

# Search Results

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## Search History

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

## 1. The effect of incarceration and level of perceived social support on recovery from substance addiction.

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<b>Citation:</b>	Dissertation Abstracts International: Section B: The Sciences and Engineering, 2015, vol./is. 75/8-B(E)(No Pagination Specified), 0419-4217 (2015)
<b>Author(s):</b>	Grove, Michael Lucas
<b>Institution:</b>	The Chicago School of Professional Psychology, US
<b>Language:</b>	English
<b>Abstract:</b>	The purpose of the current study was to investigate the relationship of perceived social support and incarceration history in the process of recovery from substance addiction. Sixty-five participants varying in their incarceration history and length of abstinence comprised the sample. The participants were recruited from Oxford House; a non-profit network of recovery homes. Outcome measures included participants' levels of perceived social support and length of sobriety. Contrary to the hypotheses, it was found that previously incarcerated individuals did not significantly differ from non-incarcerated participants in levels of perceived social support; higher level of perceived social support was not associated with successful recovery from addiction; and previous incarceration was associated with successful recovery from addiction. These findings suggest that, in settings such as Oxford House, levels of perceived social support among residents do not differ due to incarceration history; however, recovery homes similar to Oxford House may benefit previously incarcerated individuals in their recovery from addiction more so than individuals who have not been incarcerated in prison. (PsycINFO Database Record (c) 2015 APA, all rights reserved)
<b>Publication Type:</b>	Dissertation Abstract
<b>Subject Headings:</b>	<a href="#">*Addiction</a> <a href="#">*Incarceration</a> <a href="#">*Social Support</a> <a href="#">History</a> <a href="#">Social Networks</a> <a href="#">Stress</a>
<b>Source:</b>	PsycINFO

## 2. Mask making: Enhancing the self-esteem of adolescent males of African descent.

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<b>Citation:</b>	Dissertation Abstracts International: Section B: The Sciences and Engineering, 2015, vol./is. 75/8-B(E)(No Pagination Specified), 0419-4217 (2015)
<b>Author(s):</b>	Petteway, Linda Dianne Reeves
<b>Institution:</b>	Pacifica Graduate Inst., US
<b>Language:</b>	English
<b>Abstract:</b>	As males enter adolescence, they are faced with tremendous challenges at home, at school, and in personal relationships. Adolescent males are a high-risk population in our society. Adolescent males face high rates of addiction, violence, mental illness, and emotional neglect. For males of African descent, the problems are intensified. Males of African descent face remarkable challenges in all areas of their lives, especially in educational development. Beginning in kindergarten and continuing through college, many males of African descent experience stifling of their achievement, aspirations, and pride. Following a review of this investigator's evolutionary process within the educational system, this investigator was compelled to research personal mythology in relationship to the lost self and lost self-esteem of males of African descent. Self-esteem was examined as an effect (motivator) of one's personal mythology (belief about one's self) utilizing an art therapy intervention of mask making and personal narrative exploration. The purpose of this project was to document the effectiveness of art therapy, specifically mask making and personal myth narrative in enhancing self-esteem with a specific cultural group, specifically adolescent males of African descent in a community-based outpatient treatment center. A survey of the literature supports the notion that further investigation into self-esteem enhancement of males of African

descent, utilizing art therapy, specifically mask making as a treatment intervention, is warranted. This study addressed the following specific research questions, measured by pre- and posttests, utilizing the Coopersmith Self-Esteem Inventory: 1. To what extent does an art therapy intervention and personal myth development effect (i.e. modify, impact, or change) the self-perception profile of adolescent males of African descent? 2. To what extent does an art therapy intervention and personal myth effect (i.e. modify, impact, or change) the global self-worth of adolescent males of African descent? The study demonstrated that mask making and personal narrative development had a positive effect on self-perception and global self-esteem that were measured and evaluated by means of pretest and posttest. Enhanced self-worth was also evident based on the analysis of narratives composed by the subjects. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Adolescent Development](#)  
[\\*At Risk Populations](#)  
[\\*Blacks](#)  
[\\*Interpersonal Relationships](#)  
[Human Males](#)  
[Intervention](#)  
[Mental Disorders](#)  
[Self Esteem](#)

**Source:** PsycINFO

### 3. Gene-environment interactions in cortisol reactivity: Sex, genes, and adversity predict responses to psychosocial stress.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2015, vol./is. 75/8-B(E)(No Pagination Specified), 0419-4217 (2015)

**Author(s):** Reid, Mark W

**Institution:** U Oregon, US

**Language:** English

**Abstract:** Extreme variations in cortisol reactivity are associated with multiple psychological and physiological diseases. These variations may be explained by sex, by genetic vulnerabilities, and by exposure to either recent life stressors (severe life events or ongoing difficulties) or early life adversity (e.g., antipathy; neglect; or psychological, physical, or sexual abuse). To explore interactions among these variables, a subset of 20-22 years-old individuals (N = 373) recruited for an ongoing longitudinal cohort-sequential study of substance abuse risk factors were assessed. These individuals were interviewed about early childhood abuse and recent stressful life experiences. They were also genotyped for multiple polymorphisms within genes associated with attenuated or exaggerated cortisol reactivity (5-HTTLPR and rs25532 in SERT, rs4680 in COMT, rs5522 in MR gene NR3C2, rs110402 and rs1876831 in CRHR1, rs1799971 in OPRM1, and rs1800497 in ANKK1), participated in a laboratory social stress task, and provided salivary cortisol samples throughout the task. Results indicate that cortisol reactivity may be shaped by both early and recent life experiences and genetic vulnerabilities; most interactions between these variables differed depending on an individual's sex. Specifically, carriers of two copies of minor alleles of ANKK1, COMT, and CRHR1 displayed dysregulated cortisol that varied according to sex and early life experiences. Male minor allele carriers who experienced more severe physical abuse displayed attenuated reactivity, and males who were not severely abused displayed exaggerated responses. Female minor allele carriers displayed the opposite pattern - abused females displayed exaggerated reactivity. Carriers of major alleles did not show these patterns. Attenuated cortisol reactivity was also observed in all individuals who experienced sexual abuse or neglect, and elevated responses were observed in individuals carrying two copies of minor alleles in both SERT polymorphisms and OPRM1. Together, results inform a developmental model of cortisol dysregulation. Cortisol reactivity may present a useful

endophenotype for future studies of physiological and psychological disease processes and treatment outcomes. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Environmental Effects](#)  
[\\*Genes](#)  
[\\*Human Sex Differences](#)  
[\\*Hydrocortisone](#)  
[\\*Psychosocial Factors](#)  
[Drug Abuse](#)  
[Risk Factors](#)  
[Stress](#)

**Source:** PsycINFO

#### 4. Ventral tegmental area regulation of stress-induced reinstatement of cocaine-seeking behavior.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2015, vol./is. 75/8-B(E)(No Pagination Specified), 0419-4217 (2015)

**Author(s):** Blacktop, Jordan M

**Institution:** Marquette U., US

**Language:** English

**Abstract:** No FDA approved medications currently exist for the prevention of drug craving, drug seeking, and relapse to cocaine use. Stress is a major factor in causing relapse in cocaine dependent individuals. Cocaine use is positively correlated with stress-induced craving and relapse outcomes. Corticotropin-releasing factor (CRF) is a 41-amino acid neuropeptide that plays an important role in the stress response and in the reinstatement rodent model of stress-induced relapse. CRF is released during stress in brain regions associated with the effects of drugs of abuse, notably the ventral tegmental area (VTA). This dissertation addresses key unknown mechanisms behind drug-induced neuroplasticity and how that neuroplasticity gates the ability of stress to cause relapse. Chapter two reports that stress and intra-VTA CRF administration produces robust reinstatement in animals allowed extended long-access (LgA) but not short-access (ShA) cocaine self-administration. Moreover, LgA cocaine use increases susceptibility to stressor-induced relapse in part by augmenting CRF receptor 1 (CRF-R1) dependent regulation of VTA neurocircuitry. Chapter three characterizes VTA dopamine neuron activation under conditions where stress reinstates cocaine seeking. Dopamine neuron activation was significantly increased in ShA but not LgA rats. However, when examined across groups only in rats that display relapse in response to stress is a significant increase in dopamine neuron activation observed. This suggests that stress-induced reinstatement is associated with increased activation of VTA dopamine neurons. Lastly, chapter 4 addresses the necessity of VTA glutamate and GABA receptors in footshock and intra-VTA CRF dependent reinstatement of cocaine seeking. Intra-VTA administration of NMDA, AMPA, and GABAA receptor antagonists fail to block reinstatement. In contrast, GABAB receptor antagonism blocked reinstatement by both footshock and intra-VTA CRF suggesting GABA B activation is necessary for CRF actions in the VTA. The findings from this dissertation provide much needed insight into the neuroadaptations that occur in the VTA to regulate later stressor induced relapse in cocaine addicts. The hope is that these findings will help with the understanding and eventual long-term management of stressor-induced relapse in abstinent cocaine addicts. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Cocaine](#)  
[\\*Stress](#)  
[\\*Tegmentum](#)  
[\\*Drug Seeking](#)  
[\\*Reinstatement](#)  
[Craving](#)  
[Rats](#)



**Source:** PsycINFO

**5. Striatum morphometry is associated with cognitive control deficits and symptom severity in internet gaming disorder.**

**Citation:** Brain Imaging and Behavior, February 2015(No Pagination Specified), 1931-7557 (Feb 27, 2015)

**Author(s):** Cai, Chenxi; Yuan, Kai; Yin, Junsen; Feng, Dan; Bi, Yanzhi; Li, Yangding; Yu, Dahua; Jin, Chenwang; Qin, Wei; Tian, Jie

**Correspondence Address:** Yuan, Kai: School of Life Science and Technology, Xidian University, Xi'an, China, 710071, kyuan@xidian.edu.cn

**Institution:** School of Life Science and Technology, Xidian University, Xi'an, China; School of Life Science and Technology, Xidian University, Xi'an, China; School of Life Science and Technology, Xidian University, Xi'an, China; School of Life Science and Technology, Xidian University, Xi'an, China; School of Life Science and Technology, Xidian University, Xi'an, China; School of Life Science and Technology, Xidian University, Xi'an, China; Inner Mongolia Key Laboratory of Pattern Recognition and Intelligent Image Processing, School of Information Engineering, Inner Mongolia University of Science and Technology, Baotou, China; Department of Medical Imaging, The First Affiliated Hospital of Medical College, Xi'an Jiaotong University, Xi'an, China; School of Life Science and Technology, Xidian University, Xi'an, China; School of Life Science and Technology, Xidian University, Xi'an, China

**Abstract:** Internet gaming disorder (IGD), identified in the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-V) Section III as a condition warranting more clinical research, may be associated with impaired cognitive control. Previous IGD-related studies had revealed structural abnormalities in the prefrontal cortex, an important part of prefrontal-striatal circuits, which play critical roles in cognitive control. However, little is known about the relationship between the striatal nuclei (caudate, putamen, and nucleus accumbens) volumes and cognitive control deficit in individuals with IGD. Twenty-seven adolescents with IGD and 30 age-, gender- and education-matched healthy controls participated in this study. The volume differences of the striatum were assessed by measuring subcortical volume in FreeSurfer. Meanwhile, the Stroop task was used to detect cognitive control deficits. Correlation analysis was used to investigate the relationship between striatal volumes and performance in the Stroop task as well as severity in IGD. Relative to controls, the IGD committed more incongruent condition response errors during the Stroop task and showed increased volumes of dorsal striatum (caudate) and ventral striatum (nucleus accumbens). In addition, caudate volume was correlated with Stroop task performance and nucleus accumbens (NAc) volume was associated with the internet addiction test (IAT) score in the IGD group. The increased volumes of the right caudate and NAc and their association with behavioral characteristics (i.e., cognitive control and severity) in IGD were detected in the present study. Our findings suggest that the striatum may be implicated in the underlying pathophysiology of IGD. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Springer Science+Business Media New York; YEAR: 2015

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

**Subject Headings:**

**Source:** PsycINFO

**6. Abnormal gray matter volume and resting-state functional connectivity in former heroin-dependent individuals abstinent for multiple years.**

**Citation:** Addiction Biology, February 2015(No Pagination Specified), 1355-6215;1369-1600 (Feb 26, 2015)

**Author(s):** Wang, Lubin; Zou, Feng; Zhai, Tianye; Lei, Yu; Tan, Shuwen; Jin, Xiao; Ye, Enmao; Shao, Yongcong; Yang, Yihong; Yang, Zheng

**Abstract:** Abstract Previous studies have suggested that heroin addiction is associated with structural and functional brain abnormalities. However, it is largely unknown whether these characteristics of brain abnormalities would be persistent or restored after long periods of abstinence. Considering the very high rates of relapse, we hypothesized that there may exist some latent neural vulnerabilities in abstinent heroin users. In this study, structural and resting-state functional magnetic resonance imaging data were collected from 30 former heroin-dependent (FHD) subjects who were drug free for more than 3 years and 30 non-addicted control (CN) volunteers. Voxel-based morphometry was used to identify possible gray matter volume differences between the FHD and CN groups. Alterations in resting-state functional connectivity in FHD were examined using brain areas with gray matter deficits as seed regions. Significantly reduced gray matter volume was observed in FHD in an area surrounding the parieto-occipital sulcus, which included the precuneus and cuneus. Functional connectivity analyses revealed that the FHD subjects showed reduced positive correlation within the default mode network and visual network and decreased negative correlation between the default mode network, visual network and task positive network. Moreover, the altered functional connectivity was correlated with self-reported impulsivity scores in the FHD subjects. Our findings suggest that disruption of large-scale brain systems is present in former heroin users even after multi-year abstinence, which could serve as system-level neural underpinnings for behavioral dysfunctions associated with addiction. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Society for the Study of Addiction; YEAR: 2015

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

**Subject Headings:**

**Source:** PsycINFO

**Full Text:** Available from *Wiley* in [Addiction Biology](#)

#### 7. Hypothalamic neuropeptide signaling in alcohol addiction.

**Citation:** Progress in Neuro-Psychopharmacology & Biological Psychiatry, February 2015(No Pagination Specified), 0278-5846 (Feb 14, 2015)

**Author(s):** Barson, Jessica R; Leibowitz, Sarah F

**Abstract:** The hypothalamus is now known to regulate alcohol intake in addition to its established role in food intake, in part through neuromodulatory neurochemicals termed neuropeptides. Certain orexigenic neuropeptides act in the hypothalamus to promote alcohol drinking, although they affect different aspects of the drinking response. These neuropeptides, which include galanin, the endogenous opioid enkephalin, and orexin/hypocretin, appear to stimulate alcohol intake not only through mechanisms that promote food intake but also by enhancing reward and reinforcement from alcohol. Moreover, these neuropeptides participate in a positive feedback relationship with alcohol, whereby they are upregulated by alcohol intake to promote even further consumption. They contrast with other orexigenic neuropeptides, such as melanin-concentrating hormone and neuropeptide Y, which promote alcohol intake under limited circumstances, are not consistently stimulated by alcohol, and do not enhance reward. They also contrast with neuropeptides that can be anorexigenic, including the endogenous opioid dynorphin, corticotropin-releasing factor, and melanocortins, which act in the hypothalamus to inhibit alcohol drinking as well as reward and therefore counter the ingestive drive promoted by orexigenic neuropeptides. Thus, while multiple hypothalamic neuropeptides may work together to regulate different aspects of the alcohol drinking response, excessive signaling from orexigenic neuropeptides or inadequate signaling from anorexigenic neuropeptides can therefore allow alcohol drinking to become dysregulated. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

**Subject Headings:**

**Source:** PsycINFO

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

#### 8. Nicotinic receptors in non-human primates: Analysis of genetic and functional conservation with humans.

**Citation:** *Neuropharmacology*, February 2015(No Pagination Specified), 0028-3908 (Feb 7, 2015)

**Author(s):** Shorey-Kendrick, Lyndsey E; Ford, Matthew M; Allen, Daicia C; Kuryatov, Alexander; Lindstrom, Jon; Wilhelm, Larry; Grant, Kathleen A; Spindel, Eliot R

**Abstract:** Nicotinic acetylcholine receptors (nAChRs) are highly conserved between humans and non-human primates. Conservation exists at the level of genomic structure, protein structure and epigenetics. Overall homology of nAChRs at the protein level is 98% in macaques versus 89% in mice, which is highly relevant for evaluating subtype-specific ligands that have different affinities in humans versus rodents. In addition to conservation at the protein level, there is high conservation of genomic structure in terms of intron and exon size and placement of CpG sites that play a key role in epigenetic regulation. Analysis of single nucleotide polymorphisms (SNPs) shows that while the majority of SNPs are not conserved between humans and macaques, some functional polymorphisms are. Most significantly, cynomolgus monkeys express a similar 5 nAChR Asp398Asn polymorphism to the human 5 Asp398Asn polymorphism that has been linked to greater nicotine addiction and smoking related disease. Monkeys can be trained to readily self-administer nicotine, and in an initial study we have demonstrated that cynomolgus monkeys bearing the 5 D398N polymorphism show a reduced behavioral sensitivity to oral nicotine and tend to consume it in a different pattern when compared to wild-type monkeys. Thus the combination of highly homologous nAChR, higher cortical functions and capacity for complex training makes non-human primates a unique model to study in vivo functions of nicotinic receptors. In particular, primate studies on nicotine addiction and evaluation of therapies to prevent or overcome nicotine addiction are likely to be highly predictive of treatment outcomes in humans. This article is part of a Special Issue entitled 'Nicotinic Acetylcholine Receptor'. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

**Subject Headings:**

**Source:** PsycINFO

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

#### 9. Intrinsic membrane plasticity via increased persistent sodium conductance of cholinergic neurons in the rat laterodorsal tegmental nucleus contributes to cocaine-induced addictive behavior.

**Citation:** *European Journal of Neuroscience*, February 2015(No Pagination Specified), 0953-816X;1460-9568 (Feb 24, 2015)

**Author(s):** Kamii, Hironori; Kurosawa, Ryo; Taoka, Naofumi; Shinohara, Fumiya; Minami, Masabumi; Kaneda, Katsuyuki

**Abstract:** Abstract The laterodorsal tegmental nucleus (LDT) is a brainstem nucleus implicated in reward processing and is one of the main sources of cholinergic afferents to the ventral tegmental area (VTA). Neuroplasticity in this structure may affect the excitability of VTA dopamine neurons and mesocorticolimbic circuitry. Here, we provide evidence that cocaine-induced intrinsic membrane plasticity in LDT cholinergic neurons is involved in addictive behaviors. After repeated experimenter-delivered cocaine exposure, ex vivo whole-cell recordings obtained from LDT cholinergic neurons revealed an induction of intrinsic membrane plasticity in regular- but not burst-type neurons, resulting in increased firing activity. Pharmacological examinations showed that increased riluzole-sensitive persistent sodium currents, but not changes in Ca<sup>2+</sup>-activated BK, SK or voltage-dependent A-type potassium conductance, mediated this plasticity. In addition, bilateral microinjection of riluzole into the LDT immediately before the test session in a cocaine-induced conditioned place preference (CPP) paradigm inhibited the expression of

cocaine-induced CPP. These findings suggest that intrinsic membrane plasticity in LDT cholinergic neurons is causally involved in the development of cocaine-induced addictive behaviors. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Federation of European Neuroscience Societies and John Wiley & Sons Ltd; YEAR: 2015

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

**Subject Headings:**

**Source:** PsycINFO

**Full Text:** Available from *Wiley* in [European Journal of Neuroscience](#)

#### 10. Ethanol and corticotropin releasing factor receptor modulation of central amygdala neurocircuitry: An update and future directions.

**Citation:** Alcohol, January 2015(No Pagination Specified), 0741-8329 (Jan 29, 2015)

**Author(s):** Silberman, Yuval; Winder, Danny G

**Abstract:** The central amygdala is a critical brain region for many aspects of alcohol dependence. Much of the work examining the mechanisms by which the central amygdala mediates the development of alcohol dependence has focused on the interaction of acute and chronic ethanol with central amygdala corticotropin releasing factor signaling. This work has led to a great deal of success in furthering the general understanding of central amygdala neurocircuitry and its role in alcohol dependence. Much of this work has primarily focused on the hypothesis that ethanol utilizes endogenous corticotropin releasing factor signaling to upregulate inhibitory GABAergic transmission in the central amygdala. Work that is more recent suggests that corticotropin releasing factor also plays an important role in mediating anxiety-like behaviors via the enhancement of central amygdala glutamatergic transmission, implying that ethanol/corticotropin releasing factor interactions may modulate excitatory neurotransmission in this brain region. In addition, a number of studies utilizing optogenetic strategies or transgenic mouse lines have begun to examine specific central amygdala neurocircuit dynamics and neuronal subpopulations to better understand overall central amygdala neurocircuitry and the role of neuronal subtypes in mediating anxiety-like behaviors. This review will provide a brief update on this literature and describe some potential future directions that may be important for the development of better treatments for alcohol addiction. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

**Subject Headings:**

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in [Alcohol](#)  
Available from *ProQuest* in [Alcohol](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

#### 11. The role of twelve-step-related spirituality in addiction recovery.

**Citation:** Journal of Religion and Health, February 2015(No Pagination Specified), 0022-4197;1573-6571 (Feb 21, 2015)

**Author(s):** Dermatis, Helen; Galanter, Marc

**Correspondence Address:** Dermatis, Helen: Division of Alcoholism and Drug Abuse, Department of Psychiatry, The Center for Spirituality and Healthcare, NYU School of Medicine, 550 First Avenue, New York, NY, US, 10016, hd7@nyu.edu

**Institution:** Division of Alcoholism and Drug Abuse, Department of Psychiatry, The Center for Spirituality and Healthcare, NYU School of Medicine, New York, NY, US; Division of Alcoholism and Drug Abuse, Department of Psychiatry, The Center for Spirituality and Healthcare, NYU School of Medicine, New York, NY, US

**Abstract:** This paper reviews empirical studies conducted on the role of spirituality and religiosity (S/R) characteristics in 12-step recovery among program members followed up after substance abuse treatment and those assessed independent of formal treatment. Aspects of spiritual functioning that change in relation to program participation and those S/R characteristics that were found to mediate the association between program involvement and drinking-related outcomes are discussed. In addition, a review is provided of 12-step program studies investigating S/R-related predictors of clinical outcomes relevant to risk of relapse among members in long-term recovery. To further examine the role of S/R characteristics in recovery, a study was conducted on long-term AA members to assess the relationship of S/R characteristics and AA program involvement to craving for alcohol and emotional distress after controlling for relevant demographic variables. Feeling God's presence daily, believing in a higher power as a universal spirit, and serving as an AA sponsor were all predictive of positive outcomes. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Springer Science+Business Media New York; YEAR: 2015

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

**Subject Headings:**

**Source:** PsycINFO

## 12. Predicting use of assistance when quitting: A longitudinal study of the role of quitting beliefs.

**Citation:** Drug and Alcohol Dependence, February 2015(No Pagination Specified), 0376-8716 (Feb 12, 2015)

**Author(s):** Myers, Mark G; Strong, David R; Linke, Sarah E; Hofstetter, C. Richard; Al-Delaimy, Wael K

**Abstract:** BACKGROUND: A growing literature addresses the need to reduce cigarette smoking prevalence by increasing the use of assistance when quitting. A key focus is to identify strategies for enhancing adoption of effective interventions in order to increase utilization of evidence-based treatments. PURPOSE: To examine the effect of beliefs regarding ability to quit on utilization of assistance for smoking cessation. A mediation model was hypothesized whereby the relationship between smoking and use of assistance is influenced by beliefs in ability to quit. METHODS: The present study includes 474 of 1000 respondents to baseline and follow-up California Smokers Cohort surveys conducted from 2011 to 2013. Included were baseline smokers who reported a 24-h quit attempt at follow-up. Baseline variables were used to predict use of assistance when quitting. RESULTS: The hypothesized model was tested using a product of coefficients method, controlling for demographics. Greater heaviness of smoking and lower belief in ability to quit were significantly related to use of assistance. Quitting beliefs significantly mediated the relationship between nicotine dependence and use of assistance. CONCLUSIONS: The present data support a mechanism whereby the effect of smoking rate on treatment utilization is mediated by beliefs in ability to quit. Greater belief in one's ability to quit may represent an obstacle to treatment utilization by reducing the likelihood of successful cessation. The present findings suggest the value of targeted messages from health care providers that normalize the need for assistance when attempting to change an addictive behavior and emphasize the difficulty of quitting without assistance. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

**Subject Headings:**

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)

## 13. Correction to Wery et al. (2014).

**Citation:** Canadian Psychology/Psychologie canadienne, February 2015, vol./is. 56/1(87), 0708-5591;1878-7304 (Feb 2015)

**Author(s):** No authorship indicated

**Language:** English

**Abstract:** Reports an error in "Conceptualisation, evaluation et traitement de la dependance cybersexuelle : Une revue de la litterature" by Aline Wery, Laurent Karila, Pascal De Sutter and Joel Billieux (Canadian Psychology/Psychologie canadienne, 2014[Nov], Vol 55[4], 266-281). There was an error in the author note. The first paragraph should have read "Aline Wery, Laboratoire de psychopathologie experimentale, Institut de recherche en sciences psychologiques, Universite catholique de Louvain; Laurent Karila, Hopital universitaire Paul-Brousse, Villejuif, France; Pascal De Sutter, Ecole de Sexologie et des Sciences de la famille, Institut de recherche en sciences psychologiques, Universite catholique de Louvain Joel Billieux, Laboratoire de psychopathologie experimentale, Universite catholique de Louvain." (The following abstract of the original article appeared in record 2014-50698-005.) The purpose of this article is to propose a critical review of current knowledge concerning cybersexual dependence (definition, epidemiology, evaluation and treatment). There is, in fact, a lack of consensus concerning the conceptualization of this disorder. This lack of conceptual clarity is largely due to the existence of a multitude of definitions of the disorder, a significant variety of sexual behaviours concerned and of symptomatologies, and because of methodological problems in the existing research (samples and evaluation tools that are strongly heterogeneous in different studies). Given the context, this article seeks to clarify the state of knowledge concerning cybersexual dependence. We will also make an inventory of empirically validated treatment methods for sexual and cybersexual dependence and we will propose approaches for future research. A non-systematic narrative review was conducted to examine and summarize the English and French literature dealing with cybersexual dependence. That review was carried out using a keyword search for sexual and cybersexual dependence in the data bases of PsycINFO, ISI Web of Science and Francis. Particular attention was paid to articles evaluating risk factors involved in sexual dependence, as well as articles that suggest treatment approaches for the disorder. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

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

**Subject Headings:** [\\*Evaluation](#)  
[\\*Hypersexuality](#)  
[\\*Internet Addiction](#)  
[\\*Treatment](#)  
[Epidemiology](#)  
[Risk Factors](#)

**Source:** PsycINFO

**Full Text:** Available from *ProQuest* in [Canadian Psychology](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

#### 14. The role of lifestyle in perpetuating substance use disorder: The Lifestyle Balance Model.

**Citation:** Substance Abuse Treatment, Prevention, and Policy, January 2015, vol./is. 10/, 1747-597X (Jan 17, 2015)

**Author(s):** Davies, Glyn; Elison, Sarah; Ward, Jonathan; Laudet, Alexandre

**Correspondence Address:** Elison, Sarah: Breaking Free Group, 274 Deansgate, Manchester, United Kingdom, M3 4JB, selison@breakingfreegroup.com

**Institution:** Breaking Free Group, Manchester, United Kingdom; Breaking Free Group, Manchester, United Kingdom; Breaking Free Group, Manchester, United Kingdom; Centre for the Study of Addictions and Recovery, National Development and Research Institutes, New York, NY, US

**Language:** English

**Abstract:** Conceptualizing aetiology underpinning an individual's substance use disorder (SUD) not only facilitates insight and understanding, but also serves to identify targets for treatment

and aid practitioners in selecting the most appropriate interventions. There is now a wealth of literature on aetiology and treatment approaches, and in more recent years, also literature to support the concept of 'recovery' from a condition which was previously thought of as a chronic, relapsing condition. The burgeoning literature around research into recovery is revealing how recovery can best be defined and what factors might be associated with recovery from SUD. To add further to this growing body of literature, a new six-domain, explanatory biopsychosocial model of substance dependence and recovery, the Lifestyle Balance Model (LBM) is proposed. Based on research findings and theory reported in the literature, the LBM is a generic model depicting six domains of biopsychosocial functioning and includes within it the role of lifestyle. The LBM has been constructed as a domain model, allowing conceptualisation of the relationships between the six domain areas that perpetuate dependence and may also be associated with recovery from SUD, providing service users and clinicians with a tool for the delivery of case formulation and identification of target areas for intervention. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Davies et al.; licensee BioMed Central.; YEAR: 2015

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Lifestyle](#)  
[\\*Models](#)  
[Etiology](#)  
[Intervention](#)  
[Treatment](#)

**Source:** PsycINFO

**Full Text:** 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](#)

#### 15. Review of Group cognitive therapy for addictions.

**Citation:** Behavioural and Cognitive Psychotherapy, March 2015, vol./is. 43/2(253-254), 1352-4658;1469-1833 (Mar 2015)

