



Strengthening Of Mental Health In Adult Users, Cuenca-Ecuador

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ABSTRACT

Background: Addictions affect the mental health of consumer patients because they involve the altered functioning of various brain circuits, which translates into multiple cognitive, emotional and behavioral disorders, requiring immediate preventive actions and promotion to strengthen their mental health.

Objective: Develop interventions to strengthen the Mental Health of addicted patients, Cuenca 2022-2023.

Methodology: A quasi-experimental quantitative study was carried out with the application of pretest and posttest, including 85 adult substance-consuming patients, Cuenca-Ecuador. A direct interview was carried out with the study participants by applying an ex-professional questionnaire of sociodemographic data, application of the Hamilton Anxiety scale. The analysis was carried out with the SPSS v26.0 program through descriptive and inferential statistics, considering statistically significant results at values of $p < 0.05$.

Results: Of the consumer patients participating in the study, in the pre-test, 29.4% presented mild to moderate anxiety and 45.9% had moderate to severe anxiety, in the post-test after the intervention, 84.7% without anxiety and 7.1% present mild severity of anxiety. In addition, a statistically significant association is identified between the age between 18-30 years and $p = 0.017$ in the age of 31-45, level of secondary education there is an association with a value $p = 0.01$, economic income there is a significant association with all categories, economic income less than the basic floor with a $p = 0.03$,

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equal to the basic salary with a $p=0.031$ and higher than the basic salary with a value $p=0.045$. Patients with a level of education and economic income are becoming aware that substance use affects their personal and family life.

Conclusion: The study shows that substance-consuming patients have high levels of anxiety.

Keywords: *anxiety, drugs, intervention*

INTRODUCTION

The consumption of substances is one of the most relevant health problems of the current era, so a multidimensional look is important since it affects all facets of the life of the human being generating a deterioration in their mental health. Undoubtedly, health professionals have a great challenge in this regard since every day the subjects who abuse substance use increase and their clinical management is difficult. One of the triggering factors is the high psychopathological comorbidity, so it is important to keep in mind the personal characteristics of each patient for the treatment approach, which should be focused on the causes triggered by consumption (1).

The WorldHealth Organization (WHO) points out that 5.6% of the world's population aged between 15 and 64 years used illicit drugs on at least one occasion (2) in addition to the fact that each year there are 3.3 million deaths in the world due to the harmful use of alcohol, which represent 5.9%; because of tobacco 6 million people died and about 200 thousand died cause of the use of other drugs. Between 10% and 30% are exposed to a combination of neurobiological and psychosocial vulnerability factors, the consequences of drug use and abuse impact on the population in the development of diseases capable of harming large sectors of the world population (3)

According to the 2017 World Drug Report of the United Nations Office on Drugs and Crime (UNODC), 255 million people were identified as using various substances at least once a year, such as: alcohol, cannabis, opiates, cocaine or amphetamine-type stimulants, with an estimated annual prevalence of illicit drug use of 5.3 % (4). The 2021 World Drug Report notes that nearly 274 million people in the last year used drugs and most worryingly, more than 36 million suffered from different types of disorders due to use (2). The main drugs of consumption are alcohol,

followed by marijuana, tobacco, cocaine among others (5).

The WHO states that drug "is any substance that, introduced into the body by any route of administration, produces in some way an alteration of the functioning of the nervous system and can also create dependence, whether psychological, physical or both" (6). Every drug is a pharmacologically active substance on the nervous system that modifies the behavior and behavior of those who consume it. This phenomenon of drug addiction has an important impact at the community level, requiring advanced interventions through the design and implementation of comprehensive programs in its biopsychosocial sphere (2).

Historically, the human being in all its cultures, times and social strata has been linked to the consumption of various toxic substances that alter the mind and perception, which can last for a long time, affecting various areas and preventing coping with problems, linked to this the person modifies his level of consciousness and mood (4).

There are several risk factors for the initiation of consumption, among them we find: family dysfunction, parental consumption, violence; On the other hand, social support, assertive communication and interaction between the parent-child dyad and family dynamics are mentioned as protective factors. (5).

