

COMBATING DRUG ABUSE : ROLE OF COMMUNITY AND MEDICO-LEGAL PERSONNEL

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Abstract : *The problem of drug abuse is growing at an explosive rate world-over. Drug abuse refers to self-administration of a drug for reasons other than medical in an amount, strength, frequency or manner that damages the physical and or mental functioning. Substance dependence requires three or more of the symptoms are present. It mostly affects adolescents and young population in particular students community harming them both physically and mentally thus disrupting their peace and harmony. This calls for crucial role of the family, community, social organizations and medico-legal personnel apart from law enforcing agencies, doctors, psychologists, and psychiatrists. The marijuana group of drugs predominantly cause psychological dependence and can well be controlled by exercising strong will power and active co-operation of family members and community. The opioid group of drugs causes physical dependence and mainly requires prompt medical attention, close surveillance from the family and rehabilitation programmes for ex-drug takers under guidance of social or government organizations. The long-term goals of combating drug abuse include prevention, treatment and rehabilitation of drug abuser. Community, social organizations and Ministry of welfare are basically concerned with prevention and rehabilitation aspects of drug abusers. Preventive strategies should evolve programmes for creating drug awareness and about overall adverse consequences of drugs of abuse; identifying and motivating drug abusers to accept counseling and detoxification programmes; undertaking prolonged follow up for maintaining drug free life; and chalking out rehabilitation programmes in ex-drug takers for their social integration. The Ministry of welfare should establish more counseling and de-addiction centers along with rehabilitation programmes for the addicts. It is commonly observed that male drug abusers are more often rehabilitated by social organizations but female addicts are ignored despite the fact drug addiction stamps a greater stigma on them. The medico-legal personnel play a pivotal role to find out prevalence and involvement of various drugs of abuse amongst drug abusers, to identify toxicological features of drugs of abuse, to develop awareness programmes particularly about Narcotics and Psychotropic Substances Act and Prevention of Illicit Traffic in Narcotic Drugs and Psychotropic Substances Act for the general masses towards containing menace of drug abuse and finally advising the authorities e.g. State Police Administration, Narcotic Control Bureau, Central Police Organization etc.*

Drug abuse, a multidimensional and multifaceted social scourge is defined as the use, usually by self administration, of any drug in a manner that deviates from the approved medical or social patterns within a given culture. The term relates to taking a drug for reasons other than medical, in an amount, strength, frequency or manner that damages the physical and/or mental functioning.^{1,2}

The term addiction refers to compulsive drug use. The American Psychiatric Association (APA) defines substance dependence (addiction) as a cluster of symptoms indicating that the individual continues use of the substance despite significant substance related problems. Dependence (addiction) requires three or more of the symptoms whereas abuse can be diagnosed when only one or two symptoms are present.³

The problem of drug abuse is growing at an explosive rate and of late it has spread its malevolent tentacles to almost every part of the globe surmounting almost all barriers of race, caste, creed, religion, age, sex, educational status, economic strata etc. with astounding ease to the extent that no population is spared off this social evil. Surprisingly a large percentage of young individuals particularly students are being hooked on dependence producing drugs.^{4,5} Apart from oral and intravenous drugs of abuse, inhalant abuse, which elicits psychoactive effects and mostly affects adolescent and young population, is being visualized as an important drug abuse problem in our country.⁷

Drug abuse not only ruins both the addict and the family physiologically, socially and economically to the extent of causing disruption of peace, harmony and happiness, but also it creates major apprehension in the mind of peace loving citizens too.^{8,9}

Viewed in these perspective, one can easily visualize the crucial role of the family, community and social organizations, law enforcing agencies and medico-legal personnel apart from doctors, psychiatrists and psychologists.

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ROLE OF COMMUNITY IN COMBATING DRUG ABUSE

The community plays a precise and pivotal role in the management of drug abuse. The marijuana group of drugs like ganja, bhang, hashish, charas etc. are the most widely abused drugs.² These predominantly cause psychological dependence which can be eliminated by exercising strong will power together with the cooperation of the family members and community.⁸ The opioid group of drugs like opium, morphine, heroin, brown sugar etc. cause metabolic or physical dependence and it is extremely difficult to control this addiction on its own.^{1,2} This explains why parent's appeal, persuasion, pressure, coaxing, cajoling and even punishment failed to work. These cases require prompt medical attention along with constant surveillance and cooperation from the family and society at large.^{9,10}

