

Review on Substances Abuse in Malaysia - Way Forward and Challenging

Haitham Abdalrazak¹, P.M. Ridzuan², Shariff Halim³, Lim Thien Poh⁴, M.R. Alliya-Syakirah⁵, Vijayendran Thineswary⁶, B.N. Maizatul-Afiqah⁷, I.N. Syamimi⁸

^{1,4,5,6,7,8}International Medical School, Management and Science University, Seksyen 13, Shah Alam, Selangor, Malaysia.

^{2,3}International Medical School, Management and Science University, Seksyen 13, Shah Alam, Selangor, Malaysia.

ABSTRACT

As the utilization and abuse of substance often starts in adolescence posing threat to public health concerns. Rising trend with growing popularity of various substances in the past decade, include heroin, kratom, cannabis, ketamine and methamphetamine which recorded highest usage in year of 2019 in Malaysia. Research reviewed includes clinical manifestation, statistics, and treatment with types of substance abuse and meeting future challenges in Malaysia. Study on pharmacological treatment for substance abuse were found to be effective in terms of compliance, relapse rate and cost effectiveness by providing methadone or buprenorphine to minimize heroin dependent problems.

Keywords

Substance abuse, Drug abuse, Addiction, Mental Health, Malaysia

Introduction

Substance abuse refers to overconsumption or reliance on toxic behaviors such as alcohol and medications. It also includes small beverages, cigarettes, illegal and/or prescribed and over-the-counter medicines. The use and misuse of drugs by teenagers has long been a matter of considerable concern for public health, as they present significant and challenging issues for society. In accordance with the 2007 United Nations Office on Drugs and Crime, teenagers' participation in substance abuse is rising globally (United Nation Office, 2007). It can also be a matter of great concern as it causes immense human misery in terms of morbidity, death and economic development, and can endanger the entire social structure of nearly all societies in the long run. Moreover, in Malaysia, this phenomenon of youth violence may also be a major national problem, and in 1983 the government of Malaysia classified substance trafficking as a public enemy of the nation No 1 (Chan et al., 2016). A report showed that almost half of the 30,000-strong Malaysian jail population was convicted with multiple drug offenses (Chie et al., 2015).

Additionally, substance use is a critical issue for the nation because it needs a lot of regulation from the officials and decreases available healthcare facilities. Heroin is the most widely consumed drug, accompanied by stimulants of the form methamphetamine, kratom, cannabis and ketamine. Yet methamphetamine's increasing use was of special concern (Chemi et al., 2014). This has been proved by the newest statistic from National Anti Drug Agency 2019 where the usage of methamphetamine (crystal) has recorded the highest case in Malaysia. However, opioid use disorder has been posing as a serious health concern worldwide (Teoh Bing Fei et al., 2016). Smoking became common practice in schools accompanied by drug use, using hemp and glue sniffing. A statistical analysis showed that almost half of the academics (57.7%) knew around one to three of their colleagues actively engaged in smoking, while a small number committed other abuses such as alcohol and marijuana. The smoking statistic is particularly troubling, as scientific findings have shown and are more likely to achieve worse styles of habit like experimenting with drugs as they get older (Chan et al., 2016).

Studies have shown, based on Malaysia's National Drug Agency, that young people are the most vulnerable group to drug abuse. This may be confirmed by figures showing evidence that heroin, as reported by 2,207 individuals, became the most common substance used followed by opioid users and methamphetamine (Fauziah et al., 2012). However, the Crime statistic of Malaysia 2019 revealed that majority of drug addicts about 36.1% were MCE/SPM/SPMV leavers (Department of Statistics Malaysia Official Portal, 2019).

