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2. PsycINFO; addict*.ti,ab; 25722 results.
3. PsycINFO; 1 OR 2; 47561 results.
1. The mental health and life satisfaction of children of drug abusers in Wenzhou, China.

Citation: Applied Research in Quality of Life, June 2014 (No Pagination Specified), 1871-2584;1871-2576 (Jun 27, 2014)

Author(s): Shi, Guoliang; Wu, Xiaohui; Yi, Yingying; Yu, Minjiang; Tian, Zengkui; Wang, Wei; Wu, Hao

Abstract: The spread of illegal drug use among adult caregivers of children raises many serious concerns. These concerns are intensified in situations in which drug-using adults are responsible for providing for the care, safety, and general well-being of the children under their care. The relative complexity of these situations is further compounded by the absence of rigorous scientific inquiries into the mental health of children being raised in such situations. This survey utilized the Symptom Checklist-90 (SCL-90) to measure the mental health and life satisfaction of the children (aged 8 to 18 years) with at least one parent who is a drug abuser. The analysis results show that the psychological health of the children is poor and the mental health of the children affects their life satisfaction. Parents who are addicted to drugs may have an impact on the life satisfactions of their children regardless of the age of the child, and the impact on boys is more serious than on girls. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: PsycINFO

Full Text: Available from Springer NHS in Applied Research in Quality of Life; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

2. Development and validation of the scale to assess satisfaction with medications for addiction treatment-methadone for heroin addiction (SASMAT-METHER).

Citation: Drug and Alcohol Dependence, June 2014 (No Pagination Specified), 0376-8716 (Jun 11, 2014)

Author(s): Cobos, Jose Perez de los; Trujols, Joan; Sinol, Nuria; Batlle, Francesca

Abstract: OBJECTIVE: To develop and examine the psychometric properties of a scale to specifically assess satisfaction with methadone in heroin-dependent patients. METHODS: The 44-item preliminary version of the scale to assess satisfaction with medications for addiction treatment-methadone for heroin addiction (SASMAT-METHER) was obtained from a pool of items designed to assess satisfaction with any medication-addiction combination. Theoretical domains of the initial SASMAT-METHER were overall satisfaction, pharmacotherapy, initiation, anti-addictive effect on heroin, mental state, physical state, personal functioning, acceptability, and anti-addictive effect on secondary substances. The Treatment Satisfaction Questionnaire for Medication 1.4 version (TSQM 1.4) and the Verona Service Satisfaction Scale for Methadone Treatment (VSSS-MT) were used for concurrent validation. Participants included heroin-dependent patients receiving methadone treatment for at least the last 3 months. RESULTS: The preliminary version of the SASMAT-METHER scale was completed by 241 patients, with 180 surveys considered suitable for factor analysis. Principal component analysis of these SASMAT-METHER surveys revealed a 3-factor structure that accounted for 40.4% of total variance. Based on similarities between empirically-obtained factors and theoretical domains, factors 1 through 3 were named 'Personal Functioning and Well-Being' (7 items), 'Anti-Addictive Effect on Heroin' (5 items), and 'Anti-Addictive Effect on Other Substances' (5 items). All factors showed good to excellent internal consistency (Cronbach's : 0.83-0.92) and test-retest reliability (intraclass correlation coefficients:...
Correlations between overall SASMAT-METHER and TSQM 1.4 scores were stronger (Pearson r=0.69) than correlations between overall SASMAT-METHER and VSSS-MT scores (Pearson r=0.26). CONCLUSION: These results present evidence for the validity and reliability of SASMAT-METHER. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

3. Reconstructing 'the alcoholic': Recovering from alcohol addiction and the stigma this entails.

Citation: International Journal of Mental Health and Addiction, June 2014(No Pagination Specified), 1557-1874;1557-1882 (Jun 25, 2014)

Author(s): Hill, Jodie V; Leeming, Dawn

Abstract: Public perception of alcohol addiction is frequently negative, whilst an important part of recovery is the construction of a positive sense of self. In order to explore how this might be achieved, we investigated how those who self-identify as in recovery from alcohol problems view themselves and their difficulties with alcohol and how they make sense of others' responses to their addiction. Semi-structured interviews with six individuals who had been in recovery between 5 and 35 years and in contact with Alcoholics Anonymous were analysed using Interpretative Phenomenological Analysis. The participants were acutely aware of stigmatising images of 'alcoholics' and described having struggled with a considerable dilemma in accepting this identity themselves. However, to some extent they were able to resist stigma by conceiving of an 'aware alcoholic self' which was divorced from their previously unaware self and formed the basis for a new more knowing and valued identity. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: PsycINFO

Full Text: Available from Springer NHS in International Journal of Mental Health and Addiction; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.


Citation: European Neuropsychopharmacology, June 2014(No Pagination Specified), 0924-977X (Jun 12, 2014)

Author(s): Dieckmann, Luiz Henrique Junqueira; Ramos, Anna Carolina; Silva, Eroy Aparecida; Justo, Luis Pereira; Sabioni, Pamela; Frade, Iracema Francisco; de Souza, Altay Lino; Gaduroz, Jose Carlos Fernandes

Abstract: Cocaine use affects approximately 13.4 million people, or 0.3% of the world's population between 15 and 64 years of age. Several authors have described drug addiction as a disease of the brain reward system. Given that the cholinergic system impacts reward mechanisms and drug self-administration, acetylcholine (ACh) might play an important role in the cocaine addiction process. We evaluated the efficacy of biperiden (a cholinergic antagonist) in reducing craving and the amount used, and in increasing compliance with treatment for cocaine/crack addiction. It was a study double-blind, randomised, placebo-controlled, 8-week trial of 111 cocaine or crack addicted male
patients between 18 and 50 years old. Two groups were compared: placebo (n=55) or biperiden (n=56) combined with weekly sessions of brief group cognitive-behavioural therapy. The efficacy of treatment was evaluated according to the patients' compliance and several instruments: the Minnesota Cocaine Craving Scale, the Beck Depression and Anxiety Scales and a questionnaire assessing the amount of drug used. All of the patients attended weekly sessions for two months. We analysed the data considering the patients' intention to treat based on our last observation. Of the 56 patients in the biperiden group, 24 completed the treatment (42.8%) compared with only 11 patients in the placebo group (20%), which was a significant difference (p=0.009). Compliance with treatment was 118% higher in the biperiden group, which was also the group that presented a statistically significant reduction in the amount of cocaine/crack use (p<0.001). There was statistically significant difference between the craving score in the biperiden group.

Pharmacological blockade of the cholinergic system with biperiden is a promising alternative to treat cocaine/crack addiction, helping patients to reduce the amount used and improving compliance with psychotherapy treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

5. Alcohol: A stimulant activating brain stress responsive systems with persistent neuroadaptation.

Citation: Neuropharmacology, June 2014(No Pagination Specified), 0028-3908 (Jun 12, 2014)
Author(s): Zhou, Yan; Kreek, Mary Jeanne
Abstract: Addictive diseases, including addiction to alcohol, opiates or cocaine, pose massive public health costs. Addictions are chronic relapsing brain diseases, caused by drug-induced direct effects and persistent neuroadaptations at the molecular, cellular and behavioral levels. These drug-type specific neuroadaptations are mainly contributed by three factors: environment, including stress, the direct reinforcing effects of the drug on the CNS, and genetics. Results from animal models and basic clinical research (including human genetic study) have shown important interactions between the stress responsive systems and alcohol abuse. In this review we will discuss the involvement of the dysregulation of the stress responsive hypothalamic-pituitary-adrenal (HPA) axis in alcohol addiction (Section I). Addictions to specific drugs such as alcohol, psychostimulants and opiates (e.g., heroin) have some common direct or downstream effects on several brain stress-responsive systems, including vasopressin and its receptor system (Section II), POMC and mu opioid receptor system (Section III) and dynorphin and kappa opioid receptor systems (Section IV). Further understanding of these systems, through laboratory-based and translational studies, have the potential to optimize early interventions and to discover new treatment targets for the therapy of alcoholism. This article is part of a Special Issue entitled 'CNS Stimulants'. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

6. Role of medial prefrontal and orbitofrontal monoamine transporters and receptors in performance in an adjusting delay discounting procedure.

Citation: Brain Research, June 2014(No Pagination Specified), 0006-8993 (Jun 10, 2014)
Evidence Services | library.nhs.uk

Author(s): Yates, Justin R; Perry, Jennifer L; Meyer, Andrew C; Gipson, Cassandra D; Charnigo, Richard; Bardo, Michael T

Abstract: Performance in an adjusting delay discounting procedure is predictive of drug abuse vulnerability; however, the shared underlying specific prefrontal neural systems linking delay discounting and increased addiction-like behaviors are unclear. Rats received direct infusions of methylphenidate (MPH; 6.25, 25.0, or 100g), amphetamine (AMPH; 0.25, 1.0, or 4.0g), or atomoxetine (ATO; 1.0, 4.0, or 16.0g) into either medial prefrontal cortex (mPFC) or orbitofrontal cortex (OFC) immediately prior to performance in an adjusting delay task. These drugs were examined because they are efficacious in treating impulse control disorders. Because dopamine (DA) and serotonin (5-HT) receptors are implicated in impulsive behavior, separate groups of rats received microinfusions of the DA receptor-selective drugs SKF 81297 (0.1 or 0.4g), SCH 23390 (0.25 or 1.0g), quinpirole (1.25 or 5.0g), and eticlopride (0.25 or 1.0g), or received microinfusions of the 5-HT receptor-selective drugs 8-OH-DPAT (0.025 or 0.1g), WAY 100635 (0.01 or 0.04g), DOI (2.5 or 10.0g), and ketanserin (0.1 or 0.4g). Impulsive choice was not altered significantly by MPH, AMPH, or ATO into either mPFC or OFC, indicating that neither of these prefrontal regions alone may mediate the systemic effect of ADHD medications on impulsive choice. However, quinpirole (1.25g) and eticlopride infused into mPFC increased impulsive choice, whereas 8-OH-DPAT infused into OFC decreased impulsive choice. These latter results demonstrate that blockade of DA D2 receptors in mPFC or activation of 5-HT1A receptors in OFC increases impulsive choice in the adjusting delay procedure. (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


Citation: Journal of the American Academy of Child & Adolescent Psychiatry, July 2014, vol./is. 53/7(815-816), 0890-8567;1527-5418 (Jul 2014)

Author(s): Caspersen, Shannon Gulliver; Tau, Gregory

Correspondence Address: Caspersen, Shannon Gulliver, shg9046@nyp.org

Institution: New York Presbyterian Hospital, New York, NY, US; Columbia University, New York, NY, US

Language: English

Abstract: Reviews the book, Clinical Handbook of Adolescent Addiction by Richard Rosner (see record 2013-04471-000). From schools to parking lots to basements, adolescents are using illicit substances. Drug and alcohol use is common in healthy youth and is even more prevalent in those youth who are psychiatrically ill. The morbidity associated with substance use makes it a public health concern. For these reasons, screening for substance use and intervention and treatment when this behavior grows problematic are important clinical practice issues for mental health clinicians working with youth. The management of problems associated with substance use in youth has been viewed as a special challenge owing to a unique confluence of culture, behavior, confidentiality, comorbidity, and severity of psychopathology. This text is the newest addition to the library of the growing body of literature for clinicians in this realm. The volume highlights the distinction between adults and adolescents in the varied addiction disorders, with special attention to assessment, treatment, family, confidentiality, and the law that adolescents require. Although the handbook sometimes presents the most recent research and other innovations in the field of adolescent addiction in excessive detail, overall it is a well written and comprehensive volume that is easy to navigate using the detailed table of contents and thorough index. This book is an asset to the field of adolescent addiction because it addresses issues unique to this population from the ground up rather than by extension and extrapolation from the adult literature. Psychiatrists, psychologists,
pediatricians, and social workers can be overwhelmed when encountering substance-using adolescents because these patients are as vulnerable and complex as they are difficult to engage and treat. To these clinicians and others, this volume is an outstanding reference because it serves as a reliable guide and a reassuring resource to empower us as we take on the difficult yet rewarding task of working with this population. (PsycINFO Database Record (c) 2014 APA, all rights reserved)


Citation: Journal of the American Academy of Child & Adolescent Psychiatry, July 2014, vol./is. 53/7(771-779), 0890-8567;1527-5418 (Jul 2014)

Author(s): Stephens, Jacob R; Heffner, Jaimee L; Adler, Caleb M; Blom, Thomas J; Anthenelli, Robert M; Fleck, David E; Welge, Jeffrey A; Strakowski, Stephen M; DelBello, Melissa P

Correspondence Address: DelBello, Melissa P.: Department of Psychiatry and Behavioral Neuroscience, University of Cincinnati, 260 Stetson Street, Suite 3200, Cincinnati, OH, US, 45219, melissa.delbello@uc.edu

Institution: Research, Observation, Service, Education (ROSE) Program, University Cincinnati College of Medicine, Cincinnati, OH, US; Fred Hutchinson Cancer Research Center, Seattle, WA, US; Division of Bipolar Disorders Research, University of Cincinnati College of Medicine, Cincinnati, OH, US; Division of Bipolar Disorders Research, University of California at San Diego, San Diego, CA, US; Division of Bipolar Disorders Research, University of Cincinnati College of Medicine, Cincinnati, OH, US; Division of Bipolar Disorders Research, University of Cincinnati College of Medicine, Cincinnati, OH, US; Division of Bipolar Disorders Research, University of Cincinnati College of Medicine, Cincinnati, OH, US; Division of Bipolar Disorders Research, University of Cincinnati College of Medicine, Cincinnati, OH, US; Division of Bipolar Disorders Research, University of Cincinnati College of Medicine, Cincinnati, OH, US

Language: English

Abstract: Adolescents with bipolar disorder (BD) are more likely to develop substance use disorders (SUDs) than adolescents without psychiatric disorders; however, to our knowledge, specific risk factors underlying this relationship have not been prospectively examined. The purpose of this study was to identify predictors of developing SUDs after a first manic episode. Method: Participants aged 12 to 20 years and hospitalized with their first manic episode associated with bipolar I disorder (BP-I) were recruited as part of the University of Cincinnati First-Episode Mania Study and prospectively evaluated for patterns of substance use. Follow-up ranged between 17 and 283 weeks (mean = 113 weeks, SD = 71.9 weeks). Demographic and clinical variables were compared between adolescents with and without SUDs. Results: Of the 103 adolescents with BD, 49 (48%) either had a SUD at baseline or developed one during follow-up. Of the 71 participants who did not have a SUD at study entry, 17 (24%) developed one during follow-up (median = 40 weeks). Later onset of BD, manic (versus mixed) mood episode, and comorbid disruptive behavior disorders were associated with an increased risk of developing a SUD in univariate analyses. Adolescents treated with psychostimulant treatment before their first manic episode were significantly less likely to develop a SUD.
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independent of attention-deficit/hyperactivity disorder (ADHD) diagnosis. Comorbid posttraumatic stress disorder (PTSD) and psychotic symptoms were the strongest predictors of SUD development. Conclusion: Our results confirm high rates of SUD in adolescents with BD. In addition, our findings identify potential risk factors associated with SUDs in adolescents with BD. These data are preliminary in nature and should be explored further in future studies. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Alcohol Abuse
*Bipolar Disorder
*Comorbidity
*Drug Abuse
*Mania
Adolescent Development
Epidemiology
Protective Factors
Risk Factors
Source: PsycINFO


Citation: Drug and Alcohol Dependence, June 2014(No Pagination Specified), 0376-8716 (Jun 2, 2014)
Author(s): Gordon, Michael S; Kinlock, Timothy W; Schwartz, Robert P; Fitzgerald, Terrence T; O'Grady, Kevin E; Vocci, Frank J
Abstract: BACKGROUND: Buprenorphine is a promising treatment for heroin addiction. However, little is known regarding its provision to pre-release prisoners with heroin dependence histories who were not opioid-tolerant, the relative effectiveness of the post-release setting in which it is provided, and gender differences in treatment outcome in this population. METHODS: This is the first randomized clinical trial of prison-initiated buprenorphine provided to male and female inmates in the US who were previously heroin-dependent prior to incarceration. A total of 211 participants with 3-9 months remaining in prison were randomized to one of four conditions formed by crossing In-Prison Treatment Condition (received buprenorphine vs. counseling only) and Post-release Service Setting (at an opioid treatment center vs. a community health center). Outcome measures were: entered prison treatment; completed prison treatment; and entered community treatment 10 days post-release. RESULTS: There was a significant main effect (p=.006) for entering prison treatment favoring the In-Prison buprenorphine Treatment Condition (99.0% vs. 80.4%). Regarding completing prison treatment, the only significant effect was Gender, with women significantly (p<.001) more likely to complete than men (85.7% vs. 52.7%). There was a significant main effect (p=.012) for community treatment entry, favoring the In-Prison buprenorphine Treatment Condition (47.5% vs. 33.7%). CONCLUSIONS: Buprenorphine appears feasible and acceptable to prisoners who were not opioid-tolerant and can facilitate community treatment entry. However, concerns remain with in-prison treatment termination due to attempted diversion of medication. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: Journal; Peer Reviewed Journal
Source: PsycINFO
Full Text: Available from Elsevier in Drug and Alcohol Dependence
10. "it depends on the cop:" street-based sex workers' perspectives on police patrol officers.

Citation: Sexuality Research & Social Policy: A Journal of the NSRC, June 2014(No Pagination Specified), 1868-9884;1553-6610 (Jun 24, 2014)

Author(s): Dewey, Susan; St. Germain, Tonia

Abstract: Based upon 50 interviews that took place over the course of 3 years of ethnographic research with 100 female street-based sex workers in Denver, Colorado, the tenth largest city in the United States, this article explores the cultural ethos informing women's interactions with police and the tools women use to navigate their struggles with homelessness, addiction, and the everyday violence of the street. It identifies three beliefs about patrol officers that reflect the complexities of women's interactions with police: arrest is indiscriminate in a "known prostitution area," arrest avoidance strategies necessitate interpreting behavioral cues while showing respect to officers and forming affective bonds with potential clients, and officers may abuse their authority. This belief system is part of an environment in which women's stigmatized behaviors are highly visible and constitute an increased risk of negative police encounters. Changes to policing practices remain unlikely while women's sex work and drug use activities remain criminalized. Findings presented support arguments for decriminalizing prostitution as well as the implementation of harm reduction-oriented social policy, including services that inform women about their rights in the criminal justice system while facilitating awareness of how their individual lives intersect with gender, class, and racial bias in a sociolegal system that stigmatizes and criminalizes their choices. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: Journal; Peer Reviewed Journal

Source: PsycINFO

Full Text: Available from Springer NHS in Sexuality Research and Social Policy; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only. Available from Springer NHS in Sexuality Research and Social Policy; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.


Citation: Maternal and Child Health Journal, June 2014(No Pagination Specified), 1092-7875;1573-6628 (Jun 21, 2014)

Author(s): Smith, Megan V; Costello, Darce; Yonkers, Kimberly A

Abstract: A 2012 committee opinion from the American College of Obstetricians and Gynecologists highlights the considerable increase in opioid addiction in recent years, yet little is known about clinical correlates of prescribed opioids among pregnant women. This study examines clinical and demographic factors associated with the use of opioid analgesics in pregnancy. Data were derived from a prospective cohort study of pregnant women. Participants were administered the Composite International Diagnostic Interview to identify depressive and anxiety disorders and data on medication use were gathered at three assessment points and classified according to the Anatomical Therapeutic Chemical Code (ATC) classification system ATC group N02A. Participants included 2,748 English or Spanish speaking pregnant women. Six percent (n = 165) of women used opioid analgesics at any point in pregnancy. More pregnant women using opioids met diagnostic criteria for major depressive disorder (16 vs. 8 % for non users), generalized anxiety disorder (18 vs. 9 % for non users), post-traumatic stress disorder (11 vs. 4 % for non users) and panic disorder (6 vs. 4 % for non users). Women who reported opioid use were also significantly more likely than non users to report using illicit drugs and almost three times as likely to report smoking cigarettes in the second or third trimester of pregnancy (4 and 23 %, respectively) as compared to non-opioid users (0.5 and 8 %). The use of
opioids in pregnancy was associated with higher levels of psychiatric comorbidity and use of other substances as compared to non-opioid users. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: 
Source: PsycINFO
Full Text: Available from Springer NHS in Maternal and Child Health Journal; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

12. Mom, dad it's only a game! Perceived gambling and gaming behaviors among adolescents and young adults: An exploratory study.

