

# [Drug abuse argumentative essay](https://assignbuster.com/drug-abuse-argumentative-essay/)

Drug Abuse Commonly Abused Drugs Commonly abused drugs: (1) Alcohol; (2) hallucinogenic (vision producing) drugs, such as LSD and mescaline; (3) marijuana; (4) nicotine, which is found in tobacco; (5) opiates, including most narcotics; (6) sedatives, including barbiturates and other kinds of sleeping pills; (7) stimulants, such as cocaine and amphetamines and other “ pep pills. ” Inhalants, which are fumes inhaled from such substance as cleaning fluids, gasoline, and model airplane glue, are sometimes classified as abused drugs.

Alcohol, like the sedatives, is a central nervous system depressant. The major psychoactive ingredient in wine, beer, and distilled liquor, alcohol is a natural substance formed by the reaction of fermenting sugar with yeast spores. The kind of alcohol in alcoholic beverages is ethyl alcohol—a colorless, inflammable liquid. Technically, ethyl alcohol can also be classified a food since it contains calories. In small doses alcohol has a tranquilizing effect on most people, although it appears to stimulate others. Alcohol first acts on those parts of the brain which affect self-control and other learned behaviors; lowered self-control often leads to the aggressive behavior associated with some people who drink.

In larger doses, alcohol can dull sensation and impair muscular coordination, memory, and judgment. Taken in larger quantities over a long period of time, alcohol can damage the liver and heart and can cause permanent brain damage. About two-thirds of all adult Americans drink at least occasionally. Many younger people drink and evidence suggests that alcohol use among young people is spreading. In fact, about half of all junior high school age children have tried alcoholic beverages.

Hallucinogens are drugs which affect perception, sensation, thinking, self awareness, and emotions. Changes in time and space perception, delusions (false beliefs), and hallucinations may be mild or overwhelming, depending on dose and quantity of the drug. Effects vary; the same person may have different reactions on different occasions. Many natural and synthetic hallucinogens are in use. LSD, a synthetic, is the most potent and best studied.

LSD is lysergic acid. It comes from fungus (ergot) and was first converted to lysergic acid diethylamide (LSD) in 1938. It was not until 1943 that its psychoactive properties accidentally became known. Nearly all LSD comes from domestic laboratories or is smuggles in from abroad. The quality of the drug varies. Some LSD is fairly pure; however, most street samples contain impurities and adulterants.

Generally, the user has no way of knowing the quality of LSD or any drug obtained on the street. Marijuana is a mixture of the chopped up leaves, stems, flowers and seeds of the Indian hemp plant, alias Cannabis Sativa. The intoxicating effects of marijuana are attributed to the various cannabis, the most potent of which is tetrahydrocannabinaol, or THC. These chemicals are concentrated mostly in the sticky resin within the plant.

Hashish is obtained from the hemp plant by separating the pure resin from the bulk of the plant’s fibrous mass for a greater concentration of THC and, subsequently, greater potency. The climate is which the plant was grown will also have much to do with the potency of the end product. There are dozens of other ways of preparing the plant-each end product with a name of its own-but hashish and marijuana form Mexico and Latin America are by far the most products of Cannabis Sativa in this country. Of these, even though hashish is more compact and thus easier to conceal and smuggle, marijuana is still the most popular form of cannabis in the United States.

Nicotine (the active ingredient in tobacco) acts as a stimulant on the heart and nervous system. When tobacco smoke is inhaled, the immediate effects of the body are a faster heart beat and elevated blood pressure. However, these effects are quickly dissipated. Tar (in the smoke) contains many cancer-causing compounds, many of which are in polluted air but are found in vastly greater quantities in cigarette smoke, have been identified as major causes of cancer and other respiratory problems.

Even relatively young smokers can have shortness of breath, nagging cough, or develop cardiovascular and respiratory difficulties. A third principal component of cigarette smoke, carbon monoxide, is also a cause of some of the more serious health effects of smoking. Carbon monoxide can reduce the blood’s ability to carry oxygen to body tissues and can promote the development of arteriosclerosis (hardening of the arteries). Sedatives are drugs which depress the central nervous system.

They are more appropriately called sedative-hypnotics because they include drugs which calm the nerves. They are also known as tranquilizers and sleeping pills. These drugs will be referred to as sedatives in most of this writing. There are three categories of sedatives: barbiturates, non-barbiturates, and benzodiazepines. Of all the drugs in this class, the barbiturates have the highest rate of abuse and misuse. Among the most commonly abused non-barbiturate drugs are glulethimide and methaqualone.

