

# 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. Academic and psychological factors in non-medical prescription stimulant use in graduate students.

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<b>Citation:</b>	Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 74/10-B(E)(No Pagination Specified), 0419-4217 (2014)
<b>Author(s):</b>	Verdi, Genevieve
<b>Institution:</b>	U Rhode Island, US
<b>Language:</b>	English
<b>Abstract:</b>	<p>The current study investigated the prevalence of the non-medical use of prescription stimulant medication (active use in the absence of a valid prescription) by graduate students. The project sought to determine whether the rate of non-medical use in this population would be commensurate with usage rates observed in the undergraduate, law, and medical student populations. The study also explored the relationship between perceived knowledge and safety of stimulant medications and non-medical use. Additionally, the study explored the relationship between non-medical use of prescription stimulants with academic self-efficacy, psychological factors (anxiety, depression and stress), and internal restlessness. The present study recruited 807 graduate students from universities located in five geographic regions of the United States. Participants completed measures concerning demographic information, stimulant use, internal restlessness, academic self-efficacy, and psychological distress. Past-year rates of self-reported non-medical use were determined to be 5.9%, with overall lifetime prevalence rate of 17.5%. Motivations for use reported by participants were both academic and social in nature. Self-reported non-medical use of prescription stimulant medications was observed to be significantly correlated with self-reported levels of anxiety, depression, and stress, with various aspects of internal restlessness, and with perceived safety of the medications. Internal restlessness and the perception of safety of stimulant medications were observed to partially predict the non-medical use of prescription stimulants. Effective prevention and education efforts are needed to help address the non-medical use of prescription stimulants by graduate students on university campuses. (PsycINFO Database Record (c) 2014 APA, all rights reserved)</p>
<b>Publication Type:</b>	Dissertation Abstract
<b>Subject Headings:</b>	<p><a href="#">*Drug Usage</a>  <a href="#">*Epidemiology</a>  <a href="#">*Graduate Students</a>  <a href="#">Side Effects (Drug)</a></p>
<b>Source:</b>	PsycINFO

## 2. The far-reaching effects of child maltreatment: A conceptual model and series of studies from an attachment theory perspective.

---

<b>Citation:</b>	Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 74/10-B(E)(No Pagination Specified), 0419-4217 (2014)
<b>Author(s):</b>	Caldwell, Jon G
<b>Institution:</b>	U California, Davis, US
<b>Language:</b>	English
<b>Abstract:</b>	<p>Child abuse and neglect can significantly alter developmental trajectories and lead to a host of maladaptive cognitive, emotional, physical, and social outcomes. Child maltreatment, particularly when mediated by caregivers, diminishes security in early attachment relationships, which can negatively affect neurobiological systems related to stress response and emotion processing. As development progresses, maltreated individuals are more likely to experience social and academic difficulties in middle-childhood, which in turn can contribute to mental health issues, addictive behaviors, romantic relationship problems, and maladaptive parenting. In the present manuscript, this developmental model will be used as the conceptual scaffolding for an integrative presentation of three separate research studies that explore the far-reaching effects of child maltreatment. The first study utilized a facial identification Stroop-task to</p>

show that women (N = 89) with higher levels of child abuse had greater difficulty accessing the cognitive resources necessary to resolve conflicting information when they were simultaneously presented with an emotional stimulus of a fearful face. The second study utilized structural equation modeling in a sample of 388 young adults to show that insecure adult attachment was related to less capacity for emotion regulation and resilience, but that attachment-related avoidance reached these two outcome variables through deactivating pathways involving emotion suppression and low emotional clarity, while attachment-related anxiety reached the same outcome variables through hyperactivating pathways involving cognitive rumination and high levels of negative emotion. The third study, involving a community sample of 76 mothers who were at risk for parenting dysfunction, showed that, after controlling for other forms of abuse (e.g., physical abuse, sexual abuse, and emotional and physical neglect), emotional abuse uniquely predicted higher levels of attachment-related anxiety and maternal depression. Also, structural equation modeling revealed that childhood maltreatment predicted lower parental self-efficacy through indirect pathways involving anxious attachment and depression. Finally, brief concluding remarks will be offered in an attempt to integrate and summarize the findings from these three independent studies. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Anxiety](#)  
[\\*Child Abuse](#)  
[\\*Childhood Development](#)  
[Scaffolding](#)  
[Structural Equation Modeling](#)

**Source:** PsycINFO

### 3. Food addiction: An overlooked cause of persistent overweight and obesity.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 74/10-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Forbes, LaVera J

**Institution:** Saybrook Graduate School and Research Center, US

**Language:** English

**Abstract:** There is a pervasive belief in the United States that most people with excess weight choose to overeat and not exercise, making obesity a lifestyle choice deserving of little sympathy or patience. This belief has resulted in socially acceptable public ridicule of overweight and obese individuals and negative stereotypes. Some physicians also maintain these negative attitudes. Food addiction, which closely resembles the neurochemical response of alcohol and drug addiction, has finally gained credibility in the scientific community as a plausible explanation for obesity in some people (Gearhardt et al., 2011; Taylor et al., 2010). Although obesity rates have escalated, many physicians remain misinformed about obesity and only treat the symptoms. Most physicians are unaware of food addiction and its effects on the mind and body. According to Puhl and Heuer (2009), some physicians are also unaware of their own weight bias and its impact on their patients. The purpose of this research was to test whether targeted education about food addiction and physician weight bias could change physicians' knowledge and attitudes about their overweight and obese patients. This mixed methods research study used quantitative methods to sample the pre and post intervention attitudes of 34 physicians using a newly developed instrument, and in addition included semi-structured interviews with six physicians. Statistical analysis was used to analyze the quantitative data. Descriptive statistics, including mean, standard deviation, and ranges were presented on the physicians' survey responses, and paired sample t-tests were used to assess the changes in physician knowledge and attitude produced by the educational intervention. Thematic analysis was used to identify common themes in the interview data. The quantitative results of this study provided statistically significant evidence that an educational intervention resulted in marked improvement in both physician knowledge and attitudes regarding food addiction and physician weight bias. The qualitative findings

highlighted the lack of awareness in this population of physicians of the role that food addiction and neurochemical responses to certain foods have in overweight and obesity. They also demonstrated that with education physicians can develop an increased commitment to coaching patients in successfully managing overweight and obesity. The implication of this study points toward the possibility that appropriate education may make physicians more sensitive and empathetic to patients with excess weight, resulting in a more effective and integrated patient-centered model of obesity care. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Addiction](#)  
[\\*Food](#)  
[\\*Obesity](#)  
[\\*Quantitative Methods](#)  
[Drug Therapy](#)  
[Physicians](#)  
[Sympathy](#)

**Source:** PsycINFO

#### 4. The relationship between sexual trauma, ethnicity and methamphetamine use among women seeking substance abuse treatment.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 74/10-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Puri, Sheela

**Institution:** Alliant International U., US

**Language:** English

**Abstract:** This research addressed the relationship between sexual trauma and severity of methamphetamine use entering substance abuse treatment. This study also examine the how severity of methamphetamine differed among women of varying ethnicities. Participants were retrieved from the DENS national dataset and included 2,502 methamphetamine-using women. Hypothesis 1 proposed that women who reported sexual trauma would have more severe methamphetamine use than those that did not report sexual abuse. Analysis determined that when severity was operationally defined as number of years methamphetamine was used, no significance was found between women who reported sexual abuse and those that did not. Severity was then operationally defined as days of methamphetamine use in the 30 days prior to entering treatment. However, while the difference between groups was statistically significant ( $p=.001$ ), it was in the opposite direction than hypothesized. Finally, Hypothesis 2 examined differences in the severity of methamphetamine use among all participants grouped by ethnicity. Results of this hypothesis was significant and indicated more severe of use among White women ( $M=6.02$  years) as compared to Mexican women ( $M=4.67$  years),  $p<.05$ . Results also indicated a significant difference in years of use between Native American women ( $M=8.45$  years) and Mexican women ( $M=4.67$  years), such that Native American women used methamphetamines for a significantly longer period of time than Hispanic-Mexican women, with the mean difference of years being 3.78,  $p<.001$ . Results of this study suggest a need for more accurate operational definition of both severity of methamphetamine use and sexual trauma are necessary to accurately assess for the relationship between both variables. Further, this study identified ethnic differences that may aid in the examination of cultural and psychosocial variables involved with women's methamphetamine use. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Cross Cultural Differences](#)  
[\\*Human Females](#)  
[\\*Methamphetamine](#)  
[\\*Trauma](#)  
[Drug Abuse](#)  
[Sexual Abuse](#)

**Source:** PsycINFO

### 5. The relationship of individual therapy to depressive symptoms among treatment-seeking homeless men.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 74/10-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Joy, Adam

**Institution:** Pepperdine U., US

**Language:** English

**Abstract:** The homeless are a vulnerable group, and research has consistently shown that the homeless experience higher rates of mental disorders, substance abuse, and physical illness than housed persons. Depressive disorders are particularly common among the homeless and have been reported at 2 to 4 times the rate found among housed individuals. The purpose of this study was to examine the relationship of individual therapy to depressive symptoms among treatment-seeking, homeless men attending a residential substance abuse recovery program in an inner-city mission. The participants were 81 men with a mean age of 39.95 years. The sample was ethnically diverse and had a modal educational level of at least some high school. All of the participants had voluntarily sought individual psychological services as an optional component of their substance abuse program in this archival study. Depressive symptoms were measured with the Beck Depression Inventory, Second Edition (BDI-II). De-identified demographic and background information was obtained from the clinical intake form used in this setting. BDI-IIs were administered at intake and following approximately 6 sessions of individual therapy for all participants. Therapy services were provided by clinical psychology doctoral students, under the supervision of licensed psychologists. The sample obtained a mean BDI-II score at intake of 21.68, indicating moderate severity of symptoms; internal consistency reliability was .935. The mean BDI-II score following approximately 6 therapy sessions was 16.36, indicating mild severity; the BDI-II internal consistency reliability at follow-up assessment was .923. As predicted, BDI-II scores were significantly lower at retest. For the men in this study, participation in individual therapy was associated with significant reduction of depressive symptoms. Participants with prominent mood complaints on the clinic intake evaluation form (n = 38) had significantly higher BDI-II scores at intake assessment than individuals with other primary complaints (n = 43), supporting the validity of the BDI-II as a measure of mood symptoms among homeless men. Other findings, clinical implications, limitations, and suggestions for future research are also explored. The results strongly supported the reliability and validity of the BDI-II as a measure of depressive symptoms and psychological distress among treatment-seeking homeless men. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Individual Psychotherapy](#)  
[\\*Symptoms](#)  
[Homeless](#)  
[Major Depression](#)  
[Physical Disorders](#)

**Source:** PsycINFO

### 6. Wellbeing, readiness to change and personality as measures to assess and predict effectiveness in a court-mandated substance abuse treatment setting.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 74/10-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Lester, Laureen Anne

**Institution:** Alliant International U., US

**Language:** English

**Abstract:** Effectiveness of substance abuse programs has been a major field of study over the past decades with greater attention recently focused on co-morbidity program efficacy. The purpose of this study was to determine how personality, wellbeing and readiness to change interact in the mandated treatment of substance abuse using archival data collected from a non-profit substance abuse treatment center in the greater Sacramento area. The study examined the relationships between wellbeing, readiness to change, and self-reported psychopathology and their effects on treatment program completion. Due to the generally low distressed population, when examined initially, wellbeing and readiness to change results offered limited new information, but when clients were categorized by distress levels in post hoc analyses expected relationships emerged. When compared to participants of the same distress level (mild, moderate and severe distress at intake) those who completed treatment successfully had significantly higher wellbeing scores than those who did not complete treatment with dramatic effect sizes for mild ( $d = .89$ ), moderate ( $d = .53$ ) and severe ( $d = 1.45$ ) categories. The means for these groups increased so dramatically that clients moved to lower levels of distress classifications. Correlations between changes in wellbeing and readiness to change data were compared resulting in a positive but non significant relationship. Clients with elevations  $>70$  on PAI subscales for Borderline and Antisocial Features were correlated with treatment completion data to see if either of these factors could be used as predictors of dropout. Personality pathology within this population did not appear to be a relevant factor in treatment completion though as this population did not generally represent a clinically distressed sample. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Adjudication](#)  
[\\*Drug Abuse](#)  
[Readiness to Change](#)  
[Morbidity](#)

**Source:** PsycINFO

#### 7. Barriers to addiction treatment among homeless adults and the expected impact of health care reform.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 74/10-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Zur, Julia B

**Institution:** The Johns Hopkins U., US

**Language:** English

**Abstract:** Introduction: Substance use disorders (SUD) are highly prevalent among homeless adults and the large majority of this population is currently ineligible for Medicaid coverage, making it difficult to access treatment. However, one of the major provisions of the Affordable Care Act (ACA) is that Medicaid eligibility will be expanded in many states to include all adults at or below 133% of the Federal Poverty Line (FPL) regardless of parental or disability status, which has tremendous implications for this population. In response to this policy change, the three aims of this dissertation were to: 1) Assess the association of Medicaid coverage with SUD treatment in a nationally representative sample of recipients of homeless assistance services; 2) To assess the uptake of Medicaid coverage among substance abusing homeless adults following the Medicaid expansion initiative in Massachusetts (MassHealth); and 3) To assess the cost-savings of expanding Medicaid eligibility to include currently uninsured homeless adults with SUDs. Methods: For Aim 1, propensity score adjusted inverse probability of treatment weighting was used to assess the relationship between Medicaid coverage and receipt of SUD treatment during the past year, past six months, and past 30 days. Additionally, descriptive statistics were used to assess lifetime use of various SUD treatment services among homeless individuals with and without Medicaid coverage. For Aim 2, an interrupted time series design was used to analyze rates of Medicaid coverage before and after the implementation of the MassHealth policy in 1997 to compare uptake of Medicaid coverage in those who were and were not homeless. For Aim 3, three different cost-savings analyses were conducted, projecting the costs and savings to state

governments, the federal government, and the combination of state and federal governments during the seven years following the planned expansion of Medicaid under the ACA. Results: Results of Aim 1 demonstrated that Medicaid coverage increases the odds of SUD treatment contacts during the past six months, and this relationship is most pronounced in the case of outpatient treatment. Additionally, those with Medicaid coverage were significantly more likely to report lifetime use of SUD services. Analyses for Aim 2 demonstrated that the MassHealth program resulted in a significant increase in Medicaid coverage among adults with SUD, and homeless adults benefited from this policy to the same extent as non-homeless adults. Results of Aim 3 suggested that participation in the Medicaid expansion in 2014 would be extremely cost saving to states, would result in a financial cost to the federal government, and would also be associated with a small cost when taking both state and federal governments in account. Discussion: Findings of all three aims support the feasibility and benefits of state expansions of Medicaid in 2014 as envisioned under the ACA, as it will likely increase Medicaid enrollment and receipt of SUD treatment among homeless adults and will result in substantial savings to states. Efforts should be made to disseminate findings to researchers, policymakers, treatment providers, and the general public. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract  
**Subject Headings:** [\\*Addiction](#)  
[\\*Homeless](#)  
[\\*Health Care Reform](#)  
[\\*Uninsured \(Health Insurance\)](#)  
[Medicaid](#)  
[Treatment](#)  
**Source:** PsycINFO

#### 8. Addiction as selfobject: An integrated analysis of self psychological and neurobiological models of nicotine addiction.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 74/10-B(E)(No Pagination Specified), 0419-4217 (2014)  
**Author(s):** Lokhmotov, Roman  
**Institution:** Inst for the Psychological Sciences, US  
**Language:** English  
**Abstract:** Nicotine addiction is a prevalent mental health disorder with a high rate of relapse. Current limitations in the etiology and treatment of nicotine addiction highlight the necessity of a continued examination of this disorder. Given the important associations between smoking and individual affective and personality variables, demonstrated by contemporary empirical research, this dissertation explores nicotine addiction from the self psychological perspective. Specifically, this dissertation examines whether (1) specific areas of affective and personality functioning predispose one to developing nicotine addiction; (2) nicotine provides a selfobject function by influencing the neurobiology of three primary affects (hostility, anxiety, and depression) and associated personality traits; and (3) nicotine addiction constitutes an ersatz selfobject by causing further regression of psychological functioning. The roles of pleasure, relationality and fantasy in nicotine addiction are highlighted. The implications of nicotine addiction as selfobject are examined from the Catholic anthropological perspective. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract  
**Subject Headings:** [\\*Addiction](#)  
[\\*Major Depression](#)  
[\\*Mental Health](#)  
[\\*Neurobiology](#)  
[Nicotine](#)  
[Self Analysis](#)  
[Tobacco Smoking](#)

**Source:** PsycINFO

### 9. Terrorism, civil war, one-sided violence and global burden of disease.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 74/10-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Kerridge, Bradley Townsend

**Institution:** U Maryland, Coll Park, US

**Language:** English

**Abstract:** The purpose of this dissertation was to examine relationships between terrorism, civil war and one-sided violence from 1994-2000 and morbidity and mortality in 2002, as measured by disability-adjusted life years (DALYs), attributable to: (1) major communicable and noncommunicable diseases; (2) diarrheal and related diseases; and (3) substance use disorders among World Health Organization Member States. Multivariable linear regression analyses controlled for economic factors shown to affect public health (Papers 1-3) and pre-existing vulnerability factors: percentage of the population using improved water resources/sanitation facilities (Paper 2); and per capita alcohol consumption and prevalence of illicit drug use (Paper 3). Deaths due to terrorism, war and one-sided violence from 1994-2000 were, with few exceptions, significantly related to DALYs lost to major communicable and noncommunicable diseases, diarrheal and related diseases and substance use disorders in 2002 across the majority of sex-age subgroups of the populace. This dissertation research highlighted the need to expand the traditional focus of intervention for communicable diseases among conflict-affected populations to include a variety of noncommunicable diseases (Paper 1). Results underscore the need for international government and nongovernment organizations to prioritize high risk areas for diarrheal and related disease control to include conflict-affected populations with particular attention to young children who are most vulnerable to these diseases (Paper 2). That terrorism and related violence influence diarrheal and related diseases in the longer-term suggests that control strategies should move beyond short-term provisions for safe water and adequate sanitation to seek solutions through health systems infrastructure development. Greater attention should also be given to the prevention and treatment of substance use disorders in conflict-affected populations including brief interventions targeted at high risk substance users, provisions for needles and syringes and management of withdrawal and other acute substance-related conditions (Paper 3). Strengthening substance abuse treatment systems among conflict-affected populations will be critical in identifying and treating of a variety of physical and psychiatric disorders that are often comorbid with substance use disorders. Taken together, this research has served to highlight the full health costs of terrorism, civil war and one-sided violence will ultimately contribute to forging a stronger rationale for promoting peace. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Death and Dying](#)  
[\\*Disabilities](#)  
[\\*Drug Abuse](#)  
[\\*Mental Disorders](#)  
[Organizations](#)  
[Terrorism](#)  
[War](#)  
[Morbidity](#)

**Source:** PsycINFO

### 10. Gay men and the intentional pursuit of HIV.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 74/10-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Loveless, Thomas James

**Institution:** U Wisconsin - Milwaukee, US

**Language:** English

**Abstract:** Hidden deep within the gay male underground lives a small population of gay men who imagined the intentional pursuit of HIV as a means to some end. In terms of nursing care for such marginalized pockets of gay men, most nurses are unaware of their existence or lack sufficient knowledge and compassion to care for this population. Bug chaser is a metaphor used to describe the gay men who intentionally sought the bug--HIV infection. Essential to caring for these men is first discovering them, and then understanding them. The purpose of this narrative study was to understand the life experiences of gay men who intentionally sought or seek to become infected with HIV. Using queer theory as its framework, the study was constructed from two research questions: 1) What are the life-stories of gay men who seek HIV infection? 2) How do these life-stories describe and give meaning to sexuality and HIV? In this qualitative study, 18 adult gay men were interviewed three times over a period of three months. Chain referral sampling wherein initial participants spread word of the study in their associate networks limited racial diversity; 15 men self-identified as African American, one as "other" (i.e., Italian and African American), one as Latino, and one as Caucasian. Their ages ranged from 33 years to 61 years (M=48). Most considered themselves Christians (n=13). Socioeconomically, 10 of the men lived in poverty. Sixteen were HIV positive; two were pursuing HIV. Most (n=16) secured health care through one of the Medicare or Medicaid products. Through semi-structured interviews and narrative analyses, their life stories portray who these men were and why they imagined HIV to be a fitting means to an end. Results illustrate that the intentional pursuit of HIV was well thought out and strategically planned, and aligned with lifetime struggles, for example, difficulty accepting one's gay identity. Narrative life patterns that culminated in purposeful pursuit of HIV included addictions, wanting to connect to an HIV positive lover, childhood abuses, secrets, punishment for wrongdoings, and, in one case, HIV as an imagined progression for gay men. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*AIDS](#)  
[Male Homosexuality](#)

**Source:** PsycINFO

#### 11. Boredom, pain, psychiatric symptoms & substance use in methadone maintenance treatment patients.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 74/10-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Loran, Elizabeth G

**Institution:** The New School, US

**Language:** English

**Abstract:** Boredom has been linked to relapse in substance abuse, as well as psychiatric symptoms and physical health. However, the effect of boredom, pain and psychiatric symptoms upon relapse in methadone maintained treatment (MMT) patients has not been well studied. The results and discussion below represents an attempt to elucidate the relationship between these variables in methadone maintained patients, as boredom has been consistently shown to serve as a potentiator of psychopathology and physical symptoms. Pilot and replication studies were conducted on two separate samples of MMT patients from a variety of MMT programs and clinics in New York City. These samples were assessed on a number on measures, including The State Boredom Measure, and compared to each other to verify that (1) boredom could predict substance use in urine analysis (2) Verify a relationship between boredom, pain and psychiatric symptom (3) Determine the variables that best predict relapse in this population (4) determine the overall relationship between these variables through factor analytic and structural equation models. This analysis will allow for clinical clarification on risk factors for relapse in patients receiving methadone for opioid-dependence and variables that might allow clinicians to target and

better treat those at risk for relapse. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract  
**Subject Headings:** [\\*Boredom](#)  
[\\*Drug Abuse](#)  
[\\*Drug Therapy](#)  
[\\*Methadone Maintenance](#)  
[Methadone](#)  
[Psychiatric Symptoms](#)  
**Source:** PsycINFO

## 12. Factors associated with risk to readmission in Alaska natives and American Indians admitted to inpatient alcohol detoxification.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 74/10-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Running Bear, Ursula

**Institution:** U Colorado Health Sciences Center, US

**Language:** English

**Abstract:** Although Alaska Natives diagnosed with alcoholism were identified as frequent utilizers of their health care system, studies have not focused on readmission to detoxification for this group. Over the span of thirty years, several studies reported readmission rates for detoxification. The rates of readmission for these studies ranged from 27% to 48% within one year. Over the past several years research efforts focused on factors associated with readmission to detoxification. Many of these studies examined demographic variables, psychiatric comorbidities and use behaviors. This thesis examined factors associated with time to readmission using a retrospective cohort study. The sample included 383 Alaska Native/American Indian adult patients admitted to an inpatient alcohol detoxification unit in 2006 and 2007. Cox proportional hazard modeling was used to study time to readmission over one year. Several independent variables corresponding to a conceptual model of readmission were examined. The conceptual model included the following: demographics, psychological and social characteristics, access to care, utilization of health care system and health status. Forty-two percent of the patients in this thesis were readmitted within one year. The results of the analyses indicated Global Assessment Functioning (GAF; Axis V in the multi-axial diagnostic system of the Diagnostic and Statistical Manual of Mental Disorders [DSM IV]) score measured at the time of intake was associated with readmission. A one point increase in the GAF score was associated with a four percent decrease in readmission. The results also showed that GAF mediated the relationship between readmission and two independent variables, employment and housing status. This thesis offers a unique perspective regarding the GAF and readmission, one that has not previously been considered in the detoxification literature. The findings demonstrate the importance of the GAF in the assessment of the risk to readmission to detoxification. The GAF measures both illness severity and adaptive functioning, is a standard part of behavioral health assessments and is easy to score. Results from this thesis support the necessity to address adaptive functioning along with illness severity during both detoxification and aftercare treatment. Such an approach has the potential to reduce the rates of readmissions after detoxification. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Alaska Natives](#)  
[\\*Alcoholism](#)  
[\\*Health](#)  
[\\*Mental Disorders](#)  
[American Indians](#)  
[Detoxification](#)  
**Source:** PsycINFO

**13. The impact of mindfulness approaches on chemical dependency: Recovery and relapse.**

<b>Citation:</b>	Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 74/10-B(E)(No Pagination Specified), 0419-4217 (2014)
<b>Author(s):</b>	Khaleghian, Sheila
<b>Institution:</b>	Alliant International U., US
<b>Language:</b>	English
<b>Abstract:</b>	Legal and illegal substances are used for a variety of reasons including self-medication, pleasurable effects, along with altering mental states. The prevalence of substance use disorders has continued to have a large and devastating impact on health and public safety issues, which affects our society, families, and the community. Throughout the years, it has been shown that individuals who suffer from a co-occurring mental illness use drugs as a way of coping in response to the symptoms experienced. Poor coping mechanisms in stressful situations have been known to increase vulnerability toward drug use and have caused addicts to relapse. A variety of treatment modalities such as cognitive behavioral therapy have been used throughout the past 20 years and have been shown to be effective when treating chemical dependency and other comorbid disorders, yet relapse rates remain high. The most recent literature suggests that effective treatment for substance abuse often combines different therapeutic approaches. Recently, there has been a wealth of evidence on mindfulness approaches shown to be effective in reducing a number of physical and health problems as well as improving overall quality of life when incorporated into treatment. This doctoral project aims to review the multifaceted concept of mindfulness along with the impact of mindfulness meditation on the impact of chemical dependency and other co-occurring disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
<b>Publication Type:</b>	Dissertation Abstract
<b>Subject Headings:</b>	*Coping Behavior *Drug Abuse *Self Medication *Mindfulness Drug Therapy Mental Disorders
<b>Source:</b>	PsycINFO

**14. Individualized substance abuse treatment: Exploring options.**

<b>Citation:</b>	Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 74/10-B(E)(No Pagination Specified), 0419-4217 (2014)
<b>Author(s):</b>	Dubron, Jessica L
<b>Institution:</b>	Alliant International U., US
<b>Language:</b>	English
<b>Abstract:</b>	This is an examination of the evolution of alcohol and drug abuse treatment, and how it has led to the current ubiquitous reliance on the 12-step Alcoholics Anonymous (AA) model. Since its advent, the 12-step model has been the go-to referral for patients seeking treatment. Although undoubtedly an important method, this model is not the only viable approach, and has been ineffective for some. Reviewing this history has led to the conclusion that the mental health field needs a more expansive and evidence-based approach to treatment. Therefore, an exploration of key factors, including internal factors (e.g., co-occurring disorders), personal history (e.g., drug abuse history), and treatment factors (e.g., treatment preferences), was developed to aid mental health professionals in creating individualized referrals for patients seeking substance abuse treatment. A presentation of the guide to mental health professionals early in their career is proposed. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
<b>Publication Type:</b>	Dissertation Abstract

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Therapy](#)  
[Attention Deficit Disorder with Hyperactivity](#)

**Source:** PsycINFO

#### 15. Nutritional status of patients with end stage liver disease: An outpatient assessment.

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**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 74/10-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Cumming-Browne Hefner, Anna Marie

**Institution:** U San Diego, US

**Language:** English

**Abstract:** Cirrhosis is the 12th leading cause of death in the United States. It is well documented end stage liver disease drives a patient to a catabolic state thus depleting them of essential nutrients. Malnutrition is often unrecognized and untreated in outpatients. Though BMI, nutritional intake, anthropometric measurements have been used in clinical trials, there still remains no standard nutritional assessment. The purpose of this dissertation was to (1) identify the incidence of malnutrition in patients with compensated and decompensated liver disease utilizing defined nutritional parameters (Subjective Global Assessment, anthropometric measurements, hand grip strength, and laboratory values) and (2) correlate with care (hospital visits, physician appointments, outcome and quality of life) secondary to viral hepatitis, metabolic and alcoholic liver disease. The conceptual framework underlying this study is derived from the literature based on the domains of liver function, nutrition, and malnutrition. Nutrition includes the chemical substances in food utilized by the body for growth, maintenance, and repair: the intake, digestion, and assimilation and utilization of nutrients for tissue maintenance and energy provision. There is no gold standard for proper nutritional assessment of patients diagnosed with liver disease; notably, the traditional assessment tools are invalid with end-stage liver disease. Ascites, edema, and diuretics cause fluctuations in weight and weight changes. Cirrhosis of the liver drives a patient to a catabolic state, thus depriving them of essential nutrients. Simple and easily applied methods are needed to identify the patients approaching the state of malnutrition. Study findings presented in three papers provides a major contribution in discriminating the nutritional parameters of different etiologies of cirrhosis leading to malnutrition. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Drug Therapy](#)  
[\\*Liver](#)  
[\\*Outpatients](#)  
[Liver Disorders](#)  
[Nutrition](#)

**Source:** PsycINFO

#### 16. Promise and deceit: Pharmakos, drug replacement therapy, and the perils of experience.

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**Citation:** Culture, Medicine and Psychiatry, May 2014(No Pagination Specified), 0165-005X;1573-076X (May 1, 2014)

**Author(s):** Meyers, Todd

**Abstract:** The problem of lying as a feature of medication compliance has been well documented in anthropological and clinical literatures. Yet the role of the lie-its destabilizing effects on the continuity of drug treatment and therapy, as a technology of drug misuse, or as a way to understand the neuro-chemical processes of treatment (pharmacotherapy "tricking" or lying to the brain)-has been less considered, particularly in the context of opioid replacement therapy. The following paper is set against the backdrop of a three-year study of adolescents receiving a relatively new drug (buprenorphine) for the treatment of opiate

dependency inside and outside of highly monitored treatment environments in the United States. Lies give order not only to the experience of addiction but also to the experience of therapy as well. In order to better understand this ordering of experience, the paper puts the widely discussed conceptual duality of the pharmakon (healing and poison) in conversation with a perilously overlooked subject in the critical study of pharmacotherapy, namely the pharmakos or the personification of sacrifice. The paper demonstrates how the patient-subject comes to represent therapeutic promise by allowing for the possibility of (and often performing) deceit. (PsycINFO Database Record (c) 2014 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:**  
**Source:** PsycINFO

#### 17. Sign-tracking to an appetitive cue predicts incubation of conditioned fear in rats.

**Citation:** Behavioural Brain Research, April 2014(No Pagination Specified), 0166-4328 (Apr 18, 2014)  
**Author(s):** Morrow, Jonathan D; Saunders, Benjamin T; Maren, Stephen; Robinson, Terry E  
**Abstract:** Although post-traumatic stress disorder (PTSD) and addiction are very different disorders, both are characterized by hyperreactivity to trauma- or drug-related cues, respectively. We investigated whether an appetitive conditioning task, Pavlovian conditioned approach, which predicts vulnerability to reinstatement of cocaine-seeking, also predicts fear incubation, which may be a marker for vulnerability to PTSD. We classified rats based on whether they learned to approach and interact with a food predictive cue (sign-trackers), or, whether upon cue presentation they went to the location of impending food delivery (goal-trackers). Rats were then exposed to extensive Pavlovian tone-shock pairings, which causes the fear response to increase or "incubate" over time. We found that the fear incubation effect was only present in sign-trackers. The behavior of goal-trackers was more consistent with a normal fear response-it was most robust immediately after training and decayed slowly over time. Sign-trackers also had lower levels of brain-derived neurotrophic factor (BDNF) protein in the prefrontal cortex than goal-trackers. These results indicate that, while many factors likely contribute to the disproportionate co-occurrence of PTSD and substance abuse, one such factor may be a core psychological trait that biases some individuals to attribute excessive motivational significance to predictive cues, regardless of the emotional valence of those cues. High levels of BDNF in the prefrontal cortex may be protective against developing excessive emotional and motivational responses to salient cues. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

#### 18. Towards a unitary perspective between post-traumatic stress disorder and substance use disorder. Heroin use disorder as case study.

**Citation:** Comprehensive Psychiatry, March 2014(No Pagination Specified), 0010-440X (Mar 26, 2014)  
**Author(s):** Dell'Osso, Liliana; Rugani, Fabio; Maremmanni, Angelo Giovanni Icro; Bertoni, Sara; Pani, Pier Paolo; Maremmanni, Icro  
**Abstract:** BACKGROUND: Genetic, neurobiological, environmental and psychosocial mechanisms have received considerable attention in exploring the mechanisms that underlie comorbid PTSD and SUD. PTSD and SUD are not necessarily linked by a causal relationship, as the self-medication hypothesis had supposed. They might, in fact, both be caused by a third factor that predisposes these subjects to develop the two disorders (so allowing a unitary perspective). METHODS: Using a conceptualization of the PTSD spectrum, we

studied the PTSD-SUD unitary perspective by testing the correlation between severity of heroin addiction, dose of opioid medication and severity of PTSD spectrum in 82 methadone-treated, heroin-dependent patients. RESULTS: Canonical correlation analysis (Wilks Lambda=0.125F=1.41 p=0.014), univariate and multivariate comparisons between subgroups, identified on the basis of addiction severity, showed a highly positive correlation between the PTSD spectrum and the severity of heroin addiction. In addition, negative correlations were found between PTSD spectrum severity and methadone dose ( $r=0.225$ ;  $p=0.042$ ). CONCLUSIONS: This strength and breadth of the correlations encourage us to move towards a unified vision of the two disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:**

**Source:** PsycINFO

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

#### 19. Blockade of orexin-1 receptors in the ventral tegmental area could attenuate the lateral hypothalamic stimulation-induced potentiation of rewarding properties of morphine.

**Citation:** Neuropeptides, April 2014(No Pagination Specified), 0143-4179 (Apr 21, 2014)

**Author(s):** Zarepour, Leila; Fatahi, Zahra; Sarihi, Abdolrahman; Haghparast, Abbas

**Abstract:** The orexins (hypocretins) are lateral hypothalamic (LH) neuropeptides that have been implicated in a variety of behaviors ranging from feeding to sleep and arousal. Evidence from animal models suggests a role for orexins in reward processing and drug addiction. In the present study, we investigated the direct effect of an orexin antagonist in the ventral tegmental area (VTA) on acquisition and expression of morphine conditioned place preference (CPP) induced by concurrent stimulation of the LH. Eighty-one adult male Wistar rats weighing 220-280g were unilaterally implanted by two separate cannulae into the LH and VTA. The CPP paradigm was done; conditioning score and locomotor activity were recorded by Ethovision software. The animals received SB334867 as a selective orexin-1 receptor antagonist (0.1, 1 and 10nmol/0.3l DMSO) in the VTA, just 5min prior to intra-LH administration of ineffective dose of carbachol as a cholinergic agonist (62.5nmol/0.5l saline) that stimulates orexin neurons in the LH and ineffective dose of morphine (1mg/kg, subcutaneously) concurrently during conditioning phase (acquisition experiments) or post-conditioning phase (expression experiments). Data showed that the blockade of orexin-1 receptors in the VTA could inhibit the acquisition (development) but not expression of LH stimulation-induced morphine CPP in the rats. Our findings suggest that the orexinergic projections from the LH to the VTA are involved in the development of the LH stimulation-induced potentiation of morphine rewarding properties and orexin-1 receptors in the VTA have a substantial role in this phenomenon. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:**

**Source:** PsycINFO

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

#### 20. Gender differences in internet addiction associated with psychological health indicators among adolescents using a national web-based survey.

