



RESEARCH ARTICLE

ANXIOLYTIC CONSUMPTION BETWEEN STUDENTS IN THE HEALTH AREA OF
A PRIVATE HIGHER EDUCATION INSTITUTION

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ABSTRACT

The use of benzodiazepines (BZDs) to control anxiety and insomnia is indicated for treatment of a maximum of four weeks, since the prolonged use of this medication generates adverse effects that increases the cases of accidents, reduces coordination, causes amnesia, sedation, dependence, tolerance. BZDs act on the central nervous system by modifying psychomotor and cognitive factors; they are medicines used for anxiety, sleep problems, depression and seizures. However, these medications end up causing dependence, and a dose increase is necessary to achieve its therapeutic effect. Students in the health area are those who consume anxiolytics, because they have to live constantly in practice with the human being, always worrying about the well-being of others, for that reason ends up being insecure. These students are the ones that require more attention, in relation to the level of anxiety being superior in relation to other courses. When anxiety levels are too high, it ends up hampering attention, learning, concentration, reasoning. Students seek to consume drinks, drugs and tranquilizers as a refuge to feel good, but the high consumption of these psychoactive substances cause great problems to health and social and economic impacts.

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INTRODUCTION

The World Health Organization (WHO) found that drugs with anxiolytic and antidepressant properties were the most prescribed class of psychotropic drugs and the use of benzodiazepine anxiolytics Began in the 1970s because they were of great significance for controlling anxiety, aggression, seizures, and insomnia. It has lower depressant effects on the Central Nervous System (CNS), and this class of drugs is among the most prescribed in the present day (AJP Azevedo et al., 2016). BZD's Currently benzodiazepines are among the most commonly consumed drugs in the world. This is largely due to its therapeutic efficiency and its low risk of intoxication. According to the CEBRID (Brazilian Center for Information on Psychotropic Drugs) about 1 to 3% of the Western population have already used these medications (CEBRID Apud XAVIER, 2003).

The use of benzodiazepines (BZD) to control anxiety and insomnia is indicated that the treatment is a maximum of four weeks, as prolonged use of these drugs produces adverse effects. The use of these drugs in Brazil is enormous, because doctors prescribe them with great ease, moreover, even after prohibiting the sale of these drugs without the prescription retention of the pharmacy, it is possible to find failures in sales control (Souza et al., 2013). According to Telles Filho et al., (2011), benzodiazepines act on the central nervous system, modifying the cognitive and psychomotor aspects. The main clinical application is in cases of anxiety associated with gastrointestinal or cardiovascular conditions, seizures, muscle spasms, involuntary sleep disorders (Castro et al., 2013). In people suffering from mental disorders, the use of anxiolytics between men and women is more common because it is smaller disorders. Already the consumption of anxiolytics in people suffering from anxiety or depression, shows us that the women use more than men (Azevedo et al., 2016). Healthcare students are the ones that consume anxiolytics, for having to live constantly in practice with the human being, always worrying as the well - being of others, therefore ends up being

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unsafe. These students are the ones that require more attention, in relation to the level of anxiety being superior in relation to other courses. When anxiety levels are too high, it ends up hampering attention, learning, concentration, reasoning (Marchi *et al.*, 2013). Dependence risks increase with duration of treatment, dose, and other factors such as the use by the elderly, in relief of stress, drug users (Forsan, 2010). Abstinence syndrome is very common in people who discontinue use abruptly. Generating some symptoms such as muscle aches, extreme anxiety, headache, tension. Requiring that the dose is gradually decreased and not stop treatment. (Silva *et al.*, 2013)

