

# 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. Adult children of alcoholics and spirituality experiences: Differences from children of non-alcoholics in substance abuse treatment facilities.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Lee, Barry S

**Institution:** Adler School of Professional Psychology, US

**Language:** English

**Abstract:** The present study used a correlational design to examine the relationship between one's status as an adult child of an alcoholic (ACOA) or of a non-alcoholic (non-ACOA) household and one's level of spirituality among adults involved in substance abuse recovery. The study's hypothesis was that adult children of alcoholic family systems would reveal lower levels of spirituality compared to adult children of non-alcoholics on a measure of spirituality. Fifty-five participants (ACOA, n = 32; non-ACOA, n = 23) were selected from three outpatient substance abuse treatment programs. Spirituality was measured by the Spiritual Well-Being Scale, which yields three primary scores: Spiritual Well-Being, Religious Well-Being, and Existential Well-Being. The total Spiritual Well-Being score was utilized when examining the results in relation to the research hypothesis. Results of the study did not support the hypothesis, as the mean scores for the ACOA population were slightly higher than the mean score for non-ACOAs. The study's results suggest that spirituality is an important element for all of the participants. Possible explanations for the surprisingly high spirituality scores for ACOAs are discussed. Future research should examine additional variables such as the nature of the alcoholic household and should consider an alternate measure of spirituality. Efforts should be made to obtain a much larger sample, and there should be greater diversity of participants including recruiting participants from additional sources. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Aging](#)  
[\\*Spirituality](#)  
[Alcoholism](#)  
[Children of Alcoholics](#)  
[Treatment Facilities](#)

**Source:** PsycINFO

### 2. The effect of counselor changes and ruptures in the therapeutic alliance on treatment outcome for methadone maintenance clients in an outpatient clinic.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Williamson, Garry

**Institution:** The Wright Inst., US

**Language:** English

**Abstract:** The misuse of opioids is a serious problem in the United States, resulting in liver or kidney disease, spontaneous abortion, fatal overdose and physical dependence. Drug related risk behaviors include unsafe injection practices, unprotected sex and compulsive drug seeking without regard to consequences (National Institute on Drug Abuse, 2013). Medication-assisted treatment combined with drug counseling is the most widely used and empirically supported treatment approach for opiate addiction (van den Brink & Haasen, 2006). The client counselor bond or therapeutic alliance has been found to be a critical predictor of substance abuse treatment efficacy (Martin, et al., 2000). Little or no research has examined the effect of whether changes in counselors affect treatment outcome by disrupting the therapeutic alliance for patients in methadone maintenance programs. This study examined how disruptions in the therapeutic alliance resulting from counselor changes affect opiate treatment adherence and opiate relapse among patients in

a methadone treatment program. The hypothesis states that changes in counselors will predict increased percentage of missed counseling sessions and methadone doses as well as increased percentage of positive drug screens. Specifically, a correlation matrix was produced to assess the inter-correlations of all the demographic and clinical variables of the study. Multiple regressions were performed which included all variables and all inter-correlations between variables. The general finding was the absence of significant statistical associations for any of the variables. However, there were some trends. Two multivariate analyses were performed to test relationship between counselor changes and program adherence, specifically whether number of counselor changes would predict percentage of missed doses, controlled for demographic variables and whether counselor changes would predict percentage of absences controlling for the same demographic variables. A second set of linear regression analyses tested whether counselor changes would predict an increased frequency of positive UAs for opiates given the same control variables. We did not perform multiple regression analysis that included both compliance and urinalysis variables because there were no significant independent predictors. The regression analysis did confirm the trend toward more counselor changes and fewer counseling sessions as well as the trend of increased counselor change and fewer clean drug screens. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract  
**Subject Headings:** \*Drug Therapy  
 \*Spontaneous Abortion  
 Kidneys  
 Methadone  
 Methadone Maintenance  
 Side Effects (Drug)  
 Therapeutic Alliance  
 Treatment Outcomes  
 Drug Seeking  
**Source:** PsycINFO

### 3. Understanding the experiences of latter day saint women with same sex attractions.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Kelley, Carrie L

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

**Language:** English

**Abstract:** Gay and lesbian individuals hoping to maintain their traditional faith grapple with the difficulties of experiencing same sex attractions while participating in a religion opposing homosexual behavior. The silence of this struggle leaves many who are both gay and Christian or, as is specifically addressed in this study, lesbian and Mormon, feeling invisible and unheard. In-depth interviews were conducted to explore the experiences of six LDS women with same sex attractions as they managed the conflict between their same gender attractions and LDS doctrine. How affiliation with the family, the same sex community, and the Mormon culture increased or decreased this conflict were examined. Also explored was how LDS lesbians primarily viewed their attractions (i.e. as biological, a choice, or an addiction.) Finally, how this conflict influenced their religious behavior and personal relationship with God was examined. Findings amongst participants were as follows. Families were generally supportive of the individual, but heightened the conflict by awkwardly mishandling sensitive issues regarding same sex attractions. Some women perceived members of the Mormon community as judgmental and unaware of the difficulties individual with same sex attractions experience. Most participants perceived the gay community as having lower moral values than they had, and as unwelcoming of those who choose to maintain their traditional religious beliefs. The majority of women were less interested in the cause of their same sex attractions and more focused on finding peace while managing their sexual attractions and religious beliefs. The two women who accepted the biological perspective were more critical of the Church of Jesus

Christ of Latter Day Saint's stance on homosexuality. Those who reported having helpful ecclesiastical leaders, previous spiritual experiences, and a belief that the attractions had some environmental causes were less likely to experience a prolonged decrease in religious practices. All continued to believe in God, although some questioned particular aspects of traditional church precepts. Most felt their relationship with God had deepened as they worked on the issues surrounding their same sex attractions. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*God Concepts](#)  
[\\*Sexual Attraction](#)  
[Human Females](#)  
[Lesbianism](#)  
[Religion](#)  
[Single Sex Environments](#)  
[Sociocultural Factors](#)  
[Faith](#)  
[Mormons](#)

**Source:** PsycINFO

#### 4. Characterization of morphine self-administration following spinal cord injury.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Woller, Sarah Ann

**Institution:** Texas A&M U., US

**Language:** English

**Abstract:** Approximately two-thirds of patients will experience pain following spinal cord injury (SCI). This pain can arise as an immediate consequence of SCI, or can develop over time into chronic, neuropathic pain. Individuals are frequently prescribed opioid analgesics, including morphine, for the treatment of pain in both the acute and chronic phases of SCI. Yet, despite the prevalence of opioid use, no studies have examined the addictive potential of opioids, or their secondary effects, following spinal injury. These experiments used a clinically relevant self-administration paradigm to examine both addiction and functional recovery after morphine administration. To assess morphine administration in the acute phase of SCI, animals were placed in operant chambers 24-hours following spinal injury. In the chambers, depression of a reinforced lever resulted in an intravenous infusion of morphine (or vehicle). Animals were placed in the chambers for 7, 12-hour sessions and could administer up to 30 mg of morphine per session. Morphine self-administration was also examined in the chronic phase of injury. Animals were placed into operant chambers for 7, 12-hour sessions beginning 14 or 35 days after injury. The amount of morphine administered, as well as recovery of locomotor function and general health, was compared across subjects with SCI and sham (no injury) controls. In the acute phase of injury, SCI significantly reduced self-administration of morphine, but administration led to decreased recovery of locomotor function and weight loss. In the chronic phase of injury, self-administration did not differ between contused and sham animals. All subjects administered the full amount of morphine available each day. In this phase of injury, morphine administration led to significant weight loss, but did not attenuate recovery of locomotor function. These studies suggest that spinal injury reduced the addictive potential of morphine in the acute, but not the chronic, phase of SCI. However, acute administration of high doses of morphine decreased recovery of locomotor function. Morphine should not be used in this phase of injury for the clinical treatment of pain. In the chronic phase, opioid use must be closely monitored as use may result in addictive behavior. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Major Depression](#)  
[\\*Neuropathic Pain](#)  
[Drug Therapy](#)

[Morphine](#)  
[Spinal Cord](#)  
[Spinal Cord Injuries](#)

**Source:** PsycINFO

**5. An examination of the relationships between causal attributions for smoking and smokers' treatment seeking and quit intentions: A structural equation modeling approach.**

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Voci, Sabrina C

**Institution:** U Windsor, Canada

**Language:** English

**Abstract:** With increasing knowledge of the role that genetics play in the development and treatment of nicotine dependence, it is expected that in the future smoking cessation treatment will be able to be tailored to a smoker's genetic profile. Despite anticipated benefits such as improved quit rates, concerns have been raised about the impact of genetic testing results on perceived control over smoking, motivation to quit, and treatment seeking behaviour. One potential mediator of such outcomes are causal attributions, the causal explanations people form for behaviours and events, which evidence suggests can be altered by genetic testing feedback. The purpose of the current study was to perform a comprehensive assessment of causal attributions for current smoking and to examine the associations between these attributions and variables expected to predict future smoking cessation behaviour. Two structural equation models were tested that represented a series of hypotheses regarding how causal attributions influence intentions to quit smoking and intentions to seek smoking cessation treatment, via beliefs about perceived control over smoking and perceived effectiveness of treatment. Causal attributions were represented by causal types (biological, psychological, social, and stress) in one model and by causal dimensions (locus of causality, stability, internal control, and external control) in a second model; both models were otherwise identical. Participants were 418 current daily smokers in Ontario, Canada, that had previously participated in the Ontario Health Study. Overall, participants most frequently attributed their smoking to habit, addiction, and/or stress, while attributions to genetics were among the least frequent. Additionally, knowledge that genetics play a role in determining level of addiction to nicotine was not pervasive. Study findings supported the hypothesized model in which causal dimensions directly predicted level of perceived control over smoking (personal or via treatment), which in turn predicted perceived effectiveness of pharmacological and psychosocial smoking cessation treatments, intentions to quit smoking, and intentions to seek cessation treatment. Results failed to find similar associations with causal types. Current findings can be applied to future research on the effects of providing genetic testing feedback to smokers in clinical settings, and may have wider applicability to other health threats. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Attribution](#)  
[\\*Intention](#)  
[Drug Therapy](#)  
[Genetics](#)  
[Nicotine](#)  
[Smoking Cessation](#)  
[Structural Equation Modeling](#)  
[Tobacco Smoking](#)

**Source:** PsycINFO

**6. The effect of perceived parental style on hispanic adults receiving outpatient substance abuse treatment in south texas.**

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Palacios, Elizabeth C

**Institution:** U Texas - Pan American, US

**Language:** English

**Abstract:** Hirschi's (1969) Social Control Theory proposes that parental relationships serve as a shielding factor and has positive impact in the decreasing delinquency (i.e. substance use/abuse) in young people. This theory provides a framework for understanding substance use/abuse in young adult populations. Other factors including gender, cultural influences, family composition and birth order were also examined in this study. The Drug Abuse Screening Test - 20 (Skinner, 1982), the Parental Authority Questionnaire (Buri, 1991), and a demographic scale were utilized in a population of 182 adults in outpatient substance abuse treatment centers in South Texas, Texas Gulf Coast and areas in the south-central part of Texas to examine the relationship between substance abuse, gender, birth order, family composition and perceived parenting style. Results suggested correlations between substance abuse and gender ( $r=.061$ ), birth order ( $r=.053$ ), perceived parenting style for both parents (mother,  $r=-.004$ ; father  $r=.083$ ) and family composition ( $r=-.010$ ) at the  $p<.05$  level. A multiple linear regression showed  $R^2=.051$ , adjusted  $R^2=-.024$ ,  $F(5,176)=1.894$ ,  $p=.098$ , indicating no significant findings. Implications for further research are included regarding substance abuse prevention programs. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Drug Abuse](#)  
["\\*Latinos/Latinas"](#)  
[Drug Abuse Prevention](#)  
[Mothers](#)  
[Outpatients](#)  
[Parenting Style](#)  
[Social Control](#)

**Source:** PsycINFO

#### 7. The contribution of the recovery self assessment to the measurement of illness management and recovery.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Knupp, Paul E Jr.

**Institution:** Drake U., US

**Language:** English

**Abstract:** Variables contributing to recovery from mental illness and substance abuse were investigated. These variables included empowerment, sense of community, illness management, self-esteem, self-determination, and the variables of agency, program, gender, age, general type of service, race, and length of service. The study was entirely from the person in recovery perspective, emphasizing self-determination. Participants came from agencies and were currently in recovery programs. The five measures were the Making Decisions - Empowerment Scale (MDE), the Illness Management and Recovery Client Self-rating (IMR), the Sense of Community Index-2 (SCI-2), the Rosenberg Self-Esteem Scale (RES), and the Recovery Self Assessment-Revised (RSA-R). Significant correlations existed between the IMR, the RES, and the RSA-R, but not between the RES and the RSA-R. None of the other variables proved significant in predicting any of the measures. The IMR Client Self-rating served as the dependent variable in a hierarchical multiple regression. Once again, the RES and the RSA-R were the only significant predictors of the IMR. Other hierarchical multiple regressions with the RES and the RSA-R as the dependent variable supported a new theory of recovery. Implications for assessment conclude the discussion of these results. In general, the

RSA-R proved itself a valuable measure of recovery in the sample. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Decision Making](#)  
[\\*Self Esteem](#)  
[Drug Abuse](#)  
[Mental Disorders](#)  
[Multiple Regression](#)  
[Self Evaluation](#)

**Source:** PsycINFO

#### 8. The challenge of treating adolescent addiction and mental illness: A program evaluation.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Frank, Ashley Ann

**Institution:** Adler School of Professional Psychology, US

**Language:** English

**Abstract:** Contemporary research suggests that adolescent substance abuse continues to be a major national concern. Several therapeutic approaches have been employed to treat adolescents with emotional, behavioral, and substance abuse problems, however; family-based therapies (FBT) have become the most systematically researched and empirically supported treatment modality. The aim of the present study was to examine an adolescent program that utilizes FBT to assess whether it provides effective and innovative models of substance abuse and mental health treatment. The second goal of the study was to diagnose the program's strengths and weaknesses and devise a plan to improve the program. Adolescents and their guardians were asked to complete the Teen Addiction Severity Index and The Youth Services Survey (Youth and Family versions). Results revealed that adolescents' participation in the program statistically improved their quality of family relationships, but did not statistically improve their school functioning. Additionally, adolescents did not have a statistically significant difference in self-rating of their overall functioning when compared to their guardians. Furthermore, adolescents' improvement in emotional functioning was not statistically significantly correlated with their satisfaction with services. These findings suggest that the program is capable of providing adolescents efficient and effective mental health and substance abuse services and can offer innovative family therapy techniques and interventions. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Mental Disorders](#)  
[Addiction](#)  
[Health](#)  
[Program Evaluation](#)

**Source:** PsycINFO

#### 9. Sex differences in responses to chronic prenatal nicotine exposure in rats.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Hoegberg, Bethany Grace

**Institution:** The George Washington U., US

**Language:** English

**Abstract:** Cigarette smoking is one of the leading causes of preventable death and disease in developed countries. Despite the known risk, currently 19% of the adult population in the

United States smoke cigarettes (Centers for Disease Control and Prevention, 2013). Early exposure to nicotine during development is associated with an increased risk of nicotine addiction in adults. Early exposure includes both initiation of smoking during adolescence and prenatal nicotine exposure. Adolescence is the most common period for the initiation of recreational drug use, and 88% of current adult smokers used their first cigarette before the age of 18 (Public Health Service 1994). Evidence also indicates differences between males and females in addiction rates and smoking behavior. Tobacco is also the most commonly abused substance during pregnancy: tobacco use occurs in an estimated 14% of pregnancies in the United States. Infants exposed to tobacco smoke in utero are more likely to be addicted to nicotine. In addition, females exposed to tobacco smoke through the mother appear to progress from initiation of tobacco smoking to addiction more quickly than non-exposed females. All of the pharmacological effects of nicotine are mediated by neuronal nicotinic acetylcholinergic receptors (nAChRs), which are widespread throughout the autonomic and central nervous system. In the CNS, nAChRs are primarily presynaptic, and are involved in modulating the release of several neurotransmitters, including dopamine, norepinephrine, GABA, glutamate, and acetylcholine. The involvement of these receptors in the release of neurotransmitters suggests that nicotine use may have widespread effects on important neural pathways in the CNS. In order to help elucidate the underlying causes of sex differences in response to nicotine, we investigated nicotinic receptor regulation and genome expression differences in male and female rats following adolescent and prenatal nicotine exposure. To do this we exposed rats to nicotine under various treatment paradigms using subcutaneously implanted miniosmotic pumps containing either nicotine or saline. Using [3H]epibatidine to label assembled receptors and subunit specific antibodies to characterize receptors, we found sex differences in  $\alpha 4\beta 2$  receptor regulation in the cerebral cortex at both early (PN28) and late (PN42) adolescence. These results imply sex differences in sensitivity to nicotine exposure in early and late adolescence. In addition, we found sex differences in  $\alpha 5\beta 1$  receptor regulation in the cerebral cortex following chronic prenatal nicotine exposure in rats at PN14. After using a fostering paradigm to isolate nicotine exposure to either in utero only or postnatal only exposure, we determined the sensitivity seen at PN14 in males required a combination of both in utero and postnatal exposure to manifest. Finally, in order to help clarify the underlying basis of behavioral differences in adolescents exposed to nicotine prenatally, we identified persistent alterations in genome expression in dopaminergic cell bodies using microarray analysis of the VTA of adolescent male and female rats following chronic prenatal nicotine exposure. With this method we identified dramatic differences in gene expression between males and females. These changes suggest that disruptions in circadian rhythm regulation may contribute to an increased risk of nicotine addiction in adolescent male rats, but not female rats, exposed to nicotine prenatally. Alterations in these associated genes were confirmed using qRT-PCR. These data suggest both differences in receptor regulation and genomic expression between males and females at ages of increased vulnerability to nicotine. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Adolescent Development](#)  
[\\*Nicotine](#)  
[Developed Countries](#)  
[Gene Expression](#)  
[Human Sex Differences](#)  
[Rats](#)  
[Tobacco Smoking](#)

**Source:** PsycINFO

**10. Women, methamphetamine, and spirituality: A comparison of spirituality in women who recover versus women who continue to struggle with methamphetamine addiction.**

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Ponichtera, Lisa B

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

**Language:** English

**Abstract:** Methamphetamine (MA) is a particularly dangerous drug. It is especially damaging for women and it would be useful to find as many ways as possible to help prevent and treat MA addiction in women. One possibility is the use of spirituality or religion as a way to prevent addiction or to provide support for those addicted to MA. The research question for this study was: How does spirituality, if at all, play a role in the women's lives before, during, and post-addiction to MA? Additionally, it was proposed that (a) a spiritual or existential dilemma may have played a role in the initiation of MA use and (b) that spirituality plays an important role in how and why some people are able to remain sober. This qualitative study examined spirituality in the lives of two groups of female MA addicts. The early recovery group (n=5) had 5 months or less of abstinence and were in substance abuse treatment. The long-term recovery group (n=5) had 3 years or more of abstinence from MA and were not in treatment. All women were at least 18 years old and each completed a semi-structured interview. Interviews were transcribed and thematic analysis was used to analyze the data. Common themes that emerged included (a) exposure to spirituality, (b) experiencing spiritual and existential crisis, (c) using MA to cope with crisis, (d) experiencing spiritual emptiness, (e) surrendering and seeking spiritual help and guidance, (f) gaining spiritual experiences, and (g) experiencing spiritual growth. The study results suggest that spirituality played a role in the lives of all of the women in the study. This was particularly evident in the recovery group where all but one woman described spirituality as a positive part of their daily lives. This study was the first to examine spirituality in recovering female MA addicts. The results indicate that further research into the uses of spirituality for prevention and treatment of MA addiction in females would be valuable. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Methamphetamine](#)  
[Addiction](#)  
[Human Females](#)  
[Spirituality](#)

**Source:** PsycINFO

#### 11. Residential treatment experiences of baby boomers: A qualitative study.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Perron, Michele D

**Institution:** Capella U., US

**Language:** English

**Abstract:** This qualitative study explored the recovery experience, opinions, and attitudes of baby-boomers who have recently attended high intensity residential substance abuse treatment programs. The research aimed to gain insight into the current delivery of treatment and the need for chronic care systems. Ten individuals completed a semi-structured interview employing 10 sub-questions to encourage a wide variety of responses by participants of their high intensity residential treatment experience. A generic analysis of the data suggested primary factors influencing the baby boomer treatment experience were peer interaction, counselor influence, age-awareness, education, and spiritual experience. The chronic-disease model and pragmatic theory served as the foundations of investigation in order to identify concerns for the clinical setting. The incidence of first time admissions in this sample was 60%. Entering treatment was usually precipitated by a health, mental health, or legal crisis. All but two participants were admitted for alcohol as the primary drug of choice. The theoretical implications and meaning of the study appear to support a chronic disease model of treatment due to significant time spent using alcohol and drugs throughout a lifetime prior to the most recent treatment and raise concerns about "at risk," subthreshold, and binge use of alcohol

in the baby boom cohort. Recommendations for future research are discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

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

**Source:** PsycINFO

## 12. Cocaine-mediated disruption of retinoid x receptor-gamma signaling: The role of tnf-alpha.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Kovalevich, Jane

**Institution:** Temple U., US

**Language:** English

**Abstract:** Cocaine abuse poses a substantial health and economic burden for which no effective treatment currently exists. Exposure to cocaine results in altered signaling in a number of central nervous system (CNS) pathways. Previous studies have primarily focused on neurotransmitter systems, such as the dopaminergic and glutamatergic systems, as well as on drug-induced neuroplasticity within the mesolimbic system, which is believed to contribute to reward, addiction, and relapse following withdrawal. Furthermore, cocaine exerts a number of effects on gene regulation that contribute to many pathological conditions commonly afflicting users such as mood disturbances, psychotic symptoms, and long-term cognitive dysfunction. While some mechanisms by which cocaine regulates gene expression have been well-characterized, a large gap in our understanding regarding its downstream actions still exists and must be elucidated in order to develop effective treatment strategies. One pathway we have discovered to be disrupted in an animal model of chronic cocaine abuse is the retinoid X receptor (RXR) signaling pathway. Retinoid X receptors serve as obligate heterodimer partners for a number of nuclear receptor transcription factors, including the thyroid hormone receptor (TR), retinoic acid receptor, vitamin D receptor, and peroxisome proliferator activated receptor. Heterodimeric complexes bind to specific recognition sequences in or around the promoter of target genes to activate, or in some cases, repress, transcriptional activity. Therefore, alterations in the levels and function of RXRs can potentially disrupt numerous signaling cascades. In this context, we observed a significant down-regulation in mRNA and protein levels of RXR $\gamma$ , an isoform predominantly expressed in the CNS that is involved in dopaminergic signaling, in brains of cocaine-administered mice. Additionally, we observed significantly decreased levels of the neuroplasticity protein, neurogranin, which is regulated transcriptionally by TR/RXR heterodimers. Mechanisms underlying regulation of RXR levels in cells of the CNS are vastly unexplored. Studies in other organ systems, including liver and cardiac systems, demonstrate pro-inflammatory cytokines and cellular stress pathways exert repressive effects on RXR signaling, although these studies solely investigated regulation of the RXR $\gamma$  isoform. Recently, studies have highlighted the role of the immune system during chronic drug abuse, and demonstrate that significant amounts of proinflammatory factors are produced in the brains of chronic cocaine abusers. Therefore, we hypothesized that cocaine-mediated induction of inflammatory cytokines, such as tumor necrosis factor (TNF)- $\alpha$  may contribute to decreased RXR $\gamma$  expression within the CNS. Utilizing in vitro neuronal systems, we have demonstrated that cocaine exposure induces neuronal expression of TNF- $\alpha$  and that this contributes to decreased levels of RXR $\gamma$ , as inhibition of TNF- $\alpha$  or its downstream effector c-Jun-NH2-terminal kinase (JNK) prevents cocaine-mediated reductions in RXR $\gamma$  protein levels. Furthermore, treatment of neurons with TNF- $\alpha$  alone mimics the effects on RXR $\gamma$  levels observed in cocaine-treated cells. Additionally, we show that proteasome-dependent protein degradation likely plays a role, as inhibition of the 26 S proteasome with Bortezomib during cocaine or TNF- $\alpha$  exposure blocks the down-regulation of RXR $\gamma$  levels. Degradation of RXR $\gamma$  in response to cocaine and TNF- $\alpha$  may involve nuclear export, as our results show an increased level of RXR $\gamma$  in the cytoplasmic compartment shortly after treatment, and inhibiting nuclear export during

treatment with Leptomycin B prevents decreases in whole cell protein levels of RXR-. In addition to the effects of chronic cocaine abuse on neurons, other CNS cell types such as oligodendrocytes ma... (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Animal Models](#)  
[\\*Gene Expression](#)  
[Cocaine](#)  
[Cytokines](#)  
[Mice](#)  
[Mimicry \(Biology\)](#)  
[Neural Receptors](#)  
[Oligodendrocytes](#)  
[Transcription Factors](#)

**Source:** PsycINFO

### 13. The differential influence of chronic predictable stress versus chronic unpredictable stress on behavioral and neurochemical sensitization to cocaine.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Moenk, Michael David

**Institution:** Northern Illinois U., US

**Language:** English

**Abstract:** Drug addiction is a debilitating mental and behavioral disorder and a serious public health concern across the world. Addiction changes both the neurocircuitry in the brains of addicts and their motivations and behaviors associated with drug use. As a result, many addicts are unable to stop using drugs and are highly prone to relapse. This is especially true for psychostimulants such as cocaine, which are some of the most addictive abused substances and have been found to elicit a phenomenon termed sensitization. Sensitization occurs when neural circuits associated with repeated drug exposure undergo significant changes that render the brain more sensitive to future exposures of the drugs. In addition, sensitization can be influenced by a variety of factors, including drug-related stimuli and stress. These factors can further strengthen the effects associated with drug use through a process termed cross-sensitization. While there is considerable evidence that stress can promote the transition to addiction and hinder drug treatment and recovery, the relationship between stress and drug addiction is incredibly complex and different types of stress can affect the brain and behavior in unique ways. Thus, the present study investigated the influence of stress on drug addiction by using two stress protocols that have been associated with a variety of different effects in past studies - chronic predictable stress (CPS) and chronic unpredictable stress (CUS). Male Sprague-Dawley rats were exposed to 10 days of either CUS or CPS and their behavioral and neurochemical responses to an acute cocaine injection (15 mg/kg i.p.) were evaluated 2 weeks after stress. In Experiment 1, locomotor behavior was measured in the open-field task and significant differences between groups were observed for total distance traveled in response to the cocaine injection. The CPS group exhibited greater locomotor activity compared to the CUS and control groups, while the CUS group did not significantly differ from controls. In Experiment 2, dopamine levels in the nucleus accumbens, a brain region associated with reward and motivation, were measured using microdialysis. The results showed that an acute injection of cocaine increased dopamine levels to the greatest extent in the CPS group compared to the other groups, but significant differences were only found at specific time points. To determine if the behavioral and neurochemical differences between groups could be related to AMPA glutamate receptor changes in the nucleus accumbens, western blots were used in Experiment 3 to quantify GluR1 and GluR2 AMPA receptor subunits in the nucleus accumbens. Analyses of the AMPA-immunoreactivities revealed no significant group differences for either the GluR1 or the GluR2 receptor subunits. Overall, the results from this study provided evidence of differential effects of CPS and CUS on the behavioral and neurochemical changes

associated with cocaine sensitization. These findings may help unravel the specific nature of the relationship between stress and addiction and determine whether certain types of stress lead to greater vulnerabilities to drug addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Public Health](#)  
[\\*AMPA](#)  
[Cocaine](#)  
[Drug Addiction](#)  
[Rats](#)  
[Sensitization](#)  
[Stress](#)

**Source:** PsycINFO

#### **14. Unique pharmacodynamic profile of methylphenidate: Self-administration-induced dopamine system alterations.**

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Calipari, Erin Sue

**Institution:** Wake Forest U., US

**Language:** English

**Abstract:** Methylphenidate (MPH), the active compound in the medication Ritalin, is commonly diverted for off-label use. It is abused at high rates in both the adolescent and adult population; however, until recently, the neurochemical effects of MPH abuse had not been explored in depth. Pharmacologically MPH is a dopamine transporter (DAT) blocker with the same mechanism of action and equivalent potency at the DAT as cocaine. Although MPH is categorized as a DAT blocker, its pharmacological actions are distinct from both blockers and releasers in regards to both its acute effects and the compensatory alterations associated with self-administration of the compound. This work has elucidated the neurochemical consequences of MPH self-administration, whereby MPH administration by a number of paradigms results in consistent neurochemical adaptations characterized by increased maximal rates of uptake ( $V_{max}$ ), increased DAT levels, increased evoked dopamine (DA) release, and an increased potency to inhibit the DAT for MPH and releasers, but not blockers. These changes are opposite from the documented changes that occur following cocaine self-administration, further suggesting that the neurochemical consequences of MPH are unique, and cannot be predicted based on previous literature of compounds of the same psychostimulant class, such as cocaine. The changes directly at the DAT following MPH self-administration are consistent with microdialysis and behavioral analysis that demonstrate increased MPH and amphetamine (AMPH)-induced DA overflow, but not cocaine, and increased reinforcing efficacy of AMPH and MPH, but not cocaine. The increases in the reinforcing efficacy of MPH and releasers such as AMPH, suggests that these compounds may have significant abuse liability following MPH abuse in the adolescent and adult populations. Further, this work has determined the neurochemical mechanism underlying the effects of MPH self-administration. This work shows that MPH self-administration increases DAT levels, driving enhanced potency and drug-seeking for MPH and AMPH, without altering cocaine potency. To corroborate these effects, genetic over-expression of the DAT increased AMPH and MPH potencies, but not cocaine potency as measured by voltammetry, microdialysis, and locomotor analysis. Utilizing transgenic DAT overexpressing mice to study changes in psychostimulant potency, this work has determined a basic mechanism that may predict vulnerability to abuse amphetamines and other dopamine releasers. Namely, increases in dopamine transporter levels are responsible for the increases in AMPH and DA releaser potency. This is important because it suggests that known variability in human DAT expression, particularly in disorders such as attention deficit/hyperactivity disorder (ADHD), post-traumatic stress disorder (PTSD), and early life stress, may serve as a marker for vulnerability for substance abuse disorder / addiction. Because these drugs are readily available and are used commonly in the clinic, these results should be considered when

treating "at risk" individuals. Importantly, the effects of MPH resemble those of amphetamines in regards to the effects of DAT levels on its potency, whereas other traditional blockers are unaffected. This is particularly important when making inferences about the consequences of MPH administration, both therapeutic and abuse relevant, from previous work using other compounds of the same class. Importantly, this work suggests a revision of the current two-category model for psychostimulants beyond the classification as purely blocker or releaser, as compounds such as MPH can exhibit properties of both classes. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Cocaine](#)  
[\\*Mice](#)  
[Dopamine](#)  
[Methylphenidate](#)  
[Side Effects \(Drug\)](#)

**Source:** PsycINFO

#### 15. Substance abuse treatment motivation and the stages of change model: A comparison of probation and parole clients.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Bohall, Greg

**Institution:** The Chicago School of Professional Psychology, US

**Language:** English

**Abstract:** Historically, legislation in the United States has been primarily punitive in regards to addressing crime that is linked to addiction. Due to the incredible cost to society that punishing individuals with an addiction entails, the criminal justice system has evolved to coexist with the mental health field in order to treat the underlying addiction associated with crime. Such efforts, including probation and parole, are commonly offered to individuals with an addiction in an effort to allow these individuals the opportunity to succeed within their community while being supervised. The role of motivation in substance abuse treatment has long been studied with ambiguous results. The literature is also lacking in regards to examining motivational factors with specific offender populations. This research attempts to examine the differences in motivation and change among individuals monitored by county probation and state parole. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Crime](#)  
[\\*Parole](#)  
[Addiction](#)  
[Clients](#)  
[Criminal Justice](#)  
[Drug Abuse](#)  
[Motivation](#)  
[Probation](#)

**Source:** PsycINFO

#### 16. Progress towards understanding of mechanisms of action of potent multifunctional disease modifying therapeutics for parkinson's disease, &, investigating the methamphetamine-induced striatal microglia activation.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Shah, Mrudang Manojkumar

**Institution:** Wayne State U., US

**Language:** English

**Abstract:**

**PROGRESS TOWARDS UNDERSTANDING OF MECHANISMS OF ACTION OF POTENT MULTIFUNCTIONAL DISEASE MODIFYING THERAPEUTICS FOR PARKINSON'S DISEASE** Our long term goal is to design and develop potent multifunctional disease modifying therapeutics for Parkinson's disease. The objective of my dissertation was to understand the mechanisms of action of some potent small molecules (synthesized in our lab) as a disease modifying Parkinson's disease therapeutic. The objective was achieved by pursuing the following two specific aims: 1. Investigating anti-oxidant and neuroprotective effects of a lead molecule (D-512) generated in our lab. 2. Assessing the ability of some of our potential lead compounds (D-240, D-436, and D-520) to prevent the aggregation of -synuclein. Oxidative stress is one of the major factors implicated in the pathogenesis and progression of Parkinson's disease. To investigate the neuroprotective effects of D-512 in Parkinson's disease, we determined the ability of D-512 to rescue against 6-hydroxydopamine induced cell death in dopaminergic cell line PC12 under two different protocols. Once it was established that D-512 is able to prevent/rescue the cell death induced by 6-hydroxydopamine in PC12 cells, various other assays to determine its ability to confer neuroprotection were performed.

