

A FOCUS ON DRUG ABUSE – A TUMOUR MENACE

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ABSTRACT

Drug abuse is a major concerning problem of humanity. A drug employed for a medical / non-medical purpose may be misused or abused, and it seriously damage an individual and the society. This has lead to the emergence of “ Drug Abuse”. Our study is concerned with various aspects of drug abuse. A select number of drug addicts were interviewed in NIMHANS (National Institute of Mental Health and Neuro Sciences), – an internationally recognized medical institution, at Bangalore, in realistic picture and the data was collected and evaluated for their performance in de-addiction treatment. Upon the analysis of the data, it has been found that the factors like peer group influence, emotional stress, extreme poverty, broken home environment, social drink syndrome, severe depression due to failure in examination, love affair, prolonged unemployment, set backs in career etc., influenced drug abuse and drugs like alcohol, cannabis, charas were found to be most widely involved. Majority of addicts were found to be in the age group of 15 to 35 years as compared to people of 36 years and above. The number of drug addicts was found to be high with higher secondary and pre-university educational level, compared with graduate and illiterate level.

Key words : Drug abuse, Tumour menace

INTRODUCTION

Drug abuse and drug addiction have emerged as the biggest scourge haunting the modern society, crossing all National boundaries and becoming an international menace. In several countries of West, the drug addiction has already assumed calamitous proportions, threatening not only the economy but even the political system and National Security also. WHO has defined ‘A DRUG’ as a substances or product that is used or is intended to be used to modify or explore physiological systems or pathological states for the benefit of the recipient¹.

‘DRUG ABUSE²’ refers to the excessive and persistent use, usually by self administration of any drug without due regard for accepted medical practice. This includes the whole gamut or over the counter (OTC) and prescription drugs, even those that are not psychoactive. However, majority of drugs of abuse are agents that act on CNS to produce profound effects on mood, feeling and behavior. The abuse of some agents lead to drug dependence, a condition in which

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there is a compelling desire to continue taking the drug either to experience its effect or to avoid the discomfort of its absence.

The term 'DRUG ADDICTION' indicates compulsive drug abuse, often associated with psychological and physical dependence, in contrast to the term 'Drug abuse' which represents only a value judgment of society. Some important classes of chemical agents most commonly subject to abuse are opiates, CNS stimulants, cannabis indica, LSD and other hallucinogenic drugs, alcohol, sedative-hypnotic, tranquilizers and tobacco. These drugs produce euphoria. They also produce symptoms of acute brain syndrome or chronic brain syndrome. Deterioration of moral and ethical sense, development of antisocial, criminal activity and non-specific personality changes are additional features. Drug abuse and drug addiction, which for many persons, have strong moral overtones, could not be treated successfully with "deviant drug use". With this background, the following elicits the aspects of drug abuse³⁻⁷

1. Genetic Aspects
2. Legal Aspects
3. Narcotic drugs and Psychotropic substances Act. (NDPS Act)
4. Bails.
5. Amendment Act.
6. Prevention of Illicit Traffic in Narcotic Drugs and Psychotropic Substances Act, 1988. (NPIT-NDPS ACT1988)
7. Jails.
8. Treatment Center.
9. Miscellaneous aspects

AIM AND PLAN OF WORK

Drug abuse is a major concerning problem of humanity that has, unfortunately, not been fully recognized by us till date. The modern technological society has created unique stresses and increased leisure and affluence to which mankind is not adjusted. This has led to emergence of the problem of 'drug abuse'. So we try to present a comprehensive picture of the situation in real manner and the various aspects of drug abuse and drug addicts have been interviewed and data was collected and drawn to the valuable data of treatment in NIMHANS (National Institute of Mental Health and Neuro Sciences), which is an internationally recognized medical institution, at Bangalore.

TREATMENT AT NIMHANS

DE-ADDICTION SECTION IN NIMHANS is concentrating on treatment of patients afflicted with drug addiction. There are more than fifty beds available in this section to admit

the patients. The patients were divided into small and manageable groups of 10 to 15 each, and each group is managed by a doctor and evaluated by using following procedure.

- i. To obtain detailed social history from patients, family members and friends.
- ii. Circumstances which lead the patient to this drug addiction.
- iii. The motivation of the patient to give up the drug dependence is ascertained. The patient is then admitted for supervision, treatment and counselling.

A. Medical Treatments

Aims are,

- i. Withdrawal of drug either slowly or abruptly and the clinical management of withdrawal symptoms.
- ii. The withdrawal symptoms are treated by the administration of adequate doses of tranquillizers and neuroleptics.

B. Psychotherapy

After the initial treatment, the patient is helped to develop a positive motivation by psychotherapy and psychoanalysis. This goes a way in helping the patient to realize his abhorrent habit, and to correct his mental disequilibria and prepare himself to re-enter society with confidence, self assurance, determination and reinforced motivation to abstain from drugs.

C. Social Treatment

Aims are,

- i. To prepare the patient well to adjust himself to his social environment.
- ii. The friends and family members of the patient are contacted and are prepared mentally to change their attitude and to accept the person treated without any strains of feelings.