There is no doubt that in today's epoch, there are many attractions outside the varsity. Popular illicit drugs, lifestyle modus vivendi, various external factors and easy exposure to illicit drugs all draw students and young people alike to drug addiction (Chan et al., 2016). In fact, drug use, particularly medicinal injection, has been associated with a number of the world's leading significant HIV epidemics. HIV-diagnosed drug users have elevated the severity and incidence of medical, psychological and substance-using conditions contributing to higher age-related morbidity and mortality relative to people infected with HIV who do not use drugs (Altice et al., 2010). Several others developed and transition countries (including Indonesia, Pakistan, China, Iran and India) and high-income nations (the United Kingdom, Britain, Germany, and Australia) were also linked with increased HIV transmission. (Schottenfeld et al., 2008).

This review has collected various data and studied on substance abuse within Malaysian population from 2006 to 2019 to provide a better and new view of perception on the challenges and consequences faced by the citizens as well as the nation.

SIGN, SYMPTOM AND COMPLICATION OF SUBSTANCE ABUSE

HEROIN

Heroin is an artificial drug, from the opiate group, that are produced by adding two groups of acetyls to the morphine structure. They are also known by their street name of Fit, Fun, Cikputeh or Barang, Users typically administer the drug by way of injection but may also smoke, snort, used as a suppository or orally ingested. They bind to the opioid receptors within the brain and different parts of the body giving off the effect of euphoria, calmness and no pain. Misusing the substance will result in weight loss, difficulty in breathing and infection like hepatitis and HIV due to needle sharing. Excessive dosage can result in a fatality while chronic use leads to addiction and physical dependence (Harun, 2016).

Additionally, a study done in 2012 among pubescents from three juvenile Henry Gurney schools in Malaysia reveals a majority (95%) of the adolescents showing a moderate- to-high level of aggressive behaviour and those having been using morphine ($r = 0.181$, $p < 0.05$) as well as heroin drugs ($r = 0.016$, $p < 0.05$) showed notable connection with aggressive behaviour (Ibrahim&Nen et.al., 2012).

METHAMPHETAMINE & AMPHETAMINE TYPE STIMULANTS

Amphetamines & methamphetamines are synthetic drugs classified under amphetamine type stimulants (ATS). It comes in various forms & colours and consumed differently depending on its form. On the streets, amphetamines are also known as Speed, Whiz, Uppers, Goey or Louee while methamphetamines are referred to as Meth, Syabu, Ice, or Crystals. Usage of these drugs brings about the effect of poor appetite, tachycardia, tachypnoea, diaphoresis, headaches, loss of control, insomnia and blurry vision. Persistent use can lead to significant weight loss, insomnia, irregular heartbeat, mental disorders such as anxiety and depression, paranoia, kidney failure,

brain damage, hallucinations, disorganized lifestyle and aggression. Overdosing can cause serious consequences such as myocardial infarction, stroke, coma, and death (KementerianKesehatan Malaysia, 2017).

Based on a study in 2013 conducted by Sulaiman and colleagues, non-psychotic psychiatric comorbidities are profoundly seen in those with dependence to methamphetamine particularly with multiple substance abuse (adjusted odds ratio (OR) = 8.24, 95% CI = 4.65-14.60), longer substance usage (adjusted OR = 1.90, 95% CI = 1.08- 3.33) and larger amount (adjusted OR = 3.95, 95% CI = 1.87-8.34) of methamphetamine usage (Sulaiman et.al, 2013).

A study done in 2014 shows that patients with dependence to methamphetamine have a higher risk of psychosis and it was also associated with co-morbid major depressive disorder (OR = 7.18, 95 CI = 2.612-19.708), bipolar disorder (OR = 13.807, 95 CI = 5.194- 36.706), antisocial personality disorder (OR = 12.619, 95 CI = 6.702-23.759) as well as substantial methamphetamine use (Sulaiman et.al, 2014).

CANNABIS

Cannabis is a plant that gives out a psychoactive effect due to the chemical it produces known as cannabinoids. The cannabis leaves are regularly referred as „marijuana“ while the resin extracted is term „hashish“. Cannabis misuse can lead to increased heart rate, short-term memory loss, anxious state, lung damage, and addiction while long-term use can cause psychotic disorders. Foetal development may be affected when used during pregnancy (Harun, 2016).

