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CHARACTERISTICS AND CORRELATES OF SIMULTANEOUS SEDATIVE-ALCOHOL USE AMONG ALCOHOL AND NON-MEDICAL SEDATIVE USERS



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ABSTRACT

Objective: This study examined the characteristics and correlates of past 12-month simultaneous sedative-alcohol use (SSAU) in a community sample (N=167) reporting non-medical use of sedatives.

Sample: For the present analysis, 167 participants who reported non-medical sedative use for more than 5 days in the past 12 months, and use of alcohol in the past 12 months, were included.

Findings: SSAU was more prevalent among 18 to 25 year olds (75%), than 26-49 (63%), and 50-65 year age groups (52%); and among men, relative to women (74% versus 51%). SSAU was also higher among those reporting past 12-month cannabis use (versus no cannabis use) (73% versus 51%), and cocaine use (versus no cocaine use) (79% versus 52%). Furthermore, participants who reported sedative use for motives such as 'to get high, experiment, change mood, relieve stress, party, and 'just because,' were more likely to report past 12-month SSAU (chisquare; $p < 0.05$) than their counterparts. Multivariate logistic regression analyses indicated that being male (adjusted OR=2.21, 95% CI=1.06-4.60), Caucasian (adjusted OR=2.37, 95% CI=1.09-5.18), having a history of past 12-month cocaine use (adjusted OR=2.27, 95% CI=1.01-5.06), and reporting higher number of motives for sedative use (adjusted OR=4.13, 95% CI=1.71-9.97), were significantly associated with past 12-month SSAU.

Conclusion: Findings underscore the need for considering differential risk factors in tailoring preventive interventions for reducing SSAU among sedative non-medical users.

MATERIALS AND METHODS

Data were collected as part of the ongoing NIDA-funded Prescription Drug Misuse, Abuse, and Dependence study in St. Louis.

Eligibility criteria: Non-medical sedative use for more than 5 days in the past 12 months, and use of alcohol in the past 12 months.

Measures: All information for the present analysis was obtained from the Washington University Risk Behavior Assessment (WU-RBA).

Non-medical sedative use: Use of muscle relaxants, sleeping pills, or other sedatives in the last 365 days, (a) in ways other than prescribed, (b) when not prescribed.

SSAU: Use of sedatives and alcohol together, in the last 12 months.

Motives for sedative use in the past 12 months: Fifteen motives for sedative use were assessed using the WU-RBA (Table 1). Additionally, responses on these items (Yes/No) were summed to create a Motives Index (scores 0-15), representing the number of motives endorsed by the participants. Higher scores on Motives Index indicate more motives for sedative use in the past 12 months.

DEMOGRAPHIC DATA

Mean age (N=167) was 37 years (SD=13), 58% was male, 49% Caucasian, and 73% had < high-school education. Past 12-month cannabis use was reported by 63%, cocaine use by 47%, and heroin/opium use by 26%. Past 12-month SSAU was reported by 65 percent. For majority (80%), benzodiazepines were the preferred sedative of choice. Among benzodiazepine users, alprazolam was the most frequently reported (62%).

RESULTS

Table 1. Sedative Non-medical Users who reported, vs. did not report, Past 12-month SSAU, by Selected Variables (N=167)

	SSAU (n=108)	No SSAU (n=59)	p-value
Age			
18-25 years	39 %	24 %	
26-49 years	42 %	44 %	0.02*
50-65 years	19 %	32 %	
Gender			
Male	67 %	42 %	0.002*
Female	33 %	58 %	
Education			
Less than high-school	75 %	69 %	0.44
Above high school	25 %	31 %	
Ethnicity			
Caucasian	56 %	36 %	0.009*
Non-Caucasian	44 %	64 %	
Past 12-month illicit drug use			
Cannabis	71 %	49 %	0.004*
Cocaine	57 %	27 %	<0.0002*
Heroin	27 %	25 %	0.84
Motives for sedative use			
To get high	71 %	42 %	0.0003*
To experiment	36 %	19 %	0.02*
Peer pressure	5 %	7 %	0.56
To function	37 %	44 %	0.39
Alter other prescription drugs effects	31 %	24 %	0.33
To change mood / be happy	75 %	42 %	<0.0001*
To stay awake	7 %	5 %	0.55
To study / concentrate	8 %	7 %	0.70
To increase energy	12 %	14 %	0.79
To relieve stress	91 %	80 %	0.04*
For pain	33 %	20 %	0.09

Table 1.. continued

	SSAU (n=108)	No SSAU (n=59)	p-value
To sleep	73 %	69 %	0.64
Just because	65 %	39 %	0.001*
To party	49 %	20 %	0.0003*
To lose weight	0	3 %	0.06
Motives Index (mean, SD)	5.92 (2.22)	4.35 (2.55)	0.0001*

*Statistically significant; $p \leq 0.05$ (Chi-square/Fisher/t-test)

[†]Number of motives endorsed; mean Motives Index score: 5.36 (SD 2.46)

Table 2. Univariate & Multivariate Logistic Regression Predicting Past 12-month SSAU (n=167)

	Unadjusted OR		Adjusted OR	
	OR	95% CI	aOR	95% CI
Age ^a	1.36	1.06 - 1.76	0.76	0.56 - 1.04
Male	2.72	1.41 - 5.22	2.21	1.06 - 4.60
Caucasian ^b	2.34	1.22 - 4.52	2.37	1.09 - 5.18
Past 12-month cannabis use	2.56	1.32 - 4.96	1.42	0.64 - 3.12
Past 12-month cocaine use	3.62	1.81 - 7.21	2.27	1.01 - 5.06
Motives Index ^a	4.60	2.09 - 10.14	4.13	1.71 - 9.97

^aContinuous variables; for Motives Index, aOR indicates significant increase in risk when the number of motives increase by 5;

^bNon-Caucasian as referent group; OR: Odds Ratio; aOR: adjusted Odds Ratio; 95% CI: 95% Confidence Interval

CONCLUSIONS

- Past 12-month SSAU appeared to be more prevalent among younger adults, men, and among those reporting past 12-month cannabis and cocaine use. Furthermore, participants who reported sedative use for motives such as to get high, experiment, to change mood/be happy, relieve stress, to party, and 'just because,' were more likely to report past 12-month SSAU.
- Multivariate logistic regression analyses indicated that being male, Caucasian, reporting past 12-month cocaine use, and having higher number of motives for sedative use, were significantly associated with past 12-month SSAU.
- Findings underscore the need for considering differential risk factors in tailoring preventive interventions for reducing SSAU among sedative non-medical users. They also highlight the need for raising awareness about the risks involved when sedatives are used for non-medical purposes, which increases the possibility of drug interactions, and to consider such factors as age, gender, illicit drug use, and motives, when providing this advice.

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