ATTENTION DEFICIT HYPERACTIVITY DISORDER, ALCOHOL, DRUGS AND DRIVING: POPULATION-BASED EXAMINATION IN A CANADIAN SAMPLE

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ABSTRACT

Purpose: To explore the relationships among self-reported screening measures of Attention Deficit Hyperactivity Disorder (ADHD), other psychiatric problems, substance use/abuse and driving-related outcomes among a provincially representative sample of adults 18 years and older living in Ontario, Canada.

Method: The Centre for Addiction and Mental Health (CAMH) Ontario Monitor is an ongoing repeated cross-sectional telephone survey of Ontario adults (18 and over) which includes validated measures: ADHD measures (ASRS-V1.1, previous ADHD diagnosis, ADHD medication use); psychiatric distress; antisocial behaviour screen; pain, anxiety, depression medication use; lifetime cannabis and cocaine use; Alcohol Use Disorders Identification Test (AUDIT); Alcohol, Smoking and Substance Involvement Screening Test (ASSIST); driving-related outcomes (driving after drinking, driving after cannabis use, street racing, collisions in past year) and socio-demographics. This study presents statistically weighted results of the first year survey sample of a 3-year study.

Results: A total of 1999 Ontario residents were sampled, of which 70 (3.5%) screened positively for ADHD on the ASRS-V1.1 screening tool. Of those who screened positively for ADHD, 54.4% were female and 45.6% were male. A significantly greater percentage of those who screened ADHD positive (8.0%) reported at least one crash in the past year compared with those who screened ADHD negative (3.3%), although there were no differences between the ADHD positive and negative screened respondents on driving a motor vehicle after having two or more drinks in the previous hour, within an hour of using cannabis, marijuana or hash or in a race. When a sequential regression was conducted to predict self-reported crashes, only age, antisocial personality screen and lifetime cannabis use predicted crashes.

Conclusion: This research is the first Canadian population-based study on adult ADHD using a representative sample of adults 18 years and older living in Ontario, Canada. These early results showed no relationship between the ADHD screen and crashes when age, sex and kilometres driven are controlled for, while antisocial personality screen and lifetime cannabis use predicted crashes.
use were significant predictors. However, these analyses are based on self-report screeners and not psychiatric diagnoses and a small sample of ADHD respondents. Thus, these results should be interpreted with caution.

RÉSUMÉ