**Citation:** International Journal of Mental Health and Addiction, April 2014(No Pagination Specified), 1557-1874;1557-1882 (Apr 29, 2014)

**Author(s):** Ha, Yeong-Mi; Hwang, Won Ju

**Abstract:** Internet addiction, especially its prevalence among adolescents and its predictors, has been the focus of much research. Few studies have investigated gender differences in the relationship between Internet addiction and psychological health among adolescents. The present study investigated gender differences in Internet addiction associated with self-rated health, subjective happiness, and depressive symptoms among Korean adolescents aged 12 to 18 years using a nationally representative dataset. Data from 56,086 students (28,712 boys and 27,374 girls) from 400 middle schools and 400 high schools were analyzed. We found that 2.8 % of the students (3.6 % boys and 1.9 % girls) were addicted users, and the prevalence of Internet addiction was higher in boys than in girls. In multiple logistic regression analysis, three psychological health indicators including poor self-rated health, subjective unhappiness, and depressive symptoms were significantly related with Internet addiction in boys and girls. Girls with emotional difficulties such as subjective unhappiness or depressive symptoms had much higher risks of Internet addiction than did boys with similar problems. Further attention should be given to developing Internet addiction prevention and intervention programs that are tailored to fit boys' and girls' different needs. (PsycINFO Database Record (c) 2014 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:**

**Source:** PsycINFO

#### 21. Biases of attention in chronic smokers: Men and women are not alike.

**Citation:** Cognitive, Affective & Behavioral Neuroscience, April 2014(No Pagination Specified), 1530-7026;1531-135X (Apr 29, 2014)

**Author(s):** Perlato, Andrea; Santandrea, Elisa; Della Libera, Chiara; Chelazzi, Leonardo

**Abstract:** The activation of motivational systems by stimuli in the environment that are associated with rewarding experiences is able to trigger plastic changes in the brain, thereby altering the attentional priority of those stimuli. As a result, attentional deployment is often abnormal in addiction, with drug-related stimuli attracting attention automatically and gaining control over behavior. For example, smokers show attentional biases toward smoke-related cues, but the mechanisms underlying these effects and the nature of their link to addiction are still debated. Here, we investigated the influence of gender and individual factors on the temporal dynamics of attentional deployment toward smoke-related stimuli in young smokers. Crucially, we found a striking gender difference, with only males exhibiting a typical attentional bias for smoke-related items, and the bias revealed strong time dependency. Additionally, for both males and females, various personality traits and smoking habits predicted the direction and strength of the measured bias. Overall, these results unveil a crucial influence of several predictors-notably, gender-on the biases of attention toward smoke-related items in chronic smokers. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Psychonomic Society, Inc.; YEAR: 2014

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

**Subject Headings:**

**Source:** PsycINFO

#### 22. Epigenetic regulation of memory by acetylation and methylation of chromatin: Implications in neurological disorders, aging, and addiction.

**Citation:** NeuroMolecular Medicine, April 2014(No Pagination Specified), 1535-1084;1559-1174 (Apr 29, 2014)

**Author(s):** Sen, Nilkantha

**Abstract:** Synaptic plasticity is one of the most fundamental properties of neurons that underlie the formation of the memory in brain. In recent years, epigenetic modification of both DNA

and histones such as DNA methylation and histone acetylation and methylation emerges as a potential regulatory mechanism that governs the transcription of several genes responsible for memory formation and behavior. Furthermore, the recent identification of nitrosylation of proteins has shown to either activate or repress gene transcription by modulating histone methylation or acetylation status in mature neuron. Recent studies suggest that the use of major substrates of abuse, e.g., cocaine, induces alterations in molecular and cellular mechanisms of epigenetics that underlie long-term memories in the striatum and prefrontal cortex. Moreover, downregulation of genes due to alterations in epigenetics leads to cognitive deficiencies associated with neurological disorders such as Alzheimer's disease, Huntington's disease, psychiatric disorder such as Rett's syndrome and aging. In this review, I will discuss the evidence for several epigenetic mechanisms in the coordination of complex memory formation and storage. In addition, I will address the current literature highlighting the role of acetylation and methylation of chromatin in memory impairment associated with several neurological disorders, aging, and addiction. (PsycINFO Database Record (c) 2014 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:**  
**Source:** PsycINFO

### 23. Clinical needs of in-treatment pregnant women with co-occurring disorders: Implications for primary care.

**Citation:** Maternal and Child Health Journal, April 2014(No Pagination Specified), 1092-7875;1573-6628 (Apr 27, 2014)  
**Author(s):** Lee King, Patricia A; Duan, Lei; Amaro, Hortensia  
**Abstract:** We investigated social vulnerability and behavioral health clinical profiles (symptom severity) of pregnant women with co-occurring disorders, defined as substance abuse, mental illness, and trauma at treatment entry compared to their nonpregnant counterparts and the role of interpersonal abuse in clinical presentation among pregnant women. Our objective was to provide primary health care providers with insight into the needs of pregnant patients with high behavioral health risks to serve them better during the critical window of opportunity for long-term impact. We conducted cross-sectional secondary analysis of baseline data from women enrolled in treatment programs in the Women, Co-occurring Disorders and Violence Study from nine sites across the United States. We used analysis of variance and Cochran-Mantel-Haenszel statistical analyses to compare means and frequencies of social vulnerability indicators and baseline Addiction Severity Index, Brief Symptom Inventory of mental health, and Posttraumatic Stress Diagnostic Scale scores between 152 pregnant and 2,577 nonpregnant women, and between pregnant women with and without current interpersonal abuse. Compared to nonpregnant women, pregnant women evidenced more social vulnerability but better behavioral health clinical profiles at treatment entry. Current interpersonal abuse was associated with increased mental health and trauma symptomatology but not with alcohol or drug abuse severity among pregnant women. The prenatal period is an important time for screening and intervention for factors such as social vulnerability and co-occurring disorders, known to affect pregnancy and infant outcomes; social and behavioral health services are particularly essential among pregnant women with co-occurring disorders. (PsycINFO Database Record (c) 2014 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:**  
**Source:** PsycINFO

### 24. Drug addiction and gambling.

**Citation:** Disorganization: Personal and social., 1952(456-478) (1952)  
**Author(s):** Bloch, Herbert A

**Institution:** St. Lawrence University, US

**Language:** English

**Abstract:** (from the chapter) Drug addiction is considerably different, psychologically and physiologically, from excessive drinking. Because of rigorous federal and state controls over the importation and use of drugs; fewer persons are afflicted by this habit than are addicted to drink. Because of the illicit nature of the traffic in drugs, addicts are usually associated with underworld elements. The effect of drugs upon the human organism and personality is quite different than in the case of alcohol. The disintegration of the addicted individual, physical and mental, assumes a different course than in the case of alcohol, and for different reasons. The common drugs and their derivatives used by addicts do not function in the same way. The most common, and those considered by experts the most pernicious, are the opium derivatives, morphine, codeine, and laudanum. Cocaine and the ubiquitous marihuana or hashish (Indian hemp) are not considered as dangerous in their effects and addiction to them is usually easier to curb. Opium can be taken either by smoking or eating, while morphine or heroin is usually taken through injection by means of a hypodermic needle, or sniffed as a powder. Although drugs have served an important medicinal function, their abuse is primarily a problem of modern times. It wasn't until the present century that the taking of drugs was condemned as anti-social and "immoral." During the nineteenth century, when drugs were used more extensively in Europe and the United States, victims of the drug habit were pitied rather than censured. Today, the practice seems to be localized among particular classes and groups in the various cultures where it is found. The distribution of addiction is related to such factors as ethnic background, degree of urbanization, and education. The relevance of these factors must in each case be accounted for on the basis of the cultural circumstances involved, exposure to drugs, opportunities for continuing and developing habits of addiction, contacts with distributors, and critical situations in the lives of individuals and groups. This chapter discusses addiction within a sociological framework. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Authored Book

**Subject Headings:** [\\*Drug Addiction](#)  
[\\*Gambling](#)  
[Sociology](#)

**Source:** PsycINFO

## 25. Treatment of other states of intoxication of external origin.

**Citation:** Treatment of mental disorder., 1953(444-469) (1953)

**Author(s):** Alexander, Leo

**Institution:** Boston State Hospital, Dorchester, MA, US

**Language:** English

**Abstract:** (from the chapter) Intoxication caused by chemical substances other than alcohol may occur accidentally, due to occupational exposure, in the course of attempted suicide or homicide, or due to addiction. The treatment consists of three phases: treatment of the acute intoxication, treatment of the late after-effects of the poisoning, and, in those cases in which ingestion was due to addiction, therapy similar to that outlined in the preceding chapter for chronic alcoholism. By way of introduction to the following chapter, it should be emphasized that the traditional clinical signs of organic psychosis-disorientation, memory disturbances, and the other aspects of organic confusion such as clouding of consciousness, slowing of reactions to external stimuli, the deliriod character of the hallucinations, and the presence of confabulations-are not always reliable differential diagnostic criteria. Not infrequently, hallucinatory and paranoid reactions occur in drug-induced psychoses which are clinically indistinguishable from those observed in schizoaffective states. Severe anxiety may frequently obscure or, on the other hand, give the appearance of clouding of the sensorium. Bewilderment, motor restlessness, and semistuporous states occur in toxic as well as in schizophrenic or schizoaffective psychoses. For example, as Moore and Gray have pointed out, the effects of carbon

monoxide inhalation may resemble the behavior patterns of hebephrenic schizophrenia, or may simulate dementia paralytica. Or, as Seymour has noted, chronic barbiturate poisoning may resemble manic-depressive psychosis. Careful physical, psychiatric, and toxicologic study is therefore indicated in all cases. The psychiatrist and physician must have thorough familiarity with those types of mental states that may be produced or simulated by drugs and other exogenous toxins. In the following, a brief review of the treatment of the more common intoxications with presenting symptoms and signs of mental disturbance will be given. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Authored Book

**Subject Headings:** [\\*Toxic Disorders](#)  
[\\*Treatment](#)  
[\\*Chemical Exposure](#)  
[Mental Disorders](#)  
[Symptoms](#)

**Source:** PsycINFO

## 26. Treatment of alcoholism.

**Citation:** Treatment of mental disorder., 1953(430-443) (1953)

**Author(s):** Alexander, Leo

**Institution:** Boston State Hospital, Dorchester, MA, US

**Language:** English

**Abstract:** (from the chapter) This chapter discusses different types of treatment for alcoholism and compares differences in treatment between acute alcoholic intoxication and chronic alcoholic intoxication. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Authored Book

**Subject Headings:** [\\*Acute Alcoholic Intoxication](#)  
[\\*Alcoholism](#)  
[\\*Chronic Alcoholic Intoxication](#)  
[\\*Treatment](#)

**Source:** PsycINFO

## 27. Personality traits and vulnerability or resilience to substance use disorders.

**Citation:** Trends in Cognitive Sciences, April 2014, vol./is. 18/4(211-217), 1364-6613 (Apr 2014)

**Author(s):** Belcher, Annabelle M; Volkow, Nora D; Moeller, F. Gerard; Ferre, Sergi

**Correspondence Address:** Ferre, Sergi: National Institute on Drug Abuse, Intramural Research Program, National Institutes of Health, Baltimore, MD, US, 21224, sferre@intra.nida.nih.gov

**Institution:** National Institute on Drug Abuse, Intramural Research Program, National Institutes of Health, Baltimore, MD, US; National Institute on Drug Abuse, National Institutes of Health, Bethesda, MD, US; Department of Psychiatry, Virginia Commonwealth University School of Medicine, Richmond, VA, US; National Institute on Drug Abuse, Intramural Research Program, National Institutes of Health, Baltimore, MD, US

**Language:** English

**Abstract:** Clear evidence supports a genetic basis for substance use disorders (SUD). Yet, the search to identify individual gene contributions to SUD has been unsuccessful. Here, we argue for the study of endophenotypes within the frame of individual differences, and identify three highorder personality traits that are tied to specific brain systems and genes, and that offer a tractable approach to studying SUD. These personality traits, and the genes that moderate them, interact dynamically with the environment and with the drugs themselves to determine ultimately an individual's vulnerability or resilience to developing SUD. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Personality Traits](#)  
[\\*Resilience \(Psychological\)](#)  
[\\*Susceptibility \(Disorders\)](#)  
[Brain](#)

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in [Trends in Cognitive Sciences](#)

#### 28. Action versus valence in decision making.

**Citation:** Trends in Cognitive Sciences, April 2014, vol./is. 18/4(194-202), 1364-6613 (Apr 2014)

**Author(s):** Guitart-Masip, Marc; Duzel, Emrah; Dolan, Ray; Dayan, Peter

**Correspondence Address:** Guitart-Masip, Marc: Aging Research Centre, Karolinska Institute, Stockholm, Sweden, SE-11330, marc.guitart-masip@ki.se

**Institution:** Aging Research Centre, Karolinska Institute, Stockholm, Sweden; Institute of Cognitive Neuroscience, University College London, London, United Kingdom; Wellcome Trust Centre for Neuroimaging, Institute of Neurology, University College London, London, United Kingdom; Gatsby Computational Neuroscience Unit, University College London, London, United Kingdom

**Language:** English

**Abstract:** The selection of actions, and the vigor with which they are executed, are influenced by the affective valence of predicted outcomes. This interaction between action and valence significantly influences appropriate and inappropriate choices and is implicated in the expression of psychiatric and neurological abnormalities, including impulsivity and addiction. We review a series of recent human behavioral, neuroimaging, and pharmacological studies whose key design feature is an orthogonal manipulation of action and valence. These studies find that the interaction between the two is subject to the critical influence of dopamine. They also challenge existing views that neural representations in the striatum focus on valence, showing instead a dominance of the anticipation of action. (PsycINFO Database Record (c) 2014 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:** [\\*Decision Making](#)  
[\\*Affective Valence](#)  
[Neural Pathways](#)  
[Neuroimaging](#)  
[Striatum](#)

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in [Trends in Cognitive Sciences](#)

#### 29. Methadone safety: A clinical practice guideline from the American Pain Society and College on Problems of Drug Dependence, in collaboration with the Heart Rhythm Society.

**Citation:** The Journal of Pain, April 2014, vol./is. 15/4(321-337), 1526-5900 (Apr 2014)

**Author(s):** Chou, Roger; Cruciani, Ricardo A; Fiellin, David A; Compton, Peggy; Farrar, John T; Haigney, Mark C; Inturrisi, Charles; Knight, John R; Otis-Green, Shirley; Marcus, Steven M; Mehta, Davendra; Meyer, Marjorie C; Portenoy, Russell; Savage, Seddon; Strain, Eric; Walsh, Sharon; Zeltzer, Lonnie

**Correspondence Address:** Chou, Roger, 3181 SW Sam Jackson Park Road, Mail code BICC, Portland, OR, US, 97239, chour@ohsu.edu

**Institution:** Department of Medicine, Oregon Health & Science University, Portland, OR, US; Department of Pain Medicine and Palliative Care, Beth Israel Medical Center, New York, NY, US; School of Public Health, Department of Medicine, Yale School of Medicine,

New Haven, CT, US; UCLA School of Nursing, Los Angeles, CA, US; Center for Clinical Epidemiology and Biostatistics, University of Pennsylvania, Philadelphia, PA, US; Cardiology Uniformed Services, University of the Health Sciences, Baltimore, MD, US; Department of Pharmacology, Weill Cornell Medical College, New York, NY, US; Center for Adolescent Substance Abuse Research, Children's Hospital Boston, Boston, MA, US; Division of Nursing Research and Education, Department of Population Sciences, City of Hope National Medical Center, Duarte, CA, US; School of Biomedical and Health Sciences, New Jersey Medical School, Rutgers University, Newark, NJ, US; Department of Medicine, Icahn School of Medicine at Mount Sinai, New York, NY, US; Department of Gynecology, University of Vermont, Burlington, VT, US; Department of Pain Medicine and Palliative Care, Beth Israel Medical Center, New York, NY, US; Department of Anesthesiology, Dartmouth Medical School, Hanover, NH, US; Department of Psychiatry and Behavioral Sciences, Johns Hopkins University School of Medicine, Baltimore, MD, US; Department of Pharmaceutical Sciences, College of Pharmacy, University of Kentucky College of Medicine, Lexington, KY, US; Pediatric Pain Program, Mattel Children's Hospital, UCLA, Los Angeles, CA, US

**Language:**

English

**Abstract:**

Methadone is used for the treatment of opioid addiction and for treatment of chronic pain. The safety of methadone has been called into question by data indicating a large increase in the number of methadone-associated overdose deaths in recent years that has occurred in parallel with a dramatic rise in the use of methadone for chronic pain. The American Pain Society and the College on Problems of Drug Dependence, in collaboration with the Heart Rhythm Society, commissioned an interdisciplinary expert panel to develop a clinical practice guideline on safer prescribing of methadone for treatment of opioid addiction and chronic pain. As part of the guideline development process, the American Pain Society commissioned a systematic review of various aspects related to safety of methadone. After a review of the available evidence, the expert panel concluded that measures can be taken to promote safer use of methadone. Specific recommendations include the need to educate and counsel patients on methadone safety, use of electrocardiography to identify persons at greater risk for methadone-associated arrhythmia, use of alternative opioids in patients at high risk of complications related to corrected electrocardiographic QTc interval prolongation, careful dose initiation and titration of methadone, and diligent monitoring and follow-up. Although these guidelines are based on a systematic review, the panel identified numerous research gaps, most recommendations were based on low-quality evidence, and no recommendations were based on high-quality evidence. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:**

HOLDER: The American Pain Society; YEAR: 2014

**Publication Type:**

Journal; Peer Reviewed Journal

**Subject Headings:**

\*Chronic Pain  
 \*Drug Addiction  
 \*Methadone  
 \*Safety  
 \*Treatment Guidelines  
 Clinical Practice  
 Opiates

**Source:**

PsycINFO

**Full Text:**Available from *Elsevier* in *Journal of Pain***30. Sex work and its associations with alcohol and methamphetamine use among female bar and spa workers in the Philippines.****Citation:**

Asia-Pacific Journal of Public Health, March 2014, vol./is. 26/2(138-146), 1010-5395;1941-2479 (Mar 2014)

**Author(s):**

Urada, Lianne A; Strathdee, Steffanie A; Morisky, Donald E; Schilling, Robert F; Simbulan, Nymia P; Estacio, Leonardo R Jr.; Raj, Anita

**Correspondence Address:** Urada, Lianne A.: University of California, San Diego, School of Medicine, 9500 Gilman Drive, MC 0507, La Jolla, CA, US, 92093-0507, lurada@ucsd.edu

**Institution:** University of California, San Diego, School of Medicine, La Jolla, CA, US; University of California, San Diego, School of Medicine, La Jolla, CA, US; University of California, Los Angeles, Fielding School of Public Health, Los Angeles, CA, US; University of California, Los Angeles, Luskin Department of Social Welfare, Los Angeles, CA, US; University of the Philippines, Manila, Department of Behavioral Science, College of Arts and Science, Manila, Philippines; University of the Philippines, Manila, Department of Behavioral Science, College of Arts and Science, Manila, Philippines; University of California, San Diego, School of Medicine, La Jolla, CA, US

**Language:** English

**Abstract:** To assess the prevalence of sex work and its associations with substance use among female bar/spa workers in the Philippines (N = 498), workers from 54 bar or spa venues in Metro Manila (2009-2010) were surveyed on demographics, drug/alcohol use, abuse history, and sex work. Their median age was 23 years and 35% engaged in sex work. Sex work was independently associated with methamphetamine use (19% vs 4%; adjusted odds ratio [AOR] = 2.9, 95% confidence interval [CI] = 1.3-6.2), alcohol use with patrons (49% vs. 27%; AOR = 1.9, 95% CI = 1.1-3.4), and alcohol intoxication during sex (50% vs. 24%; AOR = 2.0, 95% CI = 1.2-3.5), but inversely associated with daily alcohol use (13% vs. 16%; AOR = 0.2, 95% CI = 0.1-0.5). Additional significant covariates included sexual abuse history, younger age, and not having a higher education. Findings suggest that interventions with sex workers in bars and spas should focus on methamphetamine use, alcohol use contexts, and violence victimization, to better meet the needs of this population. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Alcohol Drinking Patterns](#)  
[\\*Drug Abuse](#)  
[\\*Methamphetamine](#)  
[\\*Prostitution](#)  
[Epidemiology](#)  
[Human Females](#)

**Source:** PsycINFO

**Full Text:** Available from *Highwire Press* in [Asia-Pacific Journal of Public Health](#)

### 31. Report of the substance misuse in the undergraduate medical curriculum project in England.

**Citation:** Drugs: Education, Prevention & Policy, April 2014, vol./is. 21/2(173-176), 0968-7637;1465-3370 (Apr 2014)

**Author(s):** Notley, Caitlin; Goodair, Christine; Chaytor, Andrew; Carroll, Janine; Ghodse, Hamid; Kopelman, Peter

**Correspondence Address:** Notley, Caitlin: Norwich Medical School, University of East Anglia, Norwich Research Park, Norwich, United Kingdom, NR4 7TJ, c.notley@uea.ac.uk

**Institution:** Norwich Medical School, University of East Anglia, Norwich, United Kingdom; International Centre for Drug Policy, St George's University of London, London, United Kingdom; School of Medicine, Pharmacy and Health, Durham University, Durham, United Kingdom; School of Medicine, University of Liverpool, Liverpool, United Kingdom; International Centre for Drug Policy, St George's University of London, London, United Kingdom; St George's, University of London, London, United Kingdom

**Language:** English

**Abstract:** Introduction: This article reports on a Department of Health UK funded project to implement consensus substance misuse teaching in undergraduate curricula in medical schools in England. The aim was to better equip practising doctors of the future to deal

with substance misuse issues. Method: A project coordinator worked with local curriculum coordinators and academic champions in 19 participating medical schools. Substance misuse teaching was mapped using a toolkit outlining national learning outcomes as specified in Tomorrow's Doctors. This enabled a detailed overview of current substance misuse teaching, and identified gaps. Results: Common areas for all schools requiring further development included iatrogenic addiction, professionalism, fitness to practice, attitudes and issues relating to stigma, child-related issues, and social consequences of substance misuse. Students reported lacking confidence in performing key skills, including substance use history taking, discussing options for patients wishing to reduce or stop use, and recommending appropriate help organisations. This led to medical schools developing new or enhanced learning outcomes and teaching materials. Discussion: The project has, through national guidance and changes, enhanced the training and education of student doctors, and established a basis for substance misuse teaching that has already influenced the learning of our future doctors. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Curriculum](#)  
[\\*Drug Abuse](#)  
[\\*Medical Education](#)  
[\\*Teaching](#)  
[\\*Undergraduate Education](#)

**Source:** PsycINFO

**Full Text:** Available from *Informa Healthcare* in [Drugs: Education, Prevention, and Policy](#)

### 32. A violent mix? The association between concurrent alcohol and cocaine use and violence amongst young people in England and Wales.

**Citation:** Drugs: Education, Prevention & Policy, April 2014, vol./is. 21/2(131-139), 0968-7637;1465-3370 (Apr 2014)

**Author(s):** Lightowlers, Carly; Sumnall, Harry

**Correspondence Address:** Lightowlers, Carly: School of Law, Liverpool John Moores University, Room 113, Redmonds Building, Brownlow Hill, Liverpool, United Kingdom, L3 5UG, c.l.lightowlers@ljmu.ac.uk

**Institution:** School of Law, Liverpool John Moores University, Liverpool, United Kingdom; Centre for Public Health, Liverpool John Moores University, Liverpool, United Kingdom

**Language:** English

**Abstract:** Aim: This study explored the association between concurrent alcohol and cocaine use and its predictive probability of self-reported violent behaviour. Methods: A series of logistic regression models were run on a sample of 3098 young people (aged 16-25) from a national self-report study. Findings: Current cocaine use was identified as predictive of violent offending (Exp B = 2.363,  $p < 0.01$ ). Cocaine use was also more likely in those reporting heavy episodic drinking. Whilst findings suggested an additive risk for both heavy episodic drinking and cocaine consumption, there was no evidence of a multiplicative risk associated with concurrent use on the probability of assault outcomes. Results also suggest that heavy episodic alcohol drinking was mediated by experience of violent victimization and having been involved in anti-social behaviour. Conclusions: Findings suggest that whilst interventions aimed at reducing drinking or cocaine consumption are likely to have some effect in reducing offending behaviour, attention should also be given to other individual level factors such as prior violent victimization and wider involvement in anti-social behaviour as these may be confounded as part of a wider substance misusing lifestyle or associated with violence as part as a wider repertoire of anti-social behaviour. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Alcohol Drinking Patterns](#)  
[\\*Behavior](#)  
[\\*Cocaine](#)  
[\\*Drug Abuse](#)  
[\\*Violence](#)  
**Source:** PsycINFO  
**Full Text:** Available from *Informa Healthcare* in [Drugs: Education, Prevention, and Policy](#)

### 33. Examining the opinions of people who use drugs towards drug policy in Australia.

**Citation:** Drugs: Education, Prevention & Policy, April 2014, vol./is. 21/2(93-101), 0968-7637;1465-3370 (Apr 2014)  
**Author(s):** Lancaster, Kari; Sutherland, Rachel; Ritter, Alison  
**Correspondence Address:** Lancaster, Kari: Drug Policy Modelling Program, National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW, Australia, 2052, k.lancaster@unsw.edu.au  
**Institution:** Drug Policy Modelling Program, National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW, Australia; National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW, Australia; Drug Policy Modelling Program, National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW, Australia  
**Language:** English  
**Abstract:** Aims: This study aimed to investigate whether there is heterogeneity of opinion about drug policies amongst people with different experiences of drug use, so as to stimulate discussion about how the diverse perspectives of people who use drugs can be meaningfully included in policy deliberation. Methods: The views of people who inject drugs were compared with the views of people who regularly use 3,4-methylenedioxymethamphetamine (MDMA), using data obtained from two Australian surveys (the Ecstasy and Related Drugs Reporting System and the Illicit Drug Reporting System). Support for drug-related policies (including treatment, harm reduction and drug legalisation) was examined using questions from the National Drug Strategy Household Survey. The extent to which demographic variables and/or drug use experience accounted for differences of opinion amongst the two samples was also explored. Findings: There were significant differences between the views of IDRS and EDRS participants, about legalisation, and a range of harm reduction and treatment interventions. The heterogeneity in support for the legalisation of different drugs could be accounted for by recent experience of use, over and above demographic differences between people who inject drugs and people who regularly use MDMA. Conclusions: These findings speak to the diversity of attitudes and experiences amongst people who use drugs, and reinforce the need to better represent a diversity of opinion in drug policy deliberation and challenge stereotypical perceptions which stigmatise people who use drugs. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Informa UK Ltd.; YEAR: 2014  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Drug Usage](#)  
[\\*Policy Making](#)  
[\\*Public Opinion](#)  
**Source:** PsycINFO  
**Full Text:** Available from *Informa Healthcare* in [Drugs: Education, Prevention, and Policy](#)

### 34. Prescribing in prison: Minimizing psychotropic drug diversion in correctional practice.

**Citation:** Journal of Correctional Health Care, April 2014, vol./is. 20/2(95-104), 1078-3458;1940-5200 (Apr 2014)

**Author(s):** Pilkinton, Patricia D; Pilkinton, James C

**Correspondence Address:** Pilkinton, Patricia D.: Tuscaloosa VA Medical Center, (151), 3701 Loop Road East, Tuscaloosa, AL, US, 35404, patricia.pilkinton@va.gov

**Institution:** Tuscaloosa Veterans Affairs Medical Center, Tuscaloosa, AL, US; Tuscaloosa Veterans Affairs Medical Center, Tuscaloosa, AL, US

**Language:** English

**Abstract:** Correctional facilities are a major provider of mental health care throughout the United States. In spite of the numerous benefits of providing care in this setting, clinicians are sometimes concerned about entering into correctional care because of uncertainty in prescribing practices. This article provides an introduction to prescription drug use, abuse, and diversion in the correctional setting, including systems issues in prescribing, commonly abused prescription medications, motivation for and detection of prescription drug abuse, and the use of laboratory monitoring. By understanding the personal and systemic factors that affect prescribing habits, the clinician can develop a more rewarding correctional practice and improve care for inmates with mental illness. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Mentally Ill Offenders](#)  
[\\*Prescription Drugs](#)  
[\\*Prisoners](#)  
[Correctional Institutions](#)  
[Criminal Rehabilitation](#)  
[Mental Health](#)  
[Prisons](#)

**Source:** PsycINFO

**Full Text:** Available from *Highwire Press* in [Journal of Correctional Health Care](#)

### 35. Prevalence of self-reported nonmedical use of prescription stimulants in North Carolina doctor of pharmacy students.

**Citation:** Journal of Pharmacy Practice, April 2014, vol./is. 27/2(158-168), 0897-1900;1531-1937 (Apr 2014)

**Author(s):** Volger, Emily J; McLendon, Amber N; Fuller, Stephen H; Herring, Charles T

**Correspondence Address:** Volger, Emily J.: Department of Pharmacy Practice, Shenandoah University, Bernard J. Dunn School of Pharmacy, 1775 North Sector Court, Winchester, VA, US, 22601, evolger@su.edu

**Institution:** Department of Pharmacy Practice, Shenandoah University, Bernard J. Dunn School of Pharmacy, Winchester, VA, US; Department of Pharmacy Practice, Campbell University, College of Pharmacy and Health Sciences, Buies Creek, NC, US; Department of Pharmacy Practice, Campbell University, College of Pharmacy and Health Sciences, Buies Creek, NC, US; Department of Pharmacy Practice, Campbell University, College of Pharmacy and Health Sciences, Buies Creek, NC, US

**Language:** English

**Abstract:** Objectives: To evaluate the prevalence, associated factors, and opinions regarding nonmedical use of prescription stimulants (NMUPS) in Doctor of Pharmacy (PharmD) students. Methods: An electronic survey was distributed to professional year 1 through 4 for students at 2 schools of pharmacy (public and private) in North Carolina. The survey was available for 3 weeks. Descriptive statistics (proportion of responders plus 95% confidence intervals [CIs]) were used to describe the primary objective. Results: Of the

1043 surveys distributed, 407 were completed giving a 39% response rate. The results indicated that 9% (95% CI: 6.44-11.93) of PharmD students acknowledge NMUPS at least once during their pharmacy education. Additionally, 3% (95% CI: 1.90-5.45) acknowledge NMUPS at least once during the current pharmacy school year (past 5 months). Nonmedical prescription stimulant users were 9 times more likely to participate in NMUPS prior to pharmacy school ( $P < .0001$ ) and 4.5 times more likely to use other illicit substances ( $P = .0076$ ). Conclusion: The study identified the PharmD student population as high risk of abuse of prescription drug stimulants, which requires further research and attention. Additionally, there was a clear upward trend in the prevalence of NMUPS, and this misuse was associated with other detrimental behaviors. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Author(s); YEAR: 2013

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

**Subject Headings:** [\\*CNS Stimulating Drugs](#)  
[\\*Drug Usage](#)  
[\\*Pharmacists](#)  
[\\*Prescription Drugs](#)  
[\\*Self Report](#)

**Source:** PsycINFO

### 36. Beyond the war on drugs? Notes on prescription opioids and the NFL.

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**Citation:** Journal of Sport & Social Issues, April 2014, vol./is. 38/2(184-193), 0193-7235;1552-7638 (Apr 2014)

**Author(s):** King, Samantha

**Correspondence Address:** King, Samantha: Queens University, 28 Division Street, Kingston, ON, Canada, K7L 3N6, kingsj@queensu.ca

**Institution:** Queens University, Kingston, ON, Canada

**Language:** English

**Abstract:** The recent problematization of opioid use among National Football League players presents an opportunity for scholars to rethink conventional approaches to drugs in sport, and to incorporate into their analyses a consideration of medically authorized substances. Such an undertaking may help illuminate the social dimensions of painkilling and the contextual complexity that fades from view in seemingly compassionate media portrayals of the struggles of former players who are living in pain and dependent on drugs. It may also offer new insights into more established traditions of research on cultures of drug use in sport. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Author(s); YEAR: 2013

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

**Subject Headings:** [\\*Athletes](#)  
[\\*Drug Abuse](#)  
[\\*Mass Media](#)  
[\\*Opiates](#)  
[\\*Pain Management](#)  
[Football](#)  
[Pain](#)  
[Prescribing \(Drugs\)](#)  
[Public Opinion](#)  
[Social Influences](#)

**Source:** PsycINFO

### 37. Factors associated with the motivation to use psychoactive substances and the motivation to change in adolescents in an authoritarian context.

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**Citation:** Children and Youth Services Review, April 2014, vol./is. 39/(11-19), 0190-7409 (Apr 2014)

**Author(s):** Orsi, Mylene Magrinelli; Brochu, Serge; Lafortune, Denis; Patenaude, Catherine

**Correspondence Address:** Orsi, Mylene Magrinelli, 1907 Schroeder Cr, Ottawa, ON, Canada, mypsi2002@yahoo.com

**Institution:** University of Montreal, Montreal, PQ, Canada; University of Montreal, Montreal, PQ, Canada; University of Montreal, Montreal, PQ, Canada; University of Montreal, Montreal, PQ, Canada

**Language:** English

**Abstract:** The use of psychoactive substances (alcohol and drugs) by young people placed in rehabilitation centers in Quebec is well documented, but their motivation to use and to change substance use behavior remains unknown. There has been very little research on the details of the change process in adolescents, and even less in adolescents under supervision in rehabilitation centers. The present study aimed to identify the factors that youth associate with their motivation to use psychoactive substances and the factors that they associate with their motivation to change. Twenty-seven young males (age 14-18 years) were interviewed in the Centre jeunesse de Montreal. The majority of the participants were able to identify motivations to use and to change their substance use behavior. The motivations to use differed depending on the type of substance and the surrounding context in which drug use occurs. The motivations to change were associated with substance-related problems and with the perceived effect of external factors (e.g. constraints) on substance use. Finally, neither the motivations to use nor the motivations to change were strongly associated with the closely supervised setting in which the youth found themselves. Thus the controlled environment of the Centre jeunesse appears to have facilitated the change process for some participants and had no impact on others. The implications of these results for substance-abuse interventions involving troubled youth are discussed. (PsycINFO Database Record (c) 2014 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 Abuse](#)  
[\\*Motivation](#)  
[\\*Readiness to Change](#)  
[\\*Rehabilitation Centers](#)  
[Client Attitudes](#)  
[Protective Services](#)

**Source:** PsycINFO

### **38. Impulsivity, sensation-seeking, and part-time job status in relation to substance use and gambling in adolescents.**

**Citation:** Journal of Adolescent Health, April 2014, vol./is. 54/4(460-466), 1054-139X (Apr 2014)

**Author(s):** Leeman, Robert F; Hoff, Rani A; Krishnan-Sarin, Suchitra; Patock-Peckham, Julie A; Potenza, Marc N

**Correspondence Address:** Leeman, Robert F.: Yale University School of Medicine, 34 Park Street, Room S200, New Haven, CT, US, 01659, robert.leeman@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; Department of Psychiatry, Yale University School of Medicine, New Haven, CT, US; Department of Psychology, Arizona State University, Tempe, AZ, US; Department of Psychiatry, Yale University School of Medicine, New Haven, CT, US

**Language:** English

**Abstract:** Purpose: Although impulsivity, sensation-seeking, and part-time employment have each been linked to risky behaviors in adolescents, their inter-relationships are less well-understood. We examined data from adolescents to assess the following predictions:

(1) sensation-seeking would relate closely to substance use and gambling; (2) impulsivity would relate closely to alcohol, drug, and gambling problems; and (3) these relationships would be particularly strong among those holding part-time jobs. Method: High-school students (N = 3,106) were surveyed to provide data on impulsivity, sensation-seeking, and part-time job status. Bivariate and logistic regression analyses were conducted to examine relationships with gambling, substance use (i.e., alcohol, cigarettes, and marijuana) and related problems. Results: Both impulsivity and sensation-seeking related significantly to substance use and impulsivity to gambling. Impulsivity had stronger associations with drug and gambling problems than sensation-seeking did. Students with paid part-time jobs were more likely to drink alcohol, binge drink, and use marijuana. Sensation-seeking had a particularly strong relationship to heavy cigarette smoking among students with part-time jobs. Conversely, there was little relationship between part-time job status and smoking among low sensation-seekers. Conclusions: These findings further support the relevance of sensation-seeking, impulsivity, and part-time job status to risky behaviors among adolescents. Sensation-seeking and impulsivity had unique relationships to risky behaviors, in accordance with theory and prior evidence. Impulsive adolescents may be in particular need for interventions to reduce drug use and gambling. Although part-time jobs can be beneficial, parents and caregivers should be mindful of potential negative ramifications of paid work outside the home. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Conference Information:** Annual Meeting of the Society for Research on Nicotine and Tobacco. Mar, 2013. Boston. MA, US. Portions of this work were presented at the aforementioned conference.

