Editorial

Drug Addiction

DRUG TAKING for non-medical reasons has become a major source of concern for the world at large and Malaysia is no exception. Hardly a day passes without some reference to drug taking, drug addiction, drug trafficking, etc. in the local press.

The taking of drugs not only to relieve discomfort but also to enhance pleasure and achieve social aims has been the accepted practice in most parts of the world. However, this was largely confined to the more mature members of the community. What is worrying today is the increasing frequency with which younger people are trying these dependence-producing drugs. Unfortunately, there are no reliable data on the prevalence and incidence of the non-medical use of psycho-active substances in this country. But such information as is available from law enforcement agencies, hospital attendances and post-mortem examinations suggests a steady increase in addiction to dependence-producing drugs in recent years.

The Malaysian Medical Association and its Public Health Society have been aware of this problem and during the last decade have set up various Sub-committees, held meetings at Central and Branch levels and organized workshops and seminars (including public seminars) to study and discuss the topic in order to find out in what way the profession could assist in resolving the problem.

Psychologists have tried to analyse the motives associated with the initiation and continuation of drug-taking and find they are many and diverse. Curiosity about the effects of these drugs is a major factor especially among the young. It has been suggested that certain ill-conceived preventive programmes giving information in a dramatic manner about the effects of certain drugs have actually created an interest to the extent of wanting to try out the drug in question. The mass media accounts of drug addiction are daily occurances and could well stimulate an unhealthy interest in wanting to try it. Other motives include the desire to have pleasurable and thrilling experiences, wanting to escape from some undesirable situation, to express independence or to fulfil a need to be accepted. These are particularly characteristic of the young.

It must be remembered, however, that many young persons take these drugs a few times and stop, by A. A. Sandosham

or use it only intermittently not resulting in the development of dependence. In other words, there is no psychic drive that requires readministration of the drug or that no physical disturbance results when the administration of the drug is suspended. In that case, we may be actually exaggerating the prevalence of drug addiction and by our suspicions unconsciously push the casual drug user deeper into dependence on drugs by generating in him feelings of rejection.

This is not to belittle the seriousness of the situation. There is no getting away from the fact that more and more people in Malaysia are resorting to dependence-producing drugs for various reasons. It is up to the enforcement officers, the social welfare workers, community leaders and educationalists besides medical and health officers to cope with the problems of drug-dependent persons.

While enforcement measures to repress illicit traffic and effect control on the availability should not be overlooked it should be realised that the essential aim should be to reduce the demand for these drugs. There is no evidence that simple information-giving educational programmes is effective in preventing drug dependence. Knowledge does not necessarily provide protection. The social welfare officers are involved in the rehabilitation of the drug dependent and theirs is a formidable task involving not only the addicts but their families and the community as well.

The medical man's responsibilities in establishing early diagnosis, undertaking the correct treatment and helping in the rehabilitation of the drug-addict are very great indeed. Every medical and health officer should be in a position to assist and so it is essential for them to keep abreast with the latest developments in treatment and rehabilitation.

The prevention of drug addiction is a thorny problem and cannot be solved overnight. Changes in cultural attitudes as well as in environmental stresses can only be brought about very slowly. As recommended in a W.H.O. publication, "Everything possible should be done to allieviate environmental conditions that lead to undue stress – discrimination of various kinds, blocked opportunities at work, slum conditions, unfair business and labour practices".