



# สถานการณ์ปัญหาจากสารเสพติดของประเทศไทยในปัจจุบัน

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## บทคัดย่อ

โครงการสำรวจครัวเรือนระดับชาติเพื่อประมาณการจำนวนผู้เกี่ยวข้องกับสุราและสารเสพติด ปี พ.ศ. 2550 ดำเนินการโดยเครือข่ายองค์การวิชาการสารเสพติด สำนักงานคณะกรรมการป้องกันและปราบปรามยาเสพติด กระทรวงยุติธรรม เป็นการสำรวจประชากรอายุระหว่าง 12-65 ปีในครัวเรือนทั่วประเทศ การสำรวจนี้เป็นครั้งที่ 3 ครั้งแรกสำรวจในปี พ.ศ. 2544 ครั้งที่ 2 ในปี พ.ศ. 2546 โดยมีวัตถุประสงค์เพื่อประมาณการจำนวนประชากรที่เคยใช้สารเสพติดชนิดต่างๆ รวมทั้งยาเสพติด บุหรี่และแอลกอฮอล์ในชีวิตใน 1 ปี และ 30 วันที่ผ่านมา และลักษณะของการใช้ สารเสพติดเหล่านี้

โครงการประมาณการฯ พ.ศ. 2550 ใช้วิธีการสำรวจประชากรในครัวเรือนทั่วประเทศ โดยการสุ่มตัวอย่างแบ่งหลายชั้นภูมิ ได้จังหวัดทั้งหมด 29 จังหวัด ได้ขนาดตัวอย่าง 11,348 ครัวเรือน รวมคนตัวอย่าง 26,633 คน ซึ่งคิดเป็นร้อยละ 0.67 ของจำนวนประชากรทั้งประเทศในกลุ่มอายุ 12-65 ปี การเก็บข้อมูลประสบการณ์ใช้สารเสพติด 12 ชนิดในตลอดชีวิต หนึ่งปี และ 30 วันที่ผ่านมาโดยใช้วิธีการสัมภาษณ์ต่อหน้าตามแบบสอบถามที่มีโครงสร้าง

ผลการสำรวจพบว่า ประชากรที่มีประสบการณ์เคยใช้สารเสพติดชนิดใดชนิดหนึ่งในชีวิต มีจำนวนประมาณ 2,521,507 คน หรือคิดเป็นร้อยละ 5.42 ของประชากรอายุ 12-65 ปี ประชากรที่ใช้สารเสพติดชนิดใดชนิดหนึ่งใน 1 ปี และ 30 วันก่อนสัมภาษณ์ มีจำนวนประมาณ 575,312 คนและ 335,806 คน หรือคิดเป็นร้อยละ 1.24 และ 0.72 ของประชากรตามลำดับ สารเสพติดที่มีผู้ใช้ในหนึ่งปีและ 30 วันที่ผ่านมา มากที่สุดได้แก่ กระท่อม กัญชา ยาบ้า และสารระเหย เรียงตามลำดับ อัตราความชุกของการใช้สารเสพติดในปัจจุบันสูงที่สุดในภาคใต้ (ร้อยละ 4.73 ในหนึ่งปีและร้อยละ 3.76 ใน 30 วันที่ผ่านมา) โดยมีกระท่อมเป็นสารที่มีผู้นิยมใช้มากที่สุด เมื่อเปรียบเทียบกับผลการสำรวจในปี 2546 จำนวนผู้ใช้ยาบ้า กัญชา ฝิ่น และเฮโรอีนในปีนี้ลดลง ในขณะที่จำนวนผู้ใช้กระท่อมและสารระเหยเพิ่มขึ้น และพบสารชนิดใหม่เพิ่มขึ้นในปีนี้ได้แก่ ยาอี ยาเค ไอซ์และโคเคน จากผลการสำรวจรวมทั้งข้อมูลการบำบัดรักษาและจับกุมคดีสารเสพติดต่างให้ผลตรงกันว่า การใช้สารเสพติดทุกชนิดยังคงเป็นปัญหาในปัจจุบัน พบในคนทุกเพศ ทุกวัยและอาชีพ สถานการณ์นี้จึงชี้ให้เห็นถึงความจำเป็นในการให้การศึกษา ป้องกันและควบคุมแก้ไข ปัญหาจากการใช้สารเสพติดทุกชนิด และควรมีการศึกษาวิจัยต่อเนื่องเพื่อติดตามสถานการณ์ต่อไป

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# Current situation of substance-related problems in Thailand

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## Abstract

The first National Household Survey on Substance and Alcohol Use in Thailand was carried out in 2001 and the second in 2003. The major aim was to estimate the number of people who misused illicit or controlled substances. The third survey was done in 2007. This paper is a summarizing report of the results of the 2007 survey, and includes some related information from other sources in the country.

