INTRODUCTION

Suicide has been associated with axis I psychiatric disorders. Noticeably, comorbidity of psychiatric and personality disorders was the largest risk factor for committing or attempting suicide. [1]

The relationship between substance abuse and increased suicide risk has been well established as suicide is a leading cause of death in drug-using populations and people who use illicit drugs are more vulnerable to suicidal ideation and behavior. Many studies examined various correlates of suicide attempts among drug users and found that the risk increases with major depressive disorder and other psychiatric condition e.g. borderline personality disorder, anxiety and agoraphobia. [2]

Substance users are almost 6 times more likely to report a lifetime suicide attempt than non-users. Recent evidence from veterans indicates that risk of death from suicide increases to about 2.3 times in men and 6.5 times in women with a substance use disorder (SUD) more than those who are not substance abusers. [3]

During the past two decades, epidemiological studies have been documenting increased prevalence rates of serious psychiatric disorders co-occurring with substance use disorders (dual diagnosis). Other Research studies have indicated that dual diagnosis comprises 50% of the patients in psychiatric settings.
and substance use treatment facilities. Compared to those without comorbid disorders, patients with dual diagnosis have more negative outcomes regarding treatment and psychosocial outcomes and health status. [4]

**METHODS**

Methods: The study was performed in the outpatient clinic and inpatient ward of psychiatry department, Zagazig University hospitals, Sharkia, Egypt. 100 consecutive patients with DSM-IV-TR [5] diagnosis of substance use disorders were recruited.

Inclusion criteria: Both genders above 18 years old, all socioeconomic and educational levels were included. Exclusion criteria: Patients with acute psychiatric conditions, mental retardation, dementia and delirium were excluded.

Psychometry:

Simple questionnaire was used for collection of sociodemographic data and substance use information. Diagnosis of axis I and II disorders was done using Arabic versions of Structured Clinical Interview (SCID)-I. [6] Severity of substance use disorders was assessed using Addiction Severity Index (ASI) scale. [7] Suicide risk was assessed using Arabic version of Beck Scale of Suicide Ideation (BSS). [8]

A urine sample was collected and screened for the presence of seven substances (Amphetamines, Barbiturates, Benzodiazepines, Cocaine, Opiates, Tetrahydrocannabinol (THC) and Tramadol). Approval was obtained from the Institutional Review Board (IRB) and the Department of Psychiatry, Zagazig University. Consents were obtained from all participants.

Statistical analysis:

All data were collected, tabulated and statistically analyzed using SPSS 20.0 for windows (SPSS Inc., Chicago, IL, USA) and MedCalc 13 for windows (MedCalc Software bvba, Ostend, Belgium).

**RESULTS**

Sociodemographic data: 93% of the participants were males and 7% were females, mean age was 30.71 ± 8.68 years, 14% were illiterate while 86% were educated, 14% were unemployed, while the employed group were 77% and 9% students, 51% were urban residents, 57% were married and smokers consisted 94% of the sample with a mean age of onset of smoking of 15.76 ± 4.21 years.

Substance use history:

92% of the participants used tramadol starting at a mean age of 23.92±8.48 while 86% used cannabis starting at a mean age of 18.63±4.50. Mean scores of BSS were 6.59 ± 9.47.

55% had axis-I psychiatric disorders mostly mood disorders consisting 36%.

Urine screen test results showed that 78% of the patients were positive to cannabis and 72% were positive to tramadol.

**DISCUSSION**

Male was the predominant sex in the current study participants (93%) while females only accounted for 7% of the study participants. These data are consistent with the results of a survey to study the substance abuse problem in the Egyptian governorates conducted by the Unit of Research in the General secretariat of Mental Health and Addiction Treatment, Ministry Of Health, Egypt from 2007 to 2014, in which a total number of 106480 adult Egyptians were included in the sample, representing approximately 0.2% the Egyptian population above the age of 15 (Hamdi et al., 2016).

Mean age in the current study participants was 30.71 ± 8.68 years (range: 18 – 57 years). According to Hamdi et al. (2016), the group of young adults was the most represented age group among substance users (6.6% of the sample was aged between 16 and 25 years). This is the most vulnerable age group due to characteristic problems of late adolescence/young adulthood and the significant peer influence and pressure, in addition to family history of substance use.

Almost half of the patients were risky for suicide and showed psychiatric disorders mainly mood disorders.

**REFERENCES**


2. Marshall, B. D., Galea, S., Wood, E., & Kerr, T. Longitudinal associations between types of childhood trauma and suicidal behavior among...


