

# **International Journal of Research Publication and Reviews**

Journal homepage: www.ijrpr.com ISSN 2582-7421

# **DRUG ADDICTION: A BIG CHALLENGE FOR YOUTH**

# Praduman Kumar Pandit<sup>1</sup>, Dr. Himani Tiwari<sup>2</sup>, Dr. Gaurav Kumar Sharma<sup>3</sup>, Dr. Kaushal K. Chandrul<sup>4</sup>

<sup>1</sup>B. Pharmacy (Final Year), <sup>2</sup>Supervisor, <sup>3</sup>Head of Department, <sup>4</sup>Principal

#### ABSTRACT

Drug addiction is a chronic, relapsing disorder during which compulsive drug-seeking and drug-taking behavior persists despite serious negative consequences. Theories of addiction have mainly been developed from neurobiological evidence and data from studies of learning behavior and memory mechanisms. the planet Health Organization and the American Psychiatric Association use the term "substance dependence" rather than "drug addiction." the danger for developing an addiction is exceptionally high during the adolescent and young adult years, and worldwide families and communities are suffering due to addiction's widespread impact. White plague causes sufferers to experience physical and psychological dependency on illicit, mind-altering including illegal intoxicants like cocaine, heroin, methamphetamine, and PCP. White plague is treatable and can be successfully managed. More excellent news is that drug use and addiction are preventable. Teachers, parents, and health care providers have crucial roles in educating children and preventing drug use and addiction. Individuals who start using drugs and alcohol as teenagers are much more likely to develop an addiction than those who initiate use as an adult. In fact, addiction might be seen as primarily an adolescent illness as most peoples' addictions initially develop during this time period. Addiction may be a brain-based disorder. For many, the disorder is present before they ever begin using substances. Because the drug epidemic continues to painstakingly seep into the country's social and cultural aspects, substance abuse naturally trickles into our younger generation - a generation refusing to be left out. Making up one-fifth of the population, 15-24 year-olds carry with them India's future. The youth of our nation will eventually determine the country's moral, political, and social persuasions. Bearing the burden of a densely populated country like India is not any small task. And substance abuse does nothing to lighten the load. The youth of our nation features a massive responsibility. And as India's potential rests delicately in their hands the drug epidemic continues to rage on the sidelines. Even as a single footballer's attitude and actions can hurt his whole team and cause them to lose the match, illicit drugs have the potential to thwart the success of India's future.

Keywords: white plague, healthcare, youth, children's, alcohol, world health organization.

# 1. INTRODUCTION

The abuse of medicine and alcohol is a major problem worldwide, costing 250 billion dollars annually thanks to premature deaths, healthcare expenditures, reduction of productivity, lost earnings and drug-related crime within the United States alone (estimated by U.S. National Institute on substance abuse and National Institute on Alcohol Abuse and Alcoholism). White plague is considered to be a chronic, relapsing disorder characterized by compulsive drug-seeking, by continued use despite serious negative socioeconomic and health consequences, and by loss of control over drug use . the planet Health Organization and the American Psychiatric Association use the term "substance dependence" rather than "drug addiction". Both terms are used interchangeably within the literature, but the latter term is a smaller amount likely to be confused with physical dependence and emphasizes the behavioral component of the process. consistent with the DSM-IV (American Psychiatric Association 1994), three or more of the subsequent must be present in order to diagnose substance dependence: a) symptoms of tolerance, b) symptoms of withdrawal, c) large amounts of drug taken, d) unsuccessful attempts or desire to regulate use, e) considerable time spent obtaining the substance, f) reduction of social and occupational activities thanks to abuse, g) continued use of a substance despite physical or psychological problems. Repeated drug use arises from the drug's neurochemical actions that produce positive reinforcing effects, progressively resulting in neurobiological changes in the brain reward circuits and behaviors characteristic of addiction: tolerance, sensitization, dependence, withdrawal and craving. The risk of addiction and how fast you become addicted varies by drug. Some drugs, such as opioid painkillers, have a higher risk and cause addiction more quickly than others. As time passes, you may need larger doses of the drug to get high. Soon you may need the drug just to feel good. As your drug use increases, you may find that it's increasingly difficult to go without the drug. Attempts to stop drug use may cause intense cravings and make you feel physically ill (withdrawal symptoms). You may need help from your doctor, family, friends, support groups or an organized treatment program to overcome your drug addiction and stay drug-free. Drug addiction, also called substance dependence or dependence syndrome, is a condition where a person feels a strong need to take a drug. The transition from casual drug use to white plague might also involve an additional source of reinforcement, like the reduction of a negative emotional state during acute abstinence. The mixture of positive (e.g., euphoria) and negative (e.g., alleviation of dysphasia or withdrawal symptoms) reinforcement may provide a strong motivational force for compulsive drug taking. Associated neurobiological changes and behavioral abnormalities and deficits in cognitive function may persist for months or years after discontinuation of drug use.

