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Search History

1. PsycINFO; exp ADDICTION/ OR DRUG ABUSE [+NT]/ OR DRUG USAGE [+NT]/; 35456 results.
2. PsycINFO; addict*.ti,ab; 25722 results.
3. PsycINFO; 1 OR 2; 47561 results.
In this study, two Acquired Preparedness Models (APMs) were fitted to two maladaptive behavior groups: non-suicidal self-injury (NSSI) and alcohol consumption among problematic drinkers. In these APMs, the direct impact of emotional vulnerability on lifetime behavior count as well as the indirect impact of emotional vulnerability through explicit motivational cognitions (as measured by the decisional balance) was assessed using ordinary least squares regression with bias-corrected bootstrapped confidence intervals. One hundred and six total participants between the ages of 18-20 took part in this study. The average participant was aged 18.83 years, female and Non-Hispanic White. Of the 106 individuals, 54 endorsed at least one instance of NSSI as measured by the Functional Assessment of Self-Mutilation (FASM; Lloyd, Kelley & Hope, 1997) and 42 met criteria for problematic alcohol consumption (PAC) as indicated by the CRAFFT (Knight et al., 1999). Twenty-four participants met criteria for both behaviors. Participants in the NSSI and co-occurring group had similar levels of emotional vulnerability as retrospectively measured by the Emotional Vulnerability in Childhood measure (EV-Child; Sauer & Baer, 2009) and their levels of emotional vulnerability were significantly higher than those in the no problem behavior and AC group (F (3, 102) = 7.95, p < .05). Results of a mediation analysis conducted to test the APM indicated that in the NSSI group there was an indirect effect of positive expectancies on lifetime behavior count (ab = .53, CI [.49, 2.59]; however, the direct effect of emotional vulnerability was much stronger (c = 1.54, p < .05). Within the drinking group, there was evidence of a much smaller indirect effect through positive expectancies (ab = .22, CI [.03 to .69] and no evidence of a direct effect of emotional vulnerability (p = .70). This study is novel in several respects. First, it is the first to use an APM within an NSSI sample. Second, it is the first to assess emotional vulnerability within an alcohol using sample and third, it is the first to use an open-ended decisional balance with likert ratings as a measure of positive expectancies. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
was to characterize fcMRI of brain regions underlying affective processing in individuals with AD and healthy controls. The secondary aim was to determine whether white matter integrity predicts fcMRI in AD. Fourteen abstinent individuals with AD and 14 controls were included in this IRB-approved study. AD participants met criteria for AD in sustained, partial, or full remission; controls had no substance use disorders history. All diagnostic criteria were confirmed by clinical diagnostic interview. The facial affective processing task included fearful and happy expressions. Anatomical, functional, and diffusion tensor imaging data were collected and pre-processed according to previously established protocols. A psychophysiological interaction, fcMRI analysis was then conducted to assess whether the time-series activity in bilateral amygdala seed regions predicted activation in the rest of the brain during fearful and happy faces. In the 14 individuals with AD, functional anisotropy (FA) was calculated to measure white matter integrity. Independent samples t-tests were computed in AFNI to determine fcMRI clusters groups differences and follow up linear regression analyses were conducted in SPSS to include covariates and determine if FA predicted degree of fcMRI in AD. Fearful faces analyses revealed reduced fcMRI compared to controls between left amygdala and left precuneus, right precuneus, right middle frontal gyrus, left postcentral gyrus, right lingual gyrus, right fusiform gyrus, left fusiform gyrus, right middle temporal gyrus, right superior frontal gyrus, and right angular gyrus. Similarly, during happy face processing, the AD group demonstrated reduced fcMRI with the left amygdala and right paracentral gyrus. Additionally, white matter integrity predicted fcMRI in the AD group. As predicted, during fearful faces, increased FA predicted increased fcMRI in four regions. Surprisingly, increased FA also predicted decreased fcMRI in nine regions during fearful faces. One increased FA tract predicted increased fcMRI during happy faces. In conclusion, this study demonstrated AD was related to decreased fcMRI between left amygdala and various cortical regions during fearful and happy faces compared with controls. Additionally, white matter integrity in AD significantly predicted increased and decreased fcMRI during the task. Aberrant neural networks may relate to AD and structural markers may be one mechanism for observed differences. Results also suggest that inhibitory networks may be related to affective processing in AD. Future studies will examine the relationship between fcMRI and structural connectivity to behavioral indices. Longitudinal studies will determine the directionality of observed relationships and provide intervention direction. Interventions aimed at prevention are most effective, such as affective processing training or social cognition skills in adolescence when most problematic drinking behaviors begin. Additionally, new interventions are emerging in addiction research, which increase cortical and decrease limbic activation. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
Abstract: This study included 219 participants, consisting of 104 participants from a methadone maintenance program and 115 participants from an outpatient drug-free program (46% females and 54% males). The Experiences in Close Relationships-Revised was used as a measure for attachment security and assessed the two dimensions of avoidance and anxiety. The Defense Style Questionnaire-88 was used as a measure to evaluate defense mechanisms through conscious derivatives of defenses. The Observing Ego Function Scale was used as a measure of the self-reflective function. Multivariate analyses of variance, analyses of variance, and discriminant function analyses revealed that attachment style and defenses used impacted self-reflective capacity. The drug-free group demonstrated greater use of non-factor and adaptive defenses and the methadone group showed greater use of inhibition, regression, and the immature/maladaptive style. Significant interactive effects were found among the drug-free, dismissing, and avoidant defenses (suppression, withdrawal, and isolation). Those in the dismissing methadone group showed greater use of an immature/maladaptive defense style and regression. An interaction was found between methadone, fearful attachment style, and an immature/maladaptive defense style. Supplemental analyses revealed that not clean participants in both groups had more immature/maladaptive defenses, regression, and inhibition. A significant relationship was found between defenses and self-reflection. The immature/maladaptive defense style significantly related to all aspects of self-reflection. Regression related to impaired self-reflection. The ability to experience affect related to immature/maladaptive and adaptive defenses, regression, splitting, and suppression.

Internal awareness related to the immature/maladaptive defense style, and use of inhibition, withdrawal, and splitting. Significant relationships were found between attachment style and self-reflection. The drug-free dismissing group had less ability to experience affect, but overall greater self-reflective ability and impulse control. The methadone dismissing group had greater ability to experience affect, more impulsivity, but less overall self-reflective ability. The drug-free fearful group had greater ability to distance the self without becoming overwhelmed by affect and resulted in overall greater self-reflective ability. The fearful methadone group demonstrated less ability to distance the self without becoming overwhelmed by affect, but resulted in less self-reflective ability. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Dissertation Abstract
Source: PsycINFO

4. Criminal history and LSI-R scores of RSAT participants in the state of Massachusetts: Impact of offender age on program completion and rates of offender recidivism.

Citation: Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/2-B(E)(No Pagination Specified), 0419-4217 (2014)

Author(s): Hankins, Jewell E
Institution: Walden U., US
Language: English

Abstract: The purpose of this study was to understand how offender age impacted residential substance abuse treatment (RSAT) program success in reducing rates of recidivism for offenders exiting the judicial system. Despite passing legislation in the 1980s and 1990s, which increased the penalties for certain crimes, offender recidivism remains high, with no apparent drop in the number of incarcerations and re-incarcerations, resulting in high costs and threats to the safety and quality of life experienced within communities. Social learning theory, behavioral decision theory, and biologically based theories of behavior were the theoretical foundations. Archival data collected from a RSAT grant program at
between January 1, 1999 and June 6, 2001 were examined. Data related to participant scores on the Level of Service Inventory Revised (LSI-R), acquired prior to program placement and upon program completion, were compared with the number of incarcerations before and after program completion; charges for convictions already decided and/or pending convictions, age at admission(s) and age at the time of the offender's first offense, and types of offenses (domestic or sexual) committed were explored in a factor analysis. Negative correlations identified included: sex offenders and their age at admission and between LSI-R scores and completing the RSAT program. Positive correlations identified included: new convictions and completing the RSAT program, age at admission to program and age of first offense, and date of first offense and sex offender variables. Implications for positive social change include reduced rates of recidivism among offenders with substance abuse problems. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
Abstract: Methamphetamine (METH) is a highly addictive and neurotoxic psychostimulant that is commonly abused. METH abusers display long-term changes in the brain, including reduction of dopamine (DA) innervation in dorsal and ventral striatum. Additionally, METH use is associated with long term cognitive impairments, including deficits in fine and gross motor control, learning, and memory. While cognitive impairments have been associated with DA denervation in the striatum of both human METH abusers and animal models treated with a 'binge' dose of METH that demonstrate similar changes in DA content, no clear mechanism has been outlined linking DA denervation and cognitive impairments. The goals of this work are two-fold. First, I aim to characterize changes in DA signaling following partial DA depletion caused by METH pretreatment. Second, I aim to restore deficits in DA signaling caused by METH pretreatment through the use of both electrical stimulation and pharmacological interventions. Here, I demonstrate that METH neurotoxicity reduces phasic DA signaling, which is important in cue-reward learning, and that sufficient DA innervation exists to recover normal phasic DA signaling following METH pretreatment. Changes in electrically-evoked phasic DA signals were characterized in anesthetized rats pretreated with METH. Additionally, using a freely-behaving rat preparation, I demonstrate reduced amplitude and frequency of endogenous phasic DA signals throughout the striatum. I then show that driving phasic DA signaling in remaining DA terminals through electrical stimulation of DA axons remediates well characterized deficits in striatal gene expression following METH pretreatment. Using the synthetic precursor for DA, levodopa, I demonstrate pharmacological remediation of phasic signal deficits, which may be a means of restoring normal cognitive functions in recovering METH abusers. Lastly, I investigate the mechanism of acute, low doses of METH and their ability to drive phasic signaling following METH neurotoxicity. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
identify substance abuse in patients with altered mental status in inpatient settings, analytical methodologies with adequate assay sensitivity and range to detect the vast majority of commonly abused illicit drugs and prescription medications are required for optimal clinical assessment and treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

8. Outcomes following treatment of veterans for substance and tobacco addiction.

Citation: Archives of Psychiatric Nursing, August 2014(No Pagination Specified), 0883-9417 (Aug 20, 2014)

Author(s): Vest, Bridgette Helms; Kane, Catherine; DeMarce, Josephine; Barbero, Edie; Harmon, Rebecca; Hawley, Joanne; Lehmann, Lauren

Abstract: Persons who use tobacco in addition to alcohol and other drugs have increased health risks and mortality rates. The purpose of this study was to evaluate the impact of participation in a tobacco cessation program on tobacco, alcohol, and other drug use in a population seeking treatment for substance use disorders (SUDs). Tobacco, alcohol, and other drug use were assessed by urine drug screens, breathalyzer readings, and self-report. Veterans (N=137) with a tobacco use disorder enrolled in inpatient program for the treatment of SUDs at the Salem Veterans Affairs Medical Center participated in tobacco cessation education as part of their treatment programming. Use of tobacco, drugs and/or alcohol was evaluated upon admission, 2 weeks following admission, at discharge and 1 month following graduation. The 1-month follow-up rate was 70.8%, with 97 veterans completing the follow-up assessment. Of those 97 veterans, 90.7% (n=88) reported abstinence from alcohol and 91.8% (n=89) reported abstinence from other drugs of abuse. Fourteen veterans (14.4%) reported abstinence from tobacco use at the 1-month follow-up. The veterans reporting abstinence from tobacco use also reported abstinence from alcohol and other drugs at the 1-month follow-up. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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


Citation: Brain Research, September 2014(No Pagination Specified), 0006-8993 (Sep 16, 2014)

Author(s): Morein-Zamir, Sharon; Robbins, Trevor W

Abstract: Disruptions to inhibitory control are believed to contribute to multiple aspects of drug abuse, from preexisting vulnerability in at-risk individuals, through escalation to dependence, to promotion of relapse in chronic users. Paradigms investigating the suppression of actions have been investigated in animal and human research on drug addiction. Rodent research has focused largely on impulsive behaviors, often gauged by premature responding, as a viable model highlighting the relevant role of dopamine and other neurotransmitters primarily in the striatum. Human research on action inhibition in stimulant dependence has highlighted impaired performance and largely prefrontal cortical abnormalities as part of a broader pattern of cognitive abnormalities. Animal and human research implicate inhibitory difficulties mediated by fronto-striatal circuitry both preceding and as a result of excessive stimulus use. In this regard, response-inhibition has proven a useful cognitive function to gauge the integrity of fronto-striatal systems and their role in contributing to impulsive and compulsive features of drug dependence. This article is part of a Special Issue entitled SI:Addiction circuits. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
10. Reduced cocaine-induced serotonin, but not dopamine and noradrenaline, release in rats with a genetic deletion of serotonin transporters.

Citation: European Neuropsychopharmacology, September 2014(No Pagination Specified), 0924-977X (Sep 16, 2014)

Author(s): Verheij, Michel M.M; Karel, Peter; Cools, Alexander R; Homberg, Judith R

Abstract: It has recently been proposed that the increased reinforcing properties of cocaine and ecstasy observed in rats with a genetic deletion of serotonin transporters are the result of a reduction in the psychostimulant-induced release of serotonin. Here we provide the neurochemical evidence in favor of this hypothesis and show that changes in synaptic levels of dopamine or noradrenaline are not very likely to play an important role in the previously reported enhanced psychostimulant intake of these serotonin transporter knockout rats. The results may very well explain why human subjects displaying a reduced expression of serotonin transporters have an increased risk to develop addiction.

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

11. Change in consumption patterns for treatment-seeking patients with alcohol use disorder post-bariatric surgery.

Citation: Journal of Psychosomatic Research, September 2014(No Pagination Specified), 0022-3999 (Sep 7, 2014)

Author(s): CuellarBarboza, Alfredo B; Frye, Mark A; Grothe, Karen; Prieto, Miguel L; Schneckloth, Terry D; Loukianova, Larissa L; Daniel K., Hall-Flavin; Clark, Matthew M; Karpyak, Victor M; Miller, Joseph D; Abulseoud, Osama A

Abstract: OBJECTIVE: The aim of this study is to describe the clinical phenotype of alcohol use disorder (AUD) treatment-seeking patients with Roux-en-Y Gastric Bypass Surgery (RYGB) history; and to compare it to AUD obese non-RYGB controls. METHODS: Retrospective study of electronic medical records for all patients 30-60 years treated at the Mayo Clinic Addiction Treatment Program, between June, 2004 and July, 2012. Comparisons were performed with consumption patterns pre-RYGB and at time of treatment; excluding patients with AUD treatments pre-RYGB. RESULTS: Forty-one out of 823 patients had a RYGB history (4.9%); 122 controls were selected. Compared to controls, the RYGB group had significantly more females [n=29 (70.7%) vs. n=35 (28.7%) p<0.0001]; and met AUD criteria at a significantly earlier age (19.1+0.4 vs. 25.0+1.0 years old, p=0.002). On average, RYGB patients reported resuming alcohol consumption 1.4+0.2 years post-surgery, meeting criteria for AUD at 3.1+0.0 years and seeking treatment at 5.4+0.0 years postoperatively. Pre-surgical drinks per day were significantly fewer compared to post-surgical consumption [2.5+0.4 vs. 8.1+1.3, p=0.009]. Prior to admission, RYGB patients reported fewer drinking days per week vs. controls (4.7+0.3 vs. 5.5+1.4 days, p=0.02). Neither RYGB, gender, age nor BMI was associated with differential drinking patterns. CONCLUSION: The results of this study suggest that some patients develop progressive AUD several years following RYGB. This observation has important clinical implications, calling for AUD-preventive measures following RYGB. Further large-scale longitudinal studies are needed to clarify the association between RYGB and AUD onset. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Subject Headings:

Source: PsycINFO

Full Text: Available from Elsevier in Journal of Psychosomatic Research

12. Inhibition of apomorphine-induced conditioned place preference in rats co-injected with buspirone: Relationship with serotonin and dopamine in the striatum.

Citation: Brain Research, August 2014(No Pagination Specified), 0006-8993 (Aug 23, 2014)

Author(s): Haleem, Darakhshan Jabeen; Ikram, Huma; Haleem, Muhammad Abdul

Abstract:

Apomorphine is a non-narcotic derivative of morphine, which acts as a dopamine agonist to produce psychostimulant like effects. Currently, apomorphine is used in patients with advanced Parkinson's disease, for the treatment of persistent and disabling motor fluctuations, but a constellation of addictive syndromes such as excessive over use of medication, compulsive behaviors, and disturbances of impulse control are noticed in certain patients. Research on rodent models using conditioned place preference (CPP) paradigm also shows that the drug is rewarding. Previously we have shown that repeated administration of apomorphine produces behavioral sensitization which is prevented in rats co-injected with a low (1.0mg/kg) but not higher (2.0mg/kg) dose of buspirone. The present study shows that rewarding effects of apomorphine (1.0mg/kg) in a CPP paradigm are also blocked in rats co-injected with a low (1.0mg/kg) but not higher (2.0mg/kg) dose of buspirone. The levels of serotonin and its metabolite are decreased in the caudate as well as nucleus accumbens of rats exhibiting CPP and the decreases do not occur in animals co-injected with low or higher dose of buspirone. The levels of dopamine and its metabolites are not affected in animals exhibiting CPP; administration as well as co-administration of higher dose of buspirone decreased dopamine metabolism in the caudate as well as nucleus accumbens. The findings suggest a critical role of serotonin in the rewarding effects of apomorphine and imply that co-use of buspirone at low doses can help to control addictive syndromes in Parkinson's disease patients on apomorphine therapy. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

Full Text: Available from Elsevier in Brain Research

13. Delay discounting, treatment motivation and treatment retention among substance-dependent individuals attending an inpatient detoxification program.

Citation: Journal of Substance Abuse Treatment, September 2014(No Pagination Specified), 0740-5472 (Sep 1, 2014)

Author(s): Stevens, Laura; Verdejo-Garcia, Antonio; Roeyers, Herbert; Goudriaan, Anna E; Vanderplasschen, Wouter

Abstract:

BACKGROUND: Recent studies consistently indicate high rates of delay discounting in drug users, which refers to a strong tendency to devaluate delayed rewards. Many addiction treatment programs however, place high demands on the ability to postpone immediate gratification. Therefore, these programs may be particularly challenging for drug users who are disproportionally oriented towards the present, potentially leading to a drop in their treatment involvement. Still, few studies to date have looked at whether delay discounting in drug users is associated with poorer treatment motivation or shorter treatment retention (i.e., the length of stay in treatment). METHOD: In the current study, we examined whether delay discounting, as measured shortly following treatment entry, was predictive of poor treatment retention among 84 substance-dependent individuals (SDI) attending an inpatient detoxification program. In addition, we examined whether motivation for treatment would act as a mediator of this relationship. RESULTS: Delay discounting was predictive of shorter treatment retention and higher odds of dropping out of treatment prematurely. The effects of delay discounting on treatment retention were partially mediated by a subcomponent of treatment motivation, i.e., treatment readiness.
CONCLUSION: The propensity to more steeply discount delayed rewards in drug users has the potential to become a clinically relevant behavioral marker, alerting clinicians that these clients may exhibit lower treatment readiness and are more likely to drop out of treatment prematurely. Targeting delay discounting or increasing treatment readiness in drug users with a low tolerance for delay-of-gratification may help to improve treatment retention among these individuals. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
15. Effect of social support on depression of internet addicts and the mediating role of loneliness.

**Citation:** International Journal of Mental Health Systems, August 2014, vol./is. 8/, 1752-4458 (Aug 16, 2014)

**Author(s):** He, Fei; Zhou, Qin; Li, Jing; Cao, Rong; Guan, Hao

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**Institution:** School of Public Management, Northwest University, Xi'an, China; Department of Burns and Cutaneous Surgery, Xijing Hospital, Xi'an, China; School of Public Management, Northwest University, Xi'an, China; School of Public Management, Northwest University, Xi'an, China; Department of Burns and Cutaneous Surgery, Xijing Hospital, Xi'an, China

**Language:** English

**Abstract:** Background: Many studies have determined the existence of an extremely close association between Internet addiction and depression. However, the reasons for the depression of Internet addicts have not been fully investigated. Aim: This cross-sectional study aims to explore the factors that influence depression among Internet addicts. Methods: A total of 162 male Internet addicts completed the Emotional and Social Loneliness Scale, Multidimensional Scale of Perceived Social Support, and Self-Rating Depression Scale. Results: Loneliness and lack of social support are significantly correlated with depression among Internet addicts. Structural Equation Modeling results indicate that social support partially mediates loneliness and depression. Conclusions: Both social support and loneliness were negatively associated with depression of Internet addicts whereas loneliness plays a mediating role between social support and depression. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** *Internet Addiction*  
*Loneliness*  
*Major Depression*  
*Social Support*

**Source:** PsycINFO

**Full Text:** Available from National Library of Medicine in International Journal of Mental Health Systems  
Available from ProQuest in International Journal of Mental Health Systems; Note: ;  
Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.  
Available from BioMedCentral in International Journal of Mental Health Systems

16. Longitudinal trajectories and associated baseline predictors in youths with bipolar spectrum disorders.

**Citation:** The American Journal of Psychiatry, September 2014, vol./is. 171/9(990-999), 0002-953X;1535-7228 (Sep 1, 2014)

**Author(s):** Birmaher, Boris; Gill, Mary Kay; Axelson, David A; Goldstein, Benjamin I; Goldstein, Tina R; Yu, Haifeng; Liao, Fangzi; Iyengar, Satish; Diler, Rasim S; Strober, Michael; Hower, Heather; Yen, Shirley; Hunt, Jeffrey; Merranko, John A; Ryan, Neal D; Keller, Martin B
Institution: Department of Psychiatry, Western Psychiatric Institute and Clinic, University of Pittsburgh Medical Center, Pittsburgh, PA, US

Language: English

Abstract: Objective: The authors sought to identify and evaluate longitudinal mood trajectories and associated baseline predictors in youths with bipolar disorder. Method: A total of 367 outpatient youths (mean age, 12.6 years) with bipolar disorder with at least 4 years of follow-up were included. After intake, participants were interviewed on average 10 times (SD=3.2) over a mean of 93 months (SD=8.3). Youths and parents were interviewed for psychopathology, functioning, treatment, and familial psychopathology and functioning. Results: Latent class growth analysis showed four different longitudinal mood trajectories: "predominantly euthymic" (24.0%), "moderately euthymic" (34.6%), "ill with improving course" (19.1%), and "predominantly ill" (22.3%). Within each class, youths were euthymic on average 84.4%, 47.3%, 42.8%, and 11.5% of the follow-up time, respectively. Multivariate analyses showed that better course was associated with higher age at onset of mood symptoms, less lifetime family history of bipolar disorder and substance abuse, and less history at baseline of severe depression, manic symptoms, suicidality, subsyndromal mood episodes, and sexual abuse. Most of these factors were more noticeable in the "predominantly euthymic" class. The effects of age at onset were attenuated in youths with lower socioeconomic status, and the effects of depression severity were absent in those with the highest socioeconomic status. Conclusions: A substantial proportion of youths with bipolar disorder, especially those with adolescent onset and the above noted factors, appear to be euthymic over extended periods. Nonetheless, continued syndromal and subsyndromal mood symptoms in all four classes underscore the need to optimize treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Adolescent Development
*Bipolar Disorder
*Longitudinal Studies
*Prediction
Drug Abuse
Emotional States
Major Depression
Onset (Disorders)
Psychiatric Symptoms
Psychopathology
Sexual Abuse
Socioeconomic Status
Suicidal Ideation
Family History

Source: PsycINFO

17. Symptom outcome in early-onset bipolar disorder: Could be better, could be worse.

Citation: The American Journal of Psychiatry, September 2014, vol./is. 171/9(910-912), 0002-953X;1535-7228 (Sep 1, 2014)

Author(s): Carlson, Gabrielle A

Correspondence Address: Carlson, Gabrielle A., gabrielle.carlson@stonybrook.edu

Institution: Departments of Psychiatry and Pediatrics, Stony Brook University School of Medicine, Stony Brook, NY, US

Language: English

Abstract: This editorial comments on the article in the current issue by B. Birmaher et al (see record 2014-37845-012). The study of bipolar disorder in children has had its ups and downs. The diagnosis went from almost nonexistent to being so common that the DSM-5 committee felt compelled to sharpen the criteria and add a new diagnosis, disruptive mood dysregulation disorder, to decrease what was thought to be overdiagnosis. The
latest report from the Course and Outcome of Bipolar Youth (COBY) study, by Birmaher et al, also reverses the thinking that childhood-onset bipolar disorder has an invariably gloomy course. Briefly, children ages 7-17 with initially scrupulously diagnosed bipolar I or II disorder or bipolar disorder not otherwise specified were interviewed every 6 months or so about their weekly psychiatric status for the previous 6 months (i.e., prospectively collected retrospective data) for an average follow-up period of 8 years. Their moods and other clinical information were recorded and, for the purposes of this particular study, the presence or absence and the severity of mood symptoms on the mania and depression subscales of the Schedule for Affective Disorders and Schizophrenia for School-Age Children were ascertained. Using latent class growth analysis, a statistical procedure that helps identify homogeneous populations within a larger heterogeneous group, the authors identified four groups of study participants based on their 8-year clinical course. At the extremes were those who were "predominantly euthymic" during most of the followup period (24%) and those where were "predominantly ill" (22.3%). The two inbetween groups were "moderately euthymic" (34.6%) or were "ill with improving course " (19.1%). In fact, the "ill with improving course" group took about 3 years to change trajectories. Using latent class growth analysis to understand the possible range of outcomes is clearly a step forward. However, there are a number of other questions we would like answered: What differences in functional outcomes accompany these symptom groups? How many children have only one or two episodes and remit entirely (as opposed to remaining subsyndromatic)? What accounts for improvement at around 3 years after an episode in the "improving" group, and does treatment matter? Were index manic episodes in the "predominantly euthymic" group more in keeping with the shorter manic episode durations seen in adults? There is a need to reconcile the differences between studies in order to provide an informed picture of the future of the illness for families concerned with the early onset of a severe mental disorder. We need to know what to say when parents (or young patients) ask whether they will be "sick for the rest of their lives." Perhaps as with cancer, we can give them a comparable "5-year survival rate," hedging a bit depending on how complicated their clinical and psychosocial picture is. What we cannot yet tell them is how to change the trajectory of the illness into the "predominantly euthymic " one—and that, let's face it, is what they really want to know. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Adolescent Development
*Bipolar Disorder
*Longitudinal Studies
*Prediction
Drug Abuse
Emotional States
Major Depression
Onset (Disorders)
Psychiatric Symptoms
Psychopathology
Sexual Abuse
Socioeconomic Status
Suicidal Ideation
Family History

Source: PsycINFO

18. Decreased prefrontal cortical dopamine transmission in alcoholism.

Citation: The American Journal of Psychiatry, August 2014, vol./is. 171/8(881-888), 0002-953X;1535-7228 (Aug 1, 2014)

Author(s): Narendran, Rajesh; Mason, Neale Scott; Paris, Jennifer; Himes, Michael L; Douaihy, Antoine B; Frankle, W. Gordon

Correspondence Address: Narendran, Rajesh, narendranr@upmc.edu

Institution: Department of Radiology, University of Pittsburgh, Pittsburgh, PA, US
Abstract:
Objective: Basic studies have demonstrated that optimal levels of prefrontal cortical dopamine are critical to various executive functions such as working memory, attention, inhibitory control, and risk/reward decisions, all of which are impaired in addictive disorders such as alcoholism. Based on this and imaging studies of alcoholism that have demonstrated less dopamine in the striatum, the authors hypothesized decreased dopamine transmission in the prefrontal cortex in persons with alcohol dependence.

