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Transition from Smoking Drugs to Injectable Drugs: Causes and Consequences

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Abstract: Main focus of this study was to investigate the causes, which pushed the smoking drug users towards the injectable drugs and its consequences on their health. In order to get the fruitful results, 30 indepth interviews were conducted from the selected area of Faisalabad city. The findings of the study revealed that, peer pressure, first time inject to check the intensity of the new drug, no check and balance on injectable drugs and users, easy to inject, long duration of addiction, less availability of smoking drugs, fluctuation in prices and impurity in smoking drugs were the factors which pushed the young smoking drug users towards the injectable drug use. Weight loss, thinness of blood, sore wound, reddishness and abacuses in the injecting place, hepatitis "C" and blood cancer, were reported as physical consequences of injectable drugs.

Key words: Injectable drugs, smoking drugs, impurity, hepatitis C, abacuses

INTRODUCTION

Drug abuse is not a new phenomenon in Pakistan because the natural environment of northern areas of Pakistan and the territory of Afghanistan is very suitable for drug cultivation and production. It was estimated that Afghanistan produces 60 to 70 percent of the world's supply of drugs (World Drug Report, 2012). All the drugs trafficked in Pakistan from Afghanistan, via western provinces, Khyber Pakhtunkhwa and Balochistan. Afghanistan has 11 provinces linked with the border line of Pakistan and only four from them are declared poppy free. It was estimated that they had cultivated less than 100 hectares of poppy in 2012 (UNODC, 2013).

Drug is simple substance but has very strong emotional consequences. In the other words any chemical substance that creates physiological, emotional and behavioral instability in the human body is called the drugs (Ausubell, 1958). In Pakistan, non-medical use of drugs is increasing rapidly. Smoking drug users are shifting from smoking drugs towards the injectable drugs rapidly. Injectable drug user is defined as person who had injected drugs for non-medical purposes during last six months (Altaf et al., 2009). It was estimated that Pakistan had 135,000 injectable drug users (range 141,000-162,500) in 2008 (IDURG, 2010). A large number of increases in injectable drug users are observed during the last few years. A recent report showed that Pakistan had 423000 individuals who inject the drugs (UNODC, 2013). The rapid increase of injectable drug users in Pakistan addresses so many factors which may cause the growing tendency of injectable drugs especially among the young individuals.

Infect Pakistan has banned unlawful drugs cultivation, marketing, trafficking and abuse due to the magnitude. degree and severity in the consequences that was increasing with the passage of time, this circumstances pushed the smoking drug users towards the injectable drugs (Malik and Sarfaraz, 2011). Injectors of heroin are an ever growing proportion of total heroin users rising from less than 2 percent in 1993 to 15 percent in 2000 to more than a quarter in 2007. This increase is due to the law enforcement that decreases the drug supply and increase the cost. This change is the major reason of popularity of injectable drugs which is more economical method of addiction (Gull, 2009). The most common change in drug use practices is the move from the smoking of opium to the injecting of heroin and other drugs as a result of law enforcement (UNDP, 2000). Drug users prefer the injectable drugs as compare to smoking or inhaling, because it promotes the both functions like increasing dependency as well as shifts in preferences (Nai Zindagi, 2008).

Major focus of the study: The present study attempts to investigate the causes which pushed the young smoking drug users towards the injectable drugs and its consequences on their health. Following were the objectives of our study:

- 1. To explore the causes, which pushed the smoking drug users towards the injectable drugs
- 2. To know about the material which was used to prepare the drug injection
- 3. To highlight the physical consequences of injectable drugs on users

MATERIALS AND METHODS

The present research was conducted in June 2013. Before conducting the survey, researcher used to pass through the "Daglus Pura" and "Nrah wala chwok" regularly, which were the most rushing places of the Faisalabad bazar area. Daglus pura was consisted of many scrap shops from where young injectable drug users used to come and sell the different scrap items which were collected by them from different bazars. In fact at the time of survey (may be now as well) Daglus pura was the hub of injectable drug users. Researcher found that, in the evening time mostly injectable drug users used to come at scrap shop by carrying a polyester bag on their shoulder filled with different scrap items and sold them on the scrap shop for the sake of the money. Mostly injectable drug users used to sit near the scrap shops and openly inject the drugs. Several times, near about the mid night, researcher also observed that young injectable drug users were sleeping on the footpaths and stairs of the shops in miserable conditions.