**Author(s):** Parker, Sam

**Language:** English

**Abstract:** Reviews the book, Group Cognitive Therapy for Addictions by Amy Wenzel, Bruce S. Liese, Aaron T. Beck, and Dara G. Friedman-Wheeler (see record 2012-17305-000). This book is well structured and provides readers with all the necessary tools for implementing the Cognitive Therapy Addictions Group (CTAG) treatment. It is divided into three clearly organized sections, is well signposted and gives useful introductions and summaries for each section and chapter. The book is unique in its outlining of an evidence-based, cost effective protocol for supporting clients who are struggling with the consequences of out-of control addictive behaviour. The concept presented is one of a continuously running, open group where participants can come and go but benefit from any one individual session. The idea is to create an accessible group, without long waiting times; the need to assemble a homogenous group of clients or to impose a requirement for consecutive or compulsory attendance on clients who are struggling in their lives. Overall, the book's main strength is the way it outlines the CTAG protocol; it gives clear guidance and will be especially useful to therapists commencing in group work and experienced therapists commencing CTAG work. The first section of the book could have been shorter with less background information on the prevalence of addiction, therefore giving more space to focus on the rationale for the CTAG group and exploring the underlying biochemistry and psychological aetiology of addictions. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Cognitive Therapy](#)  
[\\*Group Psychotherapy](#)

**Source:** PsycINFO

**16. The bright side of self-discontinuity: Feeling disconnected with the past self increases readiness to change addictive behaviors (via nostalgia).**

**Citation:** Social Psychological and Personality Science, March 2015, vol./is. 6/2(229-237), 1948-5506;1948-5514 (Mar 2015)

**Author(s):** Kim, Hyoun S. (Andrew); Wohl, Michael J. A

**Correspondence Address:** Wohl, Michael J. A.: Department of Psychology, Carleton University, 1125 Colonel By Drive, B550 Loeb Building, Ottawa, ON, Canada, K1S 5B6, michael\_wohl@carleton.ca

**Institution:** Department of Psychology, Carleton University, Ottawa, ON, Canada; Department of Psychology, Carleton University, Ottawa, ON, Canada

**Language:** English

**Abstract:** Across three studies, we tested the possible benefits of self-discontinuity among people engaging in addictive behaviors. Specially, we examined self-discontinuity as a motivator of readiness to change. Moreover, nostalgia (i.e., longing for the past "nonaddicted" self) was assessed as a mediator of this effect. To this end, self-discontinuity was both measured (Study 1) and manipulated (Studies 2 and 3) among a sample of problem gamblers (Studies 1 and 2) and problem drinkers (Study 3). As predicted, in Studies 1 and 2, high levels of self-discontinuity resulted in greater readiness to change to the extent that problem gamblers felt nostalgic for the preaddicted self. Study 3 extended the generalizability of the mediation model by replicating these findings with a sample of problem drinkers. Results suggest that highlighting a sense of self-discontinuity among people engaging in addictive behaviors may be an important catalyst in moving people from addiction to action. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Pathological Gambling](#)  
[\\*Readiness to Change](#)  
[\\*Nostalgia](#)  
[Motivation](#)

**Source:** PsycINFO

**17. Shoplifting of everyday products that serve illicit drug uses.**

**Citation:** Journal of Research in Crime and Delinquency, March 2015, vol./is. 52/2(245-269), 0022-4278;1552-731X (Mar 2015)

**Author(s):** Smith, Brian T; Clarke, Ronald V

**Correspondence Address:** Smith, Brian T.: Department of Criminal Justice, University of New Haven, 300 Boston Post Road, West Haven, CT, US, 06516, bsmith@newhaven.edu

**Institution:** Department of Criminal Justice, University of New Haven, West Haven, CT, US; School of Criminal Justice, Rutgers University, Newark, NJ, US

**Language:** English

**Abstract:** Objectives: Some everyday products, particularly over-the-counter drugs, which are sold in supermarkets and other stores can produce a "high" or serve other roles in illicit drug



use. Informed by CRAVED, a model of theft choices derived from crime opportunity theory, this study explores whether products with known roles in drug use are shoplifted at higher rates than other products. Methods: Products that serve a variety of roles in illicit drug use were identified through a review of the medical literature and web sources. Data from 204 supermarkets yielded theft rates for 551 of these products, which were compared with theft rates for 7,887 products sold by the same stores without known roles in drug abuse. Results: Theft rates of products with roles in drug use were significantly higher than theft rates of other products. Conclusions: Knowing which products are shoplifted can provide only limited information about the shoplifter's "craft." In this case, more information was needed about the security given to products by the stores, which has broader implications for CRAVED. Despite this, the findings about the higher theft rates of products with known drug roles could assist retailers, manufacturers, and responsible government agencies to secure these products from theft. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Crime](#)  
[\\*Drug Abuse](#)  
[\\*Product Design](#)  
[\\*Shoplifting](#)  
[Marketing](#)  
[Theories](#)

**Source:** PsycINFO

#### 18. Personal network recovery enablers and relapse risks for women with substance dependence.

**Citation:** Qualitative Health Research, March 2015, vol./is. 25/3(371-385), 1049-7323;1552-7557 (Mar 2015)

**Author(s):** Brown, Suzanne; Tracy, Elizabeth M; Jun, MinKyoung; Park, Hyunyoung; Min, Meeyoung O

**Correspondence Address:** Brown, Suzanne: School of Social Work, Wayne State University, 4756 Cass Avenue, Detroit, MI, US, 48202, [suzanne.brown@wayne.edu](mailto:suzanne.brown@wayne.edu)

**Institution:** Wayne State University, School of Social Work, Detroit, MI, US; Jack, Joseph and Morton Mandel School of Applied Social Sciences, Case Western Reserve University, Cleveland, OH, US; Division of Policy Research, Gyeonggido Family and Women's Research Institute, Suwon, South Korea; Jack, Joseph and Morton Mandel School of Applied Social Sciences, Case Western Reserve University, Cleveland, OH, US; Jack, Joseph and Morton Mandel School of Applied Social Sciences, Case Western Reserve University, Cleveland, OH, US

**Language:** English

**Abstract:** We examined the experiences of women in treatment for substance dependence and their treatment providers about personal networks and recovery. We conducted six focus groups at three women's intensive substance abuse treatment programs. Four coders used thematic analysis to guide the data coding and an iterative process to identify major themes. Coders identified social network characteristics that enabled and impeded recovery and a reciprocal relationship between internal states, relationship management, and recovery. Although women described adding individuals to their networks, they also described managing existing relationships through distancing from or isolating some members to diminish their negative impact on recovery. Treatment providers identified similar themes but focused more on contextual barriers than the women. The focus of interventions with this population should be on both internal barriers to personal network change such as mistrust and fear, and helping women develop skills for managing enduring network relationships. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** \*Drug Abuse  
\*Recovery (Disorders)  
\*Relapse Prevention  
\*Social Support  
Addiction  
Health  
Human Females  
Treatment  
Interpersonal Relationships

**Source:** PsycINFO

**Full Text:** Available from *Highwire Press* in *Qualitative Health Research*

#### 19. Neural processing of reward in adolescent rodents.

**Citation:** Developmental Cognitive Neuroscience, February 2015, vol./is. 11/(145-154), 1878-9293;1878-9307 (Feb 2015)

**Author(s):** Simon, Nicholas W; Moghaddam, Bitá

**Correspondence Address:** Moghaddam, Bitá: University of Pittsburgh, Department of Neuroscience, A210 Langley Hall, Pittsburgh, PA, US, 15260, bita@pitt.edu

**Institution:** University of Pittsburgh, Department of Neuroscience, Pittsburgh, PA, US; University of Pittsburgh, Department of Neuroscience, Pittsburgh, PA, US

**Language:** English

**Abstract:** Immaturities in adolescent reward processing are thought to contribute to poor decision making and increased susceptibility to develop addictive and psychiatric disorders. Very little is known; however, about how the adolescent brain processes reward. The current mechanistic theories of reward processing are derived from adult models. Here we review recent research focused on understanding of how the adolescent brain responds to rewards and reward-associated events. A critical aspect of this work is that age-related differences are evident in neuronal processing of reward-related events across multiple brain regions even when adolescent rats demonstrate behavior similar to adults. These include differences in reward processing between adolescent and adult rats in orbitofrontal cortex and dorsal striatum. Surprisingly, minimal age related differences are observed in ventral striatum, which has been a focal point of developmental studies. We go on to discuss the implications of these differences for behavioral traits affected in adolescence, such as impulsivity, risk-taking, and behavioral flexibility. Collectively, this work suggests that reward-evoked neural activity differs as a function of age and that regions such as the dorsal striatum that are not traditionally associated with affective processing in adults may be critical for reward processing and psychiatric vulnerability in adolescents. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: Published by Elsevier Ltd. This is an open access article under the CC BY-NC-ND license (<http://creativecommons.org/licenses/by-nc-nd/3.0/>).; HOLDER: The Authors; YEAR: 2014

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

**Subject Headings:** \*Decision Making  
\*Neural Networks  
\*Rewards  
\*Striatum  
Mental Disorders  
Rats  
Rodents

**Source:** PsycINFO

#### 20. Saguenay Youth Study: A multi-generational approach to studying virtual trajectories of the brain and cardio-metabolic health.

**Citation:** Developmental Cognitive Neuroscience, February 2015, vol./is. 11/(129-144), 1878-9293;1878-9307 (Feb 2015)

**Author(s):** Paus, T; Pausova, Z; Abrahamowicz, M; Gaudet, D; Leonard, G; Pike, G. B; Richer, L

**Correspondence Address:** Paus, T., tpaus@research.baycrest.org

**Institution:** Rotman Research Institute, University of Toronto, Toronto, ON, Canada; Hospital for Sick Children, University of Toronto, Toronto, ON, Canada; McGill University Health Centre, McGill University, Montreal, PQ, Canada; Community Genomic Medicine Centre, Department of Medicine, Universite de Montreal, Chicoutimi, PQ, Canada; Montreal Neurological Institute, McGill University, Montreal, PQ, Canada; Hotchkiss Brain Institute, University of Calgary, Calgary, AB, Canada; Department of Health Sciences, University of Quebec in Chicoutimi, Chicoutimi, PQ, Canada

**Language:** English

**Abstract:** This paper provides an overview of the Saguenay Youth Study (SYS) and its parental arm. The overarching goal of this effort is to develop trans-generational models of developmental cascades contributing to the emergence of common chronic disorders, such as depression, addictions, dementia and cardio-metabolic diseases. Over the past 10 years, we have acquired detailed brain and cardio-metabolic phenotypes, and genome-wide genotypes, in 1029 adolescents recruited in a population with a known genetic founder effect. At present, we are extending this dataset to acquire comparable phenotypes and genotypes in the biological parents of these individuals. After providing conceptual background for this work (transactions across time, systems and organs), we describe briefly the tools employed in the adolescent arm of this cohort and highlight some of the initial accomplishments. We then outline in detail the phenotyping protocol used to acquire comparable data in the parents. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: Published by Elsevier Ltd. This is an open access article under the CC BY license (<http://creativecommons.org/licenses/by/3.0/>); HOLDER: The Authors; YEAR: 2014

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

**Subject Headings:** [\\*Adolescent Development](#)  
[\\*Brain Development](#)  
[\\*Mental Health](#)  
[Addiction](#)  
[Functional Magnetic Resonance Imaging](#)

**Source:** PsycINFO

### **21. PTSD symptoms and suicide ideation: Testing the conditional indirect effects of thwarted interpersonal needs and using substances to cope.**

**Citation:** Personality and Individual Differences, April 2015, vol./is. 77/(167-172), 0191-8869 (Apr 2015)

**Author(s):** Poindexter, Erin K; Mitchell, Sean M; Jahn, Danielle R; Smith, Phillip N; Hirsch, Jameson K; Cukrowicz, Kelly C

**Correspondence Address:** Cukrowicz, Kelly C.: Department of Psychological Sciences, Texas Tech University, Mail Stop 42051, Lubbock, TX, US, 79409-2051, [kelly.cukrowicz@ttu.edu](mailto:kelly.cukrowicz@ttu.edu)

**Institution:** Texas Tech University, Lubbock, TX, US; Texas Tech University, Lubbock, TX, US; Capitol Health Care Network (VISN 5) Mental Illness Research, Education, and Clinical Center, VA Maryland Health Care System, University of Maryland School of Medicine, Baltimore, MD, US; University of South Alabama, Mobile, AL, US; East Tennessee State University, Johnson City, TN, US; Texas Tech University, Lubbock, TX, US

**Language:** English

**Abstract:** Posttraumatic stress disorder (PTSD) symptoms and substance use have been associated with increased suicide ideation, but have rarely been examined within a larger theoretical context of suicide risk. The interpersonal theory of suicide posits that feeling

disconnected from others (i.e., thwarted belongingness) and feeling like a burden on others (i.e., perceived burdensomeness) are associated with increased suicide ideation. We hypothesized that perceived burdensomeness and thwarted belongingness would mediate the relation between PTSD symptoms and suicide ideation, and that using substances to cope would moderate these relations. Participants were 254 college students reporting exposure to potentially traumatic experiences. Findings from a moderated mediation analysis indicated that perceived burdensomeness, but not thwarted belongingness, mediated the relation between PTSD symptoms and suicide ideation, and using substances to cope moderated this relation. Therapeutic interventions aimed at reducing suicide ideation might benefit from decreasing perceived burdensomeness and the use of substances to cope. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Elsevier Ltd.; YEAR: 2015

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

**Subject Headings:** [\\*Drug Usage](#)  
[\\*Posttraumatic Stress Disorder](#)  
[\\*Interpersonal Relationships](#)  
[Ideation](#)  
[Suicide](#)  
[Symptoms](#)

**Source:** PsycINFO

## 22. Anticipatory reward processing in addicted populations: A focus on the monetary incentive delay task.

**Citation:** Biological Psychiatry, March 2015, vol./is. 77/5(434-444), 0006-3223 (Mar 1, 2015)

**Author(s):** Balodis, Iris M; Potenza, Marc N

**Correspondence Address:** Balodis, Iris M.: Yale University School of Medicine, 1 Church Street, Rm 731, New Haven, CT, US, 06519, iris.balodis@yale.edu

**Institution:** Department of Psychiatry, Yale University School of Medicine, New Haven, CT, US;  
 Department of Psychiatry, Yale University School of Medicine, New Haven, CT, US

**Language:** English

**Abstract:** Advances in brain imaging techniques have allowed neurobiological research to temporally analyze signals coding for the anticipation of reward. In addicted populations, both hyporesponsiveness and hyperresponsiveness of brain regions (e.g., ventral striatum) implicated in drug effects and reward system processing have been reported during anticipation of generalized reward. We discuss the current state of knowledge of reward processing in addictive disorders from a widely used and validated task: the monetary incentive delay task. Only studies applying the monetary incentive delay task in addicted and at-risk adult populations are reviewed, with a focus on anticipatory processing and striatal regions activated during task performance as well as the relationship of these regions with individual difference (e.g., impulsivity) and treatment outcome variables. We further review drug influences in challenge studies as a means to examine acute influences on reward processing in abstinent, recreationally using, and addicted populations. Generalized reward processing in addicted and at-risk populations is often characterized by divergent anticipatory signaling in the ventral striatum. Although methodologic and task variations may underlie some discrepant findings, anticipatory signaling in the ventral striatum may also be influenced by smoking status, drug metabolites, and treatment status in addicted populations. Divergent results across abstinent, recreationally using, and addicted populations demonstrate complexities in interpreting findings. Future studies would benefit from focusing on characterizing how impulsivity and other addiction-related features relate to anticipatory striatal signaling over time. Additionally, identifying how anticipatory signals recover or adjust after protracted abstinence will be important in understanding recovery processes. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Society of Biological Psychiatry; YEAR: 2015

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

**Subject Headings:** [\\*Addiction](#)  
[\\*At Risk Populations](#)  
[\\*Monetary Incentives](#)  
[\\*Neurobiology](#)  
[\\*Treatment Outcomes](#)  
[Amygdala](#)  
[Rewards](#)

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in [Biological Psychiatry](#)

### 23. Vesicular monoamine transporter 2 loss in human cocaine abusers confirmed in nonhuman primate brain.

**Citation:** Biological Psychiatry, March 2015, vol./is. 77/5(421-422), 0006-3223 (Mar 1, 2015)

**Author(s):** Madras, Bertha K

**Correspondence Address:** Madras, Bertha K.: McLean Hospital, Division of Alcohol and Drug Abuse, Oaks #342, 115 Mill Street, Belmont, MA, US, 02478, bertha\_madras@hms.harvard.edu

**Institution:** Harvard Medical School, Boston, MA, US

**Language:** English

**Abstract:** Comments on an article by Rajesh Narendran et al. (see record 2012-13164-012). The imaging study by Narendran et al. offers a plausible root cause for blunted dopamine release. Brain striatum of nonhuman primates self-administering cocaine ( 690 mg) over the course of 16 months revealed a down regulation of VMAT2, a key dopamine regulatory protein. The study conceivably highlights a critical role of the VMAT2 protein in reducing dopamine release in individuals who abuse cocaine and a new therapeutic target for treating cocaine use disorders. The study by Narendran et al. replicates the findings in nonhuman primates self-administering cocaine over a prolonged period, with consumption levels even lower than levels self-reported by human subjects. By using nonhuman primates that self-administered cocaine exclusively and accurately monitoring cocaine consumption, the study by Narendran et al. circumvents confounders that affect cross-sectional human study designs. This well-designed study in nonhuman primates by Narendran et al., which simulated human patterns of cocaine use and total consumption, revealed reductions in VMAT2 protein comparable to reductions found in human subjects. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Country of Publication:** HOLDER: Society of Biological Psychiatry; YEAR: 2015

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

**Subject Headings:** [\\*Amphetamine](#)  
[\\*Cocaine](#)  
[\\*Dopamine](#)  
[\\*Drug Abuse](#)  
[\\*Striatum](#)  
[Catecholamines](#)

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in [Biological Psychiatry](#)

### 24. Probing psychiatric symptoms with the monetary incentive delay task.

**Citation:** Biological Psychiatry, March 2015, vol./is. 77/5(418-420), 0006-3223 (Mar 1, 2015)

**Author(s):** Knutson, Brian; Heinz, Andreas

**Correspondence Address:** Knutson, Brian: Department of Psychology, Stanford University, Bldg. 420, Jordan Hall, Stanford, CA, US, 94305, knutson@psych.stanford.edu

**Institution:** Department of Psychology, Stanford University, Stanford, CA, US; Department of Psychiatry, Charite-Universitätsmedizin Berlin, Berlin, Germany

**Language:** English

**Abstract:** Comments on an article by Iris M. Balodis and Marc N. Potenza (see record 2015-05364-009). Balodis and Potenza have provided a comprehensive and nuanced review of the use of the monetary incentive delay (MID) task to probe symptoms related to addiction. In this commentary, we briefly reflect on the history of the MID task, situate these findings within the broader context of other disorders, and speculate about implications for research and practice. Research on neurophenotypic probes continues to hold great promise, including physiological studies that illuminate underlying neural contributions to neuroimaging signals (e.g., dopaminergic contributions to NAcc activity on functional magnetic resonance imaging), longitudinal studies that use probes to disentangle psychiatric cause from consequence (e.g., whether affective traits confer vulnerability to addiction or the reverse), and clinical studies that use probes to predict outcomes and guide therapeutic treatment. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Country of Publication:** HOLDER: Society of Biological Psychiatry; YEAR: 2015

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

**Subject Headings:** [\\*Addiction](#)  
[\\*At Risk Populations](#)  
[\\*Monetary Incentives](#)  
[\\*Neurobiology](#)  
[\\*Treatment Outcomes](#)  
[Amygdala](#)  
[Rewards](#)

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in [Biological Psychiatry](#)

## 25. Idiot's guides: Cognitive behavioral therapy.

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**Citation:** Idiot's guides: Cognitive behavioral therapy., 2014 (2014)

**Author(s):** Albin, Jayme; Bailey, Eileen

**Institution:** Private Practice, New York City, NY, US

**Language:** English

**Abstract:** (from the cover) You have the ability to change your thinking and control your actions from the inside out. Whether you have an anxiety disorder or OCD, you struggle with diet or substance abuse, or you're just unhappy with the results you're getting in life, cognitive behavioral therapy can teach you how to think and act more constructively. In this helpful guide, you get: Powerful tools to help identify and address self-defeating patterns; Effective techniques for coping with anger issues, depression, and anxiety; Insightful tips on using meditation, visualization, and relaxation to move you closer to your goals; Expert advice on dealing with stress and setbacks-and staying focused on your goals and; Helpful exercises for developing a realistic but positive attitude. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Authored Book

**Subject Headings:** [\\*Cognitive Behavior Therapy](#)  
[\\*Cognitive Therapy](#)  
[\\*Major Depression](#)  
[\\*Thinking](#)  
[Anger Control](#)  
[Anxiety Disorders](#)  
[Attitudes](#)  
[Diets](#)  
[Drug Abuse](#)  
[Obsessive Compulsive Disorder](#)

**Source:** PsycINFO

**26. Self-cannibalism (autosarcophagy) in psychosis: A case report.**

- Citation:** Journal of Nervous and Mental Disease, February 2015, vol./is. 203/2(152-153), 0022-3018;1539-736X (Feb 2015)
- Author(s):** Libbon, Randi; Hamalian, Gareen; Yager, Joel
- Correspondence Address:** Libbon, Randi: Department of Psychiatry, University of Colorado School of Medicine, 13001 East 17th Place, Building 500, Room E2322, Mail stop F546, Aurora, CO, US, 80045, randilibbon@gmail.com
- Institution:** Department of Psychiatry, University of Colorado School of Medicine, Aurora, CO, US; Department of Psychiatry, University of Colorado School of Medicine, Aurora, CO, US; Department of Psychiatry, University of Colorado School of Medicine, Aurora, CO, US
- Language:** English
- Abstract:** Only nine previous cases of self-or auto-cannibalism (autosarcophagy) have previously been reported in the literature. Here, we report a 29-year-old man with psychosis and a history of polysubstance use who presented after his second attempt to self-cannibalize. This case raises questions about the underlying causes and dynamics of self-cannibalism in psychiatric illness and its relation to other types of self-harm behavior. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
- Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Wolters Kluwer Health, Inc.; YEAR: 2015
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Cannibalism](#)  
[\\*Drug Abuse](#)  
[\\*Mental Disorders](#)  
[\\*Psychosis](#)  
[\\*Self Injurious Behavior](#)
- Source:** PsycINFO
- Full Text:** Available from *Ovid* in [Journal of Nervous and Mental Disease](#)

**27. A quantitative review of cognitive functioning in homeless adults.**

- Citation:** Journal of Nervous and Mental Disease, February 2015, vol./is. 203/2(126-131), 0022-3018;1539-736X (Feb 2015)
- Author(s):** Depp, Colin A; Vella, Lea; Orff, Henry J; Twamley, Elizabeth W
- Correspondence Address:** Depp, Colin A.: Department of Psychiatry, University of California, 9500 Gilman Drive, La Jolla, CA, US, 92093-0664, cdepp@ucsd.edu
- Institution:** Department of Psychiatry, University of California, San Diego, CA, US; San Diego State University, San Diego, CA, US; Department of Psychiatry, University of California, San Diego, CA, US; Department of Psychiatry, University of California, San Diego, CA, US
- Language:** English
- Abstract:** Homeless people experience elevated rates of risk factors for cognitive impairment. We reviewed available peer-reviewed studies reporting data from objective measures of cognition in samples identified as homeless. Pooled sample-weighted estimates of global cognitive screening measures, full-scale intelligence quotient (IQ), and premorbid IQ were calculated, in addition to pooled sample characteristics, to understand the representativeness of available studies. A total of 24 unique studies were identified, with 2969 subjects. The pooled estimate for the frequency of cognitive impairment was 25%, and the mean full-scale IQ score was 85, 1 standard deviation below the mean of the normal population. Cognitive impairment was found to be common among homeless adults and may be a transdiagnostic problem that impedes rehabilitative efforts in this population. Comparatively little data are available about cognition in homeless women and unsheltered persons. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
- Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Wolters Kluwer Health, Inc.; YEAR: 2015

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

**Subject Headings:** [\\*At Risk Populations](#)  
[\\*Cognitive Impairment](#)  
[\\*Homeless](#)  
[\\*Mental Disorders](#)  
[\\*Risk Factors](#)  
[Cognitive Ability](#)  
[Drug Abuse](#)

**Source:** PsycINFO

**Full Text:** Available from *Ovid* in *Journal of Nervous and Mental Disease*

## 28. Subjective response to nicotine by menstrual phase.

**Citation:** Addictive Behaviors, April 2015, vol./is. 43/(50-53), 0306-4603 (Apr 2015)

**Author(s):** Allen, Alicia M; Lunos, Scott; Heishman, Stephen J; al'Absi, Mustafa; Hatsukami, Dorothy; Allen, Sharon S

**Correspondence Address:** Allen, Alicia M.: Department of Family Medicine & Community Health, Medical School, University of Minnesota, 717 Delaware Street SE, Room 422, Minneapolis, MN, US, 55414, alle0299@umn.edu

**Institution:** Department of Family Medicine & Community Health, Medical School, University of Minnesota, Minneapolis, MN, US; Biostatistical Design and Analysis Center, Clinical and Translational Science Institute, University of Minnesota, Minneapolis, MN, US; Nicotine Psychopharmacology Section, National Institute on Drug Abuse Intramural Research Program, National Institutes of Health, Bethesda, MD, US; Department of Behavioral Sciences, Medical School, University of Minnesota, Duluth, MN, US; Department of Psychiatry, Medical School, University of Minnesota, Minneapolis, MN, US; Department of Family Medicine & Community Health, Medical School, University of Minnesota, Minneapolis, MN, US

**Language:** English

**Abstract:** Introduction: The luteal menstrual phase might be a favorable time for smoking cessation when non-nicotine interventions (e.g. counseling, bupropion) are used, whereas the follicular menstrual phase appears favorable when nicotine interventions are used. Thus, there may be an interaction between menstrual phase and response to nicotine. We sought to examine the role of menstrual phase on response to nicotine during acute smoking abstinence. Methods: In this controlled cross-over trial, women completed two identical experimental sessions (follicular [F] vs. luteal [L] phase) after four days of biochemically-verified smoking abstinence. During the sessions, nicotine nasal spray was administered, and participants provided a series of subjective assessments. Results: Participants (n = 140) were 29.7 +/- 6.6 years old and smoked 12.6 +/- 5.8 cigarettes per day. Compared to the F phase, the L phase was associated with a greater increase in stimulation (7.2 +/- 2.2 vs. 14.4 +/- 2.3, p = 0.01, respectively) and greater decrease in urge to smoke (-13.6 +/- 2.3 vs. -21.1 +/- 2.5, p = 0.02, respectively) after the first dose of nicotine. No other significant differences were observed. Conclusions: Out of 13 total measures examined at two different time points, we observed only two significant menstrual phase differences in the subjective response to nicotine. Therefore, these data do not provide strong evidence for a menstrual phase difference in the subjective response to nicotine. Additional research is needed to confirm this relationship and explore how non-nicotine smoking reinforcements (such as sensory sensations) may vary by menstrual phase. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Menstrual Cycle](#)  
[\\*Nicotine](#)  
[\\*Smoking Cessation](#)  
[\\*Tobacco Smoking](#)



[Addiction](#)  
[Hormones](#)

**Source:** PsycINFO  
**Full Text:** Available from *Elsevier* in [Addictive Behaviors](#)

### 29. Evaluating implicit drinking identity as a mediator of drinking motives and alcohol consumption and craving.

**Citation:** Addictive Behaviors, April 2015, vol./is. 43/(33-38), 0306-4603 (Apr 2015)  
**Author(s):** Lindgren, Kristen P; Neighbors, Clayton; Wiers, Reinout W; Gasser, Melissa L; Teachman, Bethany A  
**Correspondence Address:** Lindgren, Kristen P.: Center for the Study of Health & Risk Behaviors (CSHRB), University of Washington, School of Medicine, Department of Psychiatry & Behavioral Sciences, 1100 NE 45th Street, Suite 300, Seattle, WA, US, 98105, KPL9716@uw.edu  
**Institution:** University of Washington, Center for the Study of Health & Risk Behaviors (CSHRB), Department of Psychiatry & Behavioral Sciences, Seattle, WA, US; University of Houston, Department of Psychology, Houston, TX, US; University of Amsterdam, Department of Psychology, Amsterdam, Netherlands; University of Washington, Center for the Study of Health & Risk Behaviors (CSHRB), Department of Psychiatry & Behavioral Sciences, Seattle, WA, US; University of Virginia, Department of Psychology, Charlottesville, VA, US  
**Language:** English  
**Abstract:** Introduction: Implicit drinking identity (i.e., cognitive associations between the self and drinking) is a reliable predictor of drinking. However, whether implicit drinking identity might mediate the relationship between other robust predictors of drinking and drinking outcomes is unknown. We hypothesized that implicit drinking would mediate the relationship between drinking motives and alcohol consumption and craving. Method: We assessed drinking motives at Time 1, implicit drinking identity at Time 2 (on average, 11 days later) and self-reported alcohol consumption and craving at Time 3 (on average, 6 days later) in a sample of 194 US undergraduates (54% women) who reported at least one heavy drinking episode (4 drinks for women, 5 for men) in the past month. Participants completed self-report measures of drinking motives, daily alcohol consumption, and current craving. Results: Implicit drinking identity uniquely mediated the relationship between social motives and alcohol consumption. It did not, however, mediate the relationship between motives and craving. Time 2 implicit drinking identity was positively associated with greater alcohol consumption and craving at Time 3, even after controlling for drinking motives. Subsequent analyses indicated significant indirect effects between social, enhancement, and coping motives (but not conformity) and consumption and craving when each motive was evaluated individually. Conclusions: Implicit drinking identity continues to have promise as a predictor of drinking outcomes and as a target for interventions. Future experimental and prospective studies will be critical to establish the circumstances under which implicit drinking identity is strengthened and/or activated and the resulting effects on hazardous drinking. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Craving](#)  
[Cognition](#)  
[Motivation](#)

