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Introduction

Immigration in Spain is from the early '90s phenomenon of demographic and economic importance, according to INE, in January 2011 first residing in the country nearly 6.7 million people born outside our borders. In recent years, many immigrants are living in especially difficult circumstances.

Objectives

Show that these people undergo a series of very specific stressors and duels: precarious and harsh working conditions, poor diet, loneliness and lack of social support... This would enhance the appearance of psychiatric symptoms in various areas, closely related to lifestyles that maintain and in some cases precipitate substance use in this group, primarily those that have a sedative profile.

Methods

We will present the clinical case of a 34 year old Nigerian male. No somatic or psychiatric history of interest. Cannabis smoker since adolescence. A year after his arrival in Spain admitted to our inpatient unit due to clinical psychotic. Was a challenge from the point of view of psychopharmacological have many side effects with low doses of typical antipsychotics

Results

Disappearance of psychotic and affective symptoms to approach the case from a pharmacological perspective, social and cultural.

Conclusions

Addressing the relationship between life stressors and cannabis as a trigger or catalyst for psychotic episodes in individuals predisposed. Pathological elaborations of cultural integration of an immigrant (whether by denial of the original culture or over-identification with the host culture) facilitates the use of toxic either for blending with Western consumer culture or cultural consumption radicalization toxic in some East African countries.