Method: To test this hypothesis, amphetamine and [C]FLB 457 positron emission tomography were used to measure cortical dopamine transmission in 21 recently abstinent persons with alcohol dependence and 21 matched healthy comparison subjects. [C]FLB 457 binding potential, specific compared to nondisplaceable uptake (BP ND), was measured in subjects with kinetic analysis using the arterial input function both before and after 0.5 mg kg 21 of d-amphetamine. Results: Amphetamine-induced displacement of [C]FLB 457 binding potential (DBPND) was significantly smaller in the cortical regions in the alcohol-dependent group compared with the healthy comparison group. Cortical regions that demonstrated lower dopamine transmission in the alcohol-dependent group included the dorsolateral prefrontal cortex, medial prefrontal cortex, orbital frontal cortex, temporal cortex, and medial temporal lobe. Conclusions: The results of this study, for the first time, unambiguously demonstrate decreased dopamine transmission in the cortex in alcoholism. Further research is necessary to understand the clinical relevance of decreased cortical dopamine as to whether it is related to impaired executive function, relapse, and outcome in alcoholism. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
20. Substance abuse and dependence among patients attending an emergency hospital in eastern Nile delta, Egypt.

Citation: African Journal of Psychiatry, March 2014, vol./is. 17/2(532-537), 1994-8220 (Mar 2014)

Author(s): Amr, Mostafa; El-Gilany, Abdel-Hady; El-Mogy, Ahmed; Fathi, Warda

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Institution: Department of Psychiatry, Mansoura University, Mansoura, Egypt; Department of Psychiatry, Mansoura University, Mansoura, Egypt; Department of Psychiatry, Mansoura University, Mansoura, Egypt; Department of Psychiatry, Mansoura University, Mansoura, Egypt

Language: English

Abstract: Background: Substance abuse and dependence are frequently encountered in emergency hospitals. The aims of this study were to estimate the prevalence of drug abuse and dependence among patients attending Emergency Hospitals and to describe the sociodemographic, clinical and psychiatric features of these patients. Secondary aims were to evaluate the type of medical care given to these patients and to assess the predictors of substance abuse and dependence. Methods: All 1,526 patients attending the Mansoura emergency hospital during the month of April 2012 were included in this study. Alcohol and illicit drug use were assessed using a questionnaire filled in by the patients and their relatives followed by an interview based on the Arabic version of Mini international neuropsychiatric interview (MINI) for the diagnosis of comorbid psychiatric disorders. Results: After exclusion of 155 cases, 1,317 patients were included: 108 (8%) with substance abuse and 47(3.5%) with substance dependence. Cannabis was the most common drug abused for 3.6% of patients followed by tramadol and polysubstance in 1.8%, 1.7% of patients respectively, whereas, tramadol ranked the first in the dependence group in 1.2% of patients followed by the cannab and stimulants in 1% and 0.5% of patients respectively. Multivariate regression analysis showed that being of younger age (< 30 years) (Odds ratio OR = 1.74), male and single with unsatisfactory income (OR = 3.71, 1.59 and 2.66 respectively) and diagnosed with psychiatric illness OR = 2.08) positively predict the abuse status included. Those with status of drug dependence had features similar to the status of abuse patients except regarding reason for hospital referral and the presence of psychiatric illness. Conclusion: About one in ten of the attendants presented with either substance abuse or dependence. This should be considered during history taking and clinical examination of patients referred to an emergency hospital particularly in male gender, single, younger age group with unsatisfactory income. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse
*Drug Dependency
*Mental Disorders
*Psychiatry
Health Care Services
Hospitals

Source: PsycINFO


Citation: Behavioural and Cognitive Psychotherapy, September 2014, vol./is. 42/5(593-604), 1352-4658;1469-1833 (Sep 2014)

Author(s): Smith, Neil; Hill, Robert; Marshall, Jane; Keany, Francis; Wanjiraratan, Shamil

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Institution: Central and North West London NHS Foundation Trust, London, United Kingdom; South London and Maudsley NHS Foundation Trust, London, United Kingdom; South London and Maudsley NHS Foundation Trust, London, United Kingdom; South London and Maudsley NHS Foundation Trust, London, United Kingdom; College of Medicine and Health Sciences, Abu Dhabi, United Arab Emirates

Language: English

Abstract: Background: Alcohol dependence is known to impact upon sleep, and poor sleep has been shown to affect relapse rates following treatment for alcohol dependence. Aims: The aim of this study was to investigate the association between sleep problems and relapse in dependent drinkers in an inpatient setting. This was done by studying sleep related cognitions in individuals undergoing medically assisted alcohol withdrawal. Method: Sleep and sleep-related cognitions data were collected for 71 individuals undergoing detoxification treatment. Sleep was measured using sleep diaries and actigraph motion monitors. Participants completed sleep-related cognition questionnaires and were subject to telephone follow-up interviews. The results were then used to predict relapse rates 4 weeks after discharge. Results: Longer sleep onset latency recorded on the unit predicted relapse at 4 weeks. Higher dysfunctional beliefs about sleep were found to be associated with lower relapse rates. Conclusions: This study suggests that some dysfunctional beliefs about sleep may support recovery following discharge from treatment. The study further supports the need for tailored cognitive-behavioural treatments for sleep difficulties in this population to reduce relapse rates. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: British Association for Behavioural and Cognitive Psychotherapies; YEAR: 2013

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcoholism
*Detoxification
*Relapse (Disorders)
*Sleep
Attitudes
Residential Care Institutions
Treatment

Source: PsycINFO

22. Recreational drug use and fluctuating asymmetry: Testing the handicap principle.

Citation: Evolutionary Psychology, 2014, vol./is. 12/1(769-782), 1474-7049 (2014)

Author(s): Borkowska, Barbara; Pawlowski, Boguslaw

Correspondence Address: Borkowska, Barbara, barbara.borkowska@antropo.uni.wroc.pl

Institution: Department of Human Biology, University of Wroclaw, Wroclaw, Poland; Department of Human Biology, University of Wroclaw, Wroclaw, Poland

Language: English

Abstract: Zahavi's handicap principle suggests that only organisms with good genetic quality can afford to engage in costly behaviors. Recreational drug use can be harmful to one's health and therefore might be viewed as a costly signal of one's genetic quality. One of the measurements of genetic quality is bodily symmetry assessed by fluctuating asymmetry. If unhealthy drug use is a behavioral example of Zahavi's handicap principle, then men who use different stimulants or recreational drugs should be more symmetrical than men who do not use them at all or use them only in low quantity. The aim of this study was to examine the relationships between drug use and fluctuating asymmetry. The subjects were 190 young women and 202 young men. Six bilaterally symmetrical traits were measured: length of II-V digits, wrist breadth, and ear height. Questionnaires included questions about smoking, alcohol drinking, drug use, and designer drug use. There was no relationship between bodily symmetry and smoking frequency, alcohol drinking frequency, drug or designer drug use, total substance use, age of smoking initiation, or
reason of this initiation. The results indicate that drug use does not reflect genetic quality and does not necessarily relate to the handicap hypothesis. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Usage *Genetics *Theories Alcohol Drinking Patterns Human Body Morphology Tobacco Smoking

Source: PsycINFO

23. Socio-psychological dimensions of mobile phone addiction and usage patterns amongst teenagers in higher institutions of learning in Kwara State.

Citation: International Journal of Information and Communication Technology Education, April 2014, vol./is. 10/2(1-3), 1550-1876;1550-1337 (Apr-Jun 2014)

Author(s): Titilope, Afolayan Oluyinka

Institution: Department of Information and Communication Science, University of Ilorin, Ilorin, Nigeria

Language: English

Abstract: Mobile phone addiction is now a common phenomenon in the 21st century, especially among teenagers due to the unusual cravings in the use of technological devices. In view of this phenomenon, the study examined the socio-psychological dimensions of mobile phone addiction and usage patterns amongst teenagers in three Higher Institutions of Learning in Kwara State, Nigeria. Descriptive and inferential statistical tools were utilized to analyze data collected on a sample size of 321 undergraduate teenage students whose selection were based on simple random sampling technique across three Higher Institutions of Learning which were the University of Ilorin, Kwara state University, and Al-Hikmah University respectively. Findings from the data analyses revealed uniformity in the usage patterns of teenagers in the use of their mobile devices. Significant positive relationships were also established between mobile addiction and socio-psychological dimensions such as loneliness, boredom, egoism, and self-independence at varying significant levels. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: Copying or distributing in print or electronic forms without written permission of IGI Global is prohibited.; HOLDER: IGI Global; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Addiction *Higher Education *Social Influences *Cellular Phones Technology

Source: PsycINFO

24. Intravenous administration and abuse of bupropion: A case report and a review of the literature.

Citation: Journal of Addiction Medicine, July 2014, vol./is. 8/4(290-293), 1932-0620;1935-3227 (Jul-Aug 2014)

Author(s): Oppek, Kirsten; Koller, Gabriele; Zwergal, Andreas; Pogarell, Oliver

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Institution: Department of Psychiatry and Psychotherapy, Ludwig-Maximilians-University Munich, Munich, Germany; Department of Psychiatry and Psychotherapy, Ludwig-Maximilians-University Munich, Munich, Germany; Department of Neurology, Ludwig-Maximilians-University Munich, Munich, Germany; Department of Psychiatry and Psychotherapy, Ludwig-Maximilians-University Munich, Munich, Germany

Language: English

Abstract: Introduction: Bupropion is an effective and well-tolerated second-generation antidepressant generally assumed to be without abuse potential. In the past years, several case reports about the recreational use of bupropion, mainly via nasal insufflation, have been published. Last year, a first case of intravenous bupropion dependence was reported. Case presentation: We present another case of intravenous administration of and dependence on bupropion in a 29-year-old woman with a history of polysubstance dependence, who consumed an extremely high daily dose of about 2400 mg of bupropion together with a daily oral dose of 2400 to 3600 mg of pregabalin. Discussion: The possible impact of bupropion on subjects with a history of polysubstance dependence is discussed; physicians should be careful when prescribing bupropion in these cases.

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Bupropion *Drug Dependency *Intravenous Drug Usage *Polydrug Abuse Antidepressant Drugs Drug Abuse Pregabalin

Source: PsycINFO

25. Associations between problematic Internet use and adolescents' physical and psychological symptoms: Possible role of sleep quality.

Citation: Journal of Addiction Medicine, July 2014, vol./is. 8/4(282-287), 1932-0620;1935-3227 (Jul-Aug 2014)

Author(s): An, Jing; Sun, Ying; Wan, Yuhui; Chen, Jing; Wang, Xi; Tao, Fangbiao

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Language: English

Abstract: Objective: To evaluate the associations between problematic Internet use (PIU) and physical and psychological symptoms among Chinese adolescents, and to investigate the possible role of sleep quality in this association. Methods: A cross-sectional school-based study was conducted in 4 cities in China. The Multidimensional Sub-health Questionnaire of Adolescents, the Pittsburgh Sleep Quality Index, and demographic variables were used
to measure adolescents' physical and psychological symptoms and sleep quality, respectively, in 13,723 students (aged 12-20 years). Problematic Internet use was assessed by the 20-item Young Internet Addiction Test. Logistic regressions were used to evaluate the effects of sleep quality and PIU on physical and psychological symptoms, and to identify the mediating effect of sleep quality in adolescents. Results: Prevalence rates of PIU, physical symptoms, psychological symptoms, and poor sleep quality were 11.7%, 24.9%, 19.8%, and 26.7%, respectively. Poor sleep quality was found to be an independent risk factor for both physical and psychological symptoms. The effects of PIU on the 2 health outcomes were partially mediated by sleep quality. Conclusions: Problematic Internet use is becoming a significant public health issue among Chinese adolescents that requires urgent attention. Excessive Internet use may not only have direct adverse health consequences but also have indirect negative effects through sleep deprivation. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Internet Addiction
*Sleep
*Symptoms

Source: PsycINFO

26. Powder and crack cocaine use among opioid users: Is all cocaine the same?

Citation: Journal of Addiction Medicine, July 2014, vol./is. 8/4(264-270), 1932-0620;1935-3227 (Jul-Aug 2014)

Author(s): Stewart, Melissa J; Fulton, Heather G; Barrett, Sean P

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Institution: Department of Psychology & Neuroscience, Dalhousie University, Halifax, NS, Canada; Burnaby Centre for Mental Health and Addiction, Burnaby, BC, Canada; Department of Psychology & Neuroscience, Dalhousie University, Halifax, NS, Canada

Language: English

Abstract: Objectives: Problematic cocaine use is highly prevalent and is a significant public health concern. However, few investigations have distinguished between the 2 formulations of cocaine (ie, powder and crack cocaine) when examining the characteristics of cocaine use. Moreover, research has yet to assess the patterns of powder and crack cocaine use among opioid users, a clinical population in which problematic cocaine use is increasingly common. Using a within-subjects design, this study examined whether opioid users reported different patterns and features of powder and crack cocaine use, along with distinct trajectories and consequences of use. Methods: Seventy-three clients enrolled in a low-threshold methadone maintenance treatment were interviewed regarding their lifetime use of powder and crack cocaine. Results: Compared with crack cocaine, initiation and peak use of powder cocaine occurred at a significantly younger age. In relation to recent cocaine use, participants were significantly more likely to report using crack cocaine than using powder cocaine. Differences in routes of administration, polysubstance use, and criminal activity associated with cocaine use were also found between the 2 forms of cocaine. Conclusions: Results suggest that it may not be appropriate to consider powder and crack cocaine as diagnostically and clinically equivalent. As such, researchers may wish to distinguish explicitly between powder and crack cocaine when assessing the characteristics and patterns of cocaine use among substance users and treat these 2 forms of cocaine separately in analyses. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal
27. A review of guidelines on home drug testing Web sites for parents.

Citation: Journal of Addiction Medicine, July 2014, vol./is. 8/4(258-263), 1932-0620;1935-3227 (Jul-Aug 2014)

Author(s): Washio, Yukiko; Fairfax-Columbo, Jaymes; Ball, Emily; Cassey, Heather; Arria, Amelia M; Bresani, Elena; Curtis, Brenda L; Kirby, Kimberly C

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Institution: Treatment Research Institute, Philadelphia, PA, US; Treatment Research Institute, Philadelphia, PA, US; Department of Psychological, Organizational, and Leadership Studies, Temple University, Philadelphia, PA, US; Prevention Research Center, University of Maryland School of Public Health, College Park, MD, US; Treatment Research Institute, Philadelphia, PA, US; Treatment Research Institute, Philadelphia, PA, US; Treatment Research Institute, Philadelphia, PA, US

Language: English

Abstract: Objectives: To update and extend prior work reviewing Web sites that discuss home drug testing for parents, and assess the quality of information that the Web sites provide, to assist them in deciding when and how to use home drug testing. Methods: We conducted a worldwide Web search that identified 8 Web sites providing information for parents on home drug testing. We assessed the information on the sites using a checklist developed with field experts in adolescent substance abuse and psychosocial interventions that focus on urine testing. Results: None of the Web sites covered all the items on the 24-item checklist, and only 3 covered at least half of the items (12, 14, and 21 items, respectively). The remaining 5 Web sites covered less than half of the checklist items. The mean number of items covered by the Web sites was 11. Conclusions: Among the Web sites that we reviewed, few provided thorough information to parents regarding empirically supported strategies to effectively use drug testing to intervene on adolescent substance use. Furthermore, most Web sites did not provide thorough information regarding the risks and benefits to inform parents' decision to use home drug testing. Empirical evidence regarding efficacy, benefits, risks, and limitations of home drug testing is needed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse
*Drug Usage Screening
*Home Environment
*Parents
*Websites

Source: PsycINFO


Citation: Alcohol and Alcoholism, September 2014, vol./is. 49/5(600), 0735-0414;1464-3502 (Sep-Oct 2014)

Author(s): Doolan, Jim

Institution: Lanark, United Kingdom
Reviews the book, Re/Entry: A Guide for Nurses Dealing with Substance Use Disorder by Karolyn Crowley and Carrie Morgan (2013). This book is written for nursing staff who have or had a substance use disorder (SUD) and who wish to return to/continue their chosen profession. The book is about recovery, re-establishing a career blighted by substance abuse or dependence. The authors write in a way that it is easily assimilated and understood; also shows considerable empathy towards the nurse in early recovery. The book makes reference to redirection. There is useful information and tentative guidelines for managers who are faced with employees with substance use disorder. The book is recommended this to all nursing staff and managers. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Aims: To document the attitudes of general practitioners (GPs) from eight European countries to alcohol and alcohol problems and how these attitudes are associated with self-reported activity in managing patients with alcohol and alcohol problems. Methods:
A total of 2345 GPs were surveyed. The questionnaire included questions on the GP's demographics, reported education and training on alcohol, attitudes towards managing alcohol problems and self-reported estimates of numbers of patients managed for alcohol and alcohol problems during the previous year. Results: The estimated mean number of patients managed for alcohol and alcohol problems during the previous year ranged from 5 to 21 across the eight countries. GPs who reported higher levels of education for alcohol problems and GPs who felt more secure in managing patients with such problems reported managing a higher number of patients. GPs who reported that doctors tended to have a disease model of alcohol problems and those who felt that drinking was a personal rather than a medical responsibility reported managing a lower number of patients. Conclusion: The extent of alcohol education and GPs’ attitudes towards alcohol were associated with the reported number of patients managed. Thus, it is worth exploring the extent to which improved education, using pharmacotherapy in primary health care and a shift to personalized health care in which individual patients are facilitated to undertake their own assessment and management (individual responsibility) might increase the number of heavy drinkers who receive feedback on their drinking and support to reduce their drinking. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcoholism
*Alcohols
*Drug Therapy
*General Practitioners
Health Care Services
Physicians

Source: PsycINFO

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

30. Translating the Semi-Structured Assessment for Drug Dependence and Alcoholism in the Western Pacific: Rationale, study design and reliability of alcohol dependence.

Citation: Alcohol and Alcoholism, September 2014, vol./is. 49/5(525-530), 0735-0414;1464-3502 (Sep-Oct 2014)

Author(s): Quinn, Amity E; Rosen, Rochelle K; McGearry, John E; Amoa, Francine; Kranzler, Henry R; Francazio, Sarah; McGarvey, Stephen T; Swift, Robert M

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Language: English

Abstract: Aims: The aims of this study were to develop a bilingual version of the Semi-Structured Assessment for Drug Dependence and Alcoholism (SSADDA) in English and Samoan and determine the reliability of assessments of alcohol dependence in American Samoa. Methods: The study consisted of development and reliability-testing phases. In the development phase, the SSADDA alcohol module was translated and the translation was evaluated through cognitive interviews. In the reliability-testing phase, the bilingual SSADDA was administered to 40 ethnic Samoans, including a sub-sample of 26
individuals who were retested. Results: Cognitive interviews indicated the initial
translation was culturally and linguistically appropriate except items pertaining to alcohol
tolerance, which were modified to reflect Samoan concepts. SSADDA reliability testing
indicated diagnoses of DSM-III-R and DSM-IV alcohol dependence were reliable.
Reliability varied by language of administration. Conclusion: The English/Samoan
version of the SSADDA is appropriate for the diagnosis of DSM-III-R alcohol
dependence, which may be useful in advancing research and public health efforts to
address alcohol problems in American Samoa and the Western Pacific. The translation
methods may inform researchers translating diagnostic and assessment tools into different
languages and cultures. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
(journal abstract)
Apharmaco-EEG-based assessment of the interaction between ethanol and zonisamide.

Citation: Alcohol and Alcoholism, September 2014, vol./is. 49/5(505-514), 0735-0414;1464-3502 (Sep-Oct 2014)

Author(s): Pietrzak, Boguslawa; Zwierzynska, Ewa; Krupa, Agata

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Language: English

Abstract: Aims: Recent research suggests a potential role for a new generation of anticonvulsant drugs, including zonisamide, in the treatment of alcohol dependence. Some elements of the central mechanism of action that zonisamide has in common with ethanol, give rise to the question of whether there is an interaction between these two agents and whether there is any risk associated with the enhanced depressive effect of these agents on the central nervous system. Methods: This study uses a pharmaco-EEG method to examine the interaction of ethanol with zonisamide. The influence of zonisamide on the effect of ethanol on EEG of rabbits (midbrain reticular formation, hippocampus, frontal cortex) was determined. Zonisamide was administered p.o. as a single dose (20 or 60 mg/kg) or repeatedly at a dose of 30 mg/kg/day for 14 days. Ethanol was injected i.v. at a dose of 0.8 g/kg 180 min after the administration of zonisamide. Results: Ethanol caused an increase in the low frequencies (0.5-4 Hz) in the recording, as well as a marked decrease in the higher frequencies (13-30 and 30-45 Hz). Changes in the EEG recordings after zonisamide alone were more significant compared with these after repeated doses. In the hippocampus after single dose of drug the proportion of the low frequency (0.5-4 Hz) increased, whereas the proportion of high frequencies decreased. Combined administration of ethanol and zonisamide (60 mg/kg) resulted in a markedly synergistic effect in the examined structures. A beneficial effect of repeatedly administered zonisamide on ethanol-induced EEG changes was observed, especially in the hippocampus. Conclusion: Zonisamide in repeated doses decreases the sensitivity of the hippocampus to ethanol, an observation that may be important in the treatment of alcohol addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Anticonvulsive Drugs
*Electroencephalography
*Rabbits
Alcoholism
Ethanol
33. BDNF SNPs are implicated in comorbid alcohol dependence in schizophrenia but not in alcohol-dependent patients without schizophrenia.

Citation: Alcohol and Alcoholism, September 2014, vol./is. 49/5(491-497), 0735-0414;1464-3502 (Sep-Oct 2014)

Author(s): Cheah, Sern-Yih; Lawford, Bruce R; Young, Ross McD; Connor, Jason P; Morris, Phillip; Voisey, Joanne

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Language: English

Abstract: Aims: The functional BDNF single nucleotide polymorphism (SNP) rs6265 has been associated with many disorders including schizophrenia and alcohol dependence. However, studies have been inconsistent, reporting both positive and negative associations. Comorbid alcohol dependence has a high prevalence in schizophrenia so we investigated the role of rs6265 in alcohol dependence in Australian populations of schizophrenia and alcohol-dependent patients. Methods: Two BDNF SNPs rs6265 and a nearby SNP rs7103411 were genotyped in a total of 848 individuals. These included a schizophrenia group (n = 157) and a second schizophrenia replication group (n = 235), an alcohol-dependent group (n = 231) that had no schizophrenia diagnosis and a group of healthy controls (n = 225). Results: Allelic association between rs7103411 and comorbid alcohol dependence was identified (P = 0.044) in the primary schizophrenia sample. In the replication study, we were able to detect allelic associations between both BDNF SNPs and comorbid alcohol dependence (rs6265, P = 0.006; rs7103411, P = 0.014). Moreover, we detected association between both SNPs and risk-taking behaviour after drinking (rs6265, P = 0.005; rs7103411, P = 0.009) and we detected strong association between both SNPs and alcohol dependence in males (rs6265, P = 0.009; rs7103411, P = 0.013) while females showed association with multiple behavioural measures reflecting repetitive alcohol consumption. Haplotype analysis revealed the rs6265-rs7103411 A/C haplotype is associated with comorbid alcohol dependence (P = 0.002). When these SNPs were tested in the non-schizophrenia alcohol-dependent group we were unable to detect association. Conclusion: We conclude that these BDNF SNPs play a role in development of comorbid alcohol dependence in schizophrenia while our data do not indicate that they play a role in alcohol-dependent patients who do not have schizophrenia. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcoholism
*Comorbidity
*Polymorphism
*Schizophrenia
Brain Derived Neurotrophic Factor

Source: PsycINFO

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

34. Monitoring of internet forums to evaluate reactions to the introduction of reformulated OxyContin to deter abuse.
Background: Reformulating opioid analgesics to deter abuse is one approach toward improving their benefit-risk balance. To assess sentiment and attempts to defeat these products among difficult-to-reach populations of prescription drug abusers, evaluation of posts on Internet forums regarding reformulated products may be useful. A reformulated version of OxyContin (extended-release oxycodone) with physicochemical properties to deter abuse presented an opportunity to evaluate posts about the reformulation in online discussions. Objective: The objective of this study was to use messages on Internet forums to evaluate reactions to the introduction of reformulated OxyContin and to identify methods aimed to defeat the abuse-deterrent properties of the product. Methods: Posts collected from 7 forums between January 1, 2008 and September 30, 2013 were evaluated before and after the introduction of reformulated OxyContin on August 9, 2010. A quantitative evaluation of discussion levels across the study period and a qualitative coding of post content for OxyContin and 2 comparators for the 26 month period before and after OxyContin reformulation were conducted. Product endorsement was estimated for each product before and after reformulation as the ratio of endorsing-to-discouraging posts (ERo). Post-to-preintroduction period changes in ERo (ie, ratio of ERos) for each product were also calculated. Additionally, post content related to recipes for defeating reformulated OxyContin were evaluated from August 9, 2010 through September 2013. Results: Over the study period, 45,936 posts related to OxyContin, 18,685 to Vicodin (hydrocodone), and 23,863 to Dilaudid (hydromorphone) were identified. The proportion of OxyContin-related posts fluctuated between 6.35 and 8.25 posts per 1000 posts before the reformulation, increased to 10.76 in Q3 2010 when reformulated OxyContin was introduced, and decreased from 9.14 in Q4 2010 to 3.46 in Q3 2013 in the period following the reformulation. The sentiment profile for OxyContin changed following reformulation; the post-to-preintroduction change in the ERo indicated reformulated OxyContin was discouraged significantly more than the original formulation (ratio of ERos = 0.43, P < .001). A total of 37 recipes for circumventing the abuse-deterrent characteristics of reformulated OxyContin were observed; 32 were deemed feasible (ie, able to abuse). The frequency of posts reporting abuse of reformulated OxyContin via these recipes was low and decreased over time. Among the 5677 posts mentioning reformulated OxyContin, 825 posts discussed recipes and 498 reported abuse of reformulated OxyContin by such recipes (41 reported injecting and 128 reported snorting). Conclusions: After introduction of physicochemical properties to deter abuse, changes in discussion of OxyContin on forums occurred reflected by a reduction in discussion levels and endorsing content. Despite discussion of recipes, there is a relatively small proportion of reported abuse of reformulated OxyContin via recipes, particularly by injecting or snorting routes. Analysis of Internet discussion is a valuable tool for monitoring the impact of abuse-deterrent formulations. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
35. Review of Ashamed no more: A pastor's journey through sex addiction.

