Abstract: The use of psychoactive substance is a widespread phenomenon in the Brazilian society, so it is named several ways, for instance, toxicomania, drug addiction and chemical dependency. The purpose of this study is to analyze how Psychology has addressed this phenomenon and used these three terms. A scientific literature review was conducted with studies on this theme on the portal of Capes (Coordination for the Improvement of Higher Education Personnel), published in national Psychology journals. The following keywords were inserted separately for the search: chemical dependency, toxicomania, and drug addiction. The three terms are used as synonyms, although presenting minor differences between one another. “Chemical dependency” is commonly found in disease classification manuals and more widely used in research reports; “toxicomania” refers to toxic consumption which could be of a psychoactive or another substance; and ‘drug addiction’ refers to an exclusive submission relationship with drugs.

Keywords: chemical dependency, toxicomania, drug addiction, psychology.

The consumption of psychoactive substances has been present throughout the history of mankind; however, it has changed over time. Recently, the use of psychoactive substances has become both a health and public safety issue, while scientific advances have been achieved in the chemical industry, medicine and pharmacology. With these advances and consequent changes in society, some new psychoactive substances have been considered drugs (Santiago, 2017).

According to Bento (2006, p. 183), the term toxicum was used in ancient times to designate a deadly substance used by Barbarians to poison the arrowhead. The term toxic had paradoxical meanings: it could mean poison and also refer to a drug – or medicine – that could save one’s life. Ferreira and Martini (2001) report a relationship between the toxic and the divine or the sacred. By using certain substances, some people believed it would be possible to reach the sacred. In this sense, the specific properties of a substance were not discussed, as it could be understood both as a toxicum and a drug. Its properties, including psychoactive properties, were defined only when a relationship was found between the toxic substance/drug and the individual who consumed it. In modern times, the drug lost its double aspect, presenting itself as one more object of consumption (Santiago, 2017). Another term is already used to designate the current era: hypermodernity, mainly characterized by hyper-consumption (Lipovetsky, 2004).

The term “toxic” originated “toxicomania”, which refers to a situation where user ‘appeals to artificial means, that is, ‘toxic substances’ or ‘drugs,’ to deny any suffering or seek pleasure” (Olivenstein, 1980, p. 11). However, because the word mania had different meanings depending on where it was used and the theory underlying it, the World Health Organization (OMS, 1974) started to recommend the use of “drug dependence” (Vargas, Nunes, & Vargas, 1993).

The World Health Organization (1974) uses “drug” to designate “any substance that, when introduced in the body, can change one or more body functions” (p. 15). Then, to refer to the dependence of psychoactive substances, the WHO uses drug dependence, defined as follows: “psychic and sometimes physical state, resulting from the interaction between a living organism and a drug” (OMS, 1974, p. 15). Based on drug dependence, chemical dependency became popular in Brazil.

Another word is also used to describe a problematic consumption of psychoactive substances: drug addiction. Addiction involves a character of “submission to an owner; in this case, the owner or master would be a drug” (Vargas et al., 1993, p. 23); it originated in the Roman Republic, when it meant enslavement as the payment of a debt, servitude or submission. This way, addiction is understood as a relation of enslavement, therefore, of exclusiveness between the subject and the object, whether...
a drug or any other object. Therefore, someone who eats excessive food, for example, can be considered an addict.

Drug addiction differs from toxicomania, as it would involve a special type of addiction, in which the consumed object is exclusively a drug (Vargas et al., 1993). The Diagnostic and Statistical Manual of Mental Disorders (DSM-V) (American Psychiatric Association [APA], 2014, p. 481) also proposes a distinction between excess drug use, calling it “substance-related disorders,” and addictive disorders, which comprise “excessive behavior patterns” such as gambling addiction.

Also in 1930, Freud (1930/2011) understood the use of psychoactive substances to help cope with malaise, but which could cause more intense suffering. Currently, chemical dependency is understood as a mental and behavioral disorder, included in the International Classification of Diseases and Related Health Problems (ICD-10) (OMS, 1994) and DSM-V (APA, 2014). In general, these manuals address not only the damage these substances can cause but also the consequences of lack of consumption in case of abstinence. Then, for some people from the scientific community, a drug can be defined by its chemical or physical properties or its mechanism of action (Santiago, 2017).