The symptoms that developed in the consumption and substances cause clinical discomfort or in turn, deterioration in the work, social or other important areas of integral functioning, either in the cognitive, emotional or behavioral area of the individual, which influences the biological, psychic or developmental processes (6). At the level of the central nervous system, there are repercussions that affect the cognitive level and have a great

impact on the emotional sphere. There is a well-known interrelationship between depression, anxiety and addictive behavior: a depressive or anxious subject may resort to substance use as an escape and defense mechanism for problems. It is also common for substance addicts to suffer from depression or anxiety as an associated illness (7). In addition, drugs can modify mood, alter thought processes and modify consciousness, which have been better known thanks to advances in neuroscience by better understanding the physical processes that act when consuming these substances (8).

The consumer presents feelings of anxiety such as fear, anguish, excessive thoughts about the future, which can cause excitability or even sadness, anxiety as an emotion is part of human life, and depending on its intensity with which it feels and the way it is handled can be considered beneficial or harmful. High levels of such emotion can negatively influence personal development, in addition to provoking impulsive reactions, thus compromising their mental health (9).

The reality mentioned above, requires us as health professionals to strengthen mental health which includes the actions derived in the prevention, treatment and rehabilitation of mental disorders, according to the WHO the concept of mental health refers to a state of well-being in which the individual recognizes his abilities and can face the normal conflict situations of life, Be productive and have a fruitful life. The World Health Assembly defines it as "a state of well-being in which the individual realizes his abilities, overcomes the normal stresses of life, works productively and fruitfully, and contributes something to his community", mental health is associated with words such as: tranquility, stability, balance, prudence, tolerance, maturity, wisdom and pursuit of happiness, a state of well-being, allowing the individual to recognize his abilities and be able to cope with the normal stressors of life" (10).

The consumer population is a priority of attention in our country and requires a holistic approach, starting with certain psychosocial phenomena that lead to addiction to generate health conditions that affect the levels of well-being and

quality of life, that is why the proposal to generate workshops for the promotion and prevention of substance use, from the identification of risk factors, such as anxiety, impulsivity, depression, suicidal ideation and attempt, in order to influence better health conditions in consumers, and therefore, their levels of well-being and quality of life (11).

It is important to improve the success rates of intervention programs, being therapeutic work a fundamental pillar for consumer patients strengthening their mental health in order to achieve empowerment and thus face social reintegration and develop their life project, in the short, medium and long term.

MATERIALS AND METHODS

Study design and sample selection

A quasi-experimental quantitative study was conducted with the application of a pretest and posttest, including 85 adult patients who consume substances from therapeutic communities in Azuay. The participating patients were selected through an intentional non-probabilistic sampling of the inmates of the centers. Each of the participants was explained what the study consisted of and the corresponding informed consent was obtained, before the application of the data collection instrument.

Evaluation of subjects

A structured interview was applied to all participating addicted patients in order to obtain information related to drug use, which consists of two main sections, which are: Questionnaire expofeso d ond e consist of sociodemographic variables prepared by the authors. It was applied as a pretest and posttest after the intervention, the scale of anxiety d ad d e hamilton, consists of 14 items, which gives two scores that correspond to psychic anxiety (items 1,2,3,4,5,6 and 14) and somatic anxiety (items 7,8,9,10,11,12 and 13) and each of them with five answer options: Absent: "0", Mild: "1", Moderate: "2", Serious: "3" and Very Severe: "4". Whose interpretation is: Mild severity of anxiety: 17 points or less; Mild to moderate severity of anxiety: between 18

and 24 points and Moderate to severe anxiety: greater than 24 points.

Statistical analysis

The data collected through the surveys were transcribed into a digital database and analyzed using the SSPS v.24 program. Descriptive statistics were performed by means of frequencies and percentages, Pearson's Chi-square contrasts were also used to observe association between the variables studied, p-value and confidence interval to measure the relationship between the different variables of the project and fulfillment of the objectives. Data were tabulated and analyzed and statistically significant when $p < 0.05$.

It results from

A total of 85 to d dultos who consume drugs that participated in the study, according to the sociodemographic characteristics is evidenced a higher frequency in the age group of 18 to 30 years with 60.0%, followed by the group of 31 to 45 years with 30.6%, and 9.4% belong to an age of 46 to 65 years; regarding marital status 38.8% are single and 37.6% single, in terms of education 44.7% have secondary education; in relation to their employment situation we observe that 54.1% is working, according to the economic remuneration they receive is mostly lower than the basic salary with 35.3% and 34.0% receive an economic remuneration equal to the basic sumand finally to the consumption of the drug 52.9% does not consume As only alcohol, as described above can be seen in Table 1.