Citation: Journal of Psychology and Christianity, 2014, vol./is. 33/2(194-195), 0733-4273 (Sum, 2014)

Author(s): Bassett, Rodney L

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Institution: Roberts Wesleyan College, Rochester, NY, US

Language: English

Abstract: Reviews the book, Ashamed No More: A Pastor's Journey through Sex Addiction by T. C. Ryan (see record 2012-24510-000). The book presents a story about redemption and sexual addiction that avoids salacious details while giving an honest and helpful account of what it means for the Holy Spirit to work in the life of a fallen, but loved, believer. The author makes a convincing case for the notion that there really is such a thing as sexual addiction. In addition, one gets a clear look at the arduousness and the ebb and flow of recovery work. There is an aura of grace about this book because the author has a clear sense of the grace extended to him. The book doesn't quite read like a novel, but it comes close: the kind of "novel" that encourages one to live better, love deeper, and bask in the love of God. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
Institution: Department of Applied Social Sciences, Hong Kong Polytechnic University, Hong Kong; Department of Applied Social Sciences, Hong Kong Polytechnic University, Hong Kong; Department of Applied Social Sciences, Hong Kong Polytechnic University, Hong Kong

Language: English

Abstract: This study examined the role of gender and bonding in Internet addiction in Hong Kong junior secondary school students. A total of 3,328 Secondary 1 (Grade 7) students responded to validated measures of positive youth development and Internet addiction. Consistent with the predictions, results showed gender differences in bonding, with adolescent girls showing a higher level of perceived bonding than did adolescent boys; adolescent boys also showed a higher level of Internet addiction symptoms than did girls. The findings provided support for the literature of the prediction of the positive youth development that bonding was related to risk behavior indexed by Internet addiction. The theoretical and practical implications of the findings are discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Adolescent Development  
*Internet Addiction  
*Sex Roles  
*Risk Assessment  
Human Sex Differences

Source: PsycINFO

37. Use of synthetic cannabinoids in patients with psychotic disorders: Case series.

Citation: Journal of Dual Diagnosis, July 2014, vol./is. 10/3(168-173), 1550-4263;1550-4271 (Jul 2014)

Author(s): Celofiga, Andreja; Koprivsek, Jure; Klavz, Janez

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Language: English

Abstract: An increasing number of synthetic cannabinoids have become available on the black market in recent years, and health professionals have seen a corresponding increase in use of these compounds among patients with psychiatric disorders. Unfortunately, there is almost no research available in the literature on this topic, and what little exists is based on case reports of individuals without psychiatric disorders. Synthetic cannabinoids are functionally similar to, but structurally different from, delta-9-tetrahydrocannabinol, the active principle in cannabis, and are problematic for many reasons. The psychotropic action of synthetic cannabinoids in patients with schizophrenia is unpredictable, with very diverse clinical presentations. These drugs can be much more potent than delta-9-tetrahydrocannabinol, they are readily available and difficult to detect. The gold standard for identification of synthetic cannabinoids is gas chromatography with mass spectrometry, but even this is difficult because new formulations of these designer drugs are constantly emerging. In this manuscript, we provide an overview and discussion of synthetic cannabinoids and present four cases of patients with synthetic cannabinoid intoxication who were hospitalized in our intensive psychiatric unit at the time of intoxication. All patients had a history of schizophrenia and had been hospitalized several times previously. While hospitalized, they smoked an unknown substance brought in by a visitor, which was then confirmed using gas chromatography with mass spectrometry to be the synthetic cannabinoid AM-2201. Our patients experienced predominantly psychiatric adverse clinical effects. We observed the appearance of new psychotic
phenomena, without exacerbation of their previously known psychotic symptoms, as well as the occurrence or marked worsening of mood and anxiety symptoms. Despite several similar reactions, and even though they ingested the same exact substance, the clinical picture differed markedly between individual patients. We assume that the acute effects of synthetic cannabinoids in patients with schizophrenia would be different from those in persons without psychotic disorders. The reasons for this difference could be the actual symptomatology of the presenting disorder, the impact of psychopharmacotherapy, individual patient differences and probably many, as yet unknown, factors. The long-term consequences of synthetic cannabinoid use on preexisting psychotic disorders are unclear. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Conference Information: International Congress on Dual Disorders. 3rd. Oct, 2013. Barcelona. Spain. Parts of this paper were presented as a poster at the aforementioned conference.

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Cannabinoids
*Drug Abuse
*Mental Disorders
Paranoid Schizophrenia
Side Effects (Drug)

Source: PsycINFO

38. Substance use and social anxiety in transsexual individuals.

Citation: Journal of Dual Diagnosis, July 2014, vol./is. 10/3(162-167), 1550-4263;1550-4271 (Jul 2014)

Author(s): Guzman-Parra, Jose; Paulino-Matos, Pedro; de Diego-Otero, Yolanda; Perez-Costillas, Lucia; Villena-Jimena, Amelia; Garcia-Encinas, Maria A; Bergero-Miguel, Trinidad

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Language: English

Abstract: Objective: This study examined social anxiety and use of cannabis and cocaine among transsexuals. Methods: A total of 379 transsexuals seeking treatment or consultation participated in this study, providing data on sociodemographics, substance use, and anxiety. Analyses were based on (a) lifetime but not current use versus never used and (b) current use only versus no current use (lifetime only or never used). Results: Lifetime only cannabis users (n = 72, 19%) and lifetime only cocaine users (n = 36, 9.8%) were older, had more victimization, and received more mental health treatment that those who never used. Current cannabis users (n = 47, 12.4%) had higher scores on fear of negative evaluation and social avoidance than those not currently using (p <.01). Multivariate analysis showed that social avoidance and fear of negative evaluation were associated with current cannabis use (p <.05), but not cocaine. Further, being single was associated with current cannabis use, after controlling for social avoidance and fear of negative evaluation (p <.05). Conclusions: Transsexuals' levels of anxiety and cannabis/cocaine use are comparable to those in the general population. Cannabis may be used to control anxiety and can have detrimental clinical implications for transsexuals. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Co-occurrence of mental disorders and substance use disorders (dual diagnosis) among doctors is a cause of serious concern due to its negative personal, professional, and social consequences. This work provides an overview of the prevalence of dual diagnosis among physicians, suggests a clinical etiological model to explain the development of dual diagnosis in doctors, and recommends some treatment strategies specifically for doctors. The most common presentation of dual diagnosis among doctors is the combination of alcohol use disorders and affective disorders. There are also high rates of self-medication with benzodiazepines, legal opiates, and amphetamines compared to the general population, and cannabis use disorders are increasing, mainly in young doctors. The prevalence of nicotine dependence varies from one country to another depending on the nature of public health policies. Emergency medicine physicians, psychiatrists, and anaesthesiologists are at higher risk for developing a substance use disorder compared with other doctors, perhaps because of their knowledge of and access to certain legal drugs. Two main pathways may lead doctors toward dual diagnosis: (a) the use of substances (often alcohol or self-prescribed drugs) as an unhealthy strategy to cope with their emotional or mental distress and (b) the use of substances for recreational or other purposes. In both cases, doctors tend to delay seeking help once a problem has been established, often for many years. Denial, minimization, and rationalization are common defense mechanisms, maybe because of the social stigma associated with mental or substance use disorders, the risk of losing employment/medical license, and a professional culture of perfectionism and denial of emotional needs or failures. Personal vulnerability
interacts with these factors to increase the risk of a dual diagnosis developing in some individuals. When doctors with substance use disorders accept treatment in programs specifically designed for them (Physicians' Health Programs), they show better outcomes than the general population. However, physicians with dual diagnosis have more psychological distress and worse clinical prognosis than those with substance use disorders only. Future studies should contribute to a better comprehension of the risk and protective factors and the evidence-based treatment strategies for doctors with dual diagnosis. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Conference Information: International Congress of Dual Pathology. 3rd. Oct, 2013. Barcelona. Spain. The content of this manuscript was partially presented at the aforementioned conference.

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse
*Mental Disorders
*Physicians
*Risk Factors
Dual Diagnosis

Source: PsycINFO

40. Dual diagnosis discourse in Victoria Australia: The responsiveness of mental health services.

Citation: Journal of Dual Diagnosis, July 2014, vol./is. 10/3(139-144), 1550-4263;1550-4271 (Jul 2014)

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Institution: Monash University, Department of Rural and Indigenous Health, VIC, Australia; Monash University, Department of Rural and Indigenous Health, School of Rural Health, VIC, Australia

Language: English

Abstract: Objective: In recent decades, psychiatric services have been challenged to be more responsive to patients' coexisting problems, in particular those concerning substance use. In Australia this has been referred to as a "No Wrong Door" approach. This paper explores the meanings of this move for the acute mental health sector, including attitudes toward a No Wrong Door approach to people with a dual diagnosis of mental illness and substance use disorder. Methods: This qualitative study involved a review of the research literatures, analysis of policy documents, and interviews with 19 key informants in a case study of the State of Victoria, Australia. Results: The analysis resulted in two broad themes surrounding the implications of dual diagnosis discourse for the mental health sector. The first involves progress regarding the concept of No Wrong Door with subthemes including interprofessional cultural conflicts, intersectoral professional status issues, terminology, problem definition, perspectives on serious mental illness, the role of the client, and pharmacological treatment. The second overarching theme focuses upon informants' thoughts on future directions for the sector and highlights divided opinion on the implications of dual diagnosis discourse for the mental health service and social care systems. Conclusions: While the perspectives on system change and multiple issues such as resource concerns and cultural clashes are presented here, the informants in this study also gave clear guidance for the future of dual diagnosis work in the mental health sector (e.g., focusing on orienting services toward consumer strengths and recovery), along with recommendations for future research. This paper contributes to the small body of qualitative research on the history and course of efforts to develop appropriate practice in mental health services with regard to patients who have substance use problems and other mental health disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
41. Barriers to implementation of treatment guidelines for ADHD in adults with substance use disorder.

**Citation:** Journal of Dual Diagnosis, July 2014, vol./is. 10/3(130-138), 1550-4263;1550-4271 (Jul 2014)

**Author(s):** Matthys, Frieda; Soyez, Veerle; van den Brink, Wim; Joostens, Peter; Tremmery, Sabine; Sabbe, Bernard

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**Language:** English

**Abstract:**
Objective: Attention deficit hyperactivity disorder (ADHD) is common among adult patients with a substance use disorder, yet often goes undetected. This is a qualitative study to explore implementation barriers to a guideline developed in Belgium for the recognition and treatment of ADHD in adult patients with substance use disorder and to gain a better understanding of the strategies to overcome these barriers. Methods: Focus groups were conducted with caregivers and patients to explore experiences with comorbid substance use disorder and ADHD. The barriers reported in these focus groups became the subject of further study in focus groups with addiction professionals (physicians, psychiatrists, and psychologists) who had tried the guideline and with psychiatrists specializing in addiction but without experience with ADHD. Results: Our analysis revealed a number of barriers to the implementation of this guideline, including lack of information from the family, pressure from patients and caregivers to make an ADHD diagnosis, and the potential for abuse of ADHD medication. Furthermore, diagnostic instruments for ADHD have not been validated in people with substance use disorder. Although patients with ADHD are usually treated in an outpatient setting, patients with ADHD comorbid with substance use disorder are difficult to identify in an outpatient setting for various reasons. Finally, there is a lack of specific ADHD expertise in substance use treatment organizations. Conclusions: Despite the availability of an approved guideline for recognizing and treating adult ADHD in patients with a substance use disorder, underdiagnosis and inadequate treatment still persist. As in general substance use treatment, medication only plays a supportive role in the treatment of substance use disorder with comorbid ADHD. An integrated approach and further improvements in the competence of practitioners may help to reduce the resistance to diagnosing ADHD in substance use treatment centers. Practitioners who specialize in addiction medicine and therapists without medical education view the problem from different perspectives and therefore each group needs specific information and training. Targeted interventions need to be developed to keep these patients in treatment.

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

**Conference Information:** World Psychiatric Association International Congress. Oct, 2013. Vienna, Austria. The study was presented at the aforementioned conference.
Contingency management for patients with dual disorders in intensive outpatient treatment for addiction.

Objective: This quality improvement program evaluation investigated the effectiveness of contingency management for improving retention in treatment and positive outcomes among patients with dual disorders in intensive outpatient treatment for addiction.

Methods: The effect of contingency management was explored among a group of 160 patients exposed to contingency management (n = 88) and not exposed to contingency management (no contingency management, n = 72) in a six-week partial hospitalization program. Patients referred to the partial hospitalization program for treatment of substance use and comorbid psychiatric disorders received diagnoses from psychiatrists and specialist clinicians according to the Diagnostic and Statistical Manual of the American Psychiatric Association. A unique application of the contingency management "fishbowl" method was used to improve the consistency of attendance at treatment sessions, which patients attended 5 days a week. Days attending treatment and drug-free days were the main outcome variables. Other outcomes of interest were depression, anxiety and psychological stress, coping ability, and intensity of drug cravings. Results: Patients in the contingency management group attended more treatment days compared to patients in the no contingency management group; M = 16.2 days (SD = 10.0) versus M = 9.9 days (SD = 8.5), respectively; t = 4.2, df = 158, p <.001. No difference was found between the treatment groups on number of drug-free days. Psychological stress and drug craving were inversely associated with drug-free days in bivariate testing (r = -.18, p <.02; r = -.31, p <.001, respectively). Treatment days attended and drug craving were associated with drug-free days in multivariate testing (B =.05, SE =.01, =.39, t = 4.9, p <.001; B = -.47; SE =.12, = -.30, t = -3.9, p <.001, respectively; Adj. R2 =.21). Days attending treatment partially mediated the relationship between exposure to contingency management and self-reported drug-free days. Conclusions: Contingency management is a valuable adjunct for increasing retention in treatment among patients with dual disorders in partial hospitalization treatment. Exposure to contingency management increases retention in treatment, which in turn contributes to increased drug-free days. Interventions for coping with psychological stress and drug cravings should be emphasized in intensive dual diagnosis group therapy. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
43. Professional confidence and job satisfaction: An examination of counselors’ perceptions in faith-based and non-faith-based drug treatment programs.

Citation: International Journal of Offender Therapy and Comparative Criminology, August 2014, vol./is. 58/8(975-992), 0306-624X;1552-6933 (Aug 2014)

Author(s): Chu, Doris C; Sung, Hung-En

Correspondence Address: Chu, Doris C.: Department of Criminology, Sociology, and Geography, Arkansas State University, Box 2003, State University, AR, US, 72467, dchu@astate.edu


Language: English

Abstract: Understanding substance abuse counselors' professional confidence and job satisfaction is important since such confidence and satisfaction can affect the way counselors go about their jobs. Analyzing data derived from a random sample of 110 counselors from faith-based and non-faith-based treatment programs, this study examines counselors' professional confidence and job satisfaction in both faith-based and non-faith-based programs. The multivariate analyses indicate years of experience and being a certified counselor were the only significant predictors of professional confidence. There was no significant difference in perceived job satisfaction and confidence between counselors in faith-based and non-faith-based programs. A majority of counselors in both groups expressed a high level of satisfaction with their job. Job experience in drug counseling and prior experience as an abuser were perceived by counselors as important components to facilitate counseling skills. Policy implications are discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Author(s); YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Counselor Attitudes *Drug Rehabilitation *Job Satisfaction *Self Confidence *Faith Counselors Drug Abuse

Source: PsycINFO

44. Why do some jail inmates not engage in treatment and services?

Citation: International Journal of Offender Therapy and Comparative Criminology, August 2014, vol./is. 58/8(914-930), 0306-624X;1552-6933 (Aug 2014)

Author(s): Meyer, Candace L; Tangney, June P; Stuewig, Jeffrey; Moore, Kelly E

Correspondence Address: Tangney, June P.: Department of Psychology, George Mason University, 4400 University Dr, Fairfax, VA, US, 22030, jtangney@gmu.edu

Institution: Private Practice, Herndon, VA, US; George Mason University, Fairfax, VA, US; George Mason University, Fairfax, VA, US; George Mason University, Fairfax, VA, US

Language: English

Abstract: Jail inmates represent a high-risk, multineed population. Why do some jail inmates not access available programs and services? Drawn from a longitudinal study, 261 adults were assessed shortly upon incarceration and reassessed prior to transfer or release from a county jail. Of the participants in need of treatment, 18.5% did not participate in any formal treatment programs or religious programs and services. Untreated inmates were disproportionately young and male and less likely to report preincarceration cocaine dependence. Treatment participation varied little as a function of race or symptoms of
mental illness. The most common reason for nonparticipation was the belief that one would not be around long enough to participate in programs. Other reasons were both institution-related and person-related in nature, including doubts about treatment efficacy, stigma concerns, lack of motivation, and lack of programs, especially addressing mental illness. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Author(s); YEAR: 2013
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Client Participation
*Drug Abuse
*Help Seeking Behavior
*Mental Disorders
*Prisoners
Prisons
Treatment Effectiveness Evaluation
Treatment

Source: PsycINFO

45. The influence of attributional style on substance use and risky sexual behavior among college students.

Citation: College Student Journal, 2014, vol./is. 48/2(325-336), 0146-3934 (Sum, 2014)
Author(s): Burnett, Audrey J; Sabato, Todd M; Wagner, Laurie; Smith, Amy
Institution: James Madison University, Harrisonburg, VA, US; James Madison University, Harrisonburg, VA, US; Kent State University, OH, US; Virginia Tech, VA, US
Language: English
Abstract: HIV, AIDS, STIs, and unwanted pregnancy continue to impact young adults in the U.S. at a disproportionate rate, particularly during the college years. Attributional style (i.e., locus of control) influences one's HIV risk. Internal locus of control indicates a lower risk of HIV infection, whereas external locus of control signals an increased risk of becoming infected with HIV. A sample of 1,874 university students aged 16-54 years were surveyed to determine if sexually active males versus females with external, unstable, and specific causal attribution (i.e., external locus of control) engaged in safer sexual practices (e.g., condom use) and lesser alcohol and legal illicit drug use. Results indicated that male students with an external attributional style engaged in a greater number of unsafe sexual behaviors (e.g., multiple partners) and higher amounts of alcohol and drug use than female students. Additionally, for both males and females, an internal attributional style was associated with greater drug use and a greater likelihood to engage in HIV-related risk behavior. Comprehensive sexual health and substance use education targeting college students should consider attributional style in relation to health promoting and protective behaviors. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Attribution
*College Students
*Drug Usage
*Sexual Risk Taking
HIV
Sexually Transmitted Diseases

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

46. Treatments for drug users in mental health institutions: Perspectives based on the psychoanalytic clinic.
Os tratamentos para usuários de drogas em instituições de saúde mental: Perspectivas a partir da clínica psicanalítica.

This paper presents an analysis of treatments provided to drug users from a psychoanalytic perspective. Specific aspects of the clinical direction of the treatment of addictions are discussed, with a special focus on the concepts of subject, jouissance and ethics, brought up through fragments of clinical cases. We conclude that the psychoanalytic clinic does contribute to such treatments by opening up possibilities for a repositioning of the subject and new ways to configure jouissance. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
and moderate risk students. A favorable treatment effect was found on mathematics achievement. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Usage
*Evaluation
*Middle Schools
*Prevention
*Risk Factors
Adolescent Development

Source: PsycINFO


Citation: Journal of Drug Education, 2013, vol./is. 43/3(255-275), 0047-2379;1541-4159 (2013)
Author(s): Klisch, Yvonne; Bowling, Kristi G; Miller, Leslie M; Ramos, Miguel A
Correspondence Address: Klisch, Yvonne: Rice University, Center for Technology in Teaching and Learning, 6100 Main Street, MS 120, Houston, TX, US, 77005, yklisch@gmail.com
Institution: Rice University, Center for Technology in Teaching and Learning, Houston, TX, US; Rice University, Center for Technology in Teaching and Learning, Houston, TX, US; Rice University, Center for Technology in Teaching and Learning, Houston, TX, US; University of Houston, Houston, TX, US
Language: English
Abstract: Two online science education games, in which players learn about the risks of prescription drug abuse in the context of investigating crimes, were evaluated to determine shifts of prescription drug abuse attitudes attributable to game exposure. High school students from grades 11 and 12 (n = 179) were assigned to one of the games and participated in a pretest, two game-play sessions, and a delayed posttest. Students in both groups demonstrated more negative attitudes toward prescription drug abuse after playing the game, driven by changes of students' normative beliefs and their ability to make the connection between prescription drug abuse and illicit drugs. A secondary aim was to assess gains in science knowledge; however, due to low internal consistency reliabilities of content measures, students' knowledge acquisition could not be determined. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Games
*Prescription Drugs
*Science Education
Attitudes
Drug Abuse
High School Students
High Schools

Source: PsycINFO

49. "Hot" cognition and dual systems: Introduction, criticisms, and ways forward.

Citation: Neuroeconomics, judgment, and decision making., 2015(157-180) (2015)
Author(s): Gladwin, Thomas E; Figner, Bernd
Institution: Radboud University, Nijmegen, Netherlands; Radboud University, Nijmegen, Netherlands
Language: English
Abstract: (from the chapter) Models distinguishing two types of processes or systems—typically one more automatic and/or affective-motivational, one more controlled and/or calculating-deliberative—are widespread in psychological science. However, such dual-process (or dual-system) models suffer from various problems and have been substantially criticized recently. In this chapter, we discuss these types of models, attempt to clarify terminology, discuss recent critiques at both empirical and theoretical levels, and suggest a more mechanistic explanation grounded in physiology and reinforcement learning of what makes "hot" processes hot. We discuss success stories and challenges related to these types of models in two illustrative fields, addiction and adolescent risk taking. Finally, we outline the basic ideas behind our R3 model—a reprocessing model, grounded in reinforcement learning that conceptualizes levels of reflectivity as emergent states of one single system, rather than a separate process or system—as a possible way forward to address and overcome problems of dual-process models. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: *Cognition *Cognitive Processes *Dual Process Models Learning Physiology Reinforcement
Source: PsycINFO


Citation: Frontiers in Psychiatry, July 2014, vol./is. 5/, 1664-0640 (Jul 9, 2014)
Author(s): Gilpin, Nicholas W
Correspondence Address: Gilpin, Nicholas W., nwgilpin@gmail.com
Institution: Department of Physiology, Louisiana State University Health Sciences Center New Orleans, New Orleans, LA, US
Language: English
Abstract: This editorial discusses brain reward and stress systems in addiction. Addiction to drugs and alcohol is a dynamic and multi-faceted disease process in humans, with devastating health and financial consequences for the individual and society at large. The main purpose of this Research Topic is to consolidate review and empirical articles by leaders in the addiction field that collectively explore the contribution of brain reward and stress systems in addiction. The articles in this Research Topic address various points of current emphasis in the addiction research field. One such area is the idea of individual differences. Also addressed in this set of articles is the notion that individual neurochemical systems may be critical for mediating not only abuse of more than one drug, but for mediating co-abuse of more than one drug in a single individual. Another area of major social concern that is currently receiving much attention in the addiction research field is the drive to understand the long-term effects of adolescent drug and alcohol exposure on brain and behavior. Collectively, the articles provide a snapshot of the current theoretical and experimental landscape in the addiction research field. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Brain *Drug Addiction
51. Cannabis use and dependence among French schizophrenic inpatients.

