Is Addiction A Psychological Or Physical Disorder?

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Addiction, in the field of psychology, refers to a chronic brain condition characterized by drug seeking and use despite adverse effects. Experts argue that it is a brain disease because drugs can interfere with and change the normal functioning of the brain. The state in which the body adapts to the presence of a drug until the drug no longer has the same effect is known as tolerance.

On the other hand, some people argue that it is a condition in which an individual ingests a substance, e.g., a drug, or engages in an activity, e.g., sex, that is exciting, but prolonged use or participation interferes with one's routine. Users may not even be aware that their behaviour has changed and is out of control, causing harm to others and themselves.

A lot of addictive behaviour is neither related to physical tolerance nor exposure to cues. Individuals compulsively engage in drug use or gambling because of emotional stress, whether or not they have a physical addiction. The primary focus of obsession is not what matters but rather an urge to take action in certain types of stress due to stress hormones (Corticotropin-Releasing Factor, Adrenocorticotropic Hormone) (Kiesbye, 2010).

Thus, the treatment of these types of addiction requires one to fully understand how they work psychologically. It is essential for one to recognize that addiction is not about searching for pleasure or anything to do with one's moral behaviour/character. Experts continue to debate whether addiction is a disease or a genuine mental illness, and the lack of any resolution may preclude appropriate treatment (Kiesbye, 2010).

The Mind Body Debate in Addiction

The question of whether addiction is a psychological or physical disorder always arises when one talks of dependency. The idea of being able to distinguish between mental and physical dependence goes back to the 17th-century French philosopher René Descartes. In the philosophy of mind, Descartes's proposed solution to the mind/body problem is the argument that there are the mind (soul) and the body (brain), and the two do not causally affect each other (Prinsen, 2012).

The solution is identified as Cartesian dualism, though some people consider it an unsatisfactory explanation, and some argue that this concept has hindered understanding of the nature of

consciousness. Thus, differentiating between the mental and the physical becomes difficult using the concept of Cartesian dualism. To solve this issue of psychological and physical disorder once and for all, the philosopher of the mind, John R. Searle, argues that consciousness can be identified as a feature of the single and physical organization of the brain. Thus, when one identifies the physical occurrence of water molecules as wetness, it shows that the mental and the physical are the same thing. With this concept, one can define addiction as a defect in the ability of the brain to perceive pleasure, which influences the consciousness, thus forming an unhealthy attachment (Starcevic & Aboujaoude, 2017).

How Addiction Changes Brain Function

The part of the brain that is significantly affected by addiction, e.g., drug addiction, is the center of the limbic brain. It is the part of the brain involved in handling anticipation and survival planning. Nevertheless, a slight defect in the limbic brain affects the addict's perception of a substance's survival salience, which is unconscious (the first part of addiction) (WIERS, 2010).

Afterward, the drug experience is sent to the frontal cortex, where an emotional connection to the drug is experienced based on the information received concerning drug salience. It is identified as the second part of addiction, in which the drug takes on a particular meaning for the addict and is eventually associated with feelings of love when used (WIERS, 2010).

Genetic and Environmental Risk Factors

A lot of factors are considered when one considers addiction. A range of genetic and environmental factors varies across a population in the development of addiction. Approximately half of an individual's risk of developing an addiction is attributed to genetics, while the other half is attributed to the surrounding environment. Under the right circumstances, any person can become an addict. It means that an individual with a low genetic predisposition can still develop an addiction when exposed to high doses of an addictive drug for an extended period.

Addiction as Disease or Choice

The question of whether addiction is a disease or a choice has always arisen. Over the previous decade, scientists have increasingly viewed addiction as a brain disease that develops over time following voluntary behavior. Relevant mechanisms imply that the long-lasting changes in the brain are the ones responsible for distortions of both cognitive and emotional functioning (Hajela, 2017).

It is as though the brain's natural control circuit has been hijacked. Thus, much of the biomedical

community considers addiction a brain disease. Like other illnesses, the condition of dependency is both organic and chronic. It targets the brain as its primary organ, causing effects such as craving and constant usage, among other results, but it can be treated one day at a time. Different people have different opinions with regard to addiction. Not all people agree that addiction is a disease. It is because some people argue that addiction is due to an individual's choice to use the drug available. Though the early stage of use may be due to choice, once the brain has been affected, a person may lose control of their behavior. A choice cannot determine whether a condition is a disease; rather, a disease concerns what happens to an individual's body as a result of decisions made (Khantzian, 2013).