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Society for Adolescent Health and Medicine; YEAR: 2014

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

**Subject Headings:** [\\*Drug Usage](#)  
[\\*Employment Status](#)  
[\\*Impulsiveness](#)  
[\\*Pathological Gambling](#)  
[\\*Sensation Seeking](#)

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in [Journal of Adolescent Health](#)

**39. Re: Caution urged in interpreting a negative study of cannabis use and schizophrenia: A response to Dr. Christine Miller.**

**Citation:** Schizophrenia Research, April 2014, vol./is. 154/1-3(121), 0920-9964 (Apr 2014)

**Author(s):** DeLisi, Lynn E

**Correspondence Address:** DeLisi, Lynn E.: VA Boston Healthcare System, Harvard Medical School, Brockton, MA, US, 02301

**Institution:** VA Boston Healthcare System, Harvard Medical School, Brockton, MA, US

**Language:** English

**Abstract:** Reply by the current author to the comments made by Christine Miller (see record 2014-11039-012) on the original article (see record 2013-42680-001). The study was a family study of people who did and did not abuse cannabis as adolescents. There were 4 groups: non-psychotic individuals who did and did not abuse cannabis and people with schizophrenia who did and did not abuse cannabis prior to their illness. What the main study analysis showed was that those individuals who developed schizophrenia after cannabis use in adolescence had a significantly greater family history of schizophrenia than those who used cannabis and did not develop schizophrenia and an elevated family history no different than those with schizophrenia who never used cannabis. The issue is not so much that the sample size was underpowered to detect differences related to cannabis use, but rather that longitudinal studies are the necessary way forward to understand the interaction of cannabis with genetic risk factors to lead to schizophrenia. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: Elsevier B.V.; YEAR: 2014  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** \*Cannabis  
 \*Drug Abuse  
 \*Psychosis  
 \*Schizophrenia  
 Adolescent Psychopathology  
 Risk Factors  
**Source:** PsycINFO  
**Full Text:** Available from *Elsevier* in *Schizophrenia Research*  
 Available from *Elsevier* in *Biological Psychiatry*

#### 40. Caution urged in interpreting a negative study of cannabis use and schizophrenia.

**Citation:** Schizophrenia Research, April 2014, vol./is. 154/1-3(119-120), 0920-9964 (Apr 2014)  
**Author(s):** Miller, Christine L  
**Correspondence Address:** Miller, Christine L.: MillerBio, 6508 Beverly Rd, Baltimore, MD, US, 21239, CMiller@millerbio.com  
**Institution:** MillerBio, Baltimore, MD, US  
**Language:** English  
**Abstract:** Comments on an article by Ashley C. Proal et al. (see record 2013-42680-001). The recent publication by Ashley C. Proal et al. on psychosis and cannabis use concludes "while cannabis may modify the illness onset, severity and outcome, there is no evidence from this study that it can cause the psychosis" despite an earlier admission in the discussion that "the current study, however, is not able to address whether cannabis can interact with a genetic predisposition to cause schizophrenia". The second concern relates to suggestive evidence in the data overlooked by the authors, in the opinion of the reviewer. As a point of comparison, a similar flattening of the risk curve for degree of relationship can be seen in the difference between relatives of NIDDM versus IDDM diabetes patients. Finally, it is important to emphasize that should cannabis be shown to cause psychosis only in those with a substantial family history, such causality would still be important. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Elsevier B.V.; YEAR: 2014  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** \*Cannabis  
 \*Drug Abuse  
 \*Psychosis  
 \*Schizophrenia  
 Adolescent Psychopathology  
 Risk Factors  
**Source:** PsycINFO  
**Full Text:** Available from *Elsevier* in *Schizophrenia Research*  
 Available from *Elsevier* in *Biological Psychiatry*

#### 41. Correlates of race and substance abuse with religious support systems: A study of pregnant substance abusers.

**Citation:** Journal of Human Behavior in the Social Environment, April 2014, vol./is. 24/3(390-398), 1091-1359;1540-3556 (Apr 2014)  
**Author(s):** Pilkinton, Melinda W  
**Correspondence Address:** Pilkinton, Melinda W.: Social Work Program, Mississippi State University, P.O. Box C, 297 Bowen Hall, Mississippi State, MS, US, 39762, mpilkintonlcsw@yahoo.com  
**Institution:** Social Work Program, Mississippi State University, Mississippi State, MS, US

**Language:** English

**Abstract:** Women who misuse substances may have decreased connections with community structures, including religious support systems. This study examined the correlates of race, age, socioeconomic status, and drug use status on 1,116 pregnant women's connections with religious support structures. Data were derived from the 2002 National Survey of Drug Abuse and the 2003 National Survey of Drug Use and Health and were used to perform a secondary analysis of the variables. Results of the analyses revealed that race is not an indicator of social connectivity; while drug use, age, and socioeconomic status are indicators. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Pregnancy](#)  
[\\*Race \(Anthropological\)](#)  
[\\*Religion](#)  
[\\*Social Support](#)  
[Age Differences](#)  
[Faith Based Organizations](#)  
[Questionnaires](#)  
[Socioeconomic Status](#)  
[Test Construction](#)

**Source:** PsycINFO

#### 42. Further evaluation of the Outcome Questionnaire--45.2.

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**Citation:** Measurement and Evaluation in Counseling and Development, April 2014, vol./is. 47/2(102-117), 0748-1756;1947-6302 (Apr 2014)

**Author(s):** Rice, Kenneth G; Suh, Hanna; Ege, Engin

**Correspondence Address:** Rice, Kenneth G.: Department of Counseling and Psychological Services, Georgia State University, P.O. Box 3980, Atlanta, GA, US, 30302-3980, kgr1@gsu.edu

**Institution:** Georgia State University, Atlanta, GA, US; University of Florida, Gainesville, FL, US; University of Florida, Gainesville, FL, US

**Language:** English

**Abstract:** Data from clinical and nonclinical samples (Ns = 2,096, 618) were used to evaluate and replicate the measurement structure of the Outcome Questionnaire--45.2. Different measurement models and invariance tests were evaluated and the best psychometric support was found for a shortened measure of two factors: overall maladjustment and substance use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Drug Usage](#)  
[\\*Emotional Adjustment](#)  
[\\*Psychometrics](#)  
[\\*Questionnaires](#)  
[\\*Treatment Outcomes](#)  
[Test Validity](#)

**Source:** PsycINFO

#### 43. Children of treated substance-abusing mothers: A 10-year prospective study.

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**Citation:** Clinical Child Psychology and Psychiatry, April 2014, vol./is. 19/2(217-232), 1359-1045;1461-7021 (Apr 2014)

**Author(s):** Hser, Y.-I.; Evans, E; Li, L; Metchik-Gaddis, A; Messina, N

**Correspondence Address:** Hser, Y.-I.: UCLA Integrated Substance Abuse Programs, 11075 Santa Monica Boulevard, Suite 200, Los Angeles, CA, US, 90025, yhser@ucla.edu

**Institution:** University of California, Los Angeles, CA, US; University of California, Los Angeles, CA, US

**Language:** English

**Abstract:** This study examined children of substance-abusing mothers approximately 10 years after mothers' admission to drug abuse treatment, and identified maternal characteristics that may be risk factors for child behavior problems on the Child Behavior Checklist. Data were obtained from 396 mothers who were included in a sample consecutively admitted to 44 treatment programs in 13 California counties during 2000-2002. The Addiction Severity Index was administered at both intake and follow-up. Each mother reported on one child 6-17 years of age. All of the children had been exposed to drugs, either in utero or postnatally. At follow-up about 22% of the children demonstrated borderline or clinical range problem behaviors. Child behavior problems were related significantly to the mothers' ethnicity (lower among Hispanics relative to white), and problem severity in family/social relationship and mental health, marginally related to her prior medical/health problem, and not related to severity of alcohol, drug, legal and employment problems. Assisting mothers to address their family/social relationship and psychological problems may have an added value to prevent or reduce behavioral problems of their children. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Author(s); YEAR: 2013

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

**Subject Headings:** [\\*Behavior Problems](#)  
[\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[\\*Mothers](#)  
[\\*Risk Factors](#)

**Source:** PsycINFO

**Full Text:** Available from *Highwire Press* in [Clinical Child Psychology and Psychiatry](#)

**44. Using the Massachusetts Youth Screening Instrument-Version 2 on a community sample of African American and Latino/a juvenile offenders to identify mental health and substance abuse treatment needs.**

**Citation:** Criminal Justice and Behavior, April 2014, vol./is. 41/4(492-511), 0093-8548;1552-3594 (Apr 2014)

**Author(s):** Coker, Kendell L; Wernsman, Jamie; Ikpe, Uduakobong N; Brooks, Jeannie S; Bushell, Lynn L; Kahn, Barbara A

**Correspondence Address:** Coker, Kendell L.: Department of Psychiatry, Yale University School of Medicine, 1 Long Wharf Drive, Suite 7, New Haven, CT, US, 06511, kendell.coker@yale.edu

**Institution:** Yale University School of Medicine, New Haven, CT, US; Chicago School of Professional Psychology, Department of Forensic Psychology, Chicago, IL, US; Lansing Correctional Facility, KS, US; Private practice, FL, US; Youth Justice Services, Turning Point Youth Services, Toronto, ON, Canada; Department of Psychiatry and Behavioral Sciences, Feinberg School of Medicine, Northwestern University, Evanston, IL, US

**Language:** English

**Abstract:** The Massachusetts Youth Screening Instrument-Version 2 (MAYSI-2) is a brief screening tool used to identify youth in the juvenile justice system who are at-risk of mental-health-related difficulties. The MAYSI-2 was administered to 5,205 African American and Latino/a youth throughout Chicago, Illinois, who were on probation and residing in the community. This study investigated differences (i.e., legal status, gender, age, race/ethnicity) in reporting of mental health symptoms and substance use on the

MAYSI-2. Females scored above the clinical cutoffs more frequently than males, and there were few differences found between diverted and adjudicated youth. Age comparisons revealed mixed results. Overall, youth in the current sample scored above the clinical cutoffs less often than youth in the MAYSI-2 norm reference groups. Nonetheless, during the first phase of this study, the MAYSI-2 demonstrated effectiveness by accurately identifying a substantial portion of youth in need of mental health and/or substance abuse treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: International Association for Correctional and Forensic Psychology; YEAR: 2013

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

**Subject Headings:** [\\*At Risk Populations](#)  
[\\*Drug Abuse](#)  
[\\*Health Service Needs](#)  
[\\*Juvenile Delinquency](#)  
[\\*Mental Health](#)  
[Juvenile Justice](#)

**Source:** PsycINFO

#### 45. Who benefits from gender-responsive treatment?: Accounting for abuse history on longitudinal outcomes for women in prison.

**Citation:** Criminal Justice and Behavior, April 2014, vol./is. 41/4(417-432), 0093-8548;1552-3594 (Apr 2014)

**Author(s):** Saxena, Preeti; Messina, Nena P; Grella, Christine E

**Correspondence Address:** Saxena, Preeti: Integrated Substance Abuse Programs, University of California Los Angeles, 11075 Santa Monica Blvd., Suite 200, Los Angeles, CA, US, 90025, psaxena@ucla.edu

**Institution:** Integrated Substance Abuse Programs (ISAP), University of California Los Angeles, Los Angeles, CA, US; ISAP, University of California, Los Angeles, Los Angeles, CA, US; ISAP, University of California, Los Angeles, Los Angeles, CA, US

**Language:** English

**Abstract:** This study explores outcome variation among women offenders who participated in gender-responsive substance abuse treatment (GRT). To identify subgroups of participants that may differentially benefit from this treatment, secondary analyses examined the interaction between randomization into GRT and a history of abuse (physical/sexual) on depression and number of substances used post treatment. The sample consisted of 115 incarcerated women assessed at baseline and 6 and 12 months post parole. Longitudinal regression showed that women reporting abuse randomized into GRT had significantly reduced odds of depression (odds ratio [OR] = .29,  $p < .05$ , 95% confidence interval [CI] = [0.10, 0.86]) and lowered rates of number of substances used (incidence rate ratio [IRR] = .52,  $p < .05$ , 95% CI = [0.28, 0.98]), in comparison with those who reported abuse and were randomized to the non-GRT group. Findings suggest that GRT for women offenders who have experienced prior abuse may maximize the benefits of the trauma-informed, gender-sensitive intervention. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: International Association for Correctional and Forensic Psychology; YEAR: 2014

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

**Subject Headings:** [\\*Criminal Rehabilitation](#)  
[\\*Drug Abuse](#)  
[\\*Human Sex Differences](#)  
[\\*Major Depression](#)  
[\\*Prisons](#)

[Intervention](#)  
[Treatment](#)

**Source:** PsycINFO

**46. Benefits of substance use disorder screening on employment outcomes in state-federal vocational rehabilitation programs.**

**Citation:** Rehabilitation Counseling Bulletin, April 2014, vol./is. 57/3(144-158), 0034-3552;1538-4853 (Apr 2014)

**Author(s):** Heinemann, Allen W; Moore, Dennis; Lazowski, Linda E; Huber, Mary; Semik, Patrick

**Correspondence Address:** Heinemann, Allen W.: Rehabilitation Institute of Chicago, 345 E Superior Street, Chicago, IL, US, 60611, a-heinemann@northwestern.edu

**Institution:** Northwestern University, Chicago, IL, US; BSOM, Wright State University, Dayton, OH, US; SASSI Institute, Springville, IN, US; College of Education and Human Services, Wright State University, Dayton, OH, US; Rehabilitation Institute of Chicago, Chicago, IL, US

**Language:** English

**Abstract:** We evaluated benefits of substance use disorder (SUD) screening on employment outcomes of state vocational rehabilitation (VR) consumers in Illinois, Ohio, West Virginia, Kentucky, and Utah. Across states, 9,681 screeners matched RSA-911 records with closure status. Positive SUD screening rates ranged from 21.2% in Illinois to 50.4% in Utah. While findings varied by state, screening can improve successful employment rates. Systemwide SUD screening may be most beneficial in states that are effective in addressing SUD. Effective states serve a higher percentage of consumers with SUD diagnoses, and have employment rates that meet or exceed states with fewer consumers with SUD, indicating that SUD success rates approximate those of consumers with other disabilities. Even in states with low SUD diagnoses rates, above 20% of screened consumers had suspected SUD. We replicated findings suggesting that persons with SUD can transition successfully to employment, and at lower cost and shorter time than consumers with other conditions. We found discrepancies in all states between SUD screening results and official diagnoses. Persons with a diagnosis of SUD were somewhat more likely to achieve an employment outcome than persons who screened SUD positive without a diagnosis. We provide suggestions for VR policy and future research directions. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Hammill Institute on Disabilities; YEAR: 2013

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[\\*Employment Status](#)  
[\\*Vocational Rehabilitation](#)  
[Diagnosis](#)  
[Health Screening](#)

**Source:** PsycINFO

**47. Sublingual buprenorphine for chronic pain: A survey of clinician prescribing practices.**

**Citation:** The Clinical Journal of Pain, April 2014, vol./is. 30/4(295-300), 0749-8047;1536-5409 (Apr 2014)

**Author(s):** Rosen, Kristen; Gutierrez, Antonio; Haller, Deborah; Potter, Jennifer S

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**Institution:** Department of Psychiatry, University of Texas Health Science Center San Antonio, San Antonio, TX, US; Department of Psychiatry, University of Texas Health Science Center San Antonio, San Antonio, TX, US; St Luke's Roosevelt Hospital Center, Columbia

University, New York, NY, US; Department of Psychiatry, University of Texas Health Science Center San Antonio, San Antonio, TX, US

- Language:** English
- Abstract:** Objectives: Sublingual buprenorphine, with and without naloxone, is indicated for the treatment of opioid use disorders. Although not approved for pain, some evidence suggests it may be a safe and effective alternative to conventional opioid analgesics, particularly for those with addiction problems. This study surveyed pain specialists to examine the extent to which sublingual buprenorphine was prescribed for chronic pain and explore associated clinician attitudes and characteristics. Method: A 36-item survey examining clinician attitudes and characteristics related to sublingual buprenorphine and other opioids was distributed to 1307 members of the American Pain Society, a multidisciplinary professional group. Members were provided a paper copy of the survey and URL to an online version. A followup letter was mailed after 2 weeks. Results: Overall, 230 completed surveys were returned (18.5%). Of clinicians who prescribed opioids for chronic pain (92.5%), 19.7% reported prescribing sublingual buprenorphine for chronic pain at least once; of these prescribers, 39.6% did not have a DEA Xwaiver to prescribe sublingual buprenorphine for opioid dependence. Prescribers were more likely than nonprescribers to find sublingual buprenorphine effective for chronic pain. Prescribers were also significantly more likely to view sublingual buprenorphine as safer than full agonists in terms of addiction, overdose, and drug interaction. No differences emerged between prescribers and nonprescribers regarding perceptions of potential for drug diversion or in terms of overall opioid prescribing behaviors. Discussion: Results suggest that sublingual buprenorphine is indeed being used to treat chronic pain; however, the circumstances when this occurs are not entirely clear. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Conference Information:** American Pain Society Annual Scientific Meeting. May, 2011. Austin. TX, US. This article was presented at the aforementioned conference.
- Country of Publication:** HOLDER: Lippincott Williams & Wilkins; YEAR: 2013
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Chronic Pain](#)  
[\\*Clinicians](#)  
[\\*Health Personnel Attitudes](#)  
[\\*Opiates](#)  
[\\*Prescribing \(Drugs\)](#)  
[Naloxone](#)
- Source:** PsycINFO
- Full Text:** Available from *Ovid* in [Clinical Journal of Pain](#)

#### 48. Geriatric pain management, pharmacological and nonpharmacological considerations.

- Citation:** Psychology & Neuroscience, 2014, vol./is. 7/1(15-26), 1984-3054;1983-3288 (2014)
- Author(s):** Kaye, Alan David; Baluch, Amir R; Kaye, Rachel J; Niaz, Rashid S; Kaye, Aaron J; Liu, Henry; Fox, Charles J
- Correspondence Address:** Kaye, Alan David: Department of Anesthesiology, LSU School of Medicine, 1542 Tulane Ave, Room 656, New Orleans, LA, US, 70112, akaye@lsuhsc.edu
- Institution:** Department of Anesthesiology, Louisiana State University School of Medicine, New Orleans, LA, US; Metropolitan Anesthesia Consultants, Dallas, TX, US; Department of Anesthesiology, Louisiana State University School of Medicine, New Orleans, LA, US; Department of Anesthesiology, Louisiana State University School of Medicine, New Orleans, LA, US; Stanford University, Palo Alto, CA, US; Department of Anesthesiology, Tulane School of Medicine, New Orleans, LA, US; Department of Anesthesiology, Louisiana State University School of Medicine, Shreveport, LA, US
- Language:** English
- Abstract:** Persistent pain is prevalent in the elderly population, although it is not an inevitable part of aging. It is important to understand how to manage pain effectively in old age,

particularly because an increasing number of individuals are becoming older, or living longer. Several problems, less common in younger adults, may complicate the treatment of pain. An accurate pain assessment is required for the most efficient strategy of pain treatment. Challenges to an effective pain assessment include: pain underreporting by patients, atypical manifestations of pain in elderly, age-associated pharmacodynamic and pharmacokinetic changes to specific drugs, other general age-related changes, and misconceptions about tolerance or addiction to opioids. However, physicians are able to provide geriatric patients with appropriate analgesia by using comprehensive assessment involving a multidisciplinary approach, and the appropriate use of various treatment modalities. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Aging](#)  
[\\*Geriatrics](#)  
[\\*Pain](#)  
[\\*Pain Management](#)  
[Drug Therapy](#)  
[Pharmacology](#)

**Source:** PsycINFO

#### 49. Proximal and time-varying effects of cigarette, alcohol, marijuana and other hard drug use on adolescent dating aggression.

**Citation:** Journal of Adolescence, April 2014, vol./is. 37/3(281-289), 0140-1971 (Apr 2014)

**Author(s):** Reyes, H. Luz McNaughton; Foshee, Vangie A; Bauer, Daniel J; Ennett, Susan T

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**Language:** English

**Abstract:** Although numerous studies have established a link between substance use and adult partner violence, little research has examined the relationship during adolescence and most extant research has not examined multiple substance use types. The current study used hierarchical growth modeling to simultaneously examine proximal (between-person) and time-varying (within-person) relations between cigarette, alcohol, marijuana and hard drug use and physical dating aggression across grades 8 through 12 while controlling for demographic covariates and shared risk factors. Proximal effects of marijuana use on dating aggression were found for girls and proximal effects of hard drug use on dating aggression were found for boys. Time-varying effects were found for alcohol for both boys and girls and for hard drug use for boys only. Overall, findings suggest that alcohol, marijuana and hard drug use predict whether and when adolescents engage in dating aggression and should be targeted by prevention interventions. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Aggressive Behavior](#)  
[\\*Alcohol Abuse](#)  
[\\*Drug Abuse](#)  
[\\*Social Dating](#)  
[\\*Tobacco Smoking](#)

[Marijuana](#)  
[Risk Factors](#)  
[Time](#)

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in *Journal of Adolescence*

**50. Externalizing behavior and substance use related problems at 15 years in prenatally cocaine exposed adolescents.**

**Citation:** Journal of Adolescence, April 2014, vol./is. 37/3(269-279), 0140-1971 (Apr 2014)

**Author(s):** Min, Meeyoung O; Minnes, Sonia; Lang, Adelaide; Weishampel, Paul; Short, Elizabeth J; Yoon, Susan; Singer, Lynn T

**Correspondence Address:** Min, Meeyoung O.: Jack, Joseph and Morton Mandel School of Applied Social Sciences, Case Western Reserve University, 11235 Bellflower Road, Cleveland, OH, US, 44106-7164, meeyoung.min@case.edu

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**Language:** English

**Abstract:** The effect of prenatal cocaine exposure (PCE) on externalizing behavior and substance use related problems at 15 years of age was examined. Participants consisted of 358 adolescents (183 PCE, 175 non-cocaine exposed (NCE)), primarily African-American and of low socioeconomic status, prospectively enrolled in a longitudinal study from birth. Regression analyses indicated that the amount of PCE was associated with higher externalizing behavioral problems ( $\beta = .15, p = .02$ ). Adolescents with PCE were also 2.8 times (95% CI = 1.38-5.56) more likely to have substance use related problems than their NCE counterparts. No differences between PCE adolescents in non-kinship adoptive/foster care ( $n = 44$ ) and PCE adolescents in maternal/relative care ( $n = 139$ ) were found in externalizing behavior or in the likelihood of substance use related problems. Findings demonstrate teratologic effects of PCE persisting into adolescence. PCE is a reliable marker for the potential development of problem behaviors in adolescence, including substance use related problems. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Conference Information:** Annual Conference of Neurobehavioral Teratology Society (NBTS). 36th. Jun, 2012. Baltimore. MD, US. Portions of this paper were presented at the aforementioned conference.

**Country of Publication:** STATEMENT: Published by Elsevier Ltd. All rights reserved.; HOLDER: The Foundation for Professionals in Services for Adolescents; YEAR: 2014

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

**Subject Headings:** [\\*Adolescent Development](#)  
[\\*Cocaine](#)  
[\\*Drug Abuse](#)  
[\\*Externalization](#)  
[\\*Prenatal Exposure](#)

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in *Journal of Adolescence*

**51. Co-occurrence of antisocial behavior and substance use: Testing for sex differences in the impact of older male friends, low parental knowledge and friends' delinquency.**

**Citation:** Journal of Adolescence, April 2014, vol./is. 37/3(247-256), 0140-1971 (Apr 2014)

**Author(s):** McAdams, Tom A; Salekin, Randall T; Marti, C. Nathan; Lester, Whiney S; Barker, Edward D

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**Institution:** MRC Social Genetic and Developmental Psychiatry Centre, Institute of Psychiatry, King's College London, London, United Kingdom; Psychology Department, University of Alabama, AL, US; Oregon Research Institute, Eugene, OR, US; Iowa Depression and Clinical Research Center, University of Iowa, Iowa City, IA, US; Department of Psychology, Institute of Psychiatry, King's College London, London, United Kingdom

**Language:** English

**Abstract:** Delinquency and substance use (SU) are commonly comorbid during adolescence. In the present study we investigate this co-morbidity with 3 main objectives: 1. Evaluate reciprocal relationships between delinquency/SU across early adolescence. 2. Assess the impact of older male friends, low parental knowledge and friends' delinquency on subsequent development and inter-relationships of delinquency and SU. 3. Evaluate sex differences in these relationships. We applied cross-lagged structural equation models to the analysis of a longitudinal sample (n = 3699). Findings demonstrated: (1) At ages 13-14 delinquency predicted SU more so than vice versa but effects became equal between ages 14 and 15. (2) Low parental knowledge and friends' delinquency predicted delinquency and SU. Older male friends predicted ASB. (3) Sex differences were present. For example, in the absence of antisocial friends low parent knowledge at age 12 indirectly predicted increased age 15 SU for girls more than boys. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: Published by Elsevier Ltd. All rights reserved.; HOLDER: The Foundation for Professionals in Services for Adolescents; YEAR: 2014

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

**Subject Headings:** [\\*Antisocial Behavior](#)  
[\\*Drug Abuse](#)  
[\\*Friendship](#)  
[\\*Human Sex Differences](#)  
[\\*Juvenile Delinquency](#)  
[Age Differences](#)  
[Comorbidity](#)  
[Parental Attitudes](#)

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in *Journal of Adolescence*

## 52. Compulsive use of social networking sites in Belgium: Prevalence, profile, and the role of attitude toward work and school.

**Citation:** Cyberpsychology, Behavior, and Social Networking, March 2014, vol./is. 17/3(166-171), 2152-2715;2152-2723 (Mar 2014)

**Author(s):** De Cock, Rozane; Vangeel, Jolien; Klein, Annabelle; Minotte, Pascal; Rosas, Omar; Meerkerk, Gert-Jan

**Correspondence Address:** De Cock, Rozane: KU Leuven, Institute for Media Studies, Parkstraat 45, Leuven, Belgium, 3000, rozane.decock@soc.kuleuven.be

**Institution:** Institute for Media Studies (IMS), KU Leuven, Leuven, Belgium; Institute for Media Studies (IMS), KU Leuven, Leuven, Belgium; Research Centre on IT and Law (CRIDS), FUNDP Namur, Namur, Belgium; Reference Center in Mental Health (CReSaM), Namur, Belgium; Research Centre on IT and Law (CRIDS), FUNDP Namur, Namur, Belgium; IVO Addiction Research Institute, Rotterdam, Netherlands

**Language:** English

**Abstract:** A representative sample (n = 1,000) of the Belgian population aged 18 years and older filled out an online questionnaire on their Internet use in general and their use of social networking sites (SNS) in particular. We measured total time spent on the Internet, time spent on SNS, number of SNS profiles, gender, age, schooling level, income, job occupation, and leisure activities, and we integrated several psychological scales such as the Quick Big Five and the Mastery Scale. Hierarchical multiple regression modeling shows that gender and age explain an important part of the compulsive SNS score (5%) as well as psychological scales (20%), but attitude toward school (additional 3%) and income (2.5%) also add to explained variance in predictive models of compulsive SNS use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Internet Addiction](#)  
[\\*Work \(Attitudes Toward\)](#)  
[\\*Online Social Networks](#)  
[Questionnaires](#)

**Source:** PsycINFO

### 53. Video game use and cognitive performance: Does it vary with the presence of problematic video game use?

**Citation:** Cyberpsychology, Behavior, and Social Networking, March 2014, vol./is. 17/3(153-159), 2152-2715;2152-2723 (Mar 2014)

**Author(s):** Collins, Emily; Freeman, Jonathan

**Correspondence Address:** Collins, Emily: Goldsmiths, University of London, Department of Psychology, London, United Kingdom, SE14 6NW, emilyimcollins@gmail.com

**Institution:** Department of Psychology, Goldsmiths, University of London, London, United Kingdom; Department of Psychology, Goldsmiths, University of London, London, United Kingdom

**Language:** English

**Abstract:** Action video game players have been found to outperform nonplayers on a variety of cognitive tasks. However, several failures to replicate these video game player advantages have indicated that this relationship may not be straightforward. Moreover, despite the discovery that problematic video game players do not appear to demonstrate the same superior performance as nonproblematic video game players in relation to multiple object tracking paradigms, this has not been investigated for other tasks. Consequently, this study compared gamers and nongamers in task switching ability, visual short-term memory, mental rotation, enumeration, and flanker interference, as well as investigated the influence of self-reported problematic video game use. A total of 66 participants completed the experiment, 26 of whom played action video games, including 20 problematic players. The results revealed no significant effect of playing action video games, nor any influence of problematic video game play. This indicates that the previously reported cognitive advantages in video game players may be restricted to specific task features or samples. Furthermore, problematic video game play may not have a detrimental effect on cognitive performance, although this is difficult to ascertain considering the lack of video game player advantage. More research is therefore sorely needed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Computer Games](#)  
[\\*Short Term Memory](#)  
[\\*Task Switching](#)  
[Cognitive Ability](#)

**Source:** PsycINFO

**54. Impulsivity and related neuropsychological features in regular and addictive first person shooter gaming.**

- Citation:** Cyberpsychology, Behavior, and Social Networking, March 2014, vol./is. 17/3(147-152), 2152-2715;2152-2723 (Mar 2014)
- Author(s):** Metcalf, Olivia; Pammer, Kristen
- Correspondence Address:** Metcalf, Olivia: Research School of Psychology, Australian National University, Room 125F, Building 39, Canberra, ACT, Australia, 0200, olivia.metcalf@anu.edu.au
- Institution:** Research School of Psychology, Australian National University, Canberra, ACT, Australia; Research School of Psychology, Australian National University, Canberra, ACT, Australia
- Language:** English
- Abstract:** Putative cyber addictions are of significant interest. There remains little experimental research into excessive use of first person shooter (FPS) games, despite their global popularity. Moreover, the role between excessive gaming and impulsivity remains unclear, with previous research showing conflicting findings. The current study investigated performances on a number of neuropsychological tasks (go/no-go, continuous performance task, Iowa gambling task) and a trait measure of impulsivity for a group of regular FPS gamers (n = 25), addicted FPS gamers (n = 22), and controls (n = 22). Gamers were classified using the Addiction-Engagement Questionnaire. Addicted FPS gamers had significantly higher levels of trait impulsivity on the Barratt Impulsiveness Scale compared to controls. Addicted FPS gamers also had significantly higher levels of disinhibition in a go/no-go task and inattention in a continuous performance task compared to controls, whereas the regular FPS gamers had better decision making on the Iowa gambling task compared to controls. The results indicate impulsivity is associated with FPS gaming addiction, comparable to pathological gambling. The relationship between impulsivity and excessive gaming may be unique to the FPS genre. Furthermore, regular FPS gaming may improve decision making ability. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: Mary Ann Liebert, Inc.
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Decision Making](#)  
[\\*Impulsiveness](#)  
[\\*Internet Addiction](#)  
[\\*Neuropsychology](#)
- Source:** PsycINFO

**55. Self-esteem, personality and internet addiction: A cross-cultural comparison study.**

- Citation:** Personality and Individual Differences, April 2014, vol./is. 61-62/(28-33), 0191-8869 (Apr 2014)
- Author(s):** Sariyska, Rayna; Reuter, Martin; Bey, Katharina; Sha, Peng; Li, Mei; Chen, Ya-Fei; Liu, Wei-Yin; Zhu, Yi-Kang; Li, Chun-Bo; Suarez-Rivillas, Alejandro; Feldmann, Mieke; Hellmann, Marie; Keiper, Julia; Markett, Sebastian; Young, Kimberly S; Montag, Christian
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Shanghai Jiao Tong University School of Medicine, Shanghai, China; Department of Psychology, University of Bonn, Bonn, Germany; Center for Internet Addiction, St. Bonaventure University, NY, US; Department of Psychology, University of Bonn, Bonn, Germany

**Language:**

English

**Abstract:**

Previous work from Germany and Austria highlighted the importance of personality and excessive private Internet usage for Internet Addiction (IA). In a cross-cultural approach we tried to replicate a negative association between IA and the personality trait of self-directedness in Bulgaria, Germany, Spain, Colombia, China, Taiwan and Sweden and as well the finding that persons with a damaged self-esteem have a higher proclivity for becoming Internet addicted in Bulgaria, Spain, Germany and Colombia. In total N = 989 took part in the study. Results show that the personality dimension self-directedness was negatively correlated to the IA score of the participants in all samples. In contrast, no interaction effect between implicit and explicit self-esteem on IA could be observed. (PsycINFO Database Record (c) 2014 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:**

\*Cross Cultural Differences  
 \*Internet Addiction  
 \*Personality Traits  
 \*Self Esteem

**Source:**

PsycINFO

**56. Self-compassion and risk behavior among people living with HIV/AIDS.****Citation:**

Research in Nursing & Health, April 2014, vol./is. 37/2(98-106), 0160-6891;1098-240X (Apr 2014)

**Author(s):**

Rose, Carol Dawson; Webel, Allison; Sullivan, Kathleen M; Cuca, Yvette P; Wantland, Dean; Johnson, Mallory O; Brion, John; Portillo, Carmen J; Corless, Inge B; Voss, Joachim; Chen, Wei-Ti; Phillips, J. Craig; Tyer-Viola, Lynda; Rivero-Mendez, Marta; Nicholas, Patrice K; Nokes, Kathleen; Kempainen, Jeanne; Sefcik, Elizabeth; Eller, Lucille Sanzero; Ipinge, Scholastika; Kirksey, Kenn; Chaiphibalarisdi, Puangtip; Davila, Nancy; Hamilton, Mary Jane; Hickey, Dorothy; Maryland, Mary; Reid, Paula; Holzemer, William L

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Rose, Carol Dawson: Department of Community Health Systems, UCSF School of Nursing, San Francisco, CA, US, 94143-0608, carol.dawson-rose@ucsf.edu

**Institution:**

Department of Community Health Systems, UCSF School of Nursing, San Francisco, CA, US; Frances Payne Bolton School of Nursing, Case Western Reserve University, Cleveland, OH, US; School of Nursing, University of Hawaii, Hilo, HI, US; School of Nursing, UCSF, San Francisco, CA, US; College of Nursing, Rutgers University, Newark, NJ, US; School of Medicine, UCSF, San Francisco, CA, US; College of Nursing, Ohio State University, Columbus, OH, US; School of Nursing, UCSF, San Francisco, CA, US; MGH Institute of Health Professions, Boston, MA, US; School of Nursing, University of Washington, Seattle, WA, US; School of Nursing, Yale University, West Haven, CT, US; School of Nursing, University of Ottawa, Ottawa, ON, Canada; Texas Children's Hospital, Houston, TX, US; University of Puerto Rico, San Juan, Puerto Rico; Brigham and Women's Hospital, Boston, MA, US; Hunter Bellevue School of Nursing, Hunter College, New York, NY, US; University of North Carolina Wilmington, Wilmington, NC, US; Texas A&M University-Corpus Christi, Corpus Christi, TX, US; College of Nursing, Rutgers University, Newark, NJ, US; University of Namibia, Windhoek, Namibia; Lyndon B. Johnson Hospital, Houston, TX, US; School of Nursing, Shinawatra University, Pathumthani, Thailand; University of Puerto Rico, San Juan, Puerto Rico; Texas A&M University-Corpus Christi, Corpus Christi, TX, US; Momentum AIDS Program, New York City College of Technology, San Juan, NY, US; Department of

Nursing, Chicago State University College of Health Sciences, Chicago, IL, US; School of Nursing, University of North Carolina Wilmington, Wilmington, NC, US; College of Nursing, Rutgers University, Newark, NJ, US

