Helping persons with addiction: 2

Alcohol, drug misuse and other addictions: What to know and how to get help

National Institute of Mental Health and Neuro Sciences (NIMHANS) De-Addiction Centre

2009
Title: Alcohol, Drug Misuse and other Addictions: What to know and how to get help.

Copyright: De-Addiction Centre, NIMHANS, Bangalore
ISBN:

This booklet is produced by the De-Addiction Centre, NIMHANS. It is based on educational material compiled from different sources primarily for the information kiosks. These kiosks, introduced in 2007, are intended to provide information to the general public, persons with addiction related problems and their family members. Inputs for this booklet have been provided by the staff of the De-Addiction Centre:
E Sinu Dasan, Psychiatric Social Worker
Srijayan, Senior Resident
Muralidharan K, Senior Resident
Arun Gupta, Senior Resident
Bala Shanti Nikketha, Psychiatric Social Worker
Imran Khan, Psychiatric Social Worker
Vanitha C, Psychiatric Social Worker
Dhanasekara Pandian, Assistant Professor of Psychiatric Social Work
Deepa Shankar, Clinical Psychologist
Manoj Sharma, Assistant Professor of Mental Health and Social Psychology
Suman Rao, Associate Professor of Mental Health and Social Psychology
Prabhat Kumar Chand, Assistant Professor of Psychiatry
Vivek Benegal, Additional Professor of Psychiatry
Pratima Murthy, Professor of Psychiatry

Illustrations:
Vivek Benegal, Additional Professor of Psychiatry
*Some of the illustrations have been downloaded from the internet.

Our heartfelt thanks to all our nursing staff who have given valuable insights into inpatient care, to our patients, many of whom have provided a feedback for the draft versions of this booklet and to Ms Geeta Krishnan for secretarial assistance. We gratefully acknowledge the support of Dr D Nagaraja, Director and Vice-Chancellor, NIMHANS.
A Short History

- The De-addiction Centre at NIMHANS was established in 1991. In 1998, the NIMHANS De-Addiction Centre was recognized as the Regional Centre for the Southern Region by the Ministry of Health and Family Welfare, Government of India.
- A separate building was commissioned in 2002.
- It has now expanded into a 58 bedded centre.

Services provided at the Deaddiction Centre

- Assessment of the drug/alcohol use problems
- Detoxification
- Pharmacotherapy
- Individual counseling
- Group therapy
- Treatment for associated medical and psychiatric illness

Services provided at the deaddiction centre for families of substance users

- Brief counseling sessions in the outpatient department.
- Intensive family sessions that focus on:
  - The impact of substance use
  - Strengthening coping strategies
  - Helping to support abstinence
  - Behavioral modification in terms of communication, role functioning and reinforcement
  - Group work for family members.
  - Pre discharge counseling for the family members.
  - Home visits
  - Assessment of children

Outreach services

We have provided services and models of care for NGOs and workplaces in evolving substance use prevention programs

Research from the center has focused on

- Extent of alcohol and drug problems in the community (Epidemiological research)
- Examining brain changes in persons with high vulnerability to addiction (Imaging and electrophysiological)
- Treatment and Outcome studies

Training programs include

- Training of post-graduates in medicine and mental health
- Workshops/Seminars/Symposia at regional, national and international levels
- Regular training on substance use management to medical and other health professionals
**Drugs of abuse: What are they?**

**What are drugs of abuse and how do they affect people?**
- A drug of abuse refers to any drug that alters mood or body function that can be habit-forming or addictive
- People generally use drugs because they like the way drugs make them feel
- Pleasure is a powerful force
- If one does something pleasurable, the brain is wired in such a way that one wants to do it again
- A person has control over his/her choice to start using drugs, but once started, the pleasurable effect of drugs makes one want to keep reusing
- Over time, the brain actually changes in certain ways that the powerful urge to use drugs controls the persons’ behavior.
- This is what it means by addiction.
- Someone who is addicted uses drugs without thinking or caring about the consequences
- Drugs that alter the mind and behaviour can cause problems even before addiction develops

**WHY DO PEOPLE START?**

1. **Curiosity And Peer Pressure**

![Curiosity And Peer Pressure Image]

