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Search History

1. PsycINFO; exp ADDICTION/ OR DRUG ABUSE [+NT]/ OR DRUG USAGE [+NT]/; 35456 results.
2. PsycINFO; addict*.ti,ab; 25722 results.
3. PsycINFO; 1 OR 2; 47561 results.
1. Self-care practices of female peer support specialists with co-occurring mood and substance use disorders.

Citation: Dissertation Abstracts International Section A: Humanities and Social Sciences, 2015, vol./is. 75/8-A(E)(No Pagination Specified), 0419-4209 (2015)

Author(s): Wohlert, Beverly A
Institution: U Arizona, US
Language: English

Abstract: The purpose of this study was to better understand the self-care practices of female peer support specialists (PSS) with co-occurring mood and substance use disorders. The researcher took a qualitative grounded theory approach conducting in-depth semi-structured interviews with ten women employed at peer-run agencies in Maricopa County, Arizona. Data from these interviews were transcribed, then analyzed manually, as well as with NVivo 10.0 software, to identify the key terms, nodes, categories and emergent themes of the participants' experiences. Self-care practices of peer support specialists included accessing personal and professional support networks; maintaining a daily routine to balance the demands of recovery, parenting, and working; taking medications; sleeping; practicing spirituality; participating in service work; eating nutritiously; exercising, and building a sense of coherence. Although a variety of practices were being used and identified as helpful, spirituality was identified as the most important self-care practice to achieve overall wellness. Employment improved the ability for PSSs to practice self-care because they valued the support of their supervisors and coworkers, were reminded of the consequences of not practicing self-care by working with individuals who were unstable, gained knowledge from teaching others, found healing in telling their stories, and reported higher self-esteem from working and helping others. However, participants did identify ways that employment as a PSS could interfere with practicing self-care, such as staff turnover, limited access to supervisors, or being unprepared to work in the field. Several recommendations were suggested as a result of this study, such as the importance of understanding and using effective self-care practices, building personal and professional support networks, and establishing daily routines to balance recovery with personal and professional demands. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Dissertation Abstract
Subject Headings: *Drug Abuse
*Emotional States
Grounded Theory
Human Females
Mental Disorders
Peers
Sense of Coherence

Source: PsycINFO


Citation: The American Journal on Addictions, February 2015(No Pagination Specified), 1055-0496;1521-0391 (Feb 12, 2015)

Author(s): Streltzer, Jon; Davidson, Raymond; Goebert, Deborah

Abstract: Background and Objectives In some countries, particularly the United States and Canada, there has been a growing problem of opioid dependence associated with the treatment of chronic pain. Controversy exists regarding the efficacy and safety of opioid therapy, particularly in high doses for extended periods of time. This study reports on the outcome of chronic pain patients treated with buprenorphine in an outpatient psychiatric consultation clinic. Methods Forty three consecutive outpatient clinic chronic pain patients with a DSM-IV diagnosis of opioid dependence and treated with buprenorphine during a 3-year period were monitored for follow-up periods of up to 5 years. All subjects were dependent on drugs prescribed for pain and were divided into two groups: those who had a history of abuse of alcohol or drugs and those who did not Historical, physical,
demographic, and outcome data were collected. Results The majority of patients were male, not working, and between the ages of 45-60. Follow-up revealed that treatment with buprenorphine was effective. Most patients had improved pain with treatment of the opioid dependence. There were no differences between those with or without a history of substance abuse. Discussion and Conclusions Patients often improved with much less preoccupation with pain, expressing great satisfaction with buprenorphine treatment. Scientific Significance Buprenorphine is an effective tool when treating the opioid-dependent chronic pain patient. (Am J Addict 2015;XX:1-5) (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
to identify which particular cognitive functions are impaired in ADP. Furthermore, we analysed the association between cognitive deficits and relapse rates and the reversibility of cognitive deficits under abstinence in a 6-month follow-up period. Ninety-four recently detoxified ADP and 71 HC completed the cognitive tasks as well as questionnaire measures assessing drinking behaviour and personality traits. Compared with HC, ADP showed poorer performance in response initiation, response inhibition, complex-sustained attention and executive functions. Impairment in response inhibition was a significant predictor for relapse, yet the strongest predictor was the interaction between the number of previous detoxifications and response-inhibition deficits. The results of a moderation analysis showed that patients with many previous detoxifications and large deficits in response inhibition showed the highest relapse risk. These findings indicate that interventions should take into account inhibitory deficits especially in ADP with a high number of previous detoxifications. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: 
Source: PsycINFO
Full Text: Available from Wiley in Addiction Biology

5. Levamisole enhances the rewarding and locomotor-activating effects of cocaine in rats.

Citation: Drug and Alcohol Dependence, February 2015(No Pagination Specified), 0376-8716 (Feb 7, 2015)
Author(s): Tallarida, Christopher S; Tallarida, Ronald J; Rawls, Scott M
Abstract: BACKGROUND: The Drug Enforcement Agency estimates that 80% of cocaine seized in the United States contains the veterinary pharmaceutical levamisole (LVM). One problem with LVM is that it is producing life-threatening neutropenia in an alarming number of cocaine abusers. The neuropharmacological profile of LVM is also suggestive of an agent with modest reinforcing and stimulant effects that could enhance cocaine's addictive effects. METHODS: We tested the hypothesis that LVM (ip) enhances the rewarding and locomotor stimulant effects of cocaine (ip) using rat conditioned place preference (CPP) and locomotor assays. Effects of LVM by itself were also tested. RESULTS: LVM (0-10mg/kg) produced CPP at 1mg/kg (P<0.05) and locomotor activation at 5mg/kg (P<0.05). For CPP combination experiments, a statistically inactive dose of LVM (0.1mg/kg) was administered with a low dose of cocaine (2.5mg/kg). Neither agent produced CPP compared to saline (P>0.05); however, the combination of LVM and cocaine produced enhanced CPP compared to saline or either drug by itself (P<0.01). For locomotor experiments, the same inactive dose of LVM (0.1mg/kg, ip) was administered with low (10mg/kg) and high doses (30mg/kg) of cocaine. LVM (0.1mg/kg) enhanced locomotor activation produced by 10mg/kg of cocaine (P<0.05) but not by 30mg/kg (P>0.05). CONCLUSIONS: LVM can enhance rewarding and locomotor-activating effects of low doses of cocaine in rats while possessing modest activity of its own. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings:
Source: PsycINFO
Full Text: Available from Elsevier in Drug and Alcohol Dependence


Citation: Drug and Alcohol Dependence, January 2015(No Pagination Specified), 0376-8716 (Jan 27, 2015)
BACKGROUND: Cocaine addiction continues to be a significant healthcare issue, yet there are no FDA approved medications for the treatment of cocaine use disorder within the United States. METHODS: This 12-week, prospective, double-blind, randomized, placebo-controlled study examined the effectiveness of quetiapine (Seroquel XR) versus matched placebo for the treatment of DSM-IV cocaine dependence in non-psychotic individuals. Subjects randomized to quetiapine (N=29) were titrated up to a target dose of 400mg/day of quetiapine, while those in the placebo arm (N=31) were given a matched placebo. All subjects had weekly clinic visits and a cognitive-behavioral therapy group session. Outcome measures included self-report of cocaine use and money spent on cocaine as well as urine drug screens (UDS). RESULTS: The drop-out rate was substantial at 68%. Logistic regression analysis did not find significant differences between groups in predicting end-of trial abstinence, defined as three consecutive weekly negative UDS (13.7% in the quetiapine group versus 12.9% in the placebo group; p=.92). Based upon a repeated measures analysis of variance, subjects in this study, as a whole, demonstrated reductions in their self-reported use of cocaine, self-reported money spent on cocaine, and number of days per week using cocaine. However, the quetiapine group did not differ significantly from the placebo group. CONCLUSIONS: This study did not find group differences between the quetiapine and placebo arms, suggesting that quetiapine is not an efficacious treatment for DSM-IV cocaine dependence.
was not observed in controls, this difference was not significant across groups. Participants still indicated negative explicit associations with heroin use after cue exposure. Exposure to cues significantly accelerated arousal and sedation responses. Limitations: Whether cue exposure could change self-reported craving requires further study in abstinent heroin abusers. The exclusively male sample limits generalization of the results. Conclusions: The present findings extend the evidence on whether implicit and explicit heroin-related cognitions are susceptible to context. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Elsevier Ltd; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Cognition *Cues *Drug Abstinence *Emotional Content *Heroin Addiction Heroin
Source: PsycINFO
Full Text: Available from Elsevier in Journal of Behavior Therapy and Experimental Psychiatry


Citation: Journal of Abnormal Psychology, February 2015, vol./is. 124/1(137-151), 0021-843X;1939-1846 (Feb 2015)
Author(s): Hinnant, J. Benjamin; Erath, Stephen A; El-Sheikh, Mona
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Language: English
Abstract: Stress response systems are thought to play an important role in the development of psychopathology. In addition, family stress may have a significant influence on the development of stress response systems. One potential avenue of change is through alterations to thresholds for the activation of stress responses: Decreased threshold for responding may mark increased stress sensitivity. Our first aim was to evaluate the interaction between thresholds for parasympathetic nervous system (PNS) responding, operationalized as resting respiratory sinus arrhythmia (RSA), and harsh parenting in the prediction of development of delinquency and adolescent substance use (resting RSA as a biomarker of risk). The second aim was to evaluate if resting RSA changes over time as a function of harsh parenting and stress reactivity indexed by RSA withdrawal (altered threshold for stress responding). Our third aim was to evaluate the moderating role of sex in these relations. We used longitudinal data from 251 children ages 8-16 years. Mother-reports of child delinquency and RSA were acquired at all ages. Adolescents self-reported substance use at age 16 years. Family stress was assessed with child-reported harsh parenting. Controlling for marital conflict and change over time in harsh parenting, lower resting RSA predicted increases in delinquency and increased likelihood of drug use in contexts of harsh parenting, especially for boys. Harsh parenting was associated with declining resting RSA for children who exhibited greater RSA withdrawal to stress. Findings support resting PNS activity as a moderator of developmental risk that can be altered over time. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: American Psychological Association; YEAR: 2015
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Usage *Juvenile Delinquency

Citation: Journal of Abnormal Psychology, February 2015, vol./is. 124/1(128-136), 0021-843X;1939-1846 (Feb 2015)

Author(s): Bradford, Daniel E; Curtin, John J; Piper, Megan E

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Language: English

Abstract: Most smokers attempting to quit will relapse, even when using evidence-based cessation treatment. This illustrates the need for better understanding of the relapse process to thereby improve cessation treatments. Although the impact of stress sensitivity on relapse is clear, little research has precisely examined stress reactivity in addicted individuals. Further, most research on relapse focuses on affect surrounding self-administration, and does not address potentially important preconsumption processes such as anticipation of use. We examined the effects of anticipation and actual smoking on stress reactivity in 34 deprived smokers withdrawn for 24 hr and 37 nondeprived smokers, with 37 nonsmoker controls. Using a cued shock stressor task, we measured stress reactivity via startle potentiation and self-reported anxiety. After completing the task once, smokers anticipated smoking a cigarette resting in front of them while they completed the task a second time. Smokers then smoked before completing the task a third and final time. Nonsmokers anticipated and drank water as a control. Anticipation of smoking significantly attenuated both startle potentiation and self-reported anxiety to shock cues for deprived smokers relative to nondeprived smokers. Smokers' stress reactivity was not reduced by smoking beyond the prior effect of anticipation. These results suggest that anticipation, rather than actual drug consumption, may drive the primary reinforcing effect of reduced stress reactivity in smoking. Future research is needed to understand this effect of anticipation on drug use and to determine whether anticipation would make an effective intervention target for addiction and other psychopathology that exhibits increased stress sensitivity. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: American Psychological Association; YEAR: 2015

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Deprivation *Expectations *Nicotine *Stress Reactions *Tobacco Smoking Smoking Cessation

Source: PsycINFO

10. Differential vulnerability to relapse into heroin versus cocaine-seeking as a function of setting.
Citation: Psychopharmacology, February 2015 (No Pagination Specified), 0033-3158; 1432-2072 (Feb 10, 2015)

Author(s): Montanari, Christian; Stendardo, Emiliana; De Luca, Maria Teresa; Meringolo, Maria; Contu, Laura; Badiani, Aldo

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Abstract: Rationale: Previous studies have shown that the effect of setting on drug-taking is substance specific in both humans and rats. In particular, we have shown that when the setting of drug self-administration (SA) coincides with the home environment of the rats (resident rats), the rats tend to prefer heroin to cocaine. The opposite was found in nonresident rats, for which the SA chambers represented a distinct environment. Objectives: The aim of the present study was to investigate the influence of setting on the ability of different doses of cocaine and heroin to prime cocaine- versus heroin-seeking in rats that had been trained to self-administer both drugs and had then undergone an extinction procedure. Methods: Resident (N = 62) and nonresident (N = 63) rats with double-lumen intra-jugular catheters were trained to self-administer cocaine (400 microg/kg/infusion) and heroin (25 microg/kg/infusion) on alternate days for 10 consecutive daily sessions (3 h each). After the extinction phase, independent groups of rats were given a noncontingent intravenous infusion of heroin (25, 50, or 100 microg/kg) or cocaine (400, 800, or 1600 microg/kg), and drug-seeking was quantified by counting nonreinforced lever presses. Results: All resident and nonresident rats acquired heroin and cocaine SA. However, cocaine primings reinstated cocaine-seeking only in nonresident rats, whereas heroin primings reinstated heroin-seeking only in resident rats. Conclusions: We report here that the susceptibility to relapse into drug-seeking behavior is drug-specific and setting-specific, confirming the crucial role played by drug, set, and setting interactions in drug addiction. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Springer-Verlag Berlin Heidelberg; YEAR: 2015
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: PsycINFO


Citation: Drug and Alcohol Dependence, January 2015 (No Pagination Specified), 0376-8716 (Jan 31, 2015)

Author(s): West, Nancy A; Severtson, Stevan G; Green, Jody L; Dart, Richard C

Abstract: BACKGROUND: Dramatic increases in the prescriptive use of opioid analgesics during the past two decades have been paralleled by alarming increases in rates of the abuse and intentional misuse of these drugs. We examined recent trends in the abuse and misuse and associated fatal outcomes among older adults (60+ years) and compared these to trends among younger adults (20-59 years). METHODS: Trend analysis using linear regression models was used to analyze 184,136 cases and 1149 deaths associated with abuse and misuse of the prescription opioids oxycodone, fentanyl, hydrocodone, morphine, oxymorphone, hydromorphone, methadone, buprenorphine, tramadol, and tapentadol that were reported to participating U.S. Poison Centers of the Researched Abuse, Diversion

RESULTS: Rates of abuse and misuse of prescription opioids were lower for older adults than for younger adults; however, mortality rates among the older ages followed an increasing linear trend (P<0.0001) and surpassed rates for younger adults in 2012 and 2013. In contrast, mortality rates among younger adults rose and fell during the period, with recent rates trending downward (P=0.0003 for quadratic trend). Sub-analysis revealed an increasing linear trend among older adults specifically for suicidal intent (P<0.0001), whereas these rates increased and then decreased among younger adults (P<0.0001 for quadratic trend). CONCLUSION: Recent linear increases in rates of death and use of prescription opioids with suicidal intent among older adults have important implications as the U.S. undergoes a rapid expansion of its elderly population. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: PsycINFO
Full Text: Available from Elsevier in Drug and Alcohol Dependence


Citation: Sociology of Health & Illness, February 2015(No Pagination Specified), 0141-9889;1467-9566 (Feb 9, 2015)
Author(s): Andersen, Ditte
Abstract: Abstract Addiction research has demonstrated how recovering individuals need narratives that make sense of past drug use and enable constructions of future, non-addict identities. However, there has not been much investigation into how these recovery narratives actually develop moment-to-moment in drug treatment. Building on the sociology of storytelling and ethnographic fieldwork conducted at two drug treatment institutions for young people in Denmark, this article argues that studying stories in the context of their telling brings forth novel insights. Through a narrative analysis of both 'the whats' (story content) and 'the hows' (storying process) the article presents four findings: (1) stories of change function locally as an institutional requirement; (2) professional drug treatment providers edit young people's storytelling through different techniques; (3) the narrative environment of the drug treatment institution shapes how particular stories make sense of the past, present and future; and (4) storytelling in drug treatment is an interactive achievement. A fine-grained analysis illuminates in particular how some stories on gender and drug use are silenced, while others are encouraged. The demonstration of how local narrative environments shape stories contributes to the general understanding of interactive storytelling in encounters between professionals and clients in treatment settings. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: PsycINFO
Full Text: Available from Wiley in Sociology of Health and Illness

13. Struggling with alcoholism.

Citation: Journal of Religion and Health, February 2015(No Pagination Specified), 0022-4197;1573-6571 (Feb 7, 2015)
Author(s): Ferrell, Donald R
Correspondence Address: Ferrell, Donald R.: The C. G. Jung Institute of New York, 28 E. 39th Street, New York, NY, US, 10016, ferrelld@earthlink.net
Abstract: Written conjointly by a psychoanalyst and his patient, this article was inspired by a poem and commentary written in the course of his analysis by a patient who was dealing with profound loss and the struggle to remain sober in the face of that loss. The article explores the influence of Swiss psychiatrist C. G. Jung upon Bill Wilson, co-founder of Alcoholics Anonymous, especially the discovery of both men that alcoholism is best treated by helping the alcoholic accept the helplessness and hopelessness that his/her addiction to alcohol generates and in developing a spiritual life based on a deep encounter with the numinous/divine and the ego's surrender to this Higher Power. The patient author, consistent with his commitment to the healing community of Alcoholics Anonymous and its principles and practices, will remain anonymous. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: 

Source: PsycINFO


Citation: Psychopharmacology, February 2015(No Pagination Specified), 0033-3158;1432-2072 (Feb 7, 2015)

Author(s): Ettenberg, Aaron; Fomenko, Vira; Kaganovsky, Konstantin; Shelton, Kerisa; Wenzel, Jennifer M

Correspondence Address: Ettenberg, Aaron: Behavioral Pharmacology Laboratory, Department of Psychological and Brain Sciences, University of California, Santa Barbara, CA, US, 93106-9660, aaron.ettenberg@psych.ucsb.edu

Institution: Behavioral Pharmacology Laboratory, Department of Psychological and Brain Sciences, University of California, Santa Barbara, CA, US; Behavioral Pharmacology Laboratory, Department of Psychological and Brain Sciences, University of California, Santa Barbara, CA, US; Behavioral Pharmacology Laboratory, Department of Psychological and Brain Sciences, University of California, Santa Barbara, CA, US; Behavioral Pharmacology Laboratory, Department of Psychological and Brain Sciences, University of California, Santa Barbara, CA, US; Behavioral Pharmacology Laboratory, Department of Psychological and Brain Sciences, University of California, Santa Barbara, CA, US; Behavioral Pharmacology Laboratory, Department of Psychological and Brain Sciences, University of California, Santa Barbara, CA, US

Abstract: Rationale: Acute cocaine administration produces an initial rewarding state followed by a dysphoric/anxiogenic "crash." Objective: The objective of this study was to determine whether individual differences in the relative value of cocaine's positive and negative effects would account for variations in subsequent drug self-administration. Methods: The dual actions of cocaine were assessed using a conditioned place test (where animals formed preferences for environments paired with the immediate rewarding effects of 1.0mg/kg i.v. cocaine or aversions of environments associated with the anxiogenic effects present 15-min postinjection) and a runway test (where animals developed approach-avoidance "retreat" behaviors about entering a goal box associated with cocaine delivery). Ranked scores from these two tests were then correlated with each other and with the escalation in the operant responding of the same subjects observed over 10 days of 1- or 6-h/day access to i.v. (0.4mg/inj) cocaine self-administration. Results: Larger place preferences were associated with faster runway start latencies (r s = -0.64), but not with retreat frequency or run times; larger place aversions predicted slower runway start times (r s = 0.62), increased run times (r s = 0.65), and increased retreats (r s = 0.62); response escalation was observed in both the 1- and 6-h self-administration groups and was associated with increased CPPs (r s = 0.58) but not CPAs, as well as with faster run times (r s = -0.60). Conclusions: Together, these data suggest that animals exhibiting a greater positive than negative response to acute (single daily injections of) cocaine are at the greatest risk for subsequent escalated cocaine self-administration, a presumed indicator of cocaine addiction. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Springer-Verlag Berlin Heidelberg; YEAR: 2015
15. Adolescent cannabis and tobacco use and educational outcomes at age 16: Birth cohort study.

Citation: Addiction, February 2015(No Pagination Specified), 0965-2140;1360-0443 (Feb 7, 2015)
Author(s): Stiby, Alexander I; Hickman, Matthew; Munafo, Marcus R; Heron, Jon; Yip, Vikki L; Macleod, John
Abstract: Abstract Aims To investigate the relationship between cannabis and tobacco use by age 15 and subsequent educational outcomes. Design Birth cohort study. Setting England. Participants The sample was drawn from the Avon Longitudinal Study of Parents and Children; a core sample of 1155 individuals had complete information on all the variables. Measurements The main exposures were cannabis and tobacco use at age 15 assessed in clinic by computer-assisted questionnaire and serum cotinine. The main outcomes were performance in standardized assessments at 16 [Key Stage 4, General Certificate of Secondary Education (GCSE)] in English and mathematics (mean scores), completion of five or more assessments at grade C level or higher and leaving school having achieved no qualifications. Analyses were sequentially adjusted for multiple covariates using a hierarchical approach. Covariates considered were: maternal substance use (ever tobacco or cannabis use, alcohol use above recommended limits); life course socio-economic position (family occupational class, maternal education, family income); child sex; month and year of birth; child educational attainment prior to age 11 (Key Stage 2); child substance use (tobacco, alcohol and cannabis) prior to age 15 and child conduct disorder. Findings In fully adjusted models both cannabis and tobacco use at age 15 were associated with subsequent adverse educational outcomes. In general, the dose-response effect seen was consistent across all educational outcomes assessed. Weekly cannabis use was associated negatively with English GCSE results [grade point difference (GPD), -5.93, 95% confidence interval (CI) = -8.34, -3.53] and with mathematics GCSE results (GPD, -6.91, 95% CI = -9.92, -3.89). Daily tobacco smoking was associated negatively with English GCSE (GPD, -11.90, 95% CI = -13.47, -10.33) and with mathematics GCSE (GPD, -16.72, 95% CI = -18.57, -14.86). The greatest attenuation of these effects was seen on adjustment for other substance use and conduct disorder. Following adjustment, tobacco appeared to have a consistently stronger effect than cannabis. Conclusions Both cannabis and tobacco use in adolescence are associated strongly with subsequent adverse educational outcomes. Given the non-specific patterns of association seen and the attenuation of estimates on adjustment, it is possible that these effects arise through non-causal mechanisms, although a causal explanation cannot be discounted. © 2015 Society for the Study of Addiction (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Authors.; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: Journal; Peer Reviewed Journal
Source: PsycINFO
Full Text: Available from Wiley in Addiction


Citation: Idiot's guides: Mindfulness., 2014 (2014)
Author(s): Burk, Domyo Sater
Institution: Bright Way Zen, Portland, OR, US
Language: English
Abstract: (from the cover) Mindfulness means being consciously present and aware, in the moment and in your life. Regular practice can teach you to be more conscious of and attentive to
your body, feelings, and patterns of thought and lead to greater knowledge and understanding of yourself. Even better, the positive effects of regular mindfulness are easy to achieve. In this helpful guide, you get: A look at what mindfulness is, how it works, and how to practice it daily; Guidance on alleviating anxiety, depression, anger, and addiction; Tips on using mindfulness to improve mental clarity and discipline and get over emotional hurdles; Advice on how mindfulness can improve communication in your relationships; and Advanced meditation methods to maximize the benefits of mindfulness. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Authored Book

**Subject Headings:**
- *Awareness*
- *Meditation*
- *Self Concept*
- *Self Help Techniques*
- *Mindfulness*

**Source:** PsycINFO

### 17. Abnormal perception, intellect, emotion, and will.

**Citation:** Why we do it; An elementary discussion of human conduct and related physiology., 1937(126-136) (1937)

**Author(s):** Mason, Edward C

**Institution:** University of Oklahoma School of Medicine, Oklahoma City, OK, US

**Language:** English

**Abstract:** (from the chapter) Each of the attributes, perception, intellect, emotion, and will, does not exist as an isolated, distinct, and separate entity, but, instead, all are interdependent upon each other for their mutual existence and expression. We have previously suggested that the normal development and proper training of these attributes in the youth are the best guarantee against the development of abnormal psychology. Distinct deficiencies or disturbances of perception, intellect, emotion, and will are observed. First: In cases with the lack of development of the organs which make possible these functions or in cases which have experienced a degeneration of such organs (morons, idiots, and imbeciles). Second: In those who have not received proper training through discipline of the emotions and will (spoiled children, psychopathic personality, moral insane). Third: In alcohol and drug addiction, the subject experiences abnormalities in all four attributes. Fourth: The delirium of fever and, also, direct head injuries are accompanied by a confused state of these attributes. Fifth; Certain individuals, who find the realities of life too difficult, develop a type of abnormal personality which is characterized by a permanent state of delirium. This chapter addresses the following topics: Illusion; Hallucination; Delusion; Paranoia; Obsession; Dissociation; Phobias; Tics; and Compulsion. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Authored Book

**Subject Headings:**
- *Abnormal Psychology*
- Antisocial Personality Disorder
- Cognitive Impairment
- Compulsions
- Delusions
- Dissociative Disorders
- Obsessions
- Paranoia (Psychosis)
- Phobias
- Tics
- Visual Hallucinations

**Source:** PsycINFO

### 18. Self-reported drug use and creativity: (Re)establishing layperson myths.
This study examined self-reported drug use (legal, illegal, and psychotropic) and creativity (using self-assessments, behavioral checklists, and a photo caption task). Drug usage was first analyzed using EFA and CFA; these factors were then entered into SEM analyses in order to predict creativity on each of the four measures while controlling for openness to experience. Although openness to experience was the strongest predictor of creativity on all scales, self-reported drug use did provide some incremental effects beyond personality on the creativity measures. Results are explained in terms of possible expectancy/placebo effects. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
2 perpetrating only. Heavy drinking and methamphetamine use each was associated significantly with experiencing and perpetrating IPV throughout the relationship as well as in the past 30 days. Rock/crack cocaine use was significantly associated with any history of experiencing and perpetrating IPV. Altogether, IPV rates in this sample of Black MSM couples equal or exceed those observed among women victimized by male partners as well as the general population of MSM. This exploratory study points to a critical need for further efforts to understand and address IPV among Black MSM. Similar to heterosexual IPV, results point to alcohol and illicit drug use treatment as important avenues to improve the health and social well-being of Black MSM.

(WhatINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Author(s); YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Blacks
*Drug Usage
*Intimate Partner Violence
*Male Homosexuality
*Same Sex Intercourse
Sexual Partners

Source: PsycINFO

20. Using general strain theory to explore the effects of prison victimization experiences on later offending and substance use.

Citation: The Prison Journal, March 2015, vol./is. 95/1(84-113), 0032-8855;1552-7522 (Mar 2015)
Author(s): Zweig, Janine M; Yahner, Jennifer; Visher, Christy A; Lattimore, Pamela K
Correspondence Address: Zweig, Janine M.: Urban Institute, 2100 M Street NW, Washington, DC, US, 20037, jzweig@urban.org
Language: English
Abstract: We examine the relationship between victimization during incarceration and the likelihood of former prisoners' subsequent criminal behavior and substance use from a general strain theory (GST) perspective. Data from the multi-site evaluation of the Serious and Violent Offender Reentry Initiative were used, involving interviews with 543 men and 168 women in 12 states at four time points: once before prison release and 3 times after release. Path analyses show support for GST by indicating that prisoners who are physically assaulted or threatened have negative emotional reactions to such experiences, specifically hostility and depression, which increases their likelihood of violent criminal behavior and substance use after release. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Criminal Behavior
*Prisons
*Recidivism
*Victimization
Drug Abuse
Violent Crime

Source: PsycINFO

21. Smoking increases risk of pain chronification through shared corticostraital circuitry.
Abstract:
Smoking is associated with increased incidence of chronic pain. However, the evidence is cross-sectional in nature, and underlying mechanisms remain unclear. In a longitudinal observational study, we examined the relationship between smoking, transition to chronic pain, and brain physiology. In 160 subjects with subacute back pain (SBP: back pain lasting 4-12 weeks, and no prior back pain [BP] for at least 1 year) pain characteristics, smoking status, and brain functional properties were measured repeatedly over 1 year. Sixty-eight completed the study, subdivided into recovering (SBPr, n = 31) and persisting (SBPp, n = 37), based on >20% decrease in BP over the year. Thirty-two chronic back pain (CBP: duration > 5 years) and 35 healthy controls were similarly monitored. Smoking prevalence was higher in SBP and CBP but not related to intensity of BP. In SBP, smoking status at baseline was predictive of persistence of BP 1 year from symptom onset (differentiating SBPp and SBPr with 0.62 accuracy). Smoking status combined with affective properties of pain and medication use improved prediction accuracy (0.82). Mediation analysis indicated the prediction of BP persistence by smoking was largely due to synchrony of fMRI activity between two brain areas (nucleus accumbens and medial prefrontal cortex, NAc-mPFC). In SBP or CBP who ceased smoking strength of NAc-mPFC decreased from precessation to postcessation of smoking. We conclude that smoking increases risk of transitioning to CBP, an effect mediated by corticostriatal circuitry involved in addictive behavior and motivated learning. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
A highly stressful life event (SLE) can elicit positive psychosocial growth, referred to as post-traumatic growth (PTG) among youth. We examined PTG and the number of SLEs for their influence on substance use behaviours among a sample of older, diverse alternative high school students participating in a drug prevention programme (n = 564; mean age = 16.8; 49% female; 65% Hispanic). Surveys assessed PTG, SLEs and substance use behaviours at the two-year follow-up. Multilevel regression models were run to examine the effect of PTG and the number of SLEs on frequency of substance use at the two-year follow-up, controlling for baseline substance use, sociodemographic variables, peer substance use, attrition propensity and treatment group. Greater PTG scores were associated with lower frequencies of alcohol use, getting drunk on alcohol, binge drinking, marijuana use and less substance abuse at the two-year follow-up, but not associated with cigarette or hard drug use. Also, PTG did not moderate the relationship between cumulative number of SLEs and substance use behaviours, rather PTG appears to be protective against negative effects of a single, life-altering SLE. Fostering PTG from a particularly poignant SLE may be useful for prevention programmes targeting alcohol, marijuana and substance abuse behaviours among high-risk youth. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
chapter on neuroanthropology, Mikulas' chapter on meditation attitude, Thurman and Torsney's chapter on meditation and self-regulation in children, and Reb and Choi's chapter on mindfulness in organizations. Apart from its high price, the book is recommended for researchers, clinicians, and students alike. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Electronic Collection
Subject Headings: *Meditation
*Mindfulness
Religious Beliefs
Self Regulation
Spirituality
Traditions
Source: PsycINFO

24. Computational framework explains how animals select actions with rewarding outcomes.

Citation: PLoS Biology, January 2015, vol./is. 13/1, 1544-9173;1545-7885 (Jan 6, 2015)
Author(s): Weaver, Janelle
Correspondence Address: Weaver, Janelle, weaver.janelle@gmail.com
Language: English
Abstract: Comments on an article by Kevin Gurney et al. (see record 2015-01180-001). The authors built a computational model that shows how the brain's internal signal for outcome changes the strength of neuronal connections, leading to the selection of rewarded actions and the suppression of unrewarded actions. By bridging the gap between the intricate subtleties of individual neuronal connections and the behavior of the whole animal, the model reveals how several brain signals work together to shape the input from the cortex to the basal ganglia at the interface between actions and their outcomes. Taken together, the results of the study provide strong support for the hypothesis that cortical inputs to dopamine-releasing neurons in the striatum are crucial for learning the association between action and outcome. Moving forward, the model provides a common framework in which to place new findings on all aspects of learning from outcomes. In the clinical realm, it could also reveal novel insights into the mechanisms behind motor disorders and shed light on abnormal learning related to diseases such as addiction. Moreover, the work highlights the importance of the striatum, not just the cortex, in high-level learning that is crucial for survival, possibly explaining why the basal ganglia are highly evolutionarily conserved across vertebrate species. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Country of Publication: STATEMENT: This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.; HOLDER: Janelle Weaver; YEAR: 2015
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Neural Plasticity
*Neural Receptors
Operant Conditioning
Reinforcement
Source: PsycINFO
Available from ProQuest in PLoS Biology; Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

25. Comorbid bipolar disorder and borderline personality disorder and substance use disorder.

Citation: Journal of Nervous and Mental Disease, January 2015, vol./is. 203/1(54-57), 0022-3018;1539-736X (Jan 2015)
Author(s): Hidalgo-Mazzei, Diego; Walsh, Emily; Rosenstein, Lia; Zimmerman, Mark

Correspondence Address: Hidalgo-Mazzei, Diego: Department of Psychiatry and Psychology, Institute of Neuroscience, Hospital Clinic Barcelona, University of Barcelona, Catalonia, Villarroel 170, Barcelona, Spain, 08036, dahidalg@clinic.ub.es

Institution: Department of Psychiatry and Psychology, Institute of Neuroscience, Hospital Clinic Barcelona, IDIBAPS, CIBERSAM, University of Barcelona, Catalonia, Barcelona, Spain; Department of Psychiatry and Human Behavior, Brown Medical School, Providence, RI, US; Department of Psychiatry and Human Behavior, Brown Medical School, Providence, RI, US; Department of Psychiatry and Human Behavior, Brown Medical School, Providence, RI, US

Language: English

Abstract: Bipolar disorder (BD) and borderline personality disorder (BPD) are disabling and life-threatening conditions. Both disorders share relevant comorbidities, particularly the risk of having a lifetime substance use disorder (SUD). We tested the hypothesis that patients with both BD type I (BDI) or II (BDII) and BPD would have a higher rate of SUD than would patients with either disorder alone. A total of 3651 psychiatric patients were evaluated with semistructured diagnostic interviews for Diagnostic and Statistical Manual of Mental Disorders, 4th Edition, axis I and II disorders. A total of 63 patients were diagnosed with both BD and BPD, and these patients were significantly more likely to have a SUD compared with BDII patients without BPD (76% vs. 50%, X2 = 9.69, p < 0.01). There were no differences when comparing the comorbid group with BPD patients without BD (76% vs. 71%, X2 = 0.519, p = 0.4). The present study shows the importance of taking both BPD and BD into consideration insofar as the co-occurrence of the disorders increased the risk of having a SUD especially when compared with BDII alone. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Lippincott Williams & Wilkins; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Bipolar Disorder
*Borderline Personality Disorder
*Comorbidity
*Drug Abuse
Drug Addiction
Psychiatric Patients

Source: PsycINFO

Full Text: Available from Ovid in Journal of Nervous and Mental Disease


Citation: Addiction Research & Theory, February 2015, vol./is. 23/1(81-88), 1606-6359;1476-7392 (Feb 2015)

Author(s): Randle, Jason M; Stroink, Mirella L; Nelson, Connie H

Correspondence Address: Randle, Jason M.: Department of Psychology, Lakehead University, 955 Oliver Road, Thunder Bay, ON, Canada, P7B 5E1, jrandle@lakeheadu.ca

Institution: Department of Psychology, Lakehead University, Thunder Bay, ON, Canada; Department of Psychology, Lakehead University, Thunder Bay, ON, Canada; School of Social Work, Lakehead University, Thunder Bay, ON, Canada

Language: English

Abstract: Abstract This paper explores addiction through the lens of complex adaptive systems theory, as an emergent, non-linear phenomenon that undergoes cyclical patterns of stability and change. Particularly, an addiction is a behavioural pattern that emerges through the dynamic interactions of numerous variables operating both within the individual and in the environment. Furthermore, we argue that an addiction moves through the four phases of the adaptive cycle and exists at a given scale nested within a panarchy of other complex systems. Each of these complex adaptive systems is moving
through its own adaptive cycle at faster and slower rates, affecting the course of addiction in various ways. We conclude this work by suggesting that forthcoming addiction interventions and research may benefit from the consideration that addiction is a function of three separate, but related, adaptive cycles; the addiction cycle itself; a transitory cycle, and a final cycle in which the individual is actively responsible for the maintenance of his or her own recovery. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Adaptation
*Addiction
*Systems Theory
Cognitive Complexity
Source: PsycINFO
Full Text: Available from Informa Healthcare in Addiction Research and Theory

27. Psychometric properties of the Recovery Assessment Scale in a sample with substance use disorder.

Citation: Addiction Research & Theory, February 2015, vol./is. 23/1(71-80), 1606-6359;1476-7392 (Feb 2015)
Author(s): Cale, Emily L; Deane, Frank P; Kelly, Peter J; Lyons, Geoffrey C. B
Correspondence Address: Lyons, Geoffrey C. B.: School of Psychology, Australian Catholic University, Edward Clancy Building, Mount Saint Mary Campus, Locked Bag 2002, Strathfield, NSW, Australia, 2135, Geoff.Lyons@acu.edu.au
Institution: Illawarra Institute for Mental Health, University of Wollongong, Wollongong, NSW, Australia; Illawarra Institute for Mental Health, University of Wollongong, Wollongong, NSW, Australia; School of Psychology, University of Wollongong, Wollongong, NSW, Australia; School of Psychology, Australian Catholic University, Strathfield, NSW, Australia
Language: English
Abstract: Abstract Background: Conceptualisations of recovery from substance use disorder (SUD) and mental illness overlap significantly, and the rate of comorbidity of these problems is high. This study investigated the psychometric properties of the Recovery Assessment Scale (RAS), a measure originally developed for individuals with mental illness. Method: A sample of 1094 people with SUD attending residential treatment services provided by the Australian Salvation Army completed the RAS and other outcome measures at admission. Results: Confirmatory factor analysis (CFA) indicated a poor fit of the data to the five factor solution previously identified in mental illness samples. Exploratory factor analysis, however, produced three of the five factors included in the CFA, and two factors which arranged constructs in a slightly different manner from previous factor analytic studies in samples with mental illness. Correlations of these factors with other symptom distress and recovery measures indicated satisfactory convergent and divergent validity. Conclusions: The study provides modest support for the use of the RAS in groups with SUD. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
28. "I’m not an alcoholic anymore": Getting and staying sober without meetings.

Citation: Addiction Research & Theory, February 2015, vol./is. 23/1(60-70), 1606-6359;1476-7392 (Feb 2015)

Author(s): Rayburn, Rachel L

Correspondence Address: Rayburn, Rachel L.: Department of Public Policy, Indiana University - Purdue University Fort Wayne, Fort Wayne, IN, US, rayburnr@ipfw.edu

Institution: Department of Public Policy, Indiana University - Purdue University Fort Wayne, Fort Wayne, IN, US

Language: English

Abstract: Abstract This project studies desistance from substance abuse and 12-step meetings. In the early 1990s, The New Orleans Homeless Substance Abusers Project (NOHSAP) was created to uncover treatment strategies for homeless substance abusers. The program ran for 3 years with 670 homeless New Orleans individuals going through treatment. This project involved finding these individuals and re-interviewing them (19 years later). The methodology for this study consists of follow-up interviews with 32 individuals in a variety of settings including at their homes and in prisons. Individuals interviewed tended to be sober, but disaffiliated with 12-step meetings. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcohol Rehabilitation 
*Alcoholism 
*Homeless 
*Social Issues 
*Treatment

Source: PsycINFO

Full Text: Available from Informa Healthcare in Addiction Research and Theory

29. Measuring change in cannabis use.

Citation: Addiction Research & Theory, February 2015, vol./is. 23/1(43-49), 1606-6359;1476-7392 (Feb 2015)

Author(s): Adamson, Simon J; Kay-Lambkin, Frances J; Baker, Amanda; Frampton, Chris M. A; Sellman, Doug; Lewin, Terry J

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Institution: Department of Psychological Medicine, National Addiction Centre, University of Otago, Christchurch, New Zealand; National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW, Australia; NHMRC, Centre of Research Excellence in Mental Health and Substance Use, University of Newcastle, Callaghan, NSW, Australia; Department of Psychological Medicine, National Addiction Centre, University of Otago, Christchurch, New Zealand; Department of Psychological Medicine, National Addiction Centre, University of Otago, Christchurch, New Zealand; NHMRC, Centre of Research Excellence in Mental Health and Substance Use, University of Newcastle, Callaghan, NSW, Australia

Language: English

Abstract: Abstract We examined the ability of the Cannabis User Disorders Identification Test - Revised (CUDIT-R) to detect change in a treatment sample, including correlation with changes in other clinically relevant areas of functioning, and to determine reliable and clinically significant change thresholds. 133 cannabis-using patients taking part in a treatment trial for concurrent substance use and mood disorder were administered the
8-item CUDIT-R at baseline, 6 and 12 months, in addition to assessment of current cannabis use disorder, mood, alcohol use, motivation and employment status. Significant reductions in CUDIT-R scores were observed and were correlated with change in cannabis diagnosis, and improvement in mood. Higher motivation at baseline predicted greater reduction in CUDIT-R score. Reliable change was identified as occurring when CUDIT-R score changed by two or more, while clinically significant change, benchmarked against an increase or decrease of one DSM-IV cannabis dependence symptom, was equated to a CUDIT-R score changing by 3 or more points. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
were very high in both samples. Conclusions: Both survey modes provided accurate relative prevalence estimates, but further research should explore determinants of higher prevalence rates among online participants and respondents' consistent tendency to overestimate perceived population prevalence. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Addiction *Drug Abuse *Epidemiology
Source: PsycINFO
Full Text: Available from Informa Healthcare in Addiction Research and Theory

31. A biaxial formulation of the recovery construct.

Citation: Addiction Research & Theory, February 2015, vol./is. 23/1(5-9), 1606-6359;1476-7392 (Feb 2015)
Author(s): Kelly, John Francis; Hoeppner, Bettina
Correspondence Address: Kelly, John Francis: Department of Psychiatry, MGH Center for Addiction Medicine, 60 Staniford Street, Boston, MA, US, 02114, jkelly11@mgh.harvard.edu
Institution: Department of Psychiatry, MGH Center for Addiction Medicine, Boston, MA, US; Department of Psychiatry, MGH Center for Addiction Medicine, Boston, MA, US
Language: English
Abstract: The term "recovery" in the substance use disorder (SUD) field has been used generally and non-technically to describe global improvements in health and functioning typically following successful abstinence. More recently, however, in an attempt to reduce the stigma and negative public and clinical perceptions regarding remission potential for individuals suffering from SUD, "recovery" has been used more strategically to instil hope and to serve as an organizing paradigm that has inspired a growing recovery movement. In addition, with "recovery" gaining momentum internationally within governments' national health care agencies, there is increasing pressure to operationalise this construct as without it, it is difficult to develop, commission, and deliver the tailored packages of recovery support services needed to help individuals suffering from SUD. Initial attempts to define recovery and delineate its constituent parts have agreed on major elements, but differ on important subtleties; generally lacking has been a conceptual grounding of these definitions. The goal of this article is to promote further thought and debate by offering a conceptual basis for, and description of, the recovery construct that we hope enhances clarity and measurability. To accomplish this, we review existing definitions of recovery and offer a simplified bi-axial formulation and definition, reciprocal in nature, and grounded in stress and coping theory, which mirrors conceptually original formulations of the addiction syndrome. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Addiction *Drug Abuse *Policy Making *Recovery (Disorders) *Remission (Disorders)
Source: PsycINFO
Full Text: Available from Informa Healthcare in Addiction Research and Theory

32. "Big Gambling": The rise of the global industry-state gambling complex.
Evidence Services | library.nhs.uk

Citation: Addiction Research & Theory, February 2015, vol./is. 23(1-4), 1606-6359;1476-7392 (Feb 2015)

Author(s): Markham, Francis; Young, Martin

Correspondence Address: Markham, Francis: Fenner School of Environment and Society, Australian National University, Building 141, Linnaeus Way, Canberra, ACT, Australia, 0200, francis.markham@anu.edu.au

Institution: Fenner School of Environment and Society, Australian National University, Canberra, ACT, Australia; School of Tourism and Hospitality Management, Southern Cross University, Coffs Harbour, NSW, Australia

Language: English

Abstract: The growth of "Big Gambling" and its class dynamics in Australia have been mirrored across the Western world. Extrapolating from the political economy of the Australia experience, we argue that the class-project of gambling liberalisation and exploitation of the working classes is increasingly global. In many countries beyond Australia, gambling opportunities are concentrated poorer suburbs. Big Gambling's political influence is similarly global. Witness, for example, the so-called "Sheldon Primary" in which an American casino multi-billionaire and worlds 10th richest man offered his considerable financial backing to a political candidate who would protect his business interests. (PsycINFO Database Record (c) 2015 APA, all rights reserved)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Addiction *Economy *Gambling Business History Politics

Source: PsycINFO

Full Text: Available from Informa Healthcare in Addiction Research and Theory

33. "The Montreal Cognitive Assessment (MoCA) is superior to the Mini Mental State Examination (MMSE) in detection of Korsakoff's syndrome": Erratum.

Citation: The Clinical Neuropsychologist, November 2014, vol./is. 28/8(1398-1399), 1385-4046;1744-4144 (Nov 2014)

Author(s): Oudman, Erik; Postma, Albert; Van der Stigchel, Stefan; Appelhof, Britt; Wijnia, Jan W; Nijboer, Tanja C. W

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Institution: Department of Experimental Psychology, Helmholtz Institute, Utrecht University, Utrecht, Netherlands; Department of Experimental Psychology, Helmholtz Institute, Utrecht University, Utrecht, Netherlands; Department of Experimental Psychology, Helmholtz Institute, Utrecht University, Utrecht, Netherlands; Department of Experimental Psychology, Helmholtz Institute, Utrecht University, Utrecht, Netherlands; Slingedael Korsakoff Center, Rotterdam, Netherlands; Department of Experimental Psychology, Helmholtz Institute, Utrecht University, Utrecht, Netherlands

Language: English

Abstract: Reports an error in "The Montreal Cognitive Assessment (MoCA) is superior to the Mini Mental State Examination (MMSE) in detection of Korsakoff's syndrome" by Erik Oudman, Albert Postma, Stefan Van der Stigchel, Britt Appelhof, Jan W. Wijnia and Tanja C. W. Nijboer (The Clinical Neuropsychologist, 2014[Oct], Vol 28[7], 1123-1132). When the above article was published, the layout of Table 2 made the data difficult to interpret. A clearer version is published in the erratum. (The following abstract of the
original article appeared in record 2014-44888-004). The Montreal Cognitive Assessment (MoCA) and Mini Mental State Examination (MMSE) are brief screening instruments for cognitive disorders. Although these instruments have frequently been used in the detection of dementia, there is currently little knowledge on the validity to detect Korsakoff's syndrome (KS) with both screening instruments. KS is a chronic neuropsychiatric disorder associated with profound declarative amnesia after thiamine deficiency. A representative sample of 30 patients with KS and 30 age-, education-, gender- and premorbid-IQ-matched controls was administered the MoCA and MMSE. The area under the receiver operating characteristic curve (AUC) was calculated in addition to the sensitivity, specificity, positive predictive value, and negative predictive value for various cut-off points on the MoCA and MMSE. Compared with the MMSE, the MoCA demonstrated consistently superior psychometric properties and discriminant validity-AUC: MoCA (1.00 SE .003) and MMSE (0.92 SE .033). When applying a cut-off value as suggested in the manuals of both instruments, the MMSE (< 24) misdiagnosed 46.7% of the patients, while the MoCA (< 26) diagnosed all patients correctly. As a screening instrument with the most optimal cut-offs, the MoCA (optimal cutoff point 26/27, 83.3% correctly diagnosed) was superior to the MMSE (optimal cutoff point 26/27, 83.3% correctly diagnosed). We conclude that both tests have adequate psychometric properties as a screening instrument for the detection of KS, but the MoCA is superior to the MMSE for this specific patient population. (PsycINFO Database Record (c) 2015 APA, all rights reserved)
35. Effects of reward sensitivity and regional brain volumes on substance use initiation in adolescence.

Abstract: This longitudinal study examines associations between baseline individual differences and developmental changes in reward [i.e. behavioral approach system (BAS)] sensitivity and relevant brain structures' volumes to prospective substance use initiation during adolescence. A community sample of adolescents ages 15-18 with no prior substance use was assessed for substance use initiation (i.e. initiation of regular alcohol use and/or any use of other substances) during a 2-year follow-up period and for alcohol use frequency in the last year of the follow-up. Longitudinal 'increases' in BAS sensitivity were associated with substance use initiation and increased alcohol use frequency during the follow-up. Moreover, adolescents with smaller left nucleus accumbens at baseline were more likely to initiate substance use during the follow-up period. This study provides support for the link between developmental increases in reward sensitivity and substance use initiation in adolescence. The study also emphasizes the potential importance of individual differences in volumes of subcortical regions and their structural development for substance use initiation during adolescence. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
Dopamine, urges to smoke, and the relative salience of drug versus non-drug reward.

Citation: Social Cognitive and Affective Neuroscience, January 2015, vol./is. 10/1(85-92), 1749-5016;1749-5024 (Jan 2015)

Author(s): Freeman, Tom P; Das, Ravi K; Kamboj, Sunjeev K; Curran, H. Valerie

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Language: English

Abstract: When addicted individuals are exposed to drug-related stimuli, dopamine release is thought to mediate incentive salience attribution, increasing attentional bias, craving and drug seeking. It is unclear whether dopamine acts specifically on drug cues versus other rewards, and if these effects correspond with craving and other forms of cognitive bias. Here, we administered the dopamine D2/D3 agonist pramipexole (0.5 mg) to 16 tobacco smokers in a double-blind placebo-controlled crossover design. Visual fixations on smoking and money images were recorded alongside smoking urges and fluency tasks. Pramipexole attenuated a marked bias in initial orienting towards smoking relative to money but did not alter a maintained attentional bias towards smoking. Pramipexole decreased urges to smoke retrospectively after the task but not on a state scale. Fewer smoking words were generated after pramipexole but phonological and semantic fluency were preserved. Although these treatment effects did not correlate with each other, changes in initial orienting towards smoking and money were inversely related to baseline scores. In conclusion, pramipexole can reduce the salience of an addictive drug compared with other rewards and elicit corresponding changes in smoking urges and cognitive bias. These reward-specific and baseline-dependent effects support an 'inverted-U' shaped profile of dopamine in addiction. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
Recent evidence has shown that a single maintenance dose of heroin attenuates psychophysiological stress responses in heroin-dependent patients, probably reflecting the effectiveness of heroin-assisted therapies for the treatment of severe heroin addiction. However, the underlying neural circuitry of these effects has not yet been investigated. Using a cross-over, double-blind, vehicle-controlled design, 22 heroin-dependent and heroin-maintained outpatients from the Centre of Substance Use Disorders at the University Hospital of Psychiatry in Basel were studied after heroin and placebo administration, while 17 healthy controls from the general population were included for placebo administration only. Functional magnetic resonance imaging was used to detect brain responses to fearful faces and dynamic causal modelling was applied to compute fear-induced modulation of connectivity within the emotional face network. Stress responses were assessed by hormone releases and subjective ratings. Relative to placebo, heroin acutely reduced the fear-induced modulation of connectivity from the left fusiform gyrus to the left amygdala and from the right amygdala to the right orbitofrontal cortex in dependent patients. Both of these amygdala-related connectivity strengths were significantly increased in patients after placebo treatment (acute withdrawal) compared to healthy controls, whose connectivity estimates did not differ from those of patients after heroin injection. Moreover, we found positive correlations between the left fusiform gyrus to amygdala connectivity and different stress responses, as well as between the right amygdala to orbitofrontal cortex connectivity and levels of craving. Our findings indicate that the increased amygdala-related connectivity during fearful face processing after the placebo treatment in heroin-dependent patients transiently normalizes after acute heroin maintenance treatment. Furthermore, this study suggests that the assessment of amygdala-related connectivity during fear processing may provide a prognostic tool to assess stress levels in heroin-dependent patients and to quantify the efficacy of maintenance treatments in drug addiction. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
38. Reduced anterior insula, enlarged amygdala in alcoholism and associated depleted von Economo neurons.

