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1. PsycINFO; exp ADDICTION/ OR DRUG ABUSE [+NT]/ OR DRUG USAGE [+NT]/; 35456 results.
2. PsycINFO; addict*.ti,ab; 25722 results.
3. PsycINFO; 1 OR 2; 47561 results.
1. Housing Assistance and Case Management: Improving Access to Substance Use Disorder Treatment for Homeless Veterans.

Citation: Psychological Services, January 2013 (No Pagination Specified), 1541-1559; 1939-148X (Jan 28, 2013)

Author(s): Winn, Jaime L; Shealy, Suzanne E; Kropp, Gary J; Felkins-Dohm, Donna; Gonzales-Nolas, Cheryl; Francis, Elie

Abstract: The problem of waiting list attrition in addiction treatment programs is widespread, and homeless and marginally housed individuals are particularly susceptible. This naturalistic, retrospective study describes an intervention (Transitional Supportive Housing and Case Management) that effectively promoted treatment admission for this high-risk group above and beyond that which could be explained by certain pretreatment factors. The clinical records of 211 military veterans referred to intensive outpatient addiction treatment were reviewed for factors related to treatment program admission, including 3 interventions designed to prevent waiting list attrition. Chi-square tests evaluated univariate predictors of treatment entry, and a hierarchical binary logistic regression evaluated several variables simultaneously. Results showed that fewer than 50% of wait-listed patients achieved treatment admission. Univariate predictors of treatment entry were not having a current partner, having a legal problem, and having had past substance use disorder treatment. The logistic regression showed that patients who received the intervention were 4.5 times more likely to enter the treatment program, and individuals with a current legal problem were 2.5 times more likely to enter treatment. Participation in a weekly support group and/or contact with a psychiatric nurse practitioner did not increase the likelihood of program admission. It may be possible to enhance treatment entry for the homeless and marginally housed by providing case management and housing services. Future research is needed to determine how the individual-level factors predicting treatment entry in this study can be used to tailor other interventions to further address the problem of waiting list attrition. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: 

Source: PsycINFO

2. Pharmacotherapy for Alcohol Dependence: Perceived Treatment Barriers and Action Strategies Among Veterans Health Administration Service Providers.

Citation: Psychological Services, January 2013 (No Pagination Specified), 1541-1559; 1939-148X (Jan 28, 2013)

Author(s): Harris, Alex H. S; Ellerbe, Laura; Reeder, Rachelle N; Bowe, Thomas; Gordon, Adam J; Hagedorn, Hildi; Oliva, Elizabeth; Lembke, Anna; Kivlahan, Daniel; Trafton, Jodie A

Abstract: Although access to and consideration of pharmacological treatments for alcohol dependence are consensus standards of care, receipt of these medications by patients is generally rare and highly variable across treatment settings. The goal of the present project was to survey and interview the clinicians, managers, and pharmacists affiliated with addiction treatment programs within Veterans Health Administration (VHA) facilities to learn about their perceptions of barriers and facilitators regarding greater and more reliable consideration of pharmacological treatments for alcohol dependence. Fifty-nine participants from 19 high-adopting and 11 low-adopting facilities completed the survey (facility-level response rate = 50%) and 23 participated in a structured interview. The top 4 barriers to increased consideration and use of pharmacotherapy for alcohol dependence were consistent across high- and low-adopting facilities and included perceived low patient demand, pharmacy procedures or formulary restrictions, lack of provider skills or knowledge regarding pharmacotherapy for alcohol dependence, and lack of confidence in treatment effectiveness. Low patient demand was rated as the most important barrier for oral naltrexone and disulfiram, whereas pharmacy or formulary restrictions were rated as the most important barrier for acamprosate and extended-release naltrexone. The 4 strategies rated across low- and high-adopting facilities as most likely
to facilitate consideration and use of pharmacotherapy for alcohol dependence were more education to patients about existing medications, more education to health care providers about medications, increased involvement of physicians in treatment for alcohol dependence, and more compelling research on existing medications. This knowledge provides a foundation for designing, deploying, and evaluating targeted implementation efforts. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)


Citation: Experimental and Clinical Psychopharmacology, January 2013(No Pagination Specified), 1064-1297;1936-2293 (Jan 28, 2013)

Author(s): Stein, Jeffrey S; Johnson, Patrick S; Renda, C. Renee; Smits, Rochelle R; Liston, Kennan J; Shahan, Timothy A; Madden, Gregory J

Abstract: Naturally occurring impulsive choice has been found to positively predict alcohol consumption in rats. However, the extent to which experimental manipulation of impulsive choice may modify alcohol consumption remains unclear. In the present study, we sought to: (a) train low levels of impulsive choice in rats using early, prolonged exposure to reward delay, and (b) determine the effects of this manipulation on subsequent alcohol consumption. During a prolonged training regimen, three groups of male, adolescent Long-Evans rats (21-22 days old at intake) responded on a single lever for food rewards delivered after either a progressively increasing delay, a fixed delay, or no delay. Posttests of impulsive choice were conducted, as was an evaluation of alcohol consumption using a limited-access, two-bottle test. Following delay-exposure training, both groups of delay-exposed rats made significantly fewer impulsive choices than did rats in the no-delay group. In addition, fixed-delay rats consumed significantly more alcohol during daily, 30-min sessions than no-delay rats. Possible mechanisms of these effects are discussed, as is the significance of these findings to nonhuman models of addiction. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

4. No evidence for an effect of testosterone administration on delay discounting in male university students.

Citation: Psychoneuroendocrinology, January 2013(No Pagination Specified), 0306-4530 (Jan 19, 2013)

Author(s): Ortner, Georgia Rada; Wibral, Matthias; Becker, Anke; Dohmen, Thomas; Klingmuller, Dietrich; Falk, Armin; Weber, Bernd

Abstract: Intertemporal choices between a smaller sooner and a larger delayed reward are one of the most important types of decisions humans face in their everyday life. The degree to which individuals discount delayed rewards correlates with impulsiveness. Steep delay discounting has been associated with negative outcomes over a wide range of behaviors such as addiction. However, little is known about the biological foundations of delay discounting. Here, we examine a potential causal link between delay discounting and testosterone, a hormone which has been associated with other types of impulsive behavior. In our double-blind placebo-controlled study 91 healthy young men either received a topical gel containing 50mg of testosterone (N=46) or a placebo (N=45) before participating in a delay discounting task with real incentives. Our main finding is that a single dose administration of testosterone did not lead to significant differences in discount rates between the placebo and the testosterone group. Within groups and in the pooled sample, no significant relationship between testosterone and discount rates was
observed. At the same time, we do replicate standard findings from the delay discounting literature such as a magnitude-of-rewards effect on discount rates. In sum, our findings suggest that circulating testosterone does not have a significant effect on delay discounting in young men. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

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

**Subject Headings:**

**Source:** PsycINFO

**Full Text:** Available from Clinical Key in Psychoneuroendocrinology

5. Views of addiction neuroscientists and clinicians on the clinical impact of a 'brain disease model of addiction'.

**Citation:** Neuroethics, January 2013(No Pagination Specified), 1874-5490;1874-5504 (Jan 19, 2013)

**Author(s):** Bell, Stephanie; Carter, Adrian; Mathews, Rebecca; Gartner, Coral; Lucke, Jayne; Hall, Wayne

**Abstract:** Addiction is increasingly described as a "chronic and relapsing brain disease". The potential impact of the brain disease model on the treatment of addiction or addicted individuals' treatment behaviour remains uncertain. We conducted a qualitative study to examine: (i) the extent to which leading Australian addiction neuroscientists and clinicians accept the brain disease view of addiction; and (ii) their views on the likely impacts of this view on addicted individuals' beliefs and behaviour. Thirty-one Australian addiction neuroscientists and clinicians (10 females and 21 males; 16 with clinical experience and 15 with no clinical experience) took part in 1 h semi-structured interviews. Most addiction neuroscientists and clinicians did not uncritically support the use of brain disease model of addiction. Most were cautious about the potential for adverse impacts on individuals' recovery and motivation to enter treatment. While some recognised the possibility that the brain disease model of addiction may provide a rationale for addicted persons to seek treatment and motivate behaviour change, Australian addiction neuroscientist and clinicians do not assume that messages about "diseased brains" will always lead to increased treatment-seeking and reduced drug use. Research is needed on how neuroscience research could be used in ways that optimise positive outcomes for addicted persons. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

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

**Subject Headings:**

**Source:** PsycINFO

6. Patient characteristics associated with buprenorphine/naloxone treatment outcome for prescription opioid dependence: Results from a multisite study.

**Citation:** Drug and Alcohol Dependence, January 2013(No Pagination Specified), 0376-8716 (Jan 17, 2013)

**Author(s):** Dreifuss, Jessica A; Griffin, Margaret L; Frost, Katherine; Fitzmaurice, Garrett M; Potter, Jennifer Sharpe; Fiellin, David A; Selzer, Jeffrey; Hatch-Maillette, Mary; Sonne, Susan C; Weiss, Roger D

**Abstract:** BACKGROUND: Prescription opioid dependence is a growing problem, but little research exists on its treatment, including patient characteristics that predict treatment outcome. METHODS: A secondary analysis of data from a large multisite, randomized clinical trial, the National Drug Abuse Treatment Clinical Trials Network Prescription Opioid Addiction Treatment Study (POATS) was undertaken to examine baseline patient characteristics (N=360) associated with success during 12-week buprenorphine/naloxone treatment for prescription opioid dependence. Baseline predictor variables included self-reported demographic and opioid use history information, diagnoses assessed via the Composite International Diagnostic Interview, and historical opioid use and related information from the Pain And Opiate Analgesic Use History. RESULTS: In bivariate
analyses, pre-treatment characteristics associated with successful opioid use outcome included older age, past-year or lifetime diagnosis of major depressive disorder, initially obtaining opioids with a medical prescription to relieve pain, having only used opioids by swallowing or sublingual administration, never having used heroin, using an opioid other than extended-release oxycodone most frequently, and no prior opioid dependence treatment. In multivariate analysis, age, lifetime major depressive disorder, having only used opioids by swallowing or sublingual administration, and receiving no prior opioid dependence treatment remained as significant predictors of successful outcome.

CONCLUSIONS: This is the first study to examine characteristics associated with treatment outcome in patients dependent exclusively on prescription opioids. Characteristics associated with successful outcome after 12 weeks of buprenorphine/naloxone treatment include some that have previously been found to predict heroin-dependent patients’ response to methadone treatment and some specific to prescription opioid-dependent patients receiving buprenorphine/naloxone. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)
Abstract: (from the cover) Understanding and Treating Sex Addiction explains why an increasing number of people are inadvertently finding their lives devastated by their sexual behaviours. It explores the latest scientific understandings and research into why pornography, cyber sex, visiting sex workers, fetishes and multiple affairs can come to control some people's lives to the point that they can't stop. It explains how sex addiction is not a moral issue, as some assume, but a health issue that we as a society need to start taking seriously. Throughout the book are the revealing statistics from the UK's latest survey sex addiction. Three hundred and fifty people who struggle with this condition have bravely and candidly shared their experience for the benefit of their fellow sufferers and those who choose to help them. The book contains support and advice for both the clinicians and for those who suffer from sex addiction. As well as practical guidance and techniques for stopping compulsive behaviours and preventing relapse, there is also a thorough exploration of the deeper underlying causes and how there must be addressed. (PsycINFO Database Record (c) 2013 APA, all rights reserved)

Publication Type: Book; Authored Book

Subject Headings:
*Causality
*Clinical Practice
*Relapse Prevention
*Sexual Addiction
*Treatment

Source: PsycINFO

9. Subconscious components of psychophysiological responses in the participants of a 105-day experiment in an isolated environment.

Citation: Human Physiology, December 2012, vol./is. 38/7(683-688), 0362-1197;1608-3164 (Dec 2012)

Author(s): Bubeev, Yu. A; Ushakov, I. B; Kvasovets, S. V; Ivanov, A. V; Kalmanov, A. S

Correspondence Address: Bubeev, Yu. A.: Institute of Biomedical Problems, Russian Academy of Sciences, Moscow, Russia, 123007


Language: English

Abstract: Six participants of a 105- day experiment in an isolated environment were studied in order to identify subconscious mechanisms of their psychophysiological changes during the experiment. We used the method of neurocognitive diagnostics based on the analysis of the evoked electrocardiographic (EEG) potentials caused by stimuli that were below the conscious threshold. The technique included separation of evoked responses to each stimulus, cross correlation and wavelet analyses, estimations using neural network algorithms, and an overall evaluation for all stimuli for each derivation and each period of stimulation. Comparison of the reactions to meaningful and meaningless groups of words elicited the extent of involvement of different brain areas in semantic information processing. Our results give grounds to indicate a number of changes in the psychological state of the subjects due to their participation in the experiment. These are list below: (1) An increase in subconscious tension between some of the crew members, such as representatives of different cultures. (2) An increase in psychological defense stress, primarily caused by basic fears of death and worries about health, as well as private family relations. (3) The appearance of addictive trends manifested in the changes in the subconscious attitude to alcohol and an increase in the role that alcohol plays in the emotional state. These findings on the changes in the major mechanisms of unconscious responses are useful in defining the strategy for working out the methods of autonomous
10. Psychosocial characteristics of benzodiazepine addicts compared to not addicted benzodiazepine users.

Citation: Progress in Neuro-Psychopharmacology & Biological Psychiatry, January 2013, vol./is. 40/(229-235), 0278-5846 (Jan 10, 2013)

Author(s): Konopka, Anna; Pelka-Wysiecka, Justyna; Grzywacz, Anna; Samochowiec, Jerzy

Correspondence Address: Samochowiec, Jerzy: Department of Psychiatry, Pomeranian Medical University, Ul. Broniewskiego 26, Szczecin, Poland, 71 460, samoj@pum.edu.pl

Institution: Konopka, Anna: Department of Psychiatry, Pomeranian Medical University, Szczecin; Pelka-Wysiecka, Justyna: Department of Psychiatry, Pomeranian Medical University, Szczecin; Grzywacz, Anna: Department of Psychiatry, Pomeranian Medical University, Szczecin; Samochowiec, Jerzy: Department of Psychiatry, Pomeranian Medical University, Szczecin

Language: English

Abstract: Objective: Although the addictive potential of benzodiazepine drugs has been known for a long time, new cases of benzodiazepine addictions keep emerging in clinical practice. The etiology of benzodiazepine addiction seems to be multifactorial. The objective of this study was to investigate and measure psychological and situational factors differentiating benzodiazepine addicts from not addicted users. Methods: A psychological profile and situational factors of patients with the diagnosis of benzodiazepine addiction and a carefully matched control group of not addicted former benzodiazepine users were defined and investigated. Results: The investigated benzodiazepine addicts differed significantly from the control group in particular psychological dimensions, such as higher neuroticism and introversion, prevalence of emotional rather than task based coping mechanisms. There were also significant correlations between the addiction and situational factors such as BZD-treatment circumstances and adverse life events previous to the treatment. Conclusions: The results show psychological and situational factors which differentiate benzodiazepine addicts from not addicted benzodiazepine users. This data suggest that benzodiazepine addiction might be associated with higher neuroticism, introversion and less effective coping mechanisms as well as with previous accumulation of adverse life events and/or inadequate BZD treatment. The psychological and situational factors mentioned above might be considered as potential risk factors for benzodiazepine addiction. (PsycINFO Database Record (c) 2013 APA, all rights reserved)

Citation: Progress in Neuro-Psychopharmacology & Biological Psychiatry, January 2013, vol./is. 40/(193-198), 0278-5846 (Jan 10, 2013)

Author(s): Nedic, Gordana; Perkovic, Matea Nikolac; Sviglin, Korona Nenadic; Muck-Seler, Dorotea; Borovecki, Fran; Pivac, Nela

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Institution: Nedic, Gordana: Division of Molecular Medicine, Rudjer Boskovic Institute, Zagreb; Perkovic, Matea Nikolac: Division of Molecular Medicine, Rudjer Boskovic Institute, Zagreb; Sviglin, Korona Nenadic: Center for Alcoholism and Other Addictions, Psychiatric Hospital Vrapc, Zagreb; Muck-Seler, Dorotea: Division of Molecular Medicine, Rudjer Boskovic Institute, Zagreb; Borovecki, Fran: Department for Functional Genomics, Center for Translational and Clinical Research, University of Zagreb School of Medicine, Zagreb; Pivac, Nela: Division of Molecular Medicine, Rudjer Boskovic Institute, Zagreb

Language: English

Abstract: Alcoholism is a chronic psychiatric disorder affecting neural pathways that regulate motivation, stress, reward and arousal. Brain-derived neurotrophic factor (BDNF) regulates mood, response to stress and interacts with neurotransmitters and stress systems involved in reward pathways and addiction. Aim of the study was to evaluate the association between a single nucleotide polymorphism (BDNF Val66Met or rs6265) and alcohol related phenotypes in Caucasian patients. In ethnically homogenous Caucasian subjects of the Croatian origin, the BDNF Val66Met genotype distribution was determined in 549 male and 126 female patients with alcohol dependence and in 655 male and 259 female healthy non-alcoholic control subjects. Based on the structured clinical interview, additional detailed clinical interview, the Brown-Goodwin Scale, the Hamilton Rating Scale for Depression and the Clinical Global Impression scores, alcoholic patients were subdivided into those with or without comorbid depression, aggression, delirium tremens, withdrawal syndrome, early/late onset of alcohol abuse, prior suicidal attempt during lifetime, current suicidal behavior, and severity of alcohol dependence. The results showed no significant association between BDNF Val66Met variants and alcohol dependence and/or any of the alcohol related phenotypes in either Caucasian women, or men, with alcohol dependence. There are few limitations of the study. The overall study sample size was large (N=1589) but not well-powered to detect differences in BDNF Val66Met genotype distribution between studied groups. Healthy control women were older than female alcoholic patients. Only one BDNF polymorphism (rs6265) was studied. In conclusion, these data do not support the view that BDNF Val66Met polymorphism correlates with the specific alcohol related phenotypes in ethnically homogenous medication-free Caucasian subjects with alcohol dependence. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Neural Pathways  
*Neurotransmitters  
*Polymorphism  
*Brain Derived Neurotrophic Factor  
Alcoholism

Source: PsycINFO

12. Association study of DRD2 and MAOA genes with subtyped alcoholism comorbid with bipolar disorder in Han Chinese.

Citation: Progress in Neuro-Psychopharmacology & Biological Psychiatry, January 2013, vol./is. 40/(144-148), 0278-5846 (Jan 10, 2013)
Background: Several studies have hypothesized that genes involved in the dopamine system, including dopamine type-2 receptor (DRD2)-related TaqIA polymorphism and monoamine oxidase-A upstream variable number tandem repeat (uVNTR), may be associated with alcoholism. But their results were contradictory because of alcoholism's heterogeneity. Therefore, we examined whether the DRD2TaqIA and MAOA-uVNTR gene polymorphisms are susceptibility factors for alcoholism comorbid with bipolar disorder (ALC+BP) in Han Chinese in Taiwan. Methods: We recruited 101 Han Chinese men with comorbid alcoholism and bipolar disorder, and 328 healthy male controls from the community. Genotyping was done using PCR-RFLP. Results: There were no significant differences in the genotypic frequencies of the DRD2TaqIA or the MAOA-uVNTR polymorphisms between the 2 groups. The MAOA-uVNTR 3-repeat had a significant protective effect on the ALC+BP (odds ratio = 0.432, p = 0.035) but not on the healthy controls. However, the interaction between the MAOA-uVNTR 3-repeat and DRD2 A1/A2 was a risk factor in the ALC+BP (odds ratio = 3.451, p = 0.018). Conclusions: We indicated the impact of the association between MAOA-uVNTR 3-repeat and DRD2 A1/A2 with ALC+BP. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)
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Language: English

Abstract: Objective: To assess the association between mind wandering (thinking unrelated to the task at hand) and the risk of being responsible for a motor vehicle crash. Design: Responsibility case-control study. Setting: Adult emergency department of a university hospital in France, April 2010 to August 2011. Participants: 955 drivers injured in a motor vehicle crash. Main outcome measures: Responsibility for the crash, mind wandering, external distraction, negative affect, alcohol use, psychotropic drug use, and sleep deprivation. Potential confounders were sociodemographic and crash characteristics. Results: Intense mind wandering (highly disrupting/distracting content) was associated with responsibility for a traffic crash (17% (78 of 453 crashes in which the driver was thought to be responsible) v 9% (43 of 502 crashes in which the driver was not thought to be responsible); adjusted odds ratio 2.12, 95% confidence interval 1.37 to 3.28). Conclusions: Mind wandering while driving, by decoupling attention from visual and auditory perceptions, can jeopardise the ability of the driver to incorporate information from the environment, thereby threatening safety on the roads. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Usage
*Emergency Services
*Mind
*Motor Traffic Accidents
*Risk Factors
Alcohol Drinking Patterns
Drugs
Emotions
Responsibility
Sleep Deprivation
Thinking

Source: PsycINFO

Full Text: Available from BMJ in Newcomb Library & Information Service

14. Evidence for a role of a dopamine/5-HT6 receptor interaction in cocaine reinforcement.
Citation: Neuropharmacology, February 2013, vol./is. 65/(58-64), 0028-3908 (Feb 2013)

Author(s): Valentini, V; Piras, G; De Luca, M. A; Perra, V; Bordi, F; Borsini, F; Frau, R; Di Chiara, G

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Language: English

Abstract: The putative 5-HT6 receptor agonist ST1936 has been shown to increase extracellular dopamine (DA) in the n. accumbens (NAc) shell and in the medial prefrontal cortex (PFCX). These observations suggest that 5-HT6 receptors modulate DA transmission in mesolimbic and mesocortical terminal DA areas. To investigate the behavioral counterpart of this interaction we studied in rats 1) the ability of ST1936 to maintain i.v. self-administration in fixed ratio (FR) and progressive ratio (PR) schedules of reinforcement; 2) the effect of 5-HT6 receptor blockade on cocaine stimulated overflow of DA in dialysates from the PFCX and from the NAc shell and on cocaine i.v. self-administration. ST1936 was i.v. self-administered at unitary doses of 0.5-1 mg/kg on an FR1 and PR schedule of reinforcement, with breaking point of about 4. Pretreatment with the 5-HT6 antagonist SB271046 reduced by about 80% responding for ST1936. SB271046 also reduced cocaine-induced increase of dialysate DA in the NAc shell but not in the PFCX and impaired i.v. cocaine self-administration. These observations indicate that ST1936 behaves as a weak reinforcer and suggest that 5-HT6 receptors play a role in cocaine reinforcement via their facilitatory interaction with DA projections to the NAc shell. This novel 5-HT/DA interaction might provide the basis for a new pharmacotherapeutic strategy of cocaine addiction. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Cocaine *Dopamine *Nucleus Accumbens *Reinforcement *Serotonin Neurotransmission Rats

Source: PsycINFO

15. Adult neuronal Arf6 controls ethanol-induced behavior with Arfaptin downstream of Rac1 and RhoGAP18B.

Citation: The Journal of Neuroscience, December 2012, vol./is. 32/49(17706-17713), 0270-6474;1529-2401 (Dec 5, 2012)

Author(s): Peru, Raniero L; de Portugal, Colon; Acevedo, Summer F; Rodan, Aylin R; Chang, Leo Y; Eaton, Benjamin A; Rothenfluh, Adrian

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Language: English

Abstract: Alcohol use disorders affect millions of individuals. However, the genes and signaling pathways involved in behavioral ethanol responses and addiction are poorly understood. Here we identify a conserved biochemical pathway that underlies the sedating effects of ethanol in Drosophila. Mutations in the Arf6 small GTPase signaling pathway cause hypersensitivity to ethanol-induced sedation. We show that Arf6 functions in the adult nervous system to control ethanol-induced behavior. We also find that the Drosophila Arfaptin protein directly binds to the activated forms of Arf6 and Rac1 GTPases, and mutants in Arfaptin also display ethanol sensitivity. Arf6 acts downstream of Rac1 and Arfaptin to regulate ethanol-induced behaviors, and we thus demonstrate that this conserved Rac1/Arfaptin/Arf6 pathway is a major mediator of ethanol-induced behavioral responses. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Authors; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Ethanol *Genes *Mutations *Neurons Drosophila

Source: PsycINFO

16. Irrational choice under uncertainty correlates with lower striatal D2/3 receptor binding in rats.

Citation: The Journal of Neuroscience, October 2012, vol./is. 32/44(15450-15457), 0270-6474;1529-2401 (Oct 31, 2012)

Author(s): Cocker, Paul J; Dinelle, Katherine; Kornelson, Rick; Sossi, Vesna; Winstanley, Catharine A

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Language: English

Abstract: Individual differences in dopamine (DA) signaling, including low striatal D2/3 receptors, may increase vulnerability to substance abuse, although whether this phenotype confers susceptibility to nonchemical addictions is unclear. The degree to which people use "irrational" cognitive heuristics when choosing under uncertainty can determine whether they find gambling addictive. Given that dopaminergic projections to the striatum signal reward expectancy and modulate decision-making, individual differences in DA signaling could influence the extent of such biases. To test this hypothesis, we used a novel task to model biased, risk-averse decision-making in rats. Animals chose between a "safe" lever, which guaranteed delivery of the wager, or an "uncertain" lever, which delivered either double the wager or nothing with 50:50 odds. The bet size varied from one to three sugar pellets. Although the amount at stake did not alter the options' utility, a subgroup of "wager-sensitive" rats increased their preference for the safe lever as the bet size increased, akin to risk aversion. In contrast, wager-insensitive rats slightly preferred the
uncertain option consistently. Amphetamine increased choice of the uncertain option in wager-sensitive, but not in wager-insensitive rats, whereas a D2/3 receptor antagonist decreased uncertain lever choice in wager-insensitive rats alone. Micro-PET and autoradiography using [C]raclopride confirmed a strong correlation between high wager sensitivity and low striatal D2/3 receptor density. These data suggest that the propensity for biased decision-making under uncertainty is influenced by striatal D2/3 receptor expression, and provide novel support for the hypothesis that susceptibility to chemical and behavioral addictions may share a common neurobiological basis. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The authors; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Dopamine
*Drug Abuse
*Receptor Binding
Decision Making
Individual Differences
Rats
Source: PsycINFO


Citation: Mental Health Review Journal, 2012, vol./is. 17/4(187-198), 1361-9322;2042-8758 (2012)
Author(s): McGeorge, Peter
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Institution: McGeorge, Peter: St Vincent's Urban Mental Health and Well-being Research Institute, Sydney, NSW
Language: English
Abstract: Purpose: The aim of the paper is to describe the "organisational lifecycle" of the New Zealand Mental Health Commission (NZ MHC) including factors that led to it being established, the evolving phases of the work it undertook and its key achievements, the critical success factors, the rationale behind its disestablishment and transfer of its core functions to another entity. Design/methodology/approach: The methodology is a review of relevant documents and interviews of previous Commissioners, and insights of the final two Chair Commissioners and authors. Findings: The NZ MHC was established to provide government with independent advice on how to develop the capacity and capability of mental health and addictions services for those people with the highest and most complex needs, estimated to be approximately 3 percent of the population. Having successfully led changes to achieve this goal as set out in The Blueprint of 1998 it is now influencing government policy and services to achieve better mental health and well-being for the whole population as per Blueprint II, published in 2012. The NZ Government clearly values the role of Mental Health Commissioner which has been transferred to the Office of the Health and Disability Commissioner from July 2012 at the time the Commission is disestablished. Research limitations/implications: The paper relies on insights of those in Commission leadership roles. Practical implications: Other Commissions may gain insight into their own evolutionary pathways and proactively manage them. Social implications: Optimal mental health and wellbeing for society requires policy that simultaneously takes a "whole of society" approach and focuses on responding to people with the highest needs. Originality/value: The paper shows that there are significant concerns about the disestablishment of the Mental Health Commission in New Zealand and little understanding of the underlying rationale for the organisational changes. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Emerald Group Publishing Limited
Publication Type: Journal; Peer Reviewed Journal
### 18. Co-occurring disorders.

**Citation:** Occupational therapy in mental health: A vision for participation., 2011(211-224) (2011)

**Author(s):** Moyers, Penelope A

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**Language:** English

**Abstract:** (from the chapter) This chapter clarifies the meaning of the term "co-occurring disorders" as referring to persons who have at least one substance use disorder and a minimum of one mental disorder. The epidemiology of COD is explored, and concludes with the need to simultaneously address both classes of disorders in an integrated manner. Occupational therapy practitioners are encouraged to take responsibility for improving research, training, insurance coverage, and evidence-based intervention programs for COD. Occupational therapy practitioners require education and training to address the occupational performance problems and community participation of persons with CODs, thereby improving existing and developing new prevention and intervention programs.

**Publication Type:** Book; Edited Book

**Subject Headings:**
- Comorbidity
- Drug Abuse
- Evidence Based Practice
- Mental Disorders
- Occupational Therapy
- Activities of Daily Living
- Intervention
- Job Performance
- Occupational Therapists

**Source:** PsycINFO

### 19. Substance-related disorders.

**Citation:** Occupational therapy in mental health: A vision for participation., 2011(192-210) (2011)

**Author(s):** Haertlein Sells, Carol; Stoffel, Virginia Carroll; Plach, Heidi

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**Language:** English

**Abstract:** (from the chapter) Alcohol and drugs. The mere mention can bring longing to those who use, abuse, and depend on them; smiles to those who have used and survived; tears to those whose lives have been disrupted or destroyed; and frowns to those who have tried to tackle the effects of drugs on their own lives and the lives of others. Substance-related disorders can affect all aspects of functioning included in the domain of occupational therapy, but have a particular impact on individual client factors, performance patterns and skills, contexts, and all areas of occupation. Occupational therapists provide...
important services to individuals, families, and communities that are affected by substance use, abuse, and dependence by determining occupational needs, providing assessment and interventions, and developing primary and secondary prevention programs. This chapter provides the reader with important information about how substance-related disorders affect the occupational lives of people who live with substance abuse and dependence. Occupational therapy provides a variety of options to restoring health and well-being by providing the person with meaningful alternatives to use of alcohol and other drugs. Helping facilitate the readiness to change through skillful use of motivational interviewing, facilitating coping, and encouraging exploration, as well as use of 12-step self-help groups to build a community of support for recovery from alcohol and drug use, are potential ways an occupational therapy practitioner might promote change. (PsycINFO Database Record (c) 2013 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: *Drug Abuse
*Occupational Therapists
*Occupational Therapy
*Readiness to Change
Coping Behavior
Motivational Interviewing
Twelve Step Programs

Source: PsycINFO

20. Respondent-driven sampling in a syringe exchange setting.

Citation: Scandinavian Journal of Public Health, December 2012, vol./is. 40/8(725-729), 1403-4948;1651-1905 (Dec 2012)

Author(s): Hakansson, Anders; Isendahl, Pernilla; Wallin, Camilla; Berglund, Mats

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Language: English

Abstract: Aims: Respondent-driven sampling is a research technique, new to the Scandinavian setting, used in hard-to-reach populations, such as subjects at risk for HIV, including drug users. This study aimed to evaluate the use of respondent-driven sampling originating from syringe exchange clients, as a method to identify 'hidden' drug users without treatment or social service contact. Methods: Nine heroin and amphetamine injectors were recruited as 'seeds' and instructed to recruit up to three heavy drug users in a chain-referral process. Recruited clients were interviewed about drug use, social conditions and contacts with treatment, syringe exchange and other authorities. In order to estimate whether the recruitment managed to evolve into groups of 'hidden' drug users, clients included beyond the fourth wave of chain-referral were compared with seeds (wave 0) and clients recruited in waves 1-3. Results: Five seeds were generative, and in total, 66 clients were assessed. Except for one of the 35 variables studied, clients in waves 4-9 did not differ from clients in waves 0-3, and were no less likely to have contacts with authorities. All clients except one were injectors and syringe exchangers, and clients recruited later in the chain-referral even tended to attend the syringe exchange more frequently. Conclusions: Respondent-driven sampling originating from syringe exchange clients may have difficulty reaching beyond the population of injectors and syringe exchangers. The technique, new to this geographical setting, has potential for future studies, but particular efforts may be necessary to study out-of-treatment heavy drug users unknown to the syringe exchange program. (PsycINFO Database Record (c) 2013 APA, all rights reserved)

Citation: Physiology & Behavior, November 2012, vol./is. 107/4(568-575), 0031-9384 (Nov 5, 2012)

Author(s): Bocarsly, Miriam E; Barson, Jessica R; Hauca, Jenna M; Hoebel, Bartley G; Leibowitz, Sarah F; Avena, Nicole M

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Language: English

Abstract: The aim of the present study was to determine the effects of fat- and sugar-rich diets in utero and during the pre-weaning period on bodyweight and responses to drugs of abuse. In Exp. 1, dams were fed a balanced control diet or high-fat diet (HFD), and female offspring were cross-fostered to dams consuming the balanced diet. The HFD-exposed offspring, compared to controls, were heavier in body weight, had increased circulating triglyceride levels, and consumed more alcohol and HFD in adulthood. In Exp. 2, dams were fed standard chow alone or standard chow plus a 16% high-fructose corn syrup (HFCS) or 10% sucrose solution. Sets of offspring from each group were cross-fostered to dams in the other groups, allowing for the effects of HFCS or sucrose exposure during the gestational period or pre-weaning period to be determined. The offspring (both female and male) exposed to HFCS or sucrose in utero had higher body weights in adulthood and exhibited increased alcohol intake as shown in female offspring and increased amphetamine-induced locomotor activity as shown in males. Exposure to HFCS or sucrose only during the pre-weaning period had a similar effect of increasing amphetamine-induced locomotor activity in males, but produced no change in circulating triglycerides or alcohol intake. Collectively, these data suggest that prenatal as well as preweaning exposure to fat- and sugar-rich diets, in addition to increasing body weight, can affect responses to drugs of abuse. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)
22. Self-perception and life satisfaction in video game addiction in young adolescents (11-14 years old).

Original Title: Perception de soi et satisfaction de vie dans l'addiction aux jeux video chez les jeunes adolescents (11-14 ans).

Citation: L'Encephale: Revue de psychiatrie clinique biologique et therapeutique, December 2012, vol./is. 38/6(512-518), 0013-7006 (Dec 2012)

Author(s): Gaetan, S; Bonnet, A; Pedinielli, J. -L

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Language: French

Abstract: Introduction: Video games are part of our society's major entertainments. This is now a global industry that covers the preferential activity of adolescents. But for some, the practice goes beyond a game and becomes an addictive functioning. Clinical practice is then faced with a new problem. It is important to understand the special bond that develops between a player and his/her video game in order to understand the addictive process. Background: The game consists of a virtual world, a graphical construction that is a simulation of reality and which reinvents the laws that govern it. It also consists of a character embodied by the player who controls it: the avatar. Through the virtual world and avatar, the game offers the player a virtual personification that matches his/her expectations and projected ideal. The avatar allows the subject to compensate, or even to modify some aspects of the Self and thus enhance his/her perception of him/herself; the virtual life become more satisfying than real life. Objectives: The aim of this research is to propose, from the study of the relationship between psychosocial variables (self-perception and life satisfaction) and the adolescent's practice of video games, elements of construction of an explanatory model of video gambling addiction. Methods: The population of this research is composed of 74 adolescents aged 11-14 years (mage = 12.78 and SD = 0.921). Fourteen are identified as addicted to video games by the results of the Game Addiction Scale. The quantitative methodology allows measurement of the different psychosocial variables which appear important in the addictive process. The instruments used are: the Game Addiction Scale, the Self-Perception Profile and the Satisfaction with Life Scale. Results: The results show that adolescents addicted to video games see their virtual and current Self as being less proficient than other teenagers. Furthermore, teenagers addicted to video games see their virtual Self as more proficient and adapted to the environment than their current Self. Moreover, addicted perceive their lives as less satisfying than others'. Hence, virtual life is perceived as more satisfying than real life among teenagers addicted to video games. Finally, this virtual experience is thus one of the factors that explain the addiction to video games. Through the game, the teenager can "live" a new version of him/herself, becoming secondarily alienating. The virtual world supplants real life and becomes the source of a clash of identity. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Addiction
*Computer Games
*Life Satisfaction
*Self Perception

Source: PsycINFO

23. Tunisian mothers' beliefs about their child's first psychotic episode.

Original Title: Opinion des meres Tunisiennes concernant le premier episode psychotique de leur enfant.
Introduction: Initiating psychiatric treatment depends on several factors including clinical, personal, familial and economic factors. In the case of a first psychotic episode in an adolescent, parents, especially mothers, have a critical role in initiating psychiatric treatment for their child. Objective: In this study, we investigated mothers' beliefs about their child's first psychotic episode. Methods: Participants were adolescents consulting the department of Child and Adolescent Psychiatry of the Razi hospital in Tunisia. They were aged from 12 to 19 years at the onset of their medical follow-up. Their diagnoses were schizophrenia, schizoaffective disorder and schizophreniform disorder according to DSM-IV. A questionnaire was submitted to patients' mothers after their approval. It was divided into two parts. The first part was used to collect information on socio-demographic and clinical characteristics of the mothers and their children. The second part was composed of the following four questions in Tunisian dialect: (1) what did you think was the matter when you first noticed psychotic symptoms in your child? (2) what was the main reason for which you thought psychiatric treatment was necessary? (3) what obstacles did you perceive in initiating psychiatric treatment? (4) do you have any advice or suggestions for caregivers on how they could facilitate an early start of treatment? Results: Twenty-two mothers were included. The mean age of the mothers at onset of the follow-up of their child was 42 years (SD: 4.81). Ten mothers had never been schooled, five had primary school level, four had secondary school level, three had bachelor's degree and two had a diploma of doctorate; 63.6% of the mothers were housewives. The mean age of patients was 13.77 years at the start of their medical follow-up (SD = +/- 2.14). Most of the patients were male (14 males for eight girls). Most patients were diagnosed as having schizophrenia (91%); 4.5% were diagnosed with schizoaffective disorder and 4.5% with schizophreniform disorder. The duration of untreated psychosis (DUP) was 11.5 months. Longer duration of untreated psychosis was associated with male gender (P = 0.008). A significant relationship was also found between long DUP and stigmatization of mental hospital and psychiatry (respectively P = 0.04 and P = 0.05). Most of the mothers did not think that their child initially suffered from a psychotic disorder. In 63.3%, the cause of the child's symptomatology was attributed to spirit possession. The others reasons for seeking psychiatric treatment were: behavioral disorder in 77.3%, inefficacity of traditional practices in 54.5%, and patient refusal (40.9%). Stigmatization of the Razi hospital, the unique psychiatric hospital in the country, and of psychiatry in general were evoked by mothers as the main obstacles in initiating psychiatric treatment in more than half of the cases (70%). Others obstacles were: fear of side effects of psychiatric treatment (50%), patient refusal (40.9%), inaccessibility to psychiatric services (31.8%) and fear of an addiction to psychotropic agents (31.8%). Thirty-six percent of mothers underlined the need to consult in the occurrence of school difficulties or any change in the child's behavior; 27% proposed educational and anti-stigmatizing campaigns about the signs of early psychosis through radio, newspapers, cinema, and TV media advertisements. Making teachers and educators sensitive to psychosis was proposed by 13.6% of mothers; 9.1% thought that diagnostic skills should be improved in general practitioners. Conclusion: Knowledge of attitudes of mothers towards the illness of their child prior to psychiatric treatment and towards the start of treatment is essential for the development of interventions for reducing duration of untreated psychosis. (PsycINFO Database Record (c) 2013 APA, all rights reserved)

Objective: Evaluate chemical and behavioral dependence of medical students, and compare it to a control group (students in non-medical faculties), in order to underline the harmful effect of university on medical students' dependence. Methods: A three-part questionnaire was distributed to a sample of 140 medical students at the Saint-Joseph university of Beirut (USJ), and to 140 students in many other USJ faculties, and filled in anonymously. The first part is about demographic criteria and the second and third parts are respectively about chemical and behavioral dependence, based on DSM IV criteria. Results: There is no statistically significant difference between the two studied populations concerning the dependence on alcohol, cannabis, sedatives, opiates, amphetamines, workaholism, gambling and Internet. However, the prevalence of addiction to caffeine, cocaine, nicotine; sexual addiction, and compulsive buying are significantly lower in medical students when compared to the control group. Men, compared to women, did not show significantly higher levels of dependence on chemical substances. Workaholism is not significantly more prevalent in women. Sexual addiction and compulsive buying are not significantly higher in men. However, pathological gambling and Internet addiction are significantly more prevalent in men. Finally, this study does not show a variation in dependence through the years of medical studies. Discussion: Most studies show that medical students have high levels of dependence on alcohol, cannabis, sedatives, opiates, amphetamines, workaholism, gambling and Internet. However, the prevalence of addiction to caffeine, cocaine, nicotine; sexual addiction, and compulsive buying are significantly lower in medical students when compared to the control group. Men, compared to women, did not show significantly higher levels of dependence on chemical substances. Workaholism is not significantly more prevalent in women. Sexual addiction and compulsive buying are not significantly higher in men. However, pathological gambling and Internet addiction are significantly more prevalent in men. Finally, this study does not show a variation in dependence through the years of medical studies. Conclusion: The prevalence of chemical and behavioral dependency of medical students is not higher than the other population. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Original Title: Therapie cognitivo-comportementale des achats compulsifs.

Citation: Annales Medico-Psychologiques, December 2012, vol./is. 170/10(744-747), 0003-4487 (Dec 2012)

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Language: French

Abstract: Compulsive buying has been defined for many years as a repetition of excessive and impulsive buying behaviour entailing financial and familial problems. Subject to discussion about its nosographic category, the compulsive buying disorder is not represented in the Diagnostic Statistical Manual IV-R and the International Classification of Diseases 10. However, compulsive buying shares many common aspects with classical addictive disorders. In that way, compulsive buying can be considered as a behavioral dependance. Its prevalence seems to increase in the economically developed countries. American and European studies show a prevalence from 2 to 5.8% in the general population. These studies also prove that a cognitive behavioral therapy tends to reduce shopping time and episodes compared to a waiting list. In this article, we present the four steps of the therapy. First of all, the therapist should screen other comorbidities such as depression. Indeed, 60 % of patients presenting compulsive buying also suffer from depression. The cognitive behavioral therapy requires a lot of mental efforts. In case of depression, thymic disorder should be treated first. During the pretherapy, the therapist informs the patient on its compulsive buying disease. The patient assess himself his shopping behavior with questionnaires, such as "Questionnaire d'Evaluation des Achats". The patient and the therapist can then agree on the number of sessions, the length of each of them. The cognitive part of the therapy consists in identifying, working on and changing dysfunctional thoughts related to buying. The patient becomes aware of his behavior: buying occurs in response to negative emotions such as anger, frustration. In this cognitive part, the therapist should also question the patient about his relation to money, since a lot of patients have dysfunctional beliefs such as "the more I buy, the richer I am" or "if I buy that shirt, I will worth something". The behavioral part of the therapy tends to focus on teaching the patient alternative responses. The patient identifies the specific situations when the urge to buy appears. The therapist can also teach patient relaxation methods for stress management. Patients can then attempt to apply these methods when faced with a potential shopping situation. It also appears that these patients suffer from very low self-esteem, they tend to reduce their qualities and focus on their defects. Teaching them self-assertion methods help them to cope with it. It can also help them to face the sellers when they encourage them to buy. Each patient gets a diary where he writes everyday his emotions, his temptation to buy and so on. This very concrete tool is to be used at each session with the therapist. Last but not least, the therapist should help the patient to prevent relapses. The patient should set up a relapse plan in case of. This short, structured therapy gives a possibility for the patient to come back to normal buying without an addictive characteristic. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)
26. Commentary on "Bath salt use: A case report and review of the literature".

Citation: Journal of Dual Diagnosis, July 2012, vol./is. 8/3(257-258), 1550-4263;1550-4271 (Jul 2012)

Author(s): Cimpean, Delia

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Language: English

Abstract: Comments on the article "Bath salt use: A case report and review of the literature", (see record 2012-31921-011). McClean et al., comprehensively review the state of knowledge to date on this topic and provide needed information for mental health and addiction treatment providers as well as for emergency department personnel and primary care providers who might encounter otherwise puzzling clinical conditions related to the use of these new substances. This article provides a timely and comprehensive review of current knowledge on history, pharmacology, use patterns, clinical intoxication, withdrawal, and treatment in addition to a case report of use by a person with a dual diagnosis. This information on bath salts needs to be communicated to medical, addictions, and mental health providers, because being aware and informed will allow them to screen, identify, educate, and treat. The need for increased awareness among providers is urgent. In addition, the field needs more clinical reports to inform further research on treatment for intoxication, abuse, and dependence. (PsycINFO Database Record (c) 2013 APA, all rights reserved)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Therapy *Neurotoxicity *Pharmacology *Comorbidity Drug Abuse Methamphetamine Schizophrenia

Source: PsycINFO

27. Bath salt use: A case report and review of the literature.

Citation: Journal of Dual Diagnosis, July 2012, vol./is. 8/3(250-256), 1550-4263;1550-4271 (Jul 2012)

Author(s): McClean, Jacob M; Anspikian, Ara; Tsuang, John W

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Institution: McClean, Jacob M.: Harbor/UCLA Medical Center, Department of Psychiatry, Torrance, CA; Anspikian, Ara: UCLA, Semel Institute for Neuroscience and Human Behavior, Los Angeles, CA; Tsuang, John W.: Harbor/UCLA Medical Center, Department of Psychiatry, Torrance, CA

Language: English
Abstract: The new recreational designer drugs known as "bath salts" are synthetic cathinones (e.g., mephedrone, 3,4-methylenedioxypyrovalerone, methylone) that are being abused as stimulants. Bath salts have similar effects as amphetamine, cocaine, and MDMA (3,4-methylenedioxymethamphetamine, also known as ecstasy). Cathinone is a naturally occurring phenylalkylamine alkaloid present in the khat plant that has been used for centuries, but in Western countries, they are primarily used by "young clubbers." In this review, the pharmacology and neurotoxicity of bath salts will be discussed and the prevalence and pattern of bath salt use will be presented. The U.S. Poison Control Center received an increasing number of calls regarding bath salt intoxication in 2011, which led to an emergency temporary ban in September 2011. Despite the ban, the use of bath salts has continued. Multiple reports have described the clinical features of bath salt intoxication and withdrawal symptoms, as well as the potential for abuse and the development of dependence. There are reports of bath salts causing hallucinations, delirium, and psychosis. For patients presenting with bath salt intoxication, management includes using medications for behavioral control and other symptomatic support. In this review, we will report the use of bath salts in a patient with a history of schizophrenia and comorbid methamphetamine dependence. His clinical course will be discussed. In order to prevent the further abuse of bath salts, we need to encourage the continuing ban on the sale of bath salts and also educate both clinicians and patients about the risks of using such drugs. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Therapy
*Neurotoxicity
*Pharmacology
Comorbidity
Drug Abuse
Methamphetamine
Schizophrenia

Source: PsycINFO

28. Commentary on "Substance abuse recovery after experiencing homelessness and mental illness: Case studies of change over time".

Citation: Journal of Dual Diagnosis, July 2012, vol./is. 8/3(247-249), 1550-4263;1550-4271 (Jul 2012)
Author(s): Whitley, Rob
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Language: English
Abstract: Comments on an article by Henwood et al (see record 2012-31921-009). The present author revisited some of the classic sociological and psychiatric literature from the later decades of the 20th century. In doing so, his intention was to stimulate further thought about the role of three underexplored factors in recovery from dual diagnosis: (1) biographical disruption and reconstruction, (2) ontological security, and (3) fresh start experiences. The raw data presented by Henwood et al. seem to indicate a role for all three of these factors, and they are tantalizingly alluded to throughout the article. Whether these factors really are facilitators of recovery from dual diagnosis, and the interrelation among the three, is perhaps something the authors can explore in future. (PsycINFO Database Record (c) 2013 APA, all rights reserved)
Objective: This article addresses how consumers with dual diagnosis who were formerly homeless but are now living in supportive housing understand their recovery from substance abuse (i.e., substance abuse or dependence). Specifically, this study examined what can be learned about substance abuse recovery from consumers considered to be doing well; how past substance abuse fits into their present-day narratives; and how (if at all) policies of harm reduction versus abstinence are regarded as affecting recovery efforts. Methods: As part of a federally funded qualitative study, 38 individuals who met criteria for having achieved a measure of success in mental health recovery were purposively sampled from two supportive housing agencies, one using a harm reduction and the other an abstinence model. Researchers conducted in-depth interviews and used case study analysis, the latter including the development of case summaries and data matrices, to focus on substance abuse recovery in the larger context of participants’ lives. Results: Recovery from substance abuse was depicted as occurring either through discrete decisions or gradual processes; achieving recovery was distinct from maintaining recovery. Emergent themes related to achievement included (a) pivotal events and people, (b) maturation, and (c) institutionalization. Central themes to maintaining recovery were (a) housing, (b) self-help, and (c) the influence of significant others. Conclusions: These findings capture a complex picture of overcoming substance abuse that largely took place outside of formal treatment and was heavily dependent on broader contexts. Equally important is that consumers themselves did not necessarily view substance abuse recovery as a defining feature of their life story. Indeed, recovery from substance abuse was seen as overcoming one adversity among many others during their troubled life courses.

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Abuse
*Harm Reduction
*Homeless
*Housing
*Mental Disorders
Comorbidty
Dual Diagnosis
Recovery (Disorders)

Source: PsycINFO
30. Screening substance-dependent patients for mental disorders with the Kessler-6.

Citation: Journal of Dual Diagnosis, July 2012, vol./is. 8/3(229-237), 1550-4263;1550-4271 (Jul 2012)

Author(s): Hesse, Morten; Thylstrup, Birgitte

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Institution: Hesse, Morten: Aarhus University, Centre for Alcohol and Drug Research, Copenhagen; Thylstrup, Birgitte: Aarhus University, Centre for Alcohol and Drug Research, Copenhagen

Language: English

Abstract: Objective: This study intended to test the effectiveness of the Kessler-6 to identify severe symptoms of mental disorders among outpatients undergoing treatment for substance use disorders. Methods: Patients (N = 135) were administered the Mini International Neuropsychiatric Interview 5.0, the Addiction Severity Index drug and alcohol items, and the Kessler-6. Six months later, patients were reinterviewed and administered the Kessler-6 and the Addiction Severity Index drug and alcohol items again (follow-up rate: 74%). Results: The Kessler-6 was associated with the presence of anxiety, major depression, and dysthymia. In multivariate analysis controlling for gender, age, drug use, alcohol use, and attention deficit/hyperactivity disorder, patients with any anxiety or mood disorder scored 6.93 points higher on the Kessler-6 compared to patients without such disorders, corresponding to 1.06 standard deviations. Screening properties were not satisfactory, primarily because of the high prevalence of mental disorders in this sample. The Kessler-6 was moderately correlated over 6 months (r = .52, p < .0001) and predicted continuous drug use after controlling for age, gender, and wave 1 drug use (partial r = .20, p = .048). Conclusions: For research purposes, the Kessler-6 may be used as a valid indicator of mental disorder in clinical samples of patients with substance use disorders. For clinical use, it is likely to identify patients with severe symptoms who are at high risk for poor response to treatment. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse
*Mental Disorders
*Screening Tests
*Test Reliability
*Test Validity
Comorbidity
Factor Structure
Psychiatric Symptoms

Source: PsycINFO

31. Identifying need for mental health services in substance abuse clients.

Citation: Journal of Dual Diagnosis, July 2012, vol./is. 8/3(218-228), 1550-4263;1550-4271 (Jul 2012)

Author(s): Mericle, Amy A; Martin, Cherie; Carise, Deni; Love, Meghan

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Institution: Mericle, Amy A.: Treatment Research Institute, Philadelphia, PA; Martin, Cherie: Federal Correctional Institution Beckley, Beaver, WV; Carise, Deni: Phoenix House, New York, NY; Love, Meghan: Treatment Research Institute, Philadelphia, PA

Language: English
Abstract: Objective: Counselor detection of co-occurring disorders is critical to ensuring that clients with mental disorders entering substance abuse treatment receive appropriate care. This study sought to (a) examine correspondence between client-reported psychiatric symptoms and client and counselor ratings of need for mental health treatment and (b) explore client- and program-level characteristics associated with client and counselor underrating. Methods: Psychiatric symptoms and client and counselor ratings of need for mental health services were collected using the Addiction Severity Index (ASI) among 3,972 clients entering outpatient substance abuse treatment at 30 treatment programs across the U.S. Kappa statistics were used to determine level of agreement between client-reported symptoms and client and counselor ratings of need for mental health treatment. Multilevel modeling was used to examine characteristics associated with underrating. Results: While agreement between symptoms and ratings of need for mental health treatment was fairly high (kappas = .62-.73), there was a substantial amount of underrating. Approximately 54% (n = 2,128) of clients had at least some psychiatric problems based on symptoms reported in the ASI, and 30% (n = 630) of these clients underrated their need for mental health services. Counselors also underrated need for mental health services in 32% (n = 691) of clients who reported psychiatric problems, even though 36% of them (250 of 691) indicated that obtaining treatment for mental health problems was important to them. Two factors emerged from the multivariate model for both client and counselor underrating of need for mental health services. Clients with psychiatric problems and a drug disorder were more likely than clients without a drug disorder (OR = 1.30, p < .05) to underrate their need for mental health services (as were counselors), and clients with psychiatric problems who were assessed at programs that were licensed by an outside agency were less likely (OR = 0.59, p < .01) to underrate their need for mental health services (as were counselors). Conclusions: Many clients entering substance abuse treatment also need mental health services, but this need may go unrecognized. It is imperative that counselors receive the training, supervision, and support necessary to appropriately identify mental disorders and help their clients access needed care. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Conference Information: Conference on Integrating Services for Co-Occurring Conditions. Mar, 2009. Bethesda. MD, US. An earlier version of this article was presented at the aforementioned conference.

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: * Clients
* Drug Abuse
* Mental Health Services
* Rating
* Comorbidity
* Counselors
* Psychiatric Symptoms

Source: PsycINFO

32. Cognitive deficits in schizophrenia and alcoholism: A review of the evidence and findings on the effects of treatment on cognitive functioning in patients with dual diagnoses.

Citation: Journal of Dual Diagnosis, July 2012, vol./is. 8/3(205-217), 1550-4263;1550-4271 (Jul 2012)

Author(s): Ralevski, Elizabeth; Gianoli, Mayumi O; Russo, Melanie; Dwan, Rita; Radhakrishnan, Rajiv

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Objective: Although cognitive deficits have been carefully studied in both schizophrenia disorders and alcohol use disorders, comparatively little is known about cognitive deficits in patients with dual diagnoses of schizophrenia and alcohol use disorders. The main objectives of this article are (a) to review the literature on cognitive functioning in patients with dual diagnoses of schizophrenia and alcohol use disorders, and (b) to summarize the studies that have examined the effects of treatments on cognitive functioning in patients with these dual diagnoses. Methods: We identified and reviewed 10 studies that examined cognitive functioning in patients with schizophrenia and alcohol use disorders. We also identified and reviewed three studies that reported on treatments for cognitive deficits in patients with dual diagnoses of schizophrenia and alcohol use disorders. Results: Overall, patients with dual diagnoses of schizophrenia and alcohol use disorders were more cognitively impaired than those with a single diagnosis of schizophrenia or alcohol use disorders. The literature on the effects of treatment on cognitive functioning in patients with dual diagnoses is very limited, and the results indicate no effects of pharmacological treatments on cognitive functioning despite improvement in psychotic symptoms and/or abstinence from alcohol. Conclusions: There is a need for more systemic and rigorous study of cognitive deficits and their treatments in patients with dual diagnoses of schizophrenia and alcohol use disorders. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcoholism  
*Cognitive Ability  
*Dual Diagnosis  
*Schizophrenia  
Comorbidity
Source: PsycINFO

33. Mirtazapine in comorbid major depression and alcohol dependence: An open-label trial.

Citation: Journal of Dual Diagnosis, July 2012, vol./is. 8/3(200-204), 1550-4263;1550-4271 (Jul 2012)

Author(s): Cornelius, Jack R; Douaihy, Antoine B; Clark, Duncan B; Chung, Tammy; Wood, D. Scott; Daley, Dennis
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Language: English
Abstract: Objective: This was a first pilot study evaluating the acute phase (8-week) efficacy of the antidepressant medication mirtazapine for the treatment of depressive symptoms and drinking of subjects with comorbid major depressive disorder and alcohol dependence (MDD/AD). We hypothesized that mirtazapine would demonstrate within-group efficacy for the treatment of both depressive symptoms and drinking in these subjects. Methods: We conducted a first open-label study of the second-generation antidepressant mirtazapine in 12 adult outpatient subjects with comorbid MDD/AD. The pharmacological profile of that medication is unique among antidepressants, unrelated to tricyclics or selective serotonin reuptake inhibitors. Results: Mirtazapine was well
tolerated in this treatment population. Self-reported depressive symptoms decreased from 31.8 to 8.3 on the Beck Depression Inventory (BDI), a 74.0% decrease (p < .001), and drinking decreased from 33.9 to 13.3 drinks per week, a 60.8% decrease (p < .05). None of the subjects were employed full time at baseline, but 9 of the 12 (75%) were employed full time at the end of study. Conclusions: These preliminary findings suggest efficacy for mirtazapine for treating both the depressive symptoms and excessive alcohol use of comorbid major depressive disorder and alcohol dependence. Double-blind studies are warranted to further clarify the efficacy of mirtazapine in this population. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)


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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcoholism  *Antidepressant Drugs  *Comorbidity  *Drug Therapy  *Major Depression

Source: PsycINFO

34. Predicting alcohol use and drug use among consumers of community mental health programs.

Citation: Journal of Dual Diagnosis, July 2012, vol./is. 8/3(188-199), 1550-4263;1550-4271 (Jul 2012)

Author(s): Ecker, John; Aubry, Tim; Wasylchenki, Donald; Pettey, Donna; Krupa, Terry; Rush, Brian

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Language: English

Abstract: Objective: The current study evaluated the demographic, clinical, and social support and service use predictors of alcohol and drug use disorders among a population of consumers of community mental health programs. Methods: The methodology is a secondary analysis of data collected from two randomized controlled trials that were part of the Community Mental Health Evaluation Initiative completed in Ontario, Canada. Participants included an inner-city population of persons with severe and persistent mental illness who had experienced housing instability. Participants were either randomly selected to receive Assertive Community Treatment or Intensive Case Management (Toronto) or Intensive Case Management or Standard Community Care (Ottawa). Data were collected from consumers at three time points (baseline, 9 months, and 18 months), and prospective and cross-sectional predictors of alcohol use disorders and drug use disorders at 9- and 18-month follow-up were examined. There were 232 participants at baseline, 203 at 9 months, and 179 at 18 months. Results: Approximately 32% of consumers had problematic substance use at 9 months and 28% of consumers had problematic substance use at 18 months. A sequential logistic regression analysis uncovered several significant predictors, which differed across the type of substance used and the two time points considered. The most salient and common predictors included nonadherence to medication and a decreased level of community functioning. Conclusions: Implications for treatment planning in community mental health programs
to better address concurrent mental illness and substance use disorders are discussed. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:**
- *Alcohol Abuse*
- *Community Mental Health*
- *Comorbidity*
- *Drug Abuse*
- Affective Disorders
- Demographic Characteristics
- Prediction
- Schizophrenia
- Social Support

**Source:** PsycINFO

35. Substance use motives and severe mental illness.

**Citation:** Journal of Dual Diagnosis, July 2012, vol./is. 8/3(171-179), 1550-4263;1550-4271 (Jul 2012)

**Author(s):** O’Hare, Thomas; Shen, Ce

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**Institution:** O’Hare, Thomas: Boston College, Graduate School of Social Work, Chestnut Hill, MA; Shen, Ce: Boston College, Graduate School of Social Work, Chestnut Hill, MA

**Language:** English

**Abstract:** Objective: The purpose of this study was to validate the construct validity of the Drinking Motives Questionnaire-Revised (DMQ-R) and to test the hypothesis that coping motives for using substances will vary directly with alcohol use, drug use, and substance use problems when controlling for psychiatric symptoms of severe mental illness. Methods: Data from this survey of 120 people with severe mental illness who drank in the previous six months were collected in face-to-face interviews as part of routine community mental health care by line clinical staff including psychiatric nurses, social workers, and case managers. Measures included the DMQR, the BASIS-24, and a quantity-frequency measure of alcohol use, frequency of drugs used, and substance use problems. Results: A three-factor version of the DMQ-R was well replicated, and linear regression revealed that coping motives varied positively and significantly with alcohol use and substance use problems. Logistic regression demonstrated that personal enhancement motives varied with drug use. Conclusions: Results suggest that although coping motives appear to be associated with more problematic substance use overall, coping and personal enhancement motives could be associated with the use of different substances. Future research should emphasize links among psychiatric symptoms, motives, and specific substances in order to identify potential links that might inform assessment and intervention with people who have severe mental illnesses. Limitations of the study include the lack of a structured diagnostic interview and modest cross-sectional sample size. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)
36. On silos, moieties, and health care reform.

Citation: Journal of Dual Diagnosis, July 2012, vol./is. 8/3(169-170), 1550-4263;1550-4271 (Jul 2012)

Author(s): Drake, Robert E; Green, Alan I

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Institution: Drake, Robert E.: Dartmouth Psychiatric Research Center, Geisel School of Medicine at Dartmouth, Lebanon, NH; Green, Alan I.: Department of Psychiatry, Geisel School of Medicine at Dartmouth, Lebanon, NH

Language: English

Abstract: Contributions to the Journal continue to develop and refine knowledge regarding the phenomenology, assessment, and treatment of dual diagnosis, broadly defined as co-occurring mental illnesses and addictive disorders. The current scientific model of human functioning is of course allosteric, meaning that a perturbation of one body system induces widespread responses in others, and holistic, meaning that environmental, social, and psychological mechanisms interact complexly with biology. This editorial briefly describes the articles in this issue of the Journal focused on several specific aspects of this complexity. (PsycINFO Database Record (c) 2013 APA, all rights reserved)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Addiction *Comorbidity *Dual Diagnosis *Mental Disorders *Health Care Reform

Source: PsycINFO

37. Medical students' comfort with pregnant women with substance-use disorders: A randomized educational study.

Citation: Academic Psychiatry, November 2012, vol./is. 36/6(457-460), 1042-9670;1545-7230 (Nov-Dec 2012)

Author(s): Albright, Brittany; Skipper, Betty; Riley, Shawne; Wilhelm, Peggy; Rayburn, William F

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Language: English

Abstract: Objective: The study objective was to determine whether medical students' attendance at a rehabilitation residence for pregnant women with substance-use disorders yielded changes in their attitudes and comfort levels in providing care to this population. Methods: This randomized educational trial involved 96 consecutive medical students during their obstetrics and gynecology clerkship. In addition to attending a half-day
prenatal clinic designed for women with substance-use disorders, every student was randomly assigned either to attend (Study group) or not to attend (Control group) a rehabilitation residence for pregnant women with substance-use disorders. The primary objective was to measure differences in responses to a confidential 12-question survey addressing comfort levels and attitudes, at the beginning and end of the clerkship. Results: Survey responses revealed improvements in students' comfort levels and attitudes toward pregnant women with substance-use disorders by attending the clinic alone or the clinic and residence. Those who attended the residence reported becoming more comfortable in talking with patients about adverse effects from substance abuse, more understanding of "street" terms, and stronger belief that patients will disclose their substance use to providers. Residents expressed more openly their hardships and barriers while trying to set therapeutic goals. Conclusions: Medical students became more comfortable and insightful about pregnant women with substance-use disorders after attending a rehabilitation residence in addition to a prenatal clinic dedicated to this population.


Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Abuse *Medical Students *Pregnancy *Rehabilitation
Source: PsycINFO


Original Title: Dereglements emotionnels chez les consommateurs de substances psychoactives: Une revue de la litterature.

Citation: Psychologie Francaise, December 2012, vol./is. 57/4(251-275), 0033-2984 (Dec 2012)

Author(s): Gandolphe, M.-C; Nandrino, J.-L

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Language: French

Abstract: Since the first assumptions suggesting emotional deficits in psychoactive substance consumers, some other concepts referring to emotional awareness, emotion regulation or theory of mind complete the first approach studying alexithymia. The first investigation methods used were self-report questionnaire and those actually are associated to direct and experimental measures. Given the heterogeneity of emotional concepts studied and of emotion assessment methods, this paper aims at reviewing existing empirical studies showing the existence of a deficit in emotional information processing in substance consumers. These studies depict a difficulty in comprehending, recognizing and discriminating their own emotional states and those of others, and a deficit of emotional experience. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Published by Elsevier Masson SAS on behalf of Societe francaise de psychologie.; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alexithymia
39. HPV high risk and protective behaviors: The effects of religious affiliation.

Citation: Journal of Religion and Health, December 2012, vol./is. 51/4(1325-1336), 0022-4197;1573-6571 (Dec 2012)

Author(s): Wigfall, Lisa; Rawls, Anita; Sebastian, Neethu; Messersmith, Amy; Pirisi-Creek, Lucia; Spiryda, Lisa; Williams, Edith Marie; Creek, Kim; Glover, Saundra H

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Language: English

Abstract: The majority of Americans identify themselves as belonging to some religious group. There is a mixed body of literature on whether or not religious affiliation has an influence on engaging in risky behaviors among young adults attending college. This study examined associations between religious affiliation, risky sexual practices, substance use, and family structure among a sample of predominantly white college females attending a southeastern university. Given the high risk of acquiring genital human papillomavirus infection as a result of high risk sexual practices, gaining a better understanding of how religious affiliation can be used to promote healthy sexual behaviors is warranted. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal


Source: PsycINFO

40. Religion and addiction.

Citation: Journal of Religion and Health, December 2012, vol./is. 51/4(1165-1171), 0022-4197;1573-6571 (Dec 2012)

Author(s): Gostecnik, Christian; Cvetek, Mateja; Poljak, Sasa; Repic, Tanja; Cvetek, Robert

Correspondence Address: Gostecnik, Christian, christian.gostecnik@guest.arnes.si

Institution: Gostecnik, Christian: Faculty of Theology, University of Ljubljana, Ljubljana; Cvetek, Mateja: Faculty of Theology, University of Ljubljana, Ljubljana; Poljak, Sasa: Faculty of
Theology, University of Ljubljana, Ljubljana; Repic, Tanja: Faculty of Theology, University of Ljubljana, Ljubljana; Cvetek, Robert: Faculty of Theology, University of Ljubljana, Ljubljana

Language: English

Abstract: Religion with its rituals can become an object of addiction, especially when a child while growing up experiences neglect and abuse. It is also very common that such individuals transfer their feelings of anger, rage and sometimes even true hatred to God. Then God becomes the substitute for their displaced vengeance (upon those who abused them as children). (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Springer Science+Business Media, LLC; YEAR: 2010

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Addiction
*Child Abuse
*Child Neglect
*God Concepts
*Religious Practices

Source: PsycINFO


Citation: Journal of Religion and Health, December 2012, vol./is. 51/4(1152-1164), 0022-4197;1573-6571 (Dec 2012)

Author(s): Timmons, Shirley M

Correspondence Address: Timmons, Shirley M., stimmon@clemson.edu

Institution: Timmons, Shirley M.: Clemson University, Clemson, SC

Language: English

Abstract: This article reports the development of a substantive theory to explain an evangelical Christian-based process of recovery from addiction. Faith-based, 12-step, mutual aid programs can improve drug abstinence by offering: (a) an intervention option alone and/or in conjunction with secular programs and (b) an opportunity for religious involvement. Although literature on religion, spirituality, and addiction is voluminous, traditional 12-step programs fail to explain the mechanism that underpins the process of Christian-based recovery (CR). This pilot study used grounded theory to explore and describe the essence of recovery of 10 former crack cocaine-addicted persons voluntarily enrolled in a CR program. Data were collected from in-depth interviews during 4 months of 2008. Audiotapes were transcribed verbatim, and the constant comparative method was used to analyze data resulting in the basic social process theory, understanding God as sponsor. The theory was determined through writing theoretical memos that generated key elements that allow persons to recover: acknowledging God-centered crises, communicating with God, and planning for the future. Findings from this preliminary study identifies important factors that can help persons in recovery to sustain sobriety and program administrators to benefit from theory that guides the development of evidence-based addiction interventions. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Springer Science+Business Media, LLC; YEAR: 2010

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Christianity
*Drug Rehabilitation
*God Concepts
*Recovery (Disorders)
*Faith
Drug Addiction
Theories
42. Assessment of pain and analgesic use in African American cancer patients: Factors related to adherence to analgesics.

Citation: Journal of Immigrant and Minority Health, December 2012, vol./is. 14/6(1045-1051), 1557-1912;1573-3629 (Dec 2012)

Author(s): Rhee, Young O; Kim, Eugenia; Kim, Bryant

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Language: English

Abstract: This study describes pain experience, analgesic use and barriers to pain control in African American cancer patients (N = 116). The overall adherence rate of analgesics was 46%. Constipation and nausea were the most commonly cited side effects of analgesics. Eighty-seven percent of patients reported concern about addiction to analgesics. Patients who believed their doctor needed to focus on curing illness rather than on controlling pain tended to comply with analgesic prescriptions (r = 0.20, p < 0.05). Patients with concerns that analgesics may cause confusion were less likely to take any type of analgesics (r = -0.16, p < 0.05). The study confirms that a patient's perceived barriers influence their decision to take analgesics, and also suggests that African American cancer patients may benefit from education that prevents misconceptions about analgesic use. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Analgesic Drugs *Neoplasms *Pain *Treatment Barriers Blacks Constipation Nausea

43. Review of Computer crime, investigation, and the law.

Citation: Police Practice & Research: An International Journal, December 2012, vol./is. 13/6(539-540), 1561-4263;1477-271X (Dec 2012)

Author(s): Colaguori, Claudio

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Institution: Colaguori, Claudio: York University, Toronto, ON

Language: English

Abstract: Reviews the book, Computer Crime, Investigation, and the Law by Chuck Easttom and Jeff Taylor (2011). This book is devoted specifically to criminal activity, primarily from an US legal perspective. Although the authors are not social scientists, they have combined experience that authorizes them as experts. The book is clearly written and well organized with clear chapter themes that are useful and thorough. The first-hand knowledge of the two experts shines through clearly in their coverage of the numerous issues that pertain to both how people can become victims of computer crime and how it poses special challenges to law enforcement and other agencies of the public trust. The breadth and depth of information is very impressive. Eighteen chapters in five main parts cover just about everything a non-specialist would want to know about the intricacies of
computer information storage and retrieval to the various state laws that govern legal proceedings on computer criminality. The book does not deal with other computer-related social issues such as internet addiction, gaming or the nature of problematic content such as graphic pornography and online gambling. The expertise and rigorous coverage of such issues in Computer Crime, Investigation, and the Law makes it an essential resource in this regard. As a practical guide for law enforcement, investigators and students studying in the field of computer security, the book has much to offer and recommend it on that basis alone. (PsycINFO Database Record (c) 2013 APA, all rights reserved)

44. Substance misuse and the child welfare system: A rejoinder.

Citation: Social Work Research, June 2012, vol./is. 36/2(88), 1070-5309 (Jun 2012)
Author(s): Howard, Matthew O
Correspondence Address: Howard, Matthew O.: School of Social Work, University of North Carolina at Chapel Hill, Chapel Hill, NC, US, 27599, mohoward@email.unc.edu
Institution: Howard, Matthew O.: School of Social Work, University of North Carolina at Chapel Hill, Chapel Hill, NC
Language: English
Abstract: Comments on the editorial by Dorian E. Traube (see record 2012-30198-001) on the role social work can and should play in improving the identification and treatment of substance-misusing recipients of child welfare services and their family members. (PsycINFO Database Record (c) 2013 APA, all rights reserved)

45. The missing link to child safety, permanency, and well-being: Addressing substance misuse in child welfare.

Citation: Social Work Research, June 2012, vol./is. 36/2(83-87), 1070-5309 (Jun 2012)
Author(s): Traube, Dorian E
Correspondence Address: Traube, Dorian E.: School of Social Work, Univeisity of Southern California, 669 West 34th Street, MC 0411, Los Angeles, CA, US, 90089, traube@usc.edu
Institution: Traube, Dorian E.: School of Social Work, Univeisity of Southern California, Los Angeles, CA
Language: English
Abstract: Presents an overview of the current state of the field of substance misuse and child welfare, followed by recommendations for epidemiological and social work services
research inquiry. The field of social work can and should take the lead in developing research on the child welfare system as an untapped resource with the potential to be a gateway to and a platform for substance abuse treatment and prevention services. As a gateway to preventive mental health and substance abuse services for many families, formal substance abuse services can be part of the child welfare safety and permanency intervention, allowing for better coordination of substance abuse and child welfare services. Likewise, there is the potential for mounting prevention services directly onto the platform of the child welfare services (CWS) system. This approach has been successfully implemented with evidence-based prevention programs to address externalizing behaviors in teenagers. One of the most novel aspects of approaching substance abuse treatment and prevention through child welfare is that it allows social work researchers to address primary, secondary, and tertiary levels of prevention simultaneously. For child welfare-involved youths, the aim would be to use evidence-based primary prevention measures to impede the development of substance misuse. (PsycINFO Database Record (c) 2013 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Child Welfare
*Drug Abuse
*Drug Abuse Prevention
*Safety
*Social Casework
Intervention
Well Being

Source: PsycINFO
Full Text: Available from Oxford University Press in Social Work Research

46. Evaluation of online training for the provision of opioid substitution treatment by community pharmacists in New Zealand.

Citation: Drug and Alcohol Review, November 2012, vol./is. 31/7(903-910), 0959-5236;1465-3362 (Nov 2012)
Author(s): Walters, Carina; Raymont, Antony; Galea, Susanna; Wheeler, Amanda
Correspondence Address: Wheeler, Amanda: Griffith Health Institute, Griffith University, Brisbane, QLD, Australia, 4131, a.wheeler@griffith.edu.au
Institution: Walters, Carina: Community Alcohol and Drug Services (CADS), Waitemata District Health Board, Auckland; Raymont, Antony: Clinical Research and Resource Centre, Waitemata District Health Board, Auckland; Galea, Susanna: Community Alcohol and Drug Services (CADS), Waitemata District Health Board, Auckland; Wheeler, Amanda: Griffith Health Institute, Griffith University, Brisbane, QLD
Language: English
Abstract: Introduction and Aims: The role of community pharmacists in the provision of opioid substitution treatment (OST) is pivotal and integral to addiction treatment. An online training program for pharmacists in OST management was piloted in New Zealand in 2010, following recognition of the difficulty in recruitment and retention of community pharmacists to provide OST services. Our aim was to evaluate the OST online training that was made available for any community pharmacist in New Zealand and to establish the feasibility and acceptability of this format of training for community pharmacists. The evaluation explored participants' attitudes, skills and knowledge both pre- and post-training in OST. Design and Methods: All pharmacists registering to participate in the training program were asked to complete an evaluation questionnaire immediately before (pre) and immediately after (post) completing the training. Participants were also invited to participate in a brief 10 min structured telephone interview about their training experience. Results: In the first 4 months 190 pharmacists commenced the training; 101 completed both evaluations. Improvements in the confidence and skills of pharmacists were demonstrated through both the quantitative and qualitative analyses. Statistically
significant changes in attitudes were also demonstrated. Overall the OST training was well received and the online format was feasible and highly acceptable. Discussion and Conclusion: Online training is an appropriate and economical method of improving pharmacists' clinical skills with respect to this client group, and has the potential to reach a wider audience of pharmacists. Further research is required to investigate OST client experiences in community pharmacy. (PsycINFO Database Record (c) 2013 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 Therapy
*Medical Education
*Opiates
*Pharmacists
Distance Education
Methadone
Source: PsycINFO
Full Text: Available from Wiley in Drug and Alcohol Review

47. Factors associated with difficulty accessing crack cocaine pipes in a Canadian setting.

Citation: Drug and Alcohol Review, November 2012, vol./is. 31/7(890-896), 0959-5236;1465-3362 (Nov 2012)
Author(s): Ti, Lianping; Buxton, Jane; Wood, Evan; Shannon, Kate; Zhang, Ruth; Montaner, Julio; Kerr, Thomas
Correspondence Address: Kerr, Thomas: BC Centre for Excellence in HIV/AIDS, 608-1081 Burrard Street, Vancouver, BC, Canada, V6Z 1Y6, uhri-tk@cfenet.ubc.ca
Institution: Ti, Lianping: Faculty of Health Sciences, Simon Fraser University, Burnaby, BC; Buxton, Jane: School of Population and Public Health, University of British Columbia, Vancouver, BC; Wood, Evan: British Columbia Centre for Excellence in HIV/AIDS, St. Paul's Hospital, Vancouver, BC; Shannon, Kate: British Columbia Centre for Excellence in HIV/AIDS, St. Paul's Hospital, Vancouver, BC; Zhang, Ruth: Provincial Health Services Authority, Vancouver, BC; Montaner, Julio: British Columbia Centre for Excellence in HIV/AIDS, St. Paul's Hospital, Vancouver, BC; Kerr, Thomas: British Columbia Centre for Excellence in HIV/AIDS, St. Paul's Hospital, Vancouver, BC
Language: English
Abstract: Introduction and Aims: Crack cocaine pipe sharing is associated with various health-related harms, including hepatitis C transmission. Although difficulty accessing crack pipes has been found to predict pipe sharing, little is known about the factors that limit pipe access in settings where pipes are provided at no cost, albeit in limited capacity. Therefore, we investigated crack pipe access among people who use drugs in Vancouver, Canada. Design and Methods: Data were collected through two Canadian prospective cohort studies. Generalised estimating equations with logit link for binary outcomes were used to identify factors associated with difficulty accessing crack pipes. Results: Among 914 participants who reported using crack cocaine, 33% reported difficulty accessing crack pipes. In multivariate analyses, factors independently associated with difficulty accessing crack pipes included: sex work involvement [adjusted odds ratio (AOR) = 1.57; 95% confidence interval (CI): 1.03-2.39], having shared a crack pipe (AOR = 1.69; 95% CI: 1.32-2.16), police presence where one buys/uses drugs (AOR = 1.47; 95% CI: 1.10-1.95), difficulty accessing services (AOR = 1.74; 95% CI: 1.31-2.32) and health problems associated with crack use (AOR = 1.37; 95% CI: 1.04-1.79). Reasons given for difficulty accessing pipes included sources being closed (48.2%) and no one around selling pipes (18.1%). Discussion and Conclusions: A substantial proportion of people who smoke crack cocaine report difficulty accessing crack pipes in a setting where pipes are available at no cost but in limited quantity. These findings indicate the need for enhanced efforts to distribute crack pipes and address barriers to pipe access. (PsycINFO Database Record (c) 2013 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: *Crack Cocaine
*Drug Abuse
*Harm Reduction
Source: PsycINFO
Full Text: Available from Wiley in Drug and Alcohol Review

48. Alcohol, tobacco and illicit drug use among six culturally diverse communities in Sydney.

Citation: Drug and Alcohol Review, November 2012, vol./is. 31/7(881-889), 0959-5236;1465-3362 (Nov 2012)
Author(s): Donato-Hunt, Connie; Munot, Sonali; Copeland, Jan
Correspondence Address: Donato-Hunt, Connie: Drug and Alcohol Multicultural Education Centre, PO Box 2314, Strawberry Hills, NSW, Australia, 2012, research@damec.org.au
Institution: Donato-Hunt, Connie: Drug and Alcohol Multicultural Education Centre, Sydney, NSW; Munot, Sonali: Drug and Alcohol Multicultural Education Centre, Sydney, NSW; Copeland, Jan: Cannabis Prevention and Information Centre, University of New South Wales, Sydney, NSW
Language: English
Abstract: Introduction and Aims: A survey was conducted in 2004-2005 to investigate the risk of drug-related harm among Chinese, Vietnamese, Italian, Pasifika, Arabic-speaking and Spanish-speaking communities in Sydney. Design and Methods: A self-completion questionnaire, available in six languages, was distributed by bilingual field staff. A representative multistage clustered sampling design was used. Comparisons were made with the New South Wales general population using the results from the 2004 National Drug Strategy Household Survey. Results: The obtained sample was 2212 respondents; 50% completed the questionnaire in English. Daily tobacco use was higher than the general population among Vietnamese men (30%), Italian men (22%) and Pasifika men and women (25%). Reported use of alcohol and other drugs was lower than the general population in all six surveyed communities. Of the six communities, Pasifika had the highest rate of short-term risky drinking (22%). Discussion and Conclusions: Smoking cessation programs should prioritise communities with higher or equal rates of daily smokers compared with the wider New South Wales population. Focus areas vary between the communities, and include increasing help seeking and improving quitting success rates. Short-term risky drinking was not as prevalent among the surveyed communities; however, results suggest a need for prevention targeting Pasifika communities. Understanding the prevalence of substance use among culturally and linguistically diverse communities provides a crucial foundational component in developing culturally sensitive prevention and treatment programs. These results demonstrate the need for programs to be tailored to the needs and contexts of particular communities, rather than treating those from diverse backgrounds as one homogenous group. (PsycINFO Database Record (c) 2013 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: *Alcohol Abuse
*Cross Cultural Differences
*Drug Abuse
*Tobacco Smoking
Source: PsycINFO
Full Text: Available from Wiley in Drug and Alcohol Review

49. Sex differences in how a low sensitivity to alcohol relates to later heavy drinking.
Intervention and Aims: A low level of response (LR), or low sensitivity, to alcohol is a genetically influenced characteristic that predicts future heavy drinking and alcohol problems. While previous analyses of how LR relates to heavier drinking reported the process is similar in males and females, some potential sex differences have been identified. This difference is further explored in these analyses. Design and Methods: Prospective structural equation models (SEMs) were evaluated for 183 young adult females and 162 males, none of Asian background, from the Collaborative Study on the Genetics of Alcoholism. Invariance analyses and SEM evaluations by sex were used to compare across females and males for these primarily Caucasian (75%), non-Asian young (mean age 19) subjects. Results: The prospective SEM for the full set of 345 subjects had good fit characteristics and explained 37% of the variance. While the initial invariance analyses identified few sex differences, comparisons of correlations and direct evaluations of path coefficients across males and females indicated that only females showed a link between a low LR and future alcohol problems that was partially mediated by more positive alcohol expectancies and drinking to cope. These sex differences were reflected in the different structures of the SEM results for female versus male subjects. Discussion and Conclusions: These prospective results indicate that there might be some important sex differences regarding how a lower LR relates to alcohol outcomes that should be considered in protocols focusing on preventing the impact of LR on future drinking problems. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)
Abstract:
Aim: To identify potential differences between children of alcoholics (COAs) and controls in their health-related lifestyle, mental and physical health. Methods: The recruitment of COAs took place in inpatient and outpatient treatment and rehabilitation units. Controls were recruited in elementary and high schools. 57 COAs (72% response rate) and 84 controls (88% response rate) aged between 12 and 18 years completed a postal questionnaire about their health-related lifestyle, and mental and physical health. Results: Bivariate analysis showed that COAs' families have higher unemployment rates and lower economic status (P = 0.000). COAs reported poorer school performance (P = 0.000), spending more time in sedentary (television: P = 0.000, Internet: P = 0.014, music: P = 0.040) and less time in physical activities (P = 0.048), having poorer eating habits (fruits and vegetables: P = 0.001, sweets: P = 0.001, fast food: P = 0.000, soft drinks: P = 0.004), a higher substance use (cigarettes: P = 0.030; marijuana: P = 0.564, heavy drinking: P = 0.050) and more mental health difficulties (emotional symptoms: P = 0.015, conduct problems: P = 0.012, suicidal tendencies: P = 0.007, mental disorder: P = 0.040). Among COAs, girls reported more emotional and somatic symptoms compared to boys (P = 0.020 and P = 0.047, respectively). Multivariate analysis showed that after controlling for socioeconomic status, significant mental health and health-related lifestyle inequalities between COAs and controls persist. Conclusion: Our findings suggest that COAs have a less healthy lifestyle and more mental health difficulties above and beyond the poorer economic environment they live in. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)
Objective: To validate the Prenatal Risk Overview (PRO) drug use questions against a structured diagnostic interview among pregnant women. Design and Sample: Prenatal care patients were administered the PRO at intake and then asked to consent to a research diagnostic interview. Of 1,367 women asked to participate, 1,274 consented and 745 completed the study. Measures: Three drug use items comprised one of 13 PRO psychosocial risk domains. The Structured Clinical Interview for DSM-IV (SCID) was used as the validation instrument. To assess criterion validity, the Moderate/High and High Risk classifications were cross-tabulated with SCID Drug Use Disorder diagnoses. Results: In response to the PRO, almost one third of participants (29.4%) reported drug use during the 12 months pre-pregnancy awareness and 11.0% reported use post-pregnancy awareness; 7.0% met SCID diagnostic criteria for Drug Abuse, Drug Dependence, or both, primarily for marijuana use. Drug Use Disorder sensitivity and specificity rates for the PRO Moderate/High Risk classifications were 88.5% and 74.3%, respectively, and for High Risk only, 78.8% and 87.3%. Conclusion: The PRO yielded substantial self-reporting of drug use before and after pregnancy awareness with high sensitivity and specificity for detecting Drug Use Disorders. PRO results can inform decisions about appropriate clinical responses. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Abuse
*Pregnancy
*Psychometrics
*Test Reliability
*Test Validity
Measurement
Prenatal Diagnosis
Risk Factors
Source: PsycINFO
Full Text: Available from Wiley in Public Health Nursing

52. Prescription drug abuse as a public health problem in Ohio: A case report.

Citation: Public Health Nursing, November 2012, vol./is. 29/6(553-562), 0737-1209;1525-1446 (Nov 2012)
Author(s): Winstanley, Erin L; Gay, Joe; Roberts, Lisa; Moseley, Judi; Hall, Orman; Beeghly, B. Christine; Winhusen, Theresa; Somoza, Eugene
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Institution: Winstanley, Erin L.: Department of Psychiatry and Behavioral Neuroscience, University of Cincinnati College of Medicine, Cincinnati, OH; Gay, Joe: Health Recovery Services Inc., Athens, OH; Roberts, Lisa: Portsmouth City Health Department, Portsmouth, OH; Moseley, Judi: Ohio Department of Health, Pickerington, OH; Hall, Orman: Ohio Department of Alcohol and Drug Addiction Services, Columbus, OH; Beeghly, B. Christine: Ohio Department of Health, Pickerington, OH; Winhusen, Theresa: Department of Psychiatry and Behavioral Neuroscience, University of Cincinnati College of Medicine, Cincinnati, OH; Somoza, Eugene: Department of Psychiatry and Behavioral Neuroscience, University of Cincinnati College of Medicine, Cincinnati, OH
Language: English
Abstract: Prescription drug overdose is the leading cause of injury death in Ohio, as well as in 16 other states. Responding to the prescription drug epidemic is particularly challenging given the fragmentation of the health care system and that the consequences of addiction span across systems that have not historically collaborated. This case study reports on
how Ohio is responding to the prescription drug epidemic by developing cross-system collaboration from local public health nurses to the Governor's office. In summary, legal and regulatory policies can be implemented relatively quickly whereas changing the substance abuse treatment infrastructure requires significant financial investments. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Abuse
*Prescription Drugs
*Public Health
Health Care Services
Source: PsycINFO
Full Text: Available from Wiley in Public Health Nursing

53. Preoccupation, gambling and the DSM-V.

Citation: International Gambling Studies, December 2012, vol./is. 12/3(421-422), 1445-9795;1479-4276 (Dec 2012)
Author(s): Rodda, Simone; Lubman, Dan I
Correspondence Address: Rodda, Simone, simoner@turningpoint.org.au
Institution: Rodda, Simone: Turning Point Alcohol and Drug Centre, Eastern Health, Monash University, VIC; Lubman, Dan I.: Turning Point Alcohol and Drug Centre, Eastern Health, Monash University, VIC
Language: English
Abstract: in this article we discusses about the papers which have discussed proposed changes to the 5th edition of the Diagnostic and Statistical Manual for Mental Disorders (DSM) criteria for Pathological Gambling. The pathological gambling criteria were aligned to those proposed for psychoactive substance dependence. While the preoccupation criterion was discussed during development of the DSM-III-R substance dependence criteria, ultimately this term was not included in the final version. This historical perspective raises questions around the validity and utility of the preoccupation criterion for pathological gambling, with limited research conducted that informs our thinking. Much effort has gone into having pathological gambling recognized as a mental health disorder over the past 30 years. It is timely to re-examine diagnostic criteria and conduct research to improve our understanding of both short and long-term harms. This should include examining how duration and intensity of time spent gambling, and its associated recovery time, relate to the development and identification of pathological gambling. (PsycINFO Database Record (c) 2013 APA, all rights reserved)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Diagnostic and Statistical Manual
*Drug Abuse
*Pathological Gambling
*Psychodiagnosis
Source: PsycINFO

54. Neurological complications following bariatric surgery.

Citation: Arquivos de Neuro-Psiquiatria, September 2012, vol./is. 70/9(700-703), 0004-282X;1678-4227 (Sep 2012)
Author(s): Fragoso, Yara Dadalti; Alves-Leon, Soniza Vieira; de Carvalho Anacleto, Andrea; Bidin Brooks, Joseph Bruno; da Gama, Paulo Diniz; Gomes, Sidney; Magno Goncalves, Marcus Vinicius; Lin, Katia; Lopes, Josiane; Kaimen-Maciel, Damacio Ramon;
Malfetano, Fabiola Haschid; Martins, Gladys Lentz; de Oliveira, Francisco Tomaz Menezes; Oliveira, Leonardo Dornas; Schlindwein-Zanini, Rachel

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Language: English

Abstract: Objective: It was to report on Brazilian cases of neurological complications from bariatric surgery. The literature on the subject is scarce. Method: Cases attended by neurologists in eight different Brazilian cities were collected and described in the present study. Results: Twenty-six cases were collected in this study. Axonal polyneuropathy was the most frequent neurological complication, but cases of central demyelination, Wernicke syndrome, optical neuritis, radiculitis, meralgia paresthetica and compressive neuropathies were also identified. Twenty-one patients (80%) had partial or no recovery from the neurological signs and symptoms. Conclusion: Bariatric surgery, a procedure that is continuously increasing in popularity, is not free of potential neurological complications that should be clearly presented to the individual undergoing this type of surgery. Although a clear cause-effect relation cannot be established for the present cases, the cumulative literature on the subject makes it important to warn the patient of the potential risks of this procedure. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Neurology
*Postsurgical Complications
*Bariatric Surgery
 Neuropathy
 Wernicke's Syndrome
 Demyelination

Source: PsycINFO


Citation: Drugs: Education, Prevention & Policy, October 2012, vol./is. 19/5(426), 0968-7637;1465-3370 (Oct 2012)

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Institution: Butler, Shane: School of Social Work & Social Policy, Trinity College Dublin, Dublin
Language: English
Abstract: Reviews the book, Fixing Drugs: The Politics of Drug Prohibition by Sue Pryce (2012). The author's thesis is that prohibition has not merely failed but that it has been counterproductive, in that the unintended consequences of prohibition have added significantly to the economic, social and political problems associated with psychoactive drug use. She also explores the reluctance of national and international policy makers to face up to the evidence of this failure, arguing that: There is an uncomfortable similarity between the drug addict and those who support drug prohibition. Perhaps the strongest feature of the book is the clarity of its presentation. This is a book which would undoubtedly be useful for many undergraduate courses which deal with substance misuse and its societal management. (PsycINFO Database Record (c) 2013 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Abuse *Drug Laws *Drug Legalization *Drug Usage Drugs Politics
Source: PsycINFO

Citation: Drugs: Education, Prevention & Policy, October 2012, vol./is. 19/5(406-414), 0968-7637;1465-3370 (Oct 2012)
Author(s): Comiskey, Catherine M; Stapleton, Robert; Kelly, Paul A
Correspondence Address: Comiskey, Catherine M.: School of Nursing and Midwifery, Trinity College Dublin, 24 D'Olier St., Dublin, Ireland, 2, catharine.comiskey@tcd.ie
Institution: Comiskey, Catherine M.: School of Nursing and Midwifery, Trinity College Dublin, Dublin; Stapleton, Robert: Mathematics Department, National University of Ireland, Maynooth; Kelly, Paul A.: Department of Psychology, National University of Ireland, Maynooth
Language: English
Abstract: Aims: Research has shown that treatment for opiate use reduces crime, however the extent to which this is maintained is open to question. The objective of this study was to measure the relationship between crime committal rates and ongoing benzodiazepine and cocaine use by clients in opiate drug treatment programs. Methods: A national, prospective, longitudinal, multi-site drug treatment outcome study was conducted, 404 participants were recruited from inpatient and outpatient settings and 97% were located at 3 years. Drug use and crimes committed were ascertained from the Maudsley Addiction Profile of Marsden et al. [Marsden, J., Gossop, M., Stewart, D., Best, D., Farrell, M., Lehmann, P., Strang, J. (1998). The Maudsley Addiction Profile (MAP): A brief instrument for assessing treatment outcome. Addiction, 93, 1857-1867]. Findings: Analysis revealed that of those who had not committed an acquisitive crime at intake, those who used cocaine regularly at 1-year were 6.5 times more likely and those that used benzodiazepines regularly were eight times more likely to commit an acquisitive crime at 1-year. Of those who had committed an acquisitive crime at intake, those who used heroin regularly at 1-year were nine times more likely to commit acquisitive crime at 1-year than those who did not use heroin regularly at 1 year. Conclusions: Treatment must place greater emphasis on reducing substitute drug use if opiate treatment is to effectively sustain crime reduction. (PsycINFO Database Record (c) 2013 APA, all rights reserved)

**Citation:** Drugs: Education, Prevention & Policy, October 2012, vol./is. 19/5(397-405), 0968-7637;1465-3370 (Oct 2012)

**Author(s):** van der Sar, R; Odegard, E; Rise, J; Brouwers, E. P. M; van de Goor, L. A. M; Garretsen, H. F. L

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**Language:** English

**Abstract:** Aim: This study aims to explore differences between Dutch and Norwegian adults in the acceptance of illicit drug use in relation to the normalization thesis. Methods: Data were collected in November 2008. In total, 2150 Norwegian and 5616 Dutch respondents were included and the samples were weighted. The level of acceptance was assessed by measuring beliefs and opinions among Dutch and Norwegian people of 16 years and older and among different user groups in the Netherlands and Norway. t-Tests, 2-tests and multiple regression analyses were conducted to examine the differences between both countries. Findings: Norwegian and Dutch respondents were somewhat reserved concerning the acceptance of illicit drug use. However, the acceptance of illicit drugs among Dutch respondents was significantly higher compared to Norwegian respondents. Regarding different user groups, even non-users in both countries showed a significant difference, with Dutch non-users accepting illicit drug use to a larger extent than Norwegians. Conclusions: According to the findings of this study, the acceptance of illicit drug use seems to be larger in the Dutch society than in the Norwegian one. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

58. Lessening homelessness among persons with mental illness: A comparison of five randomized treatment trials.

**Citation:** Asian Journal of Psychiatry, October 2009, vol./is. 2/3(100-105), 1876-2018;1876-2026 (Oct 2009)

**Author(s):** van der Sar, R; Odegard, E; Rise, J; Brouwers, E. P. M; van de Goor, L. A. M; Garretsen, H. F. L

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**Language:** English

**Abstract:** Aim: This study aims to explore differences between Dutch and Norwegian adults in the acceptance of illicit drug use in relation to the normalization thesis. Methods: Data were collected in November 2008. In total, 2150 Norwegian and 5616 Dutch respondents were included and the samples were weighted. The level of acceptance was assessed by measuring beliefs and opinions among Dutch and Norwegian people of 16 years and older and among different user groups in the Netherlands and Norway. t-Tests, 2-tests and multiple regression analyses were conducted to examine the differences between both countries. Findings: Norwegian and Dutch respondents were somewhat reserved concerning the acceptance of illicit drug use. However, the acceptance of illicit drugs among Dutch respondents was significantly higher compared to Norwegian respondents. Regarding different user groups, even non-users in both countries showed a significant difference, with Dutch non-users accepting illicit drug use to a larger extent than Norwegians. Conclusions: According to the findings of this study, the acceptance of illicit drug use seems to be larger in the Dutch society than in the Norwegian one. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)
We evaluate the influence of housing, services, and individual characteristics on housing loss among formerly homeless mentally ill persons who participated in a five-site (4-city) study in the U.S. Housing and service availability were manipulated within randomized experimental designs and substance abuse and other covariates were measured with a common protocol. Findings indicate that housing availability was the primary predictor of subsequent ability to avoid homelessness, while enhanced services reduced the risk of homelessness if housing was also available. Substance abuse increased the risk of housing loss in some conditions in some projects, but specific findings differed between projects and with respect to time spent in shelters and on the streets. We identify implications for research on homeless persons with mental illness that spans different national and local contexts and involves diverse ethnic groups. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)
CRAFFT/CARLOS instrument seems to have the appropriate characteristics for that end. The objective of this study was to adapt the instrument from a linguistic point of view with a sample of 432 adolescents between the ages of 14 and 18, and also to calibrate it using the Rasch model. The results show that the Spanish version of the CRAFFT/CARLOS satisfies the usual requirements for this kind of instrument. Thus, it should be used in the different settings where support and medical or psychological attention is offered to adolescents. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcoholism
*Drug Abuse
*Foreign Language Translation
*Statistical Validity
*Underage Drinking
At Risk Populations
Measurement

Source: PsycINFO

60. Substance abuse and addiction among divergent ethnic groups.

Citation: Cultural variations in psychopathology: From research to practice., 2013(206-218) (2013)
Author(s): Assion, Hans-Jorg; Koch, Eckhardt
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Institution: Assion, Hans-Jorg: LWL-Hospital, Dortmund; Koch, Eckhardt: Vitos Hospital for Psychiatry and Psychotherapy, Marburg
Language: English
Abstract: (from the chapter) Substance use disorder (SUD) remains one of the most common and significant problems around the world. Irrespective of the cultural background, addictive behavior is of high prevalence, causing escalating medical and economic costs. The increasing mobility of humans with intense interchange of nations will further contribute to the world-wide growing use of psychotropic drugs. In contrast to the emerging general research on substance use disorders, the scientific database on addictive behavior considering cultural aspects is rather limited. Nationwide data (e.g., for Germany) are still missing. The aim of this contribution is to discuss the prevalence, etiology, and treatment of addictive behavior with special emphasis on ethnical factors. Additionally, some of the relevant studies considering the ethnical background and the impact of acculturation of the patients suffering from SUD will be summarized in this chapter. (PsycINFO Database Record (c) 2013 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: *Addiction
*Drug Abuse
*Etiology
*Treatment
Acculturation
Costs and Cost Analysis
Cross Cultural Differences
Drugs
Epidemiology
Health Care Costs
Racial and Ethnic Groups

Source: PsycINFO

61. Migration and mental health: An overview from Europe.

Citation: Cultural variations in psychopathology: From research to practice., 2013(8-24) (2013)
The total number of immigrants living in Europe in 2010 was 32.5 million, representing 6.5% of the EU-27's population. Given that migration is strongly associated with higher risk for mental disorders, multiethnic societies in Europe are faced with a multiplicity of challenges, including meeting the diverse mental health care needs of ethnic-minority groups. These days, mental health specialists have regular contact with patients from different cultural backgrounds, whose health conditions also differ due to their immigration history and the social conditions in which they live in the receiving country. In this chapter an overview on risk and protective factors associated with migration and acculturation with special emphasis on suicidality, psychosis, affective and addictive disorders, and dementia are given. In order to promote mental health and its care among immigrant groups, clinicians, policymakers, and service providers need to be aware of specific needs of these immigrants. (PsycINFO Database Record (c) 2013 APA, all rights reserved)

Emotional psychological and related problems among truant youths: An exploratory latent class analysis.

Latent class analysis was conducted on the psychosocial problems experienced by truant youths. Data were obtained from baseline interviews completed on 131 youths and their parents/guardians involved in a NIDA-funded, Brief Intervention Project. Results identified two classes of youths: Class 1(n = 9)-youths with low levels of delinquency,
mental health and substance abuse issues; and Class 2 (n = 37) - youths with high levels of these problems. Comparison of these two classes on their urine analysis test results and parent/guardian reports of traumatic events found significant (p < .05) differences between them that were consistent with their problem group classification. Our results have important implications for research and practice. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Hammill Institute on Disabilities; YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Abuse
*Juvenile Delinquency
*Mental Disorders
*Psychosocial Factors
*Truancy
*Trauma

Full Text: Available from Highwire Press in Journal of Emotional and Behavioral Disorders


Citation: Journal of HIV/AIDS & Social Services, July 2012, vol./is. 11/3(196-209), 1538-1501 (Jul 2012)
Author(s): Jha, Chandra Kant; Madison, Jeanne
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Institution: Jha, Chandra Kant: Everest Integrated Development Society, Sharaswotti Boarding School, Saptari; Madison, Jeanne: School of Health, University of New England, Armidale, NSW
Language: English
Abstract: In this study, the authors explored the perception and strategies used by 20 injecting drug users (IDUs) as they regularly confront life-threatening complications stemming from their drug use. The 20 IDUs were from four urban centers of Nepal: Kathmandu Valley, Pokhara, Narayanghaat, and Hetauda. The phenomenological study was conducted, using individual in-depth interviews ranging from 1 to 2 hours in length. All data were analyzed using the analytical approaches of grounded theory. It was found that the urgency and severity of withdrawal symptoms are the major precursors, leading drug users to share unsterile syringes and needles and thereby increasing the risks of HIV transmission and other health risks. The study also found that IDUs seemed aware and worried about HIV and other health risks, prompting them to devise their own seemingly suitable strategies for harm minimization. Understanding these high-risk strategies should inform public health and intensive harm-reduction services to be considered and implemented in Nepal. Attempts should be made to keep the IDUs in touch with suitable medication-assisted therapies to overcome the withdrawal symptoms, thus minimizing the chance of sharing syringes/needles with other IDUs. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Abuse
*Drug Withdrawal
*Harm Reduction
*Intravenous Drug Usage

64. Perphenazine suspension: A new, old treatment, side effects and continuous use.
A number of innovative delivery systems for acute antipsychotic pharmacotherapy have been developed over the years which include oral suspensions, rapidly dissolving wafers and acute intramuscular preparations. Currently, the availability of first generation antipsychotic (FGA) formulations is limited to two high potency agents: haloperidol and fluphenazine. At Yale New-Haven Psychiatric Hospital, the hospital pharmacy was able to create perphenazine suspension, a mid-potency FGA, with a record of effectiveness and tolerability that was no worse than that of second generation antipsychotics (SGAs) in the CATIE trial. In this study we compare perphenazine suspension to other first and SGAs in the risk of extrapyramidal reactions and whether or not patients were continued on the same antipsychotic they were started with at the time of discharge. Medical records of patients who received acute pharmacotherapy in a unique form while hospitalized at Yale New Haven Psychiatric Hospital from July 2009 to December 2009 were examined. All data were collected thru a chart review using a form that was created to systematically document experiences. A total of 229 patients were included in the study. There were no significant differences between treatment groups on gender, age, race or diagnosis. In the entire samples 1.75% had pseudo-parkonisnism, 1.31% had acute dystonia, 0.04% had tardive dyskinesia, 1.31% akathisia, and 4.8% any neurological side effects. There were no significant differences between agents in the likelihood of any of these side effects or of having any side effect. Higher use of anticholinergics was found in patients treated with FGAs. We also found that 77% were discharged on the same antipsychotic agent they received when they were initially hospitalized. A wide range of acute oral pharmacotherapy in non-tablet formulations of first and SGAs should be available in psychiatric hospital formularies. FGAs seems to be as well tolerated as SGAs. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)
Abstract: Research suggests that many women experience some form of sexual assault in their lifetime and that women who engage in substance abuse often have a higher incidence of past sexual assault than women in the general population. Given the documented rates of sexual assault among women in recovery from substance use, it is important to explore community interventions that promote positive recovery from substance use and sexual assault. One model that promotes successful substance use recovery is the Oxford House—a democratic, self-supported substance use recovery home. Research demonstrated that living in an Oxford House provides sober social support and that this increased social support may promote the use of positive coping strategies to strengthen recovery from substance use, however; the relationship between social support and sexual assault for women is unclear. Thus, the current study examines the Oxford House model for women in recovery from substance use who have experienced sexual assault. A cross-sectional sample of women living in Oxford Houses in the United States was obtained to examine the relationship among disclosure of sexual assault, social support, and self-esteem. Results suggested that many women used Oxford House as a setting in which to disclose prior sexual assault. Results also indicated that women who disclosed their assault experience reported higher self-esteem and social support than women who had not disclosed. Possible implications include the value of substance abuse recovery homes as a safe, supportive environment for women to address issues related to sexual assault.

Country of Publication: HOLDER: The Author(s); YEAR: 2012
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Rehabilitation *Life Experiences *Residential Care Institutions *Self Disclosure *Sex Offenses Drug Abuse Human Females Recovery (Disorders)
Source: PsycINFO
Full Text: Available from Highwire Press in Journal of Interpersonal Violence

66. Choroid plexus dysfunction: The initial event in the pathogenesis of Wernicke's encephalopathy and ethanol intoxication.

Citation: Alcoholism: Clinical and Experimental Research, August 2008, vol./is. 32/8(1513-1523), 0145-6008;1530-0277 (Aug 2008)
Author(s): Nixon, Peter F; Jordan, Lindsay; Zimitat, Craig; Rose, Stephen E; Zelaya, Fernando
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Institution: Nixon, Peter F.: Department of Biochemistry and Molecular Biology, University of Queensland, St Lucia, QLD; Jordan, Lindsay: Department of Biochemistry and Molecular Biology, University of Queensland, St Lucia, QLD; Zimitat, Craig: Department of Biochemistry and Molecular Biology, University of Queensland, St Lucia, QLD; Rose, Stephen E.: Centre for Magnetic Resonance, University of Queensland, St Lucia, QLD; Zelaya, Fernando: Centre for Magnetic Resonance, University of Queensland, St Lucia, QLD
Language: English
Abstract: Background: In both acute ethanol intoxication and in thiamin deficient glucose metabolism, previous studies have detected blood-brain barrier (BBB) and/or blood-CSF-barrier (BCSFB) impairment but were unable to assess their significance in relation to other changes in the brain. Methods: Contrast-enhanced, magnetic resonance imaging (MRI) was used to detect and time any impairment of the BBB or BCSFB in rats given an acute ethanol load or in rats made thiamin deficient to the point of mild ataxia and then given an acute glucose load. Results: The BCSFB at the choroid plexus (CP)
was impaired within 10 minutes by either (i) a single i.p. dose of glucose in thiamin-deficiency, an effect that was attenuated by prior MK801 and preceded the published onset of exacerbation of motor incoordination and elevation of brain glutamate derivatives; or (ii) a single i.p. dose of ethanol in thiamin-sufficiency, an effect that was proportional to the blood alcohol concentration and preceded the published onset of signs of intoxication. In contrast to the BCSFB, the BBB remained intact throughout the 90 minutes period of these experiments. Conclusions: In both ethanol intoxication and thiamin-deficient glucose metabolism, BCSFB impairment exposes the CSF and hence the brain extracellular fluid to neuroactive substances from the blood. CP impairment is the earliest detected event in both these animal models; and explains the paraventricular location of WE neuropathology and why WE is associated with, but not dependent on, alcoholism. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Research Society on Alcoholism; YEAR: 2008
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcohol Intoxication
*Blood Brain Barrier
*Encephalopathies
*Etiology
*Vitamin Deficiency Disorders
Cerebral Ventricles
Ethanol
Rats
Wernicke's Syndrome
Source: PsycINFO
Full Text: Available from Wiley in Alcoholism: Clinical and Experimental Research

67. Prediction of serotonergic treatment efficacy using age of onset and type A/B typologies of alcoholism.

Citation: Alcoholism: Clinical and Experimental Research, August 2008, vol./is. 32/8(1502-1512), 0145-6008;1530-0277 (Aug 2008)
Author(s): Roache, John D; Wang, Yanmei; Ait-Daoud, Nassima; Johnson, Bankole A
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Institution: Roache, John D.: Department of Psychiatry, University of Texas Health Science Center at San Antonio, San Antonio, TX; Wang, Yanmei: Department of Psychiatry, University of Texas Health Science Center at San Antonio, San Antonio, TX; Ait-Daoud, Nassima: Department of Psychiatry and Neurobehavioral Sciences, University of Virginia, Charlottesville, VA; Johnson, Bankole A.: Department of Psychiatry and Neurobehavioral Sciences, University of Virginia, Charlottesville, VA
Language: English
Abstract: Background: Previously, we reported that ondansetron was efficacious at treating early-onset (<=25-years old) but not late-onset (>=26-years old) alcoholics in a double-blind, randomized, placebo-controlled clinical trial (n = 321 enrolled patients, 271 of them randomized). Randomized participants underwent 11 weeks of treatment with ondansetron (1, 4, or 16 lg / kg twice daily; n = 67, 77, and 71, respectively) or identical placebo (n = 56), plus weekly standardized group cognitive behavioral therapy. Methods: For this study, we reanalyzed the original sample to determine whether the Type A/ B typological classification predicts ondansetron treatment response. In this comparative analysis, k-means clustering was applied to 19 baseline measures of drinking behavior, psychopathology, and social functioning, similar to those used by Babor in the original typological derivation. A 2-factor solution described robustly 2 groups phenomenologically consistent with Type A/ B classification. Subjects were subdivided into early- and late-onset alcoholics. Results: Seventy-two percent of Type B subjects had early-onset alcoholism (EOA); 67% of Type A subjects had late-onset alcoholism (LOA).
The A/B typology better discriminated 2 clusters based upon baseline severity of alcoholism. There was a significant effect (p < 0.05) for Type B alcoholics to respond to ondansetron (4 g/kg); however, Type A alcoholics receiving ondansetron showed no beneficial effect. Early-onset vs. late-onset classification predicted ondansetron response substantially better than Type A/B classification, which did not add to the prediction of treatment outcome. Further analyses showed that ondansetron was effective in the 33% of Type A alcoholics with EOA but ineffective in the 28% of Type B alcoholics with LOA. Conclusions: Type A/B classification best discriminates alcoholic subtypes based upon baseline severity. Early- vs. late-onset classification is, however, a better predictor of response to ondansetron treatment because it might be more closely related to fundamental neurobiological processes associated with the underlying pathophysiology of alcoholism. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Research Society on Alcoholism; YEAR: 2008

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcoholism
*Drug Therapy
*Psychodiagnostic Typologies
*Serotonin
Drinking Behavior
Onset (Disorders)
Pathophysiology

Source: PsycINFO

Full Text: Available from Wiley in Alcoholism: Clinical and Experimental Research

68. Correspondence between secular changes in alcohol dependence and age of drinking onset among women in the United States.

Citation: Alcoholism: Clinical and Experimental Research, August 2008, vol./is. 32/8(1493-1501), 0145-6008;1530-0277 (Aug 2008)

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Language: English

Abstract: Background: Several lines of evidence suggest that the lifetime prevalence of alcohol dependence among women has increased in recent decades, but has not risen significantly for men. Early age at onset of drinking (AOD) is strongly correlated with risk for alcohol dependence and there is evidence that mean AOD has also decreased, particularly for women. The present report sought to confirm the trends in AOD and to determine the extent to which they might account for secular trends in alcohol dependence. Methods: Repeated cross-sectional analyses of data from 2 large, national epidemiological surveys were conducted to enable estimates of cross-cohort differences while controlling for age-related factors. Regression analyses were used to compute risk for alcohol dependence associated with birth cohort membership, before and after inclusion of AOD as a covariate. Results: Both men and women born between 1944 and 1963 had earlier ages of onset for drinking than did the earliest birth cohort analyzed (1934-43). However, the net decrease in AOD was twice as large for women (3.2 years) than that for men (1.6 years). After adjusting for AOD, differences in lifetime prevalence between different birth cohorts of women were rendered non-significant, indicating that AOD accounts for a substantial portion of change in the lifetime prevalence of alcohol dependence.
Conclusions: These results suggest that a decrease in AOD accounts for much of the increase in lifetime alcohol dependence among women. AOD is likely to be an indicator of dynamic, and therefore modifiable risk behaviors impacting risk for alcohol dependence. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Research Society on Alcoholism; YEAR: 2008
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Age Differences
*Alcohol Drinking Patterns
*Alcoholism
*Female Attitudes
*Risk Factors
Epidemiology
Source: PsycINFO
Full Text: Available from Wiley in Alcoholism: Clinical and Experimental Research


Citation: Alcoholism: Clinical and Experimental Research, August 2008, vol./is. 32/8(1468-1478), 0145-6008;1530-0277 (Aug 2008)
Author(s): Kelly, John F; Brown, Sandra A; Abrantes, Ana; Kahler, Christopher W; Myers, Mark
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Language: English
Abstract: Background: Despite widespread use of 12-step treatment approaches and referrals to Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) by youth providers, little is known about the significance of these organizations in youth addiction recovery. Furthermore, existing evidence is based mostly on short-term follow-up and is limited methodologically. Methods: Adolescent inpatients (n = 160; mean age = 16, 40% female) were followed at 6-months, and at 1, 2, 4, 6, and 8 years posttreatment. Time-lagged, generalized estimating equations modeled treatment outcome in relation to AA/NA attendance controlling for static and time-varying covariates. Robust regression (locally weighted scatterplot smoothing) explored dose-response thresholds of AA/NA attendance on outcome. Results: The AA/NA attendance was common and intensive early posttreatment, but declined sharply and steadily over the 8-year period. Patients with greater addiction severity and those who believed that they could not use substances in moderation were more likely to attend. Despite declining attendance, the effects related to AA/NA remained significant and consistent. Greater early participation was associated with better long-term outcomes. Conclusions: Even though many youth discontinue AA/NA over time, attendees appear to benefit, and more severely substance-involved youth attend most. Successful early posttreatment engagement of youth in abstinence-supportive social contexts, such as AA/NA, may have long-term implications for alcohol and drug involvement into young adulthood. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Research Society on Alcoholism; YEAR: 2008
Density of familial alcoholism and its effects on alcohol use and problems in college students.

Citation: Alcoholism: Clinical and Experimental Research, August 2008, vol./is. 32/8(1451-1458), 0145-6008;1530-0277 (Aug 2008)

Author(s): Capone, Christy; Wood, Mark D

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Institution: Capone, Christy: Department of Psychology, University of Rhode Island, Kingston, RI; Wood, Mark D.: Department of Psychology, University of Rhode Island, Kingston, RI

Language: English

Abstract: Background: Previous studies of family history of alcoholism (FHA) in college students have typically relied on dichotomous indices of paternal drinking. This study examined the prevalence of FHA and its effects on alcohol use and problems using a density measure in a sample (n = 408) of college students. Methods: Undergraduate students completed an anonymous survey in exchange for course credit. Data was collected between 2005 and 2006. Results: Using a density measure of FHA, we observed an overall prevalence rate of 65.9% and a rate of 29.1% for FHA in both first and second-degree relatives. Structural equation modeling (SEM) was used to investigate relations among FHA, alcohol use / problems and previously identified etiological risk factors for alcohol use disorders (AUD). Results indicated a significant positive association between FHA and alcohol-related problems and this relationship was mediated by age of onset of drinking, behavioral undercontrol and current cigarette use. Behavioral undercontrol also mediated the relationship between gender and alcohol problems. Additionally, FHA was associated with an earlier age of onset of drinking and this was related to greater alcohol use. Conclusions: Assessing density of FHA in future trajectory research may capture a greater number of students at risk for acute alcohol-related problems and / or future development of AUDs. Future preventive interventions with this population, which should begin well before the college years, may benefit from considering personality factors and incorporating smoking cessation to help identify at-risk students and assist those who wish to cut down on their alcohol use but find that smoking acts as a trigger for increased drinking. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)
71. A randomized double-blind pilot trial of gabapentin versus placebo to treat alcohol dependence and comorbid insomnia.

**Citation:** Alcoholism: Clinical and Experimental Research, August 2008, vol./is. 32/8(1429-1438), 0145-6008;1530-0277 (Aug 2008)

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**Language:** English

**Abstract:**

Background: Insomnia and other sleep disturbances are common, persistent, and associated with relapse in alcohol-dependent patients. The purpose of this pilot study was to compare gabapentin versus placebo for the treatment of insomnia and prevention of relapse in alcohol-dependent patients. Methods: Twenty-one subjects, including 10 women who met study criteria for alcohol dependence and insomnia and expressed a desire to abstain from alcohol, were recruited to the study. During a 1 to 2 week placebo lead-in and screening phase, a complete medical history, physical exam, blood tests, urine drug test, and structured interviews were performed to determine eligibility and patterns of alcohol use and sleep. Insomnia due to intoxication or acute withdrawal, psychiatric or medical illness, medications, and other sleep disorders were ruled out. Subjects were then randomized to either placebo (n = 11) or gabapentin (n = 10) for 6 weeks and titrated over a 10-day period to 1,500 mg or 5 pills at bedtime. After a 4-day taper, subjects were reassessed 6 weeks after ending treatment. Results: Gabapentin significantly delayed the onset to heavy drinking, an effect which persisted for 6 weeks after treatment ended. Insomnia improved in both treatment groups during the medication phase, but gabapentin had no differential effects on sleep as measured by either subjective report or polysomnography. Conclusion: Because gabapentin is a short-acting medication that was taken only at nighttime in this study, it may possibly exert a nocturnal effect that prevents relapse to heavy drinking by a physiological mechanism not measured in this pilot study. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Research Society on Alcoholism; YEAR: 2008

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

**Subject Headings:** *Alcoholism
*Drug Therapy
*Insomnia
*Placebo
*Relapse Prevention
Alcohol Intoxication
Clinical Trials
Comorbidity

**Source:** PsycINFO

**Full Text:** Available from Wiley in Alcoholism: Clinical and Experimental Research

72. Decision making in alcohol dependence: Insensitivity to future consequences and comorbid disinhibitory psychopathology.

**Citation:** Alcoholism: Clinical and Experimental Research, August 2008, vol./is. 32/8(1398-1407), 0145-6008;1530-0277 (Aug 2008)

**Author(s):** Cantrell, Hope; Finn, Peter R; Rickert, Martin E; Lucas, Jesolyn
Abstract:
Background: Alcohol dependence (AD) is often comorbid with other disinhibitory disorders that are characterized by poor decision making and evidenced by disadvantageous strategies on laboratory tasks such as the Iowa Gambling Task (IGT). In this study, a variant of the IGT is used to examine specific mechanisms that may account for poor decision making on the task in AD both with and without comorbid psychopathology. Methods: The community sample (n = 428) included 134 young adult subjects with AD and a history of childhood conduct disorder (CCD), 129 with AD and no history of CCD, 60 with a history of CCD and no AD, and 105 controls. Lifetime histories of other disinhibitory problems (adult antisocial behavior, marijuana, and other drugs) and major depression also were assessed. A modified version of the IGT was used to estimate (i) insensitivity to future consequences (IFC), and (ii) preference for large versus small immediate reward decks (PLvS). Results: Both AD and CCD were associated with greater IFC but not greater PLvS. Structural equation models (SEMs) indicated that IFC was associated with higher scores on a latent dimensional "disinhibitory disorders" factor representing the covariance among all lifetime measures of disinhibitory psychopathology, but was not directly related to any one disinhibitory disorder. SEMs also suggested that adult antisocial behavior was uniquely associated with a greater PLvS. Conclusions: Disadvantageous decision making on the IGT in those with AD and related disinhibitory disorders may reflect an IFC that is common to the covariance among these disorders but not unique to any one disorder.
Reefer Madness, the psychedelic '60s, Nixon's War on Drugs, and the powerful warring Mexican drug cartels that currently threaten political instability in that country. This book provides a comprehensive overview of U.S. drug policy that will fascinate general readers and benefit those in the field of substance abuse treatment or policy. Each chapter includes an analysis of a primary source document that serves to illuminate drug policy in America at a particular point in time as well as the reasons for the waxing and waning popularity of various drugs. The author provides accurate historical context that explains perceptions about substance abuse in American history, and draws compelling parallels across different time periods to show that much of what may seem new and unique for the present generation actually has a historical precedent. (PsycINFO Database Record (c) 2013 APA, all rights reserved)

Publication Type: Book; Authored Book
Subject Headings: *Drug Abuse
*Drug Laws
*Government Policy Making
*History
Amphetamine
Barbiturates
Cocaine
Crack Cocaine
Ethanol
Heroin
Lysergic Acid Diethylamide
Marijuana
Methamphetamine
Morphine
Opiates

Source: PsycINFO

74. Smoking in children and adolescents.

Citation: Handbook of evidence-based practice in clinical psychology, Vol 1: Child and adolescent disorders., 2012(493-520) (2012)
Author(s): Thomas, Roger E
Institution: Thomas, Roger E.: University of Calgary, Calgary, AB
Language: English
Abstract: (from the chapter) There are three nicotine-related disorders: nicotine dependence, nicotine withdrawal, and nicotine-related disorder not otherwise specified (NOS) (American Psychiatric Association, 2000). Substance-related disorders are characterized by tolerance, withdrawal, increased consumption, persistent desire or unsuccessful attempts to reduce consumption, spending a great deal of time related to the substance, reduction or discontinuation in important activities, and continued use despite knowledge of harm. Substance withdrawal disorders are characterized by a substance-specific syndrome due to cessation of heavy and prolonged use that causes clinically significant distress or impairment on functioning not due to a general medical disorder. Nicotine-related disorders (NOS) are other disorders that do not meet the criteria for these disorders. There are a number of measures of smoking and nicotine-related disorders (Piper, McCarthy, & Baker, 2006; Richardson et al., 2007). (PsycINFO Database Record (c) 2013 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: *Disorders
*Tobacco Smoking
Drug Abuse
Drug Withdrawal
Nicotine
Nicotine Withdrawal
75. Tune in and drop the lot? Experience as a factor of transformation processes.

**Original Title:** Tune in and drop the lot? Erfahrung als faktor in transformationsprozessen.

**Citation:** Psychotherapie und Sozialwissenschaft: Zeitschrift für Qualitative Forschung und klinische Praxis, 2012, vol./is. 14(1(37-54), 1436-4638 (2012)

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**Institution:** Sorgo, Gabriele: Institut für Bildungswissenschaft, Universität Graz, Graz

**Language:** German

**Abstract:** This article is concerned with the impacts of economically induced acceleration and processes of disembedding on scientific as well as popular discourses of self-fulfilment and adaptation. During the past 50 years even spiritual countercultures have been commercially exploited by management-discourses und marketing strategies. Actually, consumer habits focus on experiences at present while denying inherited experiences being part of a collectively constructed symbolic universe. But without these experiences the self cannot be sustained, neither planning the future nor personal learning will be possible. Hence late modern individuals increasingly rely on practices providing them with feelings of liminality and disembedded instantiality to which they are bound by addictive behaviour. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** *Adaptation
*Addiction
*Resilience (Psychological)

76. Integrated recovery therapy: Toward an integrally informed individual psychotherapy for addicted populations.

**Citation:** Journal of Integral Theory and Practice, March 2012, vol./is. 7/1(124-148), 1944-5083;1944-5091 (Mar 2012)

**Author(s):** du Plessis, Guy Pierre

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**Language:** English

**Abstract:** This article outlines an integrally informed individual psychotherapy adapted for treating addicted populations. Integrated Recovery Therapy, as a therapeutic orientation, is a psychotherapeutic Integral Methodological Pluralism. As with any Integral Methodological Pluralism, it has paradigmatic and meta-paradigmatic features. The paradigmatic aspect refers to the recognition, compilation, and implementation of various methodologies in a comprehensive and inclusive manner. The meta-paradigmatic aspect refers to its capacity to weave together, relate, and integrate the various paradigmatic practices while providing a metatheoretical and transdisciplinary framework. Integrated Recovery Therapy is a meta-therapy that provides a comprehensive and multiperspectival therapeutic orientation for therapists who treat addicted clients in individual psychotherapy. Its core philosophy is derived from an integration of 12-Step abstinence-based philosophy, mindfulness, positive psychology, and Integral Theory. Integrated Recovery Therapy represents one of the various novel, integrally informed methodologies in the budding field of Integral Addiction Treatment and Integral Recovery—a nascent discipline that holds much promise for developing more comprehensive and sustainable addiction treatment approaches. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)
77. Beliefs and consumption of psychoactive substances among schoolchildren in the city of Cordoba.

**Original Title:** Creencias y consumo de sustancias psicoactivas en escolares de la ciudad de Cordoba.

**Citation:** Acta Psiquiatrica y Psicologica de America Latina, March 2012, vol./is. 58/1(3-10), 0001-6896 (Mar 2012)

**Author(s):** Miguez, Hugo A; Fernandez, Ruth; Romero, Mariana; Mansilla, Juan Carlos

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**Language:** Spanish

**Abstract:** Survey studies conducted in the city of Cordoba in 2010 show that the consumption of psychoactive substance's prevalence reaches, together with alcohol, 12.3% during the last month, and with tobacco 5.4%. In this context the drug supply was 9.7% (essentially marijuana) and 2.5% of the students reported to have tried them at least once at some time during their eleven years of life. The data indicate that alcohol abuse and drug use do not wait for secondary school or adolescence to appear as a problem; but in some way they already have a presence, in the practices as well as in representations. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

78. The unbalanced high-tech life: Are employers liable?

**Citation:** Strategic Change, February 2009, vol./is. 18/1-2(1-13), 1086-1718;1099-1697 (Feb 2009)

**Author(s):** Kakabadse, Nada K; Porter, Gayle; Vance, David

**Correspondence Address:** Kakabadse, Nada K.: Northampton Business School, C214, Park Campus Boughton Green Road, Northampton, United Kingdom, NN2 7AL, nada.kakabadse@northampton.ac.uk

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**Language:** English
Abstract: Technology has created new capabilities, as well as new demands, for many of today's employees. For those who work in technology-enhanced environments, the pace and round-the-clock activity creates a source of stimulation that may become addictive. While the potential for this type of behavioral addiction is recognized by both researchers and the popular press, few companies are seriously considering the associated risks, one of which could be legal action against the organization. By combining research on addiction, technology use, workplace demands, and legal precedent, this article considers issues likely to require decision by the courts, as well as background on the evolution of related legal questions for insight to possible outcomes. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Business Organizations
*Personnel
*Technology
*Workaholism
Professional Liability

79. "Addicted to love"—Love and the dependent personality disorder.

Original Title: Addicted to love"—Liebe und die Dependente Personlichkeitsstörung.
Citation: PTT: Personlichkeitsstörungen Theorie und Therapie, 2012, vol./is. 16/1(15-20), 1433-6308 (2012)
Author(s): Renneberg, Babette; Boettcher, Johanna; Weiler, Matthias
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Institution: Renneberg, Babette: Freie Universitat Berlin, Wissenschaftsbereich Psychologie, Berlin
Language: German
Abstract: The dependent personality disorder is characterized by difficulties with independent decision making, an excessive need of closeness to others and extreme fear of being alone. These characteristics mark the interpersonal behavior in general and intimate relationships in particular. Basic assumptions and motives of the dependent personality disorder lead to anxious, submissive and clinging behavior. Life without a steady partner is inconceivable. In the lives of the individuals their intimate relationship plays a central role, and they avoid being alone of all costs. Potentially damaging and positive aspects of the dependent personality traits for the individual as well as the relationship are described. Implications for psychotherapy and the psychotherapeutic relationship are outlined. Cultural and societal factors exert a large influence on the assessment of dependent interactional patterns as pathological. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Dependent Personality Disorder
*Love
*Interpersonal Relationships

80. Psychological intervention in the alcoholic aged, family, and society.

Original Title: Intervencion psicologica en el anciano alcoholico, familia y sociedad.
Citation: Psicologia y Salud, January 2010, vol./is. 20/1(55-64), 1405-1109 (Jan-Jun 2010)
81. Influence of psycho-active drugs consumption in the violent behavior patterns.

Original Title: Influencia del consumo de sustancias psicoactivas en los patrones de comportamiento violento.

Citation: Psicologia y Salud, January 2010, vol./is. 20/1(41-53), 1405-1109 (Jan-Jun 2010)

Author(s): Acosta, Fernando Juarez; Sandoval, Bertha Cecilia Galindo; Gamboa, Yaneth Santos

Correspondence Address: Acosta, Fernando Juarez: Facultad de Psicologia, Universidad de San Buenaventura, Carrera 56C, No. 51-90, Medellin, Colombia

Institution: Acosta, Fernando Juarez: Facultad de Psicologia, Universidad de San Buenaventura, Medellin; Sandoval, Bertha Cecilia Galindo: Universidad Pedagogica y Tecnologica de Colombia-Tunja, Tunja; Gamboa, Yaneth Santos: Universidad Pedagogica y Tecnologica de Colombia-Tunja, Tunja

Language: Spanish

Abstract: The influence of consumption of psychoactive substances in the patterns of violence behavior in 373 participants was analyzed using several questionnaires to evaluate behavioral patterns. The drug of the most frequent beginning and of major impact was the alcohol, followed by the cigarette and the marijuana; four consumption groups were obtained, arranged by severity of consumption. Three violent patterns were obtained, arranged by frequency, runs and stability of behavior, being the most frequent behaviors verbal aggression and attitudes or rage gestures in the academic problems and the family and interpersonal relations. Physical aggression and rage, as well as the lowest consumption group, influenced the belonging to the lowest violent pattern. A weak influence in the successive patterns was also observed. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)
82. Construction and development of a support group.

Abstract: The objective of the article is to present a support group conducted like group psychotherapy, inspired by humanistic psychotherapy, by describing how this group was constructed in parallel with clinical practice. The group meets each week and is intended for patients, without their families and friends. The personal experience of the participants is relived to allow personal progress. The construction of themes is designed to provide markers corresponding to the patients' triple expectations to instruct, develop coping strategies without alcohol and improve their interpersonal relations. Exchanges with participants allow the therapists to update themes and create new themes. Beyond the conceptualisation of themes, a group dynamic was developed as a result of the interaction of the therapists, in order to perfect the tool, in which the participants become partners.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcoholism *Group Psychotherapy *Humanistic Psychotherapy *Psychotherapeutic Processes *Support Groups Interpersonal Relationships

83. Alcoholic body image. Representation in chronic alcoholism and intermittent alcoholism.

Abstract: The objective of the article is to present a support group conducted like group psychotherapy, inspired by humanistic psychotherapy, by describing how this group was constructed in parallel with clinical practice. The group meets each week and is intended for patients, without their families and friends. The personal experience of the participants is relived to allow personal progress. The construction of themes is designed to provide markers corresponding to the patients' triple expectations to instruct, develop coping strategies without alcohol and improve their interpersonal relations. Exchanges with participants allow the therapists to update themes and create new themes. Beyond the conceptualisation of themes, a group dynamic was developed as a result of the interaction of the therapists, in order to perfect the tool, in which the participants become partners.

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcoholism *Group Psychotherapy *Humanistic Psychotherapy *Psychotherapeutic Processes *Support Groups Interpersonal Relationships
The alcoholic body image is traditionally recognized as being extremely fragile. Presenting major defects in body image envelopes, it appears to be marked by the absence of units and limits. This qualitative and exploratory study of two very different clinical cases, based on Rorschach's tests, revealed major disturbances that are nevertheless expressed in various ways according to the type of alcohol abuse: body image subject to "deformation" in chronic alcoholism; "co-fusion" movements, leading to osmosis in intermittent alcoholism. These specific lesions could be explained by the particular relationship to alcohol. Apart from the subject's implication in the outside world, these elements should be considered from a therapeutic point of view, especially in approaches that try to rehabilitate the alcoholic's body image. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)
Citation: Alcoologie et Addictologie, March 2012, vol./is. 34/1(21-26), 1620-4522 (Mar 2012)

Author(s): Simon, Olivier; Waelchli, Maude; Teltzrow, Robert; Zimmer, Sabine; Sansoy, Patrick

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Institution: Simon, Olivier: Societe Suisse de Medecine de l'Addiction, Service de Psychiatrie Communautaire, Centre Hospitalier Universitaire Vaudois, CHUV, Lausanne; Waelchli, Maude: Section d'Addictologie, Service de Psychiatrie Communautaire, CHUV, Lausanne; Teltzrow, Robert: Conseil de l'Europe, Strasbourg; Zimmer, Sabine: Conseil de l'Europe, Strasbourg; Sansoy, Patrick: Mission Interministerielle de Lutte Contre la Drogue et la Toxicomanie, MILDT, Paris

Language: French

Abstract:
As far as new therapies are concerned, research scientists and, more generally, professionals in the field of addiction medicine must not raise false hopes for the public. Addiction immunotherapy illustrates this ethical issue. Objective: analyse the treatment of ethical issues related to the anti-cocaine "vaccine" in a selection of general press articles and to discuss the relevance of the term "vaccine" in terms of communication with the public. Method: selection of 43 general press articles from the United Kingdom, Germany, Spain, Italy and France, by using national reference search engines and the Google search engine. Articles included were analysed by a grid comprising the various ethical issues concerning the anti-cocaine "vaccine", based on a preliminary analysis of the scientific literature. Results: the articles studied are based on succinct but globally accurate explanations concerning the underlying technique. Only one article proposes a critical analysis of the definition and use of the term "vaccine" in the context of addiction therapy. When ethical issues are mentioned in the general press, they are only schematically and incompletely discussed. Discussion: the term "vaccine" that is relevant from a strictly technical point of view, can nevertheless reinforce the public's misconception of this technique by assimilating treatment of addiction to prevention of infectious diseases. The term "immunotherapy" should be preferred as it has a more neutral connotation in the public's representations and expectations and also provides complementary explanations. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Addiction
*Drug Therapy
*Professional Ethics
*Immunotherapy
Cocaine

Source: PsycINFO

86. Alcohol screening instruments in elderly male: A population-based survey in metropolitan Sao Paulo, Brazil.

Citation: Revista Brasileira de Psiquiatria, December 2011, vol./is. 33/4(1-6), 1516-4446;1809-452X (Dec 2011)

Author(s): de Oliveira, Janaina Barbosa; Ferreira Santos, Jair Licio; Kerr-Correa, Florence; Simao, Maria Odete; Pereira Lima, Maria Cristina

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Institution: de Oliveira, Janaina Barbosa: Programa de Pos-Graduacao em Saude Mental, Universidade de Sao Paulo, Ribeirao Preto; Ferreira Santos, Jair Licio: Departament of Social Medicine, Universidade de Sao Paulo, Ribeirao Preto; Kerr-Correa, Florence: Departamento de Neurology, Psychology and Psychiatry, Universidade Estadual Paulista, Botucatu; Simao, Maria Odete: Departamento de Neurology, Psychology and Psychiatry, Universidade Estadual Paulista, Botucatu; Pereira Lima, Maria Cristina: Departamento de Neurology, Psychology and Psychiatry, Universidade Estadual Paulista, Botucatu

Language: English
Abstract: Objective: This study compares the efficacy of the AUDIT (gold standard) with the more easily and quickly applied instruments CAGE, TWEAK, and T-ACE for men aged >= 60 using data from a representative stratified sample of the general population of metropolitan Sao Paulo. Method: The GENACIS questionnaire was administered to a total sample of 2,083 people aged over 18, with a response rate of 74.5%. The elderly male sample consisted of 169 men. Sensitivity, specificity, positive and negative predictive values, area under the receiver operating characteristic curve, and confidence intervals were calculated for each instrument (95% CI). Results: Respondents were predominantly married (81.7%), had up to 11 years of education (61.3%) and a monthly per capita income of up to 300 US dollars. Current abstinence rate was high (61.6%) and 38% reported being former drinkers. There were no statistically significant differences among the instruments tested; however, the TWEAK had a higher area under the receiver operating characteristic curve (95% CI; 0.90-0.99). Conclusion: Research in the general population with screening instruments is scarce, especially among the elderly. However, it can provide specific information concerning this age group and be useful in the formulation of policies and prevention strategies. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Editora Ltda.; YEAR: 2011
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcohol Drinking Patterns
*Alcoholism
*Epidemiology
*Screening Tests
Geriatric Psychiatry
Human Males
Source: PsycINFO

87. Gender and its implications in the discipline and practice of psychology.

Original Title: El genero y sus implicaciones en la disciplina y la practica psicologica.
Citation: Revista Puertorriquena de Psicologia, 2009, vol./is. 20/(168-189), 1946-2026 (2009)
Author(s): del Toro, Vivian Rodriguez
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Institution: del Toro, Vivian Rodriguez: Universidad Interamericana, San Juan
Language: Spanish
Abstract: In this paper I discus gender from four areas pertinent to the theory and practice of psychology. First, traditional epistemology research in psychology in the 20th century, characterized by a positivistic approach, resulted in discrimination against women and their invisibility within the sciences. This research was criticizes by feminist scholars for its methodological flaws and common sexist practices. Related gender literature emphasizes differences in socialization practices that result in inequalities and injustices for both genders, especially women. The second area, gender and mental health, show the prevalence of affective conditions in women and alcoholism and addiction in men, related to social construction of gender and traditional masculinity. The third area, gender and violence points out that women are the main victims of most forms of violence, including domestic. Society does not consider same sex violence as a serious problem due to social prejudice, homophobia and the stigma surrounding homosexuality. Gender violence is a manifestation of violence within the social structure. The fourth area, gender and the justice system, shows how gender discrimination and stereotyping are present when dealing with criminal behavior and the sentences given to men and women within that system. Psychology as a discipline requires scientific scrutiny to promote real social justice. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Asociacion de Psicologia de Puerto Rico
Publication Type: Journal; Peer Reviewed Journal
Subject Headings:  *Alcoholism  
*Discrimination  
*Human Sex Differences  
*Violence  

Source:  PsycINFO