Synthetic cannabis, also known as Spice or K2, are herbs spiked with chemicals producing similar psychoactive effects to marijuana. They have the potential to be abuse and users were in a constant anxious state, tachycardia and rise in blood pressure, nausea and vomiting, muscles cramps, psychotic disorders, suicidal and self-harming thoughts (Harun ,2016).

There is a case report in 2017 believed to be a case of necrotizing pneumonia (NP) and empyema from chronic recreational marijuana usage via a small water pipe. A young man who is a daily cannabis smoker for 4 years presented with fever, coughing up blood, and difficulty in breathing for three days. On examination, he was tachycardic and tachypnoeic. A portable ultrasonography confirms appearance of left-sided pleural effusion and pleural tap was in accordance with empyema thoracis. Culture and sensitivity of the sputum sample, pleural fluid, and water pipe grew *P. aeruginosa*, with sensitivity towards meropenem, ceftazidime, gentamicin, and amikacin (Kumar et.al, 2017).

KRATOM

Kratom (*Mitragynaspeciosa*), also goes by the name Ketum, is a medicinal plant indigenous to the Southeast Asia that is consumed for its mind-altering effects and is broadly used amongst people in the villages in Thailand and Malaysia despite its usage being illegal (Ahmad & Aziz, 2012).

Based on a study conducted, the majority of users consume kratom daily and usually drink the extract as tea. Users mostly consume this substance for social need and entertainment, high stamina and physical perseverance, pain relief and improved sexual activity (Ahmad & Aziz, 2012).

A recent study reveals that kratom is used to ease opioid withdrawal effects for current & ex-opioid users. However, current opioid users had a notably higher odd of using kratom for that intention (OR: 5.4: 95% CI: 2.81-10.18; $p < 0.0001$) while ex-opioid users were in all likelihood

use kratom for its euphoric effects (OR: 1.9: 95% CI: 1.04-3.50; $p < 0.035$) (Singh & YeouChearet.al., 2020).

Most users suffer symptoms of mild anxiety and depression during kratom withdrawal while moderate depression is seen in those who consumed higher amounts of kratom tea daily (≥ 4 glasses), long kratom use history ($p < 0.001$), and regular daily kratom use (≥ 4 times) ($p < 0.001$) (Singh & Narayanan et.al., 2018).

KETAMINE

A study done on ketamine users from 3 states in Malaysia shows a predominance of male addicts, mostly of chinese ethnicity. Persistent ketamine users have high odds of suffering urological issues such as frequent urination, excessive night-time urination, incontinence, urgency, interstitial cystitis and painful urination in contrast to momentary ketamine users. Additionally, reports of erectile-dysfunction were more likely seen in persistent users of ketamine use only (OR: 6.1: 1.4-26.9: $p < 0.013$) and ketamine multi-substance use (OR: 5.8: 2.3-14.45: $p < 0.000$) in comparison to momentary users (Suppiah, 2016).

INHALANTS

The use of inhalants is one of the most harmful substances that can cause serious injuries and death. Among the commonly used inhalant are petrol, paint, thinner, paint remover, glue, pen, adhesive and bleach. It works by activating the brain dopaminergic system and cause a euphoric effect. It gives off the effects of extreme excitement or euphoria, high, dizziness, retarded and anxiety. Chronic abuse can lead to neurological damage, kidney failure, haematological and intoxication (Shafieet.al., 2019).

A recent study done on selected rehabilitation centers shows 8% are still using inhalants even in the rehabilitation center with most of the clients consume inhalants temporarily and in a short period of intake. They usually took for less than one year (64.3%) and deliberately change to drugs. Among the data retrieved, glue (71.9%), from the brand "gam cap senapang" is the most favoured type of inhalant among clients. A high percentage of clients (67.7%) agreed that inhalant is „gateway“ to other substances (Shafieet.al., 2019).