The 2007 survey used a multistage sampling scheme. Altogether, 29 provinces of Thailand were selected with a final sample of 11,348 households, with 26,633 respondents aged 12-65 years. A face-to-face structured interview was administered to elicit data on experiences of use of 12 kinds of substances in lifetime, past year and past 30 days.

Extrapolated country-wide, the results revealed that the estimated number of people who had ever used at least one kind of substances at some time in their life was 2,521,507 or 5.42% of total population aged 12-65 years in 2007. The estimated numbers of people having used substance within the past 12 months and 30 days were 575,312 and 335,806, respectively. Krathom (traditional plant-based mild narcotic), cannabis, yaba (amphetamines) and inhalants, were the most popular substances for both the past 12 months and the past 30 days. The prevalence of past-year use and current use was highest in the south (4.73% in the past year and 3.76% for current use), with krathom as the most popular substance. The numbers of users of yaba, cannabis, opium and heroin had decreased from 2003, while users of krathom and inhalants had increased, and there are also some new emerging substances in this year, notably ecstasy, ice, ketamine and cocaine. Survey, enforcement and treatment data all indicate that all kinds of substances are currently active problem. Substance abuse occurs nationwide in all gender, age and occupation groups. This situation suggests the needs for a comprehensive education, prevention and control strategy for all kinds of substances and further detailed studies to monitor the situation.

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## Introduction

Substance and alcohol abuse has been a major social and public health problem in Thailand for decades. In response to the problem, every Thai government during this time has declared this problem as a priority on the national agenda. Several national policies have been initiated, such as “The Power of the Land” in 2001, the “War on Drugs” (WoD) Operation, firstly implemented in 2003 and the current “Coalition of the Powers of the Thais to embrace the King” operational plan in 2007. The War on Drugs Operation remains the culmination point of the intensive interventions under the Power of the Land Policy, calling for a concerted implementation of enforcement and treatment measures. As part of these broader strategies, several major prevention activities and intervention programs have been implemented nationwide, resulting in changes to substance and alcohol demand patterns, and the supply situation in the country.

The Administrative Committee for the Substance Abuse Research Network (ACSAN) of the Office of the Narcotics Control Board (ONCB), Thailand has been assigned to assess the situation, and the impacts of these policies and operations since 2003. The first two studies from this body, “The evaluation of the “Power of the Land” Policy implementation for substance abuse prevention and control: a district-based study<sup>1</sup>” and “A rapid assessment and response on the substance abuse situation after the War on Drugs Policy<sup>2</sup>”, pointed out that the real situation was in conflict with the image of success portrayed in the media. Since then, several following studies of the ACSAN have confirmed the ongoing presence of substance abuse problems

and revealed changes in the nature of the problems, specifically types and methods of substances used and the using population groups. These further studies include, for example, “An evaluation of the effects of the “War on Drugs Policy” on substance demand, supply and impact situation<sup>3</sup>” and “The study of substance abuse among juvenile detainees<sup>4</sup>”. Overall, the implementation of the War on Drugs operation clearly coerced a large number of substance users into treatment. Most Thai people have agreed with the policies. A decreased intensity of substance use was the clear outcome mediated through decreased supply and increased costs for the abused substances<sup>5</sup>. In spite of these programs, however, some users reported continuing using the same substance as previously used before the policy and some new techniques of substance administration and substitute substances were developed to replace the use of substances with limited availability. In addition, new sources of substance supply, including private medical clinics, pharmacies and internet sales have emerged. Krathom (*Mitragynine speciosa*, Kroth. traditional plant-based mild narcotic) price was dramatically increased and inhalants were less easily available. Fake and poor quality yaba (amphetamines) was found. Government officers, including health care workers and law enforcement officers were loaded with arresting, screening, treatment and rehabilitation, and data processing work. With such findings, the studies also indicate some unanticipated, and undesirable aspects of the implementation of the new policies designed to combat substance abuse.

