

Teen sexual activity and gambling associated with taking nonprescribed medications to get high

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(PhysOrg.com) -- Taking nonprescribed medication an alternative to street drugs.

has become an emerging problem, especially among teens. When using these substances to get high, students are more likely to engage in bad a legal prescription for at least one of the four drug behaviors than those who don't, a new University classes within the previous year. However, 546

of Michigan study shows.

Kids between the ages of 12-17 who use nonprescribed medications to get high or as an alternative to street drugs—described as sensation seekers—are likely to binge drink, gamble and become sexually active.

"Nonmedical use of <u>prescription medication</u> represents an unacceptable health risk," said Carol Boyd, director of the Institute for Research on Women and Gender and a nurse researcher specializing in substance abuse issues.

U-M researchers examined nonmedical use of prescription medications by adolescents and its relationship to other problem behaviors, depression and acting impulsively.

The analysis included data from 912 teens divided in four groups: those who did not use prescription medications; those who used their own prescribed medications; those who engaged in nonmedical use for self-treatment motivations; and those who engaged in nonmedical use for sensation-seeking motivations.

Students were asked about their motives and frequency in using drugs—such as sleeping, sedative, stimulant and pain medication—not prescribed to them.

Respondents were characterized as "self-treaters" if they reported past year nonmedical use for therapeutic reasons only. "Sensation seekers" used the medications to get high, experiment or as

Thirty-seven percent of the sample reported having a legal prescription for at least one of the four drug classes within the previous year. However, 546 respondents (60 percent) reported "no annual use" of prescription medications. Girls were more likely than boys to be medical users (33 percent vs. 25 percent) and self-treaters (11 percent vs. 4 percent) although there was no statistical difference between boys and girls relative to sensation seeking.

Nearly 8 percent of the respondents (71 students) indicated nonmedical use for self-treatment purposes in the past year, while 3 percent (28 students) used for sensation-seeking. Pain medication was the most frequently reported controlled medication used, for both medical and nonmedical reasons. This corresponds with other national studies.

Researchers did not find any differences among groups pertaining to depression, although all nonmedical users had higher impulsivity scores than students who used their medications correctly or did not use at all.

Health providers—from doctors and nurses to dentists and pharmacists—should communicate with their teen patients about the health and safety risks of giving medications to others or using nonprescribed medicines, Boyd said. In addition, health providers should alert parents about the importance of controlling and counting their children's pills.

"Most certainly, parents should restrict availability and not leave medicines on countertops or in unlocked medicine cabinets," she said. "Parents must role-model safe behaviors when it comes to



prescribed medicines. Do not share (medications) among family members and talk to children about the importance of taking medicines only as prescribed."

Boyd collaborated on the study with Amy Young, Melissa Grey and Sean McCabe of the U-M's Substance Abuse Research Center and Institute for Research on Women and Gender.

The study, "Adolescents' Nonmedical Use of Prescription Medications and Other <u>Problem Behaviors</u>," was funded by the National Institutes of Health and will appear in the December 2009 issue of the *Journal of Adolescent Health*.

Provided by University of Michigan (news : web)

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