

The NSDUH Report

September 16, 2005

Methamphetamine Use, Abuse, and Dependence: 2002, 2003, and 2004

Treatment admissions of persons with primary methamphetamine use problems increased from 21,000 in 1993 to 117,000 in 2003 according to the Treatment Episode Data Set.¹ This report

In Brief

- In 2004, 1.4 million persons aged 12 or older (0.6 percent of the population) had used methamphetamine in the past year, and 600,000 (0.2 percent) had used it in the past month
- The prevalence of methamphetamine use was similar in 2002, 2003, and 2004
- The number of past month methamphetamine users who met criteria for illicit drug dependence or abuse in the past 12 months increased from 164,000 (27.5 percent of past month methamphetamine users) in 2002 to 346,000 (59.3 percent) in 2004

examines trends and patterns in the prevalence and incidence of methamphetamine use and a proxy measure of methamphetamine abuse or dependence based on data from the 2002, 2003, and 2004 National Surveys on Drug Use and Health (NSDUH). NSDUH asks persons aged 12 or older to report on their use of illicit drugs, including nonmedical use of prescription-type pain relievers, stimulants, tranquilizers, and sedatives. Nonmedical use is defined as use of prescription-type drugs not prescribed for the respondent by a physician or used only for the experience or feeling they caused. Over-the-counter drugs are not included. Questions about methamphetamine use are included as part of the module on non-medical use of prescription-type stimulants.² Methamphetamine as recorded by NSDUH includes both prescription preparations (i.e., Desoxyn® and Methedrine) and non-prescription/illicit methamphetamine.

Respondents who acknowledged illicit drug use in the past 12 months were also asked to report symptoms of dependence or abuse they experienced during that period.

Figure 1. Methamphetamine Use in Past Month among Persons Aged 12 or Older, by Dependence and Abuse: 2002, 2003, and 2004

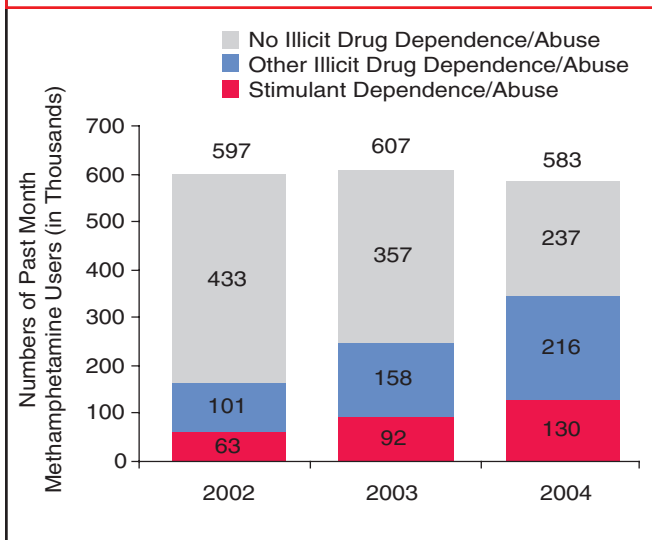
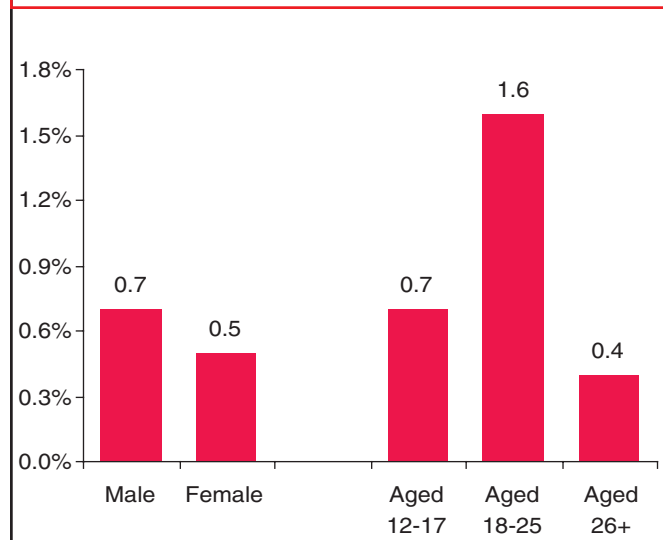


Figure 2. Methamphetamine Use in Past Year among Persons Aged 12 or Older, by Gender and Age: 2002, 2003, and 2004



Dependence or abuse is defined using criteria specified in the *Diagnostic and Statistical Manual of Mental Disorders (DSM-IV)*³ and includes such symptoms as withdrawal, tolerance, use in dangerous situations, trouble with the law, and interference in major obligations at work, school, or home during the past year. Questions about abuse and dependence symptoms are asked separately for each class of drugs used but not for each specific drug. As NSDUH does not include abuse and dependence questions on methamphetamine as such, this report provides information on abuse and dependence involving any illicit drug⁴ and any stimulant among current methamphetamine users.

