

The Impact Of Medical And Social Factors On Alcohol Abuse In Patients With Alcoholism During The Covid-19 Pandemic

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Abstract

The rapid escalation of the COVID-19 pandemic poses a serious threat to the health of the global population. This leads to national and global interventions such as closing public spaces, restricting travel and movement. There is concern about the mental health and psycho-social consequences of the pandemic. Interest in limiting the spread of the pandemic is the most important priority around the world, but these new measures have affected routine activities, routines, personal rights and freedoms. These contribute to social disorder, excessive reaction, fear, increased loneliness, depression, suicidal behavior and harmful alcohol consumption. Psychologists are concerned about the risk of an increase in the number of people with alcohol consumption disorders as a result of the COVID-19 pandemic. Thus, the decrease in social encounters caused by social isolation may be related to the reduction in alcohol consumption. However, on the other hand, due to new restrictions in everyday life and social activities, more people drink alone, and this drinking style is more dangerous than drinking social alcohol. In addition, high levels of stress due to the current epidemiological situation can lead to increased alcohol consumption. Natural or environmental disasters often lead to mental and behavioral disorders such as depression, anxiety and the consumption of psychoactive substances. Changes in stress and the ability to make bad decisions increase the risk of alcohol consumption due to stress.

The literature emphasizes the importance of controlling alcohol consumption during quarantine and notes two possible theories: increased alcohol consumption due to anxiety and depression, or decreased alcohol consumption due to difficulty entering. Some studies show that responses to the COVID-19 pandemic can exacerbate health and social harm associated with drinking at home. However, the relationship between the coronavirus pandemic, lockdown and the potential impact of long-term isolation on health related to alcohol consumption and misuse is still unknown. There are several statistics on the consumption of alcoholic beverages at the time of the pandemic.

Keywords: Pandemic COVID-19, alcoholism, psychologist-social miles, alcohol consumption, stress, anxiety and depression.

Introduction. On January 30, 2020, a COVID-19 infection first reported from China in December 2019 by the World Health Organization (who) was declared an international emergency due to continued outbreaks around the world [3].

COVID-19 infection and alcoholism are both relatively common diseases. Around the world, 2.4 billion people consume alcohol. The media report an increase in alcohol consumption, social alienation, a feeling of loneliness as a result of self-isolation and a possible depressive state during this pandemic [2].

The pandemic caused by the coronavirus pandemic has many socio-economic consequences, one of which is the potential impact on alcohol consumption. There is still no scientific evidence of the impact of the pandemic on alcohol consumption [1].

In order to control the COVID-19 pandemic, governments around the world used quarantine measures in search of medical measures, as a result of which millions of people were isolated for a long time. Alcohol abuse is one of the main causes of death that can be prevented, leading to the death of about 3 million people around the world every

year. In some people, long-term, excessive alcohol abuse can lead to alcohol consumption disorders. The effect of long-term isolation on public health on alcohol consumption and misuse is unknown [4].

The effects of financial distress on alcohol consumption have been variously distributed, especially among individuals with high incomes compared to those with low or moderate incomes. High-income people see concerns about loss of income or lack of employment as a greater threat to their current socioeconomic status [7].

Chronic alcohol consumption increases the severity of virus infections. Chronic alcohol consumption increases the risk of aggravation and death of the disease at the time of infection. Reduces human immunity and increases susceptibility to various diseases [5].

Alcohol consumption is accompanied by many diseases. At the same time, the combination is also observed with coronavirus disease and can contribute to a decrease in immunity against SARS-CoV-2 infection [6].

Due to the COVID-19 pandemic, the use of hand disinfectants containing ethanol around the world has increased which is causing various non-toxic effects on the skin [8].

Staying at home during the COVID-19 pandemic can affect mental health and psychoactive substance intake behavior among the population. Early studies of the COVID-19 pandemic to limit alcohol consumption show that there have been changes in alcohol abuse during the pandemic, but this has not led to a general increase in consumption [9]. Anxiety, depression, sleep disorders, alcohol consumption, and mental well-being have been noted to be lower than normal [10]. Due to changes in physiological stress, the risk of alcohol consumption increases [13].

Large-scale pandemic-related conditions or mental health vulnerabilities can affect changes in alcohol consumption, especially since psychoactive substances can be used to overcome difficulties caused by unusual conditions associated with the pandemic. Indeed, comorbidity between alcohol consumption and mood or anxiety is often explained by self-medication [11]. In the context of the pandemic, the population can react differently depending on living conditions and psychological conditions.

Natural or environmental disasters are often associated with mental and behavioral disorders such as depression, anxiety, and the consumption of psychoactive substances [12]. Recent literature, especially in young people, states that anxiety, depression, sleep disorders, alcohol consumption, and mental well-being are lower than normal [6]. Due to changes in physiological stress, the risk of alcohol consumption increases [11].