**Source:** PsycINFO  
**Full Text:** Available from *Elsevier* in [Addictive Behaviors](#)

### 30. Cyber addictions: Toward a psychosocial perspective.

**Citation:** Addictive Behaviors, April 2015, vol./is. 43/(28-32), 0306-4603 (Apr 2015)

**Author(s):** Suissa, Amnon Jacob

**Correspondence Address:** Suissa, Amnon Jacob: University of Quebec in Montreal, School of Social Work, Montreal, PQ, Canada, H3C 3P8, Suissa.amnon@uqam.ca

**Institution:** University of Quebec in Montreal, School of Social Work, Montreal, PQ, Canada

**Language:** English

**Abstract:** The concept of cyberaddiction is far from being unanimously accepted by scientists (Ko, Yen, Yen, Chen, & Chen 2012; Pezoa-Jares, Espinoza-Luna & Vasquez-Medina 2012; Nadeau et al., 2011; Perraton, Fusaro & Bonenfant 2011). The same is true of addiction to videogames (Hellman, Schoenmakers, Nordstrom, & Van Holst 2013; Coulombe 2010); or to Facebook (Andreassen et al., 2012; Levard & Soulas, 2010). While certain researchers wished to see this condition included in the DSM-5 (Block, 2008), others question the operational and practical bases for the diagnostic criteria. Some see cyberaddiction as a problem linked more to time management, to brain deficits, to an impulse-control disorder or to psychosocial conditions while others consider it to be a pre-existing comorbidity. Considering that most addiction problems are generally understood more as individual and pathological problems rather than the result of psychosocial conditions (poverty, unemployment, weak social ties, social exclusion, hyper individualism, etc), the aim of this article is to propose a psychosocial perspective for this emerging trend in cyberaddictions. To what extent social conditions and cyberaddiction behaviors constitute a potential pathology? Can we include a psychosocial approach to gain a more general picture of this contemporary issue? In response to these questions, a contextualization and an attempt to define cyberaddiction will be followed by an analysis of some major issues in the development of this type of addiction. A demonstration of the cycle of addiction on how people develop addictions, including cyberaddictions, will be done within a psychosocial perspective in order to seize the multifactorial aspects of this addiction. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Computer Games](#)  
[\\*Internet Addiction](#)  
[Mental Health](#)  
[Psychosocial Factors](#)

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in [Addictive Behaviors](#)

### **31. Intolerance for withdrawal discomfort and motivation predict voucher-based smoking treatment outcomes for smokers with substance use disorders.**

**Citation:** Addictive Behaviors, April 2015, vol./is. 43/(18-24), 0306-4603 (Apr 2015)

**Author(s):** Rohsenow, Damaris J; Tidey, Jennifer W; Kahler, Christopher W; Martin, Rosemarie A; Colby, Suzanne M; Sirota, Alan D

**Correspondence Address:** Rohsenow, Damaris J.: Center for Alcohol and Addiction Studies, School of Public Health, Brown University, Box G-S121-5, Providence, RI, US, 02912, Damaris\_Rohsenow@brown.edu

**Institution:** Providence Veterans Affairs Medical Center, Providence, RI, US; Center for Alcohol and Addiction Studies, Brown University, Providence, RI, US; Center for Alcohol and Addiction Studies, Brown University, Providence, RI, US; Center for Alcohol and Addiction Studies, Brown University, Providence, RI, US; Center for Alcohol and Addiction Studies, Brown University, Providence, RI, US; Providence Veterans Affairs Medical Center, Providence, RI, US

**Language:** English

**Abstract:** Identifying predictors of abstinence with voucher-based treatment is important for improving its efficacy. Smokers with substance use disorders have very low smoking

cessation rates so identifying predictors of smoking treatment response is particularly important for these difficult-to-treat smokers. Intolerance for Smoking Abstinence Discomfort (IDQ-S), motivation to quit smoking, nicotine dependence severity (FTND), and cigarettes per day were examined as predictors of smoking abstinence during and after voucher-based smoking treatment with motivational counseling. We also investigated the relationship between IDQ-S and motivation to quit smoking. Smokers in residential substance treatment (n = 184) were provided 14 days of vouchers for complete smoking abstinence (CV) after a 5-day smoking reduction lead-in period or vouchers not contingent on abstinence. Carbon monoxide readings indicated about 25% of days abstinent during the 14 days of vouchers for abstinence in the CV group; only 3-4% of all participants were abstinent at follow-ups. The IDQ-S Withdrawal Intolerance scale and FTND each significantly predicted fewer abstinent days during voucher treatment; FTND was nonsignificant when controlling for variance shared with withdrawal intolerance. The one significant predictor of 1-month abstinence was pretreatment motivation to quit smoking, becoming marginal ( $p < .06$ ) when controlling for FTND. Lower withdrawal intolerance significantly predicted 3-month abstinence when controlling for FTND. Higher withdrawal intolerance pretreatment correlated with less motivation to quit smoking. Implications for voucher-based treatment include the importance of focusing on reducing these expectancies of anticipated smoking withdrawal discomfort, increasing tolerance for abstinence discomfort, and increasing motivation. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Smoking Cessation](#)  
[\\*Tobacco Smoking](#)  
[\\*Treatment Outcomes](#)  
[Contingency Management](#)  
[Motivation](#)  
[Nicotine](#)

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in [Addictive Behaviors](#)

### 32. Relationship of impulsivity and depression during early methamphetamine withdrawal in Han Chinese population.

**Citation:** Addictive Behaviors, April 2015, vol./is. 43/(7-10), 0306-4603 (Apr 2015)

**Author(s):** Zhang, Jie; Su, Hang; Tao, Jingyan; Xie, Ying; Sun, Yeming; Li, Liren; Zhang, Xiang Yang; Hu, Zhenyu; He, Jincai

**Correspondence Address:** Zhang, Xiang Yang: Biological Psychiatry Center, Beijing Hui-Long-Guan Hospital, Chang-Ping District, Beijing, China, 100096, xyzhang@bcm.edu

**Institution:** Department of Neurology, First Affiliated Hospital, Wenzhou Medical University, Wenzhou, China; Department of Neurology, First Affiliated Hospital, Wenzhou Medical University, Wenzhou, China; Department of Neurology, First Affiliated Hospital, Wenzhou Medical University, Wenzhou, China; Department of Neurology, First Affiliated Hospital, Wenzhou Medical University, Wenzhou, China; Department of Psychiatry, New Jersey Medical School, Rutgers University, NJ, US; Department of Psychiatry, Robert Wood Johnson Medical School, Rutgers University, NJ, US; Beijing HuiLongGuan Hospital, Peking University, Beijing, China; Department of Psychological Counseling, Ningbo Kangning Hospital, Ningbo, China; Department of Neurology, First Affiliated Hospital, Wenzhou Medical University, Wenzhou, China

**Language:** English

**Abstract:** Objective: High level of impulsivity as well as depression is thought to be involved in the maintenance and development of methamphetamine (METH) addiction. However, the relationship between impulsivity and depression has not been studied thoroughly in METH dependence subjects, especially in early METH abstinent subjects. In this study, our objective is to explore the interplay between the depressive symptoms and impulsivity in early METH abstinent subjects. Methods: A total of 182 early abstinent METH

dependent subjects (abstinence for 1-7days) were recruited and the level of impulsivity was measured by the Barratt Impulsiveness Scale (BIS-11). Depressive symptoms and anxiety symptoms were assessed by the short 13-item Beck Depression Inventory (BDI-13) and Beck Anxiety Inventory (BAI) respectively. Results: Global impulsivity of BIS-11 was significantly correlated with depressive symptoms among early METH abstinent subjects ( $r = 0.283$ ,  $p = 0.001$ ). Moreover, all subscales of BIS-11 were also found to be correlated with depressive symptoms: correlation with attentional impulsivity ( $r = 0.202$ ,  $p = 0.006$ ); correlation with motor impulsivity ( $r = 0.267$ ,  $p = 0.001$ ); and correlation with non-planning impulsivity ( $r = 0.177$ ,  $p = 0.017$ ). Conclusions: This study showed a relationship between impulsivity and depression, which may further the comprehension of motivational elements contributing to the maintenance and development of METH use disorder. Future research would be dedicated to exploring underlying mechanisms of association between impulsivity and depression. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Drug Withdrawal](#)  
[\\*Impulsiveness](#)  
[\\*Methamphetamine](#)  
[Drug Dependency](#)  
[Major Depression](#)

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in [Addictive Behaviors](#)

### 33. Emotional graphic cigarette warning labels reduce the electrophysiological brain response to smoking cues.

**Citation:** *Addiction Biology*, March 2015, vol./is. 20/2(368-376), 1355-6215;1369-1600 (Mar 2015)

**Author(s):** Wang, An-Li; Romer, Dan; Elman, Igor; Strasser, Andrew A; Turetsky, Bruce I; Gur, Ruben C; Langleben, Daniel D

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**Institution:** Annenberg Public Policy Center, University of Pennsylvania, Philadelphia, PA, US; Annenberg Public Policy Center, University of Pennsylvania, Philadelphia, PA, US; Department of Psychiatry, Cambridge Health Alliance and Harvard Medical School, Cambridge, MA, US; Annenberg Public Policy Center, University of Pennsylvania, Philadelphia, PA, US; Department of Psychiatry, Perelman School of Medicine, University of Pennsylvania, Philadelphia, PA, US; Department of Psychiatry, Perelman School of Medicine, University of Pennsylvania, Philadelphia, PA, US; Annenberg Public Policy Center, University of Pennsylvania, Philadelphia, PA, US

**Language:** English

**Abstract:** There is an ongoing public debate about the new graphic warning labels (GWLs) that the Food and Drug Administration (FDA) proposes to place on cigarette packs. Tobacco companies argued that the strongly emotional images FDA proposed to include in the GWLs encroached on their constitutional rights. The court ruled that FDA did not provide sufficient scientific evidence of compelling public interest in such encroachment. This study's objectives were to examine the effects of the GWLs on the electrophysiological and behavioral correlates of smoking addiction and to determine whether labels rated higher on the emotional reaction (ER) scale are associated with greater effects. We studied 25 non-treatment-seeking smokers. Event-related potentials (ERPs) were recorded while participants viewed a random sequence of paired images, in which visual smoking (Cues) or non-smoking (non-Cues) images were preceded by GWLs or neutral images. Participants reported their cigarette craving after viewing each pair. Dependent variables were magnitude of P300 ERPs and self-reported cigarette craving in response to Cues. We found that subjective craving response to Cues was significantly reduced by preceding GWLs, whereas the P300 amplitude response to Cues was reduced only by preceding

GWs rated high on the ER scale. In conclusion, our study provides experimental neuroscience evidence that weighs in on the ongoing public and legal debate about how to balance the constitutional and public health aspects of the FDA-proposed GWs. The high toll of smoking-related illness and death adds urgency to the debate and prompts consideration of our findings while longitudinal studies of GWs are underway. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Craving](#)  
[\\*Electrophysiology](#)  
[\\*Emotional Control](#)  
[\\*Evoked Potentials](#)  
[\\*Tobacco Smoking](#)  
[Brain](#)  
[Attentional Bias](#)

**Source:** PsycINFO

**Full Text:** Available from *Wiley* in [Addiction Biology](#)

#### 34. [8F]MK-9470 PET measurement of cannabinoid CB1 receptor availability in chronic cannabis users.

**Citation:** *Addiction Biology*, March 2015, vol./is. 20/2(357-367), 1355-6215;1369-1600 (Mar 2015)

**Author(s):** Ceccarini, Jenny; Kuepper, Rebecca; Kemels, Dieter; Os, Jim; Henquet, Cecile; Van Laere, Koen

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**Institution:** Division of Nuclear Medicine, University Hospitals Leuven, KU Leuven, Leuven, Belgium; Department of Psychiatry and Psychology, Maastricht University Medical Centre, South Limburg Mental Health Research and Teaching Network, EURON, Maastricht, Netherlands; Division of Nuclear Medicine, University Hospitals Leuven, KU Leuven, Leuven, Belgium; Department of Psychiatry and Psychology, Maastricht University Medical Centre, South Limburg Mental Health Research and Teaching Network, EURON, Maastricht, Netherlands; Department of Psychiatry and Psychology, Maastricht University Medical Centre, South Limburg Mental Health Research and Teaching Network, EURON, Maastricht, Netherlands; Division of Nuclear Medicine, University Hospitals Leuven, KU Leuven, Leuven, Belgium

**Language:** English

**Abstract:** DELTA9-Tetrahydrocannabinol, the main psychoactive component of cannabis, exerts its central effects through activation of the cerebral type 1 cannabinoid (CB1) receptor. Pre-clinical studies have provided evidence that chronic cannabis exposure is linked to decreased CB1 receptor expression and this is thought to be a component underlying drug tolerance and dependence. In this study, we make first use of the selective high-affinity positron emission tomography (PET) ligand [8F]MK-9470 to obtain in vivo measurements of cerebral CB1 receptor availability in 10 chronic cannabis users (age = 26.0 +/- 4.1 years). Each patient underwent [8F]MK-9470 PET within the first week following the last cannabis consumption. A population of 10 age-matched healthy subjects (age = 23.0 +/- 2.9 years) was used as control group. Parametric modified standardized uptake value images, reflecting CB1 receptor availability, were calculated. Statistical parametric mapping and volume-of-interest (VOI) analyses of CB1 receptor availability were performed. Compared with controls, cannabis users showed a global decrease in CB1 receptor availability (-11.7 percent). VOI-based analysis demonstrated that the CB1 receptor decrease was significant in the temporal lobe (-12.7 percent), anterior (-12.6 percent) and posterior cingulate cortex (-13.5 percent) and nucleus accumbens (-11.2 percent). Voxel-based analysis confirmed this decrease and regional pattern in CB1 receptor availability in cannabis users. These findings revealed that chronic cannabis use may alter specific regional CB1 receptor expression through

neuroadaptive changes in CB1 receptor availability, opening the way for the examination of specific CB1-cannabis addiction interactions which may predict future cannabis-related treatment outcome. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Cannabis](#)  
[\\*Drug Abuse](#)  
[\\*Neural Receptors](#)  
[\\*Cingulate Cortex](#)

**Source:** PsycINFO

**Full Text:** Available from *Wiley* in [Addiction Biology](#)

### 35. Chronic CRF1 receptor blockade reduces heroin intake escalation and dependence-induced hyperalgesia.

**Citation:** *Addiction Biology*, March 2015, vol./is. 20/2(275-284), 1355-6215;1369-1600 (Mar 2015)

**Author(s):** Park, Paula E; Schlosburg, Joel E; Vendruscolo, Leandro F; Schulteis, Gery; Edwards, Scott; Koob, George F

**Correspondence Address:** Edwards, Scott: Department of Physiology, LSU Health Sciences Center, 1901 Perdido Street, New Orleans, LA, US, 70112, sedwa5@lsuhsc.edu

**Institution:** Committee on the Neurobiology of Addictive Disorders, Scripps Research Institute, La Jolla, CA, US; Committee on the Neurobiology of Addictive Disorders, Scripps Research Institute, La Jolla, CA, US; Committee on the Neurobiology of Addictive Disorders, Scripps Research Institute, La Jolla, CA, US; VA San Diego Healthcare System, San Diego, CA, US; Committee on the Neurobiology of Addictive Disorders, Scripps Research Institute, La Jolla, CA, US; Committee on the Neurobiology of Addictive Disorders, Scripps Research Institute, La Jolla, CA, US

**Language:** English

**Abstract:** Opioids represent effective drugs for the relief of pain, yet chronic opioid use often leads to a state of increased sensitivity to pain that is exacerbated during withdrawal. A sensitization of pain-related negative affect has been hypothesized to closely interact with addiction mechanisms. Neuro-adaptive changes occur as a consequence of excessive opioid exposure, including a recruitment of corticotropin-releasing factor (CRF) and norepinephrine (NE) brain stress systems. To better understand the mechanisms underlying the transition to dependence, we determined the effects of functional antagonism within these two systems on hyperalgesia-like behavior during heroin withdrawal utilizing models of both acute and chronic dependence. We found that passive or self-administered heroin produced a significant mechanical hypersensitivity. During acute opioid dependence, systemic administration of the CRF1 receptor antagonist MPZP (20 mg/kg) alleviated withdrawal-induced mechanical hypersensitivity. In contrast, several functional adrenergic system antagonists (clonidine, prazosin, propranolol) failed to alter mechanical hypersensitivity in this state. We then determined the effects of chronic MPZP or clonidine treatment on extended access heroin self-administration and found that MPZP, but not clonidine, attenuated escalation of heroin intake, whereas both drugs alleviated chronic dependence-associated hyperalgesia. These findings suggest that an early potentiation of CRF signaling occurs following opioid exposure that begins to drive both opioid-induced hyperalgesia and eventually intake escalation. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Clonidine](#)  
[\\*Drug Dependency](#)  
[\\*Heroin](#)  
[\\*Opiates](#)



peace and a place" within the community, although trauma sequelae and functional limitations often persist. This article discusses concrete clinical implications that arise when treating patients with severe and chronic forms of addiction by means of POT. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Drug Addiction](#)  
[\\*Psychotherapy](#)  
[\\*Therapeutic Alliance](#)  
[\\*Trauma](#)  
[Long Term Care](#)

**Source:** PsycINFO

### 37. Isolating the incentive salience of reward-associated stimuli: Value, choice, and persistence.

**Citation:** Learning & Memory, February 2015, vol./is. 22/2(116-127), 1072-0502 (Feb 2015)

**Author(s):** Beckmann, Joshua S; Chow, Jonathan J

**Correspondence Address:** Beckmann, Joshua S.: Department of Psychology, University of Kentucky, Lexington, KY, US, 40536-0509, joshua.beckmann@uky.edu

**Institution:** Department of Psychology, University of Kentucky, Lexington, KY, US; Department of Psychology, University of Kentucky, Lexington, KY, US

**Language:** English

**Abstract:** Sign- and goal-tracking are differentially associated with drug abuse-related behavior. Recently, it has been hypothesized that sign- and goal-tracking behavior are mediated by different neurobehavioral valuation systems, including differential incentive salience attribution. Herein, we used different conditioned stimuli to preferentially elicit different response types to study the different incentive valuation characteristics of stimuli associated with sign- and goal-tracking within individuals. The results demonstrate that all stimuli used were equally effective conditioned stimuli; however, only a lever stimulus associated with sign-tracking behavior served as a robust conditioned reinforcer and was preferred over a tone associated with goal-tracking. Moreover, the incentive value attributed to the lever stimulus was capable of promoting suboptimal choice, leading to a significant reduction in reinforcers (food) earned. Furthermore, sign-tracking to a lever was more persistent than goal-tracking to a tone under omission and extinction contingencies. Finally, a conditional discrimination procedure demonstrated that sign-tracking to a lever and goal-tracking to a tone were dependent on learned stimulus-reinforcer relations. Collectively, these results suggest that the different neurobehavioral valuation processes proposed to govern sign- and goal-tracking behavior are independent but parallel processes within individuals. Examining these systems within individuals will provide a better understanding of how one system comes to dominate stimulus- reward learning, thus leading to the differential role these systems play in abuse-related behavior. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: This article is distributed exclusively by Cold Spring Harbor Laboratory Press for the first 12 months after the full-issue publication date (see <http://learnmem.cshlp.org/site/misc/terms.xhtml>). After 12 months, it is available under a Creative Commons License (Attribution- NonCommercial 4.0 International), as described at <http://creativecommons.org/licenses/by-nc/4.0/>.; HOLDER: Beckmann and Chow; YEAR: 2015

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

**Subject Headings:** [\\*Behavior](#)  
[\\*Drug Abuse](#)  
[\\*Persistence](#)  
[\\*Rewards](#)  
[\\*Stimulation](#)  
[Neurology](#)  
[Rats](#)



[Tracking Values](#)

**Source:** PsycINFO

**38. Expectancies for cigarettes, e-cigarettes, and nicotine replacement therapies among e-cigarette users (aka vapers).**

**Citation:** Nicotine & Tobacco Research, February 2015, vol./is. 17/2(193-200), 1462-2203;1469-994X (Feb 2015)

**Author(s):** Harrell, Paul T; Marquinez, Nicole S; Correa, John B; Meltzer, Lauren R; Unrod, Marina; Sutton, Steven K; Simmons, Vani N; Brandon, Thomas H

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**Institution:** Department of Health Outcomes and Behavior, Moffitt Cancer Center, Tampa, FL, US; Department of Health Outcomes and Behavior, Moffitt Cancer Center, Tampa, FL, US; Department of Health Outcomes and Behavior, Moffitt Cancer Center, Tampa, FL, US; Department of Health Outcomes and Behavior, Moffitt Cancer Center, Tampa, FL, US; Department of Health Outcomes and Behavior, Moffitt Cancer Center, Tampa, FL, US; Department of Biostatistics, H. Lee Moffitt Cancer Center, Tampa, FL, US; Department of Health Outcomes and Behavior, Moffitt Cancer Center, Tampa, FL, US; Department of Health Outcomes and Behavior, Moffitt Cancer Center, Tampa, FL, US

**Language:** English

**Abstract:** Introduction: Use of e-cigarettes has been increasing exponentially, with the primary motivation reported as smoking cessation. To understand why smokers choose e-cigarettes as an alternative to cigarettes, as well as to US Food and Drug Administration (FDA)-approved nicotine replacement therapies (NRT), we compared outcome expectancies (beliefs about the results of drug use) for the three nicotine delivery systems among vapers, i.e., e-cigarette users, who were former smokers. Methods: Vapers (N = 1,434) completed an online survey assessing 14 expectancy domains as well as perceived cost and convenience. We focused on comparisons between e-cigarettes and cigarettes to determine the attraction of e-cigarettes as a smoking alternative and between e-cigarettes and NRT to determine perceived advantages of e-cigarettes over FDA-approved pharmacotherapy. Results: Participants believed that e-cigarettes, in comparison to conventional cigarettes, had fewer health risks; caused less craving, withdrawal, addiction, and negative physical feelings; tasted better; and were more satisfying. In contrast, conventional cigarettes were perceived as better than e-cigarettes for reducing negative affect, controlling weight, providing stimulation, and reducing stress. E-cigarettes, compared to NRT, were perceived to be less risky, cost less, cause fewer negative physical feelings, taste better, provide more satisfaction, and be better at reducing craving, negative affect, and stress. Moderator analyses indicated history with ad libitum forms of NRT was associated with less positive NRT expectancies. Conclusions: The degree to which expectancies for e-cigarettes differed from expectancies for either tobacco cigarettes or NRT offers insight into the motivation of e-cigarette users and provides guidance for public health and clinical interventions to encourage smoking-related behavior change. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: Published by Oxford University Press on behalf of the Society for Research on Nicotine and Tobacco. All rights reserved.; HOLDER: The Author; YEAR: 2014

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

**Subject Headings:** [\\*Nicotine](#)  
[\\*Smoking Cessation](#)  
[\\*Tobacco Smoking](#)  
[Motivation](#)

**Source:** PsycINFO

**Full Text:** Available from *Oxford University Press* in [Nicotine and Tobacco Research](#)

**39. Nicotine flux: A potentially important tool for regulating electronic cigarettes.**

- Citation:** Nicotine & Tobacco Research, February 2015, vol./is. 17/2(165-167), 1462-2203;1469-994X (Feb 2015)
- Author(s):** Eissenberg, Thomas; Shihadeh, Alan
- Correspondence Address:** Eissenberg, Thomas: Center for the Study of Tobacco Products, Department of Psychology, College of Humanities and Sciences, Virginia Commonwealth University, PO Box 980205, Richmond, VA, US, 23298, teissenb@vcu.edu
- Institution:** Center for the Study of Tobacco Products, Department of Psychology, College of Humanities and Sciences, Virginia Commonwealth University, Richmond, VA, US; Center for the Study of Tobacco Products, Department of Psychology, College of Humanities and Sciences, Virginia Commonwealth University, Richmond, VA, US
- Language:** English
- Abstract:** Reply by the current author to the comments made by Konstantinos E. Farsalinos et al. (see record 2015-03033-007) on the original article (see record 2015-03033-006). Authors believe that Farsalinos et al. are in agreement with their position that, assuming safety of long-term ECIG (electronic cigarette) use, nicotine flux can be used as means to avoid the marketing of devices that are unable to deliver nicotine effectively enough to help tobacco smokers quit their lethal tobacco cigarettes. Where authors may disagree is in the use of nicotine flux to avoid the potential for toxicity and high abuse liability of ECIGs. This use of nicotine flux increasingly may become relevant as this product category continues to evolve, especially if new device/liquid combinations deliver ever higher doses of nicotine, increasing the risk of toxicity and likelihood of abuse/dependence in otherwise nicotine-naïve individuals. Authors agree that education, regulation of advertising, and prohibition of promotion to nonsmoking youth will all play a role in avoiding these negative outcomes. Authors conclude this response by addressing an issue raised by Farsalinos et al. that goes far beyond the use of nicotine flux as a regulatory tool. Authors agree with the idea that ECIGs pose an ethical issue, they disagree with Farsalinos et al. framing of it. (PsycINFO Database Record (c) 2015 APA, all rights reserved)
- Country of Publication:** STATEMENT: Published by Oxford University Press on behalf of the Society for Research on Nicotine and Tobacco. All rights reserved.; HOLDER: The Author; YEAR: 2014
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Nicotine](#)  
[\\*Smoking Cessation](#)  
[Drug Abuse](#)  
[Drug Abuse Liability](#)
- Source:** PsycINFO
- Full Text:** Available from *Oxford University Press* in [Nicotine and Tobacco Research](#)

**40. Risks of attempting to regulate nicotine flux in electronic cigarettes.**

- Citation:** Nicotine & Tobacco Research, February 2015, vol./is. 17/2(163-164), 1462-2203;1469-994X (Feb 2015)
- Author(s):** Farsalinos, Konstantinos E; Voudris, Vassilis; Houezec, Jacques Le
- Correspondence Address:** Farsalinos, Konstantinos E.: Onassis Cardiac Surgery Center, Sygrou 356, Kallithea, Greece, 17674, kfarsalinos@gmail.com
- Institution:** Department of Cardiology, Onassis Cardiac Surgery Center, Kallithea, Greece; Department of Cardiology, Onassis Cardiac Surgery Center, Kallithea, Greece; Amzer Glas, Rennes, France
- Language:** English
- Abstract:** Comments on an article by Alan Shihadeh & Thomas Eissenberg (see record 2015-03033-006). In their recent analysis, Shihadeh and Eissenberg support that by

regulating nicotine flux in electronic cigarettes (ECs) could be a valuable tool in the regulatory process that would increase effectiveness and reduce the chance for abuse liability. Herein, authors present the view that such a regulation could endanger the effectiveness of e-cigarettes as smoking substitutes. Authors propose that the comparison between ECs and tobacco cigarettes would be similar to comparing, respectively a car with a large selection of powerful engines (i.e., nicotine delivery to the aerosol) but very heavy structure (i.e., reduced rate of absorption for a given nicotine content per puff), with a car with less variability and lower-powered engines but very lightweight structure. With current technology, overall performance (i.e., nicotine delivery to the bloodstream) is definitely in favor of the tobacco cigarette, and smokers may be unable to adequately satisfy their nicotine cravings with EC use despite the ability to adjust use patterns. In authors opinion, regulating nicotine flux in ECs, in terms of restricting usage patterns, is unnecessary. Research on nicotine flux could become an essential tool in the development of more effective EC products and in informing consumers about the characteristics of each device so that they make appropriate choices. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Country of Publication:** STATEMENT: Published by Oxford University Press on behalf of the Society for Research on Nicotine and Tobacco. All rights reserved.; HOLDER: The Author; YEAR: 2014

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

**Subject Headings:** [\\*Nicotine](#)  
[\\*Smoking Cessation](#)  
[Drug Abuse](#)  
[Drug Abuse Liability](#)

**Source:** PsycINFO

**Full Text:** Available from *Oxford University Press* in [Nicotine and Tobacco Research](#)

#### 41. Electronic cigarette effectiveness and abuse liability: Predicting and regulating nicotine flux.

**Citation:** Nicotine & Tobacco Research, February 2015, vol./is. 17/2(158-162), 1462-2203;1469-994X (Feb 2015)

**Author(s):** Shihadeh, Alan; Eissenberg, Thomas

**Correspondence Address:** Shihadeh, Alan: Department of Mechanical Engineering, American University of Beirut, PO Box 11-0236, Riad El-Solh, Beirut, Lebanon, 1107 2020, as20@aub.edu.lb

**Institution:** Department of Mechanical Engineering, American University of Beirut, Beirut, Lebanon; Department of Psychology, Center for the Study of Tobacco Products, Virginia Commonwealth University, Richmond, VA, US

**Language:** English

**Abstract:** Electronic cigarettes (ECIGs) comprise an aerosolized nicotine delivery product category that provides consumers with probably unprecedented control over extensive features and operating conditions, allowing a wide range of nicotine yields to be obtained. Depending on the combination of such ECIG variables as electrical power input, geometry, liquid composition, and puff behavior, ECIG users can extract in a few puffs far more or far less nicotine than with a conventional combustible cigarette. These features of ECIG design and use present challenges for public health policy, central among which is the question of how to regulate nicotine delivery. In this commentary, we propose a conceptual framework intended to provide a convenient approach for evaluating and regulating the nicotine emitted from ECIGs. This framework employs nicotine flux to account for the total dose and rate at which nicotine reaches the user, 2 key factors in drug abuse liability. The nicotine flux is the nicotine emitted per puff second (e.g., mg/s) by a given ECIG design under given use conditions, and it can be predicted accurately using physical principles. We speculate that if the flux is too low, users likely will abandon the device and maintain conventional tobacco product use. Also, we speculate that if the flux is too high, individuals may suffer toxic side effects and/or the device may have higher-than-necessary abuse liability. By considering ECIG design, operation conditions, liquid composition, and puff behavior variables in combination, we illustrate how ECIG

specifications can be realistically mandated to result in a target flux range. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: Published by Oxford University Press on behalf of the Society for Research on Nicotine and Tobacco. All rights reserved.; HOLDER: The Author; YEAR: 2014

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

**Subject Headings:** [\\*Nicotine](#)  
[\\*Smoking Cessation](#)  
[Drug Abuse](#)  
[Drug Abuse Liability](#)

**Source:** PsycINFO

**Full Text:** Available from *Oxford University Press* in [Nicotine and Tobacco Research](#)

#### 42. The relationship between family-of-origin experience and current family violence: A test of mediation by attachment style and mental health symptom distress.