2. **Myths About Beneficial Qualities Of Alcohol And Drugs**

3. **Imitation and Learning From Others**

![Imitation and Learning From Others Image]
How do drugs cause problems?
- By their behavioural effects
  - intoxication
  - removal of inhibition
  - impairment of memory
  - loss of control over one’s action
  - tendency to take risks under influence
- By leading to addiction

What is addiction?
- Addiction is a chronic, relapsing disease characterized by compulsive drug seeking and abuse and by long-lasting chemical changes in the brain
- It is a state of being dependent on a substance, which is harmful or dangerous for the physical and/or mental health of the person and for his social and economic well-being

All drugs of abuse affect the brain

Addiction is a brain disease
- Though each drug is different, the effects on the brain are common
- There is a circuit in the brain called the “reward pathway” which releases a chemical called dopamine when stimulated
- Release of dopamine causes the person to experience pleasure
- All addictive substances affect this circuit directly or indirectly

Long term effects on brain
- Prolonged drug use causes permanent changes in brain structure and function that persist even years after the person stops taking the drug
- Hence there is always a risk of relapse even after many years of stopping the drug

What is behavioural addiction?
- Some activities which may be normally performed some times become so excessive that they have features similar to that of substance addiction
- Normal behaviors become addiction when:
  - They increase and become repetitive
  - The person gradually gets preoccupied with these activities neglecting his/her other aspects of life

**Is continued drug abuse a voluntary behavior?**
- The initial decision to use is voluntary; however, a person's ability to exert self control later becomes impaired
- Brains from drug-dependent individuals show changes in areas that are needed for judgment, decision making, learning memory and behavior control
- These changes alter the way the brain works, and may explain the compulsive and destructive behaviors of addiction

**Why do some people become addicted and others do not?**
- As with any other disease, vulnerability to addiction differs from person to person
- In general, the more risk factors an individual has, the greater the chance that taking drugs will lead to addiction
- "Protective factors” reduce a person's risk of developing addiction
- No single factor determines whether a person will become addicted
- The overall risk is influenced by:
  - Genes
  - Gender
  - Ethnicity
  - His or her developmental stage
  - The surrounding social environment (e.g., conditions at home, at school, and in the neighborhood)

**What environmental factors increase the risk of drug abuse and addiction?**
- Home and Family
- Friends and School
- Starting to use at young age
- Method of use: Smoking a drug or injecting it into a vein increases its addictive potential

*Addiction is a developmental disease - it typically begins in childhood or adolescence*

**Can I be treated of addiction?**
- Scientific research into addiction, has led experts to conclude that addiction is treatable chronic disease, like diabetes or hypertension
- Like these disorders it is chronic and relapsing
- It requires long-term work to recover from addiction, and relapse is common
- The changes in brain persist long after drug use is stopped
“Cure” is therefore not necessarily an attainable or appropriate goal.
In this respect, medically, addiction is more like hypertension -- which may require long-term treatment with medication and lifestyle changes, and which often recurs – rather than like fever, which gets cured and is forgotten.

How does treatment help?

- Timely counseling and treatment help to arrest the progression of the disease
- It allows the person to have improved functioning and a good quality of life
- It helps to anticipate and effectively deal with lapses and prevent a lapse from becoming a relapse

What are the treatment methods?

Treatment consists of
- Assessment
- Medications
- Individual Counseling
- Family Counseling
- Group Therapy
- After care
ALCOHOL

- It is the most widely used substance in the world, and has been for thousands of years
- Alcohol is a potentially addictive substance.

Types of alcohols in India
- Indian Made Foreign Liquors’ [IML] – Whisky, Brandy, Rum, Vodka, Gin etc. manufactured in India
- Beers of different strengths and wine
- Country liquor – manufactured in government-licensed factories, commonly called ‘arrack’
- Illicit drinks are illegal, but consumed widely. Examples are toddy, mahua and chang
- Methanol is the most dangerous adulterant in illicit alcohol and is often the cause of life threatening “hooch tragedies”

How does alcohol act
- Alcohol depresses the normal functions of the brain. At first it depresses the part of the brain that controls inhibitions.
- In small amounts: seems to calm down and relieves anxiety
- In higher doses: talkativeness, boisterousness
- At even higher doses: increased sedation, loss of control and balance
- And finally: unconsciousness, coma and even death.

