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Depression among Alcohol Dependents at A Deaddiction Center in Tiruchirappalli.

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Abstract: Alcoholism itself has a variable meaning according to WHO(World Health Organization) it not only referring to the disease concept of alcoholism, it can be referring to the increased harm of consuming alcohol physically, psychologically; individually or socially. The disease concept appeared in scholarly literature until 1950s. It has been known that alcohol is linked with diseases incidences and courses of diseases. Depression can lead to long term health issues; while alcohol is also one of the global burdens of diseases. This study is trying to describe how depression leading to alcoholism and alcoholism leading to depression. This comorbid condition affects the healthy population to be at risk due the trends of alcohol consumption are increasing. The link between alcoholism and depression is important because it needs treatment for both conditions. The present study is based on describing level of Depression among Alcohol Dependents at a Deaddiction center in Tiruchirappalli District. The researcher adopted 50 samples from a Deaddiction center in Tiruchirappalli District and used simple random sampling in this descriptive study. The findings show that there is a significant relationship between years of alcohol dependence and depression, there is no significant relationship between age at first use of alcohol and depression, and there is a significant association between pattern of social life and depression

Keywords: Alcohol dependent, Depression, Deaddiction center, Comorbidity

I. Introduction

Alcohol use can slide into abuse and then dependence. People who are dependent on alcohol or drugs may build up tolerance and need increasing amounts to feel the same effects. They may spend more time obtaining and using them, as well as recovering from their effects. They may find themselves repeatedly unable to quit using substances, even once they recognize that they have a problem. When they do quit, they can go into withdrawal, which is sometimes life threatening.

Alcohol use is widely prevalent in Indian society and consequently results in widespread losses in the form of injurious physical health outcomes like cirrhosis of liver, heart disease, diabetes as well as leads to absenteeism, road traffic accidents and various mental health and behavioural problems. Alcohol is one of the leading causes of death and disability globally and the same is true for our country India. A total of 3.2% of deaths worldwide are caused by alcohol every year. As per World Health Organization One fourth to One third of male population drinks alcohol in India and neighbouring south Asian countries and the use amongst women in increasing.

Alcohol Use Disorder is the continuous use of alcohol despite evidence of harm and repeated attempts to cut down the use. It includes tolerance to alcohol which means higher amount is needed progressively to have the same effect and a characteristic cluster of mental and behavioural symptoms appearing when one does not take alcohol i.e., withdrawal. Alcohol use disorder results in harm and damage to one's physical and mental health, affects one's functioning at work and results in relational conflicts and social and legal problems.

Prevalence and Extent of Problem in India

Alcohol use is quite common in India both in rural and urban areas with prevalence rates as per various studies varying from 23% to 74% in males in general and although it's not that common in females but it has been found to be prevalent at the rate 24% to 48 % in females in certain sections and communities.

In 2005 the estimated numbers of people using alcohol in India was 62.5 million with 17.4 % of them (10.6 million) having alcohol use disorder and of all hospital admissions in India 20-30% are due to alcohol related problems.

Alcoholism and drug addiction are diseases. The craving that an alcoholic or addict feels for their substance of choice can be as strong as the need for food or water. They will continue using despite serious family, health, or legal problems. Alcohol and/or drug use doesn't necessarily have to affect your ability to function academically to be a problem. Consider also how it affects your health, relationships, and overall

behaviour. According to recent research by WHO, alcohol abuse or dependence may increase a person's risk for developing depression in the first place. One explanation is that alcohol might trigger a genetic vulnerability for the disorder. Also, because alcohol is a depressant, this may lead to depressed mood among people who already abuse or depend on alcohol. Also, having a family member who's struggled with alcoholism or depression increases your risk for both disorders.

The relationship of alcohol and depression has always been a subject of clinical and scientific interest. Though many studies have been carried out to clarify the mode of this relationship it still remains in its complexity an area for further research. The two basic ideas of a possible connection are on one hand symptomatic alcoholism with a pre-existing depression and on the other hand alcoholism leading to a symptomatic depression.

II. Review of Literature

1. Grant BF and Harford TC (1995).

The authors made a study on Comorbidity between DSM-IV alcohol use disorders and major depression using a representative sample of the United States. In this study the association between alcohol dependence and major depression was greater than the association between abuse and major depression and the association between alcohol abuse and major depression was consistently greater for females and blacks, compared to their male and non-black counterparts. Implications of the results are discussed in terms of professional help seeking, the self-medication hypothesis, and differential social control theory.

2. Joseph M. Boden and David M. Fergusson (2011)

In their study on Alcohol and Depression. They find out AUD(Alcohol Use Disorder) and MD(Major Depression) is one in which AUD increases the risk of MD, rather than vice versa. Potential mechanisms underlying these causal linkages include neurophysiological and metabolic changes resulting from exposure to alcohol.