In order to collect the data, 30 purposeful in-depth interviews were conducted from the Duglus pura and nurah wala road situated near the jhang bazar, a shopping area of Faisalabad. It was very difficult for the researcher to interact with the young injectable drug users because most of the injectable drug users were afraid from the police and media. Researcher spent money to create the healthy and unthreatening environment with the first two (respondents) young injectable drug users. With the help of first two respondents researcher was successful to interact with the other young injectable drug users. A set of open ended questions was used in the interview guide. All the questions were typed in Urdu language but questions were asked to the respondents in local Punjabi language. All the responses were noted by the researcher in Urdu language on developed printed pages having headings of themes, sub themes questions including some tables of demographics.

Pretesting was also done from the two injectable drug users to check the validity and consistency of the questions, themes and sub themes. After pretesting some changes were done in the portion of material and methods used in preparing the drug injections, for example questions were added to check the intensity, per day injections and price. Question about dealing with the syringe was also added in interview guide after the pretesting.

After visiting the 30 injectable drug users' data was analyzed carefully. First of all data was converted from Urdu language to the English language by maintaining the actual meanings and intensity of the answer. Secondly data was coded manually in a systematic manner on simple papers. Finally data was analyzed in an organized way and conclusion was drawn.

Table 1: Some important characteristics of the injectable drug users

Age group	N (%)
15-18	3 (10)
19-22	21 (70)
23-26	6 (20)
Marital status	
Un-Married	30 (100)
Qualification	Levels
Illiterate	6 (20)
Primary	13 (43.33)
Middle	7 (23.33)
Matric and Above	4 (13.33)
Source of income	
Garbage collecting and selling	15 (50.00)
(plastic, iron, paper pieces)	
Working on garbage shop	4 (13.33)
Situational earnings	11 (36.66)
(begging, stealing, cleaning roads, etc.)	
Residential pattern	
Nature of residence	
Homeless (roads, footpath, shop stairs)	28 (93.33)
Having home	2 (7.66)

	Age groups of the young drug users			
	15-18	19-22	23-26	
Type of drugs	N (%)	N (%)	N (%)	
Smoking drugs	21 (70)	8 (26.66)	1 (3.33)	
Injectable drugs	3 (10)	23 (76.66)	4 (13.33)	

RESULTS

Causes which pushed the smoking drug users towards the injectable drugs: Present research revealed that most of the respondents initially started to use the smoking drugs within the peer groups in the slum environment. The Young smoking drug users involved in the habituation of injectable drugs when they enhance their social circle. As like one young injectable drug user stated that:

"I was a regular smoking drug user. One of my close friends started to use injectable drugs. One day, I went to meet him and saw that he was sitting within a group and the whole group was injecting drugs to each other. He also forced me to take an injection of drug. I was convinced by him and finally he injected a low dose of drug in my body. After that I regularly started to sit with injectable drug users and became habitual of injectable drugs."

It was repeatedly found that impurity in the other smoking drugs (heroine chars); fluctuation in prices of other smoking drugs, strong check and balance on smoking drugs pushed the young smoking drug users towards the injectable drug use. As like one respondent stated that,

"I started to use in injectable drugs because smoking drugs were very expensive and impure in nature. Drug dealers mix myrtle in "chars" to enhance the quantity, which reduce the purity and intensity of addiction."

One other young injectable drug user stated that;

"Mostly police creates strict check and balance on, smoking drug dealers and users; these circumstances create risk for the availability of drugs." Present research revealed that easy availability of drug injections from the medical stores, easy to inject, high intensity of addiction, and long duration of addiction pushed the smoking drug users towards the habituation of injectable drugs. One injectable drug user stated that: "I started to use injectable drugs because all the injectable drugs are easily available at any local medical store. These drugs are easy to inject in body. Infect a drug injection has high intensity and long duration of addiction as compare to any other smoking drug."