Other people argue that addiction is not a disease, as people with addiction can get better even without undergoing treatment. Some people can curb severe addiction after experiencing a crisis. Others can achieve sobriety through self-help groups.

According to NIDA, addiction is a disease because the brain can change, as is evident in brain scans, and these changes have consequences. It characterizes addiction as compulsive drug seeking and use. There are ways in which the disease model falls short in this case. They include changes occurring in the brain; people can change their behavior even though their brains have changed in response, and, finally, there is no evidence of an addict's compulsivity (Wakefield, 2016).

Arguments Against the Disease Model

A lot of reasons have been identified as to why addiction is not a disease. Some of the main reasons include:

- A physiological malfunction may involve a virus, and evidence that brain changes exist does not itself demonstrate brain damage. These changes can explain how the brain functions, not only when using a substance. This is because brain changes occur in everyday life, and the mind can be altered by the choice of thinking since the changes are not permanent.
- Evidence used to explain an addict's behavior as being caused by brain changes also shows that behavior can change without medical intervention. Thus, the brain can change back to normal after voluntarily changing its behaviour.
- Drug use is not necessarily compulsive, as users can differentiate between activities happening around them. Research shows how the offers given to an addict lead to choice-making, thus leading to substance abuse.

Origins and Behavioral Forms of Addiction

The origin of every concept encountered in the world always exists. Thus, one is required to look at

precisely what causes the concept of addiction. Firstly, the word addiction is derived from a Latin word meaning “enslaved by”, or it can mean “bound.” A person who has experienced addiction knows what it is like to be addicted. Addiction can exert a strong influence on the brain, which is manifested in three distinct ways: craving the substance of dependence, losing control over its excessive use, and continuing involvement despite the consequences (Starcevic & Aboujaoude, 2017).

A lot of people for many years believed that only drugs and alcohol were responsible for causing addiction. However, recent research has proven otherwise, as pleasurable activities such as gambling, sex, and even shopping are accountable for co-opting the brain. Many people don’t comprehend the reason why one can be addicted to substances such as drugs. It is commonly mistaken that individuals who are addicted mostly to drugs are immoral and lack moral principles. They think stopping the addiction is as easy as choosing to stop using the substance and doing an activity (Kiesbye, 2010).

How Addictive Substances Disrupt the Brain

In reality, addiction is a complex disease, and quitting takes more than words or genuine intention. Strong substances such as drugs affect the brain in different ways, and this makes it difficult to stop addiction, even for those individuals prepared to do so. With experimental intervention, one can know how addiction affects the brain, and with this, one can know how to treat successfully and help the addicts. Various things happen to an individual’s mind when one is addicted to active substances such as drugs. This is because these drugs contain chemicals that enter the brain’s communication system and interfere with the normal processes by which nerve cells receive, process, and send information (Prinsen, 2012).

There exist two ways in which the disruption is incurred, namely, by imitating the primitive brain’s chemical messengers and by overstimulating the mind. Strong substances contain structures similar to the mind’s messengers, commonly known as neurotransmitters, which are produced by the brain naturally. The structural similarity allows the substance to affect the way messages are sent to the brain.

Other substances, such as cocaine, cause the nerve cells to release an excessive amount of neurotransmitters, thus preventing regular recycling of the brain chemicals, which is required to shut the signal between the neurons. The final result is a brain awash in neurotransmitters, which are present in the brain region that controls motivation and emotion, among other things.

Overstimulation Of The System Produces Euphoric

Effects In Response To This Substance.

As an individual continues to use active substances such as drugs, the brain finally adopts the extreme surge in dopamine, thus producing less amount of dopamine or reduced quantity of dopamine receptors. The final result is a reduced dopamine impact on the circuit, which diminishes an addict's response not only to the substance but also to other events in life. The decrease causes the addicted person to keep using the substance or engaging in the activity in an attempt to restore dopamine function (Absi, 2007).

Continued usage of a substance changes other chemical circuits and systems in the brain. Glutamate is a neurotransmitter which can influence the course and affect the ability to learn. When the concentration of glutamate is countered, the brain tries to restore cognitive function. Brain images of individuals addicted to drugs show changes in brain regions that are central to judgment, decision-making, and behavioral control (Heyman, 2010).

Conclusion

In conclusion, addiction is a psychological disorder which can be prevented, as evidenced by the results from research bodies worldwide. These prevention programs involve the whole community, i.e., families, schools, and the media, among others. Though many events and factors have affected and facilitated addiction, stopping it may become easier once an individual decides to do so. Education and programs are critical ways of helping the youth and the public at large to understand the risks involved with addiction and how to prevent them.

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