Effect of alcohol on health
Alcohol consumption has
- numerous health and social consequences
- is an important contributor to death and disability
- affects most of the organs of the body
- Worldwide, alcohol causes 1.8 million deaths each year

Consequences of alcohol drinking

Normal Liver

Cirrhotic liver
Consequences of intoxication
- Motor vehicle crashes. Alcohol complicates diagnosis of trauma-related injury, may mask or mimic the signs of a head injury and complicate treatment
- Workplace accidents

Enlargement of heart due to alcohol consumption

**How does alcohol cause addiction?**
- Alcohol like other addictive substances, activates and affects the brain's pleasure circuit.
- Over time, the brain actually changes in certain ways so that a powerful urge to use alcohol controls the persons’ behavior.

**Withdrawal symptoms**
- Coarse tremors of hands, tongue or eyelids later
- Nausea/ vomiting
- Malaise/ weakness
- Increased pulse
- Sweating
- Elevated blood pressure
- Anxiety
- Depressed/ irritable mood
- Headache and sleeplessness

**Sometime one could have severe withdrawal and may have**
- Fits
- Disorientation
- Hallucinations,
- Illusions and delusions

**Social problems**
- marital disharmony and domestic violence
- neglect of children
- criminal behaviour such as driving offences, breach of the peace, shoplifting
- unsafe sex
- financial problems

**Family problems**

“Alcohol destroys the home much before it destroys the liver”

**Occupational problems**
- Poor work performance,
- Absenteeism
- Poor relationship with colleague
- Discipline problems
- Loss of job
- Industrial losses
- Losses to society

**Does alcohol have protective properties?**
- Incidence of heart disease in those who consume moderate amounts of some kinds of alcohol (an average of 1 to 2 drinks per day) has been shown to be lower than that in nondrinkers in some countries
- However with increased consumption the bad effects on health are many more and serious
- For the person beginning to drink alcohol, alcohol addiction and alcoholism is a real threat and it is NOT advisable to issue guidelines that may lead some persons to increase intake of alcohol or start drinking if they do not already do so.
Can one use without getting hooked?

- It would be ideal if the drug user can carefully balance the use of the more addictive drugs without becoming dependent on them.
- Getting hooked on a drug usually has two aspects:
  - Psychological dependency or craving
  - Physiological dependency
- It is impossible to specify the levels of drug use to avoid psychological dependency, or the 'craving' for a drug.
- Each individual has different levels of drugs when he would develop craving or withdrawal
- Unfortunately, it is not possible to give more accurate information on this for all users. Factors that would decide are:
  - Body weight
  - Strength of the drug
  - Way it is used
  - Situations it is used in
  - Variations from person to person on how easily their body adapts to the drug.

Controlled use not possible for all

- Most users find they cannot keep to just weekend use and may find their drug use spiraling out of control again, and abstinence may be the only long-term solution.
- Others may manage to only control their use until the next life crisis comes along.

The treatment of alcohol dependence includes

- Detoxification
- Medications to Decrease Craving
- Management of Relapse,
- Group Therapy
- Family Counseling
BEHAVIOURAL ADDICTION

What is behavior addiction?
- Some activities which are normally performed may some times become so excessive that they have features similar to that of substance addiction
- Normal behaviors become addiction when:
  - They increase and become repetitive
  - The person gradually gets preoccupied with these activities neglecting his/her other aspects of life

How are behavioral addictions similar to substance addiction?
Behavioral addictions have similarities with substance dependence like:
- Recurrent failure (pattern) to resist impulses to engage in specific behavior
- Frequently engaging in these behaviors to a greater extent or over a longer period of time than intended
- Persistent desire or unsuccessful efforts to stop, reduce, or control these behaviors