Citation: Frontiers in Psychiatry, July 2014, vol./is. 5/, 1664-0640 (Jul 15, 2014)

Author(s): Lejoyeux, Michel; Basquin, Anne; Koch, Marie; Embouazza, Houcine; Chalvin, Florence; Ilongo, Michalle

Correspondence Address: Lejoyeux, Michel: Department of Psychiatry and Addictive Medicine, Maison Blanche Hospital, Bichat-Claude Bernard Hospital, AP-HP, Paris Diderot University, Paris, France, 75018, Cedex 18, michel.lejoyeux@bch.aphp.fr

Institution: Department of Psychiatry and Addictive Medicine, Maison Blanche Hospital, Bichat-Claude Bernard Hospital, AP-HP, Paris Diderot University, Paris, France; Department of Psychiatry and Addictive Medicine, Maison Blanche Hospital, Bichat-Claude Bernard Hospital, AP-HP, Paris Diderot University, Paris, France; Department of Psychiatry and Addictive Medicine, Maison Blanche Hospital, Bichat-Claude Bernard Hospital, AP-HP, Paris Diderot University, Paris, France; Department of Psychiatry and Addictive Medicine, Maison Blanche Hospital, Bichat-Claude Bernard Hospital, AP-HP, Paris Diderot University, Paris, France; Department of Psychiatry and Addictive Medicine, Maison Blanche Hospital, Bichat-Claude Bernard Hospital, AP-HP, Paris Diderot University, Paris, France

Language: English

Abstract: Background: To assess the prevalence of cannabis use and dependence in a population of schizophrenic inpatients and to compare schizophrenics with and without cannabis consumption. Methods: One hundred one schizophrenic patients were examined during their first week of hospitalization. They answered the PANNS scale of schizophrenia, the CAGE and the Fagerstrom questionnaire, and the DSM-IV-TR criteria for cannabis, alcohol, opiates, and nicotine use dependence were checked. We also assessed socio-demographic characteristics, the motive of cannabis consumption, and the number of cannabis joints and alcoholic drinks taken. Results: The prevalence of cannabis consumption was 33.6% among schizophrenic inpatients. Schizophrenics consuming cannabis were younger than non-schizophrenics (33.3 vs. 44.7 years p < 0.0001), more often male (77 vs. 54%, p = 0.02) and had been hospitalized for the first time in psychiatry earlier (24.3 vs. 31.3 p = 0.003). Eighty-eight percent of cannabis consumers were dependent on cannabis. They were more often dependent on opiates (17 vs. 0%) and alcohol (32 vs. 7.4%, p = 0.001) and presented compulsive buying more often (48 vs. 27%, p = 0.04). Logistic regression revealed that factors associated to cannabis consumption among schizophrenics were cannabis dependence, male gender, pathological gambling, opiate dependence, number of joints smoked each day, and compulsive buying. Conclusion: 33.6% of the schizophrenic patients hospitalized in psychiatry consume cannabis and most of them are dependent on cannabis and alcohol. Hospitalization in psychiatry may provide an opportunity to systematically identify a dependence disorder and to offer appropriate information and treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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Citation: Frontiers in Psychiatry, July 2014, vol./is. 5/, 1664-0640 (Jul 16, 2014)

Author(s): Bernardin, Florent; Maheut-Bosser, Anne; Paille, Francois

Correspondence Address: Paille, Francois: Service d'Addictologie, CHU Nancy, Hopitaux de Brabois, Vandoeuvre, France, F-54550, secretariat.pr.paille@chu-nancy.fr

Institution: Service d'Addictologie, CHU Nancy, Vandoeuvre, France; Service d'Addictologie, CHU Nancy, Vandoeuvre, France; Service d'Addictologie, CHU Nancy, Vandoeuvre, France

Language: English

Abstract: Chronic excessive alcohol consumption induces cognitive impairments mainly affecting executive functions, episodic memory, and visuospatial capacities related to multiple brain lesions. These cognitive impairments not only determine everyday management of these patients, but also impact on the efficacy of management and may compromise the abstinence prognosis. Maintenance of lasting abstinence is associated with cognitive recovery in these patients, but some impairments may persist and interfere with the good conduct and the efficacy of management. It therefore appears essential to clearly define neuropsychological management designed to identify and evaluate the type and severity of alcohol-related cognitive impairments. It is also essential to develop cognitive remediation therapy so that the patient can fully benefit from the management proposed in addiction medicine units. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcoholism
*Cognitive Impairment
Brain Damage
Cognitive Rehabilitation
Episodic Memory
Visuospatial Ability
Executive Function

Source: PsycINFO


Citation: Frontiers in Psychiatry, July 2014, vol./is. 5/, 1664-0640 (Jul 17, 2014)

Author(s): Lijffijt, Marijn; Hu, Kesong; Swann, Alan C

Correspondence Address: Lijffijt, Marijn: Menninger Department of Psychiatry and Behavioral Sciences, Baylor College of Medicine, 1977 Butler Boulevard, Houston, TX, US, 77030, marijn.lijffijt@bcm.edu
Evidence Services | library.nhs.uk

Institution: Menninger Department of Psychiatry and Behavioral Sciences, Baylor College of Medicine, Houston, TX, US; Human Neuroscience Institute, Department of Human Development, Cornell University, Ithaca, NY, US; Menninger Department of Psychiatry and Behavioral Sciences, Baylor College of Medicine, Houston, TX, US

Language: English

Abstract: Childhood trauma and post-childhood chronic/repeated stress could increase the risk of a substance use disorder by affecting five stages of addiction illness-course: (a) initial experimentation with substances; (b) shifting from experimental to regular use; (c) escalation from regular use to abuse or dependence; (d) motivation to quit; and (e) risk of (re-)lapse. We reviewed the human literature on relationships between stress and addiction illness-course. We explored per illness-course stage: (i) whether childhood trauma and post-childhood chronic/repeated stress have comparable effects and (ii) whether effects cut across classes of substances of abuse. We further discuss potential underlying mechanisms by which stressors may affect illness-course stages for which we relied on evidence from studies in animals and humans. Stress and substances of abuse both activate stress and dopaminergic motivation systems, and childhood trauma and post-childhood stressful events are more chronic and occur more frequently in people who use substances. Stressors increase risk to initiate early use potentially by affecting trait-like factors of risk-taking, decision making, and behavioral control. Stressors also accelerate transition to regular use potentially due to prior effects of stress on sensitization of dopaminergic motivation systems, cross-sensitizing with substances of abuse, especially in people with high trait impulsivity who are more prone to sensitization. Finally, stressors increase risk for abuse and dependence, attenuate motivation to quit, and increase relapse risk potentially by intensified sensitization of motivational systems, by a shift from positive to negative reinforcement due to sensitization of the amygdala by corticotropin releasing factor, and by increased sensitization of noradrenergic systems. Stress generally affects addiction illness-course across stressor types and across classes of substances of abuse. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Addiction
*Drug Abuse
*Trauma
Stress

Source: PsycINFO


Citation: Current Psychiatry Reviews, 2014, vol./is. 10/2(156-167), 1573-4005 (2014)

Author(s): Mistry, Chetna J; Bawor, Monica; Desai, Dipika; Marsh, David C; Samaan, Zainab

Correspondence Address: Samaan, Zainab: McMaster University, Hamilton, ON, Canada, samaanz@mcmaster.ca

Institution: Arts & Science Undergraduate Program, McMaster University, Hamilton, ON, Canada; McMaster Integrative Neuroscience Discovery & Study (MiNDS), McMaster University, Hamilton, ON, Canada; Population Health Research Institute, Hamilton, ON, Canada; Northern Ontario School of Medicine, Sudbury, ON, Canada; Population Health Research Institute, Hamilton, ON, Canada

Language: English

Abstract: This narrative review aims to provide an overview of the impact of opioid dependence and the contribution of genetics to opioid dependence. Epidemiological data demonstrate...
that opioid dependence is a global trend with far-reaching effects on the social, economic, and health care systems. A review of classical genetic studies of opioid use suggests significant heritability of drug use behavior, however the evidence from molecular genetic studies is inconclusive. Nonetheless, certain genetic variants are important to consider given their role in the pathophysiology of addictive behavior. We undertook a literature review to identify the current state of knowledge regarding the role of genes in opioid dependence. Determining the association of genetic markers could change the current understanding of the various factors contributing to opioid dependence and therefore may improve recognition of individuals at risk for the disorder and prevention and treatment strategies. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Dependency
*Genetics
*Narratives
*Opiates
Heritability
Source: PsycINFO

55. Genetics: A window into the biology of the mind.

Citation: Current Psychiatry Reviews, 2014, vol./is. 10/2(89-90), 1573-4005 (2014)
Author(s): Bawor, Monica; Dennis, Brittany B; Samaan, Zainab
Correspondence Address: Samaan, Zainab: St. Joseph's Healthcare, 100 West 5th Street, Hamilton, ON, Canada, L8N 3K7, samaanz@mcmaster.ca
Institution: MiNDS Neuroscience Graduate Program, McMaster University, Hamilton, ON, Canada; Health Research Methodology Graduate Program, McMaster University, Hamilton, ON, Canada; Department of Clinical Epidemiology and Biostatistics, McMaster University, Hamilton, ON, Canada
Language: English
Abstract: This editorial provides an overview of the present issue of Current Psychiatry Reviews. This issue presents an insight into the current literature available on the role of genetics in psychiatry through a series of reviews. Collectively, the genetic determinants of psychiatric disorders including schizophrenia, attention deficit hyperactivity disorder (ADHD), autism, and addiction are explored and topics including psychopharmacogenetics, mitochondrial genetics, and the genetics of childhood behavioral disorders are reviewed. This issue also presents a novel approach to the study of genetic determinants of psychiatric illness that involves the mitochondrial genome instead of nuclear DNA. It is anticipated this comprehensive series can encourage readers to take a deeper look into the biological underpinnings of the brain, which harbors the mechanisms of thoughts, actions, and behavior seen in psychiatric illness. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Genetics
*Mental Disorders
*Psychiatry
*Scientific Communication
Source: PsycINFO

56. Synaptic changes induced by melanocortin signalling.

Citation: Nature Reviews Neuroscience, February 2014, vol./is. 15/2(98-110), 1471-003X (Feb 2014)
Evidence Services | library.nhs.uk

Author(s): Caruso, Vanni; Lagerstrom, Malin C; Olszewski, Pawel K; Fredriksson, Robert; Schioth, Helgi B

Correspondence Address: Schioth, Helgi B.: Department of Neuroscience, Uppsala University, Husargatan 3, Uppsala, Sweden, 75124, helgis@bmc.uu.se

Institution: Department of Neuroscience, Functional Pharmacology, Uppsala University, Uppsala, Sweden; Department of Neuroscience, Developmental Genetics, Uppsala University, Uppsala, Sweden; Department of Neuroscience, Functional Pharmacology, Uppsala University, Uppsala, Sweden; Department of Neuroscience, Functional Pharmacology, University, Uppsala, Sweden; Department of Neuroscience, Functional Pharmacology, Uppsala University, Uppsala, Sweden

Language: English

Abstract: The melanocortin system has a well-established role in the regulation of energy homeostasis, but there is growing evidence of its involvement in memory, nociception, mood disorders and addiction. In this Review, we focus on the role of the melanocortin 4 receptor and provide an integrative view of the molecular mechanisms that lead to melanocortin-induced changes in synaptic plasticity within these diverse physiological systems. We also highlight the importance of melanocortin peptides and receptors in chronic pain syndromes, memory impairments, depression and drug abuse, and the possibility of targeting them for therapeutic purposes. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Neural Receptors
*Peptides
*Synaptic Plasticity
Affective Disorders
Homeostasis
Memory
Pain
Cell Signaling

Source: PsycINFO

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

57. Pregnenolone limits effects of cannabis.

Citation: Nature Reviews Neuroscience, February 2014, vol./is. 15/2(66), 1471-003X (Feb 2014)

Author(s): Welberg, Leonie

Language: English

Abstract: Comments on an article by M. Vallee et al. (see record 2014-00873-002). In their paper, Vallee and colleagues investigated whether they also have a role in addiction. They found that a subcutaneous injection of THC greatly increased pregnenolone levels in the nucleus accumbens - among other brain areas - in rats and mice for at least 2 hours. Their findings suggest that pregnenolone is itself a neuroactive steroid and not merely a steroid precursor. (PsycINFO Database Record (c) 2014 APA, all rights reserved)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Cannabinoids
*Hormones
*Steroids
Brain
58. Characteristics of a national sample of victims of intimate partner violence (IPV) : Associations between perpetrator substance use and physical IPV.

Citation: Nordic Studies on Alcohol and Drugs, June 2014, vol./is. 31/3(261-270), 1458-6126 (Jun 2014)

Author(s): Lund, Ingunn Olea

Correspondence Address: Lund, Ingunn Olea, iol@sirus.no

Institution: Norwegian Institute for Alcohol and Drug Research (SIRUS), Norway

Language: English

Abstract: Background: This paper provides a characterisation of a national sample of intimate partner violence (IPV) victim shelter residents. The study also examines whether perpetrator substance use contributed to physical IPV in 2 subsamples: 1) Norwegian victims and perpetrators, and 2) immigrant victims and perpetrators. Methods: A national sample (N = 1363) of women at IPV shelters in Norway in 2011. Results: The majority (62.2%) of the women had immigrant background, and social security was the most common employment/income status (42.6%). A combination of psychological and physical IPV was most frequently reported (56.1%). Perpetrator substance use was common in the Norwegian sample (57.5%), while many in the immigrant sample (47.1%) were unsure about perpetrator substance use. Perpetrator substance use was associated with physical IPV in both subsamples. Conclusions: Immigrant IPV victims are overrepresented in the shelter population, as are women on social security. While substance use is associated with physical IPV among Norwegians and immigrants, the association is more obvious in the Norwegian sample. The high rates of immigrant women stating they are unsure about perpetrator substance use underscore the importance that future studies address this question in a culturally sensitive matter. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Crime Victims
*Drug Usage
*Intimate Partner Violence
*Perpetrators
Shelters

Source: PsycINFO

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

59. Childhood trauma and suicide risk in a sample of young individuals aged 14-35 years in southern Brazil.

Citation: Child Abuse & Neglect, July 2014, vol./is. 38/7(1191-1196), 0145-2134 (Jul 2014)

Author(s): Barbosa, Luana Porto; Quevedo, Luciana; da Silva, Giovanna Del Grande; Jansen, Karen; Pinheiro, Ricardo Tavares; Branco, Jeronimo; Lara, Diogo; Oses, Jean; da Silva, Ricardo Azevedo

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Suicide is among the main causes of death of people aged between 15 and 44 years old. Childhood trauma is an important risk factor for suicide. Hence, the objective of this study was to verify the relationship between childhood trauma and current suicide risk (suicidal behavior and ideation) in individuals aged 14-35 years, in the city of Pelotas, Brazil. This is a cross-sectional, population-based study. Sample selection was performed by clusters. Suicide risk was evaluated using the Mini International Neuropsychiatric Interview (MINI) and Childhood trauma was assessed with the Childhood Trauma Questionnaire (CTQ). Moreover, the participants responded to a questionnaire concerning socioeconomic status, work, and substance use. The sample was composed of 1,380 individuals. The prevalence of suicide risk was 11.5%. The prevalence figures of childhood trauma were 15.2% (emotional neglect), 13.5% (physical neglect), 7.6% (sexual abuse), 10.1% (physical abuse), and 13.8% (emotional abuse). Suicide risk was associated (p <.001) with gender, work, alcohol abuse, tobacco use, and all types of childhood trauma. The odds of suicide risk were higher in women (OR =1.8), people who were not currently working (OR =2.3), individuals who presented alcohol abuse (OR =2.6), and among tobacco smokers (OR =3.4). Moreover, suicide risk was increased in all types of trauma: emotional neglect (OR =3.7), physical neglect (OR =2.8), sexual abuse (OR =3.4), physical abuse (OR =3.1), and emotional abuse (OR =6.6). Thus, preventing early trauma may reduce suicide risk in young individuals. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Abstract: Addiction treatment is a long-term goal and therefore prefrontal-striatal regions regulating goal-directed behavior are to be associated with individual differences on treatment motivation. We aimed at examining the association between gray matter volumes in prefrontal cortices and striatum and readiness to change at treatment onset in cocaine users with and without personality disorders. Participants included 17 cocaine users without psychiatric comorbidities, 17 cocaine users with Cluster B disorders, and 12 cocaine users with Cluster C disorders. They completed the University of Rhode Island Change Assessment Scale, which measures four stages of treatment change (precontemplation, contemplation, action, and maintenance) and overall readiness to change, and were scanned in a 3T MRI scanner. We defined three regions of interest (ROIs): the ventromedial prefrontal cortex (including medial orbitofrontal cortex and subgenual and rostral anterior cingulate cortex), the dorsomedial prefrontal cortex (i.e., superior medial frontal cortex), and the neostriatum (caudate and putamen). We found that readiness to change correlated with different aspects of ventromedial prefrontal gray matter as a function of diagnosis. In cocaine users with Cluster C comorbidities, readiness to change positively correlated with gyrus rectus gray matter, whereas in cocaine users without comorbidities it negatively correlated with rostral anterior cingulate cortex gray matter. Moreover, maintenance scores positively correlated with dorsomedial prefrontal gray matter in cocaine users with Cluster C comorbidities, but negatively correlated with this region in cocaine users with Cluster B and cocaine users without comorbidities. Maintenance scores also negatively correlated with dorsal striatum gray matter in cocaine users with Cluster C comorbidities. We conclude that the link between prefrontal-striatal gray matter and treatment motivation is modulated by co-existence of personality disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
model has been repeatedly demonstrated in adult samples [for a meta-analysis, see Ref. (1)]. The purpose of this study was to test these processes as they relate to emerging alcohol use in adolescents. Specifically, the interactive effects of several measures of impulsive and reflective processes and working memory capacity (WMC) are examined as predictors of changes in alcohol use among adolescents. It was expected that measures of reflective processes would better predict changes in alcohol use than measures of impulsive processes. Moreover, it was anticipated that WMC would moderate the relation between alcohol-specific impulsive and reflective processes and changes in adolescent alcohol use.

Methods: The sample consisted of 427 adolescents (47.7% male) between 12 and 16 years of age (M = 13.96, SD = 0.78) who reported drinking alcohol at least once. Four measures of impulsive processes were included. Attentional bias for alcohol was assessed with a Visual Probe Test; approach bias toward alcohol was assessed with a Stimulus Response Compatibility (SRC) Test; and memory associations with alcohol were assessed with an Implicit Association Test (IAT) and a Word Association Test. Two measures of reflective measures were included: positive and negative expectancies. WMC was measured using a Self-Ordered Pointing Task.

Results: Results showed that positive expectancies predicted changes in alcohol use, but this effect was qualified by an interaction with IAT scores. Moreover, SRC scores predicted changes in alcohol use only when negative expectancies were low. Attentional bias and word association scores did not predict changes in alcohol use. The relations between alcohol-specific processes or reflective processes and alcohol use were not moderated by WMC.

Conclusion: Although there is empirical evidence for the validity of the model in predicting heavier alcohol use in adolescents, or alcohol abuse and dependence in adults, these observations do not generalize to a sample of normative, early adolescents. More specifically, results indicated that reflective processes are more important predictors of changes in alcohol use than impulsive process during adolescence.
working, we also want to give a description of what it is like to be a social worker within the multi-disciplinary team. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: GAPS; YEAR: 2013

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

**Subject Headings:**
- *Adjudication*
- *Child Welfare*
- *Social Workers*
- Alcohol Abuse
- Drug Abuse
- Family

**Source:** PsycINFO

### 63. Attachment styles, drug abuse and the severity of intimate partner violence.

**Original Title:** L'influence de l'attachement et de la consommation de drogues sur la severite de la violence conjugale.

**Citation:** Revue Quebecoise de Psychologie, 2013, vol./is. 34/3(135-153), 0225-9885 (2013)

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**Language:** French

**Abstract:** The goal of the present study is to evaluate the link between attachment styles and the severity of intimate partner violence perpetrated by men. A total of 80 men registered in a group treatment for intimate partner violence have completed measures of intimate partner violence, attachment style, and alcohol and drug abuse. Multiple regressions indicated that avoidant attachment style is the most significant predictor of intimate partner abuse severity. These results suggest that attachment style should be taken into account in research models as well as clinical intervention for intimate partner violence. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:**
- *Attachment Behavior*
- *Drug Abuse*
- *Group Psychotherapy*
- *Intimate Partner Violence*

**Source:** PsycINFO

### 64. Recreational drug use and binge drinking: Stimulant but not cannabis intoxication is associated with excessive alcohol consumption.

**Citation:** Drug and Alcohol Review, July 2014, vol./is. 33/4(436-445), 0959-5236;1465-3362 (Jul 2014)

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Abstract: Introduction and Aims: Binge drinking is elevated among recreational drug users, but it is not clear whether this elevation is related to intoxication with recreational drugs. We examined whether stimulant intoxication and cannabis intoxication were associated with binge drinking among young adults. Design and Methods: An online survey of 18- to 30-year-old Australians who had drunk alcohol in the past year (n = 1994) were quota sampled for: (i) past year ecstasy use (n = 497); (ii) past year cannabis (but not ecstasy) use (n = 688); and (iii) no ecstasy or cannabis use in the past year (alcohol-only group, n = 809). Binge drinking last Saturday night (five or more drinks) was compared for participants who took stimulants (ecstasy, cocaine, amphetamine or methamphetamine) or cannabis last Saturday night. Results: Ecstasy users who were intoxicated with stimulants (n = 91) were more likely to binge drink than ecstasy users who were not (n = 406) (89% vs. 67%), after adjusting for demographics, poly-drug use and intoxication with cannabis and energy drinks (adjusted odds ratio 3.1, P = 0.007), drinking a median of 20 drinks (cf. 10 drinks among other ecstasy users). Cannabis intoxication was not associated with binge drinking among cannabis users (57% vs. 55%) or ecstasy users (73% vs. 71%). Binge drinking was more common in all of these groups than in the alcohol-only group (34%). Discussion and Conclusions: Stimulant intoxication, but not cannabis intoxication, is associated with binge drinking among young adults, compounding already high rates of binge drinking among people who use these drugs. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
of psychostimulant use. The session lasted a median of 20 h, and in most cases, simultaneous drug use was the norm, and large quantities of alcohol, psychostimulants and other drugs were consumed. Acquisition of illicit drugs commonly occurred through social networks during the course of the session and significant sums of money were reportedly spent. Discussion and Conclusions: Findings point to a range of priorities for future research and public health interventions aimed at young psychostimulant users, focused primarily on reducing the prevalence and consequences of simultaneous and heavy/binge drug use. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
Abstract:
Individuals with substance use disorders are more likely to have antisocial and borderline personality disorder than non-substance abusers. Recently, research has examined the relations between early maladaptive schemas and personality disorders, as early maladaptive schemas are believed to underlie personality disorders. However, there is a dearth of research on the relations between early maladaptive schemas and personality disorders among individuals seeking treatment for substance abuse. The current study examined the relations among early maladaptive schemas and antisocial and borderline personality within in a sample of men seeking substance abuse treatment (n = 98). Results demonstrated that early maladaptive schema domains were associated with antisocial and borderline personality symptoms. Implications of these findings for substance use treatment and research are discussed. Copyright 2013 John Wiley & Sons, Ltd. Key Practitioner Message Antisocial (ASPD) and Borderline (BPD) personality disorder symptoms are prevalence among individuals seeking substance abuse treatment. Early maladaptive schemas are believed to underlie the development of ASPD and BPD symptoms, and are also prevalence among individuals seeking substance use treatment. Findings from the current study suggest that specific early maladaptive schema domains predict ASPD and BPD symptoms in a substance abuse treatment seeking sample of adult males. The treatment of ASPD and BPD among men seeking substance use treatment may want to focus on early maladaptive schemas. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
in clinical settings. However, students still check the time on their mobile phones during psychoeducation groups, take vital signs using a mobile phone, or decide impulsively to take a photograph of hospital grounds using their electronic devices. What can we do about this social phenomena—because technology is not going away. Other disciplines are writing, conducting research, and treating clients with Internet addiction. Where is the nursing science on this topic? Psychiatric-mental health nurses should take the lead in education, prevention, and treatment of Internet disorders— and they should start now. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Country of Publication: HOLDER: SLACK Incorporated
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Internet Addiction
*Mental Health
*Psychiatric Nurses
*Interpersonal Relationships
Cellular Phones
Source: PsycINFO
Full Text: Available from ProQuest in Journal of Psychosocial Nursing and Mental Health Services; Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

69. Putting a face on the prescription opioid epidemic: A case report.

Citation: General Hospital Psychiatry, July 2014, vol./is. 36/4(e1-e2), 0163-8343 (Jul 2014)
Author(s): Taylor, Jacob L; McKibben, Rebeccah A; DeCamp, Matthew; Chisolm, Margaret S
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Language: English
Abstract: Skilled clinical decision making in the diagnosis and treatment of chronic pain can create unique clinical and ethical challenges, particularly when opioid medications are involved. This report presents the case of a pregnant woman who sought treatment for an illicit opioid dependence, initiated by opioid analgesic treatment of chronic pain. While recognizing opioids' high level of effectiveness for pain relief, the case demonstrates the potential harms of opioid medications for particular patients. Using a framework informed by medical ethics, the report discusses how clinicians might assess the benefits and risks of opioid treatment by careful data gathering, knowledge of the evidence base and patient-centered, shared decision making. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Abuse
*Epidemics
*Opiates
Chronic Pain
Clinical Practice
Decision Making
Source: PsycINFO
Full Text: Available from Elsevier in General Hospital Psychiatry
70. The complex clinical picture of benzodiazepine misuse.

