

California NORML's Drug Testing Tips - Dealing With Urinalysis on Short Notice Don't Rely on Excuses



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While NORML strongly opposes drug use on the job, we think no one should be forced to submit to urine testing, especially for marijuana. Aside from launching a legal challenge, your best defense against urine testing is to be clean. Unfortunately, this may be difficult since urine tests may detect marijuana 1-5 days after an occasional use, 1-3 weeks in regular users, and 4-6 weeks in multiple daily users. Since urine tests do not detect the psychoactive ingredient of marijuana, THC, but rather other, nonactive metabolites, they in no way measure impairment; nonetheless, this fact is of no account to employers in today's anti-drug hysteria. If you are on the job market, it is prudent to expect being tested and avoid marijuana. However, recognizing that many of you may face drug testing on short notice, we offer the following advice for emergencies with our best wishes (but no promises!).

DON'T RELY ON EXCUSES: Although urine tests are far from infallible, it is difficult to challenge positive test results. "False positives," in which workers are wrongfully accused of marijuana use, are highly unlikely so long as labs exercise proper care (however, not all labs do this). The standard procedure is to first screen the samples with an immunoassay test (e.g., EMIT® or RIA®), then confirm positive results with the more accurate gas chromatograph mass spectrometer (GCMS). This virtually eliminates the chance of false positives in exchange for a relatively high rate of "false negatives," where drug use is not detected. The sensitivity of the test is determined by the concentration of metabolites it is set to detect: for the Dept. of Transportation, the standard cutoff is 50 nanograms/milliliter (ng/ml).

No substance is known to produce a false positive for marijuana. It used to be that ibuprofen (Advil, Motrin, Nuprin) interfered with the marijuana test, but this problem has been fixed. A variety of over-the-counter medicines can cause false positives for amphetamine and other illicit drugs on the EMIT test, but not on the GCMS.

"Passive smoking" of marijuana is not an acceptable excuse at the 50 ng/ml level, since only in extreme circumstances can a non-smoker absorb enough pot to test urine positive (e.g., being stuck in a closet full of heavy smokers for hours). However, passive exposure may result in positive tests at 25 ng/ml or lower.

WASH YOURSELF OUT: The general strategy for passing urine tests is to increase your fluid intake and urine flow so as to dilute the concentration of drugs in the sample

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below the threshold of detection. An hour or two before the test, you should fill your bladder with fluids - as much as you can drink. Water is fine - contrary to popular rumor, there is NO evidence that goldenseal, vinegar, niacin, or vitamin C help. However, high-dosage aspirin may reduce the sensitivity of the EMIT urine test for pot (only). Many people wash themselves out for several days in advance by drinking a lot and exercising, but there is no reason to think this is useful. In no case should you give your first urine of the morning, since drug metabolites tend to build up during your sleep.

While you're loading up on water before the test, you may also want to take a large dose (50-100 milligrams) of vitamin B-2, available in B-complex multivitamins. The purpose of this is to color your urine yellow, since otherwise you are likely to produce clear, watery urine, which makes some collectors suspicious (contrary to rumor, vitamin C won't help). In rare instances, some labs will reject a sample for being too watery; in this case, however, they will typically give you a second chance. Wait until your test results have been confirmed before indulging in compromising behavior.

You can boost your fluid output by taking diuretics, which stimulate urination. Weak diuretics include coffee, cranberry juice, certain health food products and over-the-counter pills for pre-menstrual water retention.

If you're taking the test on very short notice, you may wish to resort to more potent diuretics, which are widely prescribed to treat high blood pressure. Although strong diuretics, such as furosemide (Lasix®), are available only on prescription in the U.S., they can be had over-the-counter in Mexico and other foreign countries. Beware that they can be dangerous for certain persons, such as diabetics or pregnant women, and can cause problems if taken over extended periods. Diuretics can be detected in urine, but are rarely checked except for athletes. The following regime has been suggested by a former army drug testing officer (Robert Freeman, "How to 'Beat' a Drug Test," High Times, Aug. 1988): Take an 80-milligram dose of Lasix; take a hefty drink of water; piss two or three times, then take the test. If you're lucky and didn't smoke too much pot, a good washout may get you past a test on a couple days' notice. However, regular smokers should allow at least a week or two if at all possible.

DRUG SCREENS? It has been suggested that the ingestion of certain substances might alter body chemistry so as to disguise drug use. Although many products are currently being marketed as drug screens in head shops, High Times ads, etc., few have any solid scientific basis. Activated charcoal, a common detoxifier, might help lower metabolite levels a bit in long-term users if taken over the course of some days or weeks. It has been suggested on theoretical grounds that lecithin, a food emulsifier, might also be useful if taken over extended periods, but this hasn't been proven. A number of high-priced herbal teas and powders are promoted as urine cleansers, with no good medical rationale. While some users have reported remarkable success with them, many others have not.

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Independent experiments suggest that it may be water dilution, not the screen itself, that accounts for success.

TAMPERING: While urine dilution is useful, it isn't 100% reliable, especially for heavy daily users. Another tack used by some people is to tamper with the sample by adding adulterants or substituting clean urine for their own. Ethical issues aside, tampering is risky since subjects may be observed or made to disrobe beforehand, and cheating isn't forgiven. For the adventurous, Abbie Hoffman's book *Steal This Urine Test* has full instructions on how to rig yourself up with a plastic bag to substitute clean urine. You can buy clean, dehydrated urine from Byrd Labs. Beware however that labs check to make sure the temperature of urine samples is right (around 91-97f).

