

# Different aspects of addiction

## ( Różne aspekty uzależnienia )

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**Abstract** – Introduction. An addiction is defined as a mental and physical state for a given organism, which is influenced by a specific factor. Addictions are chronic in nature with a tendency to relapse and build pathologies from a mental, physical and social perspective. Addictions are becoming a growing problem of modern man.

The aim of the study. The aim of the work was to present a short outline of the understanding of addictions, attention was paid to the mental and behavioural level of addictions, and the types of addictions and factors causing them were discussed.

Selection of material. The search was conducted in the Scopus database for the period 1998-2019, using the terms *mental and behavioural plane of addiction, types of addiction, factors causing addictions*. From the literature found in the Google Scholar database, studies were selected which, according to the authors, would be most useful in the preparation of this study.

Conclusions. Nowadays, the frequency of behavioural addictions of a selective nature, not associated with temporary or permanent morphological impairment, is growing very dynamically, which causes that quite often behavioural addictions are treated as something frivolous and not classified for treatment.

**Key words** - mental and behavioural level of addiction, types of addiction, addictive factors.

**Streszczenie** – Wstęp. Uzależnienie jest określane jako stan psychiczny i fizyczny dla danego organizmu, na który ma wpływ określony czynnik. Uzależnienia mają charakter przewlekły z tendencją do nawrotów i budują patologie pod kątem psychicznym, fizycznym, a także społecznym. Uzależnienia stają się rosnącym problemem współczesnego człowieka.

Cel pracy. Celem pracy było przedstawienie krótkiego rysu rozumienia uzależnień, zwrócono uwagę na płaszczyznę psychiczną i behawioralną uzależnień, omówiono także rodzaje uzależnień i czynniki je powodujące.

Dobór materiału. Poszukiwania przeprowadzono w bazie Scopus za okres 1998-2019, używając pojęć *płaszczyzna psychiczna i behawioralna uzależnienia, rodzaje uzależnień, czynniki powodujące uzależnienia*. Ze znalezionej w bazie Google Scholar piśmiennictwa wyselekcjonowano opracowania, które zdaniem autorów byłyby najbardziej użyteczne w przygotowaniu niniejszego opracowania.

Wnioski. Współcześnie bardzo dynamicznie wrasta częstość uzależnień behawioralnych mających charakter wybiórczy, nie

wiązanych z tymczasowym lub stałym upośledzeniem morfologicznym, co powoduje, że dość często uzależniane behawioralne są traktowane jako coś niepoważnego i nie klasyfikującego się do leczenia.

**Słowa kluczowe** – płaszczyzna psychiczna i behawioralna uzależnienia, rodzaje uzależnień, czynniki powodujące uzależnienia.

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- A. The idea and the planning of the study
- B. Gathering and listing data
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## I. INTRODUCTION

The concept of 'addiction' is literally defined as a disorder that meets certain criteria. However, there are many definitions of addiction. One author is G. A. Marleta, who described addiction as 'a recurring habit that increases the risk of illness and/or related personal and social problems. Addictive behaviour is often subjectively perceived as a loss of control - appearing despite conscious efforts to stop or reduce it. Typical is immediate short-term reward and subsequent harmful and long-term consequences (costs). Attempts to change these behaviours are usually accompanied by a high relapse rate'. [1] Another definition of addiction was formulated by Voronovich T. B. He described addiction as "behavioural, cognitive and sometimes physiological symptoms which develop after repeated repetition of certain activities and are usually characterised by a strong need to repeat these activities, difficulties in controlling their performance, persistent repetition despite harmful consequences, translating these behaviours over other activities and obligations, increased tolerance, as well as the occurrence of a syndrome of unpleasant symptoms (irritability, anger, aggression) when trying to stop or limit these behaviours"[2,3].