**Citation:** American Journal of Family Therapy, January 2015, vol./is. 43/1(84-96), 0192-6187;1521-0383 (Jan 2015)

**Author(s):** Banford, Alyssa J; Brown, Matthew D; Ketring, Scott A; Mansfield, Ty R

**Correspondence Address:** Banford, Alyssa J.: California School of Professional Psychology, Alliant International University, Registered MFT Intern #77967, 10455 Pomerado Road, DH-206E, San Diego, CA, US, 92131, [abanford@alliant.edu](mailto:abanford@alliant.edu)

**Institution:** Alliant International University, San Diego, CA, US; University of Houston-Clear Lake, Houston, TX, US; Auburn University, Auburn, AL, US; Brigham Young University, Provo, UT, US

**Language:** English

**Abstract:** The purpose of this study was to examine whether the presence of substance abuse, physical, sexual, and emotional abuse, and mental illness in the home or family-of-origin is predictive of variance in current family violence perpetration. Additionally, a secondary purpose of this study was to examine whether mental health symptom distress and attachment style mediated the relationship between the presence of traumatic experiences in one's family-of-origin and current family violence perpetration. The results suggested that difficult family-of-origin experiences may predict variance in current family violence indirectly through mental health symptom distress and anxious attachment. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Attachment Behavior](#)  
[\\*Distress](#)  
[\\*Family of Origin](#)  
[\\*Mental Health](#)  
[\\*Violence](#)  
[Drug Abuse](#)  
[Emotional Abuse](#)  
[Experiences \(Events\)](#)  
[Mental Disorders](#)  
[Physical Abuse](#)  
[Sexual Abuse](#)  
[Symptoms](#)  
[Trauma](#)

**Source:** PsycINFO

**Full Text:** Available from *EBSCOhost* in [American Journal of Family Therapy](#)

#### 43. Attachment-based considerations for addressing adolescent substance use (ASU) in a family context.

**Citation:** American Journal of Family Therapy, January 2015, vol./is. 43/1(28-43), 0192-6187;1521-0383 (Jan 2015)

**Author(s):** Downs, Adam B; Seedall, Ryan B; Taylor, Nathan C; Downs, Karly J

**Correspondence Address:** Downs, Adam B.: Substance Abuse Services, 850 5th Avenue East, Tuscaloosa, AL, US, 35401, abdowns@cchs.ua.edu

**Institution:** Department of Psychiatry and Behavioral Medicine, University of Alabama, Tuscaloosa, AL, US; Department of Family, Consumer, and Human Development, Utah State University, Logan, UT, US; Department of Family, Consumer, and Human Development, Utah State University, Logan, UT, US; Department of Human Development and Family Studies, Michigan State University, East Lansing, MI, US

**Language:** English

**Abstract:** In this article, we highlight adolescence as a transitional period of great importance to families, outline the risk of adolescent substance use (ASU), and discuss the challenge of family therapists to adequately address issues of substance use in the therapy process. We also mention the increasing use of attachment theory as a conceptual tool, and discuss how it has recently been used to understand ASU. In this article, attachment-based considerations are proposed to address mild/moderate ASU issues that arise in the context of family therapy. A clinical narrative is provided to further illustrate the application of these considerations. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Attachment Behavior](#)  
[\\*Drug Abuse](#)  
[\\*Family Attachment Theory](#)

**Source:** PsycINFO

**Full Text:** Available from *EBSCOhost* in [American Journal of Family Therapy](#)

#### 44. Substance use, violence, and HIV risk behavior in El Salvador and the United States: Cross-national profiles of the SAVA Syndemic.

**Citation:** Victims & Offenders, January 2015, vol./is. 10/1(95-116), 1556-4886;1556-4991 (Jan 2015)

**Author(s):** Salas-Wright, Christopher P; Olate, Rene; Vaughn, Michael G

**Correspondence Address:** Salas-Wright, Christopher P.: University of Texas at Austin, School of Social Work, 1925 San Jacinto Boulevard D3500, Austin, TX, US, 78712, salaswright@utexas.edu

**Institution:** University of Texas at Austin, Austin, TX, US; Ohio State University, Columbus, OH, US; Saint Louis University, St. Louis, MO, US

**Language:** English

**Abstract:** Studies examining the SAVA Syndemic-that is, the synergistic links between substance use, violence, and HIV risk behavior-have rarely been conducted cross-nationally. Using samples of high-risk youth in San Salvador, El Salvador (n = 237) and western Pennsylvania, United States (n = 253), latent class analysis is employed to identify behavioral subgroups of youth. Subgroups of "SAVA Youth" characterized by universally elevated levels of substance use, violence, and HIV risk behavior were identified in both El Salvador (20%) and the United States (42%). Membership in these behaviorally severe subgroups was associated with extremely high levels of severe violence exposure. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*At Risk Populations](#)

\*Drug Abuse  
 \*HIV  
 \*Violence  
 Behavior  
 Sexual Risk Taking

Source: PsycINFO

**45. Effects of context-drug learning on synaptic connectivity in the basolateral nucleus of the amygdala in rats.**

**Citation:** European Journal of Neuroscience, January 2015, vol./is. 41/2(205-215), 0953-816X;1460-9568 (Jan 2015)

**Author(s):** Rademacher, David J; Mendoza-Elias, Nasya; Meredith, Gloria E

**Correspondence Address:** Rademacher, David J.: Department of Psychology, Lake Forest College, Lake Forest, IL, US, rademacher@mx.lakeforest.edu

**Institution:** Department of Cellular and Molecular Pharmacology, Chicago Medical School, Rosalind Franklin University of Medicine and Science, North Chicago, IL, US; Department of Cellular and Molecular Pharmacology, Chicago Medical School, Rosalind Franklin University of Medicine and Science, North Chicago, IL, US; Department of Cellular and Molecular Pharmacology, Chicago Medical School, Rosalind Franklin University of Medicine and Science, North Chicago, IL, US

**Language:** English

**Abstract:** Context-drug learning produces structural and functional synaptic changes in the circuitry of the basolateral nucleus of the amygdala (BLA). However, how the synaptic changes translated to the neuronal targets was not established. Thus, in the present study, immunohistochemistry with a cell-specific marker and the stereological quantification of synapses was used to determine if context-drug learning increases the number of excitatory and inhibitory/modulatory synapses contacting the gamma-aminobutyric acid (GABA) interneurons and/or the pyramidal neurons in the BLA circuitry. Amphetamine-conditioned place preference increased the number of asymmetric (excitatory) synapses contacting the spines and dendrites of pyramidal neurons and the number of multisynaptic boutons contacting pyramidal neurons and GABA interneurons. Context-drug learning increased asymmetric (excitatory) synapses onto dendrites of GABA interneurons and increased symmetric (inhibitory or modulatory) synapses onto dendrites but not perikarya of these same interneurons. The formation of context-drug associations alters the synaptic connectivity in the BLA circuitry, findings that have important implications for drug-seeking behavior. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Federation of European Neuroscience Societies and John Wiley & Sons Ltd.; YEAR: 2014

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

**Subject Headings:** \*Amphetamine  
 \*Amygdala  
 \*Synapses  
 \*Interneurons  
 \*Pyramidal Neurons  
 Addiction  
 Associative Processes  
 Gamma Aminobutyric Acid  
 Learning  
 Rats

Source: PsycINFO

Full Text: Available from *Wiley* in *European Journal of Neuroscience*

**46. Trends in intimate partner violence services provided by substance abuse treatment facilities: Findings from a national sample.**

**Citation:** Journal of Family Violence, January 2015, vol./is. 30/1(85-91), 0885-7482;1573-2851 (Jan 2015)

**Author(s):** Capezza, Nicole M; Schumacher, Emily C; Brady, Brittney C

**Correspondence Address:** Capezza, Nicole M.: Department of Psychology, Stonehill College, 320 Washington Street, Easton, MA, US, 02357, ncapezza@stonehill.edu

**Institution:** Department of Psychology, Stonehill College, Easton, MA, US; Department of Psychology, Stonehill College, Easton, MA, US; Department of Psychology, Stonehill College, Easton, MA, US

**Language:** English

**Abstract:** Facilities treating substance abuse problems have a unique opportunity to provide services related to intimate partner violence (IPV). This study investigated the percentage of substance abuse treatment facilities that offer IPV related services among a sample of over 10,000 treatment facilities. Characteristics of treatment facilities that do versus do not offer IPV services were also examined. Survey questions from the 2011 National Survey of Substance Abuse Treatment Services (NSSATS) were analyzed. Only a minority of facilities offered IPV related services (38.4 %). Additionally, compared to facilities not providing IPV services, those providing such services differed on many notable characteristics, such as gender of clients accepted into the program (programs focused on adult women were more likely to offer IPV services), facility location (IPV services offered more in the Western United States), and facility ownership (IPV services offered more in facilities owned by tribal governments). (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Springer Science+Business Media New York; YEAR: 2014

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

**Subject Headings:** [\\*Battered Females](#)  
[\\*Health Care Delivery](#)  
[\\*Intimate Partner Violence](#)  
[\\*Treatment Facilities](#)  
[\\*Trends](#)  
[Comorbidity](#)  
[Drug Abuse](#)  
[Drug Rehabilitation](#)  
[Integrated Services](#)  
[Perpetrators](#)  
[Victimization](#)

**Source:** PsycINFO

**47. "Dopamine receptor blockade modulates the rewarding and aversive properties of nicotine via dissociable neuronal activity patterns in the nucleus accumbens": Corrigenda.**

**Citation:** Neuropsychopharmacology, February 2015, vol./is. 40/3(791), 0893-133X;1740-634X (Feb 2015)

**Author(s):** Sun, Ninglei; Laviolette, Steven R

**Correspondence Address:** Laviolette, Steven R.: Department of Anatomy and Cell Biology, Schulich School of Medicine and Dentistry, University of Western Ontario, 468 Medical Science Building, London, ON, Canada, N6A5C1, Steven.laviolette@schulich.uwo.ca

**Institution:** Department of Anatomy and Cell Biology, Schulich School of Medicine and Dentistry, University of Western Ontario, London, ON, Canada; Department of Anatomy and Cell Biology, Schulich School of Medicine and Dentistry, University of Western Ontario, London, ON, Canada

**Language:** English

**Abstract:** Reports an error in "Dopamine receptor blockade modulates the rewarding and aversive properties of nicotine via dissociable neuronal activity patterns in the nucleus accumbens" by Ninglei Sun and Steven R. Laviolette (Neuropsychopharmacology, 2014[Nov], Vol

39[12], 2799-2815). In this article, the 'Addiction Research Group' in the byline has been deleted. (The following abstract of the original article appeared in record 2014-45366-009). The mesolimbic pathway comprising the ventral tegmental area (VTA) and projection terminals in the nucleus accumbens (NAc) has been identified as a critical neural system involved in processing both the rewarding and aversive behavioral effects of nicotine. Transmission through dopamine (DA) receptors functionally modulates these effects directly within the NAc. Nevertheless, the neuronal mechanisms within the NAc responsible for these bivalent behavioral effects are presently not known. Using an unbiased conditioned place preference procedure combined with in vivo neuronal recordings, we examined the effects of nicotine reward and aversion conditioning on intra-NAc neuronal sub-population activity patterns. We report that intra-VTA doses of nicotine that differentially produce rewarding or aversive behavioral effects produce opposite effects on sub-populations of fast-spiking interneurons (FSIs) or medium spiny neurons (MSNs) within the shell region of the NAc (NAshell). Thus, while the rewarding effects of intra-VTA nicotine were associated with inhibition of FSI and activation of MSNs, the aversive effects of nicotine produced the opposite pattern of NAshell neuronal population activity. Blockade of DA transmission with a broad-spectrum DA receptor antagonist, -flupenthixol, strongly inhibited the spontaneous activity of NAshell FSIs, and reversed the conditioning properties of intra-VTA nicotine, switching nicotine-conditioned responses from aversive to rewarding. Remarkably, DA receptor blockade switched intra-NAshell neuronal population activity from an aversion to a reward pattern, concomitant with the observed switch in behavioral conditioning effects. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2015

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

**Subject Headings:** \*Dopamine  
\*Nicotine  
\*Nucleus Accumbens  
\*Interneurons  
Aversive Stimulation  
Rats

**Source:** PsycINFO

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

#### 48. Brief intermittent cocaine self-administration and abstinence sensitizes cocaine effects on the dopamine transporter and increases drug seeking.

**Citation:** Neuropsychopharmacology, February 2015, vol./is. 40/3(728-735), 0893-133X;1740-634X (Feb 2015)

**Author(s):** Calipari, Erin S; Siciliano, Cody A; Zimmer, Benjamin A; Jones, Sara R

**Correspondence Address:** Jones, Sara R.: Department of Physiology and Pharmacology, Wake Forest School of Medicine, Medical Center Boulevard, Winston-Salem, NC, US, 27157, srjones@wakehealth.edu

**Institution:** Fishberg Department of Neuroscience, Icahn School of Medicine at Mount Sinai, New York, NY, US; Department of Physiology and Pharmacology, Wake Forest School of Medicine, Winston-Salem, NC, US; Department of Physiology and Pharmacology, Wake Forest School of Medicine, Winston-Salem, NC, US; Department of Physiology and Pharmacology, Wake Forest School of Medicine, Winston-Salem, NC, US

**Language:** English

**Abstract:** Although traditional sensitization paradigms, which result in an augmentation of cocaine-induced locomotor behavior and dopamine (DA) overflow following repeated experimenter-delivered cocaine injections, are often used as a model to study drug addiction, similar effects have been difficult to demonstrate following cocaine self-administration. We have recently shown that intermittent access (IntA) to cocaine can



result in increased cocaine potency at the DA transporter (DAT); however, traditional sensitization paradigms often show enhanced effects following withdrawal/abstinence periods. Therefore, we determined a time course of IntA-induced sensitization by examining the effects of 1 or 3 days of IntA, as well as a 7-day abstinence period on DA function, cocaine potency, and reinforcement. Here we show that cocaine potency is increased following as little as 3 days of IntA and further augmented following an abstinence period. In addition, IntA plus abstinence produced greater evoked DA release in the presence of cocaine as compared with all other groups, demonstrating that following abstinence, both cocaine's ability to increase DA release and inhibit uptake at the DAT, two separate mechanisms for increasing DA levels, are enhanced. Finally, we found that IntA-induced sensitization of the DA system resulted in an increased reinforcing efficacy of cocaine, an effect that was augmented after the 7-day abstinence period. These results suggest that sensitization of the DA system may have an important role in the early stages of drug abuse and may drive the increased drug seeking and taking that characterize the transition to uncontrolled drug use. Human data suggest that intermittency, sensitization, and periods of abstinence have an integral role in the process of addiction, highlighting the importance of utilizing pre-clinical models that integrate these phenomena, and suggesting that IntA paradigms may serve as novel models of human addiction. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2015

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

**Subject Headings:** [\\*Cocaine](#)  
[\\*Dopamine](#)  
[\\*Drug Addiction](#)  
[\\*Drug Seeking](#)  
[Drug Self Administration](#)  
[Rats](#)

**Source:** PsycINFO

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

#### 49. Hypoactivation of the ventral and dorsal striatum during reward and loss anticipation in antipsychotic and mood stabilizer-naïve bipolar disorder.

**Citation:** Neuropsychopharmacology, February 2015, vol./is. 40/3(658-666), 0893-133X;1740-634X (Feb 2015)

**Author(s):** Yip, Sarah W; Worhunsky, Patrick D; Rogers, Robert D; Goodwin, Guy M

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**Institution:** Department of Psychiatry, University of Oxford, Oxford, United Kingdom; Department of Psychiatry, University of Oxford, Oxford, United Kingdom; Department of Psychiatry, University of Oxford, Oxford, United Kingdom; Department of Psychiatry, University of Oxford, Oxford, United Kingdom

**Language:** English

**Abstract:** Increased activity within known reward-processing neurocircuitry (eg, ventral striatum, VS) has been reported among medicated individuals with bipolar disorder (BD) I and II. However, such findings are confounded by the potential ameliorative effects of moodstabilizing and antipsychotic medications on neural activations. This study tests the hypothesis that a pathophysiological locus of alterations in reward processing is present within the striatum in antipsychotic and lithium-naïve individuals with BD. Twenty antipsychotic and lithium-naïve individuals with BD II or BD not-otherwise specified (NOS) and 20 matched healthy comparison individuals participated in functional magnetic resonance imaging during the performance of a monetary incentive delay task. Between-group comparisons were conducted using small-volume correction focusing on

orthogonal a priori regions of interest centered in the VS and dorsal striatum (DS), respectively. During reward anticipation, unmedicated individuals with BD II/NOS had decreased activity within the DS (but not VS). During loss anticipation, on the other hand, decreased activation within both the VS and DS was observed. Across all participants, DS activity (during reward anticipation) was positively associated with putamen volume. This is the first report of decreased dorsal and ventral striatal activity among unmedicated individuals with BD II/NOS. These data contradict a simple 'reward hypersensitivity' model of BD, and add to a growing body of literature suggesting that blunted reward processing may be a vulnerability factor for both mood- and addiction-related disorders. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2015

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

**Subject Headings:** \*Bipolar Disorder  
\*Neuroleptic Drugs  
\*Rewards  
\*Mood Stabilizers  
Emotional States  
Striatum

**Source:** PsycINFO

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

#### 50. Alcohol-induced changes in conflict monitoring and error detection as predictors of alcohol use in late adolescence.

**Citation:** Neuropsychopharmacology, February 2015, vol./is. 40/3(614-621), 0893-133X;1740-634X (Feb 2015)

**Author(s):** Korucuoglu, Ozlem; Gladwin, Thomas E; Wiers, Reinout W

**Correspondence Address:** Korucuoglu, Ozlem: Department of Developmental Psychology, University of Amsterdam, Weesperplein 4, Amsterdam, Netherlands, 1018 XA, o.korucuoglu@uva.nl

**Institution:** Addiction, Development and Psychopathology (ADAPT)-Lab, Department of Psychology, University of Amsterdam, Amsterdam, Netherlands; Addiction, Development and Psychopathology (ADAPT)-Lab, Department of Psychology, University of Amsterdam, Amsterdam, Netherlands; Addiction, Development and Psychopathology (ADAPT)-Lab, Department of Psychology, University of Amsterdam, Amsterdam, Netherlands

**Language:** English

**Abstract:** Adolescence is a vulnerable period for the development of substance use and related problems. Understanding how exposure to drugs influences the adolescent brain could reveal mechanisms underlying risk for addiction later in life. In the current study, 87 adolescents (16-20-year olds; the local legal drinking age was 16, allowing the inclusion of younger subjects than usually possible) underwent EEG measurements during a Go/No-Go task with and without alcohol cues; after placebo and a low dose of alcohol (0.45 g/kg). Conflict monitoring and error detection processes were investigated with the N2 and the error-related negativity (ERN) ERP components. Participants were followed-up after 6 months to assess changes in alcohol use. The NoGo-N2 was larger for alcohol cues and acute alcohol decreased the amplitude of the NoGo-N2 for alcohol cues. ERN amplitude was blunted for alcohol cues. Acute alcohol decreased the amplitude of the ERN, specifically for control cues. Furthermore, the differences in ERN for alcohol cues between the placebo and alcohol conditions predicted alcohol use 6 months later subjects who showed stronger blunting of the ERN after acute alcohol were more likely to return to more moderate drinking patterns. These results suggest that cues signalling reward opportunities might activate a go-response mode and larger N2 (detection of increased conflict) for these cues might be necessary for inhibition. The ERN results suggest a deficiency in the monitoring system for alcohol cues. Finally, a lack of

alcohol-induced deterioration of error monitoring for cues with high salience might be a vulnerability factor for alcohol abuse in adolescents. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2015

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

**Subject Headings:** [\\*Alcohol Abuse](#)  
[\\*Cues](#)  
[\\*Evoked Potentials](#)  
[\\*Response Inhibition](#)

**Source:** PsycINFO

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

**51. High locomotor reactivity to novelty is associated with an increased propensity to choose saccharin over cocaine: New insights into the vulnerability to addiction.**

**Citation:** Neuropsychopharmacology, February 2015, vol./is. 40/3(577-589), 0893-133X;1740-634X (Feb 2015)

**Author(s):** Vanhille, Nathalie; Belin-Rauscent, Aude; Mar, Adam C; Ducret, Eric; Belin, David

**Correspondence Address:** Belin, David: Department of Pharmacology, University of Cambridge, Tennis Court Road, Cambridge, United Kingdom, CB2 1PD, bdb26@cam.ac.uk

**Institution:** INSERM CIC-1402, Universite de Poitiers, Ecole Doctorate Biosante, Poitiers, France; Department of Pharmacology, University of Cambridge, Cambridge, United Kingdom; Department of Psychology, Behavioural and Clinical Neuroscience Institute, University of Cambridge, Cambridge, United Kingdom; INSERM, Avenir Team Psychobiology of Compulsive Disorders, Universite de Poitiers, Pole Biologie Sante, Poitiers, France; Department of Pharmacology, University of Cambridge, Cambridge, United Kingdom

**Language:** English

**Abstract:** Drug addiction is associated with a relative devaluation of natural or socially-valued reinforcers that are unable to divert addicts from seeking and consuming the drug. Before protracted drug exposure, most rats prefer natural rewards, such as saccharin, over cocaine. However, a subpopulation of animals prefer cocaine over natural rewards and are thought to be vulnerable to addiction. Specific behavioral traits have been associated with different dimensions of drug addiction. For example, anxiety predicts loss of control over drug intake whereas sensation seeking and sign-tracking are markers of a greater sensitivity to the rewarding properties of the drug. However, how these behavioral traits predict the disinterest for natural reinforcers remains unknown. In a population of rats, we identified sensation seekers (HR) on the basis of elevated novelty-induced locomotor reactivity, high anxious rats (HA) based on the propensity to avoid open arms in an elevated-plus maze and sign-trackers (ST) that are prone to approach, and interaction with, reward-associated stimuli. Rats were then tested on their preference for saccharin over cocaine in a discrete-trial choice procedure. We show that HR rats display a greater preference for saccharin over cocaine compared with ST and HA whereas the motivation for the drug was comparable between the three groups. The present data suggest that high locomotor reactivity to novelty, or sensation seeking, by predisposing to an increased choice toward non-drug rewards at early stages of drug use history, may prevent the establishment of chronic cocaine use. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: American College of Neuropsychopharmacology; YEAR: 2015

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

**Subject Headings:** [\\*Anxiety](#)  
[\\*Cocaine](#)  
[\\*Drug Self Administration](#)

\*Saccharin  
 \*Sensation Seeking  
 Drug Addiction  
 Rats

**Source:** PsycINFO

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

## 52. Linking loneliness, shyness, smartphone addiction symptoms, and patterns of smartphone use to social capital.

**Citation:** Social Science Computer Review, February 2015, vol./is. 33/1(61-79), 0894-4393;1552-8286 (Feb 2015)

**Author(s):** Bian, Mengwei; Leung, Louis

**Correspondence Address:** Leung, Louis: Chinese University of Hong Kong, Shatin, Hong Kong, louisleung@cuhk.edu.hk

**Institution:** School of Journalism & Communication, Chinese University of Hong Kong, Shatin, Hong Kong; School of Journalism & Communication, Chinese University of Hong Kong, Shatin, Hong Kong

**Language:** English

**Abstract:** The purpose of this study is to explore the roles of psychological attributes (such as shyness and loneliness) and smartphone usage patterns in predicting smartphone addiction symptoms and social capital. Data were gathered from a sample of 414 university students using online survey in Mainland China. Results from exploratory factor analysis identified five smartphone addiction symptoms: disregard of harmful consequences, preoccupation, inability to control craving, productivity loss, and feeling anxious and lost, which formed the Smartphone Addiction Scale. Results show that the higher one scored in loneliness and shyness, the higher the likelihood one would be addicted to smartphone. Furthermore, this study shows the most powerful predictor inversely affecting both bonding and bridging social capital was loneliness. Moreover, this study presents clear evidence that the use of smartphones for different purposes (especially for information seeking, sociability, and utility) and the exhibition of different addiction symptoms (such as preoccupation and feeling anxious and lost) significantly impacted social capital building. The significant links between smartphone addiction and smartphone usage, loneliness, and shyness have clear implications for treatment and intervention for parents, educators, and policy makers. Suggestions for future research are discussed. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** \*Addiction  
 \*Loneliness  
 \*Social Capital  
 \*Timidity  
 \*Cellular Phones  
 Symptoms

**Source:** PsycINFO

## 53. Examining the relationship between e-social networks and the communication behaviors of Generation 2000 (Millennials) in Turkey.

**Citation:** Social Science Computer Review, February 2015, vol./is. 33/1(43-60), 0894-4393;1552-8286 (Feb 2015)

**Author(s):** Latif, Hasan; Uckun, C. Gazi; Demir, Baris

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**Institution:** Sakarya University, Faculty of Management, Sakarya, Turkey; Kocaeli University, Hereke Vocational School, Kocaeli, Turkey; Kocaeli University, Hereke Vocational School, Kocaeli, Turkey

**Language:** English

**Abstract:** The information revolution has shaped a new generation. Our study focused on the relation between the social networks that benefit from the opportunities arising from information technologies and the communication behaviors of Generation 2000 university students. According to the findings of this research, in Turkey, university students' use of mobile Internet and social networks is increasing and becoming widespread when compared to that observed in the previous years. For both Generation 2000 and others in Turkey, Facebook is the preferred network. In contrast to the expectations, our study showed that members of Generation 2000 in Turkey do not exhibit difficulty in using electronic communication. These technologies prevent face-to-face communication, determine social networks to a certain degree, and remove the above-mentioned contradiction. We found that Generation 2000 in Turkey is aware of information technology and the possible negative effects of electronic social networks. Finally, we noted that Generation 2000 in Turkey is addicted neither to the Internet nor to electronic social networks. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Communication Skills](#)  
[\\*Electronic Communication](#)  
[\\*Information Technology](#)  
[\\*Social Networks](#)  
[\\*Generational Differences](#)

**Source:** PsycINFO

#### 54. Prevalence of pathological Internet use in a representative German sample of adolescents: Results of a latent profile analysis.

