I␣␣␣d␣c␣␣␣

␣␣e␣␣i␣k of demen␣ia inc␣ea␣e␣␣eadil␣␣␣i␣h␣␣he␣n␣mbe␣␣of medica␣ion␣␣␣ed and age in olde␣␣␣eo␣le a␣␣de␣c␣ibed in a␣␣␣d␣␣in Tai␣␣an. In ano␣he␣␣␣␣d␣␣of␣he␣␣e␣␣e␣␣nc␣␣of␣␣ol␣␣␣ha␣␣mac␣␣␣i␣h␣h␣ee␣␣o␣␣mo␣e medica␣ion␣␣a␣␣ho␣␣i␣al di␣cha␣ge fo␣␣␣bi␣ola␣␣di␣␣o␣de␣␣o␣␣ni␣ola␣␣␣de␣␣e␣␣ion, ␣␣ol␣␣␣ha␣␣mac␣␣␣inc␣ea␣␣ed f␣om␣␣a␣ien␣␣. Ano␣he␣␣␣␣␣d␣␣␣ega␣ding␣he de␣␣e␣o␣men␣␣of Ac␣␣e Renal Fail␣␣e␣␣a␣a␣␣e␣␣l of␣␣ol␣␣␣ha␣␣mac␣␣␣indica␣ed␣␣␣ha␣␣␣e␣a␣i␣e␣␣o␣␣a␣ien␣␣␣␣ho␣␣ecei␣␣ed␣␣ol␣␣␣ha␣␣mac␣␣fo␣␣le␣␣␣han 30 da␣␣␣, ␣ho␣␣e␣␣ho␣␣ecei␣ed␣␣ol␣␣␣ha␣␣mac␣␣fo␣␣␣o␣␣e␣␣fe␣␣␣da␣␣␣had odd␣␣␣a␣io␣␣of de␣␣elo␣␣ing ARF, ␣e␣␣␣ec␣i␣␣el␣␣[1]. D␣␣␣g in␣e␣ac␣ion␣␣␣␣la␣␣␣a␣␣e␣␣im␣␣o␣␣an␣␣␣ole in␣he de␣␣elo␣men␣␣of␣␣ol␣␣␣ha␣␣mac␣␣␣and␣␣can be␣␣de␣␣ned a␣␣␣he mod␣␣la␣ion of␣␣he␣␣ha␣␣macologic ac␣i␣i␣␣␣␣of one d␣␣g b␣␣␣␣he␣␣␣io␣␣o␣␣concomi␣an␣␣admini␣␣␣a␣ion of ano␣␣he␣␣d␣␣␣g. I␣␣i␣␣al␣␣o␣de␣␣ned a␣␣an in␣e␣ac␣ion

and␣␣␣e␣alence of in␣e␣ac␣ion␣␣␣i␣␣de␣enden␣␣␣␣on␣␣he␣n␣mbe␣␣of concomi␣an␣␣d␣␣␣g␣␣and␣he com␣␣le␣␣i␣␣␣of␣he␣␣egimen␣. ␣␣e␣␣e␣alence i␣␣al␣␣o␣␣de␣enden␣␣␣on␣o␣he␣␣␣␣a␣iable␣,␣␣␣ch a␣␣␣a␣ien␣␣adhe␣␣ence, h␣␣␣d␣a␣ion and n␣␣␣i␣ional␣␣␣a␣␣␣,␣deg␣ee of␣␣enal␣o␣␣he␣␣a␣ic im␣ai␣men␣,␣␣␣moking and alcohol␣␣␣␣e, gene␣ic␣␣and d␣␣␣g␣␣do␣␣ing. Addi␣ionall␣␣,␣␣␣ome␣␣a␣ien␣␣␣ma␣␣␣e␣␣hibi␣␣e␣idence of a␣␣a␣ic␣la␣␣d␣␣␣g␣in␣e␣ac␣ion, ␣␣hile o␣he␣␣␣␣i␣h␣␣he␣␣ame d␣␣␣g combina␣ion do no␣. ␣␣␣e addi␣ion of non-␣␣e␣␣c␣i␣ion medica␣ion␣␣␣la␣␣␣a␣␣␣e␣␣im␣␣o␣␣an␣␣␣ole in ca␣␣␣ing ADR␣. Some␣␣␣die␣␣indica␣e␣␣ha␣␣␣a␣ien␣␣aged␣␣␣ea␣␣␣␣e␣on a␣␣e␣age␣␣e␣c␣ibed␣␣␣medica␣ion␣, and non-␣␣e␣c␣ibed medica␣ion␣. I␣␣i␣␣a␣␣␣ell-e␣␣abli␣hed

Citation: Cain J (2022) Drug Treatment Help Addicted Personalities Stop Compulsive Looking and Consumption. J Pain Relief 11: 471.

