

Physicians should not prescribe ADD drugs to healthy people

December 17 2012

Physicians in Canada should consider refusing to prescribe cognitive enhancement medications—also used to treat attention deficit disorder (ADD)—to healthy patients, states an analysis article in *CMAJ* (*Canadian Medical Association Journal*). Lack of evidence for benefits and possibility of harm, limited health care resources and professional integrity of physicians are reasons why this use is not acceptable.

Prescription stimulants such as methylphenidate and dextroamphetamine are often used by people for "cognitive enhancement" to increase focus, concentration and memory. Because these drugs are available in Canada by prescription only, people must request them from their doctors.

"Physicians are important stakeholders in this debate, given the risks and regulations of prescription drugs and the potential for requests from patients for cognitive enhancers," writes Dr. Eric Racine, Institut de recherches cliniques de Montréal and Université de Montréal, with coauthors.

People take prescription stimulants to perform better in school or at work. Prevalence rates of cognitive enhancer use by university students ranges from 1% to 11% in some studies. Risks to taking stimulants include cardiovascular harm, dependence and psychosis. Current evidence has not shown that the desired benefits of enhanced [mental performance](#) are achieved with these substances.

"With uncertain benefits and clear harms, it is difficult to support the

notion that physicians should prescribe a medication to a healthy individual for enhancement purposes," adds Dr. Racine with Cynthia Forlini, two coauthors of the paper.

Because physicians in Canada provide prescriptions through a publicly funded health care system with expanding demands for care, prescribing cognitive enhancers may not be an appropriate use of resources.

"Given the current state of limited evidence on medical, scientific, social and ethical aspects of cognitive enhancement, we call for greater attention to its appropriateness within existing Canadian health care systems," the authors conclude.

More information: Paper:

www.cmaj.ca/lookup/doi/10.1503/cmaj.121508

Provided by Canadian Medical Association Journal

Citation: Physicians should not prescribe ADD drugs to healthy people (2012, December 17)
retrieved 19 April 2024 from

<https://medicalxpress.com/news/2012-12-physicians-drugs-healthy-people.html>

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