When does a normal behavior become addiction?
A normal behavior would become an addiction when there is:
- Continuing the behavior despite knowing that it is causing harm
- Need to increase the behavior to achieve the same pleasure as before
- Giving up or your social life, work and responsibilities because of the behavior.
- Distress, anxiety, restlessness, or irritability if unable to perform the behavior
What are benzodiazepines?
- Class of drugs familiar as sleeping pills or minor tranquilizers
- Only available on doctors prescription, usually given for treatment of sleeplessness, anxiety disorders

Brand names of common benzodiazepines
- Calmose, Valium (diazepam)
- Clonotril, Lonazep, Zicam (clonazepam)
- Alprax (alprazolam)
- Librium (chlordiazepoxide)

How do they act on the brain?
- Are brain depressants and induce sleep
- Act on specific brain regions and lead to chemical changes in the brain
- At lower doses they cause feeling of pleasure
- In higher doses they can depress the areas of brain related to breathing and can cause death

How do they cause addiction?
- They act of certain areas in the brain and effect the functions of the brain
- Finally they release the chemical dopamine at the pleasure circuit and the person feels good
- The person is motivated to continue the drug for these pleasurable effects
- Later on he requires higher dose to get the same effects and may be using doses that are lethal to another person.

What are the signs of intoxication?
- Drowsiness
- Tremors
- Nausea
- Vomiting
- Difficulty in walking
- In excessive doses can cause coma and death

What are the withdrawal signs?
- Sleeplessness
- Tremors
- Body aches
- Irritability
- Lack of interest in activities
- Tension and worries
“fits” if stopped suddenly

**Medical problems on repeated use**
- Sleep disturbance
- Seizures
- Toxicity with overdose of the drug
CANNABIS

It is a common psychoactive substance used widely. It is obtained from the plant cannabis sativa

How is cannabis used?
Commonly used forms are
- Marijuana or ganja: The leaves and flowering tops of female plant
- Hashish or charas: Concentrated resin
- Bhang: A beverage prepared by grinding cannabis leaves in milk and boiling with spices and other ingredients
- Hash oil: An highly concentrated oily mixture
- These forms are either eaten, smoked or vaporized

Cannabis contains a chemical Δ9 tetra hydrocannabinol that affects the brain and like other substances finally is release of dopamine at the “pleasure centers” and continued use causes dependence

What are the immediate effects of using cannabis?
- Initially cannabis causes a feeling of relaxation

In Higher doses it causes
- Behavioral problems
- Dry mouth
- Increased heart rate
- Red eyes
- Hallucinations and sensory distortions
- Nausea and vomiting

What are the features of cannabis withdrawal?
- Irritability, anger
- Anxiety
- Physical tension, restlessness
- Decreases in appetite and mood
- Decreased body weight
- Shakiness and sleep problems
- Withdrawal first appear within 24 hours, most pronounced for the first 10 days and can last up to 28 days.

How is cannabis harmful to health?
- Cannabis contains more tar than tobacco, and has a higher concentration of cancer-causing agents
- With more tar smoking cannabis presents the same health problems as tobacco: bronchitis, emphysema and lung cancer.
- It can disrupt the control of blood pressure increasing the risk of fainting
- Many people use cannabis initially and then switch to more dangerous drugs
- Cannabis can cause psychosis in people who are predisposed

Cannabis has been used as medicine too
- Cannabis is used for some illnesses like
- Cancer: To suppress nausea brought on by chemotherapy
- AIDS: To increase appetite and prevent weight-loss
- Glaucoma: an eye condition resulting in increased eye pressure
- Severe muscular spasm.

**What are the treatment available for cannabis addiction?**
- Medications are given to control the withdrawal symptoms
- There are no specific medications to control craving
- Individual Counselling
- Group Therapy
- Family Counseling
- Treating the psychiatric disorder like psychosis if present
**OPIOIDS**

**What are Opioids?**
- Opioids are natural or synthetic derivatives of poppy plant
- Used from time immemorial for a variety of medicinal and recreational use.

**What are different kinds of Opioids?**
- Natural – opium, morphine and codeine
- Semi-synthetic - heroin
- Fully synthetic – pethidine, methadone.

