

PATTERN OF SUBSTANCE USE AMONG TREATMENT SEEKING INDIVIDUALS ATTENDING ADDICTION TREATMENT FACILITY IN NORTH KASHMIR

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Abstract

Background: Over the past few years there has been a sharp rise in the substance use across the world as well as in Kashmir. However, there is very little data available as far as North Kashmir is concerned. **Materials and Methods:** This was a cross sectional descriptive study to determine the pattern of substance use among the treatment seeking individuals at an Addiction Treatment Facility in North Kashmir. 726 patients who visited the facility were included in the study. **Result:** The mean age of the study population was 27.63 years (SD=6.89) with the majority of the individuals (60.6%) in the age group of 21-30 years. Opioids (98.5%) were the most commonly used substance with 85% using intravenous route. About 55% were Hepatitis C positive. **Conclusion:** There was very high prevalence of opioid use among treatment seeking young males. Injecting drug use was the most common route which in turn lead to high prevalence of Hepatitis C among these individuals.

INTRODUCTION

The epidemic of substance abuse is emerging as a global health challenge with 35 million people estimated to suffer from drug use disorders according to the latest World Drug Report (UNODC 2019). Assuming no change in the global prevalence of drug use, the number of people who use drugs will rise by an estimated 11%- 299 million by 2030.^[1] In India, few substances like Cannabis and alcohol have been used since centuries in view of their religious and cultural acceptance. While alcohol and tobacco are widely prevalent substances in India, illicit substances especially opioids including heroin are emerging as a new challenge for policy makers.^[2]

Substance use can have negative consequences on the economy, productivity, and social well-being of communities. Due to the multiplicity of factors associated with substance abuse and their inter-relatedness, substance use is a complex problem.^[3] While the menace of substance abuse is on rise throughout the nation, certain factors like its

geographical location, ongoing conflict and socio-cultural factors has worsened the drug scenario in Kashmir and opiates like heroin have become a serious public health issue.^[4] In recent nationwide study conducted by Ministry of Social Justice and Empowerment, Government of India, prevalence of current use of any opioid was 2.06% and heroin being the most commonly used opioid.^[5] Although there have been few studies conducted to estimate the prevalence of substance use in Kashmir, most of them studied populations either from Srinagar district or South Kashmir.^[6] As the data from North Kashmir is lacking, therefore we planned to conduct this study to determine the pattern of substance use among treatment seeking individuals from North Kashmir.

MATERIALS AND METHODS

This was a cross sectional descriptive type of study done at the Government Medical College Baramulla after getting the approval from the Institutional Ethical Committee. All the patients registered at the

Addiction Treatment Facility (ATF) in the Department of Psychiatry were considered for the study. The study period was from May 2022 till November 2022. A written informed consent was taken from each patient. Only those patients who gave consent were included in the study. Minors (age less than 18 years) and those with severe mental illness which hampered their participation in the study were excluded from the study. Thus out of a total of 798 patients registered in the ATF during the study period, only 726 were finally included in the study. A semi structured pro-forma for collecting the data was formed. Seroprevalence of HIV, Hepatitis B and C was done using rapid card test. The data thus collected was tabulated and the variables were presented as frequency and mean.

RESULTS

The mean age of the study population was 27.63 years (SD=6.89). Majority of the patients (60.6%) were in the age group of 21-30 years. Out of the total 726 participants 723 (99.58%) were males while as only 3 (0.004%) were females. Majority of the patients were from the Baramulla district (N=560, 77%). [Table 1] The most common substance used was Opioids (98.34%) followed by nicotine (94.5%). The most common route of using opioids was Intravenous heroine (86.7%) followed by chasing (11.2%). 55.23% of the participants were Hepatitis C positive whereas only 2 were Hepatitis B positive. None was HIV positive. [Table 2]

Table 1: Sociodemographic Profile

Age (in years)	N	Percentage
≤20	77	10.60%
21-30	440	60.60%
31-40	172	23.69%
41-50	35	04.82%
>50	02	0.27%
Gender		
Male	723	99.58%
Female	03	0.004%
Residence		
Baramulla	560	77%
Kupwara	156	21.48%
Other Districts	05	6.88%
Outside UT of J&K	05	6.88%

Table 2: Pattern of Substance Use

Substance	N	Percentage
Opioids	714	98.34%
Intravenous	619	86.69%
Chasing	80	11.20%
Prescription opioids	15	2.10%
Cannabis	408	56.19%
Nicotine	686	94.50%
Sedative Hypnotics	47	6.47%
Alcohol	06	0.82%
Sero-prevalence		
HIV	0	0 %
Hepatitis C	401	55.23%
Hepatitis B	02	0.27%

DISCUSSION

The mean age of the study population was 27 years with the majority in the age group of 21-30 years. The risk of substance use is highest among the young people due to curiosity, peer pressure, experimentation. Many previous studies in the region also concluded that the substance use was most prevalent in the younger age group.^[7-9] Most of the patients visiting the clinic were males (99.58%). It is a well-known fact that worldwide the prevalence of substance use is common among males than females and many epidemiological studies on the pattern of substance use in the country have got similar results.^[10] Most of the participants were from the Baramulla district (77%). This might be because the ATF clinic is situated in the same

district and the people from different districts are registered at their respective ATF clinics within their own districts. Since Kupwara district doesn't have an ATF clinic, most of the patients from Kupwara visited our ATF clinic.

