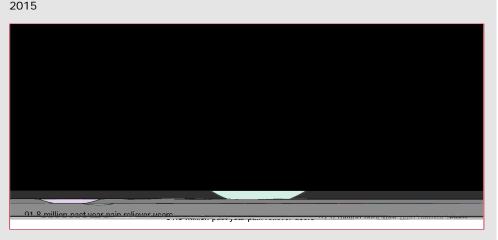
The 11.5 million adults who misused prescription pain relievers at least once in the past year were asked to identify the reason for their most recent pain reliever misuse. Respondents were asked to choose from the following list the reason they most recently misused a prescription pain reliever:

- to relieve physical pain,
- to relax or relieve tension,
- to experiment or see what the drug is like,
- to feel good or get high,
- · to help with sleep,
- to help with feelings or emotions,
- to increase or decrease the effects of other drugs,
- · because the respondent is "hooked" or has to have the drug, or
- for some other reason.

Among adults in 2015 who misused prescription pain relievers at least once in the past year, the most commonly identified reason for their last misuse of a pain reliever was to relieve physical pain (63.4 percent), in keeping with the reason pain relievers are prescribed (Figure 2). Even if the reason for misuse was to relieve physical pain and that was the purpose for which the prescription drug was prescribed, it is still considered misuse to use a prescription drug without a prescription of one's own or to use it at a higher dosage or more often than prescribed. Other commonly identified reasons for the most recent misuse among adults who misused pain relievers at least once in the past year were to feel good or get high (11.7 percent) and to relax or relieve tension (10.9 percent). Less common reasons among past year misusers of pain relievers included to help with sleep (4.5 percent), to help with feelings or emotions (3.2 percent), because they were "hooked" or had to have the drug (2.5 percent), to experiment or see what the drug was like (2.0 percent), and to increase or decrease the effects of other drugs (0.9 percent). In addition, 1.1 percent of past year misusers of pain relievers misused them for some other reason.

Figure 1. Past year misuse of prescription pain relievers among adults aged 18 or older:



Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health (NSDUH), 2015.

Flgure 2. Main reasons for last episode of prescription pain reliever misuse among past year misusers aged 18 or older: 2015



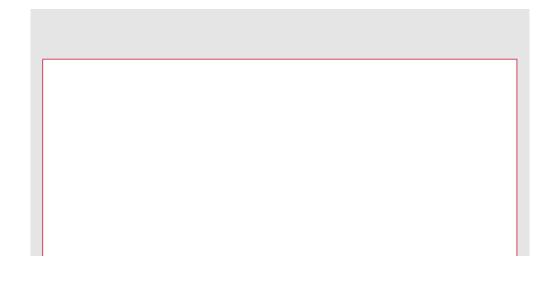
Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health (NSDUH), 2015.

PRESCRIPTION TRANQUILIZERS

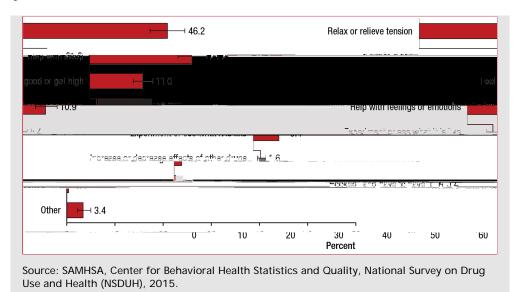
NSDUH asks respondents to provide information about prescription tranquilizers, which are substances often prescribed for anxiety or muscle spasm relief. The prescription tranquilizers category includes benzodiazepine drugs such as alprazolam (e.g., Xanax®), muscle relaxants such as Soma®, and others. In 2015, about 38.2 million adults aged 18 or older were past year users of prescription tranquilizers, representing 15.8 percent of the adult population. Approximately 5.7 million adults misused prescription tranquilizers at least once in the past year, representing 2.3 percent of all adults or 14.8 percent of adults who used tranquilizers in the past year (Figure 3).

