

Cannabis Withdrawal: A New Entity in DSM-5!

Angshuman Kalita¹, Anil Kumar², Rahul Mathur³

¹MBBS, MD (Psychiatry), Senior Resident, LGB Regional Institute of Mental Health, Tezpur, Assam, India

²MBBS, MD (Psychiatry), Senior Resident, King George's Medical University, Lucknow, Uttar Pradesh, India

³MBBS, MD (Psychiatry), Assistant Professor, Mahatma Gandhi Memorial Medical College Hospital, Indore, Madhya Pradesh, India

Abstract: *This case report discusses about the symptoms of a 20 years old male in context with a new clinical diagnostic entity in DSM-5 i.e. 'Cannabis Withdrawal'.*

1. Introduction

A withdrawal state in cannabis dependence was not recognized till very late. The scientific community had been reluctant to acknowledge the dependence potential in cannabis because of lack of evidence for withdrawal, neurobiological pathways to elucidate the disorder and self administration of cannabinoids in animal models. [7]

ICD-10 describes withdrawal state of substance use as a cluster of symptoms, physical or psychological and of varying severity, which occurs after complete abstinence or decrease in amount of substance after prolonged use and/ or high dose of substance. Also the withdrawal symptoms are likely to be relieved by taking the substance again.[1]

DSM-5 has recently included 'Cannabis Withdrawal' associated with heavy and prolonged use of cannabis, characterised by certain physical and psychological symptoms. Also these withdrawal symptoms should be relieved by taking cannabis again.[2]

This case report tries to provide evidence in favour of this new diagnostic entity, which is by and large unacceptable to psychiatric fraternity.

2. Case

A 20 year old male presented with daily intake of cannabis for last one year came for voluntary deaddiction. Earlier he used to take cannabis in 'Joint' or 'Bong' form, but of late he is taking it in 'Chillum' to get 'Trip' or psychedelic experience. During last one year many a times he tried to resist himself from cannabis but he failed due to intense craving. Cessation of cannabis use produces symptoms of nervousness, disturbed sleep, decreased appetite, restlessness and feeling of sadness. Due to this he cannot concentrate on his studies and performs poorly in his examination. His interpersonal relationship has become poor. He used to be a state level lawn tennis player but in last one year his raking deteriorated.

Apart from cannabis there is no other substance intake and no past psychiatric illness.

There is no psychiatric illness in the family.

He is a student of class XI. Premorbidly he is calm and quiet, enjoys solitary life, excellent in individual sports. He follows cult music and is a fan of Lord Shiva.

Mental state examination reveals ectomorphic built, anxious mood, philosophical ideas, no thought and perceptual disturbance, sustained attention, full orientation, intact comprehension and grade three insight. Laboratory investigations are inconclusive.

3. Discussion

In this case there is cannabis dependence as evidenced by (i) a strong desire or sense of compulsion to take cannabis, (ii) difficulties in controlling cannabis taking behaviour, (iii) development of withdrawal symptoms when cannabis is not taken, (iv) progressive neglect of alternative pleasure and interest and (v) persisting with cannabis use despite of his poor academic performance as there is lack of concentration.[1]

The patient has been taking cannabis daily for last one year. He would develop signs and symptoms of withdrawal e.g. anxiety, insomnia, decreased appetite, restlessness, depressed mood within one day of cessation of cannabis use. There is significant impairment in his socio-occupational functioning. This establishes 'Cannabis Withdrawal'. [2]

Budney and colleagues have published two studies on cannabis withdrawal among adults and adolescents enrolled in outpatient treatment for cannabis dependence. Both adults (n=54) and adolescent (n=72) reported symptom profiles remarkably consistent with those observed in laboratory studies providing convergent validity for the syndrome. The most frequently reported symptoms were cravings, irritability, nervousness, depressed mood, restlessness, sleeping difficulty and anger.[3], [4]

Crowley and colleagues have reported similar findings with adolescent in residential treatment.[5]

Wiesbeck and colleagues in a cohort study of 5611 individuals found out that among frequent users 16% met criteria for cannabis withdrawal e.g. feeling of nervous or irritation, insomnia, tremor, sweats, nausea, gastrointestinal disturbance or appetite change.[6]

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