SMOKING

A study done by Awaisu and colleague in 2010 reveals an increase of smoking incidence among patients with tuberculosis in Malaysia and they generally had inadequate information on tobacco usage and its dangers on the health, however, they had positive stance against tobacco usage (Awaisu et.al, 2010).

Another study done in 2013 comparing smoking behaviour attributes between Caucasian and Malay smokers concludes with the Malays smoking as a way of socializing. Social reasons as well as social settings play a part in smoking intakes, smoking maintenance and smoking cessation (Robson & Bond et.al., 2013).

A recent study in 2018 make evident that the pulse rate of smokers at rest is higher than non-smokers and the recovery pulse rate in smokers' declines attenuated when compared with non-smokers. Blood pressure of both systolic and diastolic also shows increasing number in smokers than in non-smokers (Kumar et.al., 2018).

ALCOHOL

Alcohols are key ingredients found in beers, wines, brandy or whiskey which are usually taken during social functions or used as some sort of mood elevation. Frequent consumption of a large

amount of alcohol can lead to addiction. Physically, alcohol use can lead to intoxication such as staggering, blackouts, respiratory issues, extraordinarily low blood glucose, fits and even death. Socially, alcohol causes reduced concentration, poor educational outcome, delinquent behaviour, and lawbreaking activities to fund drinking habits. Chronic use can result in multi-organ damage like liver and heart diseases, intestinal cancer and permanent brain damage (Taminet.al., 2012). In a study done in 2013 by Yee and colleagues, it was found that 18.2% of bipolar patients are with alcohol-use disorder, especially those of Indian ethnicity was related to alcohol-use disorder ($p < 0.03$). There were notable occurrences of suicidal attempt ($p < 0.01$) and a lot more of psychiatric hospitalizations seen in those with alcohol-use disorder compared to those without after adjusting several factors such as ethnicity, gender, period of health problems, job status and level of study ($p < 0.01$). (Yee et.al., 2013)

TREATMENT AND REHABILITATION COST FOR SUBSTANCES ABUSE IN MALAYSIA

The article by Altice et al in 2010 provides a list of evidence-based medication-assisted therapies for opioid dependence with resulting evidence showed that buprenorphine is 20% less effective than methadone in high doses (≥ 80 mg per day) used for treatment of retention. In the same contrast, medium-dose buprenorphine is more likely to suppress opioid use than low-dose methadone (< 60 mg per day) (Altice et al, 2010). According to a study done on active male methadone subjects on maintenance treatment in Hospital Permai, Malaysia showed that higher dosages were noted to have considerably better urinalysis results (Zakria et al, 2013). Furthermore, a descriptive study was carried out in 2015 on 460 opioid- dependent participants showed that majority of individuals showed moderate level of competency for treatment and preference for methadone over buprenorphine (Vijay et al, 2015). A study performed in University Malaya Medical Centre (UMMC) showed that methadone maintenance treatment (MMT) is effective in lowering heroin use ($p < 0.001$), injecting practices ($p < 0.001$) and crime ($p = 0.014$) as well as in improving mental and physical health ($p < 0.001$) (Fei et al, 2016). However, in a study done throughout Peninsular Malaysia showed that due to high cost of buprenorphine/naloxone in Malaysia can prevent patients to seek continuous treatment which in turn results to taking low dosages of buprenorphine/naloxone (Vicknasingam et al, 2015).