Citation: International Journal of Mental Health and Addiction, June 2014(No Pagination Specified), 1557-1874;1557-1882 (Jun 20, 2014)
Author(s): Calado, Filipa; Alexandre, Joana; Griffiths, Mark D
Abstract: Gambling and gaming are increasingly popular activities among adolescents. Although gambling is illegal in Portugal for youth under the age of 18 years, gambling opportunities are growing, mainly due to similarity between gambling and other technology-based games. Given the relationship between gambling and gaming, the paucity of research on gambling and gaming behaviors in Portugal, and the potential negative consequences these activities may have in the lives of young people, the goal of this study was to explore and compare the perceptions of these two behaviors between Portuguese adolescents and young adults. Results from six focus groups (comprising 37 participants aged between 13 and 26 years) indicated different perceptions for the two age groups. For adolescents, gaming was associated with addiction whereas for young adults it was perceived as a tool for increasing personal and social skills. With regard to gambling, adolescents associated it with luck and financial rewards, whereas young adults perceived it as an activity with more risks than benefits. These results suggest developmental differences that have implications for intervention programs and future research. (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 Springer NHS in International Journal of Mental Health and Addiction; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

13. Substance use and hepatitis C: An ecological momentary assessment study.

Citation: Health Psychology, July 2014, vol./is. 33/7(710-719), 0278-6133;1930-7810 (Jul 2014)
Author(s): Phillips, Karran A; Epstein, David H; Vahabzadeh, Massoud; Mezghanni, Mustapha; Lin, Jia-Ling; Preston, Kenzie L
Abstract:

Objective: The objective of this study was to assess craving and mood related to opioid and cocaine use among asymptomatic hepatitis C virus (HCV)+ and HCV- methadone patients who have not started antiviral treatment. Methods: In this 28-week prospective ecological momentary assessment (EMA) study, 114 methadone-maintained, heroin- and cocaine-abusing individuals reported from the field in real time on their mood, craving, exposure to drug-use triggers, and drug use via handheld computers. Results: Sixty-one percent were HCV+; none were overtly symptomatic or receiving HCV treatment. HCV status was not associated with age, sex, race, or past-30-day or lifetime heroin or cocaine use. In event-contingent EMA entries, HCV+ individuals more often attributed use to having been bored, worried, or sad; feeling uncomfortable; or others being critical of them compared with HCV- participants. In randomly prompted EMA entries, HCV+ participants reported significantly more exposure to drug-use triggers, including handling >$10, seeing cocaine or heroin, seeing someone being offered/use cocaine or heroin, being tempted to use cocaine, and wanting to see what would happen if they used just a little cocaine or heroin. Conclusions: HCV+ individuals experienced more negative moods and more often cited these negative moods as causes for drug use. HCV+ individuals reported greater exposure to environmental drug-use triggers, but they did not more frequently cite these as causes for drug use. The EMA data reported here suggest that HCV+ intravenous drug users may experience more labile mood and more reactivity to mood than HCV- intravenous drug users. The reason for the difference is not clear, but HCV status may be relevant to tailoring of treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
self. These aspects of the self then enter into relations with a new and emerging range of technologically generated objects, which may critically influence aspects of the therapeutic relationship. In the virtual worlds that evolve in relation to the new technologies, obsessional thinking and compulsive behaviours may be stimulated, precisely because split off aspects of the self must be constantly monitored as stored images, interacting with signifiers in the technological chain, often felt to be under threat from a range of potentially persecutory and bizarre objects [Bion, 1962. A theory of thinking. International Journal of Psychoanalysis. 43]. It is suggested that an intra-psychic representation of the self, the mediated self, may evolve based on a blurring of the lines of demarcation between projected/introjected elements of the self and its objects. Drawing upon clinical case material, where appropriate, the author also discusses some similarities and differences between various forms of substance addiction, computer compulsions and, more broadly, the idea of the fetishistic object relation. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Association for Psychoanalytic Psychotherapy in the NHS; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Addiction *Compulsions *Fetishism *Technology Cognitive Mediation Desire
Source: PsycINFO


Citation: Substance Abuse Treatment, Prevention, and Policy, June 2013, vol./is. 8/, 1747-597X (Jun 13, 2013)
Author(s): Shield, Kevin D; Rehm, Jurgen; Gmel, Gerrit; Rehm, Maximilien X; Allamani, Allaman
Correspondence Address: Shield, Kevin D., kevin.shield@mail.utoronto.ca
Institution: Centre for Addiction and Mental Health (CAMH), Toronto, Canada; Centre for Addiction and Mental Health (CAMH), Toronto, Canada; Institute of Medical Science, University of Toronto, Toronto, Canada; Faculty of Arts and Sciences/Politics and Governance, Ryerson University, Toronto, Canada; Region of Tuscany Health Agency, Florence, Italy
Language: English
Abstract: Background: The tradition of consuming alcohol has long been a part of Italian culture and is responsible for a large health burden. This burden may be reduced with effective interventions, one of the more important of which is treatment for Alcohol Dependence (AD). The aim of this article is to estimate the burden of disease in Italy attributable to alcohol consumption, heavy alcohol consumption, and AD. An additional aim of this paper is to examine the effects of increasing the coverage of treatment for AD on the alcohol-attributable burden of disease. Methods: Alcohol-attributable deaths and the effects of treatments for AD were estimated using alcohol-attributable fractions and simulations. Deaths, potential years of life lost, years lived with disability, and disability adjusted life years lost were obtained for 2004 for Italy and for the European Union from the Global Burden of Disease study. Alcohol consumption data were obtained from the Global Information System on Alcohol and Health. The prevalences of current drinkers, former drinkers, and lifetime abstainers were obtained from the GENder Alcohol and Culture International Study. The prevalence of AD was obtained from the World Mental Health Survey. Alcohol relative risks were obtained from various meta-analyses. Results: 5,320 deaths (1,530 female deaths; 3,790 male deaths) or 5.9% of all deaths (4.9% of all female deaths; 6.3% of all male deaths) of people 15 to 64 years of age were estimated to be alcohol-attributable. Of these deaths, 74.5% (61.3% for females; 79.8% for males) were attributable to heavy drinking, and 26.9% (25.6% for females; 27.5% for males) were attributable to AD. Increasing pharmacological AD treatment coverage to 40% would result in an estimated reduction of 3.3% (50 deaths/year) of all female and 7.6%
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(287 deaths/year) of all male alcohol-attributable deaths. Conclusions: Alcohol was responsible for a large proportion of the burden of disease in Italy in 2004. Increasing treatment coverage for AD in Italy could reduce that country's alcohol-attributable burden of disease. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcohol Drinking Patterns
*Alcoholism
*Death and Dying
*Intervention
*Treatment

Source: PsycINFO

Full Text: Available from Springer NHS in Substance Abuse Treatment, Prevention, and Policy; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only. Available from Springer NHS in Substance Abuse Treatment, Prevention, and Policy; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only. Available from ProQuest in Substance Abuse Treatment, Prevention and Policy; Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions. Available from National Library of Medicine in Substance Abuse Treatment, Prevention, and Policy. Available from BioMedCentral in Substance Abuse Treatment, Prevention, and Policy


Citation: Substance Abuse Treatment, Prevention, and Policy, March 2013, vol./is. 8/, 1747-597X (Mar 15, 2013)

Author(s): Cupertino, A. Paula; Hunt, Jaime J; Gajewsk, Byron J; Jiang, Yu; Marquis, Janet; Friedmann, Peter D; Engelman, Kimberly K; Richter, Kimber P

Correspondence Address: Richter, Kimber P., krichter@kumc.edu

Institution: Department of Preventive Medicine and Public Health, University of Kansas Medical Center, Kansas City, KS, US; School of Nursing and Health Studies, University of Missouri Kansas City, Kansas City, MO, US; Department of Biostatistics, University of Kansas Medical Center, Kansas City, KS, US; Department of Biostatistics, University of Kansas Medical Center, Kansas City, KS, US; Schiefelbusch Institute for Life Span Studies, Dole Human Development Center, Lawrence, KS, US; Providence VA Medical Center, Providence, RI, US; Department of Preventive Medicine and Public Health, University of Kansas Medical Center, Kansas City, KS, US; Department of Preventive Medicine and Public Health, University of Kansas Medical Center, Kansas City, KS, US

Language: English

Abstract: Background: Quitting smoking improves health and drug use outcomes among people in treatment for substance abuse. The twofold purpose of this study is to describe tobacco treatment provision across a representative sample of U.S. facilities and to use these data to develop the brief Index of Tobacco Treatment Quality (ITTQ). Methods: We constructed survey items based on current tobacco treatment guidelines, existing surveys, expert input, and qualitative research. We administered the survey to a stratified sample of 405 facility administrators selected from all 3,800 U.S. adult outpatient facilities listed in the SAMHSA Inventory of Substance Abuse Treatment Services. We constructed the
ITTQ with a subset of 7 items that have the strongest clinical evidence for smoking cessation. Results: Most facilities (87.7%) reported that a majority of their clients were asked if they smoke cigarettes. Nearly half of facilities (48.6%) reported that a majority of their smoking clients were advised to quit. Fewer (23.3%) reported that a majority of their smoking clients received tobacco treatment counseling and even fewer facilities (18.3%) reported a majority of their smoking clients were advised to use quit smoking medications. The median facility ITTQ score was 2.57 (on a scale of 1-5) and the ITTQ displayed good internal consistency (Cronbach's alpha=.844). Moreover, the ITTQ had substantial test-retest reliability (.856), and ordinal confirmatory factor analysis found that our one-factor model for ITTQ fit the data very well with a CFI of 0.997 and an RMSEA of 0.042. Conclusions: The ITTQ is a brief and reliable tool for measuring tobacco treatment quality in substance abuse treatment facilities. Given the clear-cut room for improvement in tobacco treatment, the ITTQ could be an important tool for quality improvement by identifying service levels, facilitating goal setting, and measuring change. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
behavioral change. Methods: Over the course of two months in 2009, 55 patients admitted
to an alcohol detoxification unit of a psychiatric hospital were enrolled in this study. At
treatment entry, we assessed lifetime Trauma Load and motivation to change. Mode of
discharge was taken from patient files following therapy. We tested whether Trauma Load
moderates the effect of motivation to change on dropout from alcohol detoxification using
multivariate methods. Results: 55.4% dropped out of detoxification treatment, while
44.6% completed the treatment. Age, gender and days in treatment did not differ between
completers and dropouts. Patients who dropped out reported more traumatic event types
on average than completers. Treatment completers had higher scores in the URICA
subscale Maintenance. Multivariate methods confirmed the moderator effect of Trauma
Load: among participants with high Trauma Load, treatment completion was related to
higher Maintenance scores at treatment entry; this was not true among patients with low
Trauma Load. Conclusions: We found evidence that the effect of motivation to change on
detoxification treatment completion is moderated by Trauma Load: among patients with
low Trauma Load, motivation to change is not relevant for treatment completion; among
highly burdened patients, however, who a priori have a greater risk of dropping out, a
high motivation to change might make the difference. This finding justifies targeted and
specific interventions for highly burdened alcohol patients to increase their motivation to
change. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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Central Ltd.; YEAR: 2013

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcoholism
*Detoxification
*Dropouts
*Readiness to Change
*Trauma
Behavior Change
Motivation
Treatment

Source: PsycINFO

Full Text: Available from Springer NHS in Substance Abuse Treatment, Prevention, and Policy;
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Available from Springer NHS in Substance Abuse Treatment, Prevention, and Policy;
Note: ; Collection notes: Academic-License. Please when asked to pick an institution
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Available from ProQuest in Substance Abuse Treatment, Prevention and Policy; Note: ;
Collection notes: If asked to log in click "Athens Login“ and then select "NHSEngland" in the drop down list of institutions.
Available from National Library of Medicine in Substance Abuse Treatment, Prevention,
and Policy
Available from BioMedCentral in Substance Abuse Treatment, Prevention, and Policy

18. Attachment style, anxiety coping, and personality-styles in withdrawn alcohol addicted inpatients.

Citation: Substance Abuse Treatment, Prevention, and Policy, January 2013, vol./is. 8/, 1747-597X
(Jan 10, 2013)

Author(s): Wedekind, Dirk; Bandelow, Borwin; Heitmann, Soren; Havemann-Reinecke, Ursula;
Engel, Kirsten R; Huether, Gerald

Correspondence Address: Wedekind, Dirk: Department of Psychiatry and Psychotherapy, University of Gottingen,
von Siebold Strasse 5, Goettingen, Germany, 37075,
dirk.wedekind@med.uni-goettingen.de
Background: Insecure early attachment experiences have been reported to play an important role in the manifestation in alcoholism. The purpose of this study was to investigate the relationship of attachment styles with anxiety, anxiety coping and dysfunctional personality styles, as well as with the prevalence of personality disorders, and adverse life-events in adolescence. Methods: 59 inpatient alcohol addicted male (n=43) and female (n=16) patients were characterized by an attachment style scale (Relationships-style-questionnaire-RSQ) and completed a questionnaire battery comprising the State-Trait-Anxiety-Inventory (STAI), the Anxiety-Coping-Inventory (ABI), Temperament-and-character-inventory (TCI), Personality-system-interaction-inventory (PSI), and gave information on sociodemography, alcohol history, and adolescent adverse events. A structured interview (SKID-II) was performed to diagnose personality disorders. Results: Only 33% of subjects had a secure attachment style. Insecure attachment was associated with significantly higher trait-anxiety, higher cognitive avoidance to control anxiety, and higher values on most personality style dimensions directed to the pathological pole. Conclusions: Despite the limitation due to a small sample size, the results of this study show that the consideration of attachment styles is of significance in the diagnosis and therapy of alcohol addiction. Attachment may characterize different styles to control emotional aspects, anxiety cues and interpersonal relationships in individuals suffering from alcohol addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
19. Suicidal ideation and HIV risk behaviors among a cohort of injecting drug users in New Delhi, India.

Citation: Substance Abuse Treatment, Prevention, and Policy, January 2013, vol./is. 8/, 1747-597X (Jan 15, 2013)

Author(s): Sarin, Enisha; Singh, Basant; Samson, Luke; Sweat, Michael

Correspondence Address: Sarin, Enisha, esarin@jhsphs.edu

Institution: Independent Consultant, Haryana, India; Department of Psychiatry and Behavioral Sciences, Family Service Research Center, Medical University of South Carolina, Charleston, SC, US; Sharan Society for Service to Urban Poverty, New Delhi, India; Department of Psychiatry and Behavioral Sciences, Family Service Research Center, Medical University of South Carolina, Charleston, SC, US

Language: English

Abstract: Background: Data on mental health among injecting drug users in South Asia is scarce yet poor mental health among users has significant implications for the success of HIV prevention and treatment programmes. A cohort of 449 injecting drug users in Delhi was examined on the following issues (1) examine trends in suicidal ideation, suicide plan and suicidal attempts over a 12-month period, (2) examine association between injecting practices (receive and give used syringes) and suicidal ideation over a 12 month study period. Methods: An observational study was conducted providing phased interventions with follow up interviews every 3 months to 449 injecting drug users (IDUs), from August 2004 to November 2005. The study was conducted in Yamuna Bazaar, a known hub of drug peddling in Delhi. Interventions included nutrition, basic medical services, needle exchange, health education, HIV voluntary counseling and testing, STI diagnosis and treatment, oral buprenorphine substitution, and detoxification, each introduced sequentially. Results: Suicidal ideation and suicide attempts, did not significantly change over 12 months of observation, while suicide plans actually increased over the time period. Keeping other factors constant, IDUs with suicidal ideation reported more giving and receiving of used syringes in the recent past. Conclusions : Mental health services are warranted within harm reduction programmes. Special attention must be paid to suicidal IDUs given their higher risk behaviours for acquiring HIV and other blood borne infections. IDU intervention programmes should assess and address suicide risk through brief screening and enhanced counseling. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: This is an Open Access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/2.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.; HOLDER: Sarin et al.; licensee BioMed Central Ltd.; YEAR: 2013

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse
*HIV
*Injections
*Risk Taking
*Suicidal Ideation
Attempted Suicide
Mental Health
South Asian Cultural Groups

Source: PsycINFO

Full Text: Available from Springer NHS in Substance Abuse Treatment, Prevention, and Policy; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only. Available from Springer NHS in Substance Abuse Treatment, Prevention, and Policy; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

Citation: Substance Abuse Treatment, Prevention, and Policy, January 2013, vol./is. 8/, 1747-597X (Jan 30, 2013)

Author(s): Duffy, Paul; Baldwin, Helen

Correspondence Address: Duffy, Paul, P.Duffy1@ljmu.ac.uk

Institution: Centre for Public Health, Liverpool John Moores University, Liverpool, United Kingdom; Centre for Public Health, Liverpool John Moores University, Liverpool, United Kingdom

Language: English

Abstract: Background: The increasing focus on achieving a sustained recovery from substance use brings with it a need to better understand the factors (recovery capital) that contribute to recovery following treatment. This work examined the factors those in recovery perceive to be barriers to (lack of capital) or facilitators of (presence of capital) sustained recovery post treatment. Methods: A purposive sample of 45 participants was recruited from 11 drug treatment services in northern England. Semi-structured qualitative interviews lasting between 30 and 90 minutes were conducted one to three months after participants completed treatment. Interviews examined key themes identified through previous literature but focused on allowing participants to explore their unique recovery journey. Interviews were transcribed and analysed thematically using a combination of deductive and inductive approaches. Results: Participants generally reported high levels of confidence in maintaining their recovery with most planning to remain abstinent. There were indications of high levels of recovery capital. Aftercare engagement was high, often through self referral, with non substance use related activity felt to be particularly positive. Supported housing was critical and concerns were raised about the ability to afford to live independently with financial stability and welfare availability a key concern in general. Employment, often in the substance use treatment field, was a desire. However, it was a long term goal, with substantial risks associated with pursuing this too early. Positive social support was almost exclusively from within the recovery community although the re-building of relationships with family (children in particular) was a key motivator post treatment. Conclusions: Addressing internal factors and underlying issues i.e. 'human capital', provided confidence for continued recovery whilst motivators focused on external factors such as family and maintaining aspects of a 'normal' life i.e. 'social and physical capital'. Competing recovery goals and activities can leave people feeling under pressure and at risk of taking on or being pushed to do too much too soon. The breadth of re-integration and future plans at this stage is limited primarily to the recovery community and treatment sector. Services and commissioners should ensure that this does not become a limiting factor in individuals 'long term recovery journeys. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Citation: Journal of Clinical Psychology, July 2014, vol./is. 70/7(644-657), 0021-9762;1097-4679 (Jul 2014)

Author(s): Lanza, Patricia Villagra; Garcia, Paula Fernandez; Lamelas, Filomena Rodriguez; Gonzalez-Menendez, Ana

Correspondence Address: Lanza, Patricia Villagra: Department of Psychology, University of Oviedo, Plaza Feijoo, s/n. C.P., Oviedo, Spain, 33003, villagrapatricia@uniovi.es

Institution: University of Oviedo, Oviedo, Spain; University of Oviedo, Oviedo, Spain; University of Oviedo, Oviedo, Spain; University of Oviedo, Oviedo, Spain

Language: English

Abstract: Objectives: This randomized controlled study compared acceptance and commitment therapy (ACT), cognitive-behavioral therapy (CBT), and a control group. Method: The participants were 50 incarcerated women diagnosed with current substance use disorder. Two psychologists carried out pre- and posttreatment assessment and a 6-month follow-up assessment using the following instruments: Anxiety Sensitivity Index, Addiction Severity Index-6, Mini International Neuropsychiatric Interview, and Acceptance and Action Questionnaire. Results: The study shows that the women who received treatment benefited differentially from the interventions. At posttreatment, CBT was more effective than ACT in reducing anxiety sensitivity; however, at follow-up, ACT was more effective than CBT in reducing drug use (43.8 vs. 26.7%, respectively) and improving mental health (26.4% vs. 19.4%, respectively). Conclusion: ACT may be an alternative to CBT for treatment of drug abuse and associated mental disorders. In fact, at long-term, ACT may be more appropriate than CBT for incarcerated women who present serious problems. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Cognitive Behavior Therapy *Drug Abuse *Prisoners *Treatment Effectiveness Evaluation *Acceptance and Commitment Therapy Human Females

Source: PsycINFO

22. Converting a Freudian analysis into a Jungian one: Obsession, addiction, and an answer from Job.

Citation: The Journal of Analytical Psychology, June 2014, vol./is. 59/3(346-365), 0021-8774;1468-5922 (Jun 2014)
In his analyses of obsessional patients, Sigmund Freud suggested that they suffered from intrusive cognitions and compulsive activities. Early psychoanalysts delineated the phenomenology of obsessionality, but did not differentiate what is currently termed obsessive-compulsive disorder from obsessional personality. However, it was widely recognized that the success of psychoanalysis with obsessional patients was limited due to rigid characterological defences and transference resistances. The present paper examines the case of a middle-aged obsessional academic who had been treated for nearly twenty years in a ‘classical’ Freudian psychoanalysis prior to entering Jungian analysis. It examines how persistent focus on Oedipal conflicts undesirably reinforced the transference resistance in this obsessional man, and suggests that focusing instead on diminishing the harshness of the super-ego via the therapeutic alliance, and fostering faith in the salutary aspects of unconscious processing has led to salutary results in this case. The biblical book of Job is adopted as ancient instruction in how to address the scrupulosity and addictive mental structuring of obsessionality in analysis. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Perceived racial discrimination, drug use, and psychological distress in African American youth: A pathway to child health disparities.

