

Case Study: Drug Addiction Treatment

Patient Name: Mr. A.B.

Age: 28 years

Gender: Male

Marital Status: Single

Occupation: Unemployed

Presenting Complaint

The patient was brought to the hospital by his family with complaints of excessive drug use, loss of appetite, disturbed sleep, irritability, and inability to control his drug-taking behavior. He reported using heroin regularly for the past four years.

History of Present Illness

The patient started using drugs at the age of 24 due to peer pressure and social influence. Initially, he used heroin occasionally, but gradually his use increased to daily consumption. He developed tolerance and required larger amounts to achieve the desired effect. When he tried to stop using the drug, he experienced restlessness, sweating, body aches, anxiety, insomnia, nausea, and strong cravings.

His drug use negatively affected his family relationships, financial condition, and occupational functioning. He had attempted to quit twice but relapsed within a short period.

Mental Status Examination

The patient appeared anxious and poorly groomed. He was conscious and oriented to time, place, and person. His speech was coherent, but his mood was anxious and irritable. He reported strong cravings for heroin. His insight into his condition was partial, but he expressed a willingness to receive treatment.

Diagnosis

Opioid Use Disorder (Heroin Dependence), severe

Treatment Plan

- 1 **Medical assessment and detoxification:** The patient was admitted for supervised withdrawal management and regular monitoring of vital signs.
- 2 **Medication-assisted treatment:** Appropriate medication was prescribed by the treating physician to reduce withdrawal symptoms and cravings.
- 3 **Psychological treatment:** Cognitive Behavioral Therapy (CBT) was started to identify triggers, modify unhealthy thoughts and behaviors, and develop coping skills.
- 4 **Psychoeducation:** The patient and his family were educated about addiction, withdrawal, relapse, and the importance of treatment adherence.
- 5 **Family support:** Family members were encouraged to provide emotional support and maintain a positive, non-judgmental environment.

- 6 **Relapse-prevention plan:** The patient was taught to avoid high-risk situations, recognize triggers, develop healthy routines, and seek help when cravings increased.
- 7 **Follow-up:** Regular outpatient follow-up and participation in a structured recovery program were recommended after discharge.

Outcome

After completing the initial treatment program, the patient showed improvement in sleep, appetite, mood, and daily functioning. His cravings decreased, and he demonstrated a better understanding of his addiction and relapse triggers. Continued follow-up and psychosocial support were advised to maintain recovery.

Conclusion

Drug addiction is a chronic condition that requires comprehensive and long-term management. A combination of medical treatment, psychological therapy, family support, and relapse-prevention strategies can improve recovery outcomes and help the patient return to healthy social and occupational functioning.