Trends in Methamphetamine Use and Initiation

Methamphetamine use among the civilian non-institutional population aged 12 or older remained stable between 2002 and 2004. In 2004, an estimated 12 million persons (4.9 percent of persons aged 12 or older) had used methamphetamine at least once in their lifetime, 1.4 million (0.6 percent) had used it in the past year, and 600,000 (0.2 percent) had used it in the past month.

In 2004, an estimated 318,000

persons were recent initiates of methamphetamine use, meaning that they had used it for the first time in the 12 months before the survey. Between 2002 and 2004, the number of recent methamphetamine initiates remained level at around 300,000 per year. The average age at first use among new users was 18.9 years in 2002, 20.4 years in 2003, and 22.1 years in 2004.

Trends in Drug Abuse and Dependence among Methamphetamine Users

Although the number of past year and past month methamphetamine users did not change significantly between 2002 and 2004, the number of past month methamphetamine users who met criteria for abuse of or dependence on one or more illicit drugs in the past 12 months increased from 164,000 (27.5 percent of past month methamphetamine users) in 2002 to 346,000 (59.3 percent) in 2004 (Figure 1).⁵ The number of past month methamphetamine users meeting criteria for stimulant abuse or dependence increased from 63,000 (10.6 percent) in 2002 to 130,000 (22.3 percent) in 2004.

Prevalence of Methamphetamine Use by Demographic Group

Averages for 2002, 2003, and 2004 indicate that the rate of past year methamphetamine use was higher for young adults aged 18 to 25 (1.6 percent) than for youths aged 12 to 17 (0.7 percent), who, in turn, had a higher rate than adults aged 26 or older (0.4 percent) (Figure 2). Among all persons 12 years of age or older, the rate of past year use was higher among males (0.7 percent) than females (0.5 percent). The highest rates of past year methamphetamine use were found among Native Hawaiians or other Pacific Islanders (2.2 percent), American Indians or Alaska Natives (1.7 percent) and persons reporting two or more races (1.9 percent) (Figure 3).⁶ Past year methamphetamine use among whites (0.7 percent) and Hispanics (0.5 percent) was higher than among blacks (0.1 percent) or Asians (0.2 percent).

Prevalence of Methamphetamine Use by State and County Type

The 50 States and the District of Columbia were divided into thirds based on the percentage of the population aged 12 or older who had

Figure 3. Methamphetamine Use in Past Year among Persons Aged 12 or Older, by Race/Ethnicity: 2002, 2003, and 2004

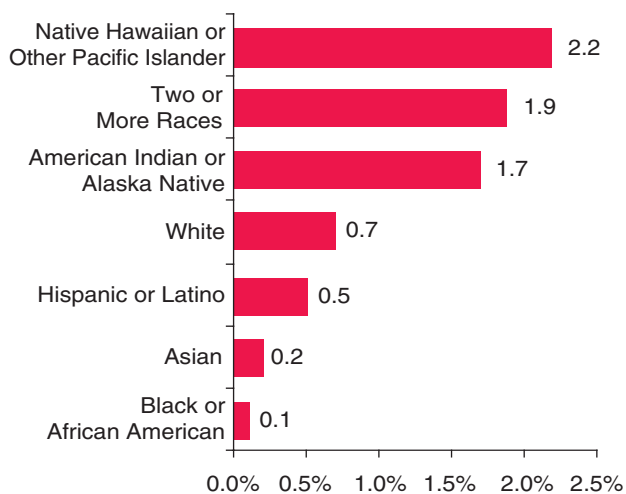
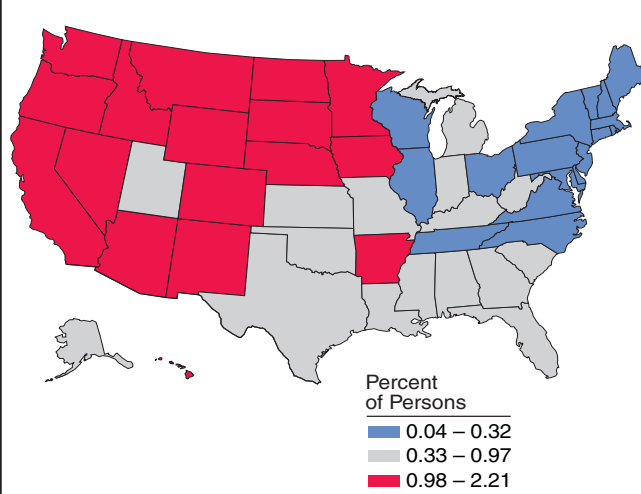


Figure 4. Methamphetamine Use in Past Year among Persons Aged 12 or Older, by State: 2002, 2003, and 2004



used methamphetamine in the past year (Figure 4). Twelve states in the West,⁷ including Nevada (2.2 percent), Wyoming, and Montana (1.5 percent each),⁸ ranked among the top third of states for past year methamphetamine use. Connecticut (less than 0.1 percent), New York, and North Carolina (0.12 percent each) were among the states with the lowest rates; all nine states in the Northeast were in the lowest third.