A meta-analysis in an article indicated that varenicline is associated with the highest abstinence rates and the greatest smoking reduction (Altice et al, 2010). Another research found that counselling with varenicline proved to be the most cost-effective reduction of smoking from the Malaysian healthcare perspective compared with counselling with nicotine replacement therapy (NCT) (Neoh et al, 2018). Compared to another study conducted on 185 participants from public universities in Klang Valley, Malaysia, 58.9% registered adhering to 2 weeks of nicotine replacement therapy, but sadly, the majority had dropped back at the sixth month (Yasin et al., 2011). Another study of 253 smokers attending the Tanglin quit smoking clinic in Malaysia was followed up on either varenicline or NCT on six-month abstinence rates were 51.75% on average for the first month, 33.9% on average for the third month and 23% on average for the sixth month (Wee et al., 2015). In another study conducted at a quit smoking clinic in Malaysia, found that a total of 17.3% of smokers which attended the smoking cessation clinics in Malaysia reported having at least six months to quit smoking and 35.4% indicated abstinence with 3-month follow-up (Wee et al., 2016). In

addition, behavioural intervention such as group counselling is highly successful in increasing the awareness and quit rate of smokers, but not their smoking behaviour. A single brief physician

counselling session was shown to be effective in improving the behaviour of smokers at the workplace, however the effect was unsustainable with one-month post intervention showed significance of $p=0.024$ while three-month post intervention showed $p=0.946$ (Wee et al., 2016). A study conducted on 126 detoxified heroin-dependent patients from an outpatient research clinic and detoxification program in Malaysia showed that their findings endorse the widespread utilization of buprenorphine maintenance care as an effective approach to public health to minimize heroin-dependent issues as buprenorphine recorded significantly greater time to heroin relapse (95% CI 1.38-3.42) (Schottenfeld et al., 2008). In another study done in 2006 showed that heroin addicts receiving methadone maintenance therapy (MMT) was observed to reach compliance levels as much as 80 percent. In the same survey, many heroin addicts reported being able to maintain both maintain their social and family responsibilities after receiving MMT. In addition, the medical approach to treating heroin addiction has also been found to be cost-effective (RM400 per month) as opposed to long-term rehabilitation (Robson et al., 2012). A research was performed on 246 subjects at a drug rehabilitation centre in Malaysia where they used methamphetamine for 5 years, reporting an average of (measured with monthly money spent in Ringgit Malaysia) (Sulaiman et al., 2014). In addition, a study was conducted and analysed from government data in 7 countries of Southeast Asia (including Malaysia) where the number of mandatory drug detention centres and detained individuals remained high between 2012 and 2014 (Lunze et al., 2018).

STATISTIC SUSBTANCES ABUSE IN MALAYSIA GENDER

Drugs Abuse

A 2008 study by Agensi Anti Dadah Malaysia, MahmoodNazar and colleagues found that there was no substantial gap between Malay and non-Malay adolescents in the stage of alcohol and drug abuse; however, males display a higher propensity to use illicit drugs illegally than females do. Although the drug problem among women in Malaysia is comparatively smaller than among men, the state of Sabah has had the most severe drug problem involving women (Sabitha et al., 2007; Chemi et al., 2014).

Smoking

An study conducted by the UniversitiKebangsaan Malaysia Faculty of Health Science in 2016, the dominance of smoking is higher in men than in women, with adult males beginning to smoke at a youthful age. For more than three years, one fifth of the male youngsters smoke per day. The incidence of smoking in men in lower secondary school became 35.5%. More than 50.0 per cent of males have been found to be smokers in high school. Tobacco use is on the rise among teenage girls in Malaysia. In a survey of Kudat villagers 50.0 percent of males and 6.8 percent of females were using tobacco products within 30 days. Overall, 46.6% of adult males were present-day people who smoke 15.4% of whom smoke more than 20 cigarettes per day and 67.9% of whom smoke 40 years and over (Hun et al., 2016).

Alcohol

A study by the Malaysian Ministry of Health on alcohol consumption shows that, in sex, males are 17.2 percent higher in alcohol consumption than females (5.7 percent) and risky drinking at the same time (Mutalip et al . , 2014).

A case study conducted by MohdRamlan and colleagues in Kuala Lumpur in 2015 found that genarally men are more likely to drink than women, with an average of 68% and 54%

respectively. Furthermore, men often drink more often than women do (Arshad et al., 2015).

