addict for a day.

As Whoonga spreads through the townships of KwaZulu-Natal, so too has the black-market trade in pharmaceutical drugs increased.

Although there's no evidence that antiretroviral drugs such as Stocrin create a high, criminals are robbing Aids patients of life-saving drugs for the manufacture of Whoonga.

Nancy Fias, the community outreach facilitator at St Mary's Hospital in Mariannhill, says a number of their patients have been robbed of their ARVs, while others are selling their medication to the dealers.

Like Whoonga, Stocrin is also easily available on the black market, particularly outside Durban's hospitals where Health-e bought 24 tablets for R300.

Du Toit believes that not enough is being done to stop Whoonga: "If we have a properly orchestrated approach I have no doubt that we can make a dent in this problem but at the moment the whole approach is quite fragmented," she said.

— Health-e News

