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Research Article

SUBSTANCE ABUSE AMONG INDIAN YOUTH: A NARRATIVE REVIEW OF EPIDEMIOLOGY, RISK FACTORS, PREVENTION, AND THE ROLE OF HOMOEOPATHY

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Abstract

In India, substance misuse among young people is becoming one of the most significant social, psychological, and medical issues. Due to shifting lifestyles, peer pressure, emotional stress, unemployment, and media influence, adolescents and young people are more frequently exposed to alcohol, tobacco, opioids, cannabis, inhalants, and synthetic drugs.[1] Substance addiction has a negative impact on social productivity, education, family connections, mental health, and physical health. Chronic abuse causes dependence, mental illness, criminal activity, violence, mishaps, and financial strain on society. Because the adolescent brain is still developing, especially in the areas connected to judgment, impulse control, and emotional regulation, youth are especially vulnerable.[17] Neurotransmitter pathways are altered and compulsive behaviour patterns are reinforced by repeated exposure to addictive substances. To lower the prevalence of addiction, prevention techniques such as family support, counselling, rehabilitation, and awareness initiatives are crucial.[2] The holistic and customised approach of homoeopathy may be useful in treating the psychological and emotional disorders linked to addiction. When it comes to treating cravings, withdrawal symptoms, anxiety, irritability, insomnia, depression, and constitutional susceptibility, homeopathic drugs might be regarded as helpful interventions. The epidemiology, frequently abused substances, causes, effects, prevention, rehabilitation, and homoeopathic scope of substance misuse among Indian youngsters are all covered in this article.[8]

Keywords: Gaza war, Regional security, Middle East, and Collective security.

INTRODUCTION

To comprehensively review the epidemiology, risk factors, health consequences, prevention strategies, rehabilitation approaches, and the potential role of homoeopathy in the supportive management of substance abuse among Indian youth.

Objectives

1. To describe the epidemiology and current trends of substance abuse among adolescents and young adults in India.
2. To identify the commonly abused substances and their physical, psychological, and social consequences.
3. To discuss the major risk factors contributing to substance abuse in youth.
4. To review preventive measures and rehabilitation strategies for substance use disorders.
5. To explore the scope of homoeopathic management in reducing cravings, withdrawal symptoms, and relapse while promoting holistic recovery.
6. To highlight the importance of an integrated multidisciplinary approach for prevention and treatment.

MATERIALS AND METHODS

Study Design

This article is a narrative review of the available scientific and homoeopathic literature.

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Data Sources

The review was prepared using information from:

- World Health Organization (WHO)
- National Institute on Drug Abuse (NIDA)
- UNICEF
- UNODC World Drug Report
- Park's Textbook of Preventive and Social Medicine
- Harrison's Principles of Internal Medicine
- Davidson's Principles and Practice of Medicine
- Kaplan & Sadock's Synopsis of Psychiatry
- Organon of Medicine by Samuel Hahnemann
- Boericke's Materia Medica
- Kent's Materia Medica
- Allen's Keynotes
- Murphy's Homoeopathic Medical Repertory
- Peer-reviewed journal articles included in the reference list.

Search Strategy

Relevant literature published in textbooks, international guidelines, and peer-reviewed journals relating to youth substance abuse, addiction, epidemiology, prevention, rehabilitation, and homoeopathy was reviewed.

Selection Criteria

Studies and authoritative publications discussing:

- Substance abuse among adolescents and youth
- Risk factors

- Clinical consequences
- Preventive interventions
- Rehabilitation strategies
- Homoeopathic principles and therapeutic scope were included.

Data Synthesis

The retrieved information was narratively synthesized into sections covering epidemiology, commonly abused substances, causes, health effects, prevention, rehabilitation, repertorial considerations, and homoeopathic management.

INTRODUCTION

The detrimental or dangerous use of psychoactive substances, such as alcohol, tobacco, narcotic medications, and psychotropic agents, is referred to as substance abuse. It entails frequent usage in spite of knowledge of potential social, psychological, or physical consequences. Compulsive drug-seeking behaviour, tolerance, and withdrawal symptoms are characteristics of addiction.[2] India has one of the largest youth populations in the world, and increased rates of substance addiction among teenagers and young people have been attributed to factors such as growing urbanisation, globalisation, academic competitiveness, family disputes, unemployment, and easy access to alcohol. Research shows that adolescence is a common time for substance use to start, primarily because of peer pressure and experimentation.[1]
Substance abuse has an impact on the family, society, and the person. It is linked to poor academic achievement, unsafe sexual behaviour, violence, accidents, mental illness, and social instability. Drug addiction also raises the chance of contracting infectious diseases like hepatitis and HIV through risky behaviours and needle sharing.[17] According to homoeopathic theory, addiction is a disruption of the vital force with underlying constitutional and emotional vulnerabilities. Homoeopathy places a strong emphasis on treating the patient as a whole, considering lifestyle choices, inherited tendencies, and mental, emotional, and physical symptoms.[13]

