

Methamphetamine psychosis, the efficacy of atypical antipsychotics

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ABSTRACT

Worldwide growing methamphetamine abuse is one of the most serious health problems with several different consequences for victims, especially in developing countries. Chronic methamphetamine abuse is associated with several psychiatric problems in all countries which are faced to epidemic methamphetamine abuse. Methamphetamine-induced psychosis is a major medical challenge for clinical practitioner from both diagnostic and therapeutic viewpoints. Stimulant psychosis commonly occurs in people who abuse stimulants, but it also occurs in some patients taking therapeutic doses of stimulant drugs under medical supervision. The main characteristic of meth psychosis is the presence of prominent hallucinations and delusions. Other drugs, such as cocaine and marijuana, can trigger the onset of psychosis in someone who is already at increased risk because they have "vulnerability". The current literature review attends to explain several aspects of MIP epidemiologically and clinically. Investigators proposed pharmacologically treatment based on recently published data.

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Introduction

Amphetamine and methamphetamine are the most abuse substances among the synthetic psychostimulant across the world (1). The overall prevalence of methamphetamine users (excluding amphetamine users) ranges from 10.5 to 28.5 millions people worldwide (0.2% to 0.6% of adults between 15 to 64 years old) (2). Accompanied to amphetamine, these synthetic psychostimulants are ranked as the second illicit drug abuse after cannabis as the first and before cocaine and opiates (1).

Many consequences follow methamphetamine abusers including medical, psychiatric, cognitive, legal and socioeconomic problems. It is unclear why methamphetamine abusers are more in-

involved with legal consequences than all other illicit drug abusers (3).

It might be due to more psychotic symptoms induced by these psychostimulant drugs or flaring of symptoms in a subtle or stable schizophrenia, which could be exacerbated by methamphetamine (4). It has been well-known that such drugs are able to produce psychotic symptoms in persons with no history of previous psychiatric disorders (5,6).

Epidemiology and clinical manifestations of Methamphetamine-induced psychosis (MIP)

There are other substances, which are able to produce psychosis including cocaine, cannabis, alcohol, hallucinogens, heroin and sedatives (7).

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