

論文内容要旨

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論文題目	Changes of clinical symptoms in patients with new psychoactive substance (NPS) - related disorders from fiscal year 2012 to 2014: A study in hospitals specializing in the treatment of addiction 「2012年から2014年におけるNPS関連物質使用障害患者の臨床症状の変化、依存症専門治療病院での研究」		
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<p>Aims: The use of new psychoactive substances (NPS) has become increasingly widespread over the last decade, in Japan and internationally. NPS are associated with a range of increasingly serious clinical, public, and social issues. Political measures to ameliorate the effects of NPS in Japan have focused on tightening regulation rather than establishing treatment methods. Thus, it is possible that, as regulations for NPS were tightened, neuropsychiatric symptoms of patients using NPS worsened because of the emergence of new types of NPS. However, quantitative investigation of this issue has been lacking. The present study was conducted to compare neuropsychiatric symptoms of patients with NPS - related disorders during the period in which the regulations for NPS were tightened and to examine the relationship between drug regulation and harm to drug users. We examined patients who attended specialized hospitals for treating addiction, to elucidate the impacts of legal measures to control NPS.</p> <p>Methods: The subjects (n = 864) in the current study were patients with NPS - related disorders who were treated as outpatients at one of eight Japanese medical hospitals specialized in the treatment of addiction during the period from April 2012 to March 2015 (fiscal year: FY2012- FY2014). Here, “patients with NPS - related disorders” refers to NPS users who were diagnosed with ICD - 10 F1 (mental and behavioral disorders due to psychoactive substance use). Subject’ s information was collected using a retrospective method, transcribing clinical information from medical records. Specifically, the attending psychiatrist of the target patients at each hospital. The following institutions participated in the study: Saitama Psychiatric Medical Center; National Center Hospital, National Center of Neurology and Psychiatry; Tokyo Metropolitan Matsuzawa Hospital; Kanagawa Psychiatric Center; Mie Prefectural Mental Medical Center; Osaka Psychiatric Medical Center; Okayama Psychiatric Medical Center; and Hizen Psychiatric Center. These institutions are all leading Japanese hospitals specialized in the treatment of addiction.</p> <p>Results: We examined information collected from a total of 864 subjects with NPS - related disorders at eight hospitals specialized in the treatment of addiction. Differences between each fiscal year were found regarding the diagnosis of the ICD - 10 F1 subcategory, and psychiatric and neurological symptoms observed before or during the first medical examination. First, regarding the ICD - 10 F1 subcategory, significant differences were observed for F19.1: harmful use (4.3% vs 4.6% vs 12.7%, $P < 0.001$) and F19.5: psychotic disorder (38.7% vs 28.7% vs 27.0%, $P = 0.005$). Comparison of neurological symptoms revealed a significant difference in comas and fainting (observed before the first medical examination) (7.8% vs 11.0% vs 17.0%, $P = 0.002$), and convulsions (observed before the first medical examination) (2.8% vs 4.3% vs 9.7%, $P = 0.001$).</p>			

備考

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Discussion: Most of the 864 subjects in the current study were male (89.6%), and the mean age was 30.7 years. During the first medical examination, more than 30% of patients suffered from hallucinations and delusions, or exhibited comprehension and/or concentration ability impairments or memory disturbances. These psychiatric symptoms were considered by the attending psychiatrist to be caused by NPS. The current results revealed that the psychiatric and neurological symptoms of patients with NPS - related disorders, observed before the first medical examination or during the first medical examination, differed between fiscal years, and that adverse health impacts resulting from the use of NPS became more serious year - by - year. Although no differences were observed in age and sex ratios between years, or in the form in which NPS products were mainly used, in FY2012 a higher rate of patients was diagnosed with psychotic disorder, while in FY2014 more patients tended to exhibit neurological symptoms, such as comas, fainting, and convulsions. Psychotic disorders as well as comas, fainting, and convulsions are all serious medical symptoms. However, in terms of lethality and the likelihood of causing a life - threatening crisis, neurological symptoms such as comas, fainting, and convulsions are more serious than psychiatric symptoms such as psychotic disorder. This suggests the possibility that NPS spreading in FY2014 contained higher amounts of high - risk compounds than NPS spreading in FY2012.

Conclusion: We observed an increase in the number of patients who fell into the ICD - 10 F1: harmful use criteria (a subcategory of dependence syndrome) in FY2014. This might indicate the circumstances under which the increasing number of patients visited specialized medical facilities before they became drug dependent because they had developed serious neurological symptoms and could not continue to use these drugs until they reached the subcategory of dependence syndrome.

The results revealed that, while in FY2012 adverse health effects resulting from the use of NPS were mainly psychiatric symptoms, in FY2014 NPS users were more likely to develop neurological symptoms. These findings suggest the possibility that NPS in FY2014 (after drug - related regulations had been tightened) contained more dangerous and toxic compounds than those in FY2012.

After judging that the earlier approach (imposing ex post facto restrictions on a new illegal compound after detecting the emergence of that compound) wasn't effective, the Japanese government decided to introduce a new, comprehensive approach for designating illegal drug components. It is also possible that the tightening of regulations caused the producers of NPS to begin using unknown compounds, further jeopardizing the health of NPS users.

The present results highlight the significance of this issue for public health, indicating the limited effectiveness of the government's measures for preventing drug abuse, which solely focus on stopping the supply of drugs. Thus, our results indicate that, rather than only adopting measures to stop the supply of drugs, comprehensive measures for preventing drug abuse, including measures focused on reducing the demand for drugs, are required. (5329characters)