

# Search Results

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## Search History

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1. PsycInfo; exp ADDICTION/ OR DRUG ABUSE [+NT]/ OR DRUG USAGE; 39753 results.
2. PsycInfo; addict\*.ti,ab; 37548 results.
3. PsycInfo; 1 OR 2; 67864 results.

### 1. The group ii metabotropic glutamate receptor agonist ly379268 reduces toluene-induced enhancement of brain-stimulation reward and behavioral disturbances.

- Citation:** Psychopharmacology, Jun 2015, (Jun 6, 2015), 0033-3158 (Jun 6, 2015)
- Author(s):** Chan, Ming-Huan; Tsai, Yi-Ling; Lee, Mei-Yi; Stoker, Astrid K.; Markou, Athina; Chen, Hwei-Hsien
- Abstract:** Rationale: Toluene, a widely abused solvent with demonstrated addictive potential in humans, has been reported to negatively modulate N-methyl-D-aspartate receptors (NMDARs) and alter glutamatergic neurotransmission. The group II metabotropic glutamate receptor (mGluR) agonist LY379268 has been shown to regulate glutamate release transmission and NMDAR function and block toluene-induced locomotor hyperactivity. However, remaining unknown is whether group II mGluRs are involved in the toluene-induced reward-facilitating effect and other behavioral manifestations. Objectives: The present study evaluated the effects of LY379268 on toluene-induced reward enhancement, motor incoordination, recognition memory impairment, and social interaction deficits. Results: Our data demonstrated that LY379268 significantly reversed the toluene-induced lowering of intracranial self-stimulation (ICSS) thresholds and impairments in novel object recognition, rotarod performance, and social interaction with different potencies. Conclusions: These results indicate a negative modulatory role of group II mGluRs in acute toluene-induced reward-facilitating and behavioral effects and suggest that group II mGluR agonists may have therapeutic potential for toluene addiction and the prevention of toluene intoxication caused by occupational or intentional exposure. (PsycINFO Database Record (c) 2015 APA, all rights reserved)(journal abstract)
- Subject Headings:** [No terms assigned](#)
- Source:** PsycInfo

### 2. Strategic top-down control versus attentional bias by previous reward history.

- Citation:** Attention, Perception, & Psychophysics, Jun 2015, (Jun 4, 2015), 1943-3921 (Jun 4, 2015)
- Author(s):** Lynn, Jennifer; Shin, Myoungju
- Abstract:** Rewards modify performance so that attentional priority is given to stimuli associated with a higher probability of reward. A stimulus associated with reward attracts attention even when it is no longer relevant. In this study, we explored whether or not strategic top-down control can be employed to overcome the attentional bias from a recent reward-stimulus association. Four groups of 12 participants completed a spatial-cueing task involving two phases, in which the cue associated with the target location changed from Phase 1 to Phase 2. Attentional-bias effects toward a previously rewarded cue were demonstrated when the rewarded cue from Phase 1 interfered with the orienting toward a nonrewarded but valid cue in Phase 2. Associating the Phase 2 cue with a higher reward than had been used in Phase 1 resulted in a rapid orientation of attention to the new cue. These findings suggest that pathologies characterized by maladaptive attentional biases (e.g., addiction) may be counteracted by treatments that manipulate motivation by enhancing the subjective relevance of rewards that are less harmful. (PsycINFO Database Record (c) 2015 APA, all rights reserved)(journal abstract)
- Subject Headings:** [No terms assigned](#)
- Source:** PsycInfo

### 3. The clinical impact of the brain disease model of alcohol and drug addiction: Exploring the attitudes of community-based and clinicians in Australia.

- Citation:** Neuroethics, Jun 2015, (Jun 3, 2015), 1874-5490 (Jun 3, 2015)
- Author(s):** Barnett, Anthony I.; Fry, Craig L.
- Abstract:** Despite recent increasing support for the brain disease model (BDM) of alcohol and drug addiction, the extent to which the model may clinically impact addiction treatment and

client behaviour remains unclear. This qualitative study explored the views of community-based clinicians in Australia and examined: (i) whether Australian community-based clinicians support the BDM of addiction; (ii) their attitudes on the impact the model may have on clinical treatment; and (iii) their views on how framing addiction as a brain disease may impact addicted clients' behaviour. Six Australian community-based clinicians participated in semi-structured in-depth interviews that were analysed using thematic analysis. Whilst the BDM was not fully supported by this purposive sample of Australian community-based clinicians, there was acceptance that addiction neuroscience formed a key part of a wider addiction framework. Participants believed the BDM ignored key social, psychological and environmental factors important for successful treatment. The BDM was seen as potentially irrelevant for certain client types (e.g., where housing or financial concerns were of high priority), however the model was believed to integrate with particular therapies (e.g., mindfulness or cognitive-behaviour therapy). Participants believed that for clients viewing their addiction in terms of a brain disease, there were potential positive (increased insight and decreased stigma) and negative (increased stigma and sense of helplessness, reduced personal responsibility) impacts on client behaviour. Implications for addiction treatment practice and public health policy are discussed. (PsycINFO Database Record (c) 2015 APA, all rights reserved)(journal abstract)

**Subject Headings:** [No terms assigned](#)

**Source:** PsycInfo

#### 4. Reversal of overdose on fentanyl being illicitly sold as heroin with naloxone nasal spray: A case report.

**Citation:** The American Journal on Addictions, Jun 2015, (Jun 3, 2015), 1055-0496 (Jun 3, 2015)

**Author(s):** Fareed, Ayman; Buchanan □ Cummings, Ann Marie; Crampton, Kelli; Grant, Angela; Drexler, Karen

**Abstract:** Background This is a case report describing a reversal of fentanyl overdose with naloxone nasal spray. The patient was not aware that he overdosed on fentanyl being sold as heroin. Methods The Veterans Health Administration (VHA) has implemented an initiative to provide education for veterans, their families, friends and significant others about opioid overdose and use of naloxone reversal kits. The Atlanta VA Medical Center adopted this program to reduce the risk of opioid overdose in high risk patients. Results Over the past year, we provided educational sessions for 63 veterans and their families. We also prescribed 41 naloxone kits. We have received three reports of opioid overdose reversal with use of naloxone kits prescribed by the Atlanta VA Medical Center. Conclusions and Scientific significance The authors recommend that public health administrators and policy makers advocate for the implementation of these programs to reduce the rising number of overdose death in the United States and worldwide. (Am J Addict 2015;XX:XX–XX) (PsycINFO Database Record (c) 2015 APA, all rights reserved)(journal abstract)

**Subject Headings:** [No terms assigned](#)

**Source:** PsycInfo

**Full Text:** Available from *Wiley* in [American Journal on Addictions, The](#)