Drug Enforcement Administration
Diversion Control Division
Drug & Chemical Evaluation Section

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DEA/DC/DOE

METHYLPHENIDATE

(Trade Names: Ritalin®-[IR, LA, and SR], Concerta®,
Metadate-[CD and ER], Methylin-[IR and ER] and Focalin-[IR and ER])

Introduction:

Methylphenidate is a central nervous system (CNS) stimulant that has been marketed in the United States since the 1950s. For many years, Ritalin (the immediate release [IR] product) was the only brand-name product available. In recent years, other IR, extended release (ER), and long acting (LA) methylphenidate products have become available. These products are primarily prescribed for the treatment of attention deficit hyperactivity disorder (ADHD).

Domestic and worldwide use of methylphenidate has increased dramatically since 1990. According to a United Nations International Narcotic Control Board report, the United States ranks 9th in rates of consumption of methylphenidate of the 10 countries reporting the highest consumption in 2023.

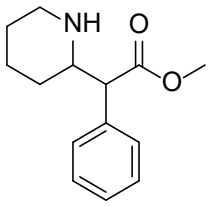
Licit Uses:

Methylphenidate is used almost exclusively for the treatment of ADHD. There is a considerable body of literature on the short-term efficacy of methylphenidate pharmacotherapy for the treatment of ADHD.

According to the IQVIA National Prescription Audit™, total prescriptions for methylphenidate or dexmethylphenidate, excluding serdexmethylphenidate, dispensed in the United States was approximately 23.6 million in 2023, 24.5 million in 2024, and 25.9 million in 2025.

Chemistry:

Methylphenidate is chemically known as methyl phenyl(piperidin-2-yl)acetate. The CAS number for methylphenidate is 113-45-1. The chemical structure of methylphenidate is shown below:



Pharmacology:

Methylphenidate is a CNS stimulant that produces numerous effects, including appetite suppression, increased alertness, and increased blood pressure, heart rate, respiration, and body temperature. Almost complete absorption of IR methylphenidate occurs after oral administration, with peak plasma levels in about 2 hours. Methylphenidate is extensively metabolized; about 80% of the dose is excreted in the urine as ritalinic acid. Only 20% of the administered oral dose is bioavailable due to extensive first-pass metabolism.

Biochemically, methylphenidate enhances the release and blocks the reuptake of dopamine and norepinephrine in the mammalian brain. Pharmacologically, methylphenidate is most closely related to cocaine. In human subjects, methylphenidate binds to the same receptor sites in the brain as cocaine and produces effects that are indistinguishable from cocaine.

Illicit Uses:

Like other potent stimulants, methylphenidate is abused for its "feel good" stimulant effects. Occasional abusers tend to use methylphenidate as a study aid to increase attention and stay awake. Some abusers use methylphenidate recreationally and combine it with alcohol or some other depressant to feel more alert or less drunk. Frequent methylphenidate abusers often snort or inject methylphenidate for its intense euphoric effects or to alleviate the severe depression and craving associated with stimulant withdrawal syndrome.

America's Poison Centers reported 10,230 case mentions and 6,790 single exposures of methylphenidate in 2024. In the same year, the National Survey on Drug Use and Health indicated that 538,000 individuals (0.2% of the population) aged 12 years or older reported misusing methylphenidate products within the past year. In 2025, this report increased to 594,000 individuals (0.2% of the population) misusing methylphenidate products within the past year.

User Population:

According to Monitoring the Future study 2026 Annual Report, prevalence has declined substantially since first tracked by the survey in 2001. From 2001 to 2025, it declined from 2.9% to 0.6% in 8th grade, from 4.8% to 0.7% in 10th grade, and from 5.1% to 0.8% in 12th grade.

Illicit Distribution:

DEA's National Forensic Laboratory Information System (NFLIS) Drug database collects scientifically verified data on drug items and cases submitted to and analyzed by participating federal, state, and local forensic drug laboratories. NFLIS-Drug has received over 40,200 reports of methylphenidate since its first report in 1997. These reports peaked in 2013 with 2,469 reports and have since declined to 751 in 2023, 649 in 2024, 640 in 2025, and 227 in 2026 (still reporting).

Control Status:

Methylphenidate is controlled in schedule II of the Controlled Substances Act.

Comments and additional information are welcomed by the Drug and Chemical Evaluation Section; Fax 571-362-4250, Telephone 571-362-3249, or Email DPE@dea.gov.