**Citation:** Psychopathology, January 2015, vol./is. 48/1(25-30), 0254-4962;1423-033X (Jan 2015)

**Author(s):** Wartberg, Lutz; Kriston, Levente; Kammerl, Rudolf; Petersen, Kay-Uwe; Thomasius, Rainer

**Correspondence Address:** Wartberg, Lutz: German Center for Addiction Research in Childhood and Adolescence (DZSKJ), University Medical Center Hamburg-Eppendorf (UKE), Martinistrasse 52, Hamburg, Germany, DE-20246, lwartber@uke.de

**Institution:** German Center for Addiction Research in Childhood and Adolescence, University Medical Center Hamburg-Eppendorf, Hamburg, Germany; Department of Medical Psychology, University Medical Center Hamburg-Eppendorf, Hamburg, Germany; University of Hamburg, Hamburg, Germany; German Center for Addiction Research in Childhood and Adolescence, University Medical Center Hamburg-Eppendorf, Hamburg, Germany; German Center for Addiction Research in Childhood and Adolescence, University Medical Center Hamburg-Eppendorf, Hamburg, Germany

**Language:** English

**Abstract:** Background: Pathological internet use is of increasing significance in several industrial nations. Sampling and Methods: We surveyed a representative German quota sample of 1,723 adolescents (aged 14-17 years) and 1 caregiver each. We conducted a latent profile analysis to identify a high-risk group for pathological internet use. Results: Overall, 3.2% of the sample formed a profile group with pathological internet use. In contrast to other published studies, the results of the latent profile analysis were verified not only by self-assessments of the youth's but also by external ratings of the caregivers. In addition to the pathological internet use, the high-risk group showed lower levels of family functioning and life satisfaction as well as more problems in family interactions. Conclusions: The results showed a considerable prevalence of pathological internet use in

adolescents and emphasized the need for preventive and therapeutic approaches. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: S. Karger AG, Basel; YEAR: 2014  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Epidemiology](#)  
[\\*Internet](#)  
[\\*Internet Addiction](#)  
[\\*Life Satisfaction](#)  
**Source:** PsycINFO  
**Full Text:** Available from *Karger Medical and Scientific Publishers* in *Psychopathology*; Note: ;  
 Collection notes: Academic-License: Only available from an NHS networked computer

#### 55. Substance use disorders and co-morbidities among Asian Americans and Native Hawaiians/Pacific Islanders.

**Citation:** Psychological Medicine, February 2015, vol./is. 45/3(481-494), 0033-2917;1469-8978 (Feb 2015)  
**Author(s):** Wu, L.-T; Blazer, D. G  
**Correspondence Address:** Wu, L.-T.: Department of Psychiatry and Behavioral Sciences, School of Medicine, Duke University Medical Center, Durham, NC, US, litzy.wu@duke.edu  
**Institution:** Department of Psychiatry and Behavioral Sciences, School of Medicine, Duke University Medical Center, Durham, NC, US; Department of Psychiatry and Behavioral Sciences, School of Medicine, Duke University Medical Center, Durham, NC, US  
**Language:** English  
**Abstract:** Background: Asian Americans (AAs) and Native Hawaiians/Pacific Islanders (NHs/PIs) are the fastest growing segments of the US population. However, their population sizes are small, and thus AAs and NHs/PIs are often aggregated into a single racial/ethnic group or omitted from research and health statistics. The groups' substance use disorders (SUDs) and treatment needs have been under-recognized. Method: We examined recent epidemiological data on the extent of alcohol and drug use disorders and the use of treatment services by AAs and NHs/PIs. Results: NHs/PIs on average were less educated and had lower levels of household income than AAs. Considered as a single group, AAs and NHs/PIs showed a low prevalence of substance use and disorders. Analyses of survey data that compared AAs and NHs/PIs revealed higher prevalences of substance use (alcohol, drugs), depression and delinquency among NHs than among AAs. Among treatment-seeking patients in mental healthcare settings, NHs/PIs had higher prevalences of DSM-IV diagnoses than AAs (alcohol/drug, mood, adjustment, childhood-onset disruptive or impulse-control disorders), although co-morbidity was common in both groups. AAs and NHs/PIs with an SUD were unlikely to use treatment, especially treatment for alcohol problems, and treatment use tended to be related to involvement with the criminal justice system. Conclusions: Although available data are limited by small sample sizes of AAs and NHs/PIs, they demonstrate the need to separate AAs and NHs/PIs in health statistics and increase research into substance use and treatment needs for these fast-growing but understudied population groups. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Cambridge University Press; YEAR: 2014  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Addiction](#)  
[\\*Asians](#)  
[\\*Drug Abuse](#)  
[\\*Morbidity](#)  
[Comorbidity](#)  
[Hawaii Natives](#)  
[Major Depression](#)  
[Treatment](#)

**Source:** PsycINFO

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

#### 56. Confidentiality protections versus collaborative care in the treatment of substance use disorders.

**Citation:** Directions in Psychiatry, 2014, vol./is. 34/3(201-211), 0891-3870 (2014)

**Author(s):** Manuel, Jennifer K; Newville, Howard; Larios, Sandra E; Sorensen, James L

**Correspondence Address:** Newville, Howard, howard.newville@ucsf.edu

**Institution:** San Francisco General Hospital, Department of Psychiatry, University of California, San Francisco, San Francisco, CA, US; St. Luke's-Roosevelt Hospital, Behavioral Science Research Unit, New York, NY, US; San Francisco General Hospital, Department of Psychiatry, University of California, San Francisco, San Francisco, CA, US; Department of Psychiatry, University of San Francisco, San Francisco, San Francisco, CA, US

**Language:** English

**Abstract:** Learning Objectives: Clinicians will review the current policies regarding patient confidentiality issues and substance use disorder (SUD) treatment. Readers will consider how to protect their patients in this era of collaborative care while maintaining rapid communication among healthcare providers. As this lesson discusses substance use disorders, the implications can be considered among other medical conditions. Lesson Abstract: Practitioners in federally-assisted substance use disorder (SUD) treatment programs are faced with increasingly complex decisions when addressing patient confidentiality issues. Recent policy changes, intended to make treatment more available and accessible, are having an impact on delivery of SUD treatment in the United States. The addition of electronic health records provides opportunity for more rapid and comprehensive communication between patients' primary and SUD care providers while promoting a collaborative care environment. This shift toward collaborative care is complicated by the special protections that SUD documentation receives in SUD treatment programs, which vary depending on what care is provided and the setting where the patient is treated. This lesson explores the special protections for substance abuse documentation, discrepancies in treatment documentation, ways to deal with these issues in clinical practice, and the need for more knowledge about how to harmonize treatment in the SUD and primary care systems. Competency Areas: This lesson addresses the issue of ethical decision making for clinicians working in substance use disorder treatment programs. With the recent changes in policies that make substance use disorder treatment more available and the rise in the use of electronic health records to facilitate collaboration, clinicians often face questions regarding the protections for substance use disorder documentation, the involvement of the legal system, and the involvement of other parties in the treatment program. Upon completion of this lesson, readers will have a better understanding of the recent policy changes regarding substance use disorder treatment and will provide clinicians with a better understanding of ethical practice regarding collaboration and consultation. (PsycINFO Database Record (c) 2015 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: Manuel et al; licensee BioMed Central Ltd.; YEAR: 2013

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Medical Records](#)  
[\\*Privileged Communication](#)  
[\\*Treatment](#)

**Source:** PsycINFO

**57. Sexual addiction or hypersexual disorder: Clinical implications for assessment and treatment.**

- Citation:** Directions in Psychiatry, 2014, vol./is. 34/3(185-195), 0891-3870 (2014)
- Author(s):** Weinstein, Aviv
- Institution:** Department of Behavioral Science, University of Ariel, Ariel, Israel
- Language:** English
- Abstract:** Learning Objectives: Clinicians will review recent evidence for the assessment and the psychobiological basis and treatment of sexual addiction, including diagnosis, comorbidity with other psychiatric disorders, and treatment studies. Instruments for assessing sexual addiction are discussed, as well as data on the neuropsychological and biological basis of this disorder. Lesson Abstract: Sexual addiction, which is also known as hypersexual disorder, is associated with severe psychosocial problems and risk-taking behaviors. People who suffer from sexual addiction or hypersexual disorder have reported having obsessive thoughts, fantasies, and problematic behaviors, including excessive masturbation, cybersex, pornography use, sexual behavior with consenting adults, telephone sex, and strip club visitation. Sexual addiction is not included in the Diagnostic and Statistical Manual of Mental Disorders. Several screening questionnaires have been developed over the years for the diagnosis of sexual addiction or hypersexual disorder. Prevalence rates of sexual addiction range from 3% to 6%. There is a co-occurrence of sexual addiction with other addictions and psychiatric disorders such as anxiety disorders, posttraumatic stress disorder (PTSD), alcohol and drug abuse, pathological gambling, and attention deficit hyperactivity disorder (ADHD). Several treatment studies have shown the efficacy of the combination of pharmacological treatment with cognitive-behavior therapy. Competency Areas: This lesson addresses the gap in learning in the area of sexual addiction or hypersexual disorder, including diagnosis, assessment, prevalence, comorbidity, cognitive-behavioral and neurobiological mechanisms, and psychological and pharmacological treatment. Many clinicians lack understanding of how to adequately diagnose and treat sexual addiction or hypersexual disorder, which often goes underreported by patients. Pharmacological treatment with SSRIs together with cognitive-behavior therapy may be useful for treating sexual addiction. Upon the conclusion of this lesson, readers will have a better understanding of sexual addiction or hypersexual disorder and its diagnosis and treatment. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Hypersexuality](#)  
[\\*Impulsiveness](#)  
[\\*Measurement](#)  
[\\*Sexual Addiction](#)  
[\\*Treatment](#)  
[Cognitive Behavior Therapy](#)  
[Comorbidity](#)  
[Drug Therapy](#)  
[Psychobiology](#)
- Source:** PsycINFO

**58. Reliability and validity of Mobile phone addiction index for Chinese college students.**

- Citation:** Chinese Journal of Clinical Psychology, October 2014, vol./is. 22/5(835-838), 1005-3611 (Oct 2014)
- Author(s):** Huang, Hai; Niu, Lu-ying; Zhou, Chun-yan; Wu, He-ming
- Correspondence Address:** Huang, Hai: Department of Psychology, China University of Geosciences(Wuhan), Wuhan, China, 430074, huanghai76@163.com
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Department of Psychology, China University of Geosciences (Wuhan), Wuhan, China;  
Department of Psychology, China University of Geosciences (Wuhan), Wuhan, China

**Language:**

Chinese

**Abstract:**

**Objective:** To test the reliability and validity of the Chinese version of Mobile phone addiction index (MPAI). **Methods:** A sample of 1392 college students was tested, in which 50 students were selected for re-test five weeks later. Meanwhile, The Symptom Checklist-90 (SCL-90) and General Well-Being Scale (GWB) were selected as the criterion measurement. **Results:** The results of confirmatory factor analysis support the first-order four-factor structure of model 2, the fit indices were  $2/df = 8.85$ ,  $RMSEA = 0.075$ ,  $NFI = 0.97$ ,  $IFI = 0.97$ ,  $CFI = 0.97$ ,  $GFI = 0.92$ , all meeting the criteria standards for adequacy of fit. The critical ratios of all the items in Chinese version of MPAI were significantly ( $P < 0.001$ ), the correlation between each item and the total score ranged from 0.57 to 0.71. The Cronbach's coefficients of the total scale, inability to control carving subscale, the feeling anxious and lost subscale, the withdrawal subscale and the productivity loss subscale respectively were 0.91, 0.84, 0.83, 0.87 and 0.81, and the test-retest reliability after 5 weeks were 0.69, 0.61, 0.70, 0.69 and 0.60 respectively. The total score and four factors of the Chinese version of MPAI showed a significantly positive correlation with that of the SCL-90 score ( $r = 0.27\sim 0.54$ ,  $P < 0.001$ ), and significantly negative correlated with the score on the General Well-being Scale ( $r = -0.38\sim -0.49$ ,  $P < 0.001$ ). **Conclusion:** The Chinese version of Mobile phone addiction index has good reliability and validity, which can be used as a useful tool to research mobile phone addiction in Chinese college students. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Publication Type:**

Journal; Peer Reviewed Journal

**Subject Headings:**

\*Test Reliability  
\*Test Validity  
\*Cellular Phones  
Addiction  
Anxiety  
College Students  
Internet  
Psychometrics

**Source:**

PsycINFO

**59. From drug use to drug abstinence: A qualitative research of the mental process of drug addicts under compulsory rehabilitation from drug use to drug abstinence.**

**Citation:**

Chinese Journal of Clinical Psychology, October 2014, vol./is. 22/5(812-815), 1005-3611 (Oct 2014)

**Author(s):**

Gao, Peng-cheng; Yang, Mei; Liu, Xiong-wen; Li, Ke-sheng; Li, Rui; Xiao, Shui-yuan

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**Language:**

Chinese

**Abstract:**

**Objective:** To explore the mental process of addicts from drug use to drug abstinence, with focus on "reasons for drug use" and "how to abstain from drugs". **Methods:** 16 drug addicts under compulsory rehabilitation were selected, data was collected through in-depth interviews and analyzed in the method of the grounded theory. **Results:** (1) Before the drug abuse, other problems, physical or psychological problems has been existing, which may lead to drug abuse. (2) drug abuse gives rise to cognitive dissonance, that is the difference between drug taking and the harm of drug. Then the drug addicts often take incorrect methods to solve the imbalance. **Conclusion:** (1) The cause of drug

abuse is not only a factor in the current environment, as well as the drug curiosity, shallow ignorance of psychological factors, drug abuse behavior behind the deeper reason. (2) Changing cognition and implicit cognition of drug addicts is the breakthrough of psychological treatment of drug abuse. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcohol Rehabilitation](#)  
[\\*Drug Abstinence](#)  
[\\*Drug Abuse](#)  
[Drugs](#)  
[Grounded Theory](#)  
[Psychological Development](#)

**Source:** PsycINFO

#### 60. The relationship between gratitude, coping styles and online gaming addiction in left-behind children.

**Citation:** Chinese Journal of Clinical Psychology, October 2014, vol./is. 22/5(804-807), 1005-3611 (Oct 2014)

**Author(s):** Wei, Chang; Xu, Qian; Sun, Guo-jian; Yu, Cheng-fu; Lu, Hui-xing; Zhang, Wei

**Correspondence Address:** Zhang, Wei: School of Psychology, South China Normal University, Guangzhou, China, 510631, zhangwei@scnu.edu.cn

**Institution:** School of Education, Hubei University of Science and Technology, Xianning, China; School of Educational Science, Hubei Normal University, Huangshi, China; School of Psychology, South China Normal University, Guangzhou, China; School of Psychology, South China Normal University, Guangzhou, China; School of Education, Hubei University of Science and Technology, Xianning, China; School of Psychology, South China Normal University, Guangzhou, China

**Language:** Chinese

**Abstract:** Objective: To explore the relationship among gratitude, coping styles, and online gaming addiction in left-behind children. Method: 482 left-behind children were tested with gratitude questionnaire, simplified coping style questionnaire, and online gaming addiction questionnaire. Results: (1) Gratitude was significantly negative associated with online gaming addiction; (2) the effect of gratitude on online gaming addiction was totally mediated by negative coping style. However, the mediating effect of positive coping style among which was not significant. Conclusion: Gratitude is an important protecting factor for online gaming addiction in left-behind children, and negative coping style may mediate this protecting effect. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Computer Games](#)  
[\\*Gratitude](#)  
[\\*Internet](#)  
[Childhood Development](#)  
[Coping Behavior](#)  
[Personality Traits](#)

**Source:** PsycINFO

#### 61. Psychosocial risk factors associated with Internet addiction of college students.

**Citation:** Chinese Journal of Clinical Psychology, October 2014, vol./is. 22/5(799-803), 1005-3611 (Oct 2014)

**Author(s):** Xi, Xiao-lan; Zhang, Man-ru; Cheng, Zao-huo; Shen, Li-ye; Li, Ping; Jin, Feng-xian

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**Institution:** Jiangnan University, Wuxi, China; Wuxi Mental Health Center, Wuxi, China; Wuxi Mental Health Center, Wuxi, China; Jiangnan University, Wuxi, China; Wuxi Mental Health Center, Wuxi, China; Wuxi Mental Health Center, Wuxi, China

**Language:** Chinese

**Abstract:** Objective: To investigate the psychosocial risk factors associated with Internet addiction in college students Methods: A total sample of 4, 866 College students(2122 boys, 2744 girls) were surveyed with the Young Internet Addiction Diagnostic Questionnaire(YDQ), NEO Five-Factor Inventory (NEO-FFI) and Family Upbringing Style Questionnaire (FUSQ). Six hundred and twenty-one(12.8%) of them met the Young Internet addiction diagnostic criteria (YDQ > 5). Results: (1) Prevalence of Internet addiction in boys (15.9%) was higher than girls (10.3%), minority (17.0%) than Han (12.5%), and management financial professional (23.8%) than bio-technical(1 1.4%) and humanities education (7.7%); Mutinomial logistic regression displayed that boys (B = 0.615), management financial professional (B = 1.237), and University freshmen (B = 0.114) were risk factors for Internet addiction. (2) Prevalence of Internet addiction of students with impulsive(15.4%), high neuroticism(16.1%) and low agreeableness(15.9%) were higher than other personality traits; Mutinomial logistic regression indicated that personality traits such as impulsive (B = 0.188), high neuroticism (B = 0.237), and low agreeableness (B = 0.210) were risk factors of Internet addiction. (3) Prevalence of Internet addiction were significant lower in students(9.5%-11.1%) who perceived positive parenting style than those perceived negative parenting style(15.2%-17.8%); Mutinomial logistic regression showed that father indulging (B = 0.504), mother control (B = 0.296) and father unprincipled protection (B = 0.226) were risk factors for Internet addiction. Conclusion: The psychosocial factors have important effects on college students Internet addiction, the boys, freshmen, management financial professional, impulsivity, high neuroticism, low agreeableness, father indulgence, mother control, father shielding may be risk factors for Internet addiction. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*College Students](#)  
[\\*Internet Addiction](#)  
[Parenting Style](#)  
[Psychosocial Factors](#)  
[Risk Factors](#)

**Source:** PsycINFO

## 62. No association between the ALDH2 promoter polymorphism rs886205, alcohol dependence, and risky alcohol consumption in a German population.

**Citation:** Psychiatric Genetics, February 2015, vol./is. 25/1(41-42), 0955-8829;1473-5873 (Feb 2015)

**Author(s):** Nassab, Mani Haschemi; Rhein, Mathias; Heese, Peter; Glahn, Alexander; Frieling, Helge; Linnebank, Michael; Bleich, Stefan; Kornhuber, Johannes; Heberlein, Annemarie; Grallert, Harald; Peters, Annette; Rawal, Rajesh; Strauch, Konstantin; Hillemacher, Thomas

**Correspondence Address:** Nassab, Mani Haschemi: Molecular Neurosciences Laboratory, Department of Psychiatry, Socialpsychiatry and Psychotherapy, Hannover Medical School, Feodor-Lynen Strasse 35, Hannover, Germany, 30625, hascheminassab.mani@mh-hannover.de

**Institution:** Department of Psychiatry, Socialpsychiatry and Psychotherapy, Center for Addiction Research (CARE), Hannover Medical School, Hannover, Germany; Molecular Neurosciences Laboratory, Department of Psychiatry, Socialpsychiatry and Psychotherapy, Hannover Medical School, Hannover, Germany; Department of Addiction and Psychotherapy, LVR-Clinic Bonn, Bonn, Germany; Department of Psychiatry, Socialpsychiatry and Psychotherapy, Center for Addiction Research (CARE), Hannover Medical School, Hannover, Germany; Department of Psychiatry, Socialpsychiatry and Psychotherapy, Center for Addiction Research (CARE), Hannover Medical School, Hannover, Germany; Department of Psychiatry and Psychotherapy, University Hospital,

Friedrich Alexander University of Erlangen-Nuremberg, Erlangen, Germany; Department of Psychiatry, Socialpsychiatry and Psychotherapy, Center for Addiction Research (CARE), Hannover Medical School, Hannover, Germany; Research Unit of Molecular Epidemiology, Ludwig-Maximilians Universitat, Munich, Germany; Department of Psychiatry, Socialpsychiatry and Psychotherapy, Center for Addiction Research (CARE), Hannover Medical School, Hannover, Germany; Institute of Genetic Epidemiology, Helmholtz Center Munich, German Research Center for Environmental Health, Munich, Germany; Institute of Epidemiology II, Helmholtz Center Munich, German Center for Diabetes Research, Munich, Germany; Department of Genetic Epidemiology, Institute of Medical Informatics, Biometry and Epidemiology, Ludwig-Maximilians Universitat, Munich, Germany; Department of Genetic Epidemiology, Institute of Medical Informatics, Biometry and Epidemiology, Ludwig-Maximilians Universitat, Munich, Germany; Department of Psychiatry, Socialpsychiatry and Psychotherapy, Center for Addiction Research (CARE), Hannover Medical School, Hannover, Germany

**Language:** English

**Abstract:** This study genotyped marker rs886205 in 352 alcohol-dependent patients according to ICD-10 (Heese et al., 2012) and two independent control cohorts that included 2742 (KORA S3) and 3175 (KORA S4) population-based controls. All individuals were of German descent and provided written informed consent. Genotype frequencies were in Hardy-Weinberg equilibrium and were as follows (patients/control KORA S3/control KORA S4): A/A =66.5/68.9/68.5, A/G =31.8 /28.0/28.2, G/G = 1.7/3.3/3.1. Our findings show for the first time that the functional ALDH2 promoter polymorphism rs886205 does not affect risk for alcohol dependence and risky alcohol consumption in German populations. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Country of Publication:** STATEMENT: All rights reserved. Unauthorized reproduction of this article is prohibited.; HOLDER: Wolters Kluwer Health, Inc.; YEAR: 2015

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Polymorphism](#)  
[Biological Markers](#)  
[Genetics](#)  
[Genotypes](#)  
[Risk Factors](#)

**Source:** PsycINFO

### 63. Drug testing and adherence monitoring in substance abuse patients.

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(621-631) (2015)

**Author(s):** Lampert, Steven Michael; Kaye, Alan David; Urman, Richard D; Manchikanti, Laxmaiah

**Correspondence Address:** Lampert, Steven Michael: Department of Anesthesiology, Perioperative and Pain Medicine, Brigham and Women's Hospital, Harvard Medical School, Boston, MA, US, steven.lampert@alumni.bcm.edu

**Institution:** Department of Anesthesiology, Perioperative and Pain Medicine, Brigham and Women's Hospital, Harvard Medical School, Boston, MA, US; Department of Anesthesiology, Louisiana State University Health Sciences Center, Louisiana State University Interim Hospital, New Orleans, LA, US; Department of Anesthesiology, Perioperative and Pain Medicine, Brigham and Women's Hospital, Harvard Medical School, Boston, MA, US; University of Louisville Kentucky, Paducah, KY, US

**Language:** English

**Abstract:** (from the chapter) A Russian proverb was espoused by former president Ronald Regan in the 1980s in negotiations with the Soviet leadership, "Trust, but verify." This same concept has been adopted by many physicians working with patients on chronic opioid therapy. Physicians that prescribe chronic opioid therapy have an ethical and legal responsibility to monitor for treatment adherence. One way to enhance the trust between the prescribing physician and the patient is to implement a comprehensive

adherence-monitoring program. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Usage Screening](#)  
[\\*Monitoring](#)

**Source:** PsycINFO

#### 64. The face of addiction.

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(619-620) (2015)

**Author(s):** Short, Debra

**Correspondence Address:** Short, Debra, 10192 Creek Trail Circle, Stockton, CA, US, 95209, morleybaby@comcast.net

**Language:** English

**Abstract:** (from the chapter) Who is an addict? I have been a retail pharmacist for almost 15 years, and I learned very quickly how to identify an addict, or, more gently stated, I learned how to recognize patients who struggled with substance abuse issues. I saw the patient recovering from surgery who became dependent on opiates, the tired-looking man coming to the pharmacy to buy needles for his "diabetes", the nervous-looking woman attempting to purchase multiple boxes of pseudoephedrine, the emergency-room-frequenter bringing almost daily prescriptions for painkillers and muscle relaxants. What I failed to realize during all of my years of practice was that the face of addiction would actually be my own. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[Drug Therapy](#)  
[Muscles](#)

**Source:** PsycINFO

#### 65. Effects of substance abuse on the cardiovascular system and its management.

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(603-617) (2015)

**Author(s):** Malik, Adnan Khan; Melookaran, Ann Marie; Simon, Gnana S; Zhu, Qingbing

**Correspondence Address:** Zhu, Qingbing: Department of Anesthesiology, Yale University, School of Medicine, 333 Cedar Street, New Haven, CT, US, 06510-8051, qingbing.zhu@yale.edu

**Institution:** Department of Anesthesiology, Yale-New Haven Hospital, New Haven, CT, US;  
Department of Anesthesiology, Yale-New Haven Hospital, New Haven, CT, US;  
Department of Anesthesiology, Yale-New Haven Hospital, New Haven, CT, US;  
Department of Anesthesiology, Yale University, School of Medicine, New Haven, CT, US

**Language:** English

**Abstract:** (create) This chapter focuses on effects of substance abuse on the cardiovascular system and its management. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Cardiovascular System](#)  
[\\*Drug Abuse](#)  
[Management](#)

**Source:** PsycINFO

#### 66. Between social welfare and public health: Substance abuse and co-occurring disability.

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(593-602) (2015)

**Author(s):** Kim, Song; Kaye, Alan David

**Correspondence Address:** Kim, Song: Tulane University School of Medicine, 1430 Tulane Avenue, New Orleans, LA, US, 70112, skim17@tulane.edu

**Institution:** Tulane University School of Medicine, New Orleans, LA, US; Department of Anesthesiology, Louisiana State University Health Sciences Center, Louisiana State University Interim Hospital, New Orleans, LA, US

**Language:** English

**Abstract:** (from the chapter) Through the decades, disability was defined along a number of dimensions. From the purview of labor and law, the US Social Security disability programs introduced in 1945 [I] framed a disabled individual as one unable to fully participate in civic and economic activities, requiring financial assistance from the state. Americans with Disability Act of 1990 operates on a sociopolitical model, in which a disabled person is entitled to reasonable accommodation in order to function in society without discrimination. Both reflect what scholar Brucker deems a "positive" social construction of disability, that of equality and nondiscrimination. Introduction of substance abuse as a disability does not neatly fit into this discourse of charity and integration. Some states like Louisiana and Michigan have considered and imposed laws to require drug testing for welfare recipients, banning those who test positive from food stamps, and other aids. Chicago Housing Authority, for example, has a policy requiring random drug testing of residents without grounds for suspicion. Along the same lines, ADA excludes active users of illicit substances from employment and to give tests for illegal use of drugs, a "punitive" model consistent with the above. The above purviews of medicine and law paint an ambiguous picture of substance abuse that spans a spectrum between irresponsible personal choice and disability. The chapter further elaborates on this biaxial model of substance abuse in the historical context of Social Security disability programs and current public health guidelines. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Disabilities](#)  
[\\*Drug Abuse](#)  
[\\*Public Health](#)  
[\\*Social Casework](#)

**Source:** PsycINFO

#### 67. Pain, addiction, depression (PAD): Assessment of pain and addiction, the neurobiology of pain.

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(567-592) (2015)

**Author(s):** Hansen, Hans C

**Correspondence Address:** Hansen, Hans C.: Pain Relief Center, Conover, NC, US, hhansen@painreliefcenters.com

**Institution:** Pain Relief Center, Conover, NC, US

**Language:** English

**Abstract:** (from the chapter) Medicine requires observation to develop a diagnostic conclusion. Trending from the traditional concept of "stand by your diagnosis," physicians and providers are finding themselves much better suited to maintain a large differential diagnosis, and keep that differential diagnosis dynamic and fluid. We cannot see, touch, feel, or measure pain, and observation many times verifies reality. As pain is a subject of interpretation and a very personal experience, nowhere else in medicine will we be challenged with the assumption that what the patient is telling us is correct, and we have little opportunity to follow the timeline, or "the story," to a true point of validation. In other words, many times pain is just going to have to be assumed to be present, and the patient is telling you the correct information that the clinician needs to have to treat them

effectively, in a safe and controlled environment. When controlled substances are used, however, the assumption that pain is present has to be weighed against the risk/reward benefit of a chosen therapy. We hope that that risk/ reward benefit remains in both the provider's favor, as well as the patient's, but as is often the case, there is no perfect world. More often, the provider of care and the patient experience peaks and valleys of success and frustration. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Major Depression](#)  
[\\*Neurobiology](#)  
[\\*Pain](#)

**Source:** PsycINFO

#### 68. Substance abuse and respiratory disease.

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**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(537-548) (2015)

**Author(s):** Knolle, Martin D; Chatterji, Sumit; Pulimood, Thomas B

**Correspondence Address:** Pulimood, Thomas B.: West Suffolk Hospital, A University of Cambridge Teaching Hospital, Bury St. Edmunds, United Kingdom, tpulimood@nhs.net

**Institution:** Addenbrooke's Hospital, Cambridge University Hospital NHS Foundation Trust, Cambridge, United Kingdom; Respiratory Department, Peterborough & Stamford Hospitals, Cambridge, United Kingdom; West Suffolk Hospital, A University of Cambridge Teaching Hospital, Bury St. Edmunds, United Kingdom

**Language:** English

**Abstract:** (from the chapter) This chapter focuses on the effects of drug abuse on the lung. Perhaps unsurprisingly, we will focus on the effects of smoking and possible strategies to reduce smoking. In addition, we will examine ways in which other drugs can affect the lung. Broadly, substance abuse can either affect the lung directly (mainly through smoke inhalation), or indirectly by depressing the respiratory drive or by lowering immune defenses resulting in infection. Furthermore, substance abuse often goes hand in hand with other psychosocial problems, which can pose additional challenges in treatment. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Psychosocial Factors](#)  
[\\*Respiratory Distress](#)  
[\\*Tobacco Smoking](#)  
[Lung](#)  
[Respiratory Tract Disorders](#)

**Source:** PsycINFO

#### 69. Podiatric problems and management in patients with substance abuse.

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**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(515-536) (2015)

**Author(s):** Gambardella, Gabriel V; Enu, Chioma N. Odukwe; Schmidt, Brian M; Blume, Peter A

**Correspondence Address:** Gambardella, Gabriel V.: Department of Podiatric Medicine and Surgery, Yale New Haven Hospital, New Haven, CT, US, gvg5@caa.columbia.edu