**Commonly abused Opioid medications**
- Called prescription narcotics
- Include morphine, pethidine, pentazocine, dextropropoxyphene, codeine
- Codeine and diphenoxylate (Lomotil) are used to relieve coughs and diarrhea

**How do Opioids act on the body?**
- Act on the brain and body by attaching to specific receptors
- Block the sensation of pain
- Produce drowsiness, nausea, constipation
- Can depress respiration in high doses
- Give feeling of high

**How do they cause addiction?**
- Once started these drugs cause specific changes in the brain chemical balance
- Person gets pleasure on use for the first time, uses repeatedly and gets hooked
What are signs of intoxication?
- A ("rush") accompanied by a warm flushing of the skin, a dry mouth, and heavy extremities.
- Following this the user goes into an alternately wakeful and drowsy state.
- May become confused with higher doses.

What are signs of withdrawal?
- Watering from the eyes
- Loose stools
- Pain abdomen
- Strange feeling in the skin
- Sadness and mood changes.
- Sleep reduction
- Body pains
- Vomiting

When does withdrawal start?
- Within few hours after the last administration of substances such as heroin
- Peak between 48 and 72 hours after the last dose and subside after about a week.
- Sudden withdrawal by heavy user may be life threatening
- Moderate withdrawal signs may last longer

Medical problems due to opioid use
- Chronic intravenous heroin users may develop collapsed veins
- Infections of the heart
- Liver disease
- Pneumonia
- Sharing needles can cause AIDS and hepatitis
- Severe scarring due to injecting heroin intramuscularly
- Infection of heart due intravenous injections

What are the treatments available?
- Assessment
- Inpatient or outpatient treatment
- Detoxification
- Maintenance treatment
- Individual counseling
- Group therapy
- Family counseling
TOBACCO

What are the contents of cigarette?
Cigarettes contain more than 4000 chemical compounds and at least 400 toxic substances.

How does tobacco cause addiction?
- Once inside the brain, nicotine, like most addictive drugs, triggers the release of chemicals associated with euphoria and pleasure.

Addiction: Both chemical and behavioral
- Like other substances finally there is release of dopamine at the “pleasure centers” and continued use causes dependence
- In addition to chemical effects, experience of holding and lighting a cigarette or bidi, associating a smoke with coffee, alcohol or food, can maintain the habit
**What are the problems with tobacco?**
Symptoms of nicotine withdrawal
- Irritability
- Impatience
- Hostility
- Anxiety
- Depressed mood
- Difficulty concentrating
- Restlessness
- Decreased heart rate
- Increased appetite or weight gain

**How soon do withdrawals start and how long do they last?**
- The effects of nicotine withdrawal are different for each person.
- In general, the symptoms start with in a day of quitting are worst during the first few days after quitting use of tobacco.
- The symptoms gradually get better over the next few weeks or months.
- Most people no longer feel the effects of withdrawal 6 to 8 weeks after quitting

**Health impacts**
Smoking effects most of the organs of our body
Changes in lung due to smoking
Smoking increases the risk of heart attacks

Quitting Tobacco Use

- A few people can stop smoking tobacco use themselves however most others need professional help.
- Professional help includes:
  - A detailed assessment
  - Counselling
  - Medication
- Some may require additional therapy
VOLATILE SOLVENTS

What are inhalants?
Inhalants are substances that produce chemical vapors that are inhaled and used as psychoactive substance.

Which are commonly used inhalants?
- Eraser fluids
- Petroleum products
- Paint thinners or removers
- Dry-cleaning fluids
- Gasoline
- Glue

How are inhalants used?
- Inhalants can be
- "Sniffing" or "snorting" fumes from containers
- Spraying directly over the nose or mouth
- "Bagging": inhaled from substances put inside a plastic bag
- "Huffing": Inhalant-soaked cloth is stuffed in the mouth
- Inhaling from balloons filled with nitrous oxide

How do they affect the body?
- Inhaled
- Absorbed through the lungs
- Within seconds reaches brain
- Intoxication effects as slurring of speech, incoordination, euphoria, dizziness.

Complications
- With successive inhalations,
- can suffer loss of consciousness and death.
- After heavy use of inhalants, abusers may feel drowsy for several hours
- experience a lingering headache.

