Methamphetamine (YABA) Abuse: A Case Study in Young Male

Abstract:
Methamphetamine dependence is a serious worldwide public health problem with major medical, psychiatric, socioeconomic & legal consequences. Various neuronal mechanisms implicated in methamphetamine dependence have been suggested. Drugs of abuse are of two types: natural drugs and synthetic psychotropic substances. The former includes opium, cocaine and cannabis. The latter includes pethidine, barbiturates, tranquillizers, amphetamines. There has been increasing incidence of addiction to certain drugs amongst young people in our country. Our patient is a student of private university of 24 year old male with a history of YABA addiction for 4 years. Without having it he can't do anything. If he cannot take it, peevish temperament occurs. He collects drugs from the local spots or particular person. This condition is very much dangerous to the individual and socio-economic condition of country.

Key words: Methamphetamine, YABA, drug abuse, dependence.

Background:
Drug abuse directly influences the economic and social aspects of a country. In Bangladesh it is a growing national concern. There are millions of drug-addicted people in Bangladesh and most of them are young, between the ages of 18 and 30. Bangladesh is situated in the central point between the 'golden triangle' (Myanmar, Thailand and Laos) and the 'golden crescent' (Pakistan, Afghanistan and Iran) in terms of geographical location. Bangladesh with its easy land, sea and air access is becoming a major transit point. Traffickers who supply drugs in the markets of Northern America, Africa and Europe are routing their shipments through Dhaka, Chittagong, Comilla, Khulna, and other routes in Bangladesh. It is believed that with the increasing quantity of the wares more and more people are likely to get involved in drug business. In this way it ultimately contributes to the number of drug abusers as well. To procure money for buying drugs, addict make himself associate of criminal group and commit crimes. In a statistics it is shown that among 253 drug abusers 31% is addicted to cannabis, 26% to alcohol, 24% to phensidyl, 10% to heroin and 9% to diazepam, antihistamine, methamphetamine etc. The male: female ratio is 20:1 and 58% is between 18-35 yrs, 20% is between >35-50 yrs, 5% is between 10-15 yrs and remaining is >50 yrs of age.

Case history:
The victim of this case is a 24 yrs old young chap named Ashfaq. He looks like a man of 40 years. Firstly, his friends introduced him to drugs as a means of enjoyment. Gradually he became addicted. He started with 'ganja'. He sometimes changes his drugs to meet his satisfaction level. He changes drugs one after another from 'ganja', 'wine' to 'YABA'. Now he is fully addicted to 'YABA' for 4 years and has to take it four times in a day. Without having it he can't do anything. He spends Tk. 300-500 everyday for drug purposes. For the excess money, sometimes he takes loan from friends or steals his own household materials. He collects drugs from the local spots or a particular person. On physical examination he was anxious looking and irritated. Speech was slowed. Physique was lean and emaciated. Mild anaemia and jaundice.
was present. No abnormality was detected in heart, lungs and kidneys. He feels euphoria, anxiety, increased libido, impaired concentration, energy, loss of self-confidence, sociability, irritability, aggression.

**YABA:**

The Thai word for "Crazy medicine" is a tablet form of methamphetamine, a powerful stimulant. These synthetically produced pills contain 25 to 35 mg of methamphetamine and 45 to 65 mg of caffeine. Tablets are available in a variety of flavors (including grape, orange & vanilla) and colors (most commonly reddish-orange or green). Various logos (Commonly “WY” or “R”) adorn yaba tablets which are the size of the end of a drinking straw. Yaba looks and tastes so much like candy that many young users underestimate its harmfulness. Methamphetamine is also available in powder form which can be processed into a rock (“ice”) or liquid form.

**Methods of Use:**

The most common method of using yaba is oral ingestion. Tablets can also be crushed into a powder and either snorted or mixed with a liquid and injected. In addition tablets can be heated on aluminium foil to produce a vapor which is then inhaled.