Experiences of racial discrimination and social inequality are related to higher levels of psychological distress and substance use that may contribute to health disparities among youth. This within-group quantitative survey study tested two alternative theoretical models of the relations between perceived racial discrimination, psychological distress, alcohol, and marijuana use in a sample of 567 African American high school students.
(61% female; mean age = 15.6 years). Path analyses indicated most support for a model linking perceived racial discrimination to more depressive symptoms that, in turn, were associated with greater past month alcohol and marijuana use. These findings expand our understanding of the direction of effects for exposure to racial discrimination in African American youth and reinforce the need for public health policies, research, and programs for African American youth that acknowledge and address the psychological effects of exposure to racial discrimination on alcohol and marijuana use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Usage
*Race and Ethnic Discrimination
*Health Disparities
Adolescent Psychopathology
Blacks
Distress
Source: PsycINFO


Citation: Journal of Affective Disorders, August 2014, vol./is. 165/(203-207), 0165-0327 (Aug 20, 2014)
Author(s): Salem, B. A; Vyssoki, B; Lesch, O. M; Erfurth, A
Institution: St. Georges University Hospital, Beirut, Lebanon; Department of Psychiatry and Psychotherapy, Vienna Medical University, Vienna, Austria; Department of Psychiatry and Psychotherapy, Vienna Medical University, Vienna, Austria; 6th. Psychiatric Department, Otto-Wagner-Spital, Vienna, Austria
Language: English
Abstract: Aims: The first aim of this study is to investigate the impact of different temperaments in opiate dependency patients. The second aim of this study is to define therapy relevant subgroups in opiate addiction for further basic clinical research and therapy. Methods: In the time period from September to November 2010, 101 patients (72 males and 29 females) which fulfilled the diagnosis of opiate dependency according to DSM-IV-TR were recruited consecutively. All patients were in treatment at the Oum El Nour rehabilitation center/Lebanon (Inpatient and Outpatient groups). Lesch Alcoholism Typology modified for assessment of opiate addicts, and the brief TEMPS-M, Arabic version were used. Results: The organic Type IV group was the most prevalent (48.5%) among the sample followed by the Affective Type III group (41.6%) and the minority represented the two other types (I & II). The organic Type IV group represented the major type in the cyclothymic and anxious temperament. In the contrary the other two groups (I & II) were the minority among the cyclothymics. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Elsevier B.V.; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Addiction
*Drug Dependency
*Opiates
*Personality Correlates
*Subtypes (Disorders)
Personality Traits
Personality
Psychodiagnostic Typologies
Source: PsycINFO
Full Text: Available from Elsevier in Journal of Affective Disorders
25. Near-term predictors of the intensity of suicidal ideation: An examination of the 24 h prior to a recent suicide attempt.

Citation: Journal of Affective Disorders, August 2014, vol./is. 165/(53-58), 0165-0327 (Aug 20, 2014)

Author(s): Bagge, Courtney L; Littlefield, Andrew K; Conner, Kenneth R; Schumacher, Julie A; Lee, Han-Joo

Correspondence Address: Bagge, Courtney L.: University of Mississippi Medical Center, Department of Psychiatry and Human Behavior, 2500 North State Street, Jackson, MS, US, 39216, cbagge@umc.edu

Institution: University of Mississippi Medical Center, Department of Psychiatry and Human Behavior, Jackson, MS, US; Texas Tech University, Department of Psychology, Lubbock, TX, US; VISN 2 Center of Excellence for Suicide Prevention, Canandaigua, NY, US; University of Mississippi Medical Center, Department of Psychiatry and Human Behavior, Jackson, MS, US; University of Wisconsin-Milwaukee, Department of Psychology, Milwaukee, WI, US

Language: English

Abstract: Background: The extent to which acute exposures such as alcohol use (AU) and negative life events (NLE) are uniquely associated with intensity of suicidal ideation during the hours leading up to a suicide attempt is unknown. The main aim of the current study was to quantify the unique effect of acute exposures on next-hour suicidal ideation when adjusting for previous hour acute exposures and suicidal ideation. An exploratory aim of the current study was to examine the effect of non-alcohol drug use (DU) on suicidal ideation. Methods: Participants included 166 (61.0% female) recent suicide attempters presenting to a Level 1 trauma hospital. A timeline follow-back methodology was used to assess acute exposures and intensity of suicidal ideation within the 24 h prior to the suicide attempt. Results: Findings indicated that acute AU (b = .20, p < .01) and NLE (b = .58, p < .01) uniquely predicted increases in next-hour suicidal ideation, over and above previous hour suicidal ideation, whereas acute DU did not. Limitations: The current study's methodology provides continuous hourly snapshots prior to the suicide attempt, quite close to when it happened, but is retrospective and causality cannot be inferred. Conclusions: Understanding that, within a patient, AU and NLE predict near-term increases in suicidal ideation has practical utility impacting providers' clinical decision-making, safety concerns, and ultimate determination of level of risk for suicide. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Attempted Suicide
*Drug Abuse
*Life Experiences
*Suicidal Ideation
*Warnings
Causality
Prediction
Severity (Disorders)
Suicidology

Source: PsycINFO

Full Text: Available from Elsevier in Journal of Affective Disorders


Citation: International Journal of Applied Psychoanalytic Studies, June 2014, vol./is. 11/2(163-171), 1742-3341;1556-9187 (Jun 2014)

Author(s): Desmarais, Renee; Sacco-Dion, Cristen; Sacco, Frank C Jr; Decoteau, Nicholas

Correspondence Address: Desmarais, Renee: Community Services Institute, 1695 Main Street, Springfield, MA, US, 01103, Renee.Desmarais@communityserv.com
Institution: Community Services Institute, Springfield, MA, US; Community Services Institute, Boston and Springfield, Agawam, MA, US; Community Services Institute, Boston and Springfield, Agawam, MA, US; Community Services Institute, Boston and Springfield, Springfield, MA, US; Community Services Institute, Roxbury, MA, US

Language: English

Abstract: Delinquency is often a source of crime and misery in a community. Truancy is frequently identified as a first step to delinquency too often resulting in a life of social deviance, addiction, and daily living instability. This paper provides case examples illustrating how long-term home-based psychotherapy, community supports such as therapeutic mentoring, and a strong mother can combine to divert delinquency in school aged children identified early with behavioral problems. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Home Visiting Programs  
*Juvenile Delinquency  
*Prevention  
*Psychotherapy  
Community Services  
Intervention  
Mentor

Source: PsycINFO

Full Text: Available from Wiley in *International Journal of Applied Psychoanalytic Studies*

27. Soul of an agency: Psychodynamic principles in action in the world of community mental health.

Citation: International Journal of Applied Psychoanalytic Studies, June 2014, vol./is. 11/2(101-113), 1742-3341;1556-9187 (Jun 2014)

Author(s): Sacco, Frank C.; Campbell, Elaine; Ledoux, Mary

Correspondence Address: Sacco, Frank C.: Community Services Institute, Boston and Springfield, 77 Reed Street, Agawam, MA, US, 01001

Institution: Community Services Institute, Boston and Springfield, Agawam, MA, US; Community Services Institute, Boston and Springfield, Springfield, MA, US; Community Services Institute, Roxbury, MA, US

Language: English

Abstract: Community mental health has undergone a number of evolutions since Lyndon Johnson declared a War on Poverty and gave birth to the community mental health movement. This paper describes a philosophy of treatment involving long-term psychotherapy to resistant and multiple problem families in disadvantaged communities. The agency's primary philosophy is described as a psychoanalytic frame that guides treatment from a secure attachment site (clinic) in the community. The interventions use home and community based therapists with supports from psychiatry, psychology, and therapeutic mentoring. The focus of all treatment is for high-risk families to remain in the community and not burden corrections, courts, child welfare, or juvenile justice systems. Therapy forms the connection that can help families navigate schools, medical providers, courts, and social service systems. The agency forms the positive attachment site; clinicians come and go. The net effect is sustained connection to families that would have otherwise been broken apart by domestic violence, school crimes, addiction, gangs, poverty, homelessness, and community violence. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *At Risk Populations
28. Resilience in attaining and sustaining sobriety among older lesbians with alcoholism.

Citation: Journal of Gerontological Social Work, May 2014, vol./is. 57/2-4(176-197), 0163-4372;1540-4048 (May 2014)

Author(s): Rowan, Noell L; Butler, Sandra S

Correspondence Address: Rowan, Noell L., 601 College Road, Wilmington, NC, US, 28403, rowann@uncw.edu

Institution: School of Social Work, University of North Carolina Wilmington, Wilmington, NC, US; School of Social Work, University of Maine, Orono, ME, US

Language: English

Abstract: This phenomenological study illuminates coping among older lesbians with alcoholism. Twenty study participants were recruited through purposive and snowball sampling; each completed 3 interviews structured to gain a deeper understanding of participants' lived experiences. This article focuses on the key situations and people that helped study participants obtain sobriety and stay sober. Five major themes emerged from the data: wake-up calls, impact of formal treatment, impact of 12-step recovery groups, consequences from other sources, and resiliency. Findings support the need for culturally sensitive approaches to practice with this subpopulation of older adults. (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: *Alcoholism
                   *Coping Behavior
                   *Resilience (Psychological)
                   *Sobriety
                   Lesbianism
                   Qualitative Research

Source: PsycINFO

29. The young heroine.

Original Title: La jeune heroicine.

Citation: Topique: La Psychoanalyse Aujourd'hui, 2014, vol./is. 126/(83-95), 0040-9375;1965-0604 (2014)

Author(s): Angueli, Daniella

Correspondence Address: Angueli, Daniella, Rizari 17, Athenes, Greece, 116 34, daniella.angueli@gmail.com

Language: French

Abstract: This paper presents a portion of a psychotherapeutic treatment carried out with a 17 year-old young woman. As a former heroin addict who had been using drugs since childhood because of her own mother, she fought heroically to survive a family background which, over and above drug abuse, also included a murder, rape, abandon and resulted in a daily struggle to ward of ghosts, both living and dead. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
30. Sacrificial heroism and anorexic teenagers, the destiny of drives between idealisation and sublimation.

Original Title: L'heroisme sacrificiel de l'adolescent anorexique. Un destin pulsionnel entre idealisation et sublimation.

Citation: Topique: La Psychanalyse Aujourd'hui, 2014, vol./is. 126/(65-81), 0040-9375;1965-0604 (2014)

Author(s): Levy, Benjamin

Correspondence Address: Levy, Benjamin, 21, rue Victor Beausse, Montreuil, France, 93100, baj.levy@gmail.com

Language: French

Abstract: This paper asks whether the symptom of severe anorexia nervosa in a pubescent boy might not be an attempt to represent the impossibility of the boy to identify with his father at the stage when the Oedipus complex is updated during adolescence. Anorexic teenagers often find themselves in a subservient state of real addiction to the other, more particularly to their mothers, and maintain an infantile fantasy relationship with the latter, denying the reality of their male puberty, the onset of which is often thereby delayed. As the Oedipus complex has not been destroyed, the anorexic subject does not fear castration anxiety and has no access to the structural affects of ambivalence (the entanglement of love and death). The limits of their anxiety are no longer clearly defined and their affects may lead them into a vortex in which fear of breakdown takes over. If unmediated by a third party (the father), the mother-son relationship becomes tinged with the passions of love and hate of which 'all or nothing' is the byword (Manichaeism). The aggressive affects which beset the subject are not tolerated by censorship and society and are therefore massively repressed ('latent aggression' Kestemberg E., 1972). As a means of struggling against anxieties relating to intrusion, abandonment and breakdown, the omnipotence of the anorexic teenager serves as a final fortress through which to maintain a sense of being and narcissistic identity. Fuelled by omnipotence, the sacrificial heroism of the anorexic teenager combines both narcissistic excess with attraction to an ideal (heroism) and a means of avoiding inter-personal exchange, along with a restriction of all pleasure through sublimation (sacrificial). (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

31. The hero, or teenage 'fan-aticism' between model and inspiration. A contemporary perspective on the question of trauma in adolescence.

Original Title: Heros ou fan-atisme adolescent? Entre modele et inspiration. Actualite de la question du trauma a l'adolescence.

Citation: Topique: La Psychanalyse Aujourd'hui, 2014, vol./is. 126/(39-49), 0040-9375;1965-0604 (2014)

Author(s): Perret, Anne

Correspondence Address: Perret, Anne, 2,rue d'Enghien, Paris, France, 75010, anne.perret5@wanadoo.fr
Abstract:
This paper studies the case of Eugenie, a Justin Bieber fan, to show how the use of this hero figure gives credit to the dimension of trauma as specific to adolescence. Fanatical addiction to a hero figure of this type might possibly be linked with the question of an addiction to the body, constituting a contemporary response to the encounter with the real of puberty. However, a path towards symbolisation seems to shape its course through the body of the other, thereby meaning that one's equals become a pathway towards nomination. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Addiction
*Adolescent Attitudes
*Puberty
*Trauma
Symbolism

Source: PsycINFO

32. Ebb and flow in the sense of meaningful purpose: A lifespan perspective on alcohol and other drug involvement.

Citation: Meaning in positive and existential psychology., 2014(347-413) (2014)
Author(s): Hart, Kenneth; Carey, Tyler
Correspondence Address: Hart, Kenneth: Department of Psychology, University of Windsor, Windsor, ON, Canada, N9B 3P4, kenhart@uwindsor.ca
Institution: Department of Psychology, University of Windsor, Windsor, ON, Canada; Department of Psychology, University of Victoria, Victoria, BC, Canada
Language: English
Abstract: (from the chapter) This chapter offers a lifespan perspective on alcohol and other drug (AOD) involvement. the domain of contemporary AOD scholarship, the trans-theoretical model (TTM) has done much to showcase the full gamut of relationships people can have with AOD. The authors are attracted to the sheer breadth of the spectrum captured by the TTM. Moreover, the authors find this model useful because it provides us with a unique opportunity to synthesize perspectives of public health and psychological viewpoints. In the current chapter, the authors seek to blend the amalgam into a broad-spectrum meta-framework that will help organize findings linking meaning in life (MIL) purpose in life (PIL) to AOD involvement. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
Publication Type: Book; Edited Book
Subject Headings: *Alcohol Drinking Patterns
*Drug Usage
*Life Satisfaction
*Life Span
Involvement
Models
Source: PsycINFO
Full Text: Available from Springer ebooks NESLI2 in Meaning in Positive and Existential Psychology; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS

33. Health promotion for people with intellectual and developmental disabilities.

Citation: Health promotion for people with intellectual and developmental disabilities., 2014 (2014)
Author(s): Taggart, Laurence [Ed]; Cousins, Wendy [Ed]
Institution: Research Centre for Intellectual and Developmental Disabilities, University of Ulster, Ulster, Northern Ireland; Research Centre for Intellectual and Developmental Disabilities, University of Ulster, Ulster, Northern Ireland

Language: English

Abstract: (from the cover) The concept of health as a foundation for achieving human potential has important implications for everyone involved in the care and wellbeing of people with intellectual disabilities. This group of people is affected by significantly more health problems than the general population and is much more likely to have significant health risks, yet there is considerable evidence to suggest they are not receiving the same level of health education and health promotion opportunities as other members of society. This important new, interdisciplinary book is aimed at increasing professional awareness of the importance of health promotion activities for people with intellectual and developmental disabilities. Written by an international board of experts, it is a thorough and comprehensive guide for students, professionals and carers. The book considers a variety of challenges faced by those with intellectual disabilities, from physical illnesses such as diabetes, epilepsy and sexual health issues, through to issues such as addiction, mental health and ageing. Each chapter outlines clear, evidence-based strategies for health promotion including family interventions, health promotion in schools, community health programmes, health checks and physical activity. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: *Awareness
*Developmental Disabilities
*Health Promotion
*Intellectual Development Disorder
Well Being

Source: PsycINFO

34. Need for needle and syringe programmes in Africa.

Citation: African Journal of Drug and Alcohol Studies, 2013, vol./is. 12/2(137-144), 1531-4065 (2013)

Author(s): Derrick, Ssewanyana; Clark, Nicolas C

Correspondence Address: Derrick, Ssewanyana: Public Health, University of Southern Denmark, Niels Bohrs Vej 9-10, Esbjerg, Denmark, DK-6700, sewaderrick@gmail.com

Institution: University of Southern Denmark, Esbjerg, Germany; Department of Mental Health and Substance Abuse, World Health Organization, Geneva, Switzerland

Language: English

Abstract: A narrative review was conducted, drawing on peer reviewed literature and relevant grey literature on injecting drug use in African countries and ethical dilemmas facing harm reduction especially the provision of sterile needles and syringes to injecting drug users. This review aimed at highlighting evidence and the arguments for and against the provision of sterile injecting equipment to people who inject drugs (PWID), and to consider the implications for the African context. The narrative established that high risk injecting drug practices are common among PWID in many African communities, and so are HIV and hepatitis. Current services for this population in Africa are less pragmatic and inadequate. Needle and syringe programmes are both effective and ethical and should be part of the response to injecting drug use in Africa. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: CRISA Publications; YEAR: 2013

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Ethics
*Harm Reduction
*Health Promotion
35. The "war on drugs" in Nigeria: How effective and beneficial is it in dealing with the problem?

Citation: African Journal of Drug and Alcohol Studies, 2013, vol./is. 12/2(119-135), 1531-4065 (2013)

Author(s): Otu, Smart E

Correspondence Address: Otu, Smart E.: Department of Political Science, Faculty of Humanities and Social Sciences, Federal University, Ndifu Alike, Ikwo, PMB 1010, Ebonyi State, Abakaliki, Nigeria, smartotu@gmail.com

Institution: Department of Political Science, Faculty of Humanities and Social Sciences, Federal University, Ikwo, Nigeria

Language: English

Abstract: Since drugs became both a public and social issue in Nigeria, fear about both the real and imagined catastrophic effects of sale and use has led to a reliance on extreme measures to control supply and discourage demand. The traditional 'prohibitive' attitude has been the preferred option in a sustained 'drug war'. This analysis draws from extant research literature, published documents and media reports on drug policy matters. Although the age-long war on drug policy in Nigeria may be producing some desired results, there is evidence of negative consequences and unresolved issues associated with the war. These issues include economic, crime, human rights, development and security, public health, discrimination and environment. The paper calls for a shift from the over-reliance on law enforcement to harm reduction and treatment for people addicted to drugs. The shift will provide far more cost-effective drug control results and guarantee the rights of Nigerians as enshrined in the U. N. Human Rights Declaration and the constitution of Nigeria. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: CRISA Publications; YEAR: 2013

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Laws
*Law Enforcement
*Policy Making
*Public Health
*Public Opinion
Hazes
Human Rights
Social Issues
Supply and Demand

Source: PsycINFO


Citation: African Journal of Drug and Alcohol Studies, 2013, vol./is. 12/2(107-118), 1531-4065 (2013)

Author(s): Abebe, Worku

Correspondence Address: Abebe, Worku: Department of Oral Biology/Pharmacology, Georgia Regents University, College of Dental Medicine, Augusta, GA, US, 30912, wabebe@gru.edu

Institution: College of Dental Medicine, Georgia Regent University, Augusta, GA, US

Language: English
Abstract: This paper is an overview of mind-altering substance use among high school and college students in Ethiopia in the past two decades. Alcohol, khat and cigarettes were commonly used by both high school and college students in urban as well as rural areas. While the use patterns of the substances were related to the gender, education/age and religion of the users, no clear-cut patterns were observed in relation to several other factors including geographic locations. Further, cannabis was used in selected high schools, and its abuse prevalence was greater in urban private schools, as it was for alcohol and tobacco use. Students who used khat, alcohol or cigarettes also displayed increased violent behaviours towards women and enhanced sexual activity, with increased risks for negative consequences. However, as a limited number of studies have been reported in the literature, this review provides only limited information on such substance use. Nonetheless, despite this limitation, the review can be a useful source of information for designing future research directions and for considering actions directed towards tackling this important problem. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: CRISA Publications; YEAR: 2013
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *College Students
*Drug Abuse
*Drug Usage
*High School Students
Alcohol Abuse
Alcohol Drinking Patterns
Plants (Botanical)
Tobacco Smoking

Source: PsycINFO

37. Substance use and sexual risk behaviours amongst in-school youth and young adults living in Liberia.

Citation: African Journal of Drug and Alcohol Studies, 2013, vol./is. 12/2(75-97), 1531-4065 (2013)

Author(s): Quiterio, Nicole; Harris, Benjamin L; Borba, Christina P.C; Henderson, David C

Correspondence Address: Quiterio, Nicole: Stanford University School of Medicine, Division of Child and Adolescent Psychiatry, 401 Quarry Road, Stanford, CA, US, 94305-5540, nquiteri@stanford.edu

Language: English
Abstract: Little is known about the prevalence of and association of substance use and sexual risk behaviors among youth in Liberia. The present study was undertaken to examine the substance use behaviors and sexual practices of students in 16 secondary schools in greater and central Monrovia, Liberia. The sample consisted of 802 students in grades 7th to 12th who were enrolled in a co-educational school. Among substances reported, alcohol was the most commonly tried substance with almost 50% using it at some point in their life. 78% of respondents had engaged in sex with 13% reported having sex for monetary gain. Of those, more than 25% never or occasionally used a condom. Results indicated an association between alcohol and engaging in sex and an increase in the number of sexual partners. Future research should target both in-school and out-of-school students to develop school education and health services unique to this population. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Adolescent Attitudes
Middle School Students

Source: PsycINFO

38. Neurocognitive functioning in antiretroviral therapy-naive youth with behaviorally acquired human immunodeficiency virus.

