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# POLYSUBSTANCE ABUSE: A CASE STUDY

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#### ABSTRACT

The removal of polysubstance from the DSM-5 due to insufficient research and the current prevalence rate of polysubstance in Malaysia which is 1.4% makes it imperative to find evidence to prove the need to refocus on polysubstance abuse. The current case is of an elderly man who presented with a decision to live with abandonment, rejection, and physical illness than to have to deal with his craving and withdrawal symptoms as a result of his 33 years of intentional polysubstance abuse. He lost all his savings and lives with several medical illnesses. Psychological evaluation using the Diagnostic and Statistical Manual 5<sup>th</sup> edition criteria revealed the diagnosis of severe substance use disorder. Cases like this shows the importance of research into polysubstance use and to further justify the need for evidence-based intervention for the polysubstance abuse in Malaysian setting.

Keywords: polysubstance, withdrawal symptoms, decision making

#### BACKGROUND

Polysubstance use is when an individual uses more than one drug or multiple intoxicating drugs together at the same time or one after the other or at different situations. There are a recorded effects of intoxicating drug interactions and effects can be adverse on the physical, and psychology of the user (European Monitoring Centre for Drug and Drugs Addiction, 2009)). The current prevalence rate of lifetime polysubstance use in Malaysia is 1.4% (Ismail et el., 2022). Polysubstance abuse impairs judgement and generally has its effect on executive functioning, ability to make the right decision and commit to it (Ohana et el., 2015). Therefore, it may affect decisions in relations to cessation.

Polysubstance has been found to be more dangerous and deadly than abusing one substance. In 2019, nearly 50% of the overdose deaths recorded in the United States was caused by polysubstance abuse (O'Donnell, 2020). Polysubstance abuse is a growing public health concern with associated risk, growing economic and social cost, and increasing number of users (Crummy et al., 2020). Studies focusing on polysubstance abuse will be relevant in given insight into understanding the concept, prevention, and better treatment and management. The current case is intended to give a narrative to the life experiences of an individual that abuse polysubstance in Malaysian setting.



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# **CASE PRESENTATION**

A married man aged 51years old who used to work as a house contractor referred himself after 33 years of polysubstance use; cigarettes, cannabis, morphine, kratom leaves, codeine, and cocaine. He presented with feeling of loss, abandonment and rejection from family, friends and community. His family was also stigmatized by the community. He reported that sometimes he was not given permission to pray because they were afraid that he will steal the money donated. Some people even hit him so hard that he bleeds, these makes him really sad and he always go back for more drugs.

He had been treated for heart attack, dental problem, breathing difficulty, sleep difficulties, severe headaches, muscle weakness, and joint pain. He experienced dependence, hallucinations, delusions, paranoia, prolonged stress and euphoria, and intense craving. He had been to several rehabilitation centre with the hope for cessation, but he could not fight the withdrawal symptoms and his craving has they were too strong and painful for him, so he rather enjoyed the euphoria and high feelings he gets from the drugs rather than suffer from intense cravings and withdrawal symptoms. He mentioned that his body parts are already damaged because of the drugs but he cannot resist the withdrawal effects.

His drug use started with cigarette when he was 18 years, he accidentally got involved with cannabis when his friend intentionally put the drug in his drink. He loved the euphoria, since then he experimented with different types of drugs. He would take kratom leaves and codeine or cannabis after smoking cigarette. He spends averagely RM200 daily in purchase of drugs, by so he lost all of his life saving amounting to millions of ringgits. He had experienced multiple arrest and imprisonment because of his drug use. Currently, all members of the family blame him for their misery.

#### ASSESSMENT AND INFORMATION

He met all the eleven criteria for DSM-5 substance use disorder making his diagnosis a severe substance use disorder and a comorbid with substance-induced psychotic disorder.

#### Ethical consideration

An informed consent was gotten in form of signature on a consent form declaring his agreement to use and publish his case. No ethical approval was required.

#### TREATMENT

He was psycho-educated on the dangers of polydrug has he is already aware of the detrimental consequences of drugs on him and his entire life. Motivational interviewing (MI) (Smedslund et al. (2011); McCambridge & Strang, 2003) was initiated and it was found that he was in the need stage has he was aware drug rehabilitation will benefit him. The intent of the MI is to



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motivate and help him assert need for behaviour change. Also, to encourage him to seek rehabilitation and psychotherapy to help him achieve reduction and eventual cessation.

