

ADHD symptomology and associated drug use among a sample of people who regularly use illicit drugs in Australia

Rebecca Hewson¹, Catherine Daly¹, Kieren Lilly¹, Tayla Barber¹, [Caroline Salom](mailto:c.salom@uq.edu.au)^{1,2}

¹Institute for Social Science Research, The University of Queensland, Brisbane, Australia, ²National Drug and Alcohol Research Centre, UNSW Sydney, Sydney, Australia

Presenter's email: c.salom@uq.edu.au

Introduction: Attention deficit/hyperactivity disorder (ADHD) is a neurodevelopmental condition estimated to affect up to 6% of adults; when untreated it is associated with poor outcomes and disadvantage. Prescribed stimulants are considered effective treatment, but reports of self-medication due to lack of diagnosis, and more recently of prescribed medication shortages, are increasing. We examined ADHD symptoms, self-medication with non-prescribed substances and associated health and social challenges in two sentinel samples of people who regularly use drugs.

Methods: Data were collected in 2024 and 2025 within the Ecstasy and Related Drugs Reporting (EDRS) and Illicit Drugs Reporting (IDRS) Systems. We interviewed people residing in Australian capital city areas who used ecstasy and/or other illicit stimulants (EDRS, n=740) or injected illicit drugs (IDRS, n=884), monthly or more frequently, and aged ≥18. 2025 data were collected in Queensland only (EDRS n=101, IDRS n=104). We used the Adult ADHD Self-Report Scale (ASRS) to measure past-6-month ADHD symptoms, and questions about formal ADHD diagnoses, prescribed medications, and substances used to self-manage symptoms.

Key Findings: Prevalence of participant ASRS scores above diagnostic thresholds in EDRS and IDRS samples was higher than the general population, and higher than proportions reporting formal ADHD diagnoses and prescribed medications. Self-medication with non-prescribed substances was common: EDRS participants largely used pharmaceutical stimulants while IDRS participants largely used methamphetamine. ASRS scores and reported self-medication in 2025 appear higher than 2024.

Discussions and Conclusions: High levels of undiagnosed ADHD are concerning, in light of limited treatment, medication shortages and detection of high-risk contaminants such as nitazenes in unregulated pharmaceuticals, methamphetamines and opioids being used in lieu of prescribed medication.

Implications on communities, practice, policy and/or First Nations communities: Services should discuss ADHD concerns with clients, refer people for diagnosis and medication, and discuss harm reduction strategies including drug checking if clients choose to self-medicate.

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