This idea that chemical dependency is a disease does not occur without a consequence. To receive a treatment, a chemically dependent must be aware that he or she has a chronic disease and, therefore, needs a treatment. On the other hand, there is a challenge to make a chemically dependent morally responsible for his or her acts under the influence of a psychoactive substance, since he or she is a carrier of a chronic disease. When defining a pathology, the responsibility can be transferred exclusively to the individual, without considering social and cultural issues (Olivenstein, 1980). It means that, depending on how this theme is addressed, the drug and the individual can be separated. This way, the responsibility for consumption can be isolated in each case: sometimes of the individual, sometimes of the drug. An interaction of both is also possible, so that their particular aspects or even the drug properties are not disregarded. These aspects are important because they have an impact on the treatment that will be adopted. For professionals in the field of psychology who deal with therapy, it is important to learn more about how to address drug use.

Therefore, abuse of psychoactive substances can be addressed in different ways, using different terms to name it: toxicomania, chemical dependency, and drug addiction. In order to understand how this phenomenon has been addressed in Psychology and understand the meaning of these terms, a systematic literature review was conducted with articles published in national journals in the field of Psychology in Brazil.

Methodology

This study is a literature review of studies that address the phenomenon of consumption of psychoactive substances published in Brazilian indexed journals from the field of Psychology. Articles were searched on the portal of Capes (Coordination for the Improvement of Higher Education Personnel) by subject, in which the following descriptors were used and inserted separately: chemical dependency, toxicomania, and drug addiction. This review considered texts published in 2008 and after. First, the abstracts were read, selecting those that addressed the review subject. Then, the studies that did not meet the objective of this study were eliminated, that is, the studies that did not help understand how the phenomenon of psychoactive substance consumption has been addressed in Psychology. Then, articles that were published in Brazilian journals of Psychology were selected, totaling 22 studies. It was not possible to apply a shorter period (of five years, for example), as only eight studies would be analyzed. Then, we extended the review to a longer period.

A qualitative analysis of the studies was conducted, based on a content analysis (Bardin, 2004), understood as a “set of communication analysis techniques, which uses systematic procedures and objectives to describe the content of the messages” (p. 27). The analysis comprises three stages: (1) pre-analysis (floating reading and familiarization with the material); (2) exploration of the material; and (3) treatment of results (inference and interpretation).

The thematic contents found in the studies were categorized according to the following aspects that were relevant to the exploration of the material: types of article (research reports, theoretical studies or professional experience); the concept used to address problematic drug use, and the meaning assigned to each terms – chemical dependency, toxicomania, and drug addiction; and description of the differences and similarities in the approach to each term. This way, the results are presented in six categories: (1) types of article; (2) concept based on manuals; (3) chemical dependency; (4) toxicomania; (5) drug addiction; and (6) distance from drug and intersections.

Results and discussion

Regarding the term “chemical dependency,” nine articles were found (Cunda & Silva, 2014; Hess, Almeida, & Moraes, 2012; Jesus & Rezende, 2008; Lima, 2008; Machado & Boarini, 2013; Oliveira, Andretta, Rigoni, & Szupszynski, 2008; Paz & Colossi, 2013; Pratta & Santos, 2009; Sayago, Lucena-Santos, Horta, & Oliveira, 2014). The search based on ‘toxicomania’ resulted in seven articles (Belo, 2012; Bento, 2008; Lisita & Rosa, 2011; Macedo, Dockhorn, & Kegler, 2014; Pereira, 2008; Romanini & Roso, 2012; Silva & Ulhôa, 2015). And regarding the term “drug addiction,” six articles were found (Andretta & Oliveira, 2011; Cunha, Silveira, & Paiva Filho, 2012; Giacobone & Macedo, 2013; Lermen, Dartora, & Capra-Ramos, 2014;
Raupp & Milnitsky-Sapiro, 2009; Savietto & Cardoso, 2009). Then, a total of 22 studies were considered in this review. The categories described below present only the studies that actually address any of the terms, but before, the types of studies are presented below.

**Types of article**

First, the types of articles analyzed in this review were obtained from research reports (11 texts), theoretical studies (nine texts), and professional experience report (two texts). The number of professional experience reports is significantly small when compared to the other types. Since the search for articles was exclusively in Psychology journals, using a theme closely related to practice, the investigators expected to find more reports. In addition, professional experience reports were found only in searches of “toxicomania” and present a psychoanalytic clinical perspective (Lisita & Rosa, 2011; Silva & Ulhôa, 2015). The fact that publications in scientific periodicals are predominantly from postgraduate academicians, who are more involved in research, may explain the small number of professional experience reports.