The rate of past year methamphetamine use was higher in counties in small metropolitan areas (0.7 percent) and counties not in metropolitan areas (0.8 percent) than in counties in large metropolitan areas (0.5 percent).

End Notes

1. Substance Abuse and Mental Health Services Administration, Office of Applied Studies. Treatment Episode Data Set (TEDS). Highlights - 2003. National Admissions to Substance Abuse Treatment Services, DASIS Series:

S-27, DHHS Publication No. (SMA) 05-4043, Rockville, MD, 2005.

2. Respondents were asked first about their nonmedical use of three specific classes of stimulants: (1) methamphetamine, Desoxyn®, or Methedrine; (2) amphetamines, Bensedrine®, Biphphetamine®, Fastin®; or Phentermine®; and (3) Ritalin® or methylphenidate. Then they were asked whether they had used any stimulant from a list: Cylert®, Dexedrine®, Dextroamphetamine, Didrex®, Eskatrol®, Ionamin®, Mazanor®, Obeldrin-LA®, Plegine®, Preludin®, Sanorex®, and Tenuate®. If they indicated they had used any of these drugs, they were asked which one(s). Respondents were also asked to name any other prescription stimulants they had used nonmedically.
3. American Psychiatric Association. (1994). *Diagnostic and statistical manual of mental disorders* (4th ed.). Washington, DC: Author.
4. Illicit drug use includes any use of marijuana/hashish, cocaine/crack, inhalants, hallucinogens, or heroin or any nonmedical use of prescription-type pain relievers, sedatives, stimulants, or tranquilizers.
5. Persons abusing or dependent on any illicit drug include those abusing or dependent on stimulants and those abusing or dependent on other illicit drugs.

6. Race/ethnicity categories are determined by combining the responses from separate race and ethnicity questions. For this report, respondents identifying themselves as Hispanic were assigned to the Hispanic group regardless of their racial identification. Respondents identifying themselves as non-Hispanic were grouped according to their racial identification. Thus, "white" refers to those identifying themselves as non-Hispanic and white.
7. The West region of the United States is composed of 13 States: AK, AZ, CA, CO, HI, ID, MT, NV, NM, OR, UT, WA, and WY. The South region of the United States is composed of 16 States plus the District of Columbia: AL, AR, DE, GA, FL, KY, LA, MD, MS, NC, OK, SC, TN, TX, VA, and WV. The Northeast region of the United States is composed of 9 States: CT, ME, MA, NJ, NY, NH, PA, RI, and VT. The Midwest region of the United States is composed of 12 States: IL, IN, IA, KS, MI, MN, MO, NE, ND, OH, SD, and WI.
8. The 95 percent confidence intervals for these estimates were from 1.5 to 3.2 percent for Nevada, 1.1 to 2.1 percent for Wyoming, and 1.0 to 2.1 percent for Montana.

Figure Note

Source: SAMHSA, 2002, 2003, and 2004 NSDUH.

The National Survey on Drug Use and Health (NSDUH) is an annual survey sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA). Prior to 2002, this survey was called the National Household Survey on Drug Abuse (NHSDA). The 2002, 2003, and 2004 data are based on information obtained from 203,670 persons aged 12 or older, including 9,143 lifetime methamphetamine users, 2,018 past year users, and 717 past month users. The survey collects data by administering questionnaires to a representative sample of the population through face-to-face interviews at their place of residence.

The NSDUH Report is prepared by the Office of Applied Studies (OAS), SAMHSA, and by RTI International in Research Triangle Park, North

Carolina. (RTI International is a trade name of Research Triangle Institute.)

Information and data for this issue are based on the following publications:

Office of Applied Studies. (2005). *Results from the 2004 National Survey on Drug Use and Health: National findings* (DHHS Publication No. SMA 05-4062, NSDUH Series H-28). Rockville, MD: Substance Abuse and Mental Health Services Administration.

Office of Applied Studies. (2004). *Results from the 2003 National Survey on Drug Use and Health: National findings* (DHHS Publication No. SMA 04-3964, NSDUH Series H-25). Rockville, MD: Substance Abuse and Mental Health Services Administration.

Office of Applied Studies. (2003). *Results from the 2002 National Survey on Drug Use and Health: National findings* (DHHS Publication No. SMA 03-3836, NSDUH Series H-22). Rockville, MD: Substance Abuse and Mental Health Services Administration.

Also available online: <http://www.oas.samhsa.gov>

Because of improvements and modifications to the 2002 NSDUH, estimates from the 2002 and 2003 surveys should not be compared with estimates from the 2001 or earlier versions of the survey to examine changes over time.