Problem with use of inhalants
1. Are often among the first drugs that young children use.
2. Gateway to other hard drugs
3. Suffer from memory and neurological dysfunction and may experience multiple psychological and social problems.
Complications of repeated and prolonged use

- Breathing difficulty - from repeated inhalations, which lead to high concentrations of inhaled fumes displacing the available oxygen in the lungs;
- Inability to breathe - from blocking air from entering the lungs when inhaling fumes from a plastic bag placed over the head;
- “fits” - caused by abnormal electrical discharges in the brain;
- Coma - the brain shuts down all but the most vital functions
- Choking - from inhalation of vomit after inhalant use; or
- Fatal injury - from accidents, including motor vehicle fatalities, suffered while intoxicated.
- Harmful irreversible effects that may be caused by abuse of specific solvents include:
  - Hearing
  - Abnormal sensation in the limb
  - Central nervous system or brain damage
  - Problems with blood production
  - Bone marrow damage—benzene (gasoline)
  - Serious but potentially reversible effects include:
  - Liver and kidney damage
  - Blood oxygen
TYPES OF TREATMENT

1. Pharmacological Treatment
   Medications are given to control the withdrawal symptoms just after stopping drugs
   - Alcohol: Diazepam and lorazepam
   - Opioid: Buprenorphine or clonidine
   - Cannabis, inhalants: diazepam/lorazepam

Detoxification
   - Process by which an alcohol or drug dependent person is helped to stop the use of the substance in a supervised manner
   - withdrawal symptoms and the attendant risks are minimized.
   - Detoxification is the first step towards the treatment.

Assessment for Detoxification

Aim:
   - establish a diagnosis of alcohol or drug dependence
   - detect those at significant risk of developing a withdrawal syndrome
   - determine if a patient can be managed in a particular setting

Duration for Detoxification
   - Detoxification takes from 24-48 hours to 2-3 weeks, depending on the predominant substance used and the severity of dependence.

Setting for Detoxification
   - At home,
   - On an ambulatory care (outpatient) basis,
   - In a community residential detoxification unit, in a hospital ward or in a specialist detoxification unit.
   The severity of dependence and the patient’s medical condition determine the appropriate setting.

How is it Done?
   - Non-medicated detoxification
   - but it is often necessary to prescribe sedatives for few days

Principles of Clinical Management of Withdrawal
   They are summarized as the four S's:
   1. Sedation (or substitution)
   2. Symptomatic relief
   3. Supplements
   4. Supportive environment
1. Sedation (Or Substitution)
   - Appropriate sedation can prevent, abort or relieve withdrawal to a large extent.
   - Diazepam is the usual drug prescribed for sedation in alcohol and benzodiazepine withdrawal.
   - Diazepam is also helpful in detoxification for other drugs.
   - Clonidine is prescribed for hospitalised patients undergoing opioid.
   - Some drugs as buprenorphine and methadone are being used for opioid withdrawal.
   - Similarly, in tobacco cessation, nicotine substitution is used to relieve withdrawal.

2. Symptomatic Relief
   - They should be treated on an as required basis, according to the particular symptom complex.
   - It may be drugs as anti-diarrhoeal drugs, drugs against gastritis, multivitamins.

3. Supportive Care and Environment
   - Noisy, uncomfortable, over-stimulating and/or threatening environments aggravate withdrawal states.

4. Alcohol Detoxification
   - Benzodiazepine class of drugs are main choice of drugs (eg. Diazepam, chlordiazepoxide, lorazepam).
   - The drugs are tapered gradually over 7-10 days.
   - Lorazepam is used in those with suspected liver dysfunction, whereas in other cases diazepam is commonly used.

B. Supplements
   - Thiamine and B-vitamin deficiency occurs in patients with alcohol dependence.
   - Thiamine 100-150 mg/day is given to all patients with alcohol dependence.
   - Fluid and electrolyte balance is maintained.

Tobacco Detoxification
   - Initially chewing gums containing nicotine may be used if the withdrawal symptoms are severe.
   - Also behavioral methods are also taught.