# 2. DRUG ABUSE IN INDIA

June 26 per annum is celebrated as International Day against Drug Abuse and Illicit Trafficking every year. It's an exercise undertaken by the world community to sensitize the people in general and the youth in Particular, to the menace of medicine. The image is grim if the world statistics on the drugs scenario is taken into account. With a turnover of around \$500 billion, it's the third-largest business in the world, next to petroleum and arms trade. About 190 million people everywhere the world consume one drug or the other. White plague causes immense human distress and the illegal production and distribution of drugs have spawned crime and violence worldwide. Today, there's no part of the world that is free from the curse of drug trafficking and drug addiction. Many drug addicts, everywhere the world, are leading miserable lives, between life and death. India too is caught during this vicious circle of drug abuse, and therefore the numbers of drug addicts are increasing day by day. Consistent with a UN report, a million heroin addicts are registered in India, and unofficially there are as many as five million. What started off as casual use among a minuscule population of highincome group youth within the metro has permeated to all sections of society? Inhalation of heroin alone has given way to intravenous drug use, that too together with other sedatives and painkillers. This has increased the intensity of the effect, hastened the method of addiction and complicated the process of recovery. Cannabis, heroin, and Indian-produced pharmaceutical drugs are the foremost frequently abused drugs in India. Cannabis products, often called chars, bhang, or ganja, are abused throughout the country because it's attained some amount of religious sanctity because of its association with some Hindu deities. The International Narcotics control panels in its 2002 report released in Vienna pointed out that in India persons addicted to opiates are shifting their drug of choice from opium to heroin. The pharmaceutical products containing narcotic drugs also are increasingly being abused. The intravenous injections of analgesics like Dextropropoxphene, etc., also are reported from many states, because it is easily available at 1/10th the cost of heroin.

The codeine based cough syrups still be diverted from the domestic market for abuse. Drug abuse is a complex phenomenon, which has various social, cultural, biological, geographical, historical and economic aspects. The disintegration of the old joint family system, absence of parental love and care in modern families where both parents are working, decline of old religious and moral values, etc., cause a rise in the number of drug addicts who take drugs to escape hard realities of life. Drug use, misuse or abuse is additionally primarily due to the nature of the drug abused, the personality of the individual and therefore the Addict's immediate environment. The processes of industrialization, urbanization and migration have led to loosening of the normal methods of social control, rendering a private vulnerable to the stresses and strains of modern life. The fast-changing social milieu, among other factors, is especially contributing to the proliferation of drug abuse, both of traditional and of latest psychoactive substances. The introduction of synthetic drugs and intravenous drug use resulting in HIV/AIDS has added a new dimension to the problem, especially within the Northeast states of the country. Drug abuse has led to a detrimental impact on the society. It's led to increase in the crime rate. Addicts resort to crime to buy their drugs. Drugs remove inhibition and impair judgment, egging one on to commit offences. Incidence of eve-teasing, group clashes, assault and impulsive murders increase with substance abuse. A side from affecting financial stability, addiction increases conflicts and causes untold emotional pain for each member of the family. With most drug users being within the productive age group of 18-35 years, the loss in terms of human potential is incalculable. The damage to the physical, psychological, Moral and intellectual growth of the youth is extremely high. Adolescent substance abuse is one of the major areas of concern in adolescent and young people's behavior. It's estimated that, in India, by the time most boys reach the ninth grade, about 50 percent of them have tried at least one among the getaway drugs. However, there's a wide regional variation across states in terms of the incidence of substance abuse. For instance, a bigger proportion of teens in West Bengal and Andhra Pradesh use getaway drugs (about 60 percent in both the states) than Uttar Pradesh or Haryana (around 35 percent). Increase in incidences of HIV, hepatitis B and C and tuberculosis due to the community burdening addiction adds the reservoir of infection in the healthcare system further. Women in India face greater problems from substance abuse. The results include domestic violence and infection with HIV, also as the financial burden. Eighty-seven percent of addicts being treated during a de-addiction center run by the Delhi Police acknowledged being violent with family members. Most of the violence is directed against women and occurs in the context of demands for money to buy drugs. At the national level, substance abuse is intrinsically linked with racketeering, conspiracy, corruption, illegal money transfers, terrorism and violence, threatening the very stability of governments.