Citation: Brain: A Journal of Neurology, January 2015, vol./is. 138/1(69-79), 0006-8950;1460-2156 (Jan 1, 2015)

Author(s): Senatorov, Vladimir V; Damadzic, Ruslan; Mann, Claire L; Schwandt, Melanie L; George, David T; Hommer, Daniel W; Heilig, Markus; Momenan, Reza

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Institution: Section on Brain Electrophysiology and Imaging, Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, NIH, Bethesda, MD, US; Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, NIH, Bethesda, MD, US; Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, NIH, Bethesda, MD, US; Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, NIH, Bethesda, MD, US; Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, NIH, Bethesda, MD, US; Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, NIH, Bethesda, MD, US; Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, NIH, Bethesda, MD, US; Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, NIH, Bethesda, MD, US; Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, NIH, Bethesda, MD, US; Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, NIH, Bethesda, MD, US; Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, NIH, Bethesda, MD, US; Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, NIH, Bethesda, MD, US; Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, NIH, Bethesda, MD, US; Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, NIH, Bethesda, MD, US; Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, NIH, Bethesda, MD, US; Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, NIH, Bethesda, MD, US; Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, NIH, Bethesda, MD, US; Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, NIH, Bethesda, MD, US; Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, NIH, Bethesda, MD, US;

Language: English

Abstract: The insula, a structure involved in higher order representation of interoceptive states, has recently been implicated in drug craving and social stress. Here, we performed brain magnetic resonance imaging to measure volumes of the insula and amygdala, a structure with reciprocal insular connections, in 26 alcohol-dependent patients and 24 healthy volunteers (aged 22-56 years, nine females in each group). We used an established morphometry method to quantify total and regional insular volumes. Volumetric measurements of the amygdala were obtained using a model-based segmentation/registration tool. In alcohol-dependent patients, anterior insula volumes were bilaterally reduced compared to healthy volunteers (left by 10%, right by 11%, normalized to total brain volumes). Furthermore, alcohol-dependent patients, compared with healthy volunteers, had bilaterally increased amygdala volumes. The left amygdala was increased by 28% and the right by 29%, normalized to total brain volumes. Postmortem studies of the anterior insula showed that the reduced anterior insular volume may be associated with a population of von Economo neurons, which were 60% diminished in subjects with a history of alcoholism (n = 6) as compared to subjects without a history of alcoholism (n = 6) (aged 32-56 years, all males). The pattern of neuroanatomical change observed in our alcoholdependent patients might result in a loss of top-down control of amygdala function, potentially contributing to impaired social cognition as well as an inability to control negatively reinforced alcohol seeking and use. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Citation: Journal of the Association for Music & Imagery, 2014, vol./is. 14/(105-123), 1098-8009 (2014)

Author(s): Yawney, Ruta

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Institution: Association for Music and Imagery, Japan

Language: English

Abstract: This case study integrates the use of client-centered verbal psychotherapy with The Bonny Method of Guided Imagery and Music (GIM) with a 48-year-old male client with alcohol use disorder across nine sessions. The pairing of these two approaches empowered him towards being an active participant in his own healing and assisted him in experiencing his life from a new perspective. The imagery from his GIM sessions was used as a vehicle for discussion and self-expression, putting him in touch with his innate sense of spirituality so that he could begin to relate to himself and to others with compassion and acceptance, which is an essential part of the healing journey in recovery. In addition, he began the process towards resolution of issues from his childhood of loss and trauma. The paper concludes with a recommendation that GIM and client-centered verbal therapy be integrated into the multidisciplinary approach in the field of addiction recovery. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Association for Music and Imagery; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse *Guided Imagery *Psychotherapy Music

Source: PsycINFO

40. Multiple compound-related adverse properties contribute to liver injury caused by endothelin receptor antagonists.

Citation: The Journal of Pharmacology and Experimental Therapeutics, February 2015, vol./is. 352/2(281-290), 0022-3565;1521-0103 (Feb 2015)

Author(s): Kenna, J. Gerry; Stahl, Simone H; Eakins, Julie A; Foster, Alison J; Andersson, Linda C; Bergare, Jonas; Billger, Martin; Elebring, Marie; Elmore, Charles S; Thompson, Richard A

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Language: English

Abstract: Drug-induced liver injury has been observed in patients treated with the endothelin receptor antagonists sitaxentan and bosentan, but not following treatment with
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ambrisentan. The aim of our studies was to assess the possible role of multiple contributory mechanisms in this clinically relevant toxicity. Inhibition of the bile salt export pump (BSEP) and multidrug resistance-associated protein 2 was quantified using membrane vesicle assays. Inhibition of mitochondrial respiration in human liver-derived HuH-7 cells was determined using a Seahorse XFe96 analyzer. Cytochrome P450 (P450)-independent and P450-mediated cell toxicity was assessed using transfected SV40-T-antigen-immortalized human liver epithelial (THLE) cell lines. Exposure-adjusted assay ratios were calculated by dividing the maximum human drug plasma concentrations by the IC50 or EC50 values obtained in vitro. Covalent binding (CVB) of radiolabeled drugs to human hepatocytes was quantified, and CVB body burdens were calculated by adjusting CVB values for fractional drug turnover in vitro and daily therapeutic dose. Sitaxentan exhibited positive exposure-adjusted signals in all five in vitro assays and a high CVB body burden. Bosentan exhibited a positive exposure-adjusted signal in one assay (BSEP inhibition) and a moderate CVB body burden. Ambrisentan exhibited no positive exposure-adjusted assay signals and a low CVB body burden. These data indicate that multiple mechanisms contribute to the rare, but potentially severe liver injury caused by sitaxentan in humans; provide a plausible rationale for the markedly lower propensity of bosentan to cause liver injury; and highlight the relative safety of ambrisentan. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The American Society for Pharmacology and Experimental Therapeutics; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Therapy
*Liver
*N-Methyl-D-Aspartate
*Alcoholism
*Injuries
Source: PsycINFO

41. Case four: Albert Thornley.
Citation: The individual criminal, Vol. 1., 1935(144-204) (1935)
Author(s): Karpman, Ben
Language: English
Abstract: (from the chapter) The patient, whom we shall call Thornley, is a small white male, age thirty-three, charged with impersonating a United States officer and attempting to extort money. He has a long record of many conflicts with law, imprisonment, and many hospitalizations in psychiatric institutions, where he was usually diagnosed as suffering from constitutional psychopathy, with epilepsy and drug addiction as other possibilities. The physical examination is negative beyond some suggestion of hypopituitarism, because of his peculiarly shaped head and the short skeleton. (PsycINFO Database Record (c) 2015 APA, all rights reserved)
Publication Type: Book; Authored Book
Subject Headings: *Criminals
*Drug Addiction
*Incarceration
*Psychiatric Hospitalization
*Psychopathy
Epilepsy
Hypopituitarism
Physical Examination
Psychiatric Hospitals
Source: PsycINFO

42. A case of hypochondriasis with dexamethasone and pheniramine dependence.
Citation: Journal of Substance Use, February 2015, vol./is. 20/1(73-75), 1465-9891;1475-9942 (Feb 2015)

Author(s): Prakash, Sathya

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Institution: Department of Psychiatry, All India Institute of Medical Sciences, New Delhi, India

Language: English

Abstract: Presents a case report of a 22 year old unmarried male, studying in a technical course and residing in a small town in northern India. He was referred for de-addiction of intravenous dexamethasone, gentamicin and pheniramine besides nicotine products which he was using for almost 4 years. He additionally complained of certain "allergic problems" for past the 4 years and "bone problems" for 6 months. The problems first began when the patient required a blood transfusion following an accident. Patient started having itching sensation in the groin and dorsum of leg with scaling, ring-shaped lesions. The patient began to think that it must have been due to allergic reaction to the blood transfusion. On his next visit, he asked for blood investigations which came out to be normal. He next visited a doctor who prescribed him a combination of tablet, cetirizine, pheniramine, dexamethasone and cotrimoxazole, all to be taken together along with a mixture of 1ml each of dexamethasone, gentamicin and pheniramine. Physical examination revealed mild puffiness of face and fullness of neck and upper back in addition to skin lesions consistent with tinea. The report serves to draw the attention of clinicians to the effects of various medications that patients with hypochondriasis might have taken besides the interesting clinical presentation. (PsycINFO Database Record (c) 2015 APA, all rights reserved)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Dexamethasone
*Hypochondriasis
Blood Transfusion
Drug Dependency
Steroids

Source: PsycINFO

Full Text: Available from Informa Healthcare in Journal of Substance Use

43. Do medical treatments increase the risk of substance abuse in older people with dementia.

Citation: Journal of Substance Use, February 2015, vol./is. 20/1(69-72), 1465-9891;1475-9942 (Feb 2015)

Author(s): Ataollahi Eshkoor, Sima; Hamid, Tengku Aizan; Nudin, Siti Sa'adiah Hassan; Mun, Chan Yoke

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Language: English

Abstract: The current study aims to determine the association between medical treatments and the risk of substance abuse in the elderly with dementia. The research was conducted on Malaysian elderly who were demented and non-institutionalized. The study was a national cross sectional survey that included 1210 non-institutionalized Malaysian elderly with dementia. The Multiple Logistic Regression Model was applied to predict the risk of substance abuse in respondents. The prevalence of substance abuse was approximately
57.9% among subjects. Furthermore, medical treatment (OR = 1.88, 95% CI: 1.37-2.59), ethnic non-Malay (OR = 1.44, 95% CI: 1.12-1.84) and male sex (OR = 4.64; 95% CI: 3.42-6.29) significantly increased substance abuse after adjusting for socio-demographic factors. The results showed that age, marital status and educational level did not predict significantly the risk of substance abuse in samples (p > 0.05). It was concluded that male sex, medical treatment and ethnic non-Malay can increase the risk of substance abuse in the older people with dementia. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Aging  
*Dementia  
*Drug Abuse  
Treatment
Source: PsycINFO
Full Text: Available from Informa Healthcare in *Journal of Substance Use*

44. An exploratory qualitative study seeking participant views evaluating group Cognitive Behavioral Therapy preparation for alcohol detoxification.

Citation: Journal of Substance Use, February 2015, vol./is. 20/1(61-68), 1465-9891;1475-9942 (Feb 2015)
Author(s): Croxford, Anna; Notley, Caitlin Jade; Maskrey, Vivienne; Holland, Richard; Kouimtsidis, Christos
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Institution: Camden and Islington Mental Health Trust, London, United Kingdom; School of Medicine, Health Policy & Practice, University of East Anglia, Norwich, United Kingdom; School of Medicine, Health Policy & Practice, University of East Anglia, Norwich, United Kingdom; School of Medicine, Health Policy & Practice, University of East Anglia, Norwich, United Kingdom; School of Medicine, Health Policy & Practice, University of East Anglia, Norwich, United Kingdom; School of Medicine, Health Policy & Practice, University of East Anglia, Norwich, United Kingdom; School of Medicine, Health Policy & Practice, University of East Anglia, Norwich, United Kingdom; School of Medicine, Health Policy & Practice, University of East Anglia, Norwich, United Kingdom; School of Medicine, Health Policy & Practice, University of East Anglia, Norwich, United Kingdom; School of Medicine, Health Policy & Practice, University of East Anglia, Norwich, United Kingdom; School of Medicine, Health Policy & Practice, University of East Anglia, Norwich, United Kingdom; School of Medicine, Health Policy & Practice, University of East Anglia, Norwich, United Kingdom
Language: English
Abstract: Aims: There is a strong consensus that detoxification from alcohol should be planned. Six sessions of Group Cognitive Behavioral Therapy as structured preparation for detoxification for alcohol dependence have been developed and evaluated. To our knowledge this is the only structured preparation intervention reported in the literature. The aim of this study was to provide a client centered evaluation of this intervention to build upon initial quantitative evidence. Methods: Eleven telephone and two face to face qualitative interviews were conducted in four community alcohol teams in South England. Detailed inductive coding, and coding around CBT concepts, of all transcripts was undertaken. Participants were purposively sampled after completion of the six week group intervention. Results: Key benefits of group attendance from the participant perspective included not feeling “alone”, being supported by, and supporting peers. Participants demonstrated self-efficacy and coping strategies for reducing drinking and managing high-risk situations. Some reported pre-group anxiety, or difficult group experiences due to disruptive clients. Conclusions: Although the study has limitations, the intervention appears to be well accepted, and appears to prepare participants for detoxification. These exploratory findings suggest that both generic groups as well as theory specific factors are important. Effectiveness and cost-effectiveness of the intervention need to be further assessed. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
45. Attitudes of healthcare professionals in a general hospital to patients with substance misuse disorders.

Citation: Journal of Substance Use, February 2015, vol./is. 20/1(56-60), 1465-9891;1475-9942 (Feb 2015)

Author(s): Raistrick, Duncan S; Tober, Gillian W; Unsworth, Sally L

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Institution: Leeds Addiction Unit, Leeds, United Kingdom; Leeds Addiction Unit, Leeds, United Kingdom; Leeds Addiction Unit, Leeds, United Kingdom

Language: English

Abstract: Aims and method: To repeat a survey (reported 2007) of the attitudes of staff in a general hospital setting towards working with people who have substance misuse problems. Therapeutic attitude and the frequency of undertaking tasks related to dealing with substance misuse problems were measured using a modified version of the Alcohol and Alcohol Problems Perception Questionnaire (AAPPQ). The questionnaire was given to staff on wards in general hospitals where people with substance misuse problems are commonly admitted. Results: The questionnaire return rate of 24% was lower than 2007 and the possible reasons are discussed. Doctors, nurses and healthcare assistants all reported low levels of therapeutic commitment and lower than 2007. Older doctors scored the lowest and younger doctors highest. Brief training seemed to have a positive effect. Implications: The authors conclude that there should be a policy shift away from trying to "piggy back" care of people with substance misuse problems onto practitioners in other clinical specialties. Although addiction problems are found in most areas of health and social care, the role of staff in treating addiction is limited - effective substance misuse treatment is best delivered by trained addiction practitioners. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse *Health Personnel Attitudes *Hospitals Therapeutic Alliance

Source: PsycINFO

Full Text: Available from Informa Healthcare in Journal of Substance Use
Abstract: Introduction: There is little known about illegal drug taking among students in further and higher education in the UK. As a result, some of the most fundamental questions about use of illegal drugs among students remain unanswered. The current research aims to answer some of these questions by examining drug use behavior among a national sample of full-time college and university students. Methods: The data used for the analysis came from the Crime Survey for England and Wales (CSEW) 2010-2011. The CSEW is a national general household survey of young people and adults. A random sample of ~26 000 students and non-students was asked questions on drug misuse. Results: Students were 4.3 times more likely than non-students to have consumed ketamine in the last 12 months. Students who frequently visited clubs were 3.4 times more likely to take drugs than those who reported less frequent night-time activities. Conclusion: Drug use among students has been a neglected topic area in the research literature in UK. The current research shows that students might be particularly at risk of drug use as a result of features relating to university lifestyle. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *College Students
*Drug Usage
Illegal Drug Distribution
Higher Education
Source: PsycINFO
Full Text: Available from Informa Healthcare in Journal of Substance Use

47. The association of social networks with substance use among homeless men in Los Angeles who have unprotected sex with women.

Citation: Journal of Substance Use, February 2015, vol./is. 20/1(38-43), 1465-9891;1475-9942 (Feb 2015)
Author(s): Song, Ahyoung; Wenzel, Suzanne L
Correspondence Address: Song, Ahyoung: School of Social Work, University of Southern California, 669 W. 34th Street, Los Angeles, CA, US, 90089, ahyoungs@usc.edu
Institution: School of Social Work, University of Southern California, Los Angeles, CA, US; School of Social Work, University of Southern California, Los Angeles, CA, US
Language: English
Abstract: This study examined the association between social network characteristics and heavy drinking and crack use among homeless men who had unprotected sex with women. This study focused on network members with whom homeless men used substances. Of 305 randomly selected homeless men in Los Angeles, California, 182 participants who had unprotected sex with women during the previous 6 months were included in the final analysis. To obtain social network data, respondents were asked to provide the first names of 20 individuals they had contact with during the previous 6 months. In the final multivariate logistic regression model, social network characteristics were examined as possible influences on heavy drinking and crack use. The likelihood of heavy drinking was significantly increased by the proportion of network members with whom homeless men used alcohol. Likelihood of crack use was also associated with the proportion of network members with whom the respondent used drugs. Results indicated that using alcohol and drugs with network members increased the odds of heavy drinking and crack use among participants. Interventions to reduce substance use among homeless men who have unprotected sex may help them reduce ties with individuals with whom they drink and use drugs. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
48. Association of alcohol craving and proximal outcomes of a residential treatment program for patients with alcohol use disorders.

Citation: Journal of Substance Use, February 2015, vol./is. 20/1(11-15), 1465-9891;1475-9942

Author(s): Wapp, Manuela; Burren, Yuliya; Znoj, Hansjorg; Moggi, Franz

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Institution: University Hospital of Psychiatry, University of Bern, Bern, Switzerland; University Hospital of Psychiatry, University of Bern, Bern, Switzerland; Department of Psychology, University of Bern, Bern, Switzerland; University Hospital of Psychiatry, University of Bern, Bern, Switzerland

Language: English

Abstract: Background: Alcohol craving is an essential construct in research and treatment of alcohol use disorders (AUD). Craving is mostly investigated in association with concurrent variables or distal treatment outcomes at follow-up. Objectives: The aim of this study is to examine craving at admission and its relevance for essential proximal outcomes at discharge from AUD treatment such as positive alcohol expectancy, abstinent-related self-efficacy, and substance-related coping, as well as patients' demographic and AUD characteristics. Methods: In total, 36 patients were recruited within an inpatient treatment AUD program. Results: An association between craving and positive alcohol expectancies at discharge was found in the regression model even when the respective expectancies, age, gender, and severity of alcohol dependence at admission were controlled for (F(2,29) = 32.71, p < 0.001). Craving explained 2.3% of the variance of change in positive alcohol expectancy. Conclusion: The results suggest a low predictive value of craving for positive alcohol expectancy. In addition, we found significant associations between the craving and the severity of AUD and alcohol consumption before admission. Future studies should include proximal outcomes related to treatment efficacy as well as distal outcomes. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcohol Rehabilitation
*Alcoholism
*Craving
*Treatment

Source: PsycINFO

Full Text: Available from Informa Healthcare in Journal of Substance Use

49. Erratum: "Gamblers seeking treatment: Who does and who doesn't?"

Citation: Journal of Behavioral Addictions, December 2014, vol./is. 3/4(268), 2062-5871;2063-5303 (Dec 2014)

Author(s): Braun, Barbara; Ludwig, Monika; Slezka, Pawel; Buhringer, Gerhard; Kraus, Ludwig
Reports an error in "Gamblers seeking treatment: Who does and who doesn't" by Barbara Braun, Monika Ludwig, Pawel Slezka, Gerhard Buhringer and Ludwig Kraus (Journal of Behavioral Addictions, 2014[Sep], Vol 3[3], 189-198). In the original article, on page 196 by mistake information regarding the Conflict of interest was provided in the Funding sources section. The correct statements for the Funding sources and the Conflict of interest sections are present in the erratum. (The following abstract of the original article appeared in record 2014-42491-007).

Background and aims: As only a minority of pathological gamblers (PGr) presents for treatment, further knowledge about help-seeking behavior is required in order to enhance treatment utilization. The present study investigated factors associated with treatment participation in gamblers in Germany. As subclinical pathological gamblers (SPGr, fulfilling one to four DSM-IV-criteria) are target of early intervention due to high risk of transition to pathological gambling, they were subject of special interest. Methods: The study analyzed data from a general population survey (n = 234, SPGr: n = 198, PGr: n = 36) and a treatment study (n = 329, SPGr: n = 22, PGr: n = 307). A two-step weighting procedure was applied to ensure comparability of samples. Investigated factors included socio-demographic variables, gambling behavior, symptoms of pathological gambling and substance use. Results: In PGr, regular employment and non-German nationality were positively associated with being in treatment while gambling on the Internet and gaming machines and fulfilling more DSM-IV-criteria lowered the odds. In SPGr, treatment attendance was negatively associated with married status and alcohol consumption and positively associated with older age, higher stakes, more fulfilled DSM-IV criteria and regular smoking. Conclusions: In accordance to expectations more severe gambling problems and higher problem awareness and/or external pressure might facilitate treatment entry. There are groups with lower chances of being in treatment: women, ethnic minorities, and SPGr. We propose target group specific offers, use of Internet-based methods as possible adaptions and/or extensions of treatment offers that could enhance treatment attendance. (PsycINFO Database Record (c) 2015 APA, all rights reserved)
Abstract: Background and aims: The primary objective of the present study was to investigate which cell-phone activities are associated with cell-phone addiction. No research to date has studied the full-range of cell-phone activities, and their relationship to cell-phone addiction, across male and female cell-phone users. Methods: College undergraduates (N = 164) participated in an online survey. Participants completed the questionnaire as part of their class requirements. The questionnaire took 10 and 15 minutes to complete and contained a measure of cell-phone addiction and questions that asked how much time participants spent daily on 24 cell-phone activities. Results: Findings revealed cell-phone activities that are associated significantly with cell-phone addiction (e.g., Instagram, Pinterest), as well as activities that one might logically assume would be associated with this form of addiction but are not (e.g., Internet use and Gaming). Cell-phone activities that drive cell-phone addiction (CPA) were found to vary considerably across male and female cell-phone users. Although a strong social component drove CPA for both males and females, the specific activities associated with CPA differed markedly. Conclusions: CPA amongst the total sample is largely driven by a desire to connect socially. The activities found to be associated with CPA, however, differed across the sexes. As the functionality of cell-phones continues to expand, addiction to this seemingly indispensable piece of technology becomes an increasingly realistic possibility. Future research must identify the activities that push cell-phone use beyond its "tipping point" where it crosses the line from a helpful tool to one that undermines our personal well-being and that of others. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
impulsivity was measured using the Barratt Impulsiveness Scale version 11 (BIS-11). The stop-signal test (SST) from the Cambridge Neuropsychological Test Automated Battery (CANTAB) was used to assess the patients' abilities to inhibit prepotent responses. Compulsivity was measured using the intra-extra dimensional set shift (IED) test from the CANTAB. The Trail Making Test (TMT) was also used in this study. Results: The IGD and AUD groups scored significantly higher on the BIS-11 as a whole than did the HC group (p = 0.001 and p = 0.001, respectively). The IGD and AUD groups also scored significantly higher on the BIS-11 as a whole than did the GD group (p = 0.006 and p = 0.001, respectively). In addition, the GD group made significantly more errors (p = 0.017 and p = 0.022, respectively) and more individuals failed to achieve criterion on the IED test compared with the IGD and HC groups (p = 0.018 and p = 0.017, respectively). Discussion: These findings may aid in the understanding of not only the differences in categorical aspects between individuals with IGD and GD but also in impulsivity-compulsivity dimensional domains. Conclusion: Additional studies are needed to elucidate the neurocognitive characteristics of behavioral addictive disorders in terms of impulsivity and compulsivity. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Citation: Journal of Behavioral Addictions, December 2014, vol./is. 3/4(214-222), 2062-5871;2063-5303 (Dec 2014)

Author(s): Smith, Philip H; Potenza, Marc N; Mazure, Carolyn M; Mckee, Sherry A; Park, Crystal L; Hoff, Rani A

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Language: English

Abstract: Background and aims: Compulsive sexual behavior (CSB) is highly prevalent among men, often co-occurring with psychiatric disorders and traumatic experiences. Psychiatric disorders and trauma are highly prevalent among military veterans, yet there is a paucity of research on CSB among military samples. The aim of this study was to examine the prevalence of and factors associated with CSB among male military veterans. Methods: Surveys were administered to veterans of Operations Iraqi Freedom, Enduring Freedom, or New Dawn at baseline (n = 258), 3 months (n = 194), and 6 months (n = 136). Bivariate analyses and Generalized Estimating Equations were utilized to estimate associations between CSB and the following variables: psychiatric co-morbidity, childhood physical or sexual trauma, pre- and post-deployment experiences, TV/Internet usage, and sociodemographics. Associations between CSB and specific PTSD symptom clusters were also examined. Results: CSB was reported by 16.7% of the sample at baseline. Several variables were associated with CSB in bivariate analyses; however, only PTSD severity, childhood sexual trauma, and age remained significant in multivariable GEE models. The PTSD symptom cluster re-experiencing was most strongly associated with CSB. Discussion: This exploratory study suggests that CSB is prevalent amongst veterans returning from combat and is associated with childhood trauma and PTSD, particularly re-experiencing. Conclusions: Further study is needed to identify the mechanisms linking PTSD and CSB, define the context and severity of CSB in veterans, and examine the best ways to assess and treat CSB in VA clinical settings. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
**Abstract:**
Aims: In the last 5 years a deluge of articles on the topic of Internet addiction (IA) has proposed many candidate symptoms as evidence of this proposed disease. We critically reviewed the current approach to the measurement and identification of this new excessive behavior syndrome. Methods: Three popular models of IA were discussed: Griffith's components model; Young's Internet Addiction Test (IAT); and the criteria by Tao et al. (2010). We selected these models because they are widely cited and propose specific criteria for IA disorder. Our approach is not meant to provide an exhaustive review, but to discuss and critique the most salient trends in the field. Results: The models of Internet addiction share some criteria, including feeling a loss of control over Internet use; ensuing psychological, social, or professional conflict or problems; and preoccupation when not using the Internet. Other criteria inconsistently mentioned include: mood management, tolerance, withdrawal, and craving/anticipation. The models studied here share the assumption that the Internet can produce a qualitative shift to a diseased state in humans. Conclusions: We critically discussed the above criteria and concluded that the evidence base is currently not strong enough to provide support for an Internet addiction disorder. Future research areas are suggested: (1) Focusing on common impaired dimensions, (2) exploring neuroimaging as a model building tool, and (3) identifying shifts in the rewarding aspects of Internet use. Given the lack of consensus on the subject of Internet addiction, a focus on problem behaviors appears warranted.
60. Integrating adolescent substance abuse treatment with HIV services: Evidence-based models and baseline descriptions.

