Hapé (Rapé)
Harm Reduction Information

Also spelled rapé and rapeh; a snuff used in ceremony by peoples of the Amazon

Last updated 10/28/2026

Please Read First

This page is educational. It is not medical, legal or professional advice, and I am not a physician or an attorney. This information was gathered from published harm reduction organizations, medical and legal sources, and my own training and experience, and I may have made mistakes. You are responsible for confirming anything here before you act on it, with a qualified medical provider and, for questions of law, an attorney. Laws and knowledge about psychedelics change quickly, and some of what is written here may have changed since the date above. Nothing here encourages anyone to break the law. It exists to reduce harm for people who will make their own choices. I do my best to keep up with current law and research, but I cannot promise that anything here is current or complete.

It is advisable to meet with a psychedelic-informed physician for an assessment before using any psychedelic or related substance.

Where this information came from: The sources listed under References, and my own training and experience.

This document was drafted with the support of Claude, an AI assistant. I reviewed it, and AI and I can both be wrong, so check anything that matters to you before you act on it.

What Hapé Is

Hapé is not a psychedelic. It is a tobacco snuff, and the tobacco matters more than most pages admit. The main active ingredient in most blends is nicotine. The snuff is a very fine powder blown into the nose, traditionally with a pipe, by yourself or by another person [1][2]. Most blends have a base of tobacco, usually Nicotiana rustica (called mapacho in Peru), mixed with the ash of particular trees and sometimes other plants [3][1]. Not every blend contains tobacco; the Apurinã are described as making a plant-only snuff, which is greenish in color [4][1]. Treat any powder as nicotine until the person who made it tells you otherwise.

Names vary by people and by writer: rapé (the Portuguese spelling most used in Brazil), hapé, rapeh, and in Huni Kuin language rume, and nawê among the Yawanawá [2][5]. One facilitator quoted by Healing Maps says the name hapé was given by colonization, a claim I could not check [2]. The pipe you blow through yourself is the kuripe; the pipe another person uses to blow it into your nose is the tepi [6][1]. Healing Maps mixes the two terms up

in its own table and gets them right in its text, so check any page that gives them backwards [2].

Where It Comes From

Hapé belongs to the peoples of the western Amazon. Names that come up again and again are the Yawanawá, Huni Kuin and Katukina [7][2], the Matsés [1], the Apurinã, and many peoples of the middle Purus river region, including the Paumari, Deni, Jamamadi, Jarawara, Suruwaha, Banawa and Kulina [8]. They are not one tradition. An anthropology review of the middle Purus describes snuff used for energy and relaxation, to treat colds and headaches, for conversation in evening circles, to settle conflict, and by shamans to talk with spirits and diagnose illness; methods, tools and ingredients differ from people to people [8]. Many keep their recipes private [1].

The tobacco is not always the species most people picture. Reviews and sellers describe Nicotiana rustica, a tobacco much richer in nicotine than the species in cigarettes [3][9]. The ash comes from trees; sellers name tsunu, murici and mulateiro, and an anthropology review mentions the ash of cacao-family fruit shells [6][8]. Resin and forest plants are added in some places [8].

What I could read says snuff use stretches across the middle Purus peoples and well beyond, and is old enough to be tied into healing, initiation and trade between groups [8]. Two changes are recorded. The first is that Apurinã snuff was kept for shamans until the 1980s, then became widely used after outside indigenist organizations (CIMI and FUNAI) asked shamans for it, and recipes began to include resin and other ingredients for scent and perceived benefit [8]. The second is the present wave of city and international use. In Rio Branco, Acre, shops report that sales peaked around 2017 and 2018, that many customers now buy tobacco and ash separately and mix their own, and that the work of making it has moved from specialists to individuals [4].

A Colombian writer for the Chacruna Institute links the global interest to a wider rediscovery of tobacco as a sacred plant, noting that people in Europe came to tobacco partly because ayahuasca was restricted there while tobacco was not [9]. That is one writer's view, and I mention it only to say that the interest in hapé has more than one root.

Cultural Respect and Sourcing

This section belongs in a harm reduction sheet because the way hapé is made, sold and given affects both the people who make it and the person who receives it. I have tried to let Amazonian speakers carry the cultural points and to say plainly when I am speaking for myself. Each point below is marked as resting on an Indigenous or community voice, on a paper, or on a seller. Almost all of the voices come from Portuguese-language news that I read through automatic translation, so treat my paraphrases as a start, and go to the original speakers where you can.

Huni Kuin leaders, 2018 (voice). In July 2018 Huni Kuin leaders, including Mapu Huni Kuin, asked the public prosecutor of Acre for protection and respect for their ancestral

knowledge and for action against the trivialization and misuse of rapé in cities. They described it as a power medicine used with reverence in sacred and healing rituals, described its misuse in the cities (the details are under Other Substances and Combinations), and asked for rules on its sale and use. Mapu Huni Kuin suggested it might one day have to be banned if the misuse continues [10].

