

Prescription drug abuse in Europe is a bigger problem than previously thought

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International collaborations across the EU are needed to monitor prescription drug abuse, identify its scope and develop targeted interventions, according to the first comparative study of prescription drug abuse in the European Union. The study, published in the open access journal *BMC Psychiatry* investigated nonmedical prescription drug use in five European countries - Denmark, Germany, Spain, Sweden and the UK.

Nonmedical prescription drug use is typically defined as either the self-treatment of a medical condition using [prescription medication](#) that was not prescribed to the user, or as the use of prescription medication to achieve euphoric states. A research team led by scientists at RTI International in the US investigated nonmedical prescription drug use as it is among the leading public health issues in the US and previous research has suggested that it is more widespread there than in the EU, where prevalence and user characteristics remain largely unknown.

Dr Scott Novak, lead author of the study, said: "This is the first comparative study of [prescription drug abuse](#) in the European Union. Previously it was thought that the prescription drug epidemic was limited to the United States, but this study shows that the epidemic extends well beyond the US."

Examining three different classes of subscription drug - opioids, sedatives and stimulants - the researchers found that out of the five countries examined, Germany had the lowest levels of nonmedical

prescription drug use, while the UK, Spain and Sweden had the highest levels.

The most common sources of prescription drugs for nonmedical use were family and friends - 44% for opioids and 62% for sedatives. The next most common source was taking drugs from another person without their knowledge. Internet purchases were the least common source of prescription drugs.

Nonmedical prescription drug use was more common among men relative to women, among white relative to non-white people, and among those who were unemployed compared with other levels of employment. Young people aged 12 to 17 years were at lower risk of nonmedical prescription drug use than people aged 18 years or older.

Having been prescribed a pain reliever was associated with an eight times higher risk of subsequent nonmedical use of prescription pain relievers. The risk was ten times higher for sedatives and seven times higher for stimulants.

Scott Novak said: "There was a high rate of prescription pain reliever abuse in the EU. While the lifetime rates were not as high as in the US - 20% for those aged 12 years and over, compared to between 7% and 13% in the EU - the past-year rates were only slightly lower. This suggests that the EU may be catching up to the United States for some substances, like opioid pain relievers."

The researchers also found that about 52% of nonmedical stimulant users, 32% of opioid users and 28% of sedative users also consumed illicit drugs - this is known as poly-drug use. Rates of poly-drug use involving either sedatives or opioids were highest in the UK - 48% for sedatives and 43% for opioids. Women were about half as likely to engage in poly-drug use as men. Suffering from serious psychological

distress, having a sexually transmitted disease and having a history of childhood arrest were also associated with a higher risk of poly-drug use.

The researchers used data from 2,032 youths and 20,035 adults collected as part of the European Union Medicine Study, a series of parallel nationally representative surveys conducted in the five countries. Self-reported information included details on age, sex and race and on whether respondents had ever used prescription medication for euphoria or to self-treat a medical condition with medication that was not prescribed for them.

The surveys were aimed at people aged 12 to 49 years - the typical age period of initiation for substance abuse around the globe. Quota sampling methods may have increased between-country differences, even though survey methods were kept as comparable as possible between countries.

Identification of the scope and prevalence of nonmedical prescription drug use in the EU is an important first step in building a worldwide system that can be used to monitor trends, track risk and protective factors and to develop targeted interventions aimed at reducing the risk of nonmedical prescription drug use, according to the researchers.

The authors caution that their findings should not be construed as recommendation against prescribing medications to treat legitimate conditions. The cross-sectional design of this study made it impossible to resolve the question if nonmedical prescription drug use serves as a gateway to other substances or if persons using illicit drugs are at higher risk for also using [prescription drugs](#) to self-treat or to achieve euphoria.

More information: Scott P. Novak et al. Nonmedical use of prescription drugs in the European Union, *BMC Psychiatry* (2016). [DOI: 10.1186/s12888-016-0909-3](https://doi.org/10.1186/s12888-016-0909-3)

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