Citation: Journal of Evidence-Based Social Work, October 2014, vol./is. 11/5(445-459), 1543-3714;1543-3722 (Oct 2014)

Author(s): Murphy, Bridget S; Branson, Christopher E; Francis, Judith; Vaughn, Gretchen Chase; Greene, Alison; Kingwood, Nancy; Adjei, Gifty Ampadu

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Language: English

Abstract: Adolescents with substance use disorders are at high risk for contracting Human Immunodeficiency Virus (HIV)/Acquired Immunodeficiency Syndrome (AIDS) and other sexually transmitted infections (STIs). Adolescence is the period of sexual maturation that compounds the issues associated with infection transmission for this risk-taking group. Integrated treatment models for implementing HIV education, counseling, and testing is a promising approach. This study describes four substance abuse treatment programs of varying levels of care that integrated HIV services for adolescents. Additionally, the evidence-based substance abuse treatment and HIV models are discussed and the baseline characteristics presented. The authors provide a discussion and offer recommendations for service implementation and additional research. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
Substance use continues to constitute social and health problems, more so among adolescents and young adults. One consequence is risky sexual behavior, a major problem in sub-Saharan Africa already facing the synergistic problems of poverty and HIV/AIDS. This study of female students aged > 18 years in two universities in Nigeria uses a multi-stage stratified random sampling method, and each subject that gave consent to the study was administered with a structured questionnaire by trained interviewers; 2,408 female students were studied (1,854 from the University of Ibadan and 554 from the Bayero University, Kano). The mean age of the respondents was 21.6 (SD = 2.9), and about two-thirds (65.7%) were aged between 20-24, with 2,204 (91.5%) being single and 4.3% married. In all, 23.4% of the subjects used one form of substance. Alcoholic drinks of palm wine, alcoholic wine, and beer were the most common of substances used (22.7%), followed by tobacco (2%) and cannabis (1%). Substance use was significantly associated with religious affiliation of the students (p < 0.001), as the prevalence of substance use was least among Muslim students (11.7%) and highest among those who professed traditional religion (39.4%). Alcohol use was also positively associated with sexual activity (p < 0.001). Among the 547 students who used alcohol, 147 (26.9%) had sex in the 4 weeks prior to the survey, while among the 1,861 non-users, only 8.9% did so. The practice of unprotected sex was found not to be associated with substance use: a slightly lower proportion (29.5% vs. 36.6%) of substance users engaged in unprotected sex in their last encounter compared to non-users. There is need to scale up public health education on the dangers of substance use and its associated sexual risk behavior. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
Abstract: (from the chapter) The World Health Organization (WHO) defines dependence as an insurmountable craving for a particular substance or a particular behaviour that can no longer be controlled and is dominating. The basis of dependence is the desire to experience the psychological effects of the addictive substance, increasingly, also the need to avoid unpleasant consequences of its absence (withdrawal symptoms such as restlessness, insomnia, headaches, anxiety, sweating). It leads to an increased tolerance and sometimes to a physical withdrawal syndrome. During the course, the supply and consumption of the respective substances can develop into a life-determining matter. There is a distinction between dependence syndrome and harmful use. The latter refers to-as a weaker variant of the abuse behaviour-a consumption having demonstrably a harmful effect (physically or mentally), without the presence of any dependence. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: *Addiction
*Drug Withdrawal
*Psychosomatic Medicine
Psychology

Source: PsycINFO

59. What is psychosomatic medicine?

Citation: Psychosomatic medicine: An international primer for the primary care setting., 2014(3-9) (2014)

Author(s): Fritzsche, Kurt

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Language: English

Abstract: (from the chapter) Psychosomatic connections are also found in the regulation of gene activity. Psychological and psychosomatic disorders and problems are often based on the empirically proven fact that interpersonal relationship experiences affect the activity of specific neurobiologically relevant genes and may alter epigenetic patterns, i.e., the long-term readability of genes. This also applies to long-term negative relationship experiences and traumas. The DNA sequence remains the same, the activity of genes, however, is changed significantly. As a consequence, functionality of the brain and other organs may be affected and psychosomatic disorders are triggered. Studies show that addictions, depression, and certain types of behavior are associated with epigenetic modifications of neurobiologically relevant genes. There is preliminary evidence that these epigenetic changes can also be hereditary. Specifically, it was shown in animal experiments that in pups of mothers caring little for them, the regulatory sequences of the gene for the glucocorticoid receptor were increasingly methylated in the offspring. Methylation means that the activity of a DNA section is inhibited. This increased methylation was detected in the hippocampus, among other things, a brain region that is important for learning and memory. The affected nerve cells produced less receptor molecules and this increased, in particular, the stress response of the animals. Even as adults, the affected pups were more anxious and could be upset more easily. This effect lasted for life. It is clear that, particularly early environmental influences and interpersonal relationship experiences, especially traumatic experiences, can alter the regulation of epigenetic gene structures. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: *Genes
*Neurobiology
60. Modeling longitudinal changes in buprenorphine treatment outcome for opioid dependence.

Citation: Pharmacopsychiatry, November 2014, vol./is. 47/7(251-258), 0176-3679;1439-0795 (Nov 2014)

Author(s): Saleh, M. I

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Institution: Faculty of Pharmacy, University of Jordan, Amman, Jordan

Language: English

Abstract: Introduction: The present analysis describes the longitudinal change in buprenorphine treatment outcome. It also examines several participant characteristics to predict response to buprenorphine. Methods: Participants (n = 501, age > 15 years) received buprenorphine/naloxone treatment for 4 weeks, and then were randomly assigned to undergo dose tapering over either 7 days or 28 days. An empirical model was developed to describe the longitudinal changes in treatment outcome. Several patient characteristics were also examined as possible factors influencing treatment outcome. Results: We have developed a model that captures the general behavior of the longitudinal change in the probability of having an opioid-negative urine sample following buprenorphine treatment. The model captures both the initial increase (i.e., initial response) and the subsequent decrease (i.e., relapse to opioid) in the likelihood of providing an opioid-negative urine sample. Characteristics associated with successful buprenorphine treatment outcome include: having a negative urine test for drugs, having alcohol problems [assessed using alcohol domain of addiction severity index (ASI-alcohol)] at screening, being older, and receiving low cumulative buprenorphine dose. However, ASI-alcohol values were generally low which make the application of the proposed alcohol effect for patients with more severe alcohol problems questionable. Conclusions: A novel approach for analyzing buprenorphine treatment outcome is presented in this manuscript. This approach describes the longitudinal change in the probability of providing an opioid-free urine sample instead of considering opioid use outcome at a single time point. Additionally, this model successfully describes relapse to opioid. Finally, several patient characteristics are identified as predictors of treatment outcome. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Georg Thieme Verlag KG Stuttgart New York

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Dependency
*Drug Therapy
*Opiates
*Treatment Outcomes
Detoxification

Source: PsycINFO

61. The relationship between child maltreatment and substance abuse treatment outcomes among emerging adults and adolescents.

Citation: Child Maltreatment, August 2014, vol./is. 19/3-4(261-269), 1077-5595;1552-6119 (Aug 2014)

Author(s): Garner, Bryan R; Hunter, Brooke D; Smith, Douglas C; Smith, Jane Ellen; Godley, Mark D

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Language: English

Abstract: Emerging adulthood is the period of greatest risk for problematic substance use. The primary aim of the current study was to examine the relationship between a broad measure of child maltreatment and several key outcomes for a large clinical sample of emerging adults (n = 858) and adolescents (n = 2,697). The secondary aim was to examine the extent to which the relationship between child maltreatment and treatment outcomes differed between emerging adults and adolescents. Multilevel latent growth curve analyses revealed emerging adults and adolescents who experienced child maltreatment reported significantly greater reductions over time on several treatment outcomes (e.g., substance use, substance-related problems, and emotional problems). Overall, analyses did not support differential relationships between child maltreatment and changes over time in these substance use disorder treatment outcomes for emerging adults and adolescents. The one exception was that although emerging adults with child maltreatment did reduce their HIV risk over time, their improvements were not as great as were the improvements in HIV risk reported by adolescents who had experienced child maltreatment. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Adolescent Development
*Child Abuse
*Drug Abuse
*Psychosocial Development
*Treatment Outcomes
Adult Development
Child Neglect
Risk Factors

Source: PsycINFO

Full Text: Available from *Highwire Press* in *Child Maltreatment*

62. On the relationships between commercial sexual exploitation/prostitution, substance dependency, and delinquency in youthful offenders.

Citation: Child Maltreatment, August 2014, vol./is. 19/3-4(247-260), 1077-5595;1552-6119 (Aug 2014)

Author(s): Reid, Joan A; Piquero, Alex R

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Institution: University of South Florida, St. Petersburg, FL, US; University of Texas at Dallas, Richardson, TX, US

Language: English

Abstract: Researchers have consistently linked commercial sexual exploitation (CSE) of youth and involvement in prostitution with substance dependency and delinquency. Yet, important questions remain regarding the directionality and mechanisms driving this association. Utilizing a sample of 114 CSE/prostituted youth participating in the Pathways to Desistance study—a longitudinal investigation of the transition from adolescence to adulthood among serious adolescent offenders—the current study examined key criminal career parameters of CSE/prostitution including age of onset and rate of recurrence. Additionally, structural equation modeling (SEM) was used to explore concurrent associations and causal links between CSE/prostitution and drug involvement. Findings show a general sequential pattern of the ages of onset with substance use and selling
drugs occurring prior to CSE/prostitution, evidence that a small group with chronic CSE/prostitution account for the majority of CSE/prostitution occurrences, and high rates of repeated CSE/prostitution. SEM results suggest CSE/prostituted youth persist in drug involvement from year to year but infrequently experience perpetuation of CSE/prostitution from year to year. Concurrent associations between CSE/prostitution and drug involvement were found across the length of the study. Additionally, drug involvement at one year was linked to CSE/prostitution during the subsequent year during early years of the study. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

63. Pathways from childhood maltreatment to emerging adulthood: Investigating trauma-mediated substance use and dating violence outcomes among child protective services-involved youth.

Citation: Child Maltreatment, August 2014, vol./is. 19/3-4(219-232), 1077-5595;1552-6119 (Aug 2014)

Author(s): Faulkner, Breanne; Goldstein, Abby L; Wekerle, Christine

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Language: English

Abstract: Longitudinal survey data were used to examine the relationship between two types of childhood maltreatment, abuse/neglect and exposure to intimate partner violence (IPV), and two outcomes, substance use and dating violence, within the past year. Participants were youth (N = 158, aged 16-19 at Time 3) involved with child protective services (CPS). A parallel multiple mediator model was used to test the hypothesis that trauma symptoms would mediate the relationship between both types of maltreatment and dating violence, marijuana, and alcohol use outcomes. Although both types of maltreatment were not directly associated with dating violence and substance use outcomes, the indirect effects of anxiety, anger, and dissociation on the relationship between maltreatment and substance use/dating violence were significant. Direct effects of both types of maltreatment on past year use of dating violence + alcohol use and dating violence + marijuana use were not significant, but results demonstrated a significant indirect effect for anger on the relationship between exposure to IPV and past year dating violence + marijuana use. No other indirect effects were significant. Findings highlight the negative effects of exposure to IPV and have implications for the development of prevention programming for youth transitioning out of CPS. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
64. Is binge drinking in young adults associated with an alcohol-specific impairment of response inhibition.

**Citation:** European Addiction Research, 2015, vol./is. 21/2(105-113), 1022-6877;1421-9891 (2015)

**Author(s):** Czapla, Marta; Simon, Joe J; Friederich, Hans-Christoph; Herpertz, Sabine C; Zimmermann, Peter; Loeber, Sabine

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**Language:** English

**Abstract:** Background/Aims: Little is known about the association of binge drinking with impulsivity related to trait- or state-like aspects of behavior. The aim of the present study was therefore to investigate whether binge drinkers show an impairment of inhibitory control in comparison to non-binge drinkers when confronted with alcohol-associated or control stimuli, and whether this is reflected in self-reported impulsivity. Methods: A go/no-go task with pictures of alcoholic and nonalcoholic beverages as well as control stimuli was administered to binge drinkers and a gender-matched group of non-binge drinkers. All participants also completed the Barratt Impulsiveness Scale (BIS-11). Results: We found an alcohol-specific impairment of response inhibition for binge drinkers only, while the groups did not differ with regard to overall response inhibition to the experimental stimuli or self-reported impulsiveness (BIS-11). In addition, the number of commission errors in response to alcohol-associated stimuli was the only significant predictor of binge drinking. Conclusion: The findings of the present study suggest that when young adults have established binge drinking as a common drinking pattern, impairment of inhibition in response to alcoholic stimuli is the only significant predictor of binge drinking, but not general impulsive behavior. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: S. Karger AG, Basel; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:** *Addiction
* Binge Drinking
* Impulsiveness
* Response Inhibition

**Source:** PsycINFO

**Full Text:** Available from Karger Medical and Scientific Publishers in European Addiction Research; Note: ; Collection notes: Academic-License: Only available from an NHS networked computer

65. Mental symptoms and drug use in maintenance treatment with slow-release oral morphine compared to methadone: Results of a randomized crossover study.
Background: Opioid maintenance treatment is the option of choice to stabilize opioid-dependent patients. Whilst efficacy of methadone and buprenorphine has been studied extensively, fewer data on slow-release oral morphine are available. Aims: This study analyzes the effects of slow-release oral morphine compared to methadone with regard to self-reported mental symptoms, drug use and satisfaction with treatment. Methods: The study was carried out as an open-label randomized crossover trial in 14 treatment sites in Switzerland and Germany. It comprised 2 crossover periods of 11 weeks each. For measuring mental symptoms, the Symptom Checklist-27 (SCL-27) was used. Drug and alcohol use was assessed by the number of consumption days, and treatment satisfaction by a visual analogue scale. Results: A total of 157 patients were included for the analyses (per-protocol sample). Statistically significantly better outcomes for morphine as compared to methadone treatment were found for overall severity of mental symptoms (SCL-27 Global Severity Index), as well as 5 of the 6 syndrome groups of the SCL-27, and for treatment satisfaction. There were no statistically significant differences with regard to drug or alcohol use between groups. Conclusions: This study supports positive effects of slow-release oral morphine compared to methadone on patient-reported outcomes such as mental symptoms and treatment satisfaction with comparable effects on concomitant drug use. Slow-release oral morphine represents a meaningful alternative to methadone for treatment of opioid dependence. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
Background: Several instruments have been developed and validated as screens for post-traumatic stress disorder (PTSD) in substance use disorder (SUD) patients. Unfortunately, many of these instruments have one or several disadvantages (e.g. low specificity, low sensitivity or high costs). No research has been conducted on instruments that screen simultaneously for other psychiatric disorders, which would be a potentially time-saving and cost-effective approach. In the current study we tested the psychometric properties of the Depression, Anxiety and Stress Scale (DASS) as a screen for PTSD.

Methods: The DASS was assessed in an inpatient facility during intake with 58 patients and again 4 weeks after admission. Another 138 patients were assessed 4 weeks after admission only. The results were compared to the Clinician-Administered PTSD Scale (CAPS) that was also administered after 4 weeks of abstinence. Results: ROC curve analyses showed an area under the curve of 0.84 for the DASS at intake and 0.78 for the DASS after 4 weeks' abstinence. Conclusion: The DASS is therefore a reliable and convenient measure to use as a screen for PTSD in SUD patients. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
receiving welfare benefits tended to be more likely to specialize only in selling drugs as opposed to (also) property crimes. Conclusion: Reducing drug use among criminally involved crack users and addressing their housing conditions could have a significant impact on reducing drug-related crime. Welfare benefits might act as protective factor against committing property crimes but not against the selling of drugs. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: S. Karger AG, Basel; YEAR: 2014

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:**
- *Crack Cocaine*
- *Criminal Behavior*
- *Drug Abuse*
- Cocaine
- Violent Crime

**Source:** PsycINFO

**Full Text:** Available from *Karger Medical and Scientific Publishers* in *European Addiction Research*; Note: ; Collection notes: Academic-License: Only available from an NHS networked computer

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**68. San Patrignano: A narrative approach to substance abuse treatment.**

**Citation:** Journal of Social Work Practice in the Addictions, October 2014, vol./is. 14/4(435-440), 1533-256X;1533-2578 (Oct 2014)

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**Institution:** Silver School of Social Work, New York University, New York, NY, US

**Language:** English

**Abstract:** This article presents a narrative approach to substance abuse treatment at San Patrignano in Italy. The residential community at San Patrignano houses-at no charge-about 1,500 residents. San Patrignano employs no formal therapeutic interventions, but it organically adheres to many of the tenets of narrative therapy. Narrative therapy incorporates self-disclosure by the counselor as a tactic to gain shared truth and trust with the client. In an environment with few external distractions and absolutely no solitude, conversation is a constant part of the rehabilitative process. Residents at San Patrignano can see themselves in those around them, which creates a safe environment of mutual self-disclosure similar to that used in formal therapeutic settings with narrative therapists and their clients. One of narrative therapy's techniques is to "externalize" the problem identified in the client's "problem story." Separating the individual from his or her drug problem is a key narrative component at San Patrignano. San Patrignano's therapeutic community presents an opportunity to study the effects of narrative intervention, and the length of its program provides an opportunity for longitudinal study. By incorporating narrative therapeutic techniques, San Patrignano provides support, addiction recovery, and healthy identity development for its residents. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Country of Publication:** HOLDER: Taylor & Francis Group, LLC

**Publication Type:** Journal; Peer Reviewed Journal

**Subject Headings:**
- *Drug Rehabilitation*
- *Narrative Therapy*
- Clients

**Source:** PsycINFO

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**69. Heroin use and harm reduction in Afghanistan: An interview with Helen Redmond, LCSW.**
| Citation: | Journal of Social Work Practice in the Addictions, October 2014, vol./is. 14/4(425-434), 1533-256X;1533-2578 (Oct 2014) |
| Author(s): | Berger, Lisa |
| Correspondence Address: | Berger, Lisa: Helen Bader School of Social Welfare, University of Wisconsin-Milwaukee, 2400 E. Hartford Avenue, Enderis Hall 1187, Milwaukee, WI, US, 53211, lberger@uwm.edu |
| Institution: | Center for Applied Behavioral Health Research, Helen Bader School of Social Welfare, University of Wisconsin-Milwaukee, Milwaukee, WI, US |
| Language: | English |
| Abstract: | Presents an interview with Helen Redmond, a social work practitioner. This interview describes heroin use and harm reduction efforts in Afghanistan from the perspectives and observations of Redmond. (PsycINFO Database Record (c) 2015 APA, all rights reserved) |
| Country of Publication: | HOLDER: Taylor & Francis Group, LLC |
| Publication Type: | Journal; Peer Reviewed Journal |
| Subject Headings: | *Harm Reduction |
| | *Heroin Addiction |
| | *Social Workers |
| Source: | PsycINFO |

70. Review of Inside rehab: The surprising truth about addiction treatment and how to get help that works.

| Citation: | Journal of Social Work Practice in the Addictions, October 2014, vol./is. 14/4(422-424), 1533-256X;1533-2578 (Oct 2014) |
| Author(s): | Gallagher, John R |
| Institution: | Indiana University, IN, US |
| Language: | English |
| Abstract: | Reviews the book, Inside Rehab: The Surprising Truth About Addiction Treatment and How to Get Help That Works by Anne M. Fletcher (see record 2013-02003-000). Fletcher offers a unique perspective on the current culture of addiction treatment in the United States, touching on some historically controversial topics. The first half of the book conceptualizes the disease model of addiction and discusses important topics that are not commonly discussed in previous books, such as the costs of treatment, suggested questions that consumers should ask providers to assure that they are receiving the best quality of care, and the hiring practices and credentialing process of licensed addiction counselors. The second half of the book, focuses on the importance of providing gender, age, and culturally specific treatment plans, alternatives to the 12-step approach to recovery, dual diagnosis, and exploring the future of addiction treatment. Overall, a considerable strength of the book is the wide range of addiction treatment topics discussed. However, this strength is also a limitation because many discussions are brief and lack in-depth detail. This book is likely to find its place in the homes of many consumers. (PsycINFO Database Record (c) 2015 APA, all rights reserved) |
| Country of Publication: | HOLDER: Taylor & Francis Group, LLC |
| Publication Type: | Journal; Peer Reviewed Journal |
| Subject Headings: | *Drug Addiction |
| | *Drug Rehabilitation |
| | *Health Care Costs |
| | *Quality of Care |
| Source: | PsycINFO |

71. Review of Clinical work with substance abusing clients (3rd ed.).
Reviews the book, Clinical Work With Substance Abusing Clients (3rd ed.) edited by Shulamith Lala Ashenberg Straussner (see record 2014-00187-000). The book is suitable for use at the college level, with upper division undergraduate electives, or in a graduate course. It provides both exposure to foundational ideas and advanced instruction in direct practice. The collected chapters could also provide a gateway into the field of addictions for the postgraduate, nonspecialist social work practitioner; for example, a licensed social worker practicing as a family therapist or mental health counselor who was seeking to work with clients experiencing addiction. Initially, the book provides the reader with a sound historical perspective on clinical work with the client population engaging in substance use, and offers a concise, relevant conceptual and theoretical orientation to the phenomena of addictive disorders in general and to specific substances in particular. The strength of the book lies in its comprehensive yet concise instruction for working with substance-abusing clients. The book would benefit from improving the visual experience. The book benefits from experienced editing, with each specific topic properly located in the book, making it very readable. Overall, the book is practical and the collective authors address their topics in a way that illustrates their valuable collective experience in the field. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Citation: Journal of Social Work Practice in the Addictions, October 2014, vol./is. 14/4(359-377), 1533-256X;1533-2578 (Oct 2014)

Author(s): Brook, Jody

Correspondence Address: Brook, Jody: University of Kansas, School of Social Welfare, 12610 Quivira Road, Edwards Campus, Regnier Hall, Room 270, Overland Park, KS, US, 66213, jbrook@ku.edu

Institution: School of Social Welfare, University of Kansas, Lawrence, KS, US

Language: English

Abstract: There is a growing acknowledgment of client-provider relationship as a determining factor within evidence-based practice implementation. This collective case study of 20 service providers examined the approaches used by clinicians working with substance-abusing mothers involved in child welfare to shed light on their use of empirically informed, gender-specific interventions. Analyses revealed that clinicians struggle to articulate specific evidence-based frameworks, and their approach relies on an intuitively driven client-provider relationship. Clinicians report little institutional support for integration of empirically supported practices into settings where workforce stress plays a critical role, and thus rely on relationship skills to frame practice approach. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Child Welfare
*Clinicians
*Health Personnel Attitudes
*Human Sex Differences
*Therapeutic Processes
Drug Abuse
Evidence Based Practice
Best Practices

Source: PsycINFO

74. Work addiction in Japanese workers.

Citation: Psychosocial factors at work in the Asia Pacific., 2014(217-230) (2014)

Author(s): Matsuoka, Nobuko; Shimazu, Akihito

Correspondence Address: Matsuoka, Nobuko: Program in Education and Human Science, Graduate School of Education, Hiroshima University, 2F 29-11 3chome, Senda-machi, Naka-ku, Hiroshima, Japan, 730-0052, nobuko.pinetree@gmail.com

Institution: Program in Education and Human Science, Graduate School of Education, Hiroshima University, Hiroshima, Japan; Department of Mental Health, Graduate School of Medicine, University of Tokyo, Tokyo, Japan

Language: English

Abstract: (from the chapter) This chapter focus on workaholism and its impacts on employees' well-being. First of all, we describe the definition of workaholism. There have been some
discussions whether workaholism is desirable or not. Second, we go into working condition in Japan. In particular, working hours is focused on. Third, the impacts of workaholism on Japanese employees are clarified. We describe the influences both on employee themselves and their partners. At last, challenge, future directions and conclusions are discussed. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: *Addiction
*Employee Characteristics
*Well Being
*Workaholism

Source: PsycINFO

75. Abnormal ultrastructure of intestinal epithelial barrier in mice with alcoholic steatohepatitis.

Citation: Alcohol, December 2014, vol./is. 48/8(787-793), 0741-8329 (Dec 2014)
Author(s): Wang, Hongyan; Li, Xin; Wang, Chen; Zhu, Dong; Xu, Youqing
Correspondence Address: Zhu, Dong, zhud01@sohu.com
Institution: Department of Gastroenterology, Beijing Tian Tan Hospital, Capital Medical University, Beijing, China; Department of Gastroenterology, Beijing Tian Tan Hospital, Capital Medical University, Beijing, China; Department of Gastroenterology, Beijing Tian Tan Hospital, Capital Medical University, Beijing, China; Department of Gastroenterology, Beijing Tian Tan Hospital, Capital Medical University, Beijing, China; Department of Gastroenterology, Beijing Tian Tan Hospital, Capital Medical University, Beijing, China
Language: English
Abstract: Intestinal barrier dysfunction caused by chronic alcohol consumption is closely associated with disruption of the intestinal epithelial apical junction complex. The present study was undertaken to directly display by transmission electron microscopy the abnormal ultrastructure of the intestinal epithelial barrier in mice with alcoholic steatohepatitis. The results showed that chronic alcohol consumption could induce obvious liver injury, with diffuse lipid accumulation and focal inflammatory cell infiltration in the liver, assessed by hematoxylin and eosin staining. The indicators of intestinal barrier dysfunction, d-lactic acid and lipopolysaccharide, were significantly higher in alcohol-fed mice than in control mice. Alcohol exposure obviously caused high permeability in the ileum to fluorescein isothiocyanate-dextran (FD-4; molecular weight 4000). Transmission electron microscopy demonstrated that tight junctions and adherens junctions expanded noticeably in alcohol-fed mice. Although the tight junction (TJ) length of alcohol-fed mice had no significant difference compared with control mice, the adherens junction (AJ) length of alcohol-fed mice significantly decreased compared with control mice. Additionally, the ratios of both TJmax/TJmin and AJmax/AJmin were significantly larger in alcohol-fed mice than in control liquid-fed mice. In conclusion, high intestinal permeability caused by alcohol attributes to the irregular ultrastructure of the intestinal epithelial barrier. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
76. Effects of ethanol exposure during adolescence or in adulthood on pavlovian conditioned approach in sprague-dawley rats.

