

ORIGINAL ARTICLE

Socio-Demographic Profile of Psychoactive Substance Users Attending A Tertiary Care Centre

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ABSTRACT

Aim: The goal of this analysis is to determine the proportion of psychoactive substance disorder and socio-demographic profile of Psychoactive Substance Users.

Study Design: A descriptive study.

Place and Duration: In the Psychiatry and Behavioral Sciences department PGMI/AMC/LGH Lahore, Pakistan and Mardan Medical Complex for six months duration from October 2021 to March 2022.

Methods: A total of 120 subjects with psychoactive substance use disorder (conferring to the ICD-10 criteria) were recruited after attaining their written informed consent. In the course of the study, all patients with substance use disorders were interviewed through partially structured addiction questionnaire. Data was analyzed with SPSS version 21.0 using inferential and descriptive statistics.

Results: Out of the 120 subjects, 100 were men and 20 were women. The adults and adolescents were the main groups indulging in the consumption of psychoactive substances. Most of the subjects, 45%, started substance abuse at 16-20 years of age. Of the remaining 18.3%, started substance abuse at 26 years old and older, 24.2% started at the age of 21-25 years, and 12.5% started at the age of 13-15 years. It was found that 50% were in the recovery process. The relapse rate was 33.3%, 12.5% were not in contact, 2.5% died, and 1.7% were in prison. Opioid was the psychoactive substance preferred by 66.7% of the young population. The most common opioid was brown sugar; 13.3% prefer cannabis, 2.5% prefer tablets, 4.2% prefer injectable use and 0.83% prefer volatile usage of substances.

Conclusion: The main consumers of psychoactive substances were the adults and adolescents and majority start using it at a younger age. Psychoactive substance abuse is a serious problem effecting young people, which is a sensitive group. So, special consideration should be paid to psychoeducation about psychoactive substances prior to adolescent.

Keywords: Psychoactive substance, Sociodemographic profile.

INTRODUCTION

The consumption of psychoactive substances has been a controversial issue since the commencement of human history¹⁻². Previously, few psychoactive constituents were used for religious and recreational purposes. Alcohol was presented on various occasions and is still served. In Hindu culture even today, cannabis (bhang) is sanctioned during Holi and Shivaratri³⁻⁴. In some states, marijuana is legal for use. But in Pakistan, all the illegal psychoactive substances are prohibited⁵. With the passage of time, psychoactive constituents have done much complications than betterment. UNODC published a literature showing that about 30 million people worldwide suffered from substance abuse in 2017⁶⁻⁷.

The consumption of psychoactive substances is a global problem, known from the beginning of mankind, predisposed by economic, social, psychosocial and political factors⁸. The substance abuse is not accepted socially but also that it is a disorder in itself and is becoming a major burden on public health⁹⁻¹⁰. The goal of this analysis is to determine the prevalence of psychoactive substance disorder and socio-demographic profile of Psychoactive Substance Users.

METHODOLOGY

A descriptive study was held in the Psychiatry and Behavioral Sciences department PGMI/AMC/LGH Lahore, Pakistan and Mardan Medical Complex, Mardan for six months duration from October 2021 to March 2022. A total of 120 subjects with psychoactive substance use disorder (conferring to the ICD-10 criteria) were recruited after attaining their written informed consent. In the course of the study, all subjects with substance use disorders were interviewed by the researcher with partially structured questionnaire. Data was analyzed with SPSS version 21.0 using inferential and descriptive statistics.

RESULTS

Of the 120 subjects, 100 were men and 20 were women. The adults and adolescents were the main groups indulging in the consumption of psychoactive substances. Two patients ranged from 13 to 15 years of age. Out of 120 subjects, 56.7% were married and 37.5% were single and 2.5% and 3.3%, were divorced and separated, respectively. 50% of the subjects had secondary education, 33.3% had primary education, 2.5% were uneducated and 14.2% had higher education.

Table-1: Socio-demographic features of the patients

Characteristics		Frequency (percentage) n (%)
Gender Distribution	Female	20 (16.7%)
	Male	100 (83.3%)
Age in years	13-15	2 (1.7%)
	16-24	60 (50%)
	25-34	35 (29.2)
	35 above	23 (19.1%)
Marital Status	Unmarried	45 (37.5%)
	Married	68 (56.7%)
	Separated	4 (3.3%)
	Divorced	3 (2.5%)
Education	Primary	40 (33.3%)
	Secondary	60(50%)
	Higher	17 (14.2%)
	Uneducated	3 (2.5 %)
Age at the initiation of Substance	13-15	15 (12.5%)
	16-20	54 (45%)
	21-25	29 (24.2%)
	26 and above	22 (18.3%)
Status after treatment	Relapse	40 (33.3%)
	Recovery	60 (50%)
	Not in contact	15 (12.5%)
	Death	3 (2.5%)
	Jail	2(1.7%)

