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Research Article

SOCIODEMOGRAPHIC RISK FACTORS OF SUBSTANCE ABUSE DISORDER AMONG PATIENTS PRESENTING FOR REHABILITATION

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Abstract:

Background: Substance abuse disorder has seen a tremendous increase in prevalence around the world and unlike other disorders that have a known propensity to develop in the presence of certain genetic or environmental factors, it does not have any such well researched risk factors. Thus owing to the high morbidity and serious social problems in the form of crime, unemployment, family dysfunction and disproportionate use of medical care that result from this condition, more efforts need to be allocated to researching the disorder and its risk factors.

Objective: To identify the probable sociodemographic predictors of substance abuse disorder among patients presenting for rehabilitation.

Methodology: This retrospective cohort was conducted upon a sample of 380 patients (aged 18 years and above) suffering from substance abuse disorder presenting to a drug rehabilitation center. No gender bias was observed, and the sample was collected using non-probability, consecutive sampling. Data was collected using a prestructured, interview-based questionnaire comprising of inquiring regarding basic biodata and sociodemographic details along with history and complete particulars of their substance abuse disorder. The data obtained was analyzed using SPSS v.21 & Microsoft Excel 360.

Results: Among the 380-patient enrolled into the study, 66.32% were males while the remaining 33.68% were females. The mean age of the sample stood at 33 (SD ± 9.1). A large number of respondents (35%) initiated drug abuse in the teenage years. Majority of the subjects were educated up to at least secondary level (47.11%), whereas 7.9% of the patients were students. Heroin was the most abused substance (47.9%) followed by cannabis (27.9%). The mean duration of substance abuse was between 1 and 5 years, whereas a marked fraction of subjects (9.2%) had more than 16 years of duration of abuse. Family disputes and peer pressure were the most common reasons for initiation of substance abuse.

Conclusion: After careful consideration, it can be contrary to popular belief, educated and employed males are more at risk of succumbing to substance abuse. Heroin is the commonest culprit and steps should be taken to control trafficking this drug into the country.

Key Words: Drug Abuse, Heroin, Cannabis, Socio-Demographic and Risk Factors.

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INTRODUCTION:

The problem of substance use is hazardous and people suffering with substance used disorder are increasing in the entire world. It is affecting people's lives by creating several health issues because it is interfering with their mental stability of the individuals. Substance used is a long-lasting and reverting brain disease that is characterized by use of substance and its desire without thinking about its harmful effects. Scarcity, illegality, high hazardous actions and many other labeled diseases are the examples of societal damages which are allied with Substance abuse. ^[1]

Pakistan is facing a massive rise in drug abuse. According to recent estimates, there are 6.7 million drug abusers, of which 4.25 million are drug dependents who need long-term treatments in residential setups. ^[2] Despite these shocking statistics, there is severe lack of preventive measures and drug indictment policies. Consequently, the number of drug dependents continues to increase at an alarming rate of 40,000 per year, making Pakistan one of the most drug-affected countries in the world. ^[3,4]

As per the report of United Nations Office on Drug and Crime (2013), that is jointly prepared with the Narcotics Control Division, Government of Pakistan, ^[5] there has been a significant increment in past-year in the utilization of both plant-based drugs and medical prescription drugs, such as heroin, cannabis, narcotics analgesics, tranquilizers and opium.

Approximately 6.7 million populations in Pakistan have been involved in various kinds of drugs. For instance, Cannabis is the most commonly used drug, with a prevalence of 3.6% of the population, after that poly-drug use is common. With reference to narcotics, an estimated 860,000 population are regular heroin users and 320,000 are opium users. There is slight variation in the preferences of substance across gender. Men used more drugs than women for most drug types. For instance, women are more likely to use

the tranquilizers, sedatives as well as amphetamines. Moreover, solvent and inhalant abuse is high among street children. Also, men are more likely avail the treatment, while women less inclined to have gotten treatment. ^[6,7]

The ever-increasing rise in drug abuse can be devastating for a country such as Pakistan where the youth population (aged <30 years) makes a substantial 64% of the total population. ^[4] In fact, this widespread drug abuse tendency can be largely attributed to drug trafficking from neighboring estates into Pakistan. Pakistan's geographic location next to Afghanistan, the world's largest producer of illicit opium, places the country in a vulnerable position. Complete halt of drug trafficking from neighboring estates into Pakistan can be a challenging task in the context of the vast geographical expanse and limited financial resources. ^[8,9]

A pragmatic approach in this scenario would be to understand the prevailing conditions of the individual drug abuser and their surrounding socio-economic environment in order to design effective interventions and prevention of drug related problems. Despite the exponential rise in drug abuse and addiction, research studies identifying the high-risk groups vulnerable to substance abuse in the population are quite limited.

