Ketamine Guide for Primary Care

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In partnership with:

BARNSLEY Metropolitan Borough Council

BARNSLEY RECOVERY STEPS

Understanding Ketamine And Why it Matters in Barnsley?

Ketamine is a dissociative anaesthetic with legitimate medical and veterinary uses. When used non-medically, it can affect perception, awareness, coordination and judgement, with potential consequences for a young person's physical health, emotional wellbeing and safety. Nationally, concerns about ketamine-related harm among young people have increased, and this is also relevant to professional practice in Barnsley, where local services are responding to ketamine-related needs, including bladder and urinary health concerns.

For professionals working across Barnsley, early recognition and a compassionate response matter. Ketamine use should not be viewed in isolation. Professional curiosity can help us understand what may be happening around a young person or young adult, including their mental health, relationships, education, family circumstances, experiences of trauma, exploitation or other vulnerabilities.

What is ketamine

Ketamine is a medicine used by doctors as an anaesthetic and for pain. Some people use ketamine outside medical care. It can change what they see, hear and feel. It can make them feel separate from their body or the world around them.

Ketamine can affect your mind and body, causing changes in perception, memory, coordination and mood. With frequent use, it can lead to bladder damage, abdominal pain, mental health difficulties and problems with everyday life and relationships.

What are the effects of ketamine?

Ketamine is most commonly snorted (insufflated), but can sometimes be swallowed, administrated rectally or injected intramuscular (and rarely intravenously). It is a dissociative anaesthetic that produces a sense of detachment from the body and surrounding environment. The acute effects typically last up to **60–90 minutes** following insufflation, although duration varies depending on dose and route of administration**.**

The main effects of acute ketamine use include:

- Anaesthesia and analgesia
- Impaired motor coordination (e.g. ataxic gait)
- Cognitive dissociation with disruption of space and time awareness
- Depersonalisation
- Perceptual disturbances and hallucinations (more common at moderate-to-high doses)
- At high doses, a state of profound dissociation from reality (“K-hole”), which may be associated with acute cognitive impairment and memory disturbance

Long-Term Effects

Bladder and pain complications

Long term ketamine use is associated with ketamine-induced cystitis due to its destructive effect on the urothelium.

Ketamine-Induced Cystitis (KIC)

1 What is it?

A bladder toxicity syndrome caused by recreational ketamine use.
Characterised by:
✔️ Severe frequency/urgency
✔️ Suprapubic pain
✔️ Tiny bladder volumes
✔️ Sterile urine despite “UTI-like” symptoms
✔️ Possible haematuria

Stopping ketamine is crucial — symptoms rarely improve otherwise.

2 Typical Presentation Clues

Symptoms

- Frequency (often 15–30×/day)
- Nocturia (3–10×/night)
- Urgency ± urge incontinence
- Dysuria/burning
- Suprapubic or pelvic pain
- Visible or microscopic haematuria
- Small voided volumes

History clues

- Recurrent “UTIs” but negative cultures
- No improvement with antibiotics
- Symptoms worsen after ketamine use
- Young patients (15–35) but can sometimes be older patients
- Rapid onset over weeks–months

These symptoms may be **severe** and **progressive**. Management can be challenging, and early referral to urology is strongly recommended where ketamine-associated bladder problems is suspected.

K-Cramps

1 What are K-cramps?

Gastrointestinal pain is also common and is often referred to as "K-cramps"

- A syndrome of **severe, episodic abdominal pain** associated with recreational ketamine use.
- Likely due to smooth-muscle spasm, biliary/hepatobiliary irritation, and intestinal dysmotility triggered by ketamine's effects on NMDA receptors and the cholinergic system.
- Often occurs alongside ketamine-induced cystitis, but may present alone.

2 Typical Presentation Clues

Symptoms

- Cramping abdominal pain (often intense, colicky)
- Pain often in **upper abdomen** or **diffuse**
- Nausea ± vomiting
- Pain that **comes in waves**
- Worse after ketamine binges or heavy use
- Normal bowel movements OR loose stools
- No fever, no peritonism

History clues

- Young person (15–35) but sometimes can be older people
- Known or suspected recreational ketamine use
- Symptoms *may temporarily improve* after using ketamine again
- May co-occur with urinary symptoms (K-cystitis)
- No clear trigger and normal initial investigations

There appears to be a **dose–duration relationship**, with **heavier** and **prolonged** use increasing the risk of urological and hepatobiliary complications.

Referral to **secondary care services** and **addiction services** should be explored for patients with persistent pain. Many ketamine patients **self-medicate** their pain from ketamine use with more ketamine, and so clinicians should bear this in mind for an appropriate pain management strategy**. Local pain management services** should be considered early in the process (especially in view of waiting lists), but patients must want to engage and must be ketamine-free for any pain management approach to be effective.

Blood tests

- Blood tests in suspected ketamine-related bladder or abdominal symptoms typically include FBC, U&Es, LFTs and CRP, and a normal CRP and unremarkable renal/liver function despite significant pain is a common finding. Overall, normal blood tests with disproportionately severe pain can be a helpful diagnostic clue towards ketamine-related pathology.
- Be aware U&Es are usually normal, unless there is severe dehydration from vomiting, or secondary renal involvement from prolonged bladder dysfunction or obstruction. LFTs are generally normal, though ALT/ALP elevations can occur due to hepatobiliary irritation.

Current Advice On Symptomatic Treatment:

Ketamine-Induced Cystitis (KIC)

Goal: Symptom relief + harm reduction. Medications help, but **cessation of ketamine is essential.**

Simple Analgesia

- Paracetamol
- NSAIDs (ibuprofen / naproxen if appropriate)
- Helps with suprapubic and pelvic pain. Ensure that these are being taken regularly.

Anticholinergics (for frequency/urgency)

- Oxybutynin
- Tolterodine
- Solifenacin
- Useful for severe urgency, frequency, and small voided volumes.

β3-agonist

- Mirabegron
- Alternative when anticholinergics are poorly tolerated.
- Vibegron
- Alternative when Mirabegron not tolerated. Can be used first line if needed.

Adjuncts

- Duloxetine for persistent bladder pain. Can be used at higher doses to help with associated depression. Less side effects than Amitriptyline.
- Amitriptyline if Duloxetine not tolerated, or not on any other anticholinergics.
- Nefopam if above not tolerated.
- Consider Baclofen or Buscopan if muscle spasm or cramps are present.
- Consider advising non-pharmacological treatments for pain e.g. over-the-counter Magnesium (375 –750 mg ON), Tai Chi (10 mins every day – find for free on YouTube), Mindfulness, Distraction, Box Breathing etc.

Ketamine-Related Abdominal Pain ("K-Cramps")

Goal: Reduce smooth-muscle spasm, nausea, and discomfort.

1. Antispasmodics

- Hyoscine butylbromide (Buscopan) – first line
- Mebeverine – alternative

2. Simple Analgesia

- Paracetamol
- NSAIDs (if suitable)
- Avoid opiates — they worsen GI dysmotility and risk dependence.

3. Acid-suppression (if epigastric pain/dyspepsia)

- PPIs (omeprazole, lansoprazole)

4. Antiemetics (if needed)

- ·Ondansetron
- ·Cyclizine
- (Avoid routine metoclopramide in young patients.)

5. Adjuncts

- **Duloxetine** for persistent bowel pain. Can be used at higher doses to help with associated depression. Less cholinergic side effects than Amitriptyline and useful when constipation main symptom.
- **Amitriptyline** can be useful when more cholinergic effects needed, or when diarrhoea is main complaint.
- **Nefopam** if above not tolerated.
- Consider **Baclofen** if abdominal wall pain is present (Carnett's sign positive).
- Consider advising non-pharmacological treatments for pain e.g. **over-the-counter Magnesium (375 –750 mg ON), Tai Chi** (10 mins every day – find for free on YouTube), **Mindfulness, Distraction, Box Breathing etc.**

Medications to Avoid

- Opiates → worsen bowel motility, increase dependence risk, reinforce drug-seeking
- Repeated antibiotics unless there is confirmed infection

Essential Non-Drug Elements

- Stopping ketamine – strongest predictor of improvement
- Hydration + avoid bladder irritants (caffeine, alcohol)
- Referral to substance misuse services
- Consider urology/GI referral if red flags or severe symptoms

Memory and mental health

- Chronic ketamine use has been associated with impairment in both short and long term memory. There are also reports of increased rates of low mood and depressive symptoms among long-term users.
- GPs should consider screening for cognitive impairment and co-morbid mental health conditions in patients with ongoing ketamine use.