A Huni Kuin teacher and a Yawanawá artisan, 2026 (voices). Keã Huni Kui, a professor and Huni Kuin leader, describes the ash as the body of the forest and faith as central to the healing. Edmundo Shane, a Yawanawá artisan and trader who now lives in Rio Branco, calls it a sacred practice tied to religious ritual, says some rituals ask participants to abstain from alcohol and sex until the process ends, and says that rapé made without tobacco does not cause chemical dependence. He says it takes awareness and respect, because it is a spiritual act as well as a medicine. They and the article's authors name commercialization as the threat: it could erase the sacred meaning and disrespect Indigenous culture [4]. The article also reports that more customers now make their own blends from bought tobacco and ash, and that one shop says it works directly with Huni Kuin and Apurinã communities to guarantee origin; the shop's representative is not described as Indigenous [4].

An indigenist advisor in Acre, 2016 and 2024 (community voice). Jairo Lima, who works with communities in the Juruá region (sources disagree on whether he is himself Indigenous), calls rapé a true science of Indigenous peoples, beyond medicine. He says some producers sell rapé under a people's name without sharing profits, while the whole community may bear the consequences, and that communities are discussing an Indigenous seal of origin instead of patents. He advises going to the original source rather than to self-styled masters who charge high prices, asking the source about type, strength and purpose, and reminds readers that not every people uses rapé socially and some healers do not use it at all. He calls for adults only, warns that tobacco can addict if overused, and criticizes the criminalizing of Indigenous sellers, noting that large quantities are sometimes seized at airports and bus stops [11][12].

Yawanawá and other anthropology (paper). An anthropology review traces how Apurinã snuff was held by shamans until the 1980s, then spread after outside indigenist organizations asked for it, and says snuff works across the middle Purus as a link between people, animals, plants and spirits [8]. A 2024 Yawanawá dissertation, which I read only in part, describes snuff as essential to forming a shaman's body and to the people's relations with urban worlds [5].

A Huni Kuin speaker on a related worry (voice, not about rapé). Leopardo Yawa Bane, speaking about ayahuasca in 2023, worries that as outsiders carry Indigenous knowledge to cities, his people and the original meaning and guardians of the medicine will be forgotten, and he asks that Indigenous peoples have a say in drug policy reform [13]. He does not mention rapé. I include it because the worry is the same one the Acre voices raise.

Chacruna and others (not Amazonian voices). A Chacruna event page says its teachers carry their medicine with the blessing and permission of Amazonian partners, and that the Institute works toward decolonization and cultural exchange; it quotes no Indigenous person and gives no terms of the arrangement [14]. A page describing a talk by a Brazilian scientist stresses Indigenous sovereignty and reciprocity and says the growing use outside Indigenous contexts raises appropriation and commodification [15]. A Colombian author for Chacruna writes that some Indigenous communities favor Nicotiana rustica over common tobacco, and that sacred and commercial tobacco should not be confused [9]. These are important positions; none is a Huni Kuin, Yawanawá or Katukina statement.

What sellers say, and what they leave out. Sellers say their hapé is ethically sourced, fair trade or made by named peoples. The pages I read give no prices paid, no agreements, no audits and no statements from the makers about the arrangement [6][16]. One shop page names Yawanawá makers and says its trade brought a sustainable income to the tribal people, with no figures, and the page speaks for the seller only [16]. One church that sells many blends says plainly that its chakra and energy teaching is its own and not the teaching of the peoples who make hapé, and it quotes no Indigenous person or benefit arrangement [17]. A feature in a magazine names three peoples and credits none of them with a quote [7].

Questions to ask before you buy or receive. These come from my own synthesis of the voices above, not from any one source. Which people made it, in which village, and can the seller name them? Does the seller or facilitator belong to that community, or work with them directly in a way you can see? Who benefits from the sale, and how? Is there tobacco in it, which kind, and how strong has the maker said it is? What do the makers say about when and how it should be received, and who should not receive it? A seller who offers a cure, a universal cleanse, or a hurry is giving you a reason to slow down.

Sustainability. Sellers name the ash trees (tsunu, murici, mulateiro) and say nothing about harvesting [6]. I will not claim that hapé is sustainable or unsustainable. The Acre voices do tell us the trade has grown into a market with makers, intermediaries and city blenders, and that the people whose name is on the jar may not see the profit [4][11].

About the Sources

This sheet rests on three kinds of source, and I label them as I go. Papers are the few laboratory and clinical studies, one small interview study of people who use snuff in ceremony in southern Brazil [18], and an anthropology literature that is mostly about ritual and not about health. Indigenous and community voices are the statements I could find from Huni Kuin, Yawanawá and other Amazonian speakers, almost all of them in Portuguese-language news and university pages that I read through automatic translations, not as a fluent reader. Sellers, facilitators and wellness sites make up the rest, and their safety numbers are mostly unsourced.