TABLE 1: Description according to sociodemographic variables of adult consumers of the Therapeutic Communities, Azuay 2022-2023

Variable		Frequency n=85	Percentage 100%
Age	18-30	51	60%
	31-45	26	30,6%
	46-65	8	9,4 %
Works	Yes	46	54,1%
	No	39	45,9%
Level of education	Primary	13	15,3%
	High school	38	44,7%
	Superior	31	36,5%
	Fourth level	3	3,5%
Droga	Yes	40	47,1%
	No	45	52,9%
Income	Less than basic salary	85	35,3%
	Basic salary	82	34,0%
	Greater than basic salary	74	30,7%
Thisdo civil	Bachelor	33	38,8%
	Married	32	37,6%
	Divorced	13	15,3%
	Widower	7	8,2%

Source: Data form.
Elaboration: Authors

Table No.2 shows the degree of intensity and the anxiety disorders patients who consume substances according to the Hamilton Anxiety Scale, reflecting that 12.9% do not present,

11.8% have mild severity and 29.4% have a mild to moderate anxiety disorder and 45.9% have a moderate to severe anxiety disorder, that is, there is a greater Percentage of patients

who consume have been affected and have high levels of anxiety and to a

TABLE 2: Anxiety intensity according to pretest in adult consumers of the Therapeutic Communities, Azuay 2022-2023

Variable	Frequency N	Percentage %
No anxiety	11	12,9%
Mild severity of anxiety	10	11,8%
Mild to moderate anxiety	25	29,4%
Moderate to severe anxiety	39	45,9%
Total	85	100%

Source: Data form.

Elaboration: Authors

Table 3 presents the relationship between the level of severity of anxiety and sociodemographic variables, it can be identified that there is no statistically significant association between the intensity of anxiety severity with

age, level of education, marital status of economic income is greater than $p = 0.05$, this does not mean that the risk factor of consumption always affects regardless of the sociodemographic variables.

TABLE 3: Correlation between sociodemographic variables and severity of anxiety in patients who consume according to pretest.

			Interpretation of degrees of anxiety				ABOUT 2	
Variable			No anxiety	mild severity of anxiety	mild to moderate anxiety	moderate to severe anxiety	Total	P-value
Age	18-30	Frequency	6	5	14	22	47	1.198
		Percentage	54,5%	50,0%	56,0%	56,4%	55,3%	
	31-45	Frequency	3	4	9	12	28	0,978
		Percentage	27,3%	40,0%	36,0%	30,8%	32,9%	
	46-65	Frequency	2	1	2	5	10	0,771
		Percentage	18,2%	10,0%	8,0%	12,8%	11,8%	
Marital status	Single	Frequency	7	3	10	19	39	12,278
		Percentage	63,6%	30,0%	40,0%	48,7%	45,9%	
	Married woman	Frequency	4	5	14	12	35	0,091
		Percentage	36,4%	50,0%	56,0%	30,8%	41,2%	
	Divorcee	Frequency	0	1	0	7	8	0,646
		Percentage	0,0%	10,0%	0,0%	17,9%	9,4%	
	Widow	Frequency	0	1	1	1	3	0,422
		Percentage	0,0%	10,0%	4,0%	2,6%	3,5%	
Level of Instruction	Primary	Frequency	2	1	5	6	14	3,997
		Percentage	18,2%	10,0%	20,0%	15,4%	16,5%	0,912
		Frequency	5	6	15	22	48	0,911

	High school	Percentage	45,5%	60,0%	60,0%	56,4%	56,5%	
	Superior	Frequency	4	2	4	10	20	0,776
		Percentage	36,4%	20,0%	16,0%	25,6%	23,5%	
	Fourth Level	Frequency	0	1	1	1	3	0,081
Percentage		0,0%	10,0%	4,0%	2,6%	3,5%		
Income	Less than basic salary	Frequency	5	2	11	22	40	7,106
		Percentage	45,5%	20,0%	44,0%	56,4%	47,1%	
	Equal to basic	Frequency	4	4	11	12	31	0,361
		Percentage	36,4%	40,0%	44,0%	30,8%	36,5%	
	Greater than basic salary	Frequency	2	4	3	5	14	0,127
		Percentage	18,2%	40,0%	12,0%	12,8%	16,5%	