Citation: Journal of Adolescent Health, December 2013, vol./is. 53/6(763-771), 1054-139X (Dec 2013)

Author(s): Nichols, Sharon L; Bethel, James; Garvie, Patricia A; Patton, Doyle E; Thornton, Sarah; Kapogiannis, Bill G; Ren, Weijia; Major-Wilson, Hanna; Puga, Ana; Woods, Steven P

Correspondence Address: Nichols, Sharon L.: Department of Neurosciences, University of California, San Diego, 9500 Gilman Drive, #0935, La Jolla, CA, US, 92093, slnichols@ucsd.edu

Institution: Department of Neurosciences, University of California, San Diego, La Jolla, CA, US; Westat, Rockville, MD, US; Children's Diagnostic and Treatment Center, Inc., Fort Lauderdale, FL, US; National Institutes of Health, Bethesda, MD, US; Westat, Rockville, MD, US; Division of Adolescent Medicine, Department of Pediatrics, University of Miami, Miami, FL, US; Children's Diagnostic and Treatment Center, Inc., Fort Lauderdale, FL, US; Department of Psychiatry, University of California, San Diego, La Jolla, CA, US

Language: English

Abstract: Purpose: Youth living with human immunodeficiency virus (HIV) account for over one third of new HIV infections and are at high risk of adverse psychosocial, everyday living, and health outcomes. Human immunodeficiency virus-associated neurocognitive disorders (HAND) are known to affect health outcomes of HIV-infected adults even in the era of combination antiretroviral therapy. Thus, the current study aimed to characterize the prevalence and clinical correlates of HAND in youth living with HIV. Here, we report baseline neurocognitive data for behaviorally HIV-infected youth enrolled in a prospective study evaluating strategies of antiretroviral treatment initiation and use. Methods: A total of 220 participants, age 18-24 years, who were naive to treatment (except for prevention of mother-to-child HIV transmission; n = 3), completed a comprehensive neurocognitive, substance use, and behavioral health assessment battery. Results: Sixty-seven percent of youth met criteria for HAND (96.4% were asymptomatic and 3.5% were syndromic); deficits in episodic memory and fine-motor skills emerged as the most commonly affected ability areas. Multivariable models showed that lower CD4 count, longer time since HIV diagnosis, and high-risk alcohol use were uniquely associated with neurocognitive deficits. Conclusions: Over two thirds of youth with behaviorally acquired HIV evidence neurocognitive deficits, which have modest associations with more advanced HIV disease as well as other factors. Research is needed to determine the impact of such neuropsychiatric morbidity on mental health and HIV disease treatment outcomes (e.g., nonadherence) and transition to independent living responsibilities in HIV-infected youth, as well as its long-term trajectory and possible responsiveness to cognitive rehabilitation and pharmacotherapy. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: All rights reserved.; HOLDER: Society for Adolescent Health and Medicine; YEAR: 2013

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Cognitive Impairment
*Health Behavior
*Health Impairments
*HIV
*Neurocognition
Alcohol Abuse
Drug Abuse
Epidemiology
Episodic Memory
Fine Motor Skill Learning

Citation: Comprehensive Psychiatry, July 2013, vol./is. 54/5(500-505), 0010-440X (Jul 2013)

Author(s): Gearhardt, Ashley N; White, Marney A; Masheb, Robin M; Grilo, Carlos M

Correspondence Address: Gearhardt, Ashley N.: Department of Psychology, University of Michigan, Ann Arbor, MI, US, 48109, Agearhar@umich.edu

Institution: Department of Psychology, University of Michigan, Ann Arbor, MI, US; Department of Psychology, Yale University, New Haven, CT, US; Department of Psychiatry, Yale University School of Medicine, New Haven, CT, US; Department of Psychology, Yale University, New Haven, CT, US

Language: English

Abstract: Objective: The concept of food addiction in obesity and binge eating disorder (BED) continues to be a hotly debated topic yet the empirical evidence on the relationship between addictive-like eating and clinically relevant eating disorders is limited. The current study examined the association of food addiction as assessed by the Yale Food Addiction Scale (YFAS) with measures of disordered eating, dieting/weight history, and related psychopathology in a racially diverse sample of obese patients with binge eating disorder (BED). Method: A consecutive series of 96 obese patients with BED who were seeking treatment for obesity and binge eating in primary care were given structured interviews to assess psychiatric disorders and eating disorder psychopathology and a battery of self-report measures including the YFAS to assess food addiction. Results: Classification of food addiction was met by 41.5% (n =39) of BED patients. Patients classified as meeting YFAS food addiction criteria had significantly higher levels of negative affect, emotion dysregulation, and eating disorder psychopathology, and lower self-esteem. Higher scores on the YFAS were related to an earlier age of first being overweight and dieting onset. YFAS scores were also significant predictors of binge eating frequency above and beyond other measures. Discussion: Compared to patients not classified as having food addiction, the subset of 41.5% of BED patients who met the YFAS food addiction cut-off appears to have a more severe presentation of BED and more associated pathology. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Addiction
*Food
*Binge Eating Disorder
Primary Health Care

Source: PsycINFO

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

40. Other- and self-directed forms of violence and their relationships to DSM-IV substance use and other psychiatric disorders in a national survey of adults.

Citation: Comprehensive Psychiatry, October 2013, vol./is. 54/7(731-739), 0010-440X (Oct 2013)

Author(s): Harford, Thomas C; Yi, Hsiao-ye; Grant, Bridget F

Correspondence Address: Yi, Hsiao-ye: Alcohol Epidemiologic Data System, NIAAA/NIH, CSR Incorporated, Arlington, VA, US, 22201, hyi@csrincorporated.com
Evidence Services | library.nhs.uk


Language: English

Abstract: Objective: To examine associations between DSM-IV psychiatric disorders and other- and self-directed violence in the general population. Methods: Data were obtained from the National Epidemiologic Survey on Alcohol and Related Conditions (NESARC) Waves 1 & 2 (n = 34,653). Four violence categories were derived from a latent class analysis (LCA) of 5 other-directed and 4 self-directed violent behavior indicators. Multinomial logistic regression examined class associations for gender, race-ethnicity, age and DSM-IV substance use, mood, anxiety, and personality disorders. Results: Approximately 16% of adults reported some form of violent behavior distributed as follows: other-directed only, 4.6%; self-directed only, 9.3%; combined self- and other-directed, 2.0%; and no violence, 84.1%. The majority of the DSM-IV disorders included in this study were significantly and independently related to each form of violence. Generally, other-directed violence was more strongly associated with any substance use disorders (81%) and any personality disorders (42%), while self-directed violence was more strongly associated with mood (41%) and anxiety disorders (57%). Compared with these two forms of violence, the smaller group with combined self- and other-directed violence was more strongly associated with any substance use disorders (88%), mood disorders (63%), and personality disorders (76%). Conclusion: Findings from this study are consistent with recent conceptualizations of disorders as reflecting externalizing disorders and internalizing disorders. The identification of the small category with combined forms of violence further extends numerous clinical studies which established associations between self- and other-directed violent behaviors. The extent to which the combined violence category represents a meaningful and reliable category of violence requires further detailed studies. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Diagnostic and Statistical Manual
*Drug Usage
*Mental Disorders
*Violence

Source: PsycINFO

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

41. Cannabis use and cannabis use disorders among individuals with mental illness.

Citation: Comprehensive Psychiatry, August 2013, vol./is. 54/6(589-598), 0010-440X (Aug 2013)

Author(s): Lev-Ran, Shaul; Le Foll, Bernard; McKenzie, Kwame; George, Tony P; Rehm, Jurgen

Correspondence Address: Lev-Ran, Shaul: Centre for Addiction and Mental Health, Toronto, ON, Canada, M5N2N5, shaul.levran@gmail.com

Institution: Social Aetiology of Mental Illness (SAMI) CIHR Training Program, Centre for Addiction and Mental Health, Toronto, ON, Canada; Addictions Program, Centre for Addiction and Mental Health, Toronto, ON, Canada; Social Aetiology of Mental Illness (SAMI) CIHR Training Program, Centre for Addiction and Mental Health, Toronto, ON, Canada; Department of Psychiatry, University of Toronto, Toronto, ON, Canada; Social and Epidemiological Research Department, Centre for Addiction and Mental Health, Toronto, ON, Canada

Language: English
Abstract: Background: National epidemiological surveys have reported increased rates of cannabis use and cannabis use disorders (CUDs) among individuals with mental illness. However, this subject has not been sufficiently investigated, particularly given limitations in diagnostic tools used and lack of data pertaining to frequency of cannabis used. Objectives: To examine the prevalence of cannabis use and CUDs among individuals with a wide range of mental illness. Method: We analyzed data on 43,070 respondents age 18 and above from the National Epidemiologic Survey on Alcohol and Related Conditions, a nationally representative survey conducted from 2001 to 2002. Main outcome measures included rates of cannabis use by frequency (at least weekly and less than weekly use) and DSM-IV CUDs according to the number and type of axis I and axis II psychiatric diagnoses, assessed by the Alcohol Use Disorders and Associated Disabilities Interview Schedule-IV. We estimated the proportion of cannabis used by individuals with mental illness using reported daily dose and frequency of cannabis used by individuals with and without mental illness. Results: Rates of weekly cannabis use, less than weekly cannabis use and CUDs among individuals with 12-month mental illness were 4.4%, 5.4% and 4.0%, respectively, compared to 0.6%, 1.1% and 0.4%, respectively, among individuals without any 12-month mental illness (P < 0.0001 for all comparisons). The odds ratio for cannabis use among individuals with 12-month mental illness vs. respondents without any mental illness was 2.5, and the odds of having a CUD among individuals with 12-month mental illness were 3.2, after adjusting for sociodemographic variables and additional substance use disorders. Cannabis use and CUDs were particularly associated with bipolar disorder, substance use disorders and specific (anti-social, dependant and histrionic) personality disorders. Persons with a mental illness in the past 12 months represented 72% of all cannabis users and we estimated they consumed 83% of all cannabis consumed by this nationally representative sample. Conclusions: The current study provides further evidence of the strong association between cannabis use and a broad range of primary mental illness. This emphasizes the importance of proper screening for frequent cannabis use and CUDs among individuals with primary mental illness and focusing prevention and treatment efforts on this population. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Taiwan; Graduate School of Management, Yuan Ze University, Taiwan; Graduate School of Management, Yuan Ze University, Taiwan

Language: Chinese

Abstract: The purpose of this study was to explore the factors that were hypothesized to correlate with the development of alcohol dependence in aboriginal communities. This study used a cross-sectional design and purposive sampling. We modified the questionnaire CAGE for the survey of alcoholism. Data were collected from 493 aborigines who had drinking behavior in aboriginal communities. Data were analyzed based on fundamental characteristics, health status, and habits. The results showed that there were significant difference in occurrence of alcoholism among factors such as ethnic groups, gender, age, education level and marriage. Alcoholism occurred more frequently among individuals who were male, younger, with lower education level and unmarried. Individuals with better health status were less likely to become alcoholics. There are several habitual factors that affected the development of alcoholism. Factors that were associated with alcoholism included smoking, chewing betel nut, starting to drink in younger age, having drinking buddies, day-time drinker, drinking in a great amount of alcohol, having certain kinds of alcohol-containing drink, and realizing the bad effects of drinking. Among the risk factors that affected the person's alcoholism, self-conscious health condition, smoking, the amount of drinking, and drinking time during the day were critical elements. Because alcoholics showed significant difference to nonalcoholic ones distinguished by fundamental characteristics, habitual factors and health status, this study recommended that attention should be paid to the drinking time during a day, the quantity of drinking and self-control capability to effectively reduce the ratio of alcoholics in an aboriginal community with drinking culture. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcoholism
*Health Behavior
*Tobacco Smoking
Communities
Indigenous Populations

Source: PsycINFO

43. "Imaging dopamine transmission in the frontal cortex: A simultaneous microdialysis and [C]FLB 457 PET study": Corrigenda.

Citation: Molecular Psychiatry, March 2014, vol./is. 19/3(399), 1359-4184;1476-5578 (Mar 2014)

Author(s): Narendran, R; Jedema, H. P; Lopresti, B. J; Mason, N. S; Gurnsey, K; Ruszkiewicz, J; Chen, C.-M; Deuitch, L; Frankle, W. G; Bradberry, C. W

Correspondence Address: Narendran, R.: Department of Radiology and Psychiatry, University of Pittsburgh, PET Facility, UPMC Presbyterian, B-938, Pittsburgh, PA, US, 15213, narendranr@upmc.edu

Institution: Department of Radiology, University of Pittsburgh, Pittsburgh, PA, US; Department of Psychiatry, University of Pittsburgh, Pittsburgh, PA, US; Department of Radiology, University of Pittsburgh, Pittsburgh, PA, US; Department of Radiology, University of Pittsburgh, Pittsburgh, PA, US; Department of Radiology, University of Pittsburgh, Pittsburgh, PA, US; Department of Radiology, University of Pittsburgh, Pittsburgh, PA, US; Department of Radiology, University of Pittsburgh, Pittsburgh, PA, US; Department of Psychiatry, University of Pittsburgh, Pittsburgh, PA, US

Language: English

Abstract: Reports an error in "Imaging dopamine transmission in the frontal cortex: A simultaneous microdialysis and [C]FLB 457 PET study" by R. Narendran, H. P. Jedema, B. J. Lopresti, N. S. Mason, K. Gurnsey, J. Ruszkiewicz, C.-M. Chen, L. Deuitch, W. G. Frankle and C. W. Bradberry (Molecular Psychiatry, 2014[Mar], Vol 19[3], 302-310). In the original article, in Table 3, some of the values in the far-right column of the section for the 0.5-mg
kg-1 dose did not appear in the correct row. The corrected table appears in the erratum. (The following abstract of the original article appeared in record 2014-09245-008). In a recent human positron emission tomography (PET) study we demonstrated the ability to detect amphetamine-induced dopamine (DA) release in the prefrontal cortex as a reduction in the binding of the DA D2/3 radioligand [C]FLB 457. A key requirement for validating this paradigm for use in clinical studies is demonstrating that the changes in [C]FLB 457 binding observed with PET following amphetamine are related to changes in dialysate DA concentration as measured with microdialysis. Microdialysis and PET experiments were performed to compare, in five rhesus monkeys, amphetamine-induced DA release and [C]FLB 457 displacement in the frontal cortex after three doses of amphetamine (0.3 mg kg-1, 0.5 mg kg-1 and 1.0 mg kg-1). Amphetamine led to a significant dose-dependent increase in dialysate (0.3 mg kg-1: 999 ± 287%; 0.5 mg kg-1: 1320 ± 432%; 1.0 mg kg-1: 2355 ± 1026%) as measured with microdialysis and decrease in [C]FLB 457 binding potential (BPND, 0.3 mg kg-1: -6 ± 6%; 0.5 mg kg-1: -16 ± 4%; 1.0 mg kg-1: -24 ± 2%) as measured with PET. The relationship between amphetamine-induced peak DA and [C]FLB 457 BPND in the frontal cortex was linear. The results of this study clearly demonstrate that the magnitude of dialysate DA release is correlated with the magnitude of the reduction in [C]FLB 457 BPND in the frontal cortex. The use of the [C]FLB 457-amphetamine imaging paradigm in humans should allow for characterization of prefrontal cortical DA release in neuropsychiatric disorders such as schizophrenia and addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Amphetamine *Dopamine *Neurotransmission *Prefrontal Cortex *Monkeys *Positron Emission Tomography

Source: PsycINFO

44. Imaging dopamine transmission in the frontal cortex: A simultaneous microdialysis and [C]FLB 457 PET study.

Citation: Molecular Psychiatry, March 2014, vol./is. 19/3(302-310), 1359-4184;1476-5578 (Mar 2014)

Author(s): Narendran, R; Jedema, H. P; Lopresti, B. J; Mason, N. S; Gurnsey, K; Ruszkiewicz, J; Chen, C.-M; Deuitch, L; Frankle, W. G; Bradberry, C. W

Correspondence Address: Narendran, R.: Department of Radiology and Psychiatry, University of Pittsburgh, PET Facility, UPMC Presbyterian, B-938, Pittsburgh, PA, US, 15213, narendranr@upmc.edu

Institution: Department of Radiology, University of Pittsburgh, Pittsburgh, PA, US; Department of Psychiatry, University of Pittsburgh, Pittsburgh, PA, US; Department of Radiology, University of Pittsburgh, Pittsburgh, PA, US; Department of Radiology, University of Pittsburgh, Pittsburgh, PA, US; Department of Psychiatry, University of Pittsburgh, Pittsburgh, PA, US; Department of Radiology, University of Pittsburgh, Pittsburgh, PA, US; Department of Psychiatry, University of Pittsburgh, Pittsburgh, PA, US; Department of Radiology, University of Pittsburgh, Pittsburgh, PA, US; Department of Psychiatry, University of Pittsburgh, Pittsburgh, PA, US