PubMed, PubMed Central and the FDA smokeless-tobacco page were blocked for me, so the main laboratory paper was read as an abstract.

What I did not find. I could not search FDA's product lists, so I cannot say whether FDA has authorized any hapé product. I found no test kit sold for hapé and did not verify a laboratory that tests it.

What It Feels Like

No one can promise you what a session will be. The sources describe a short, bodily experience driven by nicotine: a burn in the nose and head, dizziness, watering eyes, sometimes vomiting, and then, for many people, a calmer and clearer state. Hapé does not fit the usual picture of a psychedelic. Blends and ways of receiving it differ a great deal, so the range below is wide. This section rests on one interview study of 20 volunteers in a Brazilian shamanic community [18], two anthropology works on how Amazonian peoples use snuff [8][5], a practitioner web page that is opinion and not research [2], and the sellers and magazines cited elsewhere on this sheet.

The Body

The nose and head speak first. A practitioner page describes burning and pressure at once, with strong sneezing and watering [2]; the academic sources I read do not describe the burn. Sellers and magazines give much the same picture: stinging in the nose, watering eyes, pressure in the head, sneezing, a lot of mucus, drooling and sweating, sometimes nausea or vomiting [19][7][17]. Tears and nasal drainage are listed as common [2].

An anthropologist who tried a small amount described a pleasant dizziness, like the spinning of children's games, and a feeling that time had slowed [5]. Practitioner testimony adds a nicotine rush: light-headedness, then a grounded or suddenly calm feeling, with the neck and shoulders loosening [2].

In the interview study, nausea or vomiting was listed among the physical effects, along with sweating, a rise in body temperature, chills, low blood pressure, abdominal pain or diarrhea, and pressure in the head; the frequencies are in a figure I could not see [18]. The Yawanawá dissertation describes stomach cramps and vomiting at higher intensity [5], and the practitioner page says a strong dose can make people vomit [2].

At heavy intensity the dissertation describes tremor, sweating and severe weakness. Some people cannot stand or lift the head, and some fall asleep and are fine the next day; onlookers can find the person hard to recognize [5]. The practitioner page says the heart responds fast and strongly, with possible blood pressure spikes and fainting [2]. That page is not peer reviewed, and the heart is covered under Heart, Blood Pressure and Body Temperature.

How a Session Moves

The sting and the rush come almost at once [2]. The dissertation describes the intense stretch as short for many people and longer in heavy sessions, with sleep afterward at the heavy end [5]. The figures that exist, and where they come from, are under How Long It Lasts.

What follows is often a steadier, more focused and sometimes sleepy state. One feature article calls it grounding, like the edge of sleep [7]. In the interview study, people described initial discomfort followed by a sense of well-being [18], and the practitioner page describes a cleared, calm afterstate [2].

Who gives it changes the force. The anthropologist describes snuff blown through a tube by another person as stronger than snuff inhaled by yourself [5].

Seeing and Hearing

Anthropology describes shamans using large amounts of snuff, with music, to reach trance and contact with spirits, but those are ritual claims [8]. One feature article mentions vivid, dreamlike states [7].

Feelings

Crying with hapé is mostly the eyes watering [2], and one feature article also mentions intense emotions and tears [7]. A practitioner describes the heart as feeling expanded [2]. Apprehension is common before and during, especially with strong Yawanawá snuff [5]. In ethnographic accounts, snuff blown into an angry person is said to calm them and restore harmony, which is an Indigenous claim and not a measured effect [8].

Insight and Presences

The interview study lists greater inner awareness, inner peace, tranquility and lightness among the spiritual effects, with frequencies I could not see [18], and the practitioner page says clarity follows [2]. Anthropology describes shamans contacting spirits and traveling to other realms under large amounts of snuff [8]. Huni Kuin and Yawanawá speakers describe hapé as a sacred practice and as medicine, and their words are under Cultural Respect and Sourcing. Everything people report about meaning, clearing and healing is traditional or personal belief. The studies I could read measure what is in the powder, or ask what long-term nasal snuff does to the nose.

When It Is Hard

The hard part is mostly physical: vomiting, dizziness, weakness, tremor, heat and a pounding head [18][5]. How hard it is depends on the blend, which can differ widely in nicotine (see How It Works in the Body). Falling during the application is a practical risk, and Choosing a Facilitator covers it. Practitioners name heart conditions and blood pressure as the main cautions [2], and Contraindications lists them. In ceremony the skill and consent of the person applying matter. Fear, panic and the signs of poisoning are under Toxicity and the Mind and Warning Signs.

