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1. Emotions and motivated behavior converge on an amygdala-like structure in the zebrafish.

Citation: European Journal of Neuroscience, August 2014(No Pagination Specified), 0953-816X;1460-9568 (Aug 22, 2014)

Author(s): Trotha, Jakob William; Vernier, Philippe; Bally-Cuif, Laure

Abstract: The brain reward circuitry plays a key role in emotional and motivational behaviors, and its dysfunction underlies neuropsychiatric disorders such as schizophrenia, depression and drug addiction. Here, we characterized the neuronal activity pattern induced by acute amphetamine administration and during drug-seeking behavior in the zebrafish, and demonstrate the existence of conserved underlying brain circuitry. Combining quantitative analyses of cfos expression with neuronal subtype-specific markers at single-cell resolution, we show that acute d-amphetamine administration leads to both increased neuronal activation and the recruitment of neurons in the medial (Dm) and the lateral (Dl) domains of the adult zebrafish pallium, which contain homologous structures to the mammalian amygdala and hippocampus, respectively. Calbindin-positive and glutamatergic neurons are recruited in Dm, and glutamatergic and -aminobutyric acid (GABAergic) neurons in Dl. The drug-activated neurons in Dm and Dl are born at juvenile stage rather than in the embryo or during adulthood. Furthermore, the same territory in Dm is activated during both drug-seeking approach and light avoidance behavior, while these behaviors do not elicit activation in Dl. These data identify the pallial territories involved in acute psychostimulant response and reward formation in the adult zebrafish. They further suggest an evolutionarily conserved function of amygdala-like structures in positive emotions and motivated behavior in zebrafish and mammals. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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2. Do young people benefit from AA as much, and in the same ways, as adult aged 30+? A moderated multiple mediation analysis.

Citation: Drug and Alcohol Dependence, July 2014(No Pagination Specified), 0376-8716 (Jul 30, 2014)

Author(s): Hoeppner, Bettina B; Hoeppner, Susanne S; Kelly, John F

Abstract: BACKGROUND: Research has shown that participation in Alcoholics Anonymous (AA) confers significant recovery benefit to adults suffering from alcohol use disorder (AUD). Concerns persist, however, that AA may not work as well for younger adults, who tend to have shorter addiction histories, different social circumstances, and less spiritual/religious interest than adults. METHODS: Secondary data analysis of Project MATCH, using a prospective, moderated multiple mediation analysis to test and compare six previously identified mechanisms of change in younger adults (n=266) vs. adults aged 30+ (n=1460). Nine clinical sites within the United States. Treatment-seeking adults (n=1726) suffering from AUD who participated in 12 weeks of outpatient treatment and completed follow-ups at 3-, 9- and 15-months. AA attendance during treatment; mediators at 9 months; and outcomes [percentage of days abstinent (PDA) and drinks per drinking day (DDD)] at 15 months. RESULTS: AA attendance was associated with improved drinking outcomes in both younger adults (PDA: F(1, 247)=8.55, p<0.01; DDD: F(1, 247)=15.93, p<0.01) and adults aged 30+ (PDA: F(1, 1311)=86.58, p<0.01; DDD: F(1, 1311)=11.96, p<0.01). Only two of the six hypothesized pathways (i.e., decreases in pro-drinking social networks, self-efficacy in social situations) appeared to work in younger adults. CONCLUSION: Unidentified mechanisms of behavior change that are mobilized by AA participation appear to be at work in young people. Once identified, these mechanisms may shed new light on how exactly AA confers similar benefits for young people and,
more broadly, may enhance our understanding of recovery-related change for young adults that could yield novel intervention targets. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

3. New perspectives on using brain imaging to study CNS stimulants.

Citation: Neuropharmacology, July 2014(No Pagination Specified), 0028-3908 (Jul 29, 2014)
Author(s): Lukas, Scott E
Abstract: While the recent application of brain imaging to study CNS stimulants has offered new insights into the fundamental factors that contribute to their use and abuse, many gaps remain. Brain circuits that mediate pleasure, dependence, craving and relapse are anatomically, neurophysiologically and neurochemically distinct from one another, which has guided the search for correlates of stimulant-seeking and taking behavior. However, unlike other drugs of abuse, metrics for tolerance and physical dependence on stimulants are not obvious. The dopamine theory of stimulant abuse does not sufficiently explain this disorder as serotonergic, GABAergic and glutamatergic circuits are clearly involved in stimulant pharmacology and so tracking the source of the "addictive" processes must adopt a more multimodal, multidisciplinary approach. To this end, both anatomical and functional magnetic resonance imaging (MRI), MR spectroscopy (MRS) and positron emission tomography (PET) are complementary and have equally contributed to our understanding of how stimulants affect the brain and behavior. New vistas in this area include nanotechnology approaches to deliver small molecules to receptors and use MRI to resolve receptor dynamics. Anatomical and blood flow imaging has yielded data showing that cognitive enhancers might be useful adjuncts in treating CNS stimulant dependence, while MRS has opened opportunities to examine the brain's readiness to accept treatment as GABA tone normalizes after detoxification. A desired outcome of the above approaches is being able to offer evidence-based rationales for treatment approaches that can be implemented in a more broad geographic area, where access to brain imaging facilities may be limited. This article is part of a Special Issue entitled 'CNS Stimulants'. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

4. Updated findings of the association and functional studies of drd2/ankk1 variants with addictions.

Citation: Molecular Neurobiology, August 2014(No Pagination Specified), 0893-7648;1559-1182 (Aug 20, 2014)
Author(s): Ma, Yunlong; Yuan, Wenji; Jiang, Xianzhong; Cui, Wen-Yan; Li, Ming D
Abstract: Both nicotine and alcohol addictions are severe public health hazards worldwide. Various twin and family studies have demonstrated that genetic factors contribute to vulnerability to these addictions; however, the susceptibility genes and the variants underlying them remain largely unknown. Of susceptibility genes investigated for addictions, DRD2 has received much attention. Considering new evidence supporting the association of DRD2 and its adjacent gene ankyrin repeat and kinase domain containing 1 (ANKK1) with various addictions, in this paper, we provide an updated view of the involvement of
variants in DRD2 and ANKK1 in the etiology of nicotine dependence (ND) and alcohol dependence (AD) based on linkage, association, and molecular studies. This evidence shows that both genes are significantly associated with addictions; however the association with ANKK1 appears to be stronger. Thus, both more replication studies in independent samples and functional studies of some of these variants are warranted. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Author(s): Granero, Roser; Hilker, Ines; Aguera, Zaida; Jimenez-Murcia, Susana; Sauchelli, Sarah; Islam, Mohammed A; Fagundo, Ana B; Sanchez, Isabel; Riesco, Nadine; Dieguez, Carlos; Soriano, Jose; Salcedo-Sanchez, Cristina; Casanueva, Felipe F; De la Torre, Rafael; Menchon, Jose M; Gearhardt, Ashley N; Fernandez-Aranda, Fernando

Abstract: Although the concept of 'food addiction' (FA) has raised growing interest because of evidence for similarities between substance dependence and excessive food intake, there is a lack of studies that explore this construct among the wide spectrum of eating disorders (EDs). Besides providing validation scores of a Spanish version of the Yale FA Scale (YFAS-S), this study examined the prevalence of 'FA' among ED subtypes compared with healthy-eating controls (HCs) and the association between 'FA' scores, eating symptomatology and general psychopathology. A sample of 125 adult women with ED, diagnosed according to Diagnostic and Statistical Manual of Mental Disorders 5 criteria, and 82 healthy-eating women participated in the study. All participants were assessed with the YFAS-S, the ED Inventory-2 and the Symptom Checklist-Revised. Results showed that the internal structure of the one-dimensional solution for the YFAS-S was very good ($\alpha = 0.95$). The YFAS-S has a good discriminative capacity to differentiate between ED and controls (specificity = 97.6% and sensitivity (Se) = 72.8%; area under receiver operating characteristic curve = 0.90) and a good Se to screen for specific ED subtypes. YFAS-S scores were associated with higher levels of negative affect and depression, higher general psychopathology, more severe eating pathology and greater body mass index. When comparing the prevalence of 'FA' between ED subtypes, the lowest prevalence of 'FA', measured with the YFAS-S, was for the anorexia nervosa (AN) restrictive subtype with 50%, and the highest was for the AN binge-purging subtype (85.7%), followed by bulimia nervosa (81.5%) and binge eating disorder (76.9%). In conclusion, higher YFAS-S scores are associated with bingeing ED-subtype patients and with more eating severity and psychopathology. Although the 'FA' construct is able to differentiate between ED and HC, it needs to be further explored. Copyright 2014 John Wiley & Sons, Ltd and Eating Disorders Association. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: Journal; Peer Reviewed Journal

Source: PsycINFO


Citation: Addiction Biology, August 2014(No Pagination Specified), 1355-6215;1369-1600 (Aug 19, 2014)

Author(s): Parker, Matthew O; Evans, Alexandra M-D; Brock, Alistair J; Combe, Fraser J; Teh, Muy-Teck; Brennan, Caroline H

Abstract: Exposure to alcohol during early central nervous system development has been shown variously to affect aspects of physiological and behavioural development. In extreme cases, this can extend to craniofacial defects, severe developmental delay and mental retardation. At more moderate levels, subtle differences in brain morphology and behaviour have been observed. One clear effect of developmental alcohol exposure is an increase in the propensity to develop alcoholism and other addictions. The mechanisms by which this occurs, however, are not currently understood. In this study, we tested the hypothesis that adult zebrafish chronically exposed to moderate levels of ethanol during early brain ontogenesis would show an increase in conditioned place preference for alcohol and an increased propensity towards habit formation, a key component of drug addiction in humans. We found support for both of these hypotheses and found that the exposed fish had changes in mRNA expression patterns for dopamine receptor, nicotinic acetylcholine receptor and -opioid receptor encoding genes. Collectively, these data show an explicit link between the increased proclivity for addiction and addiction-related behaviour following exposure to ethanol during early brain development and alterations.
in the neural circuits underlying habit learning. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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


Citation: Psychiatry Research, August 2014(No Pagination Specified), 0165-1781 (Aug 6, 2014)
Author(s): Theodora, Kandri A; Konstantinos, Bonotis S; Georgios, Floros D; Maria, Zafiropoulou M
Abstract: The increasing use of computers and the internet - especially among young people - apart from its positive effects, sometimes leads to excessive and pathological use. The present study examined the relationship among the excessive use of the internet by university students, the alexithymia components and sociodemographic factors associated with internet users and their online activities. 515 university students from the University of Thessaly participated in the study. Participants anonymously completed: a) the Internet Addiction Test (IAT), b) the Toronto Alexithymia Test (TAS 20) and c) a questionnaire covering various aspects of internet use and demographic characteristics of internet users. Excessive use of the internet among Greek university students was studied within a multi-factorial context and was associated with the alexithymia and demographic factors in nonlinear correlations, forming thus a personalized emotional and demographic profile of the excessive internet users. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings:
Source: PsycINFO
Full Text: Available from Elsevier in Psychiatry Research

10. Does the pattern of amphetamine use prior to incarceration predict later psychosis?-a longitudinal study of amphetamine users in the swedish criminal justice system.

Citation: Drug and Alcohol Dependence, August 2014(No Pagination Specified), 0376-8716 (Aug 10, 2014)
Author(s): Rognli, Eline Borger; Hakansson, Anders; Berge, Jonas; Bramness, Jorgen G
Abstract: OBJECTIVES: The aim of this longitudinal study was to investigate the relationship between self-reported amphetamine use prior to inclusion in the criminal justice system and hospitalization due to psychosis in the years following release. METHOD: All the information was extracted from existing databases. Amphetamine-using clients in the criminal justice system in Sweden were identified using the European version of the addiction severity index (Europ-ASI) interview. Between 2001 and 2006, a total of 1709 individuals were identified. A follow-up of the subjects, using national registry data, was conducted in 2010. The outcome measure was hospitalization for primary or substance-induced psychotic episodes during the follow-up period. Data was analyzed in a multivariate logistic regression model. RESULTS: Age of onset of amphetamine use, number of years used, and use in the month prior to baseline interview were all unrelated to risk of future hospitalization due to psychosis. Prior psychiatric hospitalization and experience of hallucinations not related to drug use, as well as being born outside of a Nordic country and being homeless, were all positively linked to hospitalization due to psychosis. CONCLUSIONS: This study demonstrates that, in a cohort of amphetamine users within the criminal justice system, prior psychiatric morbidity and demographic risk factors are more important than baseline patterns of amphetamine use in predicting future
risk of hospitalization due to psychosis. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**11. The histone deacetylase (hdac) inhibitor valproic acid reduces ethanol consumption and ethanol-conditioned place preference in rats.**

**Citation:** Brain Research, August 2014(No Pagination Specified), 0006-8993 (Aug 7, 2014)

**Author(s):** Al Ameri, Mouza; Al Mansouri, Shamma; Al Maamari, Alyazia; Bahi, Amine

**Abstract:** Recent evidence suggests that epigenetic mechanisms such as chromatin modification (specifically histone acetylation) may play a crucial role in the development of addictive behavior. However, little is known about the role of epigenetic modifications in the rewarding properties of ethanol. In the current study, we studied the effects of systemic injection of the histone deacetylase (HDAC) inhibitor, valproic acid (VPA) on ethanol consumption and ethanol-elicited conditioned place preference (CPP). The effect of VPA (300mg/kg) on voluntary ethanol intake and preference was assessed using continuous two-bottle choice procedure with escalating concentrations of alcohol (2.5-20% v/v escalating over 4 weeks). Taste sensitivity was studies using saccharin (sweet; 0.03% and 0.06%) and quinine (bitter; 20M and 40M) tastants solutions. Ethanol conditioned reward was investigated using an unbiased CPP model. Blood ethanol concentration (BEC) was also measured. Compared to vehicle, VPA-injected rats displayed significantly lower preference and consumption of ethanol in a two-bottle choice paradigm, with no significant difference observed with saccharin and quinine. More importantly, 0.5g/kg ethanol-induced-CPP acquisition was blocked following VPA administration. Finally, vehicle- and VPA-treated mice had similar BECs. Taken together, our results implicated HDAC inhibition in the behavioral and reinforcement-related effects of alcohol and raise the question of whether specific drugs that target HDAC could potentially help to tackle alcoholism in humans. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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**Full Text:** Available from Elsevier in Drug and Alcohol Dependence

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**12. Baclofen-induced manic symptoms: Case report and systematic review.**

**Citation:** Psychosomatics: Journal of Consultation and Liaison Psychiatry, July 2014, vol./is. 55/4(326-332), 0033-3182;1545-7206 (Jul 2014)

**Author(s):** Geoffroy, Pierre Alexis; Auffret, Marine; Deheul, Sylvie; Bordet, Regis; Cottencin, Olivier; Rolland, Benjamin

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**Language:** English

**Abstract:** Background: The gamma-aminobutyric acid type B receptor agonist baclofen is approved for spasticity and is used off-label for diverse types of addictive disorders, notably alcohol dependence. Baclofen may induce numerous neuropsychiatric adverse drug reactions,
including behavioral disinhibition. However, this precise adverse drug reaction has never been assessed using either a validated causality algorithm or a scale for manic symptoms. Methods: We report a case of a 49-year-old male patient who exhibited de novo mania during treatment with baclofen for alcohol dependence. Symptoms were evaluated using the Young Mania Rating Scale, and the causality of baclofen was determined using the Naranjo algorithm. This case was also compared with other cases of baclofen-induced mania through a systematic literature review. Results: Mr. X, taking 180mg/d of baclofen, presented with mania and scored 24 of 44 on the Young Mania Rating Scale, and the imputability of baclofen was "probable" using the Naranjo algorithm (8 of 13). In addition, 4 other cases of baclofen-induced mania were reported in the literature; 3 cases had a bipolar I disorder history. Baclofen-induced manic symptoms occurred mostly during the dose-escalation phase. Conclusion: Baclofen-induced manic symptoms may appear in patients with or without bipolar disorder. Particular attention is required during the dose-increase phase and in patients with a history of mood disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
However, females were significantly less sensitive than males to the threshold-increasing effects of U-50488, independent of estrous cycle stage in females or gonadectomy in males. Although initial plasma concentrations of U-50488 were higher in females, there were no sex differences in brain concentrations. Sex differences in U-50488-induced c-Fos activation were observed in corticotropin releasing factor-containing neurons of the paraventricular nucleus of the hypothalamus and primarily in non-corticotropin releasing factor-containing neurons of the bed nucleus of the stria terminalis. Conclusions: These data suggest that the role of KORs in motivated behavior of rats is sex-dependent, which has important ramifications for the study and treatment of mood-related disorders, including depression and drug addiction in people. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)


Country of Publication: HOLDER: Society of Biological Psychiatry; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Brain Self Stimulation
*Dynorphins
*Human Sex Differences
*Ligand
*Rats

Source: PsycINFO

Full Text: Available from Elsevier in Biological Psychiatry


Original Title: Anabole-androgene steroider-En oversikt.

Citation: Tidsskrift for Norsk Psykologforening, January 2014, vol./is. 51/1(22-28), 0332-6470 (Jan 2014)

Author(s): Pallesen, Stale; Andreassen, Cecilie Schou; Jensen, Silje Marie; Josendal, Ola; Wadsworth, Stale; Pettersen, Henrik Sahlin

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Institution: Institutt for Samfunnspsykologi, Universitetet i Bergen, Bergen, Norway; Institutt for Samfunnspsykologi, Universitetet i Bergen, Bergen, Norway; Lovisenberg DPS, Poliklinikk Gamle Oslo, Oslo, Norway; Avdeling for Rusmedisin, Haukeland Universitets Sykehus, Norway; Steroider.net, Norway; Institutt for Kreftforskning og Molekylær Medisin, NTNU, Norway

Language: Norwegian

Abstract: This article provides an overview of anabolicandrogenic steroids (ASS). Topics such as prevalence, side-effects, ways of administering AAS, prevention and treatment are presented. AAS are derivatives of the male sex hormone, testosterone. Illicit AAS use has been dominated by athletes with an aim to improve physical performance. In the recent decades, however, AAS abuse has spread beyond organized sports, mainly to adolescents and young adults with a goal of improving both physical strength and appearance. Illegal use of AAS correlates with abuse of alcohol and other drugs. AAS abuse is associated with a wide range of somatic and psychological side effects. Prevention of illicit use of AAS has largely comprised information and awareness campaigns based on scare tactics; however, the effects of these campaigns are limited. Prevention that focuses on practical skills seems to yield better results. So far little emphasis has been put on the impact of body ideals in prevention programs. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Original Title: Randomiserte kontrollerte studier av psykologisk behandling for samtidig posttraumatisk stresslidelse og ruslidelse.

Citation: Tidsskrift for Norsk Psykologforening, January 2014, vol./is. 51/1(2-5), 0332-6470 (Jan 2014)

Author(s): Halvorsen, Joar Overaas; Grawe, Rolf W; Hoxmark, Ellen Margrethe

Correspondence Address: Halvorsen, Joar Overaas, joar.halvorsen@svt.ntnu.no

Institution: Psykologisk Institutt, Norges Teknisk-Naturvitenskapelige Universitet, Norway; Avdeling for Forskn og Utvikling, Rusbehandling Midt-Norge, Norway; Ressurssenter om Vold, Traumastisk Stress og Selvmordsforebygging, Region Midt, Norway

Language: Norwegian

Abstract: Posttraumatic stress disorder (PTSD) and substance use disorders (SUDS) frequently co-occur and this comorbidity is associated with more severe symptoms and disability, worse treatment outcomes and higher relapse rates, compared to patients presenting with only one of these disorders. The present article sets out to review randomized controlled trials of three influential integrated treatment models for concurrent PTSD and SUDS: (1) Seeking Safety, (2) Integrated Cognitive Behavioral Therapy, and (3) Concurrent Treatment of PTSD and Substance Use Disorders with Prolonged Exposure. Our main finding is that there are few significant differences between interventions and control conditions on any treatment outcomes, and the majority of studies are characterised by substantial methodological limitations. Our main conclusion is that there is a pressing need for methodological stringent and rigorous clinical trials in order to inform clinical practice. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Cognitive Behavior Therapy
*Dose Abuse
*Exposure Therapy
*Posttraumatic Stress Disorder
Comorbidity
Safety

Source: PsycINFO


Citation: Brain Impairment, May 2014, vol./is. 15/1(18-27), 1443-9646;1839-5252 (May 2014)

Author(s): Wester, Arie J; Roelofs, Renee L; Egger, Jos I. M; Kessels, Roy P. C

Correspondence Address: Kessels, Roy P. C.: Centre of Excellence for Korsakoff and Alcohol-Related Cognitive Disorders, Vincent van Gogh Institute of Psychiatry, D'n Herk 90, Venray, Netherlands, 5803 DN, r.kessels@donders.ru.nl

Institution: Centre of Excellence for Korsakoff and Alcohol-Related Cognitive Disorders, Vincent van Gogh Institute for Psychiatry, Venray, Netherlands; Centre of Excellence for Korsakoff and Alcohol-Related Cognitive Disorders, Vincent van Gogh Institute for Psychiatry, Venray, Netherlands; Donders Institute for Brain, Cognition and Behaviour, Radboud University Nijmegen, Nijmegen, Netherlands; Centre of Excellence for
Korsakoff and Alcohol-Related Cognitive Disorders, Vincent van Gogh Institute for Psychiatry, Venray, Netherlands

Language: English

Abstract: Objectives: Neuropsychological assessment of memory disorders is an important prerequisite in the treatment of patients with alcohol-related cognitive disorders. Although many memory tests are available in clinical practice, a question remains regarding which test is most appropriate for this purpose. Our study's goal was to evaluate the discriminative power of indices of a standard memory test (the California Verbal Learning Test; CVLT) versus the subtests of an ecologically valid everyday memory test (the Rivermead Behavioural Memory Test; RBMT) in patients with alcohol-use disorder.

Method: The patients included 136 with Korsakoff's syndrome (KS), 73 alcoholics with cognitive impairment (CI) not fulfilling the criteria for KS, and 24 cognitively unimpaired alcoholics (ALC). Results: KS patients performed significantly lower on all RBMT and CVLT variables than CI patients. ALC patients performed significantly better than CI patients on only one RBMT subtest, and had a significantly lower rate of forgetting and higher scores on free recall on CVLT. A combination of RBMT subtests and CVLT indices was able to discriminate KS patients from CI and ALC patients. The RBMT subtests could not significantly distinguish ALC from CI patients. Both rate of forgetting and a comparison between free and cued recall testing on the CVLT showed the largest between-group differences. Conclusion: Although the RBMT provides information about everyday memory performance, the CVLT indices are better able to distinguish between uncomplicated alcoholics and those with cognitive impairment or KS. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcoholism
*Cognitive Impairment
*Korsakoffs Psychosis
*Memory Disorders
*Neuropsychological Assessment

Source: PsycINFO

17. The examination of individuals' virtual loneliness states in internet addiction and virtual environments in terms of inter-personal trust levels.