**INVESTIGATING THE METHAMPHETAMINE-INDUCED STRIATAL MICROGLIA ACTIVATION** Methamphetamine is a highly abused, addictive and neurotoxic drug which causes striatal-specific activation of microglia cells. Our long term goal is to identify the potential molecular targets of methamphetamine induced neurotoxicity and addiction. The objective of my dissertation was to develop a cell-culture model of methamphetamine neurotoxicity and determine proteomic expression changes in microglia isolated from striatum of methamphetamine treated animals. I achieved my objective by pursuing following two specific aims: 1. Identifying the proteomic expression changes of cultured microglia cells after exposure to methamphetamine or similar insult. 2. Optimization of a protocol to isolate highly purified fraction of microglia from various regions of brain and identification of protein expression changes in striatal microglia isolated from control and methamphetamine treated animals. We determined to evaluate the effect of different concentrations of methamphetamine and lipopolysaccharide (gram negative endotoxin which causes strong immune response) on cultured microglia cells alone and cultured microglia cells which have access to various soluble factors secreted by cultured dopaminergic cell line (MN9D cells). We also verified the differences in protein expression profile of BV2 cells alone or BV2 cells co-cultured with dopaminergic neuronal cell line to determine if either of the cell-culture systems can be used as a model to determine methamphetamine-induced neurotoxicity in striatal microglia. As striatum is a region where all dopaminergic nerve terminals of nigrostriatal tract end and methamphetamine has been shown to cause significant alterations in dopaminergic neuronal system, we determined to isolate microglia from striatum. We compared and optimized various protocols for microglial isolation to achieve method to isolate highly pure fraction of microglia cells. Afterwards, we also isolated microglia from striatum of untreated animals and animals treated with methamphetamine to determine protein expression changes between them. We analyzed the differences in protein expression between isolated microglia to understand the molecular mechanisms or pathways which are altered or affected by methamphetamine which might be responsible for addictive and neurotoxic properties of methamphetamine. (Abstract shortened by UML.) (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Parkinson's Disease](#)  
[\\*Microglia](#)  
[Drug Therapy](#)  
[Methamphetamine](#)  
[Neurotoxicity](#)  
[Neuroprotection](#)  
[Lipopolysaccharide](#)

**Source:** PsycINFO

**17. Tobacco use and cessation: What matters to southeast alaska native young adults?**

- Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)
- Author(s):** Anderson, Kathryn J
- Institution:** U Alaska Fairbanks, US
- Language:** English
- Abstract:** Background: The smoking rate among young Alaska Native adults (ages 19-29) in Southeast Alaska is 70% as compared to the statewide adult smoking rate of 21%, the Alaska Native adult rate of 41%, and the overall young adult rate of 32%. Southeast Alaska Regional Health Consortium (SEARHC), the non-profit tribal health consortium serving Southeast Alaska, commissioned this research to inform development of a young adult-specific, social marketing-based smoking cessation intervention. Methods: Using purposive sampling, 23 individuals were recruited for five focus groups and four individual interviews in Juneau, Alaska. Following a social marketing framework, the research assessed participant beliefs about the benefits and negative impacts of smoking, barriers to quitting, and preferred quit support methods, as well as participant reactions to particular anti-smoking advertisements and quit support methods. Results: Almost all participants reported an interest in quitting smoking. Stress relief, boredom relief, relaxation, and oral satisfaction were the main benefits of smoking. Downsides to smoking included negative short-term health impacts, negative impacts on children in the extended family, and negative cosmetic impacts. Barriers to quitting included loss of listed benefits, addiction and habit, fatalism, and the high prevalence of smoking among family and friends. The preferred method of quitting was cold turkey (unassisted quitting), with very few participants reporting use of counseling or pharmacotherapy. Participants preferred high emotional level anti-smoking advertisements with either strongly negative emotional valence (e.g., fear and disgust) or strongly positive emotional valence (e.g., joy, happiness). Reaction to quit support methods was most favorable to texting support and a smart phone app, and most negative toward a smart phone video game. Reaction to counseling was strongly supportive among those who had tried it and largely but not totally negative among those who had not. Conclusion: Young Alaska Native adults in Juneau who smoke are interested in quitting but prefer cold turkey to counseling and pharmacotherapy. They are more concerned about short-term than long-term health impacts, and they are sensitive to the impact of smoking on their appearance and on children in their extended family. Findings formed a foundation for a proposed social-marketing based intervention. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
- Publication Type:** Dissertation Abstract
- Subject Headings:** [\\*Intervention](#)  
[Alaska Natives](#)  
[Tobacco Smoking](#)
- Source:** PsycINFO

#### 18. Complications with the perceived experience of physical and sexual trauma and substance abuse treatment.

- Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)
- Author(s):** Shaw, Christy Lea
- Institution:** Alliant International U., US
- Language:** English
- Abstract:** The co-occurrence of serious mental health problems among illicit drug-abusing populations is common. Between 30% and 70% of addicts are also diagnosed with PTSD. The majority of the studies seen in trauma literature tend to focus on the identification of risk factors or the elucidation of psychopathology outcomes related to trauma exposure. This type of inductive research is beneficial to the field of psychological trauma, but yet still it is difficult to define what trauma is, because it's not the presence of a certain set of risk factors which create its presence. This study aims to identify and compare scores of

well-being (SOS-10), readiness for change (URICA-SF), and scale elevations on the Personality Assessment Inventory (PAI) of participants in a mandated AOD treatment program, based on their perceived experience of physical and sexual abuse. The goal is not to find what causes any identified relationship, rather to explore what the relationship might be. Archival data was gathered for participants who identified abuse. This data included scores on the Schwarts Outcome Survey (SOS-10), the University of Rhode Island Change Assessment Short Form (URICA-SF) upon intake into treatment as well as again after three months in treatment. Scores on the Personality Assessment Inventory were also collected for each participant. Findings included a significant interaction between the group who identified both physical and sexual abuse (P) and their sense of well-being on intake. They had significantly higher scores than the other groups (no abuse (NA), physical or sexual (P/S)). Over time the NA group who reported showed a significant increase in their scores of well-being. The P abuse group reported significantly greater readiness for change than the P/S abuse group at intake. After three months there were no significant differences found between the P abuse group and the P/S abuse group on well-being or readiness for change scores. Results showed a significant difference between the groups who identified either P/S or P abuse on the following PAI subscales: Anxiety Related Disorders, Anxiety and Schizophrenia. Discussion of the findings, limitations of the current study and future directions are presented. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Risk Factors](#)  
[Drug Abuse](#)  
[Mental Health](#)  
[Sexual Abuse](#)  
[Trauma](#)

**Source:** PsycINFO

#### 19. An investigation into the presynaptic actions by which amphetamine activates dopamine signaling within striatal subregions of the rat.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Covey, Dan P

**Institution:** Illinois State U., US

**Language:** English

**Abstract:** Despite decades of intense research and a consensus view in the field, the work presented herein provides strong evidence that the primary mechanism of amphetamine action should be re-evaluated. Rather than depleting vesicular dopamine stores and promoting non-exocytotic efflux through the dopamine transporter in vivo, recent evidence demonstrates that amphetamine augments phasic dopamine signaling instead. This signaling modality is critical for reinforcement learning and is dependent on intact vesicular stores. The new findings support over-activation of phasic dopamine signaling as a common mechanism in the addiction process. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Amphetamine](#)  
[Dopamine](#)  
[Rats](#)

**Source:** PsycINFO

#### 20. The trauma recovery and empowerment model: A trauma-informed treatment program for female offenders in the community.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Cihlar, Brandi E

**Institution:** The George Washington U., US

**Language:** English

**Abstract:** This study investigated the effects of the Trauma, Recovery, and Empowerment Model (TREM) on the female offender population in a community setting. The TREM intervention is a 33-topic model that focuses on trauma specific to women through psycho-education and cognitive-behavioral methods. This quasi-experimental study with an intervention and treatment-as-usual (TAU) group used the Brief Symptom Inventory-18, Modified Posttraumatic Symptom Scale, Addiction Severity Index, the Daily Living/Role Functioning and Relation to Self and Others Subscales (BASIS 32), and Trauma, Recovery and Empowerment Profile (TREP) to determine whether the group receiving the TREM intervention had reduced PTSD symptoms, general mental health symptoms, substance use, increased social role functioning and increased relation to self and others, as well as increased trauma-related coping skills. T-tests, correlations, and effect sizes were used to assess outcomes from baseline to post-intervention or 3-month follow up within the intervention group, and between the intervention and TAU group. Results of the t-tests ns between variables of interest failed to reach statistical significance, however significant correlations and non-significant medium to large effect sizes were found on the BASIS-32 Subscales and Modified Posttraumatic Symptom Scale, small to medium effects were found on the Global Severity Index (BSI-18), with small to no effect for the Trauma, Recovery and Empowerment Profile, and the Addiction Severity Index Drug and Alcohol Composite scores. Qualitative analysis also revealed support for the model by participants. These results somewhat support the current research in showing effectiveness for the TREM intervention with females, however more research and investigation into the TREM intervention is warranted. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Intervention](#)  
[Empowerment](#)  
[Trauma](#)

**Source:** PsycINFO

## 21. Transmission of generational trauma in African American gang members.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Ford, Bettye Jean

**Institution:** Pacifica Graduate Inst., US

**Language:** English

**Abstract:** The purpose of this study was to investigate gang membership as a coping skill resulting from the impact of the traumas of African American slavery transmitted generationally. Specifically, it was hypothesized that African American gang membership is an all-encompassing coping mechanism for transmission of trauma via poor attachment, learned helplessness, and depression. Additionally, it was postulated that the maladaptive coping skills, poor attachment, and social deficiencies are developed as a result of Post Traumatic Slavery Syndrome. Descriptions of the lived experiences of 4 African American gang members were gathered from structured interviews and assessment scales. A Townsend Gang Activity Assessment Tool (TGAAT), Adult Attachment Interview (AAI), Beck Depression Inventory (BDI), Learned Helplessness Scale (LHS), and Consensual Qualitative Research (CQR) were administered. It was anticipated that the participant with high gang activity would also have poor attachment styles and clinical depression and would exhibit signs of learned helplessness. Results revealed a definite relationship between high gang activity, poor attachment, depression, and learned helplessness. Participants reported extreme physical abuse, alcohol / drug addiction, mental health issues, rejection, and a higher percentage of negative relational adjectives with regard to their relationship with their parents. However, the participants reported

feeling as though the effects were positive in how they regard their own children. Three of the 4 participants were not consistent in their parenting or visitation with their children. The fourth participant was female and her child was under 1 year of age at the time of the interview. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Blacks](#)  
[\\*Qualitative Research](#)  
[Coping Behavior](#)  
[Juvenile Gangs](#)  
[Learned Helplessness](#)  
[Membership](#)  
[Trauma](#)

**Source:** PsycINFO

## 22. Methylphenidate treatment and rearing environment: Effects on the dopamine system and vulnerability to substance abuse in animal models.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2014, vol./is. 75/5-B(E)(No Pagination Specified), 0419-4217 (2014)

**Author(s):** Gill, Kathryn Estelle

**Institution:** Wake Forest U., US

**Language:** English

**Abstract:** The purpose of these studies was to investigate the effects of chronic methylphenidate treatment, at doses that have been associated with clinical efficacy in children, on the dopamine system and vulnerability to substance abuse in animal models. Methylphenidate is the most commonly prescribed stimulant to treat Attention Deficit Hyperactivity Disorder. As a dopaminergic agent, it has potential to cause long-term alterations of a neural system that has been associated with numerous psychopathologies, including substance abuse. Yet, few studies have examined its long term effects on the brain. Another factor that can influence vulnerability to substance abuse is early rearing environment, as children raised in negative environments are more likely to develop substance abuse disorders. These studies examined the interaction of environment and methylphenidate on the dopamine system and vulnerability to cocaine and alcohol abuse. Both nonhuman primate and rodent models were used in this series of studies. Nonhuman primates were treated with an extended release formulation of methylphenidate and rodents were treated with a consistent subcutaneous infusion of methylphenidate. Rodents were also exposed to different environmental conditions during the treatment phase. In both species, the age of treatment, duration of treatment, and doses used were matched as closely as possible to the human condition. Positron Emission Tomography (in nonhuman primates) and in vitro autoradiography (in rodents) were employed to evaluate the availability and density of dopamine receptors and transporters. Nonhuman primates and rodents were then exposed to cocaine and alcohol self administration, respectively. Methylphenidate treatment had no effect on the dopamine systems of nonhuman primates or rodents, though treatment plus drug washout altered the trajectory of D2-like receptor development in treated nonhuman primates. Social isolation was associated with greater levels of D1-like receptors in rats. Methylphenidate did not alter vulnerability to cocaine self-administration, but it did increase ethanol intakes and preferences in socially isolated rodents. In conclusion, methylphenidate may not have long-term effects on the dopamine system in treated children, but it may increase vulnerability to substance abuse in a subset of individuals that have a negative environmental history. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Cocaine](#)  
[Animal Models](#)  
[Dopamine](#)  
[Drug Abuse](#)  
[Drug Therapy](#)

Methylphenidate  
Rats  
Side Effects (Drug)  
Positron Emission Tomography

**Source:** PsycINFO

**23. Improving addiction care in south africa: Development and challenges to implementing training in addictions care at the university of cape town.**

**Citation:** International Journal of Mental Health and Addiction, November 2014(No Pagination Specified), 1557-1874;1557-1882 (Nov 22, 2014)

**Author(s):** Pasche, Sonja; Kleintjes, Sharon; Wilson, Don; Stein, Dan J; Myers, Bronwyn

**Correspondence Address:** Pasche, Sonja: Department of Psychiatry and Mental Health, Faculty of Health Sciences, University of Cape Town, Cape Town, South Africa, sonja.pasche@uct.ac.za

**Institution:** Department of Psychiatry and Mental Health, Faculty of Health Sciences, University of Cape Town, Cape Town, South Africa; Department of Psychiatry and Mental Health, Faculty of Health Sciences, University of Cape Town, Cape Town, South Africa; Department of Psychiatry and Mental Health, Faculty of Health Sciences, University of Cape Town, Cape Town, South Africa; Department of Psychiatry and Mental Health, Faculty of Health Sciences, University of Cape Town, Cape Town, South Africa; Department of Psychiatry and Mental Health, Faculty of Health Sciences, University of Cape Town, Cape Town, South Africa

**Abstract:** South Africa has a high lifetime prevalence of substance use disorders, estimated at 13.3% of the general population. Despite this high prevalence, treatment rates remain relatively low compared to need. A key reason for low treatment rates is the lack of expertise among professionals for the detection and treatment of substance use disorders and the limited size of the addiction care workforce. Workforce development is thus essential for the implementation of a comprehensive strategy to reduce substance-related harm within South Africa. In response to this need, the University of Cape Town has introduced a Postgraduate Diploma in Addictions Care and a Master of Philosophy in Addictions Mental Health. These postgraduate courses have been designed to equip health and social welfare professionals with the necessary skills to provide evidence-based early intervention, treatment and aftercare services for children, adolescents, adults and families affected by substance use disorders. This paper provides an overview of both programmes and reflects on lessons learnt from the inaugural group of students enrolled for the Postgraduate Diploma in Addictions Care and from the cohort of professionals who completed the Master of Philosophy in Addictions Mental Health since its inception. (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. Personality measured in elementary school predicts middle school addictive behavior involvement.**

**Citation:** Journal of Psychopathology and Behavioral Assessment, November 2014(No Pagination Specified), 0882-2689;1573-3505 (Nov 22, 2014)

**Author(s):** Guller, Leila; Zapolski, Tamika C. B; Smith, Gregory T

**Correspondence Address:** Smith, Gregory T.: Department of Psychology, University of Kentucky, Lexington, KY, US, 40502, gsmith@email.uky.edu

**Institution:** Department of Psychology, University of Kentucky, Lexington, KY, US; Department of Psychology, Indiana University Purdue University at Indianapolis, Indianapolis, IN, US; Department of Psychology, University of Kentucky, Lexington, KY, US

**Abstract:** Middle school addictive behavior involvement is highly predictive of future dysfunction. We tested whether a set of high-risk personality traits, measured in elementary school, predicted drinking, smoking, and binge eating in middle school. We studied 1,906 children in two waves: Wave 1 was the last year of elementary school and wave 2 was the first year of middle school in the participating schools. In a design controlling for sex, pubertal status, prior engagement in addictive behaviors, and other high-risk personality traits, we found that (a) fifth grade urgency, the tendency to act rashly when emotional, predicted drinking, smoking, and binge eating during sixth grade; and (b) fifth grade low conscientiousness, which reflects a failure to plan ahead or persevere on tasks, predicted drinking and smoking during sixth grade. It appears that high-risk middle school addictive behavior can itself be predicted from individual differences present in elementary school. Implications for future research and prevention are discussed. (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

#### **25. Neurophysiological evidence for remediation of reward processing deficits in chronic pain and opioid misuse following treatment with mindfulness-oriented recovery enhancement: Exploratory erp findings from a pilot rct.**

**Citation:** Journal of Behavioral Medicine, November 2014(No Pagination Specified), 0160-7715;1573-3521 (Nov 11, 2014)

**Author(s):** Garland, Eric L; Froeliger, Brett; Howard, Matthew O

**Correspondence Address:** Garland, Eric L.: University of Utah, 395 South, 1500 East, Salt Lake City, UT, US, 84112, eric.garland@socwk.utah.edu

**Institution:** University of Utah, Salt Lake City, UT, US; Medical University of South Carolina, Charleston, SC, US; University of North Carolina at Chapel Hill, Chapel Hill, NC, US

**Abstract:** Dysregulated processing of natural rewards may be a central pathogenic process in the etiology and maintenance of prescription opioid misuse and addiction among chronic pain patients. This study examined whether a Mindfulness-Oriented Recovery Enhancement (MORE) intervention could augment natural reward processing through training in savoring as indicated by event-related brain potentials (ERPs). Participants were chronic pain patients at risk for opioid misuse who were randomized to 8 weeks of MORE (n = 11) or a support group control condition (n = 18). ERPs to images representing naturally rewarding stimuli (e.g., beautiful landscapes, intimate couples) and neutral images were measured before and after 8 weeks of treatment. Analyses focused on the late positive potential (LPP)-an ERP response in the 400-1,000 ms time window thought to index allocation of attention to emotional information. Treatment with MORE was associated with significant increases in LPP response to natural reward stimuli relative to neutral stimuli which were correlated with enhanced positive affective cue-responses and reductions in opioid craving from pre- to post-treatment. Findings suggest that cognitive training regimens centered on strengthening attention to natural rewards may remediate reward processing deficits underpinning addictive behavior. (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

#### **26. Nicotine effects in adolescence and adulthood on cognition and 42-nicotinic receptors in the neonatal ventral hippocampal lesion rat model of schizophrenia.**

**Citation:** Psychopharmacology, November 2014(No Pagination Specified), 0033-3158;1432-2072 (Nov 13, 2014)

**Author(s):** Berg, Sarah A; Sentir, Alena M; Bell, Richard L; Engleman, Eric A; Chambers, R. Andrew

**Correspondence Address:** Chambers, R. Andrew: Laboratory for Translational Neuroscience of Dual Diagnosis & Development, Suite 314D, 320 West 16th Street, Indianapolis, IN, US, 46202, robchamb@iupui.edu

**Institution:** Laboratory for Translational Neuroscience of Dual Diagnosis & Development, Indianapolis, IN, US; Laboratory for Translational Neuroscience of Dual Diagnosis & Development, Indianapolis, IN, US; IU Neuroscience Center, Indianapolis, IN, US; IU Neuroscience Center, Indianapolis, IN, US; Laboratory for Translational Neuroscience of Dual Diagnosis & Development, Indianapolis, IN, US

**Abstract:** Rational: Nicotine use in schizophrenia has traditionally been explained as "self-medication" of cognitive and/or nicotinic acetylcholinergic receptor (nAChR) abnormalities. Objectives: We test this hypothesis in a neurodevelopmental rat model of schizophrenia that shows increased addiction behaviors including enhanced nicotine reinforcement and drug-seeking. Methods: Nicotine transdermal patch (5 mg/kg/day vs. placebo x 10 days in adolescence or adulthood) effects on subsequent radial-arm maze learning (15 sessions) and frontal-cortical-striatal nAChR densities (42; [3H]-epibatidine binding) were examined in neonatal ventral hippocampal lesion (NVHL) and SHAM-operated rats. Results: NVHL cognitive deficits were not differentially affected by nicotine history compared to SHAMs. Nicotine history produced minimal cognitive effects while increasing food-reward consumption on the maze, compounding with NVHL-induced overconsumption. Acute nicotine (0.5 mg/kg) delivered before the final maze sessions produced modest improvements in maze performance in rats with nicotine patch histories only, but not differentially so in NVHLs. Consistent with in vivo neuroimaging of 2 nAChR binding in schizophrenia smokers vs. non-smokers and healthy controls, adult NVHLs showed 12% reductions in nAChR binding in MPFC ( $p < 0.05$ ) but not ventral striatum ( $< 5\%$  changes,  $p > .40$ ), whereas nicotine history elevated nAChRs across both regions ( $> 30\%$ ,  $p < 0.001$ ) without interacting with NVHLs. Adolescent vs. adult nicotine exposure did not alter nAChRs differentially. Conclusions: Although replicating nicotine-induced upregulation of nAChRs in human smokers and demonstrating NVHL validity in terms of schizophrenia-associated nAChR density patterns, these findings do not support hypotheses explaining increased nicotine use in schizophrenia as reflecting illness-specific effects of nicotine to therapeutically alter cognition or nAChR densities. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:**

**Source:** PsycINFO

### 27. Conceptualization, assessment, and treatment of cybersexual addiction: A review of the literature.

**Original Title:** Conceptualisation, evaluation et traitement de la dependance cybersexuelle : Une revue de la litterature.

**Citation:** Canadian Psychology/Psychologie canadienne, November 2014, vol./is. 55/4(266-281), 0708-5591;1878-7304 (Nov 2014)

**Author(s):** Wery, Aline; Karila, Laurent; Sutter, Pascal De; Billieux, Joel

**Correspondence Address:** Wery, Aline: Laboratoire de psychopathologie experimentale, Institut de recherche en sciences psychologiques, Universite catholique de Louvain, Place du Cardinal Mercier, 10, Louvain-la-Neuve, Belgium, B - 1348, aline.wery@uclouvain.be

**Institution:** Laboratoire de psychopathologie experimentale, Institut de recherche en sciences psychologiques, Universite catholique de Louvain, Louvain-la-Neuve, Belgium; Hopital universitaire Paul-Brousse, Villejuif, France; Laboratoire de psychopathologie experimentale, Universite catholique de Louvain, Louvain-la-Neuve, Belgium;

Laboratoire de psychopathologie experimentale, Universite catholique de Louvain, Louvain-la-Neuve, Belgium

**Language:**

French

**Abstract:**

The purpose of this article is to propose a critical review of current knowledge concerning cybersexual dependence (definition, epidemiology, evaluation and treatment). There is, in fact, a lack of consensus concerning the conceptualization of this disorder. This lack of conceptual clarity is largely due to the existence of a multitude of definitions of the disorder, a significant variety of sexual behaviours concerned and of symptomatology, and because of methodological problems in the existing research (samples and evaluation tools that are strongly heterogeneous in different studies). Given the context, this article seeks to clarify the state of knowledge concerning cybersexual dependence. We will also make an inventory of empirically validated treatment methods for sexual and cybersexual dependence and we will propose approaches for future research. A non-systematic narrative review was conducted to examine and summarize the English and French literature dealing with cybersexual dependence. That review was carried out using a keyword search for sexual and cybersexual dependence in the data bases of PsycINFO, ISI Web of Science and Francis. Particular attention was paid to articles evaluating risk factors involved in sexual dependence, as well as articles that suggest treatment approaches for the disorder. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:**

HOLDER: Canadian Psychological Association; YEAR: 2014

**Publication Type:**

Journal; Peer Reviewed Journal

**Subject Headings:**

\*Evaluation  
\*Hypersexuality  
\*Internet Addiction  
\*Treatment  
Epidemiology  
Risk Factors

**Source:**

PsycINFO

**Full Text:**

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

**28. Personality, gambling motives and cognitive distortions in electronic gambling machine players.****Citation:**

Personality and Individual Differences, January 2015, vol./is. 73/(24-28), 0191-8869 (Jan 2015)

**Author(s):**

MacLaren, Vance; Ellery, Michael; Knoll, Tara

**Correspondence Address:**

MacLaren, Vance: Department of Psychology, Brandon University, 270 18th St., Brandon, MB, Canada, R7A-6A9, vancemaclaren@gmail.com

**Institution:**

Brandon University, Brandon, MB, Canada; University of Manitoba, Winnipeg, MB, Canada; Brandon University, Brandon, MB, Canada

**Language:**

English

**Abstract:**

This study examined gambling motives, distorted beliefs about gambling, and personality traits in a paid community sample of frequent electronic gambling machine (EGM) players from Manitoba, Canada. Participants completed the Problem Gambling Severity Index, the Gambling Motives Questionnaire, the Informational Biases Scale, and the NEO PI-R in group testing sessions. The Five Factor Model facets of Neuroticism, Extraversion, Agreeableness and Conscientiousness were divided into 'aspects' that align with self-regulation and the Behavioral Approach and Inhibition systems of revised Reinforcement Sensitivity Theory. Regression analysis found that problem gambling severity scores were independently predicted by older age, being female, having distorted gambling beliefs, and by gambling to win money and to cope with negative emotional states. Problem gambling scores were also correlated positively with Withdrawal (N) and Volatility (N), and negatively with Enthusiasm (E), Compliance (A), and Industriousness

(C). Mediation tests found that low scores on the Industriousness facet of Conscientiousness were associated with increased problem gambling severity through an effect on the gambling to cope motive. Distorted beliefs about gambling also mediated low Industriousness, as well as high Withdrawal and Volatility. Poor self-regulation and avoidance motivation contribute to problem gambling among frequent EGM players through increased cognitive distortion and escapism. (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:** [\\*Addiction](#)  
[\\*Gambling](#)  
[\\*Self Regulation](#)  
[\\*Self Reinforcement](#)  
[Cognitive Processes](#)  
[Motivation](#)

**Source:** PsycINFO

### 29. Association and ancestry analysis of sequence variants in ADH and ALDH using alcohol-related phenotypes in a Native American community sample.