Another trick to foil the test is to spike the sample with an adulterant. This approach should be used only as a last resort, since any adulterant can be chemically detected if labs take the trouble to do so. A number of adulterants cause negatives on the commonly used EMIT test, but not necessarily other tests. In an emergency, you might fool an EMIT test by adding a few drops of Visine® to the sample. Other common adulterants include detergent, bleach, salt, and the cleaning solution glutaraldehyde, but most of these are easily detected by smell or visual inspection. A host of commercial adulterants are on the market (for advertisements, see *High Times*). Among the more popular are Klear® and Whizzies®. No additive is 100% reliable, and all involve a substantial risk of detection. Many drug testing companies claim to test for adulterants, though it isn't clear how carefully.

Many drug testing aids are advertised with money-back guarantees if you test positive. **BEWARE:** guarantees do not assure good test results! Vendors often exaggerate product reliability and ignore customer complaints.

BLOOD TESTS: In some situations, including accidents and roadside sobriety checks, blood tests may be used. Blood tests are a much better gauge of current impairment than urine tests because they detect the actual presence of THC in the system; however, they can be sensitive to other metabolites as well. Blood tests generally register positive for just a few hours after smoking, though heavy chronic smokers may be positive for a couple of days. Less sensitive are saliva tests, which register positive for about 2-4 hours after smoking. If you have used marijuana in the last few days but are not currently under the influence, you should insist on a blood (or saliva) test instead of a urine test if at all possible, since you are more likely to turn up clean. On the other hand, if you have smoked recently, you may do better to take a urine test, since this will at least leave open the question as to whether you were under the influence. Also, urine doesn't turn positive until several minutes after smoking.

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HAIR TESTS: An ominous new technology is hair testing, which is supposed to detect drug use for months, or however long one's hair has been growing (Skinheads note: samples can be taken from any part of the body!). While hair tests are highly sensitive to cocaine, their sensitivity to pot is not well established. Not all employers who use hair tests check for marijuana. Hair testing is racially biased against Africans, being much more sensitive to thick, dark hair than to light, fine hair. Although the FDA and scientific community have been critical of hair testing, that hasn't stopped employers from using it. Hair tests may be influenced by shampoo: one test found hair treated with Head & Shoulders® (Fine/Oily), Neutrogena®, and Rave® displayed lower drug concentrations than with Pert® (Oily/Fine) or Prell® (Normal, Normal/Oily).

LEGAL CHALLENGES: Prospective employees have no legal right to challenge pre-employment drug screens. However, workers who are already employed may be able to challenge their employers' drug testing plans in certain situations depending on labor law and local regulations. Avoid signing anything that gives your boss the right to arbitrarily test you; by stating your objections, you will strengthen your right to refuse a test. If you think you are being unjustly tested, you may have cause for legal action. San Francisco, Berkeley and some other jurisdictions forbid on-the-job drug testing except in safety-sensitive positions.

We are sorry having to mention these devious techniques, but feel it is necessary to defend innocent people against wrongful accusations of drug abuse. California NORML urges you to use this information responsibly and not as a way of hiding irresponsible marijuana use.

RESOURCES: For more information, call the NORML hotline: (900) 97- NORML (\$2.95/min - 6AM-9PM PST Mon.-Fri.). Another good source of information is the Butterfield-Jay Foundation, Box 57214, Oklahoma City, (405) 521-URIN. Drug testing aids are available at many head and hemp shops.

TEST YOURSELF: Many drug abuse clinics offer urine testing for a fee. Home test kits are available from companies such as Liberty Research and Instant Diagnostics. Beware: drug urine levels can fluctuate up and down during the day.

WHAT'S WRONG WITH DRUG URINE TESTING?

Privacy: Urine tests intrude on intimate bodily privacy. Mass drug screening violates the privacy of the majority of responsible employees in order to spot a minority of alleged drug abusers, many of whom are in fact not drug abusers at all. Government-imposed drug testing may be restricted by the 4th Amendment to the Constitution, which forbids unreasonable search and seizure and requires "probable cause" for search warrants. However, the 4th Amendment does not generally apply to tests by private employers.

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Accuracy: No test is infallible. Surveys of drug testing labs have found remarkably high error rates from poor quality control. While good labs have added safeguards to minimize the risk of "false positives," even if error rates are only one in 10,000, the extension of drug testing to tens of millions of workers as proposed by the government means that many workers will be falsely accused of drug abuse.

The most common misconception about drug urine testing is that it detects drug-impaired workers, whereas it actually detects evidence of past drug use that need have no relation to on-the-job performance. Because drug tests are highly sensitive to marijuana, random testing can promote use of other, more dangerous drugs such as cocaine and opiates, which wash out in 2-3 days, or LSD, which is rarely tested. At the same time, most drug tests totally disregard alcohol, the nation's leading drug of abuse. Urine testing is thus an inherently flawed technology: it rules out the most innocent off-the-job marijuana use, while permitting flagrant on-the-job alcoholism.

Efficacy: Urine testing has never been scientifically shown to be safe or effective at improving workplace safety or productivity, and studies indicate that the great majority of drug-positive workers are just as reliable as others (John Horgan, "Test Negative," *Scientific American*, March 1990; Dr. John Morgan, "Impaired Statistics and the Unimpaired Worker," *The Drug Policy Letter*, May/June 1989). Medically, the consensus of expert opinion is that drug tests are an inherently unreliable indicator of drug impairment (Consensus Report, National Institute on Drug Abuse, *Journal of the American Medical Association*, Nov. 8, 1985). Dr. George Lundberg of the American Medical Association has called them "Chemical McCarthyism" (editorial, *Journal of the American Medical Association*, Dec. 5 1986).

Alternatives: The shortcomings of drug testing can be avoided by performance tests that measure actual concentration and reaction time instead of chemical residues. Computer video game tests that detect impairment due to drugs, fatigue, stress, or illness are now available on the market (Performance Factors, Denver, Col.).