This aspect may also be related to the large number of research reports found. Out of ten studies, six were found in searches of “chemical dependency” (Hess et al., 2012; Jesus & Rezende, 2008; Lima, 2008; Oliveira et al., 2008; Paz & Colossi, 2013; Sayago et al., 2014; two in searches of “toxicomania” (Macedo et al., 2014; Pereira, 2008); and two when searching “drug addiction” (Andretta & Oliveira, 2011; Raupp & Milnitsky-Sapiro, 2009). These are mostly qualitative studies, with semi-structured interview as their most often data collection instrument.

Regarding the theoretical studies, out of ten, four were found in searches of “drug addiction” (Cunha et al., 2012; Giacobone & Macedo, 2013; Lerman et al., 2014; Savietto & Cardoso, 2009); three in searches of “toxicomania” (Belo, 2012; Bento, 2008; Romanini & Roso, 2012); and three when searching “chemical dependency” (Cunda & Silva, 2014; Machado & Boarini, 2013; Pratta & Santos, 2009). These studies address different topics, highlighting the specificities of psychoactive substance consumption in modern times, a theme addressed in four articles.

**Conceptualization based on manuals and consumption of psychoactive substances as a disease**

Regarding the terms used to characterize the phenomenon they address, some authors use WHO documents (Bento, 2008) and diagnostic manuals, such as the ICD-10 (Hess et al., 2012; Jesus & Rezende, 2008; Oliveira et al., 2008) and DSM-IV (Andretta & Oliveira, 2011; Hess et al., 2012; Jesus & Rezende, 2008; Romanini & Roso, 2012; Sayago et al., 2014). The fifth edition of DSM was published in 2014, but it is not among the references of any of the articles analyzed.

On the other hand, some criticism was found for certain diagnostic practices, indicating that “chemically dependent” may not encourage a subject to assume his or her responsibilities regarding his or her disease (Cunha et al., 2012). Romanini and Roso (2012) highlight that:

a subject who attends the CAPS/AD [Psychosocial Attention Center] and receives the diagnosis of chemical dependency can be identified as a ‘chemically dependent’ and, at the same time, be not liable for his/her desires, since he/she has a chronic and incurable disease. (p. 357)

Then, the individual’s responsibility may be eliminated and this person can be considered a chronic patient.

Still regarding the identification promoted by the terms, Pereira (2008) found that only during inpatient treatment, a drug user learns toxicomania is a chronic disease. The introduction of this term opens the possibility of setting a certain limit: “he (the toxicomaniac) is no longer the one who can do anything or for whom everything is done” (Pereira, 2008, p. 215). Then, a notion of future time is also introduced that did not exist before, because, during drug use, the present time is always what matters. However, inpatient treatment promotes a number of changes in the subject’s life, the main one is the distance from drug. Then, attributing such changes (introduction of a limit and a different notion of time) to only one variable is questionable, failing to consider that ending the relationship with the drug can contribute to these changes. In doing so, the positive aspect of terms is highlighted, unlike what happens in other studies that emphasize the negative aspects (Cunha et al., 2012; Olivenstein, 1980; Romanini & Roso, 2012).

The use of manuals fulfills the need for some standard diagnosis to “have systematized criteria, instead of an inadequate use of concepts, pre-judgments and stereotypes” (Jesus & Rezende, 2008, p. 505). In addition, the purpose of classification manuals, as the name implies, is to classify diseases and allow some standardization and easy exchange of information about diseases worldwide. Consequently, disregarding these manuals is somewhat delicate for professionals in the field of Psychology. However, such use must have constant evaluation of its consequences.

**Chemical dependency**

The term “chemical dependency,” although it is the most frequently used, allows an understanding according to which a chemical component causes dependency. That is, chemical dependency can be understood as a disease caused by the effects of a
However, attention should be dedicated to avoid appreciating during the treatment (Olivenstein, 1980). It may sound a little odd, as leaders of these institutions would be expected to acquire scientific or formal knowledge to deal with situations of intervention. However, the literature shows some people defend the idea that knowledge of those who were once chemically dependent (therefore, empirical knowledge) must be appreciated, often regardless of the object to be consumed (Lipovetsky, 2004). Drinking coffee to be alert, beer to relax after work, the sleeping pill. These are just some examples of psychoactive substance consumption present in one’s daily life and that matches the proposal of Lima (2008). Then, attention should be dedicated to avoid appreciating or stigmatizing the consumption of psychoactive substances, always evaluating it in terms of social and individual context where it occurs (Cunda & Silva, 2014).