Citation: Computers in Human Behavior, July 2014, vol./is. 36/(214-224), 0747-5632 (Jul 2014)

Author(s): Usta, Ertugrul; Korkmaz, Ozgen; Kurt, Ibrahim

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Language: English

Abstract: The aim of this study is to put forth what kind of a relationship there is among the loneliness states of the individuals, the Internet addiction and interpersonal trust levels in virtual environments by examining these states felt by the individuals in virtual environments; and to try to define the virtual loneliness concept in this way. This study is a descriptive study. It has been carried out in scanning model. The study group of this study consists of 225 women, 129 men, 354 people. Data were collected using Virtual Environment Loneliness Scale, Virtual Environment Interpersonal Trust Scale and Internet Addiction Scale. The analyses of arithmetic mean, standard deviation, modes, median, frequency, t, Anova, LSD, Correlation ve Regression have been carried out on. As a result: Virtual environment loneliness is predicted by loneliness factor, interpersonal
trust and Internet addiction factor. The order of importance of predictor variable in terms of factors: virtual distrust, virtual honesty, the loss of control and desire for being online for more. These factors are meaningful predictors of virtual level and regression equality is: virtual loneliness = +0.073-0.156, virtual dishonesty +0.172, virtual honesty +0.113 the loss of control +0.052 desire for being online for more. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Ltd.; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Internet Addiction
*Loneliness
*Trust (Social Behavior)
*Virtual Reality
*Interpersonal Relationships
Source: PsycINFO

18. Borderline personality symptomatology and legal charges related to drugs.
Citation: International Journal of Psychiatry in Clinical Practice, June 2014, vol./is. 18/2(150-152), 1365-1501;1471-1788 (Jun 2014)
Author(s): Sansone, Randy A; Watts, Daron A; Wiederman, Michael W
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Institution: Departments of Psychiatry and Internal Medicine, Wright State University School of Medicine, Dayton, OH, US; Department of Psychiatry, Wright State University School of Medicine, Dayton, OH, US; Columbia College, Columbia, SC, US
Language: English
Abstract: Abstract Objective. Borderline personality disorder (BPD) is associated with high lifetime prevalence rates of substance abuse as well as higher-than-expected rates of charges for various drug-related crimes and criminal behavior in general. However, whether criminal charges for assault and disorderly conduct are related specifically to drug misuse remains unknown - the focus of the present study. Methods. Using a cross-sectional sample and a self-report survey methodology among a sample of 237 consecutive internal medicine outpatients, we examined: (1) BPD symptomatology using two self-report measures and (2) five charges for illegal behaviors defined as related to drugs. Results. While there were no between-group differences with regard to drug-abuse violations (i.e., possession, sale, or use of illegal drugs), in participants with BPD symptomatology there was more probability to be charged with assault and disorderly conduct related to drug use as well as driving under the influence and drunkenness/public intoxication. Conclusions. The criminal behaviors of assault and disorderly conduct observed in BPD appear to be related, at least in part, to comorbid substance abuse. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Borderline Personality Disorder
*Crime
*Criminal Behavior
*Drug Abuse
*Symptoms
Source: PsycINFO
Full Text: Available from Informa Healthcare in International Journal of Psychiatry in Clinical Practice

19. Does infant feeding method impact on maternal mental health?
Citation: Breastfeeding Medicine, May 2014, vol./is. 9/4(215-221), 1556-8253;1556-8342 (May 2014)

Author(s): Xu, Fenglian; Li, Zhuoyang; Binns, Colin; Bonello, Michelle; Austin, Marie-Paule; Sullivan, Elizabeth

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Institution: National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW, Australia; National Perinatal Epidemiology and Statistics Unit, University of New South Wales, Sydney, NSW, Australia; School of Public Health, Curtin University, Perth, WAU, Australia; National Perinatal Epidemiology and Statistics Unit, University of New South Wales, Sydney, NSW, Australia; St. John of God Health Care, Sydney, NSW, Australia; National Perinatal Epidemiology and Statistics Unit, University of New South Wales, Sydney, NSW, Australia

Language: English

Abstract: Background: Breastfeeding has been reported to reduce the risk of postpartum anxiety and depression. However, little is known of the effects of breastfeeding on hospital admissions for postpartum mental disorder's. Materials and Methods: This is a population-based longitudinal cohort study using linked data. All mothers who gave birth to a live infant between 2007 and 2008 in New South Wales, Australia were followed up for 1 year for hospital admissions with diagnoses of psychiatric and/or substance use disorders. Results: There were 186,452 women who were reported as giving birth in New South Wales between 2007 and 2008. The "any breastfeeding" rate at the time of discharge was 87.1%. In total, 2,940 mothers were admitted to the hospital with psychiatric diagnoses within 12 months of birth. The first hospital admission for the diagnoses of overall mental illness was 32 days earlier for non-breastfeeding mothers compared with those with full breastfeeding. Mothers who did not breastfeed were more likely to be admitted to the hospital in the first year postpartum for schizophrenia (adjusted relative risk [ARR] = 2.0; 95% confidence interval [CI] 1.3, 3.1), bipolar affective disorders (ARR = 1.9; 95% CI 1.1, 3.5), and mental illness due to substance use (ARR = 1.8; 95% CI 1.3, 2.5) compared with full breastfeeding mothers. Conclusions: Breastfeeding is associated with a decrease in the risk of subsequent maternal hospital admissions for schizophrenia, bipolar affective disorders, and mental illness due to substance use, in the first postpartum year. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Mary Ann Liebert, Inc.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Anxiety *Breast Feeding *Hospital Admission *Mental Health Drug Abuse Mothers

Source: PsycINFO


Citation: Canadian Medical Association Journal, May 2014, vol./is. 186/8(565-566), 0820-3946;1488-2329 (May 13, 2014)

Author(s): Levy, Sharon

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Institution: Adolescent Substance Abuse Program, Division of Developmental Medicine, Boston Children's Hospital, Harvard Medical School, Boston, MA, US

Language: English
Abstract: Comments on an article by D.M. Haller et al. (see record 2014-20202-002). Haller et al. reported the results of a trial in which family physicians were trained to deliver a brief intervention, in primary care, to address substance use among young people. The target of this intervention was to try to reduce excessive use of alcohol and cannabis. The trial used a pragmatic design: instead of providing trained study assistants, the researchers recruited practicing physicians and randomly allocated half of them to receive five hours of training on a semi-structured, brief motivational intervention within the framework of the 5As. At first glance, the results are disappointing: the extent of excessive substance use did not differ significantly between patients in the experimental arm and those in the control group. However, a closer inspection of the results suggests that there is reason for optimism. Haller et al. hypothesized that they would find decreases in excessive alcohol and cannabis use reported by patients in the experimental group and expected no reduction in the control group based on drug use typically increasing during adolescence. Unexpectedly, they observed decreases in excessive substance use in both groups: a 28% decrease overall, without statistically significant differences between the two groups.

Country of Publication: HOLDER: Canadian Medical Association or its licensors; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Cannabis
*Drug Abuse
*Training
*Treatment Effectiveness Evaluation
Family Physicians
Intervention
Source: PsycINFO
Full Text: Available from Elsevier in Canadian Medical Association Journal
Available from ProQuest in Canadian Medical Association Journal; CMAJ; Note: ;
Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland"
in the drop down list of institutions.
Available from National Library of Medicine in CMAJ : Canadian Medical Association Journal

21. A pilot study for discovering candidate genes of chromosome 18q21 in methamphetamine abusers: Case-control association study.

Citation: Clinical Psychopharmacology and Neuroscience, April 2014, vol./is. 12/1(54-64), 1738-1088 (Apr 2014)
Author(s): Lee, Byung Dae; Park, Je Min; Lee, Young Min; Moon, Eun Soo; Jeong, Hee Jeong; Chung, Young In; Rim, Hyo Deog
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Institution: Department of Psychiatry, Medical Research Institute, Pusan National University Hospital, Busan, Korea; Department of Psychiatry, Medical Research Institute, Pusan National University Hospital, Busan, Korea; Department of Psychiatry, Medical Research Institute, Pusan National University Hospital, Busan, Korea; Department of Psychiatry, Medical Research Institute, Pusan National University Hospital, Busan, Korea; Department of Psychiatry, Medical Research Institute, Pusan National University Hospital, Busan, Korea; Department of Psychiatry, Medical Research Institute, Pusan National University Hospital, Busan, Korea; Department of Psychiatry, Medical Research Institute, Pusan National University Hospital, Busan, Korea; Department of Psychiatry, Kyungpook National University Hospital, Daegu, Korea
Language: English
Abstract: Objective: It was previously suggested that the malic enzyme 2 (ME2) as the candidate gene for psychosis n fine mapping of chromosome 18q21. Chromosome 18q21 is also one of the possible regions that can contribute to addiction. Methods: We performed a pilot study for discovering candidate gene of chromosome 18q21 in the methamphetamine abusers for elucidating the candidate gene for methamphetamine addiction leading to
psychosis. We have selected 30 unrelated controls (16 males, 14 females; age = 59.8 ± 10.4) and 37 male methamphetamine abusers (age = 43.3 ± 7.8). We analyzed 20 single nucleotide polymorphisms (SNPs) of 7 neuronal genes in chromosome 18q21 for DNA samples that was checked for data quality and genotype error. The association between the case-control status and each individual SNP was measured using multiple logistic regression models (adjusting for age and sex as covariates). And we controlled false discovery rate (FDR) to deal with multiple testing problem. Results: We found 3 significant SNPs of 2 genes in chromosome 18q21 (p-value < 0.05; adjusting for age as covariate) in methamphetamine abusers compared to controls. We also found 2 significant SNPs of 1 gene (p-value < 0.05, adjusting for age and sex as covariates) (rs3794899, rs3794901 MAPK4). Two SNPs in MAPK4 gene were significant in both statistical groups. Conclusion: MAPK4, the gene for mitogen-activated protein kinase 4, is one of the final 6 candidate genes including ME2 in 18q12-21 in our previous finemapping for psychosis. Our results suggest that MAPK4 can be a candidate gene that contribute to the methamphetamine addiction leading to psychosis. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Korean College of Neuropsychopharmacology; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Chromosomes
*Drug Abuse
*Genes
*Methamphetamine
Enzymes
Genotypes
Psychosis
Source: PsycINFO


Citation: Psychiatric Services, May 2014, vol./is. 65/5(702), 1075-2730 (May 1, 2014)
Author(s): No authorship indicated
Language: English
Abstract: This article discusses the economic impact of integrated care. The degree to which programs based on the new care models practice cost effective integrated care will depend on the degree to which quality measures are used to hold them accountable for doing the right thing. The described implementing integrated care in real-world settings, and several sought to put a human face on these system issues by describing the differences that integrated approaches have made for their patients and themselves. Integrated care teams blend the expertise of providers from various disciplines. Team members include but are not limited to psychiatrists and other physicians, nurse practitioners, social workers, psychologists, addiction counselors, care managers, community healthworkers, peer support specialists, medical assistants, nurses' aides, and representatives from community agencies. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Health Care Costs
*Health Care Services
*Integrated Services
*Peer Evaluation
Source: PsycINFO

23. Conflicts among CMHC clinicians over the role of urine drug testing.

Citation: Psychiatric Services, May 2014, vol./is. 65/5(700-701), 1075-2730 (May 1, 2014)
Author(s): Srebnik, Debra S; McDonell, Michael G; Ries, Richard K; Andrus, Graydon
Institution: Department of Psychiatry and Behavioral Sciences, University of Washington, Seattle, WA, US; Department of Psychiatry and Behavioral Sciences, University of Washington, Seattle, WA, US; Department of Psychiatry and Behavioral Sciences, University of Washington, Seattle, WA, US; Downtown Emergency Services Center, Seattle, WA, US

Language: English

Abstract: Presents a study aims to endorsed the utility of urine drug testing by community mental health centers (CMHC) clinicians. Urine drug testing is standard practice in addiction treatment (1,2), but we know little about its use in community mental health centers (CMHCs), where most treatment occurs for individuals with co-occurring mental and substance use disorders. The study was conducted in the mental health services department at an urban CMHC, in which a separate department is state certified for provision of drug and alcohol treatment. A survey was conducted with 24 bachelor's- and master's-level clinicians experienced in working with individuals with co-occurring disorders. Ten of the 24 survey respondents (42%) had used urine drug screening to monitor substance use, although only one had used self-reading test cups. The results showed that although CMHC clinicians endorsed the utility of urine drug testing, they expressed significant concerns that testing could erode clinical relationships and may be challenging to conceptualize within a mental health recovery and harm reduction framework. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Community Mental Health Centers
*Drug Usage Screening
*Harm Reduction
*Urine Clinicians

Source: PsycINFO


Citation: Psychiatric Services, May 2014, vol./is. 65/5(675-677), 1075-2730 (May 1, 2014)

Author(s): Davidson, Larry; Chan, Kevin K. S

Correspondence Address: Davidson, Larry, larry.davidson@yale.edu

Institution: Department of Psychiatry, Yale University, New Haven, CT, US; Department of Psychology, Chinese University of Hong Kong, Hong Kong, China

Language: English

Abstract: The authors of this Open Forum argue that the evidence-based practice movement has not paid adequate attention to the wealth of evidence that supports a central role for the so-called common factors that constitute a therapeutic alliance between practitioner and patient. They also suggest that progress might be made in improving the quality of community-based care for persons with serious mental illnesses and addictions if training programs returned to an emphasis on helping practitioners develop the skills involved in cultivating trusting and empathic relationships with the people they serve. The authors draw connections between the skills needed for such relationships and the skills involved in providing recovery-oriented care and peer support, two recent developments that call for a reinvestment in basic relationship-building skills for all behavioral health practitioners. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Community Mental Health
*Quality of Care
*Social Casework
*Therapeutic Alliance
*Training

Source: PsycINFO
25. A multisite study of the prevalence of serious mental illness, PTSD, and substance use disorders of women in jail.

**Citation:** Psychiatric Services, May 2014, vol./is. 65/5(670-674), 1075-2730 (May 1, 2014)

**Author(s):** Lynch, Shannon M; DeHart, Dana D; Belknap, Joanne E; Green, Bonnie L; Dass-Brailsford, Priscilla; Johnson, Kristine A; Whalley, Elizabeth

**Correspondence Address:** Lynch, Shannon M., lyncshan@isu.edu

**Institution:** Department of Psychology, Idaho State University, Pocatello, ID, US; College of Social Work, University of South Carolina, Columbia, SC, US; Department of Sociology, University of Colorado, Boulder, CO, US; Department of Psychiatry, Georgetown University, Washington, DC, US; Department of Psychiatry, Georgetown University, Washington, DC, US; Geneva Foundation, Tacoma, WA, US; Department of Sociology, University of Colorado, Boulder, CO, US

**Language:** English

**Abstract:** Objectives: This multisite study aimed to answer the following research questions about women in urban and rural jails. First, what is the current and lifetime prevalence of serious mental illness (major depressive disorder, bipolar disorder, and psychotic spectrum disorders) of women in jail? Second, what level of impairment is associated with their serious mental illness? Third, what is the proportion of incarcerated women with serious mental illness who also have posttraumatic stress disorder (PTSD), a substance use disorder, or both? Methods: Participants were 491 women randomly sampled in jails in Colorado, Idaho, South Carolina, and the metropolitan area of Washington, D.C. Structured interviews assessed lifetime and 12-month prevalence of disorders and level of impairment. Results: Forty-three percent of participants met lifetime criteria for a serious mental illness, and 32% met 12-month criteria; among the latter, 45% endorsed severe functional impairment. Fifty-three percent met criteria for ever having PTSD. Almost one in three (29%) met criteria for a serious mental illness and PTSD, 38% for a serious mental illness and a co-occurring substance use disorder, and about one in four (26%) for all three in their lifetime. Conclusions: The prevalence of serious mental illness and its co-occurrence with substance use disorders and PTSD in this multisite sample suggest the critical need for comprehensive assessment of mental health at the point of women's entry into the criminal justice system and the necessity for more programs that offer alternatives to incarceration and that can address the complexity of female offenders' treatment needs. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** *Drug Abuse*  
*Mental Disorders*  
*Posttraumatic Stress Disorder*  
*Prisons*

**Source:** PsycINFO


**Citation:** The British Journal of Psychiatry, May 2014, vol./is. 204/5(409-410), 0007-1250;1472-1465 (May 2014)

**Author(s):** Gilvarry, Eilish

**Correspondence Address:** Gilvarry, Eilish: Newcastle University, Northumberland, Tyne and Wear NHS Foundation Trust, Newcastle and North Tyneside Addictions Service, Plummer Court, Carlil Place, Newcastle, United Kingdom, NE1 6UR, eilish.gilvarry@ntw.nhs.uk

**Institution:** Newcastle University, Northumberland, Tyne and Wear NHS Foundation Trust, Newcastle and North Tyneside Addictions Service, Newcastle, United Kingdom

**Language:** English

**Abstract:** Reviews the book, Addiction Trajectories edited by Eugene Raikhel and William Garriott (see record 2013-27870-000). The chapters deconstructed all the usual notions one holds
about addiction trajectories and opened up a myriad of trajectories of temporal, cultural and spatial dimensions. This is a distillation of a number of presentations delivered in 2009 at a workshop on the anthropologies of addictions. While personally I find collections of presentations often to be very individual and not well threaded together, this book was different. The presentations were written from a variety of theoretical and geographical perspectives that were then carefully edited and integrated. The authors together outline three main types of trajectories: epistemic trajectories, therapeutic trajectories, and experiential and experimental trajectories. These are explained and brought together in the book. This book brings stories from France, the USA, Russia, Puerto Rico, etc., describing people who use drugs and their families, and sometimes the treatment systems. It made me reflect on how much treatment and healthcare systems react to political and cultural issues, and brought out the real person trying to adapt and respond to treatment interventions within these systems. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Addiction
*Geography
*Intervention
*Therapeutic Processes
Source: PsycINFO

27. Rapid tolerance development to the NREM sleep promoting effect of alcohol.

Citation: Sleep: Journal of Sleep and Sleep Disorders Research, April 2014, vol./is. 37/4(821-824), 0161-8105;1550-9109 (Apr 1, 2014)

Author(s): Sharma, Rishi; Sahota, Pradeep; Thakkar, Mahesh M

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Institution: Harry S. Truman Memorial Veterans Hospital, University of Missouri, Columbia, MO, US; Harry S. Truman Memorial Veterans Hospital, University of Missouri, Columbia, MO, US; Harry S. Truman Memorial Veterans Hospital, University of Missouri, Columbia, MO, US

Language: English

Abstract: Study Objectives: Alcohol tolerance is a major contributor towards the development of alcohol dependence. Does alcohol intake result in rapid tolerance development to alcohol induced NREM sleep promotion? This has never been examined. Our objective was to examine whether two bouts of alcohol consumption on consecutive days results in rapid tolerance development to alcohol-induced NREM sleep promotion. Design: N/A. Setting: N/A. Patients or Participants: C57BL/6J mice. Interventions: Mice (N = 5) were implanted with sleep electrodes using standard surgical conditions. Following postoperative recovery and habituation, the experiment was begun. On baseline day, water bottle changes were performed at 10:00 (3 h after dark onset) and 14:00 to mimic conditions during alcohol consumption days. On next 2 days, (Days 1 and 2) mice were allowed to self-administer alcohol (20% v/v) for 4 h beginning at 10:00 and ending at 14:00. Sleep-wakefulness was continuously recorded from 10:00 to 18:00 (8 h; 4 h during alcohol + 4 h post-alcohol) on all 3 days. Measurements and Results: Although mice consumed comparable amounts of alcohol on Days 1 and 2, NREM sleep and wakefulness were significantly and differentially affected during 4 h post-alcohol period. A robust alcohol-induced NREM sleep promotion was observed on Day 1. However, no such sleep promotion was observed on Day 2, suggesting rapid tolerance development. Conclusions: Our study is the first to demonstrate that alcohol consumption for two consecutive days results in development of rapid tolerance to alcohol-induced sleep promotion. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcoholism

Citation: Journal of Psychiatry & Neuroscience, May 2014, vol./is. 39/3(189-199), 1180-4882;1488-2434 (May 2014)

Author(s): Choi, Fiona Y; Ahn, Soyon; Wang, Yu Tian; Phillips, Anthony G

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Language: English

Abstract: Background: Behavioural sensitization has been linked to drug craving in both clinical and preclinical studies of addiction. Increased motor activity is accompanied by enhanced dopamine (DA) release, particularly in the nucleus accumbens (NAcc). The neural bases of sensitization are linked to alterations in synaptic connections that also underlie learning and memory. The present study uses an "interference" peptide, Tat-GluA23Y, that blocks long-term depression (LTD) at glutamatergic synapses by disrupting the endocytosis of -amino-3-hydroxy-5-methylisoxazole-4-propionic acid receptors (AMPARs), to explore the role of this form of synaptic plasticity in the induction and maintenance of sensitization. Methods: Rats were given 5 injections of d-amphetamine (d-AMPH, 1.0 mg/kg, intraperitoneal) every second day. Tat-GluA23Y, was administered by 2 different routes (intravenously and intracerebrally to the ventral tegmental area [VTA] or to the NAcc) before each injection of d-AMPH. After a 14-day drug-free period, expression of behavioural sensitization was evoked by a challenge injection of d-AMPH (0.5 mg/kg, intraperitoneal). Dopamine efflux in the NAcc was measured by high-pressure liquid chromatography with electrochemical detection analyses of brain dialysates on days 1, 9 and 24 of the intravenous peptide experiment. Results: Systemic administration of Tat-GluA23Y during the induction phase blocked maintenance of behavioural sensitization and attenuated the maintenance of neurochemical sensitization. Intra-VTA infusion of Tat-GluA23Y before each administration of d-AMPH did not affect induction, but inhibited maintenance and subsequent expression of sensitization, whereas intra-NAcc infusion of the peptide did not affect induction or maintenance of sensitization. Limitations: The relevance of behavioural sensitization in rodents is related to the development of craving and does not provide direct measures of drug reinforcement. Conclusion: These findings confirm that drug-induced neuroplasticity is labile and may be subject to disruption at a time when long-lasting associations between drug reward and contextual stimuli are formed. Furthermore, the unique ability of Tat-GluA23Y to block maintenance of behavioural sensitization implicates LTD in the consolidation of essential associative memories. Tat-GluA23Y has the unique ability to disrupt functional neuroadaptations triggered by repeated psychostimulant exposure and therefore may protect against the development of craving and drug seeking behaviours. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
29. Systematic review of ERP and fMRI studies investigating inhibitory control and error processing in people with substance dependence and behavioural addictions.

Citation: Journal of Psychiatry & Neuroscience, May 2014, vol./is. 39/3(149-169), 1180-4882;1488-2434 (May 2014)

Author(s): Luijten, Maartje; Machielsen, Marise W. J; Veltman, Dick J; Hester, Robert; de Haan, Lieuwe; Franken, Ingmar H. A

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Institution: Institute of Psychology, Erasmus University Rotterdam, Rotterdam, Netherlands; Academic Medical Center, University of Amsterdam, Department of Psychiatry, Amsterdam, Netherlands; Academic Medical Center, University of Amsterdam, Department of Psychiatry, Amsterdam Institute for Addiction Research, Amsterdam, Netherlands; School of Psychological Sciences, University of Melbourne, Melbourne, VIC, Australia; Academic Medical Center, University of Amsterdam, Department of Psychiatry, Amsterdam, Netherlands; Institute of Psychology, Erasmus University Rotterdam, Rotterdam, Netherlands

Language: English

Abstract: Background: Several current theories emphasize the role of cognitive control in addiction. The present review evaluates neural deficits in the domains of inhibitory control and error processing in individuals with substance dependence and in those showing excessive addiction-like behaviours. The combined evaluation of event-related potential (ERP) and functional magnetic resonance imaging (fMRI) findings in the present review offers unique information on neural deficits in addicted individuals. Methods: We selected 19 ERP and 22 fMRI studies using stop-signal, go/no-go or Flanker paradigms based on a search of PubMed and Embase. Results: The most consistent findings in addicted individuals relative to healthy controls were lower N2, error-related negativity and error positivity amplitudes as well as hypoactivation in the anterior cingulate cortex (ACC), inferior frontal gyrus and dorsolateral prefrontal cortex. These neural deficits, however, were not always associated with impaired task performance. With regard to behavioural addictions, some evidence has been found for similar neural deficits; however, studies are scarce and results are not yet conclusive. Differences among the major classes of substances of abuse were identified and involve stronger neural responses to errors in individuals with alcohol dependence versus weaker neural responses to errors in other substance-dependent populations. Limitations: Task design and analysis techniques vary across studies, thereby reducing comparability among studies and the potential of clinical use of these measures. Conclusion: Current addiction theories were supported by identifying consistent abnormalities in prefrontal brain function in individuals with addiction. An integrative model is proposed, suggesting that neural deficits in the dorsal ACC may constitute a hallmark neurocognitive deficit under lying addictive behaviours, such as loss of control. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Correlates of shared methamphetamine injection among methamphetamine-injecting treatment seekers: The first report from Iran.