Citation: McClory, Alexander James; Spear, Linda Patia

Correspondence Address: McClory, Alexander James: Department of Psychology, Binghamton University, State University of New York, P.O. Box 6000, Binghamton, NY, US, 13902-6000, amclorl@binghamton.edu

Institution: Department of Psychology, Binghamton University, Binghamton, NY, US; Department of Psychology, Binghamton University, Binghamton, NY, US

Language: English

Abstract: Human studies have shown that adolescents who repeatedly use alcohol are more likely to be dependent on alcohol and are more likely to suffer from psychological problems later in life. There has been limited research examining how ethanol exposure in adolescence might contribute to later abuse or addiction in adulthood. The present experiment examined effects of intermittent ethanol exposure during adolescence on sign-tracking behavior in adulthood, indexed by a Pavlovian conditioned approach (PCA) task wherein an 8s lever presentation served as a cue predicting subsequent delivery of a flavored food pellet. Although no response was required for food delivery, after multiple pairings, 1 of 2 different responses often emerged during the lever presentation: goal tracking (head entries into the food trough) or sign tracking (engagement with the lever when presented). Sign tracking is thought to reflect the attribution of incentive salience to reward-paired cues and has been previously correlated with addiction-like behaviors. Following the last PCA session, blood samples were collected for analysis of post-session corticosterone levels. Sixty-two rats (n = 10-12/group) were pseudo-randomly assigned to 1 of 2 intragastric (i.g.) exposure groups (water or 4 g/kg ethanol) or a non-manipulated (NM) control group. Animals were intubated with ethanol or water every other session from postnatal session (PND) 28-48 or PND 70-90. Rats were then tested in adulthood (PND 71-79 or PND 113-122) on the PCA task. Animals exposed chronically to ethanol during adolescence exhibited significantly higher levels of sign-tracking behavior in adulthood than NM and water-treated animals, and showed higher corticosterone than NM control animals. These effects were not seen after comparable ethanol exposure in adulthood. These results suggest that adolescent alcohol exposure has long-term consequences on the expression of potential addiction-relevant behaviors in adulthood. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Ethanol
*Side Effects (Drug)
*Chemical Exposure
Rats

Source: PsycINFO

Full Text: Available from Elsevier in Alcohol
Available from ProQuest in Alcohol; Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

77. Novel RNA modifications in the nervous system: Form and function.

Citation: Satterlee, John S; Basanta-Sanchez, Maria; Blanco, Sandra; Li, Jin Billy; Meyer, Kate; Pollock, Jonathan; Sadri-Vakili, Ghazaleh; Rybak-Wolf, Agnieszka

Author(s): Satterlee, John S.: National Institute on Drug Abuse, 6001 Executive Blvd, Bethesda, MD, US, 20892, satterleej@nida.nih.gov
Modified RNA molecules have recently been shown to regulate nervous system functions. This mini-review and associated minisymposium provide an overview of the types and known functions of novel modified RNAs in the nervous system, including covalently modified RNAs, edited RNAs, and circular RNAs. We discuss basic molecular mechanisms involving RNA modifications as well as the impact of modified RNAs and their regulation on neuronal processes and disorders, including neural fate specification, intellectual disability, neurodegeneration, dopamine neuron function, and substance use disorders. (PsycINFO Database Record © 2015 APA, all rights reserved) (journal abstract)
hyperthermia, and even death. Despite the popularity of NPS, there is a paucity of scientific data about these drugs. Here we provide a brief up-to-date review describing the mechanisms of action and neurobiological effects of synthetic cathinones and cannabinoids. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Authors; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Abuse
*Drugs
*Neurobiology
Cannabinoids
Source: PsycINFO

79. The feasibility of genetic dissection of endophenotypes.
Citation: Psychophysiology, December 2014, vol./is. 51/12(1337-1338), 0048-5772;1469-8986 (Dec 2014)
Author(s): Wilhelmsen, Kirk C
Correspondence Address: Wilhelmsen, Kirk C.: Department of Genetics, University of North Carolina at Chapel Hill, 5093 Genetic Medicine Bldg., CB 7264, Chapel Hill, NC, US, 27599-7264, kirk_wilhelmsen@med.unc.edu
Institution: Department of Genetics, University of North Carolina at Chapel Hill, Chapel Hill, NC, US
Language: English
Abstract: Comments on an article by William G. Iacono et al. (see record 2014-48866-004). Endophenotypes are traits that proceed and predict traits of interest. In this special issue, there are a series of papers on genomic analysis of 17 physiologic traits measured by the Minnesota Center for Twin and Family Research that are thought to be endophenotypes for behavioral clinical traits such as addiction and schizophrenia. Because these 17 traits, which can be precisely defined and measured throughout the life of subjects, display variation in normal subjects and are heritable, it is thought that they may be more tractable to genetic dissection. These articles show that these 17 endophenotypes appear to have a similar architecture to the vast majority of traits with complex modes of inheritance. The study identified several genetic loci that play a role in these endophenotypes. It appears that further progress in understanding the genetics of these 17 endophenotypes can be made with an expanded data set. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Country of Publication: HOLDER: Society for Psychophysiological Research; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Genome
*Heritability
*Psychophysiology
*Twins
*Behavioral Genetics
Source: PsycINFO
Full Text: Available from Wiley in Psychophysiology

80. Risk profile and treatment needs of women in jail with co-occurring serious mental illness and substance use disorders.
Citation: Women & Health, November 2014, vol./is. 54/8(781-795), 0363-0242;1541-0331 (Nov 2014)
Author(s): Nowotny, Kathryn M; Belknap, Joanne; Lynch, Shannon; DeHart, Dana
Correspondence Address: Nowotny, Kathryn M.: Department of Sociology, University of Colorado at Boulder, 327 UCB, Boulder, CO, US, 80309, Kathryn.noworny@colorado.edu

Institution: Department of Sociology, University of Colorado at Boulder, Boulder, CO, US; Department of Sociology, University of Colorado at Boulder, Boulder, CO, US; Department of Psychology, Idaho State University, Pocatello, ID, US; College of Social Work, University of South Carolina, Columbia, SC, US

Language: English

Abstract: Recent research has documented the unusually high rates of incarcerated women's serious mental illness (SMI) and substance use disorders (SUD). Complicating these high rates is the high comorbidity of SMI with SUD and trauma histories. Yet, incarcerated women have significantly less access to treatment and health services while incarcerated than men. We used data from a multi-site, multi-method project funded by the Bureau of Justice Assistance (2011-2012) to determine the risk profile of women in jail (n = 491) with a current co-occurring SMI (i.e., major depressive disorder, bipolar disorder, schizophrenia spectrum disorder) and SUD (i.e., abuse, dependence). The study spanned multiple geographic regions, and structured diagnostic interviews were used to understand better the women that comprised this vulnerable population. One-in-five of the women had a current co-occurring disorder (CCOD). The findings revealed that significantly more women with a CCOD had been exposed to violence and were exposed to drugs at a younger age. Further, about one-third of women with a CCOD had received no treatment from a health care professional in the past year, demonstrating a substantial unmet need. We conclude that investing in mental and behavioral health care in jails is critical to the health and safety of women as well as the communities to which they return. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
symptoms such as obsession (23.2%), depression (22.9%), impulse control (22.2%), and anxiety (20.6%). Conclusion: It is the high prevalence of Internet addiction in the college students, with significant gender, ethnic and professional differences, Internet addicts have more or serious mental health problems, more 20% of Internet addicts have depression, anxiety and impulsive symptoms. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Internet Addiction  
*Mental Health  
College Students  
Internet

Source: PsycINFO

82. Sensitivity to monetary reward in drug abstainers at different post-drug withdrawal phases: An ERP study.

Citation: Chinese Journal of Clinical Psychology, August 2014, vol./is. 22/4(571-576), 1005-3611 (Aug 2014)
Author(s): Zhou, Ping-yan; Liu, Dan-wei; Zhou, Ren-lai; Sun, Ben-liang; Xiao, Jie; Li, Song
Correspondence Address: Zhou, Ping-yan: Beijing Key Laboratory of Applied Experimental Psychology, School of Psychology, Beijing Normal University, Beijing, China, 100875
Institution: Beijing Key Laboratory of Applied Experimental Psychology, School of Psychology, Beijing Normal University, Beijing, China; Beijing Key Laboratory of Applied Experimental Psychology, School of Psychology, Beijing Normal University, Beijing, China; Beijing Key Laboratory of Applied Experimental Psychology, School of Psychology, Beijing Normal University, Beijing, China; Beijing Drug Rehabilitation Center, Beijing, China; Beijing Drug Rehabilitation Center, Beijing, China
Language: Chinese
Abstract: Objective: The current study aimed to explore cognitive function in drug abstainers at different healing phases (short-term abstinence group: average of 2.7 months, medium-term abstinence group: 19.36 per month on average, long-term abstinence group: average of 49.6 months) with a monetary reward task. Methods: This study adopted a monetary reward paradigm. Participants were required to complete the Go/No-go tasks in three different reward gradients (score of 45, 1, 0). Results: Electroencephalographic (EEG) results showed that the sensitivity to monetary reward was declined in both short- and medium-term abstinence groups who have no different brain activation on the reaction to three different reward gradients. The brain function of long-term abstinence group showed a certain level of recovery, reflected by smaller difference of P3 and N2 amplitudes to monetary reward gradient compared to the control group. Conclusion: The damage of rewards perception, assessment, and expectation caused by drug addiction can be normalized following a long term post-drug withdrawal. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Addiction  
*Drug Abstinence  
Monetary Rewards  
Psychology

Source: PsycINFO

83. Review of Coming up short: Working-class adulthood in an age of uncertainty.

Citation: Work and Occupations, November 2014, vol./is. 41/4(527-528), 0730-8884;1552-8464 (Nov 2014)
Author(s): Sawhill, Isabel V
Institution: Brookings Institution, Washington, DC, US
Reviews the book, Coming Up Short: Working-Class Adulthood in an Age of Uncertainty by J. M. Silva (2014). The book does a skillful job of weaving together a narrative about these young adults' family background, education, work life, romantic relationships, aspirations, and definitions of adulthood. It covers everything from their economic struggles to their problems with debt or addiction, their understanding of gender roles and of class, their experiences with discrimination based on race or gender, and their psychological strategies for dealing with life's challenges. Overall, I can highly recommend the book as an empathetic and nuanced reading of the lives of young adults from less privileged backgrounds. It is well researched and well written. Although the author tends to blame our neoliberal ideology or market-driven politics for leaving too many people adrift without a safety net, the book is primarily devoted to describing their lives and their understandings of self rather than to discussing policy measures that might improve their prospects. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Country of Publication: HOLDER: The Author(s); YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Family Background
*Family Work Relationship
*Narratives
*Age Differences
*Uncertainty
Source: PsycINFO

84. Food-related behaviors of women in substance abuse recovery: A photo-elicitation study.

Citation: Journal of Human Behavior in the Social Environment, November 2014, vol./is. 24/8(951-965), 1091-1359;1540-3556 (Nov 2014)
Author(s): Wall-Bassett, Elizabeth; Robinson, Michael A; Knight, Sharon
Correspondence Address: Wall-Bassett, Elizabeth: Department of Nutritional Science, College of Human Ecology, East Carolina University, Mail Stop 505, Greenville, NC, US, 27858, wallbassette@ecu.edu
Institution: Department of Nutritional Science, College of Human Ecology, East Carolina University, Greenville, NC, US; School of Social Work, College of Human Ecology, East Carolina University, Greenville, NC, US; Department of Health Education and Promotion, East Carolina University, Greenville, NC, US
Language: English
Abstract: The aim of this multi-method qualitative study was to explore the eating behaviors and food choices of nine purposively sampled low-income women aged 29 to 40 years who were engaged in a residential substance use disorders recovery program. Findings were limited to photo-elicitation interviews with the women that focused on nutritional choices and issues outside their family context. Consensual data analysis revealed a recovery process that began with cognitive reawakening and an increased focus on and desire for healthier nutrition-related decisions and lifestyle, particularly in the area of weight gain that many of the women experienced. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Abuse
*Drug Rehabilitation
*Eating Behavior
*Food Preferences
Human Females
Source: PsycINFO

Citation: Journal of Clinical Psychiatry, July 2014, vol./is. 75/7(709-715), 0160-6689 (Jul 2014)

Author(s): Martinotti, Giovanni; Di Nicola, Marco; De Vita, Ofelia; Hatzigiakoumis, Daniele Stavros; Guglielmo, Riccardo; Santucci, Barbara; Aliotta, Fererica; Romanelli, Roberto; Verrastro, Valeria; Petruccelli, Filippo; Di Giannantonio, Massimo; Janiri, Luigi

Correspondence Address: Martinotti, Giovanni: Clinica Villa Maria Pia, Via del Forte Trionfale 36, Rome, Italy, 00135, giovanni.martinotti@gmail.com

Institution: University "G. d'Annunzio", Chieti, Italy; Institute of Psychiatry and Psychology, Catholic University of Sacred Heart, Rome, Italy; Institute of Psychiatry and Psychology, Catholic University of Sacred Heart, Rome, Italy; Institute of Psychiatry and Psychology, Catholic University of Sacred Heart, Rome, Italy; Institute of Psychiatry and Psychology, Catholic University of Sacred Heart, Rome, Italy; Casa di Cura, Villa Silvia, Senigallia, Italy; Casa di Cura, Villa Silvia, Senigallia, Italy; Casa di Cura, Villa Silvia, Senigallia, Italy; Casa di Cura, Villa Silvia, Senigallia, Italy; Department of Developmental Psychology and Education, University of Cassino, Cassino, Italy; Department of Developmental Psychology and Education, University of Cassino, Cassino, Italy; University "G. d'Annunzio", Chieti, Italy; Institute of Psychiatry and Psychology, Catholic University of Sacred Heart, Rome, Italy

Language: English

Abstract: Topiramate (TOP) and anticonvulsants in general are considered safe and effective drugs for the treatment of alcohol dependence, even though TOP-induced adverse events are quite common, especially for high initial doses or if titration to 300 mg/d is too rapid. The aim of the present study was to assess the efficacy and tolerability profile of low-dose TOP for relapse prevention. Methods: After detoxification, 52 patients were randomized into 2 groups as follows: 26 patients received 100 mg of TOP (oral, twice daily), titrated over 2 weeks, and 26 patients received placebo (PLA). Both groups underwent rehabilitation twice a week. Results: After 6 weeks of treatment, compared with the PLA group, patients receiving TOP showed the following: (1) fewer drinking days (P < 0.05); (2) less daily alcohol consumption (P < 0.05); (3) more days of treatment (P < 0.05); (4) reduced levels of craving (Obsessive-Compulsive Drinking Scale) and withdrawal symptoms (Clinical Institute Withdrawal Assessment for Alcohol-Revised); and (5) improvement of anxiety, depression, and obsessive-compulsive symptom severity (Symptom Check List 90 Revised). Conclusions: Despite the small sample size and the short follow-up period, the present PLA-controlled study demonstrated the potential usefulness of TOP, even when administered at a dosage of 100 mg/d, for the treatment of detoxified alcohol-dependent subjects, confirming results from previous studies testing higher doses of TOP. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Lippincott Williams & Wilkins; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcoholism  
*Anticonvulsive Drugs  
*Craving  
*Drug Rehabilitation  
*Drug Therapy

Source: PsycINFO

86. Methamphetamine self-administration in humans during D-amphetamine maintenance.

Citation: Journal of Clinical Psychiatry, July 2014, vol./is. 75/7(675-681), 0160-6689 (Jul 2014)

Author(s): Pike, Erika; Stoops, William W; Hays, Lon R; Glaser, Paul E. A; Rush, Craig R

Correspondence Address: Rush, Craig R.: Department of Behavioral Science, University of Kentucky Medical Center, Lexington, KY, US, 40536-0086, crush2@email.uky.edu
Agonist replacement may be a viable treatment approach for managing stimulant use disorders. This study sought to determine the effects of D-amphetamine maintenance on methamphetamine self-administration in stimulant using human participants. We predicted that D-amphetamine maintenance would reduce methamphetamine self-administration. Eight participants completed the protocol, which tested 2 D-amphetamine maintenance conditions in counterbalanced order (0 and 40 mg/d). Participants completed 4 experimental sessions under each maintenance condition in which they first sampled 1 of 4 doses of intranasal methamphetamine (0, 10, 20, or 30 mg). Participants then had the opportunity to respond on a computerized progressive-ratio task to earn portions of the sampled methamphetamine dose. Subject-rated drug effect and physiological measures were completed at regular intervals prior to and after sampling methamphetamine. Methamphetamine was self-administered as an orderly function of dose regardless of the maintenance condition. Methamphetamine produced prototypical subject-rated effects on 12 items of the drug-effects questionnaires, 8 of which were attenuated by D-amphetamine maintenance (e.g., increased ratings were attenuated on items such as Any Effect, Like Drug, and Willing to Take Again on the Drug Effect Questionnaire). Methamphetamine produced significant increases in systolic blood pressure, which were attenuated by D-amphetamine maintenance compared to placebo maintenance. Methamphetamine was well tolerated during D-amphetamine maintenance and no adverse events occurred. Although D-amphetamine attenuated some subject-rated effects of methamphetamine, the self-administration results are concordant with those of clinical trials showing that D-amphetamine did not reduce methamphetamine use. Unique pharmacological approaches may be needed for treating amphetamine use disorders.
manage to function at a high level with successful careers and rich social and family relationships. The book is organized into chapters that focus on common treatment situations including the acutely psychotic individual, the first episode of psychosis, the partial responder, the individual with schizophrenia and substance use problems, as well as children and the elderly. Each of these situations presents itself with unique stages of treatment and emphasizes that each stage has unique challenges regarding evaluating an individual and his or her problems and selecting interventions. For each clinical situation, pharmacological as well as psychosocial approaches are described. This book also recognizes that helping people with schizophrenia often requires a diverse group of treatment providers including psychiatrists, psychologists, social workers, nurses, clinical pharmacists, case managers and others. Individuals from all of these disciplines are likely to find this volume interesting and useful. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Authored Book

Subject Headings: *Client Centered Therapy
*Goals
*Recovery (Disorders)
*SCHIZOPHRENIA
*Treatment
Decision Making
Drug Abuse
Drug Therapy
Employability
Intervention
Psychosis
Psychosocial Rehabilitation
Social Interaction

Source: PsycINFO

Full Text: Available from Springer ebooks NHS Pilot 2014 (NEStL2) in Schizophrenia; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS

88. High international electronic cigarette use among never smoker adolescents.

Citation: Journal of Adolescent Health, November 2014, vol./is. 55/5(595-597), 1054-139X (Nov 2014)

Author(s): Dutra, Lauren M; Glantz, Stanton A

Institution: Center for Tobacco Control Research and Education, University of California San Francisco, San Francisco, CA, US; Center for Tobacco Control Research and Education, University of California San Francisco, San Francisco, CA, US

Language: English

Abstract: This editorial discusses the use of electronic cigarette among never smoker adolescents. Discussion of electronic cigarettes (e-cigarettes) has focused primarily on their potential as a less dangerous alternative to cigarettes or as a smoking cessation aid for adult smokers. But because regular e-cigarette use is low among never smokers, these discussions have so far failed to consider seriously the rapidly rising e-cigarette use among adolescents. E-cigarette use is increasing rapidly among youth around the globe. Although some public health researchers are hopeful about e-cigarettes' potential as a harm reduction product, the business model that tobacco companies use to promote e-cigarettes (promoting addiction to maintain a strong consumer base) is inconsistent with the concept of e-cigarettes as a harm reduction tool. The use of e-cigarettes should be prohibited wherever smoking cigarettes is prohibited, age restrictions should be placed on e-cigarettes for purchase, and the prices of e-cigarettes should be increased through taxation. Policy makers and researchers need to base e-cigarette policies on the fact that they are a source of nicotine initiation among youth not just a possible tool to help adult smokers quit smoking. (PsycINFO Database Record (c) 2015 APA, all rights reserved)
89. Using respondent-driven sampling with 'hard to reach' marginalised young people: Problems with slow recruitment and small network size.

Citation: International Journal of Social Research Methodology: Theory & Practice, November 2014, vol./is. 17/6(599-611), 1364-5579;1464-5300 (Nov 2014)

Author(s): Bryant, Joanne

Correspondence Address: Bryant, Joanne: National Centre in HIV Social Research, University of New South Wales, Sydney, NSW, Australia, 2052, j.bryant@unsw.edu.au

Institution: National Centre in HIV Social Research, University of New South Wales, Sydney, NSW, Australia

Language: English

Abstract: This paper documents an experience of using respondent-driven sampling (RDS) to recruit socially marginalised young people in Sydney, Australia. Respondents were young people aged 16-24 years who were current illicit drug users and who reported at least one feature of social marginalisation (e.g. recent homelessness or juvenile detention). Four seeds initiated the sampling and 61 respondents were recruited until the sampling was closed due to slow progress at week nine. The paper examines: (1) the overall success of RDS and compares this with similar RDS studies; and (2) the sufficiency of network ties among respondents. The analyses suggest that RDS was generally successful in that, despite its small size, the sample achieved adequately long recruitment chains and variables converged to equilibrium. Nevertheless, recruitment was much slower than comparable studies. This could be due to the study population having reduced willingness to participate, a high proportion of respondents who did not fit the selection criteria, and small and disparate networks. Using RDS with marginalised youth may require generous resourcing to allow large incentives to increase willingness, and a lengthy recruitment period. Moreover, the small networks suggest that researchers should start the sampling with a large number of seeds. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

90. Buzzed: The straight facts about the most used and abused drugs from alcohol to ecstasy (4th ed.).

Citation: Buzzed: The straight facts about the most used and abused drugs from alcohol to ecstasy (4th ed.), 2014 (2014)
### Abstract:

(from the publicity materials) The fourth edition of the essential, accessible source for understanding how drugs work and their effects on body and behavior. A bestseller in its three previous editions, Buzzed is now revised and updated with the most recent discoveries about drugs. It includes new information about biological and behavioral changes in addiction, the prescription-drug abuse epidemic, distinctive drug effects on the adolescent brain, and trends from synthetic cannabinoids to e-cigarettes. "Lively, highly informative, unbiased, [and] thorough" (Addiction Research & Theory), this no-nonsense handbook surveys the most used and abused drugs from caffeine to heroin to methamphetamine. In both quick-reference summaries and in-depth analysis, it reports on how these drugs enter the body, how they manipulate the brain, their short-term and long-term effects, the different "highs" they produce, and the circumstances in which they can be deadly. Neither a "just say no" treatise nor a "how-to" manual, Buzzed is based on the conviction that people make better decisions with accurate information in hand. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

### Citation:

The Journal of Neuroscience, August 2014, vol./is. 34/34(11461-11469), 0270-6474;1529-2401 (Aug 20, 2014)

### Author(s):

Kuhn, Cynthia; Swartzwelder, Scott; Wilson, Wilkie; Wilson, Leigh Heather [Col]; Foster, Jeremy [Col]

### Institution:

Duke University School of Medicine, Durham, NC, US; Duke University School of Medicine, Durham, NC, US; Duke University, Durham, NC, US

### Language:

English

### Abstract:

Stable changes in neuronal gene expression have been studied as mediators of addicted states. Of particular interest is the transcription factor DELTAFosB, a truncated and stable FosB gene product whose expression in nucleus accumbens (NAc), a key reward region,
is induced by chronic exposure to virtually all drugs of abuse and regulates their psychomotor and rewarding effects. Phosphorylation at Ser27 contributes to DELTAFosB's stability and accumulation following repeated exposure to drugs, and our recent work demonstrates that the protein kinase CaMKII phosphorylates DELTAFosB at Ser27 and regulates its stability in vivo. Here, we identify two additional sites on DELTAFosB that are phosphorylated in vitro by CaMKII, Thr49 and Thr80, and demonstrate their regulation in vivo by chronic cocaine. We show that phosphomimetic mutation of Thr49 (T149D) dramatically increases AP-1 transcriptional activity while alanine mutation does not affect transcriptional activity when compared with wild-type (WT) DELTAFosB. Using in vivo viral-mediated gene transfer of DELTAFosB-T149D or DELTAFosB-T149A in mouse NAc, we determined that overexpression of DELTAFosB-T149D in NAc leads to greater locomotor activity in response to an initial low dose of cocaine than does WT DELTAFosB, while overexpression of DELTAFosB-T149A does not produce the psychomotor sensitization to chronic low-dose cocaine seen after overexpression of WT DELTAFosB and abrogates the sensitization seen in control animals at higher cocaine doses. We further demonstrate that mutation of Thr49 does not affect the stability of DELTAFosB overexpressed in mouse NAc, suggesting that the behavioral effects of these mutations are driven by their altered transcriptional properties. (PsycINFO Database Record (c) 2015 APA, all rights reserved)
93. "McCarthyism, conflict of interest and Addiction's new transparency declaration procedures": Corrigendum.

Citation: Addiction, August 2014, vol./is. 109/8(1389), 0965-2140;1360-0443 (Aug 2014)

Author(s): Babor, Thomas F; Miller, Peter G

Correspondence Address: Babor, Thomas F., Babor@nso.uchc.edu

Institution: Department of Community Medicine and Health Care, University of Connecticut School of Medicine, Farmington, CT, US; School of Psychology, Deakin University, Geelong, VIC, Australia

Language: English

Abstract: Reports an error in "McCarthyism, conflict of interest and Addiction's new transparency declaration procedures" by Thomas F. Babor and Peter G. Miller (Addiction, 2014[Mar], Vol 109[3], 341-344). In the article it was stated that 'ISFAR also worked with ICAP to organize a Symposium on Moderate Alcohol Consumption'. ISFAR had not been set up at that time. It has been pointed out that the conference was jointly organized by ICAP and the Institute on Lifestyle and Health of the Boston University School of Medicine and was chaired by Professor R. Curtis Ellison. The authors apologise for this error. (The following abstract of the original article appeared in record 2014-05957-001.) This editorial discusses instances involving Addiction and is aimed at helping to raise awareness of the kinds of issues that arise. It also announces Addiction's adoption of the International Society of Addiction Journal Editors (ISAJE) transparency form. Addiction has decided to continue to use the ISAJE Transparency Declaration Form indefinitely. The editors hope that their adoption of this policy will provide the basis for a common standard across all ISAJE member journals. (PsycINFO Database Record (c) 2015 APA, all rights reserved)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Addiction
*Conflict of Interest
*Decision Making
*Scientific Communication

Source: PsycINFO

Full Text: Available from Wiley in Addiction


Citation: Addiction, August 2014, vol./is. 109/8(1383-1384), 0965-2140;1360-0443 (Aug 2014)

Author(s): Babor, Thomas F; Miller, Peter G

Correspondence Address: Babor, Thomas F., babor@nso.uchc.edu

Institution: Department of Community Medicine and Health Care, University of Connecticut School of Medicine, Farmington, CT, US; School of Psychology, Deakin University, Geelong Waterfront Campus, Geelong, VIC, Australia

Language: English
Abstract: Replies to the comments made by Conibear (see record 2014-28566-016) on the current authors' original record (see record 2014-05957-001) which discusses authors' and researchers' conflicts of interest and declaration procedures. The current authors appreciate the time that Ms. Conibear has taken to comment on their Editorial. In this response the authors discuss the main points that she has raised. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Conflict of Interest
*Professional Organizations
Alcoholism
Source: PsycINFO
Full Text: Available from Wiley in Addiction

95. Response to Babor & Miller editorial 'McCarthyism, conflict of interest and Addiction's new transparency declaration procedures'.