Opioid Detoxification
   - Clonidine is used to suppress signs and symptoms of opioid withdrawal. For heroin withdrawal.
   - Clonidine is started at a dose of 0.1 to 0.2 mg every four hours, which is tapered starting after day 3, with treatment lasting a total of about 10 days.
   - Sublingual buprenorphine provides an effective and comfortable withdrawal and it appears to be superior to clonidine in this regard.
   - Buprenorphine is usually started at 4 to 16 mg daily.
Benzodiazepine Detoxification
- The dosage of benzodiazepines must be reduced slowly. As rapid reduction can cause unpleasant effects.
- Slow withdrawal means tapering dosage gradually, usually over a period of some weeks or months.
- Initial few days substitution with long acting benzodiazepines as diazepam are used to reduce the intensity of the withdrawal symptoms.

Amphetamine Detoxification
- Sedation is provided in the first few days with diazepam usually. Other drugs for sedation have also been used.
- For symptomatic relief of the aches and pains, painkillers are prescribed for the initial few days.
- Supplementary vitamins are also prescribed.
- Encouraged to maintain a good food intake.

Cocaine Detoxification
- Initially used drugs help in controlling agitation of the patient. Usually, diazepam is used in this phase.
- For supportive management, painkillers and vitamin supplements are provided.

Inhalants Detoxification
- There is no specific detoxification agent. Initial withdrawal symptoms are managed with diazepam or other benzodiazepines.
- Vitamin supplements.
- Supporting environment is provided.

Cannabis Detoxification
- Initial symptoms are usually managed with diazepam.
- In some cases, antipsychotic drugs in low doses may be needed.
- Supportive caring environment is provided.

Medications for Alcohol
- Disulfiram: acts by causing an unpleasant reaction if alcohol is consumed while person is on disulfiram.
- Acamprosate: decreases craving.
- Naltrexone: decreases the pleasure effects of alcohol.
- Topiramate and baclofen: decrease craving.

When are the Drugs Started?
- Disulfiram is started after 2 weeks of the last drink.
- Other drugs can be started even when the person has been continuing to drink alcohol.
Common side effects of Drugs?

Disulfiram
- Disulfiram can cause severe reaction if person drinks alcohol seen as flushing, nausea, dizziness, headache
- In severe reactions, there could be respiratory depression, heart problems and even death.

Naltrexone
- Nausea, vomiting and abdominal pain
- Headache and fatigue
- Liver problems

Acamprosate
- Diarrhea
- Headache
- Flatulence
- Nausea
- Vomiting
- Dyspepsia

Topiramate
- Dizziness
- Drowsiness
- Unstable gait
- Impaired concentration
- Confusion, fatigue
- Tingling sensation
- Speech difficulties

Medications for Tobacco
- Bupropion- dose 75-150mg/day
- Acts by reducing the urge to smoke
- Not to be used for seizure disorder
- Selegeline- 5-10 mg/day
- decreases craving

Medications for Opioids
- Buprenorphine: It acts partially like an opioid and substitutes the effects of the drugs on brain
- Naltrexone: Acts by reducing the urge to use opioid If person uses opioid over naltrexone does not get any effect
**Medications for Cannabis**
- No specific agent is available
- Baclofen 20-60 mg/day has been used recently.
- It probably helps in the reduction of the urge to use the drug

**Medications for Inhalants**
- No specific anti-craving agent is available
- Baclofen is being tried. It reduces the urge to use the drug

**Stimulants**
- No specific agents available for stimulants
- Naltrexone has been tried
PSYCHOSOCIAL TREATMENT

Relapse Prevention

What is Relapse?
- Who is getting treatment for drugs or alcohol problem slips back or starts using the substance again.
- Relapse does not mean that you would not get well, it is a part of the getting well process.

What is lapse?
- Lapse is the first episode of drug use after one stops taking the drug.

What are common causes of Relapse?
- Urge to take the drug
- Boredom, sadness, anger
- Activities that were associated with prior drug use
- Pressure from friends
- Stress and tension
- Testing control
- Positive mood states like feeling happy

What Triggers the Relapse?
Giving in to temptations or urges.

Interpersonal Triggers
Social pressure

Indirect Social Pressure
Relapse pathway

Common Beliefs Which Make People Drink Again

- “Drinking helps me relax”,
- “Drinking makes me more confident”,
- “Everyone else drinks so that makes it all right for me to drink too”.