Language: English

Abstract: [Correction Notice: An Erratum for this article was reported in Vol 19(3) of Molecular Psychiatry (see record 2014-09245-020). In the original article, in Table 3, some of the values in the far-right column of the section for the 0.5-mg kg-1 dose did not appear in the correct row. The corrected table appears in the erratum.] In a recent human positron emission tomography (PET) study we demonstrated the ability to detect amphetamine-induced dopamine (DA) release in the prefrontal cortex as a reduction in the binding of the DA D2/3 radioligand [C]FLB 457. A key requirement for validating this paradigm for use in clinical studies is demonstrating that the changes in [C]FLB 457
binding observed with PET following amphetamine are related to changes in dialysate DA concentration as measured with microdialysis. Microdialysis and PET experiments were performed to compare, in five rhesus monkeys, amphetamine-induced DA release and [C]FLB 457 displacement in the frontal cortex after three doses of amphetamine (0.3 mg kg\(^{-1}\), 0.5 mg kg\(^{-1}\) and 1.0 mg kg\(^{-1}\)). Amphetamine led to a significant dose-dependent increase in dialysate (0.3 mg kg\(^{-1}\): 999 + 287%; 0.5 mg kg\(^{-1}\): 1320 + 432%; 1.0 mg kg\(^{-1}\): 2355 + 1026%) as measured with microdialysis and decrease in [C]FLB 457 binding potential (BPND, 0.3 mg kg\(^{-1}\): -6 + 6%; 0.5 mg kg\(^{-1}\): -16 + 4%; 1.0 mg kg\(^{-1}\): -24 + 2%) as measured with PET. The relationship between amphetamine-induced peak DA and [C]FLB 457 BPND in the frontal cortex was linear. The results of this study clearly demonstrate that the magnitude of dialysate DA release is correlated with the magnitude of the reduction in [C]FLB 457 BPND in the frontal cortex. The use of the [C]FLB 457-amphetamine imaging paradigm in humans should allow for characterization of prefrontal cortical DA release in neuropsychiatric disorders such as schizophrenia and addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
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time before the disease, and the presence of unfavorable life situations and trauma during childhood. Likewise, we observed clinical manifestation of the disease. The acquired data were processed with descriptive statistic methods and represented with standard graphic techniques. Results: During the years 2001-2010, 2859 patients were hospitalized at the Clinic of Children's Psychiatry, 15 of whom were hospitalized with toxic psychosis (0.52%), the occurrence being higher among boys (12 boys, i.e. 80%). The average age of patients with toxic psychosis was 16.6 years which is one year more than the average age of patients hospitalized for non-specified psychotic disease (15.69 years). AU the patients were, at least partially, abusers of cannabis; in three of the patients there was present a psychotic disease in the family history; one patient had alcohol abuse and a psychotic disease in the family. In the personal history of eight of the patients (53%) there was found a record of praenatal or perinatal complications. Psychomotoric development was physiological for all the patients except one, in whose case there was mild to moderate motor retardation caused by prematurity. None of the patients had a problem with adaptation to preschool or elementary school. In the history of all of the patients of the observed group there was a certain measure of present conflict in the family environment, as well as trauma and complicated life situations. In all of the patients there was praemorbidly noted long-time behavior disorders, and the abuse of alcohol and psychotic substances at a nearly age. In none of the patients in the observed group were present praemorbid problems more often observed in the early onset schizophrenia (OCD, social phobia or neurasthenic syndrome). In the clinical manifestations of those suffering from toxic psychoses, positive symptomatology with paranoid content was dominant; in one patient was present also a relatively stable affective bipolar component, and two patients appeared in a catatonic state. Conclusion: It is not possible to set the diagnosis of toxic psychosis for adolescents based merely upon clinical manifestations during hospitalization. Information typical for injurious use of drugs and addiction from the time prior to contracting the disease appears to be relatively significant. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:**
- *Toxic Psychoses*
- Adolescent Development
- Hospitalized Patients
- Onset (Disorders)
- Schizophrenia

**Source:** PsycINFO

**46. Evaluation of an Internet addiction on-line self-help program.**

**Original Title:** Evaluace online svepomocneho programu pro osoby se zavislostnim chovanim na internetu.

**Citation:** Ceska a Slovenska Psychiatrie, February 2014, vol./is. 110/1(7-17), 1212-0383 (Feb 2014)

**Author(s):** Vondrackova, Petra; Vacek, Jaroslav; Masarykova, Adela

**Correspondence Address:** Vondrackova, Petra: Klinika Adiktologie, 1. LF, UK v Praze, Apolinarska 4, Praha, Czech Republic, 128 00, 2, vondrackova@adiktologie.cz

**Institution:** Klinika Adiktologie, 1. Lekarska Fakulta, Univerzity Karlovy v Praze, Praze, Czech Republic; Klinika Adiktologie, 1. Lekarska Fakulta, Univerzity Karlovy v Praze, Praze, Czech Republic; Klinika Adiktologie, 1. Lekarska Fakulta, Univerzity Karlovy v Praze, Praze, Czech Republic

**Language:** Czech

**Abstract:** Introduction: Online psychotherapy represents a legitimate psychotherapeutic intervention. A self-help program for people with internet addiction was launched on the website of the Department of Addictology, Charles University in Prague in 2011. Objectives: We evaluate the on-line tool through analysis of the basic sociodemographic characteristics of its users, the nature of services used and the experience of its users, including any changes in their behavior. Method: Quantitative and qualitative methods of analyses of data obtained in the self-help program during the first nine months of its
operation and use of the evaluation questionnaire. Participants: 273 people who registered to the self-help program and 26 respondents who responded evaluation questionnaires.

Results: Out of the 273 individuals who registered to the self-help program 47 did so with the intention to test the application, 129 women (47.3%) and 144 men (52.7%). Almost half of the sample consisted of persons aged 19 to 24 years (46.5%), the second largest age group was people aged 25 to 34 years (26%). Half of the people who really wanted to change have secondary education (52.7%) and the third a college education (29.2%). Two thirds of online program users, who wanted to change, were students or pupils (65%). Two thirds of people (65%) completed anything of the motivational phase and of the phase of change. Nineteen percent of users worked through the phase relapse prevention. Diary for monitoring phases of change established approximately half of the users; who also filled how many hours spent on risky online applications in the last seven days (51%), one third (34%) completed plan how they would like time to restrict online applications, and only 6% of users completed retrospectively how they managed to accomplish resolution. Most of the users were satisfied with the services offered and for most people the information provided in the self-help program were a new one. In changing addictive behavior succeeded almost half of the people (11 from 26 individuals) involved in the evaluation, although these people necessarily didn't completed the program. Conclusion: Self-help program is a viable option to change addictive behavior on the Internet. Its advantage is that it can capture the hidden target population, i.e. persons who would not otherwise sought a professional help spontaneously, a phenomenon particularly common in addictive behavior on the Internet. The completion of the online treatment program doesn't closely correlate with the change of behavior. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Internet Addiction
Psychotherapy
Qualitative Research
Self Help Techniques
Source: PsycINFO

47. Impact of Ontario's remedial program for drivers convicted of drinking and driving on substance use and problems.

Citation: Canadian Journal of Criminology and Criminal Justice, February 2014, vol./is. 56/2(201-217), 1707-7753;1911-0219 (Feb 2014)

Author(s): Stoduto, Gina; Mann, Robert E; Fiam-Zalcman, Rosely; Sharpley, Justin; Brands, Bruna; Butters, Jennifer; Smart, Reginald G; Wickens, Christine M; Ilie, Gabriela; Thomas, Rita K

Correspondence Address: Mann, Robert E.: Centre for Addiction and Mental Health, 33 Russell St., Toronto, ON, Canada, M5S 2S1, robert_mann@camh.net

Institution: Centre for Addiction and Mental Health, Toronto, ON, Canada; Centre for Addiction and Mental Health, Toronto, ON, Canada; Centre for Addiction and Mental Health, Toronto, ON, Canada; Centre for Addiction and Mental Health, Toronto, ON, Canada; Centre for Addiction and Mental Health, Toronto, ON, Canada; Centre for Addiction and Mental Health, Toronto, ON, Canada; Centre for Addiction and Mental Health, Toronto, ON, Canada; St Michael's Hospital, Toronto, ON, Canada; Centre for Addiction and Mental Health, Toronto, ON, Canada

Language: English

Abstract: In 1998, Ontario passed legislation requiring that all drivers convicted of drinking and driving complete a remedial program, called Back on Track (BOT), before their driver's licences could be reinstated. Based on an assessment, clients are assigned to complete either an "education" program or a "treatment" program, depending on levels of substance-related problems. Several months following completion of their program, participants complete a follow-up interview. We report substance use and related outcome measures on 22,277 BOT participants who completed follow-up between 2000 and 2005.
Completion of BOT was associated with significant reductions in the frequency of alcohol and other drug use, number of drinks consumed per drinking occasion, total numbers of substance users, and negative consequences resulting from substance use. A large number of participants became "non-users" of various substances over the course of the program. These findings provide evidence that the remedial program has beneficial effects for participants in both the education and treatment components of BOT.

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48. Five Things to Know About ... : Synthetic cannabinoids.

Citation: Canadian Medical Association Journal, February 2014, vol./is. 186/3(210), 0820-3946;1488-2329 (Feb 18, 2014)

Author(s): Antoniou, Tony; Juurlink, David N

Correspondence Address: Antoniou, Tony, tantoniou@smh.ca

Institution: Department of Family and Community Medicine, St. Michael's Hospital, Toronto, ON, Canada; Institute for Clinical Evaluative Sciences, Sunnybrook Health Sciences Centre, Toronto, ON, Canada

Language: English

Abstract: This article highlights, five things to know about Synthetic cannabinoids. Synthetic cannabinoids are a large family of chemically unrelated compounds functionally similar to delta-9-tetrahydrocannabinol, the active component of Cannabis sativa. Use of synthetic cannabinoids is increasing. Clinical manifestations vary with dose, product composition, individual susceptibility and co ingestion of other drugs. Because synthetic cannabinoids are not detected by urine immunoassay tests for THC, a high index of suspicion for these compounds is required when evaluating unexplained onset of acute psychosis or a toxidrome consistent with cannabinoid use. Treatment is supportive No specific antidote exists for synthetic cannabinoid toxicity. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

49. Addiction from a developmental perspective: The role of conduct disorder and ADHD in the development of problematic substance use disorders.

Original Title: Verslaving in ontwikkelingsperspectief: de rol van antisociale gedragsstoornis en ADHD in de ontwikkeling van problematisch middelengebruik.
Background: The externalising disorders conduct disorder (CD) and ADHD occur frequently in patients suffering from substance use disorders. These disorders play an important role in the onset and development of addiction. Aim: To examine the influence of CD and ADHD on the current problems and the psychiatric comorbidity of patients with a chronic addiction. Method: A group of 193 opiate-addicted patients receiving methadone maintenance treatment were evaluated extensively in the following areas: functioning, quality of life, psychiatric comorbidity (including CD and ADHD) and comorbid addictions. Standardised interviews were used to check for the presence of CD and ADHD. Results: A history of CD was demonstrated in the majority of participants (60.1%). Persistent ADHD was ascertained in 24.9%. Participants with CD and/or ADHD had a more severe addiction, characterised by more psychiatric comorbidity, more serious dysfunctioning and reduced quality of life. A history of CD predisposed patients particularly to antisocial behaviour and personality disorders. ADHD increased the risk of psychiatric comorbidity. Conclusion: Psychiatric comorbidity is part and parcel of addiction and reduces the quality of life of addicted patients. Behaviour problems in childhood play a major role in the development of severe addictions. Although CD is the biggest risk factor, the combination of ADHD with CD increases this risk, possibly through increased vulnerability to further psychiatric comorbidity. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
recruitment into HIV prevention research, and the handling of research-related complaints from participants involving perceived research harms or research experiences that do not accord with their initial expectations. Together, the articles in this special issue identify key ethical crossroads and provide suggestions for best practices that respect the values and merit the trust of research participants. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: All rights reserved. Please direct all requests for permissions to photocopy or reproduce article content through the university of california press's rights and permissions.; HOLDER: Joan Sieber; YEAR: 2014

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

**Subject Headings:** *AIDS Prevention
*HIV
*Health Disparities
Drug Abuse
Experimental Ethics
Prostitution
Best Practices

**Source:** PsycINFO

**51. Incidence of psychoses among drug dependent patients in primary care with no psychiatric history: A retrospective observational matched-cohort study.**

**Citation:** The European Journal of Psychiatry, October 2013, vol./is. 27/4(240-247), 0213-6163 (Oct-Dec 2013)

**Author(s):** Frisher, Martin; Martino, Orsolina I; Bashford, James; Crome, liana; Croft, Peter

**Correspondence Address:** Frisher, Martin: School of Pharmacy, Keele University, Keele, STS, United Kingdom, ST5 5BG, m.frisher@keele.ac.uk

**Institution:** School of Pharmacy, Keele University, Keele, STS, United Kingdom; Wallsall Healthcare NHS Trust, Walsall, WMD, United Kingdom; School of Pharmacy, Keele University, Keele, STS, United Kingdom; Academic Psychiatry Unit, St George's Hospital, South Staffordshire and Shropshire Healthcare NHS Foundation Trust, Stafford, STS, United Kingdom; Primary Care Sciences Research Centre, Keele University, Keele, STS, United Kingdom

**Language:** English

**Abstract:** Background and Objectives: While several studies have indicated a link between illicit drug use and the development of psychosis, the confounding role of pre-existing psychiatric illness is unclear. This study controls for this factor to a greater extent than has hitherto been possible, using a retrospective observational matched-cohort design controlling for age, gender, socioeconomic status and prior psychiatric illness. Methods: 592 cases (diagnosed with drug misuse/dependence) and 592 controls (no recorded history of drug misuse/dependence) were drawn from all patients aged 16-44 in 183 practices within the General Practice Research Database (UK). On study entry, cases and controls had never had a psychiatric diagnosis since registering with their practice The average look-back period was 17.7 years. The main outcome measure was diagnosis of psychosis (including schizophrenia) from study entry onwards Results: Patients with a drug misuse/dependence diagnosis are significantly more likely to be diagnosed with psychosis than those with no drug misuse/dependence history (RR = 2.10, 95% CI. = 1.23-3.59) with the relative risk increasing as the definition of psychosis sets narrower. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** *Drug Abuse
*Drug Dependency
*Psychosis
Primary Health Care
Socioeconomic Status
52. Deep brain stimulation for addiction, anorexia and compulsion. Rationale, clinical results and ethical implications.

Source: PsycINFO

Original Title: Tiefe Hirnstimulation bei Sucht, Anorexie und zwang: Rationale, klinische Ergebnisse und ethische Implikationen.

Citation: Der Nervenarzt, February 2014, vol./is. 85/2(162-168), 0028-2804;1433-0407 (Feb 2014)

Author(s): Bartsch, C; Kuhn, J

Correspondence Address: Kuhn, J.: Klinik und Poliklinik für Psychiatrie und Psychotherapie, Uniklinik Koln, Kerpener Str. 62, Koln, Germany, 50937, jens.kuhn@uk-koeln.de

Institution: Klinik und Poliklinik für Psychiatrie und Psychotherapie, Uniklinik Koln, Koln, Germany; Klinik und Poliklinik für Psychiatrie und Psychotherapie, Uniklinik Koln, Koln, Germany

Language: German

Abstract: Background: As an established treatment for movement disorders, the application of deep brain stimulation (DBS) for psychiatric indications has been investigated for almost 15 years. A CE label (also FDA approval) has recently been obtained for treatment of refractory obsessive-compulsive disorder (OCD). Objectives: This article aims at illustrating the current state of DBS in the treatment of refractory OCD. In addition, initial experimental approaches to investigate the potential use of DBS in substance addiction and anorexia nervosa (AN) will also be outlined as both disorders share some common features with OCD. Materials and methods: The present review is based on a keyword literature search (PubMed) while taking into account relevant references and own investigations Results: Although the number of clinical trials for treatment of refractory OCD is limited and sample sizes are small, there is some evidence for a substantial improvement, a so-called full response of OCD symptoms under DBS. However, not all patients benefit from the intervention. Regarding substance addiction and AN, data are scarce and are only indicative of a potential benefit at most. Discussion: Present data regarding the clinical benefits of DBS in OCD are encouraging and open up new avenues for the treatment of therapy refractory patients. However, several aspects, such as mechanisms of action, predictors and long-term side effect profiles, are incomplete or even unknown. In the case of addiction and AN, DBS remains purely experimental, at least for the moment. Hence, clinical trials should remain the gold standard for all three indications. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Springer-Verlag Berlin Heidelberg; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Eating Disorders
*Obsessive Compulsive Disorder
*Deep Brain Stimulation
Drug Therapy

Source: PsycINFO

Full Text: Available from Springer NHS in Der Nervenarzt; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.
Available from Springer NHS in Der Nervenarzt; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

53. The influence of structural stigma and rejection sensitivity on young sexual minority men's daily tobacco and alcohol use.

Citation: Social Science & Medicine, February 2014, vol./is. 103/(67-75), 0277-9536;1873-5347 (Feb 2014)
Abstract: Stigma occurs at both individual and structural levels, but existing research tends to examine the effect of individual and structural forms of stigma in isolation, rather than considering potential synergistic effects. To address this gap, our study examined whether stigma at the individual level, namely gay-related rejection sensitivity, interacts with structural stigma to predict substance use among young sexual minority men. Sexual minority (n = 119) participants completed online measures of our constructs (e.g., rejection sensitivity). Participants currently resided across a broad array of geographic areas (i.e., 24 U.S. states), and had attended high school in 28 states, allowing us to capture sufficient variance in current and past forms of structural stigma, defined as (1) a lack of state-level policies providing equal opportunities for heterosexual and sexual minority individuals and (2) negative state-aggregated attitudes toward sexual minorities. To measure daily substance use, we utilized a daily diary approach, whereby all participants were asked to indicate whether they used tobacco or alcohol on nine consecutive days. Results indicated that structural stigma interacted with rejection sensitivity to predict tobacco and alcohol use, and that this relationship depended on the developmental timing of exposure to structural stigma. In contrast, rejection sensitivity did not mediate the relationship between structural stigma and substance use. These results suggest that psychological predispositions, such as rejection sensitivity, interact with features of the social environment, such as structural stigma, to predict important health behaviors among young sexual minority men. These results add to a growing body of research documenting the multiple levels through which stigma interacts to produce negative health outcomes among sexual minority individuals. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
prescribing Opioid Maintenance Therapy (OMT) within the core competencies of the psychiatric training program, and increasing trainee opportunities for addiction medicine placements need to be considered. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Country of Publication: HOLDER: The Royal Australian and New Zealand College of Psychiatrists; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Medical Education
*Psychiatrists
Drug Abuse
Maintenance Therapy
Major Depression
Opiates
Posttraumatic Stress Disorder
Source: PsycINFO

55. Time to consider the principles of reciprocity and treatability in our Mental Health Acts?
Citation: Australasian Psychiatry, February 2014, vol./is. 22/1(93-94), 1039-8562;1440-1665 (Feb 2014)
Author(s): Daugherty, Brendan; Saeed, Daud
Language: English
Abstract: Presents a case study of 32-year-old male with a 10-year history of treatment-resistant schizophrenia and polysubstance use. His history included multiple involuntary admissions, a prolonged rehabilitation admission, trials of almost every antipsychotic available on the Pharmaceutical Benefits Scheme and clozapine induced myocarditis several years prior. He was admitted to hospital on this occasion with deterioration in his mental state in the context of increasing cannabis use and poor adherence to long-acting depot medication. On review he was guarded and irritable. Psychotic symptoms included grandiose delusions, paranoid delusions and thought disorder. He denied threatening others, though repeatedly made threatening gestures towards staff. He was also responding to non-existent stimuli. There was poor insight into his illness and judgment was impaired. Oral antipsychotic medication was added to the depot preparation. Drug tests were repeatedly negative. Medication adherence strategies were implemented and closely monitored. Alternative medication strategies were trialled without improvement in mental state. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Country of Publication: HOLDER: The Royal Australian and New Zealand College of Psychiatrists; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Abuse
*Schizophrenia
*Health Care Policy
Delusions
Mental Health
Source: PsycINFO

56. Comorbidity of migraine and psychiatric disorders among substance-dependent inpatients.
Citation: Headache: The Journal of Head and Face Pain, February 2014, vol./is. 54/2(290-302), 0017-8748;1526-4610 (Feb 2014)
Author(s): McDermott, Michael J; Tull, Matthew T; Gratz, Kim L; Houle, Timothy T; Smitherman, Todd A
Correspondence Address: Smitherman, Todd A.: Department of Psychology, University of Mississippi, 207 Peabody, Oxford, MS, US, 38677, tasmithe@olemiss.edu
Institution: Department of Psychology, University of Mississippi, Oxford, MS, US; Department of Psychiatry and Human Behavior, University of Mississippi Medical Center, Jackson, MS,
Background: Limited and conflicting data exist regarding the prevalence of psychiatric disorders, particularly substance use disorders (SUDs), among migraineurs in inpatient clinical settings. Methods: As part of a larger cross-sectional study, 181 substance-dependent inpatients completed a structured psychiatric interview and measures of psychiatric symptoms and migraine. Standardized mean differences were used to quantify differences between inpatients with and without migraine across 4 domains of predictors (demographic variables, non-SUD psychiatric diagnoses, specific SUDs, and self-reported psychiatric symptoms). The predictors within each domain that best discriminated between the migraine and no-migraine groups were identified using a classification tree approach with Bonferroni corrections. These candidate predictors were subsequently entered into a multivariate logistic regression to predict migraine status, which was then replicated using bootstrapping of 500 samples. Associations between migraine status and SUD treatment dropout were also examined. Results: Forty-four of the 181 (24.3%) participants met criteria for migraine. Migraineurs were more likely to be female (34.8% vs 18.3%) and reported higher levels of current anxiety symptoms (mean [standard deviation]: 19.7 [11.0] vs 11.3 [10.3]). Having a lifetime diagnosis of generalized anxiety disorder (56.8% vs 27%, odds ratio 3.47, 95% confidence interval [CI] 1.39-10.58) or a current diagnosis of alcohol dependence (45.5% vs 24.1%, odds ratio 3.79, 95% CI 1.63-13.62) was associated with more than a 3-fold risk of migraine. These 4 variables in combination were forced into the final multivariate model, which differentiated well between those with and without migraine (area under the receiver operating characteristic curve = 0.81; 95% CI 0.73-0.88). Migraine was not differentially associated with increased risk for SUD treatment dropout (13.6% vs 16.1% dropout among those without migraine). Discussion: A history of generalized anxiety disorder, high levels of current anxiety symptoms, and current alcohol dependence are the strongest psychiatric predictors of migraine status among substance-dependent inpatients. However, migraine status is not associated with SUD treatment dropout.
Academy of Pain Medicine, American Pain Society, and American Society of Addiction Medicine, dependence is defined as "a state of adaptation that is manifested by a drug class specific withdrawal syndrome that can be produced by abrupt cessation, rapid dose reduction, decreasing blood level of the drug, and/or administration of an antagonist." Although the experience of many children undergoing iatrogenically induced withdrawal may be mild or goes unreported, there is currently no guidance for recognition or management of withdrawal for this population. Guidance on this subject is available only for adults and primarily for adults with substance use disorders. The guideline will summarize existing literature and provide readers with information currently not available in any single source specific for this vulnerable pediatric population. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Drug Dependency
*Drug Withdrawal
*Opiates
*Pain Management
*Pediatrics
Drug Dosages
Drug Rehabilitation

Source: PsycINFO
Full Text: Available from Pediatrics in Newcomb Library & Information Service
Available from American Academy of Pediatrics in Pediatrics

58. Caregiver involvement in sexual risk reduction with substance using juvenile delinquents: Overview and preliminary outcomes of a randomized trial.