Epidemiology of substance abuse in India

In India, alcohol and tobacco continue to be the most overused substances, according to national polls. College students and urban young populations are increasingly using cannabis, opioids, inhalants, sedatives, and synthetic substances. Among the significant epidemiological discoveries are:

- The risk of developing a persistent addiction rises with early beginning.
- Although the prevalence of substance addiction among women is constantly rising, it is more common among men.
- Addiction rates are higher in urban slums and economically distressed areas.
- Adolescents with mental health issues and inadequate family support are more susceptible.
- Substance misuse is on the rise due to easy access to drugs through illicit trafficking and internet networks.[11]

Commonly Abused Substances Among Youth

- **Alcohol:** Among Indian youth, alcohol is the most commonly abused psychoactive substance. Alcohol usage is frequently motivated by social acceptance, parties, peer gatherings, and stress reduction. Alcohol initially induces relaxation and exhilaration, but excessive use causes aggressive behaviour, poor focus, emotional instability and impairedjudgment.[9] Hepatitis, cirrhosis, and fatty liver are liver disorders brought on by chronic alcohol misuse. Additionally, it exacerbates cardiomyopathy, neuropathy, hypertension, pancreatitis, gastritis, and nutritional deficits. This Suicidal thoughts, insomnia, anxiety, depression, and alcohol dependence syndrome are examples of psychological impacts. Adolescents who drink alcohol are more likely to commit crimes, drive recklessly, and engage in risky sexual behaviour.[12]

- **Tobacco:** There are two types of tobacco abuse: smoking and smokeless. Young people frequently use cigarettes, bidis, hookahs, vaping devices, gutka, and chewing tobacco. This Nicotine causes transient pleasure and dependence by acting quickly on the brain's reward pathways.[15] Chronic bronchitis, chronic obstructive pulmonary disease, ischemic heart disease, stroke, hypertension, and malignancies of the lungs, mouth, throat, and oesophagus are all brought on by prolonged tobacco use. Teenagers sometimes underestimate how addictive nicotine can be, which can lead to lifetime dependence. Children and family members are also affected by passive smoking.[12]

- **Cannabis:** College students and young people living in cities frequently abuse cannabis preparations like marijuana, ganja, charas, and hashish.[3]." Cannabis causes warped time perception, relaxation, laughing, and altered sensory perception. Chronic use affects academic performance, motivation, memory, and focus. In vulnerable people, excessive cannabis usage is linked to anxiety disorders, panic attacks, psychosis, hallucinations, and symptoms similar to schizophrenia.[2]

- **Opioids:** Synthetic narcotics, heroin, opium, morphine, codeine, and tramadol are examples of opioids. They cause extreme exhilaration and pain relief, but they quickly cause psychological and physical dependence. Severe physical aches, perspiration, anxiety, diarrhoea, vomiting, tremors, sleeplessness, and irritability are all signs of withdrawal. This Hepatitis B, hepatitis C, HIV/AIDS, and infectious endocarditis are all made more likely by intravenous opioid misuse. Death and respiratory depression are possible outcomes of an opioid overdose.[16]

- **Inhalants:** Teenagers frequently abuse inhalants including glue, correction fluid, paint thinner, gasoline, aerosol sprays, and nail polish removers because they are readily available and reasonably priced. These drugs cause exhilaration, confusion, hallucinations, and dizziness. Heart arrhythmias, brain damage, liver malfunction, kidney damage, and sudden death are all brought on by long-term addiction.[16]

- **Synthetic and Club Drugs:** Methamphetamine, ketamine, LSD, amphetamine derivatives, and ecstasy (MDMA) are being used more often at social gatherings and parties. Increased energy, emotional excitation, and hallucinations are the results of these medicines' central nervous system stimulation. Hyperthermia, dehydration, seizures, cardiac arrhythmias, psychosis, aggressive behaviour, and severe depression following intoxication are among the complications.[2]

