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## Suicidality among Adolescents with Substance use Disorder

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# Abstract

Adolescence is a critical transitional period that includes the biological changes of puberty and the need to negotiate key developmental tasks, such as increasing independence and normative experimentation. It is an important developmental period for the onset of substance-use and misuse which has been shown by epidemiological studies across the life span, to find out the demographic data of studied adolescents and the distribution according to the substance abused and to assess the factors associating suicidality and adolescents with substance use disorders, The example comprised of 100 young people analyzed as having substance use issue were remembered for the investigation, and Diagnosis has been done by the Diagnostic and Statistical Manual of Mental issue, fifth release (DSM-V).. All patients were exposed to A semi organized meeting including segment dispersion, kind of medication, individual, present, past, instructive and family ancestry , Clinical assessment including a psychological state assessment , Mini-International Neuropsychiatric Interview for Children and Adolescents (MINI-KID) Suicide Probability Scale (SPS) and Teen Addiction Severity Index (T-ASI), About 75% of the contemplated patients detailed manufactured medications as the fundamental substance dependent. Seven patients just adhered to one substance. The biggest level of them detailed utilization of numerous medications (93%).Moreover biggest level of the examined patients had important family ancestry for compulsion (72%), while just 13% of them had family ancestry of mental issue Synthetic medications are the fundamental substance dependent young people. Catchphrase: Suicidality ; Adolescents ; Substance use issue.

## 1. Introduction

The progress from youth to youthfulness is described by significant organic, intellectual, enthusiastic and social changes .This period is vigorously set apart by the beginning of and movement through pubescence, more noteworthy self-rule and less self-guideline, and changes in parental and peer connection ships [1].

Puberty is a significant formative period for the beginning of substance-use and abuse which has been appeared by epidemiological investigations over the life expectancy, with some considering exploratory medication use as standardizing during this period. Canadian measurements show that over 60% of illicit medication clients are matured 15-24 years old and that, contingent upon the area, 19-30% of 12-multi year olds report hitting the bottle hard in the previous month, and 17-32% report utilizing cannabis in the previous year [2].

Individuals with substance use issue frequently don't perceive or look for help for the issue, and may not be screened for substance misuse when they look for treatment for other wellbeing conditions, which implies that substance misuse and reliance issue are regularly under-perceived and undertreated. Regardless of this, substance use issue are among the most widely recognized of psychological wellness issue experienced by youngsters. In Australia, 12.7 percent of individuals matured 16-24 are assessed to have a substance use issue, with higher rates among youngsters than young ladies (around 16% of guys and 10% of females). Unsafe utilization of liquor was the most usually revealed substance use issue (at around 9%) [3].

In Egypt, Epidemiological research and clinical investigations demonstrated that the pace of experimentation' with drugs was around 10-12% in the age bunch 15-25 years; the rate for sedate 'abuse' was 2.5-3%, though those recognized as medication 'addicts' would establish under 1% of the populace (65 million of every 1998) [4].

A.khoweiled [5] expressed that 8.5% of Egyptians are dependent on drugs, that most of them are somewhere in the

range of 15 and 25 years of age and that the addicts are considered as crooks as opposed to patients deprived for treatment.

M.G.Negm [6] discovered the pervasiveness and related elements of substance maltreatment among school understudies (13-18 years) in Zagazig, Sharkia governorate. They evaluated that substance misuse and smoking were basic among youths, and the age at beginning was nearly the equivalent for both.

E.E.Oraby [7] evaluated the most incessant wellbeing hazardous practices among college understudies. They inferred that wellbeing hazard practices are normal among understudies, and bringing issues to light by ordinary wellbeing training projects can drastically change the profile of these practices.

This study planned to discover the segment information of considered young people and the dispersion as indicated by the substance manhandled and to evaluate the variables partner suicidality and youths with substance use issue.

### 2. Patients and methods

This investigation included example comprised of 100 youths going to Helwan outpatient center and inpatient ward analyzed as having substance use issue were remembered for the examination, given a proper agree to take an interest in the investigation. Analysis has been completed by the Diagnostic and Statistical Manual of Mental issue, fifth release (DSM-V). The study occurred during the period from June 2018 to September 2019 .All the patients were exposed to the accompanying techniques: Giving assent: Cases were incorporated simply after they had given composed educated assent which was changed and endorsed by Research Ethics Committee at Benha staff of medication, IQ appraisal and subjects with IQ=70 or less were rejected.

The subjects in this investigation All patients will be exposed to :A semi organized meeting including segment appropriation, kind of medication, individual, present, past, instructive and family ancestry, Clinical assessment including a psychological state examination, MiniInternational Neuropsychiatric Interview for Children and Adolescents (MINI-KID [8] Suicide Probability Scale (SPS) [9] and Teen Addiction Severity Index (T-ASI) [10].

#### **Rejection measures**

Patients with other mental issue with the beginning past to the beginning of substance misuse.

Patients with clinical co-dreariness or neurological issue.

Mental sub-ordinariness IQ <70.

Patients in either inebriation or withdrawal stage. Age under 13 and more than 17.

### 2.1 Statistical investigation

The example size was determined by Raosoft and every single measurable estimation were finished utilizing SPSS (factual bundle for the sociology adaptation 20.00) factual program at 0.05 degree of likelihood. Subjective information were finished by Chi Square test. The certainty interim was set to 95% and the wiggle room acknowledged was set to 5%. The p-esteem was considered non-noteworthy (NS) at

the degree of >0.05, huge at the degree of <0.05, 0.01 and profoundly huge at the degree of <0.001. The Pearson direct connection to show the connection between subjective parameters.