What Shapes the Experience

Dose and blend matter most: blends differ widely in nicotine, and who applies it and how changes the force [3][5]. Context shapes the meaning. In Indigenous use it is daily and social, for energy, calm, colds and headaches, and for shamanic trance [8]. In the alternative shamanic community in southern Brazil it was used only in ceremony, and participants rejected recreational use [18]. Practitioner pages say to screen blood pressure and medications first [2].

The Days After

In the interview study no one reported a compulsion to use it, which is self-report from 20 volunteers who all used it only in ceremony [18]. After heavy sessions some people sleep and are fine the next day [5]. A practitioner describes calm and clarity that last beyond the session and advises spacing sessions out [2]. Nicotine dependence from frequent use is plausible; see Addiction and Misuse.

How It Is Taken

Hapé is taken through the nose. Everything below is traditional description, retailer text or my own reasoning, which I label.

Blown into the Nose

Self-applied with a kuripe. The kuripe is a V-shaped pipe you use on yourself, blowing through one end into your own nostril. Retailers and wellness pages describe it this way [6][2]. The main benefit is control: you decide the pace, you can stop, and no one else's breath is involved. The risks I can name are that people tend to pull the pipe back and blow too hard or too fast, which is my reasoning, not a source finding; that the burn can be sudden; and that a shared kuripe passes germs. Micro-Movement advises a personal kuripe and cleaned or single-use tips, uncited [20]. Azarius, a retailer, gives no cleaning advice at all [21].

Applied by another person with a tepi. The tepi is a longer pipe used by a second person who blows the snuff into your nose [6][2]. This is the traditional, relational way, and the person blowing sets the force and the amount. Risks I can name: you give up control over how much reaches you; the applicator's breath and the pipe touch your face, which carries a germ risk if the pipe is shared (an uncited concern on a wellness page [20]); and consent and touch need to be clear, since this is another person working at your face.

Forms You May Meet

Hapé is sold by the jar or sample as a loose powder, as blends named for a people or an ash, and as blends with extra plants [6][16]. Prices, origins and purity claims are the seller's. Some Acre sellers report that people now buy tobacco and ash separately and grind their own, which changes both the nicotine and the ash chemistry [4].

Other Routes

Oral tobacco medicine. Tobacco is taken in other Amazonian ways, for example as an oral liquid in a dieta, and the case study of that practice recorded vomiting, diarrhea and nausea in one woman [22]. That is a different dose form and route, and it should not be read as a hapé finding.

How Long It Lasts

Community pages give about 5 to 15 minutes for the strong part and about 15 to 30 minutes for the effects overall, and neither source shows where it got the figures [2][20]. The dissertation describes the intense part as short in many accounts and longer in heavy sessions [5]. Poison Help says symptoms of nicotine poisoning usually begin quickly [23]. The practical reading is that the sharp part is short and the strain on the heart and stomach does not always match how you feel.

About Hapé and Its Effects on the Body

How It Works in the Body

The active ingredient is nicotine. A CDC laboratory measured total nicotine in rapé products from about 6 to about 48 milligrams per gram of powder, and found Nicotiana rustica in the tobacco-containing blends by its minor alkaloids and infrared fingerprint [3]. That is a range of more than seven times between products, so two jars with the same name can behave very differently. Sellers and media say N. rustica is 5 to 20 times stronger than cigarette tobacco [2][1]; Healing Maps gives 5 to 10 times without a source [2].

How alkaline a blend is matters. Most products in the CDC study were mildly acidic, but hand-made blends with alkaline ash measured about pH 9.75 to 10.2 and carried the most un-ionized (free) nicotine, up to 18.5 milligrams per gram [3]. Free nicotine crosses the lining of the nose faster, which is why the same weight of powder can hit harder or softer depending on the ash. The authors say rapé contains addictive and harmful chemicals with possible public health implications [3]. I could not see whether the study sampled traditional village-made hapé; the abstract speaks of hand-made rapés and commercial products without that detail.

The same study measured tobacco-specific nitrosamines and polycyclic aromatic hydrocarbons, which the CDC elsewhere names as cancer-causing chemicals in smokeless tobacco [3][24]. It also found milligram quantities of non-tobacco ingredients including camphor, coumarin and eugenol, and says they need further study [3].

Some blends may carry more than tobacco. Two seller pages and a church that sells blends say a few blends include DMT-bearing or other psychoactive plants, such as yopo, jurema and angico, and the church warns about ayahuasca-type medicine interactions with them [1][17].

Nose, Sinuses and Lungs

The burning and the mucus are expected; the question is what repeated use does. The best study I found is old and from India, in people who used ordinary nasal snuff for years. Of 29 long-term users, all had at least one nose symptom, and 62.5 percent had both blockage and discharge; the lining was swollen, and tissue from 16 people showed the surface cells changed to a tougher type, new small blood vessels, immune-cell crowding and scarring. The authors called it a form of chronic rhinitis and said snuff is not a safe alternative to smoking [25]. An earlier study reports that snuff slows the nose's mucus-clearing system [26]. Neither study tested hapé, the blends differ, and the users took snuff daily over years, so I cannot say how much of this applies to occasional ceremonial use.