**Citation:** American Journal of Medical Genetics Part B: Neuropsychiatric Genetics, December 2014, vol./is. 165/8(673-683), 1552-4841;1552-485X (Dec 2014)

**Author(s):** Peng, Qian; Gizer, Ian R; Libiger, Ondrej; Bizon, Chris; Wilhelmsen, Kirk C; Schork, Nicholas J; Ehlers, Cindy L

**Correspondence Address:** Peng, Qian: Department of Human Biology, J. Craig Venter Institute, 4120 Capricorn Lane, La Jolla, CA, US, 92037, [qpeng@scripps.edu](mailto:qpeng@scripps.edu)

**Institution:** Department of Human Biology, J. Craig Venter Institute, La Jolla, CA, US; Department of Psychological Sciences, University of Missouri-Columbia, Columbia, MO, US; Scripps Translational Science Institute, Scripps Research Institute, La Jolla, CA, US; Renaissance Computing Institute, University of North Carolina at Chapel Hill, Chapel Hill, NC, US; Renaissance Computing Institute, University of North Carolina at Chapel Hill, Chapel Hill, NC, US; Department of Human Biology, J. Craig Venter Institute, La Jolla, CA, US; Department of Molecular and Cellular Neuroscience, Scripps Research Institute, La Jolla, CA, US

**Language:** English

**Abstract:** Higher rates of alcohol use and other drug-dependence have been observed in some Native American (NA) populations relative to other ethnic groups in the US. Previous studies have shown that alcohol dehydrogenase (ADH) genes and aldehyde dehydrogenase (ALDH) genes may affect the risk of development of alcohol dependence, and that polymorphisms within these genes may differentially affect risk for the disorder depending on the ethnic group evaluated. We evaluated variations in the ADH and ALDH genes in a large study investigating risk factors for substance use in a NA population. We assessed ancestry admixture and tested for associations between alcohol-related phenotypes in the genomic regions around the ADH1-7 and ALDH2 and ALDH1A1 genes. Seventy-two ADH variants showed significant evidence of association with a severity level of alcohol drinking-related dependence symptoms phenotype. These significant variants spanned across the entire 7 ADH gene cluster regions. Two significant associations, one in ADH and one in ALDH2, were observed with alcohol dependence diagnosis. Seventeen variants showed significant association with the largest number of alcohol drinks ingested during any 24-hour period. Variants in or near ADH7 were significantly negatively associated with alcohol-related phenotypes, suggesting a potential protective effect of this gene. In addition, our results suggested that a higher degree of NA ancestry is associated with higher frequencies of potential risk variants and lower frequencies of potential protective variants for alcohol dependence phenotypes. (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:** [\\*Alcoholism](#)  
[\\*Drug Dependency](#)  
[\\*Genes](#)  
[\\*Polymorphism](#)  
[\\*Risk Factors](#)

**Source:** PsycINFO

### 30. Evaluating the role of a galanin enhancer genotype on a range of metabolic, depressive and addictive phenotypes.

**Citation:** American Journal of Medical Genetics Part B: Neuropsychiatric Genetics, December 2014, vol./is. 165/8(654-664), 1552-4841;1552-485X (Dec 2014)

**Author(s):** Richardson, Tom G; Minica, Camelia; Heron, Jon; Tavare, Jeremy; MacKenzie, Alasdair; Day, Ian; Lewis, Glyn; Hickman, Matthew; Vink, Jacqueline M; Gelernter, Joel; Kranzler, Henry R; Farrer, Lindsay A; Munafo, Marcus; Wynick, David

**Correspondence Address:** Wynick, David, C24A, Medical Sciences Building, University Walk, Bristol, United Kingdom, BS8 1TD, d.wynick@bris.ac.uk

**Institution:** School of Social and Community Medicine, University of Bristol, Bristol, United Kingdom; Department of Biological Psychology, VU University, Amsterdam, Netherlands; School of Social and Community Medicine, University of Bristol, Bristol, United Kingdom; School of Biochemistry, University of Bristol, Bristol, United Kingdom; School of Medical Sciences, Institute of Medical Sciences, Foresterhill, University of Aberdeen, Aberdeen, Scotland; School of Social and Community Medicine, University of Bristol, Bristol, United Kingdom; Division of Psychiatry, University College London, London, United Kingdom; School of Social and Community Medicine, University of Bristol, Bristol, United Kingdom; Department of Biological Psychology, VU University, Amsterdam, Netherlands; Department of Psychiatry, Genetics, and Neurobiology, Yale University School of Medicine, West Haven, CT, US; Department of Psychiatry, Genetics, and Neurobiology, Yale University School of Medicine, West Haven, CT, US; Department of Psychiatry, Genetics, and Neurobiology, Yale University School of Medicine, West Haven, CT, US; MRC Integrative Epidemiology Unit, UK Centre for Tobacco and Alcohol Studies, University of Bristol, Bristol, United Kingdom; Schools of Physiology, University of Bristol, Bristol, United Kingdom

**Language:** English

**Abstract:** There is a large body of pre-clinical and some clinical data to link the neuropeptide galanin to a range of physiological and pathological functions that include metabolism, depression, and addiction. An enhancer region upstream of the human GAL transcriptional start site has previously been characterised. In-vitro transfection studies in rat hypothalamic neurons demonstrated that the CA allele was 40% less active than the GG allele in driving galanin expression. Our hypothesis was to investigate the effect of this galanin enhancer genotype on a range of variables that relate to the known functions of the galaninergic system in the Avon Longitudinal Study of Parents and Children (ALSPAC) cohort of young adults (N = 169-6, 078). Initial findings showed a positive relationship of cannabis usage (OR = 2.070, P = 0.007, N = 406 (individuals who had used cannabis at least once within the last 12 months, total sample size 2731) with the GG haplotype, consistent with the previous published data linking galanin with an increased release of dopamine. As our sample size was relatively small we replicated the analysis in a larger cohort of 2,224 African Americans and 1,840 European Americans, but no discernible trend across genotypes was observed for the relationship with cannabis usage. Further, we found no association of the galanin enhancer genotype with any of the other pathophysiological parameters measured. These findings emphasise that preclinical data does not always predict clinical outcomes in cohort studies, noting that association studies are subject to multiple confounders. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: American Journal of Medical Genetics Part B: Neuropsychiatric Genetics published by Wiley Periodicals, Inc.; HOLDER: The Authors; YEAR: 2014

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Genotypes](#)  
[\\*Major Depression](#)  
[\\*Neuropeptides](#)  
[\\*Phenotypes](#)  
[Alcoholic Beverages](#)  
[Cannabis](#)  
[Metabolism](#)  
[Haplotype](#)

**Source:** PsycINFO

**31. Barriers to the dissemination of four harm reduction strategies: A survey of addiction treatment providers in Ontario.**

**Citation:** Harm Reduction Journal, December 2006, vol./is. 3/, 1477-7517 (Dec 14, 2006)

**Author(s):** Hobden, Karen L; Cunningham, John A

**Correspondence Address:** Hobden, Karen L: Centre for Addiction and Mental Health, Toronto, Canada, khobden@wayne.edu

**Institution:** Centre for Addiction and Mental Health, Toronto, Canada; Centre for Addiction and Mental Health and Departments of Psychology and of Public Health Services, University of Toronto, Toronto, Canada

**Language:** English

**Abstract:** A sample of service providers at addictions agencies' in Ontario were interviewed by telephone to assess attitudes toward, anticipated internal and external barriers to implementing, and expected benefits of four harm reduction strategies: needle exchange, moderate drinking goals, methadone treatment, and provision of free condoms to clients. Respondents were also asked to define harm reduction, list its most important elements, and describe what they find most troubling and most appealing about harm reduction. Attitudes toward harm reduction in general and the services provided at each agency were also assessed. Results indicated that the service providers surveyed had positive attitudes toward each of the four harm reduction strategies and harm reduction in general, and the majority of respondents were aware of the benefits associated with each strategy. Almost all of the agencies surveyed allowed for moderate drinking outcomes in the treatment of alcohol problems, and most agencies provided free condoms to clients. In terms of barriers, anticipated negative community reaction to needle exchange, methadone treatment, and free condoms was a major concern for the majority of respondents. Lack of staff, of funding, or anticipated staff resistance were also cited as potential barriers to introducing these strategies. In the case of methadone maintenance, the unavailability of a qualified physician was listed as the primary constraint. Implications for future efforts directed at encouraging the adoption of these strategies and suggestions for future research are discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Hobden and Cunningham.; YEAR: 2006

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

**Subject Headings:** [\\*Community Services](#)  
[\\*Employee Attitudes](#)  
[\\*Harm Reduction](#)  
[\\*Prevention](#)  
[Condoms](#)  
[Drug Abuse Prevention](#)  
[Needle Exchange Programs](#)  
[Sexual Risk Taking](#)  
[Strategies](#)

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
 Available from *BioMedCentral* in [Harm Reduction Journal](#)  
 Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;  
 Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

### 32. Reconsidering the public health failings of the criminal justice system: A reflection on the case of Scott Ortiz.

**Citation:** Harm Reduction Journal, August 2006, vol./is. 3/, 1477-7517 (Aug 15, 2006)

**Author(s):** Kerr, Thomas

**Correspondence Address:** Kerr, Thomas: British Columbia Centre for Excellence in HIV/AIDS, St. Paul's Hospital, 608-1081 Burrard Street, Vancouver, Canada, V6Z 1Y6, tkerr@cfenet.ubc.ca

**Institution:** British Columbia Centre for Excellence in HIV/AIDS, St. Paul's Hospital, Vancouver, Canada

**Language:** English

**Abstract:** Throughout most of the world, the primary response to the health and social impacts of illicit drug use has been to intensify the enforcement of drug laws. The consequences of this policy approach include an unprecedented growth in prison populations and increasing concerns regarding drug-related harms within prisons and without, including increased risk of HIV and hepatitis C (HCV) infection. This has led to calls from public health and prisoner advocacy groups to prison authorities to improve health services available in the community and those available to prisoners. While considerable progress has been made with respect to the growing implementation of HIV and HCV prevention measures within some nations' prisons, the case of Scott Ortiz illuminates a new set of challenges for prisoners and their advocates as judges often have a faulty understanding of public health arguments and data. In this case we see one such instance where a judge acts in ways not rooted in sound public health evidence or practice to produce a perverse outcome that violates both sound medical and judicial objectives. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: This is an Open Access article distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/2.0>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.; HOLDER: Kerr.; licensee BioMed Central Ltd.; YEAR: 2006

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

**Subject Headings:** [\\*Criminal Justice](#)  
[\\*Drug Laws](#)  
[\\*Drug Usage](#)  
[\\*Prisons](#)  
[\\*Public Health](#)  
[Law Enforcement](#)  
[Policy Making](#)  
[Social Influences](#)

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
 Available from *BioMedCentral* in [Harm Reduction Journal](#)  
 Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;  
 Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

### 33. Patient, prisoner or person?

**Citation:** Harm Reduction Journal, August 2006, vol./is. 3/, 1477-7517 (Aug 7, 2006)

**Author(s):** Small, Dan

**Correspondence Address:** Small, Dan: Director PHS Community Services Society, 20 West Hastings Street, Vancouver, Canada, V6B 1G6, dansmall@portlandhotel.com

**Institution:** Director PHS Community Services Society, Vancouver, Canada

**Language:** English

**Abstract:** Case studies provide rich descriptions of significant vignettes that highlight atypical systemic or clinical problems and identify potentially important research questions. The case study presented by Venters, Razvi, Tobia and Drucker (2006) describes an unfortunate set of events pertaining to an individual's experience as they were failed by several systems all at once and neglected for having had experience with an addiction. This commentary provides some remarks on the case study with respect to differing institutional narratives as they pertain to lived experience in the context of everyday life. It is suggested that, in the special case of addiction, the mistreatment of the subject of the case study, Mr. Ortiz, is not an exception to the norm, but the norm itself for people living with addictions and their families. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Criminal Justice](#)  
[\\*Drug Rehabilitation](#)  
[\\*Prisoners](#)  
[\\*Health Disparities](#)  
[Health Care Utilization](#)

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
Available from *BioMedCentral* in [Harm Reduction Journal](#)  
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

#### 34. The case of Scott Ortiz: A clash between criminal justice and public health.

**Citation:** Harm Reduction Journal, July 2006, vol./is. 3/, 1477-7517 (Jul 24, 2006)

**Author(s):** Venters, Homer D; Razvi, Asiya M; Tobia, Maria S; Drucker, Ernest

**Correspondence Address:** Venters, Homer D.: Montefiore Medical Center, CHCC Clinic 305 E. 161st St., Bronx, US, 10451, hventers@montefiore.org

**Institution:** Montefiore Medical Center, Bronx, US; Bronx Defenders, Bronx, US; Bronx Defenders, Bronx, US; Department of Social and Family Medicine, Montefiore Medical Center, Bronx, NY, US

**Language:** English

**Abstract:** The criminal justice system creates particular challenges for persons with HIV and Hepatitis C, many of whom have a history of injection drug use. The case of Scott Ortiz, taken from public trial and sentencing transcripts, reveals the manner in which incarceration may delay learning of important health problems such as Hepatitis C infection. In addition, the case of Mr. Ortiz suggests the bias in sentencing that a former injection drug user may face. Collaboration between the Montefiore Medical Center residency in Social Medicine and a Bronx legal services agency, Bronx Defenders, yielded the discovery that a decade after diagnosis with HIV and after long term incarceration, Mr. Ortiz was infected with Hepatitis C. Mr. Ortiz only became aware of his advanced Hepatitis C and liver damage during his trial. The second important aspect

of this case centers on the justification for lengthy sentence for a burglary conviction. The presiding Judge in Mr. Ortiz's case acknowledged that because of his advanced illness, Mr. Ortiz posed no threat to society as a burglar (the crime for which he was convicted). But the Judge elected to use his discretion to sentence Mr. Ortiz to a term of 15 years to life (as opposed to a minimum of two to four years) based on the idea that the public health would be served by preventing Mr. Ortiz from returning to the life of a street addict, sharing dirty needles with others. Mr. Ortiz reports distant injection drug use, no evidence of current or recent drug use was presented during Mr. Ortiz's trial and he reports no injection drug use for over a decade. In this case, bias against a former injection drug user, masquerading as concern for public health, is used to justify a lengthier sentence. Mr. Ortiz's lack of awareness of his Hepatitis C infection despite long term incarceration, combined with the justification for his dramatically increased sentence, provide examples of how persons within the criminal justice system may face particular challenges to their health. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Criminal Justice](#)  
[\\*Hepatitis](#)  
[\\*HIV](#)  
[\\*Intravenous Drug Usage](#)  
[\\*Public Health](#)  
[Criminals](#)  
[Incarceration](#)
- Source:** PsycINFO
- Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
Available from *BioMedCentral* in [Harm Reduction Journal](#)  
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;  
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

### 35. Expansion of opiate agonist treatment: An historical perspective.

- Citation:** Harm Reduction Journal, July 2006, vol./is. 3/, 1477-7517 (Jul 21, 2006)
- Author(s):** Newman, Robert G
- Correspondence Address:** Newman, Robert G.: The Baron Edmond de Rothschild Chemical Dependency Institute of Beth Israel Medical Center, Albert Einstein College of Medicine of Yeshiva University, 555 West 57th Street, 18th Floor, New York, NY, US, 10019, [mewman@icaat.org](mailto:mewman@icaat.org)
- Institution:** The Baron Edmond de Rothschild Chemical Dependency Institute of Beth Israel Medical Center, Albert Einstein College of Medicine of Yeshiva University, New York, NY, US
- Language:** English
- Abstract:** Untreated opiate addiction remains a major health care crisis in New York and in most other urban centers in America. Optimism for closing the gap between need and demand for treatment and its availability has greeted the recent approval of a new opiate medication for addiction, buprenorphine - which unlike methadone may be prescribed by independent, office-based practitioners. The likelihood of buprenorphine fulfilling its potential is assessed in the light of the massive expansion of methadone treatment more than 30 years earlier. It is concluded that the key, indispensable ingredient of success will be true commitment on the part of Government to provide care to all those who need it. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
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permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.; HOLDER: Newman; licensee BioMed Central Ltd.; YEAR: 2006

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

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

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
 Available from *BioMedCentral* in [Harm Reduction Journal](#)  
 Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;  
 Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

### 36. Opiate users' knowledge about overdose prevention and naloxone in New York City: A focus group study.

**Citation:** Harm Reduction Journal, July 2006, vol./is. 3/, 1477-7517 (Jul 5, 2006)

**Author(s):** Worthington, Nancy; Piper, Tinka Markham; Galea, Sandro; Rosenthal, David

**Correspondence Address:** Galea, Sandro: Center for Urban Epidemiologic Studies, New York Academy of Medicine, New York, NY, US, 10029, sgalea@umich.edu

**Institution:** Lower East Side Harm Reduction Center, New York, NY, US; Center for Urban Epidemiologic Studies, New York Academy of Medicine, New York, NY, US; Center for Urban Epidemiologic Studies, New York Academy of Medicine, New York, NY, US; Lower East Side Harm Reduction Center, New York, NY, US

**Language:** English

**Abstract:** Background: Drug-induced and drug-related deaths have been increasing for the past decade throughout the US. In NYC, drug overdose accounts for nearly 900 deaths per year, a figure that exceeds the number of deaths each year from homicide. Naloxone, a highly effective opiate antagonist, has for decades been used by doctors and paramedics during emergency resuscitation after an opiate overdose. Following the lead of programs in Europe and the US who have successfully distributed take-home naloxone, the Overdose Prevention and Reversal Program at the Lower East Side Harm Reduction Center (LESHRC) has started providing a similar resource for opiate users in NYC. Participants in the program receive a prescription for two doses of naloxone, with refills as needed, and comprehensive training to reduce overdose risk, administer naloxone, perform rescue breathing, and call 911. As of September 2005, 204 participants have received naloxone and been trained, and 40 have revived an overdosing friend or family member. While naloxone accessibility stands as a proven life-saving measure, some opiates users at LESHRC have expressed only minimal interest in naloxone use, due to past experiences and common misconceptions. Methods: In order to improve the naloxone distribution program two focus groups were conducted in December 2004 with 13 opiate users at LESHRC to examine knowledge about overdose and overdose prevention. The focus groups assessed participants' (i) experiences with overdose response, specifically naloxone (ii) understanding and perceptions of naloxone, (iii) comfort level with naloxone administration and (iv) feedback about increasing the visibility and desirability of the naloxone distribution program. Results: Analyses suggest that there is both support for and resistance to take-home naloxone, marked by enthusiasm for its potential role in reviving an overdosing individual, numerous misconceptions and negative views of its impact and use. Conclusion: Focus group results will be used to increase participation in the program and reshape perceptions about naloxone among opiate users, also targeting those already prescribed naloxone to increase their comfort using it. Since NYC is advancing toward a citywide naloxone distribution program, the LESHRC program will play an important role in establishing protocol for effective and wide-reaching naloxone availability. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Abuse Prevention](#)  
[\\*Drug Overdoses](#)  
[\\*Drug Rehabilitation](#)  
[Drug Therapy](#)  
[Knowledge Level](#)  
[Naloxone](#)  
[Opiates](#)

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
Available from *BioMedCentral* in [Harm Reduction Journal](#)  
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;  
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

### 37. Policy makers ignoring science and scientists ignoring policy: The medical ethical challenges of heroin treatment.

**Citation:** Harm Reduction Journal, May 2006, vol./is. 3/, 1477-7517 (May 2, 2006)

**Author(s):** Small, Dan; Drucker, Ernest; Editorial for Harm Reduction Journal

**Correspondence Address:** Small, Dan: PHS Community Services Society, 20 West Hastings Street, Vancouver, Canada, V6B 1G6, dansmall@portlandhotel.com

**Corporate/Institutional Author:** Editorial for Harm Reduction Journal

**Institution:** PHS Community Services Society, Vancouver, Canada; Montefiore Medical Center, Albert Einstein College of Medicine, Bronx, NY, US

**Language:** English

**Abstract:** A decade of research in Switzerland, The Netherlands, Germany, and Spain now constitutes a massive body of work supporting the use of heroin treatment for the most difficult patients addicted to opiates. These trials concur on this method's safety and efficacy and are now serving as a prelude to the institution of heroin treatment in clinical practice throughout Europe. While the different sampling and research protocols for heroin treatment in these studies were important to the academic claims about specific results and conclusions that could be drawn from each study, the overall outcomes were quite clear - and uniformly positive. They all find that the use of prescribed pharmaceutical heroin does exactly what it is intended to do: it reaches a treatment refractory group of addicts by engaging them in a positive healthcare relationship with a physician, it reduces their criminal activity, improves their health status, and increases their social tenure through more stable housing, employment, and contact with family. The Canadian trial (NAOMI), now underway for over a year, but not yet completed, now faces a dilemma about what to do with its patients who have successfully completed 12 months of heroin and must be withdrawn from heroin and transferred to other treatments in accordance with the research protocol approved by Government of Canada, federal granting body and host institutions. The problem is that the principal criterion for acceptance to NAOMI was their history of repeated failure in these very same treatment programs to which they will now be referred. The existence of the results from abroad (some of which were not yet available when NAOMI was designed and initiated) now raises a very important question for Canada: is it ethical to continue to prohibit the medical use of heroin treatment that has already been shown to be feasible and effective in numerous medical studies throughout the world? And while this is being worked out, is it acceptable to require patients who have been successfully treated with heroin in

Canada, to be forced to move back to less effective treatments (treatments that failed to be efficacious in the past)? This essay discusses this dilemma and places it in the broader context of ethics, science, and health policy. It makes the case for continuation of the current successful patients in heroin treatment and the institution of heroin treatment to all Canadian patients living with active addictions who qualify. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Bioethics](#)  
[\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[\\*Drug Therapy](#)  
[\\*Heroin](#)  
[Health Care Policy](#)

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
Available from *BioMedCentral* in [Harm Reduction Journal](#)  
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;  
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

### 38. Injury associated with methamphetamine use: A review of the literature.

**Citation:** Harm Reduction Journal, March 2006, vol./is. 3/, 1477-7517 (Mar 29, 2006)

**Author(s):** Sheridan, Janie; Bennett, Sara; Coggan, Carolyn; Wheeler, Amanda; McMillan, Karen

**Correspondence Address:** Sheridan, Janie: School of Pharmacy, University of Auckland, New Zealand, 85247, [j.sheridan@auckland.ac.nz](mailto:j.sheridan@auckland.ac.nz)

**Institution:** School of Pharmacy, University of Auckland, New Zealand; Alcohol Advisory Council of New Zealand (ALAC), New Zealand; Safe Communities Foundation, New Zealand; Clinical Resource and Research Centre, Waitemata District Health Board, Auckland, New Zealand; C/O University of Auckland, New Zealand

**Language:** English

**Abstract:** This paper reviews the literature exploring issues around methamphetamine and injury. There was a paucity of peer reviewed quantitative research and a lack of large scale epidemiological studies. Further sources described cases and others described injury risk as part of an overall review of methamphetamine misuse. Thus, a number of limitations and potential biases exist within the literature. The main areas where associations were noted or extrapolated with methamphetamine use and injury were around driving and violence. Other associations with injury related to methamphetamine manufacture. There was also circumstantial evidence for third party injury (that is injury to those not specifically involved in drug use or drug manufacture); however, the available data are inadequate to confirm these associations/risks. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Sheridan et al.; YEAR: 2006

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Injuries](#)  
[\\*Methamphetamine](#)  
[Driving Behavior](#)  
[Risk Taking](#)

Side Effects (Drug)  
Violence

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
Available from *BioMedCentral* in [Harm Reduction Journal](#)  
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;  
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

### 39. Initiation of opiate addiction in a Canadian prison: A case report.

**Citation:** Harm Reduction Journal, March 2006, vol./is. 3/, 1477-7517 (Mar 16, 2006)

**Author(s):** Wood, Evan; Lim, Ronald; Kerr, Thomas

**Correspondence Address:** Wood, Evan: British Columbia Centre for Excellence in HIV/AIDS, St. Paul's Hospital, 608 - 1081 Burrard Street, Vancouver, Canada, V6Z 1Y6, ewood@cfenet.ubc.ca

**Institution:** British Columbia Centre for Excellence in HIV/AIDS, St. Paul's Hospital, Vancouver, Canada; Addiction Centre, University of Calgary, Calgary, Canada; British Columbia Centre for Excellence in HIV/AIDS, St. Paul's Hospital, Vancouver, Canada

**Language:** English

**Abstract:** Background: In North America, the harms of illicit drug use have been responded to primarily through law enforcement interventions. This strategy has resulted in record populations of addicted individuals being incarcerated in both Canada and the United States. The incarceration of non-violent drug offenders has become increasingly controversial as studies demonstrate the harms, including elevated HIV risk behavior, of incarcerating injection drug users. Other harms, such as the initiation of illicit drug use by prison inmates who previously did not use drugs, have been less commonly described. Case Presentation: We report on the case of an individual who initiated non-injection opiate use in a Canadian prison and developed an addiction to the drug. Upon release into the community, the individual continued using opiates and sought treatment at a clinic. The patient feared that he might initiate injection use of opiates if his cravings could not be controlled. The patient was placed on methadone maintenance therapy. Conclusion: While anecdotal reports indicate that initiation in prison of the use of addictive illicit substances is frequent, documentation through clinical experience is rare, and the public health implications of this behavior have not been given sufficient attention in the literature. Strategies of incarcerating non-violent drug offenders and attempting to keep illicit drugs out of prisons have not reduced the harms and costs of illicit drug use. Effective, practical alternatives are urgently needed; expanded community diversion programs for non-violent drug offenders deserve particular attention. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Addiction](#)  
[\\*Methadone Maintenance](#)  
[\\*Opiates](#)  
[Criminals](#)  
[Prisons](#)

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
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Available from *Springer NHS Pilot 2014 (NESLi2)* in *Harm Reduction Journal*; Note: ;  
Collection notes: Academic-License. Please when asked to pick an institution please pick  
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#### 40. Risk factors associated with injection initiation among drug users in northern Thailand.

- Citation:** Harm Reduction Journal, March 2006, vol./is. 3/, 1477-7517 (Mar 14, 2006)
- Author(s):** Cheng, Yingkai; Sherman, Susan G; Srirat, Namtip; Vongchak, Tasanai; Kawichai, Surinda; Jittiwutikarn, Jaroon; Suriyanon, Vinai; Razak, Myat Htoo; Sripaipan, Teerada; Celentano, David D
- Correspondence Address:** Celentano, David D.: Johns Hopkins University, Bloomberg School of Public Health, Baltimore, MD, US, dcelenta@jhsph.edu
- Institution:** Ministry of Public Health, Nonthaburi, Thailand; Johns Hopkins University, Bloomberg School of Public Health, Baltimore, MD, US
- Language:** English
- Abstract:** Background: Circumstances surrounding injection initiation have not been well addressed in many developing country contexts. This study aimed to identify demographic factors, sexual behaviors and drug use characteristics related to injection initiation among drug users in northern Thailand. Methods: A cross-sectional survey was conducted among 2,231 drug users admitted to the Northern Drug Treatment Center in Mae Rim, Chiang Mai, Thailand, between February 1, 1999 and December 31, 2000. A multiple logistic regression was employed to identify the independent effects from potential risk factors of transition into injection. Results: After controlling for other covariates, being 20 years of age or older, single, ever receiving education, urban residence, and having a history of smoking or incarceration were significantly associated with higher likelihood of injection initiation. Multiple sex partners and an experience of sex abuse were associated with an increased risk of injection initiation. Comparing to those whose first drug was opium, individuals using heroin as their initiation drug had greater risk of injection initiation; conversely, those taking amphetamine as their first drug had less risk of injection initiation. Age of drug initiation was negatively associated with the risk of injection initiation: the older the age of drug initiation, the less the risk of injection initiation. Conclusion: Injection initiation was related to several demographic factors, sexual behaviors and drug use characteristics. Understanding these factors will benefit the design of approaches to successfully prevent or delay transition into injection. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
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- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** \*Drug Abuse  
\*Intravenous Drug Usage  
\*Psychosexual Behavior  
\*Risk Factors  
\*South Asian Cultural Groups  
Injections
- Source:** PsycINFO
- Full Text:** Available from *National Library of Medicine* in *Harm Reduction Journal*  
Available from *BioMedCentral* in *Harm Reduction Journal*

Available from *Springer NHS Pilot 2014 (NESLi2)* in *Harm Reduction Journal*; Note: ;  
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#### 41. HIV/AIDS prevalence and behaviour in drug users and pregnant women in Kashgar Prefecture: Case report.

- Citation:** Harm Reduction Journal, February 2006, vol./is. 3/, 1477-7517 (Feb 13, 2006)
- Author(s):** Mingjian, Ni; Wheeler, K. M; Cheng, J; Yonghai, Dong; Chen, W; Fitzwarryne, C; Wang, J
- Correspondence Address:** Mingjian, Ni: Xinjiang Centre for HIV/AIDS Prevention and Control, 48 Beijing South Road, Urumqi, China, mingjian@xjhpac.com
- Institution:** Xinjiang Centre for HIV/AIDS Prevention and Control, Urumqi, China; Xinjiang HIV/AIDS Prevention and Care Project, Melbourne Development Institute, Urumqi, China; Xinjiang Centre for HIV/AIDS Prevention and Control, Urumqi, China; Xinjiang Centre for HIV/AIDS Prevention and Control, Urumqi, China; Xinjiang HIV/AIDS Prevention and Care Project, Melbourne Development Institute, Urumqi, China; Xinjiang HIV/AIDS Prevention and Care Project, Melbourne Development Institute, Urumqi, China; Xinjiang Centre for HIV/AIDS Prevention and Control, Urumqi, China
- Language:** English
- Abstract:** Second Generation sub-population HIV Surveillance was undertaken in Kashgar City and Shache County, Xinjiang, Peoples Republic of China between December 2003 and January 2004, targeting injecting and mixed method drug users and pregnant and postnatal women. The study aimed to determine the extent to which the epidemic is shifting from a concentrated stage to a more generalised epidemic. One hundred and forty two (142) exclusively injecting drug users (66) and mixed method drug users (injecting and non-injecting-76) participated in this survey. Eight hundred and two (802) pregnant and postnatal women participated in the survey. In Kashgar City and Shache County the serum prevalence of HIV amongst injecting drug users was 56.06%, for mixed method drug users 48.68% and 0.38% in pregnant women. In Shache County HIV infection rates were significantly lower in drug user groups and amongst pregnant and post-natal women, at 2.22% and 0% respectively. The behavioral survey indicated that 15% of injecting drug users have shared needles (however sero prevalence and knowledge in relation to access to clean needles and syringes suggests that this may not reflect the actual situation). Knowledge of prevention of transmission strategies (not sharing needles and condom utilisation) is similar between both groups at 60-70%. However it appears that this knowledge has not significantly impacted on behavior such as needle sharing and condom utilisation. In Kashgar City and Shache County there have been very few interventions to support HIV/AIDS prevention, care and control. The results from this survey will inform future directions and the development and implementation of targeted interventions including targeted information dissemination and harm reduction strategies. This survey was funded by the Xinjiang HIV/AIDS Prevention and Care Project, a bilateral project jointly implemented by the Government of the People's Republic of China and the Government of Australia. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: Mingjian et al.; YEAR: 2006
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*AIDS](#)  
[\\*Drug Abuse](#)  
[\\*Harm Reduction](#)  
[\\*HIV](#)  
[\\*Pregnancy](#)  
[Drugs](#)  
[Epidemiology](#)  
[Intervention](#)  
[Mothers](#)  
[Sexual Risk Taking](#)  
[Urban Environments](#)

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Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;  
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

#### 42. Development and validation of an Opioid Attractiveness Scale: A novel measure of the attractiveness of opioid products to potential abusers.

**Citation:** Harm Reduction Journal, February 2006, vol./is. 3/, 1477-7517 (Feb 2, 2006)

**Author(s):** Butler, Stephen F; Benoit, Christine; Budman, Simon H; Fernandez, Kathrine C; McCormick, Cynthia; Venuti, Synne Wing; Katz, Nathaniel

**Correspondence Address:** Butler, Stephen F.: Pain and Opioid Division, Inflexxion, Inc., 320 Needham St., Ste. 100, Newton, MA, US, 02464, [sfbutler@inflexxion.com](mailto:sfbutler@inflexxion.com)

**Institution:** Pain and Opioid Division, Inflexxion, Inc., Newton, MA, US; Pain and Opioid Division, Inflexxion, Inc., Newton, MA, US; Pain and Opioid Division, Inflexxion, Inc., Newton, MA, US; Pain and Opioid Division, Inflexxion, Inc., Newton, MA, US; McCormick Consultation, LLC, Bethesda, MD, US; Pain and Opioid Division, Inflexxion, Inc., Newton, MA, US; Pain and Opioid Division, Inflexxion, Inc., Newton, MA, US

**Language:** English

**Abstract:** Background: The growing trends in opioid abuse, assessment of the abuse liability of prescription opioid products, and growing efforts by the pharmaceutical industry to develop 'abuse-resistant' formulations highlight a need to understand the features that make one product more 'attractive' than another to potential abusers. We developed a scale to measure the 'attractiveness' of prescription opioids to potential abusers, and used the scale to measure the relative attractiveness of 14 opioid analgesic products. Methods: First, the concept of attractiveness was empirically defined with a group of prescription opioid abusers and experts in opioid abuse using a process called Concept Mapping. Abuse liability consisted of two components: factors intrinsic to the drug formulation (e.g., speed of onset, duration) and factors extrinsic to drug formulation (e.g., availability, availability of alternatives, cost). A 17-item Opioid Attractiveness Scale (OAS) was constructed, focusing on factors intrinsic to the drug product. Results: A total of 144 individuals participated in tests of validity and reliability. Internal consistency was excellent (Cronbach's  $\alpha = 0.85-0.94$ ). Drug rankings based on OAS scores achieved good inter-rater agreement (Kendall's  $\tau_b = 0.37$ ,  $p < 0.001$ ). Agreement on drug OAS scores between the developmental sample and a confirmation sample was good (IntraClass Correlations [ICC] of 0.65-0.69). Global ratings of overall attractiveness of the 14 selected opioid products by substance abuse counselors corresponded with the rankings based on OAS ratings of the abuser group. Finally, substance abuse counselors completed the OAS, yielding a high level of correspondence with ratings by the abuser group (ICC = 0.83,  $p = 0.002$ ). The OAS differentiated attractiveness among 14 selected pharmaceutical opioid products. OxyContin, Dilaudid, and Percocet were ranked highest (most attractive); Talwin NX and Duragesic were ranked lowest (least attractive). Conclusion: An initial examination of the psychometric properties of the OAS suggests that it is a valid and reliable scale. The OAS may be useful in providing important guidance on product features that are attractive to potential abusers. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Butler et al.; YEAR: 2006

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Abuse Liability](#)  
[\\*Opiates](#)  
[\\*Rating Scales](#)  
[\\*Test Construction](#)  
[Trends](#)

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
Available from *BioMedCentral* in [Harm Reduction Journal](#)  
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;  
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

#### 43. The Readiness Ruler as a measure of readiness to change poly-drug use in drug abusers.

**Citation:** Harm Reduction Journal, January 2006, vol./is. 3/, 1477-7517 (Jan 25, 2006)

**Author(s):** Hesse, Morten

**Correspondence Address:** Hesse, Morten: Centre for Alcohol and Drug Research, Aarhus University, Kobmagergade 26E, Copenhagen K, Denmark, 1150, mortenhesse@crf.dk

**Institution:** Centre for Alcohol and Drug Research, Aarhus University, Copenhagen K, Denmark

**Language:** English

**Abstract:** Readiness to change is a crucial issue in the treatment of substance use disorders. Experiences with methadone maintenance treatment (MMT) has shown that continuous drug and alcohol use with all its consequences characterize most MMT programs. In a prospective study of drug abusers seeking opiate agonist maintenance treatment in the City of Copenhagen, subjects were administered the Addiction Severity Index, and the Readiness Ruler for each of 11 different licit and illicit drugs by research technicians. Data was collected upon admission to the program and at a 18 month follow-up. Subjects who indicated they wanted to quit or cut down upon admission, reported less drug use at 18 month follow-up, after controlling for severity of drug problems at intake. Subjects who expressed readiness to change their drug use upon admission decreased their drug use. It is concluded that the Readiness Ruler measures a construct related to actual readiness, supporting its use in the clinical context. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Hesse.; YEAR: 2006

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

**Subject Headings:** [\\*Drug Rehabilitation](#)  
[\\*Polydrug Abuse](#)  
[\\*Questionnaires](#)  
[\\*Readiness to Change](#)  
[\\*Test Validity](#)  
[Behavior Change](#)

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
Available from *BioMedCentral* in [Harm Reduction Journal](#)  
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;  
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

#### 44. Patterns of drug use among a sample of drug users and injecting drug users attending a general practice in Iran.

