Name

Course

Date

Instructor

Drugs of Abuse

**Major Drugs of Abuse**

**Preface**

Typically, drugs are used as mood stabilizers and pain killers for relieving physical pain but their use other than optimal ranges brings greater discomfort with the passing time. More often the drug is used; more obvious are the chances to get addicted to it and more alarming becomes physical, mental and emotional deterioration.

In this assignment, three of the main drugs will be identified and embraced thorough elaboration in terms of their physical addiction, intoxication, tolerance and withdrawal-related behavioral ramifications. In the end, conclusion section will play significant role in the deduction of meaningful inferences from whole text of the assignment holistically.

**Identified Drugs of Abuse**

Abuse is referred to as consumption of certain substance more than the optimal ranges required by body. After deliberate painstaking consultation to preexisting literature and research activity, following drugs were identified depending upon their prevalence and consequential maladjustments.

1. Alcohol
2. Cocaine
3. Methamphetamine

**Alcohol**

**Definition**: Alcohol is a liquid recreational and medical drug. In diagnostic and statistical manual of mental disorders (DSM); problems associated with poor intake control, preoccupation with alcohol, and persistent and evasive desire to continue alcohol use is termed as alcohol use disorder or alcoholism (Corrao et, al., 2004).

**Short term-Intoxication effects:** After consuming alcohol, the short term instant physical, mental and emotional symptoms include mood instability, inappropriateness of behaviors, impairment of organization, planning, attention, memory, learning and judgment, poor muscle coordination and unsteady gait along with tottering walking and standing ability(Eckardt et. al., 1998). Higher drug use leads to even death.



**Tolerance** **and Long term-physical effects:** with the repeated use of drugs, individual becomes habitual and body requires more amount of alcohol for producing desired effects—known as alcohol tolerance. As a result, long term physical effects include Liver diseases, Heart problem, Diabetes, Digestive problem, Sexual dysfunction, Bone defects, Neurological problems, Threatened Immune system, Cancer, Birth defects and Eye problems (Kessler et. al., 1997).

**Withdrawal symptoms:** when body does not get enough amount of alcohol, addict feels immensely discomforted along with acute physical, mental and emotional symptoms including rapid heartbeat problems, sweating, hand tremors, nausea, troubled sleeping, hallucinations, delusions, vomiting, psychomotor agitation restlessness, frequent seizures and anxiety. Symptoms highly disrupt social and interpersonal life (Kessler et. al., 1997).

**Cocaine**

**Definition**: It was Austrian Psychologist Sigmund Freud who first promoted the use of cocaine as a “magical” drug for treating sexual impotence and depression (Wolf, 2010). Two chemical forms of cocaine are abused typically; white hydrochloride salt which is water soluble and free-base which is insoluble in water (Spronk et. al., 2013).

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**Image:** *cocaine crystals*

**Short-term-intoxication effects:** Cocaine high is a common term used for intoxication symptoms after cocaine intake. This “high” encapsulated variety of psychological and emotional changes. This is because cocaine directly alters the neurological reactions taking place in brain and nervous system. Moreover, individual differences in wearing meaning to the feelings also contribute to intoxication symptom diversity. Common symptoms include intense pleasure, confidence, talkativeness, elevated self esteem and confidence, grandiose delusion, hallucinations, anger, aggression, paranoia, full body stimulation, increased body temperature, nausea, and increased heartbeat (Riezzo et. al., 2012).

**Tolerance** **and Long term-physical effects:** with the repeated use of cocaine, individual becomes habitual and body requires more amount of drug for producing desired effects—known as cocaine tolerance. After repeated use, individual may acquire sudden weight loss, seizures, strokes, cardiovascular problems and even death (Riezzo et. al., 2012).

**Withdrawal symptoms:** cocaine withdrawal symptoms include Difficulty concentrating, physical fatigue, Slowed activity, Inability to experience sexual arousal, Exhaustion, Slowed thinking, Restlessness, Depression, anxiety, Vivid, unpleasant dreams, nightmares, tremors, chills, muscle pain, Increased craving for cocaine, inability to feel pleasure, Suicidal thoughts, nerve pain and Increased appetite (Wolf, 2010; Sinha, 2013).

**Methamphetamine**

**Definition:** this is widely used medical and recreational drug that directly affects central nervous system. This drug is exclusively embraced as the second-line treatment for obesity, narcolepsy (a sleep disorder) and Attention Deficit Hyperactivity Disorder (Chang et. al., 2005). It is known as a “stimulant drug” in form of white powder or pill bitter in taste. In crystal form, it is just similar to bright white-blue rocks or glass fragments. It is consumed through inhaling/smoking, snorting, injecting and swallowing (Curtin et. al., 2015).

**Intoxication symptoms:** same short-term psychological and physical effects are resulted due to even smaller amounts of methamphetamine, similar to the other addictive drugs e.g., cocaine and alcohol. For example, decreased appetite, increased wakefulness and physical activity, fast and irregular heartbeat/breathing, elevated blood pressure and body temperature (Chang et. al., 2005).

**Tolerance** **and Long term-physical effects:** learning, memory, attention, extreme weight loss, severe dental problems ("meth mouth"), intense itching, resulting in skin sores, aggression, hallucinations, delusions, anxiety, confusion and troubled sleeping are long term physical problems of methamphetamine addiction. Meth mouth is the most prominent problem caused by its overdosing (Curtin et. al., 2015).



Image: *methamphetamine crystals*

**Withdrawal symptoms**: withdrawal symptoms are comparable to the other drugs including Psychomotor Agitation due to dopaminergic effects, restlessness, severe muscle spasms, Mydriasis, Diaphoresis, Anxiety, Hallucinations, serotonin syndrome, Hyperthermia, Cardiovascular problems, Hypertension, Dysrhythmias, ventricular fibrillation, Myocardial ischemia, and Aortic dissection (Curtin et. al., 2015).

**Conclusion**

This assignment was concerned with the identification and description of three drugs e.g., alcohol, cocaine and methamphetamine. Their brief introduction, intoxication, tolerance and withdrawal symptoms were elaborated using wide range of literature. It can be concluded that all the above mentioned drugs produce immense maladjustment in terms of physical, mental, emotional, social, academic and occupational impairments. “Prevention is better than sure” is the best “evidence-based” intervention in order to mitigate behavioral ramifications of drugs. We must discourage their misuse through education and other preventive measurements. Therapeutic interventions include psychopharmacological treatment coupled with cognitive behavioral therapy and motivational incentives.

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