METHODOLOGY:

This retrospective cohort was conducted upon a sample of 380 patients (aged 18 years and above) suffering from substance abuse disorder presenting to a drug rehabilitation center. No gender bias was observed and the sample was collected using non-probability, consecutive sampling. A stringent inclusion criterion was adopted, and only those addicted patients were recruited, who fulfilled Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, criteria for dependence and were chronically dependent on psychoactive substances for more than 3 years. The participants of

the study were briefed about the aims and objectives of the study, and information related to various sociodemographic variables was collected using a structured questionnaire.

The questionnaire consisted of two sections: the first section was based on questions solely related to the sociodemographic and the second section was related to substance abuse and its duration and reason for its abuse. An interviewer conducted the interview during

the daytime when patients showed no symptoms of the disease. The data obtained was analyzed using SPSS v.21 & Microsoft Excel 360.

RESULTS:

Among the 380-patient enrolled into the study, 66.32% were males while the remaining 33.68% were females. The mean age of the sample stood at 33 (SD \pm 9.1).

Age Group	Males	Females
Up to 20 years	13	09
21 to 30 years	63	17
31 to 40 years	141	53
41 to 50 years	46	12
51 years and above	19	07

A large number of respondents (35%) initiated drug abuse in the teenage years. Majority of the subjects were educated up to at least secondary level (47.11%). Heroin was the most abused substance (47.9%) followed by cannabis (27.9%). The mean duration of substance abuse was between 1 and 5 years, whereas a marked fraction of subjects (9.2%) had more than 16 years of duration of abuse. Family disputes and peer pressure were the most common reasons for initiation of substance abuse.

Sociodemographic Variable	Sub - Type	n
Educational Status	No Education	123
	Primary Level Education	97
	Secondary Level Education	82
	Higher Level Education	78
Occupational Status	Employed	254
	Un - Employed	126
Teenage Initiation	Yes	137
	No	243
Duration of Substance Abuse	Up to 5 years	185
	6 to 10 years	93
	10 to 15 years	67
	16 years and above	35

DISCUSSION

That fact that is most troubling is that individuals in the age group comprising of the immediate and upcoming workforce of any nation are at risk of substance abuse here in our study. Similar observations have been reported in survey studies conducted in different cities of Pakistan. In a study from Lahore, 45% of the addicted patients were reported to be less than 18 years of age,^[3] whereas a study in Karachi observed 22.4% of patients to be aged between 15 and 20 years.^[4] Studies from India and Iran have reported similar observations in this regard.^[5, 6]

Another alarming finding of this study was that a great proportion of the participants had completed their secondary education, and additionally were skilled and had an occupation. Similar observations were reported from a study in Peshawar, where 62.6% of the drug abusers were literate.^[7] Thus, quite contrary to the popular belief, that poverty, illiteracy and unemployment gravitate towards drug abuse, these observations suggest that problem of substance abuse is growing and affecting individuals irrespective of the education levels and employment status. In the present study, the majority of participants were chronically abusing drugs. Most of the patients were single or mono substance users. Heroin was the most abused

substance (47.9%) either singly or in combination with other substances followed by cannabis (27.9%). Heroin was also reported as the major drug of abuse in Peshawar, abused by nearly 80% of the study cohort. [7] Whereas, in Lahore, heroin was the second most abused drug. [3]

However, in Karachi, cocaine and amphetamines were found to be the most commonly abused substances. [4] A study from the neighboring country of Iran also reported opium and heroin to be the most abused substances, [6] and this can be largely attributed to close proximity with Afghan borders; in contrast, a similar study in India has found alcohol to be the most abused substance. [5] Almost 80% of the opium processed in Pakistan comes from neighboring countries. [8] Consequently, heroin addiction is on high rise in Pakistan. According to the United Nations Office on Drug and Crime survey 2013, an estimated 860,000 or 0.8% of the population are regular heroin users, and 320,000 (0.3%) are opium users. [1]