**Institution:** Department of Podiatric Medicine and Surgery, Yale New Haven Hospital, New Haven, CT, US; Department of Podiatric Medicine and Surgery, Yale New Haven Hospital, New Haven, CT, US; Department of Podiatric Medicine and Surgery, Yale New Haven Hospital, New Haven, CT, US; Department of Podiatric Medicine and Surgery, Yale New Haven Hospital, New Haven, CT, US

**Language:** English

**Abstract:** (from the chapter) Postoperative pain is not uncommon following foot and ankle surgery, particularly in cases of major reconstruction or trauma surgery. Perioperative pain control is crucial to the overall outcome of surgery and achieving patient satisfaction. Management of acute postsurgical pain becomes a more challenging task in patients with a history of substance abuse, particularly that of opioid dependence. This chapter aims to discuss postoperative pain in pediatric surgery, as well as the acute pain pathway and different therapeutic modalities of achieving pain control. Furthermore, we highlight the various clinical presentations made to the pediatric surgeon that may indicate substance abuse and the subsequent management of the pathology. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Client Satisfaction](#)  
[\\*Drug Abuse](#)  
[\\*Surgery](#)  
[\\*Trauma](#)

**Source:** PsycINFO

#### 70. Substance abuse among healthcare professionals.

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**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(503-513) (2015)

**Author(s):** Telusca, Natacha; Ganguly, Kingsuk; Jeter, Chrystina; Newmark, Jordan L

**Correspondence Address:** Telusca, Natacha: Department of Anesthesiology Perioperative and Pain Medicine, Stanford University School of Medicine, 450 Broadway Street, Pav C, 4th Floor, Redwood City, CA, US, 94061, ntelusca@gmail.com

**Institution:** Department of Anesthesiology Perioperative and Pain Medicine, Stanford University School of Medicine, Redwood City, CA, US; Department of Anesthesiology Perioperative and Pain Medicine, Stanford University School of Medicine, Redwood City, CA, US; Department of Anesthesiology Perioperative and Pain Medicine, Stanford University School of Medicine, Redwood City, CA, US; Department of Anesthesiology Perioperative and Pain Medicine, Stanford University School of Medicine, Redwood City, CA, US

**Language:** English

**Abstract:** (from the chapter) Substance-related impairment of healthcare professionals places the patient, provider, and general public at risk for harm. Although the information contained in this chapter can apply to any number of healthcare providers, the focus of this particular chapter will be on substance abuse among physicians. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Physicians](#)  
[\\*Risk Factors](#)  
[Health Personnel](#)

**Source:** PsycINFO

#### 71. Substance abuse in the elderly.

---

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(495-501) (2015)

**Author(s):** Babypaul, Danie; Czernicki, Michal; Kunnumpurath, Sreekumar

**Correspondence Address:** Babypaul, Danie: Department of Anesthetics, Royal Glamorgan Hospital, Ynysmaerdy, Llanlrisant, Rhondda Cynon Taf, United Kingdom, CF72 8XR, daniebp@yahoo.com



**Institution:** Department of Anesthetics, Royal Glamorgan Hospital, Rhondda Cynon Taf, United Kingdom; Department of Anesthesia and Pain Management, Nottingham University Hospital, Nottingham, NTT, United Kingdom; Department of Anesthetics and Pain Management, Epsom and St. Helier University Hospitals NHS Trust, Carshalton, United Kingdom

**Language:** English

**Abstract:** (from the chapter) Substance abuse is a complex problem in the elderly population. Substance misuse among the older population is largely overlooked and underreported. Many factors contribute to this, not least the fact that presentation may be atypical and hence easily missed by the medical practitioner. There may be many clues to its existence, provided the physician remains alert to these. Despite this it is quite comforting to know that once identified, the evidence to date suggests that older people may respond at least as well as younger people to treatment. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Aging](#)  
[\\*Drug Abuse](#)  
[\\*Problem Solving](#)  
[Medical Personnel](#)

**Source:** PsycINFO

## 72. Pregnancy and substance abuse.

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**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(453-494) (2015)

**Author(s):** Doulatram, Gulshan; Raj, Tilak D; Govindaraj, Ranganathan

**Correspondence Address:** Doulatram, Gulshan: Department of Anesthesiology, University of Texas Medical Branch, Galveston, TX, US, 73104, [gdoulair@utmb.edu](mailto:gdoulair@utmb.edu)

**Institution:** Department of Anesthesiology, University of Texas Medical Branch, Galveston, TX, US; Department of Anesthesiology, Oklahoma University Health Sciences, Oklahoma City, OK, US; Department of Anesthesiology, University of Texas Medical Branch, Galveston, TX, US

**Language:** English

**Abstract:** (from the chapter) Problematic substance abuse in pregnancy is prevalent in the US population. There are many challenges in the diagnosis and management of pregnant women with substance abuse disorders. Early identification of certain substance-dependencies in pregnant women improves maternal and fetal outcomes. Pregnancy in the substance dependent women should be co-managed by the obstetrician-gynecologist and addiction medicine specialist. Healthcare providers, including those outside obstetrics and gynecology, can make a significant impact on improving pregnancy outcomes by providing compassionate, non-judgmental, supportive care to these women with complex physical, emotional, social, and environmental characteristics of addiction. Infants born to women who used substances during pregnancy should be closely monitored by a pediatric healthcare provider for neonatal abstinence syndrome and other effects of maternal substance use. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Pregnancy Outcomes](#)  
[Pregnancy](#)  
[Health Personnel](#)

**Source:** PsycINFO

## 73. Pediatric drug use, misuse, and abuse.

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**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(445-452) (2015)

**Author(s):** Wang, Shu-Ming

**Correspondence Address:** Wang, Shu-Ming: Department of Anesthesiology, St. Francis Hospital, 114 Wood Land Street, Hartford, CT, US, 06105, smwang800@gmail.com

**Institution:** Department of Anesthesiology, St. Francis Hospital, Hartford, CT, US

**Language:** English

**Abstract:** (from the chapter) Addiction is a complex disease that no single factor can predict who will become an addict thus far age of first use, genetic predisposition, and environment are the main risk factors. Addiction is a developmental disease that usually begins in adolescence or even childhood when the brain is undergoing major changes. It is important to recognize that fact that the most serious, costly, and widespread adolescent health problems such as use of alcohol, tobacco, other drugs, and risk involvement behaviors are potentially preventable. Prevention of drug use and abuse in children and adolescents should be everyone's responsibility. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Usage](#)  
[\\*Pediatrics](#)  
[Adolescent Development](#)  
[Genetics](#)  
[Predisposition](#)  
[Risk Factors](#)

**Source:** PsycINFO

#### 74. Management of acute pain.

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**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(429-444) (2015)

**Author(s):** Fishman, Michael Alan; Thomas, Donna-Ann M

**Correspondence Address:** Fishman, Michael Alan: Department of Anesthesiology, Perioperative and Pain Medicine, Stanford University School of Medicine, Palo Alto, CA, US, fishman4@pain.stanford.edu

**Institution:** Department of Anesthesiology, Perioperative and Pain Medicine, Stanford University School of Medicine, Palo Alto, CA, US; Department of Anesthesiology, Yale University School of Medicine, New Haven, CT, US

**Language:** English

**Abstract:** (from the chapter) This chapter will discuss strategies to provide safe and effective pain management in patients with comorbid substance abuse disorders, no matter what the stage of treatment is. This will include treatment recommendations for the active substance abuser, the former addict, and patients receiving opioid substitution therapy. The phenomena of opioid tolerance and opioid-induced hyperalgesia (OIH) and their treatment will be reviewed. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Tolerance](#)  
[\\*Pain Management](#)  
[Comorbidity](#)

**Source:** PsycINFO

#### 75. Chronic pain patients and substance abuse.

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**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(407-427) (2015)

**Author(s):** Rastogi, Rahul; Narayanasamy, Narendren; Sraow, Paul

**Correspondence Address:** Rastogi, Rahul: Department of Anesthesiology, Washington University School of Medicine, 23 Bon Price Terrace, St. Louis, MO, US, 63132, rastogir@anest.wustl.edu

**Institution:** Department of Anesthesiology, Washington University School of Medicine, St. Louis, MO, US; Department of Anesthesiology, Washington University School of Medicine, St. Louis, MO, US; Spine & Sports Rehabilitation Institute, Tempe, AZ, US

**Language:** English

**Abstract:** (from the chapter) The physical and mental states of human beings are governed by lifetime experiences and biopsychosocial makeup. They reinforce each other, and sometimes lead to maladaptive states, such as chronic pain, addiction, and so on. Pain and addiction are altered biopsychosocial experiences that are both subjective in nature and interact with one another. This interface of pain and addiction has brought about serious public health problems. It also poses ethical and healthcare dilemmas through the conflicting goals of managing pain states: pain relief, i.e. beneficence, and "do no harm", i.e. nonmaleficence. With the rise of medicinal management for chronic pain over the last two decades, addiction has become more prevalent, significantly increasing the risk of morbidity and mortality in this patient population. It is the responsibility of healthcare providers to utilize all the multimodal tools in their armamentarium to provide effective pain relief without unintentionally facilitating substance abuse. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Chronic Pain](#)  
[\\*Drug Abuse](#)  
[\\*Pain Management](#)  
[Health Personnel](#)

**Source:** PsycINFO

#### 76. Management of the drug abusing patient in the ICU.

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(389-406) (2015)

**Author(s):** Deshpande, Ranjit; Gong, Jhaodi; Chadha, Ryan; Haddadin, Ala

**Correspondence Address:** Deshpande, Ranjit: Department of Anesthesiology, Yale University School of Medicine, 333 Cedars Street, New Haven, CT, US, 06510, ranjit.deshpande@yale.edu

**Institution:** Department of Anesthesiology, Yale University School of Medicine, New Haven, CT, US; Department of Anesthesiology, Yale University School of Medicine, New Haven, CT, US; Department of Anesthesiology, Yale University School of Medicine, Yale-New Haven Hospital, New Haven, CT, US; Department of Anesthesiology, Yale University School of Medicine, New Haven, CT, US

**Language:** English

**Abstract:** (from the chapter) The dopaminergic mesolimbic system originates in the ventral tegmental nucleus with a projection to the nucleus accumbens and plays a critical role in mediating effects of opioid. The opioid receptors include mu, kappa, sigma, delta, and epsilon. Opioid-induced activation of mu and sigma receptors increases the activity of the dopaminergic mesolimbic system releasing dopamine into the nucleus accumbens, which produces feelings of euphoria and well-being. Stimulation of the kappa receptors decreases activity of the mesolimbic system, resulting in dysphoria. Enzymatic inhibition at the mu receptors in the locus ceruleus leads to a decrease in norepinephrine production. However, chronic use of opioids leads to increased enzymatic activity at the mu receptors, thereby resulting in normal or higher levels of norepinephrine. Following opioid deprivation, there is loss of inhibitory effect on enzyme activity. The excess

norepinephrine released leads to symptoms such as muscle cramps, diarrhea, anxiety, and tremors. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Dopamine](#)  
[\\*Drug Abuse](#)  
[\\*Nucleus Accumbens](#)  
[Opiates](#)

**Source:** PsycINFO

#### 77. Postoperative pain control in drug abusing patients.

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**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(379-387) (2015)

**Author(s):** Gevirtz, Clifford; Vadivelu, Nalini; Kaye, Alan David

**Correspondence Address:** Gevirtz, Clifford: LSU New Orleans Health Sciences Center, 627 West Street, Harrison, NY, US, 10528, cliffgevirtzmd@yahoo.com

**Institution:** LSU New Orleans Health Sciences Center, Harrison, NY, US; Department of Anesthesiology, Yale University, New Haven, CT, US; Department of Anesthesiology, Louisiana State University Health Sciences Center, Louisiana State University Interim Hospital, New Orleans, LA, US

**Language:** English

**Abstract:** (from the chapter) In addition to pain control, management of anxiety, psychological states, and hemodynamic control are all factors to be considered to provide optimum treatment for the drug-dependent and -addicted patient in the perioperative setting. Management of acute pain in patients with drug addiction and drug-dependent patients is truly a challenge. Opioids are the mainstay for the control of acute pain. In the drug-addicted and drug-dependent patients, other therapeutic options include alternative routes of administration of local anesthetic, ketamine infusion, and/or can be combined with the use of regional anesthesia. The perioperative healthcare provider should be cognizant of any methadone maintenance programs the patient might be enrolled in or the use of buprenorphine for the treatment of drug dependence in order to best treat the patient. For pain control in addition to opioids, peripheral nerve blocks, intrathecal or epidural techniques are increasingly being employed for the treatment of pain in the perioperative setting in these patients along with newer sub-anesthetic (low-dose) ketamine regimens. In well-supervised settings, patients have benefitted with the use of intravenous patient-controlled analgesia, including the use of basal rate settings. A team-oriented multimodal approach could be the best route to control pain in the perioperative setting in the drug-dependent and drug-addicted patient. In drug-addicted and drug-dependent patients with chronic pain, in addition to opioids, non-opiate medications such as antidepressants, anticonvulsants, and anti-inflammatory medications can be beneficial. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Dependency](#)  
[\\*Drug Therapy](#)  
[\\*Methadone Maintenance](#)  
[\\*Health Personnel](#)  
[Pain Management](#)

**Source:** PsycINFO

#### 78. Hypnosis for substance abuse.

---

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(369-378) (2015)

**Author(s):** Gulati, Sumit; D'Costa, Yashwin Agnelo; Zador, Lara; Kunnumpurath, Sreekumar

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**Institution:** Department of Pain Medicine, Walton Centre NHS Foundation Trust, Liverpool, United Kingdom; Department of Anesthetics, St. Helier Hospital, Surrey, United Kingdom; Department of Anesthesia, Yale New Haven Hospital, New Haven, CT, US; Department of Anesthetics and Pain Management, Epsom and St. Helier University Hospitals NHS Trust, Carshalton, United Kingdom

**Language:** English

**Abstract:** (from the chapter) Hypnosis as a therapy is unique and has an interesting history dating back to ancient Egypt. It has transformed over the years and yet has an intrigue about it that makes it poorly understood. This is because of lack of knowledge about its neurophysiological basis, patchy evidence base, lack of scientific basis, cultural correlates, and a complementary medicine image. However it is no different from other such things like Placebo, Fibromyalgia, depression whose neurobiology is only partially understood. Several groups have staked a claim as its practitioners ranging from "Healers" to early scientists like Mesmer and Freud and more recently psychologists, behavioral therapists, physicians, and researchers. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Behavior Therapy](#)  
[\\*Drug Abuse](#)  
[\\*Hypnotherapy](#)  
[\\*Neurophysiology](#)  
[Fibromyalgia](#)

**Source:** PsycINFO

#### 79. Neurostimulation and drug abuse.

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(359-367) (2015)

**Author(s):** Gudin, Maria Teresa

**Correspondence Address:** Gudin, Maria Teresa: Department of Anesthesiology, Getafe University Hospital, Marques de Valdecilla 13, Madrid, Spain, 28002, mtgudin@gmail.com

**Institution:** Department of Anesthesiology, Getafe University Hospital, Madrid, Spain

**Language:** English

**Abstract:** (from the chapter) Addiction to substances such as alcohol or drugs is a disease. The road to addiction usually begins with the voluntary use of one or more controlled substances such as narcotics, barbiturates, methamphetamine, alcohol, and nicotine. With time and the widespread use of controlled substances, the voluntary ability to refrain from taking these substances is compromised because of the effects of prolonged use on brain function and behavior. Substance addiction is usually characterized by compulsive desire for the substance, and the search and use of the substance that persists, even knowing its negative consequences. Compulsive or casual drug abuse can be seen as a behavior that is maintained by its consequences; when they reinforce a form of behavior with a pleasant effect (positive reinforcement) or end with any adverse situation for the individual (negative reinforcement), as is the relief of pain or anxiety. The secondary social reinforcement is independent of the pharmacological effects of the drug and can play an important role. Although substance abuse and alcoholism cannot be cured, they can be treated. With treatment, many addicts can stop abusing a particular substance. However, treatment is not always effective. Many recovered addicts are persistently unable to resist either the desire to take the substance or the withdrawal symptoms. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Abuse](#)

\*Neural Plasticity  
 \*Pharmacology  
 Reinforcement

**Source:** PsycINFO

#### 80. Acupuncture as a treatment for substance abuse in pediatric patients.

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**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(349-357) (2015)

**Author(s):** Wang, Shu-Ming

**Correspondence Address:** Wang, Shu-Ming: Department of Anesthesiology, St. Francis Hospital, Hartford, CT, US, smwang800@gmail.com

**Institution:** Department of Anesthesiology, St. Francis Hospital, Hartford, CT, US

**Language:** English

**Abstract:** (from the chapter) Adolescence is an important period of physical, psychological, cognitive, and social growth. However, it is also common for adolescence to experiment with substances as part of growing up. Multiple surveys were conducted in a group of adolescence from in United States between 2002 and 2013. The results of these surveys consistently showing a significant and yet progressive increasing number of teens having abused illegal substance and/or nonmedical prescription pain medications despite of multiple task forces have been in place to prevent substance abused. Several risks factors, such as age of early exposure, victims of assault, witness violence familial substance abuse behavior, exposure to violence, compulsive obsessive disorder, depression, anxiety, and/or posttraumatic stress disorder, are linked to substance abuse in adolescences. Teens who abuse substances frequently also suffering from other disorders. Thus when dealing with teens having drug addition or abuse substances, a comprehensive evaluation is necessary prior to prescribing treatment. Moreover, a workable treatment strategy should be applied to achieve the desirable target in managing teens with drug addition problem. Both pharmacological interventions and several behavioral therapies have shown promising results in treating coexisting conditions among teenage drug abusers. Complementary and alternative treatments such as acupuncture, hypnosis, and meditation also have been used as a treatment and/or an adjunctive treatment for substance abuse as well as psychological illness in these clients. The focus of this chapter is to discuss the use of acupuncture as a treatment or adjunctive treatments for addition and its effects. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** \*Acupuncture  
 \*Drug Abuse  
 \*Drug Therapy  
 \*Pharmacology  
 Pediatrics

**Source:** PsycINFO

#### 81. Substance abuse recovery groups.

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**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(331-336) (2015)

**Author(s):** Desai, Anjuli; Falco, Frank John English

**Correspondence Address:** Desai, Anjuli: Department of Pain Medicine, Temple University Hospital, 3401 North Broad Street, Philadelphia, PA, US, 21921, julidahiya@yahoo.com

**Institution:** Department of Pain Medicine, Temple University Hospital, Philadelphia, PA, US; Mid Atlantic Spine and Pain Physicians, Newark, DE, US

**Language:** English

**Abstract:** (from the chapter) Substance abuse is a broad term encompassing tobacco, alcohol, marijuana, heroin, cocaine, methamphetamines, and narcotics, as well as more rare substances such as bath salts, which may be inhaled, smoked, injected, or swallowed in order to obtain a feeling of euphoria. Substance abuse is the number one cause of preventable illness and death in the United States. Every year, more than 500,000 deaths in the United States occur secondary to the abuse of alcohol, tobacco, or the other drugs listed above. Of all of these, alcohol is the most commonly abused psychoactive substance. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Cocaine](#)  
[\\*Drug Abuse](#)  
[\\*Marijuana](#)  
[\\*Methamphetamine](#)  
[\\*Narcotic Drugs](#)

**Source:** PsycINFO

## 82. Opioid-sparing drugs (ketamine, gabapentin, pregabalin, and clonidine).

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(319-330) (2015)

**Author(s):** Perinpanayagam, Jasmina; Abu-Asi, Mohammad Jamil; Bustamante, Sara; Kunnumpurath, Sreekumar

**Correspondence Address:** Perinpanayagam, Jasmina: Department of Anaesthetics, Epsom and St. Helier University Hospitals NHS, Wryth Lane, Carshalton, Surrey, United Kingdom, SM5 1 AA, jasmina16@doctors.org.uk

**Institution:** Department of Anaesthetics, Epsom and St. Helier University Hospitals NHS, Surrey, United Kingdom; Department of Anaesthetics, Epsom and St. Helier University Hospitals NHS, Surrey, United Kingdom; Department of Anaesthetics and Pain Management, Epsom and St. Helier University Hospitals NHS Trust, Surrey, United Kingdom; Department of Anaesthetics and Pain Management, Epsom and St. Helier University Hospitals NHS Trust, Surrey, United Kingdom

**Language:** English

**Abstract:** (from the chapter) Pain is defined by the international association for the study of pain (IASP) as "An unpleasant sensory and emotional experience associated with actual or potential tissue damage, or described in terms of such damage". Analgesics are a group of medications which are used by almost every individual at some point in their life and as with any drug have a potential for abuse. Chronic pain patients pose a specific group of individuals who may be at greater risk of drug abuse as a result of their access to certain drugs as well as psychological state. There has been a gradual introduction of new analgesics into medical practice including drugs such as ketamine, gabapentin, pregabalin, and clonidine. Opioids continue to be the mainstay analgesics and the use of opioid sparing drugs has increased. These changes in pain management have led to the need for clinicians to become more familiar with the signs and symptoms of their abuse and this chapter aims to highlight the important issues relating to the more commonly used opioid sparing analgesics. Substance use disorders are strongly associated with major causes of youth mortality and the recent rise in the prevalence of recreational abuse of drugs such as ketamine means that it is the clinician's duty to be aware of their effects and treatment so appropriate management can be given. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Chronic Pain](#)  
[\\*Clonidine](#)  
[\\*Drug Abuse](#)  
[\\*Drug Therapy](#)  
[Opiates](#)

**Source:** PsycINFO

### 83. Methadone: Uses, abuses, and metabolism.

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(301-310) (2015)

**Author(s):** Trescot, Andrea; Murinova, Natalia; Krashin, Daniel

**Correspondence Address:** Trescot, Andrea: Pain and Headache Center, Wasilla, AK, US, drtrescot@gmail.com

**Institution:** Pain and Headache Center, Wasilla, AK, US; Department of Neurology, University of Washington, Seattle, WA, US; Department of Psychiatry and Pain and Anesthesia, Harborview Medical Center, University of Washington, Seattle, WA, US

**Language:** English

**Abstract:** (from the chapter) For a group of patients, methadone provides superior analgesia with minimal CNS effects and little tolerance. This author has personally had patients on the same dose of methadone for 15 years, and has returned doctors, nurses, policemen, and pharmacists back to full function on methadone. However, there are significant risks with the medication, and clinicians must be careful and cognizant of the potential life-threatening risks. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Clinicians](#)  
[\\*Drug Abuse](#)  
[\\*Drug Therapy](#)  
[\\*Methadone](#)  
[Metabolism](#)  
[Pharmacists](#)

**Source:** PsycINFO

### 84. Appropriate dispensing of prescription medications and recognition of substance abuse: The pharmacist's perspective.

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(291-300) (2015)

**Author(s):** Kaye, Adam Marc; Kaye, Alan David

**Correspondence Address:** Kaye, Adam Marc: Department of Pharmacy Practice, Thomas J. Long School of Pharmacy and Health Sciences, University of the Pacific, Stockton, CA, US, akaye@pacific.edu

**Institution:** Department of Pharmacy Practice, Thomas J. Long School of Pharmacy and Health Sciences, University of the Pacific, Stockton, CA, US; Department of Anesthesiology, Louisiana State University Health Sciences Center, Louisiana State University Interim Hospital, New Orleans, LA, US

**Language:** English

**Abstract:** (from the chapter) The term "abuse" is often defined in pharmacy circles as either using a medication wrongly or improperly. Medications with abuse potential can be prescribed with the best of intentions, only to be used improperly at the whim of a reckless patient. We must be aware that some in our profession lack the knowledge of medical standards, current research, ethics, and clinical practice guidelines. The lack of knowledge about risks of addiction, expected levels of dependency, and history of misuse or abuse prevents accurate evaluation of appropriate treatment with controlled substances. Red flags should alert Physicians and Pharmacists to exercise extreme vigilance and to utilize additional diligence before prescribing or dispensing these powerful medications. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Clinical Practice](#)  
[\\*Drug Abuse](#)



[\\*Drug Therapy](#)  
[Prescription Drugs](#)  
[Treatment Guidelines](#)

**Source:** PsycINFO

### 85. Physical medicine and rehabilitation in the opioid addicted patient.

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(265-289) (2015)

**Author(s):** Brown, Michael N

**Correspondence Address:** Brown, Michael N., 12601 116th Ave. NE.#110, Bellevue, WA, US, 98004, drbr1@aol.com

**Language:** English

**Abstract:** (from the chapter) This article will review a number of basic principles in rehabilitative movement and exercise. We will also review physical medicine, manual medicine, and physical therapy modalities as well as some recent advances in these modalities that could potentially be employed in the treatment of various pain states that can be complicated to manage in this patient population. In the "no pain population," physical medicine services lend to focus on exercise, movement therapy, and mind-body integration methodologies as a means to change behavior and physiology. In the pain states the focus is on specific diagnosis, specific therapy taking into consideration, the patient may be in a hyperalgesic state. In addition, certain behavioral characteristics of this population need to be addressed during the course of care. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Addiction](#)  
[\\*Opiates](#)  
[\\*Physical Therapy](#)  
[Rehabilitation](#)

**Source:** PsycINFO

### 86. The role of the social worker.

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(249-263) (2015)

**Author(s):** Lucas, Janet; Riffenburgh, Anne; Mejia, Bill

**Correspondence Address:** Lucas, Janet: Family Medicine Residency Program, Glendale Adventist Medical Center, 801 South Chevy Chase Drive, Suite 201, Glendale, CA, US, 91205, jclucas11@aol.com

**Institution:** Family Medicine Residency Program, Glendale Adventist Medical Center, Glendale, CA, US; Huntington Cancer Center, Huntington Memorial Hospital, Pasadena, CA, US; Department of Palliative Care, Social Work, and Spiritual Care, Huntington Memorial Hospital, Pasadena, CA, US

**Language:** English

**Abstract:** (from the chapter) The "suffering within the suffering" of those touched by substance abuse poses special challenges to health care providers. The legacy of psychosocial wounding and the nearness of death can evoke intense memories and feelings in patients and families, triggering emotional reactivity and destructive patterns of coping. The social worker is uniquely positioned to address these challenges, working with the interdisciplinary team and other health care providers to foster self-awareness, collaboration, compassion, communication, discernment, and flexibility-characteristics easy to espouse but difficult to implement. When these characteristics are combined with the individual gifts and skills of team members, the results can be powerful: pain and symptom management is optimized, the risk for substance abuse and relapse is reduced, and the opportunity for psychosocial healing is enhanced. The highest values of palliative

care are honored: comfort, dignity, and healing at the end of life. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Palliative Care](#)  
[\\*Social Casework](#)  
[\\*Social Workers](#)  
[Health Personnel](#)

**Source:** PsycINFO

### 87. Nursing perspectives in managing patients with substance abuse.

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(229-248) (2015)

**Author(s):** Galante, Larissa; French, Cynthia; Grace, Kirsten B

**Correspondence Address:** Galante, Larissa, larissagalante@hotmail.com

**Language:** English

**Abstract:** (from the chapter) Substance abuse has become a major health hazard in the United States. Caring for patients with addiction presents unique challenges and requires a comprehensive, multidisciplinary approach in which nurses have a critical role. Alcohol and drug abuse can present in a variety of ways and requires individualized management. The provider must consider the scope of substance use and related disorders, conceptual models of addiction, ethical issues, addiction risk stratifications, and clinical recommendations. Through therapeutic communication, nursing interventions, clinical assessment, and building trusting relationships, nurses have significant impact in managing patients with substance abuse. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Therapy](#)  
[\\*Therapeutic Processes](#)  
[Alcohol Abuse](#)  
[Clinical Practice](#)  
[Nursing](#)

**Source:** PsycINFO

### 88. Evidence-based treatments for substance use disorders.

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(209-227) (2015)

**Author(s):** Pilkey, David; Steinberg, Howard; Martino, Steve

**Correspondence Address:** Pilkey, David: VA Connecticut Healthcare System, System, 950 Campbell Avenue (116-B), West Haven, CT, US, 06516, david.pilkey@va.gov

**Institution:** VA Connecticut Healthcare System, West Haven, CT, US; VA Connecticut Healthcare System, West Haven, CT, US; VA Connecticut Healthcare System, West Haven, CT, US

**Language:** English

**Abstract:** (from the chapter) This chapter describes four well-recognized evidence-based treatments (EBTs) for substance-related disorders: motivational interviewing (MI), cognitive behavioral therapy (CBT), contingency management (CM), and twelve-step facilitation (TSF). This chapter will review each treatment's conceptual framework, evidence that the treatment works, how the treatment presumably works (i.e., mechanisms of action), and future directions for treatment development and research. The chapter concludes by placing the treatments in the context of the transtheoretical stages of change model [7] to describe how they fit together or can be combined to fully support the recovery efforts of

patients who have substance-related disorders. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Cognitive Behavior Therapy](#)  
[\\*Contingency Management](#)  
[\\*Drug Abuse](#)  
[Motivational Interviewing](#)

**Source:** PsycINFO

### 89. The multidisciplinary approach to the management of substance abuse.

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**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(193) (2015)

