

EARLY DETECTION AND INTERVENTION FOR DRUG ABUSE IN YOUTH

1. What are the common substances/ drugs of abuse? What are the local names of drugs?

Alcohol, tobacco, cannabis / “ganja”, opium derived drugs / “abeem / afeem”, volatile substances like paint thinners, correction fluid, glue and sleeping pills and other medications are commonly abused as drugs by youth and adults in India.

2. Is drug and alcohol use problem common in our country?

Yes it is common according to a recently concluded nation-wide survey*. In the population between 10 to 75 years of age:-

About 27% of men and 1.6% of women use alcohol.

About 2.8% of people use cannabis and 2.1% people use opioids.

About 1.1% of people use sedative medications.

Inhalants are used by about 0.7% of population. However, among children between 10-17 years age, 1.17% are found to use inhalants.

*(Magnitude of Substance Use in India report, 2019-NDDTC, AIIMS & MoSJE, Govt. of India)

3. Does this affect young people also?

Yes. It has been repeatedly shown by various research studies that the first use of drugs and alcohol starts between 12-14 years of age in many cases. Those who start using substances as adolescents are more likely to become addicted to it and face more severe problems. The **Table 1** shows the estimates of substance use problems in various categories – man vs women, children, adults etc..

Table 1: Approximate prevalence of substance use problems in various categories

Substance	Common names	Prevalence (India)	Prevalence (Men)	Prevalence Children (10-17 yr)
Alcohol	Country liquor, desi sharab(30%), IMFL (30%),saraiyum, beer, wine	14.6% (16 crore)	27.3%	1.3%
Cannabis	Bhang (2%), ganja, charas (1.2%)	2.8% (3. cr)	5%	0.9%
Opioids	Poppy, husk, phukki, smack, brown sugar	2.1% (2.26 cr)	4%	1.8%
Tobacco	Smoking, smokeless tobacco, e-cigarette	35%	13.1%	
Sedatives	Sleeping pills	35% (18 lakh adults)		4.6 lakh children

Inhalants / Volatile substances	Glue, Fevibond, Araldite, thinner, varnish, correction fluids, petrol etc.	0.7% (77 lakh)		1.17%
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4. I have a doubt that my child / student using drugs? How can I find out?

Some of these observations may indicate possible drug or alcohol use problem or a psychological problem in your child or student:-

Late to school	Spending more time with peers
Not attentive in class room;	Frequent lying about his activities or whereabouts
Frequent bunking	Reduced interest in studies
Giving more back answers;	Sudden change in behaviour;
Avoiding eye to eye contact with family members	Sudden changes in appearance (Hair-cut, Stud , Tattooing)
Coming home late	Red eyes, Slurred speech, Abnormal gait, Sweating, Smell of substances, Withdrawal symptoms
Asking for money frequently or stealing	Possession of leaf-like substances in a pouch, having some transparent papers(OCB), matchbox, needle, syringe, stamp like papers, or having pipes or chillums or plastic bottles cut in shape of 'bongs'
Not doing homework regularly;	Figure below shows some objects related to drug abuse

Figure: (Clockwise):- Bong made from bottle, a chillum, joint rolling paper and injection drug



5. How can I know that my child is taking what kind of drugs?

All of the drugs cause some common symptoms such as - difficulty in remembering, difficulty in taking decision, persistently poor performance at school/college/work, rapid mood changes, increased sweating, drowsiness. Some more specific effects that can help suspect drug use are listed in **Table 2**.

Table 2. Signs of intoxication and withdrawal from specific substances

Substance	Signs of Intoxication	Signs of Withdrawal
Alcohol	Redness of face Drunken gait Slurred or unclear speech Headache Stomach ache Smell of spirit/alcohol Silly or rash behaviour	Anxiety Sleep disturbances Nausea and/or vomiting Hallucinations- hearing voices when alone Fever Seizure (fits)