Citation: Adolescent Psychiatry, October 2013, vol./is. 3/4(342-351), 2210-6766;2210-6774 (Oct 2013)
Author(s): Letourneau, Elizabeth J; McCart, Michael R; Asuzu, Kammaruche; Mauro, Pia M; Sheidow, Ashli J
Correspondence Address: Letourneau, Elizabeth J.: Department of Mental Health, Johns Hopkins Bloomberg School of Public Health, Johns Hopkins University, 624 N Broadway, Baltimore, MD, US, 21205, eletourn@jhsph.edu
Institution: Department of Mental Health, Johns Hopkins Bloomberg School of Public Health, Johns Hopkins University, Baltimore, MD, US; Department of Psychiatry and Behavioral Sciences, Medical University of South Carolina, Charleston, SC, US; Department of Mental Health, Johns Hopkins Bloomberg School of Public Health, Johns Hopkins University, Baltimore, MD, US; Department of Mental Health, Johns Hopkins Bloomberg School of Public Health, Johns Hopkins University, Baltimore, MD, US; Department of Psychiatry and Behavioral Sciences, Medical University of South Carolina, Charleston, SC, US
Language: English
Abstract: Background: Substance using juvenile offenders have some of the highest rates for engaging in risky sexual behaviors compared to other adolescent subgroups. Methods: An overview of the literature on sexual risk behaviors among these youth is provided, including the empirical support for including caregivers/parents as critical partners in sexual risk reduction efforts with this population. In particular, there is (a) evidence that family factors contribute to adolescent sexual risk, (b) emerging support for caregiver focused interventions that target adolescent sexual risk, and (c) established support for caregiver focused interventions that target other complex adolescent behavior problems. In addition, this paper presents preliminary results from a randomized controlled trial evaluating a family-based intervention for substance using juvenile delinquents that combines contingency management (CM) for adolescent substance use with a novel sexual risk reduction (SRR) protocol. Results through six months post-baseline (corresponding with the end of treatment) are presented for intervention fidelity and
outcomes including number of intercourse acts (Sex Acts), use of condoms or abstinence (Safe Sex), and obtaining HIV testing (Testing). Conclusions: In comparison to youth focused group substance abuse treatment, the CM-SRR intervention was associated with significantly greater therapist use of SRR techniques and greater caregiver involvement in treatment sessions (supporting treatment fidelity) and significantly lower increases in Sex Acts (supporting treatment efficacy). There were also higher odds for Safe Sex and for Testing, although these results failed to reach statistical significance. Findings add to the growing literature supporting the feasibility and efficacy of caregiver focused interventions targeting sexual risk behaviors among high-risk adolescent populations.

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article is a U.S. Government work and is in the public domain in the USA. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:**
- *Incarceration*
- *Mental Disorders*
- *Patient History*
- Comorbidity
- Criminal Behavior
- Drug Abuse

**Source:** PsycINFO

**Full Text:** Available from Wiley in *Criminal Behaviour and Mental Health*

### 60. Gliarial abnormalities in substance use disorders and depression: Does shared glutamatergic dysfunction contribute to comorbidity?

**Citation:** The World Journal of Biological Psychiatry, January 2014, vol./is. 15/1(2-16), 1562-2975;1814-1412 (Jan 2014)

**Author(s):** Niciu, Mark J; Henter, Ioline D; Sanacora, Gerard; Zarate, Carlos A Jr.

**Correspondence Address:** Niciu, Mark J.: Experimental Therapeutics and Pathophysiology Branch, National Institutes of Health, 10 Center Dr., Building 10/CRC, Room 7-5545, Bethesda, MD, US, 20814-9692, mark.niciu@nih.gov

**Institution:** Yale University Department of Psychiatry, Clinical Neuroscience Research Unit (CNRU), New Haven, CT, US; Molecular Imaging Branch, National Institute of Mental Health, Bethesda, MD, US; Yale University Department of Psychiatry, Clinical Neuroscience Research Unit (CNRU), New Haven, CT, US; Experimental Therapeutics and Pathophysiology Branch, Intramural Research Program, National Institute of Mental Health, Bethesda, MD, US

**Language:** English

**Abstract:**
Objectives: Preclinical and clinical research in neuropsychiatric disorders, particularly mood and substance use disorders, have historically focused on neurons; however, glial cells-astrocytes, microglia, and oligodendrocytes - also play key roles in these disorders. Methods: Peer-reviewed PubMed/Medline articles published through December 2012 were identified using the following keyword combinations: glia, astrocytes, oligodendrocytes/glia, microglia, substance use, substance abuse, substance dependence, alcohol, opiate, opioid, cocaine, psychostimulants, stimulants, and glutamate. Results: Depressive and substance use disorders are highly comorbid, suggesting a common or overlapping aetiology and pathophysiology. Reduced astrocyte cell number occurs in both disorders. Altered glutamate neurotransmission and metabolism—specifically changes in the levels/activity of transporters, receptors, and synaptic proteins potentially related to synaptic physiology—appear to be salient features of both disorders. Glial cell pathology may also underlie the pathophysiology of both disorders via impaired astrocytic production of neurotrophic factors. Microglial/neuroinflammatory pathology is also evident in both depressive and substance use disorders. Finally, oligodendrocyte impairment decreases myelination and impairs expression of myelin-related genes in both substance use and depressive disorders. Conclusions: Gliarial-mediated glutamatergic dysfunction is a common neuropathological pathway in both substance use and depression. Therefore, glutamatergic neuromodulation is a rational drug target in this comorbidity. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
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*Neuropathology
Animal Models
Neurotransmission
Psychopharmacology
Neuroglia

Source: PsycINFO

61. Editorial.

Citation: The World Journal of Biological Psychiatry, January 2014, vol./is. 15/1(1), 1562-2975;1814-1412 (Jan 2014)
Author(s): Kasper, Siegfried [Ed]
Language: English
Abstract: This editorial presents a brief overview of the articles featured in this issue of The World Journal of Biological Psychiatry. This issue provides current research on biological markers in substance use disorders as well as on cognitive and biological characteristics of anxiety, stress-related and impulse control disorders. It is hoped that this issue will enhance the knowledge of the readers in the field of biological psychiatry. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Anxiety Disorders
*Biological Markers
*Biological Psychiatry
*Drug Abuse
*Impulse Control Disorders
Animal Models

Source: PsycINFO

62. Differences in early maladaptive schemas between a sample of young adult female substance abusers and a non-clinical comparison group.

Citation: Clinical Psychology & Psychotherapy, January 2014, vol./is. 21/1(21-28), 1063-3995;1099-0879 (Jan-Feb 2014)
Author(s): Shorey, Ryan C; Stuart, Gregory L; Anderson, Scott
Correspondence Address: Shorey, Ryan C.: Department of Psychology, University of Tennessee, 1404 Circle Dr., Austin Peay Building, 311, Knoxville, TN, US, 37996, rshorey@utk.edu
Institution: University of Tennessee, Knoxville, TN, US; University of Tennessee, Knoxville, TN, US; Cornerstone of Recovery, Louisville, TN, US
Language: English
Abstract: Early maladaptive schemas, defined as cognitive and behavioural patterns of viewing oneself and the world that cause considerable distress, are increasingly being recognized as an important underlying correlate of mental health problems. Recent research has begun to examine early maladaptive schemas among individuals seeking treatment for substance abuse. Unfortunately, there is limited research on whether substance abusers score higher on early maladaptive schemas than non-clinical controls. Thus, the current study examined whether a sample of young adult female substance abuse treatment seekers (n = 180) scored higher than a non-clinical group of female college students (n = 284) on early maladaptive schemas. Results demonstrated that the substance abuse group scored higher than the non-clinical group on 16 of the 18 early maladaptive schemas. In addition, a number of differences in early maladaptive schemas were large in effect size. Implications of these findings for future research and substance abuse treatment
programmes are discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: John Wiley & Sons, Ltd.; YEAR: 2012

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

**Subject Headings:** *Behavior Problems*  
*Drug Abuse*  
*Schema*  
*Self Concept*  
*World View*  
Drug Rehabilitation  
Human Females

**Source:** PsycINFO

**Full Text:** Available from Wiley in *Clinical Psychology and Psychotherapy*

### 63. Adoption and diffusion of evidence-based addiction medications in substance abuse treatment.

**Citation:** Health Services Research, February 2014, vol./is. 49/1(127-152), 0017-9124;1475-6773 (Feb 2014)

**Author(s):** Heinrich, Carolyn J; Cummings, Grant R

**Correspondence Address:** Heinrich, Carolyn J.: Lyndon B. Johnson School of Public Affairs, University of Texas at Austin, P.O. Box Y, Austin, TX, US, 78713-8925

**Institution:** Lyndon B. Johnson School of Public Affairs, University of Texas at Austin, Austin, TX, US; Wisconsin Legislative Fiscal Bureau, Madison, WI, US

**Language:** English

**Abstract:** Objective: To examine the roles of facility- and state-level factors in treatment facilities' adoption and diffusion of pharmaceutical agents used in addiction treatment. Data Sources: Secondary data from the National Survey of Substance Abuse Treatment Services (N-SSATS), Substance Abuse and Mental Health Services Administration (SAMHSA), Centers for Medicare and Medicaid Services, Alcohol Policy Information System, and Kaiser Family Foundation. Study Design: We estimate ordered logit and multinomial logit models to examine the relationship of state and treatment facility characteristics to the adoption and diffusion of three pharmaceutical agents over 4 years when each was at a different stage of adoption or diffusion. Data Collection: N-SSATS data with facility codes, obtained directly from SAMHSA, were linked by state identifiers to the other publicly available, secondary data. Principal Findings: The analysis confirms the importance of awareness and exposure to the adoption behavior of others, dissemination of information about the feasibility and effectiveness of innovations, geographical clustering, and licensing and accreditation in legitimizing facilities' adoption and continued use of pharmacotherapies in addiction treatment. Conclusions: Policy and administrative levers exist to increase the availability of pharmaceutical technologies and their continued use by substance abuse treatment facilities. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Health Research and Educational Trust

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

**Subject Headings:** *Drug Abuse*  
*Drug Therapy*  
*Evidence Based Practice*  
*Treatment Facilities*  
*Addiction*

**Source:** PsycINFO

**Full Text:** Available from Wiley in *Health Services Research*

### 64. Development of an integrated intervention model for Internet addiction in Hong Kong.


In response to the severe lack of indigenously developed preventive and counseling services for young people displaying Internet addiction problem, the Community Chest of Hong Kong funded a pioneering project entitled "Youngster Internet addiction prevention and counseling service". Besides provision of preventive services at the community, school, family and individual levels, individual-based and family-based counseling services were developed for young people displaying Internet addiction problem. In this paper, the major features of the counseling model are outlined, including emphases on controlled and healthy use of the Internet, understanding the change process in adolescents with Internet addiction problem, use of motivational interview methods, adoption of a family perspective, multi-level counseling at the individual, peer and family levels, and the use of both case and group approaches. The process of intervention in this counseling model is also described. Evaluation findings provide support for this integrated intervention model. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
### 66. Internet addiction, media use, and difficulties associated with sleeping in adolescents.

**Citation:** International Journal of Child and Adolescent Health, October 2013, vol./is. 6/4(459-463), 1939-5930 (Oct-Dec 2013)

**Author(s):** Stockburger, Stephanie J; Omar, Hatim A

**Correspondence Address:** Omar, Hatim A.: Division of Adolescent Medicine, UK Healthcare, Department of Pediatrics, KY Clinic, Room J422, Lexington, KY, US, 40536-0284, haomar2@uky.edu

**Institution:** Division of Adolescent Medicine, Department of Pediatrics, University of Kentucky, Lexington, KY, US; Division of Adolescent Medicine, Department of Pediatrics, University of Kentucky, Lexington, KY, US

**Language:** English

**Abstract:** The objective of this review article is to summarize the current literature regarding Internet addiction; media use, and sleep disruption in adolescents. Design: Systematic review of current literature. Methods: The data was obtained through literature review of articles published in the last 10 years. Conclusion: Internet addiction and media use have the power to have great influence over the sleep of children and adolescents and it is important to take advantage of the positive effects of media while minimizing the potentially negative, but severe, consequence of sleep disruption. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Nova Science Publishers, Inc.

### 67. European public health policies and interventions for detecting and deterring Internet addictive behaviors in adolescents.

**Citation:** International Journal of Child and Adolescent Health, October 2013, vol./is. 6/4(455-458), 1939-5930 (Oct-Dec 2013)

**Author(s):** Tsitsika, Artemis; Janikian, Mari; Dimitrakopoulou, Vasiliki

**Correspondence Address:** Tsitsika, Artemis: Adolescent Health Unit, 2nd Department of Pediatrics, "P & A Kyriakou" Children's Hospital, National and Kapodistrian University of Athens School of Medicine, 24 Mesogeion Avenue, Goudi, Athens, Greece, 11527, info@youth-health.gr

**Institution:** Adolescent Health Unit, 2nd Department of Pediatrics, "P & A Kyriakou" Children's Hospital, National and Kapodistrian University of Athens School of Medicine, Athens, Greece; Adolescent Health Unit, 2nd Department of Pediatrics, "P & A Kyriakou" Children's Hospital, National and Kapodistrian University of Athens School of Medicine, Athens, Greece; Adolescent Health Unit, 2nd Department of Pediatrics, "P & A
Kyriakou Children's Hospital, National and Kapodistrian University of Athens School of Medicine, Athens, Greece

Abstract: As the phenomenon of Internet addictive behavior constitutes a growing European public health issue, it is important to consider a number of policies for addressing it. This review briefly outlines basic recommendations for parental, educational and state levels. Implications for future research are further addressed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Internet Addiction
*Public Health Services
*Health Care Policy
Adolescent Psychopathology
Education
Parents

Source: PsycINFO

68. Management of Internet addictive behaviors in adolescents.

Citation: International Journal of Child and Adolescent Health, October 2013, vol./is. 6(4)(443-453), 1939-5930 (Oct-Dec 2013)

Author(s): Chele, Gabriela Elena; Macarie, George; Stefanescu, Cristinel

Correspondence Address: Chele, Gabriela Elena: University of Medicine and Pharmacy "Gr T Popa", Str. Universitatii nr. 16, Iasi, Romania, 700115, gabrielachele@yahoo.com

Institution: University of Medicine and Pharmacy "Gr T Popa", Iasi, Romania; University of Medicine and Pharmacy "Gr T Popa", Iasi, Romania; University of Medicine and Pharmacy "Gr T Popa", Iasi, Romania

Language: English

Abstract: The pathological addiction is a disease subject to rather simple criteria: losing control on the amounts consumed, spending a lot of time for consuming or recovering from the effects caused by consumption, the obsessive wish to relapse and the impossibility of giving up this behavior, despite the negative consequences. In the international classification of diseases (ICD 10), the expression addiction syndrome is often used, and clinic diagnosis criteria are provided. The typical wrong attitude is present in the future addict much before the disease appears. It is not the substance or the computer (which are, basically, available to everyone) that are decisive for acquiring an addiction. What is decisive is a person's decision to use this substance in order to obtain certain effects. The change of the behavioral pattern requires specialized intervention. The therapeutic management includes the cognitive-behavioral therapy combined with the motivational interview, where the purpose is to normalize the deviant behavior. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Cognitive Behavior Therapy
*Disease Management
*Internet Addiction
*Motivational Interviewing
Adolescent Psychopathology
Medical Diagnosis

Source: PsycINFO

69. Real world high-risk patterns associated with Internet addictive behaviors.
Internet addiction is a newly emerged behavior problem in adolescents and it is proposed to be included to previously defined behavioral problems. According to problem behavior theory, use of alcohol, smoking, and illicit substance use, have been grouped as problem behaviors, which have the same psychosocial proneness including the variables of social environment, perceived environment, personality, and behavior. This review underlines the importance of addressing Internet addiction as problem behaviour of adolescence in order to design prevention and intervention programmes. Adolescents who manifest one high risk, problem behaviour should be evaluated for comorbidity of Internet addiction and vice versa. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
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aspects and describes the negotiating-process of social in- or exclusion using consumption sociological theories. Above neurobiological aspects got elaborated in regard to the mesolimbic dopaminergic reward system. Strong evidence was gained in EEG-methodology based paradigms. Beyond each sub-discipline it is not only argued within the relevant discipline, furthermore the argumentation is combined to create a multi-disciplinary etiopathogenetic model. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Adolescent Development
*Computer Games
*Etiology
*Internet Addiction
*Susceptibility (Disorders)
Adolescent Psychopathology
Models
Neurobiology
Psychodynamics
Sociology

Source: PsycINFO

71. Online social networking in adolescence: Associations with development, well-being and internet addictive behaviors.

Citation: International Journal of Child and Adolescent Health, October 2013, vol./is. 6/4(411-420), 1939-5930 (Oct-Dec 2013)

Author(s): Tzavela, Eleni C; Mavromati, Foteini M

Correspondence Address: Tzavela, Eleni C.: Adolescent Health Unit, 2nd Department of Pediatrics, "P & A Kyriakou" Children's Hospital, National and Kapodistrian University of Athens School of Medicine, 24 Mesogeion Avenue, Goudi, Athens, Greece, 11527, etzavela@med.uoa.gr

Institution: Adolescent Health Unit, 2nd Department of Pediatrics, "P & A Kyriakou" Children's Hospital, National and Kapodistrian University of Athens School of Medicine, Athens, Greece; Adolescent Health Unit, 2nd Department of Pediatrics, "P & A Kyriakou" Children's Hospital, National and Kapodistrian University of Athens School of Medicine, Athens, Greece

Language: English

Abstract: In the last decade social networking sites (SNSs) have gained immense popularity and have become an integral part of youth daily social practice. The popularity of SNS is intuitively linked to the multiplicity of the features and opportunities afforded therein; including, profile making, "friending", commenting, and communication. Some of these online opportunities are closely linked to adolescent developmental needs. There is good evidence that SNS offer fertile ground for identity development by providing training for exercising independence and social skills and for experimenting with one's identity. Peer acceptance, self-worth and identity exploration are today expressed and negotiated online on SNS. Social platforms have re-defined the ways by which adolescent daily communication and developmental struggles are expressed, and as such constitute a new context for development. Nonetheless, for some adolescents SNS use may be a way to compensate for offline personal difficulties, at times turning into an excessive or "addictive" behavior. SNS may be addictive and "SNS addiction" may be seen as a subtype of Internet addictive behaviors, namely within the range of the cyber-relationship addictions. To date there is only limited empirical evidence supporting the addictive "potential" of SNS use and as such it is not possible to draw clear and robust linkages and conclusions. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal
72. Risks of developing Internet addictive behaviors: Scope and extent of Internet sites used.