Citation: General Hospital Psychiatry, July 2014, vol./is. 36/4(e5-e6), 0163-8343 (Jul 2014)

Author(s): Bharadwaj, Rahul Subramanian

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Institution: Macarthur Mental Health Service, South Western Sydney Local Health District, University of Western Sydney, Campbelltown, NSW, Australia

Language: English

Abstract: Presents a case report which describes a young man who presented several times to our hospital over a 6-month period and highlights the complex and risky clinical picture that can result from benzodiazepine misuse. In this case, the presence of numerous symptoms occurring in atypical patterns made for a confusing clinical picture only further complicated by the patient's frequent lack of cooperation and his persistent denial of benzodiazepine misuse. It is imperative to have a high index of suspicion for substance intoxication and withdrawal, particularly in ED and acute inpatient settings. As highlighted here, although none of the features described in the case are atypical of benzodiazepine intoxication and major (or complicated) benzodiazepine withdrawal-"hypomanic" features such as loquacity, mood liability and disinhibition of sexual and aggressive impulses; depressive symptoms such as depressed mood, crying spells, social withdrawal and suicidal thinking; psychotic symptoms; and retrograde and anterograde amnesia-it is the high index of suspicion in a confusing clinical picture that leads to identifying benzodiazepine misuse as the central feature in this case. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Benzodiazepines
*Drug Abuse
*Suicidal Ideation
*Toxic Disorders

Source: PsycINFO

Full Text: Available from Elsevier in General Hospital Psychiatry

71. A curriculum to address family medicine residents' skills in treating patients with chronic pain.

Citation: International Journal of Psychiatry in Medicine, 2014, vol./is. 47/4(327-336), 0091-2174;1541-3527 (2014)

Author(s): Smith, Corey D

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Institution: Lincoln Family Medicine Program, Lincoln, NE, US

Language: English

Abstract: Chronic pain is a challenging condition, both for the patient, who is coping with constant pain and limitations in functionality, and for the treating physician. Narcotic medications, often used for the treatment of chronic pain, can be addictive and rates of overdose deaths associated with their use have increased significantly in the last 10 years [1]. Behavioral and physician faculty at the Lincoln Family Medicine Center developed a curriculum to improve family medicine residents' skills in the treatment of patients with chronic pain. The experience includes education in pain physiology and assessment, administration of medications, adjunctive treatments, and interactions with difficult patients. Two cohorts of residents have participated in the curriculum with positive results. The curriculum may be helpful for primary care providers with privileges to prescribe narcotic medications
and is targeted towards resident physicians. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Chronic Pain
*Curriculum
*Family Medicine
*Medical Residency
*Physicians
Source: PsycINFO

72. Addiction and temporal bandwidth.
Citation: International Journal of Psychoanalytic Self Psychology, July 2014, vol./is. 9/3(246-262), 1555-1024;1940-9141 (Jul 2014)
Author(s): Goldin, Daniel
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Institution: Private Practice, South Pasadena, CA, US
Language: English
Abstract: Psychoanalytic thinkers tend to conflate addiction with the use of substances. At any moment of use, a substance can have emotion-regulating qualities and may even appear to be a symbolic substitute for a person or a function (a theory at the heart of the self-psychological approach to compulsive substance use). However, addiction-as opposed to use-is a state that happens over time and represents a loss of choice. It is my belief that far from being a symbolic act, addiction is an anti-symbolic state, plucking an individual from a narrative mode of being, which requires a human context and a broad, dynamic sense of time, to a conditioned mode or a somatic feedback mode, which relies largely on positive and negative reinforcement and tends to narrow temporal horizons. A tenet of this article is that a rigidly narrow subjective sense of time, what I call "low temporal bandwidth," is the most prominent feature in a person's vulnerability to addiction, a feature linked to a conditioned mode of being, as opposed to a narrative mode. This article traces some of the early relational pathways to low temporal bandwidth and explores how a new human context in therapy, centered on the elaboration of emotional states into narratives, can allow for more flexible, dynamic temporal bandwidth that often dramatically loosens the pull of addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The International Association for Psychoanalytic Self Psychology
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Addiction
*Feedback
*Psychoanalysis
*Temporal Frequency
*Visual Contrast
Source: PsycINFO

73. PTSD risk associated with a functional DRD2 polymorphism in heroin-dependent cases and controls is limited to amphetamine-dependent individuals.
Citation: Addiction Biology, July 2014, vol./is. 19/4(700-707), 1355-6215;1369-1600 (Jul 2014)
Author(s): Nelson, Elliot C; Heath, Andrew C; Lynskey, Michael T; Agrawal, Arpana; Henders, Anjali K; Bowdler, Lisa M; Todorov, Alexandre A; Madden, Pamela A. F; Moore, Elizabeth; Degenhardt, Louisa; Martin, Nicholas G; Montgomery, Grant W
Abstract: Posttraumatic stress disorder (PTSD), a pathologic response to severe stress, is a common co-morbid disorder in substance-dependent individuals. Evidence from twin studies suggests that PTSD is moderately heritable. Genetic association studies to date have reported a limited number of replicated findings. We conducted a candidate gene association study in trauma-exposed individuals within the Comorbidity and Trauma Study's sample (1343 heroin-dependent cases and 406 controls from economically disadvantaged neighborhoods). After data cleaning, the 1430 single nucleotide polymorphisms (SNPs) retained for analyses provided coverage of 72 candidate genes and included additional SNPs for which association was previously reported as well as 30 ancestry-informative markers. We found a functional DRD2 promoter polymorphism (rs12364283) to be most highly associated with PTSD liability [odds ratio (OR) 1.65 (1.27-2.15); P = 1.58 x 10^-4]; however, this association was not significant, with a stringent Bonferroni correction for multiple comparisons. The top hits include SNPs from other dopaminergic system genes: DRD2 DRD3, TH and DBH. Additional analyses revealed that the association involving rs12364283 is largely limited to amphetamine-dependent individuals. Substantial risk is observed in amphetamine-dependent individuals, with at least one copy of this SNP [OR 2.86 (1.92-4.27); P = 2.6 x 10^-7]. Further analyses do not support extensive mediation of PTSD risk via self-reported impulsivity (BIS total score). These findings suggest roles for impairment in inhibitory control in the pathophysiology of PTSD and raise questions about stimulant use in certain populations (e.g. those in combat). (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Abstract: Blunted cortisol responses to stress or trauma have been linked with genetic (familial) risk for both alcoholism and post-traumatic stress disorder (PTSD). Mouse lines selectively bred for high (HAP) or low (LAP) alcohol preference may be a relevant model of genetic risk for co-morbid alcoholism and PTSD in humans. HAP mice show greater fear-potentiated startle (FPS), a model used to study PTSD, than LAP mice. The relation between corticosterone (CORT) and FPS behavior was explored in four experiments. Naive male and female HAP2 and LAP2 mice received fear-conditioning or control treatments, and CORT levels were measured before and immediately after fear-conditioning or FPS testing. In two other experiments, HAP2 mice received CORT (1.0, 5.0 or 10.0 mg/kg) or a glucocorticoid receptor antagonist (mifepristone; 25.0 and 50.0 mg/kg) 30 minutes before fear conditioning. HAP2 mice exposed to fear conditioning and to control foot shock exposures showed lower CORT after the fear-conditioning and FPS testing sessions than LAP2 mice. A trend toward higher FPS was seen in HAP2 mice pretreated with 10.0 mg/kg CORT, and CORT levels were the lowest in this group, suggesting negative feedback inhibition of CORT release. Mifepristone did not alter FPS. Overall, these results are consistent with data in humans and rodents indicating that lower cortisol/CORT levels after stress are associated with PTSD/PTSD-like behavior. These findings in HAP2 and LAP2 mice suggest that a blunted CORT response to stress may be a biological marker for greater susceptibility to develop PTSD in individuals with increased genetic risk for alcoholism. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Abstract Experimental evidence suggests that endogenous opioids play an important role in the development of ethanol addiction. In this study, we employed two mouse lines divergently bred for opioid-mediated stress-induced analgesia: HA (high analgesia line) mice, LA (low analgesia line) mice, having lower opioid receptor system activity, manifest enhanced basal as well as stress-induced ethanol drinking. Here, we found that recently discovered C320T transition in exon 2 of the -opioid receptor gene (EU446125.1), which results in an A107V substitution (ACA23171.1), leads to higher ethanol preference in CT mice compared with CC homozygotes. This genetic association is particularly evident under chronic mild stress (CMS) conditions. The interaction between stress and ethanol intake was significantly stronger in HA than in LA mice. Ethanol almost completely attenuated the pro-depressive effect of CMS (assessed with the tail suspension test) in both the CC and CT genotypes in the HA line. In the LA mice, a lack of response to ethanol was observed in the CC genotype, whereas ethanol consumption strengthened depressive-like behaviours in CT individuals. Our results suggest that constitutively active A107V substitution in -opioid receptors may be involved in stress-enhanced vulnerability to ethanol abuse and in the risk of ethanol dependence. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
access to methamphetamine, the mice exhibited a decreased preference for increasing methamphetamine concentrations. However, male gp120-tg mice showed a decreased preference for methamphetamine at lower concentrations than non-tg male mice. gp120-tg mice developed methamphetamine-induced conditioned place preference at lower methamphetamine doses compared with non-tg mice. No differences in methamphetamine pharmacokinetics were found between genotypes. These results indicate that gp120-tg mice exhibit no deficits in associative learning or reward/motivational function for a natural reinforcer. Interestingly, gp120 expression resulted in increased preference for methamphetamine and a highly palatable non-drug reinforcer (saccharin) and increased sensitivity to methamphetamine-induced conditioned reward. These data suggest that HIV-positive individuals may have increased sensitivity to methamphetamine, leading to high methamphetamine abuse potential in this population. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse  
*Drug Sensitivity  
*Methamphetamine  
*Proteins  
*Pharmacokinetics  
HIV  
Mice  
Rewards

Source: PsycINFO

Full Text: Available from Wiley in Addiction Biology

77. The heritability of oxycodone reward and concomitant phenotypes in a LG/J x SM/J mouse advanced intercross line.

Citation: Addiction Biology, July 2014, vol./is. 19/4(552-561), 1355-6215;1369-1600 (Jul 2014)

Author(s): Bryant, Camron D; Guido, Michael A; Kole, Loren A; Cheng, Riyan

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Language: English

Abstract: Abstract The rewarding property of opioids likely contributes to their abuse potential. Therefore, determining the genetic basis of opioid reward could aid in understanding the neurobiological mechanisms of opioid addiction, provided that it is a heritable trait. Here, we characterized the rewarding property of the widely abused prescription opioid oxycodone (OXY) in the conditioned place preference (CPP) assay using LG/J and SM/J parental inbred mouse strains and 17 parent-offspring families of a LG/J x SM/J F47/F48 advanced intercross line (AIL). Following OXY training (5 mg/kg, i.p.), SM/J mice and AIL mice, but not LG/J mice, showed an increase in preference for the OXY-paired side, suggesting a genetic basis for OXY-CPP. SM/J mice showed greater OXY-induced locomotor activity than LG/J mice in response to both saline and OXY. LG/J, SM/J, and AIL mice all exhibited robust OXY-induced locomotor sensitization. Narrow-sense heritability (h2) estimates of the phenotypes using linear regression and maximum likelihood estimation showed good agreement (r = 0.91). OXY-CPP was clearly not a heritable trait whereas drug-free- and OXY-induced locomotor activity and sensitization were significantly and sometimes highly heritable (h2 = 0.30-0.84). Interestingly, the number of transitions between the saline- and OXY-paired sides emerged as a reliably heritable trait following
OXY training ($h^2 = 0.46-0.66$) and could represent a genetic component of drug-seeking behavior. Thus, although OXY-CPP does not appear to be amenable to genome-wide quantitative trait locus mapping, this protocol will be useful for mapping other traits potentially relevant to opioid abuse. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:**
- *Heritability*
- *Neurobiology*
- *Opiates*
- Mice
- Rewards

**Source:** PsycINFO

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

### 78. Individual differences in cocaine addiction: Maladaptive behavioural traits.

**Citation:** Addiction Biology, July 2014, vol./is. 19/4(517-528), 1355-6215;1369-1600 (Jul 2014)

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**Language:** English

**Abstract:** Abstract Cocaine use leads to addiction in only a subset of individuals. Understanding the mechanisms underlying these individual differences in the transition from cocaine use to cocaine abuse is important to develop treatment strategies. There is agreement that specific behavioural traits increase the risk for addiction. As such, both high impulsivity and high anxiety have been reported to predict (compulsive) cocaine self-administration behaviour. Here, we set out a new view explaining how these two behavioural traits may affect addictive behaviour. According to psychological and psychiatric evolutionary views, organisms flourish well when they fit (match) their environment by trait and genotype. However, under non-fit conditions, the need to compensate the failure to deal with this environment increases, and, as a consequence, the functional use of rewarding drugs like cocaine may also increase. It suggests that neither impulsivity nor anxiety are bad per se, but that the increased risk to develop cocaine addiction is dependent on whether behavioural traits are adaptive or maladaptive in the environment to which the animals are exposed. This 'behavioural (mal)adaptation view' on individual differences in vulnerability to cocaine addiction may help to improve therapies for addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Authors, Addiction Biology-Society for the Study of Addiction; **YEAR:** 2013

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

**Subject Headings:**
- *Behavioral Contrast*
- *Cocaine*
- *Drug Addiction*
- *Impulsiveness*
- *Individual Differences*
79. The German version of the Generalized Pathological Internet Use Scale 2: A validation study.

Citation: Cyberpsychology, Behavior, and Social Networking, July 2014, vol./is. 17/7(474-482), 2152-2715;2152-2723 (Jul 2014)

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Language: English

Abstract: The Generalized Pathological Internet Use Scale (GPIUS2) assesses cognitive behavioral aspects of problematic Internet use. To date, the 15-item scale has only been available in English, and the aim of this study was to translate and validate a German version. An online sample (ON, n = 1,041, age 24.2 ± 7.2 years, 46.7% men) completed an Internet version of the translated GPIUS2, and a student sample (OF, n = 841, age 23.5 ± 3.0 years, 46.8% men) filled in a pencil and paper version. A third sample of 108 students (21.5 ± 2.0 years, 25.7% men) completed the questionnaire twice to determine the 14-day retest reliability. Participants also answered questions regarding their Internet use habits (OF, ON) and depression, loneliness, and social anxiety (ON). The internal consistencies were \( \omega = 0.91 \) (ON) and \( \omega = 0.86 \) (OF). Item-whole correlations ranged from \( r = 0.53 \) to \( r = 0.69 \) (ON) and from \( r = 0.39 \) to \( r = 0.63 \) (OF). The 2 week retest reliability was \( r_{tt} = 0.85 \). Confirmatory factor analyses found a satisfactory fit for the factorial model proposed by Caplan for the original version. The GPIUS2 score correlated moderately with time spent on the Internet for private purposes in a typical week (ON: \( r = 0.40 \); OF: \( r = 0.36 \)). Loneliness, depression, and social anxiety explained 46% of the variance in GPIUS2 scores. The German version of the GPIUS2 has good psychometric properties in a pencil and paper version as well as in a web-based format, and the observations regarding loneliness, depression, and social anxiety support the underlying model. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Internet Addiction
*Measurement
*Pathology
*Psychometrics
*Test Validity
Cognitive Generalization
Test Construction
Test Reliability
Internet Usage

Source: PsycINFO

80. Repeated exposure to MDMA triggers long-term plasticity of noradrenergic and serotonergic neurons.

Citation: Molecular Psychiatry, July 2014, vol./is. 19/7(823-833), 1359-4184;1476-5578 (Jul 2014)

Author(s): Lanteri, C; Doucet, E. L; Vallejo, S. J. Hernandez; Godeheu, G; Bobadilla, A.-C; Salomon, L; Lanfumey, L; Tassin, J.-P
Evidence from mouse and man for a role of neuregulin 3 in nicotine dependence.

Citation: Turner, J. R; Ray, R; Lee, B; Everett, L; Xiang, J; Jepson, C; Kaestner, K. H; Lerman, C; Blendy, J. A

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Institution: Department of Pharmacology, Translational Research Laboratories, Perelman School of Medicine, University of Pennsylvania, Philadelphia, PA, US; Department of Psychiatry,
Addiction to nicotine and the ability to quit smoking are influenced by genetic factors. We used functional genomic approaches (chromatin immunoprecipitation (ChIP) and whole-genome sequencing) to identify cAMP response element-binding protein (CREB) targets following chronic nicotine administration and withdrawal (WD) in rodents. We found that chronic nicotine and WD differentially modulate CREB binding to the gene for neuregulin 3 (NRG3). Quantitative analysis of saline, nicotine and nicotine WD in two biological replicates corroborate this finding, with NRG3 increases in both mRNA and protein following WD from chronic nicotine treatment. To translate these data for human relevance, single-nucleotide polymorphisms (SNPs) across NRG3 were examined for association with prospective smoking cessation among smokers of European ancestry treated with transdermal nicotine in two independent cohorts. Individual SNP and haplotype analysis support the association of NRG3 SNPs and smoking cessation success. NRG3 is a neural-enriched member of the epidermal growth factor family, and a specific ligand for the receptor tyrosine kinase ErbB4, which is also upregulated following nicotine treatment and WD. Mice with significantly reduced levels of NRG3 or pharmacological inhibition of ErbB4 show similar reductions in anxiety following nicotine WD compared with control animals, suggesting a role for NRG3 in nicotine dependence. Although the function of the SNP in NRG3 in humans is not known, these data suggest that Nrg3/ErbB4 signaling may be an important factor in nicotine dependence. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
fabric of our society, and its ubiquitous presence has provided opportunities for CNS researchers to examine the flow of diseases throughout the population. Understanding how those suffering from psychiatric disorders utilize social media tools can help to better understand how patients learn about and convey to those around them the manifestations of their illnesses. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

83. Review of Adolescents and substance use.

Citation: Social Work Education, July 2014, vol./is. 33/5(699-700), 0261-5479 (Jul 2014)
Author(s): Bowditch, Dave
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Language: English
Abstract: Reviews the book, Adolescents and Substance Use by Philip James, Caitriona Kearns, Ann Campbell, and Bobby P. Smyth (2014). This book is intended for practitioners working with adolescents and their families and aims to provide them with background knowledge of substance use issues and a framework for skills development to intervene and make a difference. It begins with a useful outline of the significant physical, psychological and social changes that take place during adolescence. Whilst drawing on a range of neuro-scientific research, the information is presented in a clear, concise way which will be of interest and use to social work staff and a range of front-line practitioners. The early chapters frame the propensity of adolescents for risk-taking behavior in the context of maturational processes and highlight the role of parenting style, educational and social environments in the successful acquisition. This book will serve as a very informative introductory text to the issue of substance use for those who work with young people and their families in a range of universal, targeted or specialist settings. It would prove a very useful text for social work students who are looking to broaden their understanding of this issue and for social workers wishing to develop their competence in working effectively with young people who may be using alcohol and other drugs. It draws on extensive research and whilst it contains many references to the UK and Irish contexts, many of the concepts, perspectives and examples will have international relevance. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

84. Social work and drug use teaching: A personal view from Lancaster University.

Citation: Social Work Education, July 2014, vol./is. 33/5(685-691), 0261-5479 (Jul 2014)
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Institution: Department of Sociology, Bowland College North, Lancaster University, Lancaster, United Kingdom

Language: English

Abstract: This article offers a personal view about teaching the module 'Social Work and Drug Use' at a university in the North West of England, UK. It describes the establishment of the module and the development of the module content over the years. It discusses the nature of teaching the subject within a research focused establishment and the problems this presents. This is all contextualized within the campaign to have social work and drug use as a compulsory part of the national social work curriculum. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Professional Development
*Professional Standards
*Social Casework
Colleges
Curriculum
Drug Abuse
Drug Usage
Social Work Education
Teaching

Source: PsycINFO

85. Substance use and disabilities: Experiences of adults's social care professionals and the implications for education and training.

Citation: Social Work Education, July 2014, vol./is. 33/5(670-684), 0261-5479 (Jul 2014)

Author(s): Dance, Cherilyn; Galvani, Sarah

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Institution: University of Bedfordshire, BDF, United Kingdom; University of Bedfordshire, BDF, United Kingdom

Language: English

Abstract: This paper draws on data from a national survey of social workers and social care practitioners in England undertaken in 2010-2011. It focuses on practitioners working in services for adults with either learning or physical disabilities and, in particular, their experiences of responding to alcohol and other drug use among their service users. Based on secondary analysis of survey and focus group data from the earlier study, the paper outlines the extent to which workers in these areas of practice encounter alcohol and drug problems and discusses the key challenges this poses for them. The findings show that between 4% and 10% of adults' practitioners' service users have alcohol and drug problems depending on the nature of the disability. Regardless of the type of disability, practitioners reported difficulties in talking about substance use with their service users as well as identifying tensions around life-style choice and risk management. They also reported the need for education and training in a number of areas. Social work education and subsequent training in working with substance use problems needs to be available to adults' practitioners and it needs to address the specific issues and needs in different areas of social work practice. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal
86. Working on treatment teams: Educating social work students to function as addiction specialists within interdisciplinary groups.

Citation: Social Work Education, July 2014, vol./is. 33/5(642-655), 0261-5479 (Jul 2014)
Author(s): Linley, Jessica V; Mendoza, Natasha S; Resko, Stella M
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Language: English
Abstract: Social workers specializing in the addictions field invariably work with multiple disciplines. Any intervention must be organized in consideration of various fields of practice such as mental health, criminal justice, child welfare, and health care. As part of their education, social workers become adept at understanding the influence of factors associated with physical, mental, and social functioning. Thus, they learn to appreciate the need for interdisciplinary collaboration. However, once students become practitioners, they are often left on their own to solidify their specific role as addiction specialists among several other professionals. Working as a member of an interdisciplinary team can be taught in the classroom. The authors apply Bronstein's model for team collaboration to build a method for teaching interdisciplinary work specific to the role of the addiction specialist. Within the interdisciplinary team model, students take on the various team roles and decide the importance of these roles in a substance use case study. They are taught how to assess, diagnose, identify appropriate evidence-based methods, build client objectives and goals, solidify concrete action plans, and evaluate effectiveness. As these methods have yet to be researched in the classroom, the authors offer recommendations for evaluation and future research. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Social Casework
*Social Workers
Addiction
Alcohol Abuse
Collaboration
Drug Abuse
Interdisciplinary Treatment Approach
Social Work Education
Work Teams
Source: PsycINFO

87. Provider preparedness for treatment of co-occurring disorders: Comparison of social workers and alcohol and drug counselors.

Citation: Social Work Education, July 2014, vol./is. 33/5(626-641), 0261-5479 (Jul 2014)
Evidence Services | library.nhs.uk

Author(s): Fisher, Colleen M; McCleary, Jennifer Simmelink; Dimock, Peter; Rohovit, Julie

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Language: English

Abstract: Substance use and mental health disorders remain significant behavioral health concerns in the United States and other Western nations. Nearly half of the 20.3 million adults with substance use disorders in the US have a co-occurring mental illness. Despite growing research support, integrated treatment by providers with expertise in both mental health and substance use is critically lacking. As part of a co-occurring disorders (COD) training initiative in the USA, this study investigated providers' (n = 438) past training, current COD service provision, and future training needs. Specifically, we examined the extent to which social workers were prepared to treat individuals with COD compared to alcohol and drug counselors. Unsurprisingly, social workers reported receiving significantly more mental health related training, while alcohol and drug counselors reported more substance use related training. Alcohol and drug counselors reported significantly more COD-specific training including general COD, psychopharmacology, COD treatment, and relapse prevention. Social workers were significantly more likely than alcohol and drug counselors to report wanting more training in substance use disorders and culturally-specific intervention techniques. These findings suggest that tailored training and licensure changes are needed to enhance social workers' capacity for competent COD treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Conference Information: Council on Social Work Education's Annual Program Meeting. Nov, 2013. Dallas, TX, US. Earlier versions of this article were presented at the aforementioned conference.

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Counselors
*Health Care Psychology
*Mental Health
*Social Workers
Alcohol Abuse
Alcohol Rehabilitation
Comorbidity
Drug Abuse
Drug Rehabilitation
Mental Disorders
Social Work Education
Treatment

Source: PsycINFO

88. Whose responsibility is it? A call for the integration of the knowledge of substance misuse in social work education, practice and research.

Citation: Social Work Education, July 2014, vol./is. 33/5(619-625), 0261-5479 (Jul 2014)

Author(s): Teater, Barbra

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Institution: College of Staten Island, City University of New York, Department of Social Work, Staten Island, NY, US
Comments on the two articles by A. Hutchinson and D. Allnock (see record 2014-28271-004) (see record 2014-28271-005). This commentary is based on the review of two articles written by Hutchinson and Allnock (2014a; 2014b) presented in this journal issue. The commentary reviews the two articles and other research on the integration of substance misuse in social work education, practice and research. Four lessons are presented in terms of how to enhance the knowledge and skills around substance misuse by creating stronger links between social work education, practice and research. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

89. Implementing rigorous survey methodology within contexts of social work education, training and practice: A case study in substance use.

With the integration of evidence-based practice central to all areas of social work education and training across the globe, it is crucial that we continue to engage with the methodological challenges inherent in gathering this evidence, particularly when it is related to the nature of social work education itself. As a result, this paper addresses some of the methodological challenges involved in examining the education available to social workers on engaging with substance use, both within the social work academy and local authorities in England. Drawing on experiences of implementing large scale online surveys from three substantial research projects completed by the authors, this paper highlights four methodological themes: (1) Constructing a representative sampling frame; (2) Identifying participants within organisations with many departments; (3) Response rates; and (4) Questionnaire design. While these are familiar methodological considerations, this article draws attention to the specific complexities of gathering 'representative' knowledge to inform educational strategies on substance use within social work education and employment contexts. Finally this paper offers lessons learned and guidance for social work academics, students and practitioners who are minded to build, or draw from, an evidence-base using representative samples from and within these environments. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
90. The development of employment-based education on substance use for social workers in England: Embedding substance use training in frameworks of continuing professional development.

