



Prevalence and Pattern of Substance Abuse in Patients Attending District Mental Health Programme (DMHP) Dumka (Jharkhand)

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ABSTRACT

Aims: To study Prevalence and Pattern of Substance Abuse in psychiatric patients attending DMHP, Dumka, Jharkhand, during 2007 to 2012.

Materials and Methods: This is a retrospective chart review of complete data of 6 years at DMHP Dumka.

Results: During the study period, 4578 males (61.5%) and 1832 females (38.5%) attended DMHP for psychiatric consultation. Prevalence of substance abuse among psychiatric patients was found to be 37% among male patients and 3% among female patients. The most common substance of abuse was Tobacco (23.9%) followed by Alcohol (8.8% and 1% respectively for males and females), cannabis 2.4% for males only, Other substances like volatile, sedatives, opioids and multiple substance abuse was below 1%.

Conclusions: The present study offers prevalence and pattern of substance abuse among psychiatric patients at DMHP, Dumka, Jharkhand.

KEYWORDS : Prevalence, Substance abuse, Types of substance.

Introduction

About 14% of the global burden of disease has been attributed to neuropsychiatric disorders, mostly due to the chronically disabling nature of depression and other common mental disorders, alcohol-use and substance-use disorders, and psychoses [1]. Around 8 million people abuse opiates / heroin, Some 13 million people abuse cocaine and 141 million people consume cannabis annually worldwide [2]. Such estimates have drawn attention to the importance of mental disorders for public health. Substance use and psychiatric illness may present as comorbid condition, or may be implicated in the genesis of psychiatric illnesses, or may be considered as a consequence of psychiatric illness as it shares common vulnerability factors [3]

In a study of comorbidity of psychiatric illness and substance abuse the authors report 13.2% out of 5116 patients [4]. Association of psychiatric illness and substance abuse or dependence complicates the situations, with severe financial problems, medication noncompliance, relapse and re-hospitalization; violence, legal problems, family burden and high rates of sexually transmitted diseases [5].

A recent Sri lankan prevalence study reported various substance abuse; alcohol use disorders (20.6%), tobacco use disorders (18.2%), cannabis use disorders (11.7%), betel use disorders (7.4%), opioid use disorders (1.2%) and multiple substance use disorders (10.8%) among consecutive psychiatric patients at a tertiary psychiatric center.[6].

Aim

To study Prevalence and Pattern of Substance Abuse in psychiatric patients attending DMHP Dumka during 2007 to 2012.

Methodology

This is a retrospective chart review of complete data of 6 years (2007 to 2012) at DMHP Dumka, Jharkhand. The duration of data collection was done from January 2007 to December 2012. Socio-demographic and clinical details were recorded on a self made proforma. Diagnosis was made according to ICD-10 criteria by the psychiatrist in-charge of the DMHP, Dumka.

Results

The total sample size of adult patients comes out to be 6410, out of which 4578 (71.42 %) were males and remaining 1832 (28.58 %) were females. 59.80 % of patient population were married. Most of the patients were illiterate 36.70%, and 71 % of the patients were from low socioeconomic class and their monthly income was below 3000 Rs per month. As 18.50% were unemployed and 26.11% were either labourer or farmers (Table – 1).

Regarding prevalence of substance abuse among psychiatric patients attending DMHP Dumka was found to be 37% among male patients and 3% among female patients. A total of 2886 (63%) male patients were non abuser and 1775 (96.9%) females were non abuser. The most common substance of abuse was Tobacco (23.9%) followed by Alcohol (8.8% and 1% respectively for males and females), cannabis 2.4% for males only, Other substances like volatile, sedatives, opioids and multiple substance abuse was below 1% [table-2].

Discussion

In this retrospective study we included all patients attending DMHP, Dumka for psychiatric treatment. The total sample size was 6410, with 71.42 % males and 28.58 % females. In this study 37% male patients were reported taking any psychoactive substances which are comparable to a study conducted at Chandigarh (7) which reported that about 50% patients were substance abusers. The probable reason for lower percentage in the present study may be under reporting by the patient, another possible differing factor may be grossly different socioeconomic condition and availability, Chandigarh is one of the most affluent multicultural city of India, where as Dumka is one of the most poor and underdeveloped tribal district of India. Tobacco was the most common substance used followed by alcohol and Cannabis. Similar trend was observed about type of substance abused in non psychiatric normal general rural population (8). Tobacco remained most prevalent psychoactive substance abused, we found 23.9 % males consuming tobacco products. This finding is a reflection of prevalent socio cultural acceptance, easy availability and lack of education and awareness. On the other hand opioids, sedatives, stimulant and volatile substance are very less prevalent (less than 1% each). This

reflects social non acceptance, higher costs and poor availability of these psychoactive substances at tribal dominant rural population. However Alcohol has more acceptance, and ours study population had 8.8% males and 1% females who were abusing it (table-2).

There was significant difference observed between male and female patients regarding substance abuse. As regards to various diagnostic categories, we found 37% male and 3% female patients were substance abusers. Majority of substance abusers were taking tobacco. Only 8.8% patients reported of alcohol abuse which is rather low compare to what is prevalent in the society at Dumka (table 2). The probable reason to this is that because of socio-cultural acceptance of drinking in this population the majority of alcohol abuse patients did not report to the centre. Twenty three male patients were found taking volatile substance (Dendrite) and same number of patients was also found to have multiple substance abuser. Fortunately there was not a single case of substance abuser who were abusing costly substances i.e., heroin and cocaine. Almost all patients of opioid abuse were either consuming tablet spasmoproxylon (tablet containing paracetamol, dextropropoxyphene and dicyclomin) or cough syrup containing opioids such as codeine.

Conclusion

The present study offers prevalence and pattern of substance abuse among psychiatric patients at DMHP, Dumka, Jharkhand.

Table -1: Socio-demographic profile of patients.

Total sample size – 6410	
Male	71.42 %
Female	28.58 %
Married	59.80%
Illiterate	36.70%
Income (Rs) <3000	71%
Occupation Labour/Farmer	26.11%
Occupation Unemployed	18.50%

Table -2: Substance Abuse across Gender

Substance Abuse	Male	Female	$\chi^2 = 158$ df =8 p<.01
Non Abuser	2886 (63%)	1775 (96.9%)	
Alcohol	403 (8.8%)	19 (1%)	
Opioids	13 (.3%)	5 (0.29%)	
Cannabis	110 (2.4%)		
Sedatives	13 (.3%)	5 (0.29%)	
Other Stimulant	13 (0.3%)	28 (1.5%)	
Tobacco	1094 (23.9%)		
Volatile	23 (0.5%)		
Multiple Substance	23 (0.5%)		
Total	4578 (100)	1832 (100%)	

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