#### 3. DRUG ADDICTION VS DRUG ABUSE

While many of us use the terms drug abuse and addiction interchangeably, abuse and addiction have separate and distinct meanings. One can abuse drugs without necessarily being hooked in to drugs. The substance abuse definition focuses more around the way a person uses drugs, while the white plague definition includes the use of drugs and also the psychological and physiological effects the drug has on the body. It's important to know that drug abuse is an extreme desire to obtain, and use, increasing amounts of 1 or more substances. Substance abuse is a generic term for the abuse of any drug, including alcohol and cigarettes, white plague is the inability to stop using the drug in spite of numerous attempts definitions so as to correctly identify problem. It's also important to recollect that alcohol is also a drug and is included in the definitions of drug abuse and addiction. It is important to understand that even though these two definitions are different, they're both harmful. If you or someone you recognize has a problem with drug abuse and addiction, you'll read more about our substance abuse and ambulatory detox programs.

#### 4. TYPE OF DRUG ADDICTION

Drugs which are employed in Addiction

#### **Commonly Used Illegal Drugs:**

Drugs are classified during a number of ways. Many are potentially addictive and harmful. Samples of illegal drugs include:

Prescription medication (painkillers, stimulants, anti-anxiety pills), Methamphetamines, Cocaine, Opiates, Marijuana, Hallucinogens, toiletry, Benzodiazepines, Crystal Meth, Ecstasy, Heroin, Over the Counter Drugs, Methadone, Marijuana, LSD, Mushrooms, PCP Commonly Used prescribed drugs

Prescription drugs which can be obtained legally are also used by all age groups for non-medical reasons, often together with alcohol. The risks of drug interaction or accidental overdose are often deadly. Commonly used and misused prescribed drugs include:- Opioids painkiller, Benzodiazepines, Stimulants, like those used to treat ADHD, Antidepressants, Anti-obsessive agents, Mood stabilizers

## 5. SIGNS AND SYMPTOMS OF DRUG ADDICTION

Addiction-to prescription and street drugs and alcohol -is a significant problem. If you're worried that you simply or a loved one may have an addiction, there are signs to assist you know. Signs you'll have a drug problem: You keep taking a drug after it's no longer needed for a health problem. You need more and more of a substance to get the same effects (called "tolerance"), and you'll take more before you feel an effect. You feel strange when the drug wears off. you'll be shaky, depressed, sick to your stomach, sweat, or have headaches. You'll also be tired or not hungry. In severe cases, you'll even be confused, have seizures, or run a fever. You can't stop yourself from using the drug, whether or not you want to. You're still using it even though it's making bad things happen in your life, like trouble with friends, family, work, or the law. You spend plenty of your time thinking about the drug: how to get more, when you'll take it, how good you are feeling, or how bad you are feeling afterward. You have a hard time giving yourself limits. you would possibly say you'll only use "so much" but then can't stop and end up using twice that amount. otherwise you use it more often than you meant to. You've lost interest in belongings you once liked to do. You've begun having trouble doing normal daily things, like cooking working. You drive or do other dangerous things (like use heavy machines) once you are on the or drug. You borrow or steal money to buy drugs. You hide the drug use or the effect it's having on you from others. You're having trouble getting together with co-workers, teachers, friends, or relations. They complain more about how you act or how you've changed. You sleep an excessive amount of or too little, compared with how you wont to. Otherwise you eat a lot more or a lot less than before. You look different. You'll have bloodshot eyes, bad breath, shakes or tremors, frequent bloody noses, otherwise you may have gained or lost weight. You have a new set of friends with whom you do drugs and go to different places to use the drugs. You attend more than one doctor to get prescriptions for the same drug or problem. You look in other people's medicine cabinets for drugs to require. You take prescribed meds with alcohol or other drugs.