#### 3. Results

This study involved sample consisted of 100 adolescents diagnosed as having substance use disorders were included in the study 67 males and 33 females, given a formal consent to participate in the study. Diagnosis has been carried out according to the Diagnostic and Statistical Manual of Mental disorders, fifth edition (DSM-V), The subjects in this study all patients will be subjected to: A semi structured

Interview including demographic distribution, type of drug, personal, present, past, educational and family history, Clinical examination including a mental state examination, Mini-International Neuropsychiatric Interview for Children and Adolescents (MINI-KID), Suicide Probability Scale (SPS) and Teen Addiction Severity Index (T-ASI).

 Table (1) Demographic date of studied adolescents with substance use disorder.

Demographic	N =100	%
characteristic		
Age (years):		
Mean ± SD	$15.55 \pm 1.03$	
Range	13 - 17	
13-15 years	15	15
> 15 years	85	85
Gender:		
Male	67	67
Female	33	33
Education level:		
Primary	33	33
Preparatory	27	27
Secondary	40	40
Occupation:		
Not working	45	45
Irregular work	55	55

This Table shows that the largest percentage of the studied patients was males (67%), 40% of the patients had secondary education and 55% of them had irregular work.

Age of the studied patients ranged from 13to 17 years with mean 15.55 years. Eighty-five percent of them aged more than 15 years old.

Table (2) Results of social data among studied adolescents with substance use disorder.

Social data	N =100	%
Family state:		
Parents live together	48	48
Patients live separately	35	37
One parent died	17	10
Both parents died	5	5
<b>Religious practice:</b>		
Regular	0	0
Irregular	40	40
Never	60	60

43	43
52	52
5	5

This table shows that forty eight percent of the studied patients had their parents live together and 52% of them had middle social class. None of the studied patients reported regular religious practice and 60 % of them had no religious practice.

Table (3) The result of family history among	adolescents with substance use disorder.
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Family history of	N =100	%
Psychiatric disorder:		
Irrelevant	87	87
Relevant	13	13
Addiction:		
Irrelevant	28	28
Relevant	72	72

This table shows that the largest percentage of the studied patients had relevant family history for addiction

(72%), while only 13% of them had family history of psychiatric disorder.

	N. 100	0/
Substance	N =100	%
Main substance:		
Synthetic drug (e.g. strox)	72	72
Hashish	28	28
Adjunct substance:		
Synthetic drugs	6	6
Hashish	76	76
Tramadol	49	49
Benzo derivative	23	27
Heroin	17	15
Alcohol	49	49
Others	6	6
Number of substance:		
1	7	7
2	34	34
3	21	21
4	23	23
5	6	6
6	9	9
Median	3	
Range	1-6	

Table (4) Distribution of the studied adolescents according to type of substance abused.

This table shows that about three quarters of the studied patients reported synthetic drugs as the main substance addicted. Seven patients only stuck to one substance. The

### 4. Discussion

Immature substance use may bring about numerous wellbeing related issues, for example, gloom and strange mind working. Substance use may prompt disappointment in formative undertakings, for example, solid connection with peers, and in day by day commitments, for example, going to class or finishing school work, which may additionally expand the danger of self-destructive conduct. In the mean time, intense medication inebriation may impede clients' largest percentage of them reported use of multiple drugs (93%).

judgment, diminish their restraint, and decline their incautious control, all of which improve the probability of self-destructive behavior [11].

Interminable substance use may likewise negatively affect immature mental health. What's more, youths who take part in constant substance use regularly display changes in social, full of feeling, and intellectual procedures portrayed as immature guideline of animosity and impulsivity. In this manner, substance use may add to selfdestructive conduct by means of various pathways [12] The investigation discovered that engineered drugs are the principle substance dependent by around seventy five percent of the considered teenagers. In this investigation, 100 youths with substance issue were enlisted Table (1). shows that 40% of the patients had auxiliary training and 55% of them had sporadic work Table (2). show that forty eight percent of the examined patients had their folks live respectively and 52% of them had center social class. None of the contemplated patients announced ordinary strict practice and 60 % of them had no strict practice.

While Table (3) shows that the biggest level of the examined patients had important family ancestry for dependence (72%), while just 13% of them had family ancestry of mental issue Table (4). shows that around 75% of the examined patients announced manufactured medications as the fundamental substance dependent. Seven patients just adhered to one substance. The biggest level of them revealed utilization of numerous medications (93%).

[13] A.L.Beautrais found that substance misuse may likewise build the danger of relationship challenges with family, companions, and accomplices, which are known to be one of the most significant encouraging occasions for self destruction among teenagers. In addition in a huge audit of studies done by [14] about relationship between upsetting life occasions and poor family condition, family clashes, and improved the probability of juvenile substance use contribution and self-destructive practices.

An Egyptian examination by [15] found that substance misuse (Cannabis, narcotics, energizers and snuffing drugs) was profoundly connected with sorrow.

### 5. Conclusion

In this study, we found that Synthetic drugs are the main substance addicted by about three quarters of the studied adolescents and as adolescent substance use can manifest as different behavioral phenomena. Adolescents using Hashish as mono-substance had significantly higher suicidality grades on suicidality probability scale (SPS) compared to the rest of the case group with other substance use profiles. Family history of addiction are associated with higher risk of substance abuse in adolescents.

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