Citation: Social Work Education, July 2014, vol./is. 33/5(589-604), 0261-5479 (Jul 2014)

Author(s): Hutchinson, Aisha; Allnock, Debra

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Institution: University of Bedfordshire, Luton, BDF, United Kingdom; University of Bedfordshire, Luton, BDF, United Kingdom

Language: English

Abstract: Service users in the social care sector affected by substance use need a workforce which is skilled at protecting and supporting them, and who are able to carry out their roles and responsibilities with confidence. Workforce/Learning Development departments in children's and adults' services in England play an important role in preparing social workers to engage effectively with service users and to develop as practitioners. Drawing on data from a survey of 94 Workforce/Learning Development departments, this article examines the development of employment-based education on substance use. Only 33% of these departments had a dedicated training strategy or series of programmes on substance use, although more than half (59%) provided tools for identifying and assessing substance use. A wide range of professionals were involved in the development of this training, particularly those in specialist safeguarding and substance use roles. Social work and substance use textbooks are the main source of materials accessed to support training development. A lack of strategic engagement with substance use in social care was one of the barriers cited to adequate training provision. Implications for social work education include the importance of embedding AOD education in post-qualifying training frameworks at both university and employer levels. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Professional Development
*Social Workers
*Training
Alcohol Abuse
Continuing Education
Drug Abuse
Employment Status
Roles
Social Work Education

Source: PsycINFO

91. The nature and extent of substance use education in qualifying social work programmes in England.

Citation: Social Work Education, July 2014, vol./is. 33/5(573-588), 0261-5479 (Jul 2014)

Author(s): Galvani, Sarah; Allnock, Debra

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Source: PsycINFO
Alcohol and other drug (AOD) use is a common feature of modern social work practice. Concerns about the problematic use of such substances cross all areas of social work practice, including adults' and children's social care. In England, surveys have highlighted social workers' experiences of AOD education during their qualifying social work training. However, this study sought the perspectives of the social work educators. Its primary aim was to explore the nature and extent of education on AODs on the qualifying social work programmes in England. Using an online survey tool, all qualifying social work programme leads were invited to take part (n = 157). Fewer than half responded (40%, n = 63). Initial findings appeared positive suggesting that 94% of responding qualifying programmes provided some teaching and learning on AODs. Further analysis revealed significant variation in what is taught and the depth of coverage. It highlighted a lack of consistency across programmes and possible over-reporting. However, the majority of respondents felt that teaching and learning on AOD use should be a higher priority for their qualifying social work programmes. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Social Work Education, July 2014, vol./is. 33/5(555-556), 0261-5479 (Jul 2014)

Loughran, Hilda; Livingston, Wulf

University College Dublin, Dublin, Ireland; Glyndwr University, Wrexham, Wales

English

Introduces the present issue of Social Work Education. The place afforded substance use in social work education has been a concern for many in the field for over 30 years. It's difficult to believe that despite efforts of such distinguished academics as Collins (1990) and Harrison (1992) social work education continues to struggle with providing an appropriate and coherent framework for providing knowledge and skills for working with alcohol and other drugs (AOD). The need for such input is supported by ample evidence that social workers in the field are encountering increasing numbers of service users and their families who are experiencing difficulties with AOD problems, if not as the primary reason for referral then often as a related difficulty. This special edition is particularly welcomed because it brings these issues from the peripheral of social work education to centre stage. It seems that despite the obvious need for this shift social work education has been at best inconsistent about adopting this 'new' dimension in substantive curricula developments. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
program had no logic model, the authors adopted a model that hypothesized positive, but small, correlations between the program elements. Results: There were few statistically significant correlations and a number of negative correlations between infrastructure changes, service changes, and consumer outcomes. Conclusions: Federal investments should take into account evidence that infrastructure changes alone do not necessarily contribute to better consumer outcomes, support operationally defined infrastructure improvements, require that service improvements accompany infrastructure changes, and provide sufficient resources to oversee grantee behaviors. In addition, future evaluation should support evaluation best practices. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
96. Peer recovery support for individuals with substance use disorders: Assessing the evidence.

Citation: Psychiatric Services, July 2014, vol./is. 65/7(853-861), 1075-2730 (Jul 1, 2014)

Author(s): Reif, Sharon; Braude, Lisa; Lyman, D. Russell; Dougherty, Richard H; Daniels, Allen S; Ghose, Sushmita Shoma; Salim, Onaje; Delphin-Rittmon, Miriam E

Correspondence Address: Lyman, D. Russell, russl@dmahealth.com


Language: English

Abstract: Objective: Peer recovery support services are delivered by individuals in recovery from substance use disorders to peers with substance use disorders or cooccurring mental disorders. This review describes the service and assesses its evidence base. Methods: Authors searched PubMed, PsycINFO, Applied Social Sciences Index and Abstracts, Sociological Abstracts, and Social Services Abstracts for outcome studies of peer recovery support services from 1995 through 2012. They found two randomized controlled trials, four quasi-experimental studies, four studies with pre-post service designs, and one review. Authors chose from three levels of evidence (high, moderate, and low) on the basis of benchmarks for the number of studies and quality of their methodology. They also described the evidence of service effectiveness. Results: The studies met the minimum criteria for moderate level of evidence. Studies demonstrated reduced relapse rates, increased treatment retention, improved relationships with treatment providers and social supports, and increased satisfaction with the overall treatment experience. Methodological concerns included inability to distinguish the effects of peer recovery support from other recovery support activities, small samples and heterogeneous populations, lack of consistent or definitive outcomes, and lack of any or appropriate comparison groups. Conclusions: Peer recovery support providers aim to help individuals achieve and maintain recovery, yet studies to date have not tested the key mechanisms of this intervention. To better demonstrate the effectiveness of peer recovery support, researchers should isolate its effects from other peer-based services. Additional research should solidify its place within the substance use treatment continuum for adults with substance use disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse
*Drug Rehabilitation
*Evidence Based Practice
*Support Groups
*Treatment Effectiveness Evaluation
Peers

Source: PsycINFO

97. Daily spiritual experiences and adolescent treatment response.

Citation: Alcoholism Treatment Quarterly, July 2014, vol./is. 32/2-3(271-298), 0734-7324;1544-4538 (Jul 2014)

Author(s): Lee, Matthew T; Veta, Paige S; Johnson, Byron R; Pagano, Maria E
The purpose of this study is to explore changes in belief orientation during treatment and the impact of increased daily spiritual experiences (DSE) on adolescent treatment response. One-hundred ninety-five adolescents court-referred to a 2-month residential treatment program were assessed at intake and discharge. Forty percent of youth who entered treatment as agnostic or atheist identified themselves as spiritual or religious at discharge. Increased DSE was associated with greater likelihood of abstinence, increased prosocial behaviors, and reduced narcissistic behaviors. Results indicate a shift in DSE that improves youth self-care and care for others that may inform intervention approaches for adolescents with addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Conference Information: Annual Meeting of the American Sociological Association (ASA). 108th. New York, NY, US. Portions of results of this paper were presented at the aforementioned conference.

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcohol Abuse
*Drug Abuse
*Residential Care Institutions
*Spirituality
*Treatment Outcomes
Source: PsycINFO

98. A psychodynamic perspective on the efficacy of 12-step programs.

The author reviews recent developments in psychoanalytic and psychodynamic theory and practice and their applications to understanding and treating addicted individuals. Emphasis is placed on experience near, more interactive, and empathic approaches stressing structural, self-psychology, object relations, and attachment theory in contrast to early classical psychoanalytic models that were impassive, detached, and more strictly interpretive in their methods. The contemporary models are adopted to explain and provide a basis for explaining how and why Alcoholics Anonymous works. From this perspective, addiction is understood as a self-regulation disorder involving difficulties in regulating emotions, self-esteem, relationships, and behavior and how the working of AA address and correct these vulnerabilities. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Psychoanalytic Theory

Citation: Alcoholism Treatment Quarterly, July 2014, vol./is. 32/2-3(214-224), 0734-7324;1544-4538 (Jul 2014)

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Institution: Department of Psychiatry, Massachusetts General Hospital, Boston, MA, US

Language: English

Abstract: Alcoholics Anonymous (AA) works because it discovered the use of positive emotions as a therapeutic tool 50 years before academic psychology discovered positive psychology. First, AA's emphasis on admitting dependence on and attachment to others, leads to the positive emotion of love and second, the recognition that to keep it you have to give it away, leading to the positive emotion of joy. The first three Steps of AA involve turning oneself over to a trusted other as long as it is not "me" (AA has always been clear that the definition of "God" was the alcoholic's choice) is to allow oneself to feel loved. The second component of AA is guiding new members toward joy via the last two Steps of AA. The 12th step, of course, is "As the result of these Steps: we tried to carry this message to alcoholics, and to practice these principles (positive emotions) in all our affairs." Secure attachment (a.k.a. love), as extrapolated from brain-imaging studies of mother-child attachment, is like addiction associated with reduction in amygdala firing and increases in nucleus accumbens activity. Imaging researchers have found that the joy of giving to your favorite charity, like taking cocaine, stimulates the nucleus accumbens. In short, like methadone in opiate addiction, the positive emotions induced by AA provide a safe, nonpharmacological substitute for alcohol. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcoholics Anonymous *Emotions *Positive Psychology Attachment Behavior Relapse Prevention

Source: PsycINFO

100. Buddhist mindfulness as an influence in recent empirical CBT approaches to addiction: Convergence with the Alcoholics Anonymous model.

Citation: Alcoholism Treatment Quarterly, July 2014, vol./is. 32/2-3(194-213), 0734-7324;1544-4538 (Jul 2014)

Author(s): Dermatis, Helen; Egelko, Susan

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Language: English
Abstract: This article explores the convergence of the Alcoholics Anonymous (AA) model for addictions with recent advances in empirically supported cognitive-behavioral therapy (CBT) for addictions. This convergence stems from CBT entering its "third wave," which incorporates techniques associated with mindfulness, meditation, and Buddhist philosophy and practice. Research findings associated with various third-wave CBT treatment programs on substance abuse outcome will be reviewed. Implications for research on 12-Step interventions based on areas of convergence of these psychotherapeutic approaches are also discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcoholics Anonymous
*Buddhists
*Cognitive Behavior Therapy
*Mindfulness
Source: PsycINFO

101. The neurocircuitry of attachment and recovery in Alcoholics Anonymous.

Citation: Alcoholism Treatment Quarterly, July 2014, vol./is. 32/2-3(173-193), 0734-7324;1544-4538 (Jul 2014)

Author(s): Fricchione, Gregory
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Institution: Division of Psychiatry and Medicine, Department of Psychiatry, Massachusetts General Hospital, Boston, MA, US
Language: English
Abstract: Neurophysiological circuitries mediate avoidance and approach by valencing events and establishing a reward-based gradient. Normal separation-attachment behaviors and end goals maintain attractiveness along this gradient. Circumstances-abnormal in nature and/or adverse in nurturance-can lead to pathogenic circuits. Attachment-related disorders such as substance use disorders may result. The case is made that addiction represents a distortion of separation-attachment circuitries brought about by receptor systems hijacked by substances. Spirituality may help patients meet the challenge of this substance-induced distortion. Perhaps the greatest examples are to be found in the 12-Step programs for alcoholism and drug addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcoholics Anonymous
*Alcoholism
*Recovery (Disorders)
Avoidance
Neurochemistry
Rewards
Source: PsycINFO

102. Editorial.

Citation: Alcoholism Treatment Quarterly, July 2014, vol./is. 32/2-3(107), 0734-7324;1544-4538 (Jul 2014)

Author(s): McGovern, Thomas F
Institution: Department of Psychiatry, Texas Tech University Health Sciences Center, Lubbock, TX, US
This editorial provides an overview of the papers presented in this issue of Alcoholism Treatment Quarterly (ATQ). This issue presents an insightful and timely update of many aspects of the Alcoholics Anonymous (AA) experience, with particular attention to the role of spirituality in the recovery process. The interplay between neurocircuitry, psychological mechanisms, cognitive/ emotional well-being, and mindfulness are seen in their relationship to recovery in an AA setting. This issue also accounts for gender differences, physician recovery, spiritual awakening, and cultural considerations in its comprehensive description of the spiritual dimensions of recovery in an AA framework.


Reviews the book, Critical Perspectives on Addiction. Advances in Medical Sociology edited by Julie Netherland (2012). This is an interesting collection of chapters that provide a sociological perspective on addiction and are well worth reading. The authors challenge the dominant medical and biomedical perspectives on addiction. As a sociological text the book makes extremely interesting reading. However, if you are looking for new sociological theories of addiction you may be disappointed. The content is also very US-centred and is possibly shaped by the dominant narratives in that country: for example, the war on drugs and abstinence. Although Part IV is devoted to the voice of ordinary people - and, in so doing, provides a counterpoint to the dominant medicalisation of addiction - in my opinion it does not go far enough in acknowledging the now large literature on recovery in mental health and the growing literature on addiction recovery. For this reason it could have provided a more optimistic analysis. Having said this, I would definitely recommend the book to anyone who is interested in developing a broader, more up-to-date and critical perspective on addictions.

104. Prevalence of the use of anabolic-androgenic steroids in Brazil: A systematic review.
The use of Anabolic-Androgenic Steroids (AAS) is increasing among practitioners of recreational physical activity. The aim of this research was to evaluate the prevalence of AAS in practitioners of recreational physical activity in Brazil. After systematic review of four databases, 14 articles were included. The results indicate that the prevalence of AAS varied between 2.1% and 31.6%, according to the region analyzed and the sample characteristics. The study's limitations are noted. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
106. The influence of concomitant use of alcohol, tobacco, cocaine, and anabolic steroids on lipid profiles of Brazilian recreational bodybuilders.

Citation: Substance Use & Misuse, July 2014, vol./is. 49/9(1115-1125), 1082-6084;1532-2491 (Jul 2014)

Author(s): Schwingel, Paulo Adriano; Zoppi, Claudio Cesar; Cotrim, Helma Pinchemel

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Institution: Programa de Pos-graduacao em Medicina e Saude (PPgMS), Faculdade de Medicina da Bahia (FMB), Universidade Federal da Bahia (UFBA), Salvador, Brazil; Departamento de Nutricao, Universidade de Pernambuco (UPE), Petrolina, Brazil; Programa de Pos-graduacao em Medicina e Saude (PPgMS), Faculdade de Medicina da Bahia (FMB), Universidade Federal da Bahia (UFBA), Salvador, Brazil

Language: English

Abstract: Anabolic-androgenic steroids (AAS) are used to enhance physical performance and/or appearance. The aim of this study was to evaluate the influence of the concomitant use of alcohol, tobacco, cocaine, and AAS on blood lipid profiles of 145 asymptomatic male bodybuilders from the Northeast region of Brazil. Interviews, clinical exams, and serological evaluations were performed on all participants between 2007 and 2009. All subjects' self-reported use of testosterone or its derivatives, 118 individuals reported alcohol intake, 27-reported cigarette smoking, and 33 confirmed cocaine use. Four subjects were users of all drugs at the same time. Higher levels of total cholesterol and LDL-cholesterol were observed among concomitant users of alcohol, tobacco, cocaine, and AAS. The study's limitations are noted. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Evidence Services | library.nhs.uk

Language: English

Abstract: Reviews the book, E-Safety for the I-Generation: Combating the Misuse and Abuse of Technology in Schools by Nikki Giant (2013). It is argued that this book, although written primarily for use in schools, is a worthwhile addition to the bookshelf of any professional with a responsibility for child protection. It assumes limited knowledge on the part of the reader and goes on to provide a comprehensive overview of the topic of E-safety, which the author explains is the safe and responsible use of information communication technology. According to the author, in the USA 58 per cent of 12-year olds own a phone and 93 per cent aged 12-19 go online. Access to social networking sites, instant messaging, online chat rooms, gaming devices, text and picture messaging and blogs all pose a potential threat to the users, particularly children and young people. The risks that they face include physical danger, sexual abuse and bullying, to say nothing of the obsessive, addictive nature of information communication technology itself, the full effect of which may not be known for years to come. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Internet
*Bullying
*Online Social Networks
Safety
Technology
Source: PsycINFO
Full Text: Available from Wiley in Child Abuse Review

108. Role of gender, substance use, and serious mental illness in anticipated postjail homelessness.

Citation: Social Work Research, June 2014, vol./is. 38/2(107-116), 1070-5309 (Jun 2014)
Author(s): Fries, Lauren; Fedock, Gina; Kubiak, Sheryl Pimlott
Correspondence Address: Fries, Lauren: School of Social Work, Michigan State University, 254 Baker Hall, East Lansing, MI, US, 48824, frieslau@msu.edu
Language: English
Abstract: Incarcerated individuals, particularly women, experience high rates of mental health and substance use disorders, potentially placing them at an increased risk for homelessness. This study examined factors associated with anticipated postjail homelessness among men and women (N = 725) incarcerated in an urban county jail. Participants were categorized into three groups on the basis of scores of screening measures for substance misuse and mental illness: (1) substance use disorder only, (2) serious mental illness or co-occurring substance use disorder (SMI/COD), and (3) no disorder. Gender differences within the three groups were examined, and logistic regressions were used to assess factors associated with anticipated postjail homelessness. Women were more likely than men to be homeless prejail and present with a serious mental illness, a substance use disorder, or both. SMI/COD and gender, but not substance use disorder only, were significantly associated with anticipated postjail homelessness. Women were twice as likely as men to anticipate postjail homelessness. Results display the complexity of service needs among women in the criminal justice system and support the need for services that address mental illness and substance use within the jail setting to reduce long-term homelessness. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Citation: European Journal of Mental Health, June 2014, vol./is. 9/1(54-67), 1788-4934 (Jun 2014)

Author(s): Ybrandt, Helene

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Institution: Umea Universitet, Institutionen for Psykologi, Umea, Sweden

Language: English

Abstract: The aim of the study was to compare problem severity among Swedish adolescents, using self-reported and interviewer-rated data from 2000 and 2010, gathered with the Adolescent Drug Abuse Diagnosis (ADAD) interview. Data relating to family relationships, psychological status and problems were collected in two samples randomly selected from the adolescent population aged 15-17 years (121 adolescents in the year 2000 and 485 adolescents in the year 2010). The results show that the self-rated and interviewer-rated problem severity of adolescents in 2000 and in 2010 seems to be unchanged, with no increased polarisation for sex and socio-economic groups. There was a difference, however, was of girls reporting more severe problems in family relationships compared to boys. In 2010, compared to 2000, adolescents reported on fewer psychological problems (e.g. experiences of serious anxiety and tension, comprehension and concentration disorder, memory loss and, in addition, with relationships in and outside the family sphere-e.g. problems with getting along with siblings, and with trusting other people). In order to promote the mental health of adolescents it is essential during the next decade to reveal relationship problems, such as problems of insecurity with people outside the family. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Semmelweis University Institute of Mental Health, Budapest; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse *Family Relations *Mental Disorders *Trends Diagnosis

Source: PsycINFO


Citation: Journal of Behavioral Addictions, June 2014, vol./is. 3/2(107-114), 2062-5871;2063-5303 (Jun 2014)

Author(s): Pontes, Halley M; Patrao, Ivone M; Griffiths, Mark D

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Evidence Services | library.nhs.uk

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Language: English

Abstract: Background and aims: Research into Internet addiction (IA) has increased greatly over the last decade. Despite its various definitions and general lack of consensus regarding its conceptualisation amongst researchers, instruments for measuring this phenomenon have proliferated in a number of countries. There has been little research on IA in Portugal and this may be partly due to the absence of standardised measurement tools for assessing IA.

Methods: This study attempted to address this issue by adapting a Portuguese version of the Internet Addiction Test (IAT) via a translation-back translation process and Confirmatory Factor Analysis in a sample of 593 Portuguese students that completed a Portuguese version of the IAT along with questions related to socio-demographic variables.

Results: The findings suggested that the IAT appears to be a valid and reliable instrument for measuring IA among Portuguese young adults as demonstrated by its satisfactory psychometric properties. However, the present findings also suggest the need to reword and update some of the IAT's items. Prevalence of IA found in the sample was 1.2% and is discussed alongside findings relating to socio-demographic correlates.

Limitations and implications of the present study are also discussed. Conclusions: The present study calls for a reflection of the IAT while also contributing to a better understanding of the basic aspects of IA in the Portuguese community since many health practitioners are starting to realise that Internet use may pose a risk for some individuals. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Akademiai Kiado, Budapest; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Internet Addiction
*Test Reliability
*Test Validity
Factor Analysis

Source: PsycINFO

111. Towards an understanding of Internet-based problem shopping behaviour: The concept of online shopping addiction and its proposed predictors.

Citation: Journal of Behavioral Addictions, June 2014, vol./is. 3/2(83-89), 2062-5871;2063-5303 (Jun 2014)

Author(s): Rose, Susan; Dhandayudham, Arun

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Institution: Henley Business School, University of Reading, Henley-on-Thames, OXF, United Kingdom; CRI-Northamptonshire, Northampton, HTH, United Kingdom

Language: English

Abstract: Background: Compulsive and addictive forms of consumption and buying behaviour have been researched in both business and medical literature. Shopping enabled via the Internet now introduces new features to the shopping experience that translate to positive benefits for the shopper. Evidence now suggests that this new shopping experience may lead to problematic online shopping behaviour. This paper provides a theoretical review of the literature relevant to online shopping addiction (OSA). Based on this selective review, a conceptual model of OSA is presented. Method: The selective review of the literature draws on searches within databases relevant to both clinical and consumer behaviour literature including EBSCO, ABI Pro-Quest, Web of Science-Social Citations Index, Medline, PsycINFO and Pubmed. The article reviews current thinking on problematic, and specifically addictive, behaviour in relation to online shopping. Results: The review of the literature enables the extension of existing knowledge into the Internet-context. A conceptual model of OSA is developed with theoretical support provided for the inclusion of 7 predictor variables: low self-esteem, low self-regulation; negative emotional state; enjoyment; female gender; social anonymity and cognitive overload. The construct of
OSA is defined and six component criteria of OSA are proposed based on established technological addiction criteria. Conclusions: Current Internet-based shopping experiences may trigger problematic behaviours which can be classified on a spectrum which at the extreme end incorporates OSA. The development of a conceptual model provides a basis for the future measurement and testing of proposed predictor variables and the outcome variable OSA. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Akademiai Kiado, Budapest; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Electronic Commerce
*Internet Addiction
*Shopping
Behavior
Prediction
Source: PsycINFO

112. The development of a diversity mentoring program for faculty and trainees: A program at the Brown Clinical Psychology Training Consortium.

Citation: the Behavior Therapist, June 2014, vol./is. 37/5(121-126), 0278-8403 (Jun 2014)
Author(s): de Dios, Marcel A; Kuo, Caroline; Hernandez, Lynn; Clark, Uraina S; Wenze, Susan J; Boisseau, Christina L; Hunter, Heather L; Reddy, Madhavi K; Tolou-Shams, Marina; Zlotnick, Caron
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Language: English
Abstract: This paper reports on the development and pilot implementation of a formalized diversity mentoring program involving Brown's Department of Psychiatry and Human Behavior (DPHB), the Center for Alcohol and Addiction Studies (CAAS), the Department of Behavioral and Social Sciences, the Brown Clinical Psychology Training Consortium, and the affiliated hospitals and centers. The authors aimed to develop a focused mentorship to junior faculty and trainees with the underlying goal of promoting an academic climate supportive of diversity. The mentors and mentees were invited to complete a confidential online program evaluation survey. Surveys assessed participants' satisfaction with the mentoring program and their mentoring relationship, and whether the program was successful in helping to meet their goals. Within the period of 1 year, the authors were able to develop and implement a diversity mentorship program within a multisite, multidepartmental Training Consortium in a medical school setting. One of the challenges faced in developing our program was the issue of how to account for the variability of mentor skills and experience with respect to mentorship specifically focused on diversity. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
113. Letter to the editor.

**Citation:** Alcohol and Alcoholism, July 2014, vol./is. 49/4(486-487), 0735-0414;1464-3502 (Jul-Aug 2014)

**Author(s):** Etcheverrigaray, F; Cholet, J; Sauvaget, A; Guerlais, M; Jolliet, P; Grall-Bronnec, M; Victorri-Vigneau, C

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**Language:** English

**Abstract:** Presents a case report of a male 43-yr-old who, from the age of 15, has been drinking every day, especially spirits (whiskey), contemporarily with a break of family ties. From the age of 33, three bottles of wine a day were consumed (i.e. 21 units of alcohol per day), referring to anxiolytic, hedonic and sensory effects. He never succeeded to stop his excessive alcohol consumption despite several attempts. When he was 42, he was admitted into hospital after a traffic accident under the influence of alcohol. During the 3 weeks he remained in hospital, detoxification was obtained using oxazepam with decreasing dosages. After hospital discharge, oxazepam was replaced by hydroxyzine 50 mg in case of anxiety and tetrazepam was prescribed, initially for musculoskeletal disorders. Due to its misuse, tetrazepam was replaced by TCC 4 mg twice a day to relieve his pain and avoid benzodiazepine use. Posology remained stable afterwards. The patient found he regained control over alcohol use, as he could drink one glass socially and then stop. He did not feel alcohol withdrawal symptoms since he was treated by TCC, but detachment from the beverage, and therefore never lost control of its use anymore.