**Author(s):** Sdrulla, Andrei D; Chen, Grace

**Correspondence Address:** Sdrulla, Andrei D.: Department of Anesthesiology and Perioperative Medicine, Oregon Health and Sciences University, 3181 Southwest Sam Jackson Park Road, Portland, OR, US, 97239, Sdrulla@ohsu.edu

**Institution:** Department of Anesthesiology and Perioperative Medicine, Oregon Health and Sciences University, Portland, OR, US; Department of Anesthesiology and Perioperative Medicine, Oregon Health and Sciences University, Portland, OR, US

**Language:** English

**Abstract:** (from the chapter) Substance abuse is a prevalent medical problem that is chronic, pervasive and is associated with medical and psychosocial comorbidities. Substance abuse needs to be regarded similar to other chronic medical conditions such as diabetes and heart disease, with short periods of exacerbation interspersed with longer periods of remission. Current recommendations suggest that all adults should be screened for alcohol abuse, and only those at risk should be screened for non-alcohol substance abuse. There is evidence that early intervention in those with hazardous use is effective, particularly for those not seeking treatment. Once patients screen positive for substance use, they need to be risk-stratified and those showing evidence of substance dependence must be referred to treatment. Different treatment modalities are available including pharmacotherapy, and behavioral and psychosocial models and resources for treatments are readily accessible, including local and state wide directories. The best outcomes are seen when the modalities are combined, and integrated programs are available for those with coexisting disorders. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Therapy](#)  
[\\*Psychosocial Factors](#)  
[Alcohol Abuse](#)  
[Comorbidity](#)

**Source:** PsycINFO

### 90. Opioids and substance abuse.

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**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(179-192) (2015)

**Author(s):** Satterly, Matthew Verne; Anitescu, Magdalena

**Correspondence Address:** Satterly, Matthew Verne: Department of Anesthesiology, Center for Advanced Medicine, Washington University School of Medicine, 4921 Parkview Place Suite 14-C, St. Louis, MO, US, 63110, mattsalterly@gmail.com

**Institution:** Department of Anesthesiology, Center for Advanced Medicine, Washington University School of Medicine, St. Louis, MO, US; Department of Anesthesia and Critical Care, University of Chicago Medical Center, Chicago, IL, US

**Language:** English

**Abstract:** (from the chapter) Opioids have numerous effects in the human body, some of which are therapeutic like relief from pain. Opioids are also used for cough suppression. Heroin was first marketed as a nonaddictive cough suppressant until it was discovered that when it was quickly broken down to morphine in the body, it was twice as potent. Other effects can be detrimental such as decreased bowel motility. Opioids are used to treat diarrhea, but the same mechanism of action may lead to constipation during treatment for pain. Other adverse effects of opioids are respiratory depression, itching, and nausea and sedation. A sense of euphoria from recreational use of these medications leads some people to use them solely for that purpose. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Therapy](#)  
[\\*Opiates](#)  
[Human Body](#)

**Source:** PsycINFO

### 91. Herbal supplements and abuse.

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**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(165-178) (2015)

**Author(s):** Gritsenko, Karina; Muse, Iyabo; Vydyanathan, Amaresh

**Correspondence Address:** Gritsenko, Karina: Department of Anesthesiology, Montefiore Medical Center, Albert Einstein College, 111 East 210th Street, Bronx, NY, US, 10467, [karina.gritsenko@gmail.com](mailto:karina.gritsenko@gmail.com)

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**Language:** English

**Abstract:** (from the chapter) Herbal supplements are a billion dollar business. There have been few to no rules and regulations in this market. Thus, medical providers are the first line of information and knowledge for the public. Therefore, a physician should obtain all data relevant to the proper, safe management of their patients such that they must include the detailed list of synthetic drugs and nonpharmacological drugs such as herbal supplements to avoid devastating injury and possible death. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drugs](#)  
[Management](#)  
[Medical Personnel](#)  
[Pharmacology](#)

**Source:** PsycINFO

### 92. Management of acute and chronic drug abuse of amphetamines.

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**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(155-164) (2015)

**Author(s):** Lantz-Dretnik, Sahra; Czernicki, Michal; Kunnumpurath, Sreekumar

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**Institution:** St George's Hospital, London, United Kingdom; Department of Anesthesia and Pain Management, Nottingham University Hospital, Nottingham, NTT, United Kingdom; Department of Anesthetics and Pain Management, Epsom and St. Helier University Hospitals NHS Trust, Carshalton, United Kingdom

**Language:** English

**Abstract:** (from the chapter) Although initially used to treat nasal congestion and battle fatigue, amphetamine is today used in treatment of narcolepsy, ADHD and weight loss. However, it is a common recreational drug with 0.7 % of the world population between 15 and 64 having used it in the past year. Acute amphetamine intoxication is potentially life threatening with several serious medical sequelae. It is imperative that clinicians manage well in the acute setting, but also keeps an open mind as its presentation carries a wide differential diagnosis. Amphetamine is a highly addictive drug with rapidly increasing tolerance. Chronic misuse results in serious medical and psychiatric health problems, which often leads to premature death. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Amphetamine](#)  
[\\*Drug Abuse](#)  
[\\*Narcolepsy](#)  
[Attention Deficit Disorder with Hyperactivity](#)  
[Fatigue](#)  
[Psychiatric Symptoms](#)

**Source:** PsycINFO

### 93. Cocaine abuse.

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(143-154) (2015)

**Author(s):** Kahn, Emily; Mikhael, Hosni; Vadivelu, Nalini

**Correspondence Address:** Kahn, Emily: Department of Anesthesiology, Yale-New Haven Hospital, New Haven, CT, US, emily.kahn@yale.edu

**Institution:** Department of Anesthesiology, Yale-New Haven Hospital, New Haven, CT, US; Department of Anesthesiology, Yale-New Haven Hospital, New Haven, CT, US; Department of Anesthesiology, Yale University, New Haven, CT, US

**Language:** English

**Abstract:** (from the chapter) Cocaine dependence continues to be a significant public health problem in the United States, with about 1.6 million current cocaine users and over 600,000 new cocaine users in the past year. Of this number, about 1.1 million are said to be dependent on or have abused cocaine in the past year. It is estimated that 25 million people in the United States have used cocaine at least once. Cocaine abuse remains one of the leading causes of drug-related emergency department visits and hospital admissions. The leaves of the coca plant were used as early as 3000 BC to increase energy, reduce fatigue and hunger. In the medical world, cocaine was introduced in the late 1800s as a local anesthetic with powerful vasoconstrictive properties useful in limiting surgical blood loss. Medicinal use of cocaine is now limited in practice as it has been replaced by agents that can provide the same local anesthetic and vasoconstrictive effects without the addictive and abuse risks that cocaine carries. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Cocaine](#)  
[\\*Drug Abuse](#)  
[\\*Drug Dependency](#)  
[Epidemiology](#)  
[Public Health](#)

**Source:** PsycINFO

#### 94. Prescription drug abuse.

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(127-141) (2015)

**Author(s):** Dabu-Bondoc, Susan; Shah, Amit A; Effraim, Philip R

**Correspondence Address:** Dabu-Bondoc, Susan: Department of Anesthesiology, Yale New Haven Hospital, Yale School of Medicine, New Haven, CT, US, susan.dabu-bondoc@yale.edu

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**Language:** English

**Abstract:** (from the chapter) This chapter is aimed to educate all levels of healthcare providers on the impacts of prescription drug abuse on patient care. It begins by delineating the differences between misuse, abuse, tolerance, and dependence, and identifying those patient populations who may be active or at highest risk of abuse. It then classifies the varying pharmacologic and pathophysiologic impacts of the chronic use of the most commonly misused drugs. Lastly, it discusses the various established or evolving therapies or strategies, that aid people who may be suffering from prescription drug abuse, as well as the current medicolegal policies directed to curb this rapidly growing problem. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Prescription Drugs](#)  
[\\*Health Care Policy](#)  
[Health Personnel](#)

**Source:** PsycINFO

#### 95. The abuse of agents used to induce or maintain general anesthesia: Intravenous hypnotics and the halogenated hydrocarbons.

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(109-125) (2015)

**Author(s):** Bryson, Ethan O

**Correspondence Address:** Bryson, Ethan O.: Department of Anesthesiology and Psychiatry, Icahn School of Medicine at Mount Sinai, New York, NY, US, elhan.bryson@mounlsinai.org

**Institution:** Department of Anesthesiology and Psychiatry, Icahn School of Medicine at Mount Sinai, New York, NY, US

**Language:** English

**Abstract:** (from the chapter) The agents used to induce or maintain general anesthesia have considerable abuse potential as well as a well-documented history of misuse by both medical professionals and laypersons. The intravenous hypnotics and the halogenated hydrocarbons alike are not very well controlled. Anyone with access, some curiosity, and the propensity towards substance abuse could potentially abuse these agents. Sadly, because of the chemical properties of these drugs, such abuse often results in the unintended death of the user. Serious consideration needs to be given to the scheduling status of these drugs, with the goal of reclassification and tighter inventory control. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Hypnotic Drugs](#)  
[\\*Intravenous Injections](#)

[General Anesthetics](#)  
[Medical Personnel](#)

**Source:** PsycINFO

#### 96. Food and abuse.

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(63-73) (2015)

**Author(s):** Eriator, Ike; Ogiamien, Efosa; Dai, Xiaoli

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**Institution:** Department of Anesthesiology, University of Mississippi Medical Center, Jackson, MS, US; University of Mississippi School of Medicine, Jackson, MS, US; Department of Anesthesiology, University of Mississippi Medical Center, Jackson, MS, US

**Language:** English

**Abstract:** (from the chapter) The overwhelming interest in modern society in eating beyond that which is required for energy balance suggest that it is no longer only for survival. Alternative approaches are needed to combat this expensive, deadly personal, and public health disease. Reframing the obesity issue from the addiction perspective may encourage the development of novel human and animal laboratory paradigms, which would provide mechanistic insight into how individuals can become dependent on food. Public health approaches, environmental modifications, global initiatives, corporate and individual responsibilities must come together in a joint effort to address these food and diet diseases of modern times. Exclusive focus on personal responsibilities to the exclusion of corporate responsibilities in the case of tobacco probably accounted for decades of delayed policy changes and drug related interventions. Taxations, limits on access and marketing and legal actions by the state attorney generals in the USA are public health imperatives that helped curb the burden of tobacco health concerns in the USA. Such policies focused on changing the availability, costs, and the attributes of tobacco products have resulted in significant public health gains and perhaps the greatest public health victory of the 20<sup>th</sup> century. Similar evidence-based policy interventions will help to curb the epidemic of food related disorders-one of the greatest public health challenges of the current times. But the most important consequence of such changes will be the changes that individuals undertake in their behavior and choices. At this epoch of medical development, much of the incremental improvement in our quality of life and life span is likely to come from behavioral changes. Food abuse and obesity are prime targets for change. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Food](#)  
[\\*Tobacco Smoking](#)  
[Life Span](#)  
[Policy Making](#)  
[Public Health](#)

**Source:** PsycINFO

#### 97. Screening and assessment for substance abuse.

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(43-52) (2015)

**Author(s):** Ngo, Elizabeth; Shah, Shalini

**Correspondence Address:** Ngo, Elizabeth: Department of Physical Medicine and Rehabilitation, University of California Irvine, 1112 Dennis Dr., Costa Mesa, CA, US, 92626, engo324@gmail.com

**Institution:** Department of Physical Medicine and Rehabilitation, University of California Irvine, Costa Mesa, CA, US; Department of Anesthesiology and Peri-operative Care, University of California, Irvine, Orange, CA, US

**Language:** English

**Abstract:** (from the chapter) Opioid abuse is a growing problem and continues to be a threat to healthcare. Availability of effective screening tools to help clinicians identify problems with opioid abuse is an essential part of the equation. But perhaps more urgently needed is an evidence-based algorithm to guide clinicians with the following goals: identifying risk factors and high-risk populations; implementing appropriate screening tools; recognizing the signs and symptoms of aberrant drug behaviors related to opioid abuse; and addressing the issue of opioid abuse with the patient if it arises. The screening tools that presently exist to detect opioid abuse still have limited sensitivities. Therefore, these limitations underscore the fact that we still need to rely largely on clinicians' instincts to help identify patients who are at risk for opioid abuse. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Opiates](#)  
[\\*Screening](#)  
[At Risk Populations](#)  
[Risk Factors](#)

**Source:** PsycINFO

#### 98. Speaking with your patient about the problem.

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**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(33-42) (2015)

**Author(s):** Shah, Shalini

**Correspondence Address:** Shah, Shalini: Department of Anesthesiology and Perioperative Care, University of California, Irvine, 101 The City Drive, Building 53, Orange, CA, US, 92868, ssshahl@uci.edu

**Institution:** Department of Anesthesiology and Perioperative Care, University of California, Irvine, Orange, CA, US

**Language:** English

**Abstract:** (from the chapter) In this chapter we will explore various mindsets to approach substance abuse discussions with one's patients, use of language, and stigmatization, examples of approaches and themes learned through various video and audio-taping studies exploring appropriateness of how to discuss the issue effectively with patients. Finally, we will explore the idea of Motivational Interviewing, a tactic which was first coined in the early 1980s, and its efficacy with prescription adherence, immediacy of effect, and long-term adherence for recovery. We understand that we may not be able to change the ways of all of our patients with substance abuse issues, however, we hope that we can educate the reader in using the most appropriate and effective strategies when you believe a patient is ready and willing and motivated for recovery. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Stigma](#)  
[Motivational Interviewing](#)  
[Prescription Drugs](#)  
[Treatment Compliance](#)

**Source:** PsycINFO

#### 99. Signs and symptoms of substance abuse.

---



**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(23-31) (2015)

**Author(s):** Ngo, Elizabeth; Shah, Shalini

**Correspondence Address:** Ngo, Elizabeth: Department of Physical Medicine and Rehabilitation, University of California, Irvine, 1112 Dennis Dr., Costa Mesa, CA, US, 92626, engo324@gmail.com

**Institution:** Department of Physical Medicine and Rehabilitation, University of California, Irvine, Costa Mesa, CA, US; Department of Anesthesiology and Peri-operative Care, University of California, Irvine, Orange, CA, US

**Language:** English

**Abstract:** (from the chapter) Substance dependence and abuse is clearly a growing problem in the country. Therefore, better screening tools need to be developed and undergo clinical trials to assess their efficacy. More importantly, an evidence-based algorithmic approach to risk mitigation that can be applied in a cost-effective manner to guide therapy is urgently needed. There also needs to be a movement to educate and improve awareness of the problem among clinicians from multidisciplinary and all healthcare providers. Identification of the barriers that prevent patients from getting treatment for substance dependence/abuse is also essential in this movement. Finally, there needs to be a cultural shift in the medical community from opioid fear and disapproval to one of acceptance and understanding of opiate dependence/abuse as a medical illness just like any other disease process that needs to be treated. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Symptoms](#)  
[Clinical Trials](#)  
[Health Personnel](#)

**Source:** PsycINFO

#### 100. Legal issues.

**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(17-22) (2015)

**Author(s):** Malbrough, Bobby Ray

**Correspondence Address:** Malbrough, Bobby Ray: Attorney at Law, New Orleans, OR, US, brm@ocblaw.com

**Institution:** Attorney at Law, New Orleans, OR, US

**Language:** English

**Abstract:** (from the chapter) Physicians and other healthcare providers must walk a fine line when it comes to treating patients with substance abuse problems or potential substance abuse problems. The role of the physician is to treat the whole patient-whether the ailment is a physical issue or a substance abuse issue. It is essential for the physician to become intimately familiar with all of the applicable federal laws and the laws applicable to the state of practice, and to develop a systematic record-keeping process in order to manage effectively the treatment protocol. There is little to no margin for error by the physician in treating those addicted to narcotics-but there is the potential to change the lives of such persons-hopefully, forever. What really is the physician's role in treating drug abuse and the crisis of prescription abuse? Simply stated, it is the responsibility of the physician to obtain advance training in prescribing controlled substances to avoid causing or contributing to the problem. Medical schools have not met the need adequately, and it is the physician's responsibility in recognizing and managing addictive disease to attend workshops and seminars to become more knowledgeable in treating the disease. Inadequate education in medical school and residency training about addiction and abuse has resulted in physicians wittingly or unwittingly contributing to the prescription drug epidemic because physicians lack the skill, knowledge and training to diagnose and treat addictive disease. This lack of skill, knowledge and training can lead to licensing issues,

including revocation or suspension, and criminal and civil legal issues. Typically, a criminal case revolves around violation of a state or federal statute. A civil case, on the other hand, revolves around the applicable standard of care, or whether the physician possessed the requisite skill, knowledge or training in a given field of medicine. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Medical Education](#)  
[\\*Physicians](#)  
[\\*Health Personnel](#)  
[Drug Abuse](#)  
[Health Personnel Attitudes](#)

**Source:** PsycINFO

#### 101. Definition and demographics of addiction.

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**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015(1-15) (2015)

**Author(s):** Sdrulla, Andrei D; Chen, Grace; Mauer, Kim

**Correspondence Address:** Sdrulla, Andrei D.: Department of Anesthesiology and Perioperative Medicine, Oregon Health & Sciences University, 3181 SW Sam Jackson Park Road, Portland, OR, US, 97239, [Sdrulla@ohsu.edu](mailto:Sdrulla@ohsu.edu)

**Institution:** Department of Anesthesiology and Perioperative Medicine, Oregon Health & Sciences University, Portland, OR, US; Department of Anesthesiology and Perioperative Medicine, Oregon Health & Sciences University, Portland, OR, US; Department of Anesthesiology and Perioperative Medicine, Oregon Health & Sciences University, Portland, OR, US

**Language:** English

**Abstract:** (from the chapter) Substance abuse and dependence are costly diseases for the patient and for society. Hopefully, defining addiction as a neurobiological disease instead of a behavioral problem will engender more empathy for the patient and more research for effective treatments. The demographics of addiction point to increased education and social advancement as meaningful preventative measures to reign in the ramifications of this prevalent and growing biological disease. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Behavior Problems](#)  
[\\*Drug Abuse](#)  
[\\*Empathy](#)  
[\\*Neurobiology](#)

**Source:** PsycINFO

#### 102. Substance abuse: Inpatient and outpatient management for every clinician.

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**Citation:** Substance abuse: Inpatient and outpatient management for every clinician., 2015 (2015)

**Author(s):** Kaye, Alan David [Ed]; Vadivelu, Nalini [Ed]; Urman, Richard D [Ed]

**Correspondence Address:** Kaye, Alan David: Department of Anesthesiology, Louisiana State University Health Sciences Center, Louisiana State University Interim Hospital, New Orleans, LA, US, [alankaye44@hotmail.com](mailto:alankaye44@hotmail.com)

**Institution:** Department of Anesthesiology, Louisiana State University Health Sciences Center, Louisiana State University Interim Hospital, New Orleans, LA, US; Department of Anesthesiology, Yale University, New Haven, CT, US; Department of Anesthesiology, Perioperative and Pain Medicine, Brigham and Women's Hospital, Harvard Medical School, Boston, MA, US

**Language:** English

**Abstract:** (from the cover) This book is written for any clinician who encounters substance abuse in a patient and wonders what to do. Experts from a cross-section of specialties and health professions provide up-to-date, evidence-based guidance on how nonexpert clinicians can recognize, understand, and approach the management of substance abuse in their patients. They detail the range of treatments available and whether and how they work. The central importance of using a carefully selected multimodal approach that is tailored to the individual patient is emphasized throughout and illustrated in case scenarios from actual clinical practice. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Clinicians](#)  
[\\*Drug Abuse](#)  
[\\*Evidence Based Practice](#)  
[\\*Outpatients](#)  
[\\*Health Personnel](#)  
[Outpatient Treatment](#)

**Source:** PsycINFO

### 103. Urbanicity and mental health in Europe.

**Citation:** European Journal of Mental Health, December 2014, vol./is. 9/2(163-177), 1788-4934 (Dec 2014)

**Author(s):** Penkalla, Anna Maria; Kohler, Stefan

**Correspondence Address:** Kohler, Stefan: Institute for Social Medicine, Epidemiology and Health Economics, Charite University Medical Center, Luisenstrasse 57, Berlin, Germany, D-10117, stefan.kohler@charite.de

**Language:** English

**Abstract:** Urbanicity has been described as a risk factor for mental disorders. Findings differ across countries and psychiatric outcomes. Our aim was to systematically review quantitative studies of the relationship between urbanicity and prevalent mental disorders in Europe. EBSCOhost and Pub- Med databases were searched for epidemiological studies of European populations, published in English between January 2002 and October 2012, using the combination of keywords (urban\* OR environment\*) AND (mental health OR mental disorder OR psych\*). The eleven studies included in the review used different measures of urbanicity. The types of mental disorders most often examined, on which we focus in the review, were mood and anxiety disorders, psychosis, and substance use disorders. Seven out of nine studies reported more mood and anxiety disorders in some of the urban areas compared to rural areas. Two out of three studies indicated higher rates of psychosis in some more urbanised areas. Four out of six studies found more substance abuse with increased urbanicity. The same studies neither found any evidence for a relationship between urbanicity and mental disorders in several instances, and a lower prevalence of anxiety disorders in Belgian medium-sized cities compared to rural areas. Living in European cities can be a risk factor for mood and anxiety disorders, psychotic disorders, and substance abuse. More research is needed to understand which urban environment characteristics cause mental disorders. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Affective Disorders](#)  
[\\*Anxiety Disorders](#)  
[\\*Mental Disorders](#)  
[\\*Psychosis](#)  
[\\*Urban Environments](#)  
[Drug Abuse](#)  
[Literature Review](#)  
[Mental Health](#)

**Source:** PsycINFO

**104. Early maladaptive schemas and personality: A five-factor model perspective.**

**Original Title:** Schemas precoces inadaptes et personnalite selon une approche en cinq facteurs.

**Citation:** Journal de Therapie Comportementale et Cognitive, December 2014, vol./is. 24/4(160-167), 1155-1704 (Dec 2014)

**Author(s):** Grebot, Elisabeth; Olivier, Marie; Duprez, Melanie

**Correspondence Address:** Grebot, Elisabeth: EA 4057, Laboratoire de Psychopathologie et des Processus de Sante, Universite Paris Descartes, IUDP, Sorbonne Paris Cite, 71, avenue E.-Vaillant, Boulogne-Billancourt, France, 92774, elisabeth.grebot@univ-reims.fr

**Institution:** EA 4057, Laboratoire de Psychopathologie et des Processus de Sante, Universite Paris Descartes, IUDP, Boulogne-Billancourt, France; EA 6291, Laboratoire C2S, Universite Region Champagne-Ardenne, Reims, France; EHPAD, Crouy-sur-Aisne, France

**Language:** French

**Abstract:** Objective: According to Young's schema model, early maladaptive schemas (EMS) are regarded as a vulnerability factor for a wide range of psychological disorders. Several studies have observed significant relations between EMS and different disorders (anxious trouble, addictive behaviors, disorder of personality). Some researchers have observed relationships between EMS and the dimensions of the Five-factor model of personality, particularly with neurosism. The current study examines the relationships between the 15 EMS and the five global personality traits (neurosism, extraversion, openness, agreeability, and conscientiousness) as well as EMS and the 30 personality facets (six facets per dimension) according to the five-factor model. In particular, the present study seeks to identify the relationships between EMS and the anxious depressive facets as well as the impulsive facets of neurosism. Participants: One hundred adult outpatients occupying posts of high responsibility completed the Costa and McCrae 240 items-personality questionnaire (NEO PI-R) and Young 75-item questionnaire of early maladaptive schemas. Thus, each subject obtains (1) a total score of activation of the 15 maladaptive schemas; (2) a score for each of the 15 maladaptive schemas; (3) a score in five dimensions of the personality (neurosism, extraversion, openness, agreeability, and conscientiousness); (4) a score for each of the 30 facets of personality. Results: The results show significant relationships between (a) the neurosism and maladaptive schemas and (b) some specific EMS and some facets of neurosism, extraversion, agreeability and conscientiousness. The neurosism is correlated to seven EMS (abandonment, abuse-mistrust, subjugation, failure, insufficient self-control, symbiotic relationship, vulnerability). Six EMS are related to anxious-depressive facets (anxiety, depression, shyness, vulnerability) and one EMS (abuse-mistrust) is related to the anger-hostility facet, which is also related to the vulnerability and entitlement EMS. The impulsivity facet of neurosism does not present any other significant correlations with the EMS. These results suggest that the vulnerability EMS is not related to the facet of neurosism vulnerability and suggest that the vulnerability notion regarding disease is different to the notion of stress vulnerability in the NEO PI-R. The extraversion personality trait inversely correlated with the emotional control EMS. This EMS is also inversely correlated with the extraversion warmth/cordiality facet and with the positive emotions facet. One EMS (dependence) is correlated with the extraversion assertiveness facet (E3) and two other EMS (entitlement, high standards) are correlated to the excitement-seeking facet (E5). The Agreeability personality trait is negatively correlated with the only the entitlement EMS. This EMS is also inversely correlated with another facet of agreeability: trust (A1). The self-sacrifice EMS is correlated with altruism (A3). The openness and conscientiousness personality traits do not present any significant correlations with Young's EMS. However, the conscientiousness competence facet (C1) is correlated with the failure EMS and the deliberation facet (C6) is correlated with the abuse/mistrust and entitlement EMS. Different EMS are correlated with the anxious-depressive facets of the neurosism and with the anger/hostility facet. The complementarity of EMS and NEO-PI personality facets is demonstrated with the notion of vulnerability with the stress in NEO PI-R and the EMS vulnerability with the diseases, which showed no correlations in the

present study. These specific relationships between personality facets and EMS suggest to cognitive therapists and the experts in the cognitive restructuring the interest in evaluating EMS, the five traits of personality of their patients as well as the specific facets of personality. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: Published by Elsevier Masson SAS. All rights reserved.; HOLDER: Association Francaise de Therapie Comportementale et Cognitive; YEAR: 2014

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

**Subject Headings:** [\\*Mental Disorders](#)  
[\\*Personality Traits](#)  
[\\*Psychology](#)  
[\\*Schema](#)  
[Cognitive Restructuring](#)  
[Emotional Adjustment](#)

**Source:** PsycINFO

#### 105. Goals need time perspective to be achieved.

**Citation:** Time perspective theory; Review, research and application: Essays in honor of Philip G. Zimbardo., 2015(323-335) (2015)

**Author(s):** Zaleski, Zbigniew; Przepiorka, Aneta

**Correspondence Address:** Zaleski, Zbigniew: Institute of Psychology, John Paul II Catholic University of Lublin, Lublin, Poland, zal@kul.pl

**Institution:** Institute of Psychology, John Paul II Catholic University of Lublin, Lublin, Poland;  
 Institute of Psychology, John Paul II Catholic University of Lublin, Lublin, Poland

**Language:** English

**Abstract:** (from the chapter) Within the scope of this book, we review theoretical assumptions and research outcomes concerning the link between time perspective and goal theory. The first section inspired by goal theory reviews research and is a form of synopsis of the progress made in this area. It is worthwhile posing the questions of what has been found in the area of goal-theory so far and whether at the beginning of the second decade of the twenty-first century we have anything new to add to the accumulated knowledge on the role of goals in human life. 'What has been found and confirmed in replication investigations is not necessarily new but gives strong support for previous findings. Since the work of Buhler (1933), the literature on goal setting and their motivational function has grown substantially, in particular during the last three decades. Some authors describe the process of how goals are set, what relationships occur between proximal and distal goals and how they motivate people to act. However, the main focus of goal psychology falls on their motivational aspects and their contribution to life satisfaction. It is not erroneous to repeat after Nullin (1984) that it is often more important to people who they want to become or will become in the future than who they are now. What is also very promising is that goal psychology is being successfully implanted into many projects and practical programs for young entrepreneurs, managers, sportsmen, inventors, adventure teams or educators of highly gifted individuals as well as into weight control and drug addiction control programs. Thus, theory and confirmatory findings make this knowledge useful. There seems to be no doubt that the title of a book by Locke and Latham (1984) - "Goal setting: A motivational technique that works!" - reflects the actual state of affairs. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Cognitive Processes](#)  
[\\*Goals](#)  
[\\*Life Satisfaction](#)  
[\\*Time Perspective](#)

**Source:** PsycINFO

**106. CNS stimulants.**

- Citation:** Neuropharmacology, December 2014, vol./is. 87/(1-3), 0028-3908 (Dec 2014)
- Author(s):** Heal, David J; Smith, Sharon L; Henningfield, Jack E
- Correspondence Address:** Heal, David J.: RenaSci Ltd, Nottingham, United Kingdom, NG1 1GF, david.heal@renasci.co.uk
- Institution:** RenaSci Ltd, Nottingham, United Kingdom; RenaSci Ltd, Nottingham, United Kingdom; Pinney Associates, Bethesda, MD, US
- Language:** English
- Abstract:** This editorial provides an overview of the papers presented in the issue Neuropharmacology. This Special Issue of Neuropharmacology is devoted to Central Nervous System (CNS) Stimulants. The authors have provided scholarly articles describing research not only on the amphetamines, methylphenidate, cocaine, modafinil, MDMA and "designer" drugs, but also on the legal stimulants, nicotine and ethanol. We have been fortunate in attracting contributions from a distinguished group of experts who have provided reviews and original research results on a range of topics that covers the spectrum from molecular mechanisms and animal models through to medical applications and the problems of stimulant abuse and addiction. The stimulants provide great benefits as effective medicines for a range of disorders, but they are also widely abused and misused as illicit substances of abuse. The contributors to this Special Issue of Neuropharmacology on the CNS Stimulants have provided a stimulating and comprehensive overview of the preclinical and clinical research in the area and we wish to extend our thanks for their excellent contributions. We hope that this Special Issue will provide new insights on the extensive research that has been performed as well as offering new directions for the future. (PsycINFO Database Record (c) 2015 APA, all rights reserved)
- Country of Publication:** HOLDER: Elsevier Ltd.; YEAR: 2014
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Central Nervous System](#)  
[\\*CNS Stimulating Drugs](#)  
[\\*Neuropharmacology](#)  
[Animal Models](#)
- Source:** PsycINFO
- Full Text:** Available from *Elsevier* in *Neuropharmacology*; Note: ; Collection notes: Academic-License. Please note search only titles within the trial dates: 2010 - to-date

**107. Can we bottle psychosocial treatments for addiction? The role of oxytocin.**

- Citation:** Journal of Clinical Psychiatry, September 2014, vol./is. 75/9(3-4), 0160-6689 (Sep 2014)
- Author(s):** Stauffer, Christopher S; Woolley, Joshua D
- Correspondence Address:** Stauffer, Christopher S.: University of California San Francisco, Department of Psychiatry, San Francisco, CA, US, 94143
- Institution:** Department of Psychiatry, University of California San Francisco, San Francisco, CA, US; Department of Psychiatry, University of California San Francisco, San Francisco, CA, US
- Language:** English
- Abstract:** Many parallels exist between love and addiction, and the two have often been compared in art, philosophy, and science throughout history. Although the mechanisms are not completely elucidated, we will briefly identify some of the key neurobiologies) parallels that exist between social attachment and addiction. We will also outline the advancement of knowledge related to the novel antiaddiction properties of oxytocin and future directions for its development as a potential adjunct to addiction treatment. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Country of Publication:** HOLDER: Physicians Postgraduate Press, Inc.; YEAR: 2014  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Addiction](#)  
[\\*Attachment Behavior](#)  
[\\*Oxytocin](#)  
[\\*Psychosocial Factors](#)  
[\\*Treatment](#)  
[Love](#)  
[Social Behavior](#)  
[Adjunctive Treatment](#)  
**Source:** PsycINFO

#### 108. Drug addiction.

**Citation:** MRI in psychiatry., 2014(357-370) (2014)  
**Author(s):** Charlet, Katrin; Beck, Anne; Heinz, Andreas  
**Correspondence Address:** Charlet, Katrin: Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Campus Mitte, Berlin, Germany, katrin.charlet@charite.de  
**Institution:** Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany  
**Language:** English  
**Abstract:** (from the chapter) Altogether, in vivo imaging using magnetic resonance techniques has enabled researchers to reveal major mechanisms involved in the development and maintenance of drug dependence and related behavioral addictions. Here, especially, the mechanism of unphysiologically high DA release by drugs of abuse motivates the individual to preferentially respond to drug-associated reinforcement at the expense of natural nondrug reinforcement, which can be observed in various fMRI studies testing brain responses towards drug-associated vs. monetary or emotional cues. Further mechanisms of maintaining the drug dependence involve neuroadaptive processes in different neurotransmitter systems. Thus, investigations using PET, SPECT, H-MRS, and fMRI revealed (1) upregulated mu-opiate receptors; (2) reduced DA synthesis capacity, impaired DA release, and downregulated DA D2 receptors; (3) decreased 5-HT transporter availability; (4) downregulated GABA receptors; and (5) upregulated NMDA receptors in chronic alcohol-dependent patients, which were associated with craving, negative mood states, withdrawal symptoms, relapse risk, aberrant cue-induced brain activation, and impaired learning. (PsycINFO Database Record (c) 2015 APA, all rights reserved)  
**Publication Type:** Book; Edited Book  
**Subject Headings:** [\\*Drug Addiction](#)  
[\\*N-Methyl-D-Aspartate](#)  
[\\*Neural Receptors](#)  
[\\*Opiates](#)  
[\\*Functional Magnetic Resonance Imaging](#)  
**Source:** PsycINFO

#### 109. Quetiapine abuse and dependence in psychiatric patients: A systematic review of 25 case reports in the literature.

