

Drawing Attention to Addiction in Women by Evaluating Female Inpatients Hospitalized in MRSHH-AMATEM

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Dear Editor,

Although substance abuse is more prevalent in males, incidence of it among females has been increasing both in Turkey and worldwide. The literature attributes the paucity of data about substance abuse among females, to the shortfall of reporting due to stigmatization. It was suggested that “woman” is perceived as the thing that protects the moral values. Substance misuse by women is also believed in Turkish society to corrupt the ethical assets (1). It was recognized that females try out a therapy lesser and they are more often challenged by sex-specific treatment difficulties (2). Females generally ask for treatment at a more severe stage. Female type substance abuse is often comorbid to psychiatric disorders (3). Social stigmatization, scarcity of treatment options improving awareness, male-oriented conventional treatment strategies, existence of frequent confronting approaches, psychiatric comorbidities, trauma history and homelessness are accounted as female-specific treatment drawbacks (4).

Female patients have been hospitalized in MRSHH-AMATEM clinics since 2008. Both female and male patients are followed up in the same service. Thirty-one female inpatients have been followed up in MRSHH-AMATEM from 2014 to 2015. Within the given term, four patients were hospitalized twice for observation and one patient thrice. In particular of distribution of patients by age, 19.3% were 15-20 years old, 45.1% between 20-30 years, 25.8% between 30-40 years, 6.4% between 40-50 years and 3.2% above 50 years. During the follow-ups, 61.2% of the patients were single, 29.0% were married and 9.6% were divorced. One patient was pregnant under follow up. In regards to the occupational status, 74.1% of the patients were unemployed, 22.5% were working on regular basis and 3.2% were student. Distribution of patients with respect to alcohol/substance use was as follows: 54.8% were opiate user, 29.0% were using alcohol, 9.6% were multiple substance user and 6.4% were cannabinoid addict. It was observed that 45.1% of the patients have been using substance for 5 years or less, 32.2% for 5 to 10 years and 22.5% have been on

substance for more than 10 years. The rate of completed hospitalization was 64.5%; and 35.4% failed to complete the inpatient treatment.

It is noteworthy to have alcohol and opiate addicts in majority. It was thought to be associated with the severity of withdrawal symptoms of those, who are addicted to alcohol and opiates. The frequency of cases aged 20 to 30 years as well as the high number of patients with a substance use history of 5 years or less can be explained by the literature's referral to the relatively short transition period between the stages "user" and "addiction" among females. In this case, females are clinically in a deeper need for inpatient treatment (5). Moreover, within the observed age range, the number of female cases is far lesser than that of males (F/M=9/200). This ratio gives an impression that there could be some drawbacks experienced by women before application to a healthcare setting and the suitability of conditions in AMATEM clinics to female patients could raise doubts. Repetitive and incomplete

hospitalizations might be caused by the same factors. The literature stressed the importance of treatment programs and interviews tailored to female addicts (6,7). The existence of one pregnant case but no one in breastfeeding period connotes the question whether female addicts are reached during gestation and/or lactation while fetching the idea that the family practitioners system could be benefitted in the course of addiction follow-up of women. The increasing number of female applicants to our clinics as well as our observations confirming the difficulties faced by the female addicts before and in the course of the treatment calls the efficacy of the treatment procedures applied to male addicts into question for women, in our minds. These question marks and search for a solution prompted us to make a point about this subject. We suppose that studies that are more sophisticated are needed to refer the female addicts to the right treatment and to establish a dedicated treatment program in our country Turkey.

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