Citation: International Journal of Child and Adolescent Health, October 2013, vol./is. 6/4(399-409), 1939-5930 (Oct-Dec 2013)

Author(s): Muller, Kai W; Woffling, Klaus; Dreier, Michael

Correspondence Address: Muller, Kai W.: Outpatient Clinic for Bevahioral Addictions, Department for Psychosomatic Medicine and Psychotherapy, Computer Game and Internet Addictive Behaviour Mainz, University Medical Center, Johannes Gutenberg-University Mainz (UMC-Mainz), Untere Zahlbacher Strasse 8, Mainz, Germany, 55131, muellka@uni-mainz.de

Institution: Outpatient Clinic for Computer Game and Internet Addictive Behaviour, Mainz Clinic, University Medical Center, Johannes Gutenberg-University Mainz, Mainz, Germany;
Outpatient Clinic for Computer Game and Internet Addictive Behaviour, Mainz Clinic, University Medical Center, Johannes Gutenberg-University Mainz, Mainz, Germany;
Outpatient Clinic for Computer Game and Internet Addictive Behaviour, Mainz Clinic, University Medical Center, Johannes Gutenberg-University Mainz, Mainz, Germany

Language: English

Abstract: It is elucidated that the development of Internet addiction includes three main factors. Those are 1) factors of the individual, 2) factors of the environment and 3) factors of the drug resp. behaviour. Those are related to a different kind of Internet application use and motivational state such as (I) gaming. (II) social networking. (III) gambling, and (IV) distraction. These indicated aspects are going to be linked and this elaboration is especially focusing on the scope and extent of the Internet applications that are used for each emphasis of use. Overall here the intersection of the indicated use of applications is tackled in relation to addictive factors. Media convergence and its advantages is discussed critically in context of Internet applications and broader opportunities for activities such as streaming and playing games offered from platforms including enormous social components via smartphone. In this context the social networking component of online games is depicted, indicating that a successful gamer has the subliminal quest for socializing. The elaborated aspects are finally discussed and set into context to recent research and literature. The current lack of knowledge about different applications that lead to Internet addictive behavior are circumscribed, relating to empirical evidence and solutions are discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Internet Addiction
*Pathological Gambling
*Online Social Networks
*Websites
*Social Media
Risk Factors

Source: PsycINFO

73. Assessment of Internet addictive behavior.

Citation: International Journal of Child and Adolescent Health, October 2013, vol./is. 6/4(391-398), 1939-5930 (Oct-Dec 2013)
A comprehensive assessment for the detection of Internet addictive behaviors includes conducting a clinical interview usually in conjunction with a standardized assessment instrument, to examine several areas of functioning and to determine differential and comorbid conditions. This review provides a brief overview of the major instruments used to assess Internet addictive behavior. Specifically, the chapter summarizes the general assessment process, the clinical interview as well as various tools measuring Internet addictive behavior. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
75. Development of Internet addictive behaviors: Potential pathophysiologic mechanisms.

Citation: International Journal of Child and Adolescent Health, October 2013, vol./is. 6/4(377-382), 1939-5930 (Oct-Dec 2013)

Author(s): Nazeer, Ahsan; Greydanus, Donald; Calles, Joseph

Correspondence Address: Greydanus, Donald: Department of Pediatric and Adolescent Medicine, Western Michigan University School of Medicine, 1000 Oakland Drive, D48G, Kalamazoo, MI, US, 49008-1284, Donald.greydanus@med.wmich.edu

Institution: Department of Child and Adolescent Psychiatry, Western Michigan University School of Medicine, Kalamazoo, MI, US; Department of Child and Adolescent Psychiatry, Western Michigan University School of Medicine, Kalamazoo, MI, US; Department of Child and Adolescent Psychiatry, Western Michigan University School of Medicine, Kalamazoo, MI, US

Language: English

Abstract: In the near future, the accurate diagnosis and effective treatment of Internet addictive disorders will rely on research-based knowledge of pathogenetic mechanisms. Progress in this area has been hampered by debates over whether Internet addiction is a true addiction, and whether biophysiological (vs. behavioral) factors contribute to its development. This review provides a brief overview of the major areas of investigation into the etiology of Internet addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)


Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Comorbidity *Etiology *Internet Addiction *Pathophysiology Diagnosis Treatment Effectiveness Evaluation

Source: PsycINFO

76. Clinical signs and symptoms of addictive behaviors.

Citation: International Journal of Child and Adolescent Health, October 2013, vol./is. 6/4(369-376), 1939-5930 (Oct-Dec 2013)

Author(s): Korpa, Terpsichori N; Papadopoulou, Pinelopi V

Correspondence Address: Korpa, Terpsichori N.: ADHD/LD Unit, Department of Child Psychiatry, "P & A Kyriakou" Children's Hospital, Thivon & Levadeias Goudi, Athens, Greece, 11527, terpsikorpa@aglaia KYRIAKOU.gr

Institution: ADHD/LD Unit, Department of Child Psychiatry, "P & A Kyriakou" Children's Hospital, Athens, Greece; ADHD/LD Unit, Department of Child Psychiatry, "P & A Kyriakou" Children's Hospital, Athens, Greece

Language: English

Abstract: Despite extensive research and clinical practice in the field of biological addictions, addictive behaviors associated with maladaptive patterns have not been sufficiently studied. As a result, adolescents, a clinical group with frequent referral to psychiatric units, are not adequately screened for behavioral addictions. The aim of this review is to supply the clinician with a guide containing the main clinical features of addictive behaviors and several ways to perform differential diagnosis and assess comorbidity. In the following text, the basic maladaptive behavior patterns connected to addiction are
demonstrated: Pathological gambling, excessive Internet use, eating addiction, sex addiction and compulsive buying disorder. It seems that addictive behaviors share common clinical signs such as preoccupation, loss of control and continuous use despite harmful consequences. Overlapping or coexisting with other psychiatric disorders is presented in the majority of the clinical cases. Early identification of the addiction type and related intervention can contribute to effective therapeutic management and lower odds for continuity in the adulthood. Mental health professionals should be educated in diagnosing and treating addiction. Implementing primary and/or secondary prevention programs is a matter of high importance. Clinical and diagnostic issues are discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
78. Alcohol and other drug use, partner violence, and mental health problems among female sex workers in Southwest China.

Citation: Health Care for Women International, January 2014, vol./is. 35/1(60-73), 0739-9332;1096-4665 (Jan 2014)

Author(s): Zhang, Chen; Li, Xiaoming; Chen, Yiyun; Hong, Yan; Shan, Qiao; Liu, Wei; Zhou, Yuejiao

Correspondence Address: Zhang, Chen: Global Health Institute, Rollins School of Public Health, Emory University, 1599 Clifton Road, NE, Room 6.406, Atlanta, GA, US, 30307, chen.zhang2@emory.edu

Institution: Global Health Institute, Rollins School of Public Health, Emory University, Atlanta, GA, US; Carman and Ann Adams Department of Pediatrics, Prevention Research Center, Wayne State University School of Medicine, Detroit, MI, US; Carman and Ann Adams Department of Pediatrics, Prevention Research Center, Wayne State University School of Medicine, Detroit, MI, US; Department of Social and Behavioral Health, School of Rural Public Health, Texas A&M Health Science Center, College Station, TX, US; Carman and Ann Adams Department of Pediatrics, Prevention Research Center, Wayne State University School of Medicine, Detroit, MI, US; Guangxi Center for Disease Control and Prevention, Nanning, China; Guangxi Center for Disease Control and Prevention, Nanning, China

Language: English

Abstract: In this study we investigated the association between mental health problems and negative experiences among female sex workers (FSWs) in China. A total of 1,022 FSWs completed a self-administered survey on their demographic characteristics, mental health status, substance use behaviors, and experiences of partner violence. We found that alcohol use was independently predictive of mental health problems when both partner violence and illicit drug use were accounted for in the multivariate logistic regression models. The findings underscore the urgent need for effective alcohol reduction interventions and mental health promotion programs among FSWs in China and other developing countries. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

79. Structural brain alterations associated with schizophrenia preceded by conduct disorder: A common and distinct subtype of schizophrenia?

Citation: Schizophrenia Bulletin, September 2013, vol./is. 39/5(1115-1128), 0586-7614;1745-1701 (Sep 2013)
Conduct disorder (CD) prior to age 15 is a precursor of schizophrenia in a minority of cases and is associated with violent behavior through adulthood, after taking account of substance misuse. The present study used structural magnetic imaging to examine gray matter (GM) volumes among 27 men with schizophrenia preceded by CD (SZ + CD), 23 men with schizophrenia but without CD (SZ-CD), 27 men with CD only (CD), and 25 healthy (H) men. The groups with schizophrenia were similar in terms of age of onset and duration of illness, levels of psychotic symptoms, and medication. The 2 groups with CD were similar as to number of CD symptoms, lifelong aggressive behavior, and number of criminal convictions. Men with SZ+CD, relative to those with SZ-CD, displayed (1) increased GM volumes in the hypothalamus, the left putamen, the right cuneus/precuneus, and the right inferior parietal cortex after controlling for age, alcohol, and drug misuse and (2) decreased GM volumes in the inferior frontal region. Men with SZ+CD (relative to the SZ-CD group) and CD (relative to the H group) displayed increased GM volumes of the hypothalamus and the inferior and superior parietal lobes, which were not associated with substance misuse. Aggressive behavior, both prior to age 15 and lifetime tendency, was positively correlated with the GM volume of the hypothalamus. Thus, among males, SZ+CD represents a distinct subtype of schizophrenia. Although differences in behavior emerge in childhood and remain stable through adulthood, further research is needed to determine whether the differences in GM volumes result from abnormal neural development distinct from that of other males developing schizophrenia. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Institution: California State University, San Marcos, CA, US; California State University, San Marcos, CA, US

Language: English

Abstract: Asian Americans (AA) and Pacific Islanders (PI) are an understudied population for health and tobacco use, which is alarming for a fast growing U.S. population. Research in smoking among AA and PI college students is limited, despite 50% of AA and 20% of PI having obtained a college degree. A cross-sectional tobacco survey was administered in a large racially diverse Southern California university (N = 490) that examined smoking behavior, psychosocial, and perceptual factors related to smoking among AA and PI compared with Caucasians. Overall, 19% of participants were smokers. The prevalence of current smoking by race was 26% PI, 19% AA, and 17% Caucasian. AA and PI are light, infrequent smokers who smoke mainly for social reasons and in social locations. Most AA and PI made quit attempts and reported intention to quit smoking. Low to moderate risk perceptions for addiction, disease and difficulty in quitting were observed. Social norms center on family influences, therefore it is recommended that cessation approaches target cigarette smoking norms within this social environment to increase perceptual risks of smoking. Smoking cessation should be placed in college health outreach programs based on culturally tailored approaches for AA and PI that target their unique smoking characteristics. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Society for Public Health Education; YEAR: 2013
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *College Students *Health Promotion *Smoking Cessation *Tobacco Smoking Asians Pacific Islanders
Source: PsycINFO
Full Text: Available from Highwire Press in Health Promotion Practice

81. Children of mentally ill or addicted parents participating in preventive support groups.

Citation: International Journal of Mental Health Promotion, September 2013, vol./is. 15/4(198-213), 1462-3730;2049-8543 (Sep 2013)
Author(s): van Santvoort, Floor; Hosman, Clemens M. H; van Doesum, Karin T. M; Janssens, Jan M. A. M
Correspondence Address: van Santvoort, Floor: Pluryn, Nijmegen, Netherlands, fsantvoort@pluryn.nl
Institution: Behavioural Science Institute, Radboud University, Nijmegen, Netherlands; Behavioural Science Institute, Radboud University, Nijmegen, Netherlands; Behavioural Science Institute, Radboud University, Nijmegen, Netherlands; Behavioural Science Institute, Radboud University, Nijmegen, Netherlands
Language: English
Abstract: The large number of children with mentally ill or addicted parents calls for efficient provision of preventive support: interventions should be offered to children most at risk and attune to their risk levels and needs. This study provided insight in the (heterogeneous) needs of children participating in preventive support groups. Questionnaires were filled out by 170 children (8-12 years) and their ill parent on children's psychosocial problems, parental illness-related cognitions and various risk factors. Outcomes show that 55.7% of the children had clinical psychosocial problems, 13.3% had subclinical problems and 31% functioned relatively well. Eighty-three percent experienced multiple risk factors. A linear cumulative relation was found between the number of risk factors and intensity of child problems. Children were classified into four risk profiles according to their own functioning and family risk level. The heterogeneity
in the support group participants might call for interventions of different intensity and content. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Clifford Beers Foundation; YEAR: 2013
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *At Risk Populations
*Parental Characteristics
*Psychosocial Factors
*Support Groups
Addiction
Mental Disorders
Prevention
Source: PsycINFO

82. Use of autobiographies to teach concepts in addiction: A narrative approach to instruction.

Citation: Journal of Creativity in Mental Health, October 2013, vol./is. 8/4(470-482), 1540-1383;1540-1391 (Oct 2013)
Author(s): Harrawood, Laura K; Mariska, Michael A; Hill, Nicole R
Correspondence Address: Harrawood, Laura K.: Counseling Program, McKendree University, 701 College Road, Clark 301, Lebanon, IL, US, 62254, lkharrawood@mckendree.edu
Institution: Counseling Program, McKendree University, Lebanon, IL, US; Department of Counseling and Development, Long Island University, Brookville, NY, US; Department of Counseling and Human Services, Syracuse University, Syracuse, NY, US
Language: English
Abstract: Understanding the process of substance abuse is often difficult for counselors-in-training who have no personal knowledge of the trajectory of addiction. This article outlines a beginning addiction course class activity that is based on narrative teaching pedagogy and is entitled Book Club: Client Assessment Profile. Details of the class assignment are provided, along with student feedback regarding the usefulness of the activity in understanding addiction. Implications for the use of nonfiction to teach addiction concepts in counselor education are 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: *Counselor Education
*Counselor Trainees
*Counselors
*Narratives
Addiction
Autobiography
Source: PsycINFO

83. "Cost comparisons of raising a child from birth to 17 years among samples of abused, delinquent, violent, and homicidal youth using victimization and justice system estimates": Errata.

Citation: Psychological Reports, June 2013, vol./is. 112/3(1011), 0033-2941;1558-691X (Jun 2013)
Author(s): Zagar, Agata Karolina; Zagar, Robert John; Bartikowski, Boris; Busch, Kenneth G
Correspondence Address: Zagar, Robert John, 233 East Erie Street, Suite 610, Chicago, IL, US, 60611, drzagar@yahoo.com
Institution: Juvenile Division of the Circuit Court of Cook County, IL, US; Euromed School of Management, Marseille, France; U.S. Department of health and Human Service, US
Language: English
Abstract: Reports an error in "Cost comparisons of raising a child from birth to 17 years among samples of abused, delinquent, violent, and homicidal youth using victimization and justice system estimates" by Agata Karolina Zagar, Robert John Zagar, Boris Bartikowski and Kenneth G. Busch (Psychological Reports, 2009[Feb], Vol 104[1], 309-338). In the original article, there were some errors in Fig. 1 on page 312, In Table 1 on page 313-314 and in Table 4 on page 319. The corrections are present in the erratum. (The following abstract of the original article appeared in record 2009-08443-012). [Correction Notice: An erratum for this article was reported in Vol 105(3, Pt2) of Psychological Reports (see record 2010-04203-034). In Fig. 1, on page 312, there were 425 Nonviolent Delinquents for comparison with 425 Assaulting Delinquents. In Table 1, on page 313-314, df = 3 for all 2 comparisons. Only statistically significant values of 2 are shown.] Data from youth studied by Zagar and colleagues were randomly sampled to create groups of controls and abused, delinquent, violent, and homicidal youth (n = 30 in each). Estimated costs of raising a non-delinquent youth from birth to 17 yr. were compared with the average costs incurred by other youth in each group. Estimates of living expenses, direct and indirect costs of victimization, and criminal justice system expenditures were summed. Groups differed significantly on total expenses, victimization costs, and criminal justice expenditures. Mean total costs for a homicidal youth were estimated at $3,935,433, while those for a control youth were $150,754. Abused, delinquent, and violent youth had average total expenses roughly double the total mean costs of controls. Prevention of dropout, alcoholism, addiction, career delinquency, or homicide justifies interception and empirical treatment on a cost-benefit basis, but also based on the severe personal costs to the victims and to the youth themselves. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Child Abuse
*Costs and Cost Analysis
*Homicide
*Juvenile Delinquency
*Victimization
Human Development
Justice
Violence
Source: PsycINFO


Citation: Psychological Reports, June 2013, vol./is. 112/3(1011), 0033-2941;1558-691X (Jun 2013)
Author(s): Zagar, Robert John; Busch, Kenneth G; Hughes, John Russell; Arbit, Jack
Institution: Juvenile Division of the Circuit Court of Cook County, IL, US; U.S. Department of Health and Human Services, US; University of Illinois Chicago School of Medicine, Chicago, IL, US; Northwestern University Medical School, Evanston, IL, US
Language: English
Abstract: Reports an error in "Comparing early and late twentieth-century Boston and Chicago male juvenile offenders: What changed" by Robert John Zagar, Kenneth G. Busch, John Russell Hughes and Jack Arbit (Psychological Reports, 2009[Feb], Vol 104[1], 185-198). In the original article, there were some errors in Table 1 on page 190. The corrections are present in the erratum. (The following abstract of the original article appeared in record 2009-08443-008). [Correction Notice: An erratum for this article was reported in Vol 105(3, Pt2) of Psychological Reports (see record 2010-04203-032). In Table 1, on page 190, for all 2 comparisons, df = 2; these are comparisons of the Chicago 1909-1915 and Chicago 1980-1988 groups for all variables but gang membership, for which there were no early data from Chicago, so the Boston 1917-1922 data were compared to Chicago 1980-1988. Only statistically significant values of comparison statistics are shown.] To investigate changes in characteristics of delinquents over time, randomly selected contemporary delinquents (Zagar, et al, 1980-1988; n = 2,031) were compared with 3
historical Chicago and Boston samples (Healy & Bonner, 1909-1915, n = 2,000; Healy & Bonner, 1917-1923, n = 2,000; Glueck & Glueck, 1917-1922, n = 1,000). All underwent physical, psychiatric, psychological, school, and social examinations. Contemporary delinquents had more assault, burglary, homicide, alcohol and substance abuse, gang membership, head injury, overdose, and single parents. Historical delinquent samples had more thieves and families with both biological parents. Historical delinquent mean IQ was 5 points below standardization average; modern delinquents were 22 points lower. Contemporary offenders were a greater portion of the county public school-aged population. Current more sensitive and specific examinations account for increases in observed overdoses and head injuries in the 1980s sample. Other demographic differences between contemporary and 3 historical delinquent samples were robust. Findings are discussed with respect to a need for early actuarial assessment and empirical treatment of the costliest delinquents: the dropouts, alcoholics, addicts, career delinquents-criminals, and homicide-prone youth. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
Citation: International Journal on Disability and Human Development, August 2013, vol./is. 12/3(1-6), 2191-1231;2191-0367 (Aug 2013)

Author(s): Dobry, Yuriy; Sher, Leo

Correspondence Address: Dobry, Yuriy: Department of Psychiatry, Mount Sinai School of Medicine, 1240 Madison Avenue, Box 1240, New York, NY, US, yuriydo@y.com

Institution: Department of Psychiatry, Mount Sinai School of Medicine, New York, NY, US; Department of Psychiatry, Mount Sinai School of Medicine, New York, NY, US

Language: English

Abstract: Background: The aim of this study was to report a patient with complex visual perceptual disturbances and a 30-year history of schizophrenia and alcohol dependence, and to formulate a comprehensive clinical approach to this unique neuropsychiatric phenomenon. Methods: The authors report subjective and objective information from the patient's past medical history and current admission. The authors also did a comprehensive review of the literature on complex visual hallucinations. Results: Complex visual hallucination is a frightening experience, with a pathogenesis ranging from chronic psychiatric disorders, such as schizophrenia, to acute neurological events, such as cerebrovascular accident. The hallucination content is typically described by patients as vivid with dynamic images, in striking colors and clear contours. The authors report a patient earlier diagnosed with schizophrenia and alcohol dependence disorder who became agitated following a sudden onset of visions of vivid, interactive images of people and animals. Conclusions: Due to the scope of the differential diagnosis, identifying the exact underlying etiology of complex visual hallucinations is often challenging, yet critical, in preventing the high risk of morbidity and mortality associated with some of the root causes of this neuropsychiatric phenomenon. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Cerebrovascular Accidents *Delirium Tremens *Visual Hallucinations Alcoholism Schizophrenia Seizures Morbidity

Source: PsycINFO

87. Substance use, addiction, and history.

Citation: International Journal on Disability and Human Development, August 2013, vol./is. 12/3(229-233), 2191-1231;2191-0367 (Aug 2013)

Author(s): Greydanus, Donald E; Merrick, Joav

Correspondence Address: Greydanus, Donald E.: Department of Pediatric and Adolescent Medicine, Western Michigan University School of Medicine, 1000 Oakland Drive, D48G, Kalamazoo, MI, US, 49008-1284, Donald.greydanus@med.wmich.edu

Institution: Department of Pediatric and Adolescent Medicine, Western Michigan University School of Medicine, Kalamazoo, MI, US; National Institute of Child Health and Human Development, Jerusalem, Israel

Language: English

Abstract: This editorial discusses, the substance use and addiction. Humans have utilized many hallucinogenic and euphoria-inducing plants for over thousands of years. Some of them include Datura stramonium, Datura candida, Amanita muscaria, Atropa belladonna, Rivea corymbosa, Pancreatinium trianthum, Hyoscyamus niger, Erythroxylon coca, Papaver somniferum, and many others. Each has induced its own unique jeremiad with promises of joy, which ends as an oubliette with a trap door of addiction and potential death. However, one could speculate that one of the most classic apolaustic drugs is the
marijuana plant, which has been smoked for unknown millennia. Guidance is desperately needed in learning ways by which to prevent drug addiction in our youth and establish prevention programs to decrease the devastating toll it has and will take on billions of human beings in this century and beyond. It is important to study youth in their communities and, therefore, support more community-based research protocols. It is useful to know what is salubrious in substance abuse management as well as what is not salutary. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse *Hallucinogenic Drugs *Addiction *Communities

Source: PsycINFO

88. Claiming positive results from negative trials: A cause for concern in randomized controlled trial research-Author's reply.