Causes and Risk Factors

- Peer Pressure: One of the biggest causes of drug and alcohol experimentation during adolescence is peer pressure. Young people may use drugs to mimic peers, avoid rejection, or obtain social approval. [16]
- Family dysfunction: Addiction risk is greatly increased by broken homes, domestic abuse, parental neglect, parental drunkenness, lack of supervision, and emotional deprivation. Teens from unstable homes frequently experience emotional uneasiness and poor coping mechanisms.[16]
- Academic Stress and Unemployment: Youth experience dissatisfaction and despondency due to competitive educational systems, exam pressure, fear of failing, and unemployment. Intoxicants are frequently used by people as short-term stress and anxiety relievers.[16]
- Psychological Factors: Adolescent substance misuse is predisposed by depression, anxiety disorders, loneliness, low self-esteem, emotional trauma, and personality disorders. Drugs may seem to alleviate emotional suffering at first, but they ultimately exacerbate mental health issues.[17]
- Media and Social Influence: Smoking, drinking alcohol, and using drugs recreationally are frequently glamorised in movies, ads, websites, and social media. Teenagers who are exposed to such content are more likely to engage in addictive behaviours.[16]
- Curiosity and Experimentation: Risk-taking and curiosity are traits of adolescence. A lot of young people start using drugs just to feel thrilled or excited.[16]
- Genetic and Biological Factors: Due to a genetic and neurochemical predisposition, a family history of addiction increases susceptibility. Impulsivity, reward sensitivity, and stress response mechanisms are all influenced by genetic variables.[17]

Effects of substance abuse

- Effects on the Body

Abuse of substances harms several organ systems. Tobacco destroys blood vessels and lungs, alcohol damages the liver, opioids reduce breathing, and stimulants have an impact on the heart. Malnutrition, sleep difficulties, impaired immunity, and diminished physical performance are typical among chronic users.[18,19]

- Psychological Impacts

Addiction has a major impact on mental health. Frequent symptoms include anxiety, depression, mood swings, impatience, paranoia, hallucinations, suicidal thoughts, and cognitive decline. Long-term drug misuse disrupts emotional control and modifies the balance of neurotransmitters.[17]

- Effects on Education and the Workplace

Substance addiction impairs motivation, focus, memory, and discipline, which results in subpar academic performance and school dropout. Additionally, unemployment, absenteeism, and decreased productivity are all influenced by addiction.[18]

- Impact on Society

Family disputes, domestic violence, criminal activity, accidents, social isolation, and strained interpersonal relationships are all consequences of drug misuse. Addicts frequently experience a loss of emotional stability and social trust.[20]

- Financial Burden

Addiction raises the cost of medical care, legal fees, rehabilitation, and lost productivity at work. Continuous expenditure on alcohol might lead to significant financial difficulties for families.[17]

Prevention and rehabilitation

- Awareness and Health Education: Adolescents can learn healthy coping mechanisms and comprehend the risks of addiction through school and college awareness programs. Campaigns for community education help dispel myths about substance abuse.
- Family Support and Parenting: Youth are less susceptible to addiction when there is strong emotional ties, good communication, monitoring, and supportive parenting. Early detection of mental distress and behavioural abnormalities is important for parents.
- Psychotherapy and counselling: Group counselling, cognitive behavioural therapy, behavioural therapy, and motivational enhancement treatment are all crucial for managing addiction. The development of self-control and relapse prevention techniques is facilitated by psychological support.
- Rehab Facilities: Detoxification, counselling, career training, and social reintegration are all offered by de-addiction and rehabilitation facilities. Long-term therapy lowers the chance of relapse and enhances recovery outcomes.
- Government Initiatives: To address substance misuse, the Indian government has started awareness campaigns, de-addiction programs, tobacco control regulations, and rehabilitation services.[21]

Homoeopathic scope in substance abuse

According to homoeopathy, addiction is a manifestation of an imbalance in the body, mind, and emotions. Through customised constitutional treatment, the homeopathic approach seeks to restore equilibrium in the vital energy.[13]

Homoeopathy could be useful in:

- Diminishing dependent tendencies and urges.
- Handling withdrawal symptoms include nausea, anger, anxiety, tremors, and insomnia.
- Increasing stress tolerance and emotional stability.
- Handling related psychosomatic symptoms such as headaches, weakness, sleeplessness, and gastritis.
- Encouraging recovery and averting relapse

For comprehensive care, homeopathic management should be combined with counselling, psychotherapy, nutrition, exercise, family support, and rehabilitation programs.