Preferred Substance	Opioid	80 (66.7%)
	Alcohol	15 (12.5%)
	Injectable	5 (4.2%)
	Cannabis	16 (13.3%)
	Volatile	1 (0.83%)
	Tablets	3 (2.5%)

Most of the subjects, 45%, started substance abuse at 16-20 years of age. Of the remaining 18.3%, started substance abuse at 26 years old and older, 24.2% started at the age of 21-25 years, and 12.5% started at the age of 13-15 years. It found that 50% were in the recovery process. The relapse rate was 33.3%, 12.5% were not in contact, 2.5% died, and 1.7% were in prison. Opioid was the psychoactive substance preferred by 66.7% of the young population. The most common opioid is brown sugar; 13.3% prefer cannabis, 2.5% prefer tablets, 4.2% prefer injectable use and 0.83% prefer volatile usage of substances.

Table-2: shows the relation of Socio-demographic features of the patients with the substance abuse

Characteristics	Frequency(n)	Percentage (%)
Married	40	58.8%
Males	55	55%
Opioid dependent	35	43.8%
25-34 Years of patients	15	42.9%
Higher secondary school qualification	10	58.9%

Table-II shows that the substance abuse was common in married patients 40 (58.8%), Males 55 (55%), Opioid dependents 35 (43.8%), 25-34 years of age patients 15 (42.9%) and among higher secondary school participants were 10(58.8%).

DISCUSSION

The majority of the subjects were males and young adults and above. Age of onset was adolescence¹¹. The opioid was the favorite psychoactive substance, trailed by a cannabis¹². Although most users experienced behavioral problems because of substance abuse, the outcomes cannot eliminate the accompanying psychiatric illness. The affordability and easy availability of drugs causes attraction for young people¹³. The entertainment and curiosity were the motive behind the use in this young population group. In comparison to other studies, the proportion of males in this study were higher than the females in terms of the sex that the psychoactive substances¹³. Mishra A et al study also found that the similar proportion of males to females' ratio. This shows that ratio of men having drug use disorders and alcohol were almost twice than women; This conclusion is constant with various researches¹⁴. Kathleen RM et al study regarding the substance usage disorders also revealed that ratio of drug use and alcohol in men were about twice than in women. The substance abuse has strong association with mental disorders. Psychiatric patients have a high rate of substance abuse, and vice-versa¹⁵⁻¹⁶. Marriage is recognized as having the protecting role in the prevention of mental illness. Marital status is the important sociodemographic risk factors for abuse of drugs. A Nigerian study of psychiatric clinic found that the use of psychoactive substances is common among people who are married¹⁷⁻¹⁸. One Nepal study held in the psychiatric hospital also exhibited reliable results. According to Subeliani D et; unmarried people are at high risk of mental illness and substance abuse in comparison to married people¹⁹. About 50% of people using psychoactive substances had secondary education qualification.

Khuwaja et al. stated that drug abuse at education level is more common at the age of 12 years. In school; students make new friends and learn to fulfill their desire for drugs²⁰. Pakistan is a state with multiple ethnicities. In Pakistan alcohol is still restricted except in few ethnicities. In spite of the limitations, the data show that the psychoactive substances pervasiveness is higher. This shows that the trend of drug abuse is slowly rising²¹. The age pervasiveness of substance use appears to be similar around the

world. Youth groups are the main target groups and more vulnerable. The curiosity, peer pressure, coping with negative emotions, sensation-seeking behavior and showing off are few motives and explanation why young group likes psychoactive substances²². In Nepal western region study, more than fifty percent of the young people started psychoactive substances drugs prior to the age of twenty-years²³. Merikangas et research about substance use disorders epidemiology also reveals that illicit drug use disorders and alcohol are most common in early adulthood and late adolescence²⁴.

When it comes to choosing psychoactive substances, almost half preferred alcohol, then opioids, then marijuana. A similar discovery was found in a youth study in Rwanda²⁵. This study exhibited that that cannabis and opioids were the psychoactive substances of choice in the younger people, while older people were susceptible to alcohol. Various researches have confirmed this conclusion.

CONCLUSION

According to the results of this study, it was determined that the mostly young people were vulnerable and addictive group. Pattern of drug abuse has transformed with the passage of time, from injectable drug use to oral opiates. The co-morbid mental illness, marital status, age, and education were some of the risk factors for drugs abuse. Abuse of psychoactive substances is a major health problem. The early detection, intervention programs and awareness regarding substance abuse can prevent the development of drug addiction. It is the local government responsibility to inspire people to attend anti-Narcotics campaigns in their local community to avoid relapse. Ministry of information and broadcasting should also initiate and run awareness campaigns on media and educational institutions, so our young generation can be protected from this evil.

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