MATERIALS AND METHODS

A cross-sectional and descriptive study was carried out, with 371 students from the health area of a private higher education college, in the city of Vitória da Conquista - BA. The Faculdade Independente do Nordeste (FAINOR) is accredited by MEC No. 1,393 of July 4, 2001, published in the DOU of 09/07/01, is a private higher education institution that has 14 undergraduate courses and some postgraduate studies. According to IBGE, it is estimated that the city of Vitória da Conquista in 2016 had 346,069 inhabitants, which is located there 509 km from Salvador (Salvador), the city has an area of 3704.018 km², and a latitude of about -14 ° 53' and the length of about -40 ° 48'. The study population were students of nursing courses, Beauty and Cosmetics, Pharmacy, Physiotherapy and Dentistry of 1st to 10th semester of the Faculty Northeast Independent. It used a random sample as sharing proportional. To calculate the sample size, we considered a sample error of 5%. The criteria used to include the subjects are the students who are enrolled in the courses in the health area. Excluding those who were not enrolled and absent at the time of application of the questionnaire. Being the sample for each course, nursing (93); aesthetic and cosmetic (37); pharmacy (56); physiotherapy (74); dentistry (111). Respecting the proportionality of the number of students per course. The information was obtained through a structured questionnaire, where the participants were approached in the classroom and invited to participate in the study. The questionnaires were applied in the period from August to September 2017, and made inquiries about the use of anxiolytics in the period of data collection. The project was approved by the Research Ethics Committee of the Faculty Northeast Independent with its number 69604617.8.0000.5578.

RESULTS AND DISCUSSION

A higher number of female students was found 73.6% and male students 26.4%. The age group is between 20 and 54 years (mean of 23.82 years). Regarding marital status, 89.2% are single, 75.5% do not work and 43% have an income of one to three minimum wages. With regard to the last medical consultation 35.3% of the survey participants were the doctor in less than three months, 55.8% use alcohol. The demographic characteristics of the samples are shown in Table 1. Of the 83.8% of students know how to use anxiolytics, 32.2% report that they have made the use of anxiolytics and 16.2% are making use. Of these 16.2% of students who are making use of anxiolytics 42.6% sound the dentistry course, 29.8% nursing, 14.9% of pharmacy, 10.6% of aesthetics and cosmetics, 2.1% physiotherapy. It is worth noting that 59.6% of students have already increased their use without medical guidance, which aggravates their adverse effects such as

dependence, anxiety, tremors, restlessness and dizziness. It is seen that a good part of these students makes use without medical advice 43.8% and 56.2% makes use with medical guidance, where the orientation of these medications is of paramount importance.

Table 1. Sociodemographic Characteristics of Students of a private Higher Education Institution. Vitória Conquista, BA, 2017

Characteristics		Absolute Frequency	Relative Frequency
Sex	Male	98	26,4
	Female	273	73,6
Age Group	18 - 22 years	154	41,5
	23 - 27 years	156	42
	28 - 32 years	37	10
	33 or more	24	6,5
Marital Status	Married	30	8,1
	Separate	10	2,7
	Not Married	331	89,2
Works	Yes	91	24,5
	No	280	75,5
Family Income (SM*)	Até 1 SM	29	7,9
	1 a 3 SM	159	43
	3 a 6 SM	123	33,2
	> 6 SM	59	15,9
Last Medical Consultation	Less than 3 months	131	35,3
	4 a 6 months	97	26,1
	7 months to 1 year	57	15,4
	More than 1 year	86	23,2
Alcohol Use	Yes	207	55,8
	No	166	44,2
Course Period	1 - 3 Half	51	13,7
	4 - 6 Half	191	51,5
	7 - 9 Half	115	31
	10 Half	14	3,8

* SM = Minimum Wage= R\$ 937,00
Own Source. (2017)

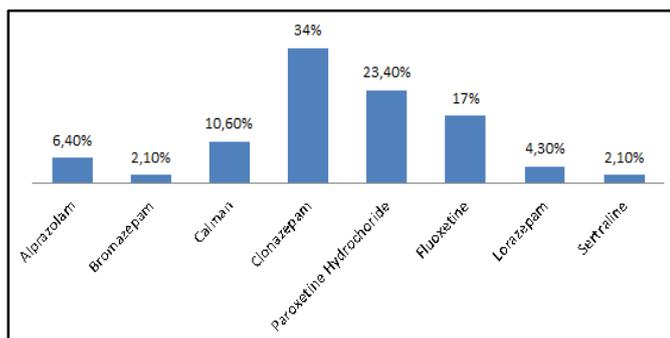
Table 2. Knowledge of the Anxiolytics in the Studied Population. Vitória da Conquista, BA, 2017