So, when we talk about addiction, we mean a state in which the recipient is completely 'dragged in' by the stimulant or a particular activity and the lack of it can lead to certain states or behaviours. By contrast, the Act on Addiction to Narcotic Drugs or Psychotropic Substances has defined addiction as 'a set of mental or somatic phenomena resulting from the action of narcotic drugs or psychotropic substances on the human body, characterised by a change in behaviour or other psychophysical reactions and the need to use these drugs or substances continuously or periodically in order to experience their effects on the psyche or to avoid consequences caused by their absence.'"[4] The World Health Organisation has proposed to define addiction as "a mental and sometimes physical state caused by the interaction of a living organism with a chemical substance, characterised by specific reactions which always involve compulsion to use that substance, continuously or periodically, in order to experience mental effects and sometimes to avoid annoyance caused by the absence of that substance, tolerance to those substances may or may not be present within the state".[5-7] The current and now frequently repeated definition of addiction was developed by the American Psychiatric Association. According to it, "addiction is the compulsion to use a medically unneces-

sary substance that leads to a deterioration in health or impairment of social functioning"[8].

## II. MENTAL AND BEHAVIOURAL LEVEL OF ADDICTION

From the definitions presented, it follows that dependency can be considered on two levels:

Psychological and behavioural, which include [9-12]:

- a strong desire or sense of compulsion to use a particular substance,
- impairment of the ability to control one's own behaviour after consumption of a given substance, i.e. a change in lifestyle, inability to control one's willingness to consume a given substance, or clumsy attempts to reduce the amount of a substance consumed,
- a change in the interests and passions caused by a desire to take a given substance, or spending more time getting and taking a given substance, and thus devoting more time to getting rid of the next one,
- The persistent intake of a substance, even though the damage caused by it is considerable, most often manifests itself in abstinence, i.e. in the body's reaction to a reduction in the amount or complete cessation of consumption of a substance,
- increasing tolerance for a given substance, i.e. forcing the consumption of more in order to achieve the desired effect.

## III. TYPES OF ADDICTION AND ADDICTIVE FACTORS

The occurrence of addiction is influenced by changes in dopamine and serotonin levels in the central nervous system. According to this theory, an addiction is defined as a mental and physical state for a given organism, which is influenced by a particular substance. They also believe that it is a chronic disease with frequent relapses. In the literature, addiction is most often defined from psychological, physical and social perspectives. Mental addiction is characterised by a developing compulsion to reach for a specific substance or specific behaviour. Unsatisfied with this compulsion may lead to such behaviours as states of tension, anxiety, anxiety. An addicted person believes that

only taking a substance or performing an activity can help him/her. Mental addiction is accompanied by strong tension and anxiety and can lead to unsustainable behaviour. [13-16]

The victims of addiction are characterised by [1,3,5,6]:

- a tendency to violate moral principles and taboos,
- Inability to be guided by higher feelings and to take action that takes into account the good of other people,
- the existence of risky behaviour,
- Awareness of the wrong behaviour, but inability to refrain from it. Some activities are considered to have addictive potential, such as work, sex, gambling, multimedia use, sunbathing, and lead to mental addiction, but do not cause physical addiction.

However, psychoactive substances tend to cause mental addiction, and some of them also physical addiction. Another addiction is physical dependence. This mainly concerns the taking of psychoactive substances. The rate of addiction depends on the type of substance the addict is taking, the way he or she is taking it and the dose. The individual's predisposition, for example, the lower the age of the addict, the greater the risk of dependence, and injecting is also more likely to occur than injecting orally. Physical addiction occurs when a relationship is formed between the substance and the body, as a result of which the body's behaviour changes. This mechanism occurs mainly at the level of neurotransmitters, but it also occurs in other systems. In physical dependence, there is a decrease in the substance in the body, which results in the appearance of certain physical reactions. Complete removal of the psychoactive substance or a significant reduction of the substance in the body leads to the formation of abstinence syndrome. Symptoms of this syndrome include: tremor of hands, sweating, nausea and vomiting, muscle pains and spasms, muscular-joint pains, diarrhoea, cardiovascular system disorders. Addicted persons who experience the given symptoms are able to do any act just to take the substances. Physical addiction has a large impact on the occurrence of risky behaviours and some authors attribute suicide attempts among drug addicts and alcoholics to this addiction. The third type of addiction is social addiction. An addict wants to adapt to the rules of a particular group or substance. [5-8,17-19]

The process of this dependence may be two-way [5,8,10,11]:

1. a person wishing to enter the group adopts certain patterns of behaviour. Usually he or she is aware of the

risks associated with taking a particular substance, but wants to belong to the group he or she is willing to break the rules. Such behaviour often leads to the rapid manifestation of mental or physical addiction.

