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The relation between substance abuse and psychiatric disorders in adolescence and young adulthood

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Data of substance abuse gathered from all over the world, has indicated that Substance use and dependence cause a significant burden on societies and individuals across the globe. The World Health Report 2002 indicated that 8.9% of the total burden of disease comes from the use of psychoactive substances a WHO, 2004. In 2005, the WHO reported that there are about 200 million addicts around the world. With a population of around 80 million inhabitants, drug addiction is considered one of the serious problems that worry both the people and the government. It affects young people within their productive years and may lead to many problems such as social maladaptation, decreased work productivity and job loss. As can be further proven by our study, stress has long been recognized as one of the most powerful triggers for drug abuse, craving and relapse. People who experience major trauma and those with PTSD or depression may self-medicate with drugs or alcohol to relax and cope with stress a Williams, 2002. Stress exists in various forms in our lives; it could be in the form of parents separating, money troubles, dropping out of school, etc.. In today's modern age, it's extremely difficult to remain resilient with all the distress that surrounds us. Therefore, people who face strong stressors in their lives, often do resort to substance use to mask the pain of everything they are going through. That's why adolescence is a very critical stage, as teens are extremely vulnerable to peer pressure, often leading to substance abuse. As will be clearly seen by our results, substance abuse in adolescents is a grave problem with direct consequences that affects a marked percentage of adolescents nowadays. Psychiatric disorders could present as risk factors for substance abuse; hence, management of these comorbid psychiatric disorders may prevent the persistence of this problem into adulthood. To sum up, substance use remains a public health problem among adolescents. Comorbidity is the rule rather than the exception, and psychiatric disorders often predate SUD. However, treatment can alleviate impairment caused by comorbid psychiatric and SUDs. The earlier we initiate the treatment of these adolescents, the better the outcome. The longer the time an adolescent spends in treatment, the better the prognosis.

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