A Brazilian news article names irritation and sensitization of the nose as a risk, mainly in people with rhinitis or recurrent sinusitis [27]. A writer who works with Indigenous communities in Acre says he himself reacts badly to anything inhaled through the nose because of chronic sinusitis, and warns of discomfort from mucus [12]. Several wellness pages claim hapé clears the sinuses, and the artisan quoted in the Acre press describes medicinal use as traditional knowledge, not as tested medicine [4].

Heart, Blood Pressure and Body Temperature

For nicotine in general, Poison Help says heart rate and blood pressure first rise, then fall, and that nicotine poisoning can bring sweating, weakness and, at large exposures, trouble breathing [23]. The CDC says smokeless tobacco may raise the risk of death from heart disease and stroke [24]. Everything about the heart here is borrowed from nicotine in general. A retailer and two wellness sites tell people with high blood pressure, irregular rhythm, recent heart attack or stroke to avoid it, without data [20][21][2]. A Brazilian indigenist writer cautions that strong or mixed preparations can be unsafe for people with low blood pressure, which fits the idea that nicotine can bring pressure down as well as up [12][23].

Toxicity and the Mind

Overdose and deaths. I found no published case report of a death or severe poisoning from hapé, and no count of emergency visits. That absence is a gap in the data, not a safety result: ceremonies are private, and nicotine poisoning is rarely labeled with the product that caused it. What is known is general, from nicotine poisoning, and its signs are described under Warning Signs [23]. Free nicotine in the alkaline hand-made blends is the part that worries me most, and the wide range of nicotine between products, shown under How It Works in the Body, is the reason [3].

Purge and vomiting. In ceremony, nausea and vomiting after hapé are often described as cleansing, and a retreat study of an oral tobacco preparation treated vomiting as part of the practice [7][17][22]. Poison Help lists vomiting as a first sign of nicotine poisoning [23]. Both statements are true, and I found no source that tells apart a cleansing purge from too

much nicotine. What to do about vomiting that keeps coming back is under Warning Signs.

Seizures. Poison Help includes seizures among the signs of nicotine poisoning [23]. Azarius lists seizures as a rare effect of intranasal nicotine overdose, and Micro-Movement tells people with epilepsy to avoid hapé without a source [21][20].

Fear, panic and the mind. A Brazilian news article warns that people with anxiety, panic or conditions that intense stimulation may worsen should be careful [27].

Lingering effects and spiritual illness. Healers among the Katukina, Yawanawá and Huni Kuin are said to describe an illness called nisũ, tied to improper or excessive use, and the Yawanawá and Huni Kuin to believe frequent long-term use can cause it. I found this only on an unsigned website that cites Indigenous practitioners without links, so I cannot verify it and I mention it as a lead, not a finding [19]. In the Huni Kuin region, the indigenist writer Jairo Lima describes balance and moderation as the guard against harming a person's spiritual balance, and says misuse can harm it [11].

Cancer and long-term risks. The CDC links smokeless tobacco to cancers of the mouth, esophagus and pancreas, to heart disease, and to gum disease, and names tobacco-specific nitrosamines as the most harmful carcinogens [24]. No cancer study has been done on hapé itself. The chemical families the CDC laboratory found in rapé are under How It Works in the Body. Poison Help says oral cancers from snuff and chewing tobacco can occur with less than 10 years of use [23].

Legal Status

Last checked 10/28/2026.

Federal

Hapé is not on a controlled-substances schedule. A legal explainer, last reviewed 9/27/2026, says it is regulated as commercial smokeless tobacco under the Federal Food, Drug, and Cosmetic Act, that adult personal possession is not a federal crime, and that online sales and shipping have limits [28]. FDA's 2016 deeming rule brought all products that meet the legal definition of a tobacco product, and their components and parts, under that Act as of 8/8/2016 [29]. Congress's definition of smokeless tobacco, used in the PACT Act, covers finely cut, ground or powdered tobacco and other products containing tobacco meant for the mouth or nose, which is exactly what a tobacco hapé is [30]. The federal minimum age to buy any tobacco product is 21, in force since 12/20/2019 [31]. The Postal Service says smokeless tobacco is generally nonmailable in the domestic mail except in limited cases, which is why many sellers use private carriers [32].

What I could not settle: whether FDA has ever authorized any hapé product for sale, since new tobacco products need FDA review before marketing; I found no authorization for rapé, and About the Sources says what I could not search. I did not find enforcement

actions against rapé sellers. For a blend with no tobacco, I found no source on whether it counts as a tobacco product, so its federal status is unclear to me. For a blend made with DMT-bearing plants, DMT is a Schedule I controlled substance [33]; the entry I read lists the compound and not plants, and I found no source on how it treats a snuff, so I would treat such a blend as potentially controlled.