#### 6. HOW MIGHT SUBSTANCE USE DISORDER AFFECT ME?

Drugs affect the brain, especially the "reward center" of the brain. Humans are biologically motivated to seek rewards. Often, these rewards come from healthy behaviors. When you spend time with a loved one or eat a delicious meal, your body releases a chemical called dopamine, which makes you feel pleasure. It becomes a cycle: You seek out these experiences because they reward you with good feelings. Drugs send massive surges of dopamine through the brain, too. But instead of feeling motivated to do the things you need to survive (eat, work, spend time with loved ones), such massive dopamine levels can lead to damaging changes that change thoughts, feelings and behavior. That can create an unhealthy drive to seek pleasure from the drug and less from more healthy pleasurable experiences. The cycle revolves around seeking and consuming drugs to get that pleasurable feeling. Addiction to drugs changes the brain over time. It affects how the brain works and even the brain's structure. That's why healthcare providers consider substance use disorder a brain disease. The first use of a drug is a choice. But addiction can develop, creating a very dangerous condition. Drugs affect your decision-making ability, including the decision to stop drug use. You may be aware there's a problem but unable to stop. With addiction, stopping drug use can be physically uncomfortable. It can make you sick and even become life-threatening.

# 7. PRINCIPLES OF EFFECTIVE TREATMENT

Based on scientific research since the mid-1970s, the following key principles should form the basis of any effective treatment program: Addiction is a complex but treatable disease that affects brain function and behavior. No single treatment is right for everyone. People need to have quick access to treatment. Effective treatment addresses all of the patient's needs, not just his or her drug use. Staying in treatment long enough is critical. Counseling and other behavioral therapies are the most commonly used forms of treatment. Medications are often an important part of treatment, especially when combined with behavioral therapies. Treatment plans must be reviewed often and modified to fit the patient's changing needs. Treatment should address other possible mental disorders. Medically assisted detoxification is only the first stage of treatment. Treatment doesn't need to be voluntary to be effective. Drug use during treatment must be monitored continuously. Treatment programs should test patients for HIV/AIDS, hepatitis B and C, tuberculosis, and other infectious diseases as well as teach them about steps they can take to reduce their risk of these illnesses.

## 8. MEDICATION-ASSISTED TREATMENT

One of the main ways clients are treated for addiction is with medication. When used as prescribed under the supervision of doctors, nurses and clinicians, medications can: Mitigate the effects of withdrawal, Deter the use of addictive substances, Treat co-occurring mental health disorders. Some clients take medications that induce unpleasant symptoms when the problem drug or alcohol enters the body. For example, Vivitrol (generally administered by injection) induces headache, nausea, vomiting and diarrhea when alcohol or opioids are introduced to the body. This approach trains the brain and body to reject the substance that was previously an integral part of a person's life.

# 9. CONCLUSION

Drug addiction is a chronic disease characterized by drug seeking and uses that is compulsive, or difficult to regulate, despite harmful consequences. White plague causes sufferers to experience physical and psychological dependency on illicit, mind-altering substances. Brain changes that occur over time with drug use challenge an addicted person's self-control and interfere with their ability to resist intense urges to require drugs. this is often why drug addiction is also a relapsing disease. Relapse is that the return to drug use after an attempt to stop. Relapse indicates the necessity for more or different treatment. Most drugs affect the brain's reward circuit by flooding it with the chemical messenger dopamine. Surges of dopamine within the reward circuit because the reinforcement of pleasurable but unhealthy activities, leading people to repeat the behavior again and again. Over time, the brain adjusts to the surplus dopamine, which reduces the high that the person feels compared to the high they felt when first taking the drug—an effect referred to as tolerance, they could take more of the drug, trying to realize the same dopamine high. Habitual drug use causes changes within the structure and operation of the brain that deepen and reinforce drug addiction, to the purpose where a desire to stop using drugs is not enough to make it happen. No single factor can predict whether an individual will become addicted to drugs. A mixture of genetic, environmental, and developmental factors influences risk for addiction. The more risk factors an individual has, the greater the prospect that taking drugs can lead to addiction. White plague is a destroyer of hopes, dreams, and lives, but with inpatient treatment plus a comprehensive aftercare program drug addicts can find lasting relief from the ravages of chemical dependency, no matter how long they've been addicted. White plague is treatable and can be successfully managed. More excellent news is that drug use and addiction are preventable. Teachers, parents, a

