شبكة المعلومات الجامعية

بسم الله الرحمن الرحيم

شبكة المعلومـــات الجامعية

التوثيق الالكتروني والميكروفيلم

شبكة المعلومات الجامعية

جامعة عين شمس

التوثيق الالكتروني والميكروفيلم

قَسَم

نقسم بالله العظيم أن المادة التي تم توثيقها وتسجيلها
علي هذه الأفلام قد اعدت دون آية تغيرات

يجب أن

تحفظ هذه الأفلام بعيداً عن الغبار

في درجة حرارة من 15 – 20 مئوية ورطوبة نسبية من 20-40 %

To be kept away from dust in dry cool place of 15 – 25c and relative humidity 20-40 %

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بالرسالة صفحات

لم ترد بالأصـــل

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بعض الوثائق الأصلية تالفة

PSYCHIATRIC, IMMUNOLOGICAL AND SEXUAL STUDY IN "BHANG" DEPENDENT MALES

Thesis

Submitted For Partial Fulfillment of the Requirements of the M.D. Degree in "Psychiatry"

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﴿ قَالُوا سُبْحَانَكَ لا عِلْمَ لَنَا إِلاَّ مَا عَلَّمْتَنَا
إِنَّكَ أَنْتَ الْعَلِيمُ الْحَكِيمُ ﴾

صدق الله العظيم

٣٢ (البقرة)

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ARABIC SUMMARY

INTRODUCTION

INTRODUCTION

One of the major threats to public health at the end of this century is substance misuse. The scene of illicit drug use and misuse is changing rapidly in both extent and severity in most if not all countries of the world. Such increase has been associated with high levels of comorbidity, for example; HIV infection, hepatitis and mental disorders leading to an increase in the burden on hospitals and on other elements of the health and social services . It also leads to drug-related crimes *(Roberts and Barker,1997)* .

The misuse of psychoactive substances is the largest cause of preventable illness, disability and death in any society. Illicit drug use has increased so rapidly over the last 30 years that it may be difficult to comprehend the extent to which drugs have permeated the society *(Committee on drug abuse,1987).*

The World Health Organization (WHO) estimates that substance abuse accounts for about 7% of the entire global burden of disease and injury from all causes, measured by an indicator which combines both morbidity and premature mortality. In more developed countries, substance abuse accounts for about 25% of disease and injury burden *(WHO,1998a).*

The *WHO* in *1996* announced a horrible statistics about the annual prevalence of drug abuse among college students which revealed that it reached about 33.5% for any illicit substance, 31.2% for marijuana/hashish with or without other illicit drugs , 15.9% for any illicit drug with or without marijuana/hashish in 1995.

In United States of America, it is estimated that one hundred million dollars are spent daily for substance abuse *(Tobias,1989)*. The annual total cost to the American society in the mid-1990s has been estimated to be almost 200 billion dollars *(Kolb,1991)*.

In Egypt, the society has changed a lot as regards social norms, economy, education and easy contact with the western style of life. Drug abuse is one of the greatest dangers that invaded the society and destroyed the youth. Each year, about 10 billion Egyptian bounds are spent in drug abuse in Egypt, besides the other dangers like crimes, loss of carrier, unemployment and other drug-related problems *(El-Sayed,1997)*.

Cannabis (marijuana) is the most widely used illicit substance in the world, specially in the western world *(Goldstein and Kalant,1990; Solowij et al,1995)*. Much ambiguity surrounds the psychological and health hazards attributed to its use *(Hollister,1986)*.

Cannabis is a unique drug. Under different conditions it can act as a stimulant, as a sedative, as an analgesic or as a mildly hallucinogenic drug. In its chemical composition, cannabis is an exceedingly complex substance. The potency of the drug varies according to the plant from which it was taken*(Grossop,1995)*.

Marihuana, hashish, pot, weed, bush, tea, maryjane, grass, shit, dope, **Bhang** and ganja are a few of the different names for preparations of the plant. Cannabis sativa otherwise called Indian Hemb. The drug can be eaten , drunk or more commonly smoked*(Grossop,1995)*.

Progress in cannabis research is hindered by the complex nature of chemicals involved and by the fact that many factors may influence

its effect in different body system *(Negrete,1988)*. Recently , **Bhang** becomes more prevalent specially in Africa and Asia due its cheapness *(Souif,1996)*.

Although, numerous studies have reported the acute effects of cannabis on psychomotor performance and cognitive performance, relatively few studies have investigated cognitive functioning in chronic users. Most of those produced contradictory results, due in part to the gross measures used and to methodological difficulties*(Slowij et al,1991)*. Despite the lack of consistent evidence for cognitive impairment in chronic users, there remains considerable controversy over this issue. Reports in the clinical literature consistently described mental deterioration associated with chronic use of cannabis, particularly in the form of attentional dysfunction, memory problems and disturbance of concentration and judgement *(Kolansky and Moore,1972; O'Brien and Kalant,1983 ; Slowij et al,1991)*.

Tetrahydrocannabinol (THC), the major psychoactive component of Marijuana has been shown both in humans and experimental animals to have immunomodulatory properties as proved by *Friedman et al,1995* who showed that animals given THC can show immunomodulation including suppression of antibody formation, deficient cytokine production. Various experimental models have been used employing drug-abusing human subjects, experimental animals exposed to marijuana smoke or injected with cannabinoids and in vitro models employing immune cell cultures treated with various cannabinoids*(Hollister,1988)*.

Cannabis also has been proven capable of disturbing the hormonal balance which regulates gonadal and reproductive functions in animals and humans *(Maykut,1985)*. Friedrich et al *(1990)* studied the plasma testosterone level in patients of long term cannabis usage. An evaluation of the results showed that there were no significant difference between them and control group. In comparison to patients with long-term Heroin abuse, patients with Heroin abuse have significant lower plasma testosterone level. Contrary to that, *Negrete(1988)* reported that cannabis causes reduction in the secretion of gonadotropin releasing factor in the hypothalamus and an inhibition of the pituitary release of Luteinizing Hormone (LH), Follicle Stimulating Hormone (FSH) and Prolactin. Consequently, males show dose-related decrease in plasma testosterone levels, reduced sperm motility and oligospermia.

Now in Egypt, Bhang becomes the first enemy of the Egyptian youth. It becomes the most popular substance of abuse in the market and in less than 3 years it becomes the king of all addictive substances and replaced the others like Hashish, Opium and Heroin who were the most used for several years.

The production of Bhang increases every day and it is cheaper than most of other illicit subsatnces. Every day, new abusers of Bhang enter its circle, so it invaded all sectors of the Egyptian society. It is a disaster to know that 75% of those who are accused now in front of Egyptian courts because of drug abuse are due to Bhang *(Information Depatment,1998)*.

One of the published statistics showed that more than thirty one thousands of Egyptians are accused in front of courts because of Bhang abuse in 1998 *(Information Depatment,1998)*.

Why did Bhang replace Hashish? What are the possible factors which helped its spread? What are the possible health problems associated with its use? These questions has to be answered quickly to help in its control.