Search Results

Table of Contents

Search History ................................................................. page 6

1. An exploratory analysis of the relationship between environmental factors and treatment outcome in adolescent substance abuse treatment. ................................................................. page 7
2. The neuroscience of motivational interviewing change talk. ................................................................. page 7
3. The role of orexin in reward-based feeding behaviors. ................................................................. page 8
4. Parent-child communication about substance use: Experiences of Latino emerging adults. ........................ page 9
5. Behavioral response to alcohol in binge drinkers. ........................................................................ page 10
6. Perceived effectiveness of and willingness to support disability management strategies in the workplace. ................................................................. page 11
7. The epigenetics of stress and addiction: A role for individual differences. ........................................ page 11
8. A community-based approach to planning implementation of a drug abuse curriculum for elementary schools. .................................................................................. page 12
9. Understanding the mental health needs of Latina college students: Exploring issues of prevalence, measurement, and service utilization for mental health and substance use problems among a national sample. .................. page 13
10. The effectiveness of alternative sentencing measured by predictors of relapse. ........................................ page 14
11. Latino/a adolescent substance use: Problems and treatments. ................................................................ page 15
12. Validity of the Addiction Prone Personality Scale. ........................................................................ page 15
13. A qualitative look at a group of individuals with ADHD and a co-morbid substance use disorder. ............... page 16
14. Comparison of the MMPI-2 and MMPI-2-RF personality profiles of sex addicts. ........................................ page 16
15. Effectiveness of a motivational enhancement group treatment in a community treatment program with a substance abusing population. ................................................................. page 17
16. Metaplasticity: How experience during brain development influences the subsequent exposure to a drug of abuse. .......................................................................................... page 18
17. An immediate survival focus: Linking substance abuse, fight, flight, and prosocial behavior. ..................... page 18
18. The relationship between alcohol/cannabis use and symptom profile and progression in individuals at risk for psychosis. .......................................................................................... page 19
19. The effects of behavioral inhibition/approach system as predictors of internet addiction in adolescents. ...... page 20
20. Striatal d2/d3 receptor availability is inversely correlated with cannabis consumption in chronic marijuana users. .................................................................................. page 20
21. Pharmacogenetic randomized trial for cocaine abuse: Disulfiram and dopamine-hydroxylase. ................ page 21
22. Health-related quality of life in primary care patients with mental disorders: Results from the PRIME-MD 1000 Study. .......................................................................................... page 21
23. Variation in regulator of G-protein signaling 17 gene (RGS17) is associated with multiple substance dependence diagnoses. .......................................................................................... page 22
24. Sustainable happiness: The mind science of well-being, altruism, and inspiration. ........................................ page 22
25. HIV/AIDS response renovated in capital. ............................................................................................. page 23
26. My virus is your virus. ......................................................................................................................... page 25
27. Shaping the renaissance of psychedelic research. .................................................................................. page 25
28. Science, family history, and personal responsibility. ................................................................................ page 26
29. Role of IKK/NF-κB signaling in extinction of conditioned place aversion memory in rats. .................................. page 26
31. Effect of abuse-deterrent formulation of oxycontin. ................................................................. page 28
32. Management of opioid analgesic overdose. .................................................................................. page 28
33. Opioid maintenance therapy restores CD4+ T cell function by normalizing CD4+CD25high regulatory T cell frequencies in heroin user. ................................................................. page 29
34. Role of intestinal permeability and inflammation in the biological and behavioral control of alcohol-dependent subjects. ........................................................................................................ page 30
35. Melanin-concentrating hormone receptor 1 (MCH1-R) antagonism: Reduced appetite for calories and suppression of addictive-like behaviors. ................................................................. page 31
36. Improving quality of care in substance abuse treatment using five key process improvement principles. ................................................................. page 32
37. Cannabis and opium abuse patterns and their associated complications in a sample of young Iranians. ...... page 33
38. A substance use survey with old order Amish early adolescents: Perceptions of peer alcohol and drug use. ................................................................. page 33
39. Attachment-based intervention for substance-using mothers: A preliminary test of the proposed mechanisms of change. ................................................................. page 34
40. Impulsivity in Internet addiction: A comparison with pathological gambling. .................................. page 35
41. Prison ministry with chemically dependent African American women exposed to trauma: An interview. ........................................................................................................ page 35
42. Bibliotherapy and journaling as a recovery tool with African Americans with substance use disorders. ...... page 36
43. Recovery coaching with homeless African Americans with substance use disorders. ................................ page 36
44. Hoops and healing: The use of athletics for youth involved in recovery. ........................................ page 37
45. Alternatives to detention for African American adolescents with substance use and co-occurring disorders. ........................................................................................................ page 37
46. Devaluation, loss, and rage: A postscript to urban African American youth with substance abuse. ........ page 38
47. Multiple pathways of recovery for African American men. ........................................................... page 38
48. Prevention of mental and substance use and abuse disorders and comorbidity in African Americans. ........ page 39
49. Recovery management and African Americans: A report from the field. ........................................ page 39
50. Patterns of recovery from substance use disorders in African American communities: An overview. ........ page 40
51. Editorial. ........................................................................................................................................ page 41
52. Acetaldehyde oral self-administration: Evidence from the operant-conflict paradigm. ......................... page 41
53. Correlates of recovery from alcohol dependence: A prospective study over a 3-year follow-up interval. ..... page 42
54. Possible association between OPRM1 genetic variance at the 118 locus and alcohol dependence in a large treatment sample: Relationship to alcohol dependence symptoms. ........................................ page 43
55. Youth recovery contexts: The incremental effects of 12-step attendance and involvement on adolescent outpatient outcomes. ................................................................. page 44
56. Borderline personality symptoms in short-term and long-term abstinent alcohol dependence. ................ page 45
57. Face-Name association learning and brain structural substrates in alcoholism. ........................................ page 46
58. A clarion call for nurse-led SBIRT across the continuum of care. ....................................................... page 47
59. Adenosine and glutamate signaling in neuron-Glial interactions: Implications in alcoholism and sleep disorders. ........................................................................................................ page 47
60. A subculture revealed: Female cocaine users’ values and perceptions. ................................................ page 48
61. 100 Years ago in addiction science: Turtle soup and other matters: Excerpts from endpages of the British Journal of Inebriety for 1912. ................................................................. page 49
62. A 'miracle cure' misunderstood: Comment. .................................................................................. page 49
63. Commentary on Cunningham et al. (2012): Benefit to clients--Outcome monitoring and knowledge translation: "Preferences for evidence-based practice dissemination in addiction agencies serving women: A discrete-choice conjoint experiment": Comment. .......................................................... page 50
64. Preferences for evidence-based practice dissemination in addiction agencies serving women: A discrete-choice conjoint experiment. ........................................................................................................................................ page 51
65. Clinical laboratory assessment of the abuse liability of an electronic cigarette. .......................................................... page 52
66. Methadone and perinatal outcomes: A prospective cohort study. .................................................................................... page 52
67. Commentary on Friguls et al. (2012): Illicit drugs and pregnancy--Testing is not a substitute for good clinical rapport: "Assessment of exposure to drugs of abuse during pregnancy by hair analysis in a Mediterranean island": Comment. ........................................................................ page 53
68. Assessment of exposure to drugs of abuse during pregnancy by hair analysis in a Mediterranean Island. .......................................................... page 54
69. Health-care service utilization in substance abusers receiving contingency management and standard care treatments. ............................................................................................................................................. page 55
70. Commentary on Michie et al. (2012): The lid is off the black box: "Identification of behaviour change techniques to reduce excessive alcohol consumption": Comment. ........................................................................................................ page 56
71. Commentary on Peters et al. (2012): Cannabis and tobacco policy correlates--Why not try to reduce harm?: "Clinical correlates of co-occurring cannabis and tobacco use: A systematic review": Comment. ........................................................................ page 57
72. Clinical correlates of co-occurring cannabis and tobacco use: A systematic review. .......................................................... page 57
73. Conversation with Beny J. Primm. ........................................................................................................................................ page 58
74. Two-chosen-one taxation: Examining its potential effectiveness to reduce drinking initiation and heavy alcohol consumption in low- to middle-income countries. ..................................................................................... page 59
75. Evidence from a high-income country: Comment. .................................................................................................................. page 59
76. Alcohol excise taxation in Thailand: More than a simple one: Comment. ................................................................................ page 60
77. An alternative taxation method for low- to middle-income countries: Comment. .......................................................... page 60
78. Is the two-chosen-one (2CI) taxation implementation in Thailand valid to serve as a model for how 2CI taxation really works?: Comment. ........................................................................................................................................ page 61
79. Alcohol taxation policy in Thailand: Implications for other low- to middle-income countries. .......................................................... page 62
80. Collective amnesia: Reversing the global epidemic of addiction library closures. .......................................................... page 63
81. Serum response factor and cAMP response element binding protein are both required for cocaine induction of FosB. ........................................................................................................................................... page 63
82. AMPAR-independent effect of striatal CaMKII promotes the sensitization of cocaine reward. .......................................................... page 64
83. "A resounding success or a disastrous failure: Re-examining the interpretation of evidence on the Portuguese decriminalisation of illicit drugs": Erratum. ........................................................................................................................................ page 65
84. First to fulfil our responsibilities to addicted smokers: A response to Dalton. ........................................................................ page 65
85. 'Do more, smoke less!' Harm reduction in action for smokers with mental health/substance use problems who cannot or will not quit. ........................................................................................................................................ page 66
86. Prevalence of smoking and other health risk factors in people attending residential substance abuse treatment. ............................................................................................................................................. page 67
87. Integrating synaptic plasticity and striatal circuit function in addiction. ................................................................................ page 68
88. Editor's letter. ..................................................................................................................................................... page 68
89. African American caregivers and substance abuse in child welfare: Identification of multiple risk profiles. ........................................................................................................................................... page 69
90. Prevalence and determinants of intimate partner violence against women in Marivan County, Iran. .......................................................... page 70
91. Identification and management of pain medication abuse and misuse: Current state and future directions. ............................................................................................................................................. page 70
92. Harm reduction--The right policy approach for Africa? ................................................................. page 71
93. Cannabis use among young people in Dar es Salaam, Tanzania: A qualitative study. .................... page 72
94. Prevalence and specific psychosocial factors associated with substance use and psychiatric morbidity among patients with HIV infection at Usmanu Danfodiyo University Teaching Hospital, Sokoto State, Nigeria. .... page 72
95. HIV risk behaviours, perceived severity of drug use problems, and prior treatment experience in a sample of young heroin injectors in Dar es Salaam, Tanzania. .................................................................................. page 73
96. Long-term effectiveness of psychodynamic outpatient treatment of addiction. ............................... page 74
97. Associations between three characteristics of parent-youth relationships, youth substance use, and dating attitudes. ................................................................................................................................. page 75
98. Electronic medical record system at an opioid agonist treatment programme: Study design, pre-implementation results and post-implementation trends. ........................................................................ page 75
99. Electronic health information system at an opioid treatment programme: Roadblocks to implementation. ........................................................................................................................................................................ page 76
100. Physicians and medical marijuana. .................................................................................................... page 77
101. An observational study to determine the prevalence of alcohol use disorders in advanced cancer patients. ........................................................................................................................................................................... page 78
102. Illicit drug use as a challenge to the delivery of end-of-life care services to homeless persons: Perceptions of health and social services professionals. ................................................................. page 79
103. The addicted self and modernity. ........................................................................................................ page 79
104. Writing drug cultures. ......................................................................................................................... page 80
105. Subjective perceptions associated with the ascending and descending slopes of breath alcohol exposure vary with recent drinking history. ........................................................................................................ page 80
106. The relationship between measures of impulsivity and alcohol misuse: An integrative structural equation modeling approach. ............................................................................................................ page 81
107. Impact of multiple types of childhood trauma exposure on risk of psychiatric comorbidity among alcoholic inpatients. ......................................................................................................................... page 82
108. The interpretability of family history reports of alcoholism in general community samples: Findings in a Midwestern U. S. twin birth cohort. .......................................................................................... page 83
109. Early-onset alcohol dependence increases the acoustic startle reflex. ................................................ page 84
110. Learning from positive and negative monetary feedback in patients with alcohol dependence. ........ page 85
111. Heritability of level of response and association with recent drinking history in nonalcohol-dependent drinkers. ................................................................................................................................. page 86
112. Human laboratory paradigms in alcohol research. ............................................................................. page 87
114. Neural mechanisms of risk taking and relationships with hazardous drinking. .............................. page 89
115. Deep brain stimulation in addiction: A review of potential brain targets. ........................................ page 90
116. Low striatal dopamine receptor availability linked to caloric intake during abstinence from chronic methamphetamine abuse: Comment. ................................................................. page 91
117. Neurobiology of addiction: Insight from neurochemical imaging ..................................................... page 92
118. The genetic basis of addictive disorders. .............................................................................................. page 92
119. Advances in the psychosocial treatment of addiction: The role of technology in the delivery of evidence-based psychosocial treatment. .......................................................................................... page 93
120. Training the next generation of providers in addiction medicine. ..................................................... page 93
121. Clinical implications of drug abuse epidemiology. ............................................................................. page 94
122. Managing co-occurring substance use and pain disorders. ................................................................. page 95
123. Drug treatments in criminal justice settings. ....................................................................................... page 95
124. Serotonergic hallucinogens and emerging targets for addiction pharmacotherapies. ......................... page 96
125. New systems of care for substance use disorders: Treatment, finance, and technology under health care reform. ........................................................................................................ page 96
126. Advances in opioid antagonist treatment for opioid addiction. ............................................................ page 97
127. Behavioral addictions: Where to draw the lines? ................................................................................... page 97
128. Expanding treatment potential for substance use disorders. ............................................................... page 98
129. Characteristics of victims of sexual abuse by gender and race in a community corrections population. ................................................................. page 99
131. Review of Integrated group therapy for bipolar disorder and substance abuse. ............................... page 100
132. Brief interventions are effective in reducing alcohol consumption in opiate-dependent methadone-maintained patients: Results from an implementation study. ........................................... page 101
133. Mapping the recovery stories of drinkers and drug users in glasgow: Quality of life and its associations with measures of recovery capital. ........................................................................... page 102
134. Alcohol and cannabis abuse/dependence symptoms and life satisfaction in young adulthood. ........... page 102
135. Barriers and facilitators to cannabis treatment. .................................................................................... page 103
136. Post-traumatic stress disorder, depression and suicidality in inpatients with substance use disorders. .... page 104
137. Pills and pints: Risky drinking and alcohol-related harms among regular ecstasy users in Australia. ....... page 105
138. Examining supply changes in Australia's cocaine market. ................................................................... page 106
139. The effects of beverage type on homicide rates in Russia, 1970-2005. ................................................. page 107
140. More evidence that spirits can be more dangerous: Homicide in Russia and suicide in Japan. ............ page 107
141. Pathological collecting: A case report. ............................................................................................... page 108
142. Cohesive subgroups and drug user networks in Dhaka City, Bangladesh. ............................................. page 109
143. Extracurricular activities and teens' alcohol use: The role of religious and secular sponsorship. .......... page 109
144. A novel SGCE gene mutation causing myoclonus dystonia in a family with an unusual phenotype. ....... page 110
145. Overcoming addiction: A new model for working with drug and alcohol abusers. ............................. page 111
Search History

1. PsycINFO; exp ADDICTION/ OR DRUG ABUSE [+NT]/ OR DRUG USAGE [+NT]/; 35456 results.
2. PsycINFO; addict*.ti,ab; 25722 results.
3. PsycINFO; 1 OR 2; 47561 results.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2012, vol./is. 72/12-B(7680), 0419-4217 (2012)

**Author(s):** Dervin, Kathleen

**Institution:** Dervin, Kathleen: Spalding U.

**Language:** English

**Abstract:** An exploratory study was conducted to examine the relationship between environmental variables and treatment outcome in adolescent substance abuse treatment. Environmental variables were defined as living, vocational, and social environmental risk, general and spiritual social support, and victimization. Treatment outcome was operationally defined as substance use, as measured by the Substance Frequency Scale. Each of these variables was measured with indices of the same names that are part of the Global Appraisal of Individual Needs (GAIN). Participants in this study were adolescents (N = 230) in the LANSAT program, and environmental variables and substance use were assessed at initial contact and at 3-, 6-, and 12-month follow-ups. Data analysis showed significant correlations between substance use and social and vocational environmental risk, and general environmental risk across time. Regression analyses showed environmental variables to be predictors of substance use at the 12-month follow-up, when general social support, living, and vocational risk, and general environmental risk significantly predicted substance use. Repeated measures ANOVA showed significant reduction in substance use across time. Analyses examining differences between each data collection showed a significant difference between substance use at initial assessment and 3-month follow-up; however, there were no significant differences between the other follow-up points. Results support targeting environmental factors in adolescent substance abuse treatment as a way to improve treatment outcome. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** *Drug Abuse  
*Drug Rehabilitation  
*Environmental Effects  
*Social Support  
*Treatment Outcomes  
Pediatrics  
Victimization

**Source:** PsycINFO

2. The neuroscience of motivational interviewing change talk.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2012, vol./is. 72/12-B(7707), 0419-4217 (2012)

**Author(s):** Houck, Jon M

**Institution:** Houck, Jon M.: U New Mexico

**Language:** English

**Abstract:** Motivational interviewing (MI) is a directive, client-centered therapeutic method employed in the treatment of substance abuse, with strong evidence of effectiveness. To date, the sole mechanism of action in MI with any consistent empirical support is "change talk" (CT), which is generally defined as in-session verbal commitments by clients to change their problem behavior. "Sustain talk" (ST) incorporates verbal commitments to maintain the status quo. MI maintains that during addiction treatment clients essentially talk themselves into change. Multiple studies have supported this theory, revealing that the frequency and strength of these change talk utterances from MI treatment sessions predict substance use outcomes. Although a causal chain has now been established linking therapist speech, client change talk, and substance use outcomes, to date the
neural substrate of change talk has been largely uncharted. Participants were 10 individuals who were ambivalent about their substance use. Each participant had a recorded MI session with an expert therapist. Following each participant's session the precise time of each change talk (CT) or sustain talk (ST) utterance was noted, and these utterances were extracted from the recording as separate files. During a MEG scan participants heard approximately 200 repetitions of these utterances, intermingled and presented in a random order. MEG and MRI data were analyzed using the Freesurfer, MNE, and AFNI software packages. Time frequency analysis of MEG data was conducted using MATLAB. Results suggest that early processing of CT occurs in a right-hemisphere network that includes inferior frontal gyrus, insula, and superior temporal cortex. In addition, time frequency analysis revealed significant activity in the theta band in both IFG and insula. These results support a representation of change talk at the neural level, and are consistent with the role of these structures in cognitive dissonance processing. In general, these findings suggest that during MI treatment sessions, therapists who are able to evoke this special kind of language are tapping into neural circuitry that could be essential for behavior change. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

3. The role of orexin in reward-based feeding behaviors.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2012, vol./is. 72/12-B(7197), 0419-4217 (2012)

**Author(s):** Choi, Derrick L

**Institution:** Choi, Derrick L.: U Cincinnati

**Language:** English

**Abstract:**

The regulation of food intake involves the coordinated action of multiple mechanisms including energy balance and mechanisms independent of caloric needs. In the case of the latter, referred to as non-homeostatic regulation, hedonic value of palatable foods and the motivation to obtain them are an important component. The mesolimbic reward pathway, a major component of drug addiction neurobiology, is implicated in the control of reward-based feeding behaviors. The lateral hypothalamic orexin system modulates a variety of systems including arousal, food intake and reward-related behaviors. Due to its extensive projections to many brain regions and diverse roles in behavioral systems, orexin is a prime candidate for the regulation of mesolimbic function and reward-based feeding behaviors. Moreover, orexin is well positioned to serve as a feedforward system to integrate metabolic and visceral signals from the basal hypothalamus with learned reward-stimulus associations to affect mesolimbic function. However, this possibility remains to be understood. In these studies, we hypothesized that orexin promotes reward-based feeding behaviors and does so by acting on the mesolimbic circuit. First, we assessed the hypothesis that orexin is a critical promoter of reward-based feeding in models of conditioned and unconditioned responding for palatable food using behavioral pharmacology in rats. These data demonstrate that orexin signaling is necessary for promoting reward-based feeding under conditioned and unconditioned responding paradigms independent of energy status. Conditioned expectation of both palatable food and drug reinforcers activates the hypothalamic orexin system and stimuli previously associated with palatable food intake induce overconsumption in rodents. We hypothesized that context dependent expectation of palatable food and chow-meal feeding differentially activate the orexin system and its target regions. We assessed cue induced neuronal activation in orexin neurons as well as target substrates of the orexin system. Results demonstrate that expectation of chocolate activates both orexin neurons and...
several of its target regions including the medial prefrontal cortex, paraventricular thalamus (PVT) and ventral tegmental area, all of which are implicated in reward function. The PVT can regulate mesolimbic dopamine neurochemistry through direct connections with the nucleus accumbens. In addition, the PVT modulates the processing of attention and cognitive arousal information, suggesting that the PVT may represent a unique brain region with the capacity to integrate orexinergic effects of arousal and reward function. We then assessed the necessity of PVT orexin signaling for reward-based feeding by selectively reducing the expression of the orexin-1 receptor (OX1R) in PVT neurons. To accomplish this, we utilized an adeno-associated virus, containing a shRNA directed towards OX1R, that was injected into the PVT of rats. The PVT OX1R knockdown rats were then assessed behaviorally in models of conditioned and unconditioned responding for food rewards. Results from these studies suggest that orexin signaling in the PVT promotes unconditioned, but not conditioned or high work-requirement, reward-based feeding behaviors. Together, these results present new possibilities in the integration of a generalized orexin arousal system capable of promoting reward function through a novel HTS circuit and provides new supporting evidence of a significant role for orexin in reward-based feeding. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: *Animal Feeding Behavior  *Hypothalamus  *Neurobiology  *Prefrontal Cortex  *Orexin  Rats

Source: PsycINFO


Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2012, vol./is. 72/12-B(7695), 0419-4217 (2012)

Author(s): Reid-Quinones, Kathryn

Institution: Reid-Quinones, Kathryn: Virginia Commonwealth U.

Language: English

Abstract: The purpose of the current studies was to identify messages that Latino parents communicate to their offspring about the use of legal and illegal drugs and to determine associations between parental messages and substance use outcomes. Previous research has identified parent-child communication as protective against tobacco, alcohol, and other drug use. However, most of these studies have failed to examine the specific messages communicated and those that have focused almost exclusively on non-Hispanic Caucasians. Study 1 identified messages that Latino parents communicate to their offspring regarding legal and illegal drugs through two focus groups with Latino college students (N = 7; ages 18-25). Many parental messages expressed in the focus groups were consistent with previous research. However, two distinct messages emerged from the focus groups: abstaining from substance use for religious reasons and because it would be disrespectful to parents. Results of qualitative analyses were combined with previous research identifying parental messages about substance use to create a 75-item questionnaire assessing the degree to which parents conveyed identified message types. Following the first study, an additional sample of Latino emerging adults (N = 222) was recruited from Virginia Commonwealth University, other Virginia colleges, and organizations with primarily Latino members in order to examine the psychometric properties of the newly developed questionnaire and to assess the associations between parental messages and substance use outcomes in Study 2. Principal Components Analysis (PCA) produced six components: Rewards & Punishments, Religious Beliefs, Never Addressed, Respecting Parents, Focus on Yourself, Negative Consequences of Use. These resulting components then were examined in association with substance use outcomes while also controlling for participants' age, sex, religious commitment,
familism, and acculturation. Results suggest that parental messages about substance use are differentially associated with substance use outcomes, with some messages appearing to be protective and other messages associated with increased risk. Further, select parental messages were strongly associated with the substance use patterns of Latino emerging adults while some messages were not related or marginally related to substance use. Specifically, messages focused on the negative consequences of use were most protective, while messages stressing rewards and punishments and respecting parents were associated with increased risk. These data indicate that attention to the specific messages parents communicate to their offspring regarding substance use, and not merely the frequency or openness of communication, is important. Implications, next steps for future research, and limitations of the current study are discussed. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Dissertation Abstract
Subject Headings: *Drug Abuse
*Messages
*Parent Child Communication
"Latinos/Latinas"

Source: PsycINFO

5. Behavioral response to alcohol in binge drinkers.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2012, vol./is. 72/12-B(7300), 0419-4217 (2012)

Author(s): Bernosky-Smith, Kimberly A
Institution: Bernosky-Smith, Kimberly A.: Wake Forest U.
Language: English

Abstract: Binge drinking is a hazardous behavior that is associated with a multitude of deleterious effects for the individual. Studies suggest that binge drinkers may be more likely than non-bingers to experience the immediate negative consequences of alcohol consumption. The present series of studies was designed to examine the behavioral response to alcohol in binge drinkers. Furthermore, we sought to determine how within-session drinking patterns contributed to subsequent behavior. The first aim was to determine how a laboratory-administered alcohol binge affected behavior in frequent versus infrequent binge drinkers. Alcohol impaired driving ability to the same degree in both groups of binge drinkers as compared to placebo. The infrequent binge drinkers reported feeling less confident in their ability to operate a vehicle after alcohol as compared to after placebo. The frequent binge drinkers, however, exhibited no significant difference in reported confidence between alcohol and placebo. Frequent binge drinkers may be more likely to drive after drinking due to their inaccurate perception of driving ability. The second aim was to assess differences in the pace of drinking between frequent and infrequent binge drinkers. Alcohol impaired driving ability to the same degree in both groups of binge drinkers as compared to placebo. The infrequent binge drinkers reported feeling less confident in their ability to operate a vehicle after alcohol as compared to after placebo. The frequent binge drinkers, however, exhibited no significant difference in reported confidence between alcohol and placebo. Frequent binge drinkers may be more likely to drive after drinking due to their inaccurate perception of driving ability. The second aim was to assess differences in the pace of drinking between frequent and infrequent binge drinkers. Additionally, we sought to determine the influence of pace of drinking on subsequent behavior. A fast pace of drinking was associated with increased mean speed on the driving simulator, number of collisions, and reported confidence in driving. Binge drinkers' heightened risk for hazardous driving while intoxicated may be a product of their rapid drinking. The third aim was to determine the effect of a priming dose of alcohol on subsequent drinking and behavior in binge drinkers. Participants who received a priming dose of alcohol did not significantly differ from placebo in the dose of alcohol consumed within an ad libitum drinking session. Excessive alcohol may result from the lack of influence prior alcohol consumption exerts on ad libitum drinking. Taken together, these studies show that reducing the deleterious effects of bingeing should target specific strategies to decrease the frequency of binge episodes, the fast drinking of alcohol and pre-gaming before drinking. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
6. Perceived effectiveness of and willingness to support disability management strategies in the workplace.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2012, vol./is. 72/12-B(7733), 0419-4217 (2012)

**Author(s):** Russ, R

**Institution:** Russ, R.: Walden U.

**Language:** English

**Abstract:** Individuals with unreported addictions increase employer costs through absenteeism. The implementation of effective disability management strategies (DMS) could potentially contribute to reducing those costs. Researchers have focused on 12 DMS that have been proposed, but not evaluated. An important gap in the current literature exists regarding whether the proposed strategies are perceived to be effective, and more importantly, would be supported by employees if management implemented them. The purpose of this study was to assess the perceived effectiveness (PE) and willingness to support (WS) specific DMS. Collaborative, motivation, and disability management theories provided the theoretical basis for designing a within-group, quantitative study surveying participants in one teacher's union. In an initial 13x2 Chi square analysis, a significant relationship between DMS strategies and perceived effectiveness was found while subsequent post hoc analyses identified seven specific strategies perceived to be effective in reducing absenteeism. A follow up 7x2 Chi square analysis found a significant relationship between the 7 DMS perceived effective and employee willingness to support implementation of the strategy. Implications for positive social change include identifying specific union-supported strategies perceived to be effective in reducing absenteeism possible strategies to potentially reduce employer costs, and assisting employees in resolving unreported addictions. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** *Disability Management*  
*Employee Absenteeism*

**Source:** PsycINFO

7. The epigenetics of stress and addiction: A role for individual differences.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2012, vol./is. 72/12-B(7193), 0419-4217 (2012)

**Author(s):** Hollis, Fiona Elizabeth

**Institution:** Hollis, Fiona Elizabeth: The Florida State U.

**Language:** English

**Abstract:** Stress is a ubiquitous aspect of everyday life. As such, there exists a great deal of variability in the individual response to stress, particularly as a functional cause of depression. The aim of this dissertation is to investigate the mechanisms behind individual differences in response to stressful events in the attempt to explain differing levels of vulnerability to depression and drug addiction following exposure to stress. To accomplish this goal, we examine variations in the stress response using a rodent model of individual differences based on novelty-seeking behavior. Outbred rats can be classified as either High Responders (HR) or Low Responders (LR) depending on their locomotor activity in a novel environment. Previous studies have demonstrated that HR and LR rats differ in key components of the stress response pathway and would thus make a good model of individual differences in response to stress. Of the many types of stressors that one might encounter in their daily activities, the most commonly experienced is social stress. We therefore utilized a rodent model of social stress termed
social defeat to investigate whether exposure to social stress might induce depressive-like behaviors. We then examined histone modifications as a potential mechanism behind such behavioral alterations. Our results found that repeated social defeat induces a number of depressive-like behaviors in Sprague-Dawley rats that are correlated with short-term changes in histone acetylation in the hippocampus and the amygdala. We then focused on individual differences in response to social defeat and in histone modifications. We found that HR rats are more susceptible to the effects of social stress, as evidenced by the expression of depressive-like behaviors following exposure to social defeat. Additionally, HR rats differ from LR rats in the levels of hippocampal histone acetylation in both basal conditions and following exposure to social defeat. We investigated potential genes that may be responsible for our observed changes in acetylation. We found basal changes in cyclic-AMP response element binding (CREB) Binding Protein (CBP) mRNA between HR and LR rats. These results indicate a role for epigenetic mechanisms as a potential mechanism for individual differences in responses to stress. We then explored individual susceptibilities in acute versus repeated social defeat exposure. We found that while both HR and LR rats exhibit long-term memories to repeated social defeat, only HR rats display long-term memories of an acute social defeat exposure. We examined histone acetylation levels following an acute exposure to social defeat, and found changes in the timing of acetylation patterns between HR and LR rats in the hippocampus and amygdala. These findings again highlight the importance of considering individual differences in stress responses and uncover the HR/LR model as a potential model for posttraumatic stress disorder. Finally, in a collaborative study, we investigated the role of methionine in depression and drug addiction. We found that systemic injection of methionine, a methyl donor, blocked behavioral sensitization to cocaine and resulted in decreased cocaine self-administration in male Sprague-Dawley rats. We propose several follow-up studies for investigating the role of DNA methylation further, including investigation of specific DNA methyltransferases, such as DNMT3A, and their target genes. This particular enzyme has also been implicated in the pro-depressant behaviors following exposure to social defeat, providing a common mechanism for the fields of depression and addiction.

**Publication Type:** Dissertation Abstract  
**Subject Headings:**  
*Addiction  
*Cocaine  
*Individual Differences  
*Sensation Seeking  
*Epigenetics  
Amygdala  
Hippocampus  
Rats  
Stress  
**Source:** PsycINFO  

8. A community-based approach to planning implementation of a drug abuse curriculum for elementary schools.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2012, vol./is. 72/12-B(7285), 0419-4217 (2012)  
**Author(s):** Mueller, Marie  
**Institution:** Mueller, Marie: U Missouri - Saint Louis  
**Language:** English  
**Abstract:** This project used a collaborative approach with community organizations in a Missouri county to plan the implementation of an evidence-based drug abuse prevention curriculum for elementary schools. It is part of a larger project funded by the Community-Oriented Policing Services within the U.S. Department of Justice (J. Sebastian, Project Director). The focus is drug abuse prevention, with an emphasis on methamphetamine. There is much work currently being done in this county by multiple community organizations; however, no efforts focused on the elementary schools. The goal of this project is to plan a curriculum that will strengthen health protective factors in
elementary school children to prevent use of methamphetamine (MA). Methamphetamine addiction is difficult to treat and is costly to society. Substance abuse is being initiated by those as young as elementary school age, which is why preventive education at an early age is essential. The curriculum will be implemented in kindergarten through fifth grade. This project used a community-based participatory action research process. A team of university and community participants was convened that evaluated the extent of the problem of substance abuse in the community, assessed the current work being done in the schools and the community, assessed what has worked and what has not worked, and developed a plan to implement a substance abuse curriculum. This included choosing a research-based drug prevention curriculum that could be sustained in the schools following the conclusion of the project. The National Institute on Drug Abuse Brain Power! Junior Scientist curriculum was chosen and will be implemented along with a school-wide Positive Behavior Support program. A focus group was held with key personnel in the schools. Focus group data were transcribed and compared with field notes prepared by a project team member who served as scribe. Data were analyzed for key themes. Key themes from the focus group included: methamphetamine is a problem in this community; current efforts are not adequate; early education is key to prevention; NIDA Brain Power! is research-based and appropriate to implement with the school-wide positive behavior support program. A plan was developed for implementation, which will vary by grade level. This will strengthen children's ability to make healthy choices and give them the skills and knowledge to more effectively refrain from substance abuse.

Publication Type: Dissertation Abstract
Subject Headings: *Community Services  *Curriculum  *Drug Abuse Prevention  *Elementary Schools  Methamphetamine

Source: PsycINFO

9. Understanding the mental health needs of Latina college students: Exploring issues of prevalence, measurement, and service utilization for mental health and substance use problems among a national sample.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2012, vol./is. 72/12-B(7277), 0419-4217 (2012)

Author(s): Granillo, M. Teresa
Institution: Granillo, M. Teresa: U Michigan
Language: English
Abstract: Latina college students experience significant stress and psychological distress in the college campus context. They report higher rates of depression and anxiety than Latino and non-Latina female students. Mental health problems interfere with academic success and Latina report the lowest rate of college completion among female college students. It is essential that the mental health needs of this at-risk population be addressed. Using a national dataset of college student mental health, three studies were conducted to gain a better understanding of the mental health needs of Latina college students. Study one found that Latinas (N=1,274) were more likely than White females (N=9,797) to experience depression and less likely to use substances. Social support and religiosity were protective factors and institutional dissatisfaction and discrimination were risk factors for mental health and substance use problems. However, there were differences between Latinas and Whites in the way that these factors influenced these problems. The second study explored the structure and function of an existing depression assessment instrument (Patient Health Questionnaire-9) among Latina (N=1,455) and White female college students (N=15,299). Through a series of factor analyses it was confirmed that the PHQ-9 was best utilized as a two-factor measure of depression among Latina and White female college students and there was no evidence of a construct bias. The third study examined the rates and associations of mental health service utilization among Latina college students (N=1,876) and found an unmet need for services among this population.
Less than a third of Latinas who reported experiencing depression, anxiety, eating disorder symptoms, suicidal ideation, or substance use problems had used mental health services. Latinas who perceived they had a problem, who had positive attitudes and beliefs about services, and who were more religious were more likely to have received services. Findings from these three studies suggest that Latina college students are an at-risk group for mental health and substance use problems. Increasing mental health literacy among Latina students as well as service providers, faculty, and administration may help to increase detection and receipt of appropriate treatment for mental health and substance use problems. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Dissertation Abstract
Subject Headings: *At Risk Populations
*Drug Abuse
*Health Care Utilization
*Mental Health
"*Latinos/Latinas"
College Students
Mental Disorders
Needs Assessment

Source: PsycINFO

10. The effectiveness of alternative sentencing measured by predictors of relapse.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2012, vol./is. 72/12-B(7696), 0419-4217 (2012)

Author(s): Robbins, Danielle
Institution: Robbins, Danielle: Alliant International U.
Language: English

Abstract: Little is known about the relationship between predictors of substance abuse relapse and alternative sentencing programs. This study was designed to determine whether there exists a connection between four predictor variables: religious beliefs, social support, sensation seeking, mental health history, namely a bipolar spectrum disorder and substance abuse relapse. Data was collected from an alternative sentencing program in the Los Angeles area. Participants included men and women ages 23-51 who had received alternative sentencing in lieu of incarceration. All participants had a history of at least one substance abuse offense and were enrolled in a substance abuse treatment program. Participants' scores on the Religiosity Measure Questionnaire, the Multidimensional Scale of Perceived Social Support, the Sensation Seeking Scale - Form V, and the Mood Disorder Questionnaire were compared using a binary logistic regression analysis to determine whether there was a significant relationship between the four predictor variables and substance abuse relapse. The results were not statistically significant when relapse was compared to religious beliefs, social support, sensation seeking, and mental health history, namely a bipolar spectrum disorder. There was also no significant relationship found between the four predictors when analyzed individually to predict substance abuse relapse. Additional research is needed to determine how the predictor variables interact with each other over longer periods of time. In addition, future studies may want to investigate whether motivation to abstain from relapse and complete treatment is indeed a potential mediator in determining substance abuse relapse. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
11. Latino/a adolescent substance use: Problems and treatments.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2012, vol./is. 72/12-B(7700), 0419-4217 (2012)

Author(s): Tafoya, Cindy

Institution: Tafoya, Cindy: Alliant International U.

Language: English

Abstract: The numbers of individuals diagnosed with substance abuse and dependence has increased significantly, leaving millions of Americans affected by substance abuse disorders annually. Although many aspects of substance abuse have received attention from the mental health community, little research has been dedicated to substance use and abuse by Latino/a adolescents. As a result, many adolescents come to treatment but later drop out due to the lack of connection between the professional and the youth. A comprehensive literature review was created from the present research. The comprehensive literature review titled, "Latino/a Adolescent Substance Use: Problems and Treatments," provides clinicians with information about appropriate treatments for Latino/a adolescents affected by substance use and abuse. Additional sections were added addressing theories on adolescence, definitions of substance use, Latino/a cultural constructs, and Latino/a identity models. Implications and treatment considerations were also included to encourage psychologists in the field to create and put into place treatment modalities and interventions to help Latino/a adolescents and their families abstain and reduce harm when using substances. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: *Drug Abuse
"*Latinos/Latinas"
Adolescent Attitudes
Drug Rehabilitation


Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2012, vol./is. 72/12-B(7734), 0419-4217 (2012)

Author(s): Sage, Sandi

Institution: Sage, Sandi: The Florida State U.

Language: English

Abstract: Young adults, age 18-30 years are in the highest risk group for developing substance use disorders (SUDs) and these disorders are associated with a myriad of negative consequences. Researchers in the field of psychology studying SUDs and personality variables have determined that specific personality traits tend to be associated with and affect the type and severity of SUDs. There appear to be 2 clusters of substance abusers: those high in Psychoticism or "P" traits such as impulsivity, sensation-seeking, disinhibition, anti-social behaviors and those high in Neuroticism or "N" traits such as internalizing, depressive tendencies, negative views and anxiety. The Addiction Prone Personality scale (APP) (Barnes et al., 2000) was developed as a measure of personality vulnerability to SUDs. Given that the APP is a relatively new scale and that the research is limited, further research investigating the scale's psychometric properties seems justified. The present study examined the construct validity of the APP with 5 sub-validity studies to examine internal consistency/reliability, factor validity, convergent validity, incremental validity, and criterion validity. This study employed a young adult population, ages 18-30, drawn from two samples: a college student sample and a clinical sample of DUI offenders referred for assessment and psycho-educational treatment.
Results were mixed in that the APP demonstrated strong internal consistency with the clinical group, but weak internal consistency for the student and combined groups. The factor analysis of the APP revealed three underlying subscales which measure constructs consistent with previous research. However, there was no underlying unidimensional scale. Therefore the total score is impossible to interpret. Further, while the APP had moderate convergent validity with the SASSI-3, there was no significant incremental or discriminant validity with these samples using the SASSI-3. Given the limited psychometric properties, the results suggest that the APP in its present form would not be appropriate for use with individuals in predicting addiction proneness. The results are discussed in terms of previous research and recommendations for future research into the construct of addiction proneness are offered. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: *Addiction
*Personality Measures
*Psychometrics
*Test Reliability
*Test Validity

Source: PsycINFO

13. A qualitative look at a group of individuals with ADHD and a co-morbid substance use disorder.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2012, vol./is. 72/12-B(7703), 0419-4217 (2012)

Author(s): West, Richard D


Language: English

Abstract: Attention-deficit/hyperactively disorder (ADHD) is one of the most widely diagnosed mental disorders of childhood (Molina & Pelham, 2003). Moreover, an increasing number of people who have ADHD are also exhibiting signs of comorbid substance abuse disorders (Biederman, 2004). As this unique cohort appears, it is becoming more of a strain on those treating these individuals, both in understanding the subtleties of making an accurate diagnosis and in implementing an effective treatment plan. Interestingly enough, however, some individuals who have been diagnosed with ADHD seem to find ways in which to not only cope with the unique stressors of such a diagnosis but to excel in their lives. One of the main purposes of this study will be to evaluate the lives and the histories of those who have both struggled and excelled with both ADHD and substance abuse in hopes to better understand how clinicians may be more effective in both diagnosing and treating those individuals. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Dissertation Abstract

Subject Headings: *Attention Deficit Disorder with Hyperactivity
*Comorbidity
*Diagnosis
*Drug Abuse
*Mental Disorders

Source: PsycINFO

14. Comparison of the MMPI-2 and MMPI-2-RF personality profiles of sex addicts.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2012, vol./is. 72/12-B(7699), 0419-4217 (2012)

Author(s): Strenger, Regina

Institution: Strenger, Regina: Alliant International U, San Diego

Language: English
Abstract: The study examined the T scores on the Validity, Clinical, RC, and Addiction scales on the MMPI-2 and MMPI-2-RF to gain a better understanding of personality and psychological symptoms among sex addicts and to determine whether the RC scales would have lower scale elevations when compared to the Clinical scales. The first hypothesis predicted that none of the scales would be clinically elevated at or above a T score of 65; the second predicted that the Clinical scales would have higher scale elevations than the RC scales. Comparisons were Scale 2 to RC-2, Scale 4 to RC-4, Scale 7 to RC-7, Scale 8 to RC-8, and Scale 9 to RC-9. Descriptive statistics calculated mean T scores for both the MMPI-2 and MMPI-2-RF; two-tailed t tests compared means between Clinical and RC scales. In an exploratory analysis, descriptive statistics calculated the Validity scales on MMPI-2 and MMPI-2-RF. One way ANOVAS compared the means of the Validity scales and the remaining scales. No clinical elevations at or above a T score of 65 on any of the scales were found. Significant differences were found at the p<.05 level in the predicted direction on Scale 1, Scale 2, Scale 4, Scale 7, Scale 8, TRIN, and K. Results indicated (a) psychological symptoms as indicated on the MMPI may not be a significant factor in determining a sexual addiction, (b) moderate elevations on certain scales should be noted in relation to a sexual addiction, (c) sex addicts manifest symptoms differently on Clinical scales than on RC scales, although results are inconclusive as more research is needed, and (d) the Validity scales on the MMPI-2 seem to determine a test-taker's ability just as well as the Validity scales on the MMPI-2-RF. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Dissertation Abstract
Subject Headings: *Minnesota Multiphasic Personality Inventory
*Personality Traits
*Psychometrics
*Sexual Addiction
*Symptoms
Source: PsycINFO

15. Effectiveness of a motivational enhancement group treatment in a community treatment program with a substance abusing population.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2012, vol./is. 72/12-B(7703), 0419-4217 (2012)
Author(s): Willerick, Matthew S
Institution: Willerick, Matthew S.: Western Michigan U.
Language: English
Abstract: Motivational interviewing (MI) is a directive, client-centered intervention to elicit behavior change by assisting clients in the exploration and resolution of ambivalence toward change. MI-inspired approaches have been used in an attempt to facilitate change in a wide variety of domains including alcohol and drug abuse, safe water handling practices, dual diagnoses, gambling, spousal abuse, health related areas, mood and anxiety disorders, and parental engagement. MI seeks to resolve ambivalence in the direction of change by increasing the client's self-efficacy. This is accomplished by combining client-centered (e.g., reflective listening) and directive strategies (e.g., attending selectively to change statements). The origins of MI are in the substance abuse field where it provided an alternative to harsher strategies among a population that is often described as treatment resistant. The goal of the current study was to assess the effectiveness of motivational enhancement therapy applied in a group setting in a community substance abuse treatment agency. Group treatment involved eight sessions, each lasting 90 minutes, focused on the following topics: lifestyles, stages of change, ambivalence surrounding change, developing discrepancy, pros and cons of changing, values, self-efficacy, and planning for change. Self-report measures from 82 individuals (70.7% male, mean age of 31) who received treatment were analyzed to determine what impact the treatment had on current substance use, self-efficacy, ambivalence toward a change in use, and the presence of change talk. Participants did not report a significant decrease in their substance use during the treatment, but the results approached a
significant trend suggestive of decreased use. In addition, no statistically significant changes in participants' self-reported readiness to change or in their self-efficacy were observed. However, a statistically significant increase in change oriented talk was observed. Specifically, results suggested an increase in statements indicating a desire and intention to decrease substance use. This uncontrolled effectiveness study of a motivational enhancement intervention in a community substance abuse clinic produced mixed results. The implications for the practice of motivational enhancement interventions in the community, the place of these data in the empirical literature, and how the findings fit with the theorized mechanisms of action are discussed. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

**Publication Type:** Dissertation Abstract  
**Subject Headings:** *Community Services  
*Drug Abuse  
*Drug Therapy  
*Group Psychotherapy  
*Motivational Interviewing  
*Treatment

**Source:** PsycINFO


**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2012, vol./is. 72/12-B(7196), 0419-4217 (2012)

**Author(s):** Arif, Muhammad  
**Institution:** Arif, Muhammad: U Lethbridge  
**Language:** English

**Abstract:** The influence of experience during brain development was investigated on juvenile behavior, adult amphetamine sensitization, and neuronal structural plasticity in rats. Two experiential factors (i.e., tactile stimulation and stress) were studied either before or soon after birth. Early experience feminized social behavior in males; however, only stress enhanced anxiety-like behavior in males. Repeated amphetamine administration resulted in the development and persistence of behavioral sensitization. However, tactile stimulation attenuated the drug-induced behavioral sensitization whereas stress failed to influence the degree of sensitization. Neuroanatomical findings revealed that early experience altered the cortical and subcortical structures. Furthermore, drug exposure reorganized the brain structures involved in addiction but early experience prevented the drug-associated changes. Early adverse experience influences the subsequent exposure to a drug of abuse at anatomical level whereas a favorable experience has an effect both at behavioral and anatomical levels and thus may play a protective role against drug-induced sensitization and addiction. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

**Publication Type:** Dissertation Abstract  
**Subject Headings:** *Amphetamine  
*Drug Abuse  
*Neural Plasticity  
*Sensitization  
*Rats

**Source:** PsycINFO

17. An immediate survival focus: Linking substance abuse, fight, flight, and prosocial behavior.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2012, vol./is. 72/12-B(7720), 0419-4217 (2012)

**Author(s):** Richardson, George B  
**Institution:** Richardson, George B.: U Louisville
In the United States substance abuse takes a toll that is costly in both economic and human terms. In 2005 we paid 467.7 billion dollars to address the consequences of substance abuse, and each year we have lost an estimated 537,000 of our fellows to substance abuse related causes. It is important that we identify and intervene upon the mechanisms translating risk factors for substance abuse into the related behaviors. This study synthesized life history theory and dual process models of cognition to produce an adaptive and cognitive framework for explaining substance abuse. An immediate survival focus was proposed as a construct representing reliance on implicit cognitive processing for the purpose of quick evaluation and short-term strategy use in dangerous or unpredictable environments. This immediate survival focus was suggested as contributing to false positives in the detection of resources and threats critical to survival (i.e., irrational beliefs), and thus vulnerability to substance abuse. This study tested for an immediate survival focus and produced results consistent with the existence of the construct. A factor theorized to represent the ISF was extracted from constructs known to rely on implicit cognitive processing, and this factor was positively associated with both substance abuse and neighborhood danger, as predicted by the adaptive and cognitive framework advanced. In addition, this construct was negatively associated with prosocial behavior, which is known to operate to the relative exclusion of implicit cognitive processes. The strength of the relationships between the ISF and the study’s constructs was substantial for both sexes, though its relative importance to substance abuse was less for females. For the sample as a whole, the ISF accounted for 38% of the variance in substance abuse, therefore representing an important construct in efforts to learn about, treat, and prevent substance abuse. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

18. The relationship between alcohol/cannabis use and symptom profile and progression in individuals at risk for psychosis.

Alcohol and cannabis are the most commonly used substances among persons with schizophrenia and other psychotic disorders and often associated with a poorer prognosis. Recent research indicates that better social functioning and fewer negative symptoms are associated with alcohol use early in the course of the illness, however, worse negative and positive symptoms are often found later. A mounting body of evidence suggests that cannabis use appears to confer increased risk of psychosis. Furthermore, research suggests that poorer outcome, including more hospitalizations and lower functioning scores, as well as worse positive symptoms and greater overall severity of illness is associated with cannabis dependence and abuse. There is a dearth of prospective studies examining the relation between alcohol and cannabis use in individuals designated as prodromal based on the presence of subclinical psychotic symptoms. Furthermore, there are no published reports on the independent and/or interactive effect of these substances. The current study extends the literature by examining the association of symptom profile and progression with varying levels of alcohol and cannabis use in a putatively prodromal sample. Participants were recruited at eight study sites as part of the North American Prodrome Longitudinal Study. Participants with symptom and substance use data at baseline were examined for an association between current symptom severity and

Citation:

Author(s):
Larson, Molly K

Institution:
Larson, Molly K.: Emory U.

Language:
English

Abstract:
Alcohol and cannabis are the most commonly used substances among persons with schizophrenia and other psychotic disorders and often associated with a poorer prognosis. Recent research indicates that better social functioning and fewer negative symptoms are associated with alcohol use early in the course of the illness, however, worse negative and positive symptoms are often found later. A mounting body of evidence suggests that cannabis use appears to confer increased risk of psychosis. Furthermore, research suggests that poorer outcome, including more hospitalizations and lower functioning scores, as well as worse positive symptoms and greater overall severity of illness is associated with cannabis dependence and abuse. There is a dearth of prospective studies examining the relation between alcohol and cannabis use in individuals designated as prodromal based on the presence of subclinical psychotic symptoms. Furthermore, there are no published reports on the independent and/or interactive effect of these substances. The current study extends the literature by examining the association of symptom profile and progression with varying levels of alcohol and cannabis use in a putatively prodromal sample. Participants were recruited at eight study sites as part of the North American Prodrome Longitudinal Study. Participants with symptom and substance use data at baseline were examined for an association between current symptom severity and
substance use. Participants with both baseline and six-month follow-up data were examined for the relation between substance use at baseline and symptom severity at follow-up. An interactive effect of these substances on symptom severity at baseline was found. Less severe negative symptoms are associated with moderate alcohol use and abstinence from cannabis. In contrast, those who report no alcohol use, or alcohol abuse/dependence and cannabis use, showed more severe negative symptoms. More severe positive symptoms are associated with increased levels of cannabis and alcohol use. No significant results were found for the association between substance use and symptom progression. These findings point to the importance of jointly examining the effects of substances that have a high rate of co-occurrence, in that interactive and independent effects are elucidated. The results are discussed in the context of potential mechanisms. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** *Alcohols*  
*At Risk Populations*  
*Cannabis*  
*Drug Abuse*  
*Psychosis*  
Prodrome  
Symptoms

**Source:** PsycINFO

19. **The effects of behavioral inhibition/approach system as predictors of internet addiction in adolescents.**

**Citation:** Personality and Individual Differences, August 2012(No Pagination Specified), 0191-8869 (Aug 20, 2012)

**Author(s):** Park, Su Mi; Park, Yoon A; Lee, Hae Woo; Jung, Hee Yeon; Lee, Jun-Young; Choi, Jung-Seok

**Abstract:** This study aimed to determine how the Behavioral Inhibition System (BIS) and the Behavioral Approach System (BAS) affect Internet addiction in adolescents. Two hundred and eleven high school students participated in this study and completed the Young's Internet Addiction Test (IAT), BIS/BAS scales, and several self-administered questionnaires about depression, anxiety, and impulsivity. Hierarchical regressions showed that BIS and BASxBIS emerged as significant predictors of IAT; however, only BAS-fun seeking subscale predicted IAT among BAS related subscales. In further analyses, the BAS-fun seeking subscale was mediated by impulsivity and anxiety, and BIS was mediated by anxiety and depression. The current findings imply that BIS and BAS interdependently influence vulnerability to Internet addiction through both shared (anxiety) and different (depression and impulsivity, respectively) pathways. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** Journal; Peer Reviewed Journal

**Source:** PsycINFO

20. **Striatal d2/d3 receptor availability is inversely correlated with cannabis consumption in chronic marijuana users.**

**Citation:** Drug and Alcohol Dependence, August 2012(No Pagination Specified), 0376-8716 (Aug 18, 2012)

**Author(s):** Albrecht, Daniel S; Skosnik, Patrick D; Vollmer, Jennifer M; Brumbaugh, Margaret S; Perry, Kevin M; Mock, Bruce H; Zheng, Qi-Huang; Federici, Lauren A; Patton, Elizabeth A; Herring, Christine M; Yoder, Karmen K

**Abstract:** BACKGROUND: Although the incidence of cannabis abuse/dependence in Americans is rising, the neurobiology of cannabis addiction is not well understood. Imaging studies have demonstrated deficits in striatal D2/D3 receptor availability in several substance-dependent populations. However, this has not been studied in currently using chronic cannabis users. OBJECTIVE: The purpose of this study was to compare striatal
D2/D3 receptor availability between currently using chronic cannabis users and healthy controls. METHODS: Eighteen right-handed males age 18-34 were studied. Ten subjects were chronic cannabis users; eight were demographically matched controls. Subjects underwent a [11C]raclopride (RAC) PET scan. Striatal RAC binding potential (BPND) was calculated on a voxel-wise basis. Prior to scanning, urine samples were obtained from cannabis users for quantification of urine -9-tetrahydrocannabinol (THC) and THC metabolites (11-nor-9-THC-9-carboxylic acid; THC-COOH and 11-hydroxy-THC;OH-THC). RESULTS: There were no differences in D2/D3 receptor availability between cannabis users and controls. Voxel-wise analyses revealed that RAC BPND values were negatively associated with both urine levels of cannabis metabolites and self-report of recent cannabis consumption. CONCLUSIONS: In this sample, current cannabis use was not associated with deficits in striatal D2/D3 receptor availability. There was an inverse relationship between chronic cannabis use and striatal RAC BPND. Additional studies are needed to identify the neurochemical consequences of chronic cannabis use on the dopamine system. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings:
Source: PsycINFO


Citation: Biological Psychiatry, August 2012(No Pagination Specified), 0006-3223 (Aug 17, 2012)
Author(s): Kosten, Thomas R; Wu, Guiying; Huang, Wen; Harding, Mark J; Hamon, Sara C; Lappalainen, Jaakko; Nielsen, David A
Abstract: BACKGROUND: Disulfiram has been an effective cocaine addiction pharmacotherapy, and one of its possible mechanisms of efficacy is through copper chelation and inhibition of an enzyme involved in catecholamine metabolism, dopamine -hydroxylase (DH), which converts dopamine to norepinephrine. A variant in the gene encoding DH leads to reduced DH activity, and as such, disulfiram might not be an effective treatment of cocaine dependence for individuals with this variant. This study explored that potential matching. METHODS: Seventy-four cocaine- and opioid-codependent (DSM-V) subjects were stabilized on methadone for 2 weeks and subsequently randomized into disulfiram (250 mg/day, n = 34) and placebo groups (n = 40) for 10 weeks. We genotyped the DBH gene polymorphism, -1021C/T (rs1611115), that reduces DH enzyme levels and evaluated its role for increasing cocaine free urines with disulfiram. RESULTS: With repeated measures analysis of variance, corrected for population structure, disulfiram pharmacotherapy reduced cocaine-positive urines from 80% to 62% (p = .0001), and this disulfiram efficacy differed by DBH genotype group. Patients with the normal DH level genotype dropped from 84% to 56% on disulfiram (p = .0001), whereas those with the low DBH level genotype showed no disulfiram effect. CONCLUSIONS: This study indicates that the DBH genotype of a patient could be used to identify a subset of individuals for which disulfiram treatment might be an effective pharmacotherapy for cocaine dependence. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings:
Source: PsycINFO

22. Health-related quality of life in primary care patients with mental disorders: Results from the PRIME-MD 1000 Study.

Citation: JAMA: Journal of the American Medical Association, November 1995, vol./is. 274/19(1511-1517), 0098-7484 (Nov 15, 1995)
Author(s): Spitzer, Robert L; Kroenke, Kurt; Linzer, Mark; Hahn, Steven R; Williams, Janet B. W; deGruy, Frank Verloin III; Brody, David; Davies, Mark
Objective.-To determine if different mental disorders commonly seen in primary care are uniquely associated with distinctive patterns of impairment in the components of health-related quality of life (HRQL) and how this compares with the impairment seen in common medical disorders. Design.-Survey. Setting.-Four primary care clinics. Subjects.-A total of 1000 adult patients (369 selected by convenience and 631 selected by site-specific methods to avoid sampling bias) assessed by 31 primary care physicians using PRIME-MD (Primary Care Evaluation of Mental Disorders) to make diagnoses of mood, anxiety, alcohol, somatoform, and eating disorders. Main Outcome Measures.-The six scales of the Short-Form General Health Survey and self-reported disability days, adjusting for demographic variables as well as psychiatric and medical comorbidity. Results.-Mood, anxiety, somatoform, and eating disorders were associated with substantial impairment in HRQL. Impairment was also present in patients who only had subthreshold mental disorder diagnoses, such as minor depression and anxiety disorder not otherwise specified. Mental disorders, particularly mood disorders, accounted for considerably more of the impairment on all domains of HRQL than did common medical disorders. Finally, we found marked differences in the pattern of impairment among different groups of mental disorders just as others have reported unique patterns associated with different medical disorders. Whereas mood disorders had a pervasive effect on all domains of HRQL, anxiety, somatoform, and eating disorders affected only selected domains. Conclusions.-Mental disorders commonly seen in primary care are not only associated with more impairment in HRQL than common medical disorders, but also have distinct patterns of impairment. Primary care directed at improving HRQL needs to focus on the recognition and treatment of common mental disorders. Outcomes studies of mental disorders in both primary care and psychiatric settings should include multidimensional measures of HRQL (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
Background: RGS17 and RGS20 encode two members of the regulator of G-protein signaling RGS-Rz subfamily. Variation in these genes may alter their transcription and thereby influence the function of G protein-coupled receptors, including opioid receptors, and modify risk for substance dependence. Methods: The association of 13 RGS17 and eight RGS20 tag single nucleotide polymorphisms (SNPs) was examined with four substance dependence diagnoses (alcohol (AD), cocaine (CD), opioid (OD) or marijuana (MjD)) in 1,905 African Americans (AAs: 1,562 cases and 343 controls) and 1,332 European Americans (EAs: 981 cases and 351 controls). Analyses were performed using both tests and logistic regression analyses that covaried sex, age, and ancestry proportion. Correlation of genotypes and mRNA expression levels was assessed by linear regression analyses. Results: Seven RGS17 SNPs showed a significant association with at least one of the four dependence traits after a permutation-based correction for multiple testing (0.003 ≤ P_{empirical} ≤ 0.037). The G allele of SNP rs596359, in the RGS17 promoter region, was associated with AD, CD, OD, or MjD in both populations (0.005 ≤ P_{empirical} ≤ 0.019). This allele was also associated with significantly lower mRNA expression levels of RGS17 in YRI subjects (P = 0.002) and non-significantly lower mRNA expression levels of RGS17 in CEU subjects (P = 0.185). No RGS20 SNPs were associated with any of the four dependence traits in either population. Conclusions: This study demonstrated that variation in RGS17 was associated with risk for substance dependence diagnoses in both AA and EA populations. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
Institution: Loizzo, Joe: Nalanda Institute for Contemplative Sciences
Language: English
Abstract: (from the cover) Today's greatest health challenges, the so-called diseases of civilization-trauma, depression, obesity, cancer-are now known in large part to reflect our inability to tame stress reflexes gone wild and to empower instead the peaceful, healing and sociable part of our nature that adapts us to civilized life. The same can be said of the economic challenges posed by the stress-reactive cycles of boom and bust, driven by addictive greed and compulsive panic. As current research opens up new horizons of stress-cessation, empathic intelligence, peak performance, and shared happiness, it has also encountered Asian methods of self-healing and interdependence more effective and teachable than any known in the West. Sustainable Happiness is the first book to make Asia's most rigorous and complete system of contemplative living, hidden for centuries in Tibet, accessible to help us all on our shared journey towards sustainable well-being, altruism, inspiration, and happiness. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Book; Authored Book
Subject Headings: *Altruism
*Happiness
*Mind
*Well Being
*Mindfulness
Buddhism
Meditation
Society
Stress
Stress Management
Civilization

Source: PsycINFO

25. HIV/AIDS response renovated in capital.

Citation: Science, July 2012, vol./is. 337/6091(182), 0036-8075 (Jul 13, 2012)
Author(s): Cohen, Jon
Language: English
Abstract: Seven years ago, a public-policy nonprofit called DC Appleseed issued a scathing report about the sorry state of the response to HIV/AIDS in the nation's capital, which it said "lags far behind that of many other cities across the nation." The report called the epidemic in this city of 600,000 people a "public health crisis" and faulted the government for its fragmented leadership, marginal attempts to distribute condoms, weak programs for people with substance-abuse problems, and nonexistent surveillance data. Although D.C. remains among the hardest-hit cities in the nation, the nonprofit's most recent report says it "has made steady and significant improvements in its overall response to HIV/ AIDS." According to the 2011 annual report from D.C.'s Department of Health, newly diagnosed infections in general dropped by nearly 24% between 2006 and 2010, and the decrease was 71% in injecting drug users. Other recent improvements include chlamydia and gonorrhea cases leveling off, AIDS deaths decreasing, and people learning of their infections at an earlier stage of the disease when they are easier to treat. The city also has more HIV/AIDS research projects under way than ever before, including a massive study funded by the U.S. National and providers. It is also concluded that public-private partnerships really did help us get a different level of technical support that was required to build this program from scratch. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *AIDS
*Drug Abuse
*Epidemics
26. My virus is your virus.

Citation: Science, July 2012, vol./is. 337/6091(177-178), 0036-8075 (Jul 13, 2012)
Author(s): Cohen, Jon
Language: English
Abstract: The Tijuana river canal, a concrete edifice that abuts the Mexican side of the border here, has a sidewalk along its upper ridge that sports a view of what to many locals represents both heaven and hell. Men gather in clumps along the sidewalk, putting lighters to spoons that hold the local heroin known as black tar, burning off the impurities in this version of the opiate. They cook and inject openly, despite the border guards on the San Diego side, who, stationed on a hill in an SUV to deter fence jumpers, watch them through binoculars. Some of the heavily tattooed men have ink on their faces, and several wear syringes balanced behind their ears like pencils. But when they see Susi Leal, a health promoter who stopped shooting up herself 12 years ago, they smile wide, and there is nothing unsettling about them at all. Leal works with a U.S.-government-funded HIV/AIDS research study in which these men are participating, and it has shown how readily the virus makes a mockery of the border and creates one regional epidemic. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *AIDS
*Drug Abuse
*Health Promotion
*Heroin
*HIV
Opiates
Source: PsycINFO

27. Shaping the renaissance of psychedelic research.

Citation: The Lancet, July 2012, vol./is. 380/9838(200-201), 0140-6736 (Jul 21, 2012)
Author(s): Sessa, Ben
Correspondence Address: Sessa, Ben: CAMHS Team, Foundation House, Wellsprings Road, Taunton, United Kingdom, TA2 7PQ, bensessa@gmail.com
Institution: Sessa, Ben: CAMHS Team, Foundation House, Taunton
Language: English
Abstract: Psychedelic drugs have a rich and vibrant history as clinical aids for psychiatry. For two decades after the discovery of lysergide (LSD) in the 1940s, psychedelics were extensively studied and clinical progress was good. With information from functional neuroimaging and reassessment of the harm and safety profiles of psychedelic drugs, there is a strong commitment to get research into psychedelics right this time around, by undertaking meticulously planned randomized, controlled, double-blind studies, in contrast to the anecdotal studies of the 1960s. Further work investigating psilocybin as a potential new treatment for nicotine addiction and depression is underway, and the psychedelic drug ibogaine is increasingly being applied in the treatment of opiate, alcohol, and methamphetamine addictions. Doctors in the specialty of psychiatry recognize that research with psychedelic compounds is controversial. We must learn from both the successes and mistakes of the 1960s. We have gained some useful information from those early studies, and disregarding entirely the unique transpersonal approach of psychedelic therapy is not the answer. But new treatments must be framed in a modern context, be relevant to today's therapeutic culture, and must avoid the pitfalls of the past by
separating the therapeutic uses of these drugs from their historical recreational misuse. (PsycINFO Database Record (c) 2012 APA, all rights reserved)


Citation: PsycCRITIQUES, 2012, vol./is. 57/34(No Pagination Specified), 1554-0138 (2012)
Author(s): Turkheimer, Eric
Language: English
Abstract: Reviews the book, A Lethal Inheritance: A Mother Uncovers the Science Behind Three Generations of Mental Illness by Victoria Costello (see record 2011-23932-000). First, this book is a memoir of the author's own depression, the psychosis of her first-born son and the anxiety and depression of her second, the addiction and death of her sister, her father's alcoholism, and her grandfather's suicide. These stories are told candidly and without sentimentality, despite the almost-unimaginable suffering that is recounted, particularly as she watches her boys struggle, deteriorate, and finally decompensate. But A Lethal Inheritance is not just the history of a family; it is also literally a family history in the psychiatric sense. Costello views her own problems, as well as those of her forebears and offspring, through the lens of scientific psychology and psychiatry. Although reading this book will leave the uninformed reader with the impression that scientists are successfully diagnosing individual patients with brain images, biomarkers, and genetic testing, and then designing specific treatments with biologically targeted drugs, it isn't true. However, the more similar people are genetically, the more similar they are in every other way, for every biological and psychological outcome we can imagine; every behavioral difference among people is represented, one way or another, in their brains. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

29. Role of IKK/NF-B signaling in extinction of conditioned place aversion memory in rats.

Citation: PLoS ONE, June 2012, vol./is. 7/6, 1932-6203 (Jun 26, 2012)
Author(s): Yang, Cheng-Hao; Liu, Xiang-Ming; Si, Ji-Jian; Shi, Hai-Shui; Xue, Yan-Xue; Liu, Jian-Feng; Luo, Yi- Xiao; Chen, Chen; Li, Peng; Yang, Jian-Li; Wu, Ping; Lu, Lin
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on Drug Dependence, Peking University, Beijing; Xue, Yan-Xue: National Institute on Drug Dependence, Peking University, Beijing; Liu, Jian-Feng: National Institute on Drug Dependence, Peking University, Beijing; Luo, Yi-Xiao: National Institute on Drug Dependence, Peking University, Beijing; Chen, Chen: National Institute on Drug Dependence, Peking University, Beijing; Li, Peng: National Institute on Drug Dependence, Peking University, Beijing; Yang, Jian-Li: Tianjin Institute of Mental Health, Tianjin Mental Health Center, Tianjin; Wu, Ping: National Institute on Drug Dependence, Peking University, Beijing; Lu, Lin: National Institute on Drug Dependence, Peking University, Beijing

Language: English

Abstract: The inhibitor kB protein kinase/nuclear factor kB (IKK/NF-kB) signaling pathway is critical for synaptic plasticity. However, the role of IKK/NF-kB in drug withdrawal-associated conditioned place aversion (CPA) memory is unknown. Here, we showed that inhibition of IKK/NF-kB by sulphasalazine (SSZ; 10 mM, i.c.v.) selectively blocked the extinction but not acquisition or expression of morphine-induced CPA in rats. The blockade of CPA extinction induced by SSZ was abolished by sodium butyrate, an inhibitor of histone deacetylase. Thus, the IKK/NF-kB signaling pathway might play a critical role in the extinction of morphine-induced CPA in rats and might be a potential pharmacotherapy target for opiate addiction. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Yang et al; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Aversion
*Kinases
*Morphine
*Place Conditioning
Memory
Rats

Source: PsycINFO

Full Text: Available in fulltext at National Library of Medicine

30. Histamine H3 receptor: A novel therapeutic target in alcohol dependence?

Citation: Frontiers in Systems Neuroscience, May 2012, vol./is. 6/, 1662-5137 (May 18, 2012)

Author(s): Nuutinen, Saara; Vanhanen, Jenni; Maki, Tiia; Panula, Pertti

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Institution: Nuutinen, Saara: Neuroscience Center, Institute of Biomedicine, Anatomy, Faculty of Medicine, University of Helsinki, Helsinki; Vanhanen, Jenni: Neuroscience Center, Institute of Biomedicine, Anatomy, Faculty of Medicine, University of Helsinki, Helsinki; Maki, Tiia: Neuroscience Center, Institute of Biomedicine, Anatomy, Faculty of Medicine, University of Helsinki, Helsinki; Panula, Pertti: Neuroscience Center, Institute of Biomedicine, Anatomy, Faculty of Medicine, University of Helsinki, Helsinki

Language: English

Abstract: The brain histaminergic system is one of the diffuse modulatory neurotransmitter systems which regulate neuronal activity in many brain areas. Studies on both rats and mice indicate that histamine H3 receptor antagonists decrease alcohol drinking in several models, like operant alcohol administration and drinking in the dark paradigm. Alcohol-induced place preference is also affected by these drugs. Moreover, mice lacking H3R do not drink alcohol like their wild type littermates, and they do not show alcohol-induced place preference. Although the mechanisms of these behaviors are still being investigated, we propose that H3R antagonists are promising candidates for use in human alcoholics, as these drugs are already tested for treatment of other disorders like...
narcolepsy and sleep disorders. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Nuutinen, Vanhanen, Maki and Panula; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcohol Drinking Patterns
*Histamine
*Neural Receptors
*Neurotransmitters
Alcoholism
Source: PsycINFO
Full Text: Available in fulltext at National Library of Medicine


Citation: The New England Journal of Medicine, July 2012, vol./is. 367/2(187-189), 0028-4793;1533-4406 (Jul 12, 2012)
Author(s): Cicero, TheodoreJ; Ellis, Matthew S; Surratt, Hilary L
Correspondence Address: Cicero, TheodoreJ., cicerot@wustl.edu
Institution: Cicero, TheodoreJ.: Washington University, St. Louis, MO; Ellis, Matthew S.: Washington University in St. Louis, St. Louis, MO; Surratt, Hilary L.: Nova Southeastern University, Coral Gables, FL
Language: English
Abstract: In August 2010, an abuse-deterrent formulation of the widely abused prescription opioid OxyContin was introduced. The intent was to make OxyContin more difficult to solubilize or crush, thus discouraging abuse through injection and inhalation. This article examined the effect of the abuse-deterrent formulation on the abuse of OxyContin and other opioids. Data were collected quarterly from July 1, 2009, through March 31, 2012, with the use of self-administered surveys that were completed anonymously by independent cohorts of 2566 patients with opioid dependence. The selection of OxyContin as a primary drug of abuse decreased from 35.6% of respondents before the release of the abuse-deterrent formulation to just 12.8% 21 months later. Simultaneously, selection of hydrocodone and other oxycodone agents increased slightly, whereas for other opioids, including high-potency fentanyl and hydromorphone, selection rose markedly, from 20.1% to 32.3%. OxyContin fell from 47.4% of respondents to 30.0%, whereas heroin use nearly doubled. Data show that an abuse-deterrent formulation successfully reduced abuse of a specific drug but also generated an unanticipated outcome: replacement of the abuse-deterrent formulation with alternative opioid medications and heroin, a drug that may pose a much greater overall risk to public health than OxyContin. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: HOLDER: Massachusetts Medical Society; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Abuse
*Drug Dependency
*Drug Therapy
*Opiates
*Surveys
Patients
Source: PsycINFO
Full Text: Available in print at Newcomb Library & Information Service

32. Management of opioid analgesic overdose.

Citation: The New England Journal of Medicine, July 2012, vol./is. 367/2(146-155), 0028-4793;1533-4406 (Jul 12, 2012)
Opioid analgesic overdose is a preventable and potentially lethal condition that results from prescribing practices, inadequate understanding on the patient’s part of the risks of medication misuse, errors in drug administration, and pharmaceutical abuse. The number of opioid analgesic overdoses is proportional to the number of opioid prescriptions and the dose prescribed. Opioid analgesic overdose is a life-threatening condition, and the antidote naloxone may have limited effectiveness in patients with poisoning from long-acting agents. The unpredictable clinical course of intoxication demands empirical management of this potentially lethal condition. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

There is an increasing body of evidence that heroin addiction is associated with severe alterations in immune function, which might contribute to an increased risk to contract infectious diseases like hepatitis B and C or HIV. However, the impact of heroin consumption on the CD4+ T cell compartment is not well understood. Therefore, we analyzed the frequency and functional phenotype of CD4+ T cells as well as...
immune-suppressive CD4+CD25high regulatory T cells (Tregs) isolated from the peripheral blood of opiate addicts currently abusing heroin (n = 27) in comparison to healthy controls (n = 25) and opiate addicts currently in opioid maintenance treatment (OMT; n = 27). Interestingly, we detected a significant increase in the percentage of CD4+CD25high Tregs in the peripheral blood of heroin addicted patients in contrast to patients in OMT. The proliferative response of CD4+ T cells upon stimulation with anti-CD3 and anti-CD28 antibodies was significantly decreased in heroin users, but could be restored by depletion of CD25high regulatory T cells from CD4+ T cells to similar values as observed from healthy controls and patients in OMT. These results suggest that impaired immune responses observed in heroin users are related to the expansion of CD4+CD25high Tregs and more importantly, can be restored by OMT. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Addiction *Drug Therapy *Heroin Addiction *Lymphocytes *Methadone Maintenance

Source: PsycINFO

34. Role of intestinal permeability and inflammation in the biological and behavioral control of alcohol-dependent subjects.

Citation: Brain, Behavior, and Immunity, August 2012, vol./is. 26/6(911-918), 0889-1591 (Aug 2012)

Author(s): Leclercq, Sophie; Cani, Patrice D; Neyrinck, Audrey M; Starkel, Peter; Jamar, Francois; Mikolajczak, Moira; Delzenne, Nathalie M; de Timary, Philippe

Correspondence Address: Delzenne, Nathalie M.: Louvain Drug Research Institute, Metabolism and Nutrition Research Group, Universite Catholique de Louvain, Av. E. Mounier, 73 B1.73.11, Brussels, Belgium, B-1200, nathalie.delzenne@uclouvain.be

Institution: Leclercq, Sophie: Department of Adult Psychiatry, Universite catholique de Louvain, Brussels; Cani, Patrice D.: Louvain Drug Research Institute, Metabolism and Nutrition Research Group, Universite Catholique de Louvain, Brussels; Neyrinck, Audrey M.: Louvain Drug Research Institute, Metabolism and Nutrition Research Group, Universite Catholique de Louvain, Brussels; Starkel, Peter: Department of Gastroenterology, Universite Catholique de Louvain, Brussels; Jamar, Francois: Nuclear Medicine Department, Cliniques Universitaires Saint-Luc, Universite Catholique de Louvain, Brussels; Mikolajczak, Moira: Department of Psychology, Universite Catholique de Louvain, Louvain-la-Neuve; Delzenne, Nathalie M.: Louvain Drug Research Institute, Metabolism and Nutrition Research Group, Universite Catholique de Louvain, Brussels; de Timary, Philippe: Department of Adult Psychiatry, Universite Catholique de Louvain, Brussels

Language: English

Abstract: Background and aims: Mood and cognition alterations play a role in the motivation for alcohol-drinking. Lipopolysaccharides are known to stimulate inflammation that was shown to induce mood and cognitive changes in rodents and humans. Enhanced intestinal permeability and elevated blood LPS characterize alcohol-dependent mice. However, no data have been published in non-cirrhotic humans. Our first goal was to test whether intestinal permeability, blood LPS and cytokines are increased in non-cirrhotic alcohol-dependent subjects before withdrawal and if they recover after withdrawal. Our second goal was to test correlations between these biochemical and the behavioral variables to explore the possibility of a role for a gut-brain interaction in the development of alcohol-dependence. Methods: Forty alcohol-dependent-subjects hospitalized for a 3-week detoxification program were tested at onset (T1) and end (T2) of withdrawal and compared for biological and behavioral markers with 16 healthy subjects. Participants were assessed for gut permeability, systemic inflammation (LPS, TNF, IL-6, IL-10,
hsCRP) and for depression, anxiety, alcohol-craving and selective attention. Results: Intestinal permeability and LPS were largely increased in alcohol-dependent subjects at T1 but recovered completely at T2. A low-grade inflammation was observed at T1 that partially decreased during withdrawal. At T1, pro-inflammatory cytokines were positively correlated with craving. At T2 however, the anti-inflammatory cytokine IL-10 was negatively correlated with depression, anxiety and craving. Conclusion: Leaky gut and inflammation were observed in non-cirrhotic alcohol-dependent subjects and inflammation was correlated to depression and alcohol-craving. This suggests that the gut-brain axis may play a role in the pathogenesis of alcohol-dependence. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcoholism
*Cytokines
*Inflammation
*Lipopolysaccharide
Source: PsycINFO

35. Melanin-concentrating hormone receptor 1 (MCH1-R) antagonism: Reduced appetite for calories and suppression of addictive-like behaviors.

Citation: Pharmacology, Biochemistry and Behavior, September 2012, vol./is. 102/3(400-406), 0091-3057 (Sep 2012)
Author(s): Karlsson, Camilla; Zook, Michelle; Ciccocioppo, Roberto; Gehlert, Donald R; Thorsell, Annika; Heilig, Markus; Cippitelli, Andrea
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Language: English
Abstract: Rationale: The hypothalamic neuropeptide melanin-concentrating hormone and its MCH1 receptor have been implicated in regulation of feeding and energy homeostasis, as well as modulation of reward-related behaviors. Here, we examined whether the MCH system plays a role both in caloric and motivational aspects of sugar intake. Materials and methods: The non-peptide MCH1-R antagonist GW803430 (3, 10, 30 mg/kg, i.p.) was first tested on self-administration under a fixed ratio schedule of reinforcement of both a caloric (10% w/v sucrose) and a non-caloric (0.06% w/v saccharin) sweet solution. GW803430 was then tested for its ability to alter motivational properties and seeking of sucrose. Lastly, the drug was tested to concurrently examine its effects on the escalated consumption of both sugar and food in animals following intermittent sugar access. Results: The MCH1-R antagonist reduced sucrose- but not saccharin-reinforced lever pressing, likely reflecting a decreased appetite for calories in GW803430-treated rats. GW803430 reduced sucrose self-administration under a progressive ratio schedule, and suppressed cue-induced reinstatement of sucrose seeking, suggesting effects on rewarding properties of sucrose. GW803430 attenuated food intake in rats on intermittent access to sucrose at all doses examined (3, 10, 30 mg/kg), while reduction of sugar intake was
weaker in magnitude. Conclusion: Together, these observations support an involvement of the MCH system in regulation of energy balance as well as mediation of sucrose reward. MCH may be an important regulator of sugar intake by acting on both caloric and rewarding components. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Addiction *Animal Motivation *Melanin *Neuropeptides *Reinstatement Calories Drugs Neural Receptors Rats

Source: PsycINFO

36. Improving quality of care in substance abuse treatment using five key process improvement principles.

Citation: The Journal of Behavioral Health Services & Research, July 2012, vol./is. 39/3(234-244), 1094-3412 (Jul 2012)

Author(s): Hoffman, Kim A; Green, Carla A; Ford, James H II; Wisdom, Jennifer P; Gustafson, David H; McCarty, Dennis

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Language: English

Abstract: Process and quality improvement techniques have been successfully applied in health care arenas, but efforts to institute these strategies in alcohol and drug treatment are underdeveloped. The Network for the Improvement of Addiction Treatment (NIATx) teaches participating substance abuse treatment agencies to use process improvement strategies to increase client access to, and retention in, treatment. NIATx recommends five principles to promote organizational change: (1) understand and involve the customer, (2) fix key problems, (3) pick a powerful change leader, (4) get ideas from outside the organization, and (5) use rapid cycle testing. Using case studies, supplemented with cross-agency analyses of interview data, this paper profiles participating NIATx treatment agencies that illustrate successful applications of each principle. Results suggest that organizations can successfully integrate and apply the five principles as they develop and test change strategies, improving access and retention in treatment, and agencies' financial status. Upcoming changes requiring increased provision of behavioral health care will result in greater demand for services. Treatment organizations, already struggling to meet demand and client needs, will need strategies that improve the quality of care they provide without significantly increasing costs. The five NIATx principles have potential for helping agencies achieve these goals. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse
37. Cannabis and opium abuse patterns and their associated complications in a sample of young Iranians.

Citation: Journal of Child & Adolescent Substance Abuse, July 2012, vol./is. 21/3(238-246), 1067-828X;1547-0652 (Jul 2012)

Author(s): Attari, Mohammad Ali; Asgary, Sedigheh; Shahrokhi, Shahnaz; Naderi, Gholam Ali; Shariatirad, Schwann

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Language: English

Abstract: The prevalence of drug abuse has been reported to be up to 17.0% in Iran. The aim of this study was to investigate the prevalence of two frequently abused substances—cannabis and opium—in samples of the young population in Isfahan, Iran. In a survey done from January 2005 to December 2006, 537 individuals aged 13-20 years were recruited using a multistage probability sampling method. Demographic and clinical data were recorded through face-to-face interviews, physical examinations, and reviews of the patients’ medical records by trained interviewers. Morphine and cannabis were detected by Enzyme-Linked Immunosorbent Assay (ELISA) on each blood sample. The rates of morphine and cannabis abuse were 2.2% and 3.2%, respectively. They were abused in 0.5% and 15.3% of cigarette smokers as well. Male-to-female ratio in addicts was 4:1, and the mean age of addicts was 17.54 +/- 1.86 years old. There was a significant relationship between male gender and addiction (P = 0.002). The prevalence of substance abuse in urban and rural areas was 6.3% and 9.5%, respectively. A total of 2.5% of rural females were addicted, compared to 2.4% in Isfahan (city). In Isfahan, opium was the most commonly abused substance while in rural areas cannabis was the most commonly abused. Substance abuse among adolescents has increased dramatically and has a significant negative effect on society. It seems that substance abuse is more prevalent than it is estimated. Therefore, developing and implementing appropriate solutions for solving this problem seems necessary. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Cannabis
*Drug Abuse
*Opiates

Source: PsycINFO

38. A substance use survey with old order Amish early adolescents: Perceptions of peer alcohol and drug use.

Citation: Journal of Child & Adolescent Substance Abuse, July 2012, vol./is. 21/3(193-203), 1067-828X;1547-0652 (Jul 2012)

Author(s): Cates, James A; Weber, Chris

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Institution: Cates, James A.: Amish Youth Vision Project, Inc., Topeka, IN; Weber, Chris: Solutions Counseling, LLC, Goshen, IN
Students in a junior high school serving a large Old Order Amish settlement completed a survey of attitudes, opinions, and intentions regarding substance use. A total of 1,031 students participated across a four-year span, approximately equally divided between Amish and non-Amish youths. Amish youths maintain attitudes that suggest perceived greater use of substances by their peers and greater concern about this use; however, they also express the intent to use alcohol and tobacco at a higher rate than non-Amish counterparts. The study addresses implications for interventions among Amish youths as they mature and enter an often culturally sanctioned period of alcohol use. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Citation: Infant Mental Health Journal, July 2012, vol./is. 33/4(360-371), 0163-9641;1097-0355 (Jul-Aug 2012)

Author(s): Suchman, Nancy E; Decoste, Cindy; Rosenberger, Patricia; McMahon, Thomas J

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Institution: Suchman, Nancy E.: Yale University School of Medicine, New Haven, CT; Decoste, Cindy: Yale University School of Medicine, New Haven, CT; Rosenberger, Patricia: Yale University School of Medicine, New Haven, CT; McMahon, Thomas J.: Yale University School of Medicine, New Haven, CT

Language: English

Abstract: Although randomized controlled trials examining the efficacy of attachment-based interventions have been increasing in recent years, adequate measurement of treatment integrity, integrity-outcome associations, and mechanisms of change has been rare. The aim of this investigation was to conduct a rigorous test of proposed mechanisms of change in the Mothers and Toddlers Program (MTP) treatment model, a 12-session, attachment-based individual therapy for substance-using mothers of children birth to 3 years of age. The MTP aims to improve maternal reflective functioning (RF) and representation quality (RQ) to bring about second-order change in maternal caregiving behavior. Following guidelines from M.K. Nock (2007), it was hypothesized that (a) therapist adherence to unique MTP treatment components would uniquely predict improvement in RF and RQ and that (b) improvement in RF and RQ would function as unique mechanisms of change (when compared with other potential mechanisms-reduction in depression and increase in abstinence from drug use) in the improvement of caregiving behavior. Findings supported each hypothesis, confirming the proposed mechanisms of the treatment model. However, improvement in maternal depression also uniquely predicted improvement in caregiving behavior. Results underscore the potential value of attachment-based parenting interventions for improving mother-child relations and the importance of providing these interventions in clinic settings where mothers have access to comprehensive care (e.g., psychiatric services). (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
40. Impulsivity in Internet addiction: A comparison with pathological gambling.

Citation: Cyberpsychology, Behavior, and Social Networking, July 2012, vol./is. 15/7(373-377), 2152-2715;2152-2723 (Jul 2012)

Author(s): Lee, Hae Woo; Choi, Jung-Seok; Shin, Young-Chul; Lee, Jun-Young; Jung, Hee Yeon; Kwon, Jun Soo

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Language: English

Abstract: Internet addiction has been considered to be associated with poor impulse control. The aim of this study is to compare the trait impulsivity of those suffering from Internet addiction with that of individuals suffering from pathological gambling. Twenty-seven patients diagnosed with Internet addiction (age: 24.78 +/- 4.37 years), 27 patients diagnosed with pathological gambling (age: 25.67 +/- 3.97 years), and 27 healthy controls (age: 25.33 +/- 2.79 years) were enrolled in this study. All patients were men seeking treatment. Trait impulsivity and the severity of the Internet addiction and pathological gambling were measured by the Barratt Impulsiveness Scale-11, the Young's Internet Addiction Test, and the South Oaks Gambling Screen, respectively. The Beck Depression Inventory and the Beck Anxiety Inventory were also administered to all subjects. Our results show that those suffering from Internet addiction showed increased levels of trait impulsivity which were comparable to those of patients diagnosed with pathological gambling. Additionally, the severity of Internet addiction was positively correlated with the level of trait impulsivity in patients with Internet addiction. These results state that Internet addiction can be conceptualized as an impulse control disorder and that trait impulsivity is a marker for vulnerability to Internet addiction. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
African American churches throughout the United States have formed drug ministries to address the increased incarceration rates of African Americans with substance use disorders. This interview is with Reverend Dee Dee Osobor, Director of Prison Ministries of Apostolic Faith Church, Chicago, Illinois, where Bishop Horace Smith is pastor. Reverend Osobor's ministry focuses on helping chemically dependent African American women who are incarcerated heal from trauma. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

This article describes the use of bibliotherapy and journaling as a recovery tool with African Americans with substance use disorders. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

This article describes the use of bibliotherapy and journaling as a recovery tool with African Americans with substance use disorders. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
44. Hoops and healing: The use of athletics for youth involved in recovery.

**Citation:** Alcoholism Treatment Quarterly, June 2012, vol./is. 30/3(353-359), 0734-7324;1544-4538 (Jun 2012)

**Author(s):** Harden, Troy; Walton, Lloyd

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**Institution:** Harden, Troy: Chicago State University, Chicago, IL; Walton, Lloyd: Chicago State University, Chicago, IL

**Language:** English

**Abstract:** The use of athletics and sports with people recovering from substance abuse disorders has been well documented. Athletics has many positive advantages that lend itself to addictions treatment. This article discusses the concept of using sports to promote recovery involvement for African American youth from the viewpoint of a scholar-practitioner-athlete and a scholar-practitioner/former professional athlete. Drawing upon the addictions literature and experiences in athletics, youth programming and addictions, the authors discuss similarities between sports and recovery and address the need for more sports programming with African American youth as a supplement to traditional treatment programs. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
Juvenile justice services, disproportionate minority contact, and alternatives to detention for African American adolescents with substance use and co-occurring disorders continue to be areas of concern for juvenile justice, substance abuse, and mental health administrators. Additionally, salient is the question regarding the purpose of the juvenile justice system. Whether its focus is “punishment or rehabilitation” affects outlook, services, approaches, and outcomes. This article examines disproportionate minority contact and alternatives to detention for African American adolescents with substance use and co-occurring disorders along with evidence-based and community-based alternatives to detention. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
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Language: English

Abstract: For decades, tension has existed between addictions counselors and clients based upon a widely held belief by counselors that there is only one way to recover, leading to client resistance to treatment, premature termination, and relapse, as the client's approach to recovery has been commonly ignored. This article outlines multiple pathways of recovery among African American men and also offers clinical recommendations for service providers who work with these men. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Addiction
*Drug Rehabilitation
*Recovery (Disorders)
Blacks
Human Males

Source: PsycINFO

48. Prevention of mental and substance use and abuse disorders and comorbidity in African Americans.

Citation: Alcoholism Treatment Quarterly, June 2012, vol./is. 30/3(293-306), 0734-7324;1544-4538 (Jun 2012)

Author(s): Bell, Carl C; McBride, Dominica F

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Institution: Bell, Carl C.: University of Illinois at Chicago, Chicago, IL; McBride, Dominica F.: HELP Institute, Inc., Chicago, IL

Language: English

Abstract: Regrettably for African Americans, research has rarely addressed issues that affect their health and well-being. This lack of attention manifests itself in the dearth of literature available while doing literature reviews on prevention of comorbid mental illness and substance abuse (MISA) and substance use and abuse disorders in African Americans. However, there are a few studies on the prevention of substance use and abuse disorders alone and the prevention of relapse in African Americans with MISA problems. These articles form the basis of our proposal to prevent co-morbidity of mental and substance use and abuse disorders in African Americans. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Comorbidity
*Drug Abuse
*Mental Disorders
*Prevention
Blacks

Source: PsycINFO

49. Recovery management and African Americans: A report from the field.

Citation: Alcoholism Treatment Quarterly, June 2012, vol./is. 30/3(263-292), 0734-7324;1544-4538 (Jun 2012)
The existence of numerous ethnic and racial disparities suggests that African Americans and other people of color are particularly ill served by the prevailing acute-care approaches to addiction treatment. This article (1) explores recovery management as an alternative framework for providing effective addiction treatment for African Americans; (2) illustrates the implementation of this approach by presenting examples from the Amistad Village Project, a culturally competent and recovery-oriented treatment program for African American men and women that was piloted and studied in New Haven, Connecticut; and (3) articulates the service recipient's perspective on the critical elements of effective substance use disorder treatment for African American individuals. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
Editorial.

Citation: Alcoholism Treatment Quarterly, June 2012, vol./is. 30/3(259-260), 0734-7324;1544-4538 (Jun 2012)

Author(s): McGovern, Thomas F

Language: English

Abstract: Special issues of the Alcoholism Treatment Quarterly (ATQ) provide an in depth look into aspects of treatment of and recovery from Substance Use Disorders (SUDS). The focus of this issue is on African American communities as the process of illness and recovery unfolds in the lives of the members of these communities. Mark Sanders, Guest Editor of this issue, has chosen authors (including himself) who, from firsthand experience, capture the authentic voices of individuals and communities as they narrate the human struggle of working through the challenges of illness to meaningful recovery. Prevention and intervention strategies, recovery management, the special needs of youth, women, and men, together with the interaction between treatment and correctional systems, are discussed in an approach which is broad based in scope but detailed in description. My friendship with Mark Sanders, as colleague and friend, extends over many years. I am very impressed by the humane and effective way he addresses, in a variety of settings, treatment and recovery issues in the African American community. His insights, as teacher, treater, advocate, mentor, and author, come from the heart of the African American community. Mark Sanders, in his overview of this special issue, notes that African Americans are disproportionately overrepresented in problems associated with SUDS and underrepresented in culturally specific approaches which would address these needs. He hopes that this special issue will address gaps in appropriate approaches to intervention, treatment, and recovery, thereby empowering professionals from many fields to address the specific needs of African American communities. As Editor of the ATQ, I see this issue as unique in many respects, one which is written almost exclusively from personal narrative and correlated research, one which will hopefully facilitate treatment and recovery for our African American friends and neighbors and, thereby respond to Mark Sanders unique vision for this special issue. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
Abstract:
Background: Acetaldehyde (ACD), ethanol's first metabolite, has been reported to interact with the dopaminergic reward system, and with the neural circuits involved in stress response. Rats self-administer ACD directly into cerebral ventricles, and multiple intracerebroventricular infusions of ACD produce conditioned place preference. Self-administration has been largely employed to assess the reinforcing and addictive properties of most drugs of abuse. In particular, operant conditioning is a valid model to investigate drug-seeking and drug-taking behavior in rats. Methods: This study was aimed at the evaluation of (i) the motivational properties of oral ACD in the induction and maintenance of an operant-drinking behavior; (ii) ACD effect in a conflict situation employing the punishment-based Geller-Seifter procedure; and (iii) the onset of a relapse drinking behavior, following ACD deprivation. The lever-pressing procedure in a sound-attenuated operant-conditioning chamber was scheduled into 3 different periods: (i) training-rewarded responses with a fixed ratio 1; (ii) conflict-rewarded responses periodically associated with a 0.2 mA foot-shock; and (iii) relapse-rewarded lever presses following 1-week ACD abstinence. Results: Our results show that oral self-administered ACD induced: a higher rate of punished responses in Geller-Seifter procedures; and the establishment of a relapse behavior following ACD deprivation. Conclusions: In conclusion, our results indicate that ACD is able to induce an operant-drinking behavior, which is also maintained besides the conflict procedure and enhanced by the deprivation effect, supporting the hypothesis that ACD itself possesses motivational properties, such as alcohol and other substances of abuse. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
Abstract: Background: Correlates of recovery from alcohol dependence have been identified through a variety of study designs characterized by different strengths and limitations. The goal of this study was to compare correlates of recovery based on a 3-year prospective design with those based on cross-sectional analyses of data from the same source. Methods: Data from the 2001 to 2002 Wave 1 and 2004 to 2005 Wave 2 National Epidemiologic Survey on Alcohol and Related Conditions (NESARC) were used to examine baseline characteristics associated with Wave 2 recovery from alcohol dependence, among those who classified with past-year DSM-IV alcohol dependence at Wave 1 (n = 1,172). Results: Abstinent recovery was significantly associated with Black/Asian/Hispanic race/ethnicity, children <1 year of age in the household at baseline, attending religious services greater than or equal to weekly at follow-up, and having initiated help-seeking that comprised/included 12-step participation within <3 years prior to baseline. Nonabstinent recovery was positively associated with being never married at baseline, having job problems or being unemployed in the year preceding baseline, attending religious services less than weekly at follow-up, baseline smoking and volume of ethanol intake, and having terminated a first marriage within <3 years prior to baseline. Findings, including others of marginal significance (0.05 < p < 0.10), generally supported results from prior pseudo-prospective survival analyses with time-dependent covariates but differed in many ways from cross-sectional analyses of Wave 1 NESARC data. Conclusions: Various aspects of study design must be considered when interpreting correlates of recovery. Cross-sectional analyses of lifetime correlates of recovery are highly subject to misinterpretation, but pseudo-prospective survival analyses with time-dependent covariates may yield results as valid as those from prospective studies.

(PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
Background: Several lines of evidence from previous research indicate that opioid receptors play an important role in ethanol reinforcement and alcohol dependence (AD) risk. Conflicting results were reported on the role of the mu-opioid receptor (OPRM1) polymorphism A118G (Asn40Asp, rs1799971) in the development of alcoholism.

Methods: We investigated a total number of 1,845 alcohol-dependent subjects recruited from inpatient facilities in Germany and 1,863 controls for the mu-opioid receptor (OPRM1) polymorphism using chi-square statistics. Results: An association between the OPRM variant and AD was detected (p = 0.022), in recessive (AA vs. GA/GG) and co-dominant (AA vs. GA) models of inheritance. An association between the OPRM variant and the DSM-IV criterion "efforts to cut down or could not" (p = 0.047) was found, but this did not remain significant after the correction for multiple testing.

Conclusions: The results indicate that this functional OPRM variant is associated with risk of AD and these findings apply to more severe AD, although the association is only nominally significant.

Country of Publication: HOLDER: Research Society on Alcoholism; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcoholism *Genetics *Neural Receptors *Opiates *Symptoms
Source: PsycINFO
Full Text: Available in fulltext at Wiley

55. Youth recovery contexts: The incremental effects of 12-step attendance and involvement on adolescent outpatient outcomes.

Citation: Alcoholism: Clinical and Experimental Research, July 2012, vol./is. 36/7(1219-1229), 0145-6008;1530-0277 (Jul 2012)
Author(s): Kelly, John F; Urbanoski, Karen
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Institution: Kelly, John F.: Department of Psychiatry, Center for Addiction Medicine, Massachusetts General Hospital, Boston, MA; Urbanoski, Karen: Department of Psychiatry, Center for Addiction Medicine, Massachusetts General Hospital, Boston, MA
Language: English
Abstract: Background: A major barrier to youth recovery is finding suitable sobriety-supportive social contexts. National studies reveal most adolescent addiction treatment programs link youths to community 12-step fellowships to help meet this challenge, but little is known empirically regarding the extent to which adolescents attend and benefit from 12-step meetings or whether they derive additional gains from active involvement in prescribed 12-step activities (e.g., contact with a sponsor and other fellowship members). Greater knowledge in this area would enhance the efficiency of clinical continuing care recommendations. Methods: Adolescent outpatients (N = 127; M age 16.7; 75% male; 87% white) enrolled in a naturalistic study of treatment effectiveness were assessed at intake and 3, 6, and 12 months later using standardized assessments. Mixed-effects models, controlling for static and time-varying confounds, examined the concurrent and
lagged effects of 12-step attendance and active involvement on abstinence over time. Results: The proportion attending 12-step meetings was relatively low across follow-up (24 to 29%), but more frequent attendance was independently associated with greater abstinence in concurrent and, to a lesser extent, lagged models. An 8-item composite measure of 12-step involvement did not enhance outcomes over and above attendance, but separate components did; specifically, greater contact with a 12-step sponsor outside of meetings and more verbal participation during meetings. Conclusions: The benefits of 12-step participation observed among adult samples extend to adolescent outpatients. Community 12-step fellowships appear to provide a useful sobriety-supportive social context for youths seeking recovery, but evidence-based youth-specific 12-step facilitation strategies are needed to enhance outpatient attendance rates. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Research Society on Alcoholism; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Addiction
*Treatment Outcomes
*Twelve Step Programs
Outpatients
Source: PsycINFO
Full Text: Available in fulltext at Wiley

Citation: Alcoholism: Clinical and Experimental Research, July 2012, vol./is. 36/7(1188-1195), 0145-6008;1530-0277 (Jul 2012)
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Institution: Fein, George: Neurobehavioral Research, Inc., Honolulu, HI; Nip, Vincent: Neurobehavioral Research, Inc., Honolulu, HI
Language: English
Abstract: Background: Comorbidity of borderline personality disorder (BPD) and substance and alcohol use disorders (SUDs and AUDs) is very high. The literature suggests a negative synergy between BPD and SUDs, which may impact an individual's ability to achieve and maintain remission of either disorder in the face of the other. Methods: We examined lifetime and current (past year) BPD symptom counts in 3 gender- and age-comparable groups: short-term abstinent alcoholics (STA, 6 to 15 weeks abstinent), long-term abstinent alcoholics (LTA, more than 18 months abstinent), and nonsubstance-abusing controls (NSAC). Abstinent individuals were recruited primarily from mutual-help recovery networks and about half had comorbid drug dependence. BPD symptoms were obtained using the Structured Clinical Interview for DSM-IV-TR Axis II Personality Disorders, followed up with questions regarding currency, but did not require that BPD symptoms represent persistent or pervasive behavior such as would meet criteria for BPD diagnosis. Thus, our study dealt only with BPD symptoms, not BPD diagnoses. Results: Alcoholics had more lifetime and current symptoms for most all BPD criteria than NSAC. In general, STA and LTA did not differ in BPD symptoms, except for a group-by-gender effect for both lifetime and current anger-associated symptoms and for lifetime abandonment avoidance symptoms. For these cases, there were much higher symptom counts for STA women versus men, with comparable symptom counts for LTA women versus men. Conclusions: Our results suggest for the most part that BPD symptoms do not prevent the maintenance of recovery in AUD and SUD individuals who have established at least 6 weeks abstinence within the mutual-help recovery network-in fact the presence of BPD symptoms is the norm. However, we did find difficulty in establishing longer-term abstinence in women with anger-associated symptoms and abandonment avoidance symptoms. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
Background: Associative learning is required for face-name association and is impaired in alcoholism, but the cognitive processes and brain structural components underlying this deficit remain unclear. It is also unknown whether prompting alcoholics to implement a deep level of processing during face-name encoding would enhance performance.

Methods: Abstinent alcoholics and controls performed a levels-of-processing face-name learning task. Participants indicated whether the face was that of an honest person (deep encoding) or that of a man (shallow encoding). Retrieval was examined using an associative (face-name) recognition task and a single-item (face or name only) recognition task. Participants also underwent 3T structural MRI. Results: Compared with controls, alcoholics had poorer associative and single-item learning and performed at similar levels. Level of processing at encoding had little effect on recognition performance but affected reaction time (RT). Correlations with brain volumes were generally modest and based primarily on RT in alcoholics, where the deeper the processing at encoding, the more restricted the correlations with brain volumes. In alcoholics, longer control task RTs correlated modestly with smaller tissue volumes across several anterior to posterior brain regions; shallow encoding correlated with calcarine and striatal volumes; deep encoding correlated with precuneus and parietal volumes; and associative recognition RT correlated with cerebellar volumes. In controls, poorer associative recognition with deep encoding correlated significantly with smaller volumes of frontal and striatal structures.

Conclusions: Despite prompting, alcoholics did not take advantage of encoding memoranda at a deep level to enhance face-name recognition accuracy. Nonetheless, conditions of deeper encoding resulted in faster RTs and more specific relations with regional brain volumes than did shallow encoding. The normal relation between associative recognition and corticostriatal volumes was not present in alcoholics. Rather, their speeded RTs occurred at the expense of accuracy and were related most robustly to cerebellar volumes. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
58. A clarion call for nurse-led SBIRT across the continuum of care.

**Citation:** Alcoholism: Clinical and Experimental Research, July 2012, vol./is. 36/7(1134-1138), 0145-6008;1530-0277 (Jul 2012)

**Author(s):** Finnell, Deborah S

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**Language:** English

**Abstract:** Comments on an article by L. M. Broyles et al. (see record 2012-08638-021). This commentary discusses the impact of the study by Broyles and colleagues (2012) that reported on hospitalized patients’ acceptability of nurse-delivered screening, brief intervention, and referral to treatment (SBIRT). This cross-sectional survey study assessed patient acceptability for and comfort with nurse-delivered SBIRT. The majority (95%) of inpatients found it acceptable for the nurse to ask about and/or discuss alcohol use during their hospitalization. This is a significant finding, as hospitals in the United States consider whether and how to implement The Joint Commission’s performance measures related to SBIRT for hospitalized patients. The findings related to subgroups of patients who are more accepting of SBIRT and those who expressed some degree of discomfort highlight the importance for individualized patient-centered approaches. This study raises several important implications for nurse-delivered SBIRT. First, intensive efforts must be directed to enhancing the knowledge and competence of healthcare providers in general, and the current and future nursing workforce in particular, related to alcohol use and evidence-based care for patients who are drinking alcohol above recommended limits. Second, registered nurses, working to the full extent of their education and licensure are in key roles as members of the interdisciplinary team to provide cost-effective care at the bedside and across the continuum of care. Nurse-led SBIRT implementation models could help bridge the curricular gap and promote widespread and sustained integration of SBIRT as standard nursing care across all specialties and practice settings. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

59. Adenosine and glutamate signaling in neuron-Glial interactions: Implications in alcoholism and sleep disorders.

**Citation:** Alcoholism: Clinical and Experimental Research, July 2012, vol./is. 36/7(1117-1125), 0145-6008;1530-0277 (Jul 2012)

**Author(s):** Nam, Hyung W; McIver, Sally R; Hinton, David J; Thakkar, Mahesh M; Sari, Youssef; Parkinson, Fiona E; Haydon, Phillip G; Choi, Doo-Sup
Recent studies have demonstrated that the function of glia is not restricted to the support of neuronal function. Especially, astrocytes are essential for neuronal activity in the brain. Astrocytes actively participate in synapse formation and brain information processing by releasing or uptaking gliotransmitters such as glutamate, d-serine, adenosine 5′-triphosphate (ATP), and adenosine. In the central nervous system, adenosine plays an important role in regulating neuronal activity as well as in controlling other neurotransmitter systems such as GABA, glutamate, and dopamine. Ethanol (EtOH) increases extracellular adenosine levels, which regulates the ataxic and hypnotic/sedative (somnogenic) effects of EtOH. Adenosine signaling is also involved in the homeostasis of major inhibitory/excitatory neurotransmission (i.e., GABA or glutamate) through neuron-glial interactions, which regulates the effect of EtOH and sleep. Adenosine transporters or astrocytic SNARE-mediated transmitter release regulates extracellular or synaptic adenosine levels. Adenosine then exerts its function through several adenosine receptors and regulates glutamate levels in the brain. This review presents novel findings on how neuron-glial interactions, particularly adenosinergic signaling and glutamate uptake activity involving glutamate transporter 1 (GLT1), are implicated in alcoholism and sleep disorders. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
# Abstract

This descriptive study presents a method of identifying factors associated with a nonproblematic level of functioning with 11 nontreatment female cocaine users. A subjective assessment of an acceptable level of functioning was verified by the Addiction Severity Index (ASI) screening instrument (McLellan et al., 1992). Findings indicated that nonproblematic female, nontreatment cocaine users are from diverse social classes, have social and economic concerns comparable to the general population, and share similar values with the general population. In contrast to the substance use or abuse treatment approach of total abstinence, a continuum model is presented ranging from nonproblematic to highly problematic use. Implications for rehabilitation counselors include awareness of the continuum model, familiarity with the ASI as a brief screening measure in counseling, and enhancing nonproblematic substance users' self efficacy in safely controlling their substance use. Also identified are issues, values, and perceptions particular to female users. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

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

**Subject Headings:**
- *Cocaine*
- *Drug Abuse*
- *Drug Usage Attitudes*
- *Values*
- *Family*
- *Human Females*
- *Self Efficacy*

**Source:** PsycINFO

**Full Text:** Available in fulltext at ProQuest

## 61. 100 Years ago in addiction science: Turtle soup and other matters: Excerpts from endpages of the British Journal of Inebriety for 1912.

**Citation:** Addiction, August 2012, vol./is. 107/8(1530-1531), 0965-2140;1360-0443 (Aug 2012)

**Author(s):** Edwards, Griffith

**Language:** English

**Abstract:**

The British Journal of Inebriety published a curious column on 'Preparations: new and old', a listing of recently published memoranda, and an extensive book review section. In sum, these endpages occupied 35 pages of the journal's issue for January 1912. What can these footprints in time tell about the evolution of ideas on substance misuse? This article presents excerpts from that endpages. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

**Country of Publication:** HOLDER: The Authors. Addiction-Society for the Study of Addiction; YEAR: 2012

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

**Subject Headings:**
- *Drug Abuse*
- *Scientific Communication*

**Source:** PsycINFO

**Full Text:** Available in fulltext at Wiley
Comments on an article by Keith Humphreys (see record 2012-01784-001). Keith Humphreys' inclusion of ‘ultra-rapid opiate detoxification’ among discredited ‘miracle cures’ for addiction, needs several important qualifications. The basic theory (using opiate antagonists to make withdrawal shorter, more successful and less unpleasant) was validated in several randomized controlled trials (RCTs) by respected academics in the 1970s and 1980s, all using oral sedation as well as specific anti-withdrawal drugs such as clonidine, to reduce discomfort. Using general anesthesia (GA) or intravenous sedation (IVS) was a logical development, especially for patients who were difficult to sedate orally. (PsycINFO Database Record (c) 2012 APA, all rights reserved)


Comments on an article by Charles E. Cunningham et al. (see record 2012-18585-025). Cunningham and colleagues (this issue) explore factors weighed by clinicians when deciding whether to participate in knowledge translation (KT) activities. This information can be used to market KT or the dissemination of scientific findings to promote implementation. The authors find that the strongest and most pervasive reason substance use disorder (SUD) clinicians consider training in a new practice is 'benefit to clients', followed by compatibility between the new and current practices. I propose leveraging these motivations to encourage clinicians to implement proximal outcome or symptom monitoring. A concern for benefiting clients seems highly compatible with tracking client functioning over time. As Cunningham and colleagues note, it is critical to communicate the benefits of evidence-based practice (EBP) in terms that are meaningful to clinicians. Dissemination efforts typically publicize aggregate patient outcomes, and Cunningham and colleagues confirm that the benefit to the greatest number is the most compelling argument. However, the realities of clinical practice are often focused on the individual case. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
64. Preferences for evidence-based practice dissemination in addiction agencies serving women: A discrete-choice conjoint experiment.

Citation: Addiction, August 2012, vol./is. 107/8(1512-1524), 0965-2140;1360-0443 (Aug 2012)

Author(s): Cunningham, Charles E; Henderson, Joanna; Niccols, Alison; Dobbins, Maureen; Sword, Wendy; Chen, Yvonne; Mielko, Stephanie; Milligan, Karen; Lipman, Ellen; Thabane, Lehana; Schmidt, Louis

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Language: English

Abstract: Aim: To model variables influencing the dissemination of evidence-based practices to addiction service providers and administrators. Design: A discrete-choice conjoint experiment. We systematically varied combinations of 16 dissemination variables that might influence the adoption of evidence-based practices. Participants chose between sets of variables. Setting: Canadian agencies (n = 333) providing addiction services to women. Participants: Service providers and administrators (n = 1379). Measurements: We estimated the relative importance and optimal level of each dissemination variable. We used latent class analysis to identify subsets of participants with different preferences and simulated the conditions under which participants would use more demanding professional development options. Findings: Three subsets of participants were identified: outcome-sensitive (52%), process-sensitive (29.6%) and demand-sensitive (18.2%). Across all participants, the number of clients who were expected to benefit from an evidence-based practice exerted the most influence on dissemination choices. If a practice was seen as feasible, co-worker and administrative support influenced decisions. Client benefits were most important to outcome-sensitive participants; type of dissemination process (e.g. active versus passive learning) was more important to process-sensitive participants. Brief options with little follow-up were preferred by demand-sensitive participants. Simulations predicted that initiatives selected and endorsed by government funders would reduce participation. Conclusions: Clinicians and administrators are more likely to adopt evidence-based addiction practices if the practice is seen as helpful to clients, and if it is supported by co-workers and program administration. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Citation: Addiction, August 2012, vol./is. 107/8(1493-1500), 0965-2140;1360-0443 (Aug 2012)

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Language: English

Abstract: Aims: To provide an initial abuse liability assessment of an electronic cigarette (EC) in current tobacco cigarette smokers. Design: The first of four within-subject sessions was an EC sampling session that involved six, 10-puff bouts (30 seconds inter-puff interval), each bout separated by 30 minutes. In the remaining three sessions participants made choices between 10 EC puffs and varying amounts of money, 10 EC puffs and a varying number of own brand cigarette (OB) puffs, or 10 OB puffs and varying amounts of money using the multiple-choice procedure (MCP). The MCP was completed six times at 30-minute intervals, and one choice was reinforced randomly at each trial. Setting Clinical laboratory. Participants: Twenty current tobacco cigarette smokers. Measurements: Sampling session outcome measures included plasma nicotine, cardiovascular response and subjective effects. Choice session outcome was the cross-over value on the MCP. Findings: EC use resulted in significant nicotine delivery, tobacco abstinence symptom suppression and increased product acceptability ratings. On the MCP, participants chose to receive 10 EC puffs over an average of $1.06 or three OB puffs and chose 10 OB puffs over an average of $1.50 (P < 0.003). Conclusions: Electronic cigarettes can deliver clinically significant amounts of nicotine and reduce cigarette abstinence symptoms and appear to have lower potential for abuse relative to traditional tobacco cigarettes, at least under certain laboratory conditions. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse
*Nicotine
*Tobacco Smoking

Source: PsycINFO

Full Text: Available in fulltext at Wiley


Citation: Addiction, August 2012, vol./is. 107/8(1482-1492), 0965-2140;1360-0443 (Aug 2012)

Author(s): Cleary, Brian J; Eogan, Maeve; O'Connell, Michael P; Fahey, Tom; Gallagher, Paul J; Clarke, Tom; White, Martin J; McDermott, Christine; O'Sullivan, Anne; Carmody, Deirdre; Gleeson, Justin; Murphy, Deirdre J
Aims: Methadone use in pregnancy has been associated with adverse perinatal outcomes and neonatal abstinence syndrome (NAS). This study aimed to examine perinatal outcomes and NAS in relation to (i) concomitant drug use and (ii) methadone dose. Design: Prospective cohort study. Setting: Two tertiary care maternity hospitals. Participants: A total of 117 pregnant women on methadone maintenance treatment recruited between July 2009 and July 2010. Measurements: Information on concomitant drug use was recorded with the Addiction Severity Index. Perinatal outcomes included pre-term birth (<37 weeks' gestation), small-for-gestational-age (<10th centile) and neonatal unit admission. NAS outcomes included: incidence of medically treated NAS, peak Finnegan score, cumulative dose of NAS treatment and duration of hospitalization. Findings: Of the 114 liveborn infants 11 (9.6%) were born pre-term, 49 (42.9%) were small-for-gestational-age, 56 (49.1%) had a neonatal unit admission and 29 (25.4%) were treated medically for NAS. Neonates exposed to methadone-only had a shorter hospitalization than those exposed to methadone and concomitant drugs (median 5.0 days versus 6.0 days, P = 0.03). Neonates exposed to methadone doses $\geq$80 mg required higher cumulative doses of morphine treatment for NAS (median 13.2 mg versus 19.3 mg, P = 0.03). The incidence and duration of NAS did not differ between the two dosage groups. Conclusions: The incidence and duration of the neonatal abstinence syndrome is not associated with maternal methadone dose, but maternal opiate, benzodiazepine or cocaine use is associated with longer neonatal hospitalization. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
Institution: Darke, Shane: National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW; Burns, Lucy: National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW

Language: English

Abstract: Comments on an article by Bibiana Friguls et al. (see record 2012-18585-020). The work by Friguls et al. addresses two issues of great clinical importance: drug use during pregnancy and the reliability of self-report for such use. While the focus of this study was on illicit drugs, it is the high levels of alcohol and tobacco use reported by these women that stands out. Approximately two-thirds were smokers, and a third reported alcohol use during their pregnancy. These substances, in and of themselves, may affect fetal development. Not surprisingly, given all we know of polydrug use patterns, the use of these substances was associated strongly with the use of illicit drugs. Unfortunately, no multivariate analyses were performed, so we are unable to determine the role of illicit substances themselves upon birth characteristics after taking into account the effects of alcohol and tobacco. Also, the use of biomarkers can never be a substitute for good clinical rapport and management. Clinicians should be aware that illicit use is likely to be underreported, particularly when admitting such use may lead to opprobrium or negative consequences. In the area of pregnancy these consequences are indeed far-reaching, with separation from one's children a real possibility. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
investigated. Ibiza has a large international night-life resort associated with clubs, music and use of recreational drugs. Design, setting and participants: Hair samples were collected prospectively from January to March 2010 from a cohort of consecutive mothers after giving birth in the Hospital Can Misses in Ibiza. Measurements: Opiates, cocaine, cannabis, methadone, amphetamines, 3,4-methylenedioxymethamphetamine (MDMA) and their metabolites were detected in a 3-cm-long proximal segment of maternal hair corresponding to the last trimester of pregnancy by gas chromatography coupled to mass spectrometry (n = 107). Data on sociodemographic characteristics and on tobacco, alcohol, drugs of prescription and drugs of abuse consumption during pregnancy were collected using a structured questionnaire. Findings: Hair analysis showed an overall 16% positivity for drugs of abuse in the third trimester of pregnancy, with a specific prevalence of cannabis, cocaine, MDMA and opiates use of 10.3, 6.4, 0.9 and 0%, respectively. In the questionnaires, only 1.9% of mothers declared using drugs of abuse during pregnancy. Gestational drug of abuse consumption was associated with active tobacco smoking, a higher number of smoked cigarettes and the mother being Spanish. Conclusions: Illicit drug use is substantially under-reported among pregnant women living in Ibiza, particularly among Spanish nationals. Voluntary, routine objective biological toxicology screening should be considered as part of routine examinations in antenatal clinics on this Mediterranean island. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
Massachusetts, USA. Findings: Utilization of several types of out-patient services increased significantly between the pre- and post-intake periods [e.g. dental visits (0.47, P < 0.001), community health center visits (0.50, P < 0.001), visits to a mental health professional office (1.03, P = 0.001)], while in-patient hospital care for mental health problems decreased significantly (-3.50 nights, P < 0.001). A substantial portion of these changes occurred during the treatment period. No significant differences were found between the two treatment conditions. Conclusions Initiating out-patient substance abuse treatment is associated with changes in general health-care service utilization, independent of the type of treatment offered. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Citation: Addiction, August 2012, vol./is. 107/8(1418-1419), 0965-2140;1360-0443 (Aug 2012)
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Language: English
Abstract: Comments on an article by Erica N. Peters, Alan J. Budney and Kathleen M. Carroll (see record 2012-18585-011). Peters et al. found in their literature review that the combined use of cannabis and tobacco worsened outcomes for cannabis but not tobacco, compared to the use of one of these drugs. This conclusion is hardly surprising. While the implications for clinical practice and research are small, the policy implications are of considerable interest, especially when seen in the larger perspective of cannabis being an illegal drug while tobacco has always remained legal (in the contemporary era). Given the major finding of this study it would be logical for the authors to warn, through readers of this journal, the potential users of both these drugs and policy makers, that cannabis smokers who also smoke tobacco risk exacerbating cannabis-related problems. Clearly, the harm-reduction implication is that cannabis users should be warned to avoid mixing their preferred drug with tobacco. However, Peters et al. remain silent about the harm reduction policy implications of their study, preferring to comment only on the safer clinical and research implications. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Cannabis *Comorbidity *Diagnosis *Drug Abuse *Tobacco Smoking Psychosocial Factors Smoking Cessation Treatment Outcomes
Source: PsycINFO
Full Text: Available in fulltext at Wiley

72. Clinical correlates of co-occurring cannabis and tobacco use: A systematic review.

Citation: Addiction, August 2012, vol./is. 107/8(1404-1417), 0965-2140;1360-0443 (Aug 2012)
Author(s): Peters, Erica N; Budney, Alan J; Carroll, Kathleen M
Correspondence Address: Peters, Erica N.: Yale University School of Medicine, One Long Wharf Drive, Box 18, New Haven, CT, US, 06511, erica.peters@yale.edu
Institution: Peters, Erica N.: Department of Psychiatry, Yale University School of Medicine, New Haven, CT; Budney, Alan J.: Department of Psychiatry and Behavioral Sciences, University of Arkansas for Medical Sciences, Little Rock, AR; Carroll, Kathleen M.: Yale University School of Medicine, VA Connecticut Healthcare System, West Haven, CT
Language: English
Abstract: Aims: A growing literature has documented the substantial prevalence of and putative mechanisms underlying co-occurring (i.e. concurrent or simultaneous) cannabis and tobacco use. Greater understanding of the clinical correlates of co-occurring cannabis and tobacco use may suggest how intervention strategies may be refined to improve cessation outcomes and decrease the public health burden associated with cannabis and tobacco
use. Methods: A systematic review of the literature on clinical diagnoses, psychosocial problems and outcomes associated with co-occurring cannabis and tobacco use. Twenty-eight studies compared clinical correlates in co-occurring cannabis and tobacco users versus cannabis- or tobacco-only users. These included studies of treatment-seekers in clinical trials and non-treatment-seekers in cross-sectional or longitudinal epidemiological or non-population-based surveys. Results: Sixteen studies examined clinical diagnoses, four studies examined psychosocial problems and 11 studies examined cessation outcomes in co-occurring cannabis and tobacco users (several studies examined multiple clinical correlates). Relative to cannabis use only, co-occurring cannabis and tobacco use was associated with a greater likelihood of cannabis use disorders, more psychosocial problems and poorer cannabis cessation outcomes. Relative to tobacco use only, co-occurring use did not appear to be associated consistently with a greater likelihood of tobacco use disorders, more psychosocial problems or poorer tobacco cessation outcomes. Conclusions: Cannabis users who also smoke tobacco are more dependent on cannabis, have more psychosocial problems and have poorer cessation outcomes than those who use cannabis but not tobacco. The converse does not appear to be the case. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
74. Two-chosen-one taxation: Examining its potential effectiveness to reduce drinking initiation and heavy alcohol consumption in low- to middle-income countries.

**Citation:** Addiction, August 2012, vol./is. 107/8(1389-1390), 0965-2140;1360-0443 (Aug 2012)

**Author(s):** Sornpaisarn, Bundit; Shield, Kevin D; Rehm, Jurgen

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- Shield, Kevin D.: Centre for Addiction and Mental Health (CAMH), Toronto, ON
- Rehm, Jurgen: Centre for Addiction and Mental Health (CAMH), Toronto, ON

**Language:** English

**Abstract:** Reply by the current authors to the comments made by Esa Osterberg (see record 2012-18585-004); Maria Elena Medina-Mora (see record 2012-18585-005); Isra Sarntisart (see record 2012-18585-006); and Philip J. Cook (see record 2012-18585-007) on the original article (see record 2012-18585-003). We would like to thank the commentators for their thoughtful comments in response to our for debate contribution. Medina-Mora raises the concern of a potential shift in alcohol consumption towards unrecorded alcoholic beverages as taxation increases. Such a shift may be associated with all taxation increases and is not specific to 2C1 taxation. Sarntisart notes that specific taxation rates should be linked to an inflation index; otherwise, the relative cost of the tax will decrease with inflation. 2C1 taxation has an advantage over specific (only) taxation in that the ad valorem component of 2C1 taxation will act as a taxation floor, which creates inflation-binding taxation. We agree with Osterberg regarding the need for consistent taxation rates for similar beverages; otherwise, the effectiveness of taxation will be less due to substitution effects. We disagree with Cook's conclusion that age restrictions may be better than taxation in reducing drinking initiation in Thailand, as the US data upon which this conclusion was based examined the effects of taxation on 30-day abstinence, which is different from life-time abstention. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

**Country of Publication:** HOLDER: The Authors. Addiction-Society for the Study of Addiction; YEAR: 2012

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

**Subject Headings:**
* Alcohol Drinking Patterns
* Alcoholism
* Government Policy Making
* Sobriety
* Taxation
* Developing Countries

**Source:** PsycINFO

**Full Text:** Available in fulltext at Wiley

75. Evidence from a high-income country: Comment.

**Citation:** Addiction, August 2012, vol./is. 107/8(1388-1389), 0965-2140;1360-0443 (Aug 2012)

**Author(s):** Cook, Philip J

**Correspondence Address:** Cook, Philip J.: Sanford School of Public Policy, Duke University, PO Box 90245, Durham, NC, US, 27708, pcook@duke.edu

**Institution:** Cook, Philip J.: Sanford School of Public Policy, Duke University, Durham, NC

**Language:** English

**Abstract:** Comments on an article by Bundit Sornpaisarn, Kevin D. Shield, and Jurgen Rehm (see record 2012-18585-003). Sornpaisarn et al. observe that the Thai system of taxation, with its combination of specific and ad valorem tax rates, 'may prevent drinking initiation in addition to discouraging harmful patterns of alcohol consumption'. In response, this comment makes a simple point-that the evidence from one high-income country, the United States, suggests that a specific tax on beer (the beverage of choice for American
youths) has a direct effect on abstention prevalence for youths. The higher the tax, the higher the rate of abstention. The Thai system is one approach to engineering a higher tax rate on beer, but another would be to simply legislate a higher specific tax rate for that type of beverage. Age-based prohibition is also effective at encouraging abstention and moderation for the affected age group, and for encouraging moderation over the longer term. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcohol Drinking Patterns
*Alcoholism
*Government Policy Making
*Sobriety
*Taxation
Developing Countries
Source: PsycINFO
Full Text: Available in fulltext at Wiley

76. Alcohol excise taxation in Thailand: More than a simple one: Comment.
Citation: Addiction, August 2012, vol./is. 107/8(1387), 0965-2140;1360-0443 (Aug 2012)
Author(s): Sarntisart, Isra
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Institution: Sarntisart, Isra: Centre for Development Policy Studies (CDePS), Faculty of Economics, Chulalongkorn University
Language: English
Abstract: Comments on an article by Bundit Sornpaisarn, Kevin D. Shield, and Jurgen Rehm (see record 2012-18585-003). Sornpaisarn et al. have reviewed a number of past studies concerning alcohol taxation, and concluded that alcohol consumption on an adult per capita basis increases with the level of income. The lowest-income countries (LIC) tend to consume the least amount of alcohol on an adult per capita basis, which is lower than the rate in mid-income countries (MIC), and much lower than that in high-income countries (HIC). The authors have also shown a profound understanding of excise taxation on alcoholic beverages, especially in Thailand. The conclusion that 'Two Chosen One (2C1)' taxation generates a higher average tax rate and results in lower alcohol consumption compared individually to the specific tax or the ad valorem tax is not a surprise. Because 2C1 employs the rate that yields a higher tax revenue between specific tax and ad valorem tax, it will always yield a tax revenue not less than that of the two methods. This means implicitly a 2C1 tax rate that is comparably not less than both the specific rate and the ad valorem rate. As a consequence, the use of 2C1 leads to lower consumption of any alcoholic beverage as long as the alcoholic beverage is not a Giffen good. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcohol Drinking Patterns
*Alcoholism
*Government Policy Making
*Sobriety
*Taxation
Developing Countries
Source: PsycINFO
Full Text: Available in fulltext at Wiley

77. An alternative taxation method for low- to middle-income countries: Comment.
Comments on an article by Bundit Sornpaisarn, Kevin D. Shield, and Jurgen Rehm (see record 2012-18585-003). The limitation of the recommended taxation approach is unrecorded alcohol, which represents 28% of world alcohol consumption but can be as high as 69% in South East Asia (SEAR) or 56% in eastern Mediterranean countries (EMR) of the total per capita in litres of pure alcohol; thus, a potential increase in its proportion would be an undesired consequence of increased taxes. As the authors establish, more research is needed; it would be very useful to add into the model the impact of unregulated alcohol to assess the benefits against the costs of the combined method. A shift in conceptualizing taxes as from being a source of revenue to one aimed at reducing the burden on health, avoiding relying on taxation as a unique measure, controlling unregulated alcohol and promoting international collaboration to prevent the importation or smuggling of lower-priced beverages, are much-needed measures.
Aim: Prevention of drinking initiation is a significant challenge in low- and middle-income countries that have a high prevalence of abstainers, including life-time abstainers. This paper aims to encourage a debate on an alternative alcohol taxation approach used currently in Thailand, which aims specifically to prevent drinking initiation in addition to reduce alcohol-attributable harms. Methods: Theoretical evaluation, simulation and empirical analysis. Result: The taxation method of Thailand, 'Two-Chosen-One' (2C1) combines specific taxation (as a function of the alcohol content) and ad valorem taxation (as a function of the price), resulting in an effective tax rate that puts a higher tax both on beverages which are preferred by heavy drinkers and on beverages which are preferred by potential alcohol consumption neophytes, compared to either taxation system alone. As a result of these unique properties of the 2C1 taxation system, our simulations indicate that 2C1 taxation leads to a lower overall consumption than ad valorem or specific taxation alone. In addition, it puts a relatively high tax on beverages attractive to young people, the majority of whom are currently abstaining. Currently, the abstention rates in Thailand are higher than expected based on its economic wealth, which could be taken as an indication that the taxation strategy is successful. Conclusion: 'Two-chosen-one' (2C1) taxation has the potential to simultaneously reduce alcohol consumption and prevent drinking initiation among youth; however, additional empirical evidence is needed to assess its effectiveness in terms of the public health impact in low- and middle-income countries. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
80. Collective amnesia: Reversing the global epidemic of addiction library closures.

Citation: Addiction, August 2012, vol./is. 107/8(1367-1368), 0965-2140;1360-0443 (Aug 2012)

Author(s): Mitchell, Andrea L; Lacroix, Sheila; Weiner, Barbara S; Imholtz, Clare; Goodair, Christine

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Language: English

Abstract: The internet has created a paradigm shift in the way information is published, searched and retrieved, affecting the perceived value of libraries and librarians. In this uncertain environment, access to the historical and current literature of the alcohol and other drug (AOD) field must not be compromised. The research community must ensure that libraries still have a place, and that digitization and digital repositories are also part of the AOD information landscape. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: HOLDER: SALIS; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcohols
*Drugs
*Information
*Librarians
*Libraries
Literature

Source: PsycINFO

Full Text: Available in fulltext at Wiley

81. Serum response factor and cAMP response element binding protein are both required for cocaine induction of FosB.

Citation: The Journal of Neuroscience, May 2012, vol./is. 32/22(7577-7584), 0270-6474;1529-2401 (May 30, 2012)

Author(s): Vialou, Vincent; Feng, Jian; Robison, Alfred J; Ku, Stacy M; Ferguson, Deveroux; Scobie, Kimberly N; Mazei-Robison, Michelle S; Mouzon, Ezekiell; Nestler, Eric J

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Page 63
Abstract:
The molecular mechanism underlying induction by cocaine of FosB, a transcription factor important for addiction, remains unknown. Here, we demonstrate a necessary role for two transcription factors, cAMP response element binding protein (CREB) and serum response factor (SRF), in mediating this induction within the mouse nucleus accumbens (NAc), a key brain reward region. CREB and SRF are both activated in NAc by cocaine and bind to the fosB gene promoter. Using viral-mediated Cre recombinase expression in the NAc of single or double-floxed mice, we show that deletion of both transcription factors from this brain region completely blocks cocaine induction of FosB in NAc, whereas deletion of either factor alone has no effect. Furthermore, deletion of both SRF and CREB from NAc renders animals less sensitive to the rewarding effects of moderate doses of cocaine when tested in the conditioned place preference (CPP) procedure and also blocks locomotor sensitization to higher doses of cocaine. Deletion of CREB alone has the opposite effect and enhances both cocaine CPP and locomotor sensitization. In contrast to FosB induction by cocaine, FosB induction in NAc by chronic social stress, which we have shown previously requires activation of SRF, is unaffected by the deletion of CREB alone. These surprising findings demonstrate the involvement of distinct transcriptional mechanisms in mediating FosB induction within this same brain region by cocaine versus stress. Our results also establish a complex mode of regulation of FosB induction in response to cocaine, which requires the concerted activities of both SRF and CREB. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
with doxycycline eliminates both the IA-mediated firing decrease and the elevated behavioral response to cocaine. This study identifies CaMKII regulation of IA in NAc shell neurons as a novel cellular contributor to the sensitization of cocaine reward. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Authors; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Cocaine
*Drug Sensitivity
*Nucleus Accumbens
*Rewards
Mice
Synapses
Source: PsycINFO

83. "A resounding success or a disastrous failure: Re-examining the interpretation of evidence on the Portuguese decriminalisation of illicit drugs": Erratum.

Citation: Drug and Alcohol Review, July 2012, vol./is. 31/5(727), 0959-5236;1465-3362 (Jul 2012)
Author(s): Hughes, Caitlin Elizabeth; Stevens, Alex
Institution: Hughes, Caitlin Elizabeth: Drug Policy Modelling Program, National Drug and Alcohol Research Centre, University New South Wales, Sydney, NSW; Stevens, Alex: School of Social Policy, Sociology and Social Research, University of Kent, Chatham Maritime
Language: English
Abstract: Reports an error in "A resounding success or a disastrous failure: Re-examining the interpretation of evidence on the Portuguese decriminalization of illicit drugs" by Caitlin Elizabeth Hughes and Alex Stevens (Drug and Alcohol Review, 2012[Jan], Vol 31[1], 101-113). In the original article, we stated that a report from the US Office for National Drug Control Policy (ONDCP) 'does not appear on the ONDCP website and the only source we could find is Dr Pinto Coelho himself'. We sincerely apologize if this was taken to believe this was not a real report of the ONDCP. We would not have cited it, or called it an instructive example for the AOD field, if this was the case. We only meant to report that we, and others at the time, could not find the source on the ONDCP website or in the broader public domain. Dr Coelho has informed Drug and Alcohol Review that the report is available on the ONDCP website: http://www.whitehouse.gov/sites/default/files/ondcp/Fact_Sheets/portugal_fact_sheet_8-25-10.pdf. We are happy to correct that in our paper and we apologize for any confusion caused to Dr Coelho or other readers. (The abstract of the original article appeared in record 2012-00081-015). (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Criminal Behavior
*Drug Abuse
*Drug Laws
*Government Policy Making
Source: PsycINFO
Full Text: Available in fulltext at Wiley

84. First to fulfil our responsibilities to addicted smokers: A response to Dalton.

Citation: Drug and Alcohol Review, July 2012, vol./is. 31/5(721-722), 0959-5236;1465-3362 (Jul 2012)
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Abstract: Comments on an article by C. Dalton (see record 2012-18384-018). Dalton courageously calls for open discussion about ending, once and for all, the public sale of tobacco in Australia. In fact, this discussion started 50 years ago, with the 1962 Royal College of Physicians study 'Smoking and Health', which reported the harms of smoking publicly, marking the beginning of a change in our relationship with smoking. Central to Dalton's argument is that partial bans do not go far enough, that they inadvertently perpetuate suffering and stigma for those who continue to smoke. Dalton argues that 'compression of suffering' from withdrawal, brought about by a total ban within months, is more humane than the drawn-out cycle we have currently, where gradual smoking restrictions and consequent reductions in consumption occur over several years. Dalton's proposition of ensuring provision of free nicotine replacement therapy (NRT) to smokers takes little account of complex determinants of NRT use by people with mental illness and the failure by many within systems of care to recognize nicotine addiction as part of the clinical picture of care for these smokers. They often fail to provide any NRT, let alone recognize that they have a responsibility to provide integrated cessation support. The changes required by a total smoking ban, as alluded to by Dalton, must occur within a concrete strategy. However, for groups such as those who experience mental illness and those who provide care to them, such strategies cannot occur in isolation from each other. The culture of smoking in mental health settings tells us that, given complex systems and values, change often happens slowly. Dalton further suggests that NRT could replace tobacco. It is an interesting thought, although NRT, without other forms of support, is unlikely to lead to successful cessation for the highly addicted smokers, often disproportionately represented in disadvantaged groups that make up the largest proportion of continuing smokers. Partial smoking bans policy is not flawed because it is a flawed policy. Using the mental health example, rather, it is implementation inconsistencies, such as lack of service provider will and skills to recognize and address addiction as part of support provided to people who experience mental illness, that determine the success of such policies. Population-wide smoking cessation is a process, not an event. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
Abstract: Although smoking rates among mental health/substance abusing populations are very high, the focus of treatment and research has tended to be on substances other than tobacco. A range of harm-reduction strategies is needed, including long-term nicotine maintenance, smokeless tobacco and 'clean' nicotine products. For those who cannot or will not quit, assistance in reducing smoking should be given. Interventions for smoking among people with mental health/substance use problems may best be delivered by addressing multiple health-risk behaviours, especially physical activity, around the same time. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Australasian Professional Society on Alcohol and other Drugs; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Usage  
*Harm Reduction  
*Mental Health  
*Smoking Cessation  
*Tobacco Smoking
Source: PsycINFO
Full Text: Available in fulltext at Wiley


Citation: Drug and Alcohol Review, July 2012, vol./is. 31/5(638-644), 0959-5236;1465-3362 (Jul 2012)
Author(s): Kelly, Peter J; Baker, Amanda L; Deane, Frank P; Kay-Lambkin, Frances J; Bonevski, Billie; Tregarthen, Jenna
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Language: English
Abstract: Introduction and Aims: People attending substance abuse treatment have an elevated risk of developing cardiovascular disease (CVD) and cancer. Consequently, there have been increasing calls for substance abuse treatment services to address smoking. The current study examined smoking behaviours of people attending residential substance abuse treatment. Additionally, the study examined rates of other potentially modifiable health risk factors for the development of CVD and cancer. Design and Methods: A cross-sectional survey was completed by participants attending Australian Salvation Army residential substance abuse treatment services (n = 228). Rates of smoking, exercise, dietary fat intake, body mass index and depression were identified and compared with representative community populations. The relationship between length of treatment and changes in these variables was also examined. Results: When compared with the Australian population, participants were much more likely to be current smokers. They also showed higher rates of dietary fat intake, and having had a previous diagnosis of a depressive disorder. Encouragingly, participants were more likely to be engaging in regular exercise. Over a third of all smokers reported having increased their smoking since attending the residential program, with correlational analysis suggesting that nicotine dependence was increasing the longer participants were in treatment. Discussion and Conclusions: People attending substance abuse treatment show extremely high rates of smoking (77%). With the large majority of participants showing multiple risk factors for CVD, it is important that residential services consider strategies to address smoking
and the other potentially modifiable health risk factors in an integrated fashion.

Country of Publication: HOLDER: Australasian Professional Society on Alcohol and other Drugs; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Abuse *Drug Rehabilitation *Residential Care Institutions *Risk Factors *Tobacco Smoking Health Neoplasms
Source: PsycINFO
Full Text: Available in fulltext at Wiley

87. Integrating synaptic plasticity and striatal circuit function in addiction.

Citation: Current Opinion in Neurobiology, June 2012, vol./is. 22/3(545-551), 0959-4388 (Jun 2012)
Author(s): Grueter, Brad A; Rothwell, Patrick E; Malenka, Robert C
Correspondence Address: Malenka, Robert C.: Nancy Pritzker Laboratory, Department of Psychiatry and Behavioral Sciences, Stanford University School of Medicine, Palo Alto, CA, US, 94305, malenka@stanford.edu
Institution: Grueter, Brad A.: Nancy Pritzker Laboratory, Department of Psychiatry and Behavioral Sciences, Stanford University School of Medicine, Palo Alto, CA; Rothwell, Patrick E.: Nancy Pritzker Laboratory, Department of Psychiatry and Behavioral Sciences, Stanford University School of Medicine, Palo Alto, CA; Malenka, Robert C.: Nancy Pritzker Laboratory, Department of Psychiatry and Behavioral Sciences, Stanford University School of Medicine, Palo Alto, CA
Language: English
Abstract: Exposure to addictive drugs causes changes in synaptic function within the striatal complex, which can either mimic or interfere with the induction of synaptic plasticity. These synaptic adaptations include changes in the nucleus accumbens (NAc), a ventral striatal subregion important for drug reward and reinforcement, as well as the dorsal striatum, which may promote habitual drug use. As the behavioral effects of drugs of abuse are long-lasting, identifying persistent changes in striatal circuits induced by in vivo drug experience is of considerable importance. Within the striatum, drugs of abuse have been shown to induce modifications in dendritic morphology, ionotropic glutamate receptors (iGluR) and the induction of synaptic plasticity. Understanding the detailed molecular mechanisms underlying these changes in striatal circuit function will provide insight into how drugs of abuse usurp normal learning mechanisms to produce pathological behavior. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Ltd.; YEAR: 2011
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Addiction *Drug Abuse *Glutamate Receptors *Nucleus Accumbens *Synaptic Plasticity
Source: PsycINFO

88. Editor's letter.
This issue of Journal of Correctional Health Care encourages correctional health practitioners and allied professionals to submit manuscripts covering the full spectrum of correctional medicine, recent legal decisions and their implications, administrative management, and policy development. The correctional health field encompasses a wide spectrum of disciplines including medicine, nursing, dental, mental health, substance abuse, community health and social programs, reentry and discharge planning, and much more. (PsycINFO Database Record (c) 2012 APA, all rights reserved)


Despite the strong correlation between caregiver substance abuse and child maltreatment, little information exists to understand the typology of African American caregivers with substance abuse problems in the child welfare system. Research shows African American caregivers contend with multiple problems stemming from substance abuse. Unfortunately, we do not yet know how to best tailor resources to be responsive to varying groups of African American caregivers. Using data from the National Survey of Child and Adolescent Well-being (NSCAW), this investigation tested for distinct multivariate profiles among a subset of African American caregivers with substance abuse problems (n = 258). Latent Class Analysis (LCA) was used to classify caregivers, and five classes were identified among this high risk sample-each with distinct risk profiles. Based on these findings, we discuss implications for tailored practices to enhance the safety and stability of children involved with child welfare. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
90. Prevalence and determinants of intimate partner violence against women in Marivan County, Iran.

Citation: Journal of Family Violence, July 2012, vol./is. 27/5(391-399), 0885-7482;1573-2851 (Jul 2012)

Author(s): Nouri, Roonama; Nadrian, Haidar; Yari, Arezoo; Bakri, Gona; Ansari, Bahjat; Ghazizadeh, Ahmad

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Institution: Nouri, Roonama: School of Health, Hamedan University of Medical Sciences, Hamedan; Nadrian, Haidar: Department of Nursing, Islamic Azad University-Sanandaj Branch, Sanandaj; Yari, Arezoo: School of Health, Tehran University of Medical Sciences, Tehran; Bakri, Gona: School of Health, Tehran University of Medical Sciences, Tehran; Ansari, Bahjat: Department of Psychology, Islamic Azad University-Tabriz Branch, Tabriz; Ghazizadeh, Ahmad: School of Health, Kurdistan University of Medical Sciences, Kurdistan

Language: English

Abstract: This paper reports on the prevalence of intimate partner violence (IPV) as well as individual, socioeconomic, and family function characteristics associated with IPV among women attending public health services in Marivan County, Iran. Multistage cluster sampling was employed to recruit 770 women to participate in the study. This descriptive, cross-sectional study took place from May to November 2009. The majority of the women (79.7 %) had experienced psychological IPV, followed by physical IPV (60 %) and sexual IPV (32.9 %). There was a positive significant relationship between IPV and education level of women and the level of religious commitment in both women and spouses. Spouse's smoking, addiction to drugs, mental illness, and weakness in religious persuasion were statistically significant predictors of IPV and accounted for 36% of the variation. This correlational study suggests that educational programs regarding these risk factors and their associations with the outcome of IPV should be designed by healthcare providers and implemented not only in healthcare facilities, but presented from local media. Public health services and healthcare facilities can play an important role in the detection of IPV and improve responses to victims by establishing education centers and informing women of the best ways they can confront this deleterious problem. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Educational Attainment Level
*Family Structure
*Intimate Partner Violence
*Socioeconomic Status
Human Females
Public Health Services


Citation: Expert Review of Neurotherapeutics, May 2012, vol./is. 12/5(601-610), 1473-7175;1744-8360 (May 2012)

Author(s): Hartrick, Craig T; Gatchel, Robert J; Conroy, Sean

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Institution: Hartrick, Craig T.: Oakland University William Beaumont School of Medicine, Rochester, MI; Gatchel, Robert J.: Department of Psychology, College of Science,
University of Texas at Arlington, Arlington, TX; Conroy, Sean: Pain Division, Department of Anesthesiology, Beaumont Health System, Troy, MI

Language: English

Abstract: Long-term opioid therapy poses a risk for abuse and misuse in some patients. Identifying which patients may potentially be at risk prior to initiation of therapy, and identifying patients in whom these problems develop during therapy, are significant challenges. Outcome prediction is impeded by the complexity of the problem, where considerable heterogeneity results from psychological and socioeconomic factors, as well as interindividual variation in biological pathways due to genetic and epigenetic factors. Screening tools designed to detect opioid misuse and urine drug testing are both used clinically; scant evidence currently exists to allow the formulation of an algorithm for judicious use of these tools. Moreover, these tools may not be addressing the underlying alterations in biological pathways that occur owing to the development of chronic pain or in response to chronic opioid administration. An evidence-based algorithmic approach to risk mitigation that can be applied in a cost-effective manner to guide therapy is urgently needed. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse
*Drug Therapy
*Opiates
*Pain Management
*Risk Factors

Source: PsycINFO

92. Harm reduction--The right policy approach for Africa?

Citation: African Journal of Drug and Alcohol Studies, 2011, vol./is. 10/1(59-69), 1531-4065 (2011)

Author(s): Klein, Axel

Correspondence Address: Klein, Axel: Centre for Health Science Studies, University of Kent, Kent, United Kingdom, A.Klein@Kent.ac.uk

Institution: Klein, Axel: Centre for Health Science Studies, University of Kent, Kent

Language: English

Abstract: African policy makers find themselves confronted by a phenomenon of rising substance use particularly in urban areas. The knowledge base in terms of prevalence rates, medical consequences, patterns and cultures of consumption remains patchy. Responses are largely driven by imported models advocated by drug control agencies and development partners. There are two inherent flaws to this-first, many of the methods from treatment modalities to drug enforcement techniques were designed for completely different social and cultural scenarios. Secondly, the mode of operation is that of a 'war on drugs', where the problem is inherent to the drug itself. The consequences of such a policy can be even more devastating than the drug use itself. The harm reduction paradigm that takes drug use as a fact of modern life, but addresses its problems with regulative intervention provides a policy orientation that is more promising. Existing drug cultures-khat, kola, iboga-that originated and are unique to Africa should be understood within both traditional and quickly evolving modern contexts. A system of regulation should be advocated against vested professional and organizational interest. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse
*Harm Reduction
*Policy Making
### 93. Cannabis use among young people in Dar es Salaam, Tanzania: A qualitative study.

**Citation:** African Journal of Drug and Alcohol Studies, 2011, vol./is. 10/1(29-39), 1531-4065 (2011)

**Author(s):** Kalula, Alphonce T

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**Institution:** Kalula, Alphonce T.: Department of Clinical Nursing, Muhimbili University of Health and Allied Sciences, Dar-es-Salaam

**Language:** English

**Abstract:** The aim of this study was to explore the factors associated with initiation and continued use of cannabis among youths in Dar es salaam, Tanzania. The study employed an explorative qualitative design, using in-depth interviews. Purposive sampling and snowball techniques were used to obtain the study participants. The collected data was subjected to content analysis and the study involved a sample of twelve participants whereby eight of them were cannabis users and four were parents. The findings revealed that loss of parents, having peers who smoke cannabis, being raised in broken family, as well as choosing a career the child did not like were among the factors linked to initiation of cannabis use. Furthermore, the study revealed delinquency behavior in school as well as lack of interest in school life, disregard to religious and parental could be strong indicators for the use of cannabis among youths. Further more the study highlighted issues related to cannabis use like readiness to quit and challenges anticipated and factors associated with continuing use of cannabis. The study concludes that, there are many factors in families and communities that predispose youths to engage in cannabis use. The majority of those factors seem to emanate from within families and the society at large.

(PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

### 94. Prevalence and specific psychosocial factors associated with substance use and psychiatric morbidity among patients with HIV infection at Usmanu Danfodiyo University Teaching Hospital, Sokoto State, Nigeria.

**Citation:** African Journal of Drug and Alcohol Studies, 2011, vol./is. 10/1(11-16), 1531-4065 (2011)

**Author(s):** Yunusa, Mufutau A; Obembe, Ayodele; Ibrahim, Taofeek; Njoku, Chibueze H

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**Language:** English

**Abstract:** In this study we set out to determine the prevalence of depression and anxiety disorders among HIV infected persons, prevalence of substance use among these patients, effect of
active and inactive use of substance on drug compliance and clinic attendance, and psychosocial correlates of substance use among these patients. This cross sectional study was conducted among patients who had been diagnosed with HIV disease in a teaching hospital in Sokoto, Nigeria. A questionnaire relating to socio-demographic variables, substance use and psychiatric morbidity was administered to the patients. Information obtained were analyzed using SPSS version 11 with the test of significance set at p < 0.05. Our study showed that more male patients used substance than the female patients. In addition, the presence of psychiatric morbidity and substance use had implications for clinic attendance and drug compliance. In the overall management of HIV infected patients, regular screening for substance use and psychiatric morbidity should be carried out and referrals made appropriately. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Abuse
*Epidemiology
*HIV
*Mental Health
*Psychosocial Factors
AIDS
Anxiety Disorders
Major Depression
Morbidity
Source: PsycINFO

95. HIV risk behaviours, perceived severity of drug use problems, and prior treatment experience in a sample of young heroin injectors in Dar es Salaam, Tanzania.

Citation: African Journal of Drug and Alcohol Studies, 2011, vol./is. 10/1(1-9), 1531-4065 (2011)
Author(s): Atkinson, John; McCurdy, Sheryl; Williams, Mark; Mbwambo, Jessie; Kilonzo, Gad
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Institution: Atkinson, John: Center for Health Promotion and Prevention Research, University of Texas School of Public Health, Houston, TX; McCurdy, Sheryl: Center for Health Promotion and Prevention Research, University of Texas School of Public Health, Houston, TX; Williams, Mark: Department of Health Policy and Management, Robert Stempel College of Public Health and Social Work, Florida International University, Miami, FL; Mbwambo, Jessie: Department of Psychiatry and Mental Health, Muhimbili National Hospital; Kilonzo, Gad: Muhimbili University of Health and Allied Sciences, Dar es Salaam
Language: English
Abstract: Interviews were conducted with 203 male and 95 female heroin injectors aged 17 to 25 in Dar es Salaam, Tanzania. Nearly one-quarter of participants reported injecting with needles used by someone else. Few reported cleaning needles with bleach. Multiple sexual partnerships, unprotected sex, and trading sex for money were especially present among women, the majority (55%) of whom was HIV seropositive. Self reports suggest the presence of heroin dependence among users. While most participants expressed a desire to quit their use, only 14 (5%) had been in treatment. There appears to be a large unmet need for heroin use treatment. These findings need to be considered in light of a potential forthcoming wave of heroin injection in sub-Saharan Africa. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Attitudes
96. Long-term effectiveness of psychodynamic outpatient treatment of addiction.

**Original Title:** Nachhaltigkeit einer ambulanten psychoanalytisch-interaktionellen Suchtrehabilitation.

**Citation:** Fortschritte der Neurologie, Psychiatrie, July 2012, vol./is. 80/7(394-401), 0720-4299 (Jul 2012)

**Author(s):** Steffen, D. V; Werle, L; Steffen, R; Steffen, M; Steffen, S

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**Language:** German

**Abstract:** Background: The aim of this study is to make an evaluation of the effectiveness of long-term outpatient treatment for addiction on the basis of abstinence, cognitive functions, and changes in personality structure. Methods: This is a prospective cohort study of 259 patients with registration of the German core data set addiction⁴, a 12-month follow-up and neuropsychological testing (personality inventory, intelligence and cognitive functions). Results: One year after the end of the long-term treatment we see an abstinence rate (DGSS4) of 57.5 %. The most substantial factors in abstinence are the participation in a self-help-group ( = 0.734, p < 0.0001). Known negative predictors such as unemployment ( = - 0.093, p < 0.01) and problematic debts over 15,000 $ ( = - 0.104, p < 0.01) just show a small negative correlation with abstinence. The results seem to indicate that patients have better overall performance and achieve better results in the neuropsychological testing at the end of the rehabilitation. The ideal and self-image may be changed positively. We see also unspecific changes classified by a reduction of the psychological test values regarding conversion symptoms, depressive mood, psychasthenia and social isolation. At the end of the long-term treatment the patients show significantly better cognitive functions and an improvement in their ideals and self-images. Conversion symptoms, depressive mood and reduced values for psychasthenia and social isolation can be decreased. Discussion: These results of a psycho-dynamic outpatient treatment of addiction seem to show its high effectiveness in terms of abstinence and processing of drug structures. The cognitive functions could increase. This could be determinate of a condition for the conservation and restoration of working capacity. Further studies should differentiate the effect of insight into the dependency structure from the abstinence as an specific or unspecific effect. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
97. Associations between three characteristics of parent-youth relationships, youth substance use, and dating attitudes.

Citation: Health Promotion Practice, July 2012, vol./is. 13/4(515-523), 1524-8399;1552-6372 (Jul 2012)

Author(s): Tharp, Andra Teten; Noonan, Rita K

Institution: Tharp, Andra Teten: Centers for Disease Control and Prevention, Atlanta, GA; Noonan, Rita K.: Centers for Disease Control and Prevention, Atlanta, GA

Language: English

Abstract: Various dimensions of parenting have been associated with youth risk behaviors, such as substance use and dating violence. These associations have spawned many prevention strategies that focus on parenting. However, it is unclear which characteristics of parent-youth relationships, and thus, which parent-focused prevention strategies, may be most influential in youth risk behaviors and, thus, which should be targeted in prevention. Using responses from the YouthStyles 2007 survey (N = 1,357), this study identified three youth-reported parent-youth relationship characteristics: communication about risk behaviors, closeness/respect, and rules/monitoring. The authors examined the associations among these characteristics and youths’ demographics, attitudes supporting controlling dating relationships, and use of alcohol, marijuana, and tobacco. Results suggested risk behavior communication was more frequently reported by girls and was more frequent among older youth. Closeness/respect and rules/monitoring were more frequent among younger youth. Regressions suggested communication about risk behaviors was not a predictor of attitudes supporting controlling dating relationships but was a significant predictor of substance use, closeness/respect and rules/monitoring predicted substance nonuse and attitudes unsupportive of controlling dating relationships. The findings suggest that parental communication alone may not be sufficient to influence youth risk taking, but that parental monitoring and the establishment of respectful, close relationships with children may be important elements of parent-focused health promotion efforts. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Society for Public Health Education; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Adolescent Attitudes *Drug Usage *Parent Child Relations *Social Dating Health Promotion

Source: PsycINFO

Full Text: Available in full text at Highwire Press

98. Electronic medical record system at an opioid agonist treatment programme: Study design, pre-implementation results and post-implementation trends.

Citation: Journal of Evaluation in Clinical Practice, August 2012, vol./is. 18/4(739-745), 1356-1294;1365-2753 (Aug 2012)

Author(s): Kritz, Steven; Brown, Lawrence S Jr.; Chu, Melissa; John-Hull, Carlota; Madray, Charles; Zavala, Roberto; Louie, Ben

Correspondence Address: Kritz, Steven: Division of Medical Services, Research and Information Technology, Addiction Research and Treatment Corporation, 22 Chapel Street, Brooklyn, NY, US, 11201, skritz@artcny.org
Rationale: Electronic medical record (EMR) systems are commonly included in health care reform discussions. However, their embrace by the health care community has been slow. Methods: At Addiction Research and Treatment Corporation, an outpatient opioid agonist treatment programme that also provides primary medical care, HIV medical care and case management, substance abuse counselling and vocational services, we studied the implementation of an EMR in the domains of quality, productivity, satisfaction, risk management and financial performance utilizing a prospective pre- and post-implementation study design. Results: This report details the research approach, pre-implementation findings for all five domains, analysis of the pre-implementation findings and some preliminary postimplementation results in the domains of quality and risk management. For quality, there was a highly statistically significant improvement in timely performance of annual medical assessments (P < 0.001) and annual multidiscipline assessments (P < 0.0001). For risk management, the number of events was not sufficient to perform valid statistical analysis. Conclusions: The preliminary findings in the domain of quality are very promising. Should the findings in the other domains prove to be positive, then the impetus to implement EMR in similar health care facilities will be advanced. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
Services, Research and Information Technology, Addiction Research and Treatment Corporation, Brooklyn, NY; Chu, Melissa: Division of Medical Services, Research and Information Technology, Addiction Research and Treatment Corporation, Brooklyn, NY; Madray, Charles: Division of Medical Services, Research and Information Technology, Addiction Research and Treatment Corporation, Brooklyn, NY; Zavala, Roberto: Division of Medical Services, Research and Information Technology, Addiction Research and Treatment Corporation, Brooklyn, NY

Language: English

Abstract: Rationale: Electronic health systems are commonly included in health care reform discussions. However, their embrace by the health care community has been slow. Methods: At Addiction Research and Treatment Corporation, a methadone maintenance programme that also provides primary medical care, HIV medical care and case management, substance abuse counselling and vocational services, we describe our experience in implementing an electronic health information system that encompasses all of these areas. Results: We describe the challenges and opportunities of this process in terms of change management, hierarchy of corporate objectives, process mastering, training issues, information technology governance, electronic security, and communication and collaboration. Conclusion: This description may provide practical insights to other institutions seeking to pursue this technology. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Health Care Services
*Health Care Utilization
*Occupational Guidance
*Opiates
*Rehabilitation Counseling
Therapeutic Processes

Source: PsycINFO

Full Text: Available in fulltext at Wiley

100. Physicians and medical marijuana.

Citation: The American Journal of Psychiatry, June 2012, vol./is. 169/6(564-568), 0002-953X;1535-7228 (Jun 1, 2012)

Author(s): Kleber, Herbert D; Dupont, Robert L

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Institution: Kleber, Herbert D.: Division on Substance Abuse, Columbia University, New York, NY; Dupont, Robert L.: Division on Substance Abuse, Columbia University, New York, NY

Language: English

Abstract: The purpose of this article is to provide psychiatrists with an overview of the issues raised by medical marijuana and the evidence available to help them educate their patients. Many medical uses for marijuana have been proposed. Those indications with the most evidence include severe nausea/vomiting associated with cancer chemotherapy; cachexia associated with AIDS or cancer; spasticity secondary to neurological diseases such as multiple sclerosis; pain management, especially neuropathic pain; and rheumatoid arthritis. Physicians may be concerned about the malpractice or liability issues that arise from a "recommendation of use" rather than a clear prescription stating the dosage, quantity, and directions for use that accompany a regulated medication. Physicians should help their patients obtain approved medications for legitimate medical problems. They should also consider the greater impact of referral decisions on their communities, which have been affected by the increase in marijuana dispensaries. We encourage physicians as respected opinion leaders to speak out in support of the nation's science-based drug approval system and drug distribution through licensed pharmacies. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
101. An observational study to determine the prevalence of alcohol use disorders in advanced cancer patients.

Citation: Palliative Medicine, June 2012, vol./is. 26/4(360-367), 0269-2163;1477-030X (Jun 2012)

Author(s): Webber, Katherine; Davies, Andrew N

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Institution: Webber, Katherine: Royal Marsden NHS Hospitals Trust, Sutton; Davies, Andrew N: Royal Surrey County Hospital NHS Trust, Guildford

Language: English

Abstract: Context: observational studies in North America suggest alcohol dependence is a common problem in advanced cancer patients and is associated with a high burden of physical and psychological symptoms. The prevalence of all types of alcohol use disorders, and the relationship between alcohol use disorders and symptoms, has not been studied. Objectives: this observational, cross-sectional study was designed to determine the prevalence of alcohol use disorders in patients with advanced cancer and establish if such patients have a higher symptom burden. Methods: sequential patients referred to the palliative medicine team at a United Kingdom cancer centre completed the Alcohol Use Disorders Identification Test, Hospital Anxiety and Depression Scale (HADS) and Memorial Symptom Assessment Scale-Short Form (MSAS-SF). Results: 120 patients participated in the study. Twenty-two (18%) patients screened positively for the presence of an alcohol use disorder. This study found no significant association between alcohol use disorders and the presence of anxiety (P = 0.38) or depression (P = 0.81) on the HADS or the global distress index subscale (P = 0.142), physical symptom distress index subscale (P = 0.734), or the psychological distress index subscale (P = 0.154) on the MSAS-SF. Current smoking status was the only independent predictor for the presence of an alcohol use disorder (P < 0.001). Seven (6%) patients screened positively for high-risk alcohol use disorders. Current smoking status (P < 0.001) and male gender (p < 0.001) were independent predictors of this problem. Conclusions: alcohol use disorders in this cohort of patients were not associated with a higher symptom burden, and the prevalence was lower than the general United Kingdom population. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
102. Illicit drug use as a challenge to the delivery of end-of-life care services to homeless persons: Perceptions of health and social services professionals.

Citation: Palliative Medicine, June 2012, vol./is. 26/4(350-359), 0269-2163;1477-030X (Jun 2012)

Author(s): McNeil, Ryan; Guirguis-Younger, Manal

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Institution: McNeil, Ryan: University of British Columbia, BC; Guirguis-Younger, Manal: Saint Paul University

Language: English

Abstract: Homeless persons tend to die younger than the housed population and have complex, often unmet, end-of-life care needs. High levels of illicit drug use among this population are a particular challenge for health and social services professionals involved in end-of-life care services delivery. This article explores the challenges of end-of-life care services to homeless illicit drug users based on data collected during a national study on end-of-life care services delivery to homeless persons in Canada. The authors conducted qualitative interviews with 50 health and social services professionals involved in health services delivery to homeless persons in five cities. Interviews were transcribed verbatim and analysed thematically. Themes were organised into two domains. First, barriers preventing homeless illicit drug users from accessing end-of-life care services, such as competing priorities (e.g. withdrawal management), lack of trust in healthcare providers and discrimination. Second, challenges to end-of-life care services delivery to this population in health and social care settings, including non-disclosure of illicit drug use, pain and symptom management, interruptions in care, and lack of experience with addictions. The authors identify a need for increased research on the role of harm reduction in end-of-life care settings to address these challenges. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Author(s); YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Usage
*Harm Reduction
*Homeless
*Palliative Care
Health Personnel Attitudes
Social Services

Source: PsycINFO

Full Text: Available in fulltext at Highwire Press
Available in fulltext at ProQuest

103. The addicted self and modernity.

Citation: Culture & Psychology, June 2012, vol./is. 18/2(219-226), 1354-067X;1461-7056 (Jun 2012)

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Language: English

Abstract: In this paper addiction is regarded as a possible pathway to achieve an understanding of modernity. What they both share are ambivalence and ambiguity as basic characteristics. These aspects are also expressed in psychological terms like perception and feelings, which are pursued historically by referring to Leibniz and Kant, by whom they became
closely related to change and unpredictability. Thus, feelings understood in terms of inhibition stand out as a core aspect of modernity. Feelings, however, stand in opposition to language. On this basis music may replace texts as an expression for the modern, ambiguous self. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Author(s); YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Modernization
*Psychology
*Sociology
*Addiction

Source: PsycINFO

104. Writing drug cultures.

Citation: Culture & Psychology, June 2012, vol./is. 18/2(198-218), 1354-067X;1461-7056 (Jun 2012)
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Language: English
Abstract: The paper juxtaposes the cultural mediation of experience through drugs with that performed with text. As a sample of the currently radically changing relations between professional and lay knowledge in the field of drug interventions, the website of a Copenhagen institution for young drug users is discussed. In particular, six different readings are offered of the coexistense of (professional) "facts" and (lay) "narratives": Taking off from the two opposite, critical-modern readings where one cancels the other, and the parallellist reading that acknowledges the two cultures as simply unrelated, a fourth reading identifies a post-modern convergence between science and common sense. An ideology critique of the pragmatic construction of such common sense reveals it as a disengagement of language from material aspects of practice that produces a dichotomy of authenticity and pretense, and serves to regulate exclusion. This leads to an alternative articulation of the website as contributing to the construction of collectives that challenge the culture of consumption in which addiction is embedded. In conclusion, it is claimed that in order to grasp and facilitate such a more substantial recognition, it is necessary to transcend the standpoint of civil society and embrace a transformative welfare-state collectivity. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Author(s); YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Rehabilitation
*Drugs
*Mediation

Source: PsycINFO

105. Subjective perceptions associated with the ascending and descending slopes of breath alcohol exposure vary with recent drinking history.

Citation: Alcoholism: Clinical and Experimental Research, June 2012, vol./is. 36/6(1050-1057), 0145-6008;1530-0277 (Jun 2012)
Author(s): Wetherill, Leah; Morzorati, Sandra L; Foroud, Tatiana; Windisch, Kyle; Darlington, Todd; Zimmerman, Ulrich S; Plawecki, Martin H; O'Connor, Sean J
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Language: English

Abstract: Background: The differentiator model predicts that individuals with a positive family history of alcoholism (FHA) or heavy alcohol consumers will feel more sensitive to the effects of alcohol on the ascending phase of the blood alcohol content while feeling less sedated on the descending phase. This study tested whether subjective perceptions are sensitive to the slope of breath alcohol concentration (BrAC) and whether that sensitivity is associated with an FHA and/or recent drinking history (RDH). Methods: Family-history-positive (FHP, n = 27) and family-history-negative (FHN, n = 27) young adult nondependent drinkers were infused intravenously with alcohol in 2 sessions separated by 1 week. After 20 minutes, one session had an ascending BrAC (+3.0 mg%/min), while the other session had a descending BrAC (-1 mg%/min). The BrAC for both sessions at this point was approximately 60 mg%, referred to as the crossover point. Subjective perceptions of intoxication, high, stimulated, and sedation were sampled frequently and then interpolated to the crossover point. Within-subject differences between ascending and descending responses were examined for associations with FHA and/or RDH. Results: Recent moderate drinkers reported increased perceptions of feeling intoxicated (p < 0.023) and high (p < 0.023) on the ascending slope compared with the descending slope. In contrast, recent light drinkers felt more intoxicated and high on the descending slope. Conclusions: Subjective perceptions in young adult social drinkers depend on the slope of the BrAC when examined in association with RDH. These results support the differentiator model hypothesis concerning the ascending slope and suggest that moderate alcohol consumers could be at risk for increased alcohol consumption because they feel more intoxicated and high on the ascending slope. Subjects did not feel less sedated on the descending slope, contrary to the differentiator model but replicating several previous studies. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
Abstract:
Background: Higher levels of impulsivity have been implicated in the development of alcohol use disorders. Recent findings suggest that impulsivity is not a unitary construct, highlighted by the diverse ways in which the various measures of impulsivity relate to alcohol use outcomes. This study simultaneously tested the following dimensions of impulsivity as determinants of alcohol use and alcohol problems: risky decision making, self-reported risk-attitudes, response inhibition, and impulsive decision making. Methods: Participants were a community sample of nontreatment seeking problem drinkers (n = 158). Structural equation modeling (SEM) analyses employed behavioral measures of impulsive decision making (delay discounting task [DDT]), response inhibition (stop signal task [SST]), and risky decision making (Balloon Analogue Risk Task [BART]), and a self-report measure of risk-attitudes (domain-specific risk-attitude scale [DOSPERT]), as predictors of alcohol use and of alcohol-related problems in this sample. Results: The model fits well, accounting for 38% of the variance in alcohol problems, and identified 2 impulsivity dimensions that significantly loaded onto alcohol outcomes: (i) impulsive decision making, indexed by the DDT; and (ii) risky decision making, measured by the BART. Conclusions: The impulsive decision-making dimension of impulsivity, indexed by the DDT, was the strongest predictor of alcohol use and alcohol pathology in this sample of problem drinkers. Unexpectedly, a negative relationship was found between risky decision making and alcohol problems. The results highlight the importance of considering the distinct facets of impulsivity to elucidate their individual and combined effects on alcohol use initiation, escalation, and dependence. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
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Language: English

Abstract: Background: This study examined the prevalence of single- and multiple-type childhood trauma exposure (CTE) among alcoholic patients undergoing inpatient detoxification and treatment. The relationships between various types of CTE and lifetime psychiatric comorbidities and suicide attempts were also explored. Methods: A total of 196 alcoholic inpatients were assessed by Structured Clinical Interview for DSM-IV Axis I Disorders and Childhood Trauma Questionnaire (CTQ) for CTE history. Results: The overall prevalence of CTE in the entire sample was high (55.1%). Specifically, the prevalence of emotional abuse was 21.4%, physical abuse 31.1%, sexual abuse 24.0%, emotional neglect 20.4%, and physical neglect 19.9%. Regarding multiple types of CTE, 31.7 and 18.9% reported at least 2 and at least 3 CTE types, respectively. Strikingly, among those with at least 1 positive CTQ category, more than half reported 2 or more CTE types. A history of emotional abuse increased the risk of mood disorder, in particular major depressive disorder, as well as posttraumatic stress disorder (PTSD). Physical abuse contributed to the prediction of suicide attempts, while sexual abuse was associated with a diagnosis of anxiety disorder, PTSD, and multiple comorbidities (e.g., anxiety and mood disorder). The number of reported CTE types or the total score of the CTQ predicted an increased risk of having single or multiple psychiatric comorbidities as well as suicide attempts. Conclusions: We observed high rates of a broad range of CTE types and a trend for CTE-specific enhancement of risk for various psychiatric outcomes among alcoholic inpatients. Of note, a dose-response relationship between number of CTE types and risk of psychiatric comorbidities as well as suicide attempts was found. We suggest a wide range of CTE should be included when exploring the effects of CTE or developing prevention and treatment strategies among alcoholic subjects. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Research Society on Alcoholism; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcoholism *Comorbidity *Trauma Attempted Suicide Detoxification Hospitalized Patients Mental Disorders

Source: PsycINFO

Full Text: Available in fulltext at Wiley

108. The interpretability of family history reports of alcoholism in general community samples: Findings in a Midwestern U. S. twin birth cohort.

Citation: Alcoholism: Clinical and Experimental Research, June 2012, vol./is. 36/6(1091-1098), 0145-6008;1530-0277 (Jun 2012)
Background: Although there is a long tradition in alcoholism research of using family history ratings, the interpretability of family history reports of alcoholism from general community samples has yet to be established. Methods: Telephone interview data obtained from a large cohort of female like-sex twins (N = 3,787, median age 22) and their biological parents (N = 2,928, assessed at twins' median age 15) were analyzed to determine agreement between parent self-report, parent ratings of coparent, and twin narrow (alcohol problems) and broad (problem or excessive drinking) ratings of each parent. Results: In European ancestry (EA) families, high tetrachoric correlations were observed between twin and cotwin ratings of parental alcohol problems, between twin and parent ratings of coparent alcohol problems using symptom-based and single-item assessments, as well as moderately high correlations between twin and both mother and father self-reports. In African American (AA) families, inter-rater agreement was substantially lower than for EA families, with no cases where father ratings of maternal alcohol problems agreed with either twin ratings or mother self-report, and both cotwin agreement and mother-twin agreement were reduced. Differences between EA and AA families were not explained by differences in years of cohabitation with father or mother's education; however, underreporting of problems by AA parents may have contributed. Conclusions: Results support the use of family history ratings of parental alcoholism in general community surveys for EA families, but suggest that family history assessment in AA families requires improved methods. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
Abstract:

Background: Hyperreactivity and impaired sensory gating of the acoustic startle response in alcohol dependence has been suggested to reflect a residual effect of previous detoxifications, increasing the severity of subsequent withdrawal episodes. Previous studies on the acoustic startle only included early-onset alcohol-dependent patients. The observed abnormalities may therefore also be specific for this subtype of alcohol dependence. We investigated the acoustic startle response in alcohol-dependent patients and healthy controls and hypothesized that (i) early-onset alcohol-dependent patients show increased acoustic startle responses compared with late-onset alcohol-dependent patients and healthy controls, and (ii) the duration of alcohol dependence or the number of prior detoxifications would not explain the differences in the acoustic startle between early- and late-onset alcohol dependence. Methods: The acoustic startle reflex was assessed in detoxified, male alcohol-dependent patients (N = 83) and age-matched healthy male controls (N = 86). Reflex eye blink responses to an auditory startle stimulus were measured by means of electromyographic recordings over the right orbicularis oculi muscle. Reflex amplitudes and levels of prepulse inhibition (PPI) were analyzed. Results: There was no association between number of previous withdrawals and the startle response or PPI. Early-onset alcohol-dependent patients showed higher acoustic startle amplitudes compared with late-onset alcohol-dependent patients and healthy controls [75/105 dB: F(2, 166) = 9.2, p < 0.001; 85/105 dB: F(2, 166) = 12.1, p < 0.001; 95 dB: F(2, 166) = 8.2, p < 0.001; 105 dB: F(2, 166) = 9.7, p < 0.001], and there were no differences in PPI. Conclusions: Increased acoustic startle response in detoxified early-onset alcohol-dependent patients may reflect a trait marker specifically involved in early-onset alcohol dependence. The findings of the current study do not support the hypothesis that the increased startle response is a residual state marker. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
Background: Chronic and excessive consumption of alcohol is associated with structural, physiological, and functional changes in multiple regions of the human brain including the prefrontal cortex, the medial temporal lobe, and the structures of the reward system. The present study aimed to assess the ability of alcohol-dependent patients (ADP) to learn probabilistic stimulus-reward contingencies and to transfer the acquired knowledge to new contexts. During transfer, the relative preference to learn from positive or negative feedback was also assessed. Methods: Twenty-four recently detoxified ADP and 20 healthy controls engaged in a feedback learning task with monetary rewards. The learning performance per se and transfer performance including positive versus negative learning were examined, as well as the relationship between different learning variables and variables comprising alcohol and nicotine consumption patterns, depression, and personality traits (harm avoidance and impulsivity). Results: Patients did not show a significant general learning deficit in the acquisition of stimulus-response-outcome associations. Fifteen healthy subjects and 13 patients reached the transfer phase, in which ADP showed generally lower performance than healthy controls. There was no specific deficit with regard to learning from positive or negative feedback. The only near-significant (negative) correlation between learning variables and drug consumption patterns, depression, and personality traits emerged for harm avoidance and positive learning in controls. Conclusions: Impaired transfer performance suggests that ADP had problems applying their acquired knowledge in a new context. Potential relations to dysfunctions of specific brain structures and implications of the finding for therapy are discussed. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
Abstract: Background: Level of response (LR) to alcohol has been shown to be associated with the risk of developing alcohol dependence and can be measured using the self-rating of the effects of alcohol (SRE) questionnaire. This study examined the heritability of the SRE-measured LR and the relationship between LR and recent alcohol drinking history (RDH) in a predominantly African American nonalcohol-dependent population. Methods: This was a sibling study of 101 social drinkers aged 21 to 35 years recruited from the Washington, DC metropolitan area. Participants were administered the SRE to assess LR and the timeline followback (TLFB) to assess RDH. The indices of SRE used were total SRE score (SRTT), early drinking SRE score (SRED), regular drinking SRE score (SRRD), and heavy drinking SRE score (SRHD). Pearson's product-moment correlation and linear regression were used to analyze SRE indices and RDH variables (quantity and drinks per drinking occasion). Heritability analysis was conducted using Sequential Oligogenic Linkage Analysis Routines (SOLAR) software with SRE indices as traits of interest. Results: There was a significant relationship between SRE and RDH measures. Drinks per drinking day, maximum drinks, and quantity of drinks were significantly associated with SRTT, SRHD, and SRRD (all p < 0.05). SRTT showed significant heritability (h = 0.67, p = 0.025), however, the SRE subindices (SRED, SRRD, SRHD) were not significantly heritable. Analysis performed in the subset consisting of only African Americans (n = 86) showed similar trends. Conclusions: LR, as measured by the SRE, is associated with RDH. The high level of heritability of the SRE total score suggests that genetics accounts for a significant proportion of the variation in the LR to alcohol in social drinkers. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
Abstract: Background: Human laboratory studies have a long and rich history in the field of alcoholism. Human laboratory studies have allowed for advances in alcohol research in a variety of ways, including elucidating neurobehavioral mechanisms of risk, identifying phenotypically distinct subtypes of alcohol users, investigating the candidate genes underlying experimental phenotypes for alcoholism, and testing mechanisms of action of alcoholism pharmacotherapies on clinically relevant translational phenotypes, such as persons exhibiting positive-like alcohol effects or alcohol craving. Importantly, the field of human laboratory studies in addiction has progressed rapidly over the past decade and has built upon earlier findings of alcohol's neuropharmacological effects to advancing translational research on alcoholism etiology and treatment. Methods and Results: To that end, the new generation of human laboratory studies has focused on applying new methodologies, further refining alcoholism phenotypes, and translating these findings to studies of alcoholism genetics, medication development, and pharmacogenetics. The combination of experimental laboratory approaches with the recent developments in neuroscience and pharmacology has been particularly fruitful in furthering our understanding of the impact of individual differences in alcoholism risk and in treatment response. Conclusions: This review of the literature focuses on human laboratory studies of subjective intoxication, alcohol craving, anxiety, and behavioral economics. Each section discusses opportunities for phenotype refinement under laboratory conditions, as well as its application to translational science of alcoholism. A summary and recommendations for future research are also provided. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
Comments on an article by JJ. Prisciandaro et al. (see record 2012-05201-012).

Background: Comorbidity of alcohol abuse and dependence with bipolar disorders is high. The aim of this short commentary is to review a current study investigating the impact of depressive symptoms and craving on alcohol use in individuals with co-occurring bipolar disorder and alcohol dependence. Methods: The strengths of Prisciandaro and colleagues’ (2012) study are reviewed. The research group collected data as part of an 8-week, randomized, double-blind, placebo-controlled trial of acamprosate treatment in comorbid individuals. Results: The importance of the study lies in highlighting the complex relationship between bipolar affective disorder symptoms, in particular depression, and alcohol use in a prospective design. It also overcomes several shortcomings of previous studies, since trajectories of both disorders within a short time frame of 1 week were hitherto rarely investigated. Conclusions: While the current study is successfully shedding light on the relationship between depressive symptoms, craving, and alcohol use in comorbid individuals, future studies may also investigate the influence of rapid cycling, mixed states, and psychotic symptoms on alcohol consumption and vice versa. Further, other comorbid samples could be included like first episode versus subjects with multiple affective episodes or comorbidity in males versus females. This research may provide a better basis for future psychotherapy and pharmacotherapy or integrated treatment approaches in these comorbid and severely affected individuals. (PsycINFO Database Record (c) 2012 APA, all rights reserved)
fMRI compatible version of the BART that required pumping simulated air into risky or nonrisky balloons to earn points on each trial, and deciding when to terminate pumping to earn points accumulated. Hazardous drinking was assessed with the Alcohol Use Disorder Identification Test (AUDIT). Results: Comparison of risky and nonrisky decisions revealed differences in the dorsal anterior cingulate cortex (dACC), anterior insula, and striatum. Comparison of Cashout responses and Explosions revealed increased responses in lateral prefrontal cortex, insula, ACC, and middle temporal gyrus during Explosions and greater response in inferior parietal lobe and caudate during Cashouts. When examining relationships between hazardous drinking and neural measures of risk taking, we found significant negative relationships with insula, striatum, and dACC. Conclusions: The current results suggest that risk taking is associated with increased response in the dACC and anterior insula, regions previously implicated in representing error likelihood and negative outcome magnitudes, respectively. In addition, hazardous drinking was associated with responses in the dACC, possibly suggesting a reduced ability to predict the likelihood of errors and to predict negative outcomes associated with risk taking.

Country of Publication: HOLDER: Research Society on Alcoholism; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcohol Drinking Patterns
*Alcoholism
*Neurology
*Risk Taking
Cingulate Cortex
Insula
Source: PsycINFO
Full Text: Available in fulltext at Wiley


Citation: Molecular Psychiatry, June 2012, vol./is. 17/6(572-583), 1359-4184;1476-5578 (Jun 2012)
Author(s): Luigjes, J; van den Brink, W; Feenstra, M; van den Munckhof, P; Schuurman, P. R; Schippers, R; Mazaheri, A; De Vries, T. J; Denys, D
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Language: English
Abstract: Deep brain stimulation (DBS) is an adjustable, reversible, non-destructive neurosurgical intervention using implanted electrodes to deliver electrical pulses to areas in the brain. DBS is currently investigated in psychiatry for the treatment of refractory obsessive-compulsive disorder, Tourette syndrome and depressive disorder. Although recent research in both animals and humans has indicated that DBS may be an effective intervention for patients with treatment-refractory addiction, it is not yet entirely clear
which brain areas should be targeted. The objective of this review is to provide a systematic overview of the published literature on DBS and addiction and outline the most promising target areas using efficacy and adverse event data from both preclinical and clinical studies. We found 7 animal studies targeting six different brain areas: nucleus accumbens (NAc), subthalamic nucleus (STN), dorsal striatum, lateral habenula, medial prefrontal cortex (mPFC) and hypothalamus, and 11 human studies targeting two different target areas: NAc and STN. Our analysis of the literature suggests that the NAc is currently the most promising DBS target area for patients with treatment-refractory addiction. The mPFC is another promising target, but needs further exploration to establish its suitability for clinical purposes. We conclude the review with a discussion on translational issues in DBS research, medical ethical considerations and recommendations for clinical trials with DBS in patients with addiction. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

### Country of Publication
STATEMENT: All rights reserved.; HOLDER: Macmillan Publishers Limited; YEAR: 2012

### Publication Type
Journal; Peer Reviewed Journal

### Subject Headings
*Addiction
*Dopamine
*Obsessive Compulsive Disorder
*Deep Brain Stimulation
*Subthalamic Nucleus
*Brain
*Major Depression
*Psychiatry

### Source
PsycINFO

### 116. Low striatal dopamine receptor availability linked to caloric intake during abstinence from chronic methamphetamine abuse: Comment.

### Citation
Molecular Psychiatry, June 2012, vol./is. 17/6(569-571), 1359-4184;1476-5578 (Jun 2012)

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### Language
English

### Abstract
This article measured striatal dopamine D2/3 receptor availability as well as caloric intake and weight gain in methamphetamine (MA)-dependent research participants during early abstinence from MA. In all, 20 non-treatment-seeking MA-dependent research participants resided on a hospital inpatient research ward as previously described. Eight participants had body mass index (BMI) measurements through 3 weeks of hospitalization. The participants consumed more daily calories, on average, than hospitalized control subjects, and gained a larger proportion (8%) of their BMI over 3 weeks than a group of psychiatric inpatients taking obesogenic antipsychotic medications for 1 month. Nevertheless, taken together with the correlation between these measures of
increased eating behavior and low striatal dopamine D2/3 receptor availability, these observations provide support for the Reward Deficiency Hypothesis in MA dependence.

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Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Dopamine  
*Drug Abstinence  
*Drug Abuse  
*Methamphetamine  
Calories  
Eating Behavior  
Positron Emission Tomography

Source: PsycINFO

117. Neurobiology of addiction: Insight from neurochemical imaging.

Citation: Psychiatric Clinics of North America, June 2012, vol./is. 35/2(521-541), 0193-953X (Jun 2012)

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Language: English

Abstract: Neuroimaging studies have been crucial in understanding changes in the various neurotransmitter systems implicated in addiction in the living human brain. The authors provide an overview of existing data from neuroimaging studies in addiction with a focus on psychostimulant, alcohol, and cannabis dependence. It addresses stimulant abuse and striatal dopamine transmission, neurocircuitry of reward in addiction, response to treatment, and clinical correlates of imaging dopamine transmission in addiction, including D2 receptors and dopamine transporters, as well as summarizing findings from imaging studies of other neurotransmitter systems such as the serotonergic system and opiate receptors, gamma-aminobutyric acid, and endogenous cannabinoid receptors.

(PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Addiction  
*Neurobiology  
*Neuroimaging

Source: PsycINFO

118. The genetic basis of addictive disorders.

Citation: Psychiatric Clinics of North America, June 2012, vol./is. 35/2(495-519), 0193-953X (Jun 2012)

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Institution: Ducci, Francesca: Institute of Psychiatry, Kings College, London; Goldman, David: Laboratory of Neurogenetics, National Institute on Alcohol Abuse and Alcoholism, National Institutes of Health, Rockville, MD
The authors review genetic factors moderating vulnerability to addictions: heritability and mode of inheritance, developmental changes across the lifespan of genetic and environmental influences, shared and unshared inheritance, interplay between genetic and environmental factors, gene identification via candidate genes and genome-wide approaches, and the role of rare and common genetic variants in addiction. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Addiction
*Genetics
*Heritability
*Life Span
Source: PsycINFO


Citation: Psychiatric Clinics of North America, June 2012, vol./is. 35/2(481-493), 0193-953X (Jun 2012)
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Language: English
Abstract: The authors present an overview of empirically supported psychosocial interventions for individuals with substance use disorders (SUDs), including recent advances in the field. They also identify barriers to the adoption of evidence-based psychosocial treatments in community-based systems of care, and the promise of leveraging technology (computers, web, mobile phone, and emerging technologies) to markedly enhance the reach of these treatments. Technology-based interventions may provide "on-demand," ubiquitous access to therapeutic support in diverse settings. A brief discussion of important next steps in developing, refining, and disseminating technology-delivered psychosocial interventions concludes the review. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Addiction
*Drug Addiction
*Psychosocial Rehabilitation
*Technology
Source: PsycINFO

120. Training the next generation of providers in addiction medicine.

Citation: Psychiatric Clinics of North America, June 2012, vol./is. 35/2(461-480), 0193-953X (Jun 2012)
Author(s): Rasyidi, Ernest; Wilkins, Jeffery N; Danovitch, Itai
Correspondence Address: Rasyidi, Ernest: Department of Psychiatry and Behavioral Neurosciences, Cedars-Sinai Medical Center, 6214 Drexel Avenue, Los Angeles, CA, US, 90048, Ernest.Rasyidi@csbs.org

Institution: Rasyidi, Ernest: Department of Psychiatry and Behavioral Neurosciences, Cedars-Sinai Medical Center, Los Angeles, CA; Wilkins, Jeffery N.: Department of Psychiatry and Behavioral Neurosciences, Cedars-Sinai Medical Center, Los Angeles, CA; Danovitch, Itai: Department of Psychiatry and Behavioral Neurosciences, Cedars-Sinai Medical Center, Los Angeles, CA

Language: English

Abstract: The current state of addiction training in medical schools, residencies including psychiatry, and addiction psychiatry and addiction medicine fellowships is presented. Deficits in addiction training are described as well as proposed models targeting training of relevant addiction clinical competencies. Specific recommendations address future roles for psychiatrists who specialize in addiction. Tables and boxes describe addiction training in medical school, residencies, and addiction fellowships, and outline a select history of physician contributions to the addiction field and physician education. Proposed competencies for primary care residents, principles of the patient-centered medical home, and recommended skillsets of tomorrow’s psychiatry addiction specialists are outlined. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Addiction *Medical Education *Medical Students *Psychiatry

Source: PsycINFO

121. Clinical implications of drug abuse epidemiology.

Citation: Psychiatric Clinics of North America, June 2012, vol./is. 35/2(411-423), 0193-953X (Jun 2012)

Author(s): Schulden, Jeffrey D; Lopez, Marsha F; Compton, Wilson M

Correspondence Address: Schulden, Jeffrey D.: Division of Epidemiology, Services, and Prevention Research, National Institute on Drug Abuse (NIDA), 6001 Executive Boulevard, MSC 9589, Bethesda, MD, US, 20892-9589, schuldenj@nida.nih.gov

Institution: Schulden, Jeffrey D.: Division of Epidemiology, Services, and Prevention Research, National Institute on Drug Abuse (NIDA), Bethesda, MD; Lopez, Marsha F.: Division of Epidemiology, Services, and Prevention Research, National Institute on Drug Abuse (NIDA), Bethesda, MD; Compton, Wilson M.: Division of Epidemiology, Services, and Prevention Research, National Institute on Drug Abuse (NIDA), Bethesda, MD

Language: English

Abstract: Research on the epidemiology of illicit drug use disorders provides important insights into understanding these conditions and their impact on public health. Findings have indicated relatively high prevalence of illicit drug use and ongoing shifts in trends in use, for example highlighting elevated rates of prescription drug misuse. Building on an understanding of this research, it is important for clinicians in a range of settings to integrate strategies for prevention, screening, and linkage to substance abuse treatment programs. This paper focuses on highlights from research on the epidemiology of illicit drug use in the United States and its clinical implications. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse *Epidemiology
122. Managing co-occurring substance use and pain disorders.

**Citation:** Psychiatric Clinics of North America, June 2012, vol./is. 35/2(393-409), 0193-953X (Jun 2012)

**Author(s):** Miotto, Karen; Kaufman, Aaron; Kong, Alexander; Jun, Grace; Schwartz, Jeffrey

**Correspondence Address:** Miotto, Karen: Department of Psychiatry and Biobehavioral Sciences, University of California, Los Angeles, 760 Westwood Plaza, Mail Code 175919, Los Angeles, CA, US, 90095-1563, kmiotto@mednet.ucla.edu

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**Language:** English

**Abstract:** This discussion identifies risk factors for prescription use disorders and reviews key components of psychiatric screening for pain and addiction. The components of universal precautions for opioid treatment are discussed, including patient education, assessment, and monitoring as well as the use of drug testing. Additionally, this review identifies pharmacologic approaches that are useful in high-risk populations. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2012

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

**Subject Headings:** *Drug Abuse  
*Pain  
*Risk Factors  
*Screening

**Source:** PsycINFO

123. Drug treatments in criminal justice settings.

**Citation:** Psychiatric Clinics of North America, June 2012, vol./is. 35/2(375-391), 0193-953X (Jun 2012)

**Author(s):** Nordstrom, Benjamin R; Williams, A. R

**Correspondence Address:** Nordstrom, Benjamin R.: Dartmouth Medical School, DHMC, 1 Medical Center Drive, Lebanon, NH, US, 03756, benjamin.r.nordstrom@dartmouth.edu

**Institution:** Nordstrom, Benjamin R.: Dartmouth Medical School, DHMC, Lebanon, NH; Williams, A. R.: New York University, New York, NY

**Language:** English

**Abstract:** Studies report that the direct effect of drug-related crime (ie, not including the cost of arrest, prosecution, and incarceration) is the largest single cost related to addiction. Addiction to illicit substances and its connection to people going through the criminal justice system are discussed in this review. Emphasis is on the efficacy of drug treatment in offender populations. Outcomes from large national studies and smaller studies are presented that deal with addiction treatment and criminal offenses; also discussed are operant conditioning in drug addiction, contingency management in a criminal justice context, coercion in the criminal justice setting, and drug courts. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
124. Serotonergic hallucinogens and emerging targets for addiction pharmacotherapies.

Citation: Psychiatric Clinics of North America, June 2012, vol./is. 35/2(357-374), 0193-953X (Jun 2012)

Author(s): Ross, Stephen

Correspondence Address: Ross, Stephen: Division of Alcoholism and Drug Abuse, Bellevue Hospital Center, 462 First Avenue, NBV 20E7, New York, NY, US, 10016

Institution: Ross, Stephen: Division of Alcoholism and Drug Abuse, Bellevue Hospital Center, New York, NY

Language: English

Abstract: This article discusses the serotonergic hallucinogens (SHs) and includes classification systems, historical investigations, neurobiological mechanisms of action, addictive liability (from biological, behavioral, and epidemiologic perspectives), and potential therapeutic applications. The focus is on plausible neurobiologic mechanisms, though a small body of scholarship has also explored putative spiritual mechanisms of action. The article concludes with a discussion of an optimal study design to test SH treatment models for addictive disorders and review of the current state of the reemergence of research into these models at several major academic medical centers in the United States. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)


Citation: Psychiatric Clinics of North America, June 2012, vol./is. 35/2(327-356), 0193-953X (Jun 2012)

Author(s): Pating, David R; Miller, Michael M; Goplerud, Eric; Martin, Judith; Ziedonis, Douglas M

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Institution: Pating, David R.: Department of Psychiatry, University of California, San Francisco, San Francisco, CA; Miller, Michael M.: Department of Psychiatry, University of Wisconsin, School of Medicine and Public Health, Oconomowoc, WI; Goplerud, Eric: National Opinion Research Center (NORC), University of Chicago, Bethesda, MD; Martin, Judith: BAART Turk Street Clinic, San Francisco, CA; Ziedonis, Douglas M.: Department of Psychiatry, University of Massachusetts Medical School, Worcester, MA

Language: English

Abstract: We review the current systems of health care delivery for the treatment of substance use disorders and examine the expansion of addiction treatment to include new methods and settings, supported by changing technology, new financing/payment mechanisms, and
expanded information management processes. We examine 3 subsets of patients who should be able to receive better, more frequent care through recent federally mandated health care reform. Finally, we provide recommendations for what we consider essential steps to facilitate the improvement of care for substance use disorders under health care reform. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Abuse
*Health Care Delivery
*Technology
*Health Care Reform
Source: PsycINFO

126. Advances in opioid antagonist treatment for opioid addiction.

Citation: Psychiatric Clinics of North America, June 2012, vol./is. 35/2(297-308), 0193-953X (Jun 2012)
Author(s): Ling, Walter; Mooney, Larissa; Wu, Li-Tzy
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Institution: Ling, Walter: UCLA Department of Psychiatry and Biobehavioral Sciences, UCLA Integrated Substance Abuse Programs, Los Angeles, CA; Mooney, Larissa: UCLA Department of Psychiatry and Biobehavioral Sciences, UCLA Integrated Substance Abuse Programs, Los Angeles, CA; Wu, Li-Tzy: Duke University School of Medicine, Duke University Medical Center, Durham, NC
Language: English
Abstract: Long-acting depot naltrexone, an opioid antagonist, inhibits the rewarding effects of exogenously introduced opioids, helping patients cease drug use. Although depot naltrexone formulations have demonstrated efficacy in reducing opioid use and improving abstinence rates in clinical studies, the utilization of depot naltrexone has not yet gained much traction since its approval for treatment of opioid addiction by the US Food and Drug Administration. This article provides a historical perspective of naltrexone, its practical use as a pharmacotherapy for opioid addiction, and issues regarding the current and future role of extended-release depot naltrexone for addiction treatment. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Addiction
*Drug Abstinence
*Drug Therapy
*Opiates
Source: PsycINFO

127. Behavioral addictions: Where to draw the lines?

Citation: Psychiatric Clinics of North America, June 2012, vol./is. 35/2(279-296), 0193-953X (Jun 2012)
Author(s): Fong, Timothy W; Reid, Rory C; Parhami, Iman
Correspondence Address: Fong, Timothy W.: UCLA Gambling Studies Program, Semel Institute for Neuroscience and Human Behavior, Department of Psychiatry and Biobehavioral Sciences, University of California Los Angeles, 760 Westwood Plaza, Los Angeles, CA, US, 90024, tfong@mednet.ucla.edu
Recognizing the signs and symptoms of behavioral addictions can be confusing, at times, because the line between normative and pathological behaviors is not well defined. Behavioral addictions are conditions that create significant harm to individuals, families, and society. This article reviews the current and proposed diagnostic criteria of 3 prevalent behavioral addictions: (1) pathological gambling, (2) hypersexual disorders, and (3) compulsive shopping. Differential diagnoses are discussed and clinical characteristics are presented to facilitate clinicians in clarifying the difference between pathology and habit. Treatment options for these behavioral addictions are presented along with case studies. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
129. Characteristics of victims of sexual abuse by gender and race in a community corrections population.

Source: PsycINFO

Citation: Journal of Interpersonal Violence, June 2012, vol./is. 27/9(1844-1861), 0886-2605;1552-6518 (Jun 2012)

Author(s): Clark, C. Brendan; Perkins, Adam; McCullumsmith, Cheryl B; Islam, M. Aminul; Hanover, Erin E; Cropsey, Karen L

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Institution: Clark, C. Brendan: University of Alabama at Birmingham, Birmingham, AL; Perkins, Adam: University of Alabama at Birmingham, Birmingham, AL; McCullumsmith, Cheryl B.: University of Alabama at Birmingham, Birmingham, AL; Islam, M. Aminul: University of Alabama at Birmingham, Birmingham, AL; Hanover, Erin E.: University of Alabama at Birmingham, Birmingham, AL; Cropsey, Karen L.: University of Alabama at Birmingham, Birmingham, AL

Language: English

Abstract: The purpose of this study was to examine how victims of sexual abuse in a community corrections population differ as a result of their sex and race. Of the 19,422 participants, a total of 1,298 (6.7%) reported a history of sexual abuse and were compared with nonabused participants. The sample was analyzed by race-gender groups (White men, White women, African American men, and African American women) using univariate and logistic regression analyses, which were conducted separately for each group. White women were the most likely to report a history of sexual abuse (26.5%), followed by African American women (16.0%), White men (4.0%), and African American men (1.1%). For all groups, histories of suicidal ideation and suicide attempts were associated with a history of sexual abuse. Sexual abuse was associated with substance abuse problems for women but not the men. Cannabis dependence was associated with sexual abuse for the White women while cocaine dependence was associated with sexual abuse for the African American women. Several other variables were associated with sexual abuse for women but not men, including lower education (White women only), a history of violent offenses (White women only), and living in a shelter (African American women only). African American men tended to have higher levels of education; this was the only variable uniquely associated with either male group. Receiving psychiatric medications was associated with sexual abuse for all groups except African American men and a history of sex for drugs was associated with sexual abuse for all groups except White men. Consistent with national sample, women, particularly White women, were more likely to be victims of sexual abuse. The gender-race differences for the sociodemographic factors associated with sexual abuse, particularly the risk of substance abuse for women, suggest the need for tailored interventions for sexual abuse prevention and treatment. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Author(s); YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Human Sex Differences
*Racial and Ethnic Differences
*Sexual Abuse
Drug Abuse

Source: PsycINFO


Citation: Drug and Alcohol Review, May 2012, vol./is. 31/3(361-362), 0959-5236;1465-3362 (May 2012)

Author(s): Rooke, Sally
Institution: Rooke, Sally: National Cannabis Prevention and Information Centre, University of New South Wales, Randwick, NSW

Language: English

Abstract: Reviews the book, World Wide Weed: Global Trends in Cannabis Cultivation and Its Control edited by Tom Decorte, Gary Potter, and Martin Bouchard (2011). The cultivation and distribution of cannabis is becoming an increasingly complex and widespread concern, carrying with it several important social, economical, biological and political implications. This highly ambitious book makes a valuable contribution to disentangling the issue of cannabis cultivation and consumption as worldwide phenomenon. The book consists of 16 chapters, which are broadly divided into three segments according to three overarching themes: cannabis cultivation and its traditional origins, issues surrounding cannabis cultivation and distribution in the developed world, and the implications for cannabis policy in the developed world. The first section on traditional producer nations discusses the pros and cons of cannabis cultivation, and explores the processes through which cannabis production has evolved into an increasingly economically driven activity. While the editors do acknowledge that the purpose of the compilation is to explore rather than explain cannabis cultivation, provision of more novel and/or integrative suggestions for investigation of the issues involved in cannabis cultivation would have further consolidated the book with regard to future directions. The book is valuable reading for individuals involved in examining cannabis cultivation and supply from social, economical and political perspectives. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: HOLDER: Australasian Professional Society on Alcohol and other Drugs; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Cannabis *Drug Abuse *Policy Making *Trends

Source: PsycINFO

Full Text: Available in fulldate at Wiley


Citation: Drug and Alcohol Review, May 2012, vol./is. 31/3(360-361), 0959-5236;1465-3362 (May 2012)

Author(s): Juckes, Lisa

Institution: Juckes, Lisa: Herbert Street Drug and Alcohol Service, Royal North Shore Hospital, St Leonards, NSW

Language: English

Abstract: Reviews the book, Integrated Group Therapy for Bipolar Disorder and Substance Abuse by Roger D. Weiss and Hilary Smith Connery (see record 2011-15068-000). This book is less a textbook and more a manual for practical guidance in setting up and running groups for people with these co-occurring disorders. Its approach is based on the available evidence that these people have better outcomes when the substance use disorder is addressed simultaneously with helping participants develop more adaptive coping skills to deal with the symptoms of episodic mood disorder, in the same program, session by session. It uses a cognitive behavior therapy framework. The book is designed for mental health and drug and alcohol counselors or clinicians. It does not require prior group therapy facilitation experience as it gives step-by-step advice and guidance for implementation. The initial section gives an overview of the rationale for treatment in an integrated format, as well as the general principles to adhere to in structuring and conducting the sessions. It is a welcome addition to a limited number of practical, integrated treatment manuals for therapy for people with co-occurring mental illness and substance use disorders. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: HOLDER: Australasian Professional Society on Alcohol and other Drugs; YEAR: 2012
132. Brief interventions are effective in reducing alcohol consumption in opiate-dependent methadone-maintained patients: Results from an implementation study.

Citation: Drug and Alcohol Review, May 2012, vol./is. 31/3(348-356), 0959-5236;1465-3362 (May 2012)

Author(s): Darker, Catherine D; Sweeney, Brian P; El Hassan, Haytham O; Smyth, Bobby P; Ivers, Jo-Hanna H; Barry, Joe M

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Language: English

Abstract: Introduction and Aims: An implementation study to test the feasibility and effectiveness of brief interventions (BIs) to reduce hazardous and harmful alcohol consumption in opiate-dependent methadone-maintained patients. Design and Methods: Before and after intervention comparison of Alcohol Use Disorders Identification Test (AUDIT-C) scores from baseline to 3 month follow up. Seven hundred and ten (82%) of the 863 eligible methadone-maintained patients within three urban addiction treatment clinics were screened. A World Health Organization protocol for a clinician-delivered single BI to reduce alcohol consumption was delivered. The full AUDIT questionnaire was used at baseline (T1) to measure alcohol consumption and related harms; and in part as a screening tool to exclude those who may be alcohol-dependent. AUDIT-C was used at 3 month follow up (T2) to assess any changes in alcohol consumption. Results: One hundred and sixty (23% of overall sample screened) 'AUDIT-positive' cases were identified at baseline screening with a mean total full AUDIT score of 13.5 (SD 6.7). There was a statistically significant reduction in AUDIT-C scores from T1 (x , SD = 2.35) to T2 (, SD = 2.66) for the BI group (z = -3.98, P < 0.01). There was a statistically significant decrease in the proportion of men who were AUDIT-positive from T1 to T2 (z = 8.25, P < 0.003). Discussion and Conclusions: It is feasible for a range of clinicians to screen for problem alcohol use and deliver BI within community methadone clinics. Opiate-dependent patients significantly reduced their alcohol consumption as a result of receiving a BI. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
133. Mapping the recovery stories of drinkers and drug users in glasgow: Quality of life and its associations with measures of recovery capital.

**Citation:** Drug and Alcohol Review, May 2012, vol./is. 31/3(334-341), 0959-5236;1465-3362 (May 2012)

**Author(s):** Best, David; Gow, Jane; Knox, Tony; Taylor, Avril; Groshkova, Teodora; White, William

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**Language:** English

**Abstract:** Introduction and Aims: The study investigates what 'recovery' means for those who describe themselves as in alcohol or drug recovery. Design and Methods: The project used multiple methods-snowballing, recruitment through recovery groups and advertisements in local press-to recruit 205 people (107 in alcohol and 98 in heroin recovery) who reported a lifetime dependence on alcohol and/or heroin; had not used their primary substance in the last year and perceived themselves to be either recovered or in recovery. They were interviewed by researchers using a structured questionnaire reported in the current paper and a semi-structured interview reported elsewhere. Results: The average time dependent for heroin users was 10.8 years and for drinkers 15.7 years, but onset and desistance were earlier for heroin. Longer time since last use of alcohol or heroin was associated with better quality of life. Greater engagement in meaningful activities was associated with better functioning, and was associated with quality of life, followed by number of peers in recovery in the social network. Heroin users in abstinent recovery generally reported better functioning than those in maintained recovery. Discussion and Conclusions: Recovery experiences vary widely, but better functioning is typically reported after longer periods and is associated with supportive peer groups and more engagement in meaningful activities, and supports models promoting the development of peer networks immersed in local communities. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Australasian Professional Society on Alcohol and other Drugs; YEAR: 2011

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

**Subject Headings:** *Drug Abuse*  
*Drug Rehabilitation*  
*Quality of Life*  
*Recovery (Disorders)*

134. Alcohol and cannabis abuse/dependence symptoms and life satisfaction in young adulthood.

**Citation:** Drug and Alcohol Review, May 2012, vol./is. 31/3(327-333), 0959-5236;1465-3362 (May 2012)

**Author(s):** Swain, Nicola R; Gibb, Sheree J; Horwood, L. John; Fergusson, David M

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Language: English

Abstract: Introduction and Aims: To examine the associations between substance abuse/dependence symptoms and life satisfaction, before and after adjustment for fixed and time-dynamic sources of confounding. Design and Methods: Data were drawn from a 30 year longitudinal study of a birth cohort of 987 individuals. Associations between alcohol abuse/dependence symptoms, cannabis abuse/dependence symptoms and life satisfaction were examined using repeated measures regression models. Associations were adjusted for fixed and time-dynamic sources of confounding, including family background, personality, demographics, recent life events, current employment and recent mental illness. Results: There were significant associations between alcohol abuse/dependence and life satisfaction (P < 0.0001) and between cannabis abuse/dependence and life satisfaction (P < 0.0001). These significant associations remained after adjustment for fixed sources of confounding. However, adjusting for time-dynamic sources of confounding substantially reduced the associations. After adjustment for time-dynamic sources of confounding there were no significant associations between alcohol abuse/dependence and life satisfaction (P > 0.17) or cannabis abuse/dependence and life satisfaction (P > 0.25). Discussion and Conclusions: These findings suggest that associations between life substance abuse/dependence and life satisfaction can be explained by time-dynamic factors, such as employment, life events and comorbid mental illness that are associated with reduced life satisfaction. When due allowance is made for confounding, alcohol and cannabis abuse/dependence are not associated with reduced life satisfaction. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
Abstract:
Introduction and Aims: Despite its continued widespread use, relatively few individuals with cannabis use disorders present to treatment services. There is a dearth of research examining the reasons for this observed underutilisation of treatment. The aim of this paper is to examine barriers and facilitators to entry into cannabis treatment. Design and Methods: Three surveys of regular cannabis users in treatment (n = 100), in the community (n = 100) and from a widespread Internet sample (n = 294). Results. Perceived barriers included: not being aware of treatment options; thinking treatment is unnecessary; not wanting to stop using cannabis; and wanting to avoid the stigma associated with accessing treatment. Perceived facilitators included: improving available information on treatment; keeping treatment specific to cannabis; offering additional services, such as telephone support; and simplifying treatment admission processes. Discussion and Conclusions: Participant's perceptions differed significantly depending on their age, gender and treatment status. Participants in treatment typically reported barriers intrinsic to the individual while participants from the community reported barriers relating to the treatment available. Reported facilitators were more homogenous and most commonly related to availability of information. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Australasian Professional Society on Alcohol and other Drugs; YEAR: 2011
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Cannabis
*Drug Abuse
*Drug Rehabilitation
*Treatment
Source: PsycINFO
Full Text: Available in fulltext at Wiley

136. Post-traumatic stress disorder, depression and suicidality in inpatients with substance use disorders.

Citation: Drug and Alcohol Review, May 2012, vol./is. 31/3(294-302), 0959-5236;1465-3362 (May 2012)

Author(s): Dore, Glenys; Mills, Katherine; Murray, Robin; Teesson, Maree; Farrugia, Philippa

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Language: English

Abstract: Introduction and Aims: The international literature suggests that traumatic events are common for patients with substance use disorders (SUDs), and are often associated with the development of post-traumatic stress disorder (PTSD) and other psychiatric comorbidities. However, limited research has been conducted among Australian SUD patients. The aim of the present study was to examine the prevalence of these disorders in a group of Australian patients admitted for detoxification. Design and Methods: Data were collected from 253 inpatients using a modified version of the Composite International Diagnostic Interview, the 10-item Trauma Screening Questionnaire, the Zung Self-rating Depression Scale and questions from the PsyCheck. Results: Approximately 20% of inpatients experienced moderate to severe depressive symptoms, and 37% had a lifetime history of self-harm or attempted suicide. Approximately 80% of patients had experienced at least one traumatic event, most experiencing multiple traumas. The mean age of first trauma was 14 years. Almost 45% of patients screened positive for current PTSD symptoms. Women were nine times more likely to have been raped and five times more likely to have been sexually molested than men. PTSD
symptoms were associated with greater trauma exposure, younger age of first trauma, specific trauma types, moderate to severe depressive symptoms and a history of self-harm or attempted suicide. Despite their difficulties, patients with PTSD symptoms had high rates of retention in treatment. Discussion and Conclusions: Patients entering treatment for SUDs should be assessed for PTSD, depression and suicidality. These conditions impact significantly on treatment outcomes, and require the development of appropriate treatment strategies. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Australasian Professional Society on Alcohol and other Drugs; YEAR: 2011
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Comorbidity
*Drug Abuse
*Major Depression
*Posttraumatic Stress Disorder
*Suicide
Source: PsycINFO
Full Text: Available in fulltext at Wiley

137. Pills and pints: Risky drinking and alcohol-related harms among regular ecstasy users in Australia.

Citation: Drug and Alcohol Review, May 2012, vol./is. 31/3(273-280), 0959-5236;1465-3362 (May 2012)
Author(s): Kinner, Stuart A; George, Jessica; Johnston, Jennifer; Dunn, Matthew; Degenhardt, Louisa
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Language: English
Abstract: Introduction and Aims: A significant proportion of young Australians engage in risky alcohol consumption, and an increasing minority are regular ecstasy (3,4-methylenedioxymethamphetamine) users. Risky alcohol use, alone or in combination with ecstasy, is associated with a range of acute and chronic health risks. The aim of this study was to document the incidence and some health-related correlates of alcohol use, and concurrent alcohol and ecstasy use, among a large, national sample of regular ecstasy users (REU) in Australia. Design and Methods: National, cross-sectional surveys of REU in Australia 2003-2008. Among REU in 2008 (n = 678) usual alcohol use, psychological distress and health-related quality of life were measured using the Alcohol Use Disorders Identification Test, Kessler Psychological Distress Scale and Short Form-8 Survey respectively. Results: Among REU in 2008, 36% reported high-risk patterns of usual alcohol consumption, 62% reported usually consuming more than five standard drinks with ecstasy, and 24% reported currently experiencing high or very high levels of psychological distress. Controlling for age and education, high-risk drinking among REU was associated with higher levels of psychological distress and poorer health-related functioning; however, the associations between concurrent alcohol and ecstasy use, and health outcomes, were not significant (P > 0.05). Discussion and Conclusions. A large and increasing proportion of REU in Australia engage in high-risk patterns of alcohol consumption, including in combination with ecstasy. High-risk alcohol consumption among this group is associated with adverse health-related outcomes. Prevention and harm reduction interventions for REU should incorporate messages about the risks associated with alcohol use. There is an ongoing need for youth-specific, coordinated
alcohol and other drug and mental health services. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Australasian Professional Society on Alcohol and other Drugs; YEAR: 2011

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

**Subject Headings:**
- Alcohol Drinking Patterns
- Drug Abuse
- Harm Reduction
- Methylenedioxyamphetamine
- Alcohols

**Source:** PsycINFO

**Full Text:** Available in fulltext at Wiley

### 138. Examining supply changes in Australia's cocaine market.

**Citation:** Drug and Alcohol Review, May 2012, vol/is. 31/3(263-272), 0959-5236;1465-3362 (May 2012)

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**Language:** English

**Abstract:**

Introduction and Aims: Media attention to cocaine use and supply has increased following some of the largest cocaine seizures in Australia's history. Whether there has been an expansion in supply remains unclear. This paper examines the evidence behind assertions of increased supply in Australia and the scale and nature of any apparent increase, using proxy indicators of cocaine importation, distribution and use. 

**Design and Methods:** Eight proxies of cocaine importation, distribution and use were adopted, including amount of importation, mode of importation and supply flows to Australia. Each proxy indicator was sourced using publicly available and Australia-wide data, including information on the total weight of border seizures, mode of detection and country of embarkation of individual seizures. Data permitting, trends were examined for up to a 12 year period (1997-1998 to 2009-2010). Results: Since 2006-2007 there was evidence of increased cocaine importation, albeit less than between 1998-1999 and 2001-2002. There were further signs that the 2006-2007 expansion coincided with a diversification of trafficking routes to and through Australia (beyond the traditional site of entry-Sydney) and shifts in the geographic distribution of use. 

**Discussion and Conclusions:** The congruity between indicators suggests that there has been a recent expansion in cocaine supply to and distribution within Australia, but that the more notable shift has concerned the nature of supply, with an apparent growth in importation and distribution beyond New South Wales. The diversification of cocaine supply routes may increase risks of market entrenchment and organised crime throughout Australia.
139. The effects of beverage type on homicide rates in Russia, 1970-2005.

Citation: Drug and Alcohol Review, May 2012, vol./is. 31/3(257-262), 0959-5236;1465-3362 (May 2012)

Author(s): Stickley, Andrew; Razvodovsky, Yury

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Language: English

Abstract: Introduction and Aims: Previous research from Western Europe and North America has suggested that consuming different types of alcoholic beverage may have differing effects on homicide rates both within and between countries. The aim of this study was to examine the relation between the consumption of different beverage types and homicide rates in Russia across the later-Soviet and post-Soviet periods. Design and Methods: Age-standardised male and female homicide data for the period 1970-2005 and data on beverage-specific alcohol sales were obtained from the Russian State Statistical Committee (Rosstat). Time series analysis (autoregressive integrated moving average modelling) was used to examine the relation between the sale (consumption) of different alcoholic beverages and homicide rates. Results: Total alcohol consumption and vodka consumption as measured by sales were significantly associated with both male and female homicide rates: a 1 L increase in overall alcohol sales would result in a 5.9% increase in the male homicide rate and a 5.1% increase in the female homicide rate. The respective figures for vodka were 16.4% and 14.3%. The consumption of beer and wine was not associated with changes in homicide rates. Discussion and Conclusions. Our findings suggest that the consumption of distilled spirits has had an especially detrimental impact on lethal violence in Russia from at least 1970 onwards. In order to reduce homicide rates in this context, alcohol policy should focus on reducing overall consumption as well as attempting to shift the beverage preference away from distilled spirits. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Australasian Professional Society on Alcohol and other Drugs; YEAR: 2011

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcohol Drinking Patterns
*Alcoholic Beverages
*Alcoholism
*Homicide

Source: PsycINFO

Full Text: Available in fulltext at Wiley

140. More evidence that spirits can be more dangerous: Homicide in Russia and suicide in Japan.

Citation: Drug and Alcohol Review, May 2012, vol./is. 31/3(249-250), 0959-5236;1465-3362 (May 2012)

Author(s): Kerr, William C

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Institution: Kerr, William C.: Alcohol Research Group, Emeryville, CA
Abstract: Two new population-level studies of alcohol-related mortality, reported in this issue highlight spirits as the beverage type having the strongest association with suicide in Japan and homicide in Russia. The importance of alcohol in the aetiology of both homicide and suicide is well established, but much is still unknown regarding the role of drinking patterns, the importance of chronic drinking in addition to acute drinking, interrelationships with other factors such as unemployment or firearm availability and differential effects by beverage type. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Country of Publication: HOLDER: Australasian Professional Society on Alcohol and other Drugs; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcoholism
*Etiology
*Homicide
*Suicide
Death and Dying
Source: PsycINFO
Full Text: Available in fulltext at Wiley

141. Pathological collecting: A case report.

Citation: International Journal on Disability and Human Development, March 2012, vol./is. 11/1(81-83), 2191-1231;2191-0367 (Mar 2012)
Author(s): Braquehais, Maria Dolores; del Mar Valls, Maria; Sher, Leo; Casas, Miquel
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Language: English
Abstract: Compulsive buying and compulsive hoarding have been associated with pathological collecting. Although compulsive buyers are trapped into the buying process itself, compulsive hoarders suffer from the inability to discard the purchased items. We report a case of pathological collecting in a 53-year-old male also suffering from alcohol dependence and obsessive-compulsive personality features. His addictive pattern of collecting combined features of compulsive buying disorder with the obsessive accumulation of acquisitions. He chose only high-value, exclusive items. His treatment that included psychopharmacological treatment with sertraline and topiramate and cognitive-behavioral psychotherapy was successful. Pathological collecting can be conceptualized both as a behavioral addiction and as a subtype of hoarding compulsive buying disorder with preference for the acquisition and the inability to discard high-value items. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Walter de Gruyter; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Cognitive Behavior Therapy
*Obsessive Compulsive Disorder
*Psychopharmacology
Source: PsycINFO
142. Cohesive subgroups and drug user networks in Dhaka City, Bangladesh.

Citation: Global Public Health: An International Journal for Research, Policy and Practice, March 2012, vol./is. 7/3(219-239), 1744-1692;1744-1706 (Mar 2012)

Author(s): Gayen, Tarun Kanti; Gayen, Kaberi; Raeside, Robert; Elliott, Lawrie

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Language: English

Abstract: The purpose of this paper was to explore group drug taking behaviour in a slum area of Dhaka, Bangladesh. We set out to examine the relationships between those who met, at least weekly, to take illegal drugs together, and how these relationships might shape their drug behaviour. Sociometric and behavioural data were collected using questionnaires via semi-structured interviews. We found that the likelihood of injecting drugs and sharing needles increased with age, duration of group membership and length of drug use. Drug users were classified into two clusters: one was more cohesive and comprised longer-term users, who were more likely to inject drugs and had poorer physical and mental health. The other cluster comprised younger, better educated members who were more transient, less cohesive, less likely to inject drugs and had better health. Qualitative data suggested that members of the first cluster were less accepting of outsiders and confirmed more to group norms. We conclude that emotionally bonded cohesive subgroups acquire norms, which reinforce problematic drug-using behaviour. Thus, health initiatives need to consider group relationships and norms and those initiatives which work with networks may be more effective and more appropriate for low-income countries. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
less alcohol use for all involved teens. The number of friends who belong to a religious youth group, in part, explains the relationship. Conversely, network overlap between parents and teens, the number of friends who drink or use drugs, and having an adult confidant from a religious group are not mechanisms that mediate the relationship. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)

Conference Information: Annual Meeting of the American Educational Research Association. 2011. Findings from this study were presented at the aforementioned conference.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcohol Drinking Patterns
*Extracurricular Activities
*Health Behavior
*Religious Organizations
*Risk Factors
Adolescent Attitudes
Drug Abuse

Source: PsycINFO

144. A novel SGCE gene mutation causing myoclonus dystonia in a family with an unusual phenotype.

Citation: Acta Paediatrica, February 2012, vol./is. 101/2(e90-e92), 0803-5253;1651-2227 (Feb 2012)

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Language: English

Abstract: Background: Myoclonus dystonia is an autosomal dominant dystonia-plus syndrome, characterized by symptom variability within families. Most often is the myoclonus the most debilitating symptom, and many patients report myoclonus reduction after alcohol intake. In several families, mutations in the SGCE gene have been identified. Method: We report of a three-generation family with myoclonus dystonia displaying a varied phenotype and maternal imprinting. Additionally, this family displays some unusual clinical presentations including alcohol-induced dystonia in an adult man, which will be discussed. Results: A novel mutation c.386T>C [p.I129T] was found within exon 3 of the SGCE gene in all three affected family members. In addition, two additional mutations [c.305G>A and IVS3+15G>A], judged to be polymorphisms in the SGCE gene, were found in two affected and one healthy family member. Conclusions: This report presents a novel mutation in the SGCE gene causing myoclonus dystonia and extends the phenotype of myoclonus dystonia to also include alcohol-induced dystonia. (PsycINFO Database Record (c) 2012 APA, all rights reserved) (journal abstract)
The Stages of Change Model is one of the most well-researched and empirically supported models of change in use today. It holds that when people change, they pass through predictable stages and, in each stage, specific interventions are appropriate. Crucial to the process of change is understanding that most of the process can be predicted by one thing—wanting something that is more important than the problem behavior. This resonates with two principles from NLP: (1) the well-formedness conditions for outcomes and (2) an observation by Bandler and Grinder about addictions. For an outcome to be well-formed, it must meet several criteria; it must be stated in the positive, under personal control, sensory-specific, contextualized, given a time frame, and ecological. Applying this perspective allows us to recast substance use treatment as a well-formed enterprise; instead of moving away from something, treatment can be framed in terms of something positively desired. Bandler and Grinder's statement in Reframing (1982) was a major inspiration: if you create a state that is more pleasurable, more intuitive, and more accessible than an addictive drug, you can cure any addiction. The Brooklyn Program was originally designed to work with drug addicts and abusers, alcoholics, and problem drinkers assigned to drug or alcohol treatment by the Federal Court. It was specifically designed for clients who did not want treatment or had failed at other kinds of treatment. Since leaving the probation department, I have found that the program, even in a shortened version, provides powerful, life-changing experiences for people with or without substance use problems. Because it was designed to create powerfully motivating futures that align with an individual's deepest instincts, it can be applied in many contexts. The Brooklyn Program is implemented over sixteen weeks for one two-hour sessions per week. It teaches specific behavioral and cognitive skills and, as noted, it never discusses drugs or problem behaviors, but works to build emotional and cognitive resources that will ultimately outframe them. While it is conceivable that the program could be implemented in a shorter time frame, the sixteen-week duration allows for over-learning of the target behaviors and ensures that it would be taken seriously by persons unused to the speed of NLP techniques. (PsycINFO Database Record (c) 2012 APA, all rights reserved)