Pattern of Substance Abuse in Patients of Lahore

Bushra Iqbal1, Uzma Shaheen2, Sidra Perveen3

*1Corresponding author: Medical Officer, Mayo Hospital, Lahore, 00923004525886, doctorbijqbal@gmail.com
2 Medical Officer, Mayo Hospital, Lahore, 00923086731008, uzmasheeen810@gmail.com
3 Medical Officer, BHU plus Bahadurpur, 00923205501602, sidrariaz546@yahoo.com

ABSTRACT

Objective: The aim of this research was the assessment of the pattern of substance abuse in patients visiting to the current hospital.

Place and Duration of Study: This research was carried out from February to October 2018 in Lahore, Pakistan.

Materials and Methods: Adult patients were approached who were visiting Outdoor Patient Department, indoor and emergency. The size of the sample was consisted over 400 patient and non-probability convenience sampling technique was used. Inclusion criteria was that the patients actively using and were dependent on any type of substance of abuse as per the criteria of ICD-10. Informed written consent was obtained from the participants. Exclusion criteria was that patients suffering from acute physical disease require urgent and emergency care, in delirium or unconscious and they were not made part of the study. The collection of data was on a sheet and SPSS version 21 was used for analysing the data.

Results: The sample group was consisted of 400 patients and out of them 350 patients were males and 50 patients were female. Patients belonging to low economic status were 49.1%. Patients belonging from rural areas were 25.1% whereas patients from urban areas were 62.1% and homeless were 30%. Among them the jobless were 91.3%. Patients with family history of drug abuse were 31%. Poly substances abusers were 50%. Heroin and opium abusers were 28.1%, injections were 8%, cannabis were 19%, benzo diazepines were 7.5% and others were 2%.

Conclusion: Mostly patients visiting hospital were jobless male and belonged to urban area of low economic status. Patients having family history of drug abuse were 1/5th. Substance abusers were 50. Heroin and opium abusers were 28.1%, injections were 8%, cannabis were 19%, benzo diazepines were 7.5% and others were 2%.

Key Words: Drug abuse, Health Services, Teaching Hospital, Pattern of substance abuse

INTRODUCTION

The main health issue is the substance abuse. According to one definition it is a pattern of substance of maladaptive which is being used and results in clinical and important damage and/or distress. Alcohol is the common drug used in west. Other drugs such as opioids and benzo diazepines and MDMA. These drugs may lead to have harmful effects on health. The stress can be the reason of depression in medical students and they may begin ruminating.

Drug abusers have high risk of suffering from different medical issues and they may be referred incorrectly in hospitals. During or after surgery they may feel depressed and anxious. They may have complications in surgery like hypertrophic scars and keloids. Probability is there they may not find the hospital treatment satisfactory. The substance abuse may make the females subject of abuse and battering. Psychotic diseases for example schizophrenia may be a result of substance abuse and be a reason of heavy burden on family and caregiver. It has been revealed that the substance abuse is a main issue to health physical and psychological as well. Substance abuse can result in heavy burden such as social, economic and at country level it may be a problem that require urgent and prompt action in the realm of public health. The physical disease may result in damaging of heart, lungs, HCV infections, liver, GIT, HIV, lack of nutrition and kidneys. The psychological issues may be schizophrenia, psychosis, depression, anxiety, mania and delirium. It is important to deal with this problem instantly as it has now public health problem. In order to deal with this problem, it is required to know the type of substance which is used in our area for making better plans. As per our information no study has been conducted on this problem up till now in our hospital. The focus of this research was the assessment of the substance abuse pattern in patients visiting hospital.

MATERIALS AND METHODS

This research was cross sectional and was carried out in survey form from February to October 2018 at Lahore, Pakistan. They followed the guidelines mentioned in the Helsinki declaration. The study was approved by the ethics review committee. Adult patients were approached who were visiting Outdoor Patient Department, indoor and emergency. The size of the sample was consisted over 400 patient and non-probability convenience sampling technique was used. Inclusion criteria
was that the patients actively using and were dependent on any type of substance of abuse as per the criteria of ICD-10. Informed written consent was obtained from the participants. The collection of data from the illiterate was made after making sure they understand all the features of the research by telling and reading all the details in their local/native language. The object and title of the research was explained to the patients and assurance was given to them about confidentiality of data. Exclusion criteria was that patients suffering from acute physical disease require urgent and emergency care, in delirium or unconscious and they were not made part of the study.

