

## Spice

By Mark ZY Tan

*“The spice must flow...” — Frank Herbert’s Dune.*

Prison was like Arrakis for the young, 20-year-old Luke. The concrete, windowless cells much like the barren landscape of the fictional desert planet in Frank Herbert’s 1965 science fiction epic, *Dune*. Exiled to her majesty’s pleasure for a minor offense, Luke did not quite grasp the trouble awaiting him. In fact, he was impressed by how “friendly” the other prisoners were. Within a few days of being there, they started offering him cigarettes. But these were not regular tobacco.

They called it “bird-killer.” “Bird” as in “birdlime,” historically a sticky gum spread on branches in order to trap small birds. They said it helped them kill time serving their long sentences. On the street though, this same drug was much better known as “spice.” Spice, the same drug that lies at the heart of the *Dune* story. Unlike in *Dune* however, Luke’s encounter with spice did not afford him prescience, nor the ability to navigate time and space.

It wasn’t Luke’s first time trying cannabis, but he was completely unaware of the potency of its synthetic cousin. Within an hour of smoking Spice, he felt relaxed, sinking deeper and deeper into a hole of apathy, a distinct numbing of his senses, which helped him forget his predicament. The other prisoners didn’t seem quite as sedate as he was becoming. But that was the extent of his memory. Soon, he was unrousable, barely breathing, slowly aspirating on his secretions. Slumped by his bed, the prison guards knew exactly what he had taken. The doctor was called, and soon, this was escalated and Luke was brought to A&E.

By the time he arrived in A&E, it had already been hours since Luke smoked that joint. The paramedics had tried to support his breathing. They gave him Naloxone, a reversal agent for opioid toxicity, but this only had a transient effect. They gave him oxygen to maximize delivery to his tissues. They gave him fluids in an effort to boost his low blood pressure. The A&E staff realized these were insufficient and prepared to intubate him. Only small boluses of drugs were needed to render Luke anaesthetised, after which the team successfully intubated, ventilated and inserted lines to maintain sedation. A quick detour through the CT scanner was made before Luke landed in ICU.

In ICU, after initial stabilization and setting up of all the machines, and nurses and healthcare assistants washed, changed, shaved, brushed and cleaned the prisoner, all while two police officers continued to keep watch over his ICU prison cell. The smell of Spice was fortunately soon replaced by Old Spice, thanks to the ironic sense of humor of staff nurse Steven.

Luke’s CT scan did not show any obvious pathology in his brain. However, CT scans cannot

pick up cellular damage caused by tissue hypoxia. This was quite clearly the case, when days down the line we were trying to wake Luke up, all he did was violently flail his limbs without purpose. Each time we tried to wean the sedative drugs, he would flail, but without purposeful movements. His breathing pattern became erratic, his blood pressure shot up and his limbs threatened to break all the lines attached to him. During a couple of instances, the police officers had to help to control his movements while we reintroduced sedation. Different agents were tried in various combinations. Finally, with a high dose of an alternative sedative, Dexmedetomidine, he settled.

Through speaking to the police officers. I soon found out that smuggling of Spice into the prison was rampant. Many of the prisoners were addicted but due to the various methods of disguising it, it was almost impossible for the prison guards to prevent its use. At first, due to its legal status, Spice would be sprayed onto actual dried rolled cannabis leaves and sent in envelopes to the prisoners. They reminded me of the rolled Chinese tea leaves of my ancestors: 铁观音 (tie guan yin). Named after the Buddhist goddess of mercy, 观音 (guan yin), this was perhaps a fitting imagery, for the unconditional love and relief of suffering this deity bestowed upon even the lowliest criminals. As the legislation around Spice tightened, the smuggled forms became more and more creative. Soon, the prisoners' friends realized Spice would dissolve in acetone (the same component of nail polish remover). The dissolved Spice would then be sprayed onto personal letters and sent to the prisoners. These would initially bypass the normal security and search measures. The prisoners would then cut small squares of the paper, mix them in with tobacco roll-up cigarettes and smoke them, achieving the same effect. Soon, the prison guards caught on to the trick and they would search and test all personal letters for the drug. In order to continue their habit, fake legal letters were sent to the prisoners, impregnated with Spice like before. Because they were "legal letters," the prison guards were not allowed to open them, and thus, the prisoners continue to receive their drugs.

In order to determine the dosage of the Spice-laden letters, seasoned prisoners would use the newbies as guinea pigs, offering them the narcotic and observing the effect before partaking themselves. However, the spraying and hanging process would result in higher concentrations of cannabinoids towards the bottom of the letter, and lower concentrations toward the top. Likewise, the heavier impregnated leaves would make their way to the bottom of the packet of leaves, resulting in a magnitude of physical manifestations dependent on the part of product used. Unfortunately, Luke must have received the wrong end of the letter, and used Spice up to 80 times the potency of natural cannabinoids. The resulting stupor starved not only his perception, but also the oxygen-supply to his brain. Three days after admission into ICU, a repeat CT scan and EEG were performed for persistent poor neurological function. Both demonstrated features of hypoxic brain injury. There was little hope of recovery for this young man.

The following day, we extubated Luke. While he was able to breathe for himself, he was only minimally conscious. Simply unable to obey commands, it left us with little confidence about his recovery potential. A couple of days went by and Luke continued to be agitated, uncontrollably moving his limbs in regular myoclonic jerks. He was moved to a floor mattress for fear of an inadvertent fall out of bed. He needed a healthcare assistant beside him at all

times to prevent self-injury. Regular sedatives soon controlled his flailing, but reduced him to an empty shell. His limbs would make few movements. His jaw regularly opened and closed in circular movements, causing his teeth to grind constantly. Loud, long moans were heard frequently, and while his eyes roamed around without ever fixing, tears would occasionally be seen trickling down his cheek. Unable to eat or drink, nutrition was provided through the nasogastric tube, bridled, like the nose ring of a cow, to prevent dislodgement. After a few more days, the nasogastric tube was replaced by a percutaneous gastrostomy tube, which permitted access directly to the stomach via a tube that communicated with the surface of the skin of the abdomen. The urinary catheter was replaced with adult diapers.

Within a week, Luke was stepped down to the ward, a mere shadow of the young man he once was. He had swapped Her Majesty's prison for a mental solitary confinement, where his minor sentence had become one for life. The squalor of his cell was replaced by the darkness of a brain damaged beyond cognition or control, trapped in an unfortunate Nirvana. Extinguished, spent and shelled, young Luke was eventually discharged to a nursing home, where the severity of his condition made even the geriatric residents comparatively thankful of their own predicament.

I looked at Luke upon his discharge. A "success" of medicine. Mortality 0, survival 1. Yet, I could not help but despair. In his curiosity, Luke fell victim to the manipulation of his seasoned inmates. I thought of John William Waterhouse's painting "Sleep and His Half-Brother Death," which hinted at the fine line between recreational opioid use and toxicity. The effects of drug-induced sedation did not seem quite as still or serene as what Waterhouse portrayed. Instead, Luke was stuck in a state beyond both sleep and death. The wails, weeping and gnashing of teeth seemed an unjust eternal punishment for a young man dragged down by the scum of the earth. Back in prison, the Spice continued to flow, the memory of Luke consumed by the sand, another victim of the worm that does not die, and the fire that is not quenched.

*"A poison so subtle, so insidious, so irreversible..." — Frank Herbert's Dune*

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