The most common substance used was opioids (85%) followed by nicotine (94.5%) and cannabis (56%). This is because the ATF clinic provides opioid substitution therapy (in form of buprenorphine) for people with opioid use disorders, since this is a controlled medicine and is not available in the market, as such a number of such patients in the community register themselves at the clinic for treatment. Furthermore, in a study conducted in two districts of Kashmir in 2020, the overall prevalence of substance dependence was 1.95% out of which 92.3% were using opioids.^[6]

Among the opioids, majority used intravenous heroin (86.7%) followed by chasing (11.2%). The prevalence of IV opioid users is increasing day by day. In the nationwide survey conducted by NDDTC AIIMS New Delhi, almost half (46%) of persons with injecting drug use report injecting heroin predominantly, while the same proportion (46%) report using injectable pharmaceutical opioids.^[11] Similarly, in the study by Rather et al, Current prevalence of injection drug use was 0.95% and heroin was the most common opioid among Injection Drug User (IDU), being used by 91.12% IDUs followed by Pentazocine (5.92%).^[6]

The prevalence of Hepatitis C was 55%. This is because of high prevalence of injecting drug use among our study population. IDU often is a risk factor of sharing contaminated needles which increases the chances of HIV and Hepatitis among the users. Our results are similar to the other studies done to determine seroprevalence of HIV and hepatitis among IDU's.^[12] However, in our study the prevalence of HIV was zero while as Hepatitis B was only 0.27%. This is because the community prevalence of HIV in Kashmir is very low while as most of the people are vaccinated for Hepatitis B in their childhood.^[13]

CONCLUSION

There was a high prevalence of opioid use especially among treatment seeking young males. Injecting drug use was the most common route used which also lead to a high prevalence of Hepatitis C among the study population.

Limitations

This was a hospital based study which may not be true representation of the substance use scenario in the community. The data collected was solely on the basis of history given by the patients and we did not do any investigations to check for the substance used. Seroprevalence of HIV, Hepatitis B and C was done using rapid card test which may not be a sensitive method.

REFERENCES

1. UNODC, World Drug Report 2020, booklet 2, Drug Use and Health Consequences (United Nations publication, 2020).
2. Basu D, Malhotra A, Varma VK. Cannabis related psychiatric syndromes: A selective review. *Indian J Psychiatry*. 1994; 36:121-8.
3. Quello SB, Brady KT, Sonne SC. Mood disorders and substance use disorder: A complex comorbidity. *Science Practice Perspectives*. 2005;3(1):13-21.
4. Avasthi A, Ghosh A. Drug misuse in India: Where do we stand & where to go from here? *Indian J Med Res*. 2019; 149:689-92.
5. Ambekar A, Agarwal A, Rao R, Mishra A, Khandelwal SK, Chadda RK. National Survey on Extent and Pattern of Substance Use in India. Magnitude of Substance Use in India. [Internet] New Delhi: Ministry of Social Justice and Empowerment, Government of India; 2019. Cited 2020 Jun 10.
6. Rather YH, Bhat FR, Malla AA, Zahoor M, Ali Massodi PA, Yousuf S. Pattern and prevalence of substance use and dependence in two districts of Union Territory of Jammu & Kashmir: Special focus on opioids. *J Family Med Prim Care*. 2021;10(1):414-20.
7. Din NU, Khan AW, Suhaff AA, Hussain Z, Ganai AM, Ahmad MS. Socio-demographic & clinical profile of patients with substance use disorders seeking treatment: A hospital-based study. *Res Med Eng Sci*. 2019;7(4):808-14.
8. Bhat BA, Dar SA, Hussain A. Sociodemographic profile, pattern of opioid use, and clinical profile in patients with opioid use disorders attending the de-addiction center of a tertiary care hospital in North India. *Indian Journal of Social Psychiatry*. 2019;35(3):173-78.
9. Prajapati BB, Dedun MR, Jalfava H, Shukla A. A study of socio-demographic profile and pattern of drug use among substance abusers attending mind care de-addiction center in Ahmedabad. *Int J Community Med Public Health*. 2019;6(1):286-89.
10. Arora H, Gupta S, Kajal KS, Padda P, Monga S, Devgan S, et al. Evaluation of socio-demographic profile of the drug abusers visiting drug deaddiction centre at Faridkot, Punjab. *J Adv Med Dent Sci Res*. 2016;4(2):135-41.
11. Ambekar A, Agrawal A, Rao R, Mishra AK, Khandelwal SK, Chadda RK on behalf of the group of investigators for the National Survey on Extent and Pattern of Substance Use in India (2019). Magnitude of Substance Use in India. New Delhi: Ministry of Social Justice and Empowerment, Government of India.
12. Roy A, Sh P, Devi KS, Haokip P, Laldinmawii G, Damrolien S. Seroprevalence of hepatitis B and hepatitis C in people who inject drugs and other high risk groups in a tertiary care hospital in Northeast India. *International Journal of Community Medicine and Public Health*. 2017 Sep;4(9):3306.
13. National AIDS Control Organization & ICMR-National Institute of Medical Statistics (2022). India HIV Estimates 2021: Fact Sheet. New Delhi: NACO, Ministry of Health and Family Welfare, Government of India.