Testing Personal Control.

Use of substance to “Test” if one can control or use once in a while; to “Just try it once” to see what happens; testing the effects of treatment or one’s own “Willpower”. 
How to cope with Craving?
  o Craving is like a wave it builds up reaches a peak and then comes down. The wave may last from a few minutes to a few hours
  o Recognize craving triggers and avoid them

Identify the triggers
  o Internal triggers like Boredom, frustration, loneliness, anxiety etc
  o External triggers like Arguments, bars, other people drinking etc.

What needs to be done if you start using again?
  o Relapses are common in the treatment of substance use disorders.
  o If you start using again need to contact the doctor again
  o Relapse is not the end of treatment.

How to handle friends who call you for a drink?
  o Be direct: Look directly into the eyes and use a firm sincere tone of voice to say “NO”. Show the person that you mean business.
  o Repeat yourself if necessary in a firmer manner
  o Acknowledge the truth that alcohol has caused problems in your life and you are struggling to stay sober
  o No excuses to be offered
  o Suggest alternatives
  o Express feelings directly
  o Do not prolong conversation
  o Leave the situation immediately if the person continues

Life Style Modifications
Promote lifelong habit change and create greater mental, emotional, physical and spiritual wellbeing
  o A program of exercise; meditation, yoga, or reading
  o Increase social activities
  o Develop “positive addictions” (e.g. running, meditation, hiking, hobbies)
GROUP THERAPY

What is Group Therapy?

- It is a form of counseling involving a group of people and a counselor in which participants are encouraged to discuss and analyze their problems.
- Participants join and leave the group according to their admission and discharge timings.
- Groups are educative in nature.

How are they conducted?

- In a week four group sessions are conducted by psychiatric social workers at the deaddiction center.
- Group contains 5-10 members (often speaking same language).
- Each session lasts for a duration of 45 minutes to an hour.

Why should one attend groups?

- Groups provide positive peer support and pressure to abstain from drugs.
- Groups enable people who use drugs to witness the recovery of others.
- Groups instill hope, and a sense that “If he can make it, so can I.”

Why should one attend groups?

- Group acts as a forum for self-expression.
- Group teaches new skills to handle your problems.
- Groups enrich members with insight and guidance.

Role of Family in the Treatment Process?

Why is the Family Important in Treatment?

- Families play an important role in recovery from drugs.
- Family members help the patient to maintain abstinence.
- They are the primary care givers for the person after discharge.
- Families need support.

How can Family help?

- Motivate the person to leave drugs.
- Cooperate in the treatment process.
- Supervise medications.
- Reinforcing abstinence.
- Supporting during stress.
- Reintegrating with the society.

How Addiction affects Family?

- The family members go through many difficulties due to drug problems like:
  - Financial difficulty.
  - Fights with spouse.
  - Loss of support from neighbors and other family members.
o The behavior of the parents and problems at home can affect the children psychologically
o Family counseling helps the family members to handle these problems effectively
o The aim is to help to be a “Happy Family”

Do I need admission?
- May be done as inpatient or outpatient
- Depends from individual to individual and degree of problems

Home/Outpatient treatment:
Done if:
- not severely dependent on drugs
- no medical or psychiatric complications requiring close observation or treatment
- has a drug-free and supportive home environment and family members available to support the patient

Hospital/Specialist Treatment:
Needs admission if
- Severely dependent
- Associated illness or injury
- Use of multiple drugs
- Poor family support
- Previously failed home treatment

Duration of stay
- The treatment at the center needs 21 days stay at the hospital
- May require longer stay if there are severe problems

After discharge how often should one follow up?
- Usually once a week for first month after discharge
- Later twice a month for second month after discharge
- Later once a month for 1 year.

How long do I need to take medication?
- For one year

Why I need to take medications for one year?
- To control the craving
- To prevent relapse
Contact Address:

The De-Addiction Center
National Institute of Mental Health and Neuro Sciences
Bangalore.

Out-patient days: Saturdays and Mondays
Screening time: 9.00 -11.30 am

Phone No: 080-26995360
Email: nimhansdeaddiction@gmail.com