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INCB ANNUAL REPORT Background Note No.4

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INCB Sees Continuing Risk in Stimulant Prescribed for Children

With abuse of illegal amphetamine-type stimulants reaching epidemic proportions, the International Narcotics Control Board (INCB) is concerned that despite the warning it issued a year ago, the issue still requires serious attention.

Background

Methylphenidate, a central nervous system stimulant with properties similar to those of the widely-abused amphetamines, has been increasingly used to treat attention deficit disorder (ADD) in children. Global licit consumption of the substance -- marketed mainly as "R italin®"-- rose from less than three metric tons in 1990 to more than 10 tonnes in 1995. About 90 per cent of global consumption is in the United States.

Canada consumes per capita about one half the United States amount, and the quantitie's dispensed in Australia, Switzerland and other countries are also rising but from significantly lower levels.

Upward Trend in Consumption, Abuse

Although proposals to weaken domestic control of methylphenidate were withdrawn in the United States following the alarm raised last year by the Board and others, consumption of the substance is still rising steeply to an estimated 10.5 tonnes in 1996 and a projected 13 tonnes in 1997. Reports indicate that in some schools in the United States a very high percentage of students receives stimulant medication, primarily methylphenidate.

Particularly worrying is the fact that abuse of this substance is not restricted to adolescents and adults; the number of pre-adolescents abusing the drug is expanding. According to the United States Drug Abuse Warning Network (DAWN), the estimated number of methylphenidate-related emergency room cases for 10- to 14-year-olds has multiplied tenfold since 1990 and, in 1995, reached the level of cocaine-related emergencies for the same age-group.

Practices under Scrutiny

In drawing attention to the methylphenidate problem in its Report of a year ago, the Board raised the issues of possible overdiagnosing of ADD, questionable promotional practices for methylphenidate, the diversion of the substance from licit channels and an increase in its abuse. The therapeutic use of methylphenidate is now under scrutiny by the American medical community; the INCB welcomes this.

Methylphenidate, due to its high abuse potential, was one of the first substances to be placed under international control in Schedule II of the 1971 Convention on Psychotropic Substances.

What is ADD?

The primary signs of ADD are inattention, impulsivity and, in some cases, hyperactivity. Those diagnosed are generally boys between the ages of 6 and 14. However, concerns have been raised that doctors are resorting to methylphenidate as an "easy" solution for behavioural problems which may have complex causes. Critics warn that parents' and teachers' assessments of what constitutes "inattention" and "impulsivity" are highly subjective and that doctors' prescribing practices for methylphenidate are far from uniform.

A black market in the drug has emerged in recent years, with adolescents and even adults buying tablets from children under treatment or tablets stolen from school medical wards, in addition to the diversion of methylphenidate from pharmacies by theft or forged prescriptions. The preferred method of abuse is to crush the tablets and snort the powder. Since the drug is touted as "accepte d medication" for children, abusers are unaware of its health hazards, which include addiction and a range of stimulant-abuse symptoms.

Vigilance Required

In its current report, the Board reiterates its request to all Governments to exercise the utmost c are to prevent overdiagnosing of ADD in children and medically unjustified treatment.

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