# DISCUSSION AND CONCLUSION

Polysubstance or polydrug use is the consumption of more than one drug at once (American Society of Addiction Medicine, 2022). The term is no more indicated in the latest DSM-5 but it was previously indicated in the DSM-IV. It was removed basically because of the insufficient amount of research available and the need to harmonise the DSM with ICD (Regier, Kuhl, & Kupter, 2013). The relevance of this sub-disorders of addiction is still important as many individuals are involved in polysubstance abuse. Though, American Society of Addiction Medicine (ASAM) still recognises the use of the term.

The use of a single drug has its effects much less the use of multiple drugs (Bruneau, Leri, Francesco, & Stewart, 2003). One of the risks of poly drug use is the effect on executive functioning specifically, impaired judgement and decision making. The ability of polysubstance users to make life-long, affirmative, and implicative decisions is crucial to their treatment and management. Therefore, more researches on polysubstance use are important, especially in terms of treatment, management and decision making of the user and also to further justify evidence-based intervention for the polysubstance abuse in Malaysian setting. This is important because polysubstance users may make abnormal (risky, selfish, reckless and non-callants decision) (Clark, L. & Robbins, 2002) and it is important the therapist understand how to treat and help. Also, imperative in the reinstatement of the term polysubstance to the DSM.

#### ACKNOWLEDGEMENT

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Learning point	
• The ability of j decisions is cru	bandonment can be upsetting and trigger increased use of drugs. polysubstance users to make life-long, affirmative, and implicative cial to their treatment and management. polysubstance use is still relevant and important.



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# REFERENCES

- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5<sup>th</sup> ed.). American Psychiatric Publishing, Inc. <u>https://psycnet.apa.org/doi/10.1176/appi.books.9780890425596</u>
- Bruneau, J., Leri, Francesco, L. & Stewart, J. (2003). Understanding Polydrug use: Review of heroin and cocaine co-use. *Addiction*, *98*(1), 7-22. <u>http://dx.doi.org/10.1046/j.1360-0443.2003.00236.x</u>
- Clark, L. & Robbins T. W. (2002). Decision-making deficits in drug addiction. *Trends in* Cognitive Science, 6(9), 361-363. <u>https://doi.org/10.1016/S1364-6613(02)01960-5</u>
- Crummy, E. A., O'Neal, T, J., Baskin, B. M. & Ferguson, S, M. (2020). One is not enough: Understanding and modelling Polysubstance use. *Frontiers in Neuroscience*. 14, 569. DOI: https://doi.org/10.3389/fnins.2020.00569
- European Monitoring Centre for Drug and Drugs Addiction. (2009). *Polydrug Use Patterns and Responses*. Luxembourg: Publications Office of the European Union. <u>https://www.emcdda.europa.eu/publications/selected-issues/polydrug-use-patterns-</u> <u>and-responses\_en</u>
- Ismail, R., Abdul Manaf, M. R., Hassan, M. R., Mohammed Nawi, A., Ibrahim, N., Lyndon, N., ... Kamarubahrin, A. F. (2022). Prevalence of Drug and Substance Use among Malaysian Youth: A Nationwide Survey. *International Journal of Environmental Research and Public Health*, 19, 4684. <u>https://pubmed.ncbi.nlm.nih.gov/35457562/</u>
- McCambridge, J. & Strang, J. (2003). The efficacy of single-session motivational interviewing in reducing drug consumption and perceptions of drug-related risk and harm among young people: result from a multi-site cluster randomized trial. *Addiction*, 99(1), 39-52. <u>https://pubmed.ncbi.nlm.nih.gov/14678061/</u>
- O'Donnell, J., Gladden, R. M., Mattson, C. L., Hunter, C. T., Davis, N.L. (2020). Vital Signs: Characteristics of Drug Overdose Deaths Involving Opioids and Stimulants — 24 States and the District of Columbia, January–June 2019. *Morbidity Mortal Weekly Rep.*, 69, 1189–1197. <u>http://dx.doi.org/10.15585/mmwr.mm6935a1</u>
- Ohana, D., Maayan, R., Delayahu, Y., Roska, P....Yechiam, E. (2015). Effect of dehydroepiandrosterone add-on therapy on mood, decision making and subsequent relapse of polydrug users. *Addiction Biology*, 21(4), 885-894. https://doi.org/10.1111/adb.12241
- Regier, D. A., Kuhl, E. A. & Kupter, D. J. (2013). The DSM-5: Classification and criteria changes. *World psychiatry*, *12* (2), 92-98. <u>https://doi.org/10.1002%2Fwps.20050</u>
- Smedslund, G., Berg, R. C., Hammerstrøm, K. T., Steiro, A., Leiknes, K. A., Dahl, H. M. & Karlsen, K. (2011). Motivational interviewing for substance abuse. *PubMed*, 5. <u>https://pubmed.ncbi.nlm.nih.gov/21563163/</u>