Majority of Nonmedical Users of ADHD Medications Obtain the Drugs from Family or Friends; One-Fifth Obtain Fraudulently from a Doctor

Friends and family members are the most common source of attention deficit/hyperactivity (ADHD) medications diverted for nonmedical use*, according to national-level estimates from an internet survey of adults ages 18 to 49. Approximately two-thirds of persons who reported the nonmedical use of an ADHD medication in the past year said that they had been given ADHD medications by a friend or family member, and 13% reported buying these drugs from a friend or family member. More than one-third (35%) reported taking or stealing medications. Physicians were also a significant source of diverted ADHD medications—one-fifth of nonmedical users reported having obtained fake prescriptions by making up symptoms or going to a doctor who was known to “not ask too many questions.” According to the authors, “intervention programs should be developed to educate patients regarding the potential for diversion, whether the medications are intentionally shared or taken without the patient’s knowledge.” In addition, “further education may be needed to aid physicians in recognizing when patients are attempting to obtain ADHD medications fraudulently.”

Reported Sources of Prescription ADHD Medications Among Past-Year Nonmedical Users, 2005

(Among adults ages 18 to 49 without a prior diagnosis of or prescription for ADHD)

*For the analysis of diversion sources, nonmedical use is defined as use without a prescription or for the feeling or experience it caused by persons who had never been diagnosed with ADHD or prescribed medication to treat ADHD.

NOTES: Participants of the internet survey (N=4,297) were drawn from Harris Interactive’s Harris Poll Online panel. National-level estimates were created using 1) propensity scoring methods to weight the data to approximate results for a probability-based telephone survey and 2) weighting procedures to match the U.S. target population distribution by general demographic characteristics and to match the distribution of past-month cigarette use and past month binge alcohol use estimated from the 2003 National Survey on Drug Use and Health (NSDUH).