ABSTRACT

Cannabis is an illegal substance that has generated much debate in history. It is widely grown, cheap, readily available and widely abused. Cannabis abuse has been observed in a significant proportion of patients treated for psychosis. Various explanations have been proffered for the observed association between cannabis as a psychoactive substance and mental illnesses generally and psychosis specifically. The role of cannabis in precipitating psychosis in predisposed individuals is well known. However, there are arguments as to whether any association will be observed in individuals who abuse cannabis without familial vulnerability to developing mental illnesses. This study attempted to screen for possible general psychiatric morbidity as well as psychotic symptoms and determine any association these may have with cannabis abuse in a non-clinical population of young automobile apprentices, who have no familial predisposition to developing mental illnesses in Sokoto town, North-Western Nigeria.

The objectives of the study were

- To determine the prevalence of psychiatric morbidities among young persons who abuse cannabis
- To determine any association between cannabis abuse and psychotic symptoms
This is a cross-sectional study of 200 young, male, automobile apprentices without familial predisposition to development of mental illnesses in Sokoto metropolis. They were categorised on the basis of their abuse or otherwise of cannabis.

The Instruments used were

- The Self administered General Health Questionnaire (GHQ-28), which screened for possible general psychiatric morbidity and

- The Psychosis Screening and Substance Use sections of the interviewer administered World Mental Health version of Composite International Diagnostic Interview (CIDI). The psychosis screening section screened for psychotic symptoms, types of symptom, onset and treatment. Substance use section assessed use and abuse of psychoactive substances, including cannabis, the substance of interest of this research.

The lifetime and current prevalence rates of cannabis abuse among respondents were 26% and 21.5% respectively, rates that were higher than the national average of 10.8%. Apprentices who abused cannabis were likely to engage in chronic use, with a mean duration of 6.5± 3.4 years and with onset in the teen years in most (73%). Cannabis abuse was significantly associated with age
(X^2=13.49, df=1, p=0.001) and family history of substance use (X^2=21.62, df=1, p<=0.05). The prevalence rates of both general morbidity and psychotic symptoms among those who reported lifetime abuse of cannabis were 44% and 39% respectively, which were higher than the rates for the rest of the respondents. Abuse of cannabis was found to be significantly associated with probable general psychiatric morbidity (X^2=6.78, df=1, p=0.009) as well as psychotic symptoms (X^2=6.79, df=1, p=0.009).

In conclusion, the prevalence of cannabis abuse in this group of youths was high and most commenced cannabis use in their teens. Cannabis abuse was significantly associated with psychiatric morbidities, both probable general morbidity and psychotic symptoms, despite absence of familial predisposition to developing mental illness. Cannabis therefore, may not be as ‘harmless’ as some may have thought and there are probably other vulnerability factors besides familial predisposition to developing mental illnesses with which its abuse interacts.