Because of this situation and the need for national data, the National Household Survey on

Substance and Alcohol Use in Thailand was first carried out in 2001 and the second one in 2003<sup>6,7</sup>. The major aim was to estimate the number of people who misused illicit or controlled substances and the characteristics of the users. A third survey was carried out in 2007<sup>8,9</sup>. This paper is a summarizing report of the results of the 2007 survey together with some supplemental information obtained from other sources in the country, *i.e.* treatment and arrest data.

### The 2007 National Household Survey on Substance and Alcohol Use

This 2007 survey used a multistage sampling scheme. The country was divided into Bangkok, municipality and non-municipality, which were subsequently divided into 10 ONCB administrative areas. Provinces, districts, sub-districts and villages or town blocks were then randomly selected in sequence, using probability sampling method with proportional to size. The final sampling unit was the household. All residents aged 12-65 years who had lived in that household for more than three months were selected.

Altogether, 29 provinces were selected for data sampling with a final sample of 11,348 households, 2,744 municipal and 7,356 non-municipal. The number of respondents was 26,633 (11,983 males - 45% and 14,650 females - 55%), which accounted for 0.67% of the total Thai population aged 12-65 years in 2007. Face-to-face structured interviews were administered

by trained interviewers to elicit data on experiences of use of 12 kinds of substances in lifetime, past year and past 30 days, alcohol, tobacco, krathom, cannabis, opium, ecstasy, ketamine, cocaine, heroin, inhalants, yaba and ice.

Extrapolated country-wide, the results revealed that the estimated number of people who had ever used at least one kind of substances at some time in their life was 2,521,507 or 5.42% of total population aged 12-65 years in 2007. The estimated numbers of people having used one or more substances within the past 12 months and 30 days were 575,312 and 335,806, respectively. Among those who used within the past month, 87,973 had used it/them more than 20 days. Cannabis was the most commonly used substance in the lifetime category, followed by krathom, yaba, opium and inhalants. Krathom, cannabis, yaba and inhalants were the first most popular substances for the past 12 months while krathom, inhalants, yaba and cannabis were most mentioned for the past 30 days (Table 1).

The prevalence of lifetime substance use was highest in Bangkok (10.92%), followed by the southern (6.58%) and northeastern regions (5.46%). However, when looking at past year use and current use (use within the past 30 days of the survey), the southern region had the highest prevalence (4.73% in the past year and 3.76% for current use), and this rate was much higher than in other regions (Table 2).

Table 1 Estimated numbers of people who had ever used each kind of substance

Substance	Estimated number of people who used one or more substances (%)			
	Ever used in lifetime	Used in past year	Used in past 30 days	Used >20 times in past 30 days
Any substance	2,521,507 (5.42)	575,312 (1.24)	335,806 (0.72)	87,973 (0.19)
Krathom	1,078,152 (2.32)	378,214 (0.81)	264,522 (0.57)	63,334 (0.14)
Cannabis	1,506,300 (3.24)	57,527 (0.12)	13,558 (0.03)	6,707 (0.01)
Opium	228,988 (0.49)	3,059 (0.01)	-	--
Ecstasy	124,314 (0.27)	15,215 (0.03)	3,311 (0.01)	-
Ketamine	30,324 (0.07)	-	-	-
Cocaine	28,292 (0.06)	-	-	-
Heroin	151,029 (0.32)	3,907 (0.01)	-	-
Inhalants	261,179 (0.56)	48,849 (0.10)	30,968 (0.07)	11,218 (0.02)
Yaba	788,948 (1.70)	66,320 (0.14)	22,857 (0.05)	6,714 (0.01)
Ice	41,814 (0.09)	2,220 (0.005)	590 (0.001)	-

Table 2 Estimated numbers of people who had ever used at least one substance in their lifetime by region

