

Nonmedical use of prescription stimulants during college: Four-year trends in exposure opportunity, use, motives, and sources

MAJOR FINDINGS:

A study of 1,253 young adults revealed new information regarding nonmedical use of prescription stimulants (NPS) during the four years after enrolling in college. Traditionally prescribed for the treatment of ADHD, prescription drugs such as Ritalin® or Adderall® had been offered to almost two-thirds (62%) of students for nonmedical use, and nearly one in three (31%) used prescription stimulants nonmedically by their fourth year. On average, the first use occurred between 18 and 19 years of age. Consistent with prior research, students with lower grade point averages (GPAs), alcohol use disorder, and cannabis use disorder were more likely to use stimulants nonmedically.

Among those who engaged in NPS, most said their motive was to help them concentrate or stay awake longer to study; this proportion increased from 74% of users in the first year of the study to 92% three years later. Using simply because of curiosity changed over time—it was more likely to be cited as a motive early in college (19%) compared to three years later (1%). Other motives for NPS remained relatively stable, including staying awake to party, and to get high or feel good.

The most common source of prescription stimulants, in approximately 3 out of 4 cases, was a friend with a prescription, followed by obtaining from a friend without a prescription, and less common sources like a relative or stranger. In some cases, students engaging in NPS had their own legitimate prescription for stimulants and were over-using them; this practice became more prevalent over time, representing 3% of students in the first year of the study and 8% three years later. None of the participants obtained prescription stimulants via the Internet. Perhaps not surprisingly, the amount of money that students spent on prescription stimulants increased over time. While most users (at least 2 out of 3) obtained them for free, the percentage who paid \$5 or more per pill increased from 8% in the first year of the study to 22% three years later.

Practice and Policy Suggestions: Clinicians should take note that nonmedical use—including overuse—of ADHD medications is common among young adult patients. Practitioners prescribing such drugs should caution against sharing or selling medications and be wary of medication-seeking among young adults who report ADHD symptoms but do not meet disorder criteria. For both existing and new ADHD patients, physicians should consider testing for concurrent illicit drug use and adopt cautious prescribing practices and intensive monitoring policies to ensure that medications are being used appropriately.

Of major interest to:

- College Administrators
- Parents
- Educators
- Health Professionals
- Students
- Law and Policy Makers



(Practice and Policy Suggestions Continued): College administrators play an important role in preventing NPS across college campuses. New-student orientations should feature presentations regarding the illegality and health risks of NPS, which include possible dependence and heart complications. Moreover, students with ADHD should realize the illegality and potential harms of sharing their medications with others. The prevalent belief that NPS can be beneficial for academic success is not supported by research evidence.¹ Given that those struggling academically are more likely to use prescription stimulants nonmedically, administrators should consider screening for substance use in academic assistance settings along with standard interventions to improve time management and study skills.

¹ Nonmedical use of prescription stimulants: What college administrators, parents, and students need to know. Available online at: http://www.sph.umd.edu/fmsc/cyahd/docs/NPS_FactSheet.pdf

The complete publication referenced in this research brief can be found here: Garnier-Dykstra, L.M., Caldeira, K.M., Vincent, K.B., O'Grady, K.E., Arria, A.M. (2012). Nonmedical use of prescription stimulants during college: Four-year trends in exposure opportunity, use, motives, and sources. *Journal of American College Health*. 60(3), 226-234. doi:10.1080/07448481.2011.589876



About the College Life Study (CLS)

The CLS is a longitudinal study of 1,253 college students at a large, public, mid-Atlantic university. This study is one of the first large-scale scientific investigations that aims to discover the impact of health-related behaviors during the college experience. Any first-time, first-year student between 17 and 19 years old at the university in the fall of 2004 was eligible to participate in a screening survey. The researchers then selected students to participate in the longitudinal study, which consisted of two-hour personal interviews administered annually, beginning with their first year of college. A full description of the methods used is available.^{1,2} Inherent to all self-reporting research methods is the possibility for response bias. Because the sample is from one large university, the ability to generalize the findings elsewhere is uncertain. However, response rates have been excellent and attrition bias has been minimal.

For more information about the study, please visit www.cls.umd.edu or contact Amelia M. Arria at the University of Maryland School of Public Health at aarria@umd.edu.

¹ Arria, A.M., Caldeira, K.M., O'Grady, K.E., Vincent, K.B., Fitzelle, D.B., Johnson, E.P., Wish, E.D. (2008). Drug exposure opportunities and use patterns among college students: Results of a longitudinal prospective cohort study. *Substance Abuse*. 29(4), 19-38.

² Vincent, K.B., Kasperski, S.J., Caldeira, K.M., Garnier-Dykstra, L.M., Pinchevsky, G.M., O'Grady, K.E., Arria, A.M. (2012). Maintaining superior follow-up rates in a longitudinal study: Experiences from the College Life Study. *International Journal of Multiple Research Approaches*. 6(1), 56-72.

This research brief was prepared by Olga Moshkovich and disseminated by the Treatment Research Institute (TRI), a non-profit research and development group specializing in science-driven transformation of treatment and policy in substance use/abuse. Click [here](#) to learn more about TRI.