Psychoactive substance consumption has always been present in the history of mankind, as “men have always sought, over time, ways to increase pleasure and reduce suffering” (Pratta & Santos, 2009, p. 203). However, changes in culture “have led to a rational, materialistic and standardizing way of life” (Pratta & Santos, 2009, p. 207). Therefore, consuming psychoactive substances can be considered a “form of evasion, contestation and/or transgression” (Pratta & Santos, 2009, p. 207). However, there is no consensus on this definition, because if drug use can be understood as transgression, it can also be understood as a form of submission to current logic in hypermodernity (Lipovetsky, 2004). That is, the chemically dependent is submitted to a typical order in modern times: consumption.

A survey with leaders of institutions that help chemically dependents showed that chemical dependency was understood as follows: a (curable/incurable) disease, lack of love, lack of character. In other words, the individual is marked by “lack”: they lack love and character, and for this reason, he or she is chemically dependent. It should be noted that none of the participants used scientific material to conceptualize chemical dependency (Jesus & Rezende, 2008). It may sound a little odd, as leaders of these institutions would be expected to acquire scientific or formal knowledge to deal with situations of intervention. However, the literature shows some people defend the idea that knowledge of those who were once chemically dependents (therefore, empirical knowledge) must be appreciated during the treatment (Olivenstein, 1980). However, attention should be dedicated to avoid judgment in the diagnosis of chemical dependency that often involves some prejudice. For example, when managers of rehabilitation clinics conceptualize chemical dependency as “lack of character” (Jesus & Rezende, 2008, p. 502).

### Toxicomania

The word “toxicomania” has not always had the meaning it has today. It is derived from toxicum, which had a double meaning: it could mean a deadly poison, and also refer to a life-saving drug or medicine. The current definition of toxic of “a disease, degeneration, amorality and passion,” emerged only in the 19th century (Bento, 2008, p. 132), when “illicit substances” appeared, like cocaine and some of its derivatives. As discussed before, these changes are attributed to scientific advances, which turned the drug object more into an object of consumption (Santiago, 2017).

There is some consensus regarding the difference between a drug user and a toxicomaniac. A drug user introduces a drug into a number of objects, making it just another object of consumption (beer, cigarette, coffee, medicine, etc.), while a toxicomaniac uses a drug as an exclusive object that prevents any other social bond, establishing an exclusive relation with it (Pereira, 2008). A toxicomaniac also follows a hypermodern logic, in which the maximum value is consumption, and therefore, is understood as a good consumer (Romanini & Roso, 2012). It somehow agrees with Lipovetsky (2004), when he says consumer experiences are appreciated in hypermodern times.

According to Pereira (2008), there is a relationship between the terms drug dependence and chemical dependency, both would be used to designate strictly biological dependence. In contrast, toxicomania would refer to psychological dependence. This understanding, however, does not find support in the literature. For example, the concept of drug dependence established by the WHO (1974) covers both physical and psychological dependence through an interaction between the body and a psychoactive substance.

Toxicomania involves the idea that it is possible to find complete satisfaction and freedom from a certain malaise by using only one object: a drug. However, an intense relationship of exclusiveness is established between the subject and a drug, often characterized by the dependents themselves as a slavery that can lead to loss of social bonds (Belo, 2012; Romanini & Roso, 2012). Then, toxicomania involves a search for relief of a certain malaise, but also imprisonment in relation to the drug.

In this sense, Macedo et al. (2014, p. 44) go even further. For them, drugs mask the subject’s helplessness and difficulties symbolizing things, both resulting from poor “primordial” relationships, as named by the authors to refer to “parental figures.”
In this type of relation, drugs are the absolute object and “seem to help find value in the world, instead of addressing life frustrations” (Macedo et al., 2014). In other words, affective issues that are not translated into words to create a meaning are mitigated by a drug. Considering that, for clinics, that subject is not a chemically dependent, but “a subject who suffers from toxicomania” (Romanini & Roso, 2012, p. 358). Then, toxicomania is no longer treated as a disease and assumes the character of a symptom, leaving behind any identification that could exist when stating that an individual is a toxicomaniac.