**Language:**

English

**Abstract:**

Sexual risk behavior and illicit drug use among people living with HIV/AIDS (PLWHA) contribute to poor health and onward transmission of HIV. The aim of this collaborative multi-site nursing research study was to explore the association between self-compassion and risk behaviors in PLWHA. As part of a larger project, nurse researchers in Canada, China, Namibia, Puerto Rico, Thailand and the US enrolled 1211 sexually active PLWHA using convenience sampling. The majority of the sample was male, middle-aged, and from the US. Illicit drug use was strongly associated with sexual risk behavior, but participants with higher self-compassion were less likely to report sexual risk behavior, even in the presence of illicit drug use. Self-compassion may be a novel area for behavioral intervention development for PLWHA. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:**

HOLDER: Wiley Periodicals, Inc.; YEAR: 2014

**Publication Type:**

Journal; Peer Reviewed Journal

**Subject Headings:**

\*HIV  
\*Sexual Risk Taking  
\*Sympathy  
Drug Abuse  
Nursing

**Source:**

PsycINFO

**Full Text:**

Available from *Wiley* in *Research in Nursing and Health*

**57. When less is more-microRNAs and psychiatric disorders.****Citation:**

Acta Psychiatrica Scandinavica, April 2014, vol./is. 129/4(241-256), 0001-690X;1600-0447 (Apr 2014)

**Author(s):**

Kolshus, E; Dalton, V. S; Ryan, K. M; McLoughlin, D. M

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**Institution:**

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**Language:**

English

**Abstract:**

Objective: MicroRNAs are small non-coding RNA molecules that regulate gene expression, including genes involved in neuronal function and plasticity that have relevance for brain function and mental health. We therefore performed a systematic review of miRNAs in general adult psychiatric disorders. Method: Systematic searches in PubMed/MEDLINE and Web of Science were conducted to identify published clinical articles on microRNAs in general adult psychiatric disorders. We also reviewed references from included articles. Results: There is mounting evidence of microRNAs' regulatory roles in a number of central nervous system processes, including neurogenesis and synaptic plasticity. The majority of clinical studies of microRNAs in psychiatric disorders are in schizophrenia, where a number of specific microRNAs have been identified in separate studies. There is some evidence of marked downregulation of some microRNAs in affective disorders. Treatment with antidepressants appears to upregulate microRNA levels. There is currently little evidence from human studies in anxiety, addiction or other psychiatric disorders. Conclusion: MicroRNA research in psychiatry is currently in a nascent period, but represents an emerging and exciting area, with the potential to clarify molecular mechanisms of disease and identify novel biomarkers and therapeutic agents. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: John Wiley & Sons A/S. Published by John Wiley & Sons Ltd.; YEAR: 2013

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

**Subject Headings:** [\\*Gene Expression](#)  
[\\*Mental Disorders](#)  
[\\*mRNA](#)  
[Mental Health](#)  
[Neurogenesis](#)  
[Synaptic Plasticity](#)

**Source:** PsycINFO

**Full Text:** Available from *Wiley* in [Acta Psychiatrica Scandinavica](#)

#### 58. Preliminary data on validity of the Drug Addiction Treatment Efficacy Questionnaire.

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**Citation:** Psychiatria Danubina, 2013, vol./is. 25/3(261-265), 0353-5053 (2013)

**Author(s):** Kastelic, Andrej; Mlakar, Janez; Pregelj, Peter

**Correspondence Address:** Pregelj, Peter: University Psychiatric Hospital, Studenec 48, Ljubljana, Slovenia, 1260, peter.pregelj@psih-klinika.si

**Institution:** Centre for the Treatment of Drug Addiction, University Psychiatric Hospital, Ljubljana, Slovenia; University Psychiatric Hospital, Ljubljana, Slovenia; University Psychiatric Hospital, Ljubljana, Slovenia

**Language:** English

**Abstract:** Background: This study describes the validation process for the Slovenian version of the Drug Addiction Treatment Efficacy Questionnaire (DATEQ). Subjects and methods: DATEQ was constructed from the questionnaires used at the Centre for the Treatment of Drug Addiction, Ljubljana University Psychiatric Hospital, and within the network of Centres for the Prevention and Treatment of Drug Addiction in Slovenia during the past 14 years. The Slovenian version of the DATEQ was translated to English using the 'forward-backward' procedure by its authors and their co-workers. The validation process included 100 male and female patients with established addiction to illicit drugs who had been prescribed opioid substitution therapy. The DATEQ questionnaire was used in the study, together with clinical evaluation to measure psychological state and to evaluate the efficacy of treatment in the last year. To determinate the validity of DATEQ the correlation with the clinical assessments of the outcome was calculated using one-way ANOVA. Results: The F value was 44.4,  $p < 0.001$  (sum of squares: between groups 210.4,  $df = 2$ , within groups 229.7,  $df = 97$ , total 440.1,  $df = 99$ ). At the cut-off 4 the sensitivity is 81% and specificity 83%. Conclusion: The validation process for the Slovenian DATEQ version shows metric properties similar to those found in international studies of similar questionnaires, suggesting that it measures the same constructs, in the same way and as similar questionnaires. However, the relatively low sensitivity and specificity suggests caution when using DATEQ as the only measure of outcome. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Medicinska naklada - Zagreb, Croatia

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

**Subject Headings:** [\\*Drug Addiction](#)  
[\\*Drug Therapy](#)  
[\\*Psychometrics](#)  
[\\*Test Validity](#)  
[\\*Treatment Effectiveness Evaluation](#)  
[Foreign Language Translation](#)

**Source:** PsycINFO

#### 59. The association of poor economic condition and family relations in childhood with late-life depression.

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**Citation:** Psychiatria Danubina, 2013, vol./is. 25/3(241-247), 0353-5053 (2013)

**Author(s):** Krsteska, Roza; Pejaska, Vesna Gerazova

**Correspondence Address:** Krsteska, Roza: Centre for Geriatric Psychiatry, Psychiatric Hospital "Skopje", Proleterska street b.b., Skopje, Macedonia, 1000, r\_krsteska@yahoo.com

**Institution:** Centre for Geriatric Psychiatry, Psychiatric Hospital "Skopje", Skopje, Macedonia; Psychiatric Clinic, Faculty of Medicine, University of Skopje, Skopje, Macedonia

**Language:** English

**Abstract:** Background: Late-life depression encompasses both patients with late-life onset of depression (>60 years) and older adults with a prior and current history of depression. The aim of the study was to analyze the impact of the economic condition and family relations in childhood as risk factors for late-life depression. Subjects and methods: This was an analytical cross-sectional study comprising 120 subjects, 60 patients with unipolar depression and 60 subjects without depressive disorders, diagnosed in accordance with the 10-th International Classification of Mental and Behavioural Disorders. All participants in the study were above the age of 60 and there was no significant statistical difference in the sex proportion in both groups ( $p > 0.05$ ). Data for the examination were taken from a self-reported questionnaire designed for our aim. The Geriatric Depression Scale was used to measure depressive symptoms. Results: Our results have shown that severe financial difficulties are important events in childhood and are risk factors for depression in the elderly (Chi-square = 12.68,  $df = 2$ ,  $p = 0.0018$ ). Our investigation has found the association of family relations with late-life depression. In fact, conflictual relations in the family were more common in the experimental group than in the control group (Chi-square = 14.32,  $df = 3$ ,  $p = 0.0025$ ). Furthermore, father's addiction to alcohol in childhood was associated with depression in later life ( $p = 0.013$ ). The difference in childhood emotional neglect and unequal treatment between siblings in both groups was insufficient to be confirmed statistically, but the examinees with this trauma had a threefold higher chance of having depression later in life (Odds ratio = 3.04, 95% CL 0.92 < OR < 10.65; Yates chi-square = 3.2,  $df = 1$ ,  $p = 0.07$ ). Subjects who have estimated their mother ( $p = 0.019$ ) or father ( $p = 0.046$ ) having negative personal character traits had a significantly greater risk for development of late-life depression. Conclusions: Negative socio-economic circumstances as well as family conflicts during childhood are associated with late-life depression. Father's addiction to alcohol and parents' negative personal character traits are associated with depression in the elderly. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Medicinska naklada - Zagreb, Croatia

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

**Subject Headings:** [\\*Family Relations](#)  
[\\*Lower Income Level](#)  
[\\*Major Depression](#)  
[\\*Onset \(Disorders\)](#)  
[\\*Risk Factors](#)

**Source:** PsycINFO

#### 60. The capacity for pain empathy among urban internet-addicted left-behind children in China: An event-related potential study.

**Citation:** Computers in Human Behavior, April 2014, vol./is. 33/(56-62), 0747-5632 (Apr 2014)

**Author(s):** Wang, Ting; Ge, Ying; Zhang, Jinfu; Liu, Jin; Luo, Wenbo

**Correspondence Address:** Ge, Ying: School of Education, Laboratory of Cognition and Mental Health, Chongqing University of Arts and Sciences, Chongqing, Yongchuan, China, gy8620@163.com

**Institution:** School of Education, Laboratory of Cognition and Mental Health, Chongqing University of Arts and Sciences, Yongchuan, China; School of Education, Laboratory of Cognition and Mental Health, Chongqing University of Arts and Sciences, Yongchuan, China; Faculty of Psychology, Key Laboratory of Personality and Cognition, Ministry of Education, Southwest University, Beibei, China; School of Education, Laboratory of

Cognition and Mental Health, Chongqing University of Arts and Sciences, Yongchuan, China; School of Education, Laboratory of Cognition and Mental Health, Chongqing University of Arts and Sciences, Yongchuan, China

**Language:**

English

**Abstract:**

For the purpose of developing an event-related potential (ERP) method to study the differences in the capacity for pain empathy between urban Internet-addicted left-behind children and urban left-behind children with no such addiction, thirty participants (14 years of age) were selected from two middle schools in Chongqing, China to participate in the ERP experiment carried out over ten successive days in normal status. The study used the experimental paradigm of pain empathy experiment by Jackson, and 2 x 2 two-factor mixed experimental design. The results showed that for the N1 component (autonomic processing), the effect of pain was induced in both the Internet-addicted group and non-addicted group; this supports that the two groups of participants did not have differences during autonomic processing. The interaction between Internet addiction, non-addiction and pain was significant (for P2 and N2), i.e., the effect of pain was not significant in the Internet-addicted group but was significant in the non-addicted group. This finding supports that Internet addiction influenced the cognitive processing of empathy for pain in the urban left-behind children; P2 and N2 might reflect the cognitive processing and assessment of empathy for pain. During the last 550-850 ms, a larger LPC was induced in the two groups of participants for both pain and non-pain related images. This finding suggests that Internet addiction did not influence the processing since LPC reflected the reasonable judgment of participants, based on common sense, during the last experimental period. The final conclusion from the study was that Internet addiction influenced the capacity for pain empathy among urban left-behind children; in particular, it affected cognitive processing and assessment. (PsycINFO Database Record (c) 2014 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:**

\*Empathy  
\*Evoked Potentials  
\*Internet Addiction  
Pain  
Urban Environments

**Source:**

PsycINFO

### 61. Review of Risk and rehabilitation: Management and treatment of substance misuse and mental health problems in the criminal justice system.

**Citation:**

Drugs: Education, Prevention & Policy, April 2014, vol./is. 21/2(179-180), 0968-7637;1465-3370 (Apr 2014)

**Author(s):**

Best, David

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**Institution:**

Turning Point Alcohol and Drug Centre, Monash University, VIC, Australia

**Language:**

English

**Abstract:**

Reviews the book, Risk and Rehabilitation: Management and Treatment of Substance Misuse and Mental Health Problems in the Criminal Justice System edited by Aaron Pycroft and Suzie Clift (2012). This is an edited book that provides a predominantly British overview of the management of substance misuse and mental health problems in the criminal justice system, particularly around community disposals. What makes this book so fascinating is that this model of actuarial risk management is juxtaposed against the rehabilitative model with all of the ramifications for personal choice, self-determination and what in the criminal justice system is increasingly referred to as therapeutic jurisprudence. Thus, even for the readers with no interest or involvement in the criminal justice system, the debate around risk and rehabilitation is a remarkable parallel to the evolution of the recovery model in the UK. This book is a thoughtful,

considered and nuanced discussion of some of these fundamental arguments that are every bit as applicable to addiction policy as to criminal justice, and as such the author strongly commend it to readers. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: Informa UK Ltd.; YEAR: 2014  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Criminal Justice](#)  
[\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[\\*Mental Health](#)  
[\\*Self Determination](#)  
**Source:** PsycINFO  
**Full Text:** Available from *Informa Healthcare* in [Drugs: Education, Prevention, and Policy](#)

### 62. Beyond drug dealing: Developing and extending the concept of 'social supply' of illicit drugs to 'minimally commercial supply'.

**Citation:** Drugs: Education, Prevention & Policy, April 2014, vol./is. 21/2(157-164), 0968-7637;1465-3370 (Apr 2014)  
**Author(s):** Coomber, Ross; Moyle, Leah  
**Correspondence Address:** Coomber, Ross: Drug and Alcohol Research Unit, School of Social Science and Social Work, Plymouth University, 9 Portland Villas, Devon, Plymouth, United Kingdom, PL4 8AA, ross.coomber@plymouth.ac.uk  
**Institution:** Drug and Alcohol Research Unit, School of Social Science and Social Work, Plymouth University, Plymouth, United Kingdom; Drug and Alcohol Research Unit, School of Social Science and Social Work, Plymouth University, Plymouth, United Kingdom  
**Language:** English  
**Abstract:** A concept of 'social supply' has emerged in the UK that describes drug transactions that are almost exclusively to friends and acquaintances and that are non-commercially motivated. Social suppliers are increasingly understood not to be drug dealers 'proper' and many argue that the criminal justice system should consider and process them differently to commercially motivated suppliers. Recent (2012) changes to sentencing guidelines in England and Wales that have attempted to accommodate this will continue to struggle to deal with social supply however due to a continued reliance on how culpability is defined. This article explores the rationale for understanding social supply activities as a specific form of supply and a new (lesser) separate offence and also outlines a rationale for extending the concept to one of 'minimally commercial supply' something that explicitly accommodates the real-life circumstance of most supply transactions and is also inclusive of addicted user-dealers of heroin/other substances whom might reasonably be seen as closer to social suppliers than to drug dealers proper. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Informa UK Ltd.; YEAR: 2014  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Criminal Justice](#)  
[\\*Illegal Drug Distribution](#)  
[Motivation](#)  
[Social Environments](#)  
**Source:** PsycINFO  
**Full Text:** Available from *Informa Healthcare* in [Drugs: Education, Prevention, and Policy](#)

### 63. Patterns of concurrent alcohol, tobacco, and cannabis use in Germany: Prevalence and correlates.

**Citation:** Drugs: Education, Prevention & Policy, April 2014, vol./is. 21/2(102-109), 0968-7637;1465-3370 (Apr 2014)

**Author(s):** Hohne, Birgit; Pabst, Alexander; Hannemann, Tessa-Virginia; Kraus, Ludwig

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**Institution:** Helmholtz Zentrum Munchen, German Research Center for Environmental Health, Institute of Genetic Epidemiology, Neuherberg, Germany; IFT Institut fur Therapieforschung, Munich, Germany; IFT Institut fur Therapieforschung, Munich, Germany; IFT Institut fur Therapieforschung, Munich, Germany

**Language:** English

**Abstract:** Aims: This study investigated past month patterns and risk factors of alcohol, tobacco and cannabis use by level of intensity in the German general population. Methods: Data from the 2006 German Epidemiological Survey of Substance Abuse (ESA) were used. The cross-sectional random sample consisted of N = 7912 adults aged 18-64 years. The response rate was 45%. Intensive use of each substance was measured applying substance-specific cut-off points: alcohol: > 20/30 g pure ethanol daily for women/men; tobacco: > 20 cigarettes daily; cannabis: on > 6 occasions monthly. Findings: The majority of substance users reported no intensive use of any of the three substances (77.5%) and 19.4% had used one of the three substances intensively. A total of 3.1% engaged in intensive use of multiple substances with alcohol and tobacco (2.3%) as the most prevalent pattern. A higher risk for intensive use of multiple substances was found among males, older individuals and those with a substance use disorder. Conclusions: Results of this study call for an integrated view on substance use and related disorders in prevention and treatment, taking diverse use patterns and specific needs of substance abusers into account. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Alcohol Abuse](#)  
[\\*Cannabis](#)  
[\\*Drug Abuse](#)  
[\\*Tobacco Smoking](#)  
[Risk Factors](#)

**Source:** PsycINFO

**Full Text:** Available from *Informa Healthcare* in [Drugs: Education, Prevention, and Policy](#)

#### 64. Clinical characteristics of 5 hospitalized 3,4-methylenedioxypropylvalerone (MDPV) users.

**Original Title:** A 3,4-methylenedioxypropylvaleron (MDPV) hasznalataval kapcsolatos klinikai tapasztalatok ot hospitalizalt paciens esete kapcsan.

**Citation:** *Psychiatria Hungarica*, 2013, vol./is. 28/4(431-439), 0237-7896 (2013)

**Author(s):** Kinga, Farkas; Eniko, Siraly; Erika, Szily; Gabor, Csukly; Janos, Rethelyi

**Correspondence Address:** Kinga, Farkas, farkas.kinga@med.semmelweis-univ.hu

**Institution:** Semmelweis Egyetem, Pszichiatriai es Pszichoterapias Klinika, Budapest, Hungary; Semmelweis Egyetem, Pszichiatriai es Pszichoterapias Klinika, Budapest, Hungary

**Language:** Hungarian

**Abstract:** A new illegal psychotropic substance appeared in Hungary during the first months of 2011. Acutely hospitalized patients with psychosis disclosed using a new type of designer drug, previously unknown to clinicians. As the new drug became better known, the cases with acute intoxication were often also transported to toxicology departments. In this study we summarize 5 short case studies that demonstrate the heterogeneous symptoms associated with MDPV abuse, and draw attention to the frequently occurring delusions,

and the extended risk of intravenous substance use. Present case studies include patients with and without psychiatric history, regular and occasional users, intravenous and other routes of administration. In the short run antipsychotic therapy reduced the symptoms in all cases, but there is no clear therapeutic guideline for the treatment of patients having psychiatric problems associated with these drugs at the present time. The laboratory examination is unresolved as well. Mephedrone, MDPV and recent drugs have drawn attention to the problem of designer drugs again. This article examines the interaction of drug consumption trends and changes in law, apropos of the presented cases. This information can be helpful for the future treatment of MDPV or other designer drug users. Possible research and therapeutic implications are also discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Drug Therapy](#)  
[\\*Drug Usage](#)  
[\\*Hospitalized Patients](#)  
[Clinical Practice](#)  
[Symptoms](#)

**Source:** PsycINFO

#### 65. E. M. Jellinek's silenced and silencing transgenerational story.

**Original Title:** E. M. Jellinek elnemitott es elnemulo transzgeneracios tortenete.

**Citation:** *Psychiatria Hungarica*, 2013, vol./is. 28/4(349-369), 0237-7896 (2013)

**Author(s):** Gabor, Kelemen; Monika, Mark

**Correspondence Address:** Gabor, Kelemen, Rokus u. 2, Pecs, Hungary, 7624, kelemen@pte.hu

**Institution:** Pecs Tudomanyegyetem, BTK Tarsadalmi Kapcsolatok Intezete, Hungary; Pecs Tudomanyegyetem, Demografia es Szociologia Doktori Iskola, Hungary

**Language:** Hungarian

**Abstract:** Jellinek is a kind of archetypal character for future generations in the field of addiction studies. His implosion in the arena of alcoholism around the age of 50 was an unexpected challenge to medical science. We know very little about his own role models giving an intellectual and moral compass to his pragmatic creativity. More than 30 years has passed since Jellinek's death when an American sociologist Ron Roizen started unearthing his silent story. Roizen discerned that there are a lot of unsaid and muted issues in his personal Hungarian past. Our paper, based on the authors' research in Hungarian archives and other sources reveals that not just Jellinek's personal but his transgenerational narrative has been not-yet-said. This silenced and silencing history appears an unfinished business of acculturation of the family, which started prior to four generations. Authors have been concluding that the issue of religious conversion is a critical point in the process of acculturation. They examine the counter move of loyalty to family values and driving force of assimilation making their story unspeakable. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Family](#)  
[\\*Transgenerational Patterns](#)  
[Acculturation](#)  
[Alcoholism](#)  
[Religious Conversion](#)

**Source:** PsycINFO

#### 66. Officially sanctioned gambling in prisons: Commentary from a federal prison judge.

**Citation:** *Journal of Gambling Issues*, December 2013, vol./is. 28/(1-3), 1910-7595 (Dec 2013)

**Author(s):** Plecas, Darryl

**Institution:** School of Criminology and Criminal Justice, University of the Fraser Valley, Abbotsford, BC, Canada

**Language:** English

**Abstract:** Comments on an article by D. J. Williams (see record 2014-08727-014). As Williams points out, if a large proportion of inmates gamble, and if most of the gambling was relatively benign, and if accepted, then some forms of gambling may contribute to the rehabilitation and the positive socialization of inmates, there may be a number of benefits associated with the institution allowing some gambling. However, this current author's experience leads him to believe that there are at least three substantial and serious problems with allowing inmates to gamble to any extent. First, it is extremely difficult to imagine how prison authorities could provide any opportunity to gamble that inmates could not easily exploit. The second matter deals with the matter of inmates having to cover gambling losses. The third problem relates to the issue of addiction. It is well recognized that a significant portion of inmates either have an addictive personality or are addicts. It is also well-established that these people are at risk of replacing one form of addiction with another. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

**Subject Headings:** [\\*Correctional Institutions](#)  
[\\*Gambling](#)  
[\\*Prisons](#)

**Source:** PsycINFO

#### 67. The prevalence of problem gambling among substance abusing offenders.

**Citation:** Journal of Gambling Issues, December 2013, vol./is. 28/(1-8), 1910-7595 (Dec 2013)

**Author(s):** Zorland, Jennifer; Kuperminc, Gabriel P; Mooss, Angela D; Gilmore, Devin; Emshoff, James G

**Correspondence Address:** Zorland, Jennifer: Georgia State University, Department of Psychology, PO Box 5010, Atlanta, GA, US, 30302-5010, Jzorland@gmail.com

**Institution:** Georgia State University, Atlanta, GA, US; Georgia State University, Atlanta, GA, US; CERCA, LLC, Miami Beach, FL, US; Georgia State University, Atlanta, GA, US; Community Psychology Program, Georgia State University, Atlanta, GA, US

**Language:** English

**Abstract:** Research suggests that problem gambling is associated with substance and alcohol abuse, criminal activity, and involvement in the criminal justice system. The present study assessed the lifetime prevalence of pathological and problem gambling among a population in which these risk factors are compounded, specifically adults mandated to participate in drug court. A sample of 602 participants completed the South Oaks Gambling Screen. Nearly 72% of the participants were male, and the majority identified as White (53%) or Black (37%). Results indicated that the prevalence and severity of problem gambling may be elevated within this population. Over 30% of respondents were assessed as probable pathological or problem gamblers (20.1% and 10.3%, respectively), and 22% as being at low risk. Results suggest that problem gambling is a salient issue among substance-abusing offenders. Resources should be dedicated to screening and developing evidence based best practices for the prevention and treatment of problem gambling. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Criminals](#)  
[\\*Drug Abuse](#)  
[\\*Epidemiology](#)  
[\\*Pathological Gambling](#)  
[\\*Severity \(Disorders\)](#)  
[Criminal Justice](#)

**Source:** PsycINFO

### 68. Stereotypes of problem gambling.

**Citation:** Journal of Gambling Issues, December 2013, vol./is. 28/(1-19), 1910-7595 (Dec 2013)

**Author(s):** Horch, Jenny; Hodgins, David

**Correspondence Address:** Horch, Jenny: University of Calgary, Department of Psychology, 2500 University Dr. NW, Calgary, AB, Canada, T2N 1N4, jhorch@ucalgary.ca

**Institution:** Addictive Behaviours Laboratory, University of Calgary, Calgary, AB, Canada;  
Department of Psychology, University of Calgary, Calgary, AB, Canada

**Language:** English

**Abstract:** Introduction: Research supports the notion that problem gambling is stigmatized, yet little is known about stereotypes, a key variable in the stigmatization process. Method: University students (41 male, 110 female) generated words when presented with one of three labels: gambler, problem gambler, and gambling addict. An adjective checklist permitted participants to select words characteristic of problem gamblers and was administered to additional student (N = 790) and problem gambling samples (N = 74). Results: Content and frequency analyses revealed that problem gamblers were considered compulsive, impulsive, desperate, irresponsible, risk-taking, depressed, greedy, irrational, antisocial, and aggressive. Problem gambling and gambling addict labels generated more words regarding negative gambling consequences. Gambler resulted in more miscellaneous words (e.g., casino, money). Conclusions: Stereotype content was not entirely inaccurate and the label gambler was not neutral. Future research could examine which aspect of stereotype content invites stigmatization. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Gambling](#)  
[\\*Pathological Gambling](#)  
[\\*Stereotyped Attitudes](#)  
[Stigma](#)

**Source:** PsycINFO

### 69. Online poker gambling among university students: Risky endeavour or harmless pastime?

**Citation:** Journal of Gambling Issues, December 2013, vol./is. 28/(1-18), 1910-7595 (Dec 2013)

**Author(s):** Mihaylova, Tsvetelina; Kairouz, Sylvia; Nadeau, Louise

**Correspondence Address:** Kairouz, Sylvia: Department of Sociology and Anthropology, Concordia University, 1455 de Maisonneuve Blvd. West, Montreal, PQ, Canada, H3G 1M8, skairouz@alcor.concordia.ca

**Institution:** Lifestyle and Addiction Research Lab, Concordia University, Montreal, PQ, Canada;  
Department of Sociology and Anthropology, Concordia University, Montreal, PQ, Canada;  
Department of Psychology, Universite de Montreal, Montreal, PQ, Canada

**Language:** English

**Abstract:** This study aims to describe online poker gambling patterns and associated problems in a representative sample of university students. The study sample consisted of 366 past-year online and offline poker gamblers and was drawn from a larger survey sample of full-time undergraduate students (N = 2,139) randomly selected across four university campuses in Montreal, Canada. The questionnaire included self-reported measures of poker gambling patterns and problems, negative consequences of gambling, drinking problems, and illicit drug use. Online poker was found to be associated with problem gambling, over-spending and debt, as well as problems with university studies, interpersonal relationships, and illicit drug use. Given the propensity of university students to adopt risky behaviours, on-campus prevention programs are warranted in the midst of the online poker craze, especially given that online gambling remains unregulated. Detection tools should be

available for students to recognize critical shifts in their gambling habits from a leisure activity to a risky endeavour. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Gambling](#)  
[\\*Internet](#)  
[\\*Risk Taking](#)  
[Alcohol Drinking Patterns](#)  
[College Students](#)  
[Financial Strain](#)  
[Pathological Gambling](#)  
[Risk Factors](#)

**Source:** PsycINFO

#### 70. Relation between superior mental functions deterioration and cannabinoids consumption in 18 to 30 year old university students.

**Original Title:** Relacion entre deterioro en funciones mentales superiores y consumo de cannabinoides en universitarios de 18 a 30 anos de edad.

**Citation:** Psiquis, September 2013, vol./is. 22/5(124-131), 0188-736X (Sep-Oct 2013)

**Author(s):** Diaz, Maritza Bernal; Casas, Carmen Rojas; Genchi, Janet Jimenez

**Correspondence Address:** Diaz, Maritza Bernal: Hospital Psiquiatrico Fray Bernardino Alvarez, Calle Nino Jesus No. 2, Colonia Tlalpan, Mexico, C. P. 14000

**Institution:** Hospital Psiquiatrico Fray Bernardino Alvarez, Colonia Tlalpan, Mexico; Hospital Psiquiatrico Fray Bernardino Alvarez, Colonia Tlalpan, Mexico; Hospital Psiquiatrico Fray Bernardino Alvarez, Colonia Tlalpan, Mexico

**Language:** Spanish

**Abstract:** Historically the use of cannabinoids has been socially tolerated or accepted, in large part because cannabinoids use is considered to be a low health risk, up to the point that cannabinoids are placed among soft drugs; however; there are scientific evidences that put their inoffensive consumption in doubt. The present study looked for differences in mental function deterioration between cannabis consumers and nonconsumers. Two analysis groups were formed with 31 participants each one; this training group was only cannabis consumer; to both groups were applied Neuropsi and Mini Psychiatric Interview scales. As relevant results we had that 71% of participants were classified without cognitive deterioration, 11% mild deterioration, 10% moderate, and 8% severe; being almost 8 times more frequent some degree of cognitive deterioration in cannabis consumers compared with nonconsumers. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Cannabinoids](#)  
[\\*Cognitive Ability](#)  
[\\*Drug Abuse](#)  
[College Students](#)  
[Doubt](#)  
[Health Behavior](#)

**Source:** PsycINFO

#### 71. Challenges and opportunities for integrating preventive substance-use-care services in primary care through the Affordable Care Act.

**Citation:** Journal of Health Care for the Poor and Underserved, February 2014, vol./is. 25/1, Suppl(36-45), 1049-2089;1548-6869 (Feb 2014)

**Author(s):** Ghitza, Udi E; Tai, Betty

**Correspondence Address:** Ghitza, Udi E.: Center for the Clinical Trials Network, National Institute on Drug Abuse, National Institutes of Health, 6001 Executive Boulevard, Bethesda, MD, US, 20892, ghitzau@nida.ni

**Institution:** Center for the Clinical Trials Network, National Institute on Drug Abuse, National Institutes of Health, United States Department of Health and Human Services, Bethesda, MD, US; Center for the Clinical Trials Network, National Institute on Drug Abuse, National Institutes of Health, United States Department of Health and Human Services, Bethesda, MD, US

**Language:** English

**Abstract:** Undertreated or untreated substance use disorders (SUD) remain a pervasive, medically-harmful public health problem in the United States, particularly in medically underserved and low-income populations lacking access to appropriate treatment. The need for greater access to SUD treatment was expressed as policy in the Final Rule on standards related to essential health benefits, required to be covered through the 2010 Affordable Care Act (ACA) health insurance exchanges. SUD treatment services have been included as an essential health benefit, in a manner that complies with the Mental Health Parity and Addiction Equity Act (MHPAEA) of 2008. Consequently, with the ACA, a vast expansion of SUD-care services in primary care is looming. This commentary discusses challenges and opportunities under the ACA for equipping health care professionals with appropriate workforce training, infrastructure, and resources to support and guide science-based Screening, Brief Intervention, and Referral to Treatment (SBIRT) for SUD in primary care. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Meharry Medical College

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Primary Health Care](#)  
[\\*Health Care Policy](#)  
[Health Insurance](#)  
[Public Health](#)  
[Health Personnel](#)

**Source:** PsycINFO

## 72. Psychosocial risk and attitudes about sexual practices with alcohol or drugs effects in adolescents at Medellin.

**Original Title:** Riesgos psicosociales y actitudes sobre practicas sexuales bajo el efecto del alcohol o drogas en adolescentes de la ciudad de Medellin.

**Citation:** Universitas Psychologica, July 2013, vol./is. 12/3(887-898), 1657-9267;2011-2777 (Jul-Sep 2013)

**Author(s):** Arango-Tobon, Olber Eduardo; Perez, Guillermo Alonso Castano; Quintero, Sandra; Montoya, Carolina Montoya; Mesa, Santiago Morales; Bustamante, Alexander Rodriguez

**Correspondence Address:** Arango-Tobon, Olber Eduardo, olber.arangoto@amigo.edu.co

**Institution:** Fundacion Universitaria Luis Amigo, Medellin, Colombia; Fundacion Universitaria Luis Amigo, Medellin, Colombia

**Language:** Spanish

**Abstract:** In this article we examined some psychosocial factors and cognitive attitudes related to sexual practices under the influence of alcohol and drugs among adolescents in the city of Medellin in 2011. The type of study was non-experimental with a descriptive and correlational level. The sample consisted of 955 students in grades 9, 10 and 11 public and private colleges. Age, sex, type of family, persons responsible for raising, group influence and cognitive and affective attitudes; play an important role in the performance

of risky sexual practices on the use of alcohol and drugs during adolescence. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcohol Drinking Patterns](#)  
[\\*Attitudes](#)  
[\\*Drug Usage](#)  
[\\*Psychosexual Behavior](#)  
[\\*Psychosocial Factors](#)  
[Risk Factors](#)

**Source:** PsycINFO

### 73. Associative relationships between beliefs about the social use of drugs and the consumption among young students.

**Original Title:** Relaciones asociativas entre las creencias acerca del uso social de las drogas y el consumo en estudiantes juvenes.