**Side effects:**

Yaba is a powerful central nervous system stimulant with longer lasting effects than those of cocaine. This is because cocaine metabolized in the body more quickly than methamphetamine. Effects produced by Yaba will be some side effects include:

* Irritability and aggression
* Decreased appetite and nausea
* Hot flashes, dry mouth and sweating
* Damage to the small blood vessels in the brain

* Increase alertness, wakefulness and physical activity
* Increased heart rate, blood pressure, respiration and body temperature.

**Effects of chronic abuse include:**

* Tremors
* Hypertension
* Hallucinations
* Psychotic episodes
* Paranoid delusions
* Violent behavior
* Hyperthermia and convulsions
* Agitation, anxiety and nervousness
* Mental Confusion & memory loss
* Psychosis similar to schizophrenia (characterized by paranoia, picking at the skin, self absorption and visual and auditory hallucinations)

**Addiction, Tolerance and withdrawal**

Methamphetamine in all forms is very dangerous and has a high potential for abuse and dependence. Moderate to chronic use of yaba and other methamphetamines may lead to physical and psychological dependence and even death. Tolerance can develop with chronic use. In as effort to intensify the drug's effects, users may take higher doses of the drug, take it more frequently, or change their method of drug intake. Some abusers may forego food and sleep while on a "run". A run consists of the injection of as much as a gram of the drug every 2 to 3 hours over several days until the user runs out of the drug or is too disorganized to continue. When an individual goes through withdrawal from high doses of yaba, as well as other forms of methamphetamine, severe depression other results.

**Recommendations:**

Several fieldwork studies found that many people, especially the youths are eager to get rid of drugs. But unfortunately they can hardly find any way out.
departments of narcotics control, police, BGR etc. either do not work or and even some how are related to drug smuggling/business. According to the discussion with the concerned people such as drug abusers, guardians, teachers, policemen, it is clear that behavioural modification of the abusers is not enough to check the spread of drug taking and drug trafficking. The concerned people gave the following suggestions in order to control of drug addiction:

* Concerned administration should be reshuffled. Culprits, those who are hidden in the police, BDR and narcotics control department, must be punished. At the same time, rewards may be declared for good performance.
* Leaders of social institutions like schools, colleges, clubs etc. should come forward to build resistance against drugs.
* The NGOs can play a great role, especially in the awareness and rehabilitation processes.
* Rapid diagnosis and treatment.
* Mass education.
* Stop drug selling without prescription of a registered doctor.
* Universities & Colleges need to do more to protect our young adults from and educate them about the dangers of illicit stimulant use. There fore, focused attention and resources should be ear marked for drug abuse.

Discussion:

Drug abuse is a major medical problem with extensive legal, social and even political problems. A person made tolerant to a large dose of one narcotic is also cross-tolerant to many of the effects of another narcotic. Indiscriminate use of any of these drugs becomes dangerous and produces a gradual mental, physical and moral deterioration of the individual and sometimes also sexual perversions or crime. To obtain the money for the drug the addict often turns to prostitution or crime. The majority of drug victims are neurotic individuals who are mentally unbalanced. A normal person has no tendency to become a drug addict and is most-unlikely to become one, even when all the facilities are available. Hereditary factors, abnormal mental conditions, frustrations in life, anxiety, chronic tensions, physical inability to do a job, curiosity, etc are some of the causes of drug addiction. Addicts fall in two groups: (I) Those who are originally used the drug for some disease and thus have acquired the habit and (II) those who use the drug for its narcotic effect alone. The first groups are more easily cured than the second. The inability to discontinue the use of drug may be due to either to a desire for satisfaction or an anxiety to avoid the discomfort of withdrawal symptoms or both.

Conclusion:

When a disease breaks out like an epidemic in all segments of the society, it indicates a social change. It is not only the youth; drug addiction has also grabbed the social leaders. Even the teachers and physicians who are supposed to guide the society are more or less getting addicted. Law enforcing agencies and other concerned authorities are in most cases either refraining from their job or associated with the drug business. Undoubtedly it is an awesome situation. Every disease has a cure. We must come out of this monopolistic deadly game. A more intensive research, action program, and social movement are needed. It is also needed to strengthen family and social values and religious ethics in order to maintain a stable and drug-free society.

References: