# The Monitoring Illicit Substance Use (MISUse) Consortium: A Study Protocol for Investigating Low Prevalence Substance Use Behaviours in Population Cohort Studies

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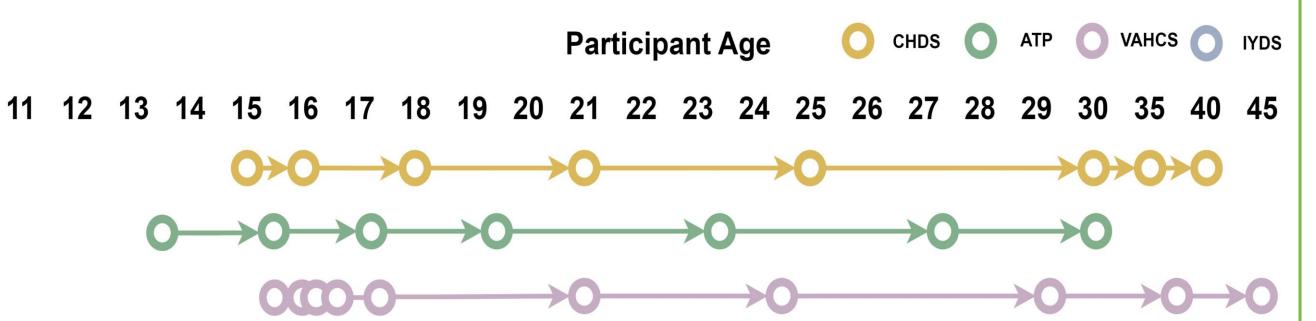
Monitoring Illicit Substance Use Consortium

### Introduction Background

 Global burden of disease estimates suggest that the impact of illicit substance use is increasing worldwide.<sup>1</sup>

### Methods Participants

 The Christchurch Health and Development Study (CHDS; est. 1977, Christchurch, New Zealand) –
N=1,265 from infancy to adulthood (24 waves).



- In Australasia, illicit substance use is within the top 10 leading causes of disease burden and its impact has increased.<sup>1</sup>
- Multi-wave, prospective cohort studies are essential to advance understanding of the natural history, antecedents, and consequences.
- However, the low population prevalence of illicit substance use makes lifecourse studies difficult.<sup>2</sup>
- Solution? Maximise the value of illicit substance use data collected across multiple cohort studies using integrative data analysis. <sup>3,4</sup>

#### Aims

To pool data across four of the

- The Australian Temperament Project (ATP; est. 1983, Victoria, Australia) – N=2,443 from infancy to adulthood (16 waves).
- The Victorian Adolescent Health Cohort Study (VAHCS; est. 1992, Victoria, Australia) – N=1,943 from adolescence to adulthood (11 waves).
- The International Youth Development Study (IYDS, Australian sample; est.
  2002, Victoria, Australia) – N=2,884 from childhood to adulthood (10 waves).

#### Measures (Figure 1):

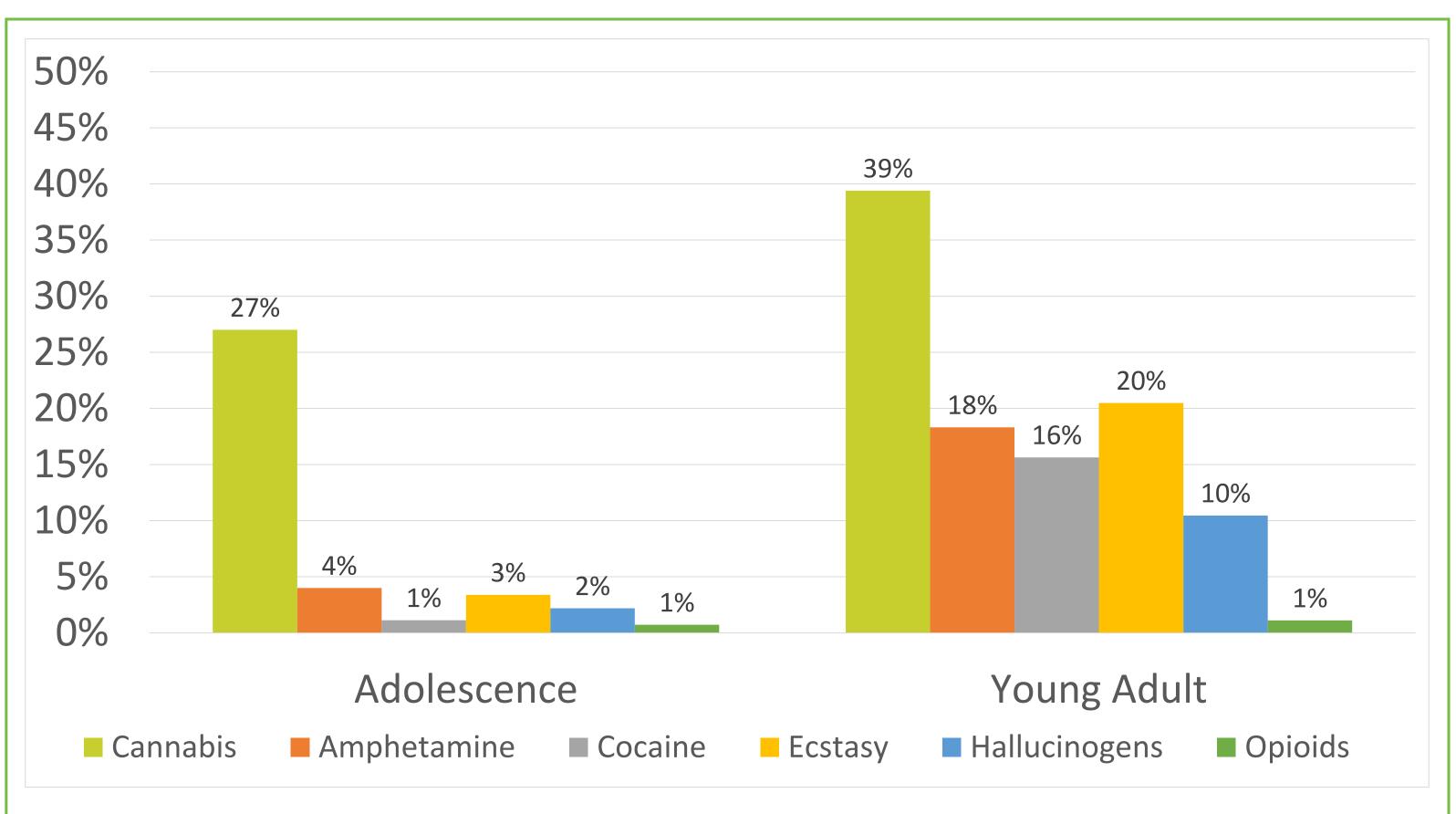
- Cannabis, amphetamine, cocaine,

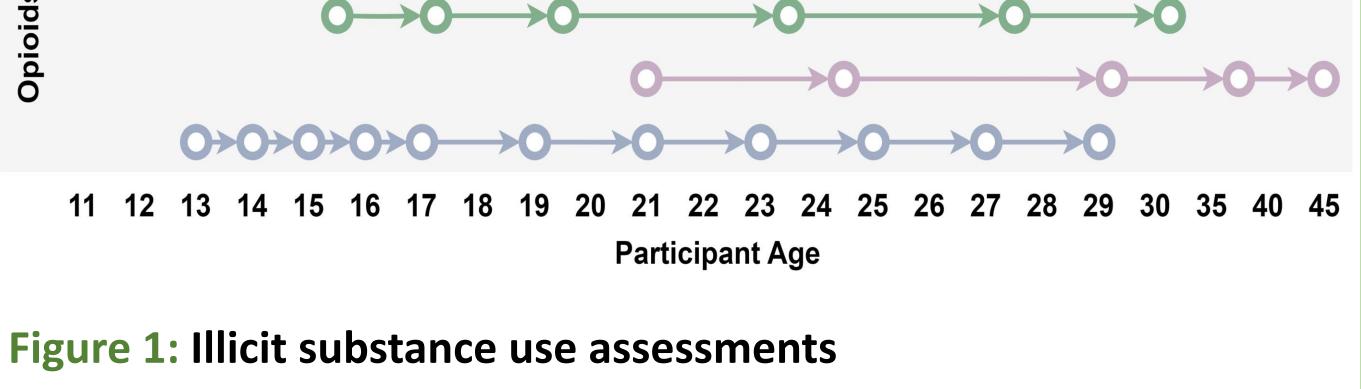
longest running cohort studies in our region to examine: (1) the natural history, (2) antecedents, and (3) consequences of illicit substance use from adolescence to adulthood ecstasy, hallucinogens, opioids.

 Assessments vary across 'ever', 'yearly', 'monthly', 'weekly', 'daily'

### Data (Figure 2)

- Clear patterns of increased use from adolescence and adulthood.
- Cannabis use: 27% and 39% in adolescence and young adulthood, respectively.
- Non-cannabis use: 1-4% to 1-20% in adolescence and young adulthood, respectively.





## **Current examinations**

- Descriptive epidemiology examine patterns of illicit substance use behaviour across developmental periods.
- Causal modelling examine associations between amphetamine use and mental health problems across adolescence and young adulthood.

# Conclusions

- The MISUse consortium builds on the strength of four long-running prospective cohort studies across Australia and New Zealand.
- Analyses are directly informed through close working relationship with translational partners in clinical practice

#### Figure 2: Developmental patterns across integrated data

and government.

 Variations in assessments of substance use, antecedents, and consequences across the cohort studies will require

careful harmonisation going forward.

## Interested in collaborating?

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#### References

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