Large-scale pandemic-related conditions or mental health vulnerabilities can affect changes in alcohol consumption, especially since psychoactive substances can be used to overcome difficulties caused by unusual conditions associated with the pandemic. Comorbidity between alcohol consumption and mood or anxiety is explained by self-medication [9].

The COVID-19 pandemic has shown the importance of controlling associated stress factors, depression, anxiety, psychoactive substance intake.

Purpose of the study: To study the clinical psychopathological characteristics of the influence of social factors on individuals with the problem of sustenance of alcoholic products during the Covid-19 pandemic.

Material and research methods: The study was conducted during the COVID-19 pandemic during 2020-2022 on the basis of Anamnesis data in 140 participants on the basis of the hospital and dispensary of the Samarkand regional branch of the Republican specialized scientific and practical medical center of Narcology. The examiners were studied in two groups. The main group (ICD-10) F10.2 selected 80 narc patients undergoing treatment with a stage 2 diagnosis of alcoholism. The control group selected 60 persons (epizootic alcoholism) who consumed alcoholic products on holidays and wedding ceremonies from Anamnesis. The average age of participants between the ages of 25 and 45 is 33.67 ± 5.35 years. In addition to social demographics (age, place of residence, education and marital status), data on quarantine conditions, in particular the living environment, were collected according to socio-demographic data, the professional situation during quarantine (including four methods: student, work at home, typical workplace and unemployed) and loss of financial income (yes/no). marital status (Married, not married, with children, without children).

Verified Dunaevsky V.V., Styackin V.D., Domestic drunkenness, adopted in its classification in 1991, was evaluated in accordance with the clinical and dynamic classification and divided into the following forms. Abstinence-individuals who do not take alcoholic beverages or take them very rarely and in small quantities (up to 100ml 2-3 times a year). Casual drinkers are individuals who take vodka several times a year or up to once a month, on average 50-150ml (no more than 250ml). On average, drinkers are individuals who receive 100 – 150ml (at most 400ml) of vodka up to 1-4 times a month. Regular drinkers are individuals who drink 200-300ml (up to 500ml) of vodka 1-2

times a week. Drinkers by habit are individuals who drink 500ml or more of vodka 2-3 times a week, but there is no clinical disorder expressed in this.

Frequency and amount of alcohol consumption during quarantine AUDIT-C questionnaire (Bradley et al. 1998) added an additional element to evaluate changes in alcohol consumption during quarantine in three ways: decline, stability and growth. The context and causes of alcohol consumption have been evaluated through a series of proposals that lead to answers (yes/no). Participants were asked to determine if they had consumed alcohol alone during quarantine, with a partner, with online friends or with friends outdoors, because they had more time to spend with friends almost because of stress or to relax, because of boredom, and so on.

Results and its discussion.

11.25% of the main group examiners have not started a family during their lifetime, 25% have divorced or do not live together with their family, 63.75% are married (of which 90% have children under 18 years of age), 10% have no children or all children are over 18 years of age. In the control group, 10% were not married, 5% were divorced, 85% were married (95% had young children who did not enter 18).

When the professional situation (work at home and unemployment) was checked during quarantine, the following pointers were manifested in the groups. In the main group, 20% of the verified were forced to work at home. 20% of the usual mode of work remained unchanged (these are those who are engaged in agriculture and livestock). 60% of patients reported separation from work or from the source of income. When those in the control group were checked, changes were detected below. 38.3% are forced to work at home, 33.3% are separated from the usual work schedule, 28.4% from work or from the source of income.

When the control group was studied separately in each group of social factors, the following indicators were manifested.

Table 1 Distribution of social factors during the covid-19 pandemic to individuals with various forms of domestic drunkenness

Form of domestic drunkenness (epizootic alcoholism)	Average age	Marital status		Degree of malice with work		Loss of income
		Alone	Married	Constant	Seasonal	
Abstinentes	24,5±4,4	-	100%	81,25%	18,75%	18,75%
Casual drinkers	28,4±3,3	6,25%	93,75	87,5%	12,5%	12,5%
Average drinkers	29,6±2,9	12,5%	87,5%	75%	25%	37,5%
Regular drinkers	33,6±2,4	25%	75%	50%	50%	60%
Habitual drinkers	36,4±3,6	50%	50%	37,5	62,5%	75%

In the main group, the amount of drinking at 30% has not changed but the frequency has changed, in 60% the amount and frequency have increased in parallel, decreased by 10% (the reason is the financial difficulty in them). In the main group according to the frequency of drinking 30% at least 2-4 times a week, at 40% almost every day, 30% every other day. When the method of use was studied, 10% consumed alcohol with their partner, 60% alone and 30% outdoors with friends (breaking quarantine rules).