Citation: Addiction, August 2014, vol./is. 109/8(1382-1383), 0965-2140;1360-0443 (Aug 2014)
Author(s): Conibear, Helena
Correspondence Address: Conibear, Helena, helena@alcoholforum4profs.org
Language: English
Abstract: Comments on the article by Babor and Miller (see record 2014-05957-001) which discusses authors' and researchers' conflicts of interest and declaration procedures. Several members of the International Scientific Forum on Alcohol Research (ISFAR) have drawn attention to the article by Babor and Miller. The current author would like to make several points clear and would like the original authors to publish clarification and an apology in the journal. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Addiction
*Conflict of Interest
*Decision Making
*Scientific Communication
Source: PsycINFO
Full Text: Available from Wiley in Addiction

96. Commentary on Degenhardt et al. (2014): Regional variation in the global burden of disease attributable to opioid dependence-Where do the data come from and does population size matter?

Citation: Addiction, August 2014, vol./is. 109/8(1334-1335), 0965-2140;1360-0443 (Aug 2014)
Author(s): Hser, Yih-Ing; Evans, Elizabeth; Grella, Christine
Correspondence Address: Hser, Yih-Ing, yhser@ucla.edu
Institution: UCLA Department of Psychiatry and Biobehavioral Sciences, Integrated Substance Abuse Programs, Los Angeles, CA, US; Integrated Substance Abuse Programs, Los Angeles, CA, US; Integrated Substance Abuse Programs, Los Angeles, CA, US
Language: English
Abstract: Comments on the article by Degenhardt et al. (see record 2014-18408-001) that discusses regional variation in the global burden of disease attributable to opioid dependence. The current authors recently completed a review paper on the long-term course of opioid addiction in which they examined mortality and opioid abstinence rates reported by long-term follow-up studies (i.e. those with at least 3 years of follow-up) of opioid
It was thus of great interest to compare their findings with Degenhardt et al.’s.

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Dependency
*Epidemiology
*Opiates
*Regional Differences
Death and Dying
Disabilities
Source: PsycINFO
Full Text: Available from Wiley in *Addiction*

97. Commentary on Garbutt et al. (2014): Can we predict who benefits from naltrexone in the treatment of alcohol dependence?

Citation: Addiction, August 2014, vol./is. 109/8(1285-1286), 0965-2140;1360-0443 (Aug 2014)
Author(s): Kranzler, Henry R
Correspondence Address: Kranzler, Henry R.: Center for Studies of Addiction, Department of Psychiatry, University of Pennsylvania Perelman School of Medicine, Philadelphia, PA, US, 19104, kranzler@mail.med.upenn.edu
Institution: Center for Studies of Addiction, Department of Psychiatry, University of Pennsylvania Perelman School of Medicine, Philadelphia, PA, US
Language: English
Abstract: Comments on the original article by Garbutt et al. (see record 2014-21709-001). Garbutt and colleagues conclude that, despite promising findings of moderation, most notably for a family history of alcoholism or the presence of the rs1799971*Asp40 allele, the literature is inadequate to recommend a personalized treatment approach to the use of naltrexone to treat alcohol dependence. It is hard to disagree with the authors in view of the evidence that they have marshaled: only 28 of the 622 studies reviewed met the requirement of being either a placebo-controlled study of naltrexone with analysis of a moderator variable or of naltrexone treatment in which groups with and without a moderating feature were compared. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcoholism
*Drug Therapy
*Naltrexone
Source: PsycINFO
Full Text: Available from Wiley in *Addiction*

98. In vivo imaging of cerebral dopamine D3 receptors in alcoholism.

Citation: Neuropsychopharmacology, June 2014, vol./is. 39/7(1703-1712), 0893-133X;1740-634X (Jun 2014)
Author(s): Erritzoe, David; Tziortzi, Andri; Bargiela, David; Colasanti, Alessandro; Searle, Graham E; Gunn, Roger N; Beaver, John D; Waldman, Adam; Nutt, David J; Bani, Massimo; Merlo-Pich, Emilie; Rabiner, Eugenii A; Lingford-Hughes, Anne
Correspondence Address: Erritzoe, David: Centre for Neuropsychopharmacology, Division of Brain Sciences, Faculty of Medicine, Imperial College London, Burlington Danes Building, Hammersmith Campus, 160 Du Cane Road, London, United Kingdom, W12 ONN, d.erritzoe@imperial.ac.uk
Animal studies support the role of the dopamine D3 receptor (DRD3) in alcohol reinforcement or liking. Sustained voluntary alcohol drinking in rats has been associated with an upregulation of striatal DRD3 gene expression and selective blockade of DRD3 reduces ethanol preference, consumption, and cue-induced reinstatement. In vivo measurement of DRD3 in the living human brain has not been possible until recently owing to a lack of suitable tools. In this study, DRD3 status was assessed for the first time in human alcohol addiction. Brain DRD3 availability was compared between 16 male abstinent alcohol-dependent patients and 13 healthy non-dependent age-matched males using the DRD3-preferring agonist positron emission tomography (PET) radioligand [C]PHNO with and without blockade with a selective DRD3 antagonist (GSK598809 60 mg p.o.). In striatal regions of interest, where the [C]PHNO PET signal represents primarily DRD2 binding, no differences were seen in [C]PHNO binding between the groups at baseline. However, baseline [C]PHNO binding was higher in alcohol-dependent patients in hypothalamus (VT: 16.5 +/- 4 vs 13.7 +/- 2.9, p = 0.040), a region in which the [C]PHNO signal almost entirely reflects DRD3 availability. The reductions in regional receptor binding (VT) following a single oral dose of GSK598809 (60 mg) were consistent with those observed in previous studies across all regions. There were no differences in regional changes in VT following DRD3 blockade between the two groups, indicating that the regional fractions of DRD3 are similar in the two groups, and the increased [C]PHNO binding in the hypothalamus in alcohol-dependent patients is explained by elevated DRD3 in this group. Although we found no difference between alcohol-dependent patients and controls in striatal DRD3 levels, increased DRD3 binding in the hypothalamus of alcohol-dependent patients was observed. This may be relevant to the development of future therapeutic strategies to treat alcohol abuse. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
99. mTORC1 inhibition in the nucleus accumbens 'protects' against the expression of drug seeking and 'relapse' and is associated with reductions in GluA1 AMPAR and CAMKII levels.

Citation: Neuropsychopharmacology, June 2014, vol./is. 39/7(1694-1702), 0893-133X;1740-634X (Jun 2014)

Author(s): James, Morgan H; Quinn, Rikki K; Ong, Lin Kooi; Levi, Emily M; Charnley, Janine L; Smith, Doug W; Dickson, Phillip W; Dayas, Christopher V

Correspondence Address: Dayas, Christopher V.: Neurobiology of Addiction Laboratory, School of Biomedical Sciences and Pharmacy, University of Newcastle, Newcastle, NSW, Australia, 2308, Christopher.Dayas@newcastle.edu.au

Institution: Neurobiology of Addiction Laboratory, School of Biomedical Sciences and Pharmacy, University of Newcastle, Newcastle, NSW, Australia; Neurobiology of Addiction Laboratory, School of Biomedical Sciences and Pharmacy, University of Newcastle, Newcastle, NSW, Australia; Neurobiology of Addiction Laboratory, School of Biomedical Sciences and Pharmacy, University of Newcastle, Newcastle, NSW, Australia; Neurobiology of Addiction Laboratory, School of Biomedical Sciences and Pharmacy, University of Newcastle, Newcastle, NSW, Australia; Neurobiology of Addiction Laboratory, School of Biomedical Sciences and Pharmacy, University of Newcastle, Newcastle, NSW, Australia; Neurobiology of Addiction Laboratory, School of Biomedical Sciences and Pharmacy, University of Newcastle, Newcastle, NSW, Australia; Neurobiology of Addiction Laboratory, School of Biomedical Sciences and Pharmacy, University of Newcastle, Newcastle, NSW, Australia; Neurobiology of Addiction Laboratory, School of Biomedical Sciences and Pharmacy, University of Newcastle, Newcastle, NSW, Australia

Language: English

Abstract: The mechanistic target of rapamycin complex 1 (mTORC1) is necessary for synaptic plasticity, as it is critically involved in the translation of synaptic transmission-related proteins, such as Ca2+/-Calmodulin-dependent kinase II alpha (CAMKII) and AMPA receptor subunits (GluAs). Although recent studies have implicated mTORC1 signaling in drug-motivated behavior, the ineffectiveness of rapamycin, an mTORC1 inhibitor, in suppressing cocaine self-administration has raised questions regarding the specific role of mTORC1 in drug-related behaviors. Here, we examined mTORC1's role in three drug-related behaviors: cocaine taking, withdrawal, and reinstatement of cocaine seeking, by measuring indices of mTORC1 activity and assessing the effect of intra-cerebroventricular rapamycin on these behaviors in rats. We found that withdrawal from cocaine self-administration increased indices of mTORC1 activity in the nucleus accumbens (NAC). Intra-cerebroventricular rapamycin attenuated progressive ratio (PR) break points and reduced phospho-p70 ribosomal S6 kinase, GluA1 AMPAR, and CAMKII levels in the NAC shell (NACsh) and core (NACc). In a subsequent study, we treated rats with intra-NACsh infusions of rapamycin (2.5 microg/side/day for 5 days) during cocaine self-administration and then tracked the expression of addiction-relevant behaviors through to withdrawal and extinction. Rapamycin reduced drug seeking in signaled non-drug-available periods, PR responding, and cue-induced reinstatement, with these effects linked to reduced mTORC1 activity, total CAMKII, and GluA1 AMPAR levels in the NACsh. Together, these data highlight a role for mTORC1 in the neural processes that control the expression and maintenance of drug reward, including protracted relapse vulnerability. These effects appear to involve a role for mTORC1 in the regulation of GluA1 AMPARs and CAMKII in the NACsh. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
100. Attenuation of ethanol withdrawal by ceftriaxone-induced upregulation of glutamate transporter EAAT2.

Citation: Neuropsychopharmacology, June 2014, vol./is. 39/7(1674-1684), 0893-133X;1740-634X (Jun 2014)

Author(s): Abulseoud, Osama A; Camsari, Ulas M; Ruby, Christina L; Kasasbeh, Aimen; Choi, Sun; Choi, Doo-Sup

Correspondence Address: Abulseoud, Osama A.: Department of Psychiatry and Psychology, Mayo Clinic College of Medicine, 200 First Street SW, Rochester, MN, US, 55905, Abulseoud.Osama@mayo.edu

Institution: Department of Psychiatry and Psychology, Mayo Clinic College of Medicine, Rochester, MN, US; Department of Psychiatry and Psychology, Mayo Clinic College of Medicine, Rochester, MN, US; Department of Molecular Pharmacology and Experimental Therapeutics, Mayo Clinic College of Medicine, Rochester, MN, US; Department of Psychiatry and Psychology, Mayo Clinic College of Medicine, Rochester, MN, US; Department of Molecular Pharmacology and Experimental Therapeutics, Mayo Clinic College of Medicine, Rochester, MN, US; Department of Psychiatry and Psychology, Mayo Clinic College of Medicine, Rochester, MN, US; Department of Psychiatry and Psychology, Mayo Clinic College of Medicine, Rochester, MN, US

Language: English

Abstract: Alcohol withdrawal syndrome (AWS) is a potentially fatal outcome of severe alcohol dependence that presents a significant challenge to treatment. Although AWS is thought to be driven by a hyperglutamatergic brain state, benzodiazepines, which target the GABAergic system, comprise the first line of treatment for AWS. Using a rat model of ethanol withdrawal, we tested whether ceftriaxone, a -lactam antibiotic known to increase the expression and activity of glutamate uptake transporter EAAT2, reduces the occurrence or severity of ethanol withdrawal manifestations. After a 2-week period of habituation to ethanol in two-bottle choice, alcohol-preferring (P) and Wistar rats received ethanol (4.0 g/kg) every 6 h for 3-5 consecutive days via gavage. Rats were then deprived of ethanol for 48 h during which time they received ceftriaxone (50 or 100 mg/kg, IP) or saline twice a day starting 12 h after the last ethanol administration. Withdrawal manifestations were captured by continuous video recording and coded. The evolution of ethanol withdrawal was markedly different for P rats vs Wistar rats, with withdrawal manifestations occurring >12 h later in P rats than in Wistar rats. Ceftriaxone 100 mg/kg per injection twice per day (200 mg/kg/day) reduced or abolished all manifestations of ethanol withdrawal in both rat variants and prevented withdrawal-induced escalation of alcohol intake. Finally, ceftriaxone treatment was associated with lasting upregulation of ethanol withdrawal-induced downregulation of EAAT2 in the striatum. Our data support the role of ceftriaxone in alleviating alcohol withdrawal and open a novel pharmacologic avenue that requires clinical evaluation in patients with AWS. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
101. Dopamine in the dorsal hippocampus impairs the late consolidation of cocaine-associated memory.

Citation: Neuropsychopharmacology, June 2014, vol./is. 39/7(1645-1653), 0893-133X;1740-634X (Jun 2014)

Author(s): Kramar, Cecilia P; Chefer, Vladimir I; Wise, Roy A; Medina, Jorge H; Barbano, M. Flavia

Correspondence Address: Barbano, M. Flavia: National Institute on Drug Abuse, Intramural Research Program, Neuronal Networks Section, National Institutes of Health, 251 Bayview Boulevard, Baltimore, MD, US, 21224, maria.barbano@nih.gov


Language: English

Abstract: Cocaine is thought to be addictive because it elevates dopamine levels in the striatum, reinforcing drug-seeking habits. Cocaine also elevates dopamine levels in the hippocampus, a structure involved in contextual conditioning as well as in reward function. Hippocampal dopamine promotes the late phase of consolidation of an aversive step-down avoidance memory. Here, we examined the role of hippocampal dopamine function in the persistence of the conditioned increase in preference for a cocaine-associated compartment. Blocking dorsal hippocampal D1-type receptors (D1Rs) but not D2-type receptors (D2Rs) 12 h after a single training trial extended persistence of the normally short-lived memory; conversely, a general and a specific phospholipase C-coupled D1R agonist (but not a D2R or adenylyl cyclase-coupled D1R agonist) decreased the persistence of the normally long-lived memory established by three-trial training. These effects of D1 agents were opposite to those previously established in a step-down avoidance task, and were here also found to be opposite to those in a lithium chloride-conditioned avoidance task. After returning to normal following cocaine injection, dopamine levels in the dorsal hippocampus were found elevated again at the time when dopamine antagonists and agonists were effective: between 13 and 17 h after cocaine injection. These findings confirm that, long after the making of a cocaine-place association, hippocampal activity modulates memory consolidation for that association via a dopamine-dependent mechanism. They suggest a dynamic role for dorsal hippocampal dopamine in this late-phase memory consolidation and, unexpectedly, differential roles for late consolidation of memories for places that induce approach or withdrawal because of a drug association. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
102. Dancing among the stones.

Citation: Grief and the expressive arts: Practices for creating meaning., 2014(175-178) (2014)
Author(s): Whalen, Denis
Language: English
Abstract: (from the chapter) Any group working with grief and loss, a universal experience for all of us, benefits from exploratory art experiences in a safe and non-judgmental environment that nurtures connection to the body and explores the body as a resource for change. Shaun McNiff (2009) recommends "starting from the body's most elemental gestures and spontaneous physical sensations." He continues, "these elemental movement experiences enable the participants to express themselves creatively and interact productively with others". Along with grieving losses associated with addiction, it is important to discover, in the words of one Next Step expressive arts group member, "There is a whole world outside of us and we can connect." (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: *Creativity
*Grief
*Life Experiences
Source: PsycINFO

103. Overuse of social networking.

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(911-920) (2013)
Author(s): Echeburua, Enrique
Institution: University of the Basque Country UPV/EHU, Spain
Language: English
Abstract: (from the chapter) A social networking site is an online place where a user can create a profile and build a personal network that connects him/her to other users. The social networking phenomenon has spread rapidly all over the world. Despite comparatively lower levels of social network use, usage of social network sites by adults has increased markedly over the past 5 years. This chapter examines the following topics: Overuse of social networking sites; Early warning signs of a potential social networking dependence; Is overuse of social networking a primary or secondary problem?; Risk factors; Protective factors; and Treatment considerations. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: *Addiction
*Online Social Networks
*Social Media
Protective Factors
Risk Factors
Computer Mediated Communication
Source: PsycINFO

104. The cellphone in the twenty-first century: A risk for addiction or a necessary tool?

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(901-909) (2013)
(from the chapter) Social progress parallels that of human communication. The need to communicate led to the production of written languages, a plethora of communication channels, and has been a crucial element in the development of our brains. This chapter deals with the importance of one of these communication channels, the cellular telephone, and how it impregnates our culture. This chapter examines the following topics: What makes cell phone use so gratifying?; What is the social significance of text messaging?; Differences in usage in terms of gender and age; and Is there such a thing as addiction to cell phones? (PsycINFO Database Record (c) 2015 APA, all rights reserved)
Virtual environments, in which three-dimensional displays and interaction devices immerse the user in a synthesized world, are sometimes also referred to as virtual reality (VR). VR constitutes a three-dimensional interface that puts the interacting subject in a condition of active exchange with a world re-created via a computer. However, there is no accepted definition for VR. This chapter examines the following topics: The definition of immersive virtual worlds; A brief historical outline of VR technology; The technological aspects of immersive virtual environments; Immersion in virtual worlds; Methods to measure immersion; Applications and extensions of VR technologies; The profound effects on people's daily lives; and Excessive involvement: Internet addiction. (PsycINFO Database Record (c) 2015 APA, all rights reserved)
108. Areca nut, betel quids, and associated products.

**Citation:** Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(863-872) (2013)

**Author(s):** Winstock, Adam R

**Institution:** South London and Maudsley NHS Trust, Kings College London, London, United Kingdom

**Language:** English

**Abstract:** (from the chapter) The areca nut, often incorrectly referred to as betel nut (betel refers to the leaf that the nut is often wrapped in), and its products are the fourth most commonly used psychoactive substance in the world after tobacco, alcohol, and caffeine. Like all such substances its use traverses age, class, and culture, with an estimated 600 million users globally. Areca is a masticatory and is chewed often in combination with tobacco. Although areca can be characterized as a psychomotor stimulant its effects are quite subtle, more comparable to those of coffee or chewed coca or khat leaves than amphetamine. Anecdotally the nut also has significant medicinal properties ranging from anti-helminthic (in Ayurvedic medicine) to astringent, dentifrice, aphrodisiac, and digestive enhancer. The major risk associated with the use of areca nut is the dose dependent risk for the development of premalignant oral lesions including leukoplakia, submucous fibrosis, and oral squamous cell carcinoma. For such a widely used substance, it is perhaps surprising as to the paucity of literature within the addictions field regarding its use. This chapter examines the following topics: History; Epidemiology; Preparations; Route of administration; Sought after effects; Pharmacology and physiology; Short-term adverse effects; Long-term effects; Other health consequences; Effects on pregnancy and the newborn; Abuse liability and dependence; Assessment of use and dependence; Cultivation, commercialization, and regulation; Interventions; Public health and policy approaches; and Treatment responses. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** *Drug Abuse*  
*Medicinal Herbs and Plants*  
Epidemiology  
Psychological Assessment  
Side Effects (Drug)  
Treatment

**Source:** PsycINFO


**Citation:** Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(855-861) (2013)

**Author(s):** Bancroft, John

**Institution:** The Kinsey Institute for Research in Sex, Gender and Reproduction, Indiana University, Bloomington, IN, US

**Language:** English

**Abstract:** (from the chapter) The term sexual addiction has been widely used to describe sexual behavior that is recurrently out of control and which continues in spite of significant harmful consequences. For many years now there has been a culture of Sex Addicts Anonymous in which individuals with this problem obtain help with the same 12-step treatment programs used for alcohol- and drug-dependent individuals. There are clearly many features in common with drug addiction, and with other behavioral addictions like bulimia. But the extent to which these different patterns of addiction share the same causal mechanisms remains uncertain. To add to the confusion, a variety of other names have been used instead of sexual addiction; for example, sexual compulsivity, impulsive control disorder and, with a longer history, nymphomania applied to women and satyriasis...
applied to men. This chapter examines the following topics: The nature of sexually addictive behavior; The prevalence of sexually addictive behavior; The neuropsychology of sexual arousal and desire; Sexual addiction as an obsessive-compulsive disorder; Failures of self-regulation; and Treatment. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: *Psychosexual Behavior
*Sexual Addiction
Neuropsychology
Obsessive Compulsive Disorder
Self Regulation
Sexual Arousal
Treatment
Desire
Source: PsycINFO

110. Shopping addiction.

Author(s): Lejoyeux, Michel; Weinstein, Aviv
Institution: Paris 7 University, Paris, France; Hadassah Medical Organization, Jerusalem, Israel
Language: English
Abstract: (from the chapter) Shopping addiction is a frequent and often under-recognized form of behavioral addiction. For shopping addicts, buying becomes uncontrolled and repetitive and leads to severe financial and psychological consequences. They also experience craving for buying clothes or other items that they do not use after their purchase. They really need to spend their money and are anxious to miss a good opportunity to buy something. This form of addiction represents a pathological form of a normal behavior, stimulated by advertising and considered as a marker of individual and collective health. The two best distinctions between normal urges to buy and shopping addiction are the negative consequences of the behavior and the fact that items bought compulsively are not used as much as expected. Shopping addiction buying must indeed be considered as pathological since it causes personal distress, consequential financial debts, and marital and family disruption. While initially providing some perceived benefits, pathological shopping addiction typically becomes very difficult to stop. It ultimately results in harmful consequences like unmanageable indebtedness or bankruptcy. This chapter examines the following topics: Epidemiology; Addictive nature of the disorder; Other clinical aspects; Differential diagnosis; Addictive and psychiatric comorbidity; and Treatment. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: *Addiction
*Comorbidity
*Epidemiology
*Shopping
Anxiety
Differential Diagnosis
Electronic Commerce
Treatment
Source: PsycINFO

111. Work Addiction.

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(837-845) (2013)
Author(s): Andreassen, Cecilie Schou
Evidence Services | library.nhs.uk

Institution: The Bergen Clinics Foundation, Norway
Language: English
Abstract: (from the chapter) Work addiction [The terms "work addiction," "workaholic," and "excessive work" have sometimes been used in the existing literature to describe the same phenomenon. In this article, I will stick with the term "workaholism," which is consistent with the academic literature on the field of study.], often referred to as workaholism, is defined in many different ways, but most definitions include notions of overindulgence with work, long working hours, working more than what is demanded/expected, prioritizing work over most other activities, enjoyment of work, work compulsiveness, and perfectionism, rigidity, high motivation, resourcefulness, impatience, and self-absorption in work. This chapter examines the following topics: Prevalence; Workaholism and antecedents; Outcomes and correlates of workaholism; Treatment; and Future research directions. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: *Disease Course *Epidemiology *Treatment *Workaholism Addiction Work (Attitudes Toward)
Source: PsycINFO

112. Exercise dependence.

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(827-835) (2013)
Author(s): Adams, Jeremy
Institution: Eclectic Consulting Pty. Ltd., Altona, VIC, Australia
Language: English
Abstract: (from the chapter) Exercise dependence represents a behavioral dependence on regular exercising. Exercise dependents typically exercise excessively, and this excess often results in physical and/or psychological and emotional harm. Commonly, diagnosis of exercise dependence requires that a person exercise daily without taking rest days, be likely to have experienced illness or injury as a result of his or her exercising, exercises intensely and for long durations, spends a large proportion of his or her time planning and thinking about exercising, exercises stereotypically (e.g. at the same time or in the same way) and, when unable to exercise, experience irrational thoughts and feelings (e.g. "If I don't exercise today I'll get fat"), as well as withdrawal symptoms (e.g. mood swings, aches and pains, dry mouth). This chapter examines the following topics: Exercise dependence defined; Investigation of exercise dependence; Neurobiological explanations; Psychological explanations; Primary versus secondary exercise dependence; Potential negative consequences of exercise dependence; Measurement and diagnosis of exercise dependence; and Treatment of exercise dependence. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: *Addiction *Compulsions *Exercise Etiology Neurobiology Psychodiagnosis Psychological Assessment Symptoms Treatment
113. Video game addiction.