#### REFERENCES

- [1] Shedler J, Block J. Adolescent drug use and psychological health. Am Psychol. 1990; 45:612-630
- [2] Yamaguchi K, Kandel DB. On the resolution of role incompatibility: a life event history analysis of family roles and marijuana use. AJS. 1985; 90:1284-1325
- [3] Helzer JE, Canino GJ. Alcoholism in North America, Europe, and Asia. New York, Oxford University Press, 1992.
- [4] Rice DP. The economic cost of alcohol abuse and dependence: 1990. Alcohol Health and Research World. 1993; 17:10-11
- [5] https://www.altamirarecovery.com/drug-addiction/
- [6] https://www.originsrecovery.com/what-is-drug-addiction/
- [7] https://www.drugabuse.gov/publications/drugfacts/understanding-drug-use-addiction
- [8] http://pib.nic.in/newsite/PrintRelease.aspx?relid=177380
- [9] https://www.webmd.com/mental-health/addiction/drug-abuse-addiction
- [10] https://www.mayoclinic.org/diseases-conditions/drug-addiction/symptoms-causes/syc-20365112
- [11] https://www.who.int/substance\_abuse/facts/en/
- [12] https://drugfree.org/learn/drug-and-alcohol-news/researchers-release-first-report-worldwide-addiction-statistics/
- [14] https://books.google.co.in/books?hl=en&lr=&id=y6YsDwAAQBAJ&oi=fnd&pg=PA7&dq=info:Ah1mPJ4KLwJ:scholar.google.com/&ots=Y5VC5LMvhX&sig=gJVJKykdDBGJyUBsR01\_fPd5EDU#v=onepage&q&f=false
- [15] Hawkins JD, Graham JW, Maguin E, Abbott R, Hill KG, Catalano RF. Exploring the effects of age of alcohol use initiation and psychosocial risk factors on subsequent alcohol misuse. J Stud Alcohol. 1997; 58:280-290
- [16] Chou SP, Pickering RP. Early onset of drinking as a risk factor for lifetime alcohol-related problems. Br J Addict 1992; 87:1199-1204.
- [17] Gruber E, DiClemente RJ, Anderson MM, Lodico M. Earlydrinking onset and its association with alcohol use and prob-lem behavior in late adolescence. Prev Med. 1996; 25:293-300
- [18] Grant BF, Dawson DA. Age at onset of alcohol use and its as-sociation with DSM-IV alcohol abuse and dependence: re-sults from the National Longitudinal Alcohol Epidemiological Survey. J Subst Abuse. 1997; 9:103-110
- [19] Clayton RR. Transitions in drug use: risk and protective fac-tors, in Vulnerability to Drug Abuse. Edited by Glantz M, Pickens R. Washington, DC, American Psychological Association, 1992, 15-51

- [20] Robins LN, Przybeck TR. Age of onset of drug use as a factorin drug and other disorders. NIDA Res Mongr. 1985; 56:178-192
- [21] Guthrie BJ, Loveland-Cherry C, Frey MA, Dielman TE. A theoretical approach to studying health behaviors in adolescents: an at-risk population. Fam Community Health. 1994; 17:35-48
- [22] Zucker RA, Fitzgerald HE. Early developmental factors and risk for alcohol problems. Alcohol Health and Research World. 1991; 15:18-24.
- [23] Yamaguchi K. Drug use and its social covariates from the period of adolescence to young adulthood: some implications from longitudinal studies, in Recent Developments in Alcoholism, Edited by Galanter M. New York, Plenum Press. 1990; 8:125-143.
- [24] Hawkins JD, Arthur MW, Catalano RF. Preventing substance abuse, in Building a Safer Society: Strategic Approaches to Crime Prevention. Edited by Farrington D, Tonry M. Chicago, University of Chicago Press. 1995, 343-428.
- [25] Johnston LD, O'Malley PM, Bachman JG. National Survey Results on Drug Use From the Monitoring the Future Study, 1975–1995. Rockville, Md, National Institute on Drug Abuse, 1997.
- [26] National Study on Substance Use Among Women in the States. Rockville, Md, Substance Abuse Mental Health Services Administration, Office of Applied Studies, 1997.
- [27] Ontario Health Survey 1990, Mental Health Supplement: User's Manual. Documentation. Toronto, Ontario Ministry of Health, 1995, 1.
- [28] Boyle MH, Offord DR, Campbell D, Catlin G, Goering P, Lin E, Racine Y. Mental health supplement to the Ontario Health Survey: methodology. Can J Psychiatry. 1996; 41:549-558
- [29] World Health Organization: Composite International Diagnostic Interview (CIDI), version 1.0. Geneva, WHO, 1990.