Region	Estimated number of people who used substances (%)				
	Total population	Ever used in lifetime	Used in past year	Used in past 30 days	Used >20 times in past 30 days
<b>Bangkok</b>	4,274,757	466,622 (10.92)	128,707 (3.01)	54,611 (1.28)	16,929 (0.40)
<b>Central</b>	11,186,273	412,143 (3.68)	40,445 (0.36)	15,255 (0.14)	5,076 (0.05)
Urban	3,629,953	104,544 (2.88)	11,544 (0.32)	2,091 (0.06)	708 (0.02)
Rural	7,556,320	307,599 (4.07)	28,901 (0.38)	13,164 (0.17)	4,368 (0.06)
<b>Northeast</b>	16,165,149	881,892 (5.46)	87,895 (0.54)	34,781 (0.22)	4,269 (0.03)
Urban	2,483,363	167,165 (6.73)	13,321 (0.54)	5,441 (0.22)	0 (0.00)
Rural	13,681,786	714,728 (5.22)	74,573 (0.55)	29,340 (0.21)	4,269 (0.03)
<b>North</b>	8,753,782	356,209 (4.07)	27,338 (0.31)		
Urban	1,740,069	64,830 (3.73)	4,901 (0.28)		
Rural	7,013,713	291,379 (4.15)	22,437 (0.32)		
<b>South</b>	6,148,933	404,641 (6.58)	290,927 (4.73)	231,159 (3.76)	61,699 (1.00)
Urban	1,449,966	69,403 (4.79)	34,465 (2.38)	20,994 (1.45)	1,220 (0.08)
Rural	4,698,967	335,238 (7.13)	256,462 (5.46)	210,165 (4.47)	60,479 (1.29)
<b>Country</b>	46,528,894	2,521,507 (5.42)	575,312 (1.24)	335,806 (0.72)	87,973 (0.19)

As the sampling frame and method used in the 2007 survey was changed from that used in the 2001 and 2003 surveys, some results cannot be compared directly. However, there was a notable decrease in the number of people reporting using each type of substance across the three surveys. The rate of lifetime use of a kind of substance in 2003 (6.9%) decreased to less than half of that in 2001 (16.4%) and further decreased in 2007 (5.42%). A breakdown by region shows different pictures across the three surveys. The northeast had the highest prevalence of lifetime use of a substance in 2001 (26.1% of the population), the peripheral provinces around Bangkok had the highest prevalence in 2003 (11.0%) and Bangkok itself in 2007 (10.92%). However, for current use, the southern region had the highest rate across the three years. It was found that cannabis was the most commonly used substance on a lifetime basis in all three surveys (12.1%, 4.4% and 3.24% in 2001, 2003 and 2007, respectively). While the most commonly used substance in the past 30 days was yaba in 2001 (1.1%), it was kratom in 2003 (0.5%) and 2007 (0.57%).

It should be noted that in this type of survey underreporting of experience of substance use is to be expected in varying degrees. The extent of such underreporting depends on the perceived level of public permissiveness or rejection toward such use, current law enforcement activity, social and cultural background of the respondents and the local context of the study area. Interpretation of data and resulting inferences should be made with caution.

Following is a summary of the current country situation by type of substance.

## Yaba

Amphetamines were known in Thailand under the name of “Yama” (Horse drug) for over 50 years, but the popular name became “Yaba” (Crazy drug) in 1993 because of a high number of reported cases of amphetamine-induced psychosis. Originally its use was limited to a few groups such as unskilled workers and long haul drivers. In 1984 the major chemical found in the yaba tablet changed from amphetamine to methamphetamine. In 1990 fake yaba was first found, with no amphetamine or methamphetamine in the tablet and this has become increasingly popular, reflecting the increased demand of yaba. Although the number of seizures of yaba decreased in the year following the beginning of the War on Drugs policy, they have been increasing significantly each year thereafter until the number of cases in 2007 was higher than before the Operation (Table 3)<sup>10</sup>. Along with the increased number of hospital cases, this indicates that yaba is widely abused by Thai people of all genders, age groups, occupations and regions.

In the 2007 survey, the estimated number of people using yaba in the past year decreased from almost one million in 2001 and 83,000 in 2003 to about 66,300. There were approximately 31,400 people over the country using yaba in the past 30 days. There was no report of use in the past year among surveyed samples in the urban areas in the north and rural areas in the south and no report of past 30 day-use among surveyed people in the peripheral provinces of Bangkok either. Most of the yaba users were in the northeast and Bangkok, with the increased rate of use from 1 in 1000 Bangkok population in 2003 to 7 in 1000 population in 2007. The increased number of users in

