

INCREASED INCIDENCE OF SUBSTANCE ABUSE IN SCHIZOPHRENIA

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Respected Sir, schizophrenia is a severe, chronic and generally disabling mental disorder that disrupts normal thoughts, speech and behavior. The word schizophrenia literally means, "split brain" but it refers to disruption of usual balance of emotions and thinking. It may lead to delusions, hallucination, abnormal behavior or thought process and sometimes combination of all these. The latest DSM-5 have further eliminated the sub-types of schizophrenia stating schizophrenia subtypes are not stable conditions and they have no significant clinical or scientific utility or validity.¹

It is considered that an interaction between both genes and environment may play a role in causation of schizophrenia. It is estimated that more than 21 million people are affected by this disease world wide. In 2000 the world health organization found the prevalence of schizophrenia to be similar around the world, however the impact of schizophrenia was found to be relatively higher in Middle East and East Asia than in United States, Japan, Russia and Australia. As per the DALY rates, Pakistan is ranked at number 53 with highest prevalence of schizophrenia. These prevalence rates are considered much lower keeping in view of the limited psychiatric facilities in our country. Illiteracy, unawareness, ignorance, lack of trained professionals and health care facilities come in way of diagnosis and treatment.

It has been observed that the prevalence of substance use disorder is greater in schizophrenics than the general population⁵ and there has been a dramatic increase since 1970s.⁶ Several theories exist to explain the high risk of substance abuse, the 'self-medication hypothesis' suggest that people suffering schizophrenia abuse substances to treat underlying mental illness or the side effects of the medication.7 Other hypothesis suggests that these people might be genetically predisposed to substance abuse. A recent study showed that schizophrenics have increased euphoric and stimulatory response to alcohol. This exaggerated response to schizophrenia may contribute to increased alcohol abuse disorder in schizophrenia.8 No matter what the cause might be, substance abuse disorder related to schizophrenia will lead to a number of clinical challenges. These patients will have increased non-compliance to medication, increased cost of therapy, longer duration of hospitalization, a higher rate of emergency services, and consequently, higher cost of care.9

Since schizophrenia and substance abuse disorder are found to be closely interdependent, a dual diagnosis-treatment of schizophrenia and substance abuse is needed. Seminars and awareness workshop

should be organized to increase awareness among physicians. Because it is quite clear that the comorbidity is two fold; schizophrenia patient with drug abuse requires special care and treatment and often the community facility is inexperienced in treating the double diagnosis. More over the addiction centers might under diagnose the psychiatric problem just as mental health clinic might over look co-occurring substance abuse disorder. It is the need of hour that the problem of comorbidity should be given increased attention and integrated treatment models that address both disorders should be followed.

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