

Name: _____ Date: _____ Period: _____

Stimulants

W Y P H Y S I O L O G I C A L F S
A W K J T S T I M U L A N T S V I
P A E Y Q A U F X C J T T X K K S
A P A C W G E M X K O X A Q K L O
Z Y V N A V A D F U N C B X T C R
E H Z S D P P M S W W Y A U H Q O
U O S A H E E M D D V G Z I L C P
M L B T D E Q H L M A B V C N S O
B L O O D P R E S S U R E Q L E E
Q Q M R E T G N O L Y I X R D X T
M N I C O T I N E L C H R H S T S
U E N I A C O C K C A R C J G T O
K I P M R E T T R O H S O F V L L
I S L E X Z E T A R T R A E H C G
R E N I E F F A C Q Q I S R F M L
Y X A E S U A N I P D X I S B Y U
E F V I U J B D E P R E S S I O N

Blood pressure	Crack cocaine	Physiological	Osteoporosis
Depression	Heart rate	Short term	Stimulants
Long term	Caffeine	Nicotine	Cocaine
Nausea	Death	ADHD	MDMA