Drug-facilitated sexual assault (DFSA) occurs when a person is subjected to nonconsensual sexual acts while they are incapacitated or unconscious due to the effect(s) of ethanol, a drug and/or other intoxicating substance and are therefore prevented from resisting and/or unable to consent.

**DFSA Scenarios:**
- The perpetrator places the intoxicating substance into the food or beverage of a victim without the victim’s knowledge.
- The victim voluntarily ingests a drug (over-the-counter, prescription, or illegal) after being told it is something else.
- The victim knowingly and voluntarily ingests ethanol and/or a drug (over-the-counter, prescription, or illegal).
- The victim takes a drug or other intoxicating substance in combination with ethanol.

**Typical Symptoms of DFSA:**
- Drowsiness
- Dizziness
- Loss of muscle control
- Slurred speech
- Decreased inhibitions
- Memory loss or impairment
- Loss of consciousness
- Vomiting

**Drugs Associated with DFSA:**
Dozens of drugs (including ethanol) can potentially be used to commit DFSA. The media has reported that GHB and Rohypnol are the most common "date rape drugs". However, reports in the scientific literature demonstrate that numerous CNS depressant drugs have been associated with this crime. Included in this list are a vast variety of over-the-counter, prescription, and illegal drugs such as:
- Benzodiazepines (i.e., Valium®, Xanax®, Rohypnol®)
- Antidepressants (i.e., Elavil® or Zoloft®)
- Muscle relaxants (i.e., Soma® or Flexeril®)
- Antihistamines (i.e., Benadryl®)
- Over-the-counter sleep aids (i.e., Unisom®)
- Hallucinogens (i.e., Ecstasy, marijuana or ketamine)
- Opioids (i.e., Vicodin® or Oxycontin®)

**Toxicological Specimens for DFSA:**
The specimens of choice for toxicology in a suspected DFSA case are urine and blood. It is recommended that a urine sample be collected from the victim if less than 120 hours have elapsed since the incident. If possible, one hundred (100) milliliters of urine should be collected in a specimen cup with the preservative sodium fluoride and stored refrigerated. Although most drugs will be undetectable in the blood more than 24 hours after ingestion, blood may prove useful in a DFSA case if collected less than 24 hours after the incident. At least 12 milliliters of blood should be obtained in a grey-top test tube containing the preservative sodium fluoride and the anticoagulant potassium oxalate. The blood should be stored refrigerated. Each biological specimen should be marked with the victim’s name, date and time of collection and collector’s initials. Specimens should be sealed with evidence tape and all relevant chain-of-custody protocols should be followed. Specimens should be submitted to a qualified forensic toxicology laboratory for analysis. Laboratories should consult “Recommended Maximum Detection Limits for Common DFSA Drugs and Metabolites in Urine Samples” on the SOFT website (www.soft-tox.org) to determine if they meet the recommended detection limits.

**For More Information, Training, or Assistance:**
Contact the Society of Forensic Toxicologists (SOFT) Drug-Facilitated Sexual Assault Committee at office@soft-tox.org.