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(819-825) (2013)

Author(s): King, Daniel L; Delfabbro, Paul H; Griffiths, Mark D

Institution: The University of Adelaide, Adelaide, SA, Australia; The University of Adelaide, Adelaide, SA, Australia; Nottingham Trent University, Nottingham, United Kingdom

Language: English

Abstract: (from the chapter) People can gain many benefits from playing video games. These can be educational, social, and/or therapeutic. However, there is evidence that when played to excess, video games can, in some instances, become addictive, especially online video games where the game never pauses or ends, and can be played at any time of the day. For many, the concept of video game addiction seems far-fetched particularly if their concepts and definitions of addiction involve the taking of drugs. Despite the predominance of drug-based definitions of addiction, there is now a growing number of researchers who believe other behaviors can be potentially addictive even though they do not involve the ingestion of a psychoactive drug (e.g. gambling, exercise, sex, Internet use). Such diversity has led to new, all encompassing definitions of what constitutes addictive behavior. This chapter examines the following topics: The meaning of video game addiction; Features of video game addiction; Physical symptoms; Prevalence; Course and onset; Demographic profile; Individual risk factors; Video game structural characteristics; Assessment; Treatment; and Research issues. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: *Addiction
*Computer Games
Disease Course
Epidemiology
Experimentation
Internet Addiction
Psychiatric Symptoms
Psychological Assessment
Risk Factors
Treatment

Source: PsycINFO

114. Internet addiction: Cybersex.

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(809-818) (2013)

Author(s): Jiang, Qiaolei; Huang, Xiuqin; Tao, Ran

Institution: The Chinese University of Hong Kong, N.T., Hong Kong, China; General Hospital of Beijing Military Region, Beijing, China; General Hospital of Beijing Military Region, Beijing, China

Language: English

Abstract: (from the chapter) Cybersex, as a form of sexual expression accessed through the Internet, is a phenomenon unknown before the mid-1980s. Some characteristics of the Internet explain the appeal of cybersex, such as accessibility (any time, any where), affordability (as inexpensive as a local phone call, and there are a host of ways to get "free" sex), anonymity (people perceive their communications to be anonymous), and escape-friendly. In both positive and negative ways, cybersex is changing the way people relate. With a powerful fantasy component, many cybersex participants view it as a highly erotic experience. Cybersex provides participants the freedom of sexual expression and
experimentation, a way to learn about new sexual techniques, and a means for exploring various aspects of one's sexuality. Cybersex becomes popular also due to its therapeutic values. Although participants can feel less inhibited in cybersex, it is also associated with negative consequences for some users. Cybersex has raised serious legal and social questions, including issues of access, privacy, and morality. Some of the underlying issues are perennial concerns repackaged in novel ways, while other questions are new. The sexual freedom provided by cybersex may also lead some participants to cybersex addiction. Empirical evidence indicates that cybersex addiction, with common features similar to other addictive disorders, does appear to exist for some participants. Anonymity, accessibility, and affordability seem to increase the chances for the Internet to become problematic for either those who already have a problem with sexual compulsivity or those who have psychological vulnerabilities rendering them at risk for developing such compulsivity. For those whose cybersex activities have crossed into compulsivity, adverse consequences for the user and the family can result. This emergent addiction has been reported to ruin individual lives, careers, marriages, partnerships, and families. These individuals are in need of therapeutic intervention for their compulsive use of cybersex, while compulsive cybersex is a complex experience that has yet to be clearly understood. Therefore, as research develops, there will be more evidence-based treatment strategies for cybersex addiction. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

115. Food Addictions.


Gold, Mark S; Shriner, Richard L

College of Medicine, University of Florida, Gainesville, FL, US; College of Medicine, University of Florida, Gainesville, FL, US

English

(from the chapter) Establishing a workable definition for food addiction is of paramount importance to understanding one of the world's most pressing epidemics, obesity. This definition must also lend, greater definition to other forms of food addiction such as binge eating, bulimia, anorexia, and other maladaptive relationships with food. A working definition of food addiction should identify a distinguishing set of characteristics that sets it apart from normal eating. It must clearly outline a distinct pattern of behavior that is truly unhealthy (i.e. maladaptive) over space and time. Such a definition is offered below. Importantly, food addiction (like other addictions) involves a dual biasing valence of both perception (i.e. a highly valued [rewarding] substance) and behavior (i.e. craving/dependency), which reliably sets up the abuser and food addict to predictably suffer a set of unhealthy outcomes. This chapter examines the following aspects: Magnitude of the problem; Supportive evidence; T2DM and why food addictions matter; Treatments; and Future research. (PsycINFO Database Record (c) 2015 APA, all rights reserved)
Diabetes Mellitus
Evidence Based Practice
Obesity
Treatment
Binge Eating Disorder

Source: PsycINFO

116. Caffeine and caffeinated energy drinks.

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(777-785) (2013)

Author(s): Smith, Andrew Paul

Institution: Centre for Occupational and Health Psychology, School of Psychology, Cardiff University, Cardiff, United Kingdom

Language: English

Abstract: (from the chapter) The effects of caffeine have been widely studied and a number of recent reviews cover different outcome measures. Indeed, the present author has written a number of reviews of the behavioral effects of caffeine and has suggested that a cost-benefit analysis is an appropriate way of organizing the literature. The first part of this article will summarize research which demonstrates beneficial effects of caffeine. Earlier reviews suggested that the behavioral effects of caffeine are often positive except when one considers very large doses and sensitive individuals. The issue of dependence and negative effects associated with withdrawal clearly represent an area where one needs to assess possible costs of caffeine consumption. Consumption of energy drinks by children has become an important recent issue. These drinks often have high levels of caffeine and are being consumed by a potentially vulnerable sample. An overview of our current knowledge of these two topics will be given in the second part of the article. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: *Beverages (Nonalcoholic)  
*Caffeine  
*Drug Abuse  
*Side Effects (Drug)  
Drug Dependency  
Susceptibility (Disorders)

Source: PsycINFO

117. Tobacco.

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(767-776) (2013)

Author(s): Attwood, Angela; Aveyard, Paul; Bauld, Linda; Britton, John; Hajek, Peter; Hastings, Gerard; McNeill, Ann; Munafo, Marcus; Murray, Rachael; Shahab, Lion; West, Robert

Institution: School of Experimental Psychology, University of Bristol, Bristol, United Kingdom; Primary Care Clinical Sciences, University of Birmingham, Edgbaston, United Kingdom; School of Management, University of Stirling, Stirling, United Kingdom; Division of Epidemiology and Public Health, Clinical Sciences Building, Nottingham City Hospital, Nottingham, United Kingdom; Tobacco Dependence Research Unit, Wolfson Institute of Preventive Medicine, Barts and The London School of Medicine and Dentistry, Whitechapel, London, United Kingdom; Institute for Social Marketing, University of Stirling, Stirling, United Kingdom; Division of Epidemiology and Public Health, Clinical Sciences Building, Nottingham City Hospital, Nottingham, United Kingdom; School of Experimental Psychology, University of Bristol, Bristol, United Kingdom; Division of Epidemiology and Public Health, Clinical Sciences Building, Nottingham City Hospital, Nottingham, United Kingdom; Health Behaviour Research Centre, University College
Nicotine is considered to be the main addictive ingredient in tobacco. It reinforces smoking behavior by indirectly stimulating dopamine transmission in the reward pathways of the brain. Furthermore, chronic nicotine administration induces neurobiological changes that manifest in an aversive withdrawal syndrome when abstinent that motivates the individual to smoke in order to avoid a negative physiological and emotional state. Smoking is the most popular vehicle of recreational nicotine consumption, due to its fast pharmacological action. However, smoking is associated with numerous negative health consequences, including cancers, cardiovascular disease, and respiratory illness. Increasing awareness of the risks, and heightened social stigmatization of smoking in recent years, may explain the steady decrease in smoking rates in developed countries, although rates are stagnating or increasing in developing countries. Within societies, smoking is particularly prevalent or problematic among certain groups. For example, individuals of low SES, adolescents, pregnant women, and mental health patients are particularly vulnerable. Numerous psychological treatments have been proposed to treat nicotine dependence, using behavioral and cognitive techniques. More recently, pharmacotherapies have proved efficacious, particularly when combined with behavioral support. The most common are NRT, bupropion, and varenicline. Of these, varenicline is generally considered the most effective, although there is individual variability in the response to these drugs, and cessation rates remain low. In order to improve cessation rates, there has been growing interest in genetic research to further understand individual variations in smoking behavior and response to treatment, which could result in the introduction of targeted cessation treatments, although the cost-effectiveness of such interventions has been questioned. In recognition of the need to reduce smoking rates and smoking-related harms, tobacco control strategies are being increasingly developed and enforced throughout the world. These include increasing the taxes, restricting smoking in public-areas, incorporating health warnings on packets, and increasing the availability of smoking cessation services. Legislative restrictions have also been placed on the marketing of tobacco products in order to reduce the allure of cigarettes to current smokers but also to non-smokers that may be tempted to smoke.
detoxification and the management of withdrawal symptoms, a common cause of relapse. While further research on the development of evidenced-based treatments for nonmedical prescription and OTC medication use is clearly needed, a combination of pharmacotherapy and psychotherapy is recommended. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**119. Anabolic-androgenic steroid use and dependence.**

**Citation:** Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction,, 2013(743-753) (2013)

**Author(s):** Kanayama, Gen; Pope, Harrison G Jr.

**Institution:** McLean Hospital, Belmont, MA, US; McLean Hospital, Belmont, MA, US

**Language:** English

**Abstract:** (from the chapter) The anabolic-androgenic steroids (AAS) are a family of hormones that includes testosterone, the naturally occurring male hormone, together with numerous synthetic derivatives of testosterone that have been created over the last 70 years. Both the licit and illicit use of AAS have expanded substantially in the last few decades. The remainder of this chapter focuses almost entirely on illicit AAS use, which represents one of the newest and most rapidly evolving major forms of substance abuse worldwide. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**120. Ketamine.**

**Citation:** Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction,, 2013(733-741) (2013)

**Author(s):** Copeland, Jan; Dillon, Paul

**Institution:** National Cannabis Prevention and Information Centre, University of New South Wales, Sydney, NSW, Australia; National Cannabis Prevention and Information Centre, University of New South Wales, Sydney, NSW, Australia

**Language:** English

**Abstract:** (from the chapter) Ketamine is a short-acting, noncompetitive N-methyl-D-aspartate (NMDA) receptor antagonist that acts as a dissociative anesthetic with analgesic and amnestic properties. It has been used for humans and animals since the 1960s and its first reported use as a recreational drug was in the early 1980s. Both popular and research accounts indicate that the recreational use of ketamine has widened in the context of nightclubs, dance parties, and raves. As levels of ketamine in the general population appear to be very low, the harms reported by recreational users are not excessive, adulteration is rare, and the mortality rate is low. Ketamine does not appear to pose a risk to public health at this time. At the individual level, many of those who experiment find the effects aversive and do not persist. The harms that require further investigation are the
association with unsafe sex and injecting behaviors, the neurotoxic effects, and use in situations where there is a heightened risk of accidental death when the user's cognition is grossly impaired. It is recommended that the usual harm minimization strategies; especially not to use the drug when alone, not to concurrently use other neurotoxins such as alcohol, to be in a physically safe environment, and to use safer injecting techniques; should be observed when using ketamine. (PsycINFO Database Record (c) 2015 APA, all rights reserved)
Abstract: (from the chapter) Hallucinogens are a diverse group of substances that cause perceptual and cognitive distortions; they can evoke mood and thought changes as well as out-of-body experiences. Traditionally derived from plants or based on plant-derived compounds, their use in medicinal and religious ceremonies goes back for centuries. Many designer drugs and two other drug classes, dissociative and deliriant drugs, are also often classified under this category. Other club drugs that overlap with hallucinogens, such as gamma-hydroxybutyrate, are not included in this chapter. This chapter provides a brief overview of the neurobiology and mechanism of action of hallucinogens, including atypical hallucinogens. The physiologic and psychological effects of hallucinogens are described, followed by discussion on the epidemiology of hallucinogen use, diagnosis of hallucinogen intoxication and abuse/dependence, comorbidity of hallucinogen use with other drug-use and psychiatric disorders, prevention and intervention strategies to reduce hallucinogen use, and treatment of hallucinogen-related disorders. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: *Drug Abuse
*Hallucinogenic Drugs

Source: PsycINFO

123. Methamphetamine addiction.

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(689-698) (2013)

Author(s): McKetin, Rebecca; Kaye, Sharlene S; Clemens, Kelly J; Hermens, Daniel

Institution: Centre for Research on Ageing, Health and Well-being, The Australian National University, Canberra, ACT, Australia; Centre for Research on Ageing, Health and Well-being, The Australian National University, Canberra, ACT, Australia; Macquarie University, Sydney, NSW, Australia; The Brain and Mind Research Institute, Camperdown, NSW, Australia

Language: English

Abstract: (from the chapter) Methamphetamine is a powerful synthetic stimulant drug that has been around for just over a century. It was initially used as a pharmaceutical agent, but its use resulted in serious adverse effects, including psychosis and dependence, leading to its control under international drug control conventions in 1971. Methamphetamine remains available as a pharmaceutical drug in some countries, but its pharmaceutical use has been largely superseded by safer amphetamine-type analogs. Today methamphetamine remains widely used as an illegal drug, with the number of current users estimated to be between 14 and 53 million worldwide. The regions that have been most heavily affected by methamphetamine use are North America, Southeast and East Asia, Australia, and New Zealand; however, illegal manufacture and use is spreading to affect more regions, including Africa, South and Southwest Asia, and South America. While most methamphetamine use consists of infrequent recreational use among young adults, around one in five users experience dependence on the drug, resulting in chronic use and a myriad of health and social problems. Mental health is particularly compromised, with the drug having the capacity to cause a paranoid psychosis and aggressive behavior. The cardiovascular effects are also concerning, although less well recognized. Despite the risk of dependence, and the myriad of consequent health and social problems, there is a paucity of effective specialized treatment approaches to manage either dependence or the psychiatric sequelae associated with the drug's use. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: *Drug Addiction
*Methamphetamine
*Side Effects (Drug)

Source: PsycINFO
124. Marijuana use and abuse.

**Citation:** Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(679-687) (2013)

**Author(s):** Grover, Kristin W; Zvolensky, Michael J; Bonn-Miller, Marcel O; Kosiba, Jesse; Hogan, Julianna

**Institution:** The University of Vermont, Burlington, VT, US; The University of Vermont, Burlington, VT, US; National Center for PTSD and Center for Health Care Evaluation, VA Palo Alto Health Care System, Palo Alto, CA, US; The University of Vermont, Burlington, VT, US; The University of Vermont, Burlington, VT, US

**Language:** English

**Abstract:** (from the chapter) The main aim of the present chapter is to provide an overview of marijuana use and its disorders. The chapter is organized into seven sections. First, we describe the prevalence of marijuana use and its disorders. Second, we clarify the nature of marijuana use in terms of its pharmacokinetics and acute intoxication features. In the third section, we describe the classification of marijuana use and its disorders using the current diagnostic nomenclature. Fourth, we describe the motivational bases for use of the drug. In the fifth section, we provide a synopsis of some problems associated with marijuana use and its disorders, including health problems, social problems, and psychological disturbances. Sixth, we provide a summary of the scientific work focused on marijuana, the reasons for its use, and users' relative success in quitting. In the final section, we describe some practically oriented clinical issues for primary care medical practitioners to consider in terms of the recognition and treatment of marijuana use and its disorders. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** *Drug Abuse*  
*Marijuana Usage*  
*Marijuana*

**Source:** PsycINFO

125. Cocaine addiction.

**Citation:** Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(669-678) (2013)

**Author(s):** Malcolm, Robert; Barth, Kelly S; Veatch, Lynn M

**Institution:** Medical University of South Carolina, Charleston, SC, US; Medical University of South Carolina, Charleston, SC, US; Medical University of South Carolina, Charleston, SC, US

**Language:** English

**Abstract:** (from the chapter) Cocaine addiction is a complex phenomenon involving individual vulnerabilities as well as cultural, economic, legal, and demographic modifiers. The clinical course of cocaine dependence varies greatly depending on individuals' vulnerabilities, socioeconomic factors, co-occurrence of psychiatric and medical comorbidities, as well as issues of polysubstance use. In addition, there are social, psychological, and biological factors operating simultaneously to affect the initiation, perpetuation, and course of cocaine dependence. The treatment of cocaine dependence remains a challenge and is as yet incomplete compared with the treatment of other addictive disorders. Treatments relevant to both clinicians and the lay audience include pharmacologic and psychosocial treatment modalities, initial assessment and inpatient/residential treatment of the individual, and consumer issues including self-help and 12-step groups. Although pharmacologic treatments are limited, disulfiram, N-acetylcysteine, and cocaine-binding vaccines are showing promise as potential medications. Psychosocial treatments are currently the most effective but have significant limitations when viewed from a public health perspective. Even with the best of therapies, only somewhere between a third and a half of individuals attain abstinence from cocaine dependence with any one treatment. Psychosocial treatments are time intensive,
expensive, and not available in many parts of the country. This chapter addresses the following topics: Botany; History of coca and cocaine; Epidemiology of cocaine use; Pharmacology of cocaine; and Treatment. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

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<td>Subject Headings:</td>
<td>*Cocaine *Drug Addiction *Drug Rehabilitation Crack Cocaine Epidemiology Pharmacology</td>
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<td>Source:</td>
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### 126. Heroin addiction.

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<tr>
<td>Author(s):</td>
<td>Samokhvalov, Andriy V; Rehm, Jurgen</td>
</tr>
<tr>
<td>Institution:</td>
<td>Centre for Addiction and Mental Health (CAMH), Toronto, ON, Canada; Centre for Addiction and Mental Health (CAMH), Toronto, ON, Canada</td>
</tr>
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<td>Language:</td>
<td>English</td>
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<tr>
<td>Abstract:</td>
<td>(from the chapter) Heroin addiction is a major health problem globally. Though during past two decades it was partially substituted by misuse of prescription opioids in high-income countries, especially in North America, and multiple harm reduction programs were initiated in many countries worldwide, size and burden of heroin addiction remains unacceptably high. Heroin and heroin addiction have been well studied on multiple levels starting with chemical analysis of the substance, its pharmacological properties and effects on human organism to the impacts of heroin use on economy, health services usage and society in general. Methods of heroin intoxication, overdose, withdrawal, and dependence treatment are well established in many Western countries as well as in a number of developing countries. Various forms of policies and programs were introduced with some degree of success in reducing the harm associated with heroin. At the same time millions of people worldwide begin and continue using heroin, become addicted to it and are involved in various illegal activities related to heroin addiction, significant portion of patients involved in heroin addiction treatment programs either relapse or do not benefit from these programs at all. All these factors point to the necessity to further elaborate effective anti-heroin policies as well as to improve heroin addiction treatment to better meet the needs of heroin addicts. This chapter addresses the following topics: Prevalence of heroin addiction; Pharmacological and clinical aspects of heroin addiction; Policy. (PsycINFO Database Record (c) 2015 APA, all rights reserved)</td>
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<td>*Drug Rehabilitation *Heroin *Heroin Addiction Drug Laws Health Care Policy</td>
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### 127. Alcohol use disorders.

<table>
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<th>Citation:</th>
<th>Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(647-655) (2013)</th>
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<tr>
<td>Author(s):</td>
<td>Oei, Tian Po Sumantri; Hashing, Penelope Anne</td>
</tr>
<tr>
<td>Institution:</td>
<td>The University of Queensland, St Lucia, QLD, Australia; Monash University, Clayton, VIC, Australia</td>
</tr>
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Abstract:
(from the chapter) According to the Diagnostic and statistical manual of mental disorders 4th edition (DSM-IV), two patterns of alcohol use are of particular concern: alcohol abuse and alcohol dependence. This chapter addresses the following topics: Defining alcohol use disorders; Harms associated with alcohol use; Prevalence of alcohol use disorders; Theories of alcohol use disorders; and Treatments for alcohol use disorders. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: *Alcohol Abuse *Alcoholism
Source: PsycINFO

128. Substance use and mental health issues on the college campus.

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(597-604) (2013)
Author(s): Kilmer, Jason R; Geisner, Irene M
Institution: Center for the Study of Health and Risk Behaviors, University of Washington, Seattle, WA, US
Language: English
Abstract: (from the chapter) Alcohol consumption by college students continues to be both highly prevalent and problematic. Alcohol use does not occur in a vacuum, and other substances are being used. Over one-third (36.0%) of US college students report that they have used an illicit drug in the past year, and marijuana is, by far, the most commonly used illicit substance. In fact, the 32.8% of students who report past-year marijuana use exceeds the 29.9% who report past-year tobacco cigarette use. When marijuana is excluded, 16.9% of US college students report past-year use of an illicit substance. Seven drug categories were associated with over 5.0% of college students indicating past-year use, including: Vicodin (8.4%), Adderall (7.9%), Narcotics other than heroin (7.6%), Amphetamines (7.5%), Oxycontin (7.3%), Salvia (5.8%), and Tranquilizers (5.4%). Data from the National Epidemiologic Study on Alcohol and Related Conditions (NESARC) highlights the prevalence of mental health issues in college settings in the United States. This chapter examines the following topics: Overview of the overlap of mental health issues and substance use; Screening/outreach efforts; Counseling center impressions; and Implications for prevention and intervention. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: *Alcohol Abuse *College Environment *Drug Abuse *Epidemiology *Mental Disorders College Students Comorbidity
Source: PsycINFO

129. Cultural influences on youth alcohol and drug use.

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(585-595) (2013)
Author(s): Hsu, Sharon Hsin
Institution: Center for the Study of Health & Risk Behaviors, University of Washington, Seattle, WA, US
Language: English
Abstract: (from the chapter) This chapter will examine recent studies that have tested cultural variables as risk or protective factors among ethnic minority youth in the US. Ethnic minority youth are 24 years of age or younger and include Asian American and Pacific Islander youth; Hispanic youth; African American youth; and American Indian and Alaska Native youth. These definitions are adapted from the NIDA monograph published in 1993. A greater proportion of the chapter will be dedicated to Asian American and Pacific Islander youth and Hispanic youth given that there has been a significant advancement in the literature with regard to these two ethnic groups. We will also discuss research on youth outside of the US in a later section. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: *Alcohol Abuse *Drug Abuse *Minority Groups *Racial and Ethnic Differences Epidemiology Etiology Protective Factors Risk Factors Sociocultural Factors

Source: PsycINFO

130. Athletes and substance use.

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(575-583) (2013)

Author(s): Martens, Matthew P
Institution: University of Missouri, Columbia, MO, US
Language: English
Abstract: (from the chapter) Researchers have established that for some substances, like alcohol use, certain groups of athletes are more at risk for using the substance than their nonathlete peers. It is fairly well-established that college athletes on an average drink more than students not participating in athletics, and there is evidence to suggest that a similar pattern occurs among high school athletes. For tobacco and recreational drugs, though, evidence suggests that athletes use the substances at rates that are similar to or less than their nonathlete counterparts. In general, little is known about the prevalence rates of substance use among professional or other "elite" athletes. The reasons that athletes drink alcohol more than others or use illicit drugs in the face of potential sanctions such as suspension and possible loss of income are complex. Certainly athletes are susceptible to the same factors that influence substance use in the general population. It is also possible that certain factors unique to sport, such as the cultural association between alcohol and athletics or a normative team-related environment that promotes alcohol use, in part cause some athletes to drink at high rates. There currently exist a number of empirically supported treatment and preventive interventions in the substance abuse arena. Although most of these interventions have not been tested specifically among athletes, there is no reason to suspect that they would not be effective among them. Researchers have recently examined the effects of interventions that contain information targeted specifically for athletes, with findings that are promising. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: *Alcohol Abuse *Athletes *Drug Abuse *Epidemiology *Psychosocial Factors Etiology
131. Alcohol and drug use in lesbian, gay, bisexual, and transgender (LGBT) youth and young adults.

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(563-573) (2013)

Author(s): Balsam, Kimberly F; Molina, Yamile; Lehavot, Keren


Language: English

Abstract: (from the chapter) Lesbian, gay, bisexual, and transgender (LGBT) populations are at elevated risk for substance use and abuse compared to their heterosexual counterparts. This chapter focuses on alcohol and drug use, abuse, and dependency among LGBT populations with a particular emphasis on the developmental period of youth and young adults. We begin by defining sexual orientation and gender identity, discuss the unique life challenges faced by LGBT individuals, and describe how these challenges are linked to substance use, abuse, and dependency for LGBT populations in general. We proceed to discuss some of the challenges that are particular to LGBT youth and young adults, provide details about the use and abuse of specific substances in LGBT youth populations, and discuss potential explanations for elevated use in this population. We conclude the chapter with an overview of substance abuse treatment issues specific to this high-risk population. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: *Alcohol Abuse
*At Risk Populations
*Drug Abuse
Bisexuality
Epidemiology
Lesbianism
Male Homosexuality
Transgender

Source: PsycINFO

132. Epidemiology of adolescent and young adult alcohol, tobacco, and drug use and misuse in the United States.

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(545-562) (2013)

Author(s): Faden, Vivian B; Powell, Patricia A

Institution: National Institute on Alcohol Abuse and Alcoholism, Bethesda, MD, US; National Institute on Alcohol Abuse and Alcoholism, Bethesda, MD, US

Language: English

Abstract: (from the chapter) This chapter will address the use and abuse of the following substances: alcohol; tobacco; marijuana and hashish; cocaine and specifically crack; heroin; hallucinogens overall and specifically lysergic acid diethylamide (LSD), Phencyclidine (PCP), and ecstasy; inhalants; and nonmedical use of any psychotherapeutic overall, specifically pain relievers (in particular oxycontin), tranquilizers, stimulants (in particular methamphetamine), and sedatives. These substances are considered individually and/or by category depending on the analysis. We know from this overview that many adolescents in the United States use some substances at some point during their development, the majority continue this use into young adulthood, and many adolescents and young adults not only use substances but also do so frequently and/or at high levels. While we can list many of the potential consequences of substance use, we know far less about the actual numbers of specific consequences that do occur. Especially difficult to measure are the effects on long-term outcomes. For example, it is virtually impossible to enumerate how many downstream problems are set
in motion by substance use or to determine the number of individuals for whom substance use has either temporarily or permanently interfered with their developmental trajectories. What we can take away from this epidemiologic overview is some sense of the complexity of substance use among young people and the extent to which it is intertwined with development in general, and with psychiatric and other problems, and risk behaviors, specifically. Clearly, substance use is a significant problem among adolescents and young adults, affecting both boys and girls, and young people of every ethnicity, no matter where they live. One can also readily appreciate that far too many youth and young adults have experience with substances, sometimes more than one, and that they are suffering the consequences of that use including dependence. We as a society need to change attitudes so that substance use among young people becomes far less acceptable to young people themselves, as well as to the rest of us. This will be difficult as long as substance use is seen as a statement of maturity and/or identity, as central to socializing, or as a way to escape difficulties.