- Several modern homoeopathic repertories include rubrics pertaining to substance abuse and addiction. Notably, Murphy's Homeopathic Medical Repertory incorporates a dedicated Toxicity chapter that contains rubrics relevant to substance dependence, including ADDICTIVE, personality," "DRUG – abuse," "DRUG – addictions," "MORPHINE – addiction, ailments from," "NARCOTICS – abuse," "ALCOHOL – abuse of," and "ALCOHOLISM – delirium tremens. These rubrics provide a systematic framework for repertorial evaluation by enabling the homeopathic physician to correlate the patient's characteristic mental, emotional, and physical manifestations associated with substance use disorders with the totality of symptoms, thereby facilitating individualised remedy selection.

Possible homoeopathic remedies

- Nux Vomica: Associated with irritability, rage, stomach disorders, oversensitivity, sleeplessness, sedentary behaviour, and excessive stimulant usage in cases of alcohol and tobacco addiction. Patients are frequently hardworking, impatient, and ambitious.
- Sulphuric Acid: Helps with trembling, sour vomiting, weakness, haste, and alcohol cravings in chronic alcoholism. In cases of severe alcoholism accompanied by physical fatigue, it is frequently recommended.
- Quercus Glandium Spiritus: Traditionally used to improve liver function and lessen alcohol cravings in long-term drinkers. It could aid in detoxification and lessen the tendency toward reliance.
- Avena Sativa: Beneficial for mental tiredness related to addiction rehabilitation, sleeplessness, nervous exhaustion, and opiate withdrawal. It aids in rehabilitation and functions as a nerve tonic.
- Cannabis Indica: Cannabis abuse is linked to hallucinations, changed perception, heightened imagination, anxiety, and mental disorientation.
- Hyoscyamus Niger: Beneficial for suspiciousness, delirium, aggressive behaviour, improper speech, and intoxication-related psychotic symptoms.
- Arsenicum Album: Beneficial for obsessive behaviour, anxiety, weakness, fear, restlessness, and dependence states. Patients are frequently worn out, afraid, and picky.
- Lachesis: Symptoms of alcoholism include distrust, emotional instability, loquacity, jealously, and intolerance for tight clothing.
- Caladium Seguinum: Often taken into consideration in cases of tobacco addiction that include impotence, nervous depression, sexual weakness, and cravings for smoking.
- Stramonium: Beneficial for drug-induced violent delirium, terror, hallucinations, fearfulness, and psychotic states.

DISCUSSION

Substance abuse among Indian youth represents an increasing public health challenge with significant medical, psychological, educational, and socioeconomic consequences. The reviewed literature indicates that alcohol and tobacco remain the most commonly abused substances, while cannabis, opioids, inhalants, and synthetic drugs are becoming increasingly prevalent among adolescents and young adults. The onset of substance use typically occurs during adolescence, a developmental period characterized by emotional vulnerability, peer influence, and ongoing neurological maturation. Multiple interacting risk factors including peer pressure, dysfunctional family environments, academic stress, unemployment, psychological disorders, social media influence, and genetic predisposition contribute to initiation and progression of substance use disorders. Chronic substance abuse adversely affects almost every organ system and is associated with depression, anxiety, psychosis, poor academic performance, unemployment, criminal behaviour, and increased healthcare expenditure.

The reviewed literature consistently emphasizes that prevention should begin early through school-based education, family involvement, community awareness, counselling, and rehabilitation services. Government policies and public health initiatives also play a critical role in reducing substance abuse. From a homoeopathic perspective, addiction is viewed as an expression of disturbance of the individual as a whole, involving mental, emotional, and physical dimensions. Constitutional prescribing, individualized remedy selection, and repertorial analysis may offer supportive care by addressing cravings, withdrawal symptoms, emotional instability, insomnia, anxiety, and constitutional susceptibility. However, homoeopathy should be considered as an adjunct to evidence-based counselling, psychotherapy, rehabilitation programmes, and multidisciplinary care rather than as a standalone intervention. Further well-designed clinical studies are required to establish the efficacy and effectiveness of homoeopathic interventions in substance use disorders.

Conclusion

Substance abuse among Indian youth continues to pose a serious public health, psychological, and socioeconomic burden. Early identification of vulnerable adolescents, effective preventive strategies, family participation, and counselling, rehabilitation, and community awareness are essential to reduce the incidence of addiction and its long-term consequences. Homoeopathy offers a holistic and individualized therapeutic approach that may complement conventional de-addiction programmes by addressing emotional disturbances, withdrawal symptoms, constitutional susceptibility, and relapse prevention. An integrated multidisciplinary model involving healthcare professionals, educators, families, policymakers, and community organizations is essential for promoting recovery and protecting the health and well-being of future generations.

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Conflict of interest

The authors declare that there are no conflicts of interest regarding the publication of this manuscript. The authors have no financial, professional, or personal relationships that could have influenced the work reported in this article.

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