**Citation:** Journal of Substance Use, October 2014, vol./is. 19/5(388-393), 1465-9891;1475-9942 (Oct 2014)  
**Author(s):** Cubala, Wieslaw Jerzy; Springer, Janusz  
**Correspondence Address:** Cubala, Wieslaw Jerzy: Department of Psychiatry, Medical University of Gdansk, Debinki 7 Street Build. 25, Gdansk, Poland, 80-952, cubala@gumed.edu.pl

**Institution:** Department of Psychiatry, Medical University of Gdansk, Gdansk, Poland; Department of Psychiatry, Medical University of Gdansk, Gdansk, Poland

**Language:** English

**Abstract:** Background: Quetiapine is an atypical antipsychotic approved for the treatment of schizophrenia, bipolar disorder and major depressive disorder. There has been a growing amount of quetiapine abuse cases in psychiatric patients. The purpose of this article is to analyse these reports to recognize identifiable patterns of quetiapine misuse. Approach: We searched the PubMed, Scopus, Medline/Ovid and GoogleScholar databases for case reports of quetiapine abuse and/or dependence among patients with: bipolar disorder, anxiety disorders, panic disorder, social phobia, generalized anxiety disorder, obsessive-compulsive disorder and substance use/dependence. Findings: The search retrieved 25 cases of quetiapine abuse and/or dependence among psychiatric patients. Higher frequency of abuse/dependence was observed in men and people being in their mid-thirties. Only half of the cases reported a positive history of substance abuse. The most prominent phenomenon associated with quetiapine abuse/dependence was marked withdrawal symptoms. Conclusions: Our research indicates that quetiapine is likely to be abused by male psychiatric patients in their mid-thirties and less than 50% of them having positive history of substance abuse/dependence. Caution should be taken when considering the prescription of quetiapine to that special patient group and close monitoring for drug misuse is needed in the course of the entire treatment period. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Informa UK Ltd.; YEAR: 2014

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Dependency](#)  
[\\*Psychiatric Patients](#)  
[\\*Quetiapine](#)

**Source:** PsycINFO

**Full Text:** Available from *Informa Healthcare* in [Journal of Substance Use](#)

#### 110. Cross-sectional study of HIV prevalence and the characteristics of injecting drug users in Colombia.

**Citation:** Journal of Substance Use, October 2014, vol./is. 19/5(364-367), 1465-9891;1475-9942 (Oct 2014)

**Author(s):** Berbesi, Dedsy; Segura, Angela; Montoya, Liliana

**Correspondence Address:** Berbesi, Dedsy: School of Medicine, CES University, Calle 10 A Nro 22-04, Medellin, Colombia, dberbesi@ces.edu.co

**Institution:** School of Medicine, CES University, Medellin, Colombia; School of Medicine, CES University, Medellin, Colombia; School of Medicine, CES University, Medellin, Colombia

**Language:** English

**Abstract:** Objective: To determine socio-demographic characteristics, prevalence and risk behaviors of HIV in injecting drug users in three cities of Colombia. Method: A cross-sectional study was conducted in three cities of Colombia; information was obtained from 796 participants over 18 years of age, with prior signed informed consent. Statistical analysis of the data and generated output tables were conducted in RDSAT and SPSS. Results: There are extensive networks of injection drug users (IDUs). The population of IDUs was characterized as mostly men between 18 and 34. The data suggest a recent introduction of HIV into networks and a high degree of risk behavior for HIV spread in networks and used syringes. People who reported sharing syringes, were at greater risk of not using a condom when having sex with casual partners, this factor is increased when controlling for other variables consulted (OR = 4.10, 95% CI 1.23 to 16.05;  $p < 0.00$ ). Conclusions: The data in this report indicate a high risk for a possible expansion of HIV among injecting networks, supported the introduction of HIV into networks of injectors. For Colombia, this research constitutes a first step in the search for strategies to prevent the



further spreading of the infection. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Informa UK Ltd.; YEAR: 2014  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Demographic Characteristics](#)  
[\\*Drug Usage](#)  
[\\*HIV](#)  
[\\*Intravenous Drug Usage](#)  
[Epidemiology](#)  
[Risk Taking](#)  
**Source:** PsycINFO  
**Full Text:** Available from *Informa Healthcare* in *Journal of Substance Use*

#### 111. Drug use and reported suicide ideation and attempt among Kosovar adolescents.

**Citation:** Journal of Substance Use, October 2014, vol./is. 19/5(358-363), 1465-9891;1475-9942 (Oct 2014)

**Author(s):** Arenliu, Aliriza; Kelmendi, Kaltrina; Haskuka, Mytaher; Halimi, Teuta; Canhasi, Ercan

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**Language:** English

**Abstract:** Suicide among adolescents continues to be a serious problem. Studies have found that substance use of tobacco, alcohol and illicit drugs is associated with suicide ideation and attempts. An article also analyzed gender differences in terms of suicide ideation and suicide attempts by considering substance use factors separately for males and females. The article is based on the data collected for the 2011 European School Survey Project on Alcohol and other Drugs (ESPAD), which was carried out in 42 secondary schools in Kosovo. A total of 4709 students born in 1995 and 1996 were surveyed according to ESPAD methodology. Logistic regression results indicate that cannabis use during the last 30 days was strongly associated with suicide attempts for both males and females. Frequency of alcohol consumption over the last 30 days was also associated with suicide ideation and attempts. The lifetime use of illegal drugs (amphetamines, ecstasy or hallucinogenic) was highly associated with suicide ideation for males but not for females. Findings show gender differences in suicide ideation; females reported higher rates of suicidal thoughts (9%) than males (6.3%). On the other hand, there were no gender differences for lifetime self-reported suicide attempt rates (3.4%). Findings from this article have a major relevance for youth suicide prevention strategies and action plans, emphasizing that not only the illegal drugs but also legal drugs such as, tranquilizers and alcohol are strongly associated with suicide ideation and attempts. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Informa UK Ltd.; YEAR: 2014  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Attempted Suicide](#)  
[\\*Drug Usage](#)  
[\\*Suicidal Ideation](#)  
[Ideation](#)  
**Source:** PsycINFO  
**Full Text:** Available from *Informa Healthcare* in *Journal of Substance Use*

**112. A comparative study using Disulfiram and Naltrexone in alcohol-dependent adolescents.**

- Citation:** Journal of Substance Use, October 2014, vol./is. 19/5(341-345), 1465-9891;1475-9942 (Oct 2014)
- Author(s):** De Sousa, Avinash
- Correspondence Address:** De Sousa, Avinash: De Sousa Foundation, Carmel, 18, St. Francis Avenue, Off SV Road, Santacruz West, Mumbai, India, 400054, avinashdes999@yahoo.co.uk
- Institution:** De Sousa Foundation, Mumbai, India
- Language:** English
- Abstract:** Aims: There are currently three agents approved by US-FDA for the pharmacotherapy of alcohol dependence, namely Naltrexone, Disulfiram and Acamprosate. The present study aimed to clinically compare Disulfiram (DSF) and Naltrexone (NTX) and their efficacy in relapse prevention in adolescents in a routine clinical setting. Design: Fifty-two adolescents with alcohol dependence with supportive family members that would ensure medical compliance and follow up were randomized to 6 months of treatment with DSF or NTX. Weekly group psycho-education was also provided. The psychiatrist, patient and family member were not blind to the treatment prescribed. Measurements: Alcohol consumption, craving and adverse events were recorded weekly for 4 months and then fortnightly. Serum gamma glutamyl transferase (GGT) was measured at the start and end of the study. Results: At the end of the study, 46 patients were still in contact. Relapse occurred at a mean of 93 days with DSF compared to 63 days for NTX. 84.61% patients on DSF remained abstinent compared to 53.85% with NTX. Conclusions: DSF was superior to NTX in promoting abstinence in adolescents with alcohol dependence having good family support. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: Informa UK Ltd.; YEAR: 2014
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Alcoholism](#)  
[\\*Disulfiram](#)  
[\\*Drug Therapy](#)  
[\\*Naltrexone](#)  
[\\*Relapse Prevention](#)  
[Psychoeducation](#)
- Source:** PsycINFO
- Full Text:** Available from *Informa Healthcare* in *Journal of Substance Use*

**113. Motivation in the addiction medicine clinic.**

- Original Title:** La motivation dans la clinique alcoologique.
- Citation:** Alcoologie et Addictologie, June 2014, vol./is. 36/2(151-157), 1620-4522 (Jun 2014)
- Author(s):** Dufayet, Geoffrey; Petit, Aymeric; Claudon, Micheline; Lejoyeux, Michel
- Correspondence Address:** Dufayet, Geoffrey: Service de Psychiatrie, Hopital Bichat, Assistance Publique des Hopitaux de Paris, 46, rue Henri Huchard, Paris, France, F-75018, dufayetgeoffrey@yahoo.fr
- Institution:** Service de Psychiatrie, Hopital Bichat, Assistance Publique des Hopitaux de Paris, Paris, France; Service de Psychiatrie, Hopital Bichat, Assistance Publique des Hopitaux de Paris, Paris, France; Service de Psychiatrie, Hopital Bichat, Assistance Publique des Hopitaux de Paris, Paris, France; Service de Psychiatrie, Hopital Bichat, Assistance Publique des Hopitaux de Paris, Paris, France
- Language:** French
- Abstract:** The management of addictive behaviour was profoundly modified with the development of the concept of motivation in the beginning of the 1980s. This concept provided clinicians with a better understanding of addictive subjects, thereby improving the

therapeutic relationship and supportive care. In view of the importance of motivation in addiction medicine, particularly in relation to alcoholism, we conducted a narrative synthesis of this concept by searching PubMed, PsycINFO and Google Scholar databases for articles concerning various aspects of motivation that we considered to be clinically relevant. Firstly, we discuss certain aspects of the main theoretical models of motivation in order to determine their clinical implications. We also analyse various factors able to promote motivation for change in subjects with drinking problems, from the perspective of treatment but also prevention in high-risk drinkers. Finally, we present several evaluation scales of motivation allowing the clinician to precisely define the demands of patients with drinking problems. The objective of this study is therefore essentially to provide addiction medicine practitioners with several guidelines to facilitate their care of patients with alcohol-related disorders. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Clinics](#)  
[\\*Motivation](#)  
[Behavior Change](#)  
[Interviews](#)

**Source:** PsycINFO

#### 114. How can the social cost of addiction be calculated?

**Original Title:** Comment calcule-t-on le cout social des addictions?

**Citation:** *Alcoolologie et Addictologie*, June 2014, vol./is. 36/2(141-149), 1620-4522 (Jun 2014)

**Author(s):** Kohler, Dimitri; Dunand, Caroline; Simon, Olivier

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**Institution:** Observatoire Suisse de la Sante-Obsan, Neuchatel, Switzerland; Centre du Jeu Excessif, Lausanne, Switzerland; Centre du Jeu Excessif, Lausanne, Switzerland

**Language:** French

**Abstract:** The multidisciplinary nature of addiction medicine is sometimes a source of misunderstanding between the various stakeholders responsible for prevention and treatment of the various types of addictive behaviour. This article is designed to clarify the concept of social cost and to explain the basic principles to people not familiar with health economics. Calculation of social cost is described, then illustrated by two estimates concerning substance and non-substance addiction (alcohol and gambling). Although the theoretical bases of the social cost are identical for these two types of addiction, their specific features raise different problems. In particular, in contrast with substance addiction, certain data are not available for non-substance addictions. These estimates of social cost must therefore still be based on ad hoc hypotheses. This article helps practitioners to critically analyse the various social cost estimates reported in the literature, in order to more clearly define the real value of this key indicator for the development of public health policies. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Costs and Cost Analysis](#)  
[\\*Health Care Economics](#)  
[Alcohols](#)  
[Gambling](#)

**Source:** PsycINFO

#### 115. Implementing therapeutic foster care for alcoholics through a medical and social accommodation structure.

**Original Title:** Un dispositif d'accueil familial therapeutique en alcoologie: Historique et modalites.

**Citation:** Alcoologie et Addictologie, June 2014, vol./is. 36/2(133-140), 1620-4522 (Jun 2014)

**Author(s):** Anastassiou, Vangelis; Croizer, Aurelia; de la Brosse, Agnes Guillet; Carre, Philippe; Bertozzi-Knecht, Michele

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**Language:** French

**Abstract:** We expose the way foster care for adults could evolve into a medical and social accommodation structure including therapeutic foster care for dependent alcoholic patients. After a historical reminder, we see how therapeutic foster care was transposed to the alcohol field. Then, we expose how we set goals for a charter for quality in patients' care and how we created a therapeutic context through our team functioning. We present how we recruited, support and manage host families and explain the way we operate to implement patients' social support and rehabilitation. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Foster Care](#)  
[Social Support](#)  
[Treatment Outcomes](#)

**Source:** PsycINFO

#### **116. School awareness programme to the risks of addictive behaviour: Example of the A. Dumas hostelry and tourism high school.**

**Original Title:** Programme de sensibilisation: Aux risques des conduites addictives en milieu scolaire: L'exemple du lycee des metiers d'hotellerie et de tourisme A. Dumas (Bas-Rhin).

**Citation:** Alcoologie et Addictologie, June 2014, vol./is. 36/2(123-131), 1620-4522 (Jun 2014)

**Author(s):** Lang, Jean-Philippe; Giacomini, Sophie; Ozee, Laurence; Muylaert, Christiane; Fellingner, Elisabeth

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**Institution:** Pole de Psychiatrie et de Sante Mentale, Hopital Civil, CHU de Strasbourg, Strasbourg, France; Centre Hospitalier d'Erstein, France; Lycee des Metiers de l'Hotellerie et de Tourisme Alexandre Dumas, Illkirch, France; Lycee des Metiers de l'Hotellerie et de Tourisme Alexandre Dumas, Illkirch, France; CIRDD Alsace, Strasbourg, France

**Language:** French

**Abstract:** The Illkirch (67) hostelry and tourism high school wanted to develop a large-scale prevention and risk reduction action to increase the awareness of each student about the risks of psychoactive substance use. This action, which associates students, school nurses, parents, and teachers, has been effective since 2006 with the methodological support of the Centre d'informations regional sur les drogues et les dependances d'Aksace (CIRDD) and participation of the Erstein hospital addiction medicine liaison teams. It comprises a training section, a collective awareness section, and an individual section and is accompanied by experimentation of an anonymous assessment and resource orientation visit in the school infirmary. The authors wanted to share this experience by presenting the methodology of this action, an analysis of its practice and an evaluation of its benefit for students and the establishment. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Awareness](#)  
[\\*Drug Addiction](#)  
[\\*Risk Factors](#)  
[School Based Intervention](#)  
[Test Construction](#)  
**Source:** PsycINFO

#### 117. Alcohol and psychiatric comorbidities. Simultaneous pharmacological management?

**Original Title:** Alcool et comorbidites psychiatriques: Une prise en charge pharmacologique simultanee?  
**Citation:** Alcoologie et Addictologie, June 2014, vol./is. 36/2(117-121), 1620-4522 (Jun 2014)  
**Author(s):** Benyamina, Amine; Blecha, Lisa; Kosim, Margaux  
**Correspondence Address:** Benyamina, Amine: Centre d'Enseignement, de Recherche et de Traitements des Addictions, Hopitaux Universitaires Paris-Sud, 12, Avenue Paul Vaillant-Couturier, Villejuif, France, F-94800, amine.benyamina@pbr.aphp.fr  
**Institution:** Centre d'Enseignement, de Recherche et de Traitements des Addictions, Hopitaux Universitaires Paris-Sud, Villejuif, France; Centre d'Enseignement, de Recherche et de Traitements des Addictions, Hopitaux Universitaires Paris-Sud, Villejuif, France; Hopital Corentin Celton, Issy-les-Moulineaux, France  
**Language:** French

**Abstract:** Psychiatric disorders are common in the general population and are often associated with excessive alcohol consumption. Similarly, subjects susceptible to alcohol dependence present an increased risk of psychiatric disorders. The complex interactions between the various psychiatric disorders (anxiety, depression, personality disorders) and alcohol consumption are beginning to be elucidated. For example, in the presence of stress-related disorder, alcohol consumption can temporarily relieve the symptoms of the disease. In these patients, alcohol represents a transient remedy, but which can be harmful in the long term by inducing a vicious circle of global ill-being. A better awareness of psychiatric and alcohol-related comorbidities should be accompanied by simultaneous management of both disorders, especially pharmacological treatment. In contrast with the current guidelines of the Societe Francaise d'Alcoologie, recommending treatment of the psychiatric disorder after stabilization of the addictive disorder, several clinical studies suggest the value of combining addiction treatment with antidepressants or mood regulators in order to rapidly stabilize the various aspects of the patient's disease. This research is only at the early stages and more evidence is required in larger populations with clearly defined clinical and laboratory characteristics. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Alcohol Abuse](#)  
[\\*Comorbidity](#)  
[Psychiatry](#)  
**Source:** PsycINFO

#### 118. Craving: Keys to understanding.

**Original Title:** Le craving: Des cles pour comprendre.  
**Citation:** Alcoologie et Addictologie, June 2014, vol./is. 36/2(105-115), 1620-4522 (Jun 2014)  
**Author(s):** Brousse, Georges; de Chazeron, Ingrid  
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**Institution:** Service de Psychiatrie et Addictologie, CMPB, CHU de Clermont-Ferrand, Clermont-Ferrand, France; Service de Psychiatrie et Addictologie, CMPB, CHU de Clermont-Ferrand, Clermont-Ferrand, France

**Language:** French

**Abstract:** Concept of craving, which could be defined as the urge to consume, has widely changed over time, and is emerging as an indispensable construct in the definition and understanding of addictions. Several definitions have been proposed for this phenomenon, sometimes focusing on the physical withdrawal, the physical withdrawal, and sometimes focusing on the psychological desire. In the literature, especially based on typological description, craving triggers a very complex mechanism in which many models coexist: conditioning, cognitive, motivational and neurobiological theories. Singularly, according to concepts, consciousness disorder varies and craving construct that can operate independently from conscious awareness is still on debate. Furthermore clinicians have to face the difficulty of sizing up the phenomenon. The question is not yet settled as to a mono- or multidimensional assessment or a drug-specific assessment or not. Finally, the craving has become an important therapeutic target for addiction treatment programs. Various therapeutic approaches, psychotherapeutic or pharmaceutical orientations, have been proposed in relation to different explanatory theories and should be used in complementary ways. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Craving](#)  
[Consciousness Disturbances](#)  
[Psychopathology](#)

**Source:** PsycINFO

#### **119. The non-medical use of prescription drugs and lifetime experiences of sexual victimization among college men.**

**Citation:** Journal of Interpersonal Violence, September 2014, vol./is. 29/13(2482-2496), 0886-2605;1552-6518 (Sep 2014)

**Author(s):** Snipes, Daniel J; Green, Brooke A; Benotsch, Eric G; Perrin, Paul B

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**Language:** English

**Abstract:** The non-medical use of prescription drugs (NMUPD) has been linked with many negative outcomes in previous studies. Recent literature has begun to examine the role of NMUPD among sexual victimization survivors. The present study examined the associations between NMUPD, recreational drug use, and experiences of sexual victimization among college men. Undergraduate men (n = 253) elected to take an online survey examining drug use and lifetime sexual victimization experiences. A total of 17% of the sample reported instances of being sexually victimized in their lifetime across four domains (being coerced, threatened, physically forced, or taken advantage of while incapacitated). Results indicate that, across all domains of sexual victimization, non-medical sedative use was robustly associated with sexual victimization in a multivariate model controlling for recreational drug use and demographics. No other non-medically used drug class (anxiolytics, pain medications, and stimulants) was associated with experiences of sexual victimization in the multivariate model. Results expand past literature by illustrating specific drug classes used by survivors of sexual victimization. Implications for interventions for male sexual victimization survivors are discussed. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: SAGE Publications; YEAR: 2014

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

**Subject Headings:** [\\*Drug Usage](#)  
[\\*Prescription Drugs](#)  
[\\*Rape](#)  
[\\*Sexual Abuse](#)  
[\\*Victimization](#)  
[College Students](#)

**Source:** PsycINFO

#### 120. BDNF signaling in the VTA links the drug-dependent state to drug withdrawal aversions.

**Citation:** The Journal of Neuroscience, June 2014, vol./is. 34/23(7899-7909), 0270-6474;1529-2401 (Jun 4, 2014)

**Author(s):** Vargas-Perez, Hector; Bahi, Amine; Bufalino, Mary Rose; Ting-A-Kee, Ryan; Maal-Bared, Geith; Lam, Jenny; Fahmy, Ahmed; Clarke, Laura; Blanchard, Jennifer K; Larsen, Brett R; Steffensen, Scott; Dreyer, Jean-Luc; van der Kooy, Derek

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**Language:** English

**Abstract:** Drug administration to avoid unpleasant drug withdrawal symptoms has been hypothesized to be a crucial factor that leads to compulsive drug-taking behavior. However, the neural relationship between the aversive motivational state produced by drug withdrawal and the development of the drug-dependent state still remains elusive. It has been observed that chronic exposure to drugs of abuse increases brain-derived neurotrophic factor (BDNF) levels in ventral tegmental area (VTA) neurons. In particular, BDNF expression is dramatically increased during drug withdrawal, which would suggest a direct connection between the aversive state of withdrawal and BDNF-induced neuronal plasticity. Using lentivirus-mediated gene transfer to locally knock down the expression of the BDNF receptor tropomyosin-receptor-kinase type B in rats and mice, we observed that chronic opiate administration activates BDNF-related neuronal plasticity in the VTA that is necessary for both the establishment of an opiate-dependent state and aversive withdrawal motivation. Our findings highlight the importance of a bivalent, plastic mechanism that drives the negative reinforcement underlying addiction. (PsycINFO Database Record (c) 2015 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Aversion](#)  
[\\*Drug Withdrawal](#)  
[\\*Opiates](#)

\*Tegmentum  
 \*Brain Derived Neurotrophic Factor  
 Drug Addiction  
 Drug Dependency  
 Mice  
 Rats

**Source:** PsycINFO

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

### 121. How may neuroscience affect the way that the criminal courts deal with addicted offenders?

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**Citation:** Neuroscience and legal responsibility., 2013(279-301) (2013)

**Author(s):** Hall, Wayne; Carter, Adrian

**Institution:** UQ Centre for Clinical Research, University of Queensland, Brisbane, QLD, Australia;  
 UQ Centre for Clinical Research, University of Queensland, Brisbane, QLD, Australia

**Language:** English

**Abstract:** (from the chapter) A central question for the courts in dealing with addicted offenders is deciding whether they had the capacity to make free choices about the criminal acts in which they engaged (e.g., theft, drug dealing or violence) to fund or support their drug use. We contrast two views that have dominated recent public debates about this issue: the medical model, in which addiction is seen as "a chronic relapsing brain disease" that renders addicted persons not responsible for drug-related crimes; and the commonsense moral view, which is skeptical about addiction and sees both drug use and criminal acts to support it as freely chosen acts for which offenders should be held responsible. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** \*Adjudication  
 \*Criminal Responsibility  
 \*Drug Addiction  
 \*Medical Model  
 \*Volition  
 Criminal Behavior  
 Criminals  
 Neurosciences

**Source:** PsycINFO

### 122. Addiction, choice, and disease: How voluntary is voluntary action in addiction?

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**Citation:** Neuroscience and legal responsibility., 2013(257-278) (2013)

**Author(s):** Kennett, Jeanette

**Institution:** Centre for Agency Values and Ethics, Department of Philosophy, Macquarie University, Sydney, NSW, Australia

**Language:** English

**Abstract:** (from the chapter) Are drug addicts helpless in the face of their addiction, compelled by cravings too strong to resist? Or is drug taking voluntary activity that can be ceased at will? In his recent book. Gene Heyman challenges the dominant medical model of addiction, which, in its current form, characterizes addiction as "a chronic relapsing brain disease". Although Heyman does not focus on the responsibility of addicts, the disease model of addiction is often taken to at least partially excuse addicts from moral and criminal responsibility because it characterizes addiction not as mere weakness of will but as a disease of the mind that impairs the capacities required for moral responsibility. Heyman argues, by contrast, that the behavior that characterizes addiction is voluntary and that the many ill effect of substance abuse result from a series of choices made by the addicted person. He aims to show that these choices conform to standard motivational principles; the choices of the addict, like all other choices, aim at reward and are



responsive to incentives. Heyman argues that attending to these principles provides a more useful and more optimistic framework than the disease model for understanding what goes wrong in addiction and how to treat it. In this chapter, I examine Heyman's argument against the disease model and the assumptions that underpin it. Despite the many virtues of the account, I suggest that it does not succeed in ruling out the disease model, even on the assumption that addictive choices are voluntary. I then question that assumption and the account of motivation on which it rests. I conclude that there are significant involuntary aspects to addiction that could mitigate the responsibility of addicts for their choices. (PsycINFO Database Record (c) 2015 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Choice Behavior](#)  
[\\*Drug Addiction](#)  
[\\*Medical Model](#)  
[\\*Responsibility](#)  
[\\*Volition](#)  
[Mental Disorders](#)  
[Motivation](#)

**Source:** PsycINFO