The long term goals of combating drug abuse comprise of integrated measures for prevention, treatment and rehabilitation of drug abuser and finally to help the addict for reintegration into the society. Community, social organizations and Ministry of Welfare are basically concerned with prevention and rehabilitation aspects of drug abusers.¹¹

COMMUNITY VIS-À-VIS PREVENTIVE ASPECTS

The overall strategy for prevention involves an active cooperation of the family members and the community; an attention to aspects of social environments in which drugs are abused and developing preventive policies at community level. Social organizations should chalk out programmes for creating drug awareness in masses, identifying and motivating drugs abusers to accept counselling and detoxification programmes, formulating strategies to change life style of abusers, and to supervise a prolonged follow up for maintaining a

drug free life. Besides, evolving rehabilitation programmes for ex-drug takers.¹¹

A multitude of factors are responsible for drug abuse such as familial discord, social ostracism, stresses and strains of modern life, emotional insecurity, erosion in social and moral values, professional rivalry, apart from curiosity of floating high, dreamy and pleasurable sensations. Controlling these factors is an important facet of the preventive aspect of drug abuse.¹¹ A majority of these factors can tactfully be tackled by family members, social organizations and community as a whole.

Young girl abusers specially require proper attention for they are more complicated to deal with since they are drawn into 'drug-net' by their boy friends and usually afford drugs by indulging in prostitution or smuggling activities. In case of married ones, the husbands of some are joint parties to their addiction. They too require a community support.

Nevertheless, the Ministry of Welfare is the nodal agency for drug abuse prevention, it should establish more counselling and de-addiction centres along with rehabilitational programmes for addicts.¹¹ Community plays only a supportive role regarding prevention of drug trafficking or supply of illicit drugs. It should be tackled and controlled through strict legal actions, by adopting stringent measures for illegal cultivation of drugs of abuse and slapping penal actions against drug peddlers/drug launderers. Social workers and neighbours residing in the vicinity of illegal cultivation of drugs manufacture of drugs or drug peddlers can help a great deal by informing law enforcing agencies for their containment.¹¹

PSYCHOLOGICAL DEPENDENCE AND ROLE OF COMMUNITY

Although, strong psychological craving, disturbed emotional states, depressive or anxiety disorders require psychologist and psychiatrist help, yet family and voluntary social organizations definitely play a pivotal role on one or more of the following counts :

- (i) To create drug awareness and to convince those who use drugs, to quit.
- (ii) To warn drug addicts for the overall adverse consequences of drug abuse and its reflection on their quality of life and that they may lose their jobs too owing to drug abuse.
- (iii) To create awareness about transmission of HIV in intravenous drug abusers presumably owing to needle sharing behaviour.
- (iv) To dissociate the addicts from their social environment so as to prevent access to the drugs through friends or drug peddlers.
- (v) To boost drug addicts psychologically and to instill a feeling of security, confidence, mental and social well being.
- (vi) To dispel fear about poor self-image, feeling of despair, depression and anxiety.
- (vii) To create strong motivation for drug therapy/de-addiction.
- (viii) To cordon off ex-drug takers to prevent relapse.
- (ix) To protect especially female addicts from pressure tactics of drug peddlers / peers who thrust upon them prostitution or smuggling.
- (x) To promote yoga, meditation, religious conversations and socio-economic welfare programmes for the addicts/ex-drugs abusers.

PHYSICAL DEPENDENCE AND ROLE OF COMMUNITY

Since addiction to opiates develops very quickly, is very severe and dangerous, hence these cases initially require a comprehensive medical and neuropsychologist help and are best treated at specialized de-addiction centres.^{1,2} The family and social organizations step in as soon as the addict is detoxified or weaned away from the offending

drug, to impart integrated preventive measures so that addict is able to lead a healthy drug free life.

Besides, social workers and social organizations should adopt strict vigilance over hospitals and de-addicting clinics since these may be potential sources for the development of drug sub-culture owing to assembly of a large number of addicts with diverse addiction profiles. Lastly, the enlightened citizens should also actively contribute to prevention of drug abuse by keeping himself and his family away from 'drugs', by remaining alert to any request / suggestion to keep or carry 'drugs' to help others remain drug free and by informing law enforcing agencies for an effective elimination of this menace.¹¹

ROLE OF COMMUNITY IN REHABILITATION

A proper rehabilitation of addict is the crying need of hour. Since ex-drug abusers are often inadequately prepared for social integration owing to poor self esteem and /or vocational skills hence social acceptance and affection should be extended to drug abuser within a framework of discipline. Equally important is the attitude towards ex-drug abuser of his family members, neighbours, working colleagues, friends and society as a whole. Ex-drug abusers should be allowed to readjust to group living in the family/society and to reevaluate their goals and aims.¹¹

Although male drug addicts are more commonly rehabilitated by social organizations but the female addicts are ignored despite the fact that drug addiction stamps an even greater stigma on them. Rehabilitation of female addicts is a tedious and risky affair as during recovery their strong sexual urge come to the fore and the addict is driven to satisfy the same, therefore most rehabilitating centres have expressed their helplessness in handling the volatile consequences of this aspect.