Harm reduction support

- There are several harm reduction strategies that may help reduce the risk of bladder and gastrointestinal complications associated with ketamine use. Please visit www.barnsleyrecoverysteps.org.uk to learn more.
- Barnsley Recovery Steps provides harm reduction advice locally for people aged over 18-years-old. They also operate a Needle and Syringe Programme (NSP) for individuals who inject ketamine, offering sterile injecting equipment and associated support.
- SPACE is Barnsley Recovery Steps young people's drug and alcohol service for those under the age of 18.

Treatment Journey: Adults Aged 18+

Barnsley Recovery Steps provides free, confidential and non-judgemental support for adults affected by any drug, including ketamine.

There is no single route through treatment. Support starts with the individual, what is happening for them now and what they would like to be different. They do not need to be ready to stop using ketamine before accessing support.

1. Making it easier to engage

Barnsley Recovery Steps will take time to build trust and understand what matters to the individual. Support can begin with a conversation about their ketamine use, concerns, goals and the options available to them.

As a professional, you can help by having an open conversation, explaining that support is available without judgement and, with the person's agreement, helping them make contact or complete a referral.

Try asking: "What would you like some help or support with at the moment?"

2. Looking at the whole picture

An assessment will explore ketamine use alongside the person's physical health, mental health and emotional wellbeing, safety, relationships, housing and wider circumstances. Treatment can then be shaped around their individual needs and goals.

Where appropriate, support can include harm reduction, health interventions and needle and syringe provision, alongside help to access other services. Barnsley Recovery Steps' needle and syringe provision offers sterile injecting equipment alongside harm-reduction advice, Blood Borne Virus (BBV) testing and support into treatment.

As a professional, you can help by sharing relevant information, with appropriate consent, and highlighting physical or mental health concerns, changes in ketamine use, safeguarding concerns and other factors that may affect treatment.

3. Ketamine-specific health support

Ketamine can have significant physical health consequences, so treatment is not only about reducing or stopping use.

Barnsley Recovery Steps works in partnership with Barnsley Hospital's Urology Department, providing joint clinics for people experiencing problems associated with ketamine use, including ketamine-related bladder problems. The pathway offers tailored harm-reduction advice, fast-tracked support, group work and peer support.

As a professional, you can help by asking about physical health as well as ketamine use and encouraging people to seek appropriate medical support when they have health concerns. Avoid assuming that somebody has to stop using before their wider health needs can be addressed.

4. Personalised treatment and recovery support

Together with the individual, Barnsley Recovery Steps will develop support around the changes that are important to them. This might include:

- Reducing the risks associated with ketamine use
- Reducing or stopping ketamine
- Understanding patterns, triggers and cravings
- One-to-one recovery interventions
- Ketamine specific support groups and peer support: Ketamine Anonymous at the Recovery Hub, plus two ketamine support groups at Burleigh Court and online
- Support with physical and emotional wellbeing
- Support where mental health and substance use needs overlap
- Building routines, relationships and a recovery network
- Support with wider needs such as housing, education and employment.

The service has developed dedicated ketamine support in response to local people's experiences and feedback, including two specific ketamine support groups and its joint work with Urology. Barnsley Recovery Steps also has a specific treatment pathway for people experiencing both substance use and mental health difficulties.

As a professional, you can help by remaining involved where appropriate. Notice progress in whatever form it takes. Reducing risk, attending a group, seeking medical help, talking more openly or reducing ketamine use can all be meaningful steps.



5. Detox, residential rehabilitation and additional support

For adults who require more intensive treatment, we offer a clinical assessment of the person's needs and suitability to determine whether detoxification is needed and explore community and residential rehabilitation options to form part of the wider Barnsley Recovery Steps treatment offer.

These options should sit within a wider personalised plan rather than being presented as the only route to recovery.

Where ketamine use is connected with mental health difficulties, Barnsley Recovery Steps can also support people through its integrated approach to mental health and substance use, so that these needs can be considered together.

6. Staying connected

Recovery is rarely a straight line. Goals can change, people can have setbacks and engagement may fluctuate. Barnsley Recovery Steps can continue to review and adapt support with the individual.