**Citation:** Harm Reduction Journal, January 2006, vol./is. 3/, 1477-7517 (Jan 24, 2006)

**Author(s):** Day, Carolyn; Nassirimanesh, Bijan; Shakeshaft, Anthony; Dolan, Kate

**Correspondence Address:** Day, Carolyn: National Centre in HIV Epidemiology and Clinical Research, University of New South Wales, Level 2, 376 Victoria Street, Darlinghurst, Australia, 2010, cday@nchehr.unsw.edu.au

**Institution:** National Centre in HIV Epidemiology and Clinical Research, University of New South Wales, Level 2, Darlinghurst, Australia; Persepolis Centre, Tehran, Iran; National Drug and Alcohol Research Centre, University of New South Wales, Australia; National Drug and Alcohol Research Centre, University of New South Wales, Australia

**Language:** English

**Abstract:** Aim: This study aimed to examine drug use, drug treatment history and risk behaviour among a sample of Iranian drug users seeking treatment through a general practice clinic in Iran. Methods: Review of medical records and an intake questionnaire at a large general practice in Marvdasht, Iran, with a special interest in drug dependence treatment. Records from a random sample of injecting drug users (IDU), non-injecting drug users (DU) and non-drug using patients were examined. Results: 292 records were reviewed (34% IDU, 31% DU and 35% non-drug users). Eighty-three percent were males; all females were non-drug users. The mean age of the sample was 30 years. Of the IDU sample, 67% reported sharing a needle or syringe, 19% of these had done so in prison. Of those who had ever used drugs, being 'tired' of drug use was the most common reason for seeking help (34%). Mean age of first drug use was 20 years. The first drugs most commonly used were opium (72%), heroin (13%) and hashish/other cannabinoids (13%). Three quarters reported having previously attempted to cease their drug use. IDU were more likely than DU to report having ever been imprisoned (41% vs 7%) and 41% to have used drugs in prison. Conclusion: This study has shown that there is a need for general practice clinics in Iran to treat drug users including those who inject and that a substantial proportion of those who inject have shared needles and syringes, placing them at risk of BBVI such as HIV and hepatitis C. The expansion of services for drug users in Iran such as needle and syringe programs and pharmacotherapies are likely to be effective in reducing the harms associated with opium use and heroin injection. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Day et al.; YEAR: 2006

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

**Subject Headings:** [\\*Clinics](#)  
[\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[\\*Primary Health Care](#)  
[Harm Reduction](#)  
[Health Behavior](#)  
[Injections](#)  
[Risk Taking](#)

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
Available from *BioMedCentral* in [Harm Reduction Journal](#)  
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;  
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

#### 45. Potential community and public health impacts of medically supervised safer smoking facilities for crack cocaine users.

**Citation:** Harm Reduction Journal, January 2006, vol./is. 3/, 1477-7517 (Jan 10, 2006)

**Author(s):** Shannon, Kate; Ishida, Tomiye; Morgan, Robert; Bear, Arthur; Oleson, Megan; Kerr, Thomas; Tyndall, Mark W

**Correspondence Address:** Shannon, Kate: British Columbia Centre for Excellence in HIV/AIDS, Vancouver, Canada, kshannon@cfenet.ubc.ca

**Institution:** British Columbia Centre for Excellence in HIV/AIDS, Vancouver, Canada; British Columbia Centre for Excellence in HIV/AIDS, Vancouver, Canada; Rock User's Group (RUG) of Vancouver Area Network of Drug Users (VANDU), Vancouver, Canada; Rock User's Group (RUG) of Vancouver Area Network of Drug Users (VANDU), Vancouver, Canada; British Columbia Centre for Excellence in HIV/AIDS, Vancouver, Canada; British Columbia Centre for Excellence in HIV/AIDS, Vancouver, Canada; British Columbia Centre for Excellence in HIV/AIDS, Vancouver, Canada

**Language:** English

**Abstract:** There is growing evidence of the public health and community harms associated with crack cocaine smoking, particularly the risk of blood-borne transmission through non-parenteral routes. In response, community advocates and policy makers in Vancouver, Canada are calling for an exemption from Health Canada to pilot a medically supervised safer smoking facility (SSF) for non-injection drug users (NIDU). Current reluctance on the part of health authorities is likely due to the lack of existing evidence surrounding the extent of related harm and potential uptake of such a facility among NIDUs in this setting. In November 2004, a feasibility study was conducted among 437 crack cocaine smokers. Univariate analyses were conducted to determine associations with willingness to use a SSF and logistic regression was used to adjust for potentially confounding variables ( $p < 0.05$ ). Variables found to be independently associated with willingness to use a SSF included recent injection drug use (OR = 1.72, 95% CI: 1.09-2.70), having equipment confiscated or broken by police (OR = 1.96, 95% CI: 1.24-2.85), crack bingeing (OR = 2.16, 95% CI: 1.39-3.12), smoking crack in public places (OR = 2.48, 95% CI: 1.65-3.27), borrowing crack pipes (OR = 2.50, 95% CI: 1.86-3.40), and burns/inhaled brillo due to rushing smoke in public places (OR = 4.37, 95% CI: 2.71-8.64). The results suggest a strong potential for a SSF to reduce the health related harms and address concerns of public order and open drug use among crack cocaine smokers should a facility be implemented in this setting. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Shannon et al.; YEAR: 2006

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

**Subject Headings:** [\\*Crack Cocaine](#)  
[\\*Drug Abuse](#)  
[\\*Facilities](#)  
[\\*Intravenous Drug Usage](#)  
[\\*Public Health](#)

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
Available from *BioMedCentral* in [Harm Reduction Journal](#)  
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;  
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

#### 46. Harm reduction-The cannabis paradox.

**Citation:** Harm Reduction Journal, September 2005, vol./is. 2/, 1477-7517 (Sep 22, 2005)

**Author(s):** Melamede, Robert

**Correspondence Address:** Melamede, Robert: Biology Department, University of Colorado, 1420 Austin Bluffs Parkway, Colorado Springs, US, 80918, rmelamed@uccs.edu

**Institution:** Biology Department, University of Colorado, Colorado Springs, US

**Language:** English

**Abstract:** This article examines harm reduction from a novel perspective. Its central thesis is that harm reduction is not only a social concept, but also a biological one. More specifically, evolution does not make moral distinctions in the selection process, but utilizes a cannabis-based approach to harm reduction in order to promote survival of the fittest. Evidence will be provided from peer-reviewed scientific literature that supports the hypothesis that humans, and all animals, make and use internally produced cannabis-like products (endocannabinoids) as part of the evolutionary harm reduction program. More specifically, endocannabinoids homeostatically regulate all body systems (cardiovascular, digestive, endocrine, excretory, immune, nervous, musculo-skeletal, reproductive). Therefore, the health of each individual is dependant on this system working appropriately. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Melamede.; YEAR: 2005

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

**Subject Headings:** [\\*Cannabis](#)  
[\\*Drug Abuse](#)  
[\\*Drug Usage](#)  
[\\*Harm Reduction](#)  
[\\*Theory of Evolution](#)

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
Available from *BioMedCentral* in [Harm Reduction Journal](#)  
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;  
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

#### 47. A case report: Pavlovian conditioning as a risk factor of heroin 'overdose' death.

**Citation:** Harm Reduction Journal, July 2005, vol./is. 2/, 1477-7517 (Jul 25, 2005)

**Author(s):** Gerevich, Jozsef; Bacskai, Erika; Farkas, Lajos; Danics, Zoltan

**Correspondence Address:** Gerevich, Jozsef: Addiction Research Institute, Budapest, Hungary, gerevichj@axelero.hu

**Institution:** Addiction Research Institute, Budapest, Hungary; Addiction Research Institute, Budapest, Hungary; Faculty of Orthopedagogics, ELTE University, Budapest, Hungary; National Institute of Psychiatry, Budapest, Hungary

**Language:** English

**Abstract:** Background: The authors present a case illustrating a mechanism leading directly to death which is not rare but has received little attention. Case presentation: The case was evaluated by autopsy, investigation of morphine concentration in the blood, and clinical data. The heroin dose causing the 'overdose' death of a young man who had previously been treated a number of times for heroin addiction did not differ from his dose of the previous day taken in the accustomed circumstances. The accustomed dose taken in a strange environment caused fatal complications because the conditioned tolerance failed to operate. The concentration of morphine in the blood did not exceed the level measured during earlier treatment. Conclusion: These results are in line with the data in the literature indicating that morphine concentrations measured in cases of drug-related death do not differ substantially from those measured in cases where the outcome is not fatal. A knowledge of the conditioning mechanism can contribute to prevention of fatal cases of a similar type. The harm reduction approach places great stress on preventive intervention based on data related to drug-related death. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Gerevich et al.; YEAR: 2005

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

**Subject Headings:** [\\*Classical Conditioning](#)  
[\\*Death and Dying](#)  
[\\*Drug Overdoses](#)  
[\\*Drug Tolerance](#)  
[\\*Harm Reduction](#)  
[Heroin](#)  
[Risk Factors](#)

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
Available from *BioMedCentral* in [Harm Reduction Journal](#)  
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;  
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

#### 48. The evolutionary origins and significance of drug addiction.

**Citation:** Harm Reduction Journal, June 2005, vol./is. 2/, 1477-7517 (Jun 29, 2005)

**Author(s):** Saah, Tammy

**Correspondence Address:** Saah, Tammy: Transplant Immunobiology Laboratory, Stanford University School of Medicine, US, tammysaah@yahoo.com

**Institution:** Transplant Immunobiology Laboratory, Stanford University School of Medicine, US

**Language:** English

**Abstract:** By looking at drug addiction from an evolutionary perspective, we may understand its underlying significance and evaluate its three-fold nature: biology, psychology, and social influences. In this investigation it is important to delve into the co-evolution of mammalian brains and ancient psychotropic plants. Gaining an understanding of the implications of ancient psychotropic substance use in altering mammalian brains will assist in assessing the causes and effects of addiction in a modern-day context. By exploring addiction in this manner, we may move towards more effective treatment early prevention, treating the root of the issue rather than the symptoms. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Saah.; YEAR: 2005

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

**Subject Headings:** [\\*Drug Addiction](#)  
[\\*Theory of Evolution](#)  
[Biology](#)  
[Psychosocial Factors](#)  
[Social Influences](#)

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
Available from *BioMedCentral* in [Harm Reduction Journal](#)  
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;  
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

#### 49. Drug use and risk behaviours among injecting drug users: A comparison between sex workers and non-sex workers in Sydney, Australia.

**Citation:** Harm Reduction Journal, June 2005, vol./is. 2/, 1477-7517 (Jun 6, 2005)

**Author(s):** Roxburgh, Amanda; Degenhardt, Louisa; Breen, Courtney

**Correspondence Address:** Roxburgh, Amanda: National Drug and Alcohol Research Centre, University of New South Wales, Sydney, Australia, 2052, a.roxburgh@unsw.edu.au

**Institution:** National Drug and Alcohol Research Centre, University of New South Wales, Sydney, Australia; National Drug and Alcohol Research Centre, University of New South Wales, Sydney, Australia; National Drug and Alcohol Research Centre, University of New South Wales, Sydney, Australia

**Language:** English

**Abstract:** Background: This paper examines the differences in demographics, drug use patterns and self reported risk behaviours between regular injecting drug users (IDU) who report engaging in sex work for money or drugs and regular injecting drug users who do not. Methods: Cross sectional data collected from regular IDU interviewed as part of the New South Wales (NSW) Illicit Drug Reporting System (IDRS) in 2003 were analysed. Results: IDU who reported engaging in sex work were more likely to be female, and identify as being of Aboriginal and/or Torres Strait Islander descent. They initiated injecting drug use at a significantly younger age and were more likely to report injection related problems than IDU who had not engaged in sex work. There were no differences in the drug classes used, but findings suggested that the sex workers tended to be more frequent users of crystalline methamphetamine (ice) and benzodiazepines. Conclusion: The similarities between these groups were more striking than the differences. Further

research, examining a larger sample is needed to clarify whether injecting drug users who are sex workers have heavier use patterns. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Roxburgh et al.; YEAR: 2005

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Intravenous Drug Usage](#)  
[\\*Prostitution](#)  
[\\*Risk Taking](#)

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
Available from *BioMedCentral* in [Harm Reduction Journal](#)  
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;  
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

#### 50. Efficacy of acupuncture for cocaine dependence: A systematic review & meta-analysis.

**Citation:** Harm Reduction Journal, March 2005, vol./is. 2/, 1477-7517 (Mar 17, 2005)

**Author(s):** Mills, Edward J; Wu, Ping; Gagnier, Joel; Ebbert, Jon O

**Correspondence Address:** Mills, Edward J.: Department of Clinical Epidemiology, Canadian College of Naturopathic Medicine, North York, Canada, emills@ccnm.edu

**Institution:** Department of Clinical Epidemiology, Canadian College of Naturopathic Medicine, North York, Canada; Department of Clinical Epidemiology, Canadian College of Naturopathic Medicine, North York, Canada; Institute of Medical Sciences, University of Toronto, Toronto, Canada; Department of Internal Medicine, Mayo Clinic College of Medicine, Rochester, MN, US

**Language:** English

**Abstract:** Background: Acupuncture is a commonly used treatment option for the treatment of addictions such as alcohol, nicotine and drug dependence. We systematically reviewed and meta-analyzed the randomized controlled trials of acupuncture for the treatment of cocaine addiction. Methods: Two reviewers independently searched 10 databases. Unpublished studies were sought using Clinicaltrials.gov, the UK National Research Register and contacting content experts. Eligible studies enrolled patients with the diagnosis of cocaine dependence of any duration or severity randomly allocated to either acupuncture or sham or other control. We excluded studies of acupuncture methods and trials enrolling patients with polysubstance use or dependence. We abstracted data on study methodology and outcomes. We pooled the studies providing biochemical confirmation of cocaine abstinence. Results: Nine studies enrolling 1747 participants met inclusion criteria; 7 provided details for biochemical confirmation of cocaine abstinence. On average, trials lost 50% of enrolled participants (range 0-63%). The pooled odds ratio estimating the effect of acupuncture on cocaine abstinence at the last reported time-point was 0.76 (95% CI, 0.45 to 1.27, P = 0.30, I<sup>2</sup> = 30%, Heterogeneity P = 0.19). Conclusion: This systematic review and meta-analysis does not support the use of acupuncture for the treatment of cocaine dependence. However, most trials were hampered by large loss to follow up and the strength of the inference is consequently weakened. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Acupuncture](#)  
[\\*Addiction](#)

\*Cocaine  
 \*Drug Dependency  
 \*Treatment Effectiveness Evaluation

**Source:** PsycINFO  
**Full Text:** Available from *National Library of Medicine* in *Harm Reduction Journal*  
 Available from *BioMedCentral* in *Harm Reduction Journal*  
 Available from *Springer NHS Pilot 2014 (NESLi2)* in *Harm Reduction Journal*; Note: ;  
 Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

### 51. Initiation to heroin injecting among heroin users in Sydney, Australia: Cross sectional survey.

**Citation:** Harm Reduction Journal, February 2005, vol./is. 2/, 1477-7517 (Feb 15, 2005)  
**Author(s):** Day, Carolyn A; Ross, Joanne; Dietze, Paul; Dolan, Kate  
**Correspondence Address:** Day, Carolyn A.: National Drug and Alcohol Research Centre, University of New South Wales, Sydney, Australia, 2052, carolyn.day@unsw.edu.au  
**Institution:** National Drug and Alcohol Research Centre, University of New South Wales, Sydney, Australia; National Drug and Alcohol Research Centre, University of New South Wales, Sydney, Australia; Turning Point Alcohol and Drug Centre Inc, Deakin University School of Health and Social Development, Melbourne, Australia; National Drug and Alcohol Research Centre, University of New South Wales, Sydney, Australia  
**Language:** English  
**Abstract:** Background: Heroin injection is associated with health and social problems including hepatitis C virus (HCV) transmission. Few studies have examined the circumstances surrounding initiation to heroin injecting, especially current users initiating others. The current study aimed to examine the age of first heroin use and injection; administration route of first heroin use; relationship to initiator; the initiation of others among a group of heroin users; and to examine these factors in relation to HCV status and risk. Method: Heroin users in Sydney were recruited through needle and syringe programs, a methadone clinic and snowballing. Participants were interviewed about their own initiation to heroin use, blood-borne virus risk and knowledge, and whether they had initiated others to heroin injecting. Information on HCV status was collected via self-report. Data was analysed using univariate and multivariate statistical techniques for Normally distributed continuous and categorical data. Results: The study recruited 399 heroin users, with a mean age of 31 years, 63% were male, 77% reported heroin as their primary drug and 59% were HCV positive (self-report). Mean age at first heroin use and injection was 19 and 21 years, respectively. The majority of heroin users commenced heroin use via injecting (65%), younger users (<25 years, 25-30 years) were less likely than older users (>30 years) to commence heroin use parenterally. Participants were initiated to injection mainly by friends (63%). Thirty-seven percent reported initiating others to heroin injection, but few factors were related to this behaviour. Those with longer heroin using careers were more likely to report initiating others to heroin injection, but were no more likely to have done so in the preceding 12 months. Participants who had initiated others were more likely to have shared injecting equipment (12 vs 23%), but were no more likely to be HCV positive (self-report) than those who did not. Conclusion: Interventions to prevent heroin users initiating others to injecting are necessary. Peer groups may be well positioned to implement such interventions. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)  
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**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** \*Drug Abuse  
 \*Heroin

\*Injections  
 \*Onset (Disorders)  
 \*Risk Taking  
 Age Differences

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in *Harm Reduction Journal*  
 Available from *BioMedCentral* in *Harm Reduction Journal*  
 Available from *Springer NHS Pilot 2014 (NESLi2)* in *Harm Reduction Journal*; Note: ;  
 Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

## 52. The epidemiology of college alcohol and gambling policies.

**Citation:** Harm Reduction Journal, February 2005, vol./is. 2/, 1477-7517 (Feb 9, 2005)

**Author(s):** Shaffer, Howard J; Donato, Anthony N; LaBrie, Richard A; Kidman, Rachel C; LaPlante, Debi A

**Correspondence Address:** Shaffer, Howard J.: Division on Addiction, Harvard Medical School, The Landmark Center, 401 Park Drive, 2nd Floor East, Boston, MA, US, 02215, howard\_shaffer@hms.harvard.edu

**Institution:** Division on Addiction, Harvard Medical School, The Landmark Center, Boston, MA, US;  
 Division on Addiction, Harvard Medical School, The Landmark Center, Boston, MA, US;  
 Division on Addiction, Harvard Medical School, The Landmark Center, Boston, MA, US;  
 Division on Addiction, Harvard Medical School, The Landmark Center, Boston, MA, US;  
 Division on Addiction, Harvard Medical School, The Landmark Center, Boston, MA, US

**Language:** English

**Abstract:** Background: This article reports the first national assessment of patterns of drinking and gambling-related rulemaking on college campuses (e.g., punitive versus recovery oriented). Analyses relating school policies to known school rates of drinking or gambling identified potentially influential policies. These results can inform and encourage the development of guidelines, or "best practices," upon which schools can base future policy. Methods: The college policy information was collected from handbooks, Web sites and supplemental materials of 119 scientifically selected colleges included in the fourth (2001) Harvard School of Public Health College Alcohol Study (CAS). A coding instrument of 40 items measured the scope and focus of school alcohol and gambling policies. This instrument included items to measure the presence of specific policies and establish whether the policies were punitive or rehabilitative. A total of 11 coders followed a process of information extraction, coding and arbitration used successfully in other published studies to codify policy information. Results: Although all schools had a student alcohol use policy, only 26 schools (22%) had a gambling policy. Punitive and restrictive alcohol policies were most prevalent; recovery-oriented policies were present at fewer than 30% of schools. Certain alcohol and gambling policies had significant relationships with student binge drinking rates. Conclusions: The relative lack of college recovery-oriented policies suggests that schools might be overlooking the value of rehabilitative measures in reducing addictive behaviors among students. Since there are few college gambling-related policies, schools might be missing an opportunity to inform students about the dangers of excessive gambling. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** \*Alcohol Abuse  
 \*Colleges  
 \*Epidemiology

\*Gambling  
 \*Policy Making  
 Alcohol Drinking Patterns  
 Punishment  
 Treatment

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in *Harm Reduction Journal*  
 Available from *BioMedCentral* in *Harm Reduction Journal*  
 Available from *Springer NHS Pilot 2014 (NESLi2)* in *Harm Reduction Journal*; Note: ;  
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### 53. How do drug users define their progress in harm reduction programs? Qualitative research to develop user-generated outcomes.

**Citation:** Harm Reduction Journal, August 2004, vol./is. 1/, 1477-7517 (Aug 26, 2004)

**Author(s):** Ruefli, Terry; Rogers, Susan J

**Correspondence Address:** Ruefli, Terry: New York Harm Reduction Educators, Inc (NYHRE), 903 Dawson St., Bronx, NY, US, 10459, truefli@worldnet.att.net

**Institution:** New York Harm Reduction Educators, Inc (NYHRE), Bronx, NY, US; Academy for Educational Development (AED), New York, NY, US

**Language:** English

**Abstract:** Background: Harm reduction is a relatively new and controversial model for treating drug users, with little formal research on its operation and effectiveness. In order to advance the study of harm reduction programs and our understanding of how drug users define their progress, qualitative research was conducted to develop outcomes of harm reduction programming that are culturally relevant, incremental, (i.e., capable of measuring change), and hierarchical (i.e., capable of showing how clients improve over time). Methods: The study used nominal group technique (NGT) to develop the outcomes (phase 1) and focus group interviews to help validate the findings (phase 2). Study participants were recruited from a large harm-reduction program in New York City and involved approximately 120 clients in 10 groups in phase 1 and 120 clients in 10 focus groups in phase 2. Results: Outcomes of 10 life areas important to drug users were developed that included between 10 to 15 incremental measures per outcome. The outcomes included ways of 1) making money; 2) getting something good to eat; 3) being housed/homeless; 4) relating to families; 5) getting needed programs/benefits/services; 6) handling health problems; 7) handling negative emotions; 8) handling legal problems; 9) improving oneself; and 10) handling drug-use problems. Findings also provided insights into drug users' lives and values, as well as a window into understanding how this population envisions a better quality of life. Results challenged traditional ways of measuring drug users based solely on quantity used and frequency of use. They suggest that more appropriate measures are based on the extent to which drug users organize their lives around drug use and how much drug use is integrated into their lives and negatively impacts other aspects of their lives. Conclusions: Harm reduction and other programs serving active drug users and other marginalized people should not rely on institutionalized, provider-defined solutions to problems in living faced by their clients. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Ruefli and Rogers.; YEAR: 2004

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

**Subject Headings:** \*Disadvantaged  
 \*Drug Abuse  
 \*Drug Rehabilitation  
 \*Harm Reduction  
 \*Intervention  
 Treatment Outcomes

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
Available from *BioMedCentral* in [Harm Reduction Journal](#)  
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;  
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

#### 54. Substance use during pregnancy: Time for policy to catch up with research.

**Citation:** Harm Reduction Journal, April 2004, vol./is. 1/, 1477-7517 (Apr 20, 2004)

**Author(s):** Lester, Barry M; Andreozzi, Lynne; Appiah, Lindsey

**Correspondence Address:** Lester, Barry M.: Brown Medical School Infant Development Center Women, RI, US, 02903, Barry\_Lester@brown.edu

**Institution:** Brown Medical School Infant Development Center Women, RI, US; Brown Medical School Infant Development Center Women, RI, US; Brown Medical School Infant Development Center Women, RI, US

**Language:** English

**Abstract:** The phenomenon of substance abuse during pregnancy has fostered much controversy, specifically regarding treatment vs. punishment. Should the pregnant mother who engages in substance abuse be viewed as a criminal or as someone suffering from an illness requiring appropriate treatment? As it happens, there is a noticeably wide range of responses to this matter in the various states of the United States, ranging from a strictly criminal perspective to one that does emphasize the importance of the mother's treatment. This diversity of dramatically different responses illustrates the failure to establish a uniform policy for the management of this phenomenon. Just as there is lack of consensus among those who favor punishment, the same lack of consensus characterizes those states espousing treatment. Several general policy recommendations are offered here addressing the critical issues. It is hoped that by focusing on these fundamental issues and ultimately detailing statistics, policymakers throughout the United States will consider the course of action that views both pregnant mother and fetus/child as humanely as possible. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Government Policy Making](#)  
[\\*Pregnancy](#)  
[\\*Prenatal Exposure](#)  
[Drug Rehabilitation](#)  
[Punishment](#)

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
Available from *BioMedCentral* in [Harm Reduction Journal](#)  
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;  
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

#### 55. Substance abuse and pharmacy practice: What the community pharmacist needs to know about drug abuse and dependence.