When adults were asked to provide information on the reasons for misuse during the most recent time in the past year that they misused





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PRESCRIPTION STIMULANTS

NSDUH respondents provided information on their use and misuse of prescription stimulants, such as amphetamines (e.g., Adderall®) and methylphenidate (e.g., Ritalin®). Prescription stimulants are often prescribed to treat attention-deficit/hyperactivity disorder (ADHD), to reduce or control weight, or to promote wakefulness because of sleepiness associated with conditions such as narcolepsy or sleep apnea. Approximately 15.4 million adults were past year users of prescription stimulants in 2015, representing 6.3 percent of adults. In 2015, about 4.8 million adults misused prescription stimulants at least once in the past year, representing 2.0 percent of all adults or 30.9 percent of adults who used stimulants in the past year (Figure 5).

NSDUH respondents who misused prescription stimulants were asked to choose from the following list the reason they most recently misused a prescription stimulant: (1) to help lose weight, (2) to help concentrate, (3) to help be alert or stay awake, (4) to help study, (5) to experiment or see what the drug is like, (6) to feel good or get high, (7) to increase or decrease the effects of other drugs, (8) because the respondent is "hooked" or has to have the drug, or (9) for some other reason. In 2015, the most commonly identified reasons for stimulant misuse among adults who misused stimulants at least once in the past year were to help be alert or stay awake (28.4 percent), to help concentrate (26.2 percent), and to help study (22.4 percent) (Figure 6). Unlike pain relievers, tranquilizers, and sedatives, the intended purpose of prescribing stimulants is not always apparent from the name of the category. Many people may be prescribed stimulants to help manage their ADHD symptoms. However, using prescription stimulants without a prescription, using them more often than prescribed, or using them at higher dosages than prescribed still constitutes misuse and can have adverse or unintended consequences. Less commonly identified reasons for the last misuse of prescription stimulants among past year misusers were to experiment or see what the drug was like (5.2 percent), to help lose weight (4.3 percent), to increase or decrease the effects of other drugs (1.5 percent), and because of being "hooked" or needing to have the drug (0.1 percent). Among adults who misused stimulants at least once in the past year, an estimated 2.1 percent misused them for some other reason.

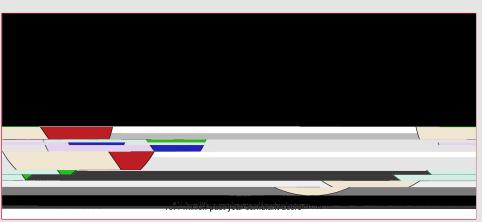
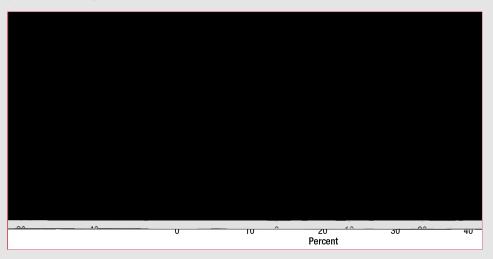


Figure 5. Past year misuse of prescription stimulants among adults aged 18 or older: 2015

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health (NSDUH), 2015.

Figure 6. Main reasons for last episode of prescription stimulant misuse among past year misusers aged 18 or older: 2015



Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health (NSDUH), 2015.

PRESCRIPTION SEDATIVES

NSDUH asks respondents to provide information on their use and misuse of prescription sedatives, which are psychotherapeutics often prescribed to relieve sleep disorders such as insomnia. Zolpidem (e.g., Ambien®) is an example of a prescription sedative. Approximately 18.0 million adults were past year users of prescription sedatives in 2015, representing 7.4 percent of adults. In 2015, about 1.4 million adults misused prescription sedatives at least once in the past year, representing 0.6 percent of all adults or 7.8 percent of adults who used sedatives in the past year (Figure 7).