**Citation:** Universitas Psychologica, July 2013, vol./is. 12/3(875-885), 1657-9267;2011-2777 (Jul-Sep 2013)

**Author(s):** Trujillo, Humberto M; Martinez-Gonzalez, Jose M; Vargas, Cristina

**Correspondence Address:** Trujillo, Humberto M.: Universidad de Granada, Facultad de Psicologia, Campus Universitario de Cartuja s. n., Granada, Spain, 18071, humberto@ugr.es

**Institution:** Universidad de Granada, Granada, Spain; Centro Provincial de Drogodependencias, Granada, Spain; Universidad de Granada, Granada, Spain

**Language:** Spanish

**Abstract:** The objective of the study was to know the content of social representations about the consumption of drugs and also if those representations contributed and predicted the consumption of drugs among young people. Six beliefs about the social use of drugs were selected, such as whether it is common to take drugs. These beliefs were considered indicators of those social representations. The study was carried out among 417 students of Associate Degree and Social Guarantee Program from different Educational Centres of Granada, who were considered high risk drug users. Results showed that evaluated beliefs were present among young people, these beliefs predicted the consumption of legal and illegal drugs and were specially associated with the consumption of cannabis. Thus, social representations about the consumption of drugs should be considered for prevention programs. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Drug Usage](#)  
[\\*Risk Factors](#)  
[\\*Social Cognition](#)

**Source:** PsycINFO

### 74. (In)congruent interpretation of contingent life experiences in mental health care.

**Original Title:** (In)congruente interpretatie van contingente levensgebeurtenissen in de GGZ.

**Citation:** Psyche en Geloof, December 2013, vol./is. 24/4(235-245), 1385-4585 (Dec 2013)

**Author(s):** Van Straten, C; Scherer-Rath, M; Hoencamp, E

**Correspondence Address:** Van Straten, C., Dadelplein i 2552 DS Den Haag, Netherlands, C.Straten@parnassiaagroap.nl

**Institution:** Faculteit Filosofie, Theologie en Religiewetenschappen, Radboud Universiteit, Nijmegen, Netherlands; Instituut Klinische Psychologie, Leiden, Netherlands

**Language:** Dutch

**Abstract:** Interpretation of far-reaching experiences correlates with ultimate life goals, embedded in a person's conception of his or her life or fundamental reality. New interpretations should easily be integrated into the story of this life in a logical way. In this article the results are shown of a qualitative pilot study of the interpretation of far-reaching experiences of ten patients with schizophrenia or addictions. The used interview method has been found a valuable instrument to detect the interpretations and show the (in)congruency, even in a clinical psychiatric setting. People with psychiatric problems or addiction problems apparently seem to have the same mechanism of interpretation as other people. However, only four out of ten patients showed full congruency. Based on this pilot study it cannot yet be concluded if this result is due to the fundamental pathology or that the pathology only contribute to less consciousness. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Life Experiences](#)  
[\\*Reality](#)  
[\\*Schizophrenia](#)  
[Mental Health Services](#)

**Source:** PsycINFO

**75. A report by Turkish Association for Psychopharmacology on the psychotropic drug usage in Turkey and medical, ethical and economical consequences of current applications.**

**Citation:** Klinik Psikofarmakoloji Bulteni / Bulletin of Clinical Psychopharmacology, December 2013, vol./is. 23/4(390-402), 1017-7833;1302-9657 (Dec 2013)

**Author(s):** Aydin, Nazan; Cetin, Mesut; Kurt, Erhan; Savas, Haluk; Acikel, Cengizhan; Kilic, Selim; Basoglu, Cengiz; Turkcapar, Hakan

**Correspondence Address:** Aydin, Nazan: Dr. Mazhar Osman Ruh Sagligi ve Sinir Hastaliklari Egitim Arastirma Hastanesi, Bakirkoy, Istanbul, Turkey, 34147, nmda25@gmail.com

**Institution:** Dr. Mazhar Osman Mental Health and Neurological Diseases Training and Research Hospital, Department of Psychiatry, Istanbul, Turkey; Klinik Psikofarmakoloji Bulteni-Bulletin of Clinical Psychopharmacology, GATA Haydarpaşa Training Hospital, Department of Psychiatry, Istanbul, Turkey; Dr. Mazhar Osman Mental Health and Neurological Diseases Training and Research Hospital, Department of Psychiatry, Istanbul, Turkey; Gaziantep University, Medical Faculty, Department of Psychiatry, Gaziantep, Turkey; Gulhane Military Medical Academy, Department of Biostatistics, Ankara, Turkey; Gulhane Military Medical Academy, Department of Epidemiology, Ankara, Turkey; GATA Haydarpaşa Training Hospital, Department of Psychiatry, Istanbul, Turkey; Hasan Kalyoncu University, Department of Psychology, Gaziantep, Turkey

**Language:** English

**Abstract:** This report evaluation of the psychotropic drug usage in Turkey based on the data provided by Intercontinental Marketing Service (IMSHealth), Ministry of Health, Turkish Statistical Institute, Turkish Mental Health Profile. A total of 14.24 millions units of antidepressants were used in 2003. By increasing 162%, annual antidepressant usage reached 37.35 millions units by the end of 2012. Antipsychotic drug usage increased by 71% during the last 5 years, from 7.20 millions units in 2005 to 12.32 millions as of the end of 2012. The total number of prescriptions including an antidepressant was 18.14 millions in 2007, by increasing 50% in the last 5 years, it reached 26.60 millions in 2012. The total number of prescriptions including any antipsychotic drug increased from 3.92 millions in 2007 to 5.76 millions in 2012, increasing by 46.7%. In the worst case scenario considering concurrent psychiatric disorders, prevalence of disorders requiring antidepressants and antipsychotic drugs could be as high as 20% and 5%, respectively. The calculated frequency (prescription/population) was much higher than the worst case scenario estimates. In 2007, family physicians and practitioners, psychiatrists, neurologists, and specialists of other disciplines prescribed 33, 37, 20, and 11% of all antidepressants, respectively. In 2012, they prescribed 48, 31, 14, and 7% of all

antidepressants, respectively. The first time antidepressant prescriptions in 2012 were done at the rate of 37, 34, 19, and 11% by above mentioned specialists, respectively In 2007, family physicians and practitioners, psychiatrists, neurologists, and specialists of other disciplines prescribed 18, 67, 13, and 3% of all antipsychotics, respectively In 2012, the same set of specialisations prescribed 21, 63, 14, and 2% of antipsychotics, respectively. The "first time" antipsychotics were prescribed at the rate of 6, 73, 19, and 3% by above mentioned order of specialists, respectively In conclusion, the data suggest that there was an unnecessary and/or excessive prescribing of psychotropic agents. The increase is not related to increased population and/or prevalence of psychiatric disorders. The numbers of first time prescriptions suggest that non-psychiatrists diagnose and initiate treatment for psychiatric disorders. This requires re-evaluation of authorization to prescribe psychotropic agents. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Bioethics](#)  
[\\*Drug Usage](#)  
[\\*Economics](#)  
[\\*Psychopharmacology](#)

**Source:** PsycINFO

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

#### 76. Pharmacotherapy options In comorbid bipolar disorder and alcohol-substance use disorders.

**Citation:** Klinik Psikofarmakoloji Bulteni / Bulletin of Clinical Psychopharmacology, December 2013, vol./is. 23/4(378-389), 1017-7833;1302-9657 (Dec 2013)

**Author(s):** Altinbas, Kursat; Evren, Cuneyt

**Correspondence Address:** Altinbas, Kursat: Canakkale Onsekiz Mart University, Faculty of Medicine, Department of Psychiatry, Terzioğlu Yerleskesi, Tıp Fakültesi Dekanlık Binasi, No.130, Canakkale, Turkey, 17000, kursataltinbas@yahoo.com

**Institution:** Canakkale Onsekiz Mart University, Faculty of Medicine, Department of Psychiatry, Canakkale, Turkey; Bakirkoy Training and Research Hospital for Psychiatry, Neurology and Neurosurgery, Department of Alcohol and Drug Research, Treatment and Training Center (AMATEM), Istanbul, Turkey

**Language:** English

**Abstract:** Epidemiological studies have reported that alcohol-substance use disorders are the most common co-occurring axis I disorder among patients with bipolar disorders. Comorbidity of alcohol-substance use disorders mostly worsens the course of illness in bipolar patients and underlying mechanisms of the association between both disorders still remain unclear. However, the prospective links observed between bipolar disorders and alcohol-substance use disorders support clinical interventions that incorporate both disorders in developing treatment strategies. Here we review the pharmacological treatment choices for alcohol-substance use disorders accompanying bipolar disorders, despite a limited number of treatment studies. The first-line (evidence-based) and second-line (expert opinion) pharmacological agents of bipolar disorder with comorbid alcohol-substance use disorders are quetiapine, lithium or valproate for the depressive phase; valproate or quetiapine for the manic/mixed phase, and valproate monotherapy or a combination of valproate with naltrexone or disulfiram for maintenance. Future prospective studies are required for improvement of treatments in comorbid bipolar and alcohol-substance use disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Bipolar Disorder](#)  
[\\*Comorbidity](#)

[\\*Drug Addiction](#)

[\\*Drug Therapy](#)

**Source:** PsycINFO

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

### 77. Aggression and impulsivity in different groups of alcohol and heroin dependent inpatient men.

**Citation:** Klinik Psikofarmakoloji Bulteni / Bulletin of Clinical Psychopharmacology, December 2013, vol./is. 23/4(335-344), 1017-7833;1302-9657 (Dec 2013)

**Author(s):** Bozkurt, Muge; Evren, Cuneyt; Yilmaz, Alkin; Can, Yesim; Cetingok, Sera

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**Institution:** Bakirkoy Training and Research Hospital for Psychiatry, Neurology and Neurosurgery, Alcohol and Drug Research, Treatment and Training Center (AMATEM), Istanbul, Turkey; Bakirkoy Training and Research Hospital for Psychiatry, Neurology and Neurosurgery, Alcohol and Drug Research, Treatment and Training Center (AMATEM), Istanbul, Turkey; Bakirkoy Training and Research Hospital for Psychiatry, Neurology and Neurosurgery, Alcohol and Drug Research, Treatment and Training Center (AMATEM), Istanbul, Turkey; Bakirkoy Training and Research Hospital for Psychiatry, Neurology and Neurosurgery, Alcohol and Drug Research, Treatment and Training Center (AMATEM), Istanbul, Turkey; Bakirkoy Training and Research Hospital for Psychiatry, Neurology and Neurosurgery, Alcohol and Drug Research, Treatment and Training Center (AMATEM), Istanbul, Turkey; Bakirkoy Training and Research Hospital for Psychiatry, Neurology and Neurosurgery, Alcohol and Drug Research, Treatment and Training Center (AMATEM), Istanbul, Turkey

**Language:** English

**Abstract:** Objective: The aim of this study was to evaluate the aggression and impulsivity in two different groups of men with alcohol or heroin dependency. Methods: Participants were consecutively admitted male alcohol (n = 94) or heroin (n = 78) dependent inpatients and healthy controls (n = 63). Patients and healthy controls were investigated with the Buss-Perry Aggression Questionnaire and the Barratt Impulsiveness Scale, version 11. Results: Aggression and impulsivity scores were higher among both the alcohol and the heroin dependent groups than the healthy controls. Verbal aggression was the only subscale, which did not show significant differences between groups. Severity of impulsivity and aggression discriminated both alcohol dependents and heroin dependents from healthy controls. When subscales of aggression and impulsivity were taken as independent variables, current age, hostility and motor impulsiveness discriminated alcohol dependents, whereas physical aggression and non-planning impulsiveness discriminated heroin dependents from healthy controls. Thus, although aggression and impulsivity did not discriminate alcohol and heroin dependents from each other, and both aggression and impulsivity discriminated these groups from healthy controls, different dimensions of aggression and impulsivity discriminated these groups from healthy controls. Our study sample being restricted to male treatment-seeking patients and the cross-sectional nature of the study, which may interfere with the identification of causal relationships between impulsivity, aggression and substance dependency, must be taken into consideration, when assessing these results. Conclusion: The results suggest that both aggression and impulsivity are important constructs on which to focus in the treatment of substance dependents, but different dimensions might be the center of attention for patients with different substances of dependence. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Aggressive Behavior](#)  
[\\*Alcoholism](#)  
[\\*Drug Dependency](#)  
[\\*Heroin](#)  
[\\*Impulsiveness](#)

[Hospitalized Patients](#)  
[Human Males](#)

**Source:** PsycINFO

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

#### 78. Women and drugs: The heroin abuser and the prescription drug abuser.

**Citation:** Psychology of Women Quarterly, June 1984, vol./is. 8/4(354-369), 0361-6843;1471-6402 (Jun 1984)

**Author(s):** Gutierrez, Sara E; Patton, Deanna S; Raymond, Jonathan S; Rhoads, Deborah L

**Correspondence Address:** Gutierrez, Sara E.: Department of Psychology, Arizona State University, Tempe, AZ, US, 85287

**Institution:** University of Kansas, Lawrence, KS, US; Arizona State University, Tempe, AZ, US; Salvation Army Addiction Treatment Facility, Honolulu, HI, US; CODAMA Services Inc., Phoenix, AZ, US

**Language:** English

**Abstract:** The literature on female drug use/abuse was reviewed and descriptions of the female heroin abuser and the female prescription drug abuser were derived. The female heroin abuser has been characterized as a lower socioeconomic status woman with low self-esteem, the product of a disrupted, unstable childhood. Her lifestyle, in addition to heroin abuse, probably includes petty crime and prostitution. The prescription drug abuser, on the other hand, is likely to be a middle class woman who has legal access to drugs through her physician. Her drug use is socially sanctioned and tied to cultural sex role stereotypes. Researchers suggest that problems of female drug abusers should be viewed in terms of the feminine role as well as the role of drug abuser. Descriptive research dominates the literature on female drug abuse. The need for more theoretical studies is emphasized and locus of control, attribution, and social support research topics are suggested. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Human Sciences Press; YEAR: 1984

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Heroin](#)  
[\\*Human Females](#)  
[\\*Prescription Drugs](#)  
[Cross Cultural Differences](#)  
[Lower Income Level](#)  
[Self Esteem](#)  
[Social Support](#)

**Source:** PsycINFO

#### 79. Changing pattern of alcohol consumption in Russia.

**Original Title:** El modelo cambiante del consumo de alcohol en Rusia.

**Citation:** Adicciones, 2013, vol./is. 25/4(356-357), 0214-4840 (2013)

**Author(s):** Jargin, Sergei V

**Correspondence Address:** Jargin, Sergei V., Clementovski per 6-82, Moscow, Russia, 115184, sjargin@mail.ru

**Institution:** Universidad Rusa de la Amistad de los Pueblos, Moscú, Russia

**Language:** Spanish

**Abstract:** This article discusses the changing pattern of alcohol consumption in Russia. The discussion of a changing pattern of alcohol consumption in the former Soviet Union (SU)

overview of its social transformations since the 1990s; that is, the disintegration and shifting on the ethnic composition of the classes with higher alcohol consumption in urban areas: blue-collar workers and intelligentsia. The alcohol consumption in the former SU increased by over 300 % between 1950 and 1970, was partly caused by the confidence that Soviet people placed in their future coupled with an indulgent attitude to drunkenness on the part of the society. Ongoing ethnic transformation of the working class, with replacement of ethnic Russian people by immigrants from areas, where alcohol consumption is less widespread, has contributed to a decrease in drunkenness. Furthermore, after the anti-alcohol campaign, quality of beverages has deteriorated while popular products disappeared or were replaced by surrogates. Heavy binge drinking seems to be in decline in today's Russia, especially in large cities like Moscow. The increasingly prevalent drinking pattern is moderate consumption of beer that can be seen in many places. In contrast to the recent past, even marginalized people are rarely seen drunk in public. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

**Subject Headings:** [\\*Alcohol Drinking Patterns](#)  
[\\*Alcohol Rehabilitation](#)  
[\\*Alcoholic Beverages](#)  
[\\*Alcoholism](#)  
[\\*Binge Drinking](#)  
[Blue Collar Workers](#)

**Source:** PsycINFO

#### **80. Alcohol Outcome Expectancies Questionnaire (CERCA): Psychometric properties in inpatients for addictions in Mexico.**

**Original Title:** Cuestionario de expectativas de resultado de consumo de alcohol (CERCA): propiedades psicometricas en pacientes en tratamiento residencial para las adicciones en Mexico.

**Citation:** Adicciones, 2013, vol./is. 25/4(327-332), 0214-4840 (2013)

**Author(s):** Templos-Nunez, Liliana; Villalobos-Gallegos, Luis; Cervera-Ballesteros, Jimena; Marin-Navarrete, Rodrigo

**Correspondence Address:** Templos-Nunez, Liliana: Unidad de Ensayos Clinicos, Sub-Direccion de Investigaciones Clinicas, Instituto Nacional de Psiquiatria Ramon de la Fuente (INPRF), Muniz, Mexico, Mexico, 14370, ltemplos@inprf.gob.mx

**Institution:** Unidad de Ensayos Clinicos, Sub-Direccion de Investigaciones Clinicas, Instituto Nacional de Psiquiatria Ramon de la Fuente (INPRF), Mexico, Mexico; Unidad de Ensayos Clinicos, Sub-Direccion de Investigaciones Clinicas, Instituto Nacional de Psiquiatria Ramon de la Fuente (INPRF), Mexico, Mexico; Unidad de Ensayos Clinicos, Sub-Direccion de Investigaciones Clinicas, Instituto Nacional de Psiquiatria Ramon de la Fuente (INPRF), Mexico, Mexico; Unidad de Ensayos Clinicos, Sub-Direccion de Investigaciones Clinicas, Instituto Nacional de Psiquiatria Ramon de la Fuente (INPRF), Mexico, Mexico

**Language:** Spanish

**Abstract:** Alcohol expectancies are the anticipations that a person makes to the effects that this substance will cause. This construct has proven to be useful in explaining alcohol consumption; however they have been scarcely measured in clinical population. The aim of this study was to develop and evaluate the psychometric properties of a test measuring these expectations in Mexican people with severe alcohol consumption under inpatient treatment. The final version of the test has a high Cronbach's alpha (.857) with three factors with a theoretical foundation explaining 61.5% of the variance: these properties are superior to those shown by other evidence. For future studies is suggested to include a greater number of women in the sample in order to confirm its psychometric properties. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Psychometrics](#)

\*Test Reliability  
 \*Test Validity  
 Hospitalized Patients  
 Questionnaires

**Source:** PsycINFO

### 81. Validation of the Training Addiction Scale (EAE) in master athletes.

**Original Title:** Validacion de la Escala de Adiccion al Entrenamiento (EAE) en atletas veteranos.

**Citation:** Adicciones, 2013, vol./is. 25/4(309-320), 0214-4840 (2013)

**Author(s):** Ruiz-Juan, Francisco; Sancho, Antonio Zarauz; Ibarzabal, Felix Arbinaga

**Correspondence Address:** Sancho, Antonio Zarauz, C/ Santa Laura, n 30, Almeria, Spain, 04008, tonizarauz@msn.com

**Institution:** Facultad de Ciencias del Deporte, Murcia, Spain; Departamento de Educacion Fisica y Deportes, I.E.S.O. Azcona, Almeria, Spain; Departamento de Psicologia Clinica, Experimental y Social, Universidad de Huelva, Huelva, Spain

**Language:** Spanish

**Abstract:** Measuring instruments for behavioral addictions tend to not be generalizable to other dependences. The aim is to carry out a process of adaptation of the General Addiction Scale (EAG) (Ramos, Sansebastian & Madoz, 2001), to assess exercise dependence. This test presents a self-administered one-dimensional character capable of measuring the degree of addiction of a subject to all kinds of new addictions, excluding illicit substances of abuse. The scale, after adjustment, was renamed as Training Addiction Scale (EAE). 401 athletes took part of which 82.29% are men and the whole sample indicated an age with  $M = 45.78$  and  $SD = 10.25$  years. The confirmatory factor analysis has allowed discriminating a general factor and four subscales, with Cronbach's alpha for each of the sub-scales: Tolerance ( $= .78$ ), pleasure-relaxation ( $= .77$ ), Lack of Control ( $= .77$ ) and Abstinence-craving ( $= .71$ ). The indexes of asymmetry and curtosis have been near zero and  $< 2.0$ . The items showed no overlap between the subscales. The model presented correct values for determining an acceptable goodness of fit of the original model and the results were:  $2/df = 2.93$ ,  $IFI = .96$ ,  $CFI = .96$ ,  $TLI = .93$ ,  $SRMR = .039$ ,  $RMSEA = .049$ . (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** \*Addiction  
 \*Athletic Training  
 \*Psychometrics  
 \*Test Reliability  
 \*Test Validity  
 Rating Scales

**Source:** PsycINFO

### 82. The drug scene in Mexico and the road ahead.

**Original Title:** El mundo de las Drogas en Mexico y el camino per recorrer.

**Citation:** Adicciones, 2013, vol./is. 25/4(294-299), 0214-4840 (2013)

**Author(s):** Medina-Mora, Maria Elena; Real, Tania

**Correspondence Address:** Medina-Mora, Maria Elena: National Institute of Psychiatry Ramon de la Fuente Muniz, Mexico. Calzada Mexico Xochimilco 101, Mexico, Mexico, DF 14370, medinam@imp.edu.mx

**Institution:** National Institute of Psychiatry Ramon de la Fuente Muniz, Mexico, Mexico; National Institute of Psychiatry Ramon de la Fuente Muniz,, Mexico, Mexico

**Language:** Spanish

**Abstract:** Mexico is a country affected by drugs in every aspect: it is a drug producing country of heroin, marihuana and methamphetamines, mainly for external markets but also for the

growing internal demand; it is a transit country for cocaine that has found its way through the Central American and Mexican corridor on its way to external markets and for the internal supply. As a result of the increasing availability of substances and a favorable social environment, it has become a consuming country; drug experimentation use and dependence of illegal drugs, although still low, have increased. The abuse/dependence of legal substances such as alcohol and tobacco are the main substance abuse problems; only the abuse of pharmaceuticals remains low and relatively stable, mainly as a result of low availability for medical purposes and therefore limited scope for deviation. Social costs are considerable, as happens in other countries in the region, violence being the most prevailing characteristic of the drug scene, increasing from 2008 onwards. Within these important challenges for health and security, it is also true that significant, continuous efforts have been made by demand reduction programs at the national level since 1972 and adapted to the changing circumstances. This editorial seeks to tell the story of drug transitions in Mexico and the programs that have been implemented and discusses areas of opportunity for a new approach. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Illegal Drug Distribution](#)  
[\\*Social Environments](#)  
[Heroin](#)  
[Marijuana](#)  
[Methamphetamine](#)

**Source:** PsycINFO

### 83. Drinking patterns and associated problems in Brazil.

**Original Title:** Patrones de consumo de alcohol y problemas asociados en Brasil.

**Citation:** Adicciones, 2013, vol./is. 25/4(287-293), 0214-4840 (2013)

**Author(s):** Caetano, Raul; Madruga, Clarice; Pinsky, Ilana; Laranjeira, Ronaldo

**Correspondence Address:** Caetano, Raul, 6011 Harry Hines Blvd. Room V8.112, Dallas, TX, US, 75390-9128, Raul.Caetano@UTSouthwestern.edu

**Institution:** University of Texas School of Public Health, Dallas, TX, US; Alcohol and Drugs Research Unit, Unidade de Pesquisa em Alcool e Outras Drogas (UNIAD), Department of Psychiatry, Universidade Federal de Sao Paulo (UNIFESP), Sao Paulo, Brazil; Alcohol and Drugs Research Unit, Unidade de Pesquisa em Alcool e Outras Drogas (UNIAD), Department of Psychiatry, Universidade Federal de Sao Paulo (UNIFESP), Sao Paulo, Brazil; Alcohol and Drugs Research Unit, Unidade de Pesquisa em Alcool e Outras Drogas (UNIAD), Department of Psychiatry, Universidade Federal de Sao Paulo (UNIFESP), Sao Paulo, Brazil

**Language:** Spanish

**Abstract:** This paper describes patterns of alcohol consumption and associated problems in Brazil. Data came from a multicluster random sample of 2,346 Brazilians 18 years of age and older. The survey was conducted in 2005-2006 and had a response rate of 66.4%. About 35% of the men and 59% of the women did not drink in the past 12 months, while 39% of the men and 13% of the women consumed alcohol at least once a week. Further, 38% of the men and 17% of the women consumed 5 or more drinks "usually", and 40% of the men and 18% of the women reported binge drinking in the past 12 months. The prevalence of alcohol use disorders (DSM-4 abuse and/or dependence) was 19% among men and 4% among women. Although abstinence in Brazil is relatively high, binge drinking is frequent and, thus, alcohol problems and alcohol use disorders are also frequent. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcohol Drinking Patterns](#)  
[\\*Alcoholism](#)

\*Binge Drinking  
\*Epidemiology

Source: PsycINFO

#### 84. The end of INCANT: The transition phase from research to clinical work.

**Original Title:** La fin d'INCANT: La transition de la recherche a la pratique clinique.

**Citation:** Therapie Familiale: Revue Internationale en Approche Systemique, 2013, vol./is. 34/4(529-541), 0250-4952 (2013)

**Author(s):** Har, Alexandre; Bonnaire, Celine

**Correspondence Address:** Har, Alexandre: Centre Pierre Nicole, 27, rue Pierre Nicole, Paris, France, 75005, har.alexandre@gmail.com

**Institution:** Centre Emergence, Institut mutualiste Montsouris, Paris, France; Centre Pierre Nicole, Paris, France

**Language:** French

**Abstract:** The International Cannabis Need of Treatment (INCANT) project had an exceptional status in the family therapy research domain in France. The purpose of this randomized controlled trial was to compare a new family-based treatment (Multidimensional Family Therapy (MDFT)) to the treatment as usual in the reduction of cannabis abuse among adolescent. In this article, we explore the transition phase in between the end of the study and the implementation of MDFT in daily institutional and clinical work. What were the challenges encountered in the training of the first and second generation MDFT therapists? What are the practical and clinical questions a supervised trainee must deal with in the supervisee relationship when learning a evidence based family therapy? (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** \*Family Therapy  
\*Personnel Training  
\*Therapists  
Cannabis  
Clinical Practice  
Drug Abuse

Source: PsycINFO

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

#### 85. Family factors in internet addiction among Chinese youth: A review of English- and Chinese-language studies.

**Citation:** Computers in Human Behavior, February 2014, vol./is. 31/(393-411), 0747-5632 (Feb 2014)

**Author(s):** Li, Wen; Garland, Eric L; Howard, Matthew O

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**Institution:** School of Social Work, University of North Carolina, Chapel Hill, NC, US; College of Social Work, University of Utah, Salt Lake City, UT, US; School of Social Work, University of North Carolina, Chapel Hill, NC, US

**Language:** English

**Abstract:** Approximately 513 million Chinese citizens used the Internet in 2011, with adolescents reporting comparatively high levels of use. Although numerous studies (reviewed herein) indicate that Internet Addiction/Pathological Internet Use (IA/PIU) is endemic among Chinese youth and trending upward, no prior review has examined family correlates of IA/PIU in Chinese youth. Thus, our principal aim was to evaluate methodological features and substantive findings of all studies examining family correlates of IA/PIU in

Chinese youth. Internet, demographic, psychosocial, and psychiatric/behavioral correlates of IA/PIU, and prevalence estimates for adolescent IA/PIU, were also examined using the large set of studies evaluated in association with our principal aim. Comprehensive bibliographic searches identified 42 pertinent investigations. Youth with IA/PIU reported greater global dissatisfaction with their families; less organized, cohesive and adaptable families; greater inter-parental and parent-child conflict; and perceived their parents as more punitive, and less supportive, warm, and involved compared to non-IA youth. IA/PIU youth were significantly more likely to have divorced parents, live with a single parent, and be an only child than non-IA/PIU youth. IA/PIU is prevalent among Chinese youth and associated with diverse family, psychosocial and psychiatric/behavioral impairments, but rarely is the focus of prevention and treatment interventions. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Elsevier Ltd.; YEAR: 2013  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Chinese Cultural Groups](#)  
[\\*Family](#)  
[\\*Internet Addiction](#)  
[Parent Child Communication](#)  
**Source:** PsycINFO

#### 86. A conceptual and methodological critique of internet addiction research: Towards a model of compensatory internet use.

**Citation:** Computers in Human Behavior, February 2014, vol./is. 31/(351-354), 0747-5632 (Feb 2014)  
**Author(s):** Kardefelt-Winther, Daniel  
**Correspondence Address:** Kardefelt-Winther, Daniel: Department of Media & Communications, London School of Economics and Political Science, London, United Kingdom, WC2A 2AE, d.a.kardefelt-winther@lse.ac.uk  
**Institution:** Department of Media & Communications, London School of Economics and Political Science, London, United Kingdom  
**Language:** English  
**Abstract:** Internet addiction is a rapidly growing field of research, receiving attention from researchers, journalists and policy makers. Despite much empirical data being collected and analyzed clear results and conclusions are surprisingly absent. This paper argues that conceptual issues and methodological shortcomings surrounding internet addiction research have made theoretical development difficult. An alternative model termed compensatory internet use is presented in an attempt to properly theorize the frequent assumption that people go online to escape real life issues or alleviate dysphoric moods and that this sometimes leads to negative outcomes. An empirical approach to studying compensatory internet use is suggested by combining the psychological literature on internet addiction with research on motivations for internet use. The theoretical argument is that by understanding how motivations mediate the relationship between psychosocial well-being and internet addiction, we can draw conclusions about how online activities may compensate for psychosocial problems. This could help explain why some people keep spending so much time online despite experiencing negative outcomes. There is also a methodological argument suggesting that in order to accomplish this, research needs to move away from a focus on direct effects models and consider mediation and interaction effects between psychosocial well-being and motivations in the context of internet addiction. This is key to further exploring the notion of internet use as a coping strategy; a proposition often mentioned but rarely investigated. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)  
**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Elsevier Ltd.; YEAR: 2013  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Internet Addiction](#)

Emotional States  
Major Depression  
Policy Making  
Psychosocial Factors  
Well Being

**Source:** PsycINFO

### 87. Problematic online experiences among Spanish college students: Associations with Internet use characteristics and clinical symptoms.

**Citation:** Computers in Human Behavior, February 2014, vol./is. 31/(151-158), 0747-5632 (Feb 2014)

**Author(s):** Gonzalez, Eva; Orgaz, Begona

**Correspondence Address:** Gonzalez, Eva: Faculty of Psychology, University of Salamanca, Avda. de la Merced, 109-131, Salamanca, Spain, 37005, evagonz@usal.es

**Institution:** Faculty of Psychology, University of Salamanca, Salamanca, Spain; Faculty of Psychology, University of Salamanca, Salamanca, Spain

**Language:** English

**Abstract:** Internet access is almost universal among Spanish young people, and university students appear particularly vulnerable to developing problematic use patterns. This study examined the prevalence of a broad range of problematic online experiences in this population, and their associations with diverse Internet use characteristics and clinical symptoms. A sample of 493 students completed an online survey including the Index of Problematic Online Experiences (I-POE) by Mitchell, Sabina, Finkelhor, and Wells (2009), five subscales of the Trauma Symptom Inventory, and questions regarding Internet use characteristics. One in ten participants met criteria for problematic online use. Boys showed higher levels of problems in most I-POE domains. Spending more hours a day online predicted more problems related to overuse, daily obligations, and interactions with people online, whereas using dating websites predicted more problems with online behavior (e.g. identity deception). Higher concerns about own Internet use predicted higher levels of most clinical symptoms. In conclusion, although a minority of students may be considered problematic Internet users, this should be cause for concern and encourage preventative measures. Consistently with the cognitive-behavioral model (Davis, 2001) maladaptive cognitions seem to play a relevant role in the understanding of problematic Internet use. Besides, this study supports the utility of the I-POE as a quick assessment tool to identify problematic online experiences. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Internet Addiction](#)  
[\\*Symptoms](#)  
[\\*Internet Usage](#)  
[College Students](#)

**Source:** PsycINFO

### 88. Problematizing excessive online gaming and its psychological predictors.

**Citation:** Computers in Human Behavior, February 2014, vol./is. 31/(118-122), 0747-5632 (Feb 2014)

**Author(s):** Kardefelt-Winther, Daniel

**Correspondence Address:** Kardefelt-Winther, Daniel: Department of Media & Communications, London School of Economics and Political Science, London, United Kingdom, WC2A 2AE, d.a.kardefelt-winther@lse.ac.uk

**Institution:** Department of Media & Communications, London School of Economics and Political Science, London, United Kingdom

**Language:** English

**Abstract:** This study problematizes the common methodology in studies on excessive internet use where psychological characteristics are sought as unique predictors of negative outcomes. It suggests that some predictors may be significant only by virtue of being examined in isolation. In an attempt to add to this methodology the present study explored motivations for a particular online activity, MMO gaming, and the association with excessive use. The study used survey data from players of World of Warcraft (WoW), a popular MMO game. The psychological characteristics investigated were based on previous studies of excessive internet use and included social anxiety, loneliness and stress. The motivations were achievement, escapism and social interaction. The results revealed that although loneliness and social anxiety were correlated with excessive use, they lost significance when stress was controlled for. Furthermore, all psychological predictors lost significance when escapism and achievement were controlled for. These results suggest that psychological characteristics only have an indirect effect on negative outcomes and that this relationship can be better explained by motivations acting as a mediating variable. Based on these results an alternative conceptualization was offered, termed compensatory internet use, emphasizing that excessive use may be more usefully framed and investigated as a coping strategy rather than compulsive behaviour. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Behavior Problems](#)  
[\\*Computer Games](#)  
[\\*Internet Addiction](#)  
[\\*Internet Usage](#)  
[Coping Behavior](#)  
[Psychological Assessment](#)

**Source:** PsycINFO

### 89. Prevalence and determinants of Internet addiction among adolescents.

**Citation:** Computers in Human Behavior, February 2014, vol./is. 31/(100-110), 0747-5632 (Feb 2014)

**Author(s):** Adiele, Ikenna; Olatokun, Wole

**Correspondence Address:** Olatokun, Wole: Africa Regional Centre for Information Science, University of Ibadan, Ibadan, Nigeria, woleabbeyolatokun@yahoo.co.uk

**Institution:** Africa Regional Centre for Information Science, University of Ibadan, Ibadan, Nigeria; Africa Regional Centre for Information Science, University of Ibadan, Ibadan, Nigeria

**Language:** English

**Abstract:** Background: Globally, it is agreed that the internet can serve as a tool that enhances well-being but there is no consensus regarding what constitutes problematic internet use and internet use relationship with offline behavioural addictions. This study was conducted to investigate the prevalence of Internet addiction (IA) among adolescents and to determine whether it is a distinct disorder from offline behavioural addictions. Methods: Using survey design, a total of 1022 University adolescents comprising undergraduates and postgraduates were selected using stratified random sampling. Data were collected using the Revised Internet Addiction Test (RIAT), a questionnaire made up of EPQR-S Lie Scale, Internet Addiction Test (IAT), Internet Use Reasons, Hypersexual Behaviour Inventory and Problem Video Game Playing Scale. Results: There was prevalence of IA among the adolescents; the prevalence rate was 3.3%, in a male to female ratio of approximately 3:1. Adolescents' online addiction was mainly influenced by extrinsic reasons for internet use, although there were few whose reasons for going online were mainly intrinsic. Using the internet to communicate on important matters, getting sex-oriented materials, and making money (especially amongst females) seemed to dominate addicts' minds; thus, majority were 'addicts on the internet' and not 'addicts to the internet'. Conclusions: Offline behavioural addictions was not an IA causal factor but

rather a motivating factor, while intrinsic reasons for internet use was not found to be a reliable factor for distinguishing addicts from non-addicts. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Epidemiology](#)  
[\\*Internet Addiction](#)  
[Adolescent Psychopathology](#)  
[Behavior Problems](#)  
[Causality](#)  
[Motivation](#)

**Source:** PsycINFO

#### 90. Substance use among gang member adolescents and young adults and associations with friends and family substance use.

**Citation:** Journal of Child and Adolescent Psychiatric Nursing, February 2014, vol./is. 27/1(35-42), 1073-6077;1744-6171 (Feb 2014)

**Author(s):** Hoffman, Beth R; Weathers, Nnenna; Sanders, Bill

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**Institution:** Department of Public Health, California State University, Los Angeles, CA, US; Department of Nursing, California State University, Los Angeles, CA, US; Department of Criminal Justice and Criminalistics, California State University, Los Angeles, CA, US

**Language:** English

**Abstract:** Problem: Gang membership is an indicator of chronic substance use. Social network studies indicate that substance use in youth is related to substance use in friends and family; however, no such analyses among gang youth have been conducted. Methods: Interviews were conducted with a sample of young gang members (n = 60) in Los Angeles. Univariate analyses were conducted. Findings: Cigarette use in gang members was strongly associated with cigarette use in friendship networks. There were no associations for use of alcohol and marijuana. Conclusions: Few associations emerged between substance use in participants and their friends/family. Possible explanations for these findings are presented. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Wiley Periodicals, Inc.; YEAR: 2013

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

**Subject Headings:** [\\*Drug Usage](#)  
[\\*Gangs](#)  
[Family Members](#)  
[Friendship](#)  
[Social Networks](#)

**Source:** PsycINFO

**Full Text:** Available from *Wiley* in *Journal of Child and Adolescent Psychiatric Nursing*

#### 91. Cannabis use among high-risk youth in Israel (2004-2011): An examination of gender and country of origin status.

