High-dose MDMA drug alerts and MDMA use intentions in Australia: A quasi-experimental study

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Introduction and Aims: People who use MDMA may reduce their dose following public drug alerts about high-dose preparations. But little is known about how consumers respond to such alerts. This study aimed to determine if (a) MDMA high-dose drug alerts, and (b) varied descriptions of dose, effects and actions to reduce harm within these alerts, were associated with intentions to reduce initial MDMA dose.

Design and Methods: Australians (n=625) who had used MDMA pills/capsules in the past year completed an online survey (59% male; median age 22, IQR 19-25). Respondents were randomised into alert (n=441) and control (n=184) groups, with alert group respondents receiving alerts with varied features regarding dose, effects and actions to reduce harm. Reduction in dose following a hypothetical scenario of possessing high-dose MDMA was calculated by subtracting intended dose from self-reported typical initial dose in the past 12 months. Multinomial logistic regressions were performed.

Results: Of those who received an alert, 45% would not use suspected high-dose MDMA, 47% would reduce dose, and 8% would take similar/higher dose (21%, 69% and 10% in the control group, respectively). Assigning 'no use' as the referent, both taking less (RRR=0.31, 95%CI 0.20-0.47) and taking the same/more (RRR=0.35, 95%CI 0.18-0.68) were significantly lower in the alert group, even after adjusting for age, gender and lifetime MDMA experience. There were no significant associations between drug alert features and intended dosing behaviours.

Discussion: The majority of the sample reported they would reduce dose or not consume MDMA in a hypothetical high-dose scenario. However, intended behaviour change was not associated with descriptions of dose, effects, and actions to reduce harm.

Implications for Policy: These findings suggest behaviour change is driven by seeing any drug alert, independent of content variations. Therefore, effective dissemination of drug alerts to people who use MDMA should be priority.

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