Source: Data form.
Elaboration: Authors

Table No.4 shows a decrease in the degree of anxiety in patients who consume substances according to the Anxiety Scale of Hamilton and who participated in the workshops of the intervention, reflecting that 84.7 % without anxiety and 7.1 % have mild severity of anxiety.

and 4.7% have a mild to moderate anxiety and 4.7 % have a MODERATE TO SEVERE Anxiety and 3.5% have a severe anxiety, i.e. it decreases significantly in patients who consume and have low levels of anxiety.

TABLE 4: Intensity of anxiety according to posttest in adult consumers of the Therapeutic Communities, Azuay 2022-2023.

Variable	Frequency n	Percentage %
No anxiety	72	84,7%
Mild severity of anxiety	6	7,1%
Mild to moderate anxiety	4	4,7%
Moderate to severe anxiety	3	3,5%
Total	85	100%

Source: Data form.
Elaboration: Authors

Table No.5 indicates the relationship between the degree of severity of anxiety and the sociodemographic variables of patients who consume substances and participated in the workshops of the intervention, where a statistically significant association can be observed with a value $p = 0.047$ in a bivariate analysis between 18-30 years and $p = 0.017$ in the bivariate analysis 31-45. Regarding the level of secondary education

there is an association with a value $p = 0.01$. With economic income there is a significant association with all categories, economic income less than the basic salary with a $p = 0.03$, equal to the basic salary with a $p = 0.031$ and greater than the basic salary with a value $p = 0.045$. Patients with education and income are becoming aware that substance use affects their personal and family life.

TABLE 5: Correlation between sociodemographic variables and severity of anxiety in patients who consume according to posttest.

		Interpretation of degrees of anxiety				Total	ABOUT 2	
Variable		No anxiety	mild severity of anxiety	mild to moderate anxiety	moderate to severe anxiety	Total	P-value	
Age	18-30	Frequency	44	6	1	0	51	12,743
		Percentage	61,1%	100,0%	25,0%	0,0%	60,0%	
	31-45	Frequency	21	0	3	2	26	0,017
		Percentage	29,2%	0,0%	75,0%	66,7%	30,6%	
	46-65	Frequency	7	0	0	1	8	0,128
		Percentage	9,7%	0,0%	0,0%	33,3%	9,4%	
Marital status	Single	Frequency	28	3	1	1	33	14,653
		Percentage	38,9%	50,0%	25,0%	33,3%	38,8%	
	Married woman	Frequency	30	2	0	0	32	0,12
		Percentage	41,7%	33,3%	0,0%	0,0%	37,6%	
	Divorcee	Frequency	8	1	2	2	13	0,159
		Percentage	11,1%	16,7%	50,0%	66,7%	15,3%	
	Widow	Frequency	6	0	1	0	7	0,985
		Percentage	8,3%	0,0%	25,0%	0,0%	8,2%	
Level of Instruction	Primary	Frequency	10	1	1	1	13	8,885
		Percentage	13,9%	16,7%	25,0%	33,3%	15,3%	
	High school	Frequency	34	3	0	1	38	0,01
		Percentage	47,2%	50,0%	0,0%	33,3%	44,7%	
	Superior	Frequency	26	2	2	1	31	0,559
		Percentage	36,1%	33,3%	50,0%	33,3%	36,5%	
	Fourth Level	Frequency	2	0	1	0	3	0,92
		Percentage	2,8%	0,0%	25,0%	0,0%	3,5%	
Income	Less than basic salary	Frequency	30	3	1	0	34	13,324
		Percentage	41,7%	50,0%	25,0%	0,0%	40,0%	
	Equal to basic	Frequency	32	3	0	2	37	0,031
		Percentage	44,4%	50,0%	0,0%	66,7%	43,5%	
	Greater than basic salary	Frequency	10	0	3	1	14	0,045
		Percentage	13,9%	0,0%	75,0%	33,3%	16,5%	

Source: Data form.