(PsycINFO Database Record (c) 2014 APA, all rights reserved)
Institution: Castle Craig Hospital, Peeblesshire, United Kingdom
Language: English
Abstract: Reviews the book, The Convalescent by Peter Gilmour (2013). This book is a tale of one journey back from the depths of alcoholism. He has lost everything his work, his wife and children, his home, his self-respect. He stays intoxicated to avoid another fit. He cares about nothing. But his mother is found murdered, and he coasts through the funeral, family encounters and destruction of his childhood home from within his intoxicated cocoon. This tale will strike chords not least because many more of us will reach old age than ever before. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Country of Publication: STATEMENT: Medical Council on Alcohol and Oxford University Press. All rights reserved.; HOLDER: The Author; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcoholism
*Recovery (Disorders)
Source: PsycINFO
Full Text: Available from Oxford University Press in Alcohol and Alcoholism

115. Quality of life depends on the drinking pattern in alcohol-dependent patients.
Citation: Alcohol and Alcoholism, July 2014, vol./is. 49/4(457-465), 0735-0414;1464-3502 (Jul-Aug 2014)
Author(s): Daeppen, Jean-Bernard; Faouzi, Mohamed; Sanchez, Nathalie; Rahhali, Nora; Bineau, Sebastien; Bertholet, Nicolas
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Language: English
Abstract: Aims: In patients with alcohol dependence, health-related quality of life (QOL) is reduced compared with that of a normal healthy population. The objective of the current analysis was to describe the evolution of health-related QOL in adults with alcohol dependence during a 24-month period after initial assessment for alcohol-related treatment in a routine practice setting, and its relation to drinking pattern which was evaluated across clusters based on the predominant pattern of alcohol use, set against the influence of baseline variables Methods: The Medical Outcomes Study 36-Item Short-Form Survey (MOS-SF-36) was used to measure QOL at baseline and quarterly for 2 years among participants in CONTROL, a prospective observational study of patients initiating treatment for alcohol dependence. The sample consisted of 160 adults with alcohol dependence (65.6% males) with a mean (SD) age of 45.6 (12.0) years. Alcohol use data were collected using TimeLine Follow-Back. Based on the participant's reported alcohol use, three clusters were identified: 52 (32.5%) mostly abstainers, 64 (40.0%) mostly moderate drinkers and 44 (27.5%) mostly heavy drinkers. Mixed-effect linear regression analysis was used to identify factors that were potentially associated with the mental and physical summary MOS-SF-36 scores at each time point. Results: The mean (SD) MOS-SF-36 mental component summary score (range 0-100, norm 50) was 35.7 (13.6) at baseline [mostly abstainers: 40.4 (14.6); mostly moderate drinkers 35.6 (12.4); mostly heavy drinkers 30.1 (12.1)]. The score improved to 43.1 (13.4) at 3 months [mostly abstainers: 47.4 (12.3); mostly moderate drinkers 44.2 (12.7); mostly heavy drinkers 35.1 (12.9)], to 47.3 (11.4) at 12 months [mostly abstainers: 51.7 (9.7); mostly moderate...
drinkers 44.8 (11.9); mostly heavy drinkers 44.1 (11.3), and to 46.6 (11.1) at 24 months
[mostly abstainers: 49.2 (11.6); mostly moderate drinkers 45.7 (11.9); mostly heavy
drinkers 43.7 (8.8)]. Mixed-effect linear regression multivariate analyses indicated that
there was a significant association between a lower 2-year follow-up MOS-SF-36 mental
score and being a mostly heavy drinker (-6.97, P < 0.001) or mostly moderate drinker
(-3.34 points, P = 0.018) [compared to mostly abstainers], being female (-3.73, P =
0.004), and having a Beck Inventory scale score > 8 (-6.54, P < 0.001), at baseline. The
mean (SD) MOS-SF-36 physical component summary score was 48.8 (10.6) at baseline,
remained stable over the follow-up and did not differ across the three clusters.
Mixed-effect linear regression univariate analyses found that the average 2-year follow-up
MOS-SF-36 physical score was increased (compared with mostly abstainers) in mostly
heavy drinkers (+ 4.44, P = 0.007); no other variables tested influenced the MOS-SF-36
physical score. Conclusion: Among individuals with alcohol dependence, a rapid
improvement was seen in the mental dimension of QOL following treatment initiation,
which was maintained during 24 months. Improvement was associated with the pattern of
alcohol use, becoming close to the general population norm in patients classified as
mostly abstainers, improving substantially in mostly moderate drinkers and improving
only slightly in mostly heavy drinkers. The physical dimension of QOL was generally in
the normal range but was not associated with drinking patterns. (PsycINFO Database
Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcohol Drinking Patterns
*Alcohol Rehabilitation
*Alcoholism
*Quality of Life

Source: PsycINFO

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

116. Utilization of baclofen in maintenance of alcohol abstinence in patients with alcohol dependence and alcoholic
hepatitis with or without cirrhosis.

Citation: Alcohol and Alcoholism, July 2014, vol./is. 49/4(453-456), 0735-0414;1464-3502
(Jul-Aug 2014)

Author(s): Yamini, David; Lee, Scott Hyunsoo; Avanesyan, Armine; Walter, Michael; Runyon, Bruce

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Language: English

Abstract: Aim: To report the efficacy and safety of baclofen in improving clinical state in patients
with alcoholic hepatitis. Method: Single center, open, retrospective study analyzing the
effects of baclofen utilized over 12 months in patients with alcoholic hepatitis with or
without cirrhosis and alcohol dependence on these liver parameters: aspartate
aminotransferase (AST), alanine aminotransferase (ALT), total bilirubin (Tbili),
prothrombin time (PT), international normalized ratio (INR), albumin and Model for
End-Stage Liver Disease (MELD) score. Results: Out of 40 patients, 35 were treated with
baclofen. On average, baclofen was used for 5.8 months. A significant decrease in the
mean AST, ALT, Tbili, INR, PT and MELD score was seen when comparing pre-baclofen
use compared with post-baclofen use. Of the 35 patients who were started on baclofen, 34
(97%) remained abstinent. There were no serious adverse events. Conclusions: Baclofen's
safety and efficacy in improving the clinical condition patients with alcoholic liver disease has been supported. Randomized prospective studies with longer duration of baclofen in this population may further optimize its use and corroborate efficacy. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** *Alcohol Rehabilitation*  
*Alcoholism*  
*Baclofen*  
*Hepatitis*  
*Sobriety*  
*Cirrhosis (Liver)*

**Source:** PsycINFO

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

### 117. Acceptance of controlled drinking among treatment specialists of alcohol dependence in Japan.

**Citation:** Alcohol and Alcoholism, July 2014, vol./is. 49/4(447-452), 0735-0414;1464-3502 (Jul-Aug 2014)

**Author(s):** Higuchi, Susumu; Maesato, Hitoshi; Yoshimura, Atsushi; Matsushita, Sachio

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**Language:** English

**Abstract:** Aims: This study evaluated the acceptance of controlled drinking (CD) goals among physicians specializing in the treatment of alcohol dependence (AD) in Japan. Methods: A mailed questionnaire survey was sent to physician members of the Japanese Society of Alcohol-Related Problems (n = 232) who were specialists in the treatment of AD in Japan. The evaluated items included the acceptance of CD goals, the definition of CD, the reasons for accepting or rejecting CD and the patient factors used to make treatment-goal decisions. Results: CD as an interim goal on the way toward abstinence was accepted by about two-thirds of the specialists, while CD as a final goal was accepted by about one-third of specialists. Specialists supported harm-free drinking and a satisfactory quality of life, rather than alcohol consumption limits, as the definition of CD. Of note, a significantly higher percentage of specialists who rejected CD, compared with those who accepted CD, supported the disease model of AD as grounds for their decision. Specialists who accepted CD relied mostly on factors such as the severity of dependence, attitude toward CD and abstinence, and the level of psychological dependence and social stability, when making treatment-goal decisions. Conclusion: CD was accepted as an interim goal by two-thirds and as a final goal by one-third of Japanese physician specialists. Despite differences in drinking cultures and treatment circumstances, great similarities were found between this study and those conducted in Europe and North America with regard to the reasoning of treatment providers and the use of patient characteristics to make treatment-goal decisions. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
118. Awareness and treatment of alcohol dependence in Japan: Results from internet-based surveys in persons, family, physicians and society.

**Citation:** Alcohol and Alcoholism, July 2014, vol./is. 49/4(430-438), 0735-0414;1464-3502 (Jul-Aug 2014)

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**Language:** English

**Abstract:** Aims: To understand current awareness of, and views on, treatment of alcohol dependence in Japan. Methods: (a) Nationwide internet-based survey of 520 individuals, consisting of 52 diagnosed alcohol-dependent (AD) persons, 154 potentially alcohol-dependent (ADP) persons, 104 family members and 106 friends/colleagues of AD persons, and 104 general individuals, derived from a consumer panel where the response rate was 64.3%. We enquired into awareness about the treatment of alcohol dependence and patient pathways through the healthcare network. (b) Nationwide internet-based survey of physicians (response rate 10.1% (2395/23,695) to ask 200 physicians about their management of alcohol use disorders). Results: We deduced that 10% of alcohol-dependent Japanese persons had ever been diagnosed with alcohol dependence, with only 3% ever treated. Regarding putative treatment goals, 20-25% of the AD and ADP persons would prefer to attempt to abstain, while 60-75% preferred 'reduced drinking.' A half of the responding physicians considered abstinence as the primary treatment goal in alcohol dependence, while 76% considered reduced drinking as an acceptable goal. Conclusion: AD and ADP persons in Japan have low 'disease awareness' defined as 'understanding of signs, symptoms and consequences of alcohol use disorders,' which is in line with the overseas situation. The Japanese drinking culture and stigma toward alcohol dependence may contribute to such low disease awareness and current challenging treatment environment. While abstinence remains the preferred treatment goal among physicians, reduced drinking seems to be an acceptable alternative treatment goal to many persons and physicians in Japan. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Aims: Managing patients with alcohol dependence includes assessment for heavy drinking, typically by asking patients. Some recommend biomarkers to detect heavy drinking but evidence of accuracy is limited. Methods: Among people with dependence, we assessed the performance of disialo-carbohydrate-deficient transferrin (%dCDT, > 1.7%), gamma-glutamyltransferase (GGT, > 66 U/l), either %dCDT or GGT positive, and breath alcohol (> 0) for identifying 3 self-reported heavy drinking levels: any heavy drinking (> 4 drinks/day or > 7 drinks/week for women, > 5 drinks/day or > 14 drinks/week for men), recurrent (> 5 drinks/day on > 5 days) and persistent heavy drinking (> 5 drinks/day on > 7 consecutive days). Subjects (n = 402) with dependence and current heavy drinking were referred to primary care and assessed 6 months later with biomarkers and validated self-reported calendar method assessment of past 30-day alcohol use. Results: The self-reported prevalence of any, recurrent and persistent heavy drinking was 54, 34 and 17%. Sensitivity of %dCDT for detecting any, recurrent and persistent self-reported heavy drinking was 41, 53 and 66%. Specificity was 96, 90 and 84%, respectively. %dCDT had higher sensitivity than GGT and breath test for each alcohol use level but was not adequately sensitive to detect heavy drinking (missing 34-59% of the cases). Either %dCDT or GGT positive improved sensitivity but not to satisfactory levels, and specificity decreased. Neither a breath test nor GGT was sufficiently sensitive (both tests missed 70-80% of cases). Conclusions: Although biomarkers may provide some useful information, their sensitivity is low the incremental value over self-report in clinical settings is questionable. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Full Text: Available from *Oxford University Press* in *Alcohol and Alcoholism*

**120. Effects of ceftriaxone on systemic and central expression of anti- and pro-inflammatory cytokines in alcohol-preferring (P) rats exposed to ethanol.**

**Citation:** Alcohol and Alcoholism, July 2014, vol./is. 49/4(390-398), 0735-0414;1464-3502 (Jul-Aug 2014)

**Author(s):** Rao, P. S. S; Ahmed, S; Sari, Y

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**Language:** English

**Abstract:**
Aims: Determine the effect of reduction in ethanol consumption by alcohol-preferring (P) rats, following ceftriaxone treatment, on the cytokines levels in prefrontal cortex (PFC) and plasma. Methods: Following 5 weeks of free access to ethanol (15 and 30%), P rats were treated daily with ceftriaxone or saline vehicle for either 2 or 5 consecutive days. Plasma and PFC were collected from ceftriaxone- and saline vehicle-treated groups, and assayed for the levels of pro- and anti-inflammatory cytokines. Results: A significant increase in the plasma level of anti-inflammatory cytokine IL-10 was observed in the ceftriaxone-treated group when compared with the saline-treated group in both the 2-day and 5-day treatments. Furthermore, ceftriaxone treatment for 2 days induced reduction in TNF level in both plasma and PFC. Additionally, ceftriaxone treatment for 2 days significantly reduced the IFN level in PFC. Conclusion: These findings show the ability of ceftriaxone to reduce alcohol consumption and induce modulation of the anti-inflammatory and proinflammatory cytokines levels in P rats. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:**
* Alcoholism
* Animal Models
* Antibiotics
* Cytokines
* Ethanol
  Alcohol Drinking Patterns
  Alcohol Rehabilitation
  Drug Therapy
  Rats
  Side Effects (Drug)

**Source:** PsycINFO

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

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**121. Chronic ethanol consumption increases myocardial mitochondrial DNA mutations: A potential contribution by mitochondrial topoisomerases.**

**Citation:** Alcohol and Alcoholism, July 2014, vol./is. 49/4(381-389), 0735-0414;1464-3502 (Jul-Aug 2014)

**Author(s):** Laurent, D; Mathew, J. E; Mitry, M; Taft, M; Force, A; Edwards, J. G

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Institution: Department of Physiology, New York Medical College, Valhalla, NY, US; Department of Physiology, New York Medical College, Valhalla, NY, US; Department of Physiology, New York Medical College, Valhalla, NY, US; Department of Physiology, New York Medical College, Valhalla, NY, US; Department of Physiology, New York Medical College, Valhalla, NY, US; Department of Physiology, New York Medical College, Valhalla, NY, US

Language: English

Abstract: Aims: Alcoholic cardiomyopathy (ACM) presents as decreased myocardial contractility, arrhythmias and secondary non-ischemic dilated cardiomyopathy leading to heart failure. Mitochondrial dysfunction is known to have a significant role in the development and complications of ACM. This study investigated if chronic ethanol feeding promoted myocardial mitochondrial topo-isomerase dysfunction as one underlying cause of mitochondrial DNA (mtDNA) damage and mitochondrial dysfunction in ACM. Methods: The impact of chronic ethanol exposure on the myocardial mitochondria was examined in both neonatal cardiomyocytes using 50 mM ethanol for 6 days and in rats assigned to control or ethanol feeding groups for 4 months. Results: Chronic ethanol feeding led to significant (P < 0.05) decreases in M-mode Fractional Shortening, ejection fraction, and the cardiac output index as well as increases in Tau. Ethanol feeding promoted mitochondrial dysfunction as evidenced by significantly decreased left ventricle cytochrome oxidase activity and decreases in mitochondrial protein content. Both in rats and in cultured cardiomyocytes, chronic ethanol presentation significantly increased mtDNA damage. Using isolated myocardial mitochondria, both mitochondrial topo-isomerase-dependent DNA cleavage and DNA relaxation were significantly altered by ethanol feeding. Conclusion: Chronic ethanol feeding compromised cardiovascular and mitochondrial function as a result of a decline in mtDNA integrity that was in part the consequence of mitochondrial topo-isomerase dysfunction. Understanding the regulation of the mitochondrial topo-isomerases is critical for protection of mtDNA, not only for the management of alcoholic cardiomyopathy, but also for the many other clinical treatments that targets the topo-isomerases in the alcoholic patient. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcoholism
*Animal Models
*DNA
*Ethanol
*Mutations
Rats
Mitochondria

Source: PsycINFO

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


Citation: Alcohol and Alcoholism, July 2014, vol./is. 49/4(373-380), 0735-0414;1464-3502 (Jul-Aug 2014)

Author(s): Neuman, Manuela G; Cohen, Lawrence; Zakhari, Samir; Nanau, Radu M; Mueller, Sebastian; Schneider, Michelle; Parry, Charles; Isip, Romina; Seitz, Helmut K

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Alcoholism, National Institutes of Health, Bethesda, MD, US; In Vitro Drug Safety and Biotechnology, University of Toronto, Toronto, ON, Canada; Centre of Alcohol Research, University of Heidelberg, Salem Medical Centre, Heidelberg, Germany; Alcohol and Drug Abuse Research Unit, Medical Research Council, Stellenbosch University, Cape Town, South Africa; Alcohol and Drug Abuse Research Unit, Medical Research Council, Stellenbosch University, Cape Town, South Africa; In Vitro Drug Safety and Biotechnology, University of Toronto, Toronto, ON, Canada; Centre of Alcohol Research, University of Heidelberg, Salem Medical Centre, Heidelberg, Germany

Language: English

Abstract: This paper is based upon the ‘Charles Lieber Satellite Symposia’ organized by Manuela G. Neuman at each of the 2009-2012 Research Society on Alcoholism (RSA) Annual Meetings. The presentations represent a broad spectrum dealing with alcoholic liver disease (ALD). In addition, a literature search (2008-2013) in the discussed area was performed in order to obtain updated data. The presentations are focused on genetic polymorphisms of ethanol metabolizing enzymes and the role of cytochrome P4502E1 (CYP2E1) in ALD. In addition, alcohol-mediated hepatocarcinogenesis, immune response to alcohol and fibrogenesis in alcoholic hepatitis as well as its co-morbidities with chronic viral hepatitis infections in the presence or absence of human deficiency virus are discussed. Finally, emphasis was led on alcohol and drug interactions as well as liver transplantation for end-stage ALD. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcoholism *Enzymes *Liver Disorders *Polymorphism

Source: PsycINFO

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

123. Implicit motives and basic need satisfaction in extreme endurance sports.

Citation: Journal of Sport & Exercise Psychology, June 2014, vol./is. 36/3(293-302), 0895-2779;1543-2904 (Jun 2014)

Author(s): Schuler, Julia; Wegner, Mirko; Knechtle, Beat

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Institution: Institute of Sport Science, University of Bern, Bern, Switzerland; Institute of Sport Science, University of Bern, Bern, Switzerland; Institute of General Practice and Health Services Research, University of Zurich, Zurich, Switzerland

Language: English

Abstract: Previous research has shown that the effects of basic psychological needs on the flow experience in sports are moderated by implicit motives. However, so far, only leisure and health-oriented sports have been analyzed. In a pilot study and a main study (N = 29, 93), we tested whether the implicit achievement and affiliation motives interact with the need for competence and the need for social relatedness satisfaction, respectively, to predict flow experience and well-being in extreme endurance athletes. Results showed that highly achievement- motivated individuals benefited more from the need for competence satisfaction in terms of flow than individuals with a low achievement motive did. In addition, highly affiliation-motivated individuals whose need for social relatedness is satisfied reported higher positive affect and lower exercise addiction scores than athletes with a low motive. We discuss the differential effects of the interplay between the achievement and affiliation motives and basic needs on different outcome variables. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

124. Impulse control in Parkinson's disease.

Original Title: Eine Einführung in Impulskontrollstörungen bei Morbus Parkinson.

Citation: Zeitschrift für Neuropsychologie, March 2014, vol./is. 25/1(7-15), 1016-264X (Mar 2014)

Author(s): Heldmann, Marcus; Al-Khaled, Mohamed; Hagenah, Johann; Munte, Thomas F

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Institution: Klinik für Neurologie, Universität zu Lübeck, Lübeck, Germany; Klinik für Neurologie, Universität zu Lübeck, Lübeck, Germany; Klinik für Neurologie, Westkustenklinikum Heide, Heide, Germany; Klinik für Neurologie, Universität zu Lübeck, Lübeck, Germany

Language: German

Abstract: Impulse control disorders in Parkinson's disease (PD) are mainly observed in connection with a medication with dopamine agonists. They are seen in up to 17 % of such treated patients and comprise pathological gambling, pathological buying, compulsive sexual behavior and binge eating disorder. Besides the medication with dopamine agonists, an individual vulnerability, possibly of genetic origin, seems a necessary prerequisite for these disorders to occur. Functional imaging studies have shown a diminished activation of the reward system in response to rewards. In addition, dramatic differences in the activity of frontolimbic control areas have been observed between PD patients with and without impulse-control disorders. An experimentally tractable consequence of increased impulsivity in PD is a steeper delay discounting function in intertemporal choice paradigms. This review concludes with a discussion of the practical consequences of the research findings on impulse-control disorders for the management of PD patients. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Verlag Hans Huber, Hogrefe AG, Bern; YEAR: 2014

125. Co-occurring substance use disorders and PTSD.

Citation: A practical guide to PTSD treatment: Pharmacological and psychotherapeutic approaches., 2015(135-150) (2015)

Author(s): Saxon, Andrew J; Simpson, Tracy L

Institution: Center of Excellence in Substance Abuse Treatment and Education, VA Puget Sound Health Care System, Seattle, WA, US; Center of Excellence in Substance Abuse Treatment and Education, VA Puget Sound Health Care System, Seattle, WA, US
Abstract:
(from the chapter) Posttraumatic stress disorder (PTSD) and substance use disorders (SUDs) frequently co-occur (Kessler, Sonnega, Bromet, Hughes, & Nelson, 1995). When the two do co-occur, considerable psychopathologic interplay typically emerges, suggesting the need for treatment of both disorders; however, only a sparse evidence base exists to guide optimal psychopharmacologic or psychotherapeutic treatment for patients with both PTSD and SUD. This chapter reviews the available evidence on treatment of SUD in the presence of PTSD (Berenz & Coffey, 2012; Petrakis et al., 2006; Riggs & Foa, 2008), mentions SUD-specific treatments that clinical experience suggests should be provided to patients with both disorders even if not yet well studied, and speculates on some interventions that might serve to treat both disorders simultaneously (Kaysen et al., 2014; Raskind et al., 2007; Simpson et al., 2009; Yeh et al., 2011). Some aspects of these topics were recently reviewed in detail (Norman et al., 2012). (PsycINFO Database Record (c) 2014 APA, all rights reserved)
127. Review of Belonging: Solidarity and division in modern societies.

Citation: Sociology, June 2014, vol./is. 48/3(625-627), 0038-0385;1469-8684 (Jun 2014)
Author(s): O'Toole, Therese
Institution: University of Bristol, Bristol, United Kingdom
Language: English
Abstract: Reviews the book, Belonging: Solidarity and Division in Modern Societies by Montserrat Guibernau (2013). This book identifies 'belonging by choice' as a defining trait of contemporary society - sometimes leading individuals choosing to give up the freedoms associated with modernity in order to belong. Indeed, Guibernau argues, growing freedom is accompanied by the countervailing force of dependency, including submission to leaders, compulsive conformity and addictions of various kinds. In addressing the challenges thrown up by the desire to belong, Guibernau highlights tensions over forms of religious belonging, and particularly over claims for recognition of religious identities by Muslims, when these are seen to clash with secular European culture. Her analysis, at times, seems to assimilate narratives about the incompatibility of Islam with secular European culture. Guibernau poses a dichotomy between political and religious (Islamic) loyalties that turns on the 'Western secular principle of separation between state and church', a distinction that is not valid within Islam. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
Country of Publication: HOLDER: The Author(s); YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Narratives
*Religious Beliefs
*Society
*Sociocultural Factors
Muslims
Source: PsycINFO

128. Weber Syndrome secondary to synthetic cannabinoid use.

Original Title: Sentetik kanabinoid kullanimina bagli gelisen Weber Sendromu.
Citation: Anadolu Psikiyatri Dergisi, March 2014, vol./is. 15/Suppl 1(S25-S27), 1302-6631 (Mar 2014)
Author(s): Karabulut, Sercan; Yargic, Lutfi Ilhan
Correspondence Address: Karabulut, Sercan: Istanbul Tip Fakultesi, Psikiyatri Anabilim Dali, Kursu Sekreterligi, Fatih/Istanbul, Turkey, drs_karabulut@hotmail.com
Institution: Istanbul Universitesi, Istanbul Tip Fakultesi, Psikiyatri Klinigi, Istanbul, Turkey; Istanbul Universitesi, Istanbul Tip Fakultesi, Psikiyatri Klinigi, Istanbul, Turkey
Language: Turkish
Abstract: Synthetic cannabinoid abuse may lead to physical and psychological disorders. This substance has disseminated rapidly in recent years and the literature about its bad consequences is rather sparse. In this study, we aimed to introduce a patient who present with mesencephalon infarctus (Weber Syndrome) after using synthetic cannabinoid. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Cannabinoids
*Drug Abuse
*Mesencephalon
Mental Disorders
Physical Disorders
Source: PsycINFO
129. Benzydamine abuse in a case with psychosis related to multiple substance abuse.

Original Title: Coklu madde kullanimina bagli bir psikoz olgusunda benzidamin kotuye kullanimi.

Citation: Anadolu Psikiyatri Dergisi, March 2014, vol./is. 15/Suppl 1(S4-S6), 1302-6631 (Mar 2014)

Author(s): Aydin, Pinar Cetinay; Ozgen, Guliz; Cekic, Miray

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Language: Turkish

Abstract: In Turkey, benzydamine hydrochloride is an analgesic and anti-inflammatory drug sold with commercial names such as Tantum, Tanflex, Benzidan. Recommended daily intake for benzydamine hydrochloride is 150-200 mg. Intake between 500-3000 mg results in furor and delirante effects. Higher doses of benzydamine hydrochloride can lead to dry mouth, convulsion and paranoia. This article contains arguments about a patient who abuses substances such as thinner, Bally, marijuana, ecstasy as they initially begin using, benzydamine hydrochloride to relieve pain and muscle then later on continue using it for its pleasurable effects discussed previously. Objective is to draw attention to widespread use of this preparation due to its analgesic and anti-inflammatory effects in many areas of medicine, which is vulnerable to abuse. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Anti Inflammatory Drugs  
*Drug Abuse  
*Psychosis  
Analgesic Drugs  
Side Effects (Drug)

Source: PsycINFO

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

130. Adolescent alcohol and substance abuse.

Citation: Essentials of global mental health., 2014(231-242) (2014)

Author(s): Felton, Julia W; Adams, Zachary W; MacPherson, Laura; Danielson, Carla Kmett

Institution: Department of Psychology, University of Maryland, College Park, MD, US; National Crime Victims Research & Treatment Center, Department of Psychiatry & Behavioral Sciences, Medical University of South Carolina, Charleston, SC, US; Department of Psychology, University of Maryland, College Park, MD, US; National Crime Victims Research & Treatment Center, Medical University of South Carolina, Charleston, SC, US

Language: English

Abstract: (from the chapter) This chapter outlines the literature on the prevalence of adolescent substance use worldwide and describes empirically supported treatments for adolescent substance abuse. These findings are discussed with regard to promoting a better
understanding of adolescent substance use internationally and addressing the current barriers and opportunities for disseminating effective interventions on a global scale.

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

Publication Type: Book; Edited Book

Subject Headings: *Adolescent Development
                   *Alcohol Abuse
                   *Drug Abuse
                   *Epidemiology
                   *Evidence Based Practice
                   Intervention

Source: PsycINFO


Citation: Brain Injury, April 2014, vol./is. 28/4(448-455), 0269-9052;1362-301X (Apr 2014)

Author(s): Moore, Megan; Winkelman, Amy; Kwong, Sharon; Segal, Steven P; Manley, Geoffrey T; Shumway, Martha

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Institution: School of Social Work, University of Washington, Seattle, WA, US; Brain and Spinal Cord Injury Center, University of California, San Francisco, CA, US; Department of Social Services, San Francisco General Hospital and Trauma Center, San Francisco, CA, US; School of Social Welfare, University of California, Berkeley, CA, US; Brain and Spinal Cord Injury Center, University of California, San Francisco, CA, US; Department of Psychiatry, University of California, San Francisco, CA, US

Language: English

Abstract: Objective: To determine acceptability and preliminary effectiveness of Emergency Department (ED) Social Work Intervention for Mild Traumatic Brain Injury (SWIFT-Acute) on alcohol use, community functioning, depression, anxiety, post-concussive symptoms, post-traumatic stress disorder and service use. Methods: This study enrolled 64 patients who received head CT after mild traumatic brain injury (mTBI) and were discharged <24 hours from a Level 1 trauma centre ED. The cohort study compared outcomes for SWIFT-Acute (n = 32) and Usual Care (n = 32) 3 months post-injury. SWIFT-Acute includes education about symptoms and decreasing alcohol use, coping strategies, reassurance and education about recovery process and follow-up guidelines and resources. Measures: Alcohol Use Disorders Identification Test (AUDIT), Community Integration Questionnaire (CIQ), Patient Health Questionnaire-4, Rivermead Post-concussion Symptoms Questionnaire, PTSD Checklist-Civilian, acceptability and service use surveys. Results: Paired t-test revealed SWIFT-Acute group maintained pre-injury community functioning; Usual Care significantly declined in functioning on the CIQ. Both groups reported 'hazardous' pre-injury drinking on AUDIT. Wilcoxon Signed Rank test showed the SWIFT-Acute group significantly reduced alcohol use; the Usual Care group did not. Both groups significantly increased medical service use. No statistically significant differences were found on other measures. Acceptability ratings were extremely high. Conclusions: SWIFT-Acute was acceptable to patients. There is preliminary evidence of effectiveness for reducing alcohol use and preventing functional decline. Future randomized studies are needed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
132. Substance use and criminality: A review.