Citation: Journal of Medical Internet Research, August 2013, vol./is. 15/8(446-448), 1438-8871 (Aug 2013)

Author(s): Hester, Reid; Campbell, William; Lenberg, Kathryn; Delaney, Harold

Correspondence Address: Hester, Reid: Behavior Therapy Associates, LLC, Research Div., 9426 Indian School Rd NE Ste 1, Albuquerque, NM, US, 87112, reidkhester@gmail.com


Language: English

Abstract: Reply by the current author to the comments made by John A. Cunningham (see record 2013-41345-036) on the original article (see record 2013-26856-002). John A. Cunningham is correct in noting that it is difficult to draw conclusions about the results of a randomized clinical trial (RCT) when two or more active interventions are compared without utilizing a no-treatment control condition. This is an issue that bedevils clinical research, but it is also one that, ethically speaking, has long been resolved in the area of addictions. Cunningham characterizes the outcomes of our RCT as a "negative" trial and concludes that it is "unwise to favour an intervention effect explanation over other causes when faced with the results of an RCT where participants show improvement over time but that there are no significant differences between intervention conditions." While the lack of difference between conditions does in fact remain a topic of empirical interest, his use of the term "negative" is baffling, given the highly positive changes across both groups. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Country of Publication: STATEMENT: Originally published in the Journal of Medical Internet Research (http://www.jmir.org), 19.08.2013. This is an open-access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/2.0/), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work, first published in the Journal of Medical Internet Research, is properly cited. The complete bibliographic information, a link to the original publication on http://www.jmir.org/, as well as this copyright and license information must be included.; HOLDER: Reid Hester, William Campbell, Kathryn Lenberg, Harold Delaney

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcohol Abuse *Alcohol Rehabilitation *Alcoholism *Treatment Effectiveness Evaluation *Websites *Alcohols
89. Claiming positive results from negative trials: A cause for concern in randomized controlled trial research.

Citation: Journal of Medical Internet Research, August 2013, vol./is. 15/8(444-445), 1438-8871 (Aug 2013)

Author(s): Cunningham, John A

Correspondence Address: Cunningham, John A.: Centre for Mental Health Research, Australian National University, Building 63, Canberra, ACT, Australia, 0200, john.cunningham@anu.edu.au

Institution: Centre for Mental Health Research, Australian National University, Canberra, ACT, Australia

Language: English

Abstract: Comments on an article by Reid K. Hester et al. (see record 2013-26856-002). One of the challenging issues facing the randomized controlled trial (RCT) researcher is how to interpret the results of studies where there are improvements in the behavior under study but where the degree of improvement does not differ between the experimental conditions. This is especially a challenge when the RCT involves the comparison of two or more interventions rather than an intervention compared to some form of no-intervention control group. There is no way to determine if this claim is definitely true from the results of a negative RCT. There is a well-established finding in the alcohol research field that participants in the no intervention control condition of intervention trials show improvements in their drinking from baseline to follow-up. It is unwise to favor an intervention effect explanation over other causes when faced with the results of an RCT where participants show improvement over time but that there are no significant statistical differences between intervention conditions. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcohol Abuse  
*Alcohol Rehabilitation  
*Alcoholism  
*Treatment Effectiveness Evaluation  
*Websites  
Alcohols

90. Crowdsourcing black market prices for prescription opioids.

Citation: Journal of Medical Internet Research, August 2013, vol./is. 15/8(361-371), 1438-8871 (Aug 2013)

Author(s): Dasgupta, Nabarun; Freifeld, Clark; Brownstein, John S; Menone, Christopher Mark; Surratt, Hilary L; Poppish, Luke; Green, Jody L; Lavonas, Eric J; Dart, Richard C

Correspondence Address: Dasgupta, Nabarun: Epidemioco, 268 Newbury Street, 2nd Floor, Boston, MA, US, nabarund@gmail.com
Background: Prescription opioid diversion and abuse are major public health issues in the United States and internationally. Street prices of diverted prescription opioids can provide an indicator of drug availability, demand, and abuse potential, but these data can be difficult to collect. Crowdsourcing is a rapid and cost-effective way to gather information about sales transactions. We sought to determine whether crowdsourcing can provide accurate measurements of the street price of diverted prescription opioid medications. Objective: To assess the possibility of crowdsourcing black market drug price data by cross-validation with law enforcement officer reports. Methods: Using a crowdsourcing research website (StreetRx), we solicited data about the price that site visitors paid for diverted prescription opioid analgesics during the first half of 2012. These results were compared with a survey of law enforcement officers in the Researched Abuse, Diversion, and Addiction-Related Surveillance (RADARS) System, and actual transaction prices on a "dark Internet" marketplace (Silk Road). Geometric means and 95% confidence intervals were calculated for comparing prices per milligram of drug in US dollars. In a secondary analysis, we compared prices per milligram of morphine equivalent using standard equianalgesic dosing conversions. Results: A total of 954 price reports were obtained from crowdsourcing, 737 from law enforcement, and 147 from the online marketplace. Correlations between the 3 data sources were highly linear, with Spearman rho of 0.93 (P < .001) between crowdsourced and law enforcement, and 0.98 (P < .001) between crowdsourced and online marketplace. On StreetRx, the mean prices per milligram were US$3.29 hydromorphone, US$2.13 buprenorphine, US$1.57 oxymorphone, US$0.97 oxycodone, US$0.96 methadone, US$0.81 hydrocodone, US$0.52 morphine, and US$0.05 tramadol. The only significant difference between data sources was morphine, with a Drug Diversion price of US$0.67/mg (95% CI 0.59-0.75) and a Silk Road price of US$0.42/mg (95% CI 0.37-0.48). Street prices generally followed clinical equianalgesic potency. Conclusions: Crowdsourced data provide a valid estimate of the street price of diverted prescription opioids. The (ostensibly free) black market was able to accurately predict the relative pharmacologic potency of opioid molecules. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
91. An exploration of social circles and prescription drug abuse through Twitter.

Citation: Journal of Medical Internet Research, September 2013, vol./is. 15/9(256-267), 1438-8871 (Sep 2013)

Author(s): Hanson, Carl Lee; Cannon, Ben; Burton, Scott; Giraud-Carrier, Christophe

Correspondence Address: Hanson, Carl Lee: Computational Health Science Research Group, Department of Health Science, Brigham Young University, 213 Richards Building, Provo, UT, US, Carl_Hanson@byu.edu

Institution: Computational Health Science Research Group, Department of Health Science, Brigham Young University, Provo, UT, US; Computational Health Science Research Group, Department of Health Science, Brigham Young University, Provo, UT, US; Computational Health Science Research Group, Department of Computer Science, Brigham Young University, Provo, UT, US; Computational Health Science Research Group, Department of Computer Science, Brigham Young University, Provo, UT, US

Language: English

Abstract: Background: Prescription drug abuse has become a major public health problem. Relationships and social context are important contributing factors. Social media provides online channels for people to build relationships that may influence attitudes and behaviors. Objective: To determine whether people who show signs of prescription drug abuse connect online with others who reinforce this behavior, and to observe the conversation and engagement of these networks with regard to prescription drug abuse. Methods: Twitter statuses mentioning prescription drugs were collected from November 2011 to November 2012. From this set, 25 Twitter users were selected who discussed topics indicative of prescription drug abuse. Social circles of 100 people were discovered around each of these Twitter users; the tweets of the Twitter users in these networks were collected and analyzed according to prescription drug abuse discussion and interaction with other users about the topic. Results: From November 2011 to November 2012, 3,389,771 mentions of prescription drug terms were observed. For the 25 social circles (n = 100 for each circle), on average 53.96% (SD 24.3) of the Twitter users used prescription drug terms at least once in their posts, and 37.76% (SD 20.8) mentioned another Twitter user by name in a post with a prescription drug term. Strong correlation was found between the kinds of drugs mentioned by the index user and his or her network (mean r=0.73), and between the amount of interaction about prescription drugs and a level of abusiveness shown by the network (r = 0.85, P < .001). Conclusions: Twitter users who discuss prescription drug abuse online are surrounded by others who also discuss it-potentially reinforcing a negative behavior and social norm. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse
*Prescription Drugs
*Online Social Networks
Public Health
Computer Mediated Communication
Social Media

Source: PsycINFO
Full Text: Available from National Library of Medicine in Journal of Medical Internet Research

92. New media use by patients who are homeless: The potential of mHealth to build connectivity.

Citation: Journal of Medical Internet Research, September 2013, vol./is. 15/9(138-147), 1438-8871 (Sep 2013)

Author(s): Post, Lori Ann; Vaca, Federico E; Doran, Kelly M; Luco, Cali; Naftilan, Matthew; Dziura, James; Brandt, Cynthia; Bernstein, Steven; Jagminas, Liudvikas; D'Onofrio, Gail

Correspondence Address: Post, Lori Ann: Department of Emergency Medicine, Yale School of Medicine, Yale University, Suite 263, 464 Congress Ave, New Haven, CT, US, 06519, lori.post@yale.edu

Institution: Department of Emergency Medicine, Yale School of Medicine, Yale University, New Haven, CT, US; Department of Emergency Medicine, Yale School of Medicine, Yale University, New Haven, CT, US; Department of Emergency Medicine, NYU School of Medicine, New York University, New York, NY, US; Department of Emergency Medicine, Yale School of Medicine, Yale University, New Haven, CT, US; Department of Emergency Medicine, Yale School of Medicine, Yale University, New Haven, CT, US; Department of Emergency Medicine, Yale School of Medicine, Yale University, New Haven, CT, US; Department of Emergency Medicine, Yale School of Medicine, Yale University, New Haven, CT, US; Department of Emergency Medicine, Yale School of Medicine, Yale University, New Haven, CT, US; Department of Emergency Medicine, Yale School of Medicine, Yale University, New Haven, CT, US; Department of Emergency Medicine, Yale School of Medicine, Yale University, New Haven, CT, US

Language: English

Abstract: Background: Patients experiencing homelessness represent a disproportionate share of emergency department (ED) visits due to poor access to primary care and high levels of unmet health care needs. This is in part due to the difficulty of communicating and following up with patients who are experiencing homelessness. Objective: To determine the prevalence and types of "new media" use among ED patients who experience homelessness. Methods: This was a cross-sectional observational study with sequential enrolling of patients from three emergency departments 24/7 for 6 weeks. In total, 5788 ED patients were enrolled, of whom 249 experienced homelessness. Analyses included descriptive statistics, and unadjusted and adjusted odds ratios. Results: 70.7% (176/249) of patients experiencing homelessness own cell phones compared to 85.90% (4758/5539) of patients in stable housing (P = .001) with the former more likely to own Androids, 70% (53/76) versus 43.89% (1064/2424), and the latter more likely to have iPhones, 44.55% (1080/2424) versus 17% (13/76) (P = .001). There is no significant difference in new media use, modality, or frequency for both groups; however, there is a difference in contract plan with 50.02% (2380/4758) of stably housed patients having unlimited minutes versus 37.5% (66/176) of homeless patients. 19.78% (941/4758) of patients in stable housing have pay-as-you-go plans versus 33.0% (58/176) of homeless patients (P = .001). Patients experiencing homelessness are more likely to want health information on alcohol/substance abuse, mental health, domestic violence, pregnancy and smoking cessation. Conclusions: This study is unique in its characterization of new media ownership and use among ED patients experiencing homelessness. New media is a powerful tool to connect patients experiencing homelessness to health care. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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Publication Type: Journal; Peer Reviewed Journal

Citation: School Social Work Journal, September 2013, vol./is. 38/1(77-78), 0161-5653 (Sep 2013)
Author(s): Zakeri, Lynn R
Language: English
Abstract: Reviews the book, Contingency Management for Adolescent Substance Abuse: A Practitioner's Guide by Scott W. Henggeler, Philippe B. Cunningham, Melisa D. Rowland, and Sonja K. Schoenwald (see record 2012-06111-000). The authors present a clear, easy-to-follow model for treating teens with substance abuse issues. The guidance in each chapter is very clear and simple in terms of how to use contingency management to assist adolescents with substance abuse problems. This book specifically addresses issues related to the adolescent who is seeking treatment to abstain from drugs. Adolescents often self-medicate because of an Axis I or II diagnosis, and contingency management would then be only a part of the treatment plan. Regardless, this book is clear and easy to follow. It goes beyond motivational interviewing and lays out the plan and the steps to achieve abstinence. It is an excellent resource. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Contingency Management
*Drug Abuse
*Motivational Interviewing
*Treatment
Adolescent Development

Source: PsycINFO

94. Effects of a one-hour intervention on condom implementation intentions among drug users in Southern California.

Citation: AIDS Care, May 2013, vol./is. 25/12(1586-1591), 0954-0121;1360-0451 (May 2013)
Author(s): Nydegger, Liesl A; Keeler, Amanda R; Hood, Caroline; Siegel, Jason T; Stacy, Alan W
Correspondence Address: Keeler, Amanda R., amanda.keeler@cgu.edu
Institution: School of Community and Global Health, Claremont Graduate University, Claremont, CA, US; School of Behavioral and Organizational Sciences, Claremont Graduate University, Claremont, CA, US; Peter F. Drucker and Masatoshi Ito Graduate School of Management, Claremont Graduate University, Claremont, CA, US; School of Behavioral and Organizational Sciences, Claremont Graduate University, Claremont, CA, US; School of Community and Global Health, Claremont Graduate University, Claremont, CA, US
Language: English
Abstract: Approximately 36% of HIV cases are related to substance abuse. Substance abusers, including non-injection drug users, are at a high-risk for contracting HIV due to risky behaviors, including unprotected sex. Due to these behavioral and infection risks, feasible interventions that focus on condom use within this population are imperative. The current study involved the development of brief intervention designed to increase implementation...
intentions (situation-linked action plans) to use condoms in convicted non-violent drug offenders participating in drug diversion programs in Southern California. Participants (n = 143) were randomized at the individual level to either waitlist control or experimental conditions. The randomized waitlist control group received the HIV survey for the pre-test before the intervention, while the experimental group received a neutral, non-HIV-related, survey at pre-test. The experimental group received the HIV survey as the post-test after the intervention (waitlist control group received the neutral, non-HIV-related, survey). One-tailed Mann Whitney U tests were used to compare the waitlist control and experimental groups. The experimental group was more likely to report stronger implementation intentions to use condoms (p < 0.001). These results indicate in the short term that a brief, easily disseminated HIV intervention can be effective for increasing implementation intentions to use condoms in an extremely high HIV-risk population. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Abstract: (from the chapter) Perhaps the most widely agreed-on function of self-regulation is to bring thoughts and behavior in line with goals and intentions. From smokers trying to quit smoking to students striving to get good grades, everyone must continually engage in thousands of acts of self-regulation in which they set goals; initiate or inhibit actions, thoughts, or emotions; and monitor for signs of failure (Bandura, 1991; Baumeister & Heatherton, 1996; Carver & Scheier, 1981; Metcalfe & Mischel, 1999). Implicit in this process is a self that sets goals and standards, is aware of its own thoughts and behaviors, and has the capacity to change them (e.g., Baumeister, 1998; Heatherton, 2011). Given this definition of self-regulation, it should come as no surprise that self-regulation research encompasses a range of topics, few of which are under the strict purview of social and personality psychology alone. Consequently, the study of self-regulation is by necessity multidisciplinary, crossing many distinct domains of research, such as developmental psychology (Kopp, 1982), drug addiction (Marlatt & Gordon, 1985), and health psychology (Bandura, 1990, 2005). In this chapter, we similarly take a multidisciplinary view and consider empirical findings from many disciplines. That being said, the theoretical backbone underlying this chapter derives almost exclusively from the pioneering theories of self-regulation developed in social psychology (e.g., Bandura, 1991; Baumeister & Heatherton, 1996; Carver & Scheier, 1981; Metcalfe & Mischel, 1999). In the following sections, we present an overview of self-regulation theory and research with an emphasis on the causes and mechanisms of self-regulatory failure. We then provide a brief overview of the brain basis of self-regulation failure and discuss how the empirical findings support a model of self-regulation failure that is domain general but tailored to the individual's particular goals-and vices-and sensitive to the regulatory contexts that people may find themselves in. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
Objective: Public Health Ontario and the Institute for Clinical Evaluative Sciences have collaborated to estimate the burden of illness attributable to mental disorder and addictions in Ontario. Methods: Health-adjusted life years were used to estimate burden. It is conceptually similar to disability-adjusted life years that were used in the global burden of disease studies. Data sources for the mental illnesses and addictions used in our study included health administrative data for the province of Ontario, survey data from Statistics Canada and the Centre for Addiction and Mental Health, vital statistics data from the Ontario Office of the Registrar General, and US epidemiologic survey data. Results: The 5 conditions with the highest burden are: major depression, bipolar affective disorder, alcohol use disorders (AUDs), social phobia, and schizophrenia. The burden of depression is double the next highest mental health condition (that is, bipolar affective disorder) and is more than the combined burden of the 4 most common cancers in Ontario. AUDs were the only disease group that had a substantial proportion of burden attributable to early death. The burden estimates for the other conditions were primarily due to disability. Conclusions: The burden of these conditions in Ontario is as large or larger than other conditions, such as cancer and infectious diseases, owing in large part to the high prevalence, chronicity, and age of onset for most mental disorders and addiction problems. The findings serve as an important baseline for future evaluation of interventions intended to address the burden of mental health and addictions. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
use and abuse in adolescents, the effects of prenatal and postnatal exposure and use of substances on the sleep of infants, children, and adolescents, the effect of disturbed sleep on subsequent substance use, and the effect of substance use and disturbed sleep on mental health. Expanded attention is given to substances that are widely available to adolescents including caffeine, nicotine, alcohol, and marijuana. The chapter concludes with a description of a successful demonstration project in which sleep disturbances in adolescents with a substance abuse history were treated. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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**Author(s):** Karnik, Niranjan; Vostanis, Panos; Huemer, Julia; Kjelsberg, Ellen; Kaltiala-Heino, Riittakeru; Steiner, Hans  
**Institution:** University of Chicago, Chicago, IL, US; Greenwood Institute of Child Health, University of Leicester, Leicester, United Kingdom; Department of Child and Adolescent Psychiatry, Medical University of Vienna, Vienna, Austria; Centre for Research and Education in Forensic Psychiatry, Oslo University Hospital, Oslo, Norway; School of Medicine, University of Tampere, Tampere, Finland; Stanford University School of Medicine, Stanford, CA, US  
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**Abstract:** (from the chapter) This chapter summarizes the current research on the juvenile justice system from an epidemiological perspective and lays the groundwork for future research. The chapter takes a global perspective and selectively highlights recent research studies from different international regions to examine the findings of psychiatric morbidity in juvenile justice populations. Generally, we have tried to focus on studies that use empirical and validated evaluation measures, as well as large sample sizes. When these were unavailable, we selected studies that show important information about the juvenile justice population or examined countries where little research has been conducted. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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