Citation: International Journal of STD & AIDS, May 2014, vol./is. 25/6(420-427), 0956-4624;1758-1052 (May 2014)

Author(s): Mehrjerdi, Zahra Alam; Abarashi, Zohreh; Noroozi, Alireza; Arshad, Leila; Zarghami, Mehran

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Language: English

Abstract: Shared methamphetamine injection is an emerging route of drug use among Iranian methamphetamine injectors. It is a primary vector for blood-borne infections. The aim of the current study is to determine the prevalence and correlates of shared methamphetamine injection in a sample of Iranian methamphetamine injecting treatment seekers in the south of Tehran. We surveyed male and female methamphetamine injectors at three drop-in centres and 18 drug-use community treatment programmes. Participants reported socio-demographic characteristics, drug use, high-risk behaviours, current status of viral infections and service use for drug treatment. Bivariate and multivariate logistic regression models were used to test associations between participants' characteristics and shared methamphetamine injection. Overall, 209 clients were recruited; 90.9% were male; 52.6% reported current methamphetamine injection without any shared injection behaviour and 47.4% reported current shared methamphetamine injection. Shared methamphetamine injection was found to be primarily associated with living with sex partners (AOR 1.25, 95% CI 1.13-1.98), reporting > 3 years of dependence on methamphetamine injection (AOR 1.61, 95% CI 1.27-2.12), injection with pre-filled syringes in the past 12 months (AOR 1.96, 95% CI 1.47-2.42), homosexual sex without condom use in the past 12 months (AOR 1.85, 95% CI 1.21-2.25), the paucity of NA group participation in the past 12 months (AOR 0.67, 95% CI 0.41-0.99), the paucity of attending psychotherapeutic sessions in the past 12 months (AOR 0.44, 95% CI 0.28-0.96) and positive hepatitis C status (AOR 1.98, 95% CI 1.67-2.83). Deeper exploration of the relationship between shared methamphetamine injection and sexual risk among Iranian methamphetamine injectors would benefit HIV/sexually transmitted infection prevention efforts. In addition, existing psychosocial interventions for methamphetamine-injecting population may need to be adapted to better meet the risks of
shared methamphetamine injectors. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Author(s); YEAR: 2013

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

**Subject Headings:**
*Drug Therapy*
*Drug Usage*
*Methamphetamine*
*Needle Sharing*
*Sexual Partners Injections*

**Source:** PsycINFO

**Full Text:** Available from Highwire Press in *International Journal of STD and AIDS*

31. Prevalence of syphilis infection and associations with sexual risk behaviours among HIV-positive men who have sex with men in Shanghai, China.

**Citation:** International Journal of STD & AIDS, May 2014, vol./is. 25/6(410-419), 0956-4624;1758-1052 (May 2014)

**Author(s):** He, Huan; Wang, Min; Zaller, Nickolas; Wang, Jun; Song, Dandan; Qu, Yuhuang; Sui, Xin; Dong, Zhengxin; Operario, Don; Zhang, Hongbo

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**Language:** English

**Abstract:** The aims of this study were to understand the prevalence and correlates of syphilis infection among HIV-positive men who have sex with men (MSM) in Shanghai, China. A total of 200 HIV-positive MSM participants were recruited using "snowball" sampling. Participants were tested for syphilis and completed a one-time questionnaire which included demographic characteristics, sexual behaviours with male and female sexual partners, substance use, and use of antiretroviral medications. Prevalence of syphilis infection was 16.5%. Among HIV/syphilis co-infected participants, 63.6% reported having anal sex with male partners and 24.2% did not use condoms consistently during the past six months; 66.7% reported having oral sex with male partners and 51.5% reported unprotected oral sex during the past six months. Factors associated with testing seropositive for syphilis infection included receptive anal sex with a male partner in the past six months (AOR = 12.61, 90% CI = 2.38-66.89), illicit drug use in the past six months (AOR = 11.47, 90% CI = 2.47-53.45), and use of antiretroviral medication (AOR = 4.48, 90% CI = 1.43-14.05). These data indicate a need for "positive prevention" interventions targeting HIV-positive MSM in China. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
32. Drugs and psychosis and now for some good news.

**Citation:**
Australian and New Zealand Journal of Psychiatry, May 2014, vol./is. 48/5(484-485), 0004-8674;1440-1614 (May 2014)

**Author(s):**
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**Institution:**
InforMH, Mental Health and Drug and Alcohol Office, NSW Ministry of Health, North Sydney, Australia

**Language:**
English

**Abstract:**
In the current issue, Large and colleagues report a systematic meta-analysis which underlines the impact of ongoing substance use on psychotic symptoms. A link between substance use and positive outcome in psychosis seems counterintuitive. After all, substance use is associated with other factors usually linked to worse outcome in psychosis, including male gender, earlier onset of psychosis, social disadvantage and a family history of mental health and substance problems. Three explanations have been proposed to account for this apparent link between substance use and positive outcome: (i) direct chemical effects, (ii) social skills and (iii) personal vulnerability. Two challenges for our mental health services follow. First, we need better ways of engaging and more effective interventions for people with comorbid substance use and psychosis. Second, more research is needed to identify whether the positive effects of ceasing substance use in people with early psychosis also apply for people with more enduring psychosis diagnoses such as schizophrenia. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:**
HOLDER: The Royal Australian and New Zealand College of Psychiatrists; YEAR: 2014

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

**Subject Headings:**
*Drug Usage
*Psychosis
Comorbidity
Diagnosis
Symptoms

**Source:**
PsycINFO

**Full Text:**
Available from Highwire Press in *Australian and New Zealand Journal of Psychiatry*

33. Systematic meta-analysis of outcomes associated with psychosis and co-morbid substance use.

**Citation:**
Australian and New Zealand Journal of Psychiatry, May 2014, vol./is. 48/5(418-432), 0004-8674;1440-1614 (May 2014)

**Author(s):**
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Abstract:
Objective: To compare the symptoms and social function of patients with psychosis and current substance use to those with psychosis and no history of substance use. Method: The databases EMBASE, MEDLINE and PsycINFO were searched for peer-reviewed publications in English that reported the characteristics of patients with psychotic illness who were current substance users and those who had never used substances. The searches yielded 22 articles that met the inclusion criteria. Meta-analysis was used to compare four key outcome variables: positive symptoms, negative symptoms, depression and social function - and three secondary outcomes: violence, self-harm and hospital admissions. Results: Current substance-using patients were significantly younger than non-substance-using patients and were more likely to be male, but did not differ in age at onset of psychosis or in their level of education. Current substance users had higher ratings of positive symptoms and were more likely to have a history of violence. Older studies reported a stronger association between current substance use and positive symptoms than more recently published studies. Current substance users did not differ from non-users on measurements of negative symptoms, depressive symptoms, social function, self-harm, or the number of hospital admissions. Conclusion: Current substance users with psychosis may have more severe positive symptoms than patients who have never used substances, but this result should be interpreted with caution because of demographic differences between substance users and non-substance users. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Country of Publication: HOLDER: The Royal Australian and New Zealand College of Psychiatrists; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Abuse  
*Psychosis  
*Social Skills  
*Symptoms  
Comorbidity
Source: PsycINFO
Full Text: Available from Highwire Press in Australian and New Zealand Journal of Psychiatry

34. Review of Alcoholopatias: Diagnosis and treatment of alcoholism in all Its forms.
Citation: Alcohol and Alcoholism, May 2014, vol./is. 49/3(369-370), 0735-0414;1464-3502 (May-Jun 2014)
Author(s): Rosales-Rodriguez, Sergio
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Institution: Medical University of Vienna, Vienna, Austria
Language: English
Abstract: Reviews the book, Alcoholopatias: Diagnosis and Treatment of Alcoholism in All Its Forms by Alfredo Sackmann (2012). In his book, Sackmann provides a very detailed and balanced overview about alcoholism and its related effects on the various human organ systems. The authors describe firstly, using a very meticulous approach, the individual organ systems and in a second step each organ separately depending on their relevance in connection with alcoholism and alcohol related disorders. The book covers three sections: the first section 'General Alcohology' deals with the pharmacology and epidemiology of alcohol; and the neurobiology of alcoholism. The second part of the book 'Particular Alcohology' focuses on the diagnosis of mental and behavioral disorders due to use of alcohol and continues with the different organic complications of the disease. The third section of the book is dedicated to alcoholism related psychiatric disorders. This book not only focuses on the treatment but also accentuates on prevention of alcoholism. In summary this book is highly recommended to medical personnel interested in acquiring in Spanish a general, well-structured, knowledge about the effects of alcohol on the human mind and body. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Citation: Alcohol and Alcoholism, May 2014, vol./is. 49/3(369), 0735-0414;1464-3502 (May-Jun 2014)

Author(s): Chick, Jonathan

Language: English

Abstract: Reviews the book, Principles of Addiction edited by P. Miller (see record 2013-01884-000). The book is a monumental undertaking, examining the nature of addiction, including epidemiology, symptoms and course; alcohol and drug use among adolescents and college students; and detailed descriptions of a wide variety of addictive behaviors and disorders, encompassing not only drugs and alcohol, but caffeine, food, gambling, exercise, sex, work and social networking. The book provides a basic introduction to the field at a moderately technical level. It does not reference every comment, but provides salient sources. Those university departments and hospitals that still have libraries would benefit greatly from owning a copy of this book, and students who have had enough staring at their computer screens could enjoy an old-fashioned browsing- but it's much too heavy to pack in the holiday rucksack. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

36. Do individual and situational factors explain the link between predrinking and heavier alcohol consumption? An event-level study of types of beverage consumed and social context.

Citation: Alcohol and Alcoholism, May 2014, vol./is. 49/3(327-335), 0735-0414;1464-3502 (May-Jun 2014)

Author(s): Labhart, Florian; Wells, Samantha; Graham, Kathryn; Kuntsche, Emmanuel

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Institution: Addiction Switzerland, Research Institute, Lausanne, Switzerland; Social and Epidemiological Research Department, Centre for Addiction and Mental Health, London, ON, Canada; Social and Epidemiological Research Department, Centre for Addiction and Mental Health, London, ON, Canada; Addiction Switzerland, Research Institute, Lausanne, Switzerland
Aim: Predrinking (drinking in private settings before going to licensed premises) has been shown to be positively associated with amount of alcohol consumed. The present study assesses whether this association is explained by general drinking patterns or situational factors, including drinking duration, beverage type and drinking companions. Methods: In a sample of 183 young adults from French-speaking Switzerland, data on alcohol consumption, whereabouts and drinking companions were collected using questionnaires sent to participants' cell phones at five time points from 5 p.m. to midnight every Thursday, Friday and Saturday over five consecutive weeks. Means and proportion tests and multilevel models were conducted based on 6650 assessments recorded on 1441 evenings. Results: Over the study period, predrinkers drank more frequently than did non-predrinkers and, among males, predrinkers drank more heavily. Predrinking was related to increased drinking duration and thus total consumption in the evenings. Larger groups of people were reported for predrinking compared with off-premise only drinking situations. Among women, the consumption of straight spirits (i.e. not mixed with soft drinks) while predrinking was associated with higher total evening alcohol consumption. Among men, drinking with exclusively male friends or female friends while predrinking was associated with higher consumption. Conclusion: Heavier drinking on predrinking evenings mainly results from longer drinking duration, with individual and situational factors playing a smaller role. Prevention efforts on reducing the time that young adults spend drinking and harm reduction measures such as restriction of access to on-premise establishments once intoxicated are recommended. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
persons with AUD performed worse at third-person than at first-person ToM, and at the allocentric than at the egocentric perspective. Conclusion: These findings support the hypothesis that the ability to understand and ascribe mental states is impaired in AUD. Future studies should focus on the relevance of the different ToM impairments as predictors of treatment outcome in alcoholism, and on the possibility that rehabilitative interventions may be diversified according to ToM assessment. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: Statement: Medical Council on Alcohol and Oxford University Press. All rights reserved.; Holder: The Author; Year: 2013
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcoholism
                   *Cognitive Processes
                   *Theory of Mind
                   Egocentrism
Source: PsycINFO
Full Text: Available from Oxford University Press in Alcohol and Alcoholism

38. Can cannabis be considered a substitute medication for alcohol?
Citation: Alcohol and Alcoholism, May 2014, vol/is. 49/3(292-298), 0735-0414;1464-3502 (May-Jun 2014)
Author(s): Subbaraman, Meenakshi Sabina
Correspondence Address: Subbaraman, Meenakshi Sabina: Alcohol Research Group, 6475 Christie Ave, Suite 400, Emeryville, CA, US, 94608, msubstraman@arg.org
Institution: Alcohol Research Group, Emeryville, CA, US
Language: English
Abstract: Aims: Substituting cannabis for alcohol may reduce drinking and related problems among alcohol-dependent individuals. Some even recommend prescribing medical cannabis to individuals attempting to reduce drinking. The primary aim of this review is to assess whether cannabis satisfies the seven previously published criteria for substitute medications for alcohol [e.g. 'reduces alcohol-related harms'; 'is safer in overdose than alcohol'; 'should offer significant health economic benefits'; see Chick and Nutt ((2012) Substitution therapy for alcoholism: time for a reappraisal? J Psychopharmacol 26:205-12)]. Methods: Literature review. Results: All criteria appear either satisfied or partially satisfied, though studies relying on medical cannabis patients may be limited by selection bias and/or retrospective designs. Individual-level factors, such as severity of alcohol problems, may also moderate substitution. Conclusions: There is no clear pattern of outcomes related to cannabis substitution. Most importantly, the recommendation to prescribe alcohol-dependent individuals cannabis to help reduce drinking is premature. Future studies should use longitudinal data to better understand the consequences of cannabis substitution. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: Statement: Medical Council on Alcohol and Oxford University Press. All rights reserved.; Holder: The Author; Year: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcoholism
                   *Cannabis
                   *Drug Therapy
                   Health Care Economics
Source: PsycINFO
Full Text: Available from Oxford University Press in Alcohol and Alcoholism

Aims: Atrial natriuretic peptide (ANP) is well known to modulate fluid and electrolyte homeostasis but also to counter-regulate hypothalamic-pituitary-adrenal (HPA) axis activity. Correspondingly, recent studies suggest an important role of ANP in the neurobiology of anxiety. Preclinical and clinical data now provide evidence for an involvement of ANP in the pathophysiology of addictive behavior. The present study aims to elucidate the effects of ANP on alcohol-dependent patients' anxiety, perceived stress and craving during alcohol withdrawal. Methods: A sample of 59 alcohol-dependent inpatients was included in the analysis. A blood sample was taken at day 14 of detoxification in order to assess the concentrations of ANP and cortisol in plasma. In parallel, we assessed patients' alcohol craving, using the Obsessive Compulsive Drinking Scale, as well as anxiety (State-Trait Anxiety Inventory). Patients' stress levels were assessed using the Perceived Stress Scale. Results: We found a significant negative association between patients' ANP plasma concentrations and anxiety, craving for alcohol and perceived stress. Regression analyses suggest that ANP is a significant predictor both for patients' perceived stress and for the severity of anxiety during early abstinence. The association of patients' ANP plasma levels and craving is suggested to be mediated by perceived stress. Conclusion: Our results suggest that the association of patients' ANP plasma levels and craving is mediated by their perceived stress. For this reason, intranasal application of ANP may prove to be a new avenue for the treatment of alcohol dependence in patients exhibiting high levels of perceived stress. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Abstract:

Aims: The aim of this article is to review the forensic literature covering the postmortem investigations that are associated with alcoholic ketoacidosis fatalities and report the results of our own analyses. Methods: Eight cases of suspected alcoholic ketoacidosis that had undergone medico-legal investigations in our facility from 2011 to 2013 were retrospectively selected. A series of laboratory parameters were measured in whole femoral blood, postmortem serum from femoral blood, urine and vitreous humor in order to obtain a more general overview on the biochemical and metabolic changes that occur during alcoholic ketoacidosis. Most of the tested parameters were chosen among those that had been described in clinical and forensic literature associated with alcoholic ketoacidosis and its complications. Results: Ketone bodies and carbohydrate-deficient transferrin levels were increased in all cases. Biochemical markers of generalized inflammation, volume depletion and undernourishment showed higher levels. Adaptive endocrine reactions involving insulin, glucagon, cortisol and triiodothyronine were also observed. Conclusions: Metabolic and biochemical disturbances characterizing alcoholic ketoacidosis can be reliably identified in the postmortem setting. The correlation of medical history, autopsy findings and biochemical results proves therefore decisive in identifying pre-existing disorders, excluding alternative causes of death and diagnosing alcoholic ketoacidosis as the cause of death. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Abstract: Aims: Subjective response to alcohol represents a marker of alcoholism risk. The A118G single-nucleotide polymorphism (SNP) of the mu opioid receptor (OPRM1) gene has been associated with subjective response to alcohol. Recently, the dopamine transporter (DAT1) variable number of tandem repeat (VNTR; SLC6A3) has been found to interact with the OPRM1 A118G SNP in predicting neural and behavioral responses to naltrexone and to alcohol. This exploratory study examines the OPRM1 x DAT1 interaction on subjective responses to alcohol. Methods: Non-treatment-seeking problem drinkers (n = 295) were assessed in the laboratory for alcohol dependence. Following prospective genotyping for the OPRM1 gene, 43 alcohol-dependent individuals were randomized to two intravenous infusion sessions, one of alcohol (target BrAC = 0.06 g/dl) and one of saline. Measures of subjective responses to alcohol were administered in both infusion sessions. Results: Analyses revealed significant Alcohol x OPRM1 x DAT1 interactions for alcohol-induced stimulation, vigor and positive mood as well as significant Alcohol x OPRM1 x DAT1 x Time interactions for stimulation and positive mood. These effects were such that, compared with other genotype groups, OPRM1 G-allele carriers + DAT1 A10 homozygotes reported steeper increases in stimulation and positive mood across rising BrAC, when compared with placebo. All Alcohol x OPRM1 x DAT1 interactions remained significant when analyses were restricted to a subsample of Caucasian participants (n = 34); however, 4-way interactions did not reach statistical significance in this subsample. Conclusions: This study suggests that the contribution of OPRM1 genotype to alcohol-induced stimulation, vigor and positive mood is moderated by DAT1 genotype. These findings are consistent with the purported interaction between opioidergic and dopaminergic systems in determining the reinforcing properties of alcohol. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Aims: The purpose of this study was to investigate the association between the metabotropic glutamate receptor 3 (GRM3) subunit gene and alcohol dependence by the single-nucleotide polymorphisms (SNPs). Methods: Two hundred and forty-eight male alcohol-dependent patients and 235 male control subjects were recruited. Ten SNPs in the GRM3 region were studied, and genotyping of SNPs was performed by ligase detection reactions. Results: We found highly significant differences in allele and genotype frequencies of rs6465084 between the alcohol-dependent and control group, with the greater frequency of A allele of SNP rs6465084 in alcohol-dependent group. We also found significant differences of haplotype frequencies in five combinations (including TAATATT, CAGTATT, TCCTATT, CATAAGC, TAATATC) in the linkage disequilibrium constructed by seven SNPs between the groups. Conclusion: Our results supplied the first evidence that the polymorphism of GRM3 gene associates with the morbidity of alcohol dependence in human being, which may support a new potential target for alcoholism treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
44. Severe diffuse axon injury in chronic alcoholic rat medulla oblongata following a concussion blow.

Citation: Alcohol and Alcoholism, May 2014, vol./is. 49/3(231-237), 0735-0414;1464-3502 (May-Jun 2014)

Author(s): Luo, Jianming; Chen, Guang; Wei, Lai; Qian, Hong; Lai, Xiaoping; Wang, Dian; Lv, Junyao; Yu, Xiaojun

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Language: English

Abstract: Aims: We investigated the axonal morphological changes and expression of both tau protein and -APP following concussion to the medulla oblongata, in a rat model of chronic alcoholism. Methods: Fifty-nine male Sprague-Dawley rats were randomly divided into EtOH, EtOH-TBI and control groups (water group, water-TBI group). To establish chronic alcoholic rats, rats were intragastrically given edible spirituous liquor twice daily. Rats also received a blow on the occipital tuberosity with an iron pendulum. Morphological changes and expression of tau and -APP proteins in the medulla oblongata were examined. Results: (a) Nerve fibre thickening and twisting were observed in alcoholic rats, with nerve fibre changes becoming more significant following a concussion blow, which leads to some nerve fibres fracturing. (b) Transmission electron microscopy revealed that the nerve fibre myelin became loosened and displayed lamellar separation, which became more significant following concussion. (c) The integral optical density (IOD) sum value of -APP of the EtOH-TBI group was lower than that in the EtOH group (P < 0.05); the Tau IOD sum value of the EtOH-TBI group was higher than that in the EtOH group (P < 0.05). Conclusion: (a) Chronic alcoholism caused nerve fibre and neuronal morphology damage in the rat medulla oblongata, with structural damage becoming more significant following concussion. (b) Concussion changed the expression of -APP and tau protein in chronic alcoholic rat medulla oblongata, suggesting that chronic alcoholism can lead to severe axonal injury following a concussion blow. (c) The effect of chronic alcoholism may be synergistic the concussion blow to promote animal injury and death. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
45. Obituary: Professor Roger Nordmann.

Citation: Alcohol and Alcoholism, May 2014, vol./is. 49/3(229-230), 0735-0414;1464-3502 (May-Jun 2014)

Author(s): Zima, Tomas

Institution: ESBRA, Austria

Language: English

Abstract: Presents an obituary of Professor Roger Nordmann (1926-2014). Professor Roger Nordmann was the founder of the pioneering European Society for Biomedical Research on Alcoholism (ESBRA). His tireless dedication to the organization calls for a testimony to a remarkable profile of achievement, devotion and action. At the young age of 28, after laboratory work as an assistant Biochemist, his talents led him to a rapid promotion as Head of Clinic at the Faculty of Medicine in Paris where he remained until 1955. Three years later, the University of Paris honored him as a Doctor of Science. His keen interest in disease, microbiology and public health equipped him as a Research Associate at l'Institut National d'Hygiene from 1955 to 1958. In 1958 he began teaching at the Ecole Nationale de Medecine et de Pharmacie de Poitiers, where he was appointed Professor of Medical Biochemistry in 1962. In 1965, he took the chair in Medical Biochemistry at the University of Rene Descartes, a university named after the French Enlightenment philosopher and mathematician. Nordmann's multitalented and spirited temperament chartered an engaging and broad working life in many fields, retaining numerous responsibilities right up until the end of his wonderful life. He took eager interest in therapies and preventative measures for alcoholism and alcohol's effects on the body. He was known worldwide by educational institutions, and endowed with honorary titles at the Universities of Genoa and Prague. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Country of Publication: STATEMENT: Medical Council on Alcohol and Oxford University Press. All rights reserved.; HOLDER: The Author; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcoholism
*Medical Sciences
*Scientists
Public Health

Source: PsycINFO

Full Text: Available from Oxford University Press in Alcohol and Alcoholism


Citation: Journal of Clinical Nursing, May 2014, vol./is. 23/9-10(1239-1248), 0962-1067;1365-2702 (May 2014)

Author(s): Zhuang, Shu-Mei; An, Shi-Hui; Zhao, Yue

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Institution: School of Nursing, Tianjin Medical University, Tianjin, China; Tianjin An-Kang Psychiatric Hospital, Tianjin, China; School of Nursing, Tianjin Medical University, Tianjin, China

Language: English

Abstract: Aims and objectives To determine whether cognitive behavioural interventions would improve the quality of life in Chinese heroin addicts. Background Drug dependence is one of the most serious health problems in the world, representing a real menace to mental and somatic health. However, effects of cognitive behavioural interventions on quality of life in Chinese heroin addicts are unclear. Design This randomised controlled study was conducted at a Drug-withdrawal Rehabilitation Center in China. Methods Following ethics approval and heroin addicts' consent, 240 heroin addicts were randomly assigned to two groups. The experimental group (n = 120) received a six-month cognitive behavioural intervention comprising education intervention and behavioural intervention developed by the investigators. The control group (n = 120) received the hospital's routine care. The effects of the interventions on patients' quality of life were evaluated at baseline and six months and were compared. A Chinese version of Quality of Life in Drug Addiction Questionnaire was used in this study. Usefulness of the intervention and usual community services was evaluated at six months. Results The quality of life of participants with heroin addiction with physical and psychological disorders is poor. The experimental group showed a significant improvement in quality of life after nurse-managed cognitive behavioural intervention. Conclusions The quality of life and the health status of Chinese heroin addicts were improved after they received a nurse-managed cognitive behavioural intervention. Relevance to clinical practice Appropriate nurse-managed cognitive behavioural intervention for heroin addicts can improve their quality of life and promote their health. It is important for clinical nurses to understand cognitive behavioural therapy, appraisal and coping to apply knowledge in practice when dealing with a client who has heroin addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Court has ruled that the 2006 Italian drug legislation is unconstitutional. The Independent reports that the Portland Hotel Society, a drug treatment centre in Vancouver, has installed vending machines that dispense newly packaged crack pipes for $0.25. The New York Times reports that the US Treasury Department and the Justice Department have separately issued guidelines. The European Centre for Monitoring Alcohol Marketing (EUCAM) reports that starting in 2015, existing alcohol advertising regulations in Finland, which include a prohibition of advertisements for strong alcoholic beverages in public spaces and a time ban for television. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
Institution: University of Social Welfare and Rehabilitation Science, Tehran, Iran; Rebirth Society, Tehran, Iran