**Citation:** Journal of Child and Adolescent Psychiatric Nursing, February 2014, vol./is. 27/1(14-19), 1073-6077;1744-6171 (Feb 2014)

**Author(s):** Isralowitz, Richard; Reznik, Alexander

**Correspondence Address:** Isralowitz, Richard, richard@bgu.ac.il

**Institution:** Regional Alcohol and Drug Abuse Resources Center, Ben Gurion University, Beer Sheva, Israel; Regional Alcohol and Drug Abuse Resources Center, Ben Gurion University, Beer Sheva, Israel

**Language:** English

**Abstract:** Problem: Scant knowledge exists about high-risk adolescents who are school dropouts in treatment for substance abuse. Purpose: This study aims to examine the patterns of cannabis (i.e., marijuana and hashish) use among school dropouts receiving substance abuse treatment based on their gender and country of origin status (i.e., Israeli and former Soviet Union-FSU). Methods: A total of 628 dropouts referred to a residential substance abuse treatment facility in Israel from 2004 to 2011 were studied. Chi-square and t test analyses were used to determine the impact of gender and country of origin status on cannabis use. Findings: Significant differences exist for age of first, lifetime, and last 30-day cannabis use. FSU youths begin cannabis at an earlier age. Cannabis use tends to be higher among males and those with Israeli country of origin status. Furthermore, cannabis use among dropouts is much higher than those attending school. Conclusions: Gender and country of origin status have implications that should be of concern to healthcare professionals treating adolescent substance abuse. Further research is needed to validate the study findings both in Israel and other countries for policy, training, and treatment purposes. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Wiley Periodicals, Inc.; YEAR: 2013

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

**Subject Headings:** [\\*Cannabis](#)  
[\\*Drug Usage](#)  
[\\*Human Sex Differences](#)  
[\\*School Dropouts](#)  
[\\*Treatment](#)  
[At Risk Populations](#)  
[Countries](#)

**Source:** PsycINFO

**Full Text:** Available from *Wiley* in *Journal of Child and Adolescent Psychiatric Nursing*

## 92. Crime in the absence of meaning in life.

**Citation:** International Forum for Logotherapy, 2013, vol./is. 36/2(72-76), 0191-3379 (Aut, 2013)

**Author(s):** Addad, Moshe; Himi, Hana

**Correspondence Address:** Himi, Hana, hanahimi@zahav.net.il

**Institution:** Faculty of Law in Peres Academic Center, Israel

**Language:** English

**Abstract:** The purpose of this article is to support the position that the development of criminal behavior patterns is rooted, among other things, in lack of meaning in life. In other words, individuals who are unable to develop meaning in life, which could serve as the foundation for an existence that includes positive goals based on values and future orientation, are prone to undesirable behavior, such as joining cults that erase their sense of self, addiction to drugs, gambling, and/or hedonism, accompanied by violence and crime. Sometimes criminals feel that they lack a system of emotional and instrumental support, this can lead to a negative inner feeling. In other words, there is no meaning of normative content accepted by normative society as positive that enables an experience of presence and vitality without criminal activity. The negative, criminal behavior is a form of survival. This experience can be described in Jung's terms as "the absence of meaning in life that fulfills the main role in the etiology of neurosis. The neurosis can be understood as suffering of the soul that has not found meaning. About one third of the patients do not suffer any neurosis that can be clinically defined but rather a lack of purpose and lack of a goal in their life. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

**Subject Headings:** [\\*Crime](#)

\*Criminal Behavior  
\*Meaning

**Source:** PsycINFO

### 93. Trends in sexual therapy.

**Original Title:** Trends in der sexualtherapie.

**Citation:** Familiendynamik, 2014, vol./is. 39/1(4-11), 0342-2747 (2014)

**Author(s):** Clement, Ulrich

**Correspondence Address:** Clement, Ulrich, Gaisbergstr. 3, Heidelberg, Germany, 69115, office@ulclement.de

**Institution:** Universitat Heidelberg, Heidelberg, Germany

**Language:** German

**Abstract:** The main arguments militating against the idea that sexual therapy is not a psychotherapeutic domain in its own right are practical in nature. In its aims and conceptual notions, sexual therapy is greatly affected by the Zeitgeist. The author substantiates this view with reference to sexual desire problems, sexual addiction and pharmaco-therapeutic approaches. Finally he enlarges on the triviality of conventional sexual therapy objectives and discusses three possible answers. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** \*Psychotherapy  
\*Sex Therapy  
\*Sexual Addiction  
\*Sexual Function Disturbances

**Source:** PsycINFO

### 94. Alcohol consumption and cognitive impairment among Korean older adults: Does gender matter?

**Citation:** International Psychogeriatrics, February 2014, vol./is. 26/2(335-340), 1041-6102;1741-203X (Feb 2014)

**Author(s):** Lyu, Jiyoung; Lee, Seungah Hannah

**Correspondence Address:** Lyu, Jiyoung: Department of Gerontology, McCormack Graduate School of Policy and Global Studies, University of Massachusetts Boston, 100 Morrissey Boulevard, Boston, MA, US, 02125, Jiyoung.Lyu001@umb.edu

**Institution:** Department of Gerontology, University of Massachusetts Boston, Boston, MA, US; Department of Gerontology, University of Massachusetts Boston, Boston, MA, US

**Language:** English

**Abstract:** Background: This study investigated gender differences in the relationship between alcohol consumption and cognitive impairment among older adults in South Korea. Methods: Using data from the Korean Longitudinal Study of Ageing, 2,471 females and 1,657 males were analyzed separately. Cognitive impairment was measured based on the Korean version of the Mini-Mental State Exam score. Logistic regression was conducted to examine the relationship between alcohol consumption and cognitive impairment among Korean older adults. Results: Multivariate analysis showed that compared to moderate drinkers, past drinkers were more likely to be cognitively impaired for women, while heavy drinkers were more likely to be cognitively impaired for men. Conclusions: Findings suggest that the relationship between alcohol consumption and cognition varies with gender. Clinicians and service providers should consider gender differences when developing strategies for the prevention and treatment of alcohol-related cognitive decline among older adults. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: International Psychogeriatric Association; YEAR: 2013

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

**Subject Headings:** [\\*Aging](#)  
[\\*Alcoholism](#)  
[\\*Cognitive Impairment](#)  
[\\*Human Sex Differences](#)

**Source:** PsycINFO

**95. Assessing alcohol versus baclofen withdrawal syndrome in patients treated with baclofen for alcohol use disorder.**

**Citation:** Journal of Clinical Psychopharmacology, February 2014, vol./is. 34/1(153-156), 0271-0749;1533-712X (Feb 2014)

**Author(s):** Rolland, Benjamin; Jaillette, Emmanuelle; Carton, Louise; Bence, Camille; Deheul, Sylvie; Saulnier, Fabienne; Bordet, Regis; Cottencin, Olivier

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**Institution:** Univ Lille Nord de France, Lille, France; Department of Pharmacology and Pharmacovigilance, Lille, France; Univ Lille Nord de France, Lille, France; Univ Lille Nord de France, Lille, France; Univ Lille Nord de France, Lille, France

**Language:** English

**Abstract:** Baclofen is a -aminobutyric acid B (GABA-B) receptor agonist that is approved for spasticity. Recently, the off-label use of baclofen for alcohol use disorder (AUD) has increased. However, baclofen is known to induce a neuroadaptation process, which may be identified by the occurrence of a specific baclofen withdrawal syndrome (BWS), that is, confusion, agitation, seizures, and delirium. The same set of symptoms characterizes alcohol withdrawal syndrome (AWS), which could lead to mistaking BWS for AWS in some situations. We report the cases of 3 patients under a chronic baclofen treatment for AUD. The patients emergently presented with a clinical state of confusion that was initially diagnosed and treated as AWS, with limited effect of benzodiazepines. Retrospectively, using a validated algorithm for assessing drug-induced withdrawal, we determined that all of these clinical cases were consistent with BWS. Both AWS and BWS should be considered in the case of acute confusion or delirium occurring in patients treated with baclofen for AUD. Moreover, further research should investigate to what extent GABA-A and GABA-B induce shared or distinct neuroadaptation processes and withdrawal syndromes. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Lippincott Williams & Wilkins; YEAR: 2014

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

**Subject Headings:** [\\*Alcohol Withdrawal](#)  
[\\*Alcoholism](#)  
[\\*Baclofen](#)  
[\\*Drug Therapy](#)  
[\\*Syndromes](#)  
[Alcohol Abuse](#)  
[Treatment Outcomes](#)

**Source:** PsycINFO

**Full Text:** Available from *Ovid* in *Journal of Clinical Psychopharmacology*

**96. The opiate antagonist, naltrexone, in the treatment of trichotillomania: Results of a double-blind, placebo-controlled study.**

**Citation:** Journal of Clinical Psychopharmacology, February 2014, vol./is. 34/1(134-138), 0271-0749;1533-712X (Feb 2014)

**Author(s):** Grant, Jon E; Odlag, Brian L; Schreiber, Liana R .N; Kim, Suck Won

**Correspondence Address:** Grant, Jon E.: Department of Psychiatry and Behavioral Neuroscience, University of Chicago, 5841 South Maryland Ave, MC 3077, Chicago, IL, US, 60637, jongrant@uchicago.edu

**Institution:** Department of Psychiatry and Behavioral Neuroscience, University of Chicago, Chicago, IL, US; Department of Psychiatry and Behavioral Neuroscience, University of Chicago, Chicago, IL, US; Department of Psychiatry, University of Minnesota Medical School, Minneapolis, MN, US; Department of Psychiatry, University of Minnesota, Medical School, Minneapolis, MN, US

**Language:** English

**Abstract:** Trichotillomania (TTM) is characterized by repetitive hair pulling resulting in hair loss. Data on the pharmacological treatment of TTM are limited. This study examined the opioid antagonist, naltrexone, in adults with TTM who had urges to pull their hair. Fifty-one individuals with TTM were randomized to naltrexone or placebo in an 8-week, double-blind trial. Subjects were assessed with measures of TTM severity and selected cognitive tasks. Naltrexone failed to demonstrate significantly greater reductions in hair pulling compared to placebo. Cognitive flexibility, however, significantly improved with naltrexone ( $P = 0.026$ ). Subjects taking naltrexone with a family history of addiction showed a greater numerical reduction in the urges to pull, although it was not statistically significant. Future studies will have to examine whether pharmacological modulation of the opiate system may provide promise in controlling pulling behavior in a subgroup of individuals with TTM. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Lippincott Williams & Wilkins; YEAR: 2014

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

**Subject Headings:** [\\*Drug Therapy](#)  
[\\*Naltrexone](#)  
[\\*Trichotillomania](#)  
[Opiates](#)  
[Treatment Outcomes](#)  
[Family History](#)

**Source:** PsycINFO

**Full Text:** Available from *Ovid* in *Journal of Clinical Psychopharmacology*

### **97. Promoting cancer prevention and control in community-based HIV/AIDS service organizations: Are they ready?**

**Citation:** AIDS Education and Prevention, February 2014, vol./is. 26/1(43-55), 0899-9546 (Feb 2014)

**Author(s):** Guidry, John A; Lubetkin, Erica; Corner, Geoffrey; Lord-Bessen, Jennifer; Kornegay, Mark; Burkhalter, Jack E

**Correspondence Address:** Guidry, John A., 446 West 33rd St., New York, NY, US, 10001, jguidry.7@gmail.com

**Institution:** Gay Men's Health Crisis, NY, US; Sophie Davis School of Biomedical Education, City College of New York, New York, NY, US; Department of Psychiatry & Behavioral Sciences, Memorial Sloan-Kettering Cancer Center, NY, US; Department of Psychiatry & Behavioral Sciences, Memorial Sloan-Kettering Cancer Center, NY, US; Gay Men's Health Crisis, NY, US; Department of Psychiatry & Behavioral Sciences, Memorial Sloan-Kettering Cancer Center, NY, US

**Language:** English

**Abstract:** Community-based organizations (CBOs) serving persons living with HIV or AIDS face the challenge of an aging population with more chronic diseases. This study assessed cancer programming needs of AIDS service organizations (ASOs) in New York, New Jersey, and Connecticut by conducting a community needs assessment. Sixty (58%) of 103 organizations completed the survey. ASOs conduct activities most related to early steps along the cancer care continuum, but they also express great interest in expanding cancer-focused programming into new areas. ASOs have resources or capacities in

assisting HIV+ clients with mental health or substance abuse problems, but there exists a need for funding in undertaking or expanding cancer-focused programs. ASOs are receptive to collaborating with researchers on disseminating cancer prevention and control knowledge in their settings. Community-academic research partnerships enable resonant training and technical assistance methods to be explored that will enhance the abilities of ASOs to bring cancer-related programming to their clients. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Guilford Press; YEAR: 2014

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

**Subject Headings:** [\\*AIDS Prevention](#)  
[\\*Community Services](#)  
[\\*HIV](#)  
[\\*Neoplasms](#)  
[Drug Abuse](#)

**Source:** PsycINFO

**Full Text:** Available from *EBSCOhost* in [AIDS Education & Prevention](#)  
Available from *EBSCOhost* in [AIDS Education & Prevention](#)

#### 98. Abuse and smoking cessation in clinical practice.

**Citation:** Journal of Clinical Nursing, February 2014, vol./is. 23/3-4(361-366), 0962-1067;1365-2702 (Feb 2014)

**Author(s):** Smith, Patricia M; Spadoni, Michelle M; Proper, Veronica M

**Correspondence Address:** Smith, Patricia M.: Northern Ontario School of Medicine, 955 Oliver Road, Thunder Bay, ON, Canada, P7B 5E1, psmith@nosm.ca

**Institution:** Northern Ontario School of Medicine, Thunder Bay, ON, Canada; Lakehead University School of Nursing, Thunder Bay, ON, Canada; Northern Ontario School of Medicine, Thunder Bay, ON, Canada

**Language:** English

**Abstract:** Aims and objectives: This discursive paper explores issues of abuse during smoking cessation counselling. Background: During a training session for a smoking cessation intervention pilot study, nurses expressed concerns about issues of abuse that had previously surfaced during cessation counselling in their practice. Abused women are more likely to smoke. As guidelines recommend integrating cessation interventions into practice, issues of abuse are likely to surface. Methods: A literature review and synthesis of abuse and smoking cessation was undertaken to arrive at recommendations for practice. Results: There are a few suggestions about how to manage abuse within cessation counselling, but none have been studied: (1) integrate stress-management strategies, (2) assess for abuse, (3) provide separate interventions for partners to create a safe environment, and (4) develop interventions that consider the relationship couples have with tobacco. However, coping strategies alone do not address abuse, screening without treatment is not helpful, and partner interventions assume both partners are open to quitting/counselling. In contrast, as with all clinical practice, abuse and cessation would be considered separate but intertwined problems, and following best practice guidelines for abuse would provide the guidance on how to proceed. After care has been taken to address abuse, it is the patient's decision whether to continue with cessation counselling. Conclusion: Guidelines addresses both care planning and the ethical/legal issues associated with the disclosure of abuse and provide a practical tool for addressing abuse that obviates the need to tailor cessation interventions to abuse. Relevance to clinical practice: This paper clarifies a relationship between smoking and abuse and the subsequent implications for smoking cessation interventions and highlights the importance of addressing abuse and smoking cessation separately, even though they are interrelated problems. It provides nurses with appropriate initial responses when abuse is disclosed during an unexpected encounter such as during a smoking cessation intervention. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Blackwell Publishing Ltd.; YEAR: 2012  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Clinical Practice](#)  
[\\*Drug Abuse](#)  
[\\*Intervention](#)  
[\\*Smoking Cessation](#)  
**Source:** PsycINFO  
**Full Text:** Available from *Wiley* in *Journal of Clinical Nursing*

### 99. Profile of male forensic psychiatric inpatients in South India.

**Citation:** International Journal of Social Psychiatry, February 2014, vol./is. 60/1(55-62), 0020-7640;1741-2854 (Feb 2014)

**Author(s):** Kumar, Dayachandra; Viswanath, Biju; Sebastian, Ami; Holla, Bharath; Konduru, Reddema; Chandrashekar, Chanapatna Rajannachar; Math, Suresh Bada

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**Language:** English

**Abstract:** Aim: The study explored the socio-demographic, clinical and legal profile of forensic psychiatric inpatients in an attempt to improve the existing mental health services for prisoners within the prison and in psychiatric hospitals. Methodology: A chart review of 135 forensic psychiatric inpatients admitted between January 2005 and December 2009 was done. A structured data-extraction tool was used for data collection and a descriptive approach for analyses. Results: Subjects were referred either directly from prison (62.2%) or from court (37.8%) for diagnosis, treatment or certification. References to the Mental Health Act 1987, charges and inclusion of first investigation report and behavioural observation report was lacking in most. The majority of prisoners (85.7%) were under trial, murder being the most common charge. Psychiatric diagnosis was made in 90.3%, the most common being psychosis. Substance use (nicotine, alcohol, cannabis) and high-risk behaviours were also common. Conclusion: There is a need to streamline the procedure of referral and to sensitize the referral authorities about the Mental Health Act and mental illnesses, and the need to enclose first investigation reports and behavioural observation reports. De-addiction services and facilities need to be established within prison premises so that the inmates get the benefit of treatment at the earliest opportunity. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Author(s); YEAR: 2012  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Forensic Psychiatry](#)  
[\\*Hospitalized Patients](#)  
[\\*Legal Processes](#)  
[\\*Prisoners](#)  
[\\*Psychiatric Patients](#)  
[Mental Health Services](#)  
**Source:** PsycINFO

**100. Adverse childhood experiences among women prisoners: Relationships to suicide attempts and drug abuse.**

**Citation:** International Journal of Social Psychiatry, February 2014, vol./is. 60/1(40-46), 0020-7640;1741-2854 (Feb 2014)

**Author(s):** Friestad, Christine; Ase-Bente, Rustad; Kjelsberg, Ellen

**Correspondence Address:** Friestad, Christine: Centre for Research and Education in Forensic Psychiatry, Oslo University Hospital, University of Oslo, PO Box 4956 Nydalen, Oslo, Norway, N-0424, christine.friestad@kompetanse-senteret.no

**Institution:** Oslo University Hospital, University of Oslo, Oslo, Norway; Oslo University Hospital, Oslo, Norway; Oslo University Hospital, Oslo, Norway

**Language:** English

**Abstract:** Background: Women prisoners are known to suffer from an accumulation of factors known to increase the risk for several major health problems. This study examines the prevalence of adverse childhood experiences (ACE) and the relationship between such experiences and suicide attempts and drug use among incarcerated women in Norway. Methods: A total of 141 women inmates (75% of all eligible) were interviewed using a structured interview guide covering information on demographics and a range of ACE related to abuse and neglect, and household dysfunction. The main outcome variables were attempted suicide and adult drug abuse. Results: Emotional, physical and sexual abuse during childhood was experienced by 39%, 36% and 19%, respectively, and emotional and physical neglect by 31% and 33%, respectively. Looking at the full range of ACE, 17% reported having experienced none, while 34% reported having experienced more than five ACEs. After controlling for age, immigrant background and marital status, the number of ACEs significantly increased the risk of attempted suicide and current drug abuse. Conclusion: The associations observed between early life trauma and later health risk behaviour indicate the need for early prevention. The findings also emphasize the important role of prison health services in secondary prevention among women inmates. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Author(s); YEAR: 2012

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

**Subject Headings:** [\\*Attempted Suicide](#)  
[\\*Drug Abuse](#)  
[\\*Experiences \(Events\)](#)  
[\\*Prisoners](#)  
[Human Females](#)

**Source:** PsycINFO

**101. Latino and European American early adolescents' exposure to music with substance-use references: Examining parent-child communication as a moderator.**

**Citation:** Journal of Adolescence, February 2014, vol./is. 37/2(185-196), 0140-1971 (Feb 2014)

**Author(s):** Kam, Jennifer A; Wang, Ningxin; Harvey, Jessica

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**Institution:** Department of Communication, University of Illinois at Urbana-Champaign, Urbana, IL, US; Department of Communication, University of Illinois at Urbana-Champaign, Urbana, IL, US; Department of Communication, Saint Vincent College, PA, US

**Language:** English

**Abstract:** This study hypothesized that frequent exposure to and attention to music with substance-use references would be indirectly related to alcohol, cigarette, or marijuana use through pro-substance-use beliefs (e.g., norms, outcome expectancies, and refusal efficacy). Parent-child communication, however, would attenuate such associations, which would differ by ethnicity. Multigroup mediation and moderation analyses were conducted, using cross-sectional survey data from 253 Latino and 308 European American 6th-8th grades students. For Latino and European American early adolescents,

best-friend-injunctive norms and weak refusal efficacy were significant mediators, but not positive outcome expectancies. Descriptive norms were a significant mediator, but only for European American early adolescents. Although targeted parent-child communication and parental mediation did not moderate the associations between the music-exposure variables and the pro-substance-use beliefs variables, targeted parent-child communication attenuated the association between listening to favorite songs and alcohol consumption. Parental mediation attenuated the association between attention to music and alcohol consumption. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: Published by Elsevier Ltd. All rights reserved.; HOLDER: The Foundation for Professionals in Services for Adolescents; YEAR: 2014

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

**Subject Headings:** [\\*Adolescent Development](#)  
[\\*Drug Usage](#)  
[\\*Music](#)  
[\\*Parent Child Communication](#)  
[\\*Social Cognition](#)  
[Whites](#)  
[Reasoned Action](#)  
["Latinos/Latinas"](#)  
[Exposure](#)

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in [Journal of Adolescence](#)

#### 102. Substance use predictors of victimization profiles among homeless youth: A latent class analysis.

**Citation:** Journal of Adolescence, February 2014, vol./is. 37/2(155-164), 0140-1971 (Feb 2014)

**Author(s):** Bender, Kimberly; Thompson, Sanna; Ferguson, Kristin; Langenderfer, Lisa

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**Language:** English

**Abstract:** Although a substantial body of literature demonstrates high prevalence of street victimization among homeless youth, few studies have investigated the existence of victimization classes that differ on the type and frequency of victimization experienced. Nor do we know how substance use patterns relate to victimization classes. Using latent class analysis (LCA), we examined the existence of victimization classes of homeless youth and investigated substance use predictors of class membership utilizing a large purposive sample (N = 601) recruited from homeless youth-serving host agencies in three disparate regions of the U.S. Results of the LCA suggest the presence of three distinct victimization profiles-youth fit into a low-victimization class, a witness class, or a high-victimization class. These three victimization classes demonstrated differences in their substance use, including rates of substance abuse/dependence on alcohol and/or drugs. The presence of distinct victimization profiles suggests the need for screening and referral for differential services. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: Published by Elsevier Ltd. All rights reserved.; HOLDER: The Foundation for Professionals in Services for Adolescents; YEAR: 2013

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

**Subject Headings:** [\\*Drug Usage](#)  
[\\*Homeless](#)  
[\\*Victimization](#)

**Source:** PsycINFO  
**Full Text:** Available from *Elsevier* in *Journal of Adolescence*

### 103. Internet use and addiction among Finnish adolescents (15-19 years).

**Citation:** Journal of Adolescence, February 2014, vol./is. 37/2(123-131), 0140-1971 (Feb 2014)  
**Author(s):** Sinkkonen, Hanna-Maija; Puhakka, Helena; Merilainen, Matti  
**Correspondence Address:** Sinkkonen, Hanna-Maija: School of Educational Sciences and Psychology, University of Eastern Finland, PL 101, Joensuu, Finland, 80101, Hanna-Maija.Sinkkonen@uef.fi  
**Institution:** University of Eastern Finland, School of Educational Sciences and Psychology, Joensuu, Finland; University of Eastern Finland, School of Educational Sciences and Psychology, Joensuu, Finland; University of Eastern Finland, School of Educational Sciences and Psychology, Joensuu, Finland  
**Language:** English  
**Abstract:** This study investigates Internet use among Finnish adolescents (n = 475) combining qualitative and quantitative research. Internet use was evaluated using the Internet Addiction Test (Young, 1998a, 1998b). The data was divided into three parts according to the test scores: normal users (14.3%), mild over-users (61.5%), and moderate or serious over-users (24.2%). The most common reason for use was having fun. While half the students reported disadvantages associated with their use, further qualitative analysis revealed that students with serious overuse did not report any harm caused by using the Internet. As disadvantages of using the Internet, students reported that it is time-consuming and causes mental, social, and physical harm and poor school attendance. Four factors of Internet addiction were found, and for two of them, a statistical difference between females and males was found. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)  
**Country of Publication:** STATEMENT: Published by Elsevier Ltd. All rights reserved.; HOLDER: The Foundation for Professionals in Services for Adolescents; YEAR: 2013  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** \*High School Students  
 \*Internet  
 \*Internet Addiction  
 \*Computer Usage

**Source:** PsycINFO  
**Full Text:** Available from *Elsevier* in *Journal of Adolescence*

### 104. Characterizing gender differences in treatment seekers.

**Citation:** Alcoholism: Clinical and Experimental Research, January 2014, vol./is. 38/1(275-284), 0145-6008;1530-0277 (Jan 2014)  
**Author(s):** Lewis, Ben; Nixon, Sara Jo  
**Correspondence Address:** Lewis, Ben: Department of Psychiatry, University of Florida, PO Box 100256, Gainesville, FL, US, 32610, benlewis@ufl.edu  
**Institution:** Department of Psychiatry, University of Florida, Gainesville, FL, US; Department of Psychiatry, University of Florida, Gainesville, FL, US  
**Language:** English  
**Abstract:** Background: Available evidence suggests women may be more vulnerable to the effects of chronic alcohol consumption than men. The few investigations of gender differences in treatment-seeking populations have often involved study samples restricted by selection criteria (e.g., age, education). The current study examined gender differences in a heterogeneous sample of individuals seeking treatment for a substance use disorder. We examined alcohol drinking levels, age at drinking milestones (e.g., first drink, first intoxication), and progression from milestones to alcohol problems or treatment.

Additionally, family history, spousal alcoholism, and nicotine use were analyzed. Methods: Participants included men (n = 274) and women (n = 257) in substance abuse treatment facilities. Participants completed inventories quantifying affect, intellectual ability, and drinking consequences. A family tree for substance use and personal histories for alcohol and nicotine use, including chronicity, frequency, and regularity, were collected. Results: Telescoping was not observed when progression from drinking milestones to alcoholism or alcohol problems was compared between men and women. In contrast, when considered as progression to treatment, marked telescoping effects were detected, with women entering treatment more rapidly by approximately 4 years. Familial differences included a greater proportion of women reporting alcoholic parents (73% women; 61% men) and alcoholic spouses (58% women; 38% men). Smoking behaviors were similar between genders; however, men reporting higher levels of alcohol consumption reported greater intensity of chronic smoking. Smoking and drinking behaviors were correlated among men, but not women. Rates of pretreatment drug problems were equivalent between genders. Conclusions: When contrasted with the available literature, our data were only partially supportive of gender-contingent telescoping. While women did not experience alcohol problems or alcoholism earlier than men, they progressed to treatment more quickly. These results highlight the importance of carefully considering the sample and specific outcome variables when interpreting gender differences. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Research Society on Alcoholism; YEAR: 2013

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Health Care Seeking Behavior](#)  
[\\*Human Sex Differences](#)  
[Nicotine](#)  
[Family History](#)

**Source:** PsycINFO

**Full Text:** Available from *Wiley* in [Alcoholism: Clinical and Experimental Research](#)

#### 105. The relationship between excessive alcohol consumption and alcohol use disorders according to DSM-IV and DSM-5.

**Citation:** Alcoholism: Clinical and Experimental Research, January 2014, vol./is. 38/1(249-256), 0145-6008;1530-0277 (Jan 2014)

**Author(s):** Tuithof, Marlous; ten Have, Margreet; van den Brink, Wim; Vollebergh, Wilma; de Graaf, Ron

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**Language:** English

**Abstract:** Background: Although it seems intuitive that alcohol use disorders (AUDs) include excessive alcohol consumption (EAC), this notion is not well established. This study investigates to which degree EAC (defined as >14/21 drinks weekly for women/men and at least three 5+ drinking days per week) and AUD overlap and whether problematic alcohol use groups (EAC-only, AUD-only, and EAC + AUD) differ from each other and from nonproblematic alcohol users regarding sociodemographics, mental health problems, functioning, and service utilization. Methods: Data were derived from the Netherlands Mental Health Survey and Incidence Study-2, a population-based study including 5,443 current drinkers (aged 18 to 64) interviewed with the Composite International Diagnostic Interview 3.0. Both DSM-IV AUDs and a proxy of DSM-5 AUD

are considered. Results: Of the current drinkers, 3.8% reported 12-month EAC. Twelve-month prevalence of DSM-IV and DSM-5 AUD were 5.4 and 4.4%, respectively. Regarding DSM-IV, only 17.7% of subjects with AUD reported EAC and 25.3% of those with EAC had an AUD. Compared with nonproblematic alcohol users, the 3 groups of problematic alcohol use (EAC-only, AUD-only, and EAC + AUD) were more often associated with mental health problems, poorer functioning, and service utilization. There were few differences between EAC-only and AUD-only regarding these correlates. However, EAC + AUD had strongest associations with above-mentioned correlates compared with the other 3 groups. Compared with DSM-IV findings, DSM-5 AUDs had slightly larger overlap with EAC, but correlates were similarly associated with problematic alcohol use groups. Conclusions: Findings indicate limited overlap between EAC and AUD. Yet, both dimensions were similarly associated with other problems suggesting that both should be included in future epidemiological research to detect the total group of problematic alcohol users. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Research Society on Alcoholism; YEAR: 2013

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

**Subject Headings:** [\\*Alcohol Abuse](#)  
[\\*Alcoholism](#)  
[\\*Diagnostic and Statistical Manual](#)  
[Epidemiology](#)  
[Health Care Utilization](#)  
[Mental Disorders](#)

**Source:** PsycINFO

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

#### 106. The patterns of drug and alcohol use and associated problems over 30 years in 397 men.

**Citation:** Alcoholism: Clinical and Experimental Research, January 2014, vol./is. 38/1(227-234), 0145-6008;1530-0277 (Jan 2014)

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**Language:** English

**Abstract:** Background: Alcohol and drug use disorders (AUDs and SUDs) and their combination are relatively common and often occur together. However, the relationships of potential early life correlates of alcohol and drug disorders to the combined diagnoses have rarely been evaluated in long-term prospective studies or in populations at high risk of one of these diagnoses but not the other. Methods: Data were analyzed from 397 males (half with an alcohol-dependent father) who had no AUDs or SUDs at age 20 and who were followed approximately every 5 years for 3 decades. Early life correlates and the course of AUDs, SUDs, and combined disorders were evaluated for 4 groups of subjects based on subsequent alcohol and/or drug diagnoses. Results: While the overall rates of the development of AUDs and SUDs were 41 and 21%, respectively, the rates of the second substance-related diagnosis were almost 2-fold higher for individuals who had the first condition. Among potential risk factors, scores for externalizing traits were elevated for men with AUDs, SUDs, and their combination, but a low level of response (low LR) to alcohol was associated only with the risk of AUDs, even when observed in the context of SUDs. The same earlier life characteristics that related to AUDs and to SUDs also related to the combination of these diagnoses in the same person. Finally, in this prospective study, subjects with both AUDs and SUDs had a more severe course than subjects with

either condition alone. Conclusions: This prospective evaluation of a group at high risk of AUDs confirmed the selective impact of the low LR on the risk of AUDs, the relationship of externalizing characteristics to both AUDs and SUDs and confirmed the more severe clinical course for both conditions when seen together. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Research Society on Alcoholism; YEAR: 2013  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Alcohol Drinking Patterns](#)  
[\\*Drug Abuse](#)  
[\\*Risk Factors](#)  
[Disease Course](#)  
[Externalization](#)  
**Source:** PsycINFO  
**Full Text:** Available from *Wiley* in *Alcoholism: Clinical and Experimental Research*

### 107. Impaired decoding of fear and disgust predicts utilitarian moral judgment in alcohol-dependent individuals.

**Citation:** Alcoholism: Clinical and Experimental Research, January 2014, vol./is. 38/1(179-185), 0145-6008;1530-0277 (Jan 2014)  
**Author(s):** Carmona-Perera, Martina; Clark, Luke; Young, Liane; Perez-Garcia, Miguel; Verdejo-Garcia, Antonio  
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**Language:** English  
**Abstract:** Background: Recent studies of moral reasoning in patients with alcohol use disorders have indicated a "utilitarian" bias, whereby patients are more likely to endorse emotionally aversive actions in favor of aggregate welfare (e.g., throwing a dying person into the sea to keep a lifeboat of survivors afloat). Here, we investigate the underlying psychological and neuropsychological processes. Methods: Alcohol-dependent individuals (n = 31) and healthy comparison participants (n = 34) completed a validated moral judgment task, as well as measures of impulsivity, mood symptoms (anxiety and depression), and emotional face recognition. Results: Alcohol-dependent individuals were more likely to endorse utilitarian choices in personal moral dilemmas compared with controls and rated these choices as less difficult to make. Hierarchical regression models showed that poorer decoding of fear and disgust significantly predicted utilitarian biases in personal moral dilemmas, over and above alcohol consumption. Impulsivity and mood symptoms did not predict moral decisions. Conclusions: These findings suggest that impaired fear and disgust decoding contributes to utilitarian moral decision-making in alcohol-dependent individuals. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Research Society on Alcoholism; YEAR: 2013  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Alcoholism](#)  
[\\*Disgust](#)  
[\\*Fear](#)  
[\\*Human Information Storage](#)  
[\\*Morality](#)

[Impulsiveness](#)  
[Judgment](#)  
[Reasoning](#)

**Source:** PsycINFO

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

#### 108. Adaptations underlying the development of excessive alcohol intake in selectively bred mice.

**Citation:** Alcoholism: Clinical and Experimental Research, January 2014, vol./is. 38/1(36-39), 0145-6008;1530-0277 (Jan 2014)

**Author(s):** Kippin, Tod E

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**Language:** English

**Abstract:** Comments on an article by Liana M. Matson et al. (see record 2014-02548-033).  
 Background: This commentary discusses the important contributions of the article in this issue by Matson and colleagues entitled "Selectively bred crossed high-alcohol-preferring mice drink to intoxication and develop functional tolerance, but not locomotor sensitization during free-choice ethanol access" as well as providing comparison to studies on other drugs of abuse. Methods: The findings of the target article are evaluated and compared to the larger literature of intake escalation and vulnerability to addiction observed with other drugs of abuse. Results: In their study, Matson and colleagues report that mice derived by crossing different lines selectively bred for high alcohol intake exhibit initial alcohol intakes associated with motor impairment followed by marked escalation of consumption and tolerance to the effects of alcohol on motor coordination. In contrast, no evidence of pharmacokinetic tolerance or sensitization of alcohol-induced locomotion was observed. These results demonstrate that the cHAP mice constitute an appropriate model for the study of excessive drinking, which is produced by escalated alcohol intake and functional changes, leading to excessive intoxication. Conclusions: Future work should assess adaptations in motivational processes and subjective effects of alcohol as well as the potential genetic and epigenetic bases of escalated alcohol intake. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: The Research Society on Alcoholism; YEAR: 2013

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

**Subject Headings:** [\\*Alcohol Intoxication](#)  
[\\*Ethanol](#)  
[\\*Selective Breeding](#)  
[\\*Sensitization](#)  
[\\*Tolerance](#)  
[Animal Locomotion](#)  
[Choice Behavior](#)  
[Mice](#)

**Source:** PsycINFO

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

#### 109. Research opportunities for medications to treat alcohol dependence: Addressing stakeholders' needs.

**Citation:** Alcoholism: Clinical and Experimental Research, January 2014, vol./is. 38/1(27-32), 0145-6008;1530-0277 (Jan 2014)

**Author(s):** Litten, Raye Z; Falk, Daniel; Ryan, Megan; Fertig, Joanne

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**Language:** English

**Abstract:** During the past decade, significant advances have been made in the development of medications to treat alcohol dependence. Four medications have been approved by the U.S. Food and Drug Administration for treating alcohol dependence-naltrexone, injectable naltrexone, acamprosate, and disulfiram-and several others show promise. The fact remains, however, that because of the heterogeneity of alcohol dependence, these medications will not work for all people, in all circumstances. Moreover, clinicians are not routinely prescribing these medications for alcohol treatment. This commentary poses a number of issues that must be addressed in order to advance the alcohol research field and to make medications a mainstream treatment for problematic drinking. These issues are framed from the perspective of the various stakeholders involved, including clinicians, patients, regulatory agencies, the pharmaceutical industry, and third-party payers. Addressing these issues will not only help to improve treatment but, as further described, will also open up many new research opportunities for alcohol investigators in the coming decade. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Research Society on Alcoholism; YEAR: 2013

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Drug Laws](#)  
[\\*Drug Therapy](#)  
[\\*Pharmaceutical Industry](#)  
[\\*Stakeholder](#)

**Source:** PsycINFO

**Full Text:** Available from *Wiley* in [Alcoholism: Clinical and Experimental Research](#)

#### 110. On the mismatch between population drinking and drink driving. Response to Gjerde et al.

**Citation:** Addiction, February 2014, vol./is. 109/2(333-334), 0965-2140;1360-0443 (Feb 2014)

**Author(s):** Norstrom, Thor; Rossow, Ingeborg

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**Institution:** Swedish Institute for Social Research (SOFI), Stockholm University, Stockholm, Sweden; Norwegian Institute for Alcohol and Drug Research (SIRUS), Oslo, Norway

**Language:** English

**Abstract:** Reply by the current authors to the comments made by H. Gjerde et al. (see record 2013-40708-030) on the original article (see record 2013-16822-011). The key message from Gjerde et al. is that drink driving (DWI) need not increase in spite of increasing population drinking. As an example, they point out that per-capita alcohol consumption increased markedly in Norway between 1990 and 2010, whereas DWI decreased during the same period. However, the mismatch between population drinking and DWI seems to reflect a more general pattern. In several countries, including Norway and Sweden, total alcohol consumption has increased during the last decades, without concomitant increases in all alcohol-related harm outcomes. This is intuitively at odds with predictions of the total consumption model; the question is whether or not it disproves a model with a strong inherent logic that has received much empirical support. In the context of DWI, Gjerde et al. provide a host of countervailing factors; the lowered blood alcohol content (BAC)

limit improved public transportation, increasing social disapproval of DWI and the lowered risk of detection due to a decrease in breath testing. The authors agree with Gjerde et al. that DWI may decrease in spite of increasing population drinking, but that this does not necessarily disprove historical empirical associations. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