In brief, not only an active participation of community through voluntary welfare organizations, social workers and family is desired for rehabilitation of addicts but also they should chart out a cohesive, concerted plan for an effective containment of drug abuse.¹¹

ROLE OF MEDICO-LEGAL PERSONNEL IN CONTROLLING DRUG ABUSE

In wake of dependence liability and other toxicological features of drugs of abuse along with self destructive behaviour of drug abuser culminate into a steep rise in suicide rates together with an escalating criminal violence have seized our attention to propound the crucial role of medico-legal personnel in containing menace of drug abuse.

It is exhilarating that our country has enacted very powerful, strict, deterrent laws pertaining to narcotics and related drugs i.e. Narcotics and Psychotropic Substances Act, 1985 with amendment in 1989 and Prevention of Illicit Traffic in Narcotic Drugs and Psychotropic Substances Act, 1988, to upset the applecart of 'Narco Power'. The law provides rigorous imprisonment ranging 10-20 years and a fine of Rs. 1-2 lacs or more. The maximum penalty provided for in the law includes death penalty without remission in respect to certain specified second offences. In light of the above, one prime sphere where medico-legal experts can actively and usefully contribute is to advise the authorities - State Police Administration, Narcotics Control Bureau, Narcotics Commissioner of India, Directorate of Revenue Intelligence, Central Economic Intelligence Bureau, Collectorate of Customs and Central Excise, Central Police Organization etc. who are empowered to take action under various provisions of the law.

An allround rising trend in drug abuse and its changing patterns owing to various responsible factors has also brought into limelight the prime role of medico-legal experts to explore prevalence and involvement of various

drugs of abuse like opium, morphine, heroin, cocaine, smack or brown sugar etc. amongst drug abusers together with inhalant drug abuse which usually does not draw legal actions.

Yet another responsibility of medico-legal personnel is that they should report to various toxicological features noticed once a drug abuser is using bizarre mixture/cocktail of 'drugs'. This will reflect to changing patterns of drug abuse and adverse effects in different groups of individuals.

Another sphere where medico-legal specialist play pivotal role is in creating awareness about deleterious and fatal effects of drugs of abuse in the society by furnishing detailed data on their toxicological adverse effects profile. Besides they can play an anchoring role by motivating addicts against induced disability by 'drugs'.

The medico legal experts are responsible for determining the cause of death particularly where cause of death cannot be pinpointed or where the cause is due to drug of abuse. Besides, they have to give their opinion about estimation of time since death which is important in all medico-legal cases. Every effort should be made to track down these cases to curtail under-reporting. Moreover, all poisoning death cases should be thoroughly probed for the involvement of 'drugs' so as to quantify their exact prevalence.

Obviously, the experts in the medico-legal field are the men of the crisis, their valuable services in the field of drug abuse are not only going to cast far reaching repercussions in the medical realm but also to carve out a niche in respect to social welfare and containment of drug abuse. It may be admitted that many precious lives that would otherwise be lost, can be saved by effectively combating the pernicious onslaught on the society by drug abuse. We hope that medico-legal personnel will live up to these expectations and their line of action in this direction will be worth noting.

CONCLUSIONS

Not only the gigantic problem of drug abuse is tearing the basic fabric of our culture and moral values but also the adoption of ostrich like approach by Ministry of Welfare and medical personnel in general to quell this social scourge is quite disheartening. Ruminating over this challenging subject, we suggest an active participation of community, social organizations and family as well as a predominant specific role of medico-legal specialist for an effective containment of menace of drug abuse.

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In hypertension management

From dawn... to dusk
Old ARB's Leap

Telmisartan
Telminorm
Controls BP..
Round the Clock

Early morning BP surge are important risk factor for stroke & cardiovascular events

From dusk... to dawn
Old ARB's Sleep

Telmisartan + Hydrochlorothiazide
Telminorm-H
Achieves goal BP..
Round the Clock

Telmisartan + Ramipril
Telminorm-R
Protects end organs...
Round the Clock