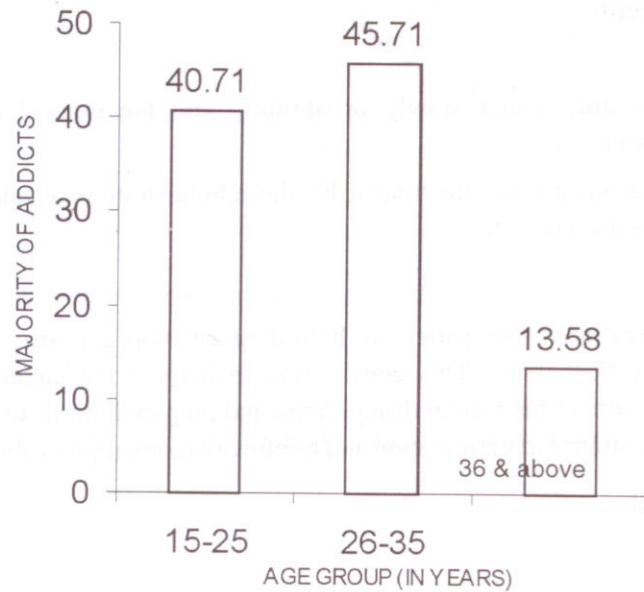
RESULTS

A selected number of patients/drug addicts were interviewed at NIMHANS. They were evaluated for their performance in deaddiction treatment and the findings are presented below:

1. The factors / circumstances that influenced the respondents to drugs abuse were found to be peer group influence, broken home environment, emotional stress, extreme poverty, social drink syndrome, severe depression due to failure in examination, love affair, prolonged unemployment, set backs in career etc.,
2. Drugs like alcohol, cannabis, charas were found to be most widely used drugs of abuse.
3. Majority of addicts were found to be in the age group of 15 to 35 years as compared to people of 36 years and above as shown in Table 1 and represented graphically in Figure I.

Table 1

| S.No. | Majority of Addicts (%) | Age Group (Years) |
|-------|-------------------------|-------------------|
| 1. | 40.71 | 15 – 25 |
| 2. | 45.71 | 26 – 35 |
| 3. | 13.58 | 36 & above |

**Figure 1. Majority of addicts (%) in age group**

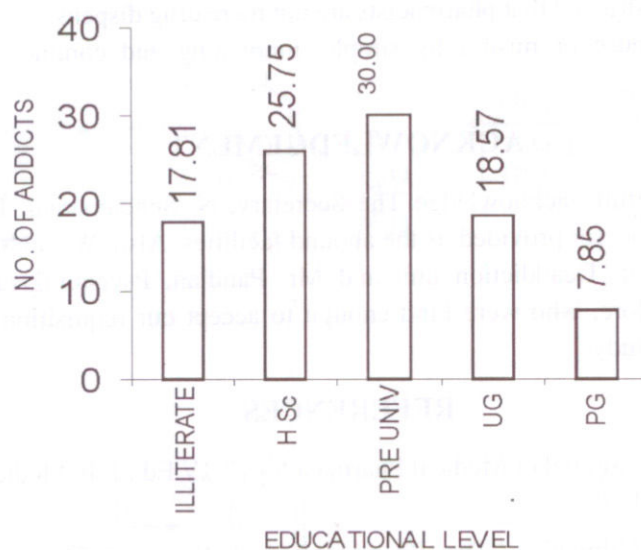
4. Table 2 represents the relation between various standard of educational level and percentage of drug addicts. The illiterate people constitute 17.81 % of total addict population, followed by 25.75 % addicts with higher secondary education. A large number of them i.e., 30 % had pre – university education, 18.57 % of the addicts have had under graduate education and 7.85% are Post Graduates as represented graphically in Figure 2.

DISCUSSION

Government has taken many steps to overcome the menacing situation. According to them, a drug should be dispensed only under a prescription order from a physician. However, the problem arises at social level and enforcement level. The Acts like Narcotics Act, Drugs and Cosmetic Act, Poisonous drug Act be made more stringent making access to drugs of abuse more difficult.

Table 2

| S.No. | Educational Level | No. of Addicts (%) |
|-------|------------------------|--------------------|
| 1. | Illiterate | 17.81 |
| 2. | Higher Secondary Level | 25.75 |
| 3. | Pre-University | 30.00 |
| 4. | Under Graduate | 18.57 |
| 5. | Post Graduate | 7.85 |

**Figure 2. Majority of addicts (%) in educational level****SUGGESTION**

The following views could decrease the menace of drug abuse

1. Drugs like barbiturates, opioids, diazepam's, inhalants or amphetamines should not be dispensed without a proper prescription.
2. Patients counselling about hazards of misuse of such substances.
3. Displaying patient awareness charts, poster or pamphlets in hospitals and public health centers.
4. Refresher courses for the pharmacy professionals are undertaken to train them regarding the patient counselling technique, which may widely contribute to discouragement of drug abuse.

CONCLUSION

The war against drugs to succeed needs a planned and targeted multidimensional strategy with emphasis on enforcement and demand reductions. The neighbouring countries have solved this problem by way of providing death penalty for these offences. It may be concluded that the Government may view to amend the Narcotic and Psychotropic substances Act (NDPS) to include death penalty in regard to offences for such drugs. Furthermore, where the death penalty is not called for, provision for a minimum of 10 years rigorous imprisonment extendable to life sentence to the accused could make the law a highly deterrent one. Ex-addicts should be mobilized and trained in deaddiction and rehabilitation programmes.

Hence, it may be stressed that pharmacists are not mere drug dispensers. They play a major role in preventing abuse or misuse by simple, innovating and common sense pharmacy practices.

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