**Original Title:** Middelengebruik en criminaliteit: een overzicht.

**Citation:** Tijdschrift voor Psychiatrie, 2014, vol./is. 56/1(32-39), 0303-7339;1875-7456 (2014)

**Author(s):** Lammers, S. M. M; Soe-Agnie, S. E; De Haan, H. A; Bakkum, G. A. M; Pomp, E. R; Nijman, H. J. M

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**Language:** Dutch

**Abstract:**
Background: Substance use regularly co-occurs with many types of criminality, including violent behaviour. Aim: To review the relationships between substance abuse and criminality, which can involve violent behaviour. Method: We searched the literature for meta-analyses, reviews and empirical articles about relationships between the problematic use of and addiction to psychoactive substances on the one hand and antisocial and aggressive behaviour and recidivism on the other hand. Results: In the case of both men and women there are significant relationships between substance abuse and criminal behavior. The majority of substance users, however, are not criminals and most of the offences they commit can be termed 'acquisitive offences'. The relationship between alcohol and violence is stronger than the relationship between substance abuse and violence. Furthermore, it is only in cocaine users that we find indications that psychopharmacological effects stimulate violent behaviour. A number of factors, particularly interactions, determine whether substance abusers are criminal and are violent. Violent behaviour can result from interactions between the severity of illness caused by substance abuse, individual psychological, social and neurobiological characteristics, situational factors and expectancies regarding the psychopharmacological effects of a particular substance. Conclusion: Substance abuse, particularly the combination of alcohol and drugs, is a predictor of criminality and criminal recidivism. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:**
* Criminal Behavior  
* Drug Usage  
* Violence  
 Drug Addiction  
 Drugs  
 Psychopharmacology

133. Review of Deviance and risk on holiday: An ethnography of British tourists in Ibiza.

**Citation:** Howard Journal of Criminal Justice, May 2014, vol./is. 53/2(213-214), 0265-5527;1468-2311 (May 2014)

**Author(s):** Sloan, Jennifer

**Institution:** University of Sheffield, Sheffield, England

**Language:** English

**Abstract:** Reviews the book, Deviance and Risk on Holiday: An Ethnography of British Tourists in Ibiza by D. Briggs (2013). The book is excellent in setting the scene—you can almost hear, feel and smell what he describes within (which is not always pleasant!). In addition,
Briggs ties in his accounts of the 'real' with the media, discussing popular films and television accounts of similar holiday styles which adds an extra dimension to the book. This book is an important read for anyone interested in ethnography, the night time economy, deviance, youth, drink and drugs cultures, or merely with a curious disposition (or wishing to know more about the British Ibiza experience). It is a compelling read, with an enormous amount of raw and engaging data, which I would highly recommend.

134. Altered neural processing of the need to stop in young adults at risk for stimulant dependence.

Identification of neurocognitive predictors of substance dependence is an important step in developing approaches to prevent addiction. Given evidence of inhibitory control deficits in substance abusers (Monterosso et al., 2005; Fu et al., 2008; Lawrence et al., 2009; Tabibnia et al., 2011), we examined neural processing characteristics in human occasional stimulant users (OSU), a population at risk for dependence. A total of 158 nondependent OSU and 47 stimulant-naive control subjects (CS) were recruited and completed a stop signal task while undergoing functional magnetic resonance imaging (fMRI). A Bayesian ideal observer model was used to predict probabilistic expectations of inhibitory demand, P(stop), on a trial-to-trial basis, based on experienced trial history. Compared with CS, OSU showed attenuated neural activation related to P(stop) magnitude in several areas, including left prefrontal cortex and left caudate. OSU also showed reduced neural activation in the dorsal anterior cingulate cortex (dACC) and right insula in response to an unsigned Bayesian prediction error representing the discrepancy between stimulus outcome and the predicted probability of a stop trial. These results indicate that, despite minimal overt behavioral manifestations, OSU use fewer brain processing resources to predict and update the need for response inhibition, processes that are critical for adjusting and optimizing behavioral performance, which may provide a biomarker for the development of substance dependence. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
135. MeCP2 phosphorylation limits psychostimulant-induced behavioral and neuronal plasticity.

**Source:** PsycINFO

**Full Text:** Available from *Highwire Press* in *Journal of Neuroscience*

**Abstract:**

The methyl-DNA binding protein MeCP2 is emerging as an important regulator of drug reinforcement processes. Psychostimulants induce phosphorylation of MeCP2 at Ser421; however, the functional significance of this posttranslational modification for addictive-like behaviors was unknown. Here we show that MeCP2 Ser421Ala knock-in mice display both a reduced threshold for the induction of locomotor sensitization by investigator-administered amphetamine and enhanced behavioral sensitivity to the reinforcing properties of self-administered cocaine. These behavioral differences were accompanied in the knock-in mice by changes in medium spiny neuron intrinsic excitability and nucleus accumbens gene expression typically observed in association with repeated exposure to these drugs. These data show that phosphorylation of MeCP2 at Ser421 functions to limit the circuit plasticities in the nucleus accumbens that underlie addictive-like behaviors. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Authors; YEAR: 2014

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

**Subject Headings:**

*Animal Ethology*
*CNS Stimulating Drugs*
*Locomotion*
*Neural Plasticity*
*Nucleus Accumbens*
*Mice*

**Source:** PsycINFO

**Full Text:** Available from *Highwire Press* in *Journal of Neuroscience*

136. Cue-induced craving increases impulsivity via changes in striatal value signals in problem gamblers.

**Citation:** The Journal of Neuroscience, March 2014, vol./is. 34/13(4750-4755), 0270-6474;1529-2401 (Mar 26, 2014)
Impulsive behavior such as steep temporal discounting is a hallmark of addiction and is associated with relapse. In pathological gamblers, discounting may be further increased by the presence of gambling-related cues in the environment, but the extent to which the gambling relatedness of task settings affects reward responses in gambling addiction is debated. In the present study, human problem gamblers made choices between immediate rewards and individually tailored larger-but-later rewards while visual gambling-related scenes were presented in the background. N = 17 participants were scanned using fMRI, whereas N = 5 additional participants completed a behavioral version of the task. Postscan craving ratings were acquired for each image, and behavioral and neuroimaging data were analyzed separately for high- and low-craving trials (median split analysis). Discounting was steeper for high versus low craving trials. Neuroimaging revealed a positive correlation with model-based subjective value in midbrain and striatum in low-craving trials that was reversed in high-craving trials. These findings reveal a modulation of striatal reward responses in gamblers by addiction-related cues, and highlight a potentially important mechanism that may contribute to relapse. Cue-induced changes in striatal delayed reward signals may lead to increased discounting of future rewards, which might in turn affect the likelihood of relapse. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Background: Subsequent to the German randomized trial of heroin-assisted treatment in 2007 a quality assurance project was initiated by the Centre for Interdisciplinary Addiction Research of Hamburg University. Thus, long-term monitoring of diamorphine treatment was made possible. Objective: Patients' status and one-year-development of the new patients who started diamorphine treatment after the German model project will be analyzed. Changes during the first year can be compared with the results of the former heroin trial. Methods: At treatment admission and after every six months the patients' situation regarding health, social situation and substance use was documented on standardized forms by the doctors. The description of patients' status was based on the last documentation in 2011. In the longitudinal analysis data from start of treatment and one-year assessment were compared and tested for statistical significance. Results: 341 diamorphine patients are documented in 2011, 205 (60.1 %) of whom started treatment under the new conditions after the German model project was finished. Most of the patients received their diamorphine dose twice a day. The mean daily dose is 358 mg diamorphine for the "old" patients who are in treatment for more than eight years on average. The newly admitted patients who are in treatment for a year and a half on average get a mean daily dose of 432 mg. 3.6 % of the patients are HIV-positive, 75.0 % are infected with hepatitis C. One quarter suffers from depressive disorders. The majority of the patients are living in stable conditions, and one quarter is working regularly or having a job. Offences are committed by only 6.7 % of the patients. 5.1 % used street heroin and 22.4 % cocaine during the past 30 days. With respect to health, social situation and drug use significant improvements are found during the first year of diamorphine treatment. Conclusions: Heroin-assisted treatment under standard health care conditions is as effective as under the conditions of a randomized clinical trial. The current situation of the "old" patients who participated in the trial is slightly better than among the new patients. This indicates that major changes and developments under diamorphine treatment needs time to occur.
focused, nonjudgmental observing, describing and participating technique helping to improve internal or external awareness. Giving up a judgmental approach mindfulness improves effective relapse prevention and increases the likelihood for a more flexible problem solving. Whereas substance consumption decreases awareness, mindfulness increases awareness and thus it may offer a more objective view on selected topics of patients live as well as a more effective approach to handle craving for substances. Aim: This article gives a short introduction to MBSR and DBT-S. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
**Original Title:** Was ist Achtsamkeit? Herkunft, Praxis und Konzeption.

**Citation:** Sucht: Zeitschrift für Wissenschaft und Praxis, February 2014, vol/is. 60/1(13-19), 0939-5911 (Feb 2014)

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**Language:** German

**Abstract:** Content: Starting from its recent popularity the notion of mindfulness is explained with respect to its historic origin as well as with respect to its application and practice within our modern culture. It is shown that mindfulness is intimately tied with direct experience and as such is in contradiction with a static scientific definition of ‘mindfulness’. Furthermore the understanding of mindfulness also changes to some degree in dependence of the specific context it is applied in. Thereby, the crucial issue is the motivation for the practice of mindfulness. In the early Buddhist context, where mindfulness is mentioned first, the motivation is directed towards spiritual growth and self-transformation. In our modern western society we find next to spiritual motives also secular ones and mindfulness is practiced within a wide range of different areas with large variation of goals and motives to do so. Often intentions are towards wellbeing, relaxation and self-exploration. But of course mindfulness is also applied within clinical and educational contexts. Especially in the treatment of addiction a specific program for relapse prevention was developed. Conclusion: Overall the recent popularity of mindfulness is interpreted as a collective process of self-regulation of our culture which is facing increasing functionalization and social acceleration. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Verlag Hans Huber, Hogrefe AG, Bern; YEAR: 2014

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

**Subject Headings:** *Motivation
*Practice
*Self Regulation
*Well Being
*Mindfulness
Modernization

**Source:** PsycINFO

**141. Mindfulness-based psychotherapy—Opportunities and limits of the third generation of behavior therapy.**

**Original Title:** Achtsamkeitsbasierte Psychotherapie-Chancen und Grenzen der dritten Generation der Verhaltenstherapie.

**Citation:** Sucht: Zeitschrift für Wissenschaft und Praxis, February 2014, vol/is. 60/1(7-12), 0939-5911 (Feb 2014)

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**Language:** German
Abstract: Aim: The paper presents important approaches of mindfulness-based psychotherapy and introduces the concept of the "third wave" of behavior therapy. Content: Approaches that can be counted as "third wave" (Mindfulness-Based Stress Reduction, Mindfulness-Based Cognitive Therapy, Acceptance and Commitment Therapy, Dialectical Behavior Therapy) as well as current results pertaining to the efficacy of these approaches are presented. Opportunities and limitations of mindfulness-based approaches are discussed. Conclusions: Mindfulness-based interventions open up interesting perspectives for psychotherapy in general and for the treatment of substance use disorders. Possible dangers in introducing these methods into psychotherapy should be taken into account.

Country of Publication: HOLDER: Verlag Hans Huber, Hogrefe AG, Bern; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse
*Psychotherapy
*Mindfulness
*Dialectical Behavior Therapy

Source: PsycINFO

142. Integrating addiction and mental health treatment within a national addiction treatment system: Using multiple statistical methods to analyze client and interviewer assessment of co-occurring mental health problems.

Citation: Nordic Studies on Alcohol and Drugs, February 2014, vol./is. 31/1(59-79), 1458-6126 (Feb 2014)

Author(s): Lundgren, Lena; Wilkey, Catriona; Chassler, Deborah; Sandlund, Mikael; Armelius, Bengt-Ake; Armelius, Kerstin; Brannstrom, Jan

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Language: English

Abstract: Aims: For a Swedish national sample of 12,833 individuals assessed for a substance use disorder (SUD) (2002-2008) in the Swedish welfare system, client self-report and clinical staff Addiction Severity Index (ASI) assessment data were used to assess mental health problem severity and needs. Methods: Analysis of client self-report data using regression methods identified demographic characteristics associated with reporting significant mental health problems. Clinical staff assessment data from the ASI Interviewer Severity Rating (ISR) score were used to develop a K-means cluster analysis with three client cluster profiles: Narcotics (n = 4795); Alcohol (n = 4380); and Alcohol and Psychiatric Problems (n = 3658). Chi-square and one-way ANOVA analyses identified self-reported mental health problems for these clusters. Results: 44% of clients had a history of using outpatient mental health treatment, 45% reported current mental health symptoms, and 19% reported significant mental health problems. Women were 1.6 times more likely to report significant mental health problems than men. Staff assessed that 74.8% of clients had current mental health problems and that 13.9% had significant mental health problems. Women were 1.6 times more likely to report significant mental health problems than men. Staff assessed that 74.8% of clients had current mental health problems and that 13.9% had significant mental health problems. Client and staff results were congruent in identifying that clients in the Alcohol profile were less likely (5%) to report having significant mental health problems compared to the other two profiles (30% each). Conclusions: About 19% of clients with SUDs reported significant mental health problems, need integrated addiction and mental health treatment, and these clients are clustered in two population groups. An additional 25% of the addiction treatment population report current mental health symptoms and have at some point used mental health treatment. This national level assessment of the extent and severity of co-occurring disorders can inform decisions made regarding policy...
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shifts towards an integrated system and the needs of clients with co-occurring disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Comorbidity  
*Drug Addiction  
*Drug Rehabilitation  
*Mental Disorders  
*Mental Health  
Clients  
Interviewers  
Measurement

Source: PsycINFO

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

143. Capabilities for handling complex substance abuse problems and its relationship to the treatment system: Using the DDCAT instrument to explore local treatment systems in Finland.

Citation: Nordic Studies on Alcohol and Drugs, February 2014, vol./is. 31/1(45-58), 1458-6126 (Feb 2014)

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Language: English

Abstract: Background: Mental health problems in Finland have been the responsibility of the health care, and substance abuse problems have been handled within social care. In 2009, a national reform aiming at integrating mental health and substance abuse treatment systems (SATS) was launched. The critics of integration were concerned that it implies a medicalization and a narrowing of the social care goals. Aim: This article analyses to what extent integration of mental health and SATS affect the capability to treat co-occurring substance abuse and mental health problems. A secondary aim is to assess the utility of the DDCAT (Dual Diagnosis Capability in Addiction Treatment) instrument in a Finnish context. Data: The study is based on group interviews, using DDCAT, in six Finnish municipalities, three with integrated and three with separate mental health care and SATS. The assessment pertains to the main outpatient unit in the city. Results: The dual diagnosis treatment capability did not depend on the system-level integration. Two municipalities where SATS was administratively separate from mental health care were able to achieve high dual diagnosis capability ratings while in one municipality with system level integration this capability was not very high. The DDCAT instrument puts an emphasis on medical staff and competence. Conclusions: Strong, separate local SATS may adapt to the integration demands or needs by strengthening their psychiatric competence. This solution can result in treatment that is equally competent in treating mental health and substance abuse problems as integrated systems. The DDCAT instrument can be useful in a Finnish context to measure medical competence to handle dual diagnoses, irrespective of system solutions. For a balanced measurement, the instrument should be complemented with a section mapping competence to handle co-occurring social problems. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
144. Co-occurrence of substance use disorders with other psychiatric disorders: Implications for treatment services.

Citation: Nordic Studies on Alcohol and Drugs, February 2014, vol./is. 31/1(5-25), 1458-6126 (Feb 2014)

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Language: English

Abstract: Introduction: This paper critically evaluates the literature on the co-occurrence of substance-use disorders (SUDs) with other psychiatric conditions. Our review considers the variety of different associations between the two, and suggests the implications of the literature for the design of treatment services that address both types of disorders. Methods: A narrative review of research and theory was conducted, covering epidemiology of co-occurring psychiatric disorders worldwide, mechanisms underlying co-occurrence, and treatment models. Results: Epidemiological research has documented a high prevalence of co-occurring disorders in both clinical samples and the general population, although the literature is based primarily on studies in high-income countries and some of the overlap might be due to the co-occurrence of milder forms of both types of disorders. Consistent with what has been reported in other reviews, we conclude that clients with co-occurring disorders tend to have a more severe course of illness, more severe health and social consequences, more difficulties in treatment, and worse treatment outcomes than clients with a single disorder; we address the implications of these findings for the design of treatment services. Conclusions: Much of the evidence shows that separately, treatments for both SUD and other psychiatric disorders are effective in reducing substance use and in improving behavioral, familial, and psychosocial outcomes. The evidence further suggests that these outcomes might be improved when treatment modalities are offered in combination within an integrated treatment plan that simultaneously addresses substance abuse and psychiatric problems. It is concluded that there is potentially more to be gained from taking a public health perspective and working on efforts to implement existing evidence-based practices at the systems level, than from the current tendency to look for ever more powerful individual-level interventions at the clinical level. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Comorbidity
*Drug Abuse
*Drug Rehabilitation
*Mental Disorders
*Mental Health Services

Source: PsycINFO

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


Citation: International Journal of Obesity, February 2014, vol./is. 38/2(292-298), 0307-0565;1476-5497 (Feb 2014)
Objective: To investigate if phentermine treatment induces phentermine abuse, psychological dependence (addiction) or phentermine drug craving in overweight, obese and weight loss maintenance patients. To investigate whether amphetamine-like withdrawal occurs after abrupt cessation of long-term phentermine treatment. Design: Clinical intervention trial with interruption of phentermine treatment in long-term patients. Subjects: 269 obese, overweight or formerly obese subjects (age: 20-88 years, BMI: 21-74 kg m-2) treated with phentermine long-term (LTP, N = 117), 1.1-21.1 years, or short-term (ATP, N = 152), 4-22 days, with phentermine doses of 18.75-112.5 (LTP) and 15-93.75 (ATP) mg per day. Measurements: Module K of the Mini International Neuropsychiatric Interview modified for phentermine (MINI-SUD), Severity of Dependence Scale (SDS), 45-item Cocaine Craving Questionnaire-NOW (CCQ-NOW) modified for phentermine (PCQ-NOW), and Amphetamine Withdrawal Questionnaire (AWQ) modified for phentermine (PWQ). Results: MINI-SUD interviews were negative for phentermine abuse or psychological dependence in all LTP patients. SDS examination scores were low for all LTP and ATP patients, indicating they were not psychologically dependent upon phentermine. PCQ-NOW scores were low for all LTP and ATP patients, indicating neither short-term nor long-term phentermine treatment had induced phentermine craving. Other than an increase in hunger or eating, amphetamine-like withdrawal symptoms did not occur upon abrupt phentermine cessation as measured by sequential PWQ scores. Conclusions: Phentermine abuse or psychological dependence (addiction) does not occur in patients treated with phentermine for obesity. Phentermine treatment does not induce phentermine drug craving, a hallmark sign of addiction. Amphetamine-like withdrawal does not occur upon abrupt treatment cessation even at doses much higher than commonly recommended and after treatment durations of up to 21 years. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
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Language: English

Abstract: People with either posttraumatic stress disorder (PTSD) or alcohol dependence (AD) are apt to report problems in their social networks, including low perceived support and elevated conflict. However, little research has examined social networks among people with comorbid PTSD/AD despite evidence suggesting these two conditions commonly co-occur and are linked to particularly severe problems. To test the hypothesis that people with comorbid PTSD/AD experience particularly elevated social network problems, individuals with lifetime diagnoses of PTSD, AD, comorbid PTSD/AD, or no lifetime history of Axis I psychopathology in the National Comorbidity Survey-Replication were compared on four dimensions of social networks: (1) Closeness, (2) Conflict, (3) Family Support, and (4) Apprehension. Persons with PTSD, AD, or comorbid PTSD/AD endorsed more problems with the Conflict, Family Support, and Apprehension factors compared to people with no history of Axis I psychopathology. Moreover, individuals with comorbid PTSD/AD endorsed greater Apprehension and significantly less Family Support compared to the other three groups. Results suggest people with comorbid PTSD/AD experience increased problems with their family as well as greater concerns about enlisting social support than even people with PTSD or AD alone. Treatments for people suffering from comorbid PTSD/AD should consider assessing for and possibly targeting family support and apprehension about being close to others. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
likely to seek treatment for their SAD symptoms and to drink before/during antisocial acts than the SAD only group. The presence of SAD for individuals with ASPD (and vice versa) does not appear to provide any "protective benefits." SAD and ASPD appear to be two separate but correlated disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Elsevier Ltd; YEAR: 2013
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcoholism
*Antisocial Personality Disorder
*Anxiety Disorders
*Comorbidity
*Social Anxiety
Source: PsycINFO
Full Text: Available from Elsevier in Journal of Anxiety Disorders


Citation: Psychiatry and Clinical Neurosciences, March 2014, vol./is. 68/3(242-243), 1323-1316;1440-1819 (Mar 2014)
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Language: English
Abstract: Presents a case report of a 45-year-old man with alcohol dependency. He presented to the emergency outpatient clinic with chief complaints of easy fatigability, loss of appetite, and pain in bilateral lower legs. He had tended to drink too much alcohol since his twenties. Although he had alcoholic liver injury, he would not stop alcohol ingestion. For the past several years, he had been drinking approximately 1500 mL of beer and 350 mL of whisky per day. He had a severely unbalanced diet. He ate only ready-made meals that contained some meats, instant food from convenience stores, and seldom any fresh vegetables or fruits. He had easy fatigability and loss of appetite from 3 weeks before presentation to the clinic. He gradually became unable to consume anything but water. At the same time, he developed pain in bilateral lower legs and had difficulty in ambulation. As alcohol-dependent patients, such as the patient in this study, often have an unbalanced diet for a long time and alcohol inhibits vitamin C absorption, it is necessary to be mindful of scurvy in alcohol-dependent patients. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcoholism
*Case Report
*Diets
*Drug Dependency
*Vitamin Deficiency Disorders
Alcohols
Source: PsycINFO
Full Text: Available from Wiley in Psychiatry and Clinical Neurosciences
149. Internet abusers associate with a depressive state but not a depressive trait.

Citation: Psychiatry and Clinical Neurosciences, March 2014, vol./is. 68/3(197-205), 1323-1316;1440-1819 (Mar 2014)

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Language: English

Abstract: Aim: The present study investigated three issues: (i) whether Internet abusers display a depressive state without a depressive trait; (ii) which symptoms are shared between Internet abuse and depression; and (iii) which personality characteristics were shown in Internet abusers. Methods: Ninety-nine male and 58 female participants aged 18-24 years were screened with the Chen Internet Addiction Scale. After screening, subjects were separated into the high- (n = 73) and low-risk (n = 84) Internet abuser groups. Participants were respectively administered the Chinese version of the Beck Depression Inventory-II to assess a depressive state and the Minnesota Multiphasic Personality Inventory-2 to assess a depressive trait. Results: The present results showed that high-risk Internet abusers exhibited a stronger depressive state than low-risk Internet abusers in the Beck Depression Inventory-II. However, high-risk Internet abusers did not show a depressive trait in the Minnesota Multiphasic Personality Inventory-2 compared to low-risk Internet abusers. Therefore, high-risk Internet abuse participants exhibited a depressive state without a depressive trait. Conclusions: In a comparison of the symptoms of depression and Internet abuse, it was found that high-risk Internet abuse participants shared some common behavioral mechanisms with depression, including the psychiatric symptoms of loss of interest, aggressive behavior, depressive mood, and guilty feelings. High-risk Internet abuse participants may be more susceptible to a temporal depressive state but not a permanent depressive trait. The present findings have clinical implications for the prevention and treatment of Internet abuse. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Internet Addiction *Major Depression *Personality Traits *Risk Factors Symptoms

Source: PsycINFO

Full Text: Available from Wiley in Psychiatry and Clinical Neurosciences


Citation: AIDS Patient Care and STDs, February 2014, vol./is. 28/2(71-81), 1087-2914 (Feb 2014)

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The benefits of integrating primary care and substance use disorder treatment are well known, yet true integration is difficult. We developed and evaluated a team-based model of integrated care within the primary care setting for HIV-infected substance users and substance users at risk for contracting HIV. Qualitative data were gathered via focus groups and satisfaction surveys to assess patients' views of the program, evaluate key elements for success, and provide recommendations for other programs. Key themes related to preferences for the convenience and efficiency of integrated care; support for a team-based model of care; a feeling that the program requirements offered needed structure; the importance of counseling and education; and how provision of concrete services improved overall well-being and quality of life. For patients who received buprenorphine/naloxone for opioid dependence, this was viewed as a major benefit. Our results support other studies that theorize integrated care could be of significant value for hard-to-reach populations and indicate that having a clinical team dedicated to providing substance use disorder treatment, HIV risk reduction, and case management services integrated into primary care clinics has the potential to greatly enhance the ability to serve a challenging population with unmet treatment needs. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)