Variables	Absolute Frequency	Relative Frequency
Who prescribes the anxiolytic?		
Doctor	27	56,2
Makes use without guidance	21	43,8
Has the dose increased without consulting the doctor?		
Yes	28	59,6
No	19	40,4
Do you think anxiolytics can cause addiction?		
Yes	35	74,5
No	11	23,4
Do not know	1	2,1
Have you stopped treatment without consulting the doctor?		
Yes	24	51,1
No	23	48,9
Have you had any side effects?		
Yes	16	34
No	22	46,8
Do not know	9	19,1
Do you use other medicines other than anxiolytics?		
Yes	11	23,4
No	36	76,6

Own Source. (2017)

On the other hand, 51.1% discontinued their use without medical guidance, since these medications should not be withdrawn abruptly because they increase symptoms such as anxiety, tremors, headache, among others, requiring gradual retention. Among the drugs most commonly used by students, clonazepam 34% was the most widely used followed by 6.4% Alprazolam, Bromazepam Lorazepam 4.3% and 1.2% since the study by Marchi and other collaborators in 2013 showed that Diazepam was used as anxiolytic 37.5% in student followed by clonazepam 16.7%, 8.3% Bromazepam,

Lorazepam Alprazolam 6.3% and 2.1% longer compared with the study of Botti and other collaborators in 2010 used as anxiolytic Clonazepam was also followed by Diazepam 42.85% 38.77% showing that they are among the anxiolytics greater use by students of the health area. Some drugs although not anxiolytics, were widely used by students as the Calman 10.6% even this being a herbal drug Paroxetine Hydrochloride 23.4%, 17% Fluoxetine and Sertraline 2.1% as shown in Graph 1. It noteworthy that the study by Marchi other collaborators in 2013 and other drugs such as fluoxetine, sertraline and paroxetine hydrochloride have also been mentioned as used as anxiolytics.



Graph 1. Frequency of medicines most used by health students

Clonazepam was used as medicament for anxiety presented 31.9%, 12.8% used for insomnia and 6.4% to stress. Alprazolam 6.4% already used for anxiety, insomnia 4.3% 4.3% 2.1% stress and depression. 4.3% lorazepam used for anxiety, insomnia and stress. The Bromazepam 2.1% being used only for anxiety. In this way, anxiety eventually interferes with the cognitive aspects of the student, often blocking him in his understanding and reasoning. The association of alcohol use with these drugs only causes the risk of adverse reactions to appear.

Conclusion

The use and abuse of BZD's have taken a ratio of such magnitude in the world, it is no exaggeration to classify them as a serious public health problem, since your statement is made indiscriminately, causing more harm than benefits. This research behind contributions in relation to the analysis of the anxiolytic use among students in the health area, where it is possible to conclude that this consumption may be due to several factors such as anxiety, stress, insomnia and others. The results were partially satisfactory, demonstrating that 16.2% of the students were using anxiolytics during the period of data collection. It was expected that the number of students that made the use of tranquilizers without a prescription and that increasing the dosage without consulting the doctor were lower because they are students in the health area, and because they knew that these drugs can cause dependence. In view of the above, it is necessary to have more strict control and guidance in the dispensing of these medications, it is necessary to create public policies in order to certify if the indications and the use are correct. It is important to train prescribing professionals to decrease the frequency of chronic and indiscriminate use. Create health programs with the aim of guiding and educating students about the aspects that can affect their quality of life, minimizing the aggravations of their inappropriate use. The creation of programs of physical, cultural and social activities, spaces of exchanges and therapies

in order to demonstrate other ways of dealing with conflicts of life.

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