It was found that, some respondents first time injected drugs only to check the intensity and taste of the new type of drug but later on they became habitual. For example one very young injectable drug user stated that: "I first time injected the drug injection only to check intensity of new drugs, I felt that my body was more comfortable with injectable drugs. With the passage of time I became habitual of injectable drugs"

It was most rarely found that stigma and enmity pushed some young smoking drug users towards the habituation of injectable drugs. As like one respondent highlighted that;

I was a smoking drug user. My family members took me a drug re-habitation center for my treatment. After two months treatment, I gave up to use the drugs. My elder brothers and neighbors blamed me that you are still a drug user. Consequently I again started to use drugs smoking drugs. Within 4 months I became habitual to use injectable drugs."

One other young injectable drug user stated that,

"I was already a smoking drug user. My father had a property dispute with my uncle. After the death of my father, my uncle gave money to some injectable drug users to involve me in injectable drug abuse. The conspiracy of my uncle became successful and finally I involved in injectable drug abuse."

It was found that some smoking drug users started to use injectable drugs because injectable drug users are not arrested by the police. For example one young injectable drug user stated that;

"Police only arrest and beat the smoking drug users" One injectable drug user stated that;

"Now I can openly inject the injection drug at any place even in any bazar or any corner of the road".

Method and material used by the respondents to prepare the drug injection: This portion of our research deals with the preparation of the drug injection. This portion was categorized into three portions, what type of material used in preparing the drug injection? How to inject the drugs? And how to deal with the syringe?

Material used by the respondents in preparation of the drug injection: It was most repeatedly found that, injectable drug users mix the different materials to prepare a drug injection.

Table 2: Martials, intensity and price table

Material	Intensity	Price/day injection in rupees	No. of injections per day
Heroine mixing with injections	High	130-150	1-3
Injections mixing with tablet	Moderate	40-60	2-6
Simple injections	Low	30-40	5-7

It was most repeatedly found that preparation of the injection depends upon the availability of money. High intensity drug injection is prepared by mixing heroine with the medical injections like *diazepam*, *Avil*, *Buprenorphine*. While moderate or low intensity injections are prepared by mixing the tablets, like *Gesic*, *Zenix* and *Avil* with the medical injections or simply medical injection. One injectable drug user stated that; "I prepare a drug injection by seeing my pocket."

One young injectable drug user said that;

"If my pocket allows me, I will prefer to use the high intensity drug injection by mixing heroine with medical injection like *Diazepam*, or *Avil*. Otherwise I prefer to use simple low intensity or moderate intensity injections which are prepared by mixing the injection of *buprenorphine* with tablets like *Gesic or Zenix*"

Method used by the respondents to inject the drugs: It

was most repeatedly found that, almost all young injectable drug users use a specific technique to prepare and inject the drugs. They break the tip of injection by pressing it with their teeth. As like one other respondent stated that:

"First I unwrap "Puri" (small quantity of heroine wrap in a small piece of paper) and pore some heroine in a syringe. After that I wrap the small part of my shirt on the tip of the injection and break it by pressing it in my teeth. I drop this medical injection in the syringe. I inject this mixture in my body after shaking and mixing"

It was most repeatedly revealed that injectable drug users inject the drugs in the different parts of their body, for example in arms, and legs. Mostly injectable drug users inject the drugs in the soft veins of the body. In this way drug suddenly mix in blood and circulate in whole body which creates the high intensity of addiction. One young injectable drug user stated that;

"I inject the drugs in every part of my body including arms, legs, hips, penis, foot and ankle. I feel more addiction when I inject a drug injection in the soft veins of my body."

Dealing with the syringe: Present study revealed that syringe sharing practices is very common among almost all young injectable drug users. Mostly injectable drug users borrow the syringe and needle from other injectable drug users to save the cost. One young injectable drug user stated that:

"I often borrow the syringe from my friend and return it back after using and washing."

Injectable drug users have deep affiliation with their groups. They console each other in every tough situation. They consider that syringe sharing is a symbol of deep affiliation with their whole group. As like one injectable drug user stated that:

"In my friends circle syringe sharing is considered as an indicator of deep affiliation with the friends circle. It is also a symbol of the fast and deep friendship within the groups"

Consequences of injectable drug use: This portion of our research was only focused on physical consequences of injectable drugs on users.

