# The Evil of Drug Dependence

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*Definition*: The "drug" is defined as any substance that when taken into the living organism may modify one or more if its taken.

*Drug Abuse:* is defined as self-administration of a drug for non-medical reason in quantities and frequencies which may impair an individual's ability to function effectively and social, physical or emotional terms.

*The Problem:* The non-medical use of alcohol and other psycho-active drug has become a matter of serious concern in many countries while alcohol abuse is more or less a universal problem. The incidence of drug abuse varies from place to place.

*Age Group:* in the age group 12 to 20 years the problem of drug dependence has reached epidemic proportions in many countries.

*Classification:* (1) Alcohol, (2) Narcotics (Opium, Heroin, Morphine, Codien, Pethedine), (3) Barbiturates, (4) Tranquilisers (Mandrex and Calmpose), (5) Hashish or Charas, (6) Miscellaneous (i) (L S.D.) Lysergic acid diethylamide. (ii) Cocaine. (iii) Amphetaning.

The drugs which are in common use are those that have either an exhilarating effect which is generally transient or general stimulating effect on the system which is invariably followed by depression or the soothing effect on the day. The alcoholic spirits belong to first class. The coffee, tabacco, charas and Bhang to the second class. The opium and cocaine to the third class.

## How it Starts

*(1) Experimental Use:* Later when patients were prescribed a particular drug for a particular symptom, the relatives of patients or the patients themselves remembered the name of the drug. Next time when some one was affected with similar symptoms, the same drug was used. In some it gave relief and in some it failed to bring any relief.

*(2) Prescribed by Doctor:* Diseases are as old as life on the surface of the earth. So some drugs are prescribed by the doctor for the care of diseases, then patients, habitual for some medicine e.g., Calmpose, Phenobarbitone, Larjectal, Narcotic, etc.

*(3) Social Factor and Life Hazards:* Life hazards which generate crisis may precipitate mental ill health. This is known as the crises theory of mental illness. Worries, anxieties, emotional stress, tension, frustration, unhappy marriages, broken home, poverty.

*Method of Taking:* (i) Cigarattes (ii) Puffing (iii) Intravenously (iv) Drinking (v) Chewing.

*Feelings:* The immediate effect of these drugs are more or less mental excitment with pleasurable feeling. Hightened bitterness and forgetfulness of worries. There is a feeling of exhilaration and variable increase in physical strength.

The man thus feels at his best after the dose. This stage of stimulation is followed by depression, when man feels low in spirit and is sad and melancholy. This may pass into stupor or unconsciousness which may be partial or complete.

It is either the initial pleasant feeling of exhilaration or the wretched condition at the stage of depression that goads him to repeat the dose.

This process goes on from day to day and on each succeeding day the craving for the drug becomes more acute than before. The victim then gets firmly addicted to the drug. The slow and steady poisoning of the system day in and out shatters his health with definite pathological structural changes of the various organs of the body which expose him to dangers of premature death.

## Physiological and Psychological Effect

*Effect of Alcohol:* By pharmacological definition alcohol is a drug and may be classified as a sedative tranquillizer, hypnotic or anaesthetic, depending upon the quantity consumed. Of all drugs, alcohol is the only drug whose self-induced intoxication is socially acceptable.

Alcohol is rapidly absorbed from the stomach and small intestine within 2-3 minutes of consumption. It can be detected in the blood the maximum concentration is usually reached about one hour after consumption. The presence of food in the stomach inhibits the absorption of alcohol because of dilatation.

Alcohol has a marked effect on the central nervous system. It is not a "stimulant" as for long believed but a primary and continuous depressant.

Alcohol procedured psychic dependence of varying degrees from mild to strong. Physical dependence develops slowly. According to current concepts, Alcohol is considered a disease and alcohol a disease agent with acute and chronic intoxication, cirrosis of the liver.

Toxic psychosis, gastritis, pancreatitis, hypertension, angina, cardiomyopathy, peripheral neuropathy are some of the results. Also evidence is mounting that it is related to cancer of stomach, cancer of mouth, pharynx, larynx and oesophagus. Further Alcohol is an important factor in suicides, automobile and other accidents and injuries and health due to violence.

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*Effects of Tea, Coffee, Tabacco:* Next to alcoholism the habit of smoking and tea taking, though these drugs are mild stimulate. They are liable to do hardly any harm but if taken in excess they are definitely injurious.

Excessive tobacco smoking, cases of dyspepsia, bad throat, with habitual cough and with frequent acute septic condition. The blood vessels become hard and tesnse. The heart becomes hypertrophic, then dilated.

*Effect of Charas and Bhang:* The habits of taking charas and bhang are peculiar to India. The initial symptoms of a large dose is mental disturbance but a moderate dose gives rise to feeling of avaricious appetite, unusual physical fitness, associated feelings of unwanted wellbing. One then loses all sense of time and disturbance and goes fast asleep from which he awakes afresh.

Persistent overdose either as drink or smoking produces a condition of general incapability with loss of will power, inability to concentrate, physical weakness and finally to insanity in the form of melancholia.

*Effect of Opium:* The craving in the case of opium is due not much to pleasureable feeling but to get relief from the morbid after effects of the drugs. They become untruthful, irresolute and dishonest even to the point of swindling.

When the habit of drug lasts for long duration the patient's neurologic pain, tremors increase and one finally becomes atonic. The habits further cause premature old age and premature death.

*Withdrawal Symptoms:* (1) Wageaches present (2) Irritability (3) Sleep disturbance (4) Bodyache (5) Pain (6) Diarrhoea (7) Tremors (8) Delerium (9) Watering eye (10) Epilepsy.

*Overall Management:* (1) Highlighting the harms of various addictions, (2) Wide publicity to the problems, (3) Legal and administrative.

**Special Management and Prevention**

(1) *Motivation:* High priority must be given to preventing the further spread of drug abuse. Public education about drugs and their effects is important to discourage the trend towards pharmaeological solution of human problems.

(2) *Hospitalization:* Patient's shift to the hospital for withdrawal of the drugs. Doctor or Psychologist also helps the patient.

(3) *Followup:* After-care service including faster home placement and home visiting is more important.

(4) *Psychotherapy:* Psychotherapy is more important to the addicts.

(5) *Rehabilitation:* The ex-drug dependent person requires rehabilitation. He must be re-educated to live without drug and to assume or resume a normal social life. They do some work, some day activity and gardening.

Sadation is also given to patient at night when he is tired with the work.

*Legal Action*: Some legal action is also needed to control the sale of these drugs.

It is aptly said: First you drink alcohol then alcohol drinks you!

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## *The Swedish Experience*

*(Continued from page 32)*

the very end in their own home. Age and sickness do not always go together—but elderly do get sick more often and have to go to hospital. What we need to be aware of as health professionals, in our relationsship especially to the *elderly patient* is that an old person can very quickly lose his whole security in a hospital situation, unless his functional capacity is supported. We should prevent that the elderly patient becomes dependent on us as health personnel during a hospital stay—instead we must give the old person the chance to himself take outmost responsibility and manage different procedures, even if it takes time.

**Fundings**

The described project has been financed through grants from the Swedish Medical Research Council (MFR), the Delegation for Social Research (DSF), the Foundation of King Gustav V and Queen Victoria and other funds. The participation of E. Hamrin in Asia Plateau, Panchgani for the Health conference has been possible through grants from the National Board of Health and Welfare in Sweden and from the Sophiahemmet School of Nursing.

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