Publication Type: Book; Edited Book
Subject Headings: *Drug Abuse
*Drug Usage
*Epidemiology
Adolescent Development
Adult Development
Alcohol Abuse
Tobacco Smoking

Source: PsycINFO

133. Developmental risk taking and the natural history of alcohol and drug use among youth.


Author(s): Maggs, Jennifer L; Wray-Lake, Laura; Schulenberg, John E

Institution: The Pennsylvania State University, PA, US; Claremont Graduate University, CA, US; The University of Michigan, MI, US

Language: English

Abstract: (from the chapter) The 2010 Monitoring the Future national survey of high school seniors reported that 71% of adolescents had consumed alcohol by the 12th grade, 42% had tried cigarettes, 44% had used marijuana, and 25% had consumed an illegal drug besides marijuana. These rates suggest that substance use is a common but not universal experience during adolescence. Adolescence is a developmental period characterized by risk-taking behavior, and risk taking is heightened in adolescence for various reasons including biological development and identity exploration. This chapter examines the following topics: Normative development of risk taking; Initiation of alcohol and drug use; Developmental trajectories; Risk and protective factors; Developmental transitions; and Implications for health and prevention. Adolescence and young adulthood constitute critical transition periods during which initiation and escalation of heavy drinking or drug use can set the stage for problems across the lifespan. Utilizing a developmental perspective entails analyzing risk and protective factors and modeling various functions of developmental transitions. This approach can help us understand initiation of substance use, normative and person-specific developmental patterns, and strategies for preventing destructive patterns of use. Given that risk-taking is a broader phenomenon during adolescence, underlying processes related to the development of substance use are likely applicable to a host of problem behaviors and should also inform optimal development across the lifespan. (PsycINFO Database Record (c) 2015 APA, all rights reserved)
Disease Course
Epidemiology

134. Impact of substance use on the course of serious mental disorders.

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(525-532) (2013)

Author(s): Deady, Mark; Teesson, Maree; Brady, Kathleen T

Institution: National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW, Australia; National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW, Australia; Medical University of South Carolina, Charleston, SC, US

Language: English

Abstract: While comorbidity between substance use disorders (SUDs) and severe mental disorders is common, the interaction between disorders is generally seen as one of mutual influence. There are a number of possible explanations for the frequent co-occurrence of mental disorders and SUDs. The explanations have differing consequences for the impact of SUDs on severe mental disorders. The issue of substance use in those with serious mental disorders is gaining increasing attention from researchers and clinicians with strong evidence that it complicates the natural course of the disorder and is associated with a range of negative outcomes. These negative outcomes relate to a myriad of areas such as general health, psychosocial problems, functional impairment, greater symptomatology, earlier age of onset and treatment. While we have excellent evidence on the epidemiology and prevalence of these co-occurring problems, there remains very little guidance as to evidence-based practice for individuals with more than one disorder.

135. Substance use in response to anxiety disorders.

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(507-516) (2013)

Author(s): Robinson, Jennifer A; Bolton, James M

Institution: PsycHealth Centre, Winnipeg, MB, Canada; PsycHealth Centre, Winnipeg, MB, Canada

Language: English

Abstract: The use of substances in response to anxiety (self-medication) is a fairly common and risky behavior. It is associated with increased comorbidity and suicidality, as well as decreased quality of life. The majority of research in this area has focused on the use of alcohol in response to social anxiety disorder, but there is evidence to suggest that the use of other substances, and in response to other anxiety disorders, is an important topic for both clinicians and researchers to consider. Alcohol outcome expectancies (AOEs), gender, and the particular anxiety disorder in question are important considerations for determining the risk of self-medication, but more work is needed to uncover other variables likely to be relevant. Systematic studies of treatment efficacy in self-medicating and comorbid individuals are missing from the research literature. Traditional cognitive behavior therapy and client-centered techniques are likely to be effective for self-medication but require formalized intervention studies. Given the significant
consequences that self-medication can have on an individual, their families, and society at large (in terms of the economic burden of comorbidity), it is an extremely important topic for both clinicians and researchers. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:**
- *Alcohol Abuse*
- *Anxiety Disorders*
- *Comorbidity*
- *Drug Abuse*
- *Self Medication*

**Source:** PsycINFO

136. Substance use and mood disorders.

**Citation:** Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(197-505) (2013)

**Author(s):** Kay-Lambkin, Frances; Baker, Amanda

**Institution:** National Drug and Alcohol Research Center, University of New South Wales, Sydney, NSW, Australia; Center for Brain and Mental Health Research, University of Newcastle, Callaghan, NSW, Australia

**Language:** English

**Abstract:** (create) Mood and alcohol/other drug (AOD) use disorders commonly co-occur, and researchers and clinicians find it difficult to agree on how to best categorize and treat these concurrent conditions. This is a concern given that on a global scale, mental and AOD use disorders contribute 20% to the total burden of disease borne by society, and evidence from some studies indicates that comorbidity is associated with poorer functioning, higher risk of relapse, and increased symptom severity. When tobacco smoking is added to this scenario, the comorbidity between smoking, mood, and AOD use disorders becomes even more burdensome and associated with higher rates of mortality in addition to worsened morbidity. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:**
- *Affective Disorders*
- *Alcohol Abuse*
- *Comorbidity*
- *Drug Abuse*
- Tobacco Smoking

**Source:** PsycINFO

137. Models of relationships between substance use and mental disorders.

**Citation:** Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(489-495) (2013)

**Author(s):** Noordsy, Douglas L; Mishra, Manish K; Mueser, Kim T

**Institution:** Dartmouth Medical School, Lebanon, NH, US; Dartmouth Medical School, Lebanon, NH, US; Dartmouth Psychiatric Research Center, Concord, NH, US

**Language:** English

**Abstract:** (create) Numerous studies have demonstrated an elevated prevalence of substance use disorders (SUDs) among individuals with psychiatric disorders. Strikingly, the odds of co-occurring disorders are elevated by 1.5-2 times the general population rate among individuals with depression and anxiety disorders in these samples, but the odds are elevated 3-6-fold for individuals with schizophrenia or bipolar disorder. This has motivated attempts to understand why such high risks for SUDs occur in this population. Many explanations have been proposed for the increased risk of SUDs in people with
serious mental illness. Four general models of increased comorbidity include secondary psychiatric disorder models, secondary SUD models, common factor models, and bidirectional models. According to secondary psychiatric disorder models, substance use contributes to the onset of mental illness in individuals who would otherwise not have developed these disorders. Secondary SUD models propose that serious mental illness increases the person's chances of developing a SUD. Different models may account for comorbidity in individual patients, and more than one model may apply for a given individual over time, or in relation to different substances. Before reviewing these models we note that much of the data on the prevalence of SUDs in serious mental illness are drawn from clinical samples, including some of the data from the Epidemiologic Catchment Area study. According to Berkson's fallacy, estimates of comorbidity are inflated when samples are obtained from treatment settings, as opposed to the general population, because either disorder increases the likelihood that individuals will receive treatment. As a result, estimates of comorbidity may be inflated by sampling bias. However, it is unlikely that this factor is sufficient to explain the high rates observed.

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Publication Type: Book; Edited Book

Subject Headings: *Comorbidity
*Drug Abuse
*Mental Disorders
*Models
Alcohol Abuse

Source: PsycINFO

138. International data on the prevalence and correlates of comorbid substance use and psychiatric disorders.

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(481-488) (2013)

Author(s): Mills, Katherine L; Marel, Christina

Institution: University of New South Wales, Sydney, NSW, Australia

Language: English

Abstract: (create) The term comorbidity refers to the co-occurrence of two or more disorders or diseases in an individual within a defined period of time. Although the focus of this chapter is on the co-occurrence of substance use and mental disorders, it is important to note that there are many different types of comorbidity evident among individuals with substance use disorders (SUDs). Indeed, the most common form of comorbidity among people with SUDs is the occurrence of more than one SUD. Other conditions that are often found to co-occur with SUDs are physical health conditions (e.g. cirrhosis, hepatitis, heart disease, diabetes), intellectual and learning disabilities, cognitive impairment, and chronic pain. The co-occurrence of mental disorders with alcohol, tobacco, and other drug disorders is not a new phenomenon; however, there has been an increase in awareness of this phenomenon due to the development of structured diagnostic interviews, and their use in large-scale epidemiologic surveys of mental health. Epidemiological surveys provide the opportunity to observe patterns of psychiatric comorbidity in the general population, providing valuable information about the need for services within that population. They also overcome biases inherent in studies of treatment-seeking samples. Over the last three decades, a growing number of representative population surveys utilizing fully structured diagnostic interviews have been conducted around the world. These surveys have provided invaluable data on the prevalence and correlates of comorbid mental health and SUDs. The vast majority of research examining the population prevalence of comorbid mental health and SUDs has come from the United States, but studies have also been conducted in Australia and New Zealand, and Europe (Table 50.1). In addition to these studies, a number of population surveys examining mental health and substance use have been conducted in other countries from the America, Africa, the Eastern Mediterranean, Europe, the Western Pacific, and South east Asia as part of the World Mental Health (WMH) Survey Initiative. At the time of writing, however, only data from the aforementioned countries had been published in relation to
comorbidity. This chapter presents a summary of the major findings of these studies with regard to the prevalence and correlates of comorbidity. The strengths and limitations of these studies are also discussed, as well as future directions for research. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: *Alcohol Abuse  
*Comorbidity  
*Drug Abuse  
*Epidemiology  
*Mental Disorders  
Cognitive Impairment  
Cross Cultural Differences

Source: PsycINFO

139. Relation of craving and appetitive behavior.

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(473-479) (2013)

Author(s): Ferguson, Stuart G; Shiffman, Saul

Institution: School of Pharmacy, University of Tasmania, Hobart, TAS, Australia; University of Pittsburgh, Pittsburgh, PA, US

Language: English

Abstract: (create) The phenomenon of craving has been a core focus of dependence research for many decades. The push to understand and treat craving is born out of the prominence of craving in addicts' experience of their addiction, and the wealth of evidence that suggests that the experience of craving can motivate behaviors such as smoking, gambling, or eating, even in the presence of a conscious desire to avoid the behavior in question. The ability of cravings to induce or promote behaviors, seemingly against the initial intention of those who experience them, is the core characteristic of craving and the one that most attracts the attention of researchers and theoreticians. We also discuss some of the reasons why some studies may have failed to find a relationship between craving and behavior. Arguably the most intensive investigations on the nature and function of craving have taken place in the context of drug dependence, the findings from which are the focus of this review. Craving is an important, albeit nebulous, contributor to the maintenance of drug use and other appetitive behaviors. Its strict definition may be the subject of continued debate, but its role in driving behavior has been, and continues to be, upheld by both subjective reports and scientific reviews. Conceptually, craving can be seen as a final-common-pathway expression of motivations for such behaviors. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: *Appetite  
*Craving  
*Drug Addiction  
*Drug Dependency

Source: PsycINFO

140. Interference with concurrent tasks.

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(467-471) (2013)

Author(s): Kemps, Eva; Tiggemann, Marika

Institution: Flinders University, Adelaide, SA, Australia; Flinders University, Adelaide, SA, Australia

Language: English
Abstract: Craving can be described as a motivational state that is characterized by an intense wanting or longing to seek a particular target or activity, such as a psychoactive substance. Some of the most commonly craved substances are cigarettes, alcohol, and drugs. Although we don't normally think of food as a craved substance, we can and do in fact also crave food. Cravings can give rise to a range of negative consequences, including cognitive impairment. Research to date shows that cravings for cigarettes, alcohol, drugs, as well as food disrupt performance on a range of cognitive tasks, including reaction time, memory, language processing and mental arithmetic; thus people do not perform to their maximum. These adverse cognitive effects further highlight the need for interventions designed to reduce the occurrence of cravings. While these negative consequences are what people in general might expect, there is another less obvious adverse consequence that arises from cravings. This is that cravings interfere with performance on cognitive tasks, resulting in people performing less well than they otherwise would. This chapter sets out to review the literature to date on the cognitive effects of craving. First, the chapter outlines the evidence that cravings impair cognitive task performance. Second, it considers theoretical explanations for the observed cognitive interference from cravings. And finally, it discusses everyday implications of craving-induced cognitive impairments.

Publication Type: Book; Edited Book
Subject Headings: *Alcohol Abuse
*Cognitive Impairment
*Craving
*Drug Abuse
Interference (Learning)

Source: PsycINFO

141. Neural correlates of craving for psychoactive drugs.

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(453-466) (2013)

Author(s): Stewart, Jennifer L; Paulus, Martin P

Institution: University of California, San Diego, San Diego, CA, US; University of California, San Diego, San Diego, CA, US

Language: English

Abstract: The present review of craving has two main objectives. The first objective is to examine the status of neuroimaging research on craving-what we have learned and what we have yet to learn-predominantly within the context of stimulant addiction. Our primary focus will be the study of craving in cocaine addiction, since few studies have examined the neural correlates of self-reported craving responses in methamphetamine and other stimulant drugs that have become increasingly popular, such as dextroamphetamine and methylphenidate, or in other drugs such as cannabis and heroin. However, we will also provide relevant examples, when available, from neuroimaging studies of other drugs (with an emphasis on alcohol and nicotine) in order to demonstrate similarities across substances. The second objective is to explain how the study of brain regions involved in interoception, an intrinsic but largely overlooked component of the craving experience, may contribute to knowledge regarding precipitating factors for drug dependence and relapse and improve treatment outcome for addicted individuals. Before discussing neural systems involved in the implementation of the craving response, however, we will first review paradigms utilized in the neuroimaging literature to elicit craving in drug users and the measurements of craving that are then correlated with brain activation during these paradigms.

Publication Type: Book; Edited Book
Subject Headings: *Cerebral Cortex
*Craving
142. Sensory imagery in craving.

**Citation:** Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(445-452) (2013)

**Author(s):** Andrade, Jackie

**Institution:** University of Plymouth, Drake Circus, Plymouth, United Kingdom

**Language:** English

**Abstract:** Advertisers have long known the power of mental imagery in creating and sustaining desires. Phrases such as "sun-kissed beaches" and "turquoise waters" help us to conjure up an image of an island paradise and stimulate our desire for a relaxing holiday. We mentally enjoy the beautiful view, feel the warm sand between our toes, and hear the gentle splash of waves on the shore. "Sensory imagery" refers to this ability to mentally simulate the sight, sound, smell, taste, and feel of an experience. Sensory imagery is used in clinical settings and in laboratory research to stimulate or exacerbate craving for drugs. For example, smokers crave cigarettes more after being asked to imagine relaxing with friends who are lighting up and to imagine the taste and effects of smoking, than after imagining a neutral scenario unrelated to smoking. More vivid imagery of the smoking scenarios is associated with stronger urges to smoke. Likewise, alcohol craving can be induced by asking clients to imagine entering their favorite bar, ordering, holding and tasting a cold, refreshing glass of their favorite beer. Sensory imagery is a powerful tool for inducing craving because it taps into the cognitive system that underpins human motivation and supports complex behaviors. Imagery plays an important role in motivation because it conveys the emotional qualities of the desired event, mimicking anticipated pleasure or relief. Sensory imagery is central to craving, giving craving its emotional bite and prolonging episodes of craving in the face of competing desires to abstain. Stronger, more vivid imagery predicts stronger craving in clinical and nonclinical samples, while blocking imagery with simple working memory tasks has been shown to reduce craving. Studies of food craving and of smokers' craving for cigarettes suggest that techniques combining thought acceptance and competing sensory imagery will be effective for reducing the frequency and strength of episodes of craving. Self-report data show similar craving phenomenology across addicted and nonclinical samples; therefore, we predict similar effects of these techniques in clinical populations. Effective interventions for substance craving in addiction are likely to be those that combine strategies for disrupting the elaboration of intrusive thoughts about substance use with strategies for blocking any ensuing sensory imagery. (PsycINFO Database Record (c) 2015 APA, all rights reserved)
In everyday terms, an attentional bias might be interpreted simply as a tendency to attend more toward some thing than others, and it would thus seem straightforward to conclude that people who are dependent upon a substance will pay more attention toward it, and notice it more in their environment, particularly if they are currently craving it. Within cognitive psychology, however, facilitated recognition or responding to a cue is described as priming, and can arise for many different reasons, including prior exposure, motivation, overlearning, or general activation of mental representations (see Cognitive Factors in Addictive Processes by Neighbors). In this context, attentional bias has a more precise meaning, since it reflects a bias within the attentional processes themselves, and it has been argued that this may represent a change in mental functioning that causes or maintains substance dependence. If this is the case, then therapeutic approaches that modify such biases may help alleviate craving, and hence assist abstinence attempts. Theories that see addictive behavior as an automatic response (such as Tiffany's view that drug-seeking behavior is driven by the activation of overlearnt action schemas, with craving occurring when these schemas are blocked or inhibited) would predict a strong relationship between attentional bias and craving, and also between attentional bias and drug use. An alternative possibility is that attentional biases do not play a causal role in craving, either being a consequence of craving, or being caused by the same processes that lead to craving, and so while they may attenuate as craving is reduced, attempts to modify them directly will not have any direct impact upon craving, substance use, or addiction. Overall, the evidence to date gives attentional biases a real but limited role in addiction. Craving, and hence motivated substance use, can be brought about by an increased sensitivity to substance-related cues, but involves more explicit controlled processes that may themselves affect responses on the tasks conventionally used to measure attentional bias. Whereas attentional retraining tasks do have an effect upon craving and substance use, they may work more through their effect upon later strategic responses to attended cues than upon early and automatic attentional biases.
experience, and it can relate to both the avoidance of an aversive state and seeking reward. Both types of craving coexist and are potentially related to drug expectancies although the experience of craving is more closely temporally linked to drug use itself. Individual differences in the neurobiology of reward related to genetics and learning history influence both craving and expectancy development. Drug expectancy, refusal self-efficacy, and craving can all be stimulated by external drug-related cues in the presence of signals of drug availability. Craving has fallen in and out of fashion, but has been given more credence over recent years as an important component in models of drug use, given its neurobiological validation. Although not directly compared in research studies, drug expectancies appear to develop first via observational learning and then both craving and expectancy develop as a consequence of use itself. Both craving and expectancy are shaped via brain processes that signal the presence of reward and facilitate associative learning. While these processes are complex and involve multiple neurotransmitters, dopamine has a central role. Drug expectancies and drinking refusal self-efficacy can work together as part of the same memory network to influence the acute initiation of drug use. There is a growing body of work confirming viable ways of altering expectancy and craving. In the absence of expectancy challenge, diminishing motivation via craving reduction in the context of strong expectancies may be a future useful treatment. The treatment implications of integrating expectancy and craving are yet to be fully realized. (PsycINFO Database Record (c) 2015 APA, all rights reserved)
that pharmacological and cue exposure treatments may work synergistically is important. However, the growing awareness of how individual factors (e.g. genetics) affect treatment response indicates that some kind of screening process is required. Screening treatment-seeking individuals should help target treatments and increase their cost-effectiveness, whether these are treatments based upon the evidence from cue reactivity research or not. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

146. Implicit and associative processes in addiction.


Wiers, Reinout W; Stacy, Alan W

University of Amsterdam, Amsterdam, Netherlands; Claremont Graduate University, Claremont, CA, US

English

(quote) There is ample evidence that implicit or associative processes play an important role in addictive behaviors, despite the fact that there are many open questions in this relatively young field of research. There are different indirect methods to assess these processes, some relying on reaction times, some not. With both types of measures, it has been found that substance associations predict unique variance in substance use, also after controlling for explicit cognitive processes. In addition, there is evidence that heavy substance use is related to an approach bias for that substance (as well as an attentional bias for the substance, discussed more extensively in Attentional Biases in Craving). Most research has studied associative processes involved in alcohol use and misuse, some in cigarette and marijuana smoking and few have studied associative processes related to other substance use and misuse. In addition, little is known yet about the development of associative processes in relation to the development of addictive behaviors. There is an emerging evidence that associative processes better predict substance use and related behaviors in individuals with relatively limited executive control abilities (either as a trait or as a state). Finally, there are promising first studies that demonstrate that it is possible to modify associative processes in addiction. These findings are not only important for establishing causality of these processes but also hold promise for novel interventions, as initial studies demonstrate. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

147. Deprivation, craving, and affect: Intersecting constructs in addiction.
Evidence Services | library.nhs.uk

Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction,, 2013(395-403) (2013)

Author(s): Oliver, Jason A; MacQueen, David A; Drobes, David J

Institution: Moffitt Cancer Center, University of South Florida, Tampa, FL, US; Moffitt Cancer Center, University of South Florida, Tampa, FL, US; Moffitt Cancer Center, University of South Florida, Tampa, FL, US

Language: English

Abstract: Substance dependence and addictive behavior are complex syndromes, driven by a number of different processes. However, three concepts that are thought to play a central role in nearly every theory of addiction are deprivation/withdrawal, craving, and affect. The experience of drug craving and affective disturbance are key features of drug dependence that are acknowledged by nearly every theory of addiction. Most notably, both symptoms of dependence are markedly pronounced during drug deprivation and are thus characteristics of withdrawal. Though each of these concepts is distinct, they are also inextricably linked and interact in a number of ways. In this chapter, we will review the current state of both psychosocial and neurophysiological evidence derived from both nonhuman animal and human research on these topics. We provide basic definitions and formulations of these topics individually, and then discuss both specific research findings and overarching models that attempt to integrate these concepts. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: *Alcoholism 
*Craving 
*Drug Addiction 
*Drug Dependency 
*Models 
Deprivation

Source: PsycINFO


Citation: Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction,, 2013(381-393) (2013)

Author(s): Rosenberg, Harold

Institution: Bowling Green State University, Bowling Green, OH, US

Language: English

Abstract: Developing and evaluating measures of subjective craving are complicated by questions regarding the emotional, cognitive, behavioral, and physiological components of craving, the threshold separating preference from craving, the degree to which one is interested in an acute and fluctuating experience of craving or a relatively stable preoccupation with or inclination to use a target drug, and the degree to which substance users are aware of and able to report on their motivational state of craving, among others. These questions notwithstanding, researchers and clinicians have a variety of assessment methods from which to choose, including single-item ratings of craving, multi-item questionnaires representing several different conceptualizations of craving, the free-response or think-aloud procedure, reports of drug dreams, observation of drug seeking and drug consumption, performance on reaction time tasks, and physiological reactivity. Given the diversity of procedures for assessing craving, on what basis might clinicians and researchers choose a specific measure? Each type of assessment procedure has its advantages and disadvantages, and most could be used to measure craving experienced during a period of abstinence, within an ongoing drug-use episode, or during withdrawal. Selection will depend on several factors, including one's theoretical conceptualization of addiction and craving, the time frame over which one wants to assess craving (e.g. right now; over past 24 h; over past week), access to physiological recording equipment, opportunities to observe drug consumption, and the need for quick assessment
when conducting repeated measurement or if respondents have limited concentration. Depending on one's setting, the expensive equipment needed for some procedures (e.g. assessment of brain activation), and the ethical and practical limitations of procedures that involve providing access to an illicit drug, will also influence one's selection. Perhaps the best strategy, if it is practical in one's clinical or research setting, is to employ several measures, each assessing different emotional states, cognitions, and behaviors considered indicative of craving. Finally, as the concept of addiction has been applied beyond substances to apparently "addictive" activities such as gambling, physical exercise, computer use, and viewing sexually explicit material, there have been suggestions that researchers and clinicians also assess urges or cravings for those activities. For example, several of the multi-item self-report instruments listed in Table 40.1 have been modified to assess urges or inclinations to gamble. Further research may reveal that activity-specific modifications of craving questionnaires, and the other self-report, behavioral and physiological procedures outlined above, will improve the assessment and treatment of other types of addictive disorders.

Publication Type: Book; Edited Book
Subject Headings: *Craving *Psychological Assessment *Terminology *Drug Seeking Alcohol Abuse Drug Abuse
Source: PsycINFO

149. The effects of substances on driving.

Author(s): Hanson, David J
Institution: State University of New York, Potsdam, NY, US
Language: English
Abstract: (create) Operating motor vehicles involves performing multiple tasks, the demands of which can change continuously. To operate a vehicle safely, a driver must remain alert, make decisions based on ever-changing information present in the environment, and execute maneuvers based on these decisions. This requires adequate visual functioning, information processing, decision-making, and psychomotor skills. The subtlety and complexity of the skills required to operate motor vehicles make them susceptible to impairment from a variety of both licit and illicit substances. However, less commonly recognized is the fact that some substances can enhance driving performance under certain circumstances. The substances reviewed below are beverage alcohol (ethanol), caffeine, nicotine, cannabis (marijuana), amphetamine, cocaine, opioids (morphine and heroin), carisoprodol and meprobamate, phencyclidine (PCP), gamma-hydroxybutyrate (GHB) and its precursors of gamma-butyrolactone (GBL) and 1,4-BD, toluene, Zolpidem (and zaleplon, zopiclone), dextromethorphan, diazepam, diphenhydramine, ketamine, and lysergic acid diethylamide (LSD). The problem of traffic crashes and the injury and deaths they cause is a very serious one. Dangerous driving has many causes. It includes not only alcohol consumption but also drug use, cell phone use, driving while drowsy, driving while eating, and many other factors, all of which need to be addressed. A person who is killed in an impaired driving crash is just as dead whether the impairment was caused by alcohol, other substances, or driver inattention. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: *Alcohol Abuse *Driving Under the Influence *Drug Abuse Decision Making
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<th>PsycINFO</th>
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<td><strong>150. Maturing out.</strong></td>
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<tr>
<td>Citation:</td>
<td>Comprehensive addictive behaviors and disorders, Vol. 1: Principles of addiction., 2013(363-370) (2013)</td>
</tr>
<tr>
<td>Author(s):</td>
<td>Littiefield, Andrew K; Winograd, Rachel P</td>
</tr>
<tr>
<td>Language:</td>
<td>English</td>
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<tr>
<td><strong>Abstract:</strong></td>
<td>(create) Perhaps contrasting with popular notions, substance use disorders (SUDs) are largely disorders of young adulthood. Data from several large epidemiological studies indicate that the peak prevalence of SUDs, such as alcohol use disorders (AUDs), occurs during the early twenties and then drops precipitously with age. That is, many of the young adults who experience SUDs during young adulthood later remit (often without receiving treatment). This process of normative decline in problematic substance use is referred to as maturing out. In this chapter, empirical data depicting the rise and fall in the prevalence of SUDs in young adulthood will be summarized. Specifically, theories describing potential mechanisms that contribute to the peak substance use observed during late adolescence/early adulthood will be described. In conjunction, theories that depict processes that contribute to maturing out will be covered. Finally, important considerations relevant to the phenomenon of maturing out will be highlighted. (PsycINFO Database Record (c) 2015 APA, all rights reserved)</td>
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<td>Publication Type:</td>
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| **Subject Headings:** | *Adult Development  
*Alcohol Abuse  
*Drug Abuse  
*Mental Disorders  
*Spontaneous Remission |
| Source: | PsycINFO |