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

**Subject Headings:** [\\*Alcohol Drinking Patterns](#)  
[\\*Alcoholism](#)  
[\\*Driving Behavior](#)  
[\\*Driving Under the Influence](#)  
[Alcohols](#)

**Source:** PsycINFO

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

#### 111. Commentary on Prince Van Leeuwen et al. (2014): Tobacco and cannabis use.

**Citation:** *Addiction*, February 2014, vol./is. 109/2(312-313), 0965-2140;1360-0443 (Feb 2014)

**Author(s):** Fergusson, David M; Boden, Joseph M

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**Language:** English

**Abstract:** Comments on an article by Andrea Prince Van Leeuwen et al. (see record 2014-01638-024). In their paper Leeuwen et al. examined an earlier stage of this process by looking at the associations between the use of licit drugs and the transition to cannabis abuse/dependence in a birth cohort of Dutch adolescents studied over the period from age 11 to 19 years. This analysis showed that, following control for confounding factors, early-onset tobacco use was associated with increased risks of cannabis abuse/dependence at the age of 19. However, early onset alcohol use was not associated with an increased risk of later cannabis abuse/dependence. These findings were replicated using measures of continued alcohol and tobacco use, showing that continued tobacco use was related to later cannabis abuse/dependence whereas continued alcohol use was not. The findings of the study thus suggested a specificity of association in which the early or continued use of tobacco is predictive of cannabis abuse/dependence, whereas the early use of alcohol is not. This specificity may provide some clues about the underlying processes by which the use of tobacco may increase risks of the use of cannabis. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: Society for the Study of Addiction; YEAR: 2014

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

**Subject Headings:** [\\*Cannabis](#)  
[\\*Diagnostic and Statistical Manual](#)  
[\\*Drug Abuse](#)  
[\\*Drug Legalization](#)  
[\\*Drug Usage](#)  
[Adolescent Development](#)

**Source:** PsycINFO

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

**112. Legal substance use and the development of a DSM-IV cannabis use disorder during adolescence: The TRAILS study.**

- Citation:** Addiction, February 2014, vol./is. 109/2(303-311), 0965-2140;1360-0443 (Feb 2014)
- Author(s):** van Leeuwen, Andrea Prince; Creemers, Hanneke E; Verhulst, Frank C; Vollebergh, Wilma A. M; Ormel, Johan; van Oort, Floor; Huizink, Anja C
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- Language:** English
- Abstract:** Aims: To examine whether early onset of tobacco or alcohol use, and continued use of tobacco or alcohol in early adolescence, are related to a higher likelihood of developing a cannabis use disorder during adolescence. Design and setting: Data were used from four consecutive assessment waves of the TRacking Adolescents' Individual Lives Survey (TRAILS), a general Dutch population study. TRAILS is an ongoing longitudinal study that will follow the same group of adolescents from the ages of 10 to 24 years. Participants: The sample consisted of 1108 (58% female) adolescents (mean ages at the four assessment waves are 11.09, 13.56, 16.27 and 19.05 years, respectively) Measurements: Cannabis use disorders were assessed using the Composite International Diagnostic Interview 3.0 (CIDI). Adolescent tobacco and alcohol use were assessed using self-report questionnaires. Findings: Early-onset tobacco use [odds ratio (OR) = 1.82, confidence interval (CI) = 1.05-3.14,  $P < 0.05$ ], but not early-onset alcohol use (OR = 1.33, CI = 0.84-2.12,  $P > 0.05$ ), was associated with a higher likelihood of developing a cannabis use disorder. Similarly, adolescents who reported continued use of tobacco (OR = 2.47, CI = 1.02-5.98,  $P < 0.05$ ), but not continued use of alcohol (OR = 1.71, CI = 0.87-3.38,  $P > 0.05$ ), were more likely to develop a cannabis use disorder. Conclusions: Early-onset and continued tobacco use appear to predict the development of a cannabis use disorder in adolescence, whereas early onset and continued alcohol use do not. (PsycINFO Database Record (c) 2014 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](#)  
[\\*Diagnostic and Statistical Manual](#)  
[\\*Drug Abuse](#)  
[\\*Drug Legalization](#)  
[\\*Drug Usage](#)  
[Adolescent Development](#)
- Source:** PsycINFO
- Full Text:** Available from *Wiley* in [Addiction](#)

**113. Prevalence and associations of quetiapine fumarate misuse among an Australian national city sample of people who regularly inject drugs.**

**Citation:** Addiction, February 2014, vol./is. 109/2(295-302), 0965-2140;1360-0443 (Feb 2014)

**Author(s):** Reddel, Siobhan Emma; Bruno, Raimondo; Burns, Lucy; Kirwan, Amy; Lokuge, Kamalini; Dietze, Paul

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**Language:** English

**Abstract:** Aims: To estimate the prevalence of self-reported misuse of the antipsychotic quetiapine fumarate (quetiapine) among a sample of urban Australian people who inject drugs (PWID), and correlates of reported misuse in health and social domains. Design, setting and participants: Data were obtained from a national cross-sectional convenience sample survey of 868 urban PWID. Measurements: Self-reported life-time and recent (past 6-month) use, and mode of use, of prescribed and non-prescribed quetiapine. 'Misuse' calculated on non-oral use of the prescribed drug or non-prescribed use. Self-reported potential correlates of quetiapine misuse including socio-demographic, drug use and health and social characteristics. Findings: Thirty-one per cent of the sample [95% confidence interval (CI) = 28- 34%] reported ever misusing quetiapine, 15% (95% CI = 13-17%) in the preceding 6 months. Multivariate logistic analysis showed that participants reporting any recent quetiapine misuse were more likely to be from jurisdictions with higher population prescription rates. They were also more likely to report violent crime in the preceding month [odds ratio (OR) = 1.96, 95% CI = 1.17-3.29] and non-heroin drug overdose in the preceding 12 months (OR = 3.52, 95% CI = 1.39-8.91). Recent quetiapine misuse was also significantly associated with non-prescribed benzodiazepine use (OR = 4.26, 95% CI = 2.06-8.82), non-prescribed pharmaceutical opioid use (OR = 2.76 95% CI 1.47-5.19) and amphetamine use (OR = 2.08, 95% CI = 1.02-4.22) in the previous 6 months. Conclusions: Quetiapine misuse appears to be common in PWID in urban Australia. Recent misuse is associated with localities reporting a higher rate of prescriptions and among individuals with a history of non-heroin drug overdose, violent crime and use of nonprescribed benzodiazepines and pharmaceutical opioids as well as amphetamines. Awareness of the potential for quetiapine misuse is important, as the drug is prescribed increasingly in a broader range of approved and 'off-label' clinical contexts. (PsycINFO Database Record (c) 2014 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:** [\\*Drug Abuse](#)  
[\\*Epidemiology](#)  
[\\*Intravenous Drug Usage](#)  
[\\*Quetiapine](#)  
[Self Report](#)

**Source:** PsycINFO

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

#### 114. Towards a comprehensive developmental model of cannabis use disorders.

**Citation:** *Addiction*, February 2014, vol./is. 109/2(284-294), 0965-2140;1360-0443 (Feb 2014)

**Author(s):** Blanco, Carlos; Rafful, Claudia; Wall, Melanie M; Ridenour, Ty A; Wang, Shuai; Kendler, Kenneth S

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**Language:** English

**Abstract:** Aims: To develop a comprehensive risk-factor model of cannabis use disorders (CUD) based on Kendler's development model for major depression. Design: Risk factors were divided into five developmental tiers based on Kendler's model of depression (childhood, early adolescence, late adolescence, adulthood, past year). Hierarchical logistic regression models were used to examine the independent contribution of each risk factor. Separate models were built to predict the lifetime risk of cannabis use and the risk of CUD among those with a history of lifetime risk of cannabis use. Setting: Data were drawn from the National Epidemiologic Survey on Alcohol and Related Conditions (NESARC) in the United States. Participants: Participants consisted of wave 2 of the NESARC (n = 34 653). Measurements: Odds ratios (OR), Adjusted OR (AOR) and confidence intervals (95% CI) were used to determine the risk factors in each tier and with multiple models. Findings: After mutually adjusting for the effect of other risk factors, lifetime history of drug use disorder (AOR = 4.78, 95% CI = 1.53-14.91), past year alcohol use disorders (AOR = 6.55, 95% CI = 2.54-16.89) and independent (AOR = 1.57, 95% CI = 1.15-2.14) and dependent (AOR = 1.25, 95% CI = 1.01-1.55) stressful life events predicted lifetime cannabis use. Impulsivity (AOR = 2.18, 95% CI = 1.34-3.53), past year alcohol use disorders (AOR = 4.09, 95% CI = 2.29-7.31), greater number of Axis I disorders (AOR = 1.56, 95% CI = 1.01-2.40) and social deviance (AOR = 1.19, 95% CI = 1.08-1.32) independently increased the risk of the development of CUD, whereas religious service attendance (AOR = 0.50, 95% CI = 0.30-0.85) decreased this risk. In both models, the effect of earlier development tiers was mediated by more proximal ones. There were few gender differences in both models. Conclusions: A modification of Kendler's risk factor model for major depression which stratifies risk factors into five groups (childhood, early adolescence, late adolescence, adulthood, past year) provides a useful foundation for a comprehensive developmental model of cannabis use and cannabis use disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Society for the Study of Addiction; YEAR: 2014

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

**Subject Headings:** \*Cannabis  
\*Drug Abuse  
\*Human Development  
\*Major Depression  
\*Clinical Models  
Risk Factors

**Source:** PsycINFO

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

#### 115. Psychiatric comorbidity in treatment-seeking substance use disorder patients with and without attention deficit hyperactivity disorder: Results of the IASP study.

**Citation:** *Addiction*, February 2014, vol./is. 109/2(262-272), 0965-2140;1360-0443 (Feb 2014)

**Author(s):** van Emmerik-van Oortmerssen, Katelijne; van de Glind, Geurt; Koeter, Maarten W. J.; Allsop, Steve; Auriacombe, Marc; Barta, Csaba; Bu, Eli Torild H; Burren, Yuliya; Carpentier, Pieter-Jan; Carruthers, Susan; Casas, Miguel; Demetrovics, Zsolt; Dom, Geert; Faraone, Stephen V; Fatseas, Melina; Franck, Johan; Johnson, Brian; Kapitany-Foveny, Mate; Kaye, Sharlene; Konstenius, Maija; Levin, Frances R; Moggi,

Franz; Moller, Merete; Ramos-Quiroga, J. Antoni; Schillinger, Arild; Skutle, Arvid; Verspreet, Sofie; van den Brink, Wim; Schoevers, Robert A; IASP Research Group

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**Language:** English

**Abstract:** Aims: To determine comorbidity patterns in treatment-seeking substance use disorder (SUD) patients with and without adult attention deficit hyperactivity disorder (ADHD), with an emphasis on subgroups defined by ADHD subtype, taking into account differences related to gender and primary substance of abuse. Design: Data were obtained from the cross-sectional International ADHD in Substance use disorder Prevalence (IASP) study. Setting: Forty-seven centres of SUD treatment in 10 countries. Participants: A total of 1205 treatment-seeking SUD patients. Measurements: Structured diagnostic assessments were used for all disorders: presence of ADHD was assessed with the Conners' Adult ADHD Diagnostic Interview for DSM-IV (CAADID), the presence of antisocial personality disorder (ASPD), major depression (MD) and (hypo)manic episode (HME) was assessed with the Mini International Neuropsychiatric Interview-Plus (MINI Plus), and the presence of borderline personality disorder (BPD) was assessed with the Structured Clinical Interview for DSM-IV Axis II (SCID II). Findings: The prevalence of DSM-IV adult ADHD in this SUD sample was 13.9%. ASPD [odds ratio (OR) = 2.8, 95% confidence interval (CI) = 1.8-4.2], BPD (OR = 7.0, 95% CI = 3.1-15.6 for alcohol; OR = 3.4, 95% CI = 1.8-6.4 for drugs), MD in patients with alcohol as primary substance of abuse (OR = 4.1, 95% CI = 2.1-7.8) and HME (OR = 4.3, 95% CI = 2.1-8.7) were all more prevalent in ADHD + compared with ADHD- patients ( $P < 0.001$ ). These results also indicate increased levels of BPD and MD for alcohol compared with drugs as primary substance of abuse. Comorbidity patterns differed between ADHD subtypes with

increased MD in the inattentive and combined subtype ( $P < 0.01$ ), increased HME and ASPD in the hyperactive/impulsive ( $P < 0.01$ ) and combined subtypes ( $P < 0.001$ ) and increased BPD in all subtypes ( $P < 0.001$ ) compared with SUD patients without ADHD. Seventy-five per cent of ADHD patients had at least one additional comorbid disorder compared with 37% of SUD patients without ADHD. Conclusions: Treatment-seeking substance use disorder patients with attention deficit hyperactivity disorder are at a very high risk for additional externalizing disorders. (PsycINFO Database Record (c) 2014 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:** \*Attention Deficit Disorder with Hyperactivity  
 \*Comorbidity  
 \*Drug Abuse  
 \*Health Care Seeking Behavior  
 \*Mental Disorders  
 Subtypes (Disorders)  
**Source:** PsycINFO  
**Full Text:** Available from *Wiley* in [Addiction](#)

#### 116. Training family members to manage heroin overdose and administer naloxone: Randomized trial of effects on knowledge and attitudes.

**Citation:** Addiction, February 2014, vol./is. 109/2(250-259), 0965-2140;1360-0443 (Feb 2014)  
**Author(s):** Williams, Anna V; Marsden, John; Strang, John  
**Correspondence Address:** Williams, Anna V.: Addictions Department, Institute of Psychiatry, King's College London, Addiction Sciences Building, 4 Windsor Walk, London, United Kingdom, SE5 8AF, anna.v.williams@kcl.ac.uk  
**Institution:** Addictions Department, Institute of Psychiatry, King's College London, London, United Kingdom; Addictions Department, Institute of Psychiatry, King's College London, London, United Kingdom; Addictions Department, Institute of Psychiatry, King's College London, London, United Kingdom  
**Language:** English  
**Abstract:** Aims: To evaluate a heroin overdose management training programme for family members based on emergency recovery procedures and take-home naloxone (THN) administration. Design: A two-group, parallel-arm, nonblinded, randomized controlled trial of group-based training versus an information-only control. Setting: Training events delivered in community addiction treatment services in three locations in England. Participants: A total of 187 family members and carers allocated to receive either THN training or basic information on opioid overdose management ( $n = 95$  and  $n = 92$ , respectively), with 123 participants completing the study. Measurements: The primary outcome measure was a self-completion Opioid Overdose Knowledge Scale (OOKS; range 0-45) and an Opioid Overdose Attitudes Scale (OOAS; range 28-140) was the secondary outcome measure. Each group was assessed before receiving their assigned condition and followed-up 3 months after. Events of witnessing and managing an overdose during follow-up were also recorded. Findings: At follow-up, study participants who had received THN training reported greater overdose-related knowledge relative to those receiving basic information only [OOKS mean difference, 4.08 (95% confidence interval, 2.10-6.06;  $P < 0.001$ ); Cohen's  $d = 0.74$  (0.37-1.10)]. There were also more positive opioid overdose-related attitudes among the trained group at follow-up [OOAS mean difference, 7.47 (3.13-11.82);  $P = 0.001$ ;  $d = 0.61$  (0.25-0.97)]. At the individual level 35 and 54%, respectively, of the experimental group increased their knowledge and attitudes compared with 11 and 30% of the control group. During follow-up, 13 participants witnessed an overdose with naloxone administered on eight occasions: five among the THN-trained group and three among the controls. Conclusions: Take-home naloxone training for family members of heroin users increases opioid overdose-related

knowledge and competence and these benefits are well retained after 3 months.  
(PsycINFO Database Record (c) 2014 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:** [\\*Drug Overdoses](#)  
[\\*Family Members](#)  
[\\*Heroin](#)  
[\\*Naloxone](#)  
[Attitudes](#)  
[Drug Administration Methods](#)  
[Drug Rehabilitation](#)  
[Knowledge Level](#)

**Source:** PsycINFO

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

### 117. Balance-A pragmatic randomized controlled trial of an online intensive self-help alcohol intervention.

**Citation:** *Addiction*, February 2014, vol./is. 109/2(218-226), 0965-2140;1360-0443 (Feb 2014)

**Author(s):** Brendryen, Havar; Lund, Ingunn Olea; Johansen, Ayna Beate; Riksheim, Marianne; Nesvag, Sverre; Duckert, Fanny

**Correspondence Address:** Brendryen, Havar: SERAF, Postboks 1039 Blindern, Oslo, Norway, 0315, haavabre@medisin.uio.no

**Institution:** SERAF, Norwegian Centre for Addiction Research, University of Oslo, Oslo, Norway; SERAF, Norwegian Centre for Addiction Research, University of Oslo, Oslo, Norway; SERAF, Norwegian Centre for Addiction Research, University of Oslo, Oslo, Norway; SERAF, Norwegian Centre for Addiction Research, University of Oslo, Oslo, Norway; SERAF, Norwegian Centre for Addiction Research, University of Oslo, Oslo, Norway; SERAF, Norwegian Centre for Addiction Research, University of Oslo, Oslo, Norway

**Language:** English

**Abstract:** Aims: To compare a brief versus a brief plus intensive self-help version of 'Balance', a fully automated online alcohol intervention, on self-reported alcohol consumption. Design: A pragmatic randomized controlled trial. Participants in both conditions received an online single session screening procedure including personalized normative feedback. The control group also received an online booklet about the effects of alcohol. The treatment group received the online multi-session follow-up program, Balance. Setting: Online study in Norway. Participants: At-risk drinkers were recruited by internet advertisements and assigned randomly to one of the two conditions (n = 244). Measurements: The primary outcome was self-reported alcohol consumption the previous week measured 6 months after screening. Findings: Regression analysis, using baseline carried forward imputation (intent-to-treat), with baseline variables as covariates, showed that intervention significantly affected alcohol consumption at 6 months (B = 2.96; 95% confidence interval = 0.02-5.90; P = 0.049). Participants in the intensive self-help group drank an average of three fewer standard alcohol units compared with participants in the brief self-help group. Conclusions: The online Balance intervention, added to a brief online screening intervention, may aid reduction in alcohol consumption compared with the screening intervention and an educational booklet. (PsycINFO Database Record (c) 2014 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:** [\\*Alcohol Drinking Patterns](#)  
[\\*Alcoholism](#)  
[\\*Intervention](#)  
[\\*Online Therapy](#)  
[\\*Self Help Techniques](#)

[Pragmatics](#)  
[Self Report](#)

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

**118. Vested interests in addiction research and policy. The challenge corporate lobbying poses to reducing society's alcohol problems: Insights from UK evidence on minimum unit pricing.**

**Citation:** *Addiction*, February 2014, vol./is. 109/2(199-205), 0965-2140;1360-0443 (Feb 2014)

**Author(s):** McCambridge, Jim; Hawkins, Benjamin; Holden, Chris

**Correspondence Address:** McCambridge, Jim: Faculty of Public Health and Policy, London School of Hygiene and Tropical Medicine, 15-17 Tavistock Place, London, United Kingdom, WC1H 9SH, Jim.McCambridge@lshtm.ac.uk

**Institution:** Faculty of Public Health and Policy, London School of Hygiene and Tropical Medicine, London, United Kingdom; Faculty of Public Health and Policy, London School of Hygiene and Tropical Medicine, London, United Kingdom; Department of Social Policy and Social Work, University of York, York, United Kingdom

**Language:** English

**Abstract:** [Correction Notice: An Erratum for this article was reported in Vol 109(3) of *Addiction* (see record 2014-05957-030). In the original article, the funding acknowledgement was missing. The acknowledgement is present in the erratum.] Background: There has been insufficient research attention to alcohol industry methods of influencing public policies. With the exception of the tobacco industry, there have been few studies of the impact of corporate lobbying on public health policymaking more broadly. Methods: We summarize here findings from documentary analyses and interview studies in an integrative review of corporate efforts to influence UK policy on minimum unit pricing (MUP) of alcohol 2007-10. Results: Alcohol producers and retailers adopted a long-term, relationship-building approach to policy influence, in which personal contacts with key policymakers were established and nurtured, including when they were not in government. The alcohol industry was successful in achieving access to UK policymakers at the highest levels of government and at all stages of the policy process. Within the United Kingdom, political devolution and the formation for the first time of a Scottish National Party (SNP) government disrupted the existing long-term strategy of alcohol industry actors and created the conditions for evidence-based policy innovations such as MUP. Conclusions: Comparisons between policy communities within the United Kingdom and elsewhere are useful to the understanding of how different policy environments are amenable to influence through lobbying. Greater transparency in how policy is made is likely to lead to more effective alcohol and other public policies globally by constraining the influence of vested interests. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: *Addiction* published by John Wiley & Sons Ltd on behalf of The Society for the Study of Addiction This is an open access article under the terms of the Creative Commons Attribution License, which permits use, distribution and reproduction in any medium, provided the original work is properly cited.; HOLDER: The Authors; YEAR: 2013

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

**Subject Headings:** [\\*Alcohol Rehabilitation](#)  
[\\*Alcoholism](#)  
[\\*Costs and Cost Analysis](#)  
[\\*Policy Making](#)  
[Organizations](#)  
[Research and Development](#)  
[Society](#)

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

**119. Considering prescription opioid-related harms in the population: Response to commentaries.**

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**Citation:** Addiction, February 2014, vol./is. 109/2(186-188), 0965-2140;1360-0443 (Feb 2014)

**Author(s):** Fischer, Benedikt; Keates, Annette; Buhringer, Gerhard; Reimer, Jens; Rehm, Jurgen

**Correspondence Address:** Fischer, Benedikt, bfischer@sfu.ca

**Institution:** Centre for Applied Research in Mental Health and Addictions (CARMHA), Faculty of Health Sciences, Simon Fraser University, Vancouver, BC, Canada; VU University, Amsterdam, Netherlands; Institute of Clinical Psychology and Psychotherapy, Technische Universitat, Dresden, Netherlands; Centre for Interdisciplinary Addiction Research, University of Hamburg, Hamburg, Germany; Social and Epidemiological Research Department, Centre for Addiction and Mental Health (CAMH), Toronto, ON, Canada

**Language:** English

**Abstract:** Reply by the current authors to the comments made by Paul Griffiths (see record 2014-01638-004), Jefferey H. Samet & Judith I. Tsui (see record 2014-01638-005) and Angela C. Rintoul & Malcolm Dobbin (see record 2014-01638-006) on the original article (see record 2014-01638-003). Rintoul et al. correctly pointed out that little is known from a population health or social determinants, perspective about medical prescription opioid (PO) use and PO-related harms. Specifically, there are few data on how basic social variables such as sociodemographics, education, socio-economic status, etc. influence the above phenomena. Such gradients are fairly well explored for other legal and illegal drug use. The empirical situation is quite different with regard to another population level effect as raised by Samet & Tsui, namely, the correlation between levels of PO dispensing and corresponding levels of harms in a population. Several studies from different North American jurisdictions have documented that the levels of non-medical PO use, as well as PO-related morbidity and mortality outcomes, covary notably with PO dispensing levels and this may imply that meaningfully lowered PO dispensing levels result in lower levels of harm outcomes. Griffiths et al. pointed out correctly that both in terms of PO use environments and problems, the European Union (EU) ought to be considered a heterogeneous entity, featuring substantive inter-jurisdictional differences. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: Society for the Study of Addiction; YEAR: 2014

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[\\*Health Care Services](#)  
[\\*Opiates](#)  
[\\*Prescription Drugs](#)

**Source:** PsycINFO

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

**120. Prescription opioid deaths: We need to treat sick populations, not just sick individuals.**

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**Citation:** Addiction, February 2014, vol./is. 109/2(185-186), 0965-2140;1360-0443 (Feb 2014)

**Author(s):** Rintoul, Angela C; Dobbin, Malcolm

**Correspondence Address:** Rintoul, Angela C.: School of Public Health and Preventive Medicine, Monash University, Alfred Hospital, 3rd Floor Burnet Building, Melbourne, VIC, Australia, 3004, Angela.Rintoul@monash.edu

**Institution:** School of Public Health and Preventive Medicine, Monash University, Alfred Hospital, Melbourne, VIC, Australia; Monash University, Melbourne, VIC, Australia

**Language:** English

**Abstract:** Comments on an article by Benedikt Fischer et al. (see record 2014-01638-003). Fischer et al. described why North America currently leads the prescription opioid (PO) drug epidemic. Despite substantially higher per-capita expenditure on health care and

pharmaceuticals than other high-income countries (HICs), the United States has relatively poor population health outcomes. The risk of PO overdose deaths is associated with lower socioeconomic status. Disturbingly, US life expectancy for the most disadvantaged has fallen by 4 years since 1990. Increasing PO drug overdoses since 1990 disproportionately affecting non-Hispanic whites may have contributed to this decline. Added to this, clinical studies fail to demonstrate the long-term efficacy and safety of POs for chronic non-cancer pain. However, HIC consumption continues to increase, despite more than a decade of documentation of serious harm and countermeasures such as prescription monitoring programs (PMPs) and guidelines for prescribing. Voluntary use of PMPs and compliance with guidelines is poor and there is little evidence to support that patients at risk of aberrant behavior can be identified reliably. Prescribers can be disadvantaged by dysfunctional funding arrangements, with pressure to contain costs, particularly where funded by for-profit insurance. This contributes to short consultation times and many non-reimbursed tasks involved in the comprehensive management of complex problems in patients suffering multiple comorbidities. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: Society for the Study of Addiction; YEAR: 2014

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[\\*Health Care Services](#)  
[\\*Opiates](#)  
[\\*Prescription Drugs](#)

**Source:** PsycINFO

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

#### 121. Variations in prescription opioids and related harms: A key to understanding and effective policy.

**Citation:** *Addiction*, February 2014, vol./is. 109/2(183-185), 0965-2140;1360-0443 (Feb 2014)

**Author(s):** Samet, Jeffrey H; Tsui, Judith I

**Correspondence Address:** Samet, Jeffrey H., [jsamet@bu.edu](mailto:jsamet@bu.edu)

**Institution:** Department of Medicine, Section of General Internal Medicine, Clinical Addiction Research and Education (CARE) Unit, Boston University School of Medicine, Boston, MA, US; Department of Medicine, Section of General Internal Medicine, Clinical Addiction Research and Education (CARE) Unit, Boston University School of Medicine, Boston, MA, US

**Language:** English

**Abstract:** Comments on an article by Benedikt Fischer et al. (see record 2014-01638-003). Fischer et al. presented an analysis comparing North America to the rest of the world and identify factors that resonate with common sense. The three factors identified i.e. consumption of more POs, less regulatory access restrictions and patient expectations for effective treatment within a 'for-profit' oriented health-care system lead to an unfortunate reality: exposure to opioids seems omnipresent in North America. These authors have utilized an established health services research tool, namely identifying variation in practice patterns, to identify big issues that probably directly and indirectly impact the indisputable finding of opioid prescribing problems in North America. However, the anticipated chorus of calls to 'shut down the candy store' risk oversimplifying the solution to the dilemma: how do we adequately treat pain and simultaneously avoid such pervasive exposure to opioids that, invariably, adverse consequences ensue? While Fischer et al. presented a substantive and thought provoking descriptive review of differences in health systems, policy, regulations and culture between North America and other high-income countries which may explain the disparity in non-medical use of POs and subsequent harms, there is still a need for detail about the evidence linking those factors to harms. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: Society for the Study of Addiction; YEAR: 2014

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[\\*Health Care Services](#)  
[\\*Opiates](#)  
[\\*Prescription Drugs](#)

**Source:** PsycINFO

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

### 122. The (mis)use of psychoactive medicines: Getting the balance right in complex systems.

**Citation:** *Addiction*, February 2014, vol./is. 109/2(182-183), 0965-2140;1360-0443 (Feb 2014)

**Author(s):** Griffiths, Paul; Evans-Brown, Michael; Sedefov, Roumen

**Correspondence Address:** Griffiths, Paul, paul.griffiths@emcdda.europa.eu

**Institution:** European Monitoring Centre for Drugs and Drug Addiction (EMCDDA), Lisbon, Portugal; European Monitoring Centre for Drugs and Drug Addiction (EMCDDA), Lisbon, Portugal; European Monitoring Centre for Drugs and Drug Addiction (EMCDDA), Lisbon, Portugal

**Language:** English

**Abstract:** Comments on an article by Benedikt Fischer et al. (see record 2014-01638-003). Fischer et al. showed the importance of system-level factors in shaping the misuse of prescription opioids (PO) in North America. This provides a point of comparison for looking at differences in levels of PO misuse and related harms in other regions, such as the European Union (EU). Important as these factors may be, the authors noted that 'they are not yet clearly defined'. As a result, any comparative analysis must necessarily be reductive, as it is grounded on an imperfect and restricted set of case examples. Moreover, considering North America as a homogeneous unit could be seen as problematic; extending this to the EU even more so. In the latter case this is because of the diversity found in Europe at system level and the current paucity of data available to inform discussions. Turning to low- and middle-income countries, these problems are amplified further, making informed comment difficult. The analysis provided therefore has clear limitations, yet it provides with a valuable conceptual starting-point for understanding the risk and protective factors associated with PO misuse and serves as a call to action for improving data availability. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: Society for the Study of Addiction; YEAR: 2014

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[\\*Health Care Services](#)  
[\\*Opiates](#)  
[\\*Prescription Drugs](#)

**Source:** PsycINFO

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

### 123. Non-medical use of prescription opioids and prescription opioid-related harms: Why so markedly higher in North America compared to the rest of the world?

**Citation:** *Addiction*, February 2014, vol./is. 109/2(177-181), 0965-2140;1360-0443 (Feb 2014)

**Author(s):** Fischer, Benedikt; Keates, Annette; Buhringer, Gerhard; Reimer, Jens; Rehm, Jurgen

**Correspondence Address:** Fischer, Benedikt: Centre for Applied Research in Mental Health and Addictions (CARMHA), Faculty of Health Sciences, Simon Fraser University, 2400-515 W Hastings Street, Vancouver, BC, Canada, V6B 5K3, bfischer@sfu.ca

- Institution:** Centre for Applied Research in Mental Health and Addictions (CARMHA), Faculty of Health Sciences, Simon Fraser University, Vancouver, BC, Canada; VU University, Amsterdam, Netherlands; Institute of Clinical Psychology and Psychotherapy, Technische Universitat, Dresden, Netherlands; Centre for Interdisciplinary Addiction Research, University of Hamburg, Hamburg, Germany; Social and Epidemiological Research Department, Centre for Addiction and Mental Health (CAMH), Toronto, ON, Canada
- Language:** English
- Abstract:** Aims: This paper aims to identify possible system-level factors contributing to the marked differences in the levels of non-medical prescription opioid use (NMPOU) and prescription opioid (PO)-related harms in North America (i.e. the United States and Canada) compared to other global regions. Methods: Scientific literature and information related to relevant areas of health systems, policy and practice were reviewed and integrated. Results: We identified several but different factors contributing to the observed differences. First, North American health-care systems consume substantially more Pos-even when compared to other high-income countries-than any other global region, with dispensing levels associated strongly with levels of NMPOU and PO-related harms. Secondly, North American health-care systems, compared to other systems, appear to have lesser regulatory access restrictions for, and rely more upon, community-based dispensing mechanisms of POs, facilitating higher dissemination level and availability (e.g. through diversion) of POs implicated in NMPOU and harms. Thirdly, we note that the generally high levels of psychotropic drug use, dynamics of medical-professional culture (including patient expectations for 'effective treatment'), as well as the more pronounced 'for-profit' orientation of key elements of health care (including pharmaceutical advertising), may have boosted the PO-related problems observed in North America. Conclusions: Differences in the organization of health systems, prescription practices, dispensing and medical cultures and patient expectations appear to contribute to the observed inter-regional differences in non-medical prescription opioid use and prescription opioid-related harms, although consistent evidence and causal analyses are limited. Further comparative examination of these and other potential drivers is needed, and also for evidence-based intervention and policy development. (PsycINFO Database Record (c) 2014 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:** [\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[\\*Health Care Services](#)  
[\\*Opiates](#)  
[\\*Prescription Drugs](#)
- Source:** PsycINFO
- Full Text:** Available from *Wiley* in [Addiction](#)

#### 124. Reporting quantitative information in qualitative research: Guidance for authors and reviewers.

- Citation:** *Addiction*, February 2014, vol./is. 109/2(175-176), 0965-2140;1360-0443 (Feb 2014)
- Author(s):** Neale, Joanne; Miller, Peter; West, Robert
- Correspondence Address:** Neale, Joanne, joanne.neale@kcl.ac.uk
- Institution:** Institute of Psychiatry, King's College, London, United Kingdom; School of Psychology, Deakin University, Geelong, VIC, Australia; Cancer Research UK Health Behaviour Research Centre, University College London, London, United Kingdom
- Language:** English
- Abstract:** This editorial discusses the reporting of quantitative information in qualitative research. The absence of numbers is often seen as a defining feature of qualitative research. Despite this, qualitative researchers frequently use numbers or semi-quantification when writing up their data. The authors have found that different qualitative researchers can have strongly held, but opposing, views on whether and how quantitative information should

be expressed in what are essentially qualitative studies, that is, studies reporting concepts, themes and ideas arising from interviews, group discussions or other. This editorial seeks to provide clarity for Addiction authors and reviewers on the Journal's current position and preferences. The use of numbers to describe sample characteristics is essential and uncontroversial. Beyond that, it has been argued that quantification or semi-quantification can improve the transparency of data analysis, give precision to statements enable patterns in the data to emerge with greater clarity and increase the meaning of key findings by providing focus. Quantification or semi-quantification can, however, be problematic. When submitting qualitative papers to Addiction, it might help to refer to this editorial note to assist reviewers who may otherwise provide inconsistent recommendations for revision. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: Society for the Study of Addiction; YEAR: 2014

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

**Subject Headings:** [\\*Data Collection](#)  
[\\*Qualitative Research](#)  
[\\*Quantitative Methods](#)  
[\\*Scientific Communication](#)  
[\\*Journal Writing](#)

**Source:** PsycINFO

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

#### 125. Changing organization culture: Data driven participatory evaluation and revision of wraparound implementation.

**Citation:** Journal of Evidence-Based Social Work, January 2014, vol./is. 11/1-2(18-29), 1543-3714;1543-3722 (Jan 2014)

**Author(s):** Bertram, Rosalyn M; Schaffer, Pam; Charnin, Leia

**Correspondence Address:** Bertram, Rosalyn M.: School of Social Work, University of Missouri-Kansas City, 10817 Oak Street, Kansas City, MO, US, 64114, bertramr@umkc.edu

**Institution:** School of Social Work, University of Missouri-Kansas City, Kansas City, MO, US; Systems of Hope, Houston, TX, US; School of Social Work, University of Missouri-Kansas City, Kansas City, MO, US

**Language:** English

**Abstract:** Family members and professionals in a Substance Abuse and Mental Health Services Administration Children's Mental Health Systems of Care Initiative in Houston, Texas conducted a participatory evaluation to examine wraparound implementation. Results guided systematic, theory-based program revisions. By focusing through empirically derived frameworks for implementation, the evaluation team identified and generated useful data sources to support and improve wraparound provision. Despite working with a more diverse population in which youth displayed more severe behaviors than in similar grants, after 18 months more families received service and outcomes improved as fidelity scores advanced above the national mean. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Mental Health Services](#)  
[Drug Abuse](#)  
[Family Members](#)  
[Organizational Climate](#)

**Source:** PsycINFO

#### 126. Systematic review.

**Citation:** Effects of parental incarceration on children: Cross-national comparative studies., 2014(123-142) (2014)

**Author(s):** Murray, Joseph; Bijleveld, Catrien C. J. H; Farrington, David P; Loeber, Rolf

**Institution:** Department of Psychiatry, University of Cambridge, Cambridge, United Kingdom; Vrije University, Amsterdam, Netherlands; Institute of Criminology, University of Cambridge, Cambridge, United Kingdom; University of Pittsburgh, Pittsburgh, PA, US