A notable fact is that reports of professional experience, or more specifically, reports of clinical cases, were found only in searches using “toxicomania.” One of them, through a case of psychosis, highlights the challenge to correlate toxicomania and psychosis, since it is not possible to limit toxicomania to the clinical structure of psychosis. It also shows the challenge to diagnose toxicomania based on the clinical structures described by psychoanalysis (neurosis, psychosis and perversion). However, they hypothesize that the difference lies in the role of a drug object in neurosis and psychosis: “in neurosis, toxicomania is related to uncontrolled use, without limit or meaning, of a toxic substance, while in psychosis, using a drug seems to have a well-defined character, related to a very specific function” for each subject (Lisita & Rosa, 2011, p. 263).

Among the reports of professional experience, a study addresses the relationship between mourning and toxicomania, based on the case of a patient who used alcohol to deal with the intense suffering caused by successive losses. Then, the patient used toxicomania as a solution to a psychic conflict. However, in this attempt to run away from the problems, the patient gradually dissolved her bonds and became isolated, and later she died (Silva & Ulhôa, 2015). In agreement with evidence from other studies (Belo, 2012; Romanini & Roso, 2012), in the case described above, using drugs was a solution to a psychic conflict, but it led the subject to her own dissolution.

Considering the above, in general, toxicomania is analyzed in the perspective of the relationship between the subject and the drug. Then, what makes the drug a toxic or a medicine is the relation assumed with it (Belo, 2012; Macedo et al., 2014; Pereira, 2008; Romanini & Roso, 2012). Therefore, in toxicomania, the focus is not on the substance and its effects, but on the relationship the subject establishes with his or her objects of consumption (Santiago, 2017). Psychoactive substances can often be a tool to help deal with malaise or suffering. However, it can lead to an even more intense suffering (Belo, 2012; Macedo et al., 2014; Romanini & Roso, 2012; Silva & Ulhôa, 2015). This approach to toxicomania is corroborated by both Freud (1930/2011) and Olivenstein (1980).

**Drug addiction**

Drug addiction has been addressed in two main perspectives in Brazil: a health perspective, which considers a drug addict as a patient; and a legal perspective, where a drug addict is a criminal (Cunha et al., 2012; Machado & Boarini, 2013). Despite these views that tend to homogenize individuals who use drugs, drugs do not play the same role for different subjects, with singular relations between every subject and drugs (Cunha et al., 2012; Lima, 2008). These general approaches are ineffective as they do not address the full group of users and dependents, nor their particularities.

In this category, predominantly theoretical studies were found (five of a total of eight articles), which analyzes drug addiction among the characteristics of contemporary society. It highlights a search for immediate and constant satisfaction that could be found in objects of consumption, such as drugs, prevails (Cunha et al., 2012; Giacobone & Macedo, 2013; Raupp & Milnitsky-Sapiro, 2009). However, the idea that satisfaction through drug use generates a constant well-being is a fallacy. As pointed out in the category above of “Toxicomania,” when trying to reduce malaise with drugs, another type of malaise is generated, perhaps even more dangerous (Freud, 1930/2011; Romanini & Roso, 2012).

Giacobone and Macedo (2013) address drug addiction like Romanini and Roso (2012) consider toxicomania: as a form of submission to the order that governs society, that is, consumption. A drug abuser, usually understood as a “villain,” could be seen as “a true hero,” because “this subject fully exercises the logic of capitalism by rampantly consuming the same object until reaching ecstasy” (Giacobone & Macedo, 2013, p. 64). However, in doing so, this subject shows his or her psychic misery.

In our civilizing moment, the symbolic order has undergone changes that include a decadence of symbols, that is, of words. The body is called into action in an attempt to deal with helplessness. Then, drug addiction is considered as “a possible response of the subject to the disturbing presence of untranslatable, unabsorbable elements in his or her psyche” (Savietto & Cardoso, 2009, p. 17).

