Substance Induced Psychotic Disorder

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Background: To assess the current substance use among psychotic patients attending Al-Azhar University Hospital at New Damietta and to explore the pattern of substance use and the characteristics of psychotic phenomena resulting from or associating this use.

Subjects & Methods: Study participants included all adults (18-65 years) presented with psychotic symptoms after substance use, attending Al-Azhar University Hospital (New Damietta) during the period from January 1st. 2009 to June 1st. 2010. Full drug history was taken with special concern about pattern of drug use and the psychiatric diagnoses according to DSM IV-TR. In addition, urine sample was collected from each patient and screened for drugs. The collected data were organized, tabulated and statistically analyzed.

Results: At the period of the study, 300 cases were presented with acute psychotic disorders, from those, 60 cases had a positive history of substance use (20.0%), all included cases were males (no females appeared at the time of the study). Substance use started at the age of 21-25 years in the majority of cases (53.3%), then at the age 16–20 (21.7%), and the least age group was 10–15 (6.7%); the first drug abused was hashish (high potency) in 95% of cases while it was banjo (low potency) in 5% of cases; the major reason for drug abuse was peer pressure (65%), fun (10%); friends were the source of introduction in 88.3% of cases and drug dealers in 11.7% of cases; the abused substance was street drug in 88.3% of patients and concomitant street and pharmaceutical drug in 11.7%; the abused drug was single drug in 61.7% of cases; two drugs in 35% of cases and three drugs in 3.3% of cases, the current abused drug was hashish (high potency cannabinoid) in 100% of cases, tramadol (synthetic opioid) in 20%, banjo (low potency cannabinoid) in 23.3%, alcohols in 5%, heroin and cough suppressants in 1.7% of cases each. The psychotic disorder was in the form of manic symptoms in 53.3% of cases, mixed symptoms in 20.0%, delusion in 11.7%, major depression with psychotic symptoms in 8.3%, hallucinations in 3.3%, and bouts of excitement in 3.3% of cases. Before present illness, there were personality disorders in 3.3% of cases; psychotic disorders in 3.3%, and positive family history for psychotic disorders was reported in 35% of cases. The results of toxicology laboratory was in the form of tetrahydrocannabinol (THC) in 76.7% of cases, THC with Benzodiazepines in 16.7% of cases, THC and alcohol in 3.3% of cases; THC and opioids in 3.3% of cases (see table 5).

Conclusion: The present study highlighted the association between substance use and psychotic disorders. It revealed that cannabis is the most common drug to be abused in Damietta governorate, Egypt, and it is associated with a diversity of psychotic disorders mainly mania, mixed symptoms and delusions.

Keywords: Substance use, Psychosis.

Abbreviations:
SUD: Substance Use Disorder
THC: Tetrahydrocannabinol

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INTRODUCTION

With the rapid increase in the use of illegal drugs among the general population, the differential diagnosis of psychotic states commonly includes 'drug induced psychosis'. This term is imprecise and vague. While the existence of an amphetamine psychosis (paranoid and schizophreniform symptoms arising in the context of amphetamine intoxication) has been recognized for over 40 years, the role of other substances such as cannabis in the genesis of psychotic symptoms remains controversial (Mathers and Ghodse, 1992 and Thomas, 1993).

Terms such as 'toxic psychosis', 'induced schizophreniform psychosis' and 'confusional paranoid psychosis' are used with similar but idiosyncratic definitions (Deveaugh Geiss and Pandurangi, 1982).

Research has shown that a complex association exists between mental and substance use disorders (SUD). Mentally ill patients may have impaired judgment, which may instigate drug use to self-medicate psychiatric symptoms. Alternatively, some drug addicts may develop mental disorders as