**Citation:** Harm Reduction Journal, April 2004, vol./is. 1/, 1477-7517 (Apr 20, 2004)

**Author(s):** Tommasello, Anthony C

**Correspondence Address:** Tommasello, Anthony C.: Office of Substance Abuse Studies, University of Maryland School of Pharmacy, US, atommas@rx.umaryland.edu

**Institution:** Office of Substance Abuse Studies, University of Maryland School of Pharmacy, US

**Language:** English

**Abstract:** Pharmacists, the most accessible of health care professionals, are well positioned to help prevent and treat substance use disorders and should prepare themselves to perform these functions. New research improves our knowledge about the pharmacological and behavioral risks of drug abuse, supports the clinical impression that drug dependence is associated with long-lasting neurochemical changes, and demonstrates effective pharmacological treatments for certain kinds of drug dependencies. The profession is evolving. Pharmacists are engaging in new practice behaviors such as helping patients manage their disease states. Collaborative practice agreements and new federal policies set the stage for pharmacists to assist in the clinical management of opioid and other drug dependencies. Pharmacists need to be well informed about issues related to addiction and prepared not only to screen, assess, and refer individual cases and to collaborate with physicians caring for chemically dependent patients, but also to be agents of change in their communities in the fight against drug abuse. At the end of this article the pharmacist will be better able to: 1. Explain the disease concept of chemical dependence 2. Gather the information necessary to conduct a screen for chemical dependence 3. Inform patients about the treatment options for chemical dependence 4. Locate resources needed to answer questions about the effects of common drugs of abuse (alcohol, marijuana, narcotics, "ecstasy", and cocaine) 5. Develop a list of local resources for drug abuse treatment 6. Counsel parents who are concerned about drug use by their children 7. Counsel individuals who are concerned about drug use by a loved one 8. Counsel individuals who are concerned about their own drug use (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: This is an Open Access article: verbatim copying and redistribution of this article are permitted in all media for any purpose, provided this notice is preserved along with the article's original URL.; HOLDER: Tommasello; licensee BioMed Central Ltd.; YEAR: 2004

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Dependency](#)  
[\\*Pharmacists](#)  
[Drug Rehabilitation](#)  
[Drug Usage Screening](#)

**Source:** PsycINFO

**Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
Available from *BioMedCentral* in [Harm Reduction Journal](#)  
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;  
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

#### 56. "Tied together like a woven hat:" Protective pathways to Alaska Native sobriety.

**Citation:** Harm Reduction Journal, November 2004, vol./is. 1/, 1477-7517 (Nov 17, 2004)

**Author(s):** Mohatt, Gerald V; Rasmus, S. Michelle; Thomas, Lisa; Allen, James; Hazel, Kelly; Hensel, Chase

**Correspondence Address:** Mohatt, Gerald V.: University of Alaska, Box 757000, Fairbanks, AK, US, 99775, ffgvm@uaf.edu

**Institution:** University of Alaska, Fairbanks, AK, US; University of Alaska, Fairbanks, AK, US; University of Washington, Seattle, WA, US; University of Alaska, Fairbanks, AK, US; Metropolitan State University, Minneapolis, MN, US; University of Alaska, Fairbanks, AK, US

**Language:** English

**Abstract:** Background: The People Awakening Project (1RO1 AA 11446-03) had two purposes, completed in Phase I and Phase II of the project. The purpose of Phase I was to complete

a qualitative study; the research objective was discovery oriented with the specific aim of identification of protective and recovery factors in Alaska Native sobriety. Results were used to develop a heuristic model of protective and recovery factors, and measures based on these factors. The research objective of Phase II was to pilot these measures and provide initial validity data. Methods: Phase I utilized a life history methodology. People Awakening interviewed a convenience sample of 101 Alaska Natives who had either recovered from alcoholism (n = 58) or never had a drinking problem (n = 43). This later group included both lifetime abstainers (LAs) and non-problem drinkers (NPs). Life histories were transcribed and analyzed using grounded theory and consensual data analytic procedures within a participatory action research framework. Analyses were utilized to generate heuristic models of protection and recovery from alcohol abuse among Alaska Natives. Results: Analyses generated a heuristic model of protective factors from alcohol abuse. The resulting multilevel and multi-factorial model describes interactive and reciprocal influences of (a) individual, family, and community characteristics; (b) trauma and the individual and contextual response to trauma, (c) experimental substance use and the person's social environment; and (d) reflective processes associated with a turning point, or a life decision regarding sobriety. The importance of cultural factors mediating all these protective processes is emphasized. For NPs, the resilience process drew from personal stores of self-confidence, self-efficacy, and self-mastery that derived from ability to successfully maneuver within stressful or potentially traumatizing environments. In contrast, for many LAs, efficacy was instead described in more socially embedded terms better understood as communal mastery. One style of mastery is more associated with individualistic orientations, the other with more collectivistic. Future research is needed regarding the generalizability of this group difference. Conclusions: Results suggest that preventative interventions should focus on intervening simultaneously at the community, family, and individual levels to build resilience and protective factors at each level. Of particular importance is the building of reflexivity along with other cognitive processes that allow the individual to think through problems and to reach a life decision to not abuse alcohol. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

- Country of Publication:** STATEMENT: This is an Open Access article distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/2.0>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.; HOLDER: Mohatt et al; licensee BioMed Central Ltd.; YEAR: 2004
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Alaska Natives](#)  
[\\*Alcohol Drinking Patterns](#)  
[\\*Alcoholism](#)  
[\\*Sobriety](#)  
[Protective Factors](#)  
[Recovery \(Disorders\)](#)  
[Trauma](#)
- Source:** PsycINFO
- Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)  
Available from *BioMedCentral* in [Harm Reduction Journal](#)  
Available from *Springer NHS Pilot 2014 (NESLi2)* in [Harm Reduction Journal](#); Note: ;  
Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

**57. Corrigendum to "Treatment adherence towards prescribed medications in bipolar-II acute depressed patients: Relationship with cyclothymic temperament and "therapeutic sensation seeking" in response towards subjective intolerance to pain".**

- Citation:** Journal of Affective Disorders, January 2015, vol./is. 170/(22), 0165-0327 (Jan 1, 2015)
- Author(s):** Fornaro, Michele; De Berardis, Domenico; Iasevoli, Felice; Pistorio, Maria Luisa; D'Angelo, Emanuela; Mungo, Sergio; Martino, Matteo; Ventriglio, Antonio; Cattaneo,

Carlo Ignazio; Favaretto, Ettore; del Debbio, Alessandro; Romano, Anna; Ciampa, Giovanni; Elassy, Mai; Perugi, Giulio; de Pasquale, Concetta

- Correspondence Address:** Fornaro, Michele: Department of Educational Sciences, University of Catania, via Ofelia n.1, Catania, Italy, 95125, Dott.Fornaro@gmail.com
- Institution:** Department of Educational Sciences, University of Catania, Catania, Italy; Department of Mental Health, Psychiatric Service of Diagnosis and Treatment, Teramo, Italy; Laboratory of Molecular Psychiatry and Psychopharmacotherapeutics, Section of Psychiatry, Department of Neuroscience, University School of Medicine Federico II, Naples, Italy; Department of Educational Sciences, University of Catania, Catania, Italy; National Health System, Genoa, Italy; National Health System, Genoa, Italy; Department of Psychiatry, University of Genova, Genoa, Italy; Department of Psychiatry, University of Foggia, Foggia, Italy; National Health System, Novara, Italy; National Health System, "Bressanone Hospital", Bolzano, Italy; Department of Psychiatry, University of Pisa, Pisa, Italy; Department of Psychiatry, University of Pisa, Pisa, Italy; Department of Psychiatry, University of Pisa, Pisa, Italy; Department of Psychiatry, Mansoura University, Mansoura, Egypt; Department of Psychiatry, University of Pisa, Pisa, Italy; Department of Educational Sciences, University of Catania, Catania, Italy
- Language:** English
- Abstract:** Reports an error in "Treatment adherence towards prescribed medications in bipolar-II acute depressed patients: Relationship with cyclothymic temperament and "therapeutic sensation seeking" in response towards subjective intolerance to pain" by Michele Fornaro, Domenico De Berardis, Felice Iasevoli, Maria Luisa Pistorio, Emanuela D'Angelo, Sergio Mungo, Matteo Martino, Antonio Ventriglio, Carlo Ignazio Cattaneo, Ettore Favaretto, Alessandro del Debbio, Anna Romano, Giovanni Ciampa, Mai Elassy, Giulio Perugi and Concetta de Pasquale (Journal of Affective Disorders, 2013[Nov], Vol 151[2], 596-604). In the original article, there were some errors, the corrections are present in the erratum. (The following abstract of the original article appeared in record 2013-27614-001). Background: Treatment adherence (TA) is crucial during almost any phase of bipolar disorder (BD), including type-II (BD-II) acute depression. While a number of issues have been traditionally accounted on the matter, additional factors should be likewise involved, including affective temperaments and some clinically suggestive psychopathological traits whose systematic assessment represents the aim of this study. Methods: Two hundred and twenty BD-II acute depressed outpatients were consecutively evaluated using the Structured Clinical Interviews for Diagnostic and Statistical Manual for Mental Disorders-Fourth Edition Axis-I and II Disorders, Hamilton scales for Depression and Anxiety, Temperament Evaluation of the Memphis Pisa Paris San Diego-Auto-questionnaire-110-item, Visual Analogue Scale (VAS), Zuckerman's Sensation-Seeking Scale-Form-V (SSS-V), Barratt's Impulsivity Scale-11-item, State-Trait Anxiety Inventory modules, Severity module of the Clinical Global Impression Scale for BD, Morisky 8-Item Medication Adherence Scale (MMAS-8) and the Clinician Rating Scale (CRS). Patients were divided into non-adherent vs. treatment-adherent cases depending on MMAS-8+CRS scores. Results: In the TA- group, higher VAS and cyclothymic temperament scores were highly correlated ( $r = .699$ ;  $p < .001$ ). Those latter scores, along with SSS-V scores and the occurrence of lifetime addiction to painkiller and/or homeopathic medications available over the counter defined a "therapeutic sensation seeking" pattern allowing to correctly classify as much as 93.9% [ $\text{Exp}(B) = 3.490$ ;  $p < .001$ ] of TA- cases (49/220). Limits: Lack of objective TA measures and systematic pharmacological record; recall bias on some diagnoses; and relatively small sample size. Conclusions: Stating the burden of TA in BD, additional studies on this regard are aimed, ideally contributing to enhance the management of BD itself. (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:** [\\*Bipolar Disorder](#)  
[\\*Cyclothymic Personality](#)  
[\\*Major Depression](#)  
[\\*Pain](#)

[Drug Therapy](#)  
[Treatment Compliance](#)

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

**58. Race/ethnic disparities in the utilization of treatment for drug dependent inmates in U.S. State correctional facilities.**

**Citation:** Addictive Behaviors, January 2015, vol./is. 40/(148-153), 0306-4603 (Jan 2015)  
**Author(s):** Nowotny, Kathryn M  
**Correspondence Address:** Nowotny, Kathryn M.: University of Colorado Boulder, Department of Sociology, 327 UCB, Boulder, CO, US, 80309, Kathryn.Nowotny@Colorado.edu  
**Institution:** University of Colorado Boulder, Department of Sociology, Boulder, CO, US  
**Language:** English  
**Abstract:** Background: Research has documented racial and ethnic disparities in utilization, access, continuity, and quality of care for psychiatric disorders including treatment for substance use disorders among those with similar need in the general community. Currently, the extent of racial and ethnic disparities in treatment within U.S. correctional facilities is unknown. Methods: This study examines race/ethnic disparities in treatment for drug dependent inmates using the 2004 Survey of Inmates in State Correctional Facilities. Fixed effects logistic regression is used to analyze treatment outcomes for 5180 inmates housed within 286 prisons. The analysis accounts for differences in background characteristics (i.e., age, gender, marital status, foreign born status, veteran status), socioeconomic characteristics (i.e., education, employment prior to incarceration), mental health (i.e., diagnosis with a serious mental illness), and incarceration experiences (i.e., current conviction, previous incarceration episodes, time served, additional sentencing requirements, external social support, disciplinary violations). Results: The findings identify a remarkable unmet need among drug dependent inmates in that less than one-half of drug dependent inmates had received any type of treatment in prison at the time of the interview with the most common treatment type being self-help groups. Compared to whites, drug dependent Latino inmates have significantly lower odds of utilizing treatment, yet there are no significant black--white disparities found. Conclusion: The current study suggests that treatment for drug dependent inmates needs to be expanded to include clinically or medically based treatment since the failure to address addictions in the criminal legal system has been identified as the single most significant reason for rearrest and recidivism once released. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)  
**Conference Information:** ASA Meeting. 2014. This research were presented at the aforementioned conference.  
**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Elsevier Ltd.; YEAR: 2014  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Drug Rehabilitation](#)  
[\\*Health Care Utilization](#)  
[\\*Prisoners](#)  
[\\*Racial and Ethnic Differences](#)  
[\\*Health Disparities](#)  
[Correctional Institutions](#)  
[Drug Dependency](#)  
[Health Service Needs](#)  
[Prisons](#)  
**Source:** PsycINFO  
**Full Text:** Available from *Elsevier* in *Addictive Behaviors*

**59. The effects of nicotine stimulus and response expectancies on male and female smokers' responses to nicotine-free electronic cigarettes.**

**Citation:** Addictive Behaviors, January 2015, vol./is. 40/(144-147), 0306-4603 (Jan 2015)

**Author(s):** Copp, Sebastian R; Collins, Jamie L; Dar, Reuven; Barrett, Sean P

**Correspondence Address:** Barrett, Sean P., sean.barrett@dal.ca

**Institution:** Department of Psychology and Neuroscience, Dalhousie University, Halifax, NS, Canada; Department of Psychology and Neuroscience, Dalhousie University, Halifax, NS, Canada; School of Psychological Sciences, Tel Aviv University, Tel Aviv, Israel; Department of Psychology and Neuroscience, Dalhousie University, Halifax, NS, Canada

**Language:** English

**Abstract:** Background: Electronic cigarettes (e-cigarettes) have been reported to reduce tobacco craving and withdrawal; however, the mechanisms underlying these effects have not been elucidated. Methods: This study examined the contributions of nicotine stimulus and response expectancies to responses to nicotine-free e-cigarettes in 21 e-cigarette naive smokers (12 male). Participants completed two randomized experimental sessions in which they administered a nicotine-free e-cigarette. During one session they were informed that the e-cigarette contained nicotine and during the other session they were informed that the e-cigarette was nicotine-free. Participants completed subjective assessments before and immediately after sampling ten puffs from the e-cigarette and were then invited to earn additional puffs using a computerized progressive ratio task. Prior to their enrolment in the study, participants provided an estimate of the relative importance of the nicotine content of e-cigarettes for craving relief. Results: Instructions that the e-cigarette contained nicotine were found to reduce both intention to smoke ( $p = 0.017$ ) and withdrawal-related ( $p = 0.018$ ) craving, regardless of a-priori reported beliefs regarding the relative importance of nicotine. Nicotine content instructions were also found to be associated with a shorter latency to self-administration ( $p = 0.005$ ); however, a Sex x Instructions x Response Expectancy interaction ( $p = 0.008$ ) revealed that this effect was specific to women who had strong a-priori nicotine content craving relief expectations. Neither nicotine content instructions nor response expectancies impacted the number of puffs self-administered. Conclusions: Findings suggest that nicotine content expectations contribute to smokers' responses to e-cigarettes, and that a-priori beliefs about nicotine effects may be especially important in women. (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:** [\\*Craving](#)  
[\\*Drug Abuse](#)  
[\\*Nicotine](#)  
[\\*Response Bias](#)  
[\\*Tobacco Smoking](#)  
[Drug Self Administration](#)  
[Expectations](#)

**Source:** PsycINFO

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

#### 60. Abnormal gray matter and white matter volume in 'Internet gaming addicts'.

**Citation:** Addictive Behaviors, January 2015, vol./is. 40/(137-143), 0306-4603 (Jan 2015)

**Author(s):** Lin, Xiao; Dong, Guangheng; Wang, Qiandong; Du, Xiaoxia

**Correspondence Address:** Dong, Guangheng: Department of Psychology, Zhejiang Normal University, 688 Yingbin Road, Zhejiang Province, Jinhua, China, 321004, dongguangheng@zjnu.edu.cn

**Institution:** Department of Psychology, Zhejiang Normal University, Jinhua, China; Department of Psychology, Zhejiang Normal University, Jinhua, China; Department of Psychology, Zhejiang Normal University, Jinhua, China; Department of Physics, Shanghai Key Laboratory of Magnetic Resonance, East China Normal University, Shanghai, China

**Language:** English

**Abstract:** Internet gaming addiction (IGA) is usually defined as the inability of an individual to control his/her use of the Internet with serious negative consequences. It is becoming a prevalent mental health concern around the world. To understand whether Internet gaming addiction contributes to cerebral structural changes, the present study examined the brain gray matter density and white matter density changes in participants suffering IGA using voxel-based morphometric analysis. Compared with the healthy controls (N = 36, 22.2 + 3.13 years), IGA participants (N = 35, 22.28 + 2.54 years) showed significant lower gray matter density in the bilateral inferior frontal gyrus, left cingulate gyrus, insula, right precuneus, and right hippocampus (all  $p < 0.05$ ). IGA participants also showed significant lower white matter density in the inferior frontal gyrus, insula, amygdala, and anterior cingulate than healthy controls (all  $p < 0.05$ ). Previous studies suggest that these brain regions are involved in decision-making, behavioral inhibition and emotional regulation. Current findings might provide insight in understanding the biological underpinnings of IGA. (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:** [\\*Computer Games](#)  
[\\*Internet Addiction](#)  
[\\*Gray Matter](#)  
[\\*White Matter](#)  
[Amygdala](#)  
[Brain](#)  
[Magnetic Resonance Imaging](#)  
[Insula](#)

**Source:** PsycINFO

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

**61. Cocaine dependent individuals discount future rewards more than future losses for both cocaine and monetary outcomes.**

**Citation:** Addictive Behaviors, January 2015, vol./is. 40/(132-136), 0306-4603 (Jan 2015)

**Author(s):** Johnson, Matthew W; Bruner, Natalie R; Johnson, Patrick S

**Correspondence Address:** Johnson, Matthew W.: Behavioral Pharmacology Research Unit, Department of Psychiatry and Behavioral Sciences, Johns Hopkins University School of Medicine, 5510 Nathan Shock Drive, Baltimore, MD, US, 21224-6823, mwj@jhu.edu

**Institution:** Department of Psychiatry and Behavioral Sciences, Johns Hopkins University School of Medicine, Baltimore, MD, US; Department of Psychiatry and Behavioral Sciences, Johns Hopkins University School of Medicine, Baltimore, MD, US; Department of Psychiatry and Behavioral Sciences, Johns Hopkins University School of Medicine, Baltimore, MD, US

**Language:** English

**Abstract:** Cocaine dependence and other forms of drug dependence are associated with steeper devaluation of future outcomes (delay discounting). Although studies in this domain have typically assessed choices between monetary gains (e.g., receive less money now versus receive more money after a delay), delay discounting is also applicable to decisions involving losses (e.g., small loss now versus larger delayed loss), with gains typically discounted more than losses (the "sign effect"). It is also known that drugs are discounted more than equivalently valued money. In the context of drug dependence, however, relatively little is known about the discounting of delayed monetary and drug losses and the presence of the sign effect. In this within-subject, laboratory study, delay discounting for gains and losses was assessed for cocaine and money outcomes in cocaine-dependent individuals (n = 89). Both cocaine and monetary gains were discounted at significantly greater rates than cocaine and monetary losses, respectively (i.e., the sign effect). Cocaine gains were discounted significantly more than monetary gains, but cocaine and monetary losses were discounted similarly. Results suggest that cocaine is discounted by cocaine-dependent individuals in a systematic manner similar to other rewards. Because

the sign effect was shown for both cocaine and money, delayed aversive outcomes may generally have greater impact than delayed rewards in shaping present behavior in this population. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Elsevier Ltd.; YEAR: 2014  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** \*Cocaine  
 \*Drug Dependency  
 \*Financial Strain  
 \*Future  
 \*Rewards  
 Drug Abuse  
 Delay Discounting  
**Source:** PsycINFO  
**Full Text:** Available from *Elsevier* in *Addictive Behaviors*

## 62. Everyday discrimination and mood and substance use disorders: A latent profile analysis with African Americans and Caribbean Blacks.

**Citation:** Addictive Behaviors, January 2015, vol./is. 40/(119-125), 0306-4603 (Jan 2015)  
**Author(s):** Clark, Trenette T; Salas-Wright, Christopher P; Vaughn, Michael G; Whitfield, Keith E  
**Correspondence Address:** Clark, Trenette T., 325 Pittsboro Street, CB 3550, Chapel Hill, NC, US, 27599, ttclark@email.unc.edu  
**Institution:** School of Social Work, University of North Carolina, Chapel Hill, NC, US; School of Social Work, University of Texas at Austin, Austin, TX, US; School of Social Work, College for Public Health and Social Justice, Saint Louis University, St. Louis, MO, US; Center for Biobehavioral Health Disparities Research, Duke University, Durham, NC, US  
**Language:** English  
**Abstract:** Background: Perceived discrimination is a major source of health-related stress. The purpose of this study was to model the heterogeneity of everyday-discrimination experiences among African American and Caribbean Blacks and to identify differences in the prevalence of mood and substance use outcomes, including generalized anxiety disorder, major depressive disorder, alcohol-use disorder, and illicit drug-use disorder among the identified subgroups. Method: The study uses data from the National Survey of American Life obtained from a sample of African American and Caribbean Black respondents (N = 4,462) between 18 and 65 years. Results: We used latent profile analysis and multinomial regression analyses to identify and validate latent subgroups and test hypotheses, yielding 4 classes of perceived everyday discrimination: Low Discrimination, Disrespect and Contempt, General Discrimination, and Chronic Discrimination. Findings show significant differences exist between the Low Discrimination and General Discrimination classes for major depressive disorder, alcohol-use disorder, and illicit drug-use disorder. Moreover, we find significant differences exist between the Low Discrimination and Chronic Discrimination classes for the four disorders examined. Compared with the Chronic Discrimination class, members of the other classes were significantly less likely to meet criteria for generalized anxiety disorder, major depressive disorder, alcohol-use disorder, and illicit drug-use disorder. Conclusions: Findings suggest elevated levels of discrimination increase risk for mood and substance-use disorders. Importantly, results suggest the prevalence of mood and substance-use disorders is a function of the type and frequency of discrimination that individuals experience. (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:** \*Affective Disorders  
 \*Blacks  
 \*Discrimination

\*Drug Abuse  
 \*Major Depression  
 Profiles (Measurement)

**Source:** PsycINFO  
**Full Text:** Available from *Elsevier* in *Addictive Behaviors*

### 63. Problematic Internet use and problematic alcohol use from the cognitive-behavioral model: A longitudinal study among adolescents.

**Citation:** Addictive Behaviors, January 2015, vol./is. 40/(109-114), 0306-4603 (Jan 2015)  
**Author(s):** Gamez-Guadix, Manuel; Calvete, Esther; Orue, Izaskun; Las Hayas, Carlota  
**Correspondence Address:** Gamez-Guadix, Manuel: University of Deusto, 1st Floor, Avenida de las Universidades 24, Bizkaia, Bilbao, Spain, 48007, mgamezguadix@gmail.com  
**Institution:** University of Deusto, Psychology Department of Personality, Assessment and Treatment, Bilbao, Spain; University of Deusto, Psychology Department of Personality, Assessment and Treatment, Bilbao, Spain; University of Deusto, Psychology Department of Personality, Assessment and Treatment, Bilbao, Spain; University of Deusto, Psychology Department of Personality, Assessment and Treatment, Bilbao, Spain  
**Language:** English  
**Abstract:** Problematic Internet use (PIU) and problematic alcohol use are two pervasive problems during adolescence that share similar characteristics and predictors. The first objective of this study was to analyze the temporal and reciprocal relationships among the main components of PIU from the cognitive-behavioral model (preference for online social interaction, mood regulation through the Internet, deficient self-regulation, and negative consequences). The second objective was to examine the temporal and reciprocal relationships between PIU components and problematic alcohol use. We also examined whether these relationships differ between males and females. The sample comprised 801 Spanish adolescents (mean age = 14.92, SD = 1.01) who completed the measures both at Time 1 (T1) and Time 2 (T2) six months apart. We used structural equation modeling to analyze the relationship among the variables. Results showed that deficient self-regulation at T1 predicted an increase in preference for online interactions, mood regulation, and negative consequences of the Internet at T2. In turn, the emergence of negative consequences of PIU at T1 predicted a rise in problematic alcohol use at T2. Longitudinal relationships between different components of PIU and between the components of PIU and problematic alcohol use were invariant across genders. Deficient self-regulation, consisting of diminished self-control over cognition and behaviors related to the Internet, plays a central role in the maintenance of PIU, increasing the preference for online interactions, mood regulation, and negative consequences from Internet use over time. In turn, adolescents who present negative consequences of PIU are vulnerable targets for problematic alcohol use. (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:** \*Alcohol Abuse  
 \*Cognitive Behavior Therapy  
 \*Internet Addiction  
 \*Self Regulation

**Source:** PsycINFO  
**Full Text:** Available from *Elsevier* in *Addictive Behaviors*

### 64. Depression and executive dysfunction contribute to a metamemory deficit among individuals with methamphetamine use disorders.

**Citation:** Addictive Behaviors, January 2015, vol./is. 40/(45-50), 0306-4603 (Jan 2015)

**Author(s):** Casaletto, K. B; Obermeit, L; Morgan, E. E; Weber, E; Franklin, D. R; Grant, I; Woods, S. P; Translational Methamphetamine AIDS Research Center (TMARC) Group

**Correspondence Address:** Woods, S. P.: University of California, San Diego (UCSD), HIV Neurobehavioral Research Program, 220 Dickinson Street, Suite B, San Diego, CA, US, 92103-8231

**Corporate/Institutional Author:** Translational Methamphetamine AIDS Research Center (TMARC) Group

**Institution:** SDSU, San Diego, CA, US; SDSU, San Diego, CA, US; Department of Psychiatry, University of California, San Diego, La Jolla, CA, US; SDSU, San Diego, CA, US; Department of Psychiatry, University of California, San Diego, La Jolla, CA, US; Department of Psychiatry, University of California, San Diego, La Jolla, CA, US; Department of Psychiatry, University of California, San Diego, La Jolla, CA, US

**Language:** English

**Abstract:** Objective: Chronic methamphetamine (MA) use is associated with moderate deficits in learning and memory, but the extend to which MA users are aware of such memory deficits (i.e., metamemory) is not known. Methods: In the current study, 195 participants with lifetime MA use diagnoses (MA +) and 195 non-MA-using comparison subjects (MA -) underwent comprehensive neuropsychiatry research assessments, including performance-based and self-report measures of episodic memory. Results: MA use disorders, major depressive disorder (MDD), and their interaction were uniquely associated with metamemory functioning, such that MDD increased the likelihood of a metamemory deficit among MA + participants. Within the MA group, individuals who over-estimated their memory abilities demonstrated greater executive dysfunction and lower cognitive reserve. Conclusions: Chronic MA use is associated with reduced awareness of objective deficits in memory acquisition and recall, which is particularly exacerbated by the presence of major depression. Efforts to enhance metamemory accuracy and deployment of compensatory mnemonic strategies may benefit substance abuse treatment outcomes. (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](#)  
[\\*Major Depression](#)  
[\\*Memory Disorders](#)  
[\\*Methamphetamine](#)  
[\\*Executive Function](#)  
[Metacognition](#)

**Source:** PsycINFO

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

#### 65. Differential associations between components of anxiety sensitivity and smoking-related characteristics.

**Citation:** Addictive Behaviors, January 2015, vol./is. 40/(39-44), 0306-4603 (Jan 2015)

**Author(s):** Guillot, Casey R; Zvolensky, Michael J; Leventhal, Adam M

**Correspondence Address:** Guillot, Casey R.: University of Southern California, Keck School of Medicine, 2250 Alcazar St., CSC 240, Los Angeles, CA, US, 90033, cguillot@usc.edu

**Institution:** Department of Preventive Medicine, University of Southern California, Keck School of Medicine, Los Angeles, CA, US; Department of Psychology, University of Houston, Houston, TX, US; Department of Preventive Medicine, University of Southern California, Keck School of Medicine, Los Angeles, CA, US

**Language:** English

**Abstract:** Introduction: Anxiety sensitivity (AS)-the tendency to fear anxiety-related experiences-is a risk factor for anxiety disorders and may contribute to smoking motivation and maintenance. Few studies have examined the relations between conceptually distinct

components of AS and smoking behavior. The purpose of the current study was to examine the associations between AS components-physical concerns, mental concerns, and social concerns-and an array of smoking-related characteristics. Methods: In a cross-sectional design, we administered the Anxiety Sensitivity Index (ASI) and self-report measures of tobacco dependence, smoking abstinence behavior, and smoking outcome and abstinence expectancies to 314 smokers (> 10 cigarettes/day, 32% female, M age = 44 years). Results: The ASI Mental Concerns subscale was most clearly associated with greater difficulty maintaining abstinence and stronger expectations of smoking-related negative reinforcement and withdrawal ( $s=.21-.31$ ,  $ps < .005$ ); the ASI Social Concerns was most clearly associated with stronger positive reinforcement smoking expectancies ( $=.20$ ,  $p = .0009$ ); and ASI Physical Concerns subscale was most clearly associated with stronger tobacco withdrawal symptoms experienced in prior quit attempts ( $=.20$ ,  $p = .002$ ). Conclusions: Based on these findings of patterns of associations with smoking-related characteristics across distinct components of AS, we speculate that (1) mindfulness training may be useful for treating tobacco addiction in smokers high in AS mental concerns, and (2) smokers high in AS physical and social concerns may benefit from smoking cessation treatment that incorporates interoceptive exposure and cognitive-behavioral therapy for social anxiety, respectively. (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:** [\\*Anxiety](#)  
[\\*Expectations](#)  
[\\*Motivation](#)  
[\\*Smoking Cessation](#)  
[\\*Tobacco Smoking](#)  
[Risk Factors](#)

**Source:** PsycINFO

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

#### 66. Alcohol cognitive bias modification training for problem drinkers over the web.

**Citation:** Addictive Behaviors, January 2015, vol./is. 40/(21-26), 0306-4603 (Jan 2015)

**Author(s):** Wiers, Reinout W; Houben, Katrijn; Fadardi, Javad S; van Beek, Paul; Rhemtulla, Mijke; Cox, W. Miles

**Correspondence Address:** Wiers, Reinout W.: Addiction Development and Psychopathology (ADAPT) Lab, Weesperplein 4, Amsterdam, Netherlands, 1018 XA, r.wiers@uva.nl

**Institution:** Addiction Development and Psychopathology (ADAPT) Lab, Department of Psychology, University of Amsterdam, Amsterdam, Netherlands; Maastricht University, Maastricht, Netherlands; Faculty of Education and Psychology, Ferdowsi University of Mashhad, Mashhad, Iran; Maastricht University, Maastricht, Netherlands; Department of Psychology, University of Amsterdam, Amsterdam, Netherlands; School of Psychology, Bangor University, Bangor, United Kingdom

**Language:** English

**Abstract:** Following successful outcomes of cognitive bias modification (CBM) programs for alcoholism in clinical and community samples, the present study investigated whether different varieties of CBM (attention control training and approach-bias re-training) could be delivered successfully in a fully automated web-based way and whether these interventions would help self-selected problem drinkers to reduce their drinking. Participants were recruited through online advertising, which resulted in 697 interested participants, of whom 615 were screened in. Of the 314 who initiated training, 136 completed a pretest, four sessions of computerized training and a posttest. Participants were randomly assigned to one of four experimental conditions (attention control or one of three varieties of approach-bias re-training) or a sham-training control condition. The general pattern of findings was that participants in all conditions (including participants in the control-training condition) reduced their drinking. It is suggested that integrating

CBM with online cognitive and motivational interventions could improve results. (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:** [\\*Alcohol Rehabilitation](#)  
[\\*Alcoholism](#)  
[\\*Cognitive Bias](#)  
[\\*Intervention](#)  
[\\*Computer Assisted Therapy](#)  
[Behavior Modification](#)  
[Telemedicine](#)  
[Training](#)

**Source:** PsycINFO

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

#### 67. Predictors of quit attempts among smokers enrolled in substance abuse treatment.

**Citation:** Addictive Behaviors, January 2015, vol./is. 40/(1-6), 0306-4603 (Jan 2015)

**Author(s):** Martinez, Cristina; Guydish, Joseph; Le, Thao; Tajima, Barbara; Passalacqua, Emma

**Correspondence Address:** Martinez, Cristina, 3333 California Street Suite 265, San Francisco, CA, US, 94118, Cmartinez2@gmail.com

**Institution:** Philip R. Lee Institute for Health Policy Studies, University of California, San Francisco, CA, US; Philip R. Lee Institute for Health Policy Studies, University of California, San Francisco, CA, US; Philip R. Lee Institute for Health Policy Studies, University of California, San Francisco, CA, US; Philip R. Lee Institute for Health Policy Studies, University of California, San Francisco, CA, US; Philip R. Lee Institute for Health Policy Studies, University of California, San Francisco, CA, US; Philip R. Lee Institute for Health Policy Studies, University of California, San Francisco, CA, US

**Language:** English

**Abstract:** Introduction: This study investigates factors predicting past year quit attempts among smokers enrolled in substance abuse treatment in New York State. Methods: Data were drawn from two prior cross-sectional surveys conducted among clients treated in 10 randomly selected substance abuse treatment programs. Among 820 clients recruited, 542 self-identified as current smokers, and 485 provided information about their quit attempts. The main outcome was reporting a quit smoking attempt in the past year, dichotomized as quit attempters or non-quit attempters. Univariate and multivariate logistic regression analyses were performed to explore predictors of attempting to quit. Results: Half of substance abuse clients in treatment programs reported a past year quit attempt. Quit attempters were more likely to be in a preparation and contemplation stage of change (preparation: OR = 2.68, 95% CI: 1.51-4.77; contemplation: OR = 2.96 95% CI: 1.61-5.42), reported more positive attitudes toward quitting (OR = 1.49; 95% CI: 1.11-1.99) and received more cessation services than non-quit attempters (OR = 1.21; 95% CI: 1.11-1.99). Conclusions: Addressing patient attitudes about quitting smoking, having clinicians address smoking in the course of addiction treatment, and offering interventions to increase readiness to quit may contribute to increased quit attempts in smokers enrolled in addiction treatment programs. (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](#)  
[\\*Drug Rehabilitation](#)  
[\\*Smoking Cessation](#)  
[Tobacco Smoking](#)

**Source:** PsycINFO

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

**68. Review of Judging addicts: Drug courts and coercion in the justice system.**

- Citation:** Law & Society Review, December 2014, vol./is. 48/4(984-986), 0023-9216;1540-5893 (Dec 2014)
- Author(s):** Garnai, Erez
- Institution:** Department of Sociology, University of Minnesota, MN, US
- Language:** English
- Abstract:** Reviews the book, Judging Addicts: Drug Courts and Coercion in the Justice System by Rebecca Tiger (2013). In Judging Addicts, Rebecca Tiger, a professor of sociology at Middlebury College, traces the roots of this consensus. Grounded in a sociology of knowledge perspective, the book delineates the success of drug courts by focusing on the development of our ideas about addiction. Moreover, it is a triumph that certifies the formal integration of the medical model into the heart of the state's judicial procedure-profoundly altering the character of "judgment." Finally, we are reminded, drug users are not all irrational helpless individuals living in pain, but are also agentic, rational beings seeking pleasure. By challenging the dominant perception of addiction and shedding light on the way this perception has managed to infiltrate the criminal justice system, Tiger's Judging Addicts provides an important contribution to the literature on the drug court movement, which has so far been lacking this much needed critical attention. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
- Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Law and Society Association; YEAR: 2014
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Adjudication](#)  
[\\*Coercion](#)  
[\\*Criminal Justice](#)  
[Drugs](#)  
[Judgment](#)  
[Sociology](#)
- Source:** PsycINFO
- Full Text:** Available from *ProQuest* in [Law and Society Review](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