3. Darshan MS et al.(2013)

In their study on A study on professional stress, depression and alcohol use among Indian IT professionals. A total of 129 subjects participated in the study. 43.4% of the study population were found to be at risk for developing depression. Subjects who were at risk for developing depression had 4.1 times higher prevalence of harmful alcohol use compared with those who were not at risk for developing depression. higher rates of professional stress, risk for developing depression and harmful alcohol use among software engineers could hinder the progress of IT development and also significantly increase the incidence of psychiatric disorders.

III. Research Methodology

Significance of This Study

Through review of literature the researcher identified patients who are in clinical practice commonly have multiple problems when depending alcohol. Patients with co-occurring depression and alcohol dependence need more attention in the treatment cum rehabilitation process and how these situations make the alcohol dependent create negative things his own life.

Title of the Study

Study on depression among alcohol dependents at a Deaddiction center in Tiruchirappalli.

Aim of the Study

To study depression among alcohol dependents at a Deaddiction center in Tiruchirappalli.

Objectives

- To find out the socio-demographic characteristics of the respondent's.
- To find out the relationship and association between the dependent and independent variables.

Hypotheses

- There is a significant relationship between years of alcohol dependence and depression.
- There is a significant relationship between age at first use of alcohol and depression.
- There is a significant association between pattern of social life and depression

Research Design

Descriptive research design: In this study the effort of the investigation is to provide a descriptive profile of the respondents. The design helped the researcher to portray the level of Depression among alcohol dependents for that purpose a descriptive cross sectional research design was used. The study also seeks to find out the relationship and association between certain variables associated with the Depression and Alcohol Dependence. Hence, it was felt apt to apply that design for the study.

Universe

The universe of the study belongs to Alcohol Dependence patients between the age group of 26 to 62 admitted Sigaram Deaddiction Centre, Tiruchirappalli.

Sampling

This researcher adopted 50 respondents as samples from the universe. Sampling technique adopted by the researcher is Lottery method.

Tools for Data Collection

The researcher used BDI-II (Beck Depression Inventory II version) along with socio demography details of the patient. In which a client has used alcohol over the past one year were the samples of this study.

Statistical Test

Correlation and Chi-Square used for interpreting the data.

Analysis and Interpretation Socio demographic profile

Sl No	Variables	No., of respondents	Percentage
1	Age of the respondent	25	50.0
	20 to 35		
	36 to 50	21	42.0
	51 and above	4	8.0
2	Age at first use of alcohol	23	46.0
	13 to 21		
	22 to 29	17	34.0
	30 to 37	10	20.0
3	Social pattern of drinking	5	10.0
	Drink only in social situation		
	Drink only when socially isolated	7	14.0
	Drink in social situation and when socially	12	24.0
	isolated		
	Always alone drinker	26	52.0

Pearson Coefficient of Correlation

Sl.no	Overall Depression	Correlation value	Statistical inference
1	Years of alcohol dependence	146	P < 0.05 Significant
2	Age at first use	062	P>0.05 Not significant

The table shows that if years of alcohol dependence increases, Depression also increases it statistically proves alcohol itself a mood altering drug that depresses bodily functions and mental activities and age at first use of alcohol is not correlated with overall depression.

Association between Pattern of Social life and Overall Depression

Sl.no	Pattern of social life	Overall Depression		Statistical inference
		Low	High	
1	Regular sustained contacts with	6 (12%)	4(8%)	X ² =5.99
	friends/relatives			Df=2
2	Visiting member of organized social group	2(4%)	2(4%)	P < 0.05
3	Mixed frequent casual contacts or occasional	5(10%)	3(6%)	Significant
	close contacts			
4	Some casual contacts, occasional close	3(6%)	4(8%)	
	contacts			
5	Isolated solitary activities only	9(18%)	12(24%)	

From the above table it is inferred that High level of depression in associated with Isolated solitary activities of the respondents in their pattern of social life.

IV. Conclusion

Alcohol use is widely prevalent in Indian society and consequently results in widespread losses in the form of injurious physical health outcomes like cirrhosis of liver, heart disease, diabetes as well as leads to absenteeism, road traffic accidents and various mental health and behavioural problems. Alcohol is one of the leading causes of death and disability globally and the same is true for our country India.

Depression is the first comorbid condition that occur along with alcohol dependence, but less concentrated in some of the Deaddiction centers in Tiruchirappalli. There is recovery from depression after alcohol detoxification and rehabilitation, and majority of the cases are not getting necessarily require treatment for the depression. In addition persons that is depressed have a significantly higher craving for alcohol after detoxification and rehabilitation. It is important to screen for depression and evaluate to determine the treatment needs during detoxification and rehabilitation.

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