Language: English

Abstract: This article discusses the data collection on addiction in Iran. In Iran, there appears to have been an increase over recent years in the rate of psychoactive substance misuse, including opiates. However, the picture regarding the extent of the problem is far from clear. Both official and unofficial reports are vague and contradictory. The absence of high-quality epidemiological research in Iran has been remarked upon. The authors concur with this only with accurate information on the scale and nature of the problem can effective policy and planning take place to combat it. (PsycINFO Database Record (c) 2014 APA, all rights reserved)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Addiction
*Data Collection
*Drug Abuse
*Epidemiology
*Opiates

Source: PsycINFO

Full Text: Available from Wiley in Addiction


Citation: Addiction, May 2014, vol./is. 109/5(798-806), 0965-2140;1360-0443 (May 2014)

Author(s): McKetin, Rebecca; Lubman, Dan I; Najman, Jake M; Dawe, Sharon; Butterworth, Peter; Baker, Amanda L

Correspondence Address: McKetin, Rebecca: Centre for Research on Ageing, Health and Wellbeing, Australian National University, Building 62A, Eggleston Road, Canberra, ACT, Australia, 0200, rebecca.mcketin@anu.edu.au

Institution: Centre for Research on Ageing, Health and Wellbeing, Australian National University, Canberra, ACT, Australia; Turning Point Alcohol and Drug Centre, Eastern Health and Monash University, Melbourne, VIC, Australia; Queensland Alcohol and Drug Research and Education Centre, University of Queensland, Brisbane, QLD, Australia; School of Psychology, Griffith University, Brisbane, QLD, Australia; Centre for Research on Ageing, Health and Wellbeing, Australian National University, Canberra, ACT, Australia; Priority Research Centre for Translational Neuroscience and Mental Health, University of Newcastle, Callaghan, NSW, Australia

Language: English

Abstract: Abstract Aims To determine whether violent behaviour increases during periods of methamphetamine use and whether this is due to methamphetamine-induced psychotic symptoms. Design A fixed-effects (within-subject) analysis of four non-contiguous 1-month observation periods from a longitudinal prospective cohort study. Setting Sydney and Brisbane, Australia. Participants A total of 278 participants aged 16 years or older who met DSM-IV criteria for methamphetamine dependence on entry to the study but who did not meet DSM-IV criteria for life-time schizophrenia or mania. Measurements Violent behaviour was defined as severe hostility in the past month on the Brief Psychiatric Rating Scale (BPRS) (corresponding to assault/damage to property). Days of methamphetamine and other substance use in the past month were assessed using the Opiate Treatment Index. Positive psychotic symptoms in the past month were identified using the BPRS. Findings There was a dose-related increase in violent behaviour when an individual was using methamphetamine compared with when they were not after adjusting for other substance use and socio-demographics [cf. no use in the past month: 1-15 days of use odds ratio (OR) = 2.8, 95% confidence interval (CI) = 1.6-4.9; 16+ days of use OR = 9.5, 95% CI = 4.8-19.1]. The odds of violent behaviour were further increased by psychotic symptoms (OR = 2.0, 95% CI = 1.1-3.6), which accounted for
22-30% of violent behaviour related to methamphetamine use. Heavy alcohol consumption also increased the risk of violent behaviour (OR = 3.1, 95% CI = 1.4-7.0) and accounted for 12-18% of the violence risk related to methamphetamine use. Conclusions There is a dose-related increase in violent behaviour during periods of methamphetamine use that is largely independent of the violence risk associated with psychotic symptoms. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Abstract

Abstract Aims To investigate the prevalence of awareness of the online illicit drug marketplace Silk Road (SR), consumption of drugs purchased from SR and reasons for use and non-use of SR. Design and setting Global Drug Survey: purposive sample collected in late 2012. Participants The base sample (n = 9470) reported recent drug purchase and resided in the United Kingdom (n = 4315, median age 24, 76% male), Australia (n = 2761, median age 32, 76% male) or the United States (n = 2394, median age 21, 80% male). Measurements Online questionnaire. Findings A total of 65% of US, 53% of Australian and 40% of UK respondents had heard of SR; 18% of US, 10% of UK and 7% of Australian respondents had consumed drugs purchased through SR. Across the three countries, 3,4-methylenedioxy-N-methylamphetamine (MDMA) was the most commonly purchased drug (53-60%), followed by cannabis (34-51%), lysergic acid diethylamide (LSD) (29-45%) and the 2C family (16%-27%). The most common reasons for purchasing from SR were wider range (75-89%), better quality (72-77%), greater convenience (67-69%) and the use of vendor rating systems (60-65%). The most common reasons for avoiding SR purchase were adequate drug access (63-68%) and fear of being caught (41-53%). Logistic regressions found that, compared with people from the UK, Australians (odds ratio (OR) = 3.37; 95% confidence interval (CI) = 2.29, 4.97) and Americans (OR = 1.46; 95% CI = 1.10, 1.94) were more likely to use SR due to lower prices; and to avoid SR purchase due to fear of being caught (Australia: OR = 1.65; 95% CI = 1.39, 1.96; USA: OR = 1.62; 95% CI = 1.37, 1.92). Conclusions While reasons for Silk Road use accord with broader online commerce trends (range, quality, convenience, ratings), its appeal to drug purchasers is moderated by country-specific deterrents and market characteristics. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
Abstract: Abstract Aims To compare a motivational intervention (MI) focused on increasing involvement in 12-Step groups (TSGs; e.g. Alcoholics Anonymous) versus brief advice (BA) to attend TSGs. Design Patients were assigned randomly to either the MI or BA condition, and followed-up at 6 months after discharge. Setting and participants One hundred and forty substance use disorder (SUD) patients undergoing in-patient detoxification (detox) in Norway. Measurements The primary outcome was TSG affiliation measured with the Alcoholics Anonymous Affiliation Scale (AAAS), which combines meeting attendance and TSG involvement. Substance use and problem severity were also measured. Findings At 6 months after treatment, compared with the BA group, the MI group had higher TSG affiliation [0.91 point higher AAAS score; 95% confidence interval (CI) = 0.04 to 1.78; P = 0.041]. The MI group reported 3.5 fewer days of alcohol use (2.1 versus 5.6 days; 95% CI = -6.5 to -0.6; P = 0.020) and 4.0 fewer days of drug use (3.8 versus 7.8 days; 95% CI = -7.5 to -0.4; P = 0.028); however, abstinence rates and severity scores did not differ between conditions. Analyses controlling for duration of in-patient treatment did not alter the results. Conclusions A motivational intervention in an in-patient detox ward was more successful than brief advice in terms of patient engagement in 12-Step groups and reduced substance use at 6 months after discharge. There is a potential benefit of adding a maintenance-focused element to standard detox. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: Addiction published by John Wiley & Sons Ltd on behalf of Society for the Study of Addiction. This is an open access article under the terms of the Creative Commons Attribution-NonCommercial-NoDerivs License, which permits use and distribution in any medium, provided the original work is properly cited, the use is non-commercial and no modifications or adaptations are made.; HOLDER: The Authors; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Detoxification *Drug Abuse *Intervention *Motivation *Smoking Cessation

Source: PsycINFO

Full Text: Available from Wiley in Addiction

54. Facing temptation in the bar: Counteracting the effects of self-control failure on young adults' ad libitum alcohol intake.

Citation: Addiction, May 2014, vol./is. 109/5(746-753), 0965-2140;1360-0443 (May 2014)

Author(s): Otten, Roy; Cladder-Micus, Mira B; Pouwels, J. Loes; Hennig, Maximilian; Schuurmans, Angela A. T; Hermans, Roel C. J

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Institution: Behavioural Science Institute, Radboud University Nijmegen, Nijmegen, Netherlands; Behavioural Science Institute, Radboud University Nijmegen, Nijmegen, Netherlands; Behavioural Science Institute, Radboud University Nijmegen, Nijmegen, Netherlands; Behavioural Science Institute, Radboud University Nijmegen, Nijmegen, Netherlands; Behavioural Science Institute, Radboud University Nijmegen, Nijmegen, Netherlands; Behavioural Science Institute, Radboud University Nijmegen, Nijmegen, Netherlands; Behavioural Science Institute, Radboud University Nijmegen, Nijmegen, Netherlands; Behavioural Science Institute, Radboud University Nijmegen, Nijmegen, Netherlands

Language: English

Abstract: Abstract Background and Aims The self-control strength model suggests that exertion of self-control leads to poorer subsequent self-control performance. Failure of self-control has been suggested as an important underlying mechanism of excessive drinking. This study tested the effects of self-control failure on ad libitum drinking, and the potential moderating role of glucose and self-awareness on this relationship. Design The current research examined in two experiments whether the effects of self-control failure were different for males and females, and whether glucose (experiment 1) and self-awareness
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(experiment 2) would counteract the effects of self-control failure. A between-participants design with four conditions was employed in each experiment. Setting A semi-naturalistic drinking setting in the form of a laboratory bar. Participants Undergraduate students recruited at Radboud University Nijmegen, the Netherlands (experiment 1: n = 106; experiment 2: n = 108). Measurements The total amount of alcohol consumed during an experimental break (observational data) and questionnaire data on drinking patterns. Findings Self-control failure led to increased levels of drinking in males (P < 0.05), whereas females drank less after being depleted (P < 0.01). Self-awareness, but not glucose, was found to counteract the effects of self-control failure among males (P < 0.05). Conclusions Self-control failure leads to increased drinking of alcohol in males and decreased levels of drinking alcohol in females. However, increasing self-awareness appears to be a promising strategy in facing the temptation to drink when cognitive resources to inhibit intake are low. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
drinking levels and use of drinking contexts. These effects may increase risks related to drinking in some contexts (e.g. bars) much more than others (e.g. at friends' or relatives' homes). (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Society for the Study of Addiction; YEAR: 2013

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

**Subject Headings:** *Alcohol Drinking Patterns*  
*Alcoholism*  
*Communities*  
*Urban Environments*

**Source:** PsycINFO

**Full Text:** Available from *Addiction* in *Wiley*

56. The Craving Experience Questionnaire: A brief, theory-based measure of consummatory desire and craving.

**Citation:** Addiction, May 2014, vol./is. 109/5(728-735), 0965-2140;1360-0443 (May 2014)

**Author(s):** May, Jon; Andrade, Jackie; Kavanagh, David J; Feeney, Gerald F. X; Gullo, Mathew J; Statham, Dixie J; Skorka-Brown, Jessica; Connolly, Jennifer M; Cassimatis, Mandy; Young, Ross McD; Connolly, Jason P

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**Language:** English

**Abstract:**
Abstract Background and Aims Research into craving is hampered by lack of theoretical specification and a plethora of substance-specific measures. This study aimed to develop a generic measure of craving based on elaborated intrusion (EI) theory. Confirmatory factor analysis (CFA) examined whether a generic measure replicated the three-factor structure of the Alcohol Craving Experience (ACE) scale over different consummatory targets and time-frames. Design Twelve studies were pooled for CFA. Targets included alcohol, cigarettes, chocolate and food. Focal periods varied from the present moment to the previous week. Separate analyses were conducted for strength and frequency forms. Setting Nine studies included university students, with single studies drawn from an internet survey, a community sample of smokers and alcohol-dependent out-patients. Participants A heterogeneous sample of 1230 participants. Measurements Adaptations of the ACE questionnaire. Findings Both craving strength [comparative fit indices (CFI = 0.974; root mean square error of approximation (RMSEA = 0.039, 95% confidence interval (CI = 0.035-0.044) and frequency (CFI = 0.971, RMSEA = 0.049, 95% CI = 0.044-0.055) gave an acceptable three-factor solution across desired targets that mapped onto the structure of the original ACE (intensity, imagery, intrusiveness), after removing an item, re-allocating another and taking intercorrelated error terms into account. Similar structures were obtained across time-frames and targets. Preliminary validity data on the resulting 10-item Craving Experience Questionnaire (CEQ) for cigarettes and alcohol were strong. Conclusions The Craving Experience Questionnaire (CEQ) is a brief, conceptually grounded and psychometrically sound measure of desires. It demonstrates a consistent factor structure across a range of consummatory targets in both laboratory and
Clinical contexts. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Society for the Study of Addiction; YEAR: 2014

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

**Subject Headings:**
* Alcoholism  
* Psychometrics  
* Test Reliability  
* Test Validity  
* Tobacco Smoking  
* Craving

**Source:** PsycINFO

**Full Text:** Available from Wiley in *Addiction*

57. The nature and scope of gambling in Canada.

**Citation:** Addiction, May 2014, vol./is. 109/5(706-710), 0965-2140;1360-0443 (May 2014)

**Author(s):** Smith, Garry

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**Institution:** Faculty of Extension, University of Alberta, Edmonton, AB, Canada

**Language:** English

**Abstract:**
Abstract  
Aims This paper provides a historical review of gambling in Canada and examines the benefits and shortcomings of present-day Canadian gambling policies and practices. This includes a discussion of provincial and federal government roles in gambling regulation and an overview of problem gambling prevention and treatment initiatives.  
Methods The gambling studies literature was probed for pertinent information on factors such as historical development, legislative changes, economic conditions and cultural influences that have affected gambling participation and social responsibility strategies in Canada. Results Two major Criminal Code of Canada amendments (in 1969 and 1985) were pivotal in Canadian gambling expansion. The first decriminalized lotteries and casinos, while the second allowed electronic gambling devices and authorized provinces to operate and regulate gambling. These changes resulted in a radical gambling expansion which, in addition to raising provincial revenues, created public policy concerns. Varying provincial government interpretations of the ambiguous Criminal Code gambling statutes led to a lack of uniformity in how provinces regulate and operate gambling; when gambling expanded, there were no legislative safeguards in place to deal with the personal and societal effects of problem gambling. Subsequent programs designed to prevent and treat problem gambling have not been overly effective. Conclusions Canadian provinces have a monopoly on gambling within their borders and treat the activity as a profit-driven business enterprise. Problems associated with widespread gambling such as addiction, increased crime, bankruptcy and suicide are seen as minor concerns and not addressed in an aggressive fashion. Given the Canadian federal government's detachment from gambling policy and Canadian provinces' heavy reliance on gambling revenues, little change in the Canadian gambling landscape is anticipated in the near future. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Society for the Study of Addiction; YEAR: 2013

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

**Subject Headings:**
* Gambling  
* Government Policy Making  
* Improvisation  
* Laws  
* Legal Decisions

**Source:** PsycINFO
58. Action is needed to deter the trumpeting of non-peer-reviewed findings to the media.

Citation: Addiction, May 2014, vol./is. 109/5(691-692), 0965-2140;1360-0443 (May 2014)

Author(s): Humphreys, Keith

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Institution: Center for Innovation to Implementation, VA Palo Alto Health Care System, Menlo Park, CA, US

Language: English

Abstract: This editorial presents the trumpeting of non-peer-reviewed of addiction research findings to the media. Science reporting by press release also sets a terrible precedent that could be exploited by the willfully malign. If it is acceptable for academic researchers to distribute non-peer-reviewed claims to the press, then the designer of a new addiction treatment can surely feel comfortable in making extravagant claims of success in the same way. Similarly, an industry-funded tobacco researcher could cite prevailing academic standards as a reason to release 'shocking new evidence' that cigarettes are not that dangerous after all. The parallel rule for the present situation would be for Addiction and the other members of the International Society of Addiction Journal Editors to refuse to accept for peer review any scientific results that have already been actively disseminated to the media. Beyond its worth in communicating a set of shared values, it should also serve to elevate the caliber of science that ultimately attracts wide attention, which will benefit both the public and the scientific community. (PsycINFO Database Record (c) 2014 APA, all rights reserved)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Addiction
*Mass Media
*Peer Evaluation
*Scientific Communication

Source: PsycINFO

Full Text: Available from Wiley in Addiction

59. Peer support services for individuals with serious mental illnesses: Assessing the evidence.

Citation: Psychiatric Services, April 2014, vol./is. 65/4(429-441), 1075-2730 (Apr 1, 2014)

Author(s): Chinman, Matthew; George, Preethy; Dougherty, Richard H; Daniels, Allen S; Ghose, Sushmita Shoma; Swift, Anita; Delphin-Rittmon, Miriam E

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Language: English

Abstract: Objective: This review assessed the level of evidence and effectiveness of peer support services delivered by individuals in recovery to those with serious mental illnesses or co-occurring mental and substance use disorders. Methods: Authors searched PubMed, PsycINFO, Applied Social Sciences Index and Abstracts, Sociological Abstracts, Social Services Abstracts, Published International Literature on Traumatic Stress, the Educational Resources Information Center, and the Cumulative Index to Nursing and Allied Health Literature for outcome studies of peer support services from 1995 through
2012. They found 20 studies across three service types: peers added to traditional services, peers in existing clinical roles, and peers delivering structured curricula. Authors judged the methodological quality of the studies using three levels of evidence (high, moderate, and low). They also described the evidence of service effectiveness. Results: The level of evidence for each type of peer support service was moderate. Many studies had methodological shortcomings, and outcome measures varied. The effectiveness varied by service type. Across the range of methodological rigor, a majority of studies of two service types—peers added and peers delivering curricula—showed some improvement favoring peers. Compared with professional staff, peers were better able to reduce inpatient use and improve a range of recovery outcomes, although one study found a negative impact. Effectiveness of peers in existing clinical roles was mixed. Conclusions: Peer support services have demonstrated many notable outcomes. However, studies that better differentiate the contributions of the peer role and are conducted with greater specificity, consistency, and rigor would strengthen the evidence. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse  
*Health Care Delivery  
*Health Care Services  
*Mental Disorders  
*Peers  
Comorbidity  
Severity (Disorders)

Source: PsycINFO


Citation: International Psychogeriatrics, May 2014, vol./is. 26/5(873-874), 1041-6102;1741-203X (May 2014)

Author(s): Ames, David

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Institution: National Ageing Research Institute, Parkville, VIC, Australia

Language: English

Abstract: Reviews the book, Frontiers in CNS Drug Discovery Volume 2 by Atta-ur Rahman and M. Iqbal Choudhary (Eds.) (2013). The editors, who also publish in areas of pharmacology other than central nervous system (CNS) disorders, have assembled 11 chapters by scientists with expertise in such matters as developing treatments for prion disorders, neural stem cells for neurodegenerative diseases, essential polyunsaturated fatty acids as new treatments for neurodegenerative disorders, and subjects with less immediate relevance to old age psychiatry such as epigenetic modifications as novel targets for drug addiction. The chapters seem well written, but I lack the detailed expertise to judge their accuracy or the extent to which they are up to date in these rapidly developing areas, though the ebook format should lend itself to rapid dissemination of new knowledge far better than the older hard copy book formats. (PsycINFO Database Record (c) 2014 APA, all rights reserved)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Central Nervous System Disorders  
*Drug Therapy  
*Fatty Acids  
*Neurodegenerative Diseases  
*Stem Cells  
Pharmacology  
Prion

Source: PsycINFO

Citation: Trends in Neurosciences, April 2014, vol./is. 37/4(219-227), 0166-2236 (Apr 2014)
Author(s): Spanagel, Rainer; Noori, Hamid R; Heilig, Markus
Institution: Institute of Psychopharmacology, Central Institute of Mental Health (CIMH), University of Heidelberg, Medical Faculty Mannheim, Heidelberg, Germany; Institute of Psychopharmacology, Central Institute of Mental Health (CIMH), University of Heidelberg, Medical Faculty Mannheim, Heidelberg, Germany; Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism (NIAAA), Bethesda, MD, US
Language: English
Abstract: Alcohol is frequently consumed for stress relief, but the individual determinants and the temporal course of stress-induced alcohol use are not well understood. Preclinical studies may help shed light on these factors. We synthesize here the findings from numerous rodent studies of stress and alcohol interactions. Stress-induced alcohol consumption is age-dependent, has a high genetic load, and results from an interaction of the stress and reward systems. Specifically, glucocorticoids, acting within the nucleus accumbens (NAc), are important mediators of this stress-induced alcohol intake. In addition, increased activation of the corticotropin-releasing hormone (CRH) system within the extended amygdala appears to mediate stress-induced relapse. Finally, these preclinical studies have helped to identify several attractive targets for novel treatments of alcohol abuse and addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Ltd.; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcohols *Corticotropin Releasing Factor *Genetics *Nucleus Accumbens *Stress Rewards
Source: PsycINFO
Full Text: Available from Elsevier in Trends in Neurosciences

62. Illicit dopamine transients: Reconciling actions of abused drugs.

Citation: Trends in Neurosciences, April 2014, vol./is. 37/4(200-210), 0166-2236 (Apr 2014)
Author(s): Covey, Dan P; Roitman, Mitchell F; Garris, Paul A
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Institution: School of Biological Sciences, Illinois State University, Normal, IL, US; Department of Psychology, University of Illinois at Chicago, Chicago, IL, US; School of Biological Sciences, Illinois State University, Normal, IL, US
Language: English
Abstract: Phasic increases in brain dopamine are required for cue-directed reward seeking. Although compelling within the framework of appetitive behavior, the view that illicit drugs hijack reward circuits by hyperactivating these dopamine transients is inconsistent with established psychostimulant pharmacology. However, recent work reclassifying amphetamine (AMPH), cocaine, and other addictive dopamine-transporter inhibitors (DAT-Is) supports transient hyperactivation as a unifying hypothesis of abused drugs. We argue here that reclassification also identifies generating burst firing by dopamine neurons as a keystone action. Unlike natural rewards, which are processed by sensory systems, drugs act directly on the brain. Consequently, to mimic natural rewards and exploit
reward circuits, dopamine transients must be elicited de novo. Of available drug targets, only burst firing achieves this essential outcome. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:**
- Brain
- CNS Stimulating Drugs
- Dopamine
- Drug Abuse
- Pharmacology
- Cues
- Rewards

**Source:** PsycINFO

**Full Text:** Available from Elsevier in *Trends in Neurosciences*

63. Designer receptors show role for ventral pallidum input to ventral tegmental area in cocaine seeking.

**Citation:** Nature Neuroscience, April 2014, vol./is. 17/4(577-585), 1097-6256;1546-1726 (Apr 2014)

**Author(s):** Mahler, Stephen V; Vazey, Elena M; Beckley, Jacob T; Keistler, Colby R; McGlinchey, Ellen M; Kaufling, Jennifer; Wilson, Steven P; Deisseroth, Karl; Woodward, John J; Aston-Jones, Gary

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- Department of Bioengineering and Psychiatry and Behavioral Sciences, Stanford University, Stanford, CA, US
- Department of Neurosciences, Medical University of South Carolina, Charleston, SC, US
- Department of Neurosciences, Medical University of South Carolina, Charleston, SC, US
- Department of Neurosciences, Medical University of South Carolina, Charleston, SC, US
- Department of Pharmacology, Physiology and Neuroscience, School of Medicine, University of South Carolina, Columbia, SC, US

**Language:** English

**Abstract:**
The ventral pallidum is centrally positioned within mesocorticolimbic reward circuits, and its dense projection to the ventral tegmental area (VTA) regulates neuronal activity there. However, the ventral pallidum is a heterogeneous structure, and how this complexity affects its role within wider reward circuits is unclear. We found that projections to VTA from the rostral ventral pallidum (RVP), but not the caudal ventral pallidum (CVP), were robustly Fos activated during cue-induced reinstatement of cocaine seeking—a rat model of relapse in addiction. Moreover, designer receptor-mediated transient inactivation of RVP neurons, their terminals in VTA or functional connectivity between RVP and VTA dopamine neurons blocked the ability of drug-associated cues (but not a cocaine prime) to reinstate cocaine seeking. In contrast, CVP neuronal inhibition blocked cocaine-primed, but not cue-induced, reinstatement. This double dissociation in ventral pallidum subregional roles in drug seeking is likely to be important for understanding the mesocorticolimbic circuits underlying reward seeking and addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
64. The Reach Ratio-A new indicator for comparing quitline reach into smoking subgroups.

Citation: Nicotine & Tobacco Research, April 2014, vol./is. 16/4(491-495), 1462-2203;1469-994X (Apr 2014)

Author(s): Campbell, H. Sharon; Baskerville, N. Bruce; Hayward, Lynda M; Brown, K. Stephen; Ossip, Deborah J

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Language: English

Abstract: Introduction: There is growing concern about population disparities in tobacco-related morbidity and mortality. This paper introduces the reach ratio as a complementary measure to reach for monitoring whether quitline interventions are reaching high risk groups of smokers proportionate to their prevalence in the population. Methods: Data on smokers were collected at intake by 7 Canadian provincial quitlines from 2007 to 2009 and grouped to identify 4 high risk subgroups: males, young adults, heavy smokers, and those with low education. Provincial data are from the Canadian Tobacco Use Monitoring Survey. Reach ratios (ReRas), defined as the proportion of quitline callers from a subgroup divided by the proportion of the smoking population in the subgroup, and 95% confidence intervals were calculated for the subgroups. A ReRa of 1.0 indicates proportionate representation. Results: ReRas for male smokers and young adults are consistently less than 1.0 across all provinces, indicating that a lower proportion of these high-risk smokers were receiving evidence-based smoking cessation treatment from quitlines. Those with high levels of tobacco addiction and less than high school education have ReRas greater than 1.0, indicating that a greater proportion of these smokers were receiving cessation treatments. Conclusion: ReRas complement other measures of reach and provide a standardized estimate of the extent to which subgroups of interest are benefiting from available cessation interventions. This information can help quitline operators, funders, and policymakers determine the need for promotional strategies targeted to high risk subgroups, and allocate resources to meet program and policy objectives. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: Published by Oxford University Press on behalf of the Society for Research on Nicotine and Tobacco. All rights reserved.; HOLDER: The Author; YEAR: 2013

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Death and Dying
*Hot Line Services
*Smoking Cessation
*Tobacco Smoking
*Morbidity
At Risk Populations
Intervention

Source: PsycINFO
Full Text: Available from Oxford University Press in Nicotine and Tobacco Research

65. Basal ganglia plus insula damage yields stronger disruption of smoking addiction than basal ganglia damage alone.

Citation: Nicotine & Tobacco Research, April 2014, vol./is. 16/4(445-453), 1462-2203;1469-994X (Apr 2014)

Author(s): Gaznick, Natassia; Tranel, Daniel; McNutt, Ashton; Bechara, Antoine

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Institution: Department of Neurology, Division of Behavioral Neurology and Cognitive Neuroscience, Iowa City, IA, US; Department of Neurology, Division of Behavioral Neurology and Cognitive Neuroscience, Iowa City, IA, US; Department of Neurology, Division of Behavioral Neurology and Cognitive Neuroscience, Iowa City, IA, US; Department of Neurology, Division of Behavioral Neurology and Cognitive Neuroscience, Iowa City, IA, US

Language: English

Abstract: Introduction: The main objective of this study was to elucidate the importance of the basal ganglia (BG) and insula (INS) for nicotine addiction and smoking behavior. Methods: We used a lesion study examining the effects of BG and INS damage on changes in smoking behavior and nicotine dependence over time in a prospective manner. We studied whether combined BG and INS damage yields more substantial disruption of smoking and nicotine dependence than damage to the BG alone and compared with damage to other brain regions outside the BG and INS (brain-damaged comparison [BDC] group). We obtained neuroanatomical and behavioral data for 63 neurological patients with stroke at 1 month after onset and at 3-, 6-, and 12-month follow-ups. All patients were smokers at lesion onset. Results: The BG and BG + INS groups had significantly higher and more sustained rates of smoking cessation than patients with damage elsewhere. By 12 months after onset, only 14.3% of the patients in the BDC group were classified as nonsmokers. In the BG group, 37% were not smoking by the 12-month follow-up, and in the BG + INS group, smoking cessation was even more pronounced, as 75% of this group was not smoking at the 12-month epoch. Conclusions: The findings show that damage to the BG alone can cause disruption of smoking addiction, and when BG damage is combined with INS damage, the disruption increases. The latter finding is consistent with the proposal that the INS has a key role in smoking addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: Published by Oxford University Press on behalf of the Society for Research on Nicotine and Tobacco. All rights reserved.; HOLDER: The Author; YEAR: 2013

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Addiction
*Basal Ganglia
*Nicotine
*Tobacco Smoking
*Insula

Source: PsycINFO

Full Text: Available from Oxford University Press in Nicotine and Tobacco Research

66. A qualitative study of smokers' responses to messages discouraging dual tobacco product use.

Citation: Health Education Research, April 2014, vol./is. 29/2(206-221), 0268-1153;1465-3648 (Apr 2014)

Author(s): Popova, Lucy; Kostygina, Ganna; Sheon, Nicolas M; Ling, Pamela M

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Cigarette companies increasingly promote novel smokeless tobacco products to smokers, encouraging them to use smokeless tobacco in smoke-free environments. New messages may counteract this promotion. We developed 12 initial anti-smokeless message ideas and tested them in eight online focus groups with 75 US smokers. Those smokers who never tried smokeless tobacco were unaware of health risks of novel smokeless tobacco products, perceived scary messages as effective and acknowledged the addictive nature of nicotine. Smokers who had tried smokeless tobacco shared their personal (mainly negative) experiences with smokeless tobacco, were aware of health risks of novel smokeless tobacco products, but denied personal addiction, and misinterpreted or disregarded more threatening messages. Portraying women as smokeless tobacco users was perceived as unbelievable, and emphasizing the lack of appeal of novel smokeless tobacco products was perceived as encouraging continued smoking. Future ads should educate smokers about risks of novel smokeless tobacco products, but past users and never users may require different message strategies. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
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side-effects (initial daily dose of 2.5 mg was increased to 5 mg one week after) and clonazepam (2 mg 3x1 tbl/d). Two weeks after initiating escitalopram treatment (BDI score 39) the patient was more relaxed but other symptoms persisted. Escitalopram dose was then raised to 10 mg per day. Four weeks after, we established a significant BDI score decrease (24) and the patient felt much better. His mood improved significantly, the anxiety reduced, though still followed by milder depressive nihilistic thoughts, concentration disturbances and fatigue. Eight weeks after (BDI 18), a milder morning lethargy and lowered mood were still present but without depressive thoughts. Cognitive disturbances and fatigue were still present but less intense. Escitalopram therapy therefore continued while clonazepam dose gradually decreased. A significant decrease in BDI score was established four weeks after escitalopram therapy was introduced without interrupting of IFN therapy. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Country of Publication: HOLDER: Medicinska naklada-Zagreb, Croatia
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Antidepressant Drugs *Drug Therapy *Hepatitis *Interferons *Side Effects (Drug) Citalopram Clonazepam Drug Addiction Heroin
Source: PsycINFO

68. Cannabis use among a sample of 16 to 18 year-old students in Switzerland.

Citation: Psychiatria Danubina, 2014, vol./is. 26/1(56-65), 0353-5053 (2014)
Author(s): Dammann, Gerhard; Dursteler-MacFarland, Kenneth M; Strasser, Hannes; Skipper, Gregory E; Wiesbeck, Gerhard A; Wurst, Friedrich Martin
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Institution: Psychiatric University Hospital, Basel, Switzerland; Psychiatric University Hospital, Basel, Switzerland; Psychiatric University Hospital, Basel, Switzerland; Alabama Physician Health Program, AL, US; Psychiatric University Hospital, Basel, Switzerland; Psychiatric University Hospital, Basel, Switzerland
Language: English
Abstract: Background: The aim of this study was to estimate the prevalence of cannabis use among Swiss students and to assess their attitudes regarding health and safety issues associated with drug use. Subjects and methods: After a workshop. 173 students (23.1% male, 75.7% female; 44.4% age 16, 43.8% age 17 and 11.8% age 18) from a Swiss school were surveyed by questionnaire. Results: 59.3% (n = 103) of all participants had tried cannabis, and 30.1% of those who reported cannabis use had consumed more than 100 joints. Of those 103 students with cannabis experience, 6.8% rated the risk of cannabis-related psychic effects as low, and 9.8% were not concerned about driving under the influence of cannabis. In cases of heavy cannabis use, the chance of increased tobacco, alcohol or other drug use is higher than for those with less or no cannabis use at all (odds ratios of 4.33-10.86). Conclusions: This paper deals primarily with cannabis prevalence data in adolescents from previous studies and sources, and shows that our findings deviate significantly—and surprisingly—from past research. Our data from a school survey indicates higher cannabis use than data from official drug policy studies. Additionally, our data shows that the students’ self-reported attitudes towards health and safety issues were mostly realistic. The examination of methodological issues that might impact prevalence estimates should be added to the cannabis literature. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
69. Depression, loneliness, anger behaviours and interpersonal relationship styles in male patients admitted to Internet addiction outpatient clinic in Turkey.

Citation: Psychiatria Danubina, 2014, vol./is. 26/1(39-45), 0353-5053 (2014)
Author(s): Omer, Senormanci; Konkan, Ramazan; Oya, Guclu; Guliz, Senormanci
Institution: Department of Psychiatry, School of Medicine, Bulent Ecevit University, Zonguldak, Turkey; Bakirkoy Research & Training Hospital for Psychiatry, Neurology and Neurosurgery, Istanbul, Turkey; Bakirkoy Research & Training Hospital for Psychiatry, Neurology and Neurosurgery, Istanbul, Turkey; Zonguldak Ataturk State Hospital, Zonguldak, Turkey
Language: English
Abstract: Background: 'Internet addiction' is excessive computer use that interferes with daily life of a person. We designed this study in order to evaluate the predictor effect of depression, loneliness, anger and interpersonal relationship styles for internet addiction as well as develop a model. Subjects and methods: Forty (40) male internet addicted patients were selected from our hospital's internet Addiction Outpatient Clinic. During the study, the Internet Addiction Test (IAT), the Beck Depression Inventory (BDI), the State Trait Anger Expression Scale (STAXI), the UCLA-Loneliness Scale (UCLA-LS), and the Interpersonal Relationship Styles Scale (IRSS) were used for the evaluation of the patients. Results: The results of this study showed that the 'duration of internet use' (B = 2.353, p = 0.01) and STAXI 'anger in' subscale (B = 1.487, p = 0.01) were the predictors of internet addiction. Conclusion: When the clinicians suspect for the internet overuse, regulation of internet usage might be helpful Psychiatric treatments for expressing anger and therapies that focus on validation of the feelings may be (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Medicinska naklada-Zagreb, Croatia
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Anger *Human Males *Internet Addiction *Major Depression *Interpersonal Relationships Loneliness Outpatients
Source: PsycINFO

70. Barriers to primary care physicians prescribing buprenorphine.

Citation: Annals of Family Medicine, March 2014, vol./is. 12/2(128-133), 1544-1709;1544-1717 (Mar-Apr 2014)
Author(s): Hutchinson, Eliza; Catlin, Mary; Andrilla, C. Holly A; Baldwin, Laura-Mae; Rosenblatt, Roger A
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Institution: University of Washington, Department of Family Medicine, Seattle, WA, US; University of Washington, Department of Family Medicine, Seattle, WA, US; University of Washington, Department of Family Medicine, Re, Seattle, WA, US; University of
Purpose: Despite the efficacy of buprenorphine-naloxone for the treatment of opioid use disorders, few physicians in Washington State use this clinical tool. To address the acute need for this service, a Rural Opioid Addiction Management Project trained 120 Washington physicians in 2010-2011 to use buprenorphine. We conducted this study to determine what proportion of those trained physicians began prescribing this treatment and identify barriers to incorporating this approach into outpatient practice. Methods: We interviewed 92 of 120 physicians (77%), obtaining demographic information, current prescribing status, clinic characteristics, and barriers to prescribing buprenorphine. Residents and 7 physicians who were prescribing buprenorphine at the time of the course were excluded from the study. We analyzed the responses of the 78 remaining respondents. Results: Almost all respondents reported positive attitudes toward buprenorphine, but only 22 (28%) reported prescribing buprenorphine. Most (95%, n = 21) new prescribers were family physicians. Physicians who prescribed buprenorphine were more likely to have partners who had received a waiver to prescribe buprenorphine. A lack of institutional support was associated with not prescribing the medication (P = .04). A lack of mental health and psychosocial support was the most frequently cited barrier by both those who prescribe and who do not prescribe buprenorphine. Conclusion: Interventions before and after training are needed to increase the number of physicians who offer buprenorphine for treatment of addiction. Targeting physicians in clinics that agree in advance to institute services, coupled with technical assistance after they have completed their training, their clinical teams, and their administrations is likely to help more physicians become active providers of this highly effective outpatient treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
influenced by cART uptake and demographic changes were studied using an individual-based model. Parameters were based on data of the Amsterdam Cohort Study, and counterfactual treatment scenarios were examined for this city. Demography of the modeled population was also varied to allow for more general conclusions. Results: We estimated that over the complete HIV epidemic among IDU in Amsterdam the historic use of cART has led to only 2% less incidence. As individuals were treated from low CD4+ cell counts, their decreased infectiousness was offset by increased infectious lifetime. Large reduction in incidence could result from a test and immediate treat strategy, with elimination of HIV occurring when the average time from infection to starting treatment was less than 2 months. However, substantial proportions of new infections were prevented only if the test and treat intervention was implemented within the first few years after HIV-epidemic onset, especially for a declining IDU population. Ignoring heterogeneity in risk-behavior led to overly optimistic expectations of the prevention effects of treatment. In general, treatment led to much greater reduction in incidence compared with stopping HIV-infected IDU from lending out syringes. Conclusion: A test and immediate treat strategy for HIV among IDU could lead to great reductions in incidence. To fully eliminate the spread of HIV, treatment as prevention should be combined with other interventions, with behavioral intervention directed at those not yet HIV infected. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

72. Chronic exposure to a gambling-like schedule of reward predictive stimuli can promote sensitization to amphetamine in rats.

Citation: Frontiers in Behavioral Neuroscience, February 2014, vol./is. 8/, 1662-5153 (Feb 11, 2014)

Author(s): Zack, Martin; Featherstone, Robert E; Mathewson, Sarah; Fletcher, Paul J

Correspondence Address: Zack, Martin: Cognitive Psychopharmacology Laboratory, Neuroscience Department, Centre for Addiction and Mental Health, 33 Russell Street, Toronto, ON, Canada, M5S 2S1, martin.zack@camh.ca

Institution: Cognitive Psychopharmacology Laboratory, Neuroscience Department, Centre for Addiction and Mental Health, Toronto, ON, Canada; Translational Neuroscience Program, Department of Psychiatry, School of Medicine, University of Pennsylvania, Philadelphia, PA, US; Biopsychology Section, Neuroscience Department, Centre for Addiction and Mental Health, Toronto, ON, Canada; Biopsychology Section, Neuroscience Department, Centre for Addiction and Mental Health, Toronto, ON, Canada

Language: English

Abstract: Addiction is considered to be a brain disease caused by chronic exposure to drugs. Sensitization of brain dopamine (DA) systems partly mediates this effect. Pathological gambling (PG) is considered to be a behavioral addiction. Therefore, PG may be caused by chronic exposure to gambling. Identifying a gambling-induced sensitization of DA systems would support this possibility. Gambling rewards evoke DA release. One episode of slot machine play shifts the DA response from reward delivery to onset of cues (spinning reels) for reward, in line with temporal difference learning principles. Thus, conditioned stimuli (CS) play a key role in DA responses to gambling. In primates, DA response to a CS is strongest when reward probability is 50%. Under this schedule the CS
elicits an expectancy of reward but provides no information about whether it will occur on a given trial. During gambling, a 50% schedule should elicit maximal DA release. This closely matches reward frequency (46%) on a commercial slot machine. DA release can contribute to sensitization, especially for amphetamine. Chronic exposure to a CS that predicts reward 50% of the time could mimic this effect. We tested this hypothesis in three studies with rats. Animals received 15 x 45-min exposures to a CS that predicted reward with a probability of 0, 25, 50, 75, or 100%. The CS was a light; the reward was a 10% sucrose solution. After training, rats received a sensitizing regimen of five separate doses (1 mg/kg) of d-amphetamine. Lastly they received a 0.5 or 1 mg/kg amphetamine challenge prior to a 90-min locomotor activity test. In all three studies the 50% group displayed greater activity than the other groups in response to both challenge doses. Effect sizes were modest but consistent, as reflected by a significant group x rank association ( = 0.986, p = 0.025). Chronic exposure to a gambling-like schedule of reward predictive stimuli can promote sensitization to amphetamine much like exposure to amphetamine itself. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Amphetamine  
*Conditioned Stimulus  
*Dopamine  
*Gambling  
*Sensitization  
Rats  
Uncertainty  
Exposure

Source: PsycINFO

Full Text: Available from National Library of Medicine in Frontiers in Behavioral Neuroscience

73. Glucocorticoid receptor gene in activation in dopamine-innervated areas selectively decreases behavioral responses to amphetamine.

Citation: Frontiers in Behavioral Neuroscience, February 2014, vol./is. 8/, 1662-5153 (Feb 12, 2014)

Author(s): Parnaudeau, Sebastien; Dongelmans, Marie-louise; Turiault, Marc; Ambroggi, Frederic; Delbes, Anne-Sophie; Cansell, Celine; Luquet, Serge; Piazza, Pier-Vincenzo; Tronche, Francois; Barik, Jacques

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Language: English
Abstract: The meso-cortico-limbic system, via dopamine release, encodes the rewarding and reinforcing properties of natural rewards. It is also activated in response to abused substances and is believed to support drug-related behaviors. Dysfunctions of this system lead to several psychiatric conditions including feeding disorders and drug addiction. These disorders are also largely influenced by environmental factors and in particular stress exposure. Stressors activate the corticotrope axis ultimately leading to glucocorticoid hormone (GCs) release. GCs bind the glucocorticoid receptor (GR) a transcription factor ubiquitously expressed including within the meso-cortico-limbic tract. While GR within dopamine-innervated areas drives cocaine's behavioral responses, its implication in responses to other psychostimulants such as amphetamine has never been clearly established. Moreover, while extensive work has been made to uncover the role of this receptor in addicted behaviors, its contribution to the rewarding and reinforcing properties of food has yet to be investigated. Using mouse models carrying GR gene inactivation in either dopamine neurons or in dopamine-innervated areas, we found that GR in dopamine responsive neurons is essential to properly build amphetamine-induced conditioned place preference and locomotor sensitization. c-Fos quantification in the nucleus accumbens further confirmed defective neuronal activation following amphetamine injection. These diminished neuronal and behavioral responses to amphetamine may involve alterations in glutamate transmission as suggested by the decreased MK801-elicited hyperlocomotion and by the hyporeactivity to glutamate of a subpopulation of medium spiny neurons. In contrast, GR inactivation did not affect rewarding and reinforcing properties of food suggesting that responding for natural reward under basal conditions is preserved in these mice. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Amphetamine
*Dopamine
*Genes
*Glucocorticoids
*Neural Receptors
Behavior
Mice
Responses
Rewards

Source: PsycINFO

Full Text: Available from National Library of Medicine in Frontiers in Behavioral Neuroscience

74. GS 455534 selectively suppresses binge eating of palatable food and attenuates dopamine release in the accumbens of sugar-bingeing rats.

Citation: Behavioural Pharmacology, April 2014, vol./is. 25/2(147-157), 0955-8810;1473-5849 (Apr 2014)

Author(s): Bocarsly, Miriam E; Hoebel, Bartley G; Paredes, Daniel; von Loga, Isabell; Murray, Susan M; Wang, Miaoyuan; Arolfo, Maria P; Yao, Lina; Diamond, Ivan; Avena, Nicole M

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Institution: Department of Psychology, Princeton Neuroscience Institute, Princeton University, Princeton, NJ, US; Department of Psychology, Princeton Neuroscience Institute, Princeton University, Princeton, NJ, US; Lieber Institute for Brain Development, Baltimore, MD, US; Department of Psychology, Princeton Neuroscience Institute,
Binge eating palatable foods has been shown to have behavioral and neurochemical similarities to drug addiction. GS 455534 is a highly selective reversible aldehyde dehydrogenase 2 inhibitor that has been shown to reduce alcohol and cocaine intake in rats. Given the overlaps between binge eating and drug abuse, we examined the effects of GS 455534 on binge eating and subsequent dopamine release. Sprague-Dawley rats were maintained on a sugar (experiment 1) or fat (experiment 2) binge eating diet. After 25 days, GS 455534 was administered at 7.5 and 15mg/kg by an intraperitoneal injection, and food intake was monitored. In experiment 3, rats with cannulae aimed at the nucleus accumbens shell were maintained on the binge sugar diet for 25 days. Microdialysis was performed, during which GS 455534 15mg/kg was administered, and sugar was available. Dialysate samples were analyzed to determine extracellular levels of dopamine. In experiment 1, GS 455534 selectively decreased sugar intake food was made available in the Binge Sugar group but not the Ad libitum Sugar group, with no effect on chow intake. In experiment 2, GS 455534 decreased fat intake in the Binge Fat group, but not the Ad libitum Fat group, however, it also reduced chow intake. In experiment 3, GS 455534 attenuated accumbens dopamine release by almost 50% in binge eating rats compared with the vehicle injection. The findings suggest that selective reversible aldehyde dehydrogenase 2 inhibitors may have the therapeutic potential to reduce binge eating of palatable foods in clinical populations. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
fostering greater entitativity (a sense of being a distinct group), a greater reliance on
members as social buffers, and a greater use of condemning condemners and
organization-level defensive tactics. We develop a series of propositions to formalize our
arguments and suggest how this more nuanced approach to studying dirty work can
stimulate and inform future research. (PsycINFO Database Record (c) 2014 APA, all
rights reserved) (journal abstract)

Conference Information: Biennial Meeting of the International Association for Chinese Management Research.
2012. Hong Kong. An earlier version of this paper was presented as a keynote address at the
aforementioned conference.

Country of Publication: HOLDER: International Association for Chinese Management Research; YEAR: 2013

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Morality
*Stigma
*Work (Attitudes Toward)
*Working Conditions
Evil
Social Psychology

Source: PsycINFO

76. A how-to guide for conducting a functional analysis: Behavioral principles and clinical application.

Citation: the Behavior Therapist, January 2014, vol./is. 37/1(4-12), 0278-8403 (Jan 2014)

Author(s): Magidson, Jessica F; Young, Kevin C; Lejuez, C. W

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Language: English

Abstract: This article aims to provide an expanded functional analysis (FA) framework that is
consistent with the core components of FA, but that also allows for the collection of
additional individual information that can be conceptualized in the FA from multiple
perspectives. To illustrate this framework, the authors present a hypothetical case study
using a patient with clinically relevant substance use, mood problems, and life stressors
with the aim to provide a straight forward, clear set of strategies for conducting an FA that
offers both structure and flexibility across a range of behaviors, settings, and clinician
characteristics. The first and perhaps most important step in conducting an FA is the
provision of a strong rationale for its use. Following the rationale, it is important to move
to the overt behavior that is core to one's experience of distress. Once the target problem
behavior is isolated, focus is shifted to the trigger. Following from the trigger, the patient
is instructed to consider both his/her thoughts and feelings. Following the problem
behavior, the next step is to focus on "positive" and "negative consequences". The
discussion of the characteristics of positive and negative consequences transitions into a
discussion of alternative behaviors, particular ones that capture the positive aspects of the
problem behavior yet with fewer long-term negative consequences. Although when
conducting an FA there is some effort to separate its different components for ease of
comprehension and to isolate a particular problem behavior, the patient is likely to realize
that there is considerable overlap across FA components. (PsycINFO Database Record (c)
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Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Behavior Problems
*Functional Analysis
Drug Usage
Emotional States
Stress

Source: PsycINFO
77. "A breath of fresh air worth spreading": Media coverage of retailer abandonment of tobacco sales.

Citation: American Journal of Public Health, March 2014, vol./is. 104/3(562-569), 0090-0036;1541-0048 (Mar 2014)

Author(s): McDaniel, Patricia A; Offen, Naphtali; Yerger, Valerie B; Malone, Ruth E

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Language: English

Abstract: Objectives: Media play an important role in the diffusion of innovations by spreading knowledge of their relative advantages. We examined media coverage of retailers abandoning tobacco sales to explore whether this innovation might be further diffused by media accounts. Methods: We searched online media databases (Lexis Nexis, Proquest, and Access World News) for articles published from 1995 to 2011, coding retrieved items through a collaborative process. We analyzed the volume, type, provenance, prominence, and content of coverage. Results: We found 429 local and national news items. Two retailers who were the first in their category to end tobacco sales received the most coverage and the majority of prominent coverage. News items cited positive potential impacts of the decision more often than negative potential impacts, and frequently referred to tobacco-caused disease, death, or addiction. Letters to the editor and editorials were overwhelmingly supportive. Conclusions: The content of media coverage about retailers ending tobacco sales could facilitate broader diffusion of this policy innovation, contributing to the denormalization of tobacco and moving society closer to ending the tobacco epidemic. Media advocacy could increase and enhance such coverage. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Decision Making
*Innovation
*News Media
*Nicotine
*Retailing

Source: PsycINFO

Full Text: Available from EBSCOhost in American Journal of Public Health
Available from ProQuest in American Journal of Public Health; Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.
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78. Do psychopathic traits assessed in mid-adolescence predict mental health, psychosocial, and antisocial, including criminal outcomes, over the subsequent 5 years?