AGE

Drugs Abuse

Monash University Malaysia published a report showing figures focused on entry to recovery services in Malaysia from 2008 to 2012, indicating that young people became exposed to substance use at the age of 13-15. While in Australia the statistics have consistently pointed out that ages 18–24 are the years with the most extensive use of drugs, in Malaysia it is similar to figures that have varied since 2008. Malaysians aged 25 – 29 had the largest amount of rehabilitation admissions in 2008 and 2009. On the flip side, 19-24-year-olds were admitted at the highest rate in 2010 and 2011, while those aged 30-34 were most heavily represented in 2012 and 2013. It is not understandable what the origin of these changes is, however, as the legal changes in the availability of rehabilitation have something to do with the pattern of drug use in Malaysia continues to shift because many abusers or drug users from different walks of life are seeking help that might not have been achieved in the past (Chie et al., 2015).

Smoking

a) Children & Adolescents

A research by the Universiti Kebangsaan Malaysia Faculty of Health Science found that about 5 million children or teenagers younger than 18 years of age are smokers in 2010. We found that by 2015, about 1 in 10 Malaysians were smokers between the ages of 13 – 17. The prevalence of cigarette smoking is shown by 33.2 per cent to be male secondary schools who were current smokers or between 29.7 and 43.0 per cent, with a ration of 63.5 to 17.5 per cent between male and female. Additionally, the highest prevalence of smoking has been found among vocational school youth. The study of attitudes and practices took place in longitudinal knowledge between 5 students over 1 year, showing after one year the prevalence decreased from 29.7% to 26.7% (Hun et al., 2016).

A survey conducted among primary school children in Tumpat, Kelantan, smoking prevalence was 11.8 per cent, and active smokers were 3.8 per cent out of the prevalence figure. A study of 190 high school male students from three schools in Kota Bharu reveals that 30 % of students were current smokers, 23.7% were ex-smokers, and 46.3% never smoked cigarettes were registered. Overall, smoking prevalence among Malay teenagers in Kota Bharu was 6.7 percent (Hun et al., 2016).

10.7 percent is the prevalence of future smoking among adolescent smokers and approximately 10.3 to 29.0 percent is the prevalence of self-reported cigarette smoking among private university students (Hun et al., 2016).

For lower secondary students of schools located in the Federal Land Development Authority (FELDA) settlement areas, it was reported to be 42.9% and it was two-fold higher if we combined the prevalence in the rural and town schools (20.3%) and it was confirmed by other studies. A proper preventive measure needs to be taken immediately or else this situation will worsen the smoking-related health problems in the future (Hun et al., 2016).

b) Adults

In 2006, the prevalence of current smoking among adult males in Malaysia was 46.5 per cent, and luckily it was down 3.0 per cent from ten years earlier. The highest prevalence of current smoking for both sexes in Malaysian adults was those aged 21 to 30 years, followed by those aged 15 years and older with a 23.1 rate. Several nationwide survey series have been launched in Malaysia, such as the National Health and Morbidity Survey in 1986 (NHMS I), NHMS II in 1996 and NHMS III in 2006. Tobacco usage trends have not been formulated because of the differences in the working definitions used in these surveys. Nevertheless, the prevalence decreased from 24.8 percent to 22.8 percent of current adult smokers at the age of 18 years and above between NHMS II and NHMS III. From 2011 to 2015, the prevalence of smoking remained about 25 percent and one in two males were smokers. (Hun et al., 2016).

c) In the Elderly

Malaysia (39.2%) has a higher prevalence of smoking among seniors (60 and above) compared with the United States (12.0%) and China (26.0%) (Hun et al., 2016).

