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▶ Brief intervention for regular ecstasy (MDMA) users: Pilot randomized trial of a check-up model.

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Martin G., Copeland J.

Journal of Substance Use: 2010, 15(2), p. 131-142.

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In Australia, a rare study trialling a brief intervention with ecstasy users found some evidence of moderate reductions in severity of dependence.

SUMMARY Despite the existence of a sizable population of regular ecstasy users and emergent evidence of a range of associated harms, including dependence, to date no effective targeted intervention responses have been reported specifically for this group. The aim of this study was to evaluate the efficacy of a single session brief intervention in reducing ecstasy use and related problems among regular ecstasy users.

In Sydney, Australia, 50 adult ecstasy users were recruited through media adverts and randomly assigned either to a single-session brief intervention or to a control group who were assessed and offered information on ecstasy while they waited to be offered a brief intervention after the three month follow-up. None of the participants were seeking help for their ecstasy use. Typically they were young men in their late twenties or early thirties who were either employed or studying. On average they had used ecstasy one day in nine, and about half were assessed as dependent on the drug. The intervention consisted of feedback on assessment results, delivered in a motivational interviewing style.

Three months later, participants were asked again about their ecstasy use and the severity of their dependence was re-assessed. Participants assigned to the brief intervention had significantly greater reductions in severity of dependence on ecstasy, but not in the quantity and frequency of ecstasy use. Though four times as many of the brief intervention participants were no longer using ecstasy at follow-up (16% vs. 4%), this difference was not statistically significant. Regardless of whether statistically significant, on all the variables assessed the intervention group improved moderately more than the control group. The intervention and the control group's assessment and information were both found helpful by the participants.

FINDINGS COMMENTARY The participants were recruited through media adverts to a study exploring ecstasy use, differing from a real-world clinical intervention targeted at people with concern about their own ecstasy use, or people identified through screening programmes. It seems likely that the one of the two statistically significant results would not have been significant had appropriate criteria been used.

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