Colorado

Colorado treats tobacco hapé as a tobacco product. State law bans selling or giving tobacco or nicotine products to anyone under 21, requires the seller to check government photo ID, and sets a $200 civil fine [34]. Under rules effective 1/1/2026, the Department of Revenue licenses tobacco retailers, and its definition covers any product containing or derived from tobacco or nicotine that is meant to be ingested or inhaled; the rules do not name snuff [35]. I did not find a Colorado law or court decision about hapé in particular.

Colorado's Natural Medicine Health Act names dimethyltryptamine, ibogaine, mescaline (excluding peyote), psilocybin and psilocin, not tobacco [36]. If a hapé blend contained DMT, it might fall under the personal-use protections, and I found no source that addresses that, so it is unsettled. Federal law is unchanged by the state act [36]. The 2026 developments I could read (the advisory board work and HB 26-1325) do not mention tobacco or rapé [36].

Contraindications

Contraindications are the medicines and conditions that make a substance more dangerous for you, so that you and a doctor can decide whether it is wise at all. Evidence key: CT means controlled trial data, CASE means case reports, REPORTS means self-reports, seller or community statements, and THEORY means expected from the pharmacology of nicotine with no hapé report found. I found no CT or CASE data on hapé and any medicine, so every line below is REPORTS or THEORY. Never stop a prescribed medicine on your own; talk to the prescriber first.

Medications

MAO inhibitors (phenelzine, tranylcypromine, moclobemide, selegiline; and harmine, harmaline, Syrian rue, Banisteriopsis caapi). Retailers and a church warn about them, one retailer rating the interaction severe in one place and moderate in another [21][17]. A 2022 review found that tobacco smoke carries small amounts of weak, reversible MAO-inhibiting beta-carbolines, that the amount in Nicotiana rustica is unknown, and that effects with antidepressants have not been studied [37]. If a blend also contains DMT-bearing plants, the risk of serotonin toxicity with an MAO inhibitor rises [17]. REPORTS and THEORY.

SSRIs, SNRIs and other antidepressants. A retailer rates SSRIs a moderate interaction and admits the data are limited [21]. The church above names serotonergic medicines as a concern only for blends with DMT-bearing plants [17]. REPORTS and THEORY.

Blood pressure and heart medicines (beta blockers, calcium channel blockers, ACE inhibitors, diuretics, digoxin, antiarrhythmics). A retailer rates blood pressure medicine a moderate interaction [21]. Nicotine raises heart rate and blood pressure and then can lower them [23], so it can work against a prescribed regimen or add to the effect of low-pressure drugs; this is my reasoning. THEORY and REPORTS.

Stimulants (amphetamine, methylphenidate, cocaine, caffeine in large amounts). A retailer rates stimulants a high-risk interaction [21]. Both raise heart rate and blood pressure [23]. REPORTS and THEORY.

Seizure-threshold lowering drugs (bupropion, tramadol, lithium). Seizures are among the signs of nicotine poisoning [23], and these drugs lower the seizure threshold; combining them is an inference from that. THEORY.

Nicotine replacement and quit-smoking medicines (patch, gum, lozenge, varenicline, bupropion). Hapé adds nicotine on top of a patch or gum, so the total can climb; varenicline blocks nicotine receptors and may change the effect. Both are my inferences, with no hapé source. THEORY.

Asthma medicines. One commercial page says nicotine has documented interactions with some asthma medicines and does not say which [20]. REPORTS only, and unverified.

Sedatives, benzodiazepines and sleep medicines. A retailer admits interaction data are limited [21]. THEORY.

Conditions

Heart disease, high blood pressure, irregular heartbeat, recent heart attack or stroke. The CDC links smokeless tobacco to heart disease and stroke death [24]; wellness and retail pages advise avoiding hapé [20][21][2]. REPORTS and THEORY.

Low blood pressure and fainting. A Brazilian writer warns that strong or mixed blends can be unsafe for people with low blood pressure [12]. Nicotine poisoning can bring blood pressure down after it goes up [23].

Chronic rhinitis, sinusitis, nasal polyps, nasal surgery. Long-term nasal snuff produced swollen, scarred nasal lining in a clinical series [25]; a Brazilian article warns people with rhinitis or recurrent sinusitis [27]; a Brazilian writer with chronic sinusitis reacts badly [12].

Asthma, COPD and other lung disease. Powder in the nose can reach the airway and cause coughing; this is an inference, and the only related finding I read is slowed nasal clearance [26].

Pregnancy. The CDC says smokeless tobacco in pregnancy may raise the risk of early delivery and of a baby dying before birth, and can affect the baby's brain development [24]. Several pages advise avoiding hapé in pregnancy [28][17][20].

Breastfeeding. A church and a commercial page advise avoiding hapé while breastfeeding, without data [17][20]. Nicotine passes into breast milk generally; that is my knowledge and I did not open a source for it.

Seizure disorders. See Seizures under Toxicity and the Mind [23][20].

Anxiety, panic and trauma that intense body sensations can set off. A Brazilian article advises caution [27]. No hapé data.

Recent nicotine quitting or recovery from dependence. The church lists recent nicotine cessation as a caution [17]. Hapé is a strong nicotine dose; this is where a physician and a quit line matter.

Under 21, and children and pets in the home. Federal and Colorado law set 21 [31] [34]. Poison Help reports that children age 1 or younger make up nearly three out of four nicotine exposures in its 2023 data [23]. Store powder out of reach.

Other Substances and Combinations

Combinations of medicines get their own document with a large warning at the top; this section is the short version for hapé. Almost all evidence here is from sellers and community voices. Stimulants are under Medications.

Alcohol and cachaça. Huni Kuin leaders described rapé mixed with cachaça as seriously harmful and a distortion of the tradition [10]. A retailer rates alcohol a low-to-moderate interaction in a table [21]. Voice and REPORTS.

Other drugs. The same leaders said rapé was mixed with illicit drugs [10]. The prosecutor said there were reports of illicit drugs added in place of traditional herbs; a Brazilian indigenist writer calls the rumor of cocaine in rapé an urban legend [10][11]. The sources disagree, and I could not resolve it.

Ayahuasca and DMT plants. A retailer lists ayahuasca and MAO inhibitors among its cautions [21]; a church warns about DMT- and yopo-containing blends with ayahuasca-type medicine and blood pressure [17]. Ayahuasca has its own sheet.

Kambo and other added preparations. An Acre writer says some makers add new ingredients such as kambo, sees little danger when use is balanced, and cautions about strong or mixed preparations [11][12].

Not covered by any source I found. Antipsychotics, anticoagulants, diabetes and thyroid drugs; psychosis, bipolar disorder, liver or kidney disease and eating disorders; and combining hapé with cannabis, MDMA, ketamine or kratom. Ask a physician.

Addiction and Misuse

Physical dependence is real here, because the main ingredient is nicotine. The CDC laboratory says rapé contains addictive chemicals [3], the CDC says nicotine in smokeless

tobacco is addictive [24], a church that sells blends says plainly that hapé is a strong dose of nicotine that can cause dependence [17], and a retailer says dependence is possible even with ceremonial, occasional use [20]. This is where the idea that sacred use protects against addiction runs into chemistry. A Brazilian article names compulsive nicotine-driven use, especially when it becomes a daily emotional crutch rather than a ritual [27], and the indigenist writer warns that tobacco can addict if overused or misused [11][12].

People who quit other nicotine products commonly report craving, irritability and trouble sleeping or concentrating; that is general knowledge, and I did not open a source for the list. A tobacco-free blend contains no nicotine, and the Yawanawá artisan says it does not cause chemical dependence [4]; I take that as reasonable, and habit or emotional reliance can yet form around any ritual.

Tolerance and frequency: one wellness page suggests limits on how often to use, attributed to a facilitator and unsourced [2]. The Acre voices place the guard in the ritual itself, with abstention, intention and moderation [4][11].

Addiction means loss of control, craving, and use that continues despite harm. Misuse means use that raises risk or does harm: taking it alone, mixing it with alcohol or other drugs, using it for relief from feelings every day, handing it to people who have not agreed, or using it in a way the people who made it would not recognize. A person can misuse hapé without being addicted. That is my own lens.

Testing and Purity

What Is Really in the Powder

The one laboratory study measured nicotine, nitrosamines, aromatic hydrocarbons and non-tobacco ingredients across products, as set out under How It Works in the Body [3]. That tells us nothing about your jar. The CDC names arsenic and cadmium and polonium-210 among carcinogens in smokeless tobacco generally [24]; whether hapé carries them, and whether wood ash adds more, is not measured in anything I read. A seller's unsourced claim that a blend is clean is not a result.

Adulteration and fakes: Reports of illicit drugs added to rapé, and the dispute over them, are under Other Substances and Combinations. A retailer says moisture can grow mold that is hard to see in a dark powder, that musty or sour smells mean discard it, and that clumping makes a dose unpredictable [21]. A growing share of customers now make their own blends from bought tobacco and ash [4], so variation is built in. The sellers' own claims of authenticity cannot be checked from the page.

Test Kits and Labs

I found no test kit sold for nicotine strength, nitrosamines or metals in hapé, and I did not find a lab that lists hapé as a service. Colorful reagent kits made for drugs like MDMA or tryptamines will not tell you how much nicotine is in a powder. A lab that does plant and

powder analysis might measure nicotine or metals if you ask, and you would need to check this with the lab first.

