

Infectious diseases in drug addicts

People with drug addictions have an increased risk of certain diseases. This is a consequence of the often **very low hygienic level** of their environment and the method of application (most often by injection). **Illegality** pushes drug addicts to reuse some devices (needles).

Infections are a major aspect of drug abuse. **They arise** as a result of:

- neglect of the rules of asepsis in the administration of intravenous drugs;
- sharing needles and syringes;
- promiscuity motivated by prostitution or as a behavioral disorder;
- non-compliance with basic hygiene habits;
- aspirations during impaired consciousness;
- immunosuppressive effects of certain drugs (heroin, methadone) or alcohol.

Etiology

1. Bacteria
 - *Staphylococcus aureus*
 - *Enterococcus faecalis*
 - *Pseudomonas aeruginosa*
 - *Serratia marcescens*
 - other gram-negative bacteria
 - oropharyngeal commensals
 - *Mycobacterium tuberculosis*
 - *Treponema pallidum*
 - *Neisseria gonorrhoeae*
2. Fungi
 - *Candida parapsilosis*
 - *Candida albicans*
3. Viruses
 - hepatitis viruses
 - HIV
 - papillomavirus
 - HTLV-I
 - HTLV-II

There is a higher prevalence of resistant microorganisms in drug addicts due to the frequent self-treatment with illegally acquired antibiotics. **Insufficient nutrition** (reduced appetite, vomiting, diarrhea, lack of funds...) leads to a general weakening of immunity. Mental **stress and strain** during withdrawal symptoms also negatively affect the body's defenses. The most common infectious diseases in drug addicts are **infectious hepatitis B, C (or D), HIV (and subsequent AIDS)** and **infectious endocarditis**.

Clinical manifestation

Initially, thrombophlebitis and skin and subcutaneous tissue infections, but after possible hematogenous dissemination: sepsis, infectious endocarditis (mainly in the right heart valves with septic lung emboli), abscesses (renal, splenic, cerebral), osteomyelitis, and septic arthritis, soft tissue infections, necrotizing fasciitis, pneumonia (bacterial), aspiration pneumonia, tuberculosis, viral hepatitis (A, B, C), sexually transmitted infections (syphilis, gonorrhea, chlamydia, HIV infection).

Diagnosis

False negativity cultures for self-treatment with illegally obtained antibiotics. Offer drug users anti-HIV antibodies.

Differential diagnostics

False seropositivity (VDRL, autoantibodies), fever from drug impurities, impaired consciousness from intoxication (may mimic neuroinfection), withdrawal (vomiting and diarrhea during heroin withdrawal), pulmonary edema.

Therapy

Take into account antibiotic resistance, tolerance of analgesics and sedatives, take into account non-compliance with the treatment regimen and arbitrary premature termination of treatment.

Links

Related articles

- Substance abuse

Source

- BENEŠ, Jiří. *Study materials* [online]. © 2010. [feeling. 2009]. < <http://jirben.wz.cz/> >.