A study carried out by K. H. Lim and his colleagues, with a representative sample of 2674 respondents. In 2016, K. H. Lim and his colleagues found that the prevalence of non-smokers, ex-smokers and current smokers among Malaysians aged 60 and over was 36.3%, 24.4% and 11.9% respectively. The prevalence of current smokers was substantially higher in men by 28.1% than in women with a rate of 2.9%, but the prevalence decreased with certain variables such as advanced age, higher education, and documented diabetes, hypertension and dyslipidemia. Furthermore, elderly people with a lower level of education and those without / unexplained disease such as hypertension are more likely to register as current smokers. Nevertheless, based on the findings, there was no substantial correlation with smoking amongst respondents with no / unknown diabetes or hypercholesterolemia. Smoking, in short, is common among older people in Malaysia (Lim et al., 2016).

Alcohol

In a report on alcohol use, the Ministry of Health Malaysia found that those aged between 18 – 29 and 30 – 39 reported the highest prevalence of alcohol use respectively by 14.0 per cent and 14.5 per cent. It was higher than other age groups and by the advanced age the pattern was declining. Furthermore, low-risk drinking is more common among elderly people, although young adults have been prevalent in risky drinking (Mutalip et al., 2014).

The starting age for drinking alcohol in general was 21. At age 20, males were much more likely to drink earlier than females, who were found to start drinking at age 21 (Mutalip et al., 2014).

A case study carried out by MohdRamlan and colleagues in 2015 and the result shows that the prevalence of started drinking alcohol among the respondent at the age of 17 by 28%. While 20% of respondents started to consume alcohol at the age of 18 and then followed by the age of 19 and 20 that share the same percentage which is 16.7%. Some respondents started drinking at the age of 23 and it was the lowest prevalence of started drinking among the respondents. This statistics is worrying since in Malaysia youngsters at the age of seventeen will sit for Malaysia Education Certificate exam and the youths are needed to contribute for the future of Malaysia (Arshad et al., 2015).

TYPES OF DRUGS

Statistics on drugs type that were frequently abused by drug users in Malaysia, 2013;

Opiates	75.07%
Methamphetamines	13.58%
Cannabis	8.82%
Amphetamine (ATS)	2.23%
Psychoactive/Psychopharmaceutical pills	0.22%

(Chie et al., 2015)

WAY FORWARD AND CHALLENGING SUBSTANCES ABUSE IN MALAYSIA

Drug and alcohol abuse are the topic that frequently debated as it is the most worrying issue faces by our country. Our nation had put tremendous efforts in managing this issue. However, this crisis is still going on and the outcomes of their effort seen to be poor. After further evaluation, these problems might be the consequences of several drawbacks in managing drug and alcohol abuse in Malaysia. One of the main challenges in managing this issue is the increment in prevalence of drug abusers among school children. In 2016, Chan and colleagues identified that a significant number of 30-40% of students admitted that their parents do not consider substance abuse, smoking and alcohol as crime (Chan et al., 2016). This is perhaps one of the major contributing factors to this crisis. Secondly, another challenge that we might face in managing substance abuse in our country is that drug addicts who had successfully discharged from rehabilitation centre in Malaysia continues to be addicts. The main cause of this problem is found to be cause by lack of strong willing to fight the temptation, and life difficulty and obstacles (Fauziah&Naresh, 2009). In addition, there is also increment in prevalence from opiod-based substances to recreational drugs such as 3, 4-methylenedioxy-N-methylamphetamine (MDMA). However, there is lack of resources and medical treatment regarding this problem. Thus, in the future we need to focus on epidemiological and clinical studies particularly in understanding the prevalence of manufactured drugs. Moreover, in the same study, they found that the tendency of drug problems is shifting from older drugs such as cannabis to a newer drug. Thus, the energy and time spent in preventing and manage Amphetamine-type Stimulant (ATS) is much more

lesser compared to those aimed at heroin dependence. Consequently, Malaysia is currently experiencing increment in issues associated with ATS (Mahmud et al., 2006).