Drug use is usually made in congregates among a group of close friends and is usually used as a means of communication, and refusal to participate in such activity might lead to elimination from friends company and desolation, which is quite critical to individuals in their teenage years. Bridging communication gaps among teenagers and their parents or guides at schools and colleges can improve this scenario. [9,10]

Academic institutes such as colleges and universities can play the significant role in imparting education on the effects of drug abuse on the adolescent brain and its consequences. In addition to that, drugs are usually perceived as an escape from stress. It is now frequently witnessed that individuals experiencing any traumatic life event tend to self-medicate themselves by substance misuse, specifically, opioids (heroin, morphine and alcohol), in order to relieve the negative symptoms of depression and anxiety. [11,12]

Currently, despite ever-increasing treatment demands, there is far fewer substance abuse treatment and rehabilitation centers in Pakistan. Unlike many other mental disorders, which can be treated, addiction is a chronic relapsing mental disorder, which requires structured treatment regimens and lifelong management. According to the World Health Organization, for substance use treatment and management, there is a need for specialist substance abuse treatment centers, together with mental health systems and primary care. [13-15]

CONCLUSION

After careful consideration, it can be contrary to popular belief, educated and employed males are more at risk of succumbing to substance abuse. Heroin is the commonest culprit and steps should be taken to control trafficking this drug into the country.

REFERENCES

1. Drug use in Pakistan. United nations office on Drug and crime (UNODC). 2013.
2. United Nations development programme (UNDP) report on Pakistan. 2018.
3. Batool Sadia, Manzoor Iram, Hassnain Shamaila, Bajwa Aslam, Abbas Muslim, Mahmood Maha, et al. Pattern of addiction and its relapse among habitual drug abusers in Lahore, Pakistan. *East Mediterr Health J* 2017;23(3):21-29.
4. Ali H, bushra R, Aslam N. Profile of drug users in Karachi city, Pakistan. *East Mediterr Health J* 2011;No 17.
5. Kadri AM, Bhagyalaxmi A. A study of socio-demographic profile of substance abusers attending a de-addiction centre in Ahmadabad city. *Indian J Community Med* 2003;28:74-76.
6. Fazel G, Parissa K, Eizadi-Mood N, Omid M, Roya M, et al. Epidemiology of drug abuse (chronic intoxication) and its related factors in a MMT Clinic in Shiraz, Southern Iran. *Iran J Toxicol* 2011;4:377-380.
7. Khan MH, Anwar S, Khan IA, Khan RH, Subhan Z, Noreen N, Sadia H. Characteristics of drug abusers admitted in drug 36 public health 167 (2019) 34 e3 7 abuse treatment centres at Peshawar, Pakistan. *Gomal J Med Sci* 2004;2(2):31-43.
8. Illicit drug trends in Pakistan. UNODC. 2008.
9. Bagaitkar J, Demuth DR, Scott DA. Tobacco use increases susceptibility to bacterial infection. *Tob Induc Dis* 2008;4(1):12-17.
10. PK, Gfroerer JC, Davies MC. Associations of nonmedical pain reliever use and initiation of heroin use in the United States. Rockville: Substance Abuse and Mental Health Services Administration; 2013. www.samhsa.gov.
11. Khalily MT. Developing a coordinated response to drug abuse in Pakistan. *Journal of interprofessional care*. 2010 Mar 1;24(2):168-72.
12. Malik A, Sarfaraz SF. Origin and development of drug addiction in South Asia with special reference to Pakistan. *Pakistan Journal of Commerce and Social Sciences (PJCSS)*. 2011;5(1):155-65.
13. Malik AA, Nawaz S, Tahir AA, Ahmed S, Ashraf S, Hanif N, et al. Knowledge and awareness of harmful effect of substance abuse among users and non-users: a cross-sectional study from Bari Imam.

- JPMA. The Journal of the Pakistan Medical Association. 2012 Apr;62(4):412-5.
14. Aslam N, Kamal A, Ahmed I. Demographic profile and etiological factors of starting drugs among patients with drug addiction. Journal of the College of Physicians and Surgeons--Pakistan: JCPSP. 2011 Feb;21(2):125.
15. Aslam N. Do emotional expressive parents produce general emotional distress and guilt among the children. Pakistan Journal of Medical Research. 2013 Apr 1;52(2):29.