In general, the studies that address drug addiction are similar to those addressing toxicomania, as they also adopt the perspective of a relationship between the individual and an object of consumption, specifically, a drug (Cunha et al., 2012; Giacobone & Macedo, 2013). In drug addiction, besides an exclusive relationship, as seen in toxicomania, the individual is subjugated by the object and becomes a slave (Vargas et al., 1993). Another similar consideration is the use of drugs as an attempt to deal with suffering, always with a negative outcome (Cunha et al., 2012; Freud, 1930/2011; Giacobone & Macedo, 2013; Raupp &
that consider the particularities of each case (Raupp et al., 2014; Machado & Boarini, 2013; Oliveira et al., 2008; Olivenstein, 1980; OMS, 1974, Santiago, 2017); on the individual (Jesus & Rezende, 2008; Olivenstein, 1980); and on the effects caused by the substance (Hess et al., 2012). Of note, this is also the notion adopted in DSM-V; however, the terms used here are “substance-related disorders” and “addictive disorders.” This is just one example of the confusion that can result when technically or scientifically addressing this issue and adopting certain terms without a previous discussion about their meanings.

**Distance from drug and intersections**

Studies found in the three categories differ in terms of the social role of using psychoactive substances. On the one hand, it is analyzed in our civilizing context, where consumption is strongly highlighted, as well as a constant search for satisfaction. Therefore, using drugs means being embracing this value and, consequently, incorporating this social norm (Cunha et al., 2012; Giacobone & Macedo, 2013; Lima, 2008; Raupp & Milnitsky-Sapiro, 2009). On the other hand, drug consumption was analyzed in a different perspective: the strong standardization that society imposes. Then, it would be like a means to transgress standard parameters, and not submit to them (Pratta & Santos, 2009). However, since it is a relation of exclusiveness, there is no freedom here; instead, the subject is imprisoned to a single object: the drug, which can lead to loss of social and affective bonds (Romanini & Roso, 2012). Although these are antagonistic ways to address the same phenomenon, both types of relation with the drug are possible in modern times; after all, Lipovetsky (2004) states that we live in a society of hyperconsumption, where consumption often has paradoxical roles.

Regarding the treatment, a theme that often present in all categories was the difference between what is prescribed in government documents that should guide the actions and the practices that are actually adopted in the treatment institutions (Andretta & Oliveira, 2011; Machado & Boarini, 2013; Oliveira et al., 2008; Raupp & Milnitsky-Sapiro, 2009). While public policies foresee reduced damage, institutions are focused on complete abstinence (Lerman et al., 2014; Machado & Boarini, 2013), which is not presented as a general purpose of patients, who, in many cases, just want to reduce consumption. Also, institutions also find it difficult to conduct treatments that consider the particularities of each case (Raupp & Milnitsky-Sapiro, 2009). Besides differences in relation to public policies, this treatment may generate some frustration, since relapse rates are high, which may lead to maintenance of the consumption cycle (Rigotto & Gomes, 2002).

After concluding this review, it is not possible to state that the selection of terms defines the way to understand the phenomenon of psychoactive substance use, since only three articles (Oliveira et al., 2008; Sayago et al., 2014; Silva & Ulhôa, 2015) out of 22 used a single term to name the addressed phenomenon.

Even with some imprecision, some particularities of each category should be highlighted. In research reports, for example, where “chemical dependency” appears almost exclusively, the universe of science appropriates this term. It seems that, when the intention is to draw general lines on the subject through research, the expression that best fits is “chemical dependency.” On the other hand, “toxicomania” prevails in professional experience reports, and in this case, exclusively used in psychoanalytic clinical practice. Of note, professional experience reports, even when linked with public health services, were reports of individual care (Lisita & Rosa, 2011; Silva & Ulhôa, 2015). Regarding drug addiction, the phenomenon of drugs is analyzed among the characteristics of contemporaneity.

Both toxicomania and drug addiction are predominantly addressed in the perspective of the relationship between the subject and the drug (Belo, 2012; Pereira, 2008; Romanini & Roso, 2012). In other words, as Santiago (2017) points out, the focus moves from the substance and its effects to the relationship the subject establishes with his or her objects of consumption, which is similar to what the WHO suggests (1974) as discussed above, when it states drug dependence is caused “through an interaction between the body and a psychoactive substance” (p. 15).

**Final considerations**

Given the discussion above, what terms does this study propose to the phenomenon? It seems the term “chemical dependency” is more widely accepted, since it is used in most studies analyzed in this review, observing the criteria in the DSM-V (APA, 2014), but without using the nomenclature proposed by the manual. On the other hand, “toxicomania,” more used in the articles addressing treatments, indicates a toxic relation with any object, either a psychoactive substance or not. And with the term “drug addiction,” a relationship with inverted roles is observed: the subject becomes the object, enslaved by the drug. Therefore, the definition of which term to use requires an evaluation of the context where the term will be used and the objective.