Citation: The Canadian Journal of Psychiatry / La Revue canadienne de psychiatrie, January 2014, vol./is. 59/1(40-49), 0706-7437;1497-0015 (Jan 2014)

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Objective: To determine whether psychopathic traits assessed in mid-adolescence predicted mental health, psychosocial, and antisocial (including criminal) outcomes 5 years later and would thereby provide advantages over diagnosing conduct disorder (CD).

Method: Eighty-six women and 61 men were assessed in mid-adolescence when they first contacted a clinic for substance misuse and were reassessed 5 years later. Assessments in adolescence include the Psychopathy Checklist-Youth Version (PCL-YV) and depending on their age, either the Kiddie-Schedule for Affective Disorders and Schizophrenia for School-Aged Children or the Structured Clinical Interview for the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (SCID). Assessments in early adulthood included the SCID, self-reports of psychosocial functioning, aggressive behaviour, and criminality and official criminal records Results: The antisocial facet score positively predicted the number of anxiety symptoms and likelihood of receiving treatment for substance use disorders (SUDs). Lifestyle and antisocial facet scores negatively predicted Global Assessment of Functioning scores. By contrast, the interpersonal score and male sex independently and positively predicted the number of months worked or studied, as did the interaction of Lifestyle * Sex indicating that among men, but not women, an increase in lifestyle facet score was associated with less time worked or studied. Interpersonal and antisocial scores positively predicted school drop-out. Antisocial facet scores predicted the number of symptoms of antisocial personality disorder, alcohol and SUDs, and violent and nonviolent criminality but much more strongly among males than females. Predictions from numbers of CD symptoms were similar. Conclusions: Psychopathic traits among adolescents who misuse substances predict an array of outcomes over the subsequent 5 years. Information on the levels of these traits may be useful for planning treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
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responses to error, and whether such modulation is more pronounced in cocaine-addicted individuals, in whom dopamine neurotransmission is disrupted. After receiving oral MPH (20 mg) or placebo (counterbalanced), 15 healthy human volunteers and 16 cocaine-addicted individuals completed a task of executive function (the Stroop color word) during functional magnetic resonance imaging (fMRI). During MPH, despite not showing differences on percent accuracy and reaction time, all subjects committed fewer total errors and slowed down more after committing errors, suggestive of more careful responding. In parallel, during MPH all subjects showed reduced dorsal anterior cingulate cortex response to the fMRI contrast error > correct. In the cocaine subjects only, MPH also reduced error > correct activity in the dorsolateral prefrontal cortex (controls instead showed lower error > correct response in this region during placebo). Taken together, MPH modulated dopaminergically innervated prefrontal cortical areas involved in error-related processing, and such modulation was accentuated in the cocaine subjects. These results are consistent with a dopaminergic contribution to error-related processing during a cognitive control task. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: Published by Oxford University Press. All rights reserved.; HOLDER: The Author; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Cocaine *Methylphenidate *Prefrontal Cortex *Executive Function Addiction Dopamine Magnetic Resonance Imaging
Source: PsycINFO
Full Text: Available from Oxford University Press in Cerebral Cortex

80. CaMKII activity in the ventral tegmental area gates cocaine-induced synaptic plasticity in the nucleus accumbens.

Citation: Neuropsychopharmacology, March 2014, vol./is. 39/4(989-999), 0893-133X;1740-634X (Mar 2014)
Author(s): Liu, Xiaojie; Liu, Yong; Zhong, Peng; Wilkinson, Brianna; Qi, Jinshun; Olsen, Christopher M; Bayer, K. Ulrich; Liu, Qing-song
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Language: English
Abstract: Addictive drugs such as cocaine induce synaptic plasticity in discrete regions of the reward circuit. The aim of the present study is to investigate whether cocaine-evoked synaptic plasticity in the ventral tegmental area (VTA) and nucleus accumbens (NAc) is causally linked. Ca2+/calmodulin-dependent protein kinase II (CaMKII) is a central regulator of long-term synaptic plasticity, learning, and drug addiction. We examined whether blocking CaMKII activity in the VTA affected cocaine conditioned place preference (CPP) and cocaineevoked synaptic plasticity in its target brain region, the NAc. TatCN2l is a CaMKII inhibitory peptide that blocks both stimulated and autonomous CaMKII activity with high selectivity. We report that intra-VTA
microinjections of tatCN21 before cocaine conditioning blocked the acquisition of cocaine CPP, whereas intra-VTA microinjections of tatCN21 before saline conditioning did not significantly affect cocaine CPP, suggesting that the CaMKII inhibitor blocks cocaine CPP through selective disruption of cocaine-cue-associated learning. Intra-VTA tatCN21 before cocaine conditioning blocked cocaine-evoked depression of excitatory synaptic transmission in the shell of the NAc slices ex vivo. In contrast, intra-VTA microinjection of tatCN21 just before the CPP test did not affect the expression of cocaine CPP and cocaine-induced synaptic plasticity in the NAc shell. These results suggest that CaMKII activity in the VTA governs cocaine-evoked synaptic plasticity in the NAc during the time window of cocaine conditioning. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
depression-like behavior, increase in nicotine-induced place preference) were normalized by repeated tDCS. Our data show for the first time in an animal model that repeated tDCS is a promising, non-expensive clinical tool that could be used to reduce smoking craving and facilitate smoking cessation. Our animal model will be useful to investigate the mechanisms underlying the effects of tDCS on addiction and other psychiatric disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

82. Association of gamma-aminobutyric acid A receptor 2 gene (GABRA 2) with alcohol use disorder.

Citation: Neuropsychopharmacology, March 2014, vol./is. 39/4(907-918), 0893-133X,1740-634X (Mar 2014)

Author(s): Li, Dawei; Sulovari, Arvis; Cheng, Chao; Zhao, Hongyu; Kranzler, Henry R; Gelernter, Joel

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Language: English

Abstract: Gamma-aminobutyric acid (GABA) is a major inhibitory neurotransmitter in mammalian brain. GABA receptor are involved in a number of complex disorders, including substance abuse. No variants of the commonly studied GABA receptor genes that have been associated with substance dependence have been determined to be functional or pathogenic. To reconcile the conflicting associations with substance dependence traits, we performed a meta-analysis of variants in the GABAA receptor genes (GABRB2, GABRA6, GABRA1, and GABRG2 on chromosome 5q and GABRA2 on chromosome 4p12) using genotype data from 4739 cases of alcohol, opioid, or methamphetamine dependence and 4924 controls. Then, we combined the data from candidate gene association studies in the literature with two alcohol dependence (AD) samples, including 1691 cases and 1712 controls from the Study of Addiction: Genetics and Environment (SAGE), and 2644 cases and 494 controls from our own study. Using a Bonferroni-corrected threshold of 0.007, we found strong associations between GABRA2 and AD (P = 9 x 10^-6 and odds ratio (OR) 95% confidence interval (CI) = 1.27 (1.15, 1.4) for rs567926, P = 4 x 10^-5 and OR = 1.21 (1.1, 1.32) for rs279858), and between GABRG2 and both dependence on alcohol and dependence on heroin (P = 0.0005 and OR = 1.22 (1.09, 1.37) for rs21 1014). Significant association was also observed between GABRA2 rs3291951 and AD. The GABRA2 rs279858 association was observed in the SAGE data sets with a combined P of 9 x 10^-6 (OR = 1.17(1.09, 1.26)). When all of these data sets, including our samples, were meta-analyzed, associations of both GABRA2 single-nucleotide polymorphisms remained (for rs567926, P = 7 x 10^-5 (OR = 1.18(1.09,
1.29)) in all the studies, and P = 8 x 10-6 (OR = 1.25 (1.13, 1.38)) in subjects of European ancestry and for rs279858, P = 5 x 10-6 (OR = 1.18 (1.1, 1.26)) in subjects of European ancestry. Findings from this extensive meta-analysis of five GABAA receptor genes and substance abuse support their involvement (with the best evidence for GABRA2) in the pathogenesis of AD. Further replications with larger samples are warranted. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcohol Abuse
*Gamma Aminobutyric Acid
*Neurotransmitters
Genes
Genetics
Polymorphism

Source: PsycINFO

Full Text: Available from Nature Publishing Group NHS Pilot 2014 (NESLi2) in Neuropsychopharmacology; Note: ; Collection notes: Academic-License

83. Abnormal brain activity during a reward and loss task in opiate-dependent patients receiving methadone maintenance therapy.

Citation: Neuropsychopharmacology, March 2014, vol./is. 39/4(885-894), 0893-133X,1740-634X (Mar 2014)

Author(s): Gradin, Victoria B; Baldacchino, Alex; Balfour, David; Matthews, Keith; Steele, J. Douglas

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Language: English

Abstract:
A core feature of human drug dependency is persistence in seeking and using drugs at the expense of other life goals. It has been hypothesized that addiction is associated with overvaluation of drug-related rewards and undervaluation of natural, nondrug-related rewards. Humans additionally tend to persist in using drugs despite adverse consequences. This suggests that the processing of both rewarding and aversive information may be abnormal in addictions. We used fMRJ to examine neural responses to reward and loss events in opiate-dependent patients receiving methadone maintenance treatment (MMT, n = 30) and healthy controls (n = 23) using nondrug-related stimuli. Half of the patients were scanned after/before daily methadone intake (ADM/BDM patient groups). During reward trials, patients as a whole exhibited decreased neural discrimination between rewarding and nonrewarding outcomes in the dorsal caudate. Patients also showed reduced neural discrimination in the ventral striatum with regard to aversive and nonaversive outcomes and failed to encode successful loss avoidance as a reward signal in the ventral striatum. Patients also showed decreased insula activation during the anticipation/decision phase of loss events. ADM patients exhibited increased loss signals in the midbrain/parahippocampal gyrus, possibly related to a disinhibition of dopamine neurons. This study suggests that patients with opiate dependency on MMT exhibit abnormal brain activations to nondrug-related rewarding and loss events. Our findings add support to proposals that treatments for opiate addiction should aim to
increase the reward value of nondrug-related rewarding events and highlight the importance of potential abnormalities in aversive information processing. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Dependency
*Methadone Maintenance
*Neural Pathways
Automated Information Processing
Mesencephalon
Opines

Source: PsycINFO

Full Text: Available from Nature Publishing Group NHS Pilot 2014 (NESLi2) in Neuropsychopharmacology; Note: ; Collection notes: Academic-License

84. The oxytocin analogue carbetocin prevents emotional impairment and stress-induced reinstatement of opioid-seeking in morphine-abstinent mice.

Citation: Neuropsychopharmacology, March 2014, vol./is. 39/4(855-865), 0893-133X;1740-634X (Mar 2014)

Author(s): Zanos, Panos; Georgiou, Polymnia; Wright, Sherie R; Hourani, Susanna M; Kitchen, Ian; Winsky-Sommerer, Raphaelle; Bailey, Alexis

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Language: English

Abstract: The main challenge in treating opioid addicts is to maintain abstinence due to the affective consequences associated with withdrawal which may trigger relapse. Emerging evidence suggests a role of the neurohypophysial peptide oxytocin (OT) in the modulation of mood disorders as well as drug addiction. However, its involvement in the emotional consequences of drug abstinence remains unclear. We investigated the effect of 7-day opioid abstinence on the oxytocinergic system and assessed the effect of the OT analogue carbetocin (CBT) on the emotional consequences of opioid abstinence, as well as relapse. Male C57BL/6J mice were treated with a chronic escalating-dose morphine regimen (20-100 mg/kg/day, i.p.). Seven days withdrawal from this administration paradigm induced a decrease of hypothalamic OT levels and a concomitant increase of
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oxytocin receptor (OTR.) binding in the lateral septum and amygdala. Although no physical withdrawal symptoms or alterations in the plasma corticosterone levels were observed after 7 days of abstinence, mice exhibited increased anxiety-like and depressive-like behaviors and impaired sociability. CBT (6.4 mg/kg, i.p.) attenuated the observed negative emotional consequences of opioid withdrawal. Furthermore, in the conditioned place preference paradigm with 10 mg/kg morphine conditioning, CBT (6.4 mg/kg, i.p.) was able to prevent the stress-induced reinstatement to morphine-seeking following extinction. Overall, our results suggest that alterations of the oxytocinergic system contribute to the mechanisms underlying anxiety, depression, and social deficits observed during opioid abstinence. This study also highlights the oxytocinergic system as a target for developing pharmacotherapy for the treatment of emotional impairment associated with abstinence and thereby prevention of relapse. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abstinence
*Morphine
*Oxytocin
*Reinstatement
Drug Therapy
Mice

Source: PsycINFO

Full Text: Available from Nature Publishing Group NHS Pilot 2014 (NESLi2) in Neuropsychopharmacology; Note: ; Collection notes: Academic-License

85. Dysregulation of dopamine and glutamate release in the prefrontal cortex and nucleus accumbens following methamphetamine self-administration and during reinstatement in rats.

Citation: Neuropsychopharmacology, March 2014, vol./is. 39/4(811-822), 0893-133X;1740-634X (Mar 2014)

Author(s): Parsegian, Aram; See, Ronald E

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Language: English

Abstract: Methamphetamine (meth) addicts often exhibit enduring cognitive and neural deficits that likely contribute to persistent drug seeking and the high rates of relapse. These deficits may be related to changes in the prefrontal cortex (PFC) and its glutamatergic projections to the nucleus accumbens (NAc). Here, we performed in vivo microdialysis in the PFC and NAc in rats following either meth self-administration or yoked-saline control histories to assess baseline glutamate (GLU) levels, or reinstatement-evoked GLU and dopamine (DA) efflux in both regions simultaneously under cue-induced, meth-primed, or combined cues + meth reinstatement conditions. Our results show that meth self-administration (I) reduced basal GLU levels in both the dmPFC and NAc, (2) concurrently increased dmPFC and NAc GLU efflux during reinstatement, and (3) increased DA efflux in the dmPFC, but not in the NAc, under all reinstatement conditions when compared with yoked-saline controls. These data demonstrate for the first time that a history of psychostimulant self-administration alters GLU homeostasis not only in the NAc, but also in the dmPFC, its primary GLU projection source. Furthermore, combined cues + meth-primed reinstatement conditions produced the most pronounced increases in mPFC and NAc extracellular GLU, suggesting that the cue and meth prime conditions are additive in promoting reinstatement. Finally, increased efflux of DA in the dmPFC, but not in the NAc, across reinstatement conditions suggests that DA release in the dmPFC...
may be an important mediator of drug seeking initiated by multiple relapse triggers.
(PSYcINFO Database Record (c) 2014 APA, all rights reserved) (Journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Dopamine
*Methamphetamine
*Drug Seeking
*Reinstatement
Nucleus Accumbens
Prefrontal Cortex
Rats

Source: PsyCINFO

Full Text: Available from Nature Publishing Group NHS Pilot 2014 (NESLi2) in Neuropsychopharmacology; Note: ; Collection notes: Academic-License

86. Acamprosate produces its anti-relapse effects via calcium.

Citation: Neuropsychopharmacology, March 2014, vol./is. 39/4(783-791), 0893-133X, 1740-634X (Mar 2014)

Author(s): Spanagel, Rainer; Vengeliene, Valentina; Jandeleit, Bernd; Fischer, Wolf-Nicolas; Grindstaff, Kent; Zhang, Xuexiang; Gallop, Mark A; Krstev, Elena V; Lawrence, Andrew J; Kiefer, Falk

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Language: English

Abstract: Alcoholism is one of the most prevalent neuropsychiatric diseases, having an enormous health and socioeconomic impact. Along with a few other medications, acamprosate (Campral-calcium-bis (N-acetylhomotaurinate)) is clinically used in many countries for relapse prevention. Although there is accumulated evidence suggesting that acamprosate interferes with the glutamate system, the molecular mode of action still remains undefined. Here we show that acamprosate does not interact with proposed glutamate receptor mechanisms. In particular, acamprosate does not interact with NMDA receptors or metabotropic glutamate receptor group I. In three different preclinical animal models of either excessive alcohol drinking, alcohol-seeking, or relapse-like drinking behavior, we demonstrate that N-acetylhomotaurinate by itself is not an active psychotropic molecule. Hence, the sodium salt of N-acetylhomotaurinate (i) is ineffective in alcohol-preferring rats to reduce operant responding for ethanol, (ii) is ineffective in alcohol-seeking rats in a cue-induced reinstatement paradigm, (iii) and is ineffective in rats with an alcohol deprivation effect. Surprisingly, calcium salts produce acamprosate-like effects in all three animal models. We conclude that calcium is the active moiety of acamprosate. Indeed, when translating these findings to the human situation, we found that patients with high plasma calcium levels due to acamprosate treatment showed better primary efficacy parameters such as time to relapse and cumulative abstinence. We conclude that N-acetylhomotaurinate is a biologically inactive
molecule and that the effects of acamprosate described in more than 450 published original investigations and clinical trials and 1.5 million treated patients can possibly be attributed to calcium. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

87. Acamprosate: An alcoholism treatment that may not be what we thought.

Citation: Neuropsychopharmacology, March 2014, vol./is. 39/4(781-782), 0893-133X;1740-634X (Mar 2014)

Author(s): Heilig, Markus

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Institution: Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, National Institutes of Health, Bethesda, MD, US

Language: English

Abstract: Comments on an article by Rainer Spanage et al. (see record 2014-06722-002). Spanage et al. do just that, with regard to the FDA approved alcoholism medication acamprosate and its mechanism of action. The paper presents multiple lines of evidence that the reason it has been difficult to pin down the molecular site of acamprosate action may simply be because it does not exist. Instead, the authors propose that the activity attributed to acamprosate has all along reflected actions of the Ca++ it carries. The authors first thoroughly excluded agonist as well as antagonist activity of acamprosate at the glycine or glutamate sites of the NMDA receptor, respectively, as well as at the mGluR5 receptor. (PsycINFO Database Record (c) 2014 APA, all rights reserved)


Citation: Journal of Addiction Medicine, January 2014, vol./is. 8/1(72), 1932-0620;1935-3227 (Jan-Feb 2014)

Author(s): Earley, Paul H; Finver, Torin
Reports an error in "Addiction to propofol: A study of 22 treatment cases" by Paul H. Earley and Torin Finver (Journal of Addiction Medicine, 2013[May-Jun], Vol 7[3], 169-176). The corresponding author amended the disclosure that appeared in the original article. The amended disclosure is provided in the erratum. (The following abstract of the original article appeared in record 2013-22062-003). Objective: To review and report the history and clinical presentation of a cohort of health care professionals (HCPs) who have abused the drug propofol. Methods: The authors queried a clinical database (the HCP Database) that contained information about HCPs treated at a large addiction center between 1990 and 2010. Patients who reported propofol use were removed from the HCP Database and placed in a second database referred to herein as the Propofol Database. The medical records of each of the cases in the Propofol Database were pulled and carefully reviewed; a clinical case history of each case was prepared. The Propofol Database was expanded by this chart review, adding demographics, drugs used, course of substance use, other clinical history, presenting signs, diagnoses, and comorbid conditions. At this point, the case histories and databases and were anonymized. When variables were present in both data sets, significance was tested between the HCP Database and the Propofol Database. When comparable data were not present in the HCP Database, the authors reported simple percentages within the Propofol Database. This study focused on gender, medical education and specialty, drugs used, course of illness, and comorbid conditions. Results: Compared with the composite treatment population of HCPs during the same time, records showed that the propofol group was more likely to work in the operating theater, be female, and have training as an anesthesiologist or certified registered nurse anesthetist. Presentation into treatment from the propofol cohort more commonly occurred soon after beginning propofol use, often presenting in a dramatic fashion such as motor vehicle accidents or other physical injuries. When such injuries occurred, it was a direct result of acute propofol intoxication. The number of cases arriving in treatment increased over the duration of the study. The propofol group frequently suffered with a depressive illness and had a history of earlier life trauma. They had a high frequency of biological relatives with substance dependence. The most common subjective response as to why they began using propofol was to induce sleep. Most of these patients identified propofol as one of their preferred drugs of abuse. Conclusions: This study suggests the incidence and/or detection rate of propofol abuse in HCPs is increasing. Women and anesthesia personnel were overrepresented in the propofol cohort. Propofol-dependent patients commonly have a history of depression and earlier life trauma. A rapid downhill course and physical injury are common adverse effects of propofol abuse. The time from initial use to treatment entry is often contracted when compared with other drugs of abuse making the diagnosis of a true dependence disorder and disposition after treatment more difficult. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
### 89. Association of recent incarceration with traumatic injury, substance use-related health consequences, and health care utilization.

**Citation:** Journal of Addiction Medicine, January 2014, vol./is. 8/1(66-72), 1932-0620;1935-3227 (Jan-Feb 2014)

**Author(s):** Redmond, Nicole; Hicks, LeRoi S; Cheng, Debbie M; Allensworth-Davies, Donald; Winter, Michael R; Samet, Jeffrey H; Saitz, Richard

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**Language:** English

**Abstract:**

Objective: The higher risk of death among recently released inmates relative to the general population may be because of the higher prevalence of substance dependence among inmates or an independent effect of incarceration. We explored the effects of recent incarceration on health outcomes that may be intermediate markers for mortality. Methods: Longitudinal multivariable regression analyses were conducted on interview data (baseline, 3-, 6-, and 12-month follow-up) from alcohol- and/or drug-dependent individuals (n = 553) participating in a randomized clinical trial to test the effectiveness of chronic disease management for substance dependence in primary care. The main independent variable was recent incarceration (spending >1 night in jail or prison in the past 3 months). The 3 main outcomes of this study were any traumatic injury, substance use-related health consequences, and health care utilization-defined as hospitalization (excluding addiction treatment or detoxification) and/or emergency department visit. Results: Recent incarceration was not significantly associated with traumatic injury (adjusted odds ratio [AOR] = 0.98; 95% confidence interval [CI]: 0.65-1.49) or health care utilization (AOR = 0.88; 95% CI: 0.64-1.20). However, recent incarceration was associated with higher odds for substance use-related health consequences (AOR = 1.42; 95% CI: 1.02-1.98). Conclusions: Among people with alcohol and/or drug dependence, recent incarceration was significantly associated with substance use-related health consequences but not injury or health care utilization after adjustment for covariates. These findings suggest that substance use-related health consequences may be part of the explanation for the increased risk of death faced by former inmates. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: Unauthorized reproduction of this article is prohibited.; HOLDER: American Society of Addiction Medicine; YEAR: 2014

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

**Subject Headings:** *Drug Abuse*  
*Epidemiology*  
*Health Care Utilization*  
*Incarceration*  
*Injuries*

**Source:** PsycINFO

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### 90. Organizational factors as predictors of tobacco cessation pharmacotherapy adoption in addiction treatment programs.

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**Page 73**
Citation: Journal of Addiction Medicine, January 2014, vol./is. 8/1(59-65), 1932-0620;1935-3227 (Jan-Feb 2014)

Author(s): Muilenburg, Jessica L; Laschober, Tanja C; Eby, Lillian T

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Language: English

Abstract: Objectives: This study investigated 3 organizational factors (ie, counseling staff clinical skills, absence of treatment program obstacles, and policy-related incentives) as predictors of tobacco cessation pharmacotherapy (TCP) adoption (comprised of the 9 available TCPs) in addiction treatment programs using the innovation implementation effectiveness framework. Methods: Data were obtained in 2010 from a random sample of 1006 addiction treatment program administrators located across the United States using structured telephone interviews. Results: According to program administrator reports, TCP is adopted in approximately 30% of treatment programs. Negative binomial regression results show that fewer treatment program obstacles and more policy-related incentives are related to greater adoption of TCP. Counter to prediction, clinical skills are unrelated to TCP adoption. Conclusions: Our findings suggest that organizational factors, on the basis of established theoretical frameworks, merit further examination as facilitators of the adoption of diverse TCP in addiction treatment programs. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Conference Information: Addiction Health Services Research conference. 2013. A revised version of this article was presented as part of a symposium at the aforementioned conference.

Country of Publication: STATEMENT: Unauthorized reproduction of this article is prohibited.; HOLDER: American Society of Addiction Medicine; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Rehabilitation
*Drug Therapy
*Smoking Cessation
*Tobacco Smoking
Innovation
Organizational Characteristics

Source: PsycINFO

91. Comparison of health service use among veterans with methamphetamine versus alcohol use disorders.

Citation: Journal of Addiction Medicine, January 2014, vol./is. 8/1(47-52), 1932-0620;1935-3227 (Jan-Feb 2014)

Author(s): Morasco, Benjamin J; O'Neil, Maya E; Duckart, Jonathan P; Ganzini, Linda

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Language: English

Abstract: Objectives: Methamphetamine use disorders (MUD) are associated with severe health effects and psychiatric comorbidities, but little is known about the health care utilization of patients with MUD. The goal of this study was to describe health service use among
veterans with MUD relative to a group of veterans with an alcohol use disorder (AUD).

Methods: Using Veterans Affairs (VA) administrative data, we identified 718 patients who were diagnosed with MUD and had confirmatory drug testing. Data were compared with those of 744 patients who had diagnoses of an AUD also with confirmatory testing. We examined diagnoses and medical utilization for 5 years after their index date. Results: Patients with MUD and laboratory-confirmed recent use were younger and more likely to be diagnosed with a mood disorder, posttraumatic stress disorder, and a psychotic-spectrum disorder (all P values < 0.05). After statistical controls, patients with MUD were more likely to have an inpatient hospitalization (80% vs 70%, odds ratio [OR] = 1.8; 95% confidence interval [CI] = 1.4-2.3), discharge from an inpatient admission against medical advice (23.4% vs 8.3%, OR = 2.6, 95% CI = 1.9-3.7), receive care at 3 or more VA medical centers (13.1% vs 5.4%, OR = 2.3, 95% CI = 1.5-3.5), have a behavioral flag in the medical record (5.6% vs 1.1%, OR = 4.6, 95% CI=2.1-10.6), and have more total missed appointments in the 5-year study period (M = 33.1 vs M = 23.5, P < 0.001). Conclusions: Among veterans with substance use disorders, those with MUD and laboratory-confirmed recent use have additional behavioral, health care utilization, and psychiatric characteristics that need to be considered in developing programs of care. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: Unauthorized reproduction of this article is prohibited.; HOLDER: American Society of Addiction Medicine; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcohol Abuse *Drug Abuse *Health Care Services *Health Care Utilization *Methamphetamine Comorbidity Mental Disorders Morbidity

Source: PsycINFO

92. Energy drinks, soft drinks, and substance use among United States secondary school students.

Citation: Journal of Addiction Medicine, January 2014, vol./is. 8/1(6-13), 1932-0620;1935-3227 (Jan-Feb 2014)

Author(s): Terry-McElrath, Yvonne M; O'Malley, Patrick M; Johnston, Lloyd D

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Language: English

Abstract: Objectives: Examine energy drink/shot and regular and diet soft drink use among United States secondary school students in 2010-2011, and associations between such use and substance use. Methods: We used self-reported data from cross-sectional surveys of nationally representative samples of 8th-, 10th-, and 12th-grade students and conducted multivariate analyses examining associations between beverage and substance use, controlling for individual and school characteristics. Results: Approximately 30% of students reported consuming energy drinks or shots; more than 40% reported daily regular soft drink use, and about 20% reported daily diet soft drink use. Beverage consumption was strongly and positively associated with past 30-day alcohol, cigarette, and illicit drug use. The observed associations between energy drinks and substance use were significantly stronger than those between regular or diet soft drinks and substance use. Conclusions: This correlational study indicates that adolescent consumption of energy drinks/shots is widespread and that energy drink users report heightened risk for substance use. This study does not establish causation between the behaviors. Education for parents and prevention efforts among adolescents should include education on the
masking effects of caffeine in energy drinks on alcohol- and other substance-related impairments, and recognition that some groups (such as high sensation-seeking youth) may be particularly likely to consume energy drinks and to be substance users.

(PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

93. Prescribing thiamine to inpatients with alcohol use disorders: How well are we doing?

Objectives: Thiamine deficiency is a potentially dangerous sequela of alcohol use disorders (AUDs). European and British guidelines recommend administering high-dose parenteral thiamine 3 times daily to avoid consequences of thiamine deficiency such as Wernicke-Korsakoff syndrome (WKS), and suggest that traditional thiamine dosages are likely inadequate. Research into thiamine and WKS has lagged in the United States, and to date, no study has examined how thiamine is prescribed to inpatients with AUD in an American hospital. Methods: Thiamine prescribing data (amount, route, and frequency schedule) were collected for inpatients at a large, American, teaching hospital, who were referred to the addiction psychiatry service for AUD. Data were analyzed using Statistical Product and Service Solutions. Results: A total of 217 inpatients with AUD were included. A substantial percentage of them were not prescribed thiamine. Of those who were prescribed thiamine, nearly all were prescribed oral thiamine at traditional dosages, including high-risk patients. Conclusions: This is the first study to report on the prescribing of thiamine to inpatients with AUD at an American teaching hospital. It serves to confirm what many already suspected: that more education is needed to improve the diagnostic challenges of WKS, the detection of risk factors for WKS, and the adequate dosing of thiamine for prevention and treatment of WKS. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
84. From "at-risk" youth to wounded healer: A longitudinal study of two pre-service teachers.

Citation: International Journal of Qualitative Studies in Education, March 2014, vol./is. 27/3(377-396), 0951-8398;1366-5898 (Mar 2014)

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Language: English

Abstract: The present article describes a two-year longitudinal study of two "at-risk" US teenagers who successfully transformed their unusually challenging high school experiences into motivation to become classroom teachers. Frank's adolescence was characterized by addiction and defiance. He spent his sophomore year in a locked, residential treatment center, and his junior and senior years in a therapeutic boarding school. Marie spent 19 months in a residential school for adolescents with substance abuse problems, becoming pregnant the following year. At age 22 both Frank and Marie graduated summa cum laude (grade point average of 3.9 or greater) from the same nationally recognized teacher preparation program. The archetype of the "wounded healer" is used to interpret their experiences. Results suggest (1) memories of personal adversity in school may have a profound impact on an individual's orientation to teaching, and (2) these memories can be used advantageously by pre-service teachers. Implications for teacher educators are discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2013

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Preservice Teachers  
*Teacher Education  
At Risk Populations  
High School Education  
Resilience (Psychological)

Source: PsycINFO

95. Offenders as victims: Post-traumatic stress disorder and substance use disorder among male prisoners.

Citation: Journal of Forensic Psychiatry & Psychology, January 2014, vol./is. 25/1(44-60), 1478-9949;1478-9957 (Jan 2014)

Author(s): Sindicich, Natasha; Mills, Katherine L; Barrett, Emma L; Indig, Devon; Sunjic, Sandra; Sannibale, Claudia; Rosenfeld, Julia; Najavits, Lisa M

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Language: English
Abstract:

Background: Comorbid substance use disorder(s) and post-traumatic stress disorder (SUD-PTSD) is common among prisoners and linked to an increased risk of criminal recidivism; however, little is known about the characteristics of prisoners with this comorbidity. Aim: This study provides a preliminary examination of the clinical and criminal profile of male inmates with symptoms of SUD-PTSD, and examines whether this profile differs according to whether a person has experienced a trauma while in prison. Methods: Thirty male inmates from two correctional centres in Sydney, Australia, were recruited and assessed using a structured interview. Results: The sample reported extensive criminal, substance use and trauma histories. A history of substance dependence was almost universal (90%) and 56.7% met diagnostic criteria for PTSD with the remainder experiencing sub-threshold symptoms. Forty-three per cent reported a traumatic event while in prison. Those who had experienced trauma in prison, compared to those who had not, were more likely to nominate heroin as their main drug of concern and to be receiving drug treatment in prison. There was also a trend toward inmates who had experienced a trauma in prison being more likely than inmates who had no prison trauma to have experienced a physical assault. Conclusion: Male prisoners with SUD-PTSD are a high-needs group yet treatment responses are poor. Further research examining treatment options for this comorbidity may improve prisoner well-being and reduce recidivism. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
tools in male offenders. The diagnostic accuracy rate was 76% for mental health, 63% for physical health, 83% for substance misuse and 53% for neurodisability when compared against reference standard assessment tools. The introduction of the CHAT offers the opportunity to enhance existing reception screening practices and create an integrated approach to the assessment of health needs across the secure estate. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Juvenile Delinquency
*Psychometrics
*Test Reliability
*Test Validity
Drug Abuse
Health
Source: PsycINFO

97. Variations in primary care prescribing: Lessons to be learnt for GP commissioners.

Citation: Primary Health Care Research and Development, January 2014, vol./is. 15/1(111-116), 1463-4236;1477-1128 (Jan 2014)
Author(s): Houten, Rachel; Wailoo, Allan; Jonsson, Pall; McLeod, Claire
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Language: English
Abstract: The quality and quantity of primary care prescribing represents a fundamental determinant of the clinical and cost-effectiveness of the UK NHS. The aim of this study was to determine the 'supply' factors that affect primary care prescribing, controlling for 'demand' factors and consider the implications for clinical commissioning groups (CCGs). A detailed regression analysis was undertaken of prescribing in six therapeutic areas to determine differences in prescribing across primary care trusts (PCTs) in England. Results indicate that there are large unexplained variations in primary care prescribing. With the disbanding of the PCTs, and budgets moving to general practitioners (GPs), the role of efficiently and effectively managing prescribing will fall to GP commissioners. Therefore, mechanisms need to be put in place now to ensure that GPs are able to monitor their prescribing and reduce unnecessary drug usage, and further research into the reasons for variations in prescribing needs to be conducted at the CCG level. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Cambridge University Press; YEAR: 2013
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Costs and Cost Analysis
*Health Care Costs
*Primary Health Care
Drug Usage
General Practitioners
Statistical Regression
Source: PsycINFO

Citation: British Journal of Criminology, March 2014, vol./is. 54/2(281-297), 0007-0955;1464-3529 (Mar 2014)

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Language: English

Abstract: Incorporating analysis of data collected from a small sample of interviews within drug-treatment settings, the aim of this article is to critically consider the purpose and scope of adolescent drug treatment with a particular focus on the drugs-crime nexus. A central question is whether treatment can be understood according to the 'rise of risk' in advanced liberal democracies, and whether this corresponds to the proposed rupture with 'welfarist' approaches to youth justice policy. The findings suggest, in line with other research, that any such rupture may have been overstated. They also suggest that some drug-treatment research has tended towards sweeping accounts of policy changes, when the specificities of age, drug type and history demand more nuanced explanation, as some authors have already argued. Finally, the analysis suggests there should be concern about the extent of 'net-widening' within the youth drug-treatment system. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: Published by Oxford University Press on behalf of the Centre for Crime and Justice Studies (ISTD). All rights reserved.; HOLDER: The Author; YEAR: 2013

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Cannabis
*Drug Abuse
*Drug Rehabilitation
*Marijuana Usage
*Predelinquent Youth
*Welfare Services (Government)

Source: PsycINFO

99. Preliminary findings of the effects of rivastigmine, an acetylcholinesterase inhibitor, on working memory in cocaine-dependent volunteers.

Citation: Progress in Neuro-Psychopharmacology & Biological Psychiatry, April 2014, vol./is. 50/(137-142), 0278-5846 (Apr 3, 2014)

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Language: English

Abstract: Long-term cocaine use is a risk factor for the onset of neurocognitive impairment. This study sought to determine whether the cholinesterase inhibitor rivastigmine could improve neurocognitive performance in cocaine-dependent individuals.
Cocaine-dependent individuals who were not seeking treatment at the time of enrollment in the study were randomly assigned to receive placebo (n=16), rivastigmine 3mg (n=13), or rivastigmine 6mg (n=12). The baseline neurocognitive assessment, which included measures of attention/information processing (as measured by the Continuous Performance Task-II (CPT-II)), verbal learning/episodic memory (as measured by the Hopkins Verbal Learning Test-Revised (HVLT-R)), and working memory (as measured by the Dual N-Back Task), was conducted prior to the administration of study medication (Day 0). The follow-up assessment was conducted on Day 8 after the participants had received rivastigmine or placebo for 7 days (Day 2-8). Rivastigmine administration significantly improved performance on one measure of working memory span (mean n-back span). This study provides additional data showing that cocaine-associated neurocognitive impairment, specifically working memory deficits, can be remediated, at least to some degree. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
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in 296 female heroin-dependent patients (including 61 patients with BPD and 235 without BPD) and 101 normal females by genotypes, alleles, and interaction between genes. Results: Female heroin-dependent subjects with BPD have lower frequency of the high activity allele (L: 4 repeats (4R)) of MAOA-LPR than those female heroin-dependent subjects without BPD, and have higher 5-HTTVNTR 10R/10R genotype frequency than normal female controls, with adjusted P-value<0.05 (after adjusted for multiple testing by 1000-fold permutation tests) respectively. By MDR (Multifactor Dimensionality Reduction) analyses, the interactive effects between MAOA-LPR and 5-HTTVNTR, and among MAOA-LPR, 5-HTTVNTR and rs6311 were close to the significance level (P=0.05) in predicting the risk of co-morbidity of BPD and heroin dependence relative to normal female controls, with 1000-fold permutation testing P-value<0.06 however >0.05 respectively. Conclusion: 5-HTTVNTR and MAOA-LPR may have independent predictive effects on co-morbid BPD in female heroin-dependent patients; the gene-gene interactions between MAOA-LPR and 5-HTTVNTR, and among MAOA-LPR, 5-HTTVNTR and rs6311 might also be involved in the etiology of this co-morbidity. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2013

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Borderline Personality Disorder
*Heroin Addiction
*Human Females
Genetics
Heroin
Polymorphism
Morbidity

Source: PsycINFO

Full Text: Available from Elsevier in Progress in Neuro-Psychopharmacology and Biological Psychiatry; Note: ; Collection notes: Academic-License. Please note search only titles within the trial dates: 2010 - to-date

101. Where there's smoke, there's fire: The brain reactivity of chronic smokers when exposed to the negative value of smoking.

Citation: Progress in Neuro-Psychopharmacology & Biological Psychiatry, April 2014, vol./is. 50/(66-73), 0278-5846 (Apr 3, 2014)

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Language: English

Abstract: Rational: The addictive nature of smoking is characterized by responses to cigarette stimuli that significantly impede smoking cessation efforts. Studies have shown that smokers are roused by appetitive smoking-related stimuli, and their consumption tends to be unaffected by the negative value of smoking. Purpose: Using functional magnetic resonance imaging, the goal of this study was two-fold: to examine the brain reactivity of chronic smokers when processing the negative value of smoking using aversive smoking-related cues; to further characterize this response by comparing the latter to the processing of aversive nonsmoking-related and appetitive smoking-related cues. Method:
Thirty chronic smokers passively viewed aversive smoking-related, aversive nonsmoking-related, appetitive smoking-related and neutral images presented in a block design while being scanned. Results: Aversive smoking-related stimuli elicited significantly greater activation in the medial prefrontal cortex, amygdala, inferior frontal gyrus and lateral orbitofrontal cortex than neutral stimuli. Aversive smoking-related stimuli elicited lower activation in the parahippocampal gyrus, insula and inferior frontal gyrus compared to the aversive nonsmoking-related condition, as well as lower activation in the posterior cingulate, precuneus and medial prefrontal cortices compared to appetitive smoking-related cues. Conclusion: The brain activation pattern observed suggests that chronic smokers experience an aversive response when processing aversive smoking-related stimuli, however we argue that the latter triggers a weaker negative emotional and driving response than the aversive non-smoking-related and appetitive smoking-related cues respectively. These fMRI results highlight potentially important processes underlying the insensitivity to the negative value of smoking, an important characteristic of addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
alone. In neurons, adaptations in cell signaling cascades develop following opioid actions at the mu opioid receptor (MOR). A novel putative target for intervention involves interacting proteins that may regulate trafficking of MOR. Morphine has been shown to induce a re-distribution of a MOR-interacting protein Wntless (WLS, a transport molecule necessary for secretion of neurotrophic Wnt proteins), from cytoplasmic to membrane compartments in rat striatal neurons. Given its opiate-sensitivity and its well-characterized molecular and cellular adaptations to morphine exposure, we investigated the anatomical distribution of WLS and MOR in the rat locus coeruleus (LC)-norepinephrine (NE) system. Dual immunofluorescence microscopy was used to test the hypothesis that WLS is localized to noradrenergic neurons of the LC and that WLS and MOR co-exist in common LC somatodendritic processes, providing an anatomical substrate for their putative interactions. We also hypothesized that morphine would influence WLS distribution in the LC. Rats received saline, morphine or the opiate agonist [d-Ala2, N-Me-Phe4, Gly-ol5]-enkephalin (DAMGO), and tissue sections through the LC were processed for immunogold-silver detection of WLS and MOR. Statistical analysis showed a significant re-distribution of WLS to the plasma membrane following morphine treatment in addition to an increase in the proximity of gold-silver labels for MOR and WLS. Following DAMGO treatment, MOR and WLS were predominantly localized within the cytoplasmic compartment when compared to morphine and control. In a separate cohort of rats, brains were obtained from saline-treated or heroin self-administering male rats for pulldown co-immunoprecipitation studies. Results showed an increased association of WLS and MOR following heroin exposure. As the LC-NE system is important for cognition as well as decisions underlying substance abuse, adaptations in WLS trafficking and expression may play a role in modulating MOR function in the LC and contribute to the negative sequelae of opiate exposure on executive function. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
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Language: English

Abstract: The primary objective of this study was to determine the safety of lofexidine, an 2 
receptor agonist, alone and concurrent with cocaine in non-treatment seeking 
cocaine-dependent or cocaine-abusing participants. After screening, eligible participants 
received double-blind, randomized infusions of saline and 20mg of cocaine on Day 1, and 
saline and 40mg of cocaine on Day 2. Subjects were randomized and started receiving 
daily administration of placebo (N=4) or lofexidine on Day 3 and continued on this 
schedule until Day 7. Two dosing regimens for lofexedine were investigated: 0.8 QID 
(N=3) and 0.2mg QID (N=11). On Days 6 and 7, subjects received double-blind infusions 
of saline and 20mg of cocaine on Day 6, and saline and 40mg of cocaine on Day 7. The 
data reveal a notable incidence of hemodynamic-related AEs over the course of the study. 
Two of the three participants at the 0.8mg dose level discontinued, and five of 11 
participants at the 0.2mg dose level were withdrawn (or voluntarily discontinued) after 
hemodynamic AEs. Subjective effects and cardiovascular data were derived from all 
participants who were eligible to receive infusions (i.e., did not meet stopping criteria) on 
Days 6 and 7 (6 received lofexidine 0.2mg, QID and 4 received placebo, QID). As 
expected, cocaine significantly increased heart rate and blood pressure, as well as several 
positive subjective effects. There was a trend for lofexidine to decrease cocaine-induced 
cardiovascular changes and cocaine-induced ratings for "any drug effect", "good effects", 
and "desire cocaine", but sample size issues limit the conclusions that can be drawn. 
Despite the trends to reduce cocaine-induced subjective effects, cardiovascular AEs may 
limit future utility of lofexidine as a treatment for this population. (PsycINFO Database 
Record (c) 2014 APA, all rights reserved) (journal abstract)
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**Citation:** Progress in Neuro-Psychopharmacology & Biological Psychiatry, April 2014, vol./is. 50/(21-26), 0278-5846 (Apr 3, 2014)

**Author(s):** Lee, Jaewon; Hwang, Jae Yeon; Park, Su Mi; Jung, Hee Yeon; Choi, Sam-Wook; Kim, Dai Jin; Lee, Jun-Young; Choi, Jung-Seok

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**Language:** English

**Abstract:** Objective: Many researchers have reported a relationship between Internet addiction and depression. In the present study, we compared the resting-state quantitative electroencephalography (QEEG) activity of treatment-seeking patients with comorbid Internet addiction and depression with those of treatment-seeking patients with Internet addiction without depression, and healthy controls to investigate the neurobiological markers that differentiate pure Internet addiction from Internet addiction with comorbid depression. Method: Thirty-five patients diagnosed with Internet addiction and 34 age-, sex-, and IQ-matched healthy controls were enrolled in this study. Patients with Internet addiction were divided into two groups according to the presence (N =18) or absence (N =17) of depression. Resting-state, eye-closed QEEG was recorded, and the absolute and relative power of the brain were analyzed. Results: The Internet addiction group without depression had decreased absolute delta and beta powers in all brain regions, whereas the Internet addiction group with depression had increased relative theta and decreased relative alpha power in all regions. These neurophysiological changes were not related to clinical variables. Conclusion: The current findings reflect differential resting-state QEEG patterns between both groups of participants with Internet addiction and healthy controls and also suggest that decreased absolute delta and beta powers are neurobiological markers of Internet addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2013

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

**Subject Headings:** *Comorbidity*  
*Electroencephalography*  
*Internet Addiction*  
*Major Depression*  
*Internet*

**Source:** PsycINFO

**Full Text:** Available from Elsevier in *Progress in Neuro-Psychopharmacology and Biological Psychiatry*; Note: ; Collection notes: Academic-License. Please note search only titles within the trial dates: 2010 - to-date  
Available from Elsevier in *Progress in Neuro-Psychopharmacology and Biological Psychiatry*; Note: ; Collection notes: Academic-License. Please note search only titles within the trial dates: 2010 - to-date

105. Calming the tempest, bridging the gorge: Healing in couples ruptured by "sex addiction".

**Citation:** Sexual and Relationship Therapy, January 2014, vol./is. 29/1(76-86), 1468-1994;1468-1749 (Jan 2014)

**Author(s):** Cohn, Ruth
Frequently couples seek marital therapy for the painful impact of one partner's "sex addiction." Disagreement abounds in both the clinical world and the larger society, about what the designation "sex addiction" actually means. A variety of diagnostic categories are subsumed under it, creating confusion about both its causes and effective treatments. The current paper proposes precise definition and diagnostic language regarding a range of compulsive sexual behaviors. It maps a model for understanding and treating compulsive sexual activity in marital therapy in a stepwise sequence, beginning with careful history taking and diagnostics of both partners, identification of the mutually reinforcing relationship dynamics keeping destructive behaviors in play, processing of underlying psychological and developmental roots of such behaviors, cultivation of empathy and trust, and revitalizing of the couple's sexual relationship. The method is illustrated with a case history. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Sex addiction is a phenomenon that has a variety of names and even more meanings depending on who you talk to, and each of these interpretations impacts the clients who seek help. There are many different models of addiction, such as the biological, moral or social models that are often not useful when thinking about sex, but by adopting a comprehensive model for describing addiction, both clients and therapists can be helped to consider the multiple layers of compulsive sexual behaviour. Furthermore, to date there have been no models for assessment and treatment that incorporate attachment, trauma and the social context which can help therapists and clients identify and consider the most appropriate, and most urgent, therapeutic objectives. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
107. A family affair: Latinas' narratives of substance use and recovery.

**Citation:** Journal of Ethnic & Cultural Diversity in Social Work: Innovation in Theory, Research & Practice, January 2014, vol./is. 23/1(55-77), 1531-3204;1531-3212 (Jan 2014)

**Author(s):** Ayon, Cecilia; Carlson, Bonnie E

**Correspondence Address:** Ayon, Cecilia: School of Social Work, Arizona State University, 411 N. Central Avenue, Suite 800, Phoenix, AZ, US, 85004-0689, cecilia.ayon@asu.edu

**Institution:** Arizona State University, Phoenix, AZ, US; Arizona State University, Phoenix, AZ, US

**Language:** English

**Abstract:** The purpose of this study was to explore factors that influence Latinas' drug use and recovery process. Fourteen Latinas participated in in-depth interviews. Findings reveal that their families were at the heart of their stories, playing exacerbating or protective roles. Latinas whose family had a history of substance use encountered more challenges in their recovery process, as they had to break ties from unsupportive family members and had less support available, and were more likely to internalize negative stereotypes of Latinos as drug users. Latinas with no familial history of use received tremendous support (i.e., emotional, instrumental, and family members involved in treatment) from their family. They tended to challenge negative stereotypes of Latinos as drug users. Recommendations for improving services for this population include using peer mentoring groups, culturally grounded activities and interventions, and identifying supportive family and networks members to facilitate the recovery process. (PsycINFO Database Record (c) 2014 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*  
*Narratives*  
*Recovery (Disorders)*  
"*Latinos/Latinas*"  
Family Members  
Family History

**Source:** PsycINFO

108. Factor structure of the Compulsive Internet Use Scale.

**Citation:** Cyberpsychology, Behavior, and Social Networking, January 2014, vol./is. 17/1(46-51), 2152-2715;2152-2723 (Jan 2014)

**Author(s):** Guertler, Diana; Broda, Anja; Bischof, Anja; Kastirke, Nadin; Meerkerk, Gert-Jan; John, Ulrich; Meyer, Christian; Rumpf, Hans-Juergen

**Correspondence Address:** Guertler, Diana: University Medicine Greifswald, Institute of Epidemiology and Social Medicine, Walther-Rathenau-Strasse 48, Greifswald, Germany, D-17475, diana.guertler@uni-greifswald.de

**Institution:** University of Greifswald, Institute of Epidemiology and Social Medicine, Greifswald, Germany; University of Leipzig, Clinical Trial Center, Leipzig, Germany; University of Luebeck, Department of Psychiatry and Psychotherapy, Luebeck, Germany; University of Greifswald, Institute of Epidemiology and Social Medicine, Greifswald, Germany; IVO, Addiction Research Institute, Rotterdam, Netherlands; University of Greifswald, Institute
An important step in Internet addiction research is to develop standardized instruments for assessing Internet addiction-related symptoms. The Compulsive Internet Use Scale (CIUS) is a promising brief questionnaire. The aim of this study was to examine the factor structure of a German version of the CIUS with confirmatory factor analysis in a general population sample. In addition, the best fitting structure was tested for factorial invariance across sex, age, education level, and weekly Internet use. We used a weighted general population sample (N = 8,132) of 14-64 years olds spending at least 1 hour online for private purposes per typical working or weekend day. Findings include that a one-factor model was found to fit well. It was invariant across sex, age, education level, and weekly Internet use. The findings support the validity of the CIUS as a short screening instrument. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
110. Escapism among players of MMORPGs—Conceptual clarification, its relation to mental health factors, and development of a new measure.

