



Methamphetamine: symptoms under the bridge

Abstract

This case report discusses the abuse of methamphetamine in North East India.

Keywords: Modafinil. Bupropion. Motivational Interviewing. Counselling.

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Introduction

WY, commonly known among users as 'World is Yours', are methamphetamine tablets. Methamphetamine was first synthesised in Japan in 1893. It was introduced for sale in US in 1944. The drug found use in situation where people needed to stay awake for extended period and become popular with truck drivers.[1] It also found use as an anorexic. Soon however, being addictive and the ominous 'crash' associated with meth use led to its being banned. The sources these days are home based illegal manufactories.[2]

Case picture

It was a gloomy afternoon. He entered the outpatient department (OPD) room, leaned forward and offered his left arm for a shake, and greeted hesitantly. He was in his forties, tall, and average built. He had short hair with a blank face and eyes, dark and dilated. He introduced himself as an engineer and conveyed his concern for confidentiality as he belonged to a local family of much affluence. Reassured, he tried to explain about his habit of taking some illegal tablets called WY.

WY is a street name used for small, reddish, round tablets containing mainly methamphetamine mixed with caffeine. WY is a proud abbreviation for 'World is Yours' - quite catchy for the ones who seek thrill and rush. These tablets are sold loose in little plastic bags, so the exact content is always doubtful. Rumours have it that these are smuggled across the border from Myanmar. It's obvious that its illegal consumption is mostly in the neighbouring North East Indian cities and towns.[3]

He talked with irregular pauses, jumping from one topic to another abruptly. He had been consuming ten to 12 tablets almost every day for the last four years. It all started nine years ago when a colleague of his offered him a bong of WY. He remembered feeling energetic and talking a lot. Soon, he was spending most of his days and nights under a tin shade chasing the bong with his usual partner.

The construction project he was appointed to overlook as an engineer had concluded three years back. He said, "These days I have nothing much to do. Almost all of my earning goes into buying stuff. I usually avoid going home with silly, stupid excuses. My wife did question about it in the beginning and obviously we fought a lot but now she hardly cares." and callously added, "she is not made for me."

Two years back he noticed a reddish discolouration in the upper part of his left thigh. It was painful and progressive. He got scared and consulted a doctor. After a detailed history and ruling out all other possibilities, it seemed that it was a 'meth sore'. Methamphetamine can cause vasoconstriction. Especially in heavy doses it causes weakening of these vessels, causing tissue to become prone to damage to a point where the body's self-healing mechanisms give up. Acne may appear, mouth sores and skin sores take longer time to heal, and eventually skin loses its elasticity and lustre.[4]

Six months back when he tried to quit, he could not get himself out of bed for the next four to five days. He became very weak and drowsy, lying on the bed the whole day, getting up only for his physical needs. He felt his mind going numb

and confused. It became hard to think clearly and everything seemed like a dream. Five days later in an attempt to feel better he entered the world of WY yet again.

Presently, he is admitted in the psychiatry ward. His psychological assessment has been started to know the impact of methamphetamine abuse for such a long time. After sending baseline routine investigations, his psychopharmacological treatment has been started. He is prescribed tab modafinil 150 mg once daily with tab bupropion 150 mg daily dose.

Today's circumstances and reality

His sleep pattern is alright now. He is taking meals regularly. His short temperedness remains almost the same. He is grumpy mostly. Becomes restless now and then, and wanders around a lot. He admits about craving and wishes to die in order to rid himself of his "restlessness and the echoes of pain and guilt from his soul."

Motivational enhancement therapy is going on along with interpersonal counselling involving his wife and father. He realises it will be a long journey with trials and temptations to overcome, challenges from within and without as he restores

his life in the family and society, and is determined to take one step at a time in this road to recovery.

This is just one of the many untold stories of lives lost and wasted in the world of WY. Yet there is hope for those who are willing to take this road less travelled.

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