Physical consequences of injectable drug use: It was found that all the injectable drug users were facing health problems. Almost all participants of the present research had hepatitis "C" positive. They were aware that syringe sharing was major reason, of exchange the germs, from one body to another, which leads to the hepatitis "C". One young injectable drug user stated that; "I often borrow a syringe from my friends. Once I became ill and went to hospital with my brother. After the medical checkup I came to know that I was the patient of hepatitis "C".

Likewise syringe sharing practices also creates the cancer risk among the young injectable drug users. In the present research it was found that 2 out of 30 injectable drug users were the patient of blood cancer. As like one injectable drug user stated that;

"Once I injected wrongly with a borrowed syringe and after some time it became a serious wound at the injecting place. Last month I came to know that I am a patient of blood cancer"

Non-medical use of injecting substances may affect their health. It was repeatedly found that young injectable drug users were losing their weight rapidly. For example one young injectable drug user stated that;

I was very healthy, when I was not habitual of injectable drugs. After involving in injectable drug abuse I have lost my body weight.

It was repeatedly found that the excessive uses of injectable drugs reduce thickness of the blood and bleeding start rapidly from that part of the body from where drug was injected by the users. On injectable drug user stated that;

"When I inject drugs in my body, Bleeding starts from injecting place. My blood is as thin as water, due to the excessive use of drug injections. I feel, air enter in my body from injecting place and mix in my blood"

It needs a great skill for injecting the drugs hence wrongly injected drugs create a great risk to the health of injectable drug users. It was found that some participants of this study were wrongly injected the drugs and they have abacus, reddishness and swelling in the injecting place. One young injectable drug user stated

that:

"It is the matter of fact that due to my shivering hands, I sometimes had suffered in abacuses, sore wound, reddishness and swelling in injecting place of my body"

DISCUSSION

Our study revealed that peer pressure, impurity in smoking drugs, first time inject to check the intensity, long duration of addiction, easy to inject, easy availability, stigma, result of enmity, fluctuation in the prices of smoking drugs, law and order, and less check and balance on injectable drug users were the factors which pushed the young smoking drug users towards the injectable drug abuse. The findings of our study are lined with the findings of other researches; likewise Crofts et al. (1996) reported that most of the young individuals forced by their peers to initiate the injectable drugs. In this context the findings of Salik et al. (2004), Ahmad and Shafi (1990), Nabeela (1999) also found that peer pressure played a significant role in starting the every kind of drug habituation. Furthermore Vermund et al. (2006) found that fluctuations in heroin availability, purity and price forced many smoking heroin users to change into injecting drug users. While Emmanuel and Attarad (2006) found that easy availability and cost of the new medical drugs pushed the young smoking drug users towards the injectable drug use. According to the UNDP (2000) the most common change in drug use practices is the move from the smoking of opium to the injecting of heroin and other drugs as a result of law enforcement. According to Nai Zindagi (2008) most of the drug users prefers to use injectable drugs because it has long duration of addiction.

Our study found that excessive non-medical use of injections was caused the health problems like; weight loss and reduce the thickness of the blood of the users. Syringe sharing practices were also very common among the injectable drug users, which were reported as the major cause of hepatitis C among the young respondents of our study. The findings of our research are consistent with the findings of other researches for example; the findings of Hope et al. (2014) and Hagan et al. (2001) revealed that hepatitis C is associated with those injectable drug users who share syringe with each other. While Grund et al. (1996) reported that syringe sharing practices leads to the blood-borne pathogens. Our study also revealed that injectable drug users inject the drugs in the different parts of the body like arms and leas. They prefer to inject the drugs in the soft veins with the particular technique. Wrongly injected drug injections may cause the abacuses, swelling, sure wound and cancer in the injecting place of their body. The findings of this aspect of our research are agreement with the other researches likewise; Hope et al. (2014) also reported injectable drug users mostly inject the drugs into theirs arms and they also had to bear redness,

swelling, tenderness, abscess, and a sore wound at injecting place. Lee *et al.* (2002) also found that injectable drug users are involved in different health infections like HIV.

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