In the control group, 50% of the amount of drink has not changed but the frequency has changed, increased by 30%, decreased by 20%. According to the frequency of drinking, it was found that 32.95% never consumed alcohol, 29.5% consumed alcohol once a week, 31.25% 2-4 times a week, 6.3% almost every day. When the method of use was studied, 20% consumed alcohol with their partner, 30% with friends, 40% alone and 10% with friends outdoors.

Of those who believed that alcohol consumption increased during quarantine in the main group, 50% explained that they drank alcohol to relax, 40% because they had more time than before, and 10% to spend time with friends. As 48.33 percent had more time in the control group than before, 30% indicated boredom as the main reason that 21.67% were concerned about the pandemic.

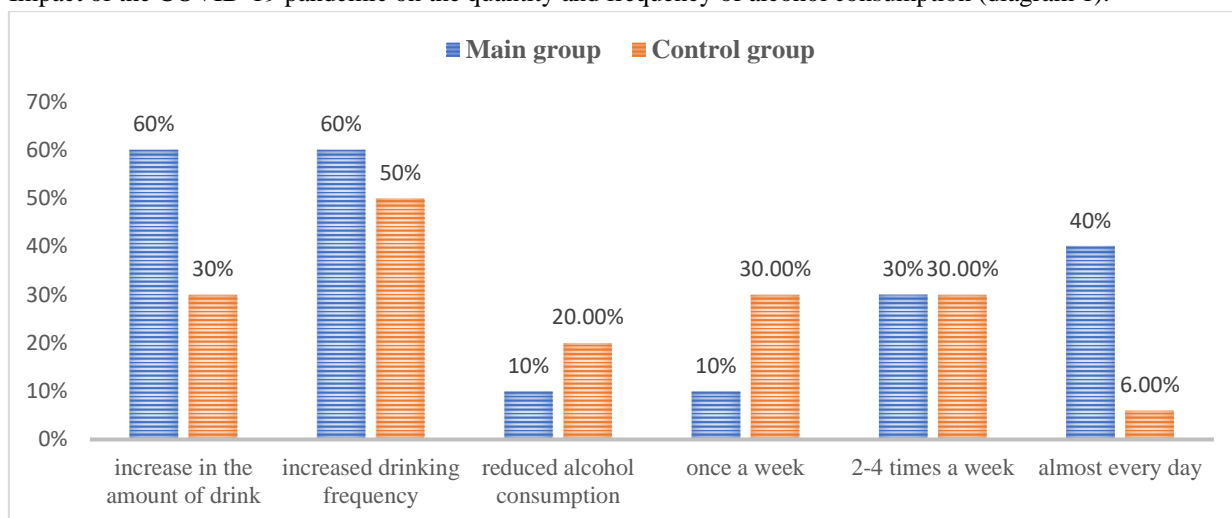
Those who believed that individuals who worked at home during quarantine caused an increase in alcohol consumption, amounted to 80% in the main group and 60% in the control group.

During the COVID-19 pandemic, it was found that having children under 18 at home increased alcohol consumption by 60% and 50%, respectively, in both groups.

The pandemic's loss of income affected both groups in different ways. The loss of the source of income in the main group of Examiners caused increased anxiety and depression, and as a result, alcohol consumption increased (on

account of borrowing). In the control group, the loss of the source of income was manifested as the main reason that was indicated for a decrease in alcohol consumption.

Impact of the COVID-19 pandemic on the quantity and frequency of alcohol consumption (diagram 1).



In the control group, 50% of the amount of drink has not changed but the frequency has changed, increased by 30%, decreased by 20%. According to the frequency of drinking, 30% never consumed alcohol, 30% once a week, 30% 2-4 times a week, 6% almost daily, and those who consumed alcohol every day were not detected. When the method of use was studied 20% consumed alcohol with their partner, 30% online with friends, 40% alone and 10% outdoors with friends.

Of those who believed that alcohol consumption increased during quarantine in the main group, 50% explained that they drank alcohol to relax, 40% because they had more time than before, and 10% to spend time with friends. Since 50% in the control group have more time than before, 30% are bored, 20% are worried about the pandemic.