**69. Internet gaming disorder.**

- Citation:** Psychiatric Annals, August 2014, vol./is. 44/8(379-383), 0048-5713;1938-2456 (Aug 2014)
- Author(s):** Yau, Yvonne; Potenza, Marc
- Correspondence Address:** Yau, Yvonne: Department of Psychiatry, Room 721, Floor 7, 1 Church Street, New Haven, CT, US, 06510, yvonne.yau@yale.edu
- Institution:** Department of Psychiatry, Yale University School of Medicine, New Haven, CT, US; Department of Psychiatry, Yale University School of Medicine, New Haven, CT, US
- Language:** English
- Abstract:** Internet gaming is arguably one of the most popular online activities. Online game play, particularly massive multi-player online role-playing games, can be pleasurable and rewarding activities. However, a subset of individuals may exhibit problematic patterns of engagement that negatively impact psychosocial wellbeing. Consistent with Internet gaming disorder being included in Section III of the recently released fifth edition of the Diagnostic and Statistical Manual of Mental Disorders, relatively little research has been performed into Internet gaming disorder. This review discusses the epidemiological findings and treatment strategies related to Internet gaming disorder. Diagnostic considerations are discussed, and recommendations are made for future research and

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

**Country of Publication:** HOLDER: SLACK Incorporated

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

**Subject Headings:** [\\*Epidemiology](#)  
[\\*Internet Addiction](#)  
[\\*Treatment Planning](#)  
[\\*Role Playing Games](#)

**Source:** PsycINFO

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

#### 70. Psychiatric epidemiology, nosology, and treatment: Considering Internet gambling.

**Citation:** Psychiatric Annals, August 2014, vol./is. 44/8(371-378), 0048-5713;1938-2456 (Aug 2014)

**Author(s):** Shaffer, Howard J; Shaffer, Paige M

**Correspondence Address:** Shaffer, Howard J.: Division on Addiction, Cambridge Health Alliance, 101 Station Landing, Suite 2100, Medford, MA, US, 02155, howard\_shaffer@hms.harvard.edu

**Institution:** Harvard Medical School, Boston, MA, US; Synthesis Health Systems, MA, US

**Language:** English

**Abstract:** In this article, we consider behavioral addiction by examining the psychiatric aspects of disordered gambling. In particular, we illustrate these considerations with examples based on the growing evidence base associated with Internet-based gambling. We begin our review by focusing on gambling, the epidemiology of gambling disorders, and the place of gambling disorders within the psychiatric nosology. We include a critical discussion about the games that people play and whether certain games are associated with higher rates of gambling disorder. This discussion also includes an evidence-based consideration of the relationship between gambling exposure and adaptation to this experience. We conclude our review by discussing several issues associated with the shift from DSM-IV to DSM-5 diagnostic criteria as well as the treatment of gambling disorder. Throughout this review, we use the Syndrome Model of Addiction as an overarching guide. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: SLACK Incorporated

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

**Subject Headings:** [\\*Epidemiology](#)  
[\\*Internet Addiction](#)  
[\\*Pathological Gambling](#)  
[Addiction](#)  
[Treatment](#)

**Source:** PsycINFO

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

#### 71. This issue: Problematic Internet use and behavioral addictions.

**Citation:** Psychiatric Annals, August 2014, vol./is. 44/8(365-366), 0048-5713;1938-2456 (Aug 2014)

**Author(s):** Yau, Yvonne; Potenza, Marc

**Correspondence Address:** Yau, Yvonne: Impulse and Impulse Control Disorder Research Program, Room 721, Floor 7, 1 Church St, New Haven, CT, US, 06510, yvonne.yau@yale.edu

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

**Language:** English

**Abstract:** This editorial discusses the present issue of *Psychiatric Annals*. The focus of the issue is on problematic Internet use and behavioral addictions. With the explosion of digital technology and information, as well as the astoundingly high permeation of the Internet in daily life, there is concern that Internet use can become problematic. It is difficult, however, to find consensus around the issue of problematic Internet use (PIU). For the majority of users, the Internet represents a tool that enhances information access and well-being, with most users facing no disruption in psychosocial functioning. For a subset of users, however, it can lead to a state associated with significant distress, psychosocial risk factors, and physical and emotional impairment. The extent to which PIU exists as a distinct psychiatric entity as opposed to the Internet acting as a medium for other addictive behaviors has been debated. The articles that comprise this issue explore the recent evolution of the concept of behavioral addictions and how such behaviors may be enacted through use of the Internet. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: SLACK Incorporated

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

**Subject Headings:** [\\*Internet Addiction](#)  
[Addiction](#)  
[Risk Factors](#)

**Source:** PsycINFO

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

## 72. The human condition and behavioral addictions.

**Citation:** *Psychiatric Annals*, August 2014, vol./is. 44/8(362), 0048-5713;1938-2456 (Aug 2014)

**Author(s):** Fawcett, Jan

**Correspondence Address:** Fawcett, Jan, psyann@Healio.com

**Institution:** Department of Psychiatry, University of New Mexico School of Medicine, Albuquerque, NM, US

**Language:** English

**Abstract:** This editorial provides an overview of the present issue of *Psychiatric Annals*. This issue features articles on problematic Internet use and behavioral addictions. The DSM-5 opened the floodgates for the concept of behavior addictions by moving gambling disorder from the impulse control disorders section to the new substance related and addictive disorders section, under a last section, non-substance-related disorders. This series of articles considers possible candidates for inclusion as behavioral addictions such as Internet gaming disorder, Internet gambling disorder, compulsive buying. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: SLACK Incorporated

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

**Subject Headings:** [\\*Impulse Control Disorders](#)  
[\\*Internet Addiction](#)  
[\\*Pathological Gambling](#)  
[Addiction](#)

**Source:** PsycINFO

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

### 73. Alcohol and drug use outcomes among vulnerable women living with HIV: Results from the Western Cape Women's Health CoOp.

**Citation:** AIDS Care, December 2014, vol./is. 26/12(1494-1499), 0954-0121;1360-0451 (Dec 2014)

**Author(s):** Zule, William; Myers, Bronwyn; Carney, Tara; Novak, Scott P; McCormick, Kaitlin; Wechsberg, Wendee M

**Correspondence Address:** Zule, William, zule@rti.org

**Institution:** Substance Abuse Treatment Evaluations and Interventions Program, RTI International, Durham, NC, US; South African Medical Research Council, Cape Town, South Africa; South African Medical Research Council, Cape Town, South Africa; RTI International, Durham, NC, US; Substance Abuse Treatment Evaluations and Interventions Program, RTI International, Durham, NC, US; Substance Abuse Treatment Evaluations and Interventions Program, RTI International, Durham, NC, US

**Language:** English

**Abstract:** Alcohol and other drug use can negatively affect adherence to and retention in antiretroviral therapy (ART) among people living with HIV/AIDS. Yet, there are few brief interventions that reduce these behaviors among this population. This article presents the findings from a randomized field experiment that assessed the effects of a woman-focused intervention (the Women's Health CoOp [WHC]) on reducing alcohol and other drug use among vulnerable women in Cape Town, South Africa. The analyses were limited to 84 women living with HIV who reported drinking alcohol at baseline. Because of the small sample size, analyses were performed using an exact logistic regression procedure. At 12-month follow-up, women in the WHC arm were more likely to be abstinent from alcohol (odds ratio [OR] = 3.61; 95% confidence intervals [CI] = 1.23, 11.70;  $p = 0.016$ ) and somewhat more likely to test negative for other drugs (OR = 3.07; 95% CI = 0.83, 12.31;  $p = 0.105$ ), compared with women in the comparison arms. This study provides preliminary evidence of the efficacy of a brief, woman-focused intervention in reducing alcohol and other drug use among vulnerable women living with HIV and it has implications for HIV treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*AIDS](#)  
[\\*Health Care Psychology](#)  
[Drug Abuse](#)  
[Human Females](#)  
[Intervention](#)  
[Retention](#)

**Source:** PsycINFO

### 74. Predicting substance-abuse treatment providers' communication with clients about medication assisted treatment: A test of the theories of reasoned action and planned behavior.

**Citation:** Journal of Substance Abuse Treatment, November 2014, vol./is. 47/5(307-313), 0740-5472 (Nov 2014)

**Author(s):** Roberto, Anthony J; Shafer, Michael S; Marmo, Jennifer

**Correspondence Address:** Roberto, Anthony J., anthony.roberto@asu.edu

**Institution:** Hugh Downs School of Human Communication, Arizona State University, Tempe, AZ, US; School of Social Work, Arizona State University, Tempe, AZ, US; Department of Education, Arizona State University, Tempe, AZ, US

**Language:** English

**Abstract:** The purpose of this investigation is to determine if the theory of reasoned action (TRA) and theory of planned behavior (TPB) can retrospectively predict whether substance-abuse treatment providers encourage their clients to use medicated-assisted treatment (MAT) as part of their treatment plan. Two-hundred and ten substance-abuse treatment providers completed a survey measuring attitudes, subjective norms, perceived behavioral control, intentions, and behavior. Results indicate that substance-abuse treatment providers have very positive attitudes, neutral subjective norms, somewhat positive perceived behavioral control, somewhat positive intentions toward recommending MAT as part of their clients' treatment plan, and were somewhat likely to engage in the actual behavior. Further, the data fit both the TRA and TPB, but with the TPB model having better fit and predictive power for this target audience and behavior. The theoretical and practical implications for the developing messages for substance-abuse treatment providers and other health-care professionals who provide treatment to patients with substance use disorders are discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Therapy](#)  
[\\*Planned Behavior](#)  
[\\*Reasoned Action](#)  
[Clients](#)  
[Student Attitudes](#)

**Source:** PsycINFO

**Full Text:** Available from *Elsevier* in [Journal of Substance Abuse Treatment](#)

#### 75. Prescription drug monitoring programs and buprenorphine maintenance: Clinical considerations.

**Citation:** The American Journal on Addictions, November 2014, vol./is. 23/6(616-617), 1055-0496;1521-0391 (Nov-Dec 2014)

**Author(s):** Hoefler, Michael; Petrakis, Ismene

**Correspondence Address:** Hoefler, Michael: Yale University School of Medicine, 950 Campbell Avenue #116A, West Haven, CT, US, 06405, michael.hoefler@yale.edu

**Institution:** Yale University School of Medicine, West Haven, CT, US; Yale University School of Medicine, West Haven, CT, US

**Language:** English

**Abstract:** Presents a case report of a 33-year old married, employed, male with a 10-year history of opiate use disorder to both prescription opiates and heroin and no other medical or psychiatric history, who has been treated in a substance abuse treatment clinic and prescribed buprenorphine/naloxone 24/ 6 mg daily for 6 months. During this time, he was largely compliant with treatment although he missed several clinic appointments because of conflicts with his work schedule and a reported brief 2-day relapse to heroin use. Following the relapse, he agreed to participate in a weekly cognitive behavioral therapy for substance abuse group. A routine query of the database revealed the patient was actively receiving 100 tabs of 10 mg oxycodone/325mg acetaminophen, a schedule III controlled substance, on a biweekly schedule from an outside prescriber for 12 months. He refused to provide consent to contact the oxycodone prescriber, and initially indicated he planned to continue to obtain the oxycodone prescriptions. The patient discontinued the outside medication, but would not allow contact with the outside provider. However, within a week stopped attending treatment appointments without explanation. In a follow-up phone conversation weeks later, he admitted to immediate relapse to oxycodone use after his buprenorphine/naloxone supply ran out, but reported he would consider returning to treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: American Academy of Addiction Psychiatry  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** \*Cognitive Behavior Therapy  
 \*Drug Abuse  
 \*Heroin  
 \*Monitoring  
 \*Prescription Drugs  
**Source:** PsycINFO  
**Full Text:** Available from Wiley in *American Journal on Addictions, The*

#### 76. Risk behavior in opioid-dependent individuals after the administration of a therapeutic dose of methadone.

**Citation:** The American Journal on Addictions, November 2014, vol./is. 23/6(608-612), 1055-0496;1521-0391 (Nov-Dec 2014)  
**Author(s):** Gorzelanczyk, Edward Jacek; Fareed, Ayman; Walecki, Piotr; Feit, Julia; Kunc, Marek  
**Correspondence Address:** Gorzelanczyk, Edward Jacek: Medseven-Outpatient Addiction Treatment, Rzeznickiego 1D, Bydgoszcz, Poland, 85 791, medsystem@medsystem.com.pl  
**Institution:** Department of Theoretical Basis of Bio-Medical Sciences, Nicolaus Copernicus University Collegium Medicum, Bydgoszcz, Poland; Department of Psychiatry, Emory University School of Medicine, Atlanta, GA, US; Medical College, Faculty of Medicine, Jagiellonian University, Krakow, Poland; Department of Theoretical Basis of Bio-Medical Sciences, Nicolaus Copernicus University Collegium Medicum, Bydgoszcz, Poland; University of Leeds, Leeds, United Kingdom  
**Language:** English  
**Abstract:** Background and Objectives: Evidence suggests that methadone may play a protective role in the faulty decision-making in heroin-addicted individuals. This may reduce craving for opioids and the risky decisions associated with active opioid use. Methods: We tested the effect of a daily therapeutic dose of methadone on faulty decision-making in eighty (n = 80) individuals with a history of opioid addiction. We used the Iowa Gambling Task (IGT) and compared the score and response time before and after the daily methadone dosing. Results: The mean net IGT score before methadone dose was 10 (+ 22) and 22 (+ 23) after methadone dose (t = 4.23, p = .00006). These results reflect statistically significant improvement in faulty decisions after the administration of the daily methadone dose. The mean response time for the reward cards before methadone dose were 1,856 ms (+ 871) and 1,465 ms (+ 851) after methadone dose (t = 2.55, p = .012). The mean response time for the punishment cards before methadone dose were 1,688 ms (+ 911) and 1,399 ms (+ 827) after methadone dose (t = 1.86, p = .065). These results reflect statistically significant improvement in response time to a rewarding healthy decisions after the administration of the daily methadone dose. Conclusions and Scientific Significance: This is the first study to report the effect of a therapeutic dose of methadone on improving faulty decisions for individuals with a long history of opioids addiction. This study demonstrated that the time to making a healthy decision was significantly shorter as a result of administration of methadone. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: American Academy of Addiction Psychiatry  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** \*Drug Dependency  
 \*Drug Dosages  
 \*Opiates  
 \*Therapeutic Processes  
 Decision Making  
 Drug Addiction  
 Harm Reduction  
 Heroin

[Methadone](#)  
[Risk Taking](#)

**Source:** PsycINFO

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

**77. Attenuation of cocaine-induced locomotor activity in male and female mice by active immunization.**

**Citation:** The American Journal on Addictions, November 2014, vol./is. 23/6(604-607), 1055-0496;1521-0391 (Nov-Dec 2014)

**Author(s):** Kosten, Therese A; Shen, Xiaoyun Y; Kinsey, Berma M; Kosten, Thomas R; Orson, Frank M

**Correspondence Address:** Kosten, Therese A.: Research Service Line (151), Michael E DeBakey VAMC, 2002 Holcombe Blvd, Houston, TX, US, tkosten@bcm.edu

**Institution:** Menninger Department of Psychiatry and Behavioral Sciences, Baylor College of Medicine, Houston, TX, US; Michael E DeBakey Veterans' Affairs Medical Center, Houston, TX, US; Michael E DeBakey Veterans' Affairs Medical Center, Houston, TX, US; Menninger Department of Psychiatry and Behavioral Sciences, Baylor College of Medicine, Houston, TX, US; Michael E DeBakey Veterans' Affairs Medical Center, Houston, TX, US

**Language:** English

**Abstract:** Background and Objectives: Immunotherapy for drug addiction is being investigated in several laboratories but most studies are conducted in animals of one sex. Yet, women show heightened immune responses and are more likely to develop autoimmune diseases than men. The purpose of this study was to compare the effects of an active anti-cocaine vaccine, succinyl-norcocaine conjugated to keyhole limpet hemocyanin, for its ability to elicit antibodies and alter cocaine-induced ambulatory activity in male versus female mice. Methods: Male and female BALB/c mice were vaccinated (n = 44) or served as non-vaccinated controls (n = 34). Three weeks after initial vaccination, a booster was given. Ambulatory activity induced by cocaine (20 mg/kg) was assessed at 7 weeks and plasma obtained at 8 weeks to assess antibody levels. Results: High antibody titers were produced in mice of both sexes. The vaccine reduced ambulatory activity cocaine-induced but this effect was greater in female compared to male mice. Discussion and Conclusions: The efficacy of this anti-cocaine vaccine is demonstrated in mice of both sexes but its functional consequences are greater in females than males. Scientific Significance Results point to the importance of testing animals of both sexes in studies of immunotherapies for addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: American Academy of Addiction Psychiatry

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

**Subject Headings:** [\\*Animal Locomotion](#)  
[\\*Antibodies](#)  
[\\*Cocaine](#)  
[\\*Immune System](#)  
[\\*Immunization](#)  
[Animal Sex Differences](#)  
[Mice](#)  
[Immunotherapy](#)

**Source:** PsycINFO

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

**78. A pilot trial of injectable, extended-release naltrexone for the treatment of co-occurring cocaine and alcohol dependence.**

**Citation:** The American Journal on Addictions, November 2014, vol./is. 23/6(591-597), 1055-0496;1521-0391 (Nov-Dec 2014)

**Author(s):** Pettinati, Helen M; Kampman, Kyle M; Lynch, Kevin G; Dundon, William D; Mahoney, Elizabeth M; Wierzbicki, Michael R; O'Brien, Charles P

**Correspondence Address:** Kampman, Kyle M.: Department of Psychiatry, University of Pennsylvania, Perelman School of Medicine, 3900 Chestnut Street, Philadelphia, PA, US, 19104-6178, [kampman@mail.med.upenn.edu](mailto:kampman@mail.med.upenn.edu)

**Institution:** Department of Psychiatry, Center for the Studies of Addiction, University of Pennsylvania, Perelman School of Medicine, Philadelphia, PA, US; Department of Psychiatry, Center for the Studies of Addiction, University of Pennsylvania, Perelman School of Medicine, Philadelphia, PA, US; Department of Psychiatry, Center for the Studies of Addiction, University of Pennsylvania, Perelman School of Medicine, Philadelphia, PA, US; Department of Psychiatry, Center for the Studies of Addiction, University of Pennsylvania, Perelman School of Medicine, Philadelphia, PA, US; Department of Psychiatry, Center for the Studies of Addiction, University of Pennsylvania, Perelman School of Medicine, Philadelphia, PA, US; Department of Psychiatry, Center for the Studies of Addiction, University of Pennsylvania, Perelman School of Medicine, Philadelphia, PA, US; Center for Clinical Epidemiology and Biostatistics, University of Pennsylvania, Perelman School of Medicine, Philadelphia, PA, US; Department of Psychiatry, Center for the Studies of Addiction, University of Pennsylvania, Perelman School of Medicine, Philadelphia, PA, US

**Language:** English

**Abstract:** Background: There is a high co-occurrence of cocaine and alcohol use disorders, and patients with both of these problems are difficult to treat. There is a reasonable rationale and some empirical data to justify a pilot trial of an injectable, extended-release formulation of naltrexone for treating co-occurring cocaine and alcohol addiction. Methods: Eighty cocaine (n = 80) and alcohol dependent, treatment-seeking subjects were randomly assigned to receive either two monthly extended-release injections of naltrexone or two matching placebo injections in an 8-week clinical trial, with weekly medical management plus cognitive behavioral therapy visits. Results: No differences in reduction in cocaine or alcohol use were observed between the injectable naltrexone and placebo groups during the 8-week trial. Conclusions: Injectable extended-release naltrexone, while an ideal method for ensuring medication adherence in these traditionally hard-to-treat patients, did not result in any measurable reduction in cocaine or alcohol use over the course of 8 weeks of treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: American Academy of Addiction Psychiatry

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Cocaine](#)  
[\\*Drug Rehabilitation](#)  
[\\*Drug Therapy](#)  
[\\*Naltrexone](#)  
[Drug Dependency](#)

**Source:** PsycINFO

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

#### 79. Genome-wide association discoveries of alcohol dependence.

**Citation:** The American Journal on Addictions, November 2014, vol./is. 23/6(526-539), 1055-0496;1521-0391 (Nov-Dec 2014)

**Author(s):** Zuo, Lingjun; Lu, Lingeng; Tan, Yunlong; Pan, Xinghua; Cai, Yiqiang; Wang, Xiaoping; Hong, Jiang; Zhong, Chunlong; Wang, Fei; Zhang, Xiang-Yang; Vanderlinden, Lauren A; Tabakoff, Boris; Luo, Xingguang

**Correspondence Address:** Zuo, Lingjun, 1010 Pleasant Hill Road, Orange, CT, US, 06477, [xingguang.Luo@yale.edu](mailto:xingguang.Luo@yale.edu)

**Institution:** Department of Psychiatry, Yale University School of Medicine, New Haven, CT, US; Department of Chronic Disease Epidemiology, Yale School of Public Health, New Haven,

CT, US; Biological Psychiatry Research Center, Beijing Huilongguan Hospital, Beijing, China; Department of Genetics, Yale University School of Medicine, New Haven, CT, US; Department of Internal Medicine, Yale University School of Medicine, New Haven, CT, US; Department of Neurology, First People's Hospital, Shanghai Jiaotong University, Shanghai, China; Department of Emergency, First People's Hospital, Shanghai Jiaotong University, Shanghai, China; Department of Neurosurgery, Renji Hospital, Shanghai Jiaotong University, Shanghai, China; Department of Psychiatry, Yale University School of Medicine, New Haven, CT, US; Menninger Department of Psychiatry and Behavioral Sciences, Baylor College of Medicine, Houston, TX, US; Department of Pharmacology, University of Colorado School of Medicine, Aurora, CO, US; Department of Pharmacology, University of Colorado School of Medicine, Aurora, CO, US; Department of Psychiatry, Yale University School of Medicine, New Haven, CT, US

**Language:**

English

**Abstract:**

**Objective:** To report the genome-wide significant and/or replicable risk variants for alcohol dependence and explore their potential biological functions. **Methods:** We searched in PubMed for all genome-wide association studies (GWASs) of alcohol dependence. The following three types of the results were extracted: genome-wide significant associations in an individual sample, the combined samples, or the meta-analysis ( $p < 5 \times 10^{-8}$ ); top-ranked associations in an individual sample ( $p < 10^{-5}$ ) that were nominally replicated in other samples ( $p < .05$ ); and nominally replicable associations across at least three independent GWAS samples ( $p < .05$ ). These results were meta-analyzed. *cis*-eQTLs in human, RNA expression in rat and mouse brains and bioinformatics properties of all of these risk variants were analyzed. **Results:** The variants located within the alcohol dehydrogenase (ADH) cluster were significantly associated with alcohol dependence at the genome-wide level ( $p < 5 \times 10^{-8}$ ) in at least one sample. Some associations with the ADH cluster were replicable across six independent GWAS samples. The variants located within or near SERINC2, KIAA0040, MREG-PECR or PKNOX2 were significantly associated with alcohol dependence at the genome-wide level ( $p < 5 \times 10^{-8}$ ) in meta-analysis or combined samples, and these associations were replicable across at least one sample. The associations with the variants within NRD1, GPD1L-CMTM8 or MAP3K9-PCNX were suggestive ( $5 \times 10^{-8} < p < 10^{-5}$ ) in some samples, and nominally replicable in other samples. The associations with the variants at HTR7 and OPA3 were nominally replicable across at least three independent GWAS samples ( $10^{-5} < p < .05$ ). Some risk variants at the ADH cluster, SERINC2, KIAA0040, NRD1, and HTR7 had potential biological functions. **Conclusion:** The most robust risk locus was the ADH cluster. SERINC2, KIAA0040, NRD1, and HTR7 were also likely to play important roles in alcohol dependence. PKNOX2, MREG, PECR, GPD1L, CMTM8, MAP3K9, PCNX, and OPA3 might play less important roles in risk for alcohol dependence based on the function analysis. This conclusion will significantly contribute to the post-GWAS follow-up studies on alcohol dependence. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:**

HOLDER: American Academy of Addiction Psychiatry

**Publication Type:**

Journal; Peer Reviewed Journal

**Subject Headings:**

\*Alcoholism  
 \*Bioinformatics  
 \*Brain  
 \*Genome  
 \*Risk Factors  
 Mice

**Source:**

PsycINFO

**Full Text:**Available from Wiley in *American Journal on Addictions, The***80. Antiretroviral medication: An emerging category of prescription drug misuse.****Citation:**

The American Journal on Addictions, November 2014, vol./is. 23/6(519-525), 1055-0496;1521-0391 (Nov-Dec 2014)

**Author(s):**

Davis, Glen P; Surratt, Hilary L; Levin, Frances R; Blanco, Carlos

**Correspondence Address:** Davis, Glen P.: Columbia University Medical Center, 1051 Riverside Drive, New York, NY, US, 10032, [gpd2114@columbia.edu](mailto:gpd2114@columbia.edu)

**Institution:** Department of Psychiatry, Columbia University, New York, NY, US; Center for Applied Research on Substance Use and Health Disparities, Nova Southeastern University, Miami, FL, US; Department of Psychiatry, Columbia University, New York, NY, US; Department of Psychiatry, Columbia University, New York, NY, US

**Language:** English

**Abstract:** Background and Objectives: Prescription drug abuse has been a focus of public health concern over the past two decades with many studies addressing patterns of narcotic analgesic abuse and diversion. Most research in this domain has centered on controlled substances with known abuse liability. However, the scientific literature has been virtually silent regarding other prescribed medications with previously undocumented addictive potential, such as antiretroviral (ARV) medications for treatment of human immunodeficiency virus. Methods: This article reviews the available evidence that suggests a growing problem of ARV diversion and abuse and explores the reasons for the misuse of these medications based on the theoretical neuropsychiatric effects of ARVs and the drug-drug interactions between ARVs and other drugs of abuse. Results: Review of media reports and qualitative studies suggest that ARV medications are emerging drugs of abuse. Claims about the psychoactive effects of ARV medications are supported by scientific case reports. Conclusions and Scientific Significance: This article reviews the evidence to date of an emerging problem of diversion and misuse of ARV medications for recreational purposes. Implications of ARV misuse and diversion are discussed with suggestions for future research and intervention. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: American Academy of Addiction Psychiatry

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Prescription Drugs](#)  
[\\*Public Health](#)

**Source:** PsycINFO

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

### 81. Time trends in adolescent substance use: Are there regional differences?

**Original Title:** Trends im Substanzkonsum Jugendlicher: Gibt es regionale Unterschiede?

**Citation:** Sucht: Zeitschrift für Wissenschaft und Praxis, June 2014, vol./is. 60/3(163-172), 0939-5911 (Jun 2014)

**Author(s):** de Matos, Elena Gomes; Kraus, Ludwig; Pabst, Alexander; Piontek, Daniela

**Correspondence Address:** de Matos, Elena Gomes: IFT Institut für Therapieforschung, Arbeitsgruppe Epidemiologie und Diagnostik, Parzivalstr. 25, München, Germany, 80804, [GomesdeMatos@ift.de](mailto:GomesdeMatos@ift.de)

**Institution:** IFT Institut für Therapieforschung, München, Germany; IFT Institut für Therapieforschung, München, Germany; IFT Institut für Therapieforschung, München, Germany; IFT Institut für Therapieforschung, München, Germany

**Language:** German

**Abstract:** Aims: To examine differences between German federal states regarding adolescent consumption of alcohol, tobacco and cannabis and its time trends. Method: Data of 23,997 adolescents came from three waves (2003; 2007; 2011) of the European School Survey Project on Alcohol and Other Drugs (ESPAD) in Bavaria, Berlin, Brandenburg, Mecklenburg-Western Pomerania and Thuringia. Descriptive and regression analyses were applied. Results: Across the five federal states and three substances, consumption declined over time. For cannabis use this trend is just observed until 2007. Adolescents in Berlin show the lowest level of alcohol use and the highest level of cannabis use. Tobacco use is highest in Brandenburg and Mecklenburg-Western Pomerania and declined most

strongly in Thuringia. Conclusions: Despite some differences in the federal states' consumption patterns, most notably in Berlin, trends are very similar. Altogether, the observed consumption indicators, which on European level are high to moderate, show a declining trend. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Adolescent Development](#)  
[\\*Alcohol Drinking Patterns](#)  
[\\*Cannabis](#)  
[\\*Drug Usage](#)  
[\\*Tobacco Smoking](#)  
[Time](#)  
[Trends](#)

**Source:** PsycINFO

## 82. Indication for the assessment of driver fitness after problematic alcohol consumption.

**Citation:** Sucht: Zeitschrift für Wissenschaft und Praxis, June 2014, vol./is. 60/3(139-147), 0939-5911 (Jun 2014)

**Author(s):** Reimann, Caroline; Schubert, Wolfgang; Berg, Michael; van der Meer, Elke

**Correspondence Address:** Reimann, Caroline: Humboldt-Universität zu Berlin, Institut für Psychologie, Rudower Chaussee 18, Berlin, Germany, 12489, caroline.reimann@hu-berlin.de

**Institution:** Humboldt-University of Berlin, Berlin, Germany; University of Cologne, Cologne, Germany; Institute of Test Development & Application, Berlin, Germany; Humboldt-University of Berlin, Berlin, Germany

**Language:** English

**Abstract:** Objectives: The present review of literature examines the relationship of alcohol consumption and fitness to drive. The legal limit (1,6%) for establishing fitness to drive by means of a medical-psychological assessment (MPA) in Germany is analyzed on the background of published empirical research to present recommendations for the improvement of the current legal situation and administrative practice. Methods: 103 published articles have been analysed (inclusion criteria: completeness, comprehensibility, and experimental manipulation of the blood alcohol concentration [BAC]). The number of alcohol-induced impairments is to be shown in a quantitative analysis. The qualitative analyses of the studies will reveal the impaired areas of psychological and medical functioning. Results: It appears that 97 % of the documented impairments occur at a maximum BAC of 1,1 . Numerous skills are impaired by low doses of alcohol (e. g. attention, memory, perception). Conclusion: Alcohol-induced impairments arise at a BAC far below 1.6, which marks the legal limit for a medical-psychological assessment (MPA) after drunk driving in Germany. The BAC limit in the current ordinance for assigning a medical-psychological fitness assessment cannot be confirmed on the basis of research findings. A reduction of this BAC limit to 1,1% is proposed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Drivers](#)  
[\\*Driving Under the Influence](#)  
[\\*Physical Fitness](#)  
[Psychological Assessment](#)