Considering such plurality of understandings, this study further highlights the need to clarify how
A phenomenon is understood when addressing it in a scientific study. Specifically in this case, the subject is often addressed in the media and often in a way that strengthens prejudice and stigma over subjects. In addition, when any of these terms is used without considering what they indicate, they may hide the way we conceive the phenomenon. Therefore, besides a precise term selection, the data presented here indicate the need to reformulate the way to address the use of psychoactive substances, which will allow the formulation of intervention practices focused on the subject and issues related to the subject, and not about the substance and its active ingredients.

**A abordagem dos termos dependência química, toxicomania e drogadição no campo da Psicologia brasileira**

Resumo: O consumo de substância psicoativa é um fenômeno abrangente na sociedade brasileira, existindo diversos modos de nomeá-lo, destacando-se: toxicomania, drogadição e dependência química. O objetivo deste estudo é investigar como a Psicologia aborda o fenômeno, bem como a compreensão desses termos. Foi realizada revisão de literatura por meio do portal de periódicos da Coordenação de Aperfeiçoamento de Pessoal de Nível Superior (Capes); nele foram reunidas e avaliadas publicações de revistas de Psicologia nacionais. Utilizaram-se como descritores os termos: dependência química, toxicomania, e drogadição, inseridos separadamente. Observou-se que eles podem ser utilizados como sinônimos, embora guardem algumas diferenças. O termo “dependência química” é baseado em manuais de classificação de doenças, sendo mais utilizado em relatos de pesquisas; a palavra “toxicomania” é utilizada para abordar uma relação de consumo tóxica, tanto com uma substância psicoativa quanto com outro objeto; já “drogadição” refere-se a uma relação de submissão e exclusividade com a droga.

Palavras-chave: dependência química, toxicomania, drogadição, psicologia.

**L’approche des termes dépendance chimique, toxicomanie et addiction aux drogues dans le domaine de la psychologie brésilienne**

Résumé: L’usage de substances psychoactives est un phénomène répandu dans la société brésilienne, et on l’appelle de différentes manières, comme: toxicomanie, addiction aux drogues et dépendance chimique. Cette étude vise à étudier comment la psychologie a abordé ce phénomène, ainsi que la compréhension de ces termes. Un examen de la documentation a été réalisé avec des études sur le thème sur le portail CAPES, publiées dans laquelle revues nationales de psychologie. Les mots-clés suivants ont été utilisés : dépendance chimique, toxicomanie, addiction aux drogues, insérés séparément. Les trois termes sont utilisés comme synonymes, bien que différents les uns des autres. Le terme « dépendance chimique » est basé sur les manuels de classification des maladies et est plus largement utilisé dans les rapports de recherche; le mot « toxicomanie » fait référence à une relation de consommation toxique, pouvant être une substance psychoactive ou avec un autre objet; et « addiction aux drogues » désigne une relation de soumission et d'exclusivité avec la drogue.

Mots clés: dépendance chimique, toxicomanie, addiction aux drogues, psychologie.

**El enfoque de los términos dependencia química, toxicomanía y drogadicción en el campo de la Psicología brasileña**

Resumen: El consumo de sustancias psicoactivas es un fenómeno de gran amplitud en la sociedad brasileña, y hay diversas maneras de nombrarlo, las cuales se destacan las siguientes: toxicomanía, drogadicción y dependencia química. Este estudio buscó investigar de qué modo la psicología ha abordado el fenómeno, así como la comprensión de estos tres términos. Se realizó una revisión de literatura en el portal de periódicos Capes (Coordenação de Aperfeiçoamento de Pessoal de Nível Superior), en el cual se reunieron y evaluaron publicaciones en revistas de Psicología nacionales. Se utilizaron como descriptores los términos: dependencia química, toxicomanía, drogadicción; colocándolos por separado. Se observó que los tres términos son utilizados como sinónimos, aunque tengan diferencias. El término “dependencia química” se basa en manuales de clasificación de enfermedades, siendo más utilizado en relatos de investigación; la palabra “toxicomanía” es utilizada para describir una relación de consumo tóxica, que puede ser tanto con una sustancia psicoactiva como con otro objeto; ya “drogadicción” se refiere a una relación de sumisión y exclusividad con la droga.

Palabras clave: dependencia química, toxicomanía, drogadicción, psicología.
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