Next, in a research that is done by Rusdi et al in 2008, there are few challenges that our nation is facing in 50 years of managing substance abuse. The problems that they stated are as follows:

1. Regimental rehabilitation programme is the only treatment strategy that our nation is focusing on.
2. Despite there are strong evidence stating that drug addiction is a medical condition, current policy totally ignored the needs of medical treatment.
3. Stigma of the illness and rehabilitation treatment is the reason why addicts hesitate to be presented early and receive early treatment
4. Serentcentre is said to be a place where the patients would lose their freedom, they are scare to be rejected by community.
5. Rusdi et al also proved that monotherapy such as rehabilitation alone produce least

outcomes.

6. Many patients lose their job once they entered Serenti Centre. After 2 years, the period of the supposed to be detained ended, most of them had given up their job and lose the opportunity to get new job based on their status as addicts.
7. Some of them would eventually commit crimes as it is the only way to support themselves and their family.

(Rusdi et al., 2008)

Lastly, usually drugs abuser would have psychiatric and medical illness comorbidities, thus it is difficult for them to be managed and treated. As a result, it is more challenging in managing and maintaining their HIV continuum of care (Adeeba&Alties, 2015).

However, every problem has its solution. Our nation should move forwards and change direction to control these challenges. There are few suggestions that we could do to move forward for a brighter future and promising outcomes. Firstly, in a study done by Mahmud et al in (2006), proves that our nation's policy in long term detention of managing heroin abuse or dependence patients had several drawbacks. Hence, these drawbacks resulting in our government to change their long standing policy on drug-free treatment to medical treatment. This method of intertwining the heroin abusers is crucial as there is strong evidence proves that after 6 months of Methadone Maintenance Therapy (MMT) there are significant improvement in all four domain of life tested (Baharom et al., 2012).

Next, in the year 2014, Norliza et al suggested a few effective ways that may be beneficial for our nation in moving forward to solve this issue. The suggested methods are as follows:

- The results of treatment for drug abuse should be analyzed in depth to determine the efficacy of existing strategies and to improve them.
- Memorandum of Understanding (MOU) and collaboration with law enforcement agencies such as the police and Agensi Anti DadahKebangsaan to establish data on the prevalence of Amphetamine-type Stimulants (ATS), and other substance abused in Malaysia.
- More attention should be paid to the research of special groups that have abused drugs such as prisoners, women drug abusers and homosexual / bisexual drug abusers, as well as the nature of the substance abuse problem
- New approach of treatment is another aspect to be addressed as substance abuse become more complicated as biological and psychosocial aspects are significantly related with each other.
- Expand information about substance abuse that are common and newer to our area – kratom, betel quid
- Carefully and appropriately investigate the prospect of kratom as a drug replacement management for opiod addicts.
- Attempts need to be stepped up to recognise the co-morbid mental disorder in substance addicts getting treatment

(Norliza et al., 2014)

Lastly, our nation should also enforce the laws about drugs trafficking. This is because, methamphetamine trafficking and use are still increasing in parts of the Mekong region and there

is evidence of large-scale manufacture in Cambodia, Indonesia, Malaysia and the Philippines are found (Rebecca et al., 2008). This issue might be a strong contributor that would fail others effort in managing this issue.

CONCLUSION

This study concludes that the most prevalence drug were frequently abuse by drug users in Malaysia is Opiates by 75.07%, Methamphetamines by 13.58%, Cannabis by 8.82%, Amphetamine Type Substances (ATS) by 2.23% and Psychoactive/ Psychopharmaceutical pills (0.22%). The sign and symptoms are discussed in details and it varies from systemic to psychosocial defects. The topic of substance abuse is worrisome as it contributes to short-term and long-term complication that may be fatal. In managing this crisis, our government had done a tremendous effort in order to control this issue. However, due to few challenges that we are currently facing, the outcomes are still poor and the prevalence of substance abuse still showing increment. Thus, we need to start moving forward, despite the challenges in order to eradicate these alarming issues to its end.

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