Elaboration: Authors

DISCUSSION

As a result of the study, with a sample of 85 people, a more prevalent age group of 18-30 years was found with 60.0%, single marital status

of 38.8%, a level of secondary education with 44.7%, remuneration 35.3% lower than the basic salary, in relation to work 54.1% does; these data are similar to those found in the research entitled

"Relationship between the consumption of psychoactive drugs and cognitive impairment in drug-dependent Ecuadorian patients", where the group of 18-24 years predominated and the level of secondary education with 50% (12). This is also corroborated by the study conducted by Marengo Samuel and Bogado Juan Sebastián in Paraguay in 2017, in which it was shown that the predominant group is 18 years old with 43%, results similar to those found in our study and intervention (13)

In relation to marital status, similar results were found in the article entitled "Drug dependent profiles in relation to variables and personality disorder" published in the Network of Scientific Journals of Latin America, the Caribbean, Spain and Portugal, where they concluded that the highest prevalence is being single with a 74,4%. Another research article conducted by León Ernesto, Prado Ramón, Corona Beatriz and Romero Roberto at the General University Hospital "Calixto García", in Havana-Cuba a group of 19-29 years with 39.2%, secondary education level with 52.7% 51, data related to those of the present research (14).

Regarding the assessment, the Hamilton Anxiety Scale evaluated the level of anxiety presented by adult consumers hospitalized in the addiction centers participating in the project, resulting in mild anxiety 11.8%, moderate 29.4%, moderate to severe 45.9%; indicating a higher incidence in severe anxiety; However, we must bear in mind that all users have a level of anxiety especially about internment. The above resembles a study by Contreras Y., Miransa O. and Torres V., on "Anxiety and depression in patients addicted to psychoactive substances" patients who presented moderate anxiety were in the age group of 18 to 30 years in 60.0%, and with a level of secondary education 44.7%, 53 similar to the study presented where it was found in an age range of 18-30 years in 28%, predominant and a level of secondary education 24% (9)

In our study the results of the questions referring to the anxious mood, are shown and indicate that 44.74% corresponds to mild anxiety, 36.84% moderate, 15.79% absent and 2.63% severe, we can highlight that interventions in anxiety disorders and insomnia nursing intervention is

favorable since applying NIC and NOC protocols the patient goes to a state of relaxation, tranquility and sleep regulation (15). These data differ from the study by Valarezo O., Erazo R., and Muñoz Z., on "Symptoms of anxiety and depression associated with levels of alcohol and tobacco consumption in adolescents in the city of Loja, Ecuador" in which a level of mild anxiety predominates with 11.8%, unlike our study that moderate anxiety was 45.9% (16).

In the present study in the application of the Hamilton posttest and after having participated in the intervention workshops, the results reflected that 84.7% do not present anxiety, 7.1% present mild severity of anxiety, 4.7% have mild to moderate anxiety and 4.7% have moderate to severe anxiety, there are no studies with which the results can be contrasted, However, byMarín-Navarrete R et al., the most frequent group of anxiety disorders are anxiety and lack of impulse control in patients with disabilities (17).

The author Callisaya (14) points out that resilient people with a life project usually have certain positive capacities that allow them to cope with conflict situations such as toxic consumption; however, despite this, Tarazona and Sierra in the year 2019 clarify and affirm that this does not imply that resilient people stop feeling overburdened by difficulties and rupture of relationships, rather despite the problems and imbalances experienced, they begin to look for optimal solution strategies, control their impulses and thus assertively face such conflict of consumption (18).

CONCLUSIONS

The consumer patients who participated in the study the highest age is from 18 to 30 years with 60.0%, with single marital status 38.8%, 44.7% have secondary education; 54.1% are working and have an economic income lower than the basic salary with 35.3%.

Regarding the severity of anxiety in the pretest 11.8% presented mild severity of anxiety, 29.4% had mild to moderate anxiety and 45.9% had moderate to severe anxiety, alcohol consumption and hospitalization causes patients to present anxiety

When patients who consume alcohol have interventions to strengthen their mental health allows the severity of anxiety to decrease, highlighting in the posttest that 84.7% no longer present anxiety, 7.1% presents mild severity of anxiety.

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