For the purpose of collecting patients’ demographic and other details, a data sheet was designed. After giving assurance of confidentiality and privacy the information relating to substance abuse was gathered from patients. The patients were given available treatment in the hospital. All treatments are given free of cost by the State because it’s a big public hospital. The collection of data was on a sheet and SPSS version 21 was used for analysing the data.

RESULTS

The sample group was consisted of 400 patients and out of them 188 patients were males and 12 patients were female. Male patients were inmajority, the reason may be that drug abuse female patients could not or were not in a position to visit hospital for treatment. Patients belonging to low economic status were 49%. 25% patients belonged to middle class and 26% patients belonged to upper class. Majority of patients belonged to poor economic background owing to the downward drift due to abuse of drugs. The hypothesis is that the current hospital is big public sector hospital and provision of treatment is free of cost by the State to the patients therefore, patients with poor background move here for the treatment.

Patients belonging from rural areas were 25.1% whereas patients from urban areas were 62.1% and homeless were 30%. Majority of patient belongs to the urban area because access is easy to hospital from city as compared far away areas or due to awareness in patient relating to treatment availability in hospital. Homeless 20% patients live on roads and on street and sleep when they find place. They are living in urban area instead of rural, but the classification is not an easy task as they keep on roaming from place to place. Among them the jobless were 91.3%. Patients having permanent or regular jobs were 9.7%. Drug abuse may be one of reasons of joblessness. It was not the purpose of the current research therefore no more probe was done. Patients with family history of drug abuse were 31%. Many ideas have been hypothesized from genetics to environment and the debate is continue on nature versus nurture.

Poly substance abusers were the most common patients. At one single time they abuse more than one substance and continuously moving from one drug to another. In the current research the classification of poly substance abusers was made as they were doing at interview time. In past some patients used on drug but now using more drugs at interview time. Poly substances abusers were 40% of the group, however, it was not the aim of the research, but these patients had surgical, medical and psychological issues as compared to other different type of patients using drug. Exclusively, heroin is used by 21.5% patients and opium is used by 6% patient. These substances are similar and coming from opioid drug group. There are numerous forms of using heroine. Many streets are named of it such as button and crystal. These varies in price and potency. Cannabis is used by 8% patients. In different local form it is used such as booti, bhang or garda etc. Injections was used by 7% patients. i/v injections generally tramadol is used by them and pain killers having effects such as euphoria. Benzodiazepines use has been found in 5.5 % patients.

DISCUSSION

The findings of the current research have revealed that mostly patients visiting hospital were jobless male and belonged to urban area of low economic status. Patients having family history of drug abuse were 1/5th. Poly substance abusers were 50%. Heroin and opium abusers were 28.1%. injections were 8%, cannabis were 19%, benzodiazepines were 7.5% and others were 2%. Similar findings have been reported by another study, being unmarried and falling in the age group of 18 to 44 years and belongs to poor economic conditions had risk element for indulge in drug abuse. A role has also been played by family genetic elements. The substance pattern is different in societies. Across the society the attitude and culture are different, and it may decide the type of substance used by people. In the current research the most common abuse is poly substance abuse followed by cannabis and opioids. The availability of drug in our country is easy because of drug transport route with Afghanistan. The current study has revealed that there are 20% patients homeless. It has been reported by study that people from supportive family have less probability of indulging in drug abuse issues. On the other strict parents may
increase the likelihood of children drug abuse. Alcohol abuse has not been reported by parents. Another research has also reported this. Alcohol is not allowed, and social taboo is carried by it therefore avoid reporting it. The current research has some limitations and strength. Easy methodology is the strength of the research. Collection of data was easily completed from patients visiting hospital. There is no need of any psychometric scale for translating English language in Urdu or Punjabi. During interview for the collection of data a simple survey sheet was used. During treatment process the collection of data was very easy and no separate time or resources are required. The study’s limitations are that it is based in hospital and it may not have generalised result to community. In future, the research based on communities are required to solve the problem by using robust methodology.

CONCLUSION

Mostly patients visiting hospital were jobless male and belonged to urban area of low economic status. Patients having family history of drug abuse were 1/5th. Substance abusers were 40%. Heroin and opium abusers were 27.5%, injections were 7%, cannabis were 18%, benzodiazepines were 6.5% and others were 1%.

Reference:


