



## Chapter 2

### Drug Use as a Social Problem

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### Costs of Drug Use to Society

- Deaths
- Emergency room visits
- Drugs in the workplace and lost productivity
- Broken homes, illnesses, shorter lives, etc.
- Cost of maintaining habit
- Cost of criminal behavior
- Cost of treating patients
- Fetal alcohol syndrome
- **Others?**

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### Changing Attitudes

- **What made the government change from the laissez-faire attitude of the 1800s to one of control?**
  - 1. Toxicity
  - 2. Dependence
  - 3. Crime

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# 1. Toxicity

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**Toxic** = poisonous, deadly, or dangerous

- What makes a drug toxic?
  - Amount used
  - How it is used
  - What the user did while on the drug

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# Toxicity

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- Physiological toxicity vs. behavioral toxicity
- Acute effects vs. chronic effects



Acute behavioral toxicity (drunk driving)



Chronic physiological toxicity (cirrhosis)

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# Drug-Related Toxicity

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Examples of acute toxicity

- **Behavioral:** "Intoxication" that impairs the actions of drug users and increases the danger to themselves and others
- **Physiological:** Overdose that causes the user to stop breathing

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## Drug-Related Toxicity

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Examples of chronic toxicity

- Behavioral
  - Personality and lifestyle changes
  - Effects on relationships with friends and family
- Physiological
  - Heart disease
  - Lung cancer
  - Cirrhosis
  - Other health effects

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## Drug Abuse Warning Network

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- A system for collecting data on drug-related deaths and emergency room visits at *some* U.S. *metropolitan* hospitals
- DAWN collects data on improper use of legal prescription and over-the-counter drugs as well as illicit drugs



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## Drug Abuse Warning Network Toxicity Data

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<p><b>ER Visits</b></p> <ol style="list-style-type: none"> <li>1. Cocaine</li> <li>2. Alcohol-in-combination</li> <li>3. Marijuana (?)</li> <li>4. Prescription Opioids</li> <li>5. Benzodiazepines</li> </ol>	<p><b>Deaths</b></p> <ol style="list-style-type: none"> <li>1. Prescription Opioids (not heroin)</li> <li>2. Cocaine</li> <li>3. Alcohol-in-combination</li> <li>4. Benzodiazepines</li> <li>5. Methadone</li> </ol>
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## Drug Abuse Warning Network

- What it tells us about how dangerous a drug is:
  - Simply gives us total deaths/ER visits
- What it does not tell us about how dangerous a drug is:
  - Consider relative danger vs. total impact of the drug
  - Number of users vs. number of reported problems

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## 2. Dependence

Changing views:

- Early medical model = true addiction involves physical dependence; key is treatment of withdrawal symptoms
- Positive reinforcement model = drugs can reinforce behavior without physical dependence
- Psychological dependence is increasingly viewed as the driving force behind repeated drug use
  - This refutes the sometimes common belief that drugs that aren't as strongly physically addicting are less dangerous

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## Substance Abuse and Dependence: DSM-IV-TR

- APA diagnostic criteria for abuse and dependence (page 36)
- Complex behavioral definitions
- Dependence can occur with or without physiological dependence (i.e., withdrawal)

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## Substance Dependence: DSM-IV-TR

- A maladaptive pattern of substance use leading to clinically significant impairment or distress, as manifested by three (or more) of the following, occurring at any time in the same 12-month period:
  1. Tolerance
  2. Withdrawal
  3. Substance often taken in larger amounts or over a period longer than intended
  4. Persistent desire or unsuccessful efforts to cut down or control substance use
  5. A great deal of time is spent in obtaining the substance
  6. Important social, occupational, or recreational activities are given up or reduced because of substance use
  7. Substance use continues despite knowledge of having a persistent or recurrent problem that is caused or exacerbated by the substance

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## Substance Abuse: DSM-IV-TR

- A maladaptive pattern of substance use leading to clinically significant impairment or distress, as manifested by one or more of the following occurring at any time in the same 12-month period:
  1. Recurrent substance use resulting in failure to fulfill major role obligations at work, school, or home
  2. Recurrent substance use in situations in which it is physically hazardous
  3. Recurrent substance-related legal problems
  4. Continued substance use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of the substance

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## Is Dependence Biological?

- Is dependence due to biochemical or physiological actions in the brain?
- Still no way to scan the brain and know if a person has/had developed dependence
  - Genetic physiological or biochemical markers have been sought as well, but none has proven reliable

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## Is Substance Dependence a Disease?

- Founders of AA characterized alcohol dependence as a disease
- Others argue that dependence doesn't have all the characteristics of a disease
  - There are ways to test and treat the effects of alcoholism but not the disease itself
  - There is some disagreement over how to define disease as well

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## Biopsychosocial Perspective

- Dependence is related to dysfunctions of:
  - Biology
  - Personality
  - Social interactions



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## 3. Drugs and Crime

- Drug use may change a person's personality
- People under the influence may commit crimes (e.g., many cases of homicide, domestic violence, etc.)



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## Drugs and Crime

- Crimes may be carried out to obtain money for drugs
- Drug use is a crime



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## Why We Regulate Drugs

- We want to protect society from the dangers of some types of drug use = legitimate social purpose
- Some laws are not developed as part of a rationally devised plan and may not be realistic or effective
  - Current laws

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