

## DRUG AND ALCOHOL DEPENDENCE

Mr. Deepak Vastrad\* | Dr. Geeta Chaudhary\*\* | Dr. Susheel Kumar V Ronad\*\*\*

\*Ph.D. Scholar, Himalayan University, Itanagar, Arunachal Pradesh, India.

\*\*Research Supervisor, Himalayan University, Itanagar, Arunachal Pradesh, India.

\*\*\*Co-Supervisor, Himalayan University, Itanagar, Arunachal Pradesh, India.

DOI: <http://doi.org/10.47211/idcij.2023.v10i01.012>**ABSTRACT**

People with co-occurring alcohol and other drug use disorders are more likely to have psychiatric disorders such as personality, mood, and anxiety disorders; they are more likely to attempt suicide and to suffer health problems. Problem drinking has multiple causes, with genetic, physiological, psychological, and social factors all playing a role. Not every individual is equally affected by each cause. For some alcohol abusers, psychological traits such as impulsiveness, low self-esteem and a need for approval prompt inappropriate drinking. Some individuals drink to cope with or "medicate" emotional problems. A person only needs two of these signs and symptoms to receive an alcohol use disorder diagnosis. Having more symptoms could indicate a more serious condition.

**KEYWORDS:** Alcohol dependence, drugs, emotional problems.

**ABOUT AUTHORS:**

Author Mr. Deepak Vastrad is a Research Scholar at Himalayan University in Itanagar, Arunachal Pradesh, India.



Author Dr. Geeta Chaudhary is Research Supervisor, Himalayan University, Itanagar, Arunachal Pradesh, India. She has presented papers in various conferences and also has many publications to her name.



Author Dr. Susheel Kumar V Ronad is Co-Supervisor, Himalayan University, Itanagar, Arunachal Pradesh, India. He has published articles in various national and International Journals. He has organized and participated in webinars, seminars and conferences.

**INTRODUCTION**

Drug and alcohol dependence often go hand in hand. Research shows that people who are dependent on alcohol are much more likely than the general population to use drugs, and people with drug dependence are much more likely to drink alcohol (Falk D et al 2008). For example, Staines and colleagues (Staines, G.L et al 2001) found that, of 248 alcoholics seeking treatment, 64 percent met the criteria for a drug use disorder at some point in their lifetime.

Patients with co-occurring alcohol and other drug use disorders also are likely to have more severe dependence-related problems than those without combined disorders—that is, they meet a higher number of diagnostic criteria for each disorder (three out of seven criteria are required to meet the diagnosis of dependence). People with co-occurring alcohol and other drug use disorders are more likely to have psychiatric disorders such as personality, mood, and anxiety disorders; they are more likely to attempt suicide and to suffer health problems. People who use both alcohol and drugs also are at risk for dangerous interactions between these substances. For example, a person who uses alcohol with benzodiazepines, whether these drugs are prescribed or taken illegally, is at increased risk of fatal poisoning. (Arnaout et al 2008).

Dependence on illicit and prescription drugs can develop among people who use them regularly over a sustained period, and is characterized by a loss of control over use and increased prominence of use of the substance in a person's life. The ICD 10th edition definition 3, which was broadly similar to the American Psychiatric Association's DSM-IV definition 4, requires that at least three of the following criteria are met: a strong desire to take the substance; impaired control over use; a withdrawal syndrome on ceasing or reducing use; tolerance to the effects of the drug; a disproportionate amount of time spent by the user obtaining, using, and recovering from drug use; and continuing to take drugs despite the problems that occur.

Substance use also carries risks of other adverse health outcomes. For example, injection of drugs carries risks if non-sterile injecting equipment is used, because of potential exposure to HIV and viral hepatitis, other infections, and other injection-related injuries and diseases such as sepsis, thrombosis, and endocarditis. Alcohol use increases the risk of unintentional and intentional injury, and both non-communicable (e.g., cancer, gastrointestinal, and cardiovascular) and infectious (e.g., tuberculosis and pneumonia) diseases. Use of both alcohol and drugs can cause harm to others.

**CAUSES OF ALCOHOL DISORDERS**

Problem drinking has multiple causes, with genetic, physiological, psychological, and social factors all playing a role. Not every individual is equally affected by each cause. For some alcohol abusers, psychological traits such as impulsiveness, low self-esteem and a need for approval prompt inappropriate drinking. Some individuals drink to cope with or "medicate" emotional problems. Social and environmental factors such as peer pressure and the easy availability of alcohol can play key roles. Poverty and physical or sexual abuse also increase the odds of developing alcohol dependence.

Genetic factors make some people especially vulnerable to alcohol dependence. Contrary to myth, being able to "hold your liquor" means you're probably more at risk not less for alcohol problems. Yet a family history of alcohol problems doesn't mean that children will automatically grow up to have the same problems. Nor does the absence of family drinking problems necessarily protect children from developing these problems.

Once people begin drinking excessively, the problem can perpetuate itself. Heavy drinking can cause physiological changes that make more drinking the only way to avoid discomfort. Individuals with alcohol dependence may drink partly to reduce or avoid withdrawal symptoms. (American Psychological Association 2012)

**SYMPTOMS OF ALCOHOL USE DISORDER,**

- Blacking out or not remembering things that happened.
- Continuing to drink even if it causes distress or harm to you or others.
- Drinking more or longer than you planned.
- Feeling irritable or cranky when you're not drinking.
- Frequent hangovers.
- Getting into dangerous situations when you're drinking (for example, driving, having unsafe sex or falling).
- Giving up activities so you can drink.
- Having cravings for alcohol.
- Having repeated problems with work, school, relationships or the law because of drinking.
- Needing to drink more and more to get the same effect.
- Not being able to stop drinking once you've started.
- Spending a lot of time drinking or recovering from drinking.
- Wanting to cut back but not being able to.
- Obsessing over alcohol.

A person with alcohol use disorder also might experience symptoms of withdrawal when they cut back or stop drinking, such as:

- Anxiety.
- Depression.
- Irritability.
- Nausea, dry heaves.
- Racing heart.
- Restlessness.
- Shakiness.
- Sweating.
- Trouble sleeping.
- Seizures.
- Seeing things that aren't there (hallucinations).
- Delirium tremens.
- Coma and death.

#### DIAGNOSIS OF ALCOHOL DEPENDENCE

Physicians and mental health experts use a combination of visual assessment and interview skills to accurately diagnose alcohol issues, including abuse, addiction and dependence. In some cases, a physical exam could be used to identify intoxication or withdrawal.

The formal diagnosis for someone with a problematic relationship with alcohol is alcohol use disorder. To diagnose this condition, a professional would investigate the most important factors like:

- Drinking more often and in larger amounts than intended
- Inability to follow through on intentions to stop drinking
- A large amount of time spent drinking or being hungover
- Strong cravings to continue alcohol use
- Neglect of normal activities
- Increased conflict in relationships
- Drinking alcohol even though it is causing physical or mental health problems
- Drinking in a situation where there is great danger, like while driving
- Increased physical tolerance to alcohol
- The presence of withdrawal symptoms when alcohol use is stopped

A person only needs two of these signs and symptoms to receive an alcohol use disorder diagnosis. Having more symptoms could indicate a more serious condition.

While these factors may be used to diagnose alcohol abuse, an accurate diagnosis depends upon your honesty with your treatment provider. Being honest with a doctor is vital to understanding if alcohol abuse is something that should be diagnosed.

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