

**(A) History:**

**(ii) Drug use/abuse**

This part of history is to find out specifically and accurately about the client's drug taking behaviour, both at the present time and in the past, and to establish its importance in the client's life as a whole.

It must be appreciated from the beginning that the history given by the client may be inaccurate and sometimes deliberately untruthful. Truthful accounts are more likely to be obtained in a non-judgmental situation and when confidentiality is assured.

Drug history may be very complicated if the patient is or has been a polydrug abuser. It is usually simplest to take each drug in turn, in chronological order of first use and to elicit all the relevant information for each drug separately.

Specific enquiries should be made on:

- heroin; methadone
- LSD
- cannabis
- amphetamine; cocaine
- barbiturates; methaqualone ("Mandrax"); Benzodiazepines [e.g. flunitrazepam ("Rohypnol"), triazolam ("Halcion"), midazolam ("Dormicum"), estazolam, nimetazepam]; other novel sedative-hypnotics like zopiclone ("Imovane") and zolpidem ("Stilnox")
- volatile solvent
- cough mixture/medicine
- MDMA ("Ecstasy"), ketamine, gamma hydroxybutyrate ("GHB")

Less frequently abused drugs include magic mushroom, Phencyclidine (PCP), & anabolic-androgenic steroids.

**(Reference:**

**Annex 3:Information of list of drugs abused in Hong Kong)**

**Past and current (4-6 weeks) drug use:**

**(I) First exposure –**

- Age
- Which drug
- Mode of administration
- Circumstances
  - Where
  - Who/how initiated
  - Source of drug
- Reaction to drug

**(II) Subsequent use**

- Which drug(s)
  - Dose
  - Frequency of administration
  - Route
  - Date and age of becoming a regular user
  - Periods of heavy use
  - Maximum regular amount taken
  - Effects of drug
- Reasons for continuation
- Circumstances of drug-taking: solitary/with friends
- Periods of abstinence:
  - Voluntary
  - Compulsory
  - Reasons for relapse

**(III) Experimental use**

- Which drug(s)
  - Dose
  - Route
  - Effects of drug(s)
- Circumstances of drug-taking: solitary/with friends

**(IV) Recent use (4-6 weeks)**

- Drug(s)
  - Dose
  - Frequency
  - Route
- Source of supply
- Price paid
- Any withdrawal symptoms when unable to obtain the drug(s)
- Evidence of increasing tolerance: escalating dose
- Level of severity of dependence

Questions for inquiry:

- (1) Does the client view drug use as a problem and have efforts been made to control or stop use?
- (2) Does the client spend longer than planned obtaining, using, and recovering from the effects of the drug?
- (3) Does the client take more drug than planned?
- (4) Does the client get high when expected to fulfill various role obligations such as those relating to school or work?
- (5) Has the client given up previous important and favoured activities in order to use drug?
- (6) Has use continued despite repeated negative consequences?

*Note: If the above are answered in the affirmative, it indicates a severe level of dependence for the client.*

**(Reference:**

**Annex 4: Recommended questions to assess tolerance, withdrawal and severity of dependence)**