

A Cross-Country System Reports on Drug Abuse

□ The Drug Abuse Warning Network (DAWN), a data-collecting system sponsored jointly by the National Institute on Drug Abuse in DHEW's Alcohol, Drug Abuse, and Mental Health Administration and the Justice Department's Drug Enforcement Administration, is the largest national drug abuse indicator system in the world. An article on pages 395-402 explains how DAWN works.

□ On this page, I would like to report on some of the findings of Project DAWN III, the third report to be made since the network was established in 1972. Like its predecessors, DAWN III delineates patterns of drug abuse in 29 major population centers, using data furnished by hospital emergency rooms, inpatient units, medical examiner reports on causes of deaths, and crisis centers. "Mentions" of any and all drugs involved in a particular drug crisis episode are the data on which patterns of use are based.

□ In the first 2 years of DAWN reporting, April 1972 to April 1974, the drug most frequently mentioned was the tranquilizer diazepam (Valium), the drug most commonly prescribed by American physicians. In April 1975, an apparent increase in drinking brought alcohol near the top of the DAWN list—a cause for even greater concern when one considers that in the DAWN system, alcohol is not reported when it is the sole cause of discomfort, alarm, or death, but only when it has been used along with another drug.

□ After Valium and alcohol-in-combination came heroin, marijuana, and aspirin. Also among the 10 most

frequently mentioned drugs were LSD, secobarbital, and methadone, the synthetic narcotic often given in controlled doses to addicts who have withdrawn from heroin. Nearly half the drug-related deaths reported by medical examiners were caused by barbiturates (19 percent) or opiates, chiefly heroin (28 percent).

□ The majority of drug abusers in the study were in their teens or twenties. Whites were mentioned 76 percent of the time, and blacks 21 percent. More deaths of males than females were reported in medical examiner reports and, in the crisis centers, male contacts outnumbered female contacts, while the reverse was true in hospital emergency rooms.

□ Whatever its limitations or duplications, the DAWN study is provocative and important for those of us concerned with drug abuse and alcohol abuse. It has already affected Federal drug enforcement priorities. It also suggests trends and developing problems, thus serving as a guide for the allocation of treatment resources and preparations to meet future needs.

□ And the study illustrates and reinforces once again the close ties and interdependence that exist among the three components of the Alcohol, Drug Abuse, and Mental Health Administration—the National Institute on Alcohol Abuse and Alcoholism, the National Institute on Drug Abuse, and the National Institute of Mental Health.



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Cover—Some of the drugs currently abused in the United States are depicted on the cover of the new report. Monitoring the patterns of drug abuse in 29 Metropolitan Statistical Areas is the Drug Abuse Warning System, sponsored jointly by the National Institute on Drug Abuse and the Drug Enforcement Administration. The data collection system and how it operates are described in the lead article in this issue.