Table 3 Number of indictments of substance-related charges, 2003-2007

	2003	2004	2005	2006	2007
Yaba	63,710	35,817	54,076	59,134	65,198
Krathom	2,248	1,327	1,370	3,490	5,317
Cannabis	16,369	8,171	7,730	10,697	8,353
Inhalants	15,406	8,911	6,734	7,644	5,410
Ecstasy	660	578	335	359	290
Cocaine	88	126	88	155	110
Ketamine	323	187	104	121	60
Ice	70	209	586	960	1223
Opium	2222	908	597	717	781
Heroin	1622	710	491	407	327

Bangkok occurred in all age groups while limited to only youths between 12-24 years in the urban areas of the northeast. The first time users in 2007 were found to be highest among the unemployed (40% of all first time users), with the rest being mostly students (28.6%) and regularly employed people (28.6%).

Overall, the findings suggest that the target populations for yaba prevention should be youth, unemployed and lower education groups. It is evident that government policy has direct impacts on yaba using behavior. The area-based studies clearly pointed out that some yaba users switched to other kinds of substances, including existing substances such as inhalants, newer substances in the same group as ice and ecstasy and local addictive plants such as krathom and cannabis.

## Krathom

Krathom, *Mitragyna speciosa* Kroth. is a local plant, commonly grown in Malaysia and southern Thailand. Krathom is classified in Addictive Substance Category Five of the 1979 Drug Abuse Laws of Thailand. In the past krathom was used as a herb in

some traditional medicine regimens for treatment of diarrhea, and krathom leaves have been used as an addictive substance for decades. The methods of use include chewing fresh leaves, drinking as a tea infusion and smoking dry leaves. The most abundant alkaloid found in krathom leaves is mitragynine. More than 20 kinds of alkaloids are also found, such as 7-alpha-hydroxy-7H-mitragynine, 7-hydroxymitragynine, mitragynaline, mitragynine pseudoindoxyl, etc<sup>11</sup>. Krathom users feel that their work-related fatigue is suppressed after using krathom so they can work harder and longer and better tolerate heat and sunlight, enabling them to work outdoors for a longer period of time<sup>12</sup>.

Chronic use of krathom has been found to be associated with increased skin pigmentation of the users, making their skin become darker. It is also said that if long-term users do not spit out the leaf fiber after chewing, gut obstruction or a stomach mass of accumulated krathom fiber can result over time. An anti-diarrheal effect of krathom extract in rat has also been found, indicating some validity for its use in herbal medicine remedies<sup>13</sup>. There has also been some

anecdotal evidence of psychotic cases among chronic kratom users. Nevertheless, kratom is a native plant, naturally grown in rural areas, villagers have traditionally used it for a long time to increase their work performance and as herbal medicine without reportedly significant problems. Some users claim that kratom is not addictive as they do not feel any “high” effect from the use while some report some craving symptoms after quitting. The traditional users are predominantly in middle or older adult age groups, who eat fresh kratom leaves from a tree grown in their own or a neighbor’s house yard or garden. The amount of leaves used is normally 8-10 per day, which can usually be obtained for free<sup>12</sup>.

However, at present new methods of use have been developed, which make it more harmful to the users, for example drinking soup of boiled kratom leaves mixed with other addictive substances, e.g. benzodiazepines and codeine cough suppressant syrup, cola soft drink and some toxic substances, e.g. mosquito repellent stick, internal fluorescent light bulb coatings and bleaching liquid. These remedies are called “4X100”, “1-2 call” or “8X100” depending on the number of ingredients used. The users of this modern concoction are predominantly teenagers or young adults, who use it for fun or relaxation after work in a group of friends. As a large amount of kratom leaves is needed for use in this drink kratom leaves become more costly and difficult to obtain.

The 2007 National Household Survey of Substance Users estimated that 1,078,100 people nationwide (2.32% of the population aged 12-65 years) had used kratom at some time in their lives and 378,200 and 264,500 had used it within 12 months and 30 days,

respectively, of the survey. Kratom was found to be the most commonly used substance, compared to other kinds of substances in the survey. The highest rate of use was in the southern region (227,700 current users or 3.7% of the adult population in the South). Men and the middle-age group (25-44 years) had a higher rate of use than women and younger or older age groups. The rate of use was higher among people in rural areas and skilled worker group than in the urban areas and other classes of occupation. The highest rate of use was found in the upper southern provinces, e.g. Surat Thani and Chumporn. The average age at first use was 26 years, which was higher than the age onset of use of other substances<sup>14</sup>.

