



# Misuse of Zolpidem to get high: A distinguished mystery

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## SUMMARY

**Background:** Misuse of zolpidem tablets is an unusual enigma.

**Objective:** To illuminate the possibility of zolpidem misuse.

**Results:** This vignette displays that some patients ill-use zolpidem tablets to turn high.

**Discussion:** Our sketch implies that some patients misuse zolpidem to go high. Therefore, this report could significantly add to the literature.

**Conclusions:** We reached to this issue that some people misuse zolpidem to reach high. So, healthcare workers, especially physicians should be conscious of possibility of zolpidem misuse when advising this hypnotic medication.

## Keywords

Misuse, Zolpidem, Hypnotic, Aggressive behavior, Depression

## Introduction

In the modern world, chiefly industrialized countries, the rate of medical and mental disorders are going up thus, health decision makers and research workers have been paying out more care, concern, consideration and currency to the direction and treatment [1-10] etiology, epidemiology, rate and prevention of mental diseases [11-30].

The most common cause of drug dependency is psychiatric disorder. Some people self-medicate to improve their mental problems such as anxiety, depression, mania agitation, irritability, aggression, insomnia, exhaustion, impotency, and pain. Regarding boosting level of mental problems worldwide, substance abuse and substance related diseases, principally and especially stimulants induced disorders have been considered as elevating dilemma [31-69]. At the present time, outpatient and inpatient referrals of psychiatric disorders resulted from substance abuse are moving forward [70-118].

## ■ Patient picture

SS was a single, 20 year old university student of business management. He housed with his mother in the capital city of Shiraz in Fars province located in south of Iran.

He began drinking alcohol and smoking cigarette at age of 15. Then, two years later started smoking marijuana. SS began misusing of zolpidem (to treat his insomnia) since 8 months prior to outpatient admission. He step by step increased the dosage of zolpidem to 100 to 200 mg per night.

Since 8 months prior to admission, he bit by bit developed depression, anxiety and aggressive behavior.

At the time of admission he was consuming zolpidem, alcohol and tobacco.

He gave history of addiction to heroin and methamphetamine in his uncles.

Due to depression, anxiety, aggression, obsession and also misuse of zolpidem and alcohol he referred to outpatient clinic Urin drug screening test was positive for morphine only.

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In comprehensive psychiatric interview and examinations he was anxious, hopeless, depressed and irritable. During exact physical and detailed neurological examinations we could not detect any abnormal findings.

According to exact medical, psychiatric, and substance use history and also DSM-5 criteria he was assumed as substance induced mood disorder and severe zolpidem use disorder.

### Discussion

In Iran, according to current drug policy, the illegal drugs and substances cover but not limited to amphetamines, ecstasy, cocaine, marijuana, hashish, hallucinogens, opium, heroin and alcohol (tobacco products are legal).

Iranian drug policy declares that if people are watched to be abusing unlawful drugs or illicit substances, they must be referred to the addiction

hospitals or outpatient treatment clinics to be detoxified and treated.

Our work intimates that a number of patients misuse zolpidem medication to go high. Thus, our work could substantially increase to the literature.

### Conclusions

We resulted to this fact that some people may misuse zolpidem to get high. Therefore, healthcare workers, and mainly physicians should be cautious and aware of possibility of zolpidem misuse when advising this hypnotic medication.

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### Conflict of interests

Nil.

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