When adults were asked to provide information on the reasons for misuse during the most recent time in the past year that they misused prescription sedatives, they were provided a list of reasons identical to those who used for tranquilizers. Among adults who misused prescription sedatives in the past year, the most common reason for the last misuse was to help with sleep (73.2 percent), which is the reason sedatives are prescribed (Figure 8). Even if adults took sedatives to help them sleep, this use is still considered misuse if the adult took them without a prescription, more often than prescribed, or at higher dosages than prescribed. Other reasons for the last misuse among adults who misused sedatives in the past year were to relax or relieve tension (12.0 percent) and to feel good or get high (5.1 percent). Less common reasons for sedative misuse included help with feelings or emotions (3.9 percent), to experiment or see what the drug was like (3.0 percent), and to increase or decrease the effects of other drugs (1.3 percent). The percentage of adults who misused prescription sedatives at least once in the past year because they were "hooked" is not presented due to low precision. In addition, among adults who misused sedatives at least once in the past year, an estimated 1.6 percent misused them for some other reason.

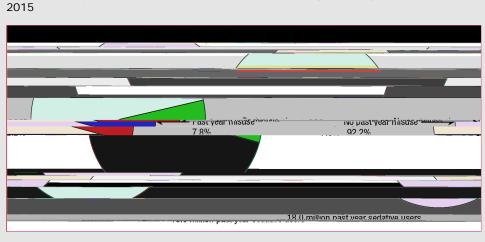


Figure 7. Past year misuse of prescription sedatives among adults aged 18 or older:

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health (NSDUH), 2015.

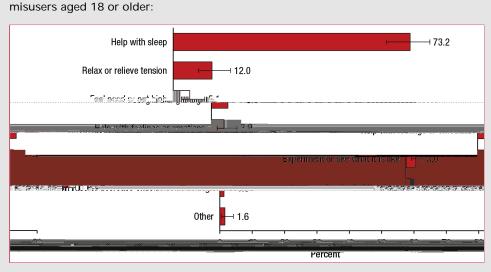


Figure 8. Main reasons for last episode of prescription sedative misuse among past year misusers aged 18 or older:

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health (NSDUH), 2015.

DISCUSSION

Research has shown that there is a common misperception in the United States that prescription drug misuse is without risk because prescription drugs are regulated pharmaceuticals with legal, medical uses.⁴ The DEA has deemed the substances assessed in NSDUH as having abuse potential. This study highlights that most people who misuse prescription drugs are doing so for the very reason that the substances are typically prescribed, and comparatively few were misusing the prescription drug because they were trying to get high. However, the misuse of many of these prescription drugs, such as prescription opioids, even for the purpose they have been prescribed for, has documented risks, such as dependence, overdose, and death.⁵ Previous research on prescription drug misuse has shown that the two most commonly reported sources of the prescription pain relievers that were misused were (1) obtaining the drugs from a friend or relative and (2) receiving the drugs through prescriptions or health care providers.⁶ This suggests that physicians and other medical practitioners may consider talking with their patients or clients about the potential health consequences of misusing their prescriptions, not sharing their prescription medications, preventing others from accessing their medications, and disposing of remaining dosage units.^{7,8} As more years of NSDUH data are collected, it will be possible to conduct additional analyses to inform prescription drug misuse prevention efforts, such as misuse among adolescents or the relationship between reasons for misuse and the source of the drug. This type of additional research may give policymakers information they could to use to improve treatment and prevention efforts.

The Substance Abuse and Mental Health Services Administration provides information on what communities can do to help prevent overdoses and deaths related to prescription drug misuse (see: <u>https://store.samhsa.gov/product/Opioid-Overdose-Prevention-Toolkit-Updated-2014/SMA14-4742</u>). For a comprehensive report on NSDUH prescription drug misuse data, see <u>https://www.samhsa.gov/data/sites/default/files/NSDUH-FFR2-2015/NSDUH-FFR2-2015.htm/</u>.

ENDNOTES

1. National Drug Intelligence Center. (2011, August). *National drug threat assessment 2011* (Product No. 2011-Q0317-001). Johnstown, PA: Author. Retrieved from http://www.justice.gov/archive/ndic/



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data from the 2015 National Survey on Drug Use and Health to provide up-to-date information on estimates of past year misuse of prescription drugs and reasons for the most recent prescription drugs misuse for adults aged 18 or older. Results: About 91.8 million adults aged 18 or older were past year users of prescription pain relievers in 2015, representing more than one-third (37.8 percent) of the adult population. About 11.5