The 2003-2007 enforcement statistics indicate an increased number of arrests and confiscations in 2006 and 2007, compared to 2004 and 2005. It is noteworthy that the number of indictments of illegal distribution and production increased by 3-8 times from 2003-2005 to 2006-2007, indicating that kratom use has indeed changed as earlier noted from the traditional pattern where kratom leaves are available for free to the modern pattern where large amounts of kratom are needed and it thus becomes a commercial product. This pattern is also in keeping with the age group patterns of the arrestees, which is changed from older age groups to younger ones of under 30 years, showing an increased popularity of kratom use among the young.

Overall, all current statistics indicate that kratom has become very popular among substance users. In comparison with other substances such as yaba, heroin and cannabis, the use of which has been decreasing dramatically, the rate of kratom use has not decreased but rather accounts for the highest



proportion of all substances used. This may be explained by the fact that krathom is less likely to be perceived as a hard and illegal substance, and the users are thus more open in reporting their use, compared to other illegal substances.

## Cannabis

Cannabis is an old substance which has been used widely in Thailand for quite a long time. Apart from being used as an addictive substance, cannabis is commonly used as a flavor enhancer for Thai food, so it is grown among other house grown vegetables, most commonly in the northeast. Cannabis control laws were first issued in 1934, forcing the total eradication of cannabis plantations all over the country. The indictment of cannabis users is low when compared to users of other substances such as yaba, and has also been decreasing in recent years. However, it was found that the confiscated amount of cannabis was very large, indicating large volumes of cannabis are perhaps being smuggled. The illegal export and import of cannabis are frequently found around the border areas in the northeast and the south through to Malaysia and countries in Europe and to some countries in Asia through the international airport. In recent years, more foreigners have been arrested for smuggling liquid cannabis to Europe and East Asia. Thailand has sometimes been referred to as a world center for cannabis trade.

The 2007 national household survey found a substantial decrease of the number of cannabis lifetime users, compared to 2001 and 2003 (5.4 million, 2.0 million and 1.5 million in 2001, 2003 and 2007, respectively). The estimated number of past-year users

in 2007 was only 57,500 and 30-day users was 13,500. Noteworthy, there was no report of past-year users among respondents in rural areas of the north and no report of 30-day users among surveyed samples in the urban areas of the central and northeastern region and both urban and rural areas of the northern region. The past-year users mostly lived in Bangkok and the northeast. The rate of past-year users in Bangkok increased from 2 per 1000 population in 2003 to 5.3 per 1000 population in 2007. The highest proportion of new users was found in the student and non-regularly employed groups. Furthermore, there was also an increased prevalence of cannabis use among youth of 12-24 years, compared to in 2001 and 2003. These data suggest preventive and intervention measures should target youth and student groups.

## Inhalants

Apart from alcohol and tobacco, inhalants are the most readily available and cheapest addictive substance, leading to easy and rapid growth of inhalant abuse, even considered an epidemic by some. In 2003 when the War on Drugs Operation was implemented, in addition to yaba, which was the main focus of the operation, inhalants were also a focal point. The number of inhalant arrests thus dropped dramatically in 2004, however, as with other substances, has gradually been increasing through 2005 to 2007. Almost all charges were for use of inhalants or possession for own use, with only very few charges for distribution and trading.

The statistics of the Juvenile Detention Department show that the number of youths under 18 years detained with abusive substance charges

decreased by two thirds in 2003 after the announcement of the substance rehabilitation laws in 2002, which mandated all convicted youths must undergo compulsory treatment. However, a break down of the cases by type of substances revealed that while the number of youths arrested for using yaba decreased, other substance-related cases, especially inhalants, did not decrease but continually increased. The treatment statistics also provide a similar picture. There was a substantial increase of new hospital cases of inhalant abusers in 2003 (721 in 2002 and 4,444 in 2003), which then decreased in 2004, and then gradually increased in 2005 and 2006 (1,554, 1,787 and 1,987 cases in 2004-2006, respectively). These data indicate that the prevalence of inhalant abuse is not decreasing, as is superficially felt by the public.