**Source:** PsycINFO

**83. The relationship between autism quotient, anxiety, and internet addiction.**

- Citation:** Research in Autism Spectrum Disorders, November 2014, vol./is. 8/11(1521-1526), 1750-9467 (Nov 2014)
- Author(s):** Romano, Michela; Truzoli, Roberto; Osborne, Lisa A; Reed, Phil
- Correspondence Address:** Reed, Phil: Department of Psychology, Swansea University, Singleton Park, Swansea, United Kingdom, SA2 8PP, P.Reed@swansea.ac.uk
- Institution:** Universita degli Studi di Milano, Milano, Italy; Universita degli Studi di Milano, Milano, Italy; Abertawe Bro Morgannwg University Health Board, United Kingdom; Swansea University, Swansea, United Kingdom
- Language:** English
- Abstract:** This study investigated internet addiction across the broad autism phenotype, and assessed the degree to which internet addiction in individuals with higher autism quotient scores may be mediated by co-morbid depression and anxiety. Ninety participants were given a range of psychometric assessments to determine their level of problematic internet usage (Internet Addiction Test), autism traits (Autism Quotient Scale), depression (Beck Depression Inventory), and anxiety (Spielberger Trait Anxiety Scale). Significant associations were found between both autism, and anxiety, and internet addiction. However, the association between autism traits and internet addiction was moderated by high level for anxiety, such that individuals with high numbers of autism traits showed less evidence of internet addiction if they also displayed high levels of anxiety. It is suggested that the presence of anxiety in these individuals alters the function that internet behavior serves, and makes internet addiction less likely. (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:** [\\*Autism](#)  
[\\*Internet Addiction](#)  
[Anxiety](#)  
[Depression \(Emotion\)](#)
- Source:** PsycINFO

**84. An interview with Laurence Tisserand, RN: An innovative care model in France.**

- Citation:** Journal of Addictions Nursing, April 2014, vol./is. 25/2(107-109), 1088-4602;1548-7148 (Apr-Jun 2014)
- Author(s):** Kub, Joan [Ed]
- Correspondence Address:** Kub, Joan, 1103 Spy Glass Dr., Arnold, MD, US, 21012, Jkub1@jhu.edu
- Institution:** School of Nursing, Johns Hopkins University, Baltimore, MD, US
- Language:** English
- Abstract:** Presents an interview of Laurence Tisserand which aims to provide glimpse of how nurses are addressing addictions in France and are taking the lead in addressing patient needs in alternative settings. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
- Country of Publication:** STATEMENT: Unauthorized reproduction of this article is prohibited.; HOLDER: International Nurses Society on Addictions; YEAR: 2014
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Drug Addiction](#)  
[\\*Interviews](#)  
[\\*Nurses](#)  
[Needs](#)  
[Patients](#)

**Source:** PsycINFO

### 85. Educating individuals and communities about drugs and addiction.

**Citation:** Journal of Addictions Nursing, April 2014, vol./is. 25/2(105-106), 1088-4602;1548-7148 (Apr-Jun 2014)

**Author(s):** Baird, Carolyn [Ed]

**Correspondence Address:** Baird, Carolyn: Counseling and Trauma Services, LLC, 8 Four Coins Drive, Canonsburg, PA, US, 15137, cb@counselingandtraumaservices.com

**Institution:** Counseling and Trauma Services, LLC, Canonsburg, PA, US

**Language:** English

**Abstract:** This editorial highlights the significance of educating individuals and communities about drugs and addiction through various Websites. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** STATEMENT: Unauthorized reproduction of this article is prohibited.; HOLDER: International Nurses Society on Addictions; YEAR: 2014

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

**Subject Headings:** [\\*Drug Addiction](#)  
[\\*Health Education](#)  
[\\*Scientific Communication](#)  
[\\*Websites](#)

**Source:** PsycINFO

### 86. Measuring chronic pain intensity among veterans in a residential rehabilitation treatment program.

**Citation:** Journal of Addictions Nursing, April 2014, vol./is. 25/2(74-80), 1088-4602;1548-7148 (Apr-Jun 2014)

**Author(s):** Randleman, Mary L; Douglas, Mary E; DeLane, Alice M; Palmer, Glen A

**Correspondence Address:** Randleman, Mary L., 7545 Veterans Drive, Ramsey, MN, US, 55303, mary.randleman@va.gov

**Institution:** Minneapolis VA Health Care System, Minneapolis, MN, US; Fargo VA Health Care System, Fargo, ND, US; St. Cloud VA Health Care System, St. Cloud, MN, US; St. Cloud VA Health Care System, St. Cloud, MN, US

**Language:** English

**Abstract:** The purpose of this study was to identify whether veterans with chronic pain, substance abuse, and posttraumatic stress disorder (PTSD) diagnoses residing in a Residential Rehabilitation Treatment Program (RRTP) perceived a higher level of pain than those veterans who had chronic pain but did not have active substance abuse issues or PTSD. A sample of veterans (n = 200) with chronic pain undergoing treatment for either chemical dependency and/or PTSD in an RRTP and a Surgical Specialty Care outpatient clinic at a Department of Veterans Affairs medical center took part in the study. Multiple analysis of variance and further univariate statistics were examined to determine the association between groups on the different scales. There was a considerable difference in terms of which group of veterans perceived a higher rate of pain even with the use of the same four pain assessment scales (i.e., Numeric Rating, Visual Analog, Faces, and Mankoski). Scores were significantly higher for the RRTP group than the Surgical Specialty Care group on all screening measures (p < .001). Veterans with chronic pain, substance abuse, and/or PTSD diagnoses residing in an RRTP tended to have a higher perception of chronic pain compared to those without substance abuse or PTSD diagnoses. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: Unauthorized reproduction of this article is prohibited.; HOLDER: International Nurses Society on Addictions; YEAR: 2014

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

**Subject Headings:** [\\*Chronic Pain](#)  
[\\*Military Veterans](#)  
[\\*Pain Management](#)  
[\\*Rehabilitation](#)  
[\\*Residential Care Institutions](#)  
[Drug Abuse](#)  
[Posttraumatic Stress Disorder](#)

**Source:** PsycINFO

### 87. Prescription drugs or heroin: The overdoses continue.

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**Citation:** Journal of Addictions Nursing, April 2014, vol./is. 25/2(63-65), 1088-4602;1548-7148 (Apr-Jun 2014)

**Author(s):** Baird, Carolyn

**Correspondence Address:** Baird, Carolyn: Counseling and Trauma Services, LLC, 8 Four Coins Drive, Canonsburg, PA, US, 15137, [cb@counselingandtraumaservices.com](mailto:cb@counselingandtraumaservices.com)

**Institution:** Counseling and Trauma Services, LLC, Canonsburg, PA, US

**Language:** English

**Abstract:** This editorial discusses drug overdose deaths due to prescription drugs including heroin. When the Centers for Disease Control realized that deaths caused by drug overdoses had been rising for 2 decades, they decided that prescription drug abuse was an epidemic that would continue to grow unless addressed using a collaborative effort of policy, programming, and community and agency responses. Because of a lack of research, these approaches were developed firmest advice, not best practice, but they have still been effective. Using a four-pronged plan of education, tracking and monitoring, proper medication disposal, and enforcement, the response was rapid. The Substance Abuse and Mental Health Services Administration (SAMHSA)'s (2013b) Opioid Overdose Toolkit outlines five strategic approaches to prevent future overdose deaths: Encourage providers, persons at high risk, family members, and others to learn how to prevent and manage opioid overdose; Ensure access to treatment for individuals who are misusing or addicted to opioids or who have other substance use disorders.; Ensure ready access to naloxone; Encourage the public to call 911 and encourage prescribers to use state Prescription Drug Monitoring Programs. The future looks promising. Instead of encouraging increased drug, communities with distribution programs have decreased self-reports of use. Further research is needed to support the efficacy of take home naloxone to empower drug users and increase the availability of naloxone through increased prescribing, expanded distribution in communities, and re-labeling of naloxone. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** STATEMENT: Unauthorized reproduction of this article is prohibited.; HOLDER: International Nurses Society on Addictions; YEAR: 2014

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

**Subject Headings:** [\\*Drug Overdoses](#)  
[\\*Heroin](#)  
[\\*Prescription Drugs](#)  
[\\*Scientific Communication](#)  
[Prevention](#)

**Source:** PsycINFO

### 88. Does adolescent weight status predict problematic substance use patterns?

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**Citation:** American Journal of Health Behavior, September 2014, vol./is. 38/5(708-716), 1087-3244;1945-7359 (Sep 2014)

**Author(s):** Lanza, H. Isabella; Grella, Christine E; Chung, Paul J

**Correspondence Address:** Lanza, H. Isabella, [hilanza@ucla.edu](mailto:hilanza@ucla.edu)

**Institution:** Semel Institute for Neuroscience and Human Behavior, University of California, Los Angeles, CA, US; Semel Institute for Neuroscience and Human Behavior, University of California, Los Angeles, CA, US; Department of Pediatrics, University of California, Los Angeles, CA, US

**Language:** English

**Abstract:** Objectives: To identify underlying patterns of cigarette smoking, alcohol use, and marijuana use in young adulthood, and ascertain whether adolescent overweight or obesity status predicts problematic substance use patterns. Methods: The study included 15,119 participants from the National Longitudinal Study of Adolescent Health (Add Health) at Wave 1 (11-19 years) and Wave 3 (18-26 years). Latent class analysis was conducted. Results: Participants were classified into a Low Substance Use (35%), Regular Smokers (12%), High-risk Alcohol use (33%), or High Substance Use (20%) class. Overweight/ obese adolescents had a greater likelihood of belonging to the Regular Smokers class. Conclusions: Overweight/ obese adolescents are at higher risk of engaging in regular cigarette smoking without problematic alcohol or marijuana use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: PNG Publications

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

**Subject Headings:** [\\*Alcohol Drinking Patterns](#)  
[\\*Body Weight](#)  
[\\*Drug Abuse](#)  
[\\*Marijuana Usage](#)  
[\\*Tobacco Smoking](#)  
[Adolescent Development](#)  
[Obesity](#)

**Source:** PsycINFO

**Full Text:** Available from *EBSCOhost* in *American Journal of Health Behavior*

### 89. Traits linked to executive and reward systems functioning in clients undergoing residential treatment for substance dependence.

**Citation:** Personality and Individual Differences, November 2014, vol./is. 70/(194-199), 0191-8869 (Nov 2014)

**Author(s):** Lyvers, Michael; Hinton, Rachel; Gotsis, Stephanie; Roddy, Michelle; Edwards, Mark S; Thorberg, Fred Arne

**Correspondence Address:** Lyvers, Michael, mlyvers@bond.edu.au

**Institution:** Department of Psychology, Bond University, Gold Coast, QLD, Australia; Department of Psychology, Bond University, Gold Coast, QLD, Australia; Department of Psychology, Bond University, Gold Coast, QLD, Australia; Department of Psychology, Bond University, Gold Coast, QLD, Australia; Department of Psychology, Bond University, Gold Coast, QLD, Australia; Department of Psychology, Bond University, Gold Coast, QLD, Australia

**Language:** English

**Abstract:** Traits presumed to reflect dopaminergic reward and prefrontal executive systems functioning were assessed in 100 clients undergoing residential treatment for substance dependence and a community sample of 107 social drinkers. All participants completed self-report measures of impulsivity, alexithymia, frontal systems dysfunction, sensitivity to rewards and punishments, dispositional mindfulness, alcohol use, illicit drug use, mood and demographic characteristics. The percentage of in-patients meeting the criterion for alexithymia was more than twice as high as in the community sample ( $p < .0001$ ). Multivariate analysis of covariance controlling for age, education, head injury and gender revealed significant differences ( $p < .0001$ ) between clinical and community samples such that clients scored higher on negative moods, frontal systems dysfunction, reward sensitivity, punishment sensitivity and impulsivity, and lower on dispositional mindfulness. Time in treatment was correlated only with negative mood, supporting the

stability of the trait measures; controlling for negative mood eliminated group differences on punishment sensitivity and mindfulness only. Results are consistent with the notion that addiction is linked to reward sensitivity and frontal lobe deficits, with associated implications. (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:** [\\*Alexithymia](#)  
[\\*Drug Addiction](#)  
[\\*Personality Traits](#)  
[\\*Residential Care Institutions](#)  
[\\*Rewards](#)  
[Clients](#)

**Source:** PsycINFO

**90. Examining effects of anticipated stigma, centrality, salience, internalization, and outness on psychological distress for people with concealable stigmatized identities.**

**Citation:** PLoS ONE, May 2014, vol./is. 9/5, 1932-6203 (May 9, 2014)

**Author(s):** Quinn, Diane M; Williams, Michelle K; Quintana, Francisco; Gaskins, Jennifer L; Overstreet, Nicole M; Pishori, Alefiyah; Earnshaw, Valerie A; Perez, Giselle; Chaudoir, Stephenie R

**Correspondence Address:** Quinn, Diane M., [diane.quinn@uconn.edu](mailto:diane.quinn@uconn.edu)

**Institution:** Department of Psychology, University of Connecticut, Storrs, CT, US; Department of Psychology, University of Connecticut, Storrs, CT, US; Department of Psychology, University of Connecticut, Storrs, CT, US; Department of Psychology, University of Connecticut, Storrs, CT, US; Center for Interdisciplinary Research on AIDS, Yale University, Hew Haven, CT, US; Department of Psychology, University of Connecticut, Storrs, CT, US; Center for Interdisciplinary Research on AIDS, Yale University, Hew Haven, CT, US; Department of Psychology, University of Connecticut, Storrs, CT, US; Department of Psychology, University of Connecticut, Storrs, CT, US

**Language:** English

**Abstract:** Understanding how stigmatized identities contribute to increased rates of depression and anxiety is critical to stigma reduction and mental health treatment. There has been little research testing multiple aspects of stigmatized identities simultaneously. In the current study, we collected data from a diverse, urban, adult community sample of people with a concealed stigmatized identity (CSI). We targeted 5 specific CSIs-mental illness, substance abuse, experience of domestic violence, experience of sexual assault, and experience of childhood abuse-that have been shown to put people at risk for increased psychological distress. We collected measures of the anticipation of being devalued by others if the identity became known (anticipated stigma), the level of defining oneself by the stigmatized identity (centrality), the frequency of thinking about the identity (salience), the extent of agreement with negative stereotypes about the identity (internalized stigma), and extent to which other people currently know about the identity (outness). Results showed that greater anticipated stigma, greater identity salience, and lower levels of outness each uniquely and significantly predicted variance in increased psychological distress (a composite of depression and anxiety). In examining communalities and differences across the five identities, we found that mean levels of the stigma variables differed across the identities, with people with substance abuse and mental illness reporting greater anticipated and internalized stigma. However, the prediction pattern of the variables for psychological distress was similar across the substance abuse, mental illness, domestic violence, and childhood abuse identities (but not sexual assault). Understanding which components of stigmatized identities predict distress can lead to more effective treatment for people experiencing psychological distress. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.;  
HOLDER: Quinn et al.; YEAR: 2014

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

**Subject Headings:** [\\*Internalization](#)  
[\\*Psychological Stress](#)  
[\\*Self Disclosure](#)  
[\\*Stigma](#)  
[Attitudes](#)  
[Child Abuse](#)  
[Domestic Violence](#)  
[Drug Abuse](#)  
[Expectations](#)  
[Identity Formation](#)  
[Mental Disorders](#)  
[Sexual Abuse](#)

**Source:** PsycINFO

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

#### 91. Virus-mediated shRNA knockdown of prodynorphin in the rat nucleus accumbens attenuates depression-like behavior and cocaine locomotor sensitization.

**Citation:** PLoS ONE, May 2014, vol./is. 9/5, 1932-6203 (May 9, 2014)

**Author(s):** Cohen, Ami; Whitfield, Timothy W; Kreifeldt, Max; Koebel, Pascale; Kieffer, Brigitte L; Contet, Candice; George, Olivier; Koob, George F

**Correspondence Address:** Cohen, Ami, cohen@scripps.edu

**Institution:** Committee on the Neurobiology of Addictive Disorders, Scripps Research Institute, La Jolla, CA, US; Committee on the Neurobiology of Addictive Disorders, Scripps Research Institute, La Jolla, CA, US; Committee on the Neurobiology of Addictive Disorders, Scripps Research Institute, La Jolla, CA, US; Institut de Genetique et de Biologie Moleculaire et Cellulaire, Translational Medicine and Neurogenetic Programme, UdS Universitede Strasbourg, INSERM U964, CNRS UMR7104, Illkirch, France; Institut de Genetique et de Biologie Moleculaire et Cellulaire, Translational Medicine and Neurogenetic Programme, UdS Universitede Strasbourg, INSERM U964, CNRS UMR7104, Illkirch, France; Committee on the Neurobiology of Addictive Disorders, Scripps Research Institute, La Jolla, CA, US; Committee on the Neurobiology of Addictive Disorders, Scripps Research Institute, La Jolla, CA, US; Committee on the Neurobiology of Addictive Disorders, Scripps Research Institute, La Jolla, CA, US

**Language:** English

**Abstract:** Dynorphins, endogenous opioid peptides that arise from the precursor protein prodynorphin (Pdyn), are hypothesized to be involved in the regulation of mood states and the neuroplasticity associated with addiction. The current study tested the hypothesis that dynorphin in the nucleus accumbens (NAcc) mediates such effects. More specifically, we examined whether knockdown of Pdyn within the NAcc in rats would alter the expression of depressive-like and anxiety-like behavior, as well as cocaine locomotor sensitization. Wistar rats were injected with adeno-associated viral (AAV) vectors encoding either a Pdyn-specific short hairpin RNA (AAV-shPdyn) or a scrambled shRNA (AAV-shScr) as control. Four weeks later, rats were tested for anxiety-like behavior in the elevated plus maze test and depressive-like behavior in the forced swim test (FST). Finally, rats received one daily injection of saline or cocaine (20 mg/kg, i.p.), followed by assessment of locomotion for 4 consecutive days. Following 3 days of abstinence, the rats completed 2 additional daily cocaine/saline locomotor trials. Pdyn knockdown in the NAcc led to a significant reduction in depressive-like behavior in the FST, but had no

effect on anxiety-like behavior in the elevated plus maze. Pdyn knockdown did not alter baseline locomotor behavior, the locomotor response to acute cocaine, or the initial sensitization of the locomotor response to cocaine over the first 4 cocaine treatment days. However, following 3 days abstinence the locomotor response to the cocaine challenge returned to their original levels in the AAV-shPdyn rats while remaining heightened in the AAV-shScr rats. These results suggest that dynorphin in a very specific area of the nucleus accumbens contributes to depressive-like states and may be involved in neuroadaptations in the NAcc that contribute to the development of cocaine addiction as a persistent and lasting condition. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.; HOLDER: Cohen et al.; YEAR: 2014

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

**Subject Headings:** \*Cocaine  
\*Drug Sensitivity  
\*Dynorphins  
\*Nucleus Accumbens  
\*Ribonucleic Acid  
Animal Ethology  
Animal Locomotion  
Depression (Emotion)  
Microorganisms  
Rats

**Source:** PsycINFO

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

## 92. A comprehensive approach to identify reliable reference gene candidates to investigate the link between alcoholism and endocrinology in Sprague-Dawley rats.

**Citation:** PLoS ONE, May 2014, vol./is. 9/5, 1932-6203 (May 13, 2014)

**Author(s):** Taki, Faten A; Abdel-Rahman, Abdel A; Zhang, Baohong

**Correspondence Address:** Zhang, Baohong, zhangb@ecu.edu

**Institution:** Department of Biology, East Carolina University, Greenville, NC, US; Department of Pharmacology, East Carolina University, Greenville, NC, US; Department of Biology, East Carolina University, Greenville, NC, US

**Language:** English

**Abstract:** Gender and hormonal differences are often correlated with alcohol dependence and related complications like addiction and breast cancer. Estrogen (E2) is an important sex hormone because it serves as a key protein involved in organism level signaling pathways. Alcoholism has been reported to affect estrogen receptor signaling; however, identifying the players involved in such multi-faceted syndrome is complex and requires an interdisciplinary approach. In many situations, preliminary investigations included a straight forward, yet informative biotechniques such as gene expression analyses using quantitative real time PCR (qRT-PCR). The validity of qRT-PCR-based conclusions is affected by the choice of reliable internal controls. With this in mind, we compiled a list of 15 commonly used housekeeping genes (HKGs) as potential reference gene candidates in rat biological models. A comprehensive comparison among 5 statistical approaches (geNorm, dCt method, NormFinder, BestKeeper, and RefFinder) was performed to identify the minimal number as well the most stable reference genes required for reliable normalization in experimental rat groups that comprised sham operated (SO), ovariectomized rats in the absence (OVX) or presence of E2 (OVXE2). These rat groups were subdivided into subgroups that received alcohol in liquid diet or isocaloric control

liquid diet for 12 weeks. Our results showed that U87, 5S rRNA, GAPDH, and U5a were the most reliable gene candidates for reference genes in heart and brain tissue. However, different gene stability ranking was specific for each tissue input combination. The present preliminary findings highlight the variability in reference gene rankings across different experimental conditions and analytic methods and constitute a fundamental step for gene expression assays. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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HOLDER: Taki et al.; YEAR: 2014

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

**Subject Headings:** \*Alcoholism  
\*Endocrinology  
\*Gene Expression  
Estrogens  
Genes  
Genetics  
Rats

**Source:** PsycINFO

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

### 93. Development of Korean Smartphone Addiction Proneness Scale for youth.

**Citation:** PLoS ONE, May 2014, vol./is. 9/5, 1932-6203 (May 21, 2014)

**Author(s):** Kim, Dongil; Lee, Yunhee; Lee, Juyoung; Nam, JeeEun Karin; Chung, Yeoju

**Correspondence Address:** Lee, Yunhee, yuniizzang@gmail.com

**Institution:** Department of Education, Seoul National University, Seoul, South Korea; Department of Education, Seoul National University, Seoul, South Korea; Department of Education, Seoul National University, Seoul, South Korea; Department of Education, Seoul National University, Seoul, South Korea; Department of Education, Korea National University of Education, CheongJu, South Korea

**Language:** English

**Abstract:** This study developed a Smartphone Addiction Proneness Scale (SAPS) based on the existing internet and cellular phone addiction scales. For the development of this scale, 29 items (1.5 times the final number of items) were initially selected as preliminary items, based on the previous studies on internet/phone addiction as well as the clinical experience of involved experts. The preliminary scale was administered to a nationally representative sample of 795 students in elementary, middle, and high schools across South Korea. Then, final 15 items were selected according to the reliability test results. The final scale consisted of four subdomains: (1) disturbance of adaptive functions, (2) virtual life orientation, (3) withdrawal, and (4) tolerance. The final scale indicated a high reliability with Cronbach's of .880. Support for the scale's criterion validity has been demonstrated by its relationship to the internet addiction scale, KS-II ( $r = .49$ ). For the analysis of construct validity, we tested the Structural Equation Model. The results showed the four-factor structure to be valid (NFI = .943, TLI = .902, CFI = .902, RMSEA = .034). Smartphone addiction is gaining a greater spotlight as possibly a new form of addiction along with internet addiction. The SAPS appears to be a reliable and valid diagnostic scale for screening adolescents who may be at risk of smartphone addiction. Further implications and limitations are discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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reproduction in any medium, provided the original author and source are credited.;  
 HOLDER: Kim et al.; YEAR: 2014

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Rating Scales](#)  
[\\*Test Construction](#)  
[\\*Test Validity](#)  
[\\*Cellular Phones](#)  
[Test Reliability](#)

**Source:** PsycINFO

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

#### 94. Effects of inhibitory GABA-active neurosteroids on cocaine seeking and cocaine taking in rats.

**Citation:** Psychopharmacology, September 2014, vol./is. 231/17(3391-3400), 0033-3158;1432-2072 (Sep 2014)

**Author(s):** Schmoutz, Christopher D; Runyon, Scott P; Goeders, Nicholas E

**Correspondence Address:** Schmoutz, Christopher D.: Department of Pharmacology, Toxicology & Neuroscience, Louisiana State University Health Sciences Center, 1501 Kings Highway, Box 33932, Shreveport, LA, US, 71130, cschm1@lsuhsc.edu

**Institution:** Department of Pharmacology, Toxicology & Neuroscience, Louisiana State University Health Sciences Center, Shreveport, LA, US; Research Triangle Institute, Research Triangle Park, NC, US; Department of Pharmacology, Toxicology & Neuroscience, Louisiana State University Health Sciences Center, Shreveport, LA, US

**Language:** English

**Abstract:** Rationale: Several compounds that potentiate GABA-induced inhibitory currents also decrease stress, anxiety and addiction-related behaviors. Because of the well-established connection between stress and addiction, compounds that reduce stress-induced responses might be efficacious in treating addiction. Since endogenous neurosteroids such as allopregnanolone may function in a manner similar to benzodiazepines to reduce HPA axis activation and anxiety following stressful stimuli, we hypothesized that exogenously applied neurosteroids would reduce cocaine reinforcement in two animal models. Methods: Male Wistar rats were trained to self-administer cocaine and food under a concurrent alternating operant schedule of reinforcement. Two separate groups of rats were trained to self-administer cocaine or food pellets and were then exposed to similar cue-induced reinstatement paradigms. Both groups of rats were pretreated with various doses of neurosteroids. Results: Allopregnanolone and 3-hydroxy-3-methyl-17-nitro-5-androstane (R6305-7, a synthetic neurosteroid) were ineffective in selectively decreasing cocaine relative to food self-administration. On the other hand, both allopregnanolone and R6305-7 significantly decreased the cue-induced reinstatement of extinguished cocaine seeking, confirmed by one-way ANOVA. Conclusions: These results suggest that neurosteroids may be effective in reducing the relapse to cocaine use without affecting ongoing cocaine self-administration. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Anxiety](#)  
[\\*Cocaine](#)  
[\\*Gamma Aminobutyric Acid Agonists](#)  
[\\*Stress](#)  
[Rats](#)

**Source:** PsycINFO

**95. Contribution of excessive alcohol consumption to deaths and years of potential life lost in the United States.**

- Citation:** Preventing Chronic Disease: Public Health Research, Practice, and Policy, June 2014, vol./is. 11/, 1545-1151 (Jun 26, 2014)
- Author(s):** Stahre, Mandy; Roeber, Jim; Kanny, Dafna; Brewer, Robert D; Zhang, Xingyou
- Correspondence Address:** Stahre, Mandy: Epidemic Intelligence Service Officer, Washington State Department of Health, Olympia, WA, US, 98504, mandy.stahre@doh.wa.gov
- Institution:** Washington State Department of Health, Olympia, WA, US; New Mexico Department of Health, Santa Fe, Mexico; Centers for Disease Control and Prevention, Atlanta, GA, US; Centers for Disease Control and Prevention, Atlanta, GA, US; Centers for Disease Control and Prevention, Atlanta, GA, US
- Language:** English
- Abstract:** Introduction: Excessive alcohol consumption is a leading cause of premature mortality in the United States. The objectives of this study were to update national estimates of alcohol-attributable deaths (AAD) and years of potential life lost (YPLL) in the United States, calculate age-adjusted rates of AAD and YPLL in states, assess the contribution of AAD and YPLL to total deaths and YPLL among working-age adults, and estimate the number of deaths and YPLL among those younger than 21 years. Methods: We used the Centers for Disease Control and Prevention's Alcohol-Related Disease Impact application for 2006-2010 to estimate total AAD and YPLL across 54 conditions for the United States, by sex and age. AAD and YPLL rates and the proportion of total deaths that were attributable to excessive alcohol consumption among working-age adults (20-64 y) were calculated for the United States and for individual states. Results: From 2006 through 2010, an annual average of 87,798 (27.9/100,000 population) AAD and 2.5 million (831.6/100,000) YPLL occurred in the United States. Age-adjusted state AAD rates ranged from 51.2/100,000 in New Mexico to 19.1/100,000 in New Jersey. Among working-age adults, 9.8% of all deaths in the United States during this period were attributable to excessive drinking, and 69% of all AAD involved working-age adults. Conclusions: Excessive drinking accounted for 1 in 10 deaths among working-age adults in the United States. AAD rates vary across states, but excessive drinking remains a leading cause of premature mortality nationwide. Strategies recommended by the Community Preventive Services Task Force can help reduce excessive drinking and harms related to it. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Alcohol Abuse](#)  
[\\*Alcoholism](#)  
[\\*Death and Dying](#)  
[\\*Life Span](#)  
[\\*Mortality Rate](#)  
[Age Differences](#)  
[Demographic Characteristics](#)  
[Health](#)
- Source:** PsycINFO
- Full Text:** Available from *National Library of Medicine* in [Preventing Chronic Disease](#)

**96. Relationships between impulsivity and subjective response in an IV ethanol paradigm.**

- Citation:** Psychopharmacology, July 2014, vol./is. 231/14(2867-2876), 0033-3158;1432-2072 (Jul 2014)
- Author(s):** Leeman, Robert F; Ralevski, Elizabeth; Limoncelli, Diana; Pittman, Brian; O'Malley, Stephanie S; Petrakis, Ismene L
- Correspondence Address:** Leeman, Robert F.: Department of Psychiatry, Yale School of Medicine, CMHC, Room S200, 34 Park Street, New Haven, CT, US, 06519, robert.leeman@yale.edu

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

**Language:** English

**Abstract:** Rationale: Impulsivity and individual differences in subjective response to alcohol are risk factors for alcohol problems and possibly endophenotypes for alcohol dependence. Few prior studies have addressed relationships between the two constructs. Objectives: To predict subjective responses to ethanol, we tested self-reported impulsiveness, ethanol dose condition (high dose, low dose, or placebo), and time (seven time points) along with interactions among these variables. Methods: The present study is a secondary analysis of data from a within-subject, placebo-controlled, dose-ranging ethanol administration study using IV infusion with a clamping technique to maintain steady-state breath alcohol concentration. The sample consisted of healthy, non-alcohol dependent social alcohol drinkers between the ages of 21 and 30 (N = 105). Participants at varying levels of impulsivity were compared with regard to stimulant and subjective responses to three ethanol dose conditions over time. Results: Individuals with higher impulsivity reported elevated stimulant and dampened sedative response to alcohol, particularly at the higher dose. Higher impulsivity was associated with a steeper increase in stimulant effects during the first half of clamped ethanol infusion with the higher dose. Conclusions: These results suggest that impulsive individuals may experience enhanced reinforcing, stimulant effects, and relatively muted aversive sedative effects from alcohol. These subjective responses may relate to enhanced risk of alcohol problems among more impulsive individuals. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Ethanol](#)  
[\\*Risk Factors](#)  
[Alcoholism](#)  
[Individual Differences](#)  
[Reinforcement](#)  
[Family History](#)

**Source:** PsycINFO

#### 97. The role of ghrelin in addiction: A review.

**Citation:** Psychopharmacology, July 2014, vol./is. 231/14(2725-2740), 0033-3158;1432-2072 (Jul 2014)

**Author(s):** Panagopoulos, Vassilis N; Ralevski, Elizabeth

**Correspondence Address:** Ralevski, Elizabeth: Department of Psychiatry, VA Connecticut Healthcare System, Yale University School of Medicine, West Haven, CT, US, elizabeth.ralevski@yale.edu

**Institution:** Department of Psychiatry, VA St. Louis Health Care System, St. Louis, MO, US;  
 Department of Psychiatry, VA Connecticut Healthcare System, Yale University School of Medicine, West Haven, CT, US