In the benzodiazepines group, diazepam (valium), are the most commonly abused. Stimulants are a class of drugs which stimulate the central nervous system and produce an increase in alertness and activity. They include caffeine, cocaine, and the amphetamines. Current medical use of synthetic amphetamine stimulants is usually restricted to treating narcolepsy (a rare disorder marked by an uncontrollable need for sleep) and minimal brain damage in children. They are also prescribed for short-term appetite control.

Caffeine, the naturally occurring stimulant found in coffee and tea, is a common ingredient in over-the-counter preparations designed to pep people up and help them overcome drowsiness. The only legitimate medical use of cocaine in this country today is as a local anesthetic. It was used at the turn of the century in patient medicines, wines, and soft drinks. Since antiquity, South American Indians, principally the Incas, have chewed coca leaves for religious and medicinal purposes.

It was also used to increase workers’ productivity to combat the effects of the high altitude of the Andes Mountains. Why People Abuse Drugs There are many reasons why people abuse drugs. Many wish or believe that drugs can solve their problems, the pressure from friends to experiment, the enjoyment of drug effects, and easy access to socially acceptable drugs like alcohol and tobacco. Many people use drugs to gain euphoria (a feeling of well-being). This feeling is also called a “ high”. Amphetamines, cocaine, and opiates can produce an especially intense “ high”.

Alcohol barbiturates, and marijuana usually cause a milder euphoria, and nicotine provides even less “ lift”. Hallucinogenic drugs distort a user’s awareness of himself and his surroundings. Some users find such distortion a pleasant experience. Many people experiment with drugs out of curiosity, for a thrill. Others do so to show their rejection of various standards and values of society. Much drug abuse comes from depression, loneliness, or other personal problems.

Some people develop an attitude toward society of being an outsider. Others feel they cannot meet the demands of life and so they turn to drugs. Many drug abusers are people who easily become discouraged and require immediate satisfaction of their needs. Signs of Drug Abuse Even parents and friends cannot always tell if a person is abusing drugs.

Many drug abusers try to keep their activities secret. Long absences from home, school, or work; or a sharp drop in performance at school or on the job may indicate drug abuse. A sudden change in personality, especially such changes as irritability or nervousness, may also occur without drugs. Most drugs that are abused can influence a person’s behavior.

Alcohol, inhalants, and sedatives produce drunkenness, poor muscle coordination, slurred speech, and sleepiness. Opiate users become sleepily absentminded. Most people who use amphetamines or cocaine become restless and talkative. Marijuana users have a tendency to act silly. Hallucinogenic drugs may make users restless or confused.

But in many cases, the effects of drugs cannot be noticed. Chronic use may lead to both physical and psychological dependence. Many experts consider psychological dependence to be the more serious problem in the rehabilitation of users. As a tolerance develops, there is a need for ever-increasing doses. When supplies are cut off, serious and painful withdrawal symptoms may develop. Withdrawal symptoms include nervousness, restlessness, anxiety, yawning, running eyes and nose, sweating, enlargement of pupils, muscle twitching, vomiting, diarrhea, loss of appetite, and weight.

Conclusion It took thousands of years to recognize the harm that excessive drinking can do- for example, that alcohol predisposed the liver to cirrhosis. For centuries opium was not known to be addictive. Dozens of years has to pas before the Western World recognized cocaine as a dangerous agent. The long latent period which lies between the start of widespread misuse of a drug and the full recognition of its harmful effects is an old story.

Of the agents now in vogue, many are known to be harmful, some are claimed to be safe. Regarding the safety of the latter, it may be prudent to consider the old claims of safety for alcohol, opium and cocaine. It has been said that ours is a drug taking age. Perhaps we are not entitled to that distinction when we glance back at earlier times. Those who speak of this as an age of drugs seem to justify their misuse on the grounds that others are using antibiotics, tranquilizers, or anti-depressants, but in proper amounts and for proper reasons. This is a strange logic.

Perhaps this period is better called the age of miracles. Daily we witness the miraculous cures of medicine and the miracles of science and technology. Why should we not expect a miracle pill to cure us of our hurts, provide instant happiness, instant maturity, and instant love? Bibliography Books: 1. Cohen, Sidney, M.

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