From the New York Times

Excerpts from: Risky Rise of the Good-Grade Pill

By ALAN SCHWARZ

June 9, 2012

He steered into the high school parking lot, clicked off the ignition and scanned the scraps of his recent weeks. Crinkled chip bags on the dashboard. Soda cups at his feet. And on the passenger seat, a rumpled SAT practice book whose owner had been told since fourth grade he was headed to the Ivy League. Pencils up in 20 minutes.

The boy exhaled. Before opening the car door, he recalled recently, he twisted open a capsule of orange powder and arranged it in a neat line on the armrest. He leaned over, closed one nostril and snorted it.

Throughout the parking lot, he said, eight of his friends did the same thing.

The drug was not cocaine or heroin, but Adderall, an <u>amphetamine</u> prescribed for <u>attention deficit hyperactivity disorder</u> that the boy said he and his friends routinely shared to study late into the night, focus during tests and ultimately get the grades worthy of their prestigious high school in an affluent suburb of New York City. The drug did more than just jolt them awake for the 8 a.m. SAT; it gave them a tunnel focus tailormade for the marathon of tests long known to make or break college applications.

"Everyone in school either has a prescription or has a friend who does," the boy said.

At high schools across the United States, pressure over grades and competition for college admissions are encouraging students to abuse prescription stimulants, according to interviews with students, parents and doctors. Pills that have been a staple in some college and graduate school circles are going from rare to routine in many academically competitive high schools, where teenagers say they get them from friends, buy them from student dealers or fake symptoms to their parents and doctors to get prescriptions.

"They're the A students, sometimes the B students, who are trying to get good grades," said one senior at Lower Merion High School in Ardmore, a Philadelphia suburb, who said he makes hundreds of dollars a week selling prescription drugs, usually priced at \$5 to \$20 per pill, to classmates as young as freshmen. "They're the quote-unquote good kids, basically."

"People would have never looked at me and thought I used drugs like that — I wasn't that kid," said Madeleine, who has just completed her freshman year at an Ivy League college and continues to use stimulants occasionally. "It wasn't that hard of a decision. Do I want only four hours of sleep and be a mess, and then underperform on the test and then in field hockey? Or make the teachers happy and the coach happy and get good grades, get into a good college and make my parents happy?"

Madeleine estimated that one-third of her classmates at her small school, most of whom she knew well, used stimulants without a prescription to boost their scholastic performance. Many students across the United States made similar estimates for their schools, all of them emphasizing that the drugs were used not to get high, but mostly by conscientious students to work harder and meet ever-rising academic expectations.

"I lie to my psychiatrist — I expressed feelings I didn't really have, knowing the consequences of it," he said, standing in a park a few miles from the high school. "I tell the doctor, 'I find myself very distracted, and I feel this really deep pain inside, like I'm anxious all the time,' or something like that."

Many youngsters with prescriptions said their doctors merely listened to their stories and took out their prescription pads. Dr. Hilda R. Roque, a primary-care physician in West New York, N.J., said she never prescribed A.D.H.D. medicine but knew many doctors who did. She said many parents could push as hard for prescriptions as their children did, telling her: "My child is not doing well in school. I understand there are meds he can take to make him smarter."

"To get a prescription for Adderall was the Golden Ticket — it really was," said William, the recent graduate of Birch Wathen in Manhattan.

A high school senior in Connecticut who has used his friend's Adderall for school said: "These are academic <u>steroids</u>. But usually, parents don't get the steroids for you."

Late in his sophomore year, the boy wanted some help to raise his B average — far from what top colleges expected, especially from a McLean student. So he told his psychologist what she needed to hear for a diagnosis of A.D.H.D. — even gazing out the window during the appointment for effect — and was soon getting 30 pills of Adderall every month, 10 milligrams each. They worked. He focused late into the night studying, concentrated better during exams and got an A-minus average for his junior year.

"I wanted to do everything I could to get into the quote-unquote right school," he recalled recently.

As senior year began, when another round of SATs and one last set of good grades could put him over the top, the boy said he still had trouble concentrating. The doctor prescribed 30 milligrams a day. When college applications hit, he bought extra pills for \$5 apiece from a girl in French class who had fooled her psychiatrist, too, and began taking several on some days.

The boy said that as his A-minus average continued through senior year, no one suspected that "a kid who went to Bible camp" and had so improved his grades could be abusing drugs. By the time he was accepted and had enrolled at a good but not great college, he was up to 300 milligrams a day — constantly taking more to stave off the inevitable crash.

One night, after he had taken about 400 milligrams, his heart started beating wildly. He began hallucinating and then convulsing. He was rushed to the emergency room and wound up spending seven months at a drug rehabilitation center.

December 14, 2013

The Selling of Attention Deficit Disorder

By ALAN SCHWARZ

After more than 50 years leading the fight to legitimize attention deficit hyperactivity disorder, Keith Conners could be celebrating.

Severely hyperactive and impulsive children, once shunned as bad seeds, are now recognized as having a real neurological problem. Doctors and parents have largely accepted drugs like Adderall and Concerta to temper the traits of classic A.D.H.D., helping youngsters succeed in school and beyond.

But Dr. Conners did not feel triumphant this fall as he addressed a group of fellow A.D.H.D. specialists in Washington. He noted that recent data from the Centers for Disease Control and Prevention show that the diagnosis had been made in 15 percent of high school-age children, and that the number of children on medication for the disorder had soared to 3.5 million from 600,000 in 1990. He questioned the rising rates of diagnosis and called them "a national disaster of dangerous proportions."

"The numbers make it look like an epidemic. Well, it's not. It's preposterous," Dr. Conners, a psychologist and professor emeritus at Duke University, said in a subsequent interview. "This is a concoction to justify the giving out of medication at unprecedented and unjustifiable levels."

The rise of A.D.H.D. diagnoses and prescriptions for stimulants over the years coincided with a remarkably successful two-decade campaign by pharmaceutical companies to publicize the syndrome and promote the pills to doctors, educators and parents. With the children's market booming, the industry is now employing similar marketing techniques as it focuses on adult A.D.H.D., which could become even more profitable.

Few dispute that classic A.D.H.D., historically estimated to affect 5 percent of children, is a legitimate disability that impedes success at school, work and personal life. Medication often assuages the severe impulsiveness and inability to concentrate, allowing a person's underlying drive and intelligence to emerge.

But even some of the field's longtime advocates say the zeal to find and treat every A.D.H.D. child has led to too many people with scant symptoms receiving the diagnosis and medication. The disorder is now the second most frequent long-term diagnosis made in children, narrowly trailing asthma, according to a New York Times analysis of C.D.C. data.

Behind that growth has been drug company marketing that has stretched the image of classic A.D.H.D. to include relatively normal behavior like carelessness and impatience, and has often overstated the pills' benefits. Advertising on television and in popular magazines like People and Good Housekeeping has cast common childhood forgetfulness and poor grades as grounds for medication that, among other benefits, can result in "schoolwork that matches his intelligence" and ease family tension.

A 2002 ad for Adderall showed a mother playing with her son and saying, "Thanks for taking out the garbage."