2. fascination with the group's patterns. A drug user moves away from a substance-free society and only has contact with an addicted environment.

The picture of physical, mental and social dependence is presented in Table 1.

Table 1. Types and characteristics of addiction [20]

Types	Features
Mental addiction	It is caused by the abuse of any type of drug. It involves the creation of specific patterns of behaviour in the form of taking a psychoactive substance to reduce negative emotional states. It is associated with the characteristics of the effect of the drug on the human body. It often precedes physical dependence.
Physical dependence	It is formed as a result of the inclusion of psychoactive substances in cellular metabolism. The presence of the substance is necessary to maintain balance within the body, and its lack leads to the formation of abstinence syndrome. The strength of dependence is determined by the substance taken.
Social dependence	It is about wanting to adapt to a particular group or substance. The fashion for drug use today is characterised by the fact that it is a trend.

Another type of addiction that can be encountered in literature is behavioural addiction. The term is used to describe forms of disorders that are not related to the intake of psychoactive substances, but to the performance of specific activities. The basic criteria used to describe behavioural addictions are: absorption, mood modification, tolerance, withdrawal symptoms, conflict (in three dimensions), relapse. Absorption means that a certain behaviour has a dominant influence on a person and performing it is the most important activity. Modification of a system refers to the effect which a given behaviour is to bring. Tolerance refers to a greater need for a certain behaviour in order to achieve a certain effect. An indicator of a higher demand is usually the prolongation of a certain activity and more frequent repetition of episodes. Withdrawal symptoms refer to physical or mental symptoms when a certain activity is not possible. Conflict is described in three dimensions. The first dimension is between the addicted person and his/her immediate environment (family, friends). The second dimension is between the person and his/her other activities (work, study, interests). The third conflict occurs when an addicted person experiences negative emotions connected

with engaging in a given behaviour. Returns refer to a return to a given activity or pattern of behaviour after partial or total abstinence. Behavioural addictions most often include: pathological gambling, problematic use of computers and video games, problematic use of online games, problematic use of social networks, compulsive shopping, hypersexual disorders, compulsive gathering, exercise habits, obsessions, eating disorders, addictive sunbathing, sexholism, addictive suicide attempts. Addiction to psychoactive substances and behavioural addiction are largely similar, but not the same. The biggest difference is the type of addictive drug. When it comes to drug addiction, it is a specific substance taken from outside. Behavioural addiction, on the other hand, is influenced by behaviour which goes hand in hand with healthy human functioning. Another difference is in the level of abstinence. People who are dependent on psychoactive substances are completely isolated from the addictive substance. In contrast, people with behavioural addiction cannot be completely isolated from the addictive substance. It is only possible to isolate a gambling addict. Another difference is the lack of detoxification in behavioural addiction and its occurrence in psychoactive substance addiction. Another difference is the consequence for health. Behavioural addiction less often leads to permanent disability or death. This is directly related to the addictive factor. However, addiction to sex can lead to an increased likelihood of developing sexually transmitted diseases or heart rhythm disorders. The use of psychoactive substances can result in an overdose, with the consequence of a functional disorder or death. In the case of behavioural addiction, this risk is negligible. There is also a difference in cognitive dysfunction. In the case of behavioural dependence, the disturbance is selective and is not associated with temporary or permanent morphological impairment, as may occur in the case of dependence on a psychoactive substance.

The difference also stems from the perception of addicts in society. Psychoactive addiction is seen as a disease to be treated. Behavioural addiction, on the other hand, is seen as something frivolous and not classifiable for treatment. [17,21-30]

#### IV. REFERENCES

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