**Language:** English

**Abstract:** (from the chapter) In Chapters 4 through 8, we presented findings on the effects of parental incarceration on children in four different countries. Although individual studies can give important leads, replication is key to scientific progress, and synthesis of all the available evidence is critical to informed decision making. Therefore, in addition to our primary research, we conducted a systematic review and meta-analysis to summarize the evidence on the effects of parental incarceration on children's antisocial behavior, mental health, drug use, and educational performance. Systematic reviews use rigorous and transparent search methods to try to locate all available evidence on a research question. Meta-analyses use statistical methods to pool the results from the primary studies. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Authored Book

**Subject Headings:** [\\*Childhood Development](#)  
[\\*Incarceration](#)  
[\\*Offspring](#)  
[\\*Parent Child Relations](#)  
[\\*Prisoners](#)  
[Academic Achievement](#)  
[Antisocial Behavior](#)  
[Drug Usage](#)  
[Mental Health](#)

**Source:** PsycINFO

#### 127. Anal sex role segregation and versatility among men who have sex with men: EXPLORE Study.

**Citation:** JAIDS Journal of Acquired Immune Deficiency Syndromes, September 2013, vol./is. 64/1(121-125), 1525-4135;1077-9450 (Sep 1, 2013)

**Author(s):** Tieu, Hong-Van; Li, Xin; Donnell, Deborah; Vittinghoff, Eric; Buchbinder, Susan; Parente, Zachary G; Koblin, Beryl

**Correspondence Address:** Tieu, Hong-Van: Laboratory of Infectious Disease Prevention, Lindsley F. Kimball Research Institute, New York Blood Center, 310 E. 67th Street Suite 3-110, New York, NY, US, 10065, htieu@nybloodcenter.org

**Institution:** Laboratory of Infectious Disease Prevention, Lindsley F. Kimball Research Institute, New York Blood Center, New York, NY, US; Vaccine and Infectious Disease Division, Fred Hutchinson Cancer Research Center, Seattle, WA, US; Vaccine and Infectious Disease Division, Fred Hutchinson Cancer Research Center, Seattle, WA, US; Department of Epidemiology and Biostatistics, University of California, San Francisco School of Medicine, San Francisco, CA, US; HIV Research Section, San Francisco Department of Health, San Francisco, CA, US; Laboratory of Infectious Disease Prevention, Lindsley F. Kimball Research Institute, New York Blood Center, New York, NY, US; Laboratory of Infectious Disease Prevention, Lindsley F. Kimball Research Institute, New York Blood Center, New York, NY, US

**Language:** English

**Abstract:** Anal sex role patterns and correlates during unprotected anal sex were examined longitudinally among HIV-negative men who have sex with men. Nearly 9.6% were exclusively receptive, 16.7% exclusively insertive, and 63.0% versatile. Versatility was more likely with primary and HIV-negative/unknown status partners and among younger men and substance users but less likely among Blacks and with higher number of partners. Exclusively receptive role was more likely with HIV-negative/unknown status

partners and among younger men and substance users but less likely with higher number of partners. Examining anal sex role patterns helps understand the factors that drive the epidemic among men who have sex with men. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Lippincott Williams & Wilkins; YEAR: 2013  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Roles](#)  
[\\*Same Sex Intercourse](#)  
[Blacks](#)  
[Drug Usage](#)  
[HIV](#)  
**Source:** PsycINFO  
**Full Text:** Available from *Ovid* in *JAIDS Journal of Acquired Immune Deficiency Syndromes*

#### 128. Review of iDisorder: Understanding our obsession with technology and overcoming its hold on us.

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**Citation:** British Journal of Guidance & Counselling, November 2013, vol./is. 41/5(609-611), 0306-9885;1469-3534 (Nov 2013)  
**Author(s):** Anthony, Kate  
**Correspondence Address:** Anthony, Kate, kate@onlinetherapyinstitute.com  
**Institution:** Online Therapy Institute, NJ, US  
**Language:** English  
**Abstract:** Reviews the book, *iDisorder: Understanding Our Obsession with Technology and Overcoming Its Hold on Us* by Larry D. Rosen (see record 2012-22141-000). The book seeks to explore the psychological damage that comes from being continually connected to technology and one's relationship with their devices. The author takes familiar psychological issues such as narcissism, anxiety and addiction and relates how technology can dramatically exacerbate these issues or even create them. The author offers many strategies and tick lists to help one maintain one's humanity. The book is recommend as a useful addition to any professional library of books about technology, psychology and culture. It has interesting themes and is an enjoyable read. It is also an important book historically as an examination from the point of view of a generation trying to get to grips with what future society will look like if indeed it is not already here. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: Kate Anthony; YEAR: 2013  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Narcissism](#)  
[\\*Obsessions](#)  
[\\*Technology](#)  
[\\*Mobile Devices](#)  
[Addiction](#)  
[Humanities](#)  
[Society](#)  
[Cellular Phones](#)  
**Source:** PsycINFO

#### 129. Driving after drug or alcohol use by US high school seniors, 2001-2011.

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**Citation:** American Journal of Public Health, November 2013, vol./is. 103/11(2027-2034), 0090-0036;1541-0048 (Nov 2013)  
**Author(s):** O'Malley, Patrick M; Johnston, Lloyd D  
**Correspondence Address:** O'Malley, Patrick M.: Institute for Social Research, University of Michigan, 426 Thompson St., Ann Arbor, MI, US, 48104, pomalley@umich.edu

- Institution:** Institute for Social Research, University of Michigan, Ann Arbor, MI, US; Institute for Social Research, University of Michigan, Ann Arbor, MI, US
- Language:** English
- Abstract:** Objectives: We examined prevalence, trends, and correlates of driving or riding after use of drugs or alcohol among US high school seniors from 2001 to 2011. Methods: Data come from Monitoring the Future, an annual survey of nationally representative samples of high school seniors. We used logistic regressions with data from more than 22 000 respondents to examine multivariate associations with demographic and lifestyle factors. Results: Large numbers of US high school seniors put themselves and others at great risk of harm by driving after using marijuana or other illicit drugs or drinking alcohol or by riding in a vehicle whose driver had used marijuana, other illicit drugs, or alcohol. Driving after drinking has declined in recent years, but driving after use of marijuana has increased. A higher percentage of students reported driving after using marijuana than after having 5 or more alcoholic drinks. Risky driving and riding behaviors differed little between demographic subgroups but considerably according to lifestyle factors. Conclusions: Stronger efforts are needed to combat adolescent driving under the influence of illicit drugs. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Aggressive Driving Behavior](#)  
[\\*Drug Abuse](#)  
[\\*High School Students](#)  
[\\*Lifestyle](#)  
[\\*Marijuana](#)
- Source:** PsycINFO
- Full Text:** Available from *EBSCOhost* in [American Journal of Public Health](#)  
Available from *ProQuest* in [American Journal of Public Health](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.  
Available from *EBSCOhost* in [American Journal of Public Health](#)
- 130. Oxycontin use on a rural Midwest American Indian reservation: Demographic correlates and reasons for using.**
- Citation:** American Journal of Public Health, November 2013, vol./is. 103/11(1997-1999), 0090-0036;1541-0048 (Nov 2013)
- Author(s):** Momper, Sandra L; Delva, Jorge; Tauiliili, Debbie; Mueller-Williams, Amelia Cromwell; Goral, Patricia
- Correspondence Address:** Momper, Sandra L.: University of Michigan, School of Social Work, 1080 South University Ave., Ann Arbor, MI, US, 48109, smomper@umich.edu
- Institution:** University of Michigan, School of Social Work, Ann Arbor, MI, US; University of Michigan, School of Social Work, Ann Arbor, MI, US; University of Michigan, School of Social Work, Ann Arbor, MI, US; University of Michigan, School of Social Work, Ann Arbor, MI, US; University of Michigan, School of Social Work, Ann Arbor, MI, US
- Language:** English
- Abstract:** In 2009 we surveyed 400 tribal members of a midwestern American Indian reservation to assess the prevalence of OxyContin use. Thirty percent of tribal participants reported nonmedical use of OxyContin ever, 18.9% in the past year, and 13.4% in the past month. Participants aged 18 to 25 years were most likely to have used OxyContin. Reasons given for use of the drug included pain relief (59.3%) and getting high (52.2%), indicating a need for opioid treatment programs. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*American Indians](#)  
[\\*Drug Usage](#)

\*Opiates  
 \*Pain Management  
 \*Treatment  
 Drug Abuse

**Source:** PsycINFO

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

### 131. Impaired-driving prevalence among US high school students: Associations with substance use and risky driving behaviors.

**Citation:** American Journal of Public Health, November 2013, vol./is. 103/11(e71-e77), 0090-0036;1541-0048 (Nov 2013)

**Author(s):** Li, Kaigang; Simons-Morton, Bruce G; Hingson, Ralph

**Correspondence Address:** Simons-Morton, Bruce G.: Health Behavior Branch, DIPHR, NICHD, 6100 Executive Blvd 7B13M, Bethesda, MD, US, 20892-7510, mortonb@exchange.nih.gov

**Institution:** Health Behavior Branch, Division of Intramural Population Health Research, Eunice Kennedy Shriver National Institute of Child Health and Human Development, Bethesda, MD, US; Health Behavior Branch, Division of Intramural Population Health Research, Eunice Kennedy Shriver National Institute of Child Health and Human Development, Bethesda, MD, US; Epidemiology and Prevention Research Division, National Institute on Alcohol Abuse and Alcoholism, Bethesda, MD, US

**Language:** English

**Abstract:** Objectives: We examined the prevalence of impaired driving among US high school students and associations with substance use and risky driving behavior. Methods: We assessed driving while alcohol or drug impaired (DWI) and riding with alcohol- or drug-impaired drivers (RWI) in a nationally representative sample of 11th-grade US high school students (n = 2431). We examined associations with drinking and binge drinking, illicit drug use, risky driving, and demographic factors using multivariate sequential logistic regression analysis. Results: Thirteen percent of 11th-grade students reported DWI at least 1 of the past 30 days, and 24% reported RWI at least once in the past year. Risky driving was positively associated with DWI (odds ratio [OR] = 1.25; P < .001) and RWI (OR = 1.09; P < .05), controlling for binge drinking (DWI: OR = 3.17; P < .01; RWI: OR = 6.12; P < .001) and illicit drug use (DWI: OR = 5.91; P < .001; RWI: OR = 2.29; P = .05). DWI was higher for adolescents who drove after midnight (OR = 15.7), drove while sleepy or drowsy (OR = 8.6), read text messages (OR = 11.8), sent text messages (OR = 5.0), and made cell phone calls (OR = 3.2) while driving. Conclusions: Our findings suggest the need for comprehensive approaches to the prevention of DWI, RWI, and other risky driving behavior. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** \*Binge Drinking  
 \*Driving Behavior  
 Drug Abuse  
 High School Students  
 Sleepiness

**Source:** PsycINFO

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

**132. Decision-making, reward-seeking behaviors and dopamine agonist therapy in restless legs syndrome.**

- Citation:** Sleep: Journal of Sleep and Sleep Disorders Research, October 2013, vol./is. 36/10(1501-1507), 0161-8105;1550-9109 (Oct 1, 2013)
- Author(s):** Bayard, Sophie; Langenier, Muriel Croisier; Dauvilliers, Yves
- Correspondence Address:** Dauvilliers, Yves: Service de Neurologie, Hopital Gui-de-Chauliac, 80 Avenue Augustin Fliche, Montpellier, France, 34295, Cedex 5, ydauvilliers@yahoo.fr
- Institution:** Service de Neurologie, Unite des Troubles du Sommeil, Hopital Gui-de-Chauliac Montpellier, Montpellier, France; Service de Neurologie, Unite des Troubles du Sommeil, Hopital Gui-de-Chauliac Montpellier, Montpellier, France; Service de Neurologie, Unite des Troubles du Sommeil, Hopital Gui-de-Chauliac Montpellier, Montpellier, France
- Language:** English
- Abstract:** Study Objectives: To assess whether the frequency of impulse control disorders (ICDs), addictive behaviors, impulsivity, and impairment of decision-making task performance under ambiguous and risky conditions were present in patients with restless legs syndrome (RLS) and whether changes could be related to dopaminergic medications. Design: Case-control prospective study. Setting: Academic Sleep Disorders Center. Participants: Of the 149 participants, there were 39 who were drug free with primary RLS, 50 who were taking dopamine agonists (DA), and 60 control subjects. Participants were assessed with a clinical interview screening for ICDs, augmentation syndrome, impulsivity, depression, and addictive behaviors. All participants completed two decision-making tasks, one under an ambiguous condition (Iowa Gambling Task) and the other under a risky condition (Game of Dice Task). Drug-free patients with RLS underwent 1 night of polysomnography recording. Measurements and Results: Seventy percent of patients were treated with pramipexole (median dose, 0.36 mg), and 30% with ropinirole (median dose, 0.75 mg). Median duration of DA intake was 11 mo (range, 1-72 mo). No differences were found on impulsivity scores, ICDs, and substance addiction between drug-free patients or those taking DA, or control subjects. Patients with RLS reported more depressive symptoms than control subjects, but without differences between patients taking or not taking DA. Drug-free and treated patients demonstrated reduced performances on the Iowa Gambling Task but not on the Game of Dice Task compared to control subjects, with no differences between patients taking medications and those who were not. No association was found between decision-making task performances, or polysomnographic and clinical variables. Conclusion: Impulse control disorders, impulsivity, and substance addiction were infrequent in drug-free patients with restless legs syndrome or those treated with a low dose of dopamine agonists. However, patients with restless legs syndrome, either drug free or taking dopamine agonists, had preferences toward risky choices on the Iowa Gambling Task, which led to negative consequences in the long run, a condition potentially leading to further development of impulse control disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Decision Making](#)  
[\\*Dopamine Agonists](#)  
[\\*Drug Therapy](#)  
[\\*Rewards](#)  
[\\*Restless Leg Syndrome Behavior](#)
- Source:** PsycINFO
- Full Text:** Available from *National Library of Medicine* in [Sleep](#)

**133. Alcohol withdrawal prevention: A randomized evaluation of lorazepam and ethanol-A pilot study.**

- Citation:** American Journal of Critical Care, September 2013, vol./is. 22/5(398-407), 1062-3264 (Sep 2013)

**Author(s):** Fullwood, Joyce E; Mostaghimi, Zhila; Granger, Christopher B; Washam, Jeffrey B; Bride, Wanda; Zhao, Yanfang; Granger, Bradi B

**Correspondence Address:** Granger, Bradi B.: DUMC, 3322, Trent Drive, Durham, NC, US, 27710, Bradi.granger@dm.duke.edu

**Institution:** Cardiac Intensive Care Unit, Duke University Hospital, Durham, NC, US; Cardiac Intensive Care Unit, Duke University Hospital, Durham, NC, US; Cardiac Intensive Care, Duke Clinical Research Institute, Durham, NC, US; Cardiac Intensive Care Unit, Duke University Hospital, Durham, NC, US; Cardiovascular Services, Duke University Hospital, NC, US; Duke Translational Nursing Institute, Durham, NC, US; Duke University Health System, Duke University School of Nursing, Durham, NC, US

**Language:** English

**Abstract:** Background: Alcohol withdrawal syndrome, characterized by confusion, agitation, and hallucinations, decreases the safety of patients with acute myocardial infarction. Unexpected hospitalization and sudden cessation of alcohol consumption may increase in-hospital complications and length of stay and even precipitate death. Purpose: To perform a randomized evaluation of lorazepam and ethanol/lorazepam to evaluate the safety and efficacy of these 2 strategies for preventing alcohol withdrawal syndrome in patients with acute coronary syndromes. Methods: Patients (n = 57) with myocardial infarction were screened for alcohol dependence by using the CAGE questionnaire and randomized to treatment with lorazepam or ethanol with lorazepam. Demographics and complication rates were analyzed by using X2 tests (categorical variables) and f tests (continuous variables). Safety (composite complication rates) of the treatment strategy was evaluated by using the Fisher exact test, and length of stay by using the Wilcoxon rank-sum test. Results: Safety-associated complication rates (self-extubation, delirium tremens, reinfarction) did not differ between groups (24% lorazepam vs 18% ethanol; P = .56). Days spent in the cardiac intensive care unit (7% lorazepam vs 2% ethanol; P = .32) and overall hospital stay (6% lorazepam vs 6% ethanol; P = .72) did not differ between the 2 groups. Conclusions: These preliminary findings suggest that a randomized evaluation of treatment strategies to prevent complications associated with alcohol withdrawal in patients with acute myocardial infarction is safe and feasible. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: American Association of Critical-Care Nurses; YEAR: 2013

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

**Subject Headings:** [\\*Alcohol Withdrawal](#)  
[\\*Alcoholism](#)  
[\\*Drug Therapy](#)  
[\\*Lorazepam](#)  
[\\*Treatment Effectiveness Evaluation](#)  
[Hallucinations](#)  
[Myocardial Infarctions](#)

**Source:** PsycINFO

**Full Text:** Available from *EBSCOhost* in *American Journal of Critical Care*

#### 134. Domestic violence and mental health.

**Citation:** Domestic violence and mental health., 2013(18-28) (2013)

**Author(s):** Trevillion, Kylee; Oram, Sian; Howard, Louise M

**Institution:** King's College London, United Kingdom; King's College London, United Kingdom; King's College London, United Kingdom

**Language:** English

**Abstract:** (from the chapter) Domestic violence has been shown to be associated with a range of mental health problems, including depression, post-traumatic stress disorder (PTSD), suicidal ideation, substance misuse, functional symptoms, and the exacerbation of psychotic symptoms (Golding, 1999; Campbell, 2002; Neria et al, 2005; Trevillion et al,

2012). In this chapter we review literature on the prevalence of domestic violence among men and women with mental disorders and present evidence that suggests a bi-directional causal relationship between domestic violence and mental disorders. We focus largely on intimate partner violence among women, but where data are available we present findings on domestic violence perpetrated by other family members and violence among men. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Domestic Violence](#)  
[\\*Intimate Partner Violence](#)  
[\\*Mental Health](#)  
[Causality](#)  
[Drug Abuse](#)  
[Major Depression](#)  
[Posttraumatic Stress Disorder](#)  
[Psychiatric Symptoms](#)  
[Suicidal Ideation](#)  
[Suicide](#)  
[Symptoms](#)

**Source:** PsycINFO

### 135. Depression in the context of alcoholism and other substance-use disorders.

**Citation:** Clinical handbook for the management of mood disorders., 2013(234-244) (2013)

**Author(s):** Nunes, Edward V Jr.; Levin, Frances R

**Institution:** Columbia University, New York State Psychiatric Institute, New York, NY, US; Columbia University, New York State Psychiatric Institute, New York, NY, US

**Language:** English

**Abstract:** (from the chapter) Depressive disorders and alcohol or other substance use disorders commonly co-occur. Multiple community-based surveys have shown that the presence of major depression or dysthymia at least doubles the odds of an alcohol or other drug-use disorder. Between 20% and 50% of patients presenting for treatment of an alcohol or drug problem may manifest major depression. Conversely, substance use problems are also common among patients presenting for treatment of depression, particularly when one includes nicotine dependence. Depression has a negative prognostic effect on substance-use disorders, being associated with increased severity and worse treatment response. Alcoholism among depressed patients is associated with greater severity of depression-earlier onset, more episodes of major depression, and increased suicide risk. Thus, it is important for clinicians to be alert to this co-morbidity and be prepared to account for it in diagnostic assessment and treatment planning. This chapter discusses diagnosis and evaluation and treatment of co-occurring depression and alcoholism and other substance use disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Comorbidity](#)  
[\\*Drug Abuse](#)  
[\\*Major Depression](#)  
[\\*Treatment Planning](#)  
[Dysthymic Disorder](#)

**Source:** PsycINFO

### 136. Association between the commercial characteristics of psychotropic drugs and their off-label use.

**Citation:** Medical Care, November 2012, vol./is. 50/11(940-947), 0025-7079;1537-1948 (Nov 2012)

**Author(s):** Graziul, Christopher; Gibbons, Robert; Alexander, G. Caleb

**Correspondence Address:** Alexander, G. Caleb: Department of Epidemiology, Section of General Internal Medicine, Johns Hopkins Bloomberg School of Public Health, 615 N. Wolfe Street W6035, Baltimore, MD, US, 21205, galexand@jhsph.edu

**Institution:** Department of Sociology, University of Chicago, Chicago, IL, US; Department of Medicine, University of Chicago, Chicago, IL, US; Department of Medicine, Section of General Internal Medicine, University of Chicago, Chicago, IL, US

**Language:** English

**Abstract:** Background: Off-label prescribing, or the use of a medicine for non-Food and Drug Administration (FDA)-approved indications, is especially common for psychotropic therapies and often lacks scientific support. We quantified the association between 4 commercial characteristics of prescription medicines-product age, therapeutic class age, drug volume, and promotional expenditures- and off-label use of antidepressants, antipsychotics, and mood stabilizers from 1998 through 2009. Methods: We linked data from the IMS Health National Disease and Therapeutic Index, a nationally representative audit of officebased physicians, with data from FDA@gov and the drug compendium DrugDex, to derive information regarding off-label use. Our primary outcome was the rate (per 1000 uses) with which a drug was prescribed for non-FDA-approved indications during a given calendar year. We used mixed-effects regression models with random intercepts for each drug, adding measures of commercial characteristics as fixed effects within this model. Results: From 1998 through 2009, the average proportion of all uses that occurred off-label was 23.3% for antidepressants, 60.7% for antipsychotics, and 54.2% for mood stabilizers. There was a positive association between the annual rate of off-label use and drug volume [incidence rate ratio (IRR), 1.41; 95% confidence intervals (CI), 1.32-1.50], although the strength of this association was not uniform across the therapeutic classes examined. There was also a small but statistically significant association between product age (IRR, 0.96; 95% CI, 0.94-0.98) and class age (IRR, 1.03; 95% CI, 1.01-1.06) and the rate of off-label use, also varying across therapeutic class. There was a statistically significant inverse association between promotional expenditures and off-label use (IRR, 0.94; 95% CI, 0.93-0.96) when controlling for our other commercial characteristics. These associations were similar when examining scientifically unsupported rather than all off-label use. Conclusions: Our findings suggest that drug prescription volume, rather than product age or therapeutic class age, should be scrutinized further to identify settings where the public health impact of unsupported off-label prescribing may be particularly important. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Lippincott Williams & Wilkins; YEAR: 2012

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

**Subject Headings:** [\\*Antidepressant Drugs](#)  
[\\*Drug Usage](#)  
[\\*Neuroleptic Drugs](#)  
[\\*Prescribing \(Drugs\)](#)  
[\\*Mood Stabilizers](#)  
[Commercialization](#)

**Source:** PsycINFO

**Full Text:** Available from *Ovid* in [Medical Care](#)

### 137. Impairment of inhibitory control in response to food-associated cues and attentional bias of obese participants and normal-weight controls.

**Citation:** International Journal of Obesity, October 2012, vol./is. 36/10(1334-1339), 0307-0565;1476-5497 (Oct 2012)

**Author(s):** Loeber, S; Grosshans, M; Korucuoglu, O; Vollmert, C; Vollstadt- Klein, S; Schneider, S; Wiers, R. W; Mann, K; Kiefer, F

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**Language:** English

**Abstract:** Objective: Starting from a model of impaired response inhibition and salience attribution for addictive behaviour we investigated whether obese participants show a greater impairment of inhibitory control in response to food-associated cues compared with neutral stimuli and whether this is seen in normal-weight control subjects. In addition, we questioned whether an attentional bias towards food-associated cues can be observed in an early stage of information processing. Design: Control-group study including the administration of behavioural tasks (that is, go/no-go task with food-associated and neutral words, visual dot probe task with food-associated and neutral pictures) and self-reported measures of eating behaviour and impulsivity. Results: Although self-reported measures indicated disinhibition of eating behaviour of obese patients, we found that food-associated stimuli induced an impairment of inhibitory control in both obese participants as well as normal-weight controls. Results from the visual dot-probe task indicated that food-associated cues did not modulate attention allocation in a very early stage of information processing, which suggests that the incentive salience of food-associated stimuli might be lower than that of drug-associated cues. Conclusions: These findings are not in line with hypotheses derived from models of addictive behaviour and call into question that an impairment of inhibitory control in response to food-associated cues and salience attribution might be at the core of obesity. Future studies using larger sample sizes and refined experimental procedures are warranted to further investigate mechanisms controlling food intake in obesity. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Macmillan Publishers Limited; YEAR: 2012

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

**Subject Headings:** [\\*Obesity](#)  
[\\*Weight Control](#)  
[Cues](#)  
[Food](#)

**Source:** PsycINFO

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

**138. A 12-week randomized, double-blind, placebo-controlled multicenter clinical trial of acamprosate for the treatment of alcohol dependence.**

**Citation:** Chinese Mental Health Journal, December 2012, vol./is. 26/12(927-932), 1000-6729 (Dec 2012)

**Author(s):** Sun, Wei; Xu, Xiu-Feng; Huang, Ji-Zhong; Tan, Qing-Rong; Deng, He-Huang; Li, Ke-Qing; Gao, Jun-Yu; Qiu, Yu-Jia; Li, Bing

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**Institution:** Peking University, Institute of Mental Health, Key Laboratory of Ministry of Health, Beijing, China; First Affiliated Hospital, Kunming Medical University, Kunming, China; Shanghai Mental Health Center, Shanghai, China; First Affiliated Hospital, Fourth Military Medical University, Xian, China; Guangzhou Psychiatric Hospital, Guangzhou, China; Mental Health Center of Hebei Province, Baoding, China; Hospital Academy of Military Medical Sciences, Beijing, China; Peking University, Institute of Mental Health, Key Laboratory of Ministry of Health, Beijing, China; Peking University, Institute of Mental Health, Key Laboratory of Ministry of Health, Beijing, China

**Language:** Chinese

**Abstract:** Objective: To evaluate the efficacy and safety of acamprosate in treating patients with alcohol dependence. Methods: A randomized, double-blind, placebo-controlled multicenter clinical trial was conducted. The diagnosis of alcohol dependence was made according to the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV) criteria All 230 patients received 12 weeks treatment with either acamprosate (weight < 60 kg, 1332 mg/d; weight > 60 kg, 1998 mg/d. n = 116) or placebo (n = 114). The primary efficacy measures were the cumulative abstinence duration (CAD) and corrected cumulative abstinence duration (CCAD), relapse rate of every visit, time to first drink. The secondary efficacy measures were the drinking times, the number of drinks per drinking day, visual analog scale (VAS) for alcohol craving, -glutamyl transferase. The safety measures were the vital signs, laboratory tests, electrocardiography and adverse event report. Results: There were no significant differences of all the primary efficacy measures [CAD, (43.7 + 34.7) d vs. (38.9 + 35.8) d; CCAD, (52.0 + 41.3) % vs. (46.3 + 42.6) %] and adverse event report rates (22.6% vs. 19.3%) between acamprosate group and placebo group. But the rate of withdraw and less than 5 standard drinks per day (88.1% vs. 78.7%) was higher and the points of visual analog scale for alcohol craving [(2.6 + 2.3) vs. (3.3 + 2.9)] was lower in acamprosate group at the last visit (Ps < 0.05). The most common treatment-related adverse events in acamprosate group were diarrhea and erythra. Conclusion: The results show that acamprosate appears to be more efficacious for decreasing the number of drinks per drinking day and alcohol craving than placebo. It has similar safety to placebo in treatment of alcohol dependence. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Clinical Trials](#)  
[\\*Drug Therapy](#)  
[\\*Placebo](#)  
[\\*Acamprosate](#)

**Source:** PsycINFO

### 139. In voice of experience: Coping strategies in adolescents who completed a brief intervention program in alcohol consumption.

**Original Title:** En voz de la experiencia: Estrategias de enfrentamiento en adolescentes que concluyeron un programa de intervencion breve en consumo de alcohol.

**Citation:** Salud Mental, November 2012, vol./is. 35/6(505-512), 0185-3325 (Nov-Dec 2012)

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<b>Language:</b>	Spanish
<b>Abstract:</b>	The purpose of this study was to identify the circumstances of the risk of alcohol consumption and the strategies to successfully handle a relapse or the abuse in a group of adolescents who completed a brief intervention program. The study was conducted at the Autonomous University of Aguascalientes between 2007 and 2011 involving 70 adolescent students. The average age of participants was 16.2 years (51 men and 39 women). Participants responded to a record of confrontation during the follow-up sessions, where they described two specific situations of risk and referred which strategies they put in place not to consume or avoid the abuse. The collection and analysis of data followed a mixed approach of research, which enabled the analysis and linking of quantitative and qualitative data in one study to answer the problem statement. We performed the transcription of the text of each record, assigning a code to each type of event consumption potential through AMXQDA software [Version 5.0]. The analysis results indicated that there are three strategies used by adolescents to resist consumption: a cognitive level, where they remember the goals proposed in the intervention and the negative consequences; a behavioral level, depending on reactions to the situation presented; and a level of emotion, reflecting a sense of mood. The findings are discussed in the light of analyzing the relevance of such studies, that rescue the "live voice" experience of the participants and place the problem of consumption in a context, which includes the understanding and meaning of the users themselves, the role of consumption in their midst, and the different social and scenarios involved. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
<b>Publication Type:</b>	Journal; Peer Reviewed Journal
<b>Subject Headings:</b>	*Adolescent Attitudes *Alcoholism *Coping Behavior Experiences (Events) Intervention
<b>Source:</b>	PsycINFO

#### 140. Biochemical markers for risk assessment of seizures in withdrawal syndrome.

<b>Original Title:</b>	Uso de marcadores bioquímicos para valoración de riesgo de crisis convulsivas en el síndrome de supresión etílica.
<b>Citation:</b>	Salud Mental, November 2012, vol./is. 35/6(499-504), 0185-3325 (Nov-Dec 2012)
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<b>Language:</b>	Spanish
<b>Abstract:</b>	Withdrawal signs and symptoms are frequently minor but can develop into a severe, even fatal, condition. Clinical manifestations of the AWS begin as soon as the alcohol consumption is interrupted or diminished after a long period of ingestion of great quantities of alcohol. The clinical manifestations include symptoms of autonomic hyperactivity, like sweating, tachycardia over 100 bpm, tremor, insomnia, nausea or vomiting, transitive visual, tactile, or hearing hallucinations, or even illusions, psychomotor agitation, anxiety and epileptic crisis. Objective: Our aim is to assess the usefulness of several biochemical markers and the risk of seizures associated with alcohol withdrawal. Methods: This study included 52 inpatients which were assessed with the Ciwo-Ar scale in order to determine the severity of the withdrawal. They were assessed too with the AUDIT scale to determine the risk and abuse of the intake of alcohol. We also obtained a blood sample to determine the levels of several biomarkers (AST, ALT, GGT, FA, HOMOCISTEINE, and MCV). We compared the two groups (patients with seizures vs. patients without seizures). Student T and Mann Whitney's U tests, and ROC curves were applied. Results: We observed a statistical difference between the groups in

the levels of alkaline phosphatases. The levels were higher in patients without seizures (148.8 + 69.58UI) compared with the patients with seizures (1 13 + 55.1 UI). No differences were observed in other groups. Conclusion: The patients with higher levels of alkaline phosphatases had major risk of seizures. There were no elevations in the serum level of homocysteine in both groups. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcohol Withdrawal](#)  
[\\*Alcoholism](#)  
[\\*Biological Markers](#)  
[\\*Seizures](#)  
[\\*Risk Assessment](#)

**Source:** PsycINFO

#### 141. The new businessman: Pathways from drug use to drug dealing in party contexts.

**Original Title:** Los nuevos empresarios: Trayectoria del uso a la venta de drogas en contextos de fiesta.

**Citation:** Salud Mental, November 2012, vol./is. 35/6(475-481), 0185-3325 (Nov-Dec 2012)

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**Language:** Spanish

**Abstract:** Drugs use at party contexts has increased in recent decades. Drugs dealing facilitates consumer access to substances, whose sales practices vary according to drugs use, places for the consumption and the drug social function. Drug dealing is socially constructed from a set of practices ranging from reasons to dealing and those related to the consolidation as a common practice. The aim of this research was to describe and analyze the drugs users' experience in party contexts, about their dealer's construction process. An interpretative multiple-case study with the snowball technique was carried out to get the participants. The information was obtained by a semi-structured interview and nonparticipating observation at the dealing places. The information obtained points out the group's participation on the selection of the dealer as the initiation of drugs dealing, the extroversion features and communication skills as an important profile to be a dealer; specially, the capability to satisfy the group's emotional request through the drugs. Also, benefits as acceptance, protection and the warmth from the group and the economical earning. The dealer/businessmen consolidation is socially constructed according to the new identity assumed, the group participation and the specific activities OS a business. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Business](#)  
[\\*Drug Usage](#)  
[\\*Social Interaction](#)  
[Chemical Exposure](#)

**Source:** PsycINFO

#### 142. Drug use in Mexico: Results from the 2011 National Addictions Survey.

- Original Title:** El consumo de drogas en Mexico: Resultados de la Encuesta Nacional de Adicciones, 2011.
- Citation:** Salud Mental, November 2012, vol./is. 35/6(447-457), 0185-3325 (Nov-Dec 2012)
- Author(s):** Villatoro, Jorge; Medina-Mora, M. Elena; Bautista, Clara Fleiz; Lopez, Midiam Moreno; Robles, Natania Oliva; Gamino, Marycarmen Bustos; Ito, Diana Fregoso; de Lourdes Gutierrez Lopez, Maria; Buenabad, Nancy Amador
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- Language:** Spanish
- Abstract:** Introduction: In the international context, Mexico is a country with low drug use level, in turn, it shows an increase when considering the most recent epidemiologic trends. In order to maintain an updated analysis of drug use in general population and to identify the most at risk groups, the Notional Survey of Addictions (ENA) was held in 2011. Objective: The aim of the study was to determine the lifetime prevalence for any drug and any illegal drug use at a national and regional level, in population aged 12 to 65 years. Also, to acknowledge drug consumption trends since 2002 in Mexico. Material and methods: ENA 2011 survey is a randomized, multistage probabilistic study. It is representative at a national level and also for eight regions of the country, including rural and urban population. The sample was 3 849 adolescents and 1 2 400 adults who answered a computerized version of a standardized questionnaire containing sections of tobacco, alcohol, medical drugs (opiates, tranquilizers, sedatives, amphetamines) and illegal drugs (marijuana, cocaine, crack, hallucinogens, inhalants, heroin and methamphetamine). All participants read and signed an informed consent. Emphasis was made on the voluntary and confidential use of the information. Results: The national lifetime prevalence of any drug grew between 2002 and 2011, increasing significantly from 5.0% to 7.8%, while consumption of any illegal drugs increased from 4.1 % to 7.2%. By sex, in men, any drug use increased from 8.6% to 13%. Illegal drugs increased from 8.0% to 12.5%. In women, use of any drug increased from 2.1% to 3.0% and use of any illegal drug increased from 1.0% to 2.3%. Marijuana is the first drug of choice (6.5%) followed by cocaine (3.6%). Considering regions, any drug consumption grew significantly in the Western (5.5% to 10.3%), Northeast (5.5% to 10.3%), North Central (7.5% to 9.2%) and South Central (4.2% to 7.5%). As for illegal drugs, there is also a statistically significant increase in these regions, however, growth was proportionally bigger in South Central region, going from 3.5% to 6.8%. Conclusions: Results from this study indicate a growth in the consumption of illegal drugs from 2002 to 2011, especially in marijuana. It also shows that men from 18 to 34 years are the most affected by this consumption, while increases in adolescent men have been low. Moreover, the study shows that those who have received some type of prevention, showed a smaller consumption prevalence, indicating that further work is needed in this area with young people to consolidate activities of health promotion and drug use prevention, working with infant population is needed, including a systematic evaluation of the actions mentioned above. In the international context, data from this study confirms that Mexico continues reporting low levels of drug consumption. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Addiction](#)  
[\\*At Risk Populations](#)

\*Drug Usage  
Illegal Drug Distribution  
Epidemiology

**Source:**

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