		Agitated behaviour
Opiates	Pinpoint pupils Slurred or unclear speech Slow / shallow breathing Stupor/coma (unconsciousness)	Nausea Vomiting Stomach cramps Diarrhoea Drug cravings Dilated pupils
Cannabis	Red eyes Dry mouth Thirst Increased appetite and craving for specific foods at unusual times Light headedness Yellow fingertips Smell of burnt rope/burnt grass	Sleep disturbances Irritable Anxious Fever like symptoms
Inhalants (super glue, varnish, nail paint remover, thinner)**	Varnish like smell Combativeness Slurred speech Light headedness	Tremors Irritability Sleep disturbances
Sleeping pills	Drowsiness Drunken gait Silliness of behaviour Slowed breathing Unconsciousness	Sleep disturbances Restlessness Anxiety

**Always make sure your child does not have access to glues used to stick plastic/glassware especially superglues (such as Fevibond, Araldite), as well as whiteners, thinners and all such use should be under strict supervision as such substances have more potential to be abused.

6. What are the risk factors for substance use ?

Familial factors	Social risk factors	Individual risk factors
Parents or family members using drugs or alcohol	Bad company of friends	Attention Deficit Hyperactivity Disorder
Childhood abuse and neglect	Association with gangs	Post Traumatic Stress disorder
Marital status of the parent	Peer pressure to try drugs	Depression
Parent child relationship		Any other psychiatric illness

7. What are the complications of substance abuse ?

Physical	Psychological	Social
Affect multiple organ systems of your body	Irritability	Affects interpersonal family relationships

Like Lungs, Liver, heart, brain		
Causes liver failure	Confusion	Involves in violence and crime
Affect brain and nervous system and cause memory disturbances, forgetfulness, decreased concentration and attention	Violent behaviour and aggression	Results Road traffic accidents
Affects heart and cause elevated blood pressure, dilation of heart	Amotivation – loss of interest in studies, work, and relationships	Decrease performance in studies, work productivity and loss of job
Causes cancers in lungs, mouth, oesophagus, liver, kidney	Anxiety	Ends up in debts and suicide
Sexual problems	Depression	
Risk of acquiring AIDS and other infections through needle sharing	Results in psychosis – hearing voices that others can't hear and seeing imaginary things (hallucinations) Believing in unreal things (delusions)	

8. Is the problem treatable?

Yes. It is treatable.

Drug addiction is not just a bad habit. It is actually a disease involving your brain and hence it might be difficult for you to come out of the habit by yourself once it is established. However by seeking help from a psychiatrist and by being co-operative for the interventions you may gradually become free of any substance use.

Early counselling can help you to avoid it from becoming a habit. The early intervention and treatment can help to stop the development of addiction. It can therefore prevent the complications due to substance use.

The early intervention can even prevent the use of substance from becoming a habit. Hence feel free to discuss it early and do not wait for the person to become addicted or start having problems.

9. Will I need medicines or counseling? Will these be effective?

Depending upon the extent of your problem you might need medicines or counseling or both. Medicines are mostly required during withdrawal state from a substance and to control craving for substance during abstinence period.

Apart from medicines there are other non- medication options like Motivation Enhancement Therapy, group counselling and yoga exercises which we can provide. Your co-operation and also the family support are also required for the treatment to be effective.

10. Where can I seek treatment if I find my ward is found to using substance?

You can bring the person on any day to the Psychiatry OPD (Room No.1010 / Old No 74), Ground Floor Hospital Block, JIPMER Hospital. We have special services dedicated for Alcohol & Drug Abuse Prevention & Treatment (ADAPT) Clinic.

After the initial assessments, you will be asked to follow up regularly. In case of emergency, you can bring the patient to JIPMER Emergency services on any day, at any time.

LIFE CAN TAKE YOU HIGHER THAN DRUGS, SAY NO TO DRUGS !

The **ALCOHOL / DRUG ABUSE PREVENTION & TREATMENT (ADAPT) CLINIC, JIPMER** caters to:

- (1) Youth under the age of 25 years
- (2) Either gender
- (3) Presenting with any tobacco, alcohol, cannabis, opioids or any other drug use problem

DAYS OF CLINICAL SERVICE:

First Assessment:

Monday to Saturday (Psychiatry OPD) - 8:30 – 11:00 am

Detailed Assessment:

Monday / Wednesday (Psychiatry OPD) – 8:30 am (Prior Appointment)

Follow-up Services:

Friday (Psychiatry OPD) – 8:30 – 11:00 am

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