## **Drug Use Disorders Identification Test (DUDIT)**

## Please tick ( > ) one box for each question

Q1. How often do you use drugs other than alcohol?					
Never	Once a month or less often	2-4 times a month	2-3 times a week	4 times a week or more often	
o	_ 1	2	3	4	
Q2. Do you use more than one type of drug on the same occasion?					
Never	Once a month or less often	2-4 times a month	2-3 times a week	4 times a week or more often	
o	_ 1	2	3	4	
Q3. How many times do you take drugs on a typical day when you use drugs?					
0	1-2	3-4	5-6	7 or more	
o	_ 1	2	3	4	
Q4. How often are you influenced heavily by drugs?					
Never	Less often once a month	Every month	Every week	Daily or almost every day	
□ 0	_ 1	2	<u> </u>	4	
Q5. Over the past year, have you felt that your longing for drugs was so strong that you could not resist it?					
Never	Less often once a month	Every month	Every week	Daily or almost every day	
o	_ 1	2	3	4	
Q6. Has it happened, over the past year, that you have not been able to stop taking drugs once you started?					
Never	Less often once a month	Every month	Every week	Daily or almost every day	
□ 0	_ 1	2	<u> </u>	4	
Q7. How often over the past year have you taken drugs and then neglected to do something you should have done?					
Never	Less often once a month	Every month	Every week	Daily or almost every day	
□ 0	_ 1	2	<u> </u>	4	
Q8. How often over the past year have you needed to take a drug the morning after heavy drug use the day before?					
Never	Less often once a month	Every month	Every week	Daily or almost every day	
□ 0	_ 1	2	<u> </u>	4	
Q9. How often over the past year have you had guilty feelings or a bad conscience because you used drugs?					
Never	Less often once a month	Every month	Every week	Daily or almost every day	
□ 0	_ 1	2	3	4	
Q10. Have you or anyone else been hurt (mentally or physically) because you used drugs?					
Never Yes, but not in the past year Yes, during the past year					
□ 0				□ 2	
Q11. Has a relative or a friend, a doctor or a nurse, or anyone else, been worried about your drug use or said to you that you should stop using drugs?					
Never Yes, but not in the past year Yes, during the past year					
	] 0	1	·	2	
Total Score:					

**Scoring and interpretation:** The DUDIT comprises 11 questions. Score the first nine questions 0, 1, 2, 3, or 4. The last two questions are scored 0, 2, or 4. A total score is calculated by summing the points obtained for each question. The minimum total score possible is 0, and the maximum total score possible is 44 (i.e. total score range: 0-44). Higher scores reflect higher drug dependence.

## **DUDIT Recommended general population cut-off scores**

Sex	Cutoff Score		
Males	6		
Females	2		

**Tool citation:** Bergman, A.H., Bergman, H., Palmstierna, T., et al. *DUDIT: The Drug Use Disorders Identification Test: manual.* 2003, Stockholm, Sweden: Karolinska Institute.

**Further information:** Fischer, J.A., Roche, A.M., and Duraisingam, V. *Drug Use Disorders Identification Test (DUDIT): description, strengths and knowledge gaps.* 2021, National Centre for Education and Training on Addiction (NCETA), Flinders University: Adelaide, South Australia.