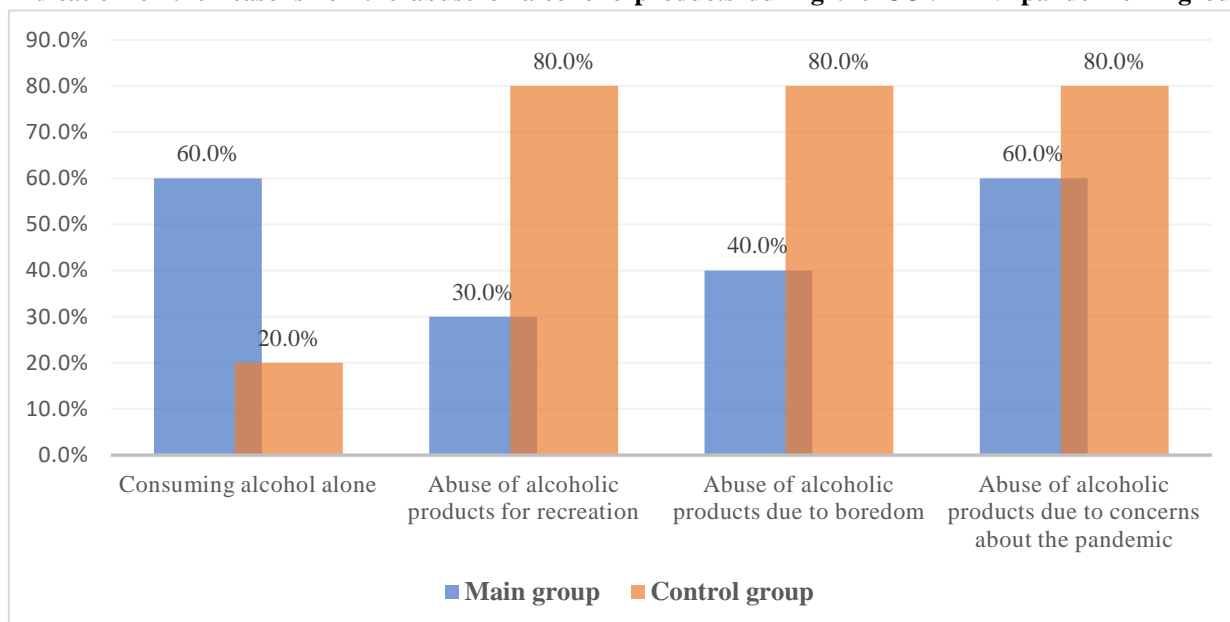
Those who believed that individuals who worked at home during quarantine caused an increase in alcohol consumption, amounted to 80% in the main group and 60% in the control group.

It was found that the presence of children under 18 years of age at home during the pandemic increased alcohol consumption by 60% and 50% in both groups, respectively.

When the method of abuse of alcoholic products was studied during the COVID-19 pandemic: it was manifested in 40% of cases online with friends or in the main group with a neighbor, and in the control group in 80% of cases. The consumption of alcohol alone showed 60% pointers in the main group and 20% in the control group. In groups according to the purpose of drinking: 30% in the main group for rest, 80% in the control group. As they have more time than before, 80% in the main group and 100% in the control group. Due to boredom, 40% in the main group and 80% in the control group. Due to concerns about the pandemic, it was found that 60% in the main group and 80% in the control group (diagram 2).

diagram 2.

Indication of the reasons for the abuse of alcoholic products during the COVID-19 pandemic in groups



During the COVID-19 pandemic, alcohol abuse increased dramatically in patients with a history of alcoholism. Boredom in individuals who constantly consume alcohol 1-2 times a week unemployment due to anxiety and depression, alcohol abuse has increased significantly. Only on birthdays or holidays to alcohol-consuming individuals during the COVID-19 Pandemic there have been virtually no changes in alcohol abuse.

CONCLUSIONS:

1. The enormous difficulties caused by the COVID-19 pandemic in the 21st century, when alcohol consumption was often viewed by humans as a strategy to cope with stress. Economic crises and increased alcohol consumption in quarantine are associated with symptoms of anxiety and depression and stress disorders. During the COVID-19 pandemic, it was found that alcohol consumption depends on age, gender, nationality, labor activity, Family conditions, and many other influencing factors.
2. During the Covid-19 pandemic, it was found that various social problems in those who have domestic alcoholism affect the intake of alcohol products. The marital status in these verifiers hardly influenced the intake of alcohol products during the pandemic. The main reason for the change in the level of alcohol intake was the presence of children under the age of 18, since during this period all preschool education and schools were closed. This caused the development of dezadaptation in the family environment and an increase in the amount of alcohol intake. The divorce has also led to an increase in the amount and frequency of alcohol shake-ups in individuals who are single at the same time and in individuals who have lost their source of income during the pandemic.
3. The socio-economic difficulties and changes observed in the COVID-19 pandemic have significantly affected the level of alcohol consumption. The main group showed an increase in the amount of alcohol consumption in the examined patients with alcoholism as the main reason for the presence of young children in the family, the obligation to stay at home and the loss of a source of work, rest, income at home. In the control group, too, the level of alcohol consumption has increased significantly. As the main reason for this, a change in the work routine i.e. working from home, the presence of children under 18 years of age and boredom, increased anxiety during the pandemic are indicated.

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