Barnsley Recovery Connections is a lived experience recovery organisation based at the McLintocks site. They provide a welcoming and supportive recovery community for people affected by substance misuse. Individuals can access therapeutic groupwork programmes, activities and recovery groups, offering opportunities to connect with others, build supportive relationships and strengthen their recovery journey. This along with one to one support from Barnsley Recovery Steps builds and enables people to receive a wrap around service.

As a professional, don't step away simply because specialist treatment has started. A trusted relationship can remain an important source of support.

If somebody misses an appointment or their ketamine use increases, approach the conversation with curiosity.

Your role alongside Barnsley Recovery Steps

You don't need to be a ketamine specialist to make a difference.

Listen, stay curious and keep the conversation open. Help the person connect to specialist support and continue to consider their physical health, mental health, safety and wider circumstances alongside their ketamine use.

Most importantly, ask what matters to them rather than assuming what recovery should look like.

Good practice snippet

Someone does not have to be ready to stop ketamine to benefit from support. For one person, the goal may be abstinence. For another, the first step may be reducing harm, attending the Urology clinic, talking about their mental health or coming to a ketamine support group.

Start where the person is, agree what matters to them and build from there.

Barnsley Recovery Steps | Adults 18+

Free and confidential drug and alcohol support for adults living in Barnsley

Phone: 01226 779066
Email: brs.referrals@waythrough.org.uk
Website: barnsleyrecoverysteps.org.uk
Facebook: barnsleyrecoverysteps
Instagram: barnsley_recover
LinkedIn: barnsley-recovery-steps



Young People Under 18: What SPACE Will Do..

SPACE provides free, confidential and non-judgemental Drug and Alcohol Support for Young People Under 18 in Barnsley. Support is flexible and led by the young person's needs and goals. Young people do not need to be ready to stop using ketamine to work with SPACE.

Engaging with the Young Person

SPACE will take time to build a trusting relationship and understand what is happening for the young person, without judgement or pressure. They can meet young people in a setting that feels appropriate for them, including school, college, home or other community setting.

If a young person is unsure about support, they will work at their pace and keep the door open.

Assessment, Risk and Safety Planning

SPACE will complete a holistic assessment with the young person, looking at their ketamine use as part of the wider picture of their life. This includes their physical and emotional health, relationships, education, family circumstances, peers, safety and support networks.

We will assess risks and protective factors, build on their strengths and develop a safety plan with the young person where needed.

Early and Ongoing Intervention

Support will be matched to the young person's needs. This may range from early intervention or brief interventions through to more structured one-to-one support. SPACE can work with young people who wants information, wants to reduce harms, are considering changing their ketamine use, or want to stop.



Interventions may include:

- Harm-reduction advice and staying safer
- Brief and early interventions
- Exploring ketamine use, patterns and triggers
- Developing coping strategies
- Supporting physical and emotional wellbeing
- Reducing use or working towards stopping
- Working alongside family and other services where appropriate

SPACE's approach is personalised, with individual support plans developed alongside the young person.

What about residential rehabilitation?

Residential rehabilitation is not part of the offer for under-18 ketamine users as the pathway doesn't currently exist. SPACE will instead provide coordinated age-appropriate community-based support around the young person's individual needs.

How professionals Can Help

You can support the young person by staying connected. You don't need to have all the answers or become their drug and alcohol worker. You can contact the service for advise, guidance and case consultation.



You can:

- Listen without judgement and remain curious
- Talk positively and openly about SPACE
- Help them make the referral or first contact
- Share relevant concerns and strengths with SPACE, within appropriate safeguarding and information-sharing arrangements
- Help reduce practical barriers to attending
- Continue to check in and notice progress
- Respond to missed appointments with curiosity rather than seeing them as a lack of motivation.

Good practice snippet. Connection before correction.

A young person may not be ready to change their ketamine use straight away. A consistent, trusted professional who keeps listening and keeps the door open can be an important part of their treatment journey.

SPACE | Young People Under 18

Dedicated young people's drug and alcohol support



Phone: 01226 779066, ask for the Young People's Service
SPACE duty worker: 07483 367805
Email: brs.referrals@waythrough.org.uk
Website: barnsleyrecoverysteps.org.uk

Facebook: barnsleyrecoverysteps
Instagram: barnsley_recover
LinkedIn: barnsley-recovery-steps
YouTube: Barnsley Recovery Steps