In the 2007 survey, approximately 261,200 people aged 12-65 years ever used inhalants at some time in their lives. The estimated numbers of users in the past year and past 30 days were only 48,800 and 31,000. The past-year and current users were concentrated in Bangkok and the rural areas of the northeastern and central regions, with no reported use among surveyed samples in the north and the south. The prevalence was higher in men than in women, in youths aged 12-24 years than in older adults and in those engaged in agricultural, labor and unemployed work than in other occupation groups.

Prediction of the future of the inhalant use as a single substance group cannot be done with accuracy, as inhalants are often used in combination with or substitution of other substances and seldom used as a stand-alone major abusive substance. The decrease or increase of inhalant abuse is related to control operations levied against other substances.

## Club drugs

Club drugs include ecstasy, ketamine, cocaine and ice, which all are modern substances used in party or entertainment venues. Enforcement statistics show a continual decrease of ecstasy and ketamine arrests, with a concomitant gradual increase of cocaine arrests and dramatic increase of ice cases from 5 and 3 in 2000 and 2001 to 1,223 in 2007. The highest epidemic area of this substance group is Bangkok, followed by the southern and northern regions. In 2007 ice was the most prevalent substance of this club drug group. Treatment statistics show an increasing trend of patients receiving treatment for ice abuse since 2003.

As they all are considered new substances, the 2007 National Household Survey could not be expected to provide a good picture of club drug users, but still the estimated numbers of ecstasy, ketamine, cocaine and ice lifetime users were 124,000, 30,000, 28,000 and 42,000, respectively. Bangkok was the most prevalent area for all. After Bangkok, the highest prevalence of ecstasy, ketamine and cocaine was in the north and ice in the south. The report of use in the past year and 30 days was none for ketamine and cocaine and very low for ecstasy and ice. Although these data do not show a high demand or supply situation of club drugs, they should be monitored with the same level of attention as other substances because these drugs are popular among youth of the modern life style, and it is probable their use will increase.

## Opium and heroin

Opium and heroin are considered hard substances by the general public, and there is no report of current use and only a few admissions of past-year use in the 2007 survey. However, treatment data still

show that there are some new cases of opium and heroin patients seeking treatment every year and enforcement data also show a number of arrests for opium and heroin every year. Although the data seem to point out that on the demand side the number of users has been decreasing, in terms of the supply side the number of arrested traders has been increasing. The most popular method of taking heroin is through intravenous injection, which is associated with dangerous health problems such as HIV/AIDS. Therefore, preventive and control measures for opium and heroin should be maintained.

## Conclusion

The National Household Survey on Substance and Alcohol Use provides the current country situation of substance use. There were at least 575,000 people aged 12-65 years who used a substance within the past 12 months. The most popular substances were kratom, cannabis, yaba and inhalants. In the recent 2-3 years there have been some significant changes, which may result in future damage to the country. Some important issues needed careful attention, including:

1) The estimated numbers of users of some types of substances, e.g. yaba, cannabis, opium and heroin, decreased from 2003, while others such as kratom and inhalants have increased, and there are also some emerging substances found to be increasing in use in this year, *i.e.* ecstasy, ice, ketamine and cocaine. The number of users reported from the survey should be considered as minimum however, they are a basis for evaluating the substance abuse situation of the country in future years. The survey indicates that all

substances will remain a continuing problem in the future. More detailed studies about the trends of the use of these substances and their impacts should be conducted to provide a factual basis for planning and prioritizing future prevention and control strategies.

2) Substance use has spread nationwide and is distributed throughout all walks of life, regardless of gender, age or occupation. The prevalence and pattern of use of each kind of substance is varied in different population groups, making its related problems varied and dynamic as well. An effective, sensitive and comprehensive database and surveillance systems, integrating data from various sources and covering all groups of the population and areas are needed to keep ahead of the problem.

3) The 2007 survey data and statistics from all sources indicate that the demand and supply of different kinds of substances are closely related, and thus problems are also interchangeable among the different substances. It is clearly seen that some substances such as inhalants and kratom are used as substitution substances when other main substances are not available or under harsh control. In addition, the pattern of abuse is very dynamic. A harsh control measure specific to one substance often provokes the emergence of an epidemic of another substance. This situation suggests that an effective prevention and control strategy for substance abuse needs to be carried out in regard to all substances it is desirable to control at the same time with equal attention, and such implementation must be evaluated under a real situation.

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