Preparation and Integration

No dosing or timing numbers are given here. The strength of a blend varies enormously between products, so any number I gave would be false comfort.

Before

Read the Contraindications and talk with a physician if you have any heart, blood pressure, nose or sinus problem, if you take any of the medicines above, if you might be pregnant, or if you are working to stay off nicotine. Ask what is in it and how strong the maker says it is.

Eat lightly, drink water, and plan for nausea with a bucket and tissues. Tell the person who will be with you about any medicine you take. Arrange a ride home. Make sure someone you trust knows where you are.

Choosing a Facilitator

Choose a person who works within the tradition over a stranger who found it on a shelf. The Berlowitz paper makes the point for Peruvian tobacco medicine that a trained healer who knows how to dose and respond to side effects is part of the safety [38]. Learn whose medicine you are asking for: which people, which village, who benefits [11][12]. The questions to ask are under Cultural Respect and Sourcing.

Sit down; Healing Maps notes that standing raises the risk of falls, without a source [2]. Do not take it alone if you can help it, since vomiting, fainting or panic leave you with nobody to help. Do not keep going to get a sign of strength; heavy burning, a pounding heart and cold sweat are signs to stop. If another person applies it, you can ask them to go slowly and stop when you say. Do not mix it with alcohol or other substances; see Other Substances and Combinations.

After

Rest, drink water and eat when you can. Keep a note of how you feel in the following days: sleep, heart rate, nose and sinus symptoms, mood, and whether you are reaching for more. If you are in a ceremony tradition, ask the people who gave it to you what they ask of someone afterward. If you find yourself using it every day to cope, treat that as a sign to talk with a clinician or a quit line, because nicotine is the part that can addict you [3][27].

If You Need Help Now

In a medical emergency, call 911. If you are in emotional crisis, you can call or text 988. Fireside Project has trained volunteers who talk with you by phone or text during and after a psychedelic experience, and DanceSafe sells kits for testing what you hold.

Warning Signs

Call 911 for a seizure, trouble breathing, chest pain, fainting or collapse, confusion or being hard to wake, or a pounding, irregular or very slow heartbeat. These are signs of nicotine poisoning [23]. If the person is breathing, place them on their side and keep the airway clear.

Poison Help describes the early picture as nausea, vomiting, belly pain, diarrhea, dizziness, sweating and drooling, then weakness, confusion, agitation, sleepiness and seizures, with heart rate and blood pressure rising and then falling [23]. Hapé causes some of these in ceremony and tradition calls it cleansing; I cannot tell you where cleansing ends and poisoning begins. If vomiting keeps coming back or comes with cold sweat, faintness or a racing or irregular heart, call Poison Help at 1-800-222-1222, free and confidential, any hour [23]. If symptoms are severe, call 911 first.

While you wait, stay with the person, keep them sitting or lying on their side, give nothing by mouth, and gather the jar and any other substance used to show responders. If the powder got into the eyes, rinse them with water. These are standard first aid steps, and I did not find a hapé-specific protocol. For suicidal thoughts, call or text 988 [39]. Fireside Project at 62-FIRESIDE (623-473-7433) is open daily from 11 a.m. to 11 p.m. Pacific time, which is noon to midnight Mountain time. Its volunteers are trained peers rather than clinicians, and it is not a medical service or a suicide line [40]. It can help with panic or with making sense of an experience.

Where to Find More Information and Support

Amounts, timing and combinations are best checked against these sources and with a medical provider, because they are updated more often than this sheet. Erowid, TripSit and PsychonautWiki include user reports and community writing, so read them as experience as well as research.

Erowid: https://erowid.org

DanceSafe: https://dancesafe.org

TripSit: https://tripsit.me

PsychonautWiki: https://psychonautwiki.org

Zendo Project: https://zendoproject.org

Fireside Project: https://firesideproject.org

MAPS: https://maps.org

Poison Help: 1-800-222-1222

For Hapé Questions

CDC, health effects of smokeless tobacco: https://www.cdc.gov/tobacco/other-tobacco-products/smokeless-tobacco-health-effects.html

Free quit support for nicotine, any state: 1-800-QUIT-NOW (1-800-784-8669)

Chacruna Institute, on plant medicines and psychedelic justice: https://chacruna.net

A Catraia, University of Acre (in Portuguese), on rapé in Rio Branco, with Huni Kuin and Yawanawá voices: https://acatraia.ufac.br/?p=6966

Colorado Department of Revenue, tobacco rules: https://sbg.colorado.gov/sites/sbg/files/documents/2026_Colorado_Tobacco_Rules_eff.01.2026.pdf

Mailing Lists

Erowid Monthly, a free email list: https://www.erowid.org/about/about_announcements.shtml

Erowid Extracts, the members' newsletter: https://erowid.org/membership/

MAPS email newsletter: sign up at https://maps.org

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