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o en ha in he mo ning. Do ing need o be con ide ed a a fac o hich migh ha e ome e ec on he de elo men of ADR . Concomi an a ien' di ea e ma al o in ence ce ibili o ADR . Fo e am le; inc ea e of he f e enc of idio n-c a ic o ici ih an i-infec ed g ch a ime hom-' im- l' hame ho a ole. M l i le di ea e make a ien mo e lne able o ADR d e o he e ence of man di ea e and he e of man d g . If h e - en ion i accom anied ih o he di ea e, he e di ea e migh ha e an im ac on he e on e of he bod o an ih en ied g ince he me abolic oce e of he bod ill be a ec ed nega i el In a ien ih enal fail e, he e ec of d g on he kidne i le ened beca e of he lo of he ie of ac ion fo he e d g . i lead o inc ea ing he do e hich in n lead o mo e ADR . e ame i e occ in a ien ih e ic lce di ea e, man d g incl ding NSAIDS hen e c ibed, ma lead o e io medical oblem . M l i le di ea e a e a e im o an fac o hich ca e d g-di ea e in e ac ion and ADR [8]. D g ha a e hel f l in one di ea e a e ha mf l in ano he . Fo e am le, ome be a-blocke aken fo hea di ea e o high blood e e can o en a hma and make i ha d fo eo le ih diabe e o ell hen hei blood ga i oo lo . Some d g aken o ea a cold ma o en gla coma. Diabe e , high o lo blood e e, an lce , gla coma, an enla ged o a e, oo bladde con ol, and in omnia a e a ic la l im o an , beca e eo le ih ch di ea e a e mo e likel o ha e d g-di ea e in e ac ion . Ce ain d g ha e he ca abili o e ace ba e ac e and/o ch onic di o de . e e d g can al o bl n he ical ign and m om of a h o-gl aemic eac ion in diabe ic a ien and al e in lin ili a ion in he bod e e d g and calci m channel blocke , a ic la l e a amil, ha e nega i e ino o ic and nega i e ch ono o ic ec on he hea and can e ace ba e di ea e ch a conge i e hea fail e. P edni one can agg a a e conge i e hea fail e and ca e id e en ion. Beca e ome of he e in e ac ion ma ha e an in idio on e , ca ef l and clo e medical a en ion i manda o [9]. AIDS fo in ance o en ADR , he incidence of S e en John on nd ome and o ic e ide mal nec ol i ha been e o ed o be highe among ho e a ic la a ien . A d g ho ha one of he medica ion aken among a ien ho de elo ed i ime ho im. Acco ding o a ecen d of a m l i a ia e logi ic eg e ion indica ed ha a inc ea ed he i k of he a o o ici b a fac o and ha co-infec ion ih he a i i B o C i inc ea ed h i k b a fac o . Di e en fac o a ec he de elo men of ADR in di e en deg ee ; ome of he e fac o ha e a di ec e ec on ADR . Se io a en ion o he e fac o ill e l in e en ing o ed cing he occ ence of n an ed d g ac ion hich co ld ha e been a oided if heal h ca e o ide en eno gh ime o in oin he e oblem . Heal h ed ca ion, co n elling and econcilia ion a e ool ha m be ili ed b ha maci . Info ma ion echnolog ho ld al o be a of he medica ion deci ion making oce hich o ide heal h ofe ional ih o da e kno ledge of d g-do ing, in e ac ion, ADR and o he im o an info ma ion needed o e medica ion in he o im m manne . e elde l ho ld al o be he foc of he

ha maci , beca e he fo m he majo i of ho e ho e ol ha mac Finall fo each bene o come o of a medica ion he e i al a a o ibili fo ome i k ; bene ho ld al a o eigh i k fo he o e of o iding he be ea men ih he lea n mbe of medica ion a he mo economic ice. Man fac o la a c cial ole in he occ ence of ADR ; ome of he e a e a ien ela ed, d g ela ed o ociall ela ed fac o [10]. Age fo in ance ha a e c c ical im ac on he occ ence of ADR , bo h e e o ng and e old a ien a e mo e lne able o he e eac ion han o he age g o . Alcohol in ake al o ha a c cial im ac on ADR . O he fac o a e gende , ace, egnanc b ea feeding, kidne oblem , li e f nc ion, d g do e and f e enc and man o he fac o .

C c

e e ec of he e fac o on ADR i ell doc men ed in he medical li e a e. Taking he e fac o in o con ide a ion d ing medical e al a ion enable medical ac i ione o choo e he be d g egimen.

Ac ed e e

None

C c f I e e

None

Referelatlaly R se factors into consideration during ato.