Citation: Cyberpsychology, Behavior, and Social Networking, January 2014, vol./is. 17/1(19-25), 2152-2715;2152-2723 (Jan 2014)

Author(s): Hagstrom, David; Kaldo, Viktor

Correspondence Address: Kaldo, Vikt0r: Internetpsykiatrienheten, Karolinska Universitetssjukhuset Huddinge, M46, Stockholm, Sweden, SE-141 86, viktor.kaldo@ki.se

Institution: Department of Psychology, Uppsala University, Uppsala, Sweden; Department of Clinical Neuroscience, Karolinska Institutet, Stockholm, Sweden

Language: English

Abstract: Previous studies show that the concept of escapism needs to be clarified and that its relation to problematic online gaming and other factors needs further examination. This study uses well-established, basic learning theory to clarify the concept of escapism, and examines its relation to problematic gaming, psychological distress, and satisfaction with life among players of massively multiplayer online role-playing games (MMORPGs). MMORPG players (n = 201) answered an online questionnaire where these factors were measured and correlated with a previously developed scale on motivation to play (MTPI), including extra items to cover positive and negative aspects of escapism. Factor analysis and construct validation show that positive aspects of escapism are theoretically and empirically unstable and that escapism is best clarified as purely "negative escapism," corresponding to playing being negatively reinforced as a way of avoiding everyday hassles and distress. Negative escapism had a stronger relationship to symptoms of Internet addiction, psychological distress, and life satisfaction than other variables and other more positive motivations to play. Future studies should use the revised subscale for escapism (in the MTPI-R) presented in the present study, for example when screening for Internet addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

111. Former child soldiers' problems and needs: Congolese experiences.

Citation: Qualitative Health Research, January 2014, vol./is. 24/1(55-66), 1049-7323;1552-7557 (Jan 2014)

Author(s): Johannessen, Steinar; Holgersen, Helge

Correspondence Address: Johannessen, Steinar, Tors gate 3, Oslo, Norway, 0260, steinarjohannessen@hotmail.no

Institution: Oslo University Hospital, Department of Child and Adolescent Mental Health, Oslo South, Sondre Nordstrand Clinic, Oslo, Norway; Department of Clinical Psychology, University of Bergen, Bergen, Norway
With this article, we explore how staff working at transit centers and vocational training centers in the eastern Democratic Republic of the Congo experienced the problems and needs of former child soldiers. We argued that the staff's experience of the children's daily lives and their understanding of the sociocultural context of the conflict make their perspective a valuable source of information when trying to understand the phenomenon of child soldiering. Additionally, we reasoned that how the staff frame these children's problems influences how they attempt to aid the children. We conducted 11 semistructured interviews and analyzed these using a hermeneutical-phenomenological approach. We clustered our findings around six themes: unfavorable contextual factors, acting as if still in the army, addiction, symptoms of psychopathology, social rejection, and reintegration needs. The overarching message we observed was that the informants experienced that former child soldiers require help to be transformed into civilians who participate proactively in their society. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)


Country of Publication: HOLDER: The Author(s); YEAR: 2013
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Childhood Development
*Military Personnel
*Phenomenology
*Problem Solving
*Psychological Needs
Social Issues
Source: PsycINFO

112. The neurobiology of eating disorders.

Citation: Neurobiology of mental illness (4th ed.), 2013(1171-1185) (2013)
Author(s): Hildebrandt, Thomas B; Downey, Amanda
Institution: Department of Psychiatry, Icahn School of Medicine at Mount Sinai, New York, NY, US; Eating and Weight Disorders Program, Ichan School of Medicine at Mount Sinai, New York, NY, US
Language: English
Abstract: (from the chapter) This chapter discusses the neurobiology, sociocultural and personality factors of eating disorders, focusing primarily on anorexia nervosa and bulimia nervosa, while including binge eating disorder and food addiction. Anorexia nervosa (AN) is an illness that is not homogenous in presentation; rather it is diagnosed upon a range of disturbed behaviors and affective states that constitute the illness. The heterogenic nature of the diagnostic group complicates the process of identifying an underlying neurobiological model for the disease. There are four main factors that make identifying a singular neurobiological model difficult. First, there is more than one source of dysregulation present in the development and maintenance of AN. Predisposing factors that lead to extreme measures to lose weight will most likely be distinct from those that prevent weight restoration and maintenance of adequate caloric intake. Second, it is ethically and scientifically difficult to determine the degree to which systems of dysregulation are a consequence of malnutrition or rather an endophenotype inherent to the individual that predisposes her or him to the illness. Third, sociocultural factors that may play a role in the development of the disorder have often been used to explain the difference in prevalence rates of AN among men and women. No neurobiological basis for this disparity has been elucidated. Finally, the development of AN is correlated with specific temperaments and personality factors. This facet of the disorder makes strict correlation between neurobiology and the disorder complicated because the role of
temperament is highly complex and not unique to AN. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book  
**Subject Headings:**  
*Eating Disorders*  
*Neurobiology*  
*Personality Traits*  
*Sociocultural Factors*  
*Addiction*  
*Anorexia Nervosa*  
*Bulimia*  
*Binge Eating Disorder*  

**Source:** PsycINFO

113. Epidemiology of substance use disorders.

**Citation:** Neurobiology of mental illness (4th ed.), 2013(772-787) (2013)  
**Author(s):** Kandel, Denise B; Hu, Mei-Chen; Griesler, Pamela C  
**Institution:** Department of Psychiatry, College of Physicians and Surgeons, Columbia University, New York, NY, US; Department of Psychiatry, College of Physicians and Surgeons, Columbia University, New York, NY, US; Department of Psychiatry, College of Physicians and Surgeons, Columbia University, New York, NY, US  
**Language:** English  
**Abstract:**  
(from the chapter) The epidemiology of drug use in the general population includes two distinct streams of research. The more common stream measures consumption patterns by asking individuals whether they have ever used specific classes of drugs, and, if so, how frequently they have done so. The second stream, and one implemented more rarely, measures the extent of problematic drug use by asking individuals about behaviors and symptoms that meet criteria for a substance use disorder. In this chapter, we present data on the epidemiology and phenomenology of substance use disorders from comparative and developmental perspectives. We discuss six issues: The definition and measurement of substance use disorders and characteristics of existing epidemiological studies; The prevalence of substance use and substance use disorders for legal drugs (cigarettes, alcohol), illegal drugs (marijuana, cocaine), and non-medical use of prescribed psychoactive drugs in different studies among adults and adolescents; The prevalence of substance use disorders by age, gender, and race/ethnicity; The comorbidity of substance use disorders with other psychiatric disorders; Developmental stages of involvement in drugs; Adolescence as a critical exposure period. In this chapter, we present data on the epidemiology and phenomenology of substance use disorders from comparative and developmental perspectives. The data presented in the chapter are based on publications from these studies and secondary analyses of the data sets that we implemented to illustrate points for which the documentation was not available in published reports. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book  
**Subject Headings:**  
*Comorbidity*  
*Drug Abuse*  
*Epidemiology*  
*Adolescent Psychopathology*  
*Critical Period*  
*Developmental Stages*  
*Drug Usage*  

**Source:** PsycINFO

114. Pharmacotherapy of substance use disorders.

**Citation:** Neurobiology of mental illness (4th ed.), 2013(761-771) (2013)  
**Author(s):** Acri, Jane B; Skolnick, Phil
Evidence Services | library.nhs.uk

Institution: Division of Pharmacotherapies and Medical Consequences of Drug Abuse, National Institute on Drug Abuse, National Institutes of Heath, Bethesda, MD, US; Division of Pharmacotherapies and Medical Consequences of Drug Abuse, National Institute on Drug Abuse, National Institutes of Heath, Bethesda, MD, US

Language: English

Abstract: (from the chapter) This chapter discusses the pharmacotherapy of substance use disorders and the issues surrounding its availability. There has been a dramatic retreat from research and development of medications to treat psychiatric disorders over the past four to five years. Moreover, the development of pharmacotherapies to treat substance use disorders (SUDs) has traditionally lagged well behind efforts to develop novel medicines to treat other psychiatric disorders, including schizophrenia, depression, and anxiety. Thus, despite remarkable progress in our understanding of the neurobiological bases of drug abuse, there are no approved pharmacotherapies to treat either stimulant (e.g., cocaine, methamphetamine) or cannabis abuse. Moreover, approved pharmacotherapies to treat other SUDs (e.g., opiates, tobacco) are far from ideal. For example, no more than 20% of smokers are able to sustain long term (12 month) abstinence, despite the availability of multiple options to treat tobacco dependence (nicotine replacement therapies, bupropion, and varenicline). Although heroin abuse remains a significant public health issue, abuse of prescription opioids is far more pervasive, with approximately 2% of the US population (age 12 and older) reporting nonmedical use of prescription opiates during the past month. Here too, progress in developing medications to treat opiate addiction has been incremental, with reformulations of long approved medications (e.g., depot naltrexone, and implantable buprenorphine) aimed at enhancing adherence the most significant therapeutic advances in this area. This lack of progress is attributable, in large part, to a lack of interest (and investment) by the pharmaceutical industry. There are multiple factors that contribute to this indifference, ranging from a perceived small market size (translating to a lack of return on investment) to the perception of a high regulatory bar for approval, as detailed in the following. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: *Drug Abuse
*Drug Therapy
Neurobiology

Source: PsycINFO

115. Magnetic resonance spectroscopy studies in substance abusers.

Citation: Neurobiology of mental illness (4th ed.), 2013(742-760) (2013)

Author(s): Chang, Linda; Cloak, Christine C; Holt, John L

Institution: Department of Medicine, John A. Burns School of Medicine, University of Hawai‘i, Honolulu, HI, US; Department of Medicine, John A. Burns School of Medicine, University of Hawai‘i, Honolulu, HI, US; Department of Medicine, John A. Burns School of Medicine, University of Hawai‘i, Honolulu, HI, US

Language: English

Abstract: (from the chapter) Magnetic resonance spectroscopy (MRS) is a quantitative technique that has been used in chemistry laboratories to identify chemical structures since the 1950s. More recently, MRS has become a useful imaging modality that can be applied both in vivo noninvasively and ex vivo in tissue extracts. Therefore, MRS is particularly useful as a clinical translational tool for evaluations and longitudinal monitoring of brain abnormalities associated with various brain disorders, including addiction to drugs. When performed in vivo, MRS can be performed in a select voxel (or volume of interest), which is typically referred to as localized or single voxel MRS, or across a grid of voxels in a slice to form an image of the metabolite of interest as in MRS imaging (MRSI). More advanced techniques also allow multiple slices of metabolite maps to be obtained with MRSI, so that a larger portion of the brain can be assessed. Although the overwhelming majority of MRS studies in brain disorders focus on the proton resonances associated with
various brain metabolites and chemicals, resonances from other atomic nuclei also can be measured with MRS. Molecules with other nuclei include many that are relevant to neurobiology and neuropharmacology. Owing to the requirement of specialized MRS equipment, costs, and limited expertise, however, only few studies have employed the other nuclei, specifically PMRS or CMRS, to study brain abnormalities associated with drug abuse. We will discuss these MRS studies and how they can provide additional insights into the neuropathophysiology associated with major categories of drugs abused. At the end of the chapter, we will also compare and contrast how the brain may be affected by these different types of drugs, and some technical issues to be considered in the use of MRS to assess brain changes and to monitor treatment effects. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: *Brain Disorders
*Drug Addiction
*Magnetic Resonance Imaging
*Neurobiology
*Pathophysiology
Drug Abuse
Source: PsycINFO

Citation: Neurobiology of mental illness (4th ed.), 2013(732-741) (2013)
Author(s): Pariyadath, Vani; Paulus, Martin P; Stein, Elliot A
Language: English
Abstract: (from the chapter) This chapter discusses the neural mechanisms underlying the learning and representation of reward in the brain. Addiction research, in particular, may benefit from shifting the spotlight from dopamine-centered processing to less traditional members of the circuitry underlying positive and negative reinforcement, such as the insula, habenula, and orbitofrontal cortex. Also, a more comprehensive understanding of the interactions between these nodes is needed, especially in the context of addiction. Neuroimaging offers a valuable tool in this regard by allowing functional connectivity between multiple regions simultaneously, even in the absence of cognitive tasks. This functionality may prove especially useful for uncovering the complex interactions between reward and anti-reward systems. Finally, a recurring recent theme in addiction research is the appreciation of individual differences, especially in terms of vulnerability to addiction, reactivity to acute drug administration, and response to treatments. A continued appreciation of these individual differences may go a long way toward achieving breakthroughs in the field. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: *Brain
*Drug Addiction
*Positive Reinforcement
Individual Differences
Neuroimaging
Prefrontal Cortex
Susceptibility (Disorders)
Insula
Source: PsycINFO

117. Molecular imaging in addictive disorders.
Evidence Services | library.nhs.uk

Citation: Neurobiology of mental illness (4th ed.), 2013(716-731) (2013)
Author(s): Robertson, Chelsea L; Berman, Steven M; London, Edythe D
Institution: Center for Addictive Behaviors, Semel Institute for Neuroscience and Human Behavior, David Geffen School of Medicine, UCLA, Los Angeles, CA, US; Department of Psychiatry and Biobehavioral Sciences, David Geffen School of Medicine, UCLA, Los Angeles, CA, US; Department of Molecular & Medical Pharmacology, Center for Addictive Behaviors, Semel Institute for Neuroscience and Human Behavior, David Geffen School of Medicine, UCLA, Los Angeles, CA, US
Language: English
Abstract: (from the chapter) Positron emission tomography (PET) and single photon emission computed tomography (SPECT) are nuclear medicine techniques that allow minimally invasive in vivo measurements of biochemical processes and pharmacokinetics. Since 1986, when [C-11]N-methylspiperone was introduced as a PET radiotracer for human studies of D2/D3 dopamine receptors, many other radiotracers have become available for the visualization and quantification of neurotransmitter systems. Over the last few decades, molecular neuroimaging has extended the knowledge about addiction that had been derived from invasive studies in rodents. The human studies using PET and SPECT, which are described later, have provided information about vulnerability to addiction, and brain abnormalities at various stages of the addiction cycle. These findings have contributed to the current view of addiction and potential therapeutic interventions. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
Publication Type: Book; Edited Book
Subject Headings: *Addiction *Neuroimaging *Susceptibility (Disorders) *Molecular Neuroscience Dopamine Neurotransmitters
Source: PsycINFO

118. Brain development and the risk for substance abuse.
Citation: Neurobiology of mental illness (4th ed.), 2013(706-715) (2013)
Author(s): Caudle, Kristina; Casey, B. J
Institution: Sackler Institute for Developmental Psychobiology, Weill Medical College, Cornell University, New York, NY, US; Sackler Institute for Developmental Psychobiology, Weill Medical College, Cornell University, New York, NY, US
Language: English
Abstract: (from the chapter) An estimated 22.4 million Americans have used illicit drugs in the last month, representing nearly 9% of the population, and individuals between the ages of 16 to 25 years show the highest rates of illicit substance use. The sharp rise in substance use during adolescence underscores the importance of understanding risk for addiction. Changes in the brain during this developmental period and variation in these changes across individuals may predict who is at risk for substance abuse, enabling the prevention of later dependence. This chapter provides an overview of how the brain circuitry involved in addiction changes across development, and how this may identify who may be most at risk and when they may be most vulnerable. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
Publication Type: Book; Edited Book
Subject Headings: *Brain Development *Drug Abuse *Neurobiology *Risk Factors *Biological Neural Networks
119. The genetic basis of addictive disorders.

**Citation:** Neurobiology of mental illness (4th ed.), 2013(696-705) (2013)

**Author(s):** Goldman, David

**Institution:** Laboratory of Neurogenetics, National Institute on Alcohol Abuse and Alcoholism, National Institutes of Health, Rockville, MD, US

**Language:** English

**Abstract:** (from the chapter) Addictions share mechanisms subject to both genetic and environmental influences. Conversely, environmental, genetic, and psychophysiological vulnerability factors and individual choice play important, but differing roles, in addicted individuals, including ones addicted to the same agent. The inheritance of addictions ranges from moderate (40%) to high (70%), representing consequences of alleles (sequence variants) shared by descent. At all phases of the multistep process of addiction, gene x environment interactions, including correlations between gene and environment, shape vulnerability. However, neither exposure nor consequent dependence necessarily leads to addiction. Many individuals use addictive agents without becoming addicted. Physical dependence (tolerance) often occurs to drugs administered in the course of medical care, followed by withdrawal and no consequent addiction. Heritability directly implicates genes in causation; however, any particular heritable trait may be intractable to genetic analysis because of complexity of causation. In contrast, less heritable traits that are more narrowly defined or closer to the action of a gene may be more successfully parsed at the level of specific genetic loci that contribute to them. Therefore, two somewhat interrelated themes of this chapter are the mode of inheritance of addictions and the deconstruction (or redefinition) of addictions using neuroscience phenotypes on which genes may act more directly. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** *Addiction
*Genes
*Heritability
*Neurosciences
*Phenotypes
Genetics
Susceptibility (Disorders)

120. Cellular and molecular mechanisms of addiction.

**Citation:** Neurobiology of mental illness (4th ed.), 2013(683-695) (2013)

**Author(s):** Reissner, Kathryn J; Kalivas, Peter W

**Institution:** Department of Psychology, UNC Chapel Hill, Chapel Hill, NC, US; Department of Neurosciences, Medical University of South Carolina, Charleston, SC, US

**Language:** English

**Abstract:** (from the chapter) Addiction to drugs of abuse is characterized not only by increased motivation to obtain the drug, but also by decreased motivation to obtain natural reward and loss of control over behavior. The enduring changes that occur in regions of reward neurocircuitry and mediate the drug seeking characteristic of an addiction disorder occur over time and repeated exposures. Drug use typically escalates in a series of steps beginning with social use and transitions to regulated relapse, which is followed by compulsive relapse. In this chapter, we will discuss the cellular and molecular changes and engagement of neural circuits that occur loosely on a timescale correlated with stages of use and drug seeking, and consider how these changes may mediate the uncontrollable drive to use that characterizes an addiction disorder. It is however important to note that...
these are not clear delineations. For example, although we present pronounced dopamine (DA) signaling as a hallmark feature associated with reinforcing effects of social drug use, dopaminergic mechanisms persist throughout all stages of addiction disorder. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

121. Animal models of addiction.

Citation: Neurobiology of mental illness (4th ed.), 2013(675-682) (2013)

Author(s): Maldonado, Rafael; Jentsch, J. David; Kieffer, Brigitte L.; Evans, Christopher J

Institution: Department of Pharmacology, Universitat Pompeu Fabra, Barcelona, Spain; Department of Psychology, University of California, Los Angeles, Los Angeles, CA, US; Institute of Genetics and Molecular and Cellular Biology, Universite Louis Pasteur, Strasbourg, France; Brain Research Institute, David Geffen School of Medicine, UCLA, Los Angeles, CA, US

Language: English

Abstract: (from the chapter) Drug addiction, or substance use disorder (SUD), is a chronic brain disease characterized by the compulsive use of drugs, loss of control over drug-taking in spite of their adverse consequences, and relapse even after long periods of drug abstinence. Substance use disorder is considered the result of a series of transitions from voluntary use in search of a hedonic effect, to loss of control over this behavior, and ultimately to compulsive behavior. Important in the context of mental illness is the high comorbidity of depressive illness and anxiety with SUD and that drugs of abuse taken acutely often alleviate symptoms of these afflictions, yet during abstinence the symptoms of depression and anxiety are exacerbated. Indeed, SUD is comorbid with many psychiatric diseases (clinically referred to as dual diagnosis), including schizophrenia, where incidence of both cigarette and cannabinoid smoking is exceptionally high. In current research of SUD, animal models recapitulate the phenotypes contributing to abuse susceptibility through initial drug taking, habitual drug taking, abstinence, and finally relapse. These models have begun to unravel the molecular, cellular, and behavioral adaptations regulating addictive behaviors in research, which has greatly enriched our understanding of the neurocircuitry mediating learning, motivation, mood, and stress. This chapter systematically explores animal models that contribute insights to the addiction cycle. We first cover models assessing reward-related and reinforcement behaviors. We follow this with descriptions of models for abstinence and relapse, and new genetic models that increasingly are facilitating addiction research. Finally, we discuss animal model contributions to susceptibility for initiating additive behaviors. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
Rewards
Susceptibility (Disorders)

Source: PsycINFO

122. The brain and its epigenome.

Citation: Neurobiology of mental illness (4th ed.), 2013(172-182) (2013)

Author(s): Mitchell, Amanda C; Jiang, Yan; Peter, Cyril J; Goosens, Ki A; Akbarian, Schahram

Institution: Department of Psychiatry, Icahn School of Medicine at Mount Sinai, New York, NY, US; Department of Psychiatry, Icahn School of Medicine at Mount Sinai, New York, NY, US; Department of Neurosciences, Medical University of South Carolina, Charleston, SC, US; Department of Brain and Cognitive Sciences, Massachusetts Institute of Technology, Cambridge, MA, US; Department of Psychiatry, Icahn School of Medicine at Mount Sinai, New York, NY, US

Language: English

Abstract: (from the chapter) Psychiatric disorders, including autism, mood and anxiety, or psychosis spectrum disorders, substance abuse, and addiction each lack a unifying molecular or cellular pathology, and most cases are believed to be of multifactorial etiology with numerous environmental and genetic components involved. This, taken together with the fact that laboratory animal models, including rats and mice, do not reflect the full complexities surrounding disorders of higher cognition and emotion, poses a formidable challenge to the quests of understanding the pathophysiology of disease and developing efficient therapies for the majority of patients. Thus, it will be necessary to further explore the neurobiology and molecular pathology of mental disorders, in order to develop novel treatment strategies of higher efficacy. One promising avenue of research that is moving center stage in basic and clinical neurosciences alike is epi- (Greek for "over," "above") genetics. First, based on human and animal brain studies, it is becoming increasingly clear that epigenetic markings, including DNA methylation and many types of histone modifications, remain "plastic" throughout all periods of development and aging, with ongoing dynamic regulation even in neurons and other differentiated cells. Second, recent work has revealed that each of the causative mutations in a subset of monogenetic neurological disorders (including but not limited to Rubinstein-Taybi, Kleefstra, Rett, and other syndromes) disrupts the function of a protein involved in the regulation of chromatin structure and function. Third, a subset of chromatin-modifying drugs-compounds with inhibitory activity directed against histone deacetylases are a well-known example—demonstrated a promising therapeutic potential in animal models for cognitive and emotional disease, and even for neurodegenerative conditions. Finally, even some of the most optimistic estimates on the role of protein-coding sequences as genetic risk factors for major psychiatric disease predict that only 25%-50% of sporadic cases of autism and schizophrenia carry disease-associated mutations altering protein sequence and function. In the following, we will, after a concise introduction to the various markings and molecules that define a cell's epigenome, touch upon each of four points raised in the preceding, and then finish this chapter with a brief discussion about how epigenetic technologies and discoveries could have a lasting impact on our understanding of the neurobiology and heritability of mental disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: *Heritability
*Mental Disorders
*Neurobiology
*Molecular Neuroscience
*Epigenetics
Pathology

Source: PsycINFO