**Language:** English

**Abstract:** Rationale: Ghrelin is a fast-acting hormone that is produced primarily by the stomach and by the brain although in smaller quantities. The regulation and the secretion of ghrelin are complex and not limited to aspects of feeding. Ghrelin exerts powerful effects on multiple processes, and it has been demonstrated that it mediates the rewarding properties of food as well as of drugs of abuse. Objectives: The purpose of this review is to summarize the findings of preclinical and clinical studies related to ghrelin's possible role in addiction for each specific class of substances. Questions related to ghrelin's involvement in

addiction are highlighted. Recurrent methodological issues that render the interpretation of the findings challenging are discussed. Also, the potential of targeting ghrelin as a pharmacologic treatment strategy for addiction is explored. Results: Ghrelin signaling is implicated in the mediation of behavioral and biochemical effects of drugs of abuse that are cardinal for the development of addiction, especially for alcohol, nicotine, and stimulants. The available literature implicating ghrelin in opioid or cannabis use disorders is currently limited and inconclusive. Conclusions: There is intriguing, although not always consistent, evidence for the involvement of ghrelin signaling in aspects of addiction, especially in the cases of alcohol, nicotine, and stimulants. Further research, particularly in humans, is recommended to replicate and expand on the findings of the current literature. Improved and novel methodologies that take into account the volatile and complex nature of ghrelin are required to clarify the inconsistencies of the findings. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Addiction](#)  
[\\*CNS Stimulating Drugs](#)  
[\\*Ghrelin](#)  
[Stomach](#)

**Source:** PsycINFO

**98. Dissociable effects of the noncompetitive NMDA receptor antagonists ketamine and MK-801 on intracranial self-stimulation in rats.**

**Citation:** Psychopharmacology, July 2014, vol./is. 231/13(2705-2716), 0033-3158;1432-2072 (Jul 2014)

**Author(s):** Hillhouse, Todd M; Porter, Joseph H; Negus, S. Stevens

**Correspondence Address:** Negus, S. Stevens: Department of Pharmacology and Toxicology, Virginia Commonwealth University, 410 North 12th Street, PO Box 980613, Richmond, VA, US, 23298, ssnegus@vcu.edu

**Institution:** Department of Psychology, Virginia Commonwealth University, Richmond, VA, US;  
 Department of Psychology, Virginia Commonwealth University, Richmond, VA, US;  
 Department of Pharmacology and Toxicology, Virginia Commonwealth University, Richmond, VA, US

**Language:** English

**Abstract:** Rationale: The noncompetitive NMDA antagonist ketamine produces rapid antidepressant effects in treatment-resistant patients suffering from major depressive and bipolar disorders. However, abuse liability is a concern. Objectives: This study examined abuse-related effects of ketamine using intracranial self-stimulation (ICSS) in rats. The higher-affinity NMDA antagonist MK-801 and the monoamine reuptake inhibitor cocaine were examined for comparison. Methods: Male Sprague Dawley rats were implanted with electrodes targeting the medial forebrain bundle and trained to respond to brain stimulation under a frequency-rate ICSS procedure. The first experiment compared the potency and time course of ketamine (3.2-10.0 mg/kg) and MK-801 (0.032-0.32 mg/kg). The second experiment examined effects of repeated dosing with ketamine (3.2-20.0 mg/kg/day) and acute cocaine (10.0 mg/kg). Results: Following acute administration, ketamine (3.2-10 mg/kg) produced only dose- and time-dependent depressions of ICSS and failed to produce an abuse-related facilitation of ICSS at any dose or pretreatment time. In contrast, MK-801 (0.032-0.32 mg/kg) produced a mixed profile of rate-increasing and rate-decreasing effects; ICSS facilitation was especially prominent at an intermediate dose of 0.18 mg/kg. Repeated dosing with ketamine produced dose-dependent tolerance to the rate-decreasing effects of ketamine (10.0 and 18.0 mg/kg) but failed to unmask expression of ICSS facilitation. Termination of ketamine treatment failed to produce withdrawal-associated decreases in ICSS. As reported previously, 10.0 mg/kg cocaine facilitated ICSS. Conclusions: The dissociable effects of ketamine and MK-801 suggest differences in the pharmacology of these nominally similar NMDA antagonists. Failure of ketamine to facilitate ICSS contrasts with other evidence for the abuse liability of

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

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

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

**Subject Headings:** [\\*Brain Self Stimulation](#)  
[\\*Cocaine](#)  
[\\*Ketamine](#)  
[\\*N-Methyl-D-Aspartate](#)  
[Bipolar Disorder](#)  
[Drug Abuse](#)  
[Major Depression](#)  
[Rats](#)  
[Self Stimulation](#)

**Source:** PsycINFO

**99. Deletion of the GABAA 2-subunit does not alter self administration of cocaine or reinstatement of cocaine seeking.**

**Citation:** Psychopharmacology, July 2014, vol./is. 231/13(2695-2703), 0033-3158;1432-2072 (Jul 2014)

**Author(s):** Dixon, C. I; Halbout, B; King, S. L; Stephens, D. N

**Correspondence Address:** Stephens, D. N.: School of Psychology, University of Sussex, Brighton, United Kingdom, BN1 9QG, d.stephens@sussex.ac.uk

**Institution:** School of Psychology, University of Sussex, Brighton, United Kingdom; School of Psychology, University of Sussex, Brighton, United Kingdom; School of Psychology, University of Sussex, Brighton, United Kingdom; School of Psychology, University of Sussex, Brighton, United Kingdom

**Language:** English

**Abstract:** Rationale: GABAA receptors containing 2-subunits are highly represented in brain areas that are involved in motivation and reward, and have been associated with addiction to several drugs, including cocaine. We have shown previously that a deletion of the 2-subunit results in an absence of sensitisation to cocaine. Objective: We investigated the reinforcing properties of cocaine in GABAA 2-subunit knockout (KO) mice using an intravenous self-administration procedure. Methods: 2-subunit wildtype (WT), heterozygous (HT) and KO mice were trained to lever press for a 30 % condensed milk solution. After implantation with a jugular catheter, mice were trained to lever press for cocaine (0.5 mg/kg/infusion) during ten daily sessions. Responding was extinguished and the mice tested for cue- and cocaine-primed reinstatement. Separate groups of mice were trained to respond for decreasing doses of cocaine (0.25, 0.125, 0.06 and 0.03 mg/kg). Results: No differences were found in acquisition of lever pressing for milk. All genotypes acquired self-administration of cocaine and did not differ in rates of self-administration, dose dependency or reinstatement. However, whilst WT and HT mice showed a dose-dependent increase in lever pressing during the cue presentation, KO mice did not. Conclusions: Despite a reported absence of sensitisation, motivation to obtain cocaine remains unchanged in KO and HT mice. Reinstatement of cocaine seeking by cocaine and cocaine-paired cues is also unaffected. We postulate that whilst not directly involved in reward perception, the 2-subunit may be involved in modulating the "energising" aspect of cocaine's effects on reward-seeking. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: This article is published with open access at Springerlink.com; HOLDER: The Author(s); YEAR: 2014

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

**Subject Headings:** [\\*Cocaine](#)  
[\\*Drug Self Administration](#)  
[\\*Gamma Aminobutyric Acid](#)  
[\\*Reinforcement](#)

[\\*Drug Seeking](#)  
[Addiction](#)  
[Drug Administration Methods](#)  
[Mice](#)  
[Motivation](#)  
[Reinstatement](#)

**Source:** PsycINFO

**100. Atomoxetine reduces anticipatory responding in a 5-choice serial reaction time task for adult zebrafish.**

**Citation:** Psychopharmacology, July 2014, vol./is. 231/13(2671-2679), 0033-3158;1432-2072 (Jul 2014)

**Author(s):** Parker, Matthew O; Brock, Alistair J; Sudwats, Ari; Brennan, Caroline H

**Correspondence Address:** Brennan, Caroline H.: Zebrafish Neurobiology and Behavioural Genetics Research Group, School of Biological and Chemical Sciences, QueenMaryUniversity of London, London, United Kingdom, E1 4NS, c.h.brennan@qmul.ac.uk

**Institution:** Zebrafish Neurobiology and Behavioural Genetics Research Group, School of Biological and Chemical Sciences, QueenMaryUniversity of London, London, United Kingdom; Zebrafish Neurobiology and Behavioural Genetics Research Group, School of Biological and Chemical Sciences, QueenMaryUniversity of London, London, United Kingdom; Zebrafish Neurobiology and Behavioural Genetics Research Group, School of Biological and Chemical Sciences, QueenMaryUniversity of London, London, United Kingdom; Zebrafish Neurobiology and Behavioural Genetics Research Group, School of Biological and Chemical Sciences, QueenMaryUniversity of London, London, United Kingdom

**Language:** English

**Abstract:** Deficits in impulse control are related to a number of psychiatric diagnoses, including attention deficit hyperactivity disorder, addiction, and pathological gambling. Despite increases in our knowledge about the underlying neurochemical and neuroanatomical correlates, understanding of the molecular and cellular mechanisms is less well established. Understanding these mechanisms is essential in order to move towards individualized treatment programs and increase efficacy of interventions. Zebrafish are a very useful vertebrate model for exploring molecular processes underlying disease owing to their small size and genetic tractability. Their utility in terms of behavioral neuroscience, however, hinges on the validation and publication of reliable assays with adequate translational relevance. Here, we report an initial pharmacological validation of a fully automated zebrafish version of the commonly used five-choice serial reaction time task using a variable interval pre-stimulus interval. We found that atomoxetine reduced anticipatory responses (0.6 mg/kg), whereas a high-dose (4 mg/kg) methylphenidate increased anticipatory responses and the number of trials completed in a session. On the basis of these results, we argue that similar neurochemical processes in fish as in mammals may control impulsivity, as operationally defined by anticipatory responses on a continuous performance task such as this, making zebrafish potentially a good model for exploring the molecular basis of impulse control disorders and for first-round drug screening. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Impulsiveness](#)  
[\\*Reaction Time](#)  
[\\*Serial Anticipation \(Learning\)](#)  
[\\*Atomoxetine](#)  
[Addiction](#)  
[Animal Models](#)  
[Methylphenidate](#)  
[Response Parameters](#)  
[Variable Interval Reinforcement](#)  
[Behavioral Neuroscience](#)

**Source:** PsycINFO

**101. Dose-dependent effectiveness of wheel running to attenuate cocaine-seeking: Impact of sex and estrous cycle in rats.**

**Citation:** Psychopharmacology, July 2014, vol./is. 231/13(2661-2670), 0033-3158;1432-2072 (Jul 2014)

**Author(s):** Peterson, Alexis B; Hivick, Daniel P; Lynch, Wendy J

**Correspondence Address:** Lynch, Wendy J.: Department of Psychiatry and Neurobehavioral Sciences, University of Virginia, 1670 Discovery Drive, Charlottesville, VA, US, 22911, wlynch@virginia.edu

**Institution:** Department of Psychiatry and Neurobehavioral Sciences, University of Virginia, Charlottesville, VA, US; Department of Psychiatry and Neurobehavioral Sciences, University of Virginia, Charlottesville, VA, US; Department of Psychiatry and Neurobehavioral Sciences, University of Virginia, Charlottesville, VA, US

**Language:** English

**Abstract:** Rationale: Exercise has shown promise as an intervention for drug addiction; however, little is known regarding the exercise conditions that most effectively reduce relapse vulnerability and whether these conditions differ by sex. Objective: Here, we examined sex differences in the dose-dependent effects of wheel running, an animal model of exercise, during abstinence on subsequent cocaine-seeking. Methods: Male and female rats self-administered cocaine (1.5 mg/kg/infusion) under extended access conditions (24 h/day, 4 discrete trials/h) for 10 days. Rats were then given voluntary access to either an unlocked or locked running wheel for 1, 2, 6, or 24 h/day during the 14-day abstinence period. Separate groups of rats were housed in polycarbonate cages during abstinence to control for physical activity that the wheel may provide. Subsequent cocaine-seeking was assessed under a within-session extinction/cue-induced reinstatement procedure. Estrous cycle was monitored in females to determine whether the effectiveness of wheel running varied by estrous cycle phase. Results: Although females ran more than males, males were more sensitive to the effects of running and showed a dose-dependent decrease in cocaine-seeking with longer access resulting in greater suppression. The dose-effect relationship was less straightforward in females and access to both a locked and unlocked wheel decreased cocaine-seeking with effects dependent on estrous cycle phase. Notably, extended (6 and 24 h/day), but not limited (1 and 2 h/day) access to a wheel surmounted the heightened vulnerability observed in females during estrus. Conclusion: Taken together, our findings suggest that the effectiveness of wheel running is dose-, sex-, and estrous cycle-dependent. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Animal Sex Differences](#)  
[\\*Cocaine](#)  
[\\*Drug Self Administration](#)  
[\\*Exercise](#)  
[\\*Drug Seeking](#)  
[Animal Models](#)  
[Drug Addiction](#)  
[Rats](#)  
[Running](#)

**Source:** PsycINFO

**102. Delay discounting of oral morphine and sweetened juice rewards in dependent and non-dependent rats.**

**Citation:** Psychopharmacology, July 2014, vol./is. 231/13(2633-2645), 0033-3158;1432-2072 (Jul 2014)

**Author(s):** Harvey-Lewis, Colin; Perdrizet, Johnna; Franklin, Keith B. J

**Correspondence Address:** Franklin, Keith B. J.: Department of Psychology, McGill University, Montreal, PQ, Canada, H3A1B1, keith.franklin@mcgill.ca

**Institution:** Department of Psychology, McGill University, Montreal, PQ, Canada; Department of Psychology, McGill University, Montreal, PQ, Canada; Department of Psychology, McGill University, Montreal, PQ, Canada

**Language:** English

**Abstract:** Rationale: Opioid-dependent humans are reported to show accelerated delay discounting of opioid rewards when compared to monetary rewards. It has been suggested that this may reflect a difference in discounting of consumable and non-consumable goods not specific to dependent individuals. Here, we evaluate the discounting of similar morphine and non-morphine oral rewards in dependent and non-dependent rats Methods: We first tested the analgesic and rewarding effects of our morphine solution. In a second experiment, we assigned rats randomly to either dependent or non-dependent groups that, 30 min after daily testing, received 30 mg/kg subcutaneous dose of morphine, or saline, respectively. Delay discounting of drug-free reward was examined prior to initiation of the dosing regimen. We tested discounting of the morphine reward in half the rats and retested the discounting of the drug-free reward in the other half. All tests were run 22.5 h after the daily maintenance dose. Results: Rats preferred the morphine cocktail to the drug-free solution and consumed enough to induce significant analgesia. The control quinine solution did not produce these effects. Dependent rats discounted morphine rewards more rapidly than before dependence and when compared to discounting drug-free rewards. In non-dependent rats both reward types were discounted similarly. Conclusions: These results show that morphine dependence increases impulsiveness specifically towards a drug reward while morphine experience without dependence does not. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Analgesia](#)  
[\\*Drug Dependency](#)  
[\\*Morphine](#)  
[\\*Rewards](#)  
[\\*Delay Discounting](#)  
[Addiction](#)  
[Drug Abuse](#)  
[Memory](#)  
[Motivation](#)  
[Rats](#)  
[Tolerance](#)

**Source:** PsycINFO

### 103. Prospective memory impairment in long-term opiate users.

**Citation:** Psychopharmacology, July 2014, vol./is. 231/13(2623-2632), 0033-3158;1432-2072 (Jul 2014)

**Author(s):** Terrett, Gill; McLennan, Skye N; Henry, Julie D; Biernacki, Kathryn; Mercuri, Kimberly; Curran, H. Valerie; Rendell, Peter G

**Correspondence Address:** Terrett, Gill: School of Psychology, Australian Catholic University, Melbourne Campus, Locked Bag 4115, Fitzroy, MDC, Melbourne, VIC, Australia, 3065, gill.terrett@acu.edu.au

**Institution:** School of Psychology, Australian Catholic University, Melbourne, VIC, Australia; School of Psychology, Australian Catholic University, Melbourne, VIC, Australia; School of Psychology, University of Queensland, Brisbane, QLD, Australia; School of Psychology, Australian Catholic University, Melbourne, VIC, Australia; School of Psychology, Australian Catholic University, Melbourne, VIC, Australia; Clinical Psychopharmacology Unit, University College London, London, United Kingdom; School of Psychology, Australian Catholic University, Melbourne, VIC, Australia

**Language:** English

**Abstract:** Rationale: Opiate use is associated with a range of neurological and cognitive deficits. However, to date, no studies have assessed whether these cognitive deficits extend to the ability to perform intended actions in the future (i.e. prospective memory). Reduced ability in this area might be anticipated due to impaired executive functions and episodic memory associated with long-term opiate use. Objectives: The main objectives of this study are to assess the performance of long-term opiate users on a laboratory measure of prospective memory which closely simulates the types of prospective memory tasks encountered in everyday life ('Virtual Week') and to investigate the extent to which prospective memory performance is related to executive functions and episodic memory ability. Methods: Twenty-six long-term heroin users enrolled in an opiate substitution program, and 30 controls with no previous history of drug use were tested on Virtual Week. Retrospective memory and executive functions were also assessed. Results: Long-term opiate users were significantly impaired on prospective memory performance compared with controls ( $p = 0.002$ ,  $2p = 0.17$ ), and these deficits did not vary as a function of prospective memory task type (regular, irregular, event, time). The findings also suggest that retrospective memory difficulties contribute to the prospective memory difficulties seen in opiate users ( $r_s = 0.78$ ,  $p < 0.001$ ) but that executive dysfunction is less influential. Conclusions: Prospective memory is sensitive to long-term opiate use. Importantly, opiate users suffer from generalised deficits in prospective memory, regardless of the task demands, which may have significant implications for day-to-day functioning. These results may therefore contribute to the development of clinical intervention strategies to reduce the negative impact of prospective memory failures in daily life. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Cognitive Impairment](#)  
[\\*Heroin](#)  
[\\*Executive Function](#)  
[\\*Prospective Memory](#)  
[\\*Retrospective Memory](#)  
[Cognitive Ability](#)  
[Episodic Memory](#)  
[Heroin Addiction](#)  
[Opiates](#)

**Source:** PsycINFO

#### 104. Alterations to global but not local motion processing in long-term ecstasy (MDMA) users.

**Citation:** Psychopharmacology, July 2014, vol./is. 231/13(2611-2622), 0033-3158;1432-2072 (Jul 2014)

**Author(s):** White, Claire; Brown, John; Edwards, Mark

**Correspondence Address:** White, Claire: Research School of Psychology, Australian National University, Building 39, Canberra, ACT, Australia, 0200, Claire.white@anu.edu.au

**Institution:** Research School of Psychology, Australian National University, Canberra, ACT, Australia; Research School of Psychology, Australian National University, Canberra, ACT, Australia; Research School of Psychology, Australian National University, Canberra, ACT, Australia

**Language:** English

**Abstract:** Rationale: Growing evidence indicates that the main psychoactive ingredient in the illegal drug "ecstasy" (methylenedioxymethamphetamine) causes reduced activity in the serotonin and gamma-aminobutyric acid (GABA) systems in humans. On the basis of substantial serotonin input to the occipital lobe, recent research investigated visual processing in long-term users and found a larger magnitude of the tilt aftereffect, interpreted to reflect broadened orientation tuning bandwidths. Further research found higher orientation

discrimination thresholds and reduced long-range interactions in the primary visual area of ecstasy users. Objectives: The aim of the present research was to investigate whether serotonin-mediated V1 visual processing deficits in ecstasy users extend to motion processing mechanisms. Method: Forty-five participants (21 controls, 24 drug users) completed two psychophysical studies: A direction discrimination study directly measured local motion processing in V1, while a motion coherence task tested global motion processing in area V5/MT. Results: "Primary" ecstasy users (n = 18), those without substantial polydrug use, had significantly lower global motion thresholds than controls [ $p = 0.027$ , Cohen's  $d = 0.78$  (large)], indicating increased sensitivity to global motion stimuli, but no difference in local motion processing ( $p = 0.365$ ). Conclusion: These results extend on previous research investigating the long-term effects of illicit drugs on visual processing. Two possible explanations are explored: defuse attentional processes may be facilitating spatial pooling of motion signals in users. Alternatively, it may be that a GABA-mediated disruption to V5/MT processing is reducing spatial suppression and therefore improving global motion perception in ecstasy users. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Methylenedioxymethamphetamine](#)  
[\\*Motion Perception](#)  
[\\*Serotonin](#)  
[\\*Visual Perception](#)  
[Gamma Aminobutyric Acid](#)  
[Occipital Lobe](#)

**Source:** PsycINFO

**105. Serotonin transporter gene promoter polymorphism (5-HTTLPR) and alcohol use in general population: Interaction effect with birth cohort.**

**Citation:** Psychopharmacology, July 2014, vol./is. 231/13(2587-2594), 0033-3158;1432-2072 (Jul 2014)

**Author(s):** Vaht, Mariliis; Merenakk, Liis; Maestu, Jarek; Veidebaum, Toomas; Harro, Jaanus

**Correspondence Address:** Harro, Jaanus: Department of Psychology, Estonian Centre of Behavioural and Health Sciences, University of Tartu, Tartu, Estonia, jaanus.harro@ut.ee

**Institution:** Department of Psychology, Estonian Centre of Behavioural and Health Sciences, University of Tartu, Tartu, Estonia; Department of Public Health, Estonian Centre of Behavioural and Health Sciences, University of Tartu, Tartu, Estonia; Department of Sport Pedagogy and Coaching Science, Estonian Centre of Behavioural and Health Sciences, University of Tartu, Tartu, Estonia; National Institute for Health Development, Estonian Centre of Behavioural and Health Sciences, Tallinn, Estonia; Department of Psychology, Estonian Centre of Behavioural and Health Sciences, University of Tartu, Tartu, Estonia

**Language:** English

**Abstract:** Rationale and objective: Prevalence of alcohol use is markedly influenced by socioeconomic conditions and is therefore subject to cohort effects. The common genetic variation 5-HTTLPR (serotonin transporter gene-linked polymorphic region) has been related to several aspects of alcohol use and addiction but with mixed results, probably due to different environmental interaction effects. We aimed at assessing whether the association between alcohol use and 5-HTTLPR genotype is subject to cohort effects as birth cohorts may be raised in significantly different environments. Methods: We used the database of the Estonian Children Personality Behaviour and Health Study (beginning in 1998). Cohorts of initially 9-year-old (recalled at ages 15 and 18) and 15-year-old (recalled at ages 18 and 25) children provided self-reports on their alcohol use in all data collection waves (complete data available  $n = 1,075$ ). Results: A significant genotypexgenderxcohort interaction effect on the age of consuming the first alcoholic drink was found [ $F(2, 1,063) = 7.2, p < 0.001$ ]. Females with the s/s genotype in the older

cohort were the latest experimenters with alcohol, while the s/s females of younger cohort had tried alcohol earlier than any other group. In males, there was no significant cohortxgenotype interaction, but the 5-HTTLPR genotype was associated with alcohol use, the s/s subjects reporting the highest consumption. Conclusion: Expression of genetic vulnerability to alcohol use is influenced by birth cohort effects. The 5-HTTLPR genotype is associated with alcohol consumption in general population, but the effect depends on gender and birth cohort. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Alcohol Drinking Patterns](#)  
[\\*Cohort Analysis](#)  
[\\*Genes](#)  
[\\*Genotypes](#)  
[\\*Serotonin](#)  
[Genetics](#)  
[Human Sex Differences](#)  
[Polymorphism](#)

**Source:** PsycINFO

**106. The multiple truths about crystal meth among young people entrenched in an urban drug scene: A longitudinal ethnographic investigation.**

**Citation:** Social Science & Medicine, June 2014, vol./is. 110/(41-48), 0277-9536;1873-5347 (Jun 2014)

**Author(s):** Fast, Danya; Kerr, Thomas; Wood, Evan; Small, Will

**Correspondence Address:** Fast, Danya: British Columbia Centre for Excellence in HIV/AIDS, St. Paul's Hospital, 608-1081 Burrard Street, Vancouver, BC, Canada, V6Z 1Y6, danya.fast@gmail.com

**Institution:** British Columbia Centre for Excellence in HIV/AIDS, St. Paul's Hospital, Vancouver, BC, Canada; British Columbia Centre for Excellence in HIV/AIDS, St. Paul's Hospital, Vancouver, BC, Canada; British Columbia Centre for Excellence in HIV/AIDS, St. Paul's Hospital, Vancouver, BC, Canada; British Columbia Centre for Excellence in HIV/AIDS, St. Paul's Hospital, Vancouver, BC, Canada

**Language:** English

**Abstract:** Transitions into more harmful forms of illicit drug use among youth have been identified as important foci for research and intervention. In settings around the world, the transition to crystal methamphetamine (meth) use among youth is considered a particularly dangerous and growing problem. Epidemiological evidence suggests that, particularly among young, street-involved populations, meth use is associated with numerous sex- and drug-related "risks behaviors" and negative health outcomes. Relatively few studies, however, have documented how youth themselves understand, experience and script meth use over time. From 2008 to 2012, we conducted over 100 in-depth interviews with 75 street-entrenched youth in Vancouver, Canada, as well as ongoing ethnographic fieldwork, in order to examine youth's understandings and experiences of meth use in the context of an urban drug scene. Our findings revealed positive understandings and experiences of meth in relation to other forms of drug addiction and unaddressed mental health issues. Youth were simultaneously aware of the numerous health-related harms and social costs associated with heavy meth use. Over time, positive understandings of meth may become entirely contradictory to a lived reality in which escalating meth use is a factor in further marginalizing youth, although this may not lead to cessation of use. Recognition of these multiple truths about meth, and the social structural contexts that shape the scripting of meth use among youth in particular settings, may help us to move beyond moralizing debates about how to best educate youth on the "risks" associated with meth, and towards interventions that are congruent with youth's lived experiences and needs across the lifecourse. (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 Usage](#)  
[\\*Drug Usage Attitudes](#)  
[\\*Ethnography](#)  
[\\*Methamphetamine](#)  
[Drug Abuse](#)  
[Health Attitudes](#)  
[Health Care Psychology](#)  
[Intervention](#)

**Source:** PsycINFO

#### 107. ASTN1 and alcohol dependence: Family-based association analysis in multiplex alcohol dependence families.

**Citation:** American Journal of Medical Genetics Part B: Neuropsychiatric Genetics, June 2012, vol./is. 159B/4(445-455), 1552-4841;1552-485X (Jun 2012)

**Author(s):** Hill, Shirley Y; Weeks, Daniel E; Jones, Bobby L; Zezza, Nicholas; Stiffler, Scott

**Correspondence Address:** Hill, Shirley Y.: Department of Psychiatry, University of Pittsburgh Medical Center, 3811 O' Hara St., Pittsburgh, PA, US, 15213, syh50@imap.pitt.edu

**Institution:** Department of Psychiatry, University of Pittsburgh School of Medicine, Pittsburgh, PA, US; Department of Human Genetics, Graduate School of Public Health, University of Pittsburgh, Pittsburgh, PA, US; Department of Psychiatry, University of Pittsburgh School of Medicine, Pittsburgh, PA, US; Department of Psychiatry, University of Pittsburgh School of Medicine, Pittsburgh, PA, US; Department of Psychiatry, University of Pittsburgh School of Medicine, Pittsburgh, PA, US

**Language:** English

**Abstract:** A previous genome-wide linkage study of alcohol dependence (AD) in multiplex families found a suggestive linkage result for a region on Chromosome 1 near microsatellite markers D1S196 and D1S2878. The ASTN1 gene is in this region, a gene previously reported to be associated with substance abuse, bipolar disorder and schizophrenia. Using the same family data consisting of 330 individuals with phenotypic data and DNA, finer mapping of a 26 cM region centered on D1S196 was undertaken using SNPs with minor allele frequency (MAF) > 0.15 and pair-wise linkage disequilibrium (LD) of  $r^2 < 0.8$  using the HapMap CEU population. Significant FBAT P-values for SNPs within the ASTN1 gene were observed for four SNPs (rs465066, rs228008, rs6668092, and rs172917), the most significant, rs228008, within intron 8 had a P-value of 0.001. Using MQSL, which allows for inclusion of all families, we find three of these SNPs with MQSL P-values < 0.003. In addition, two additional neighboring SNPs (rs10798496 and rs6667588) showed significance at  $P = 0.002$  and  $0.03$ , respectively. Haplotype analysis was performed using the haplotype-based test function of FBAT for a block that included rs228008, rs6668092, and rs172917. This analysis found one block (GCG) over-transmitted and another (ATA) under-transmitted to affected offspring. Linkage analysis identified a region consistent with the association results. Family-based association analysis shows the ASTN1 gene significantly associated with alcohol dependence. The potential importance of the ASTN1 gene for AD risk may be related its role in glial-guided neuronal migration. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Wiley Periodicals, Inc.; YEAR: 2012

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*DNA](#)  
[\\*Family](#)  
[\\*Genes](#)  
[\\*Phenotypes](#)

**Source:** PsycINFO

**108. Genome-wide search for replicable risk gene regions in alcohol and nicotine co-dependence.**

- Citation:** American Journal of Medical Genetics Part B: Neuropsychiatric Genetics, June 2012, vol./is. 159B/4(437-444), 1552-4841;1552-485X (Jun 2012)
- Author(s):** Zuo, Lingjun; Zhang, Fengyu; Zhang, Heping; Zhang, Xiang-Yang; Wang, Fei; Li, Chiang-Shan R; Lu, Lingeng; Hong, Jiang; Lu, Lin; Krystal, John; Deng, Hong-Wen; Luo, Xingguang
- Correspondence Address:** Zuo, Lingjun: Department of Psychiatry, Yale University School of Medicine, New Haven, CT, US, 06520, lingjun.zuo@yale.edu
- Institution:** Department of Psychiatry, Yale University School of Medicine, New Haven, CT, US; Gene, Cognition and Psychosis Program, National Institute of Mental Health, National Institutes of Health, Bethesda, MD, US; Department of Epidemiology and Public Health, Yale University School of Medicine, New Haven, CT, US; Menninger Department of Psychiatry and Behavioral Sciences, Baylor College of Medicine, Houston, TX, 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 Epidemiology and Public Health, Yale University School of Medicine, New Haven, CT, US; Department of Internal Medicine, First People's Hospital, Shanghai Jiaotong University, Shanghai, China; National Institute on Drug Dependence, Beijing, China; Department of Psychiatry, Yale University School of Medicine, New Haven, CT, US; Department of Biostatistics, School of Public Health and Tropical Medicine, Tulane University, New Orleans, LA, US; Department of Psychiatry, Yale University School of Medicine, New Haven, CT, US
- Language:** English
- Abstract:** The present study searched for replicable risk genomic regions for alcohol and nicotine co-dependence using a genome-wide association strategy. The data contained a total of 3,143 subjects including 818 European-American (EA) cases with alcohol and nicotine co-dependence, 1,396 EA controls, 449 African-American (AA) cases, and 480 AA controls. We performed separate genome-wide association analyses in EAs and AAs and a meta-analysis to derive combined P-values, and calculated the genome-wide false discovery rate (FDR) for each SNP. Regions with  $P < 5 \times 10^{-7}$  together with  $FDR < 0.05$  in the meta-analysis were examined to detect all replicable risk SNPs across EAs, AAs, and meta-analysis. These SNPs were followed with a series of functional expression quantitative trait locus (eQTL) analyses. We found a unique genome-wide significant gene region-SH3BP5-NR2C2-that was enriched with 11 replicable risk SNPs for alcohol and nicotine co-dependence. The distributions of  $-\log(P)$  values for all SNP-disease associations within this region were consistent across EAs, AAs, and meta-analysis ( $0.315 < r < 0.868$ ;  $8.1 \times 10^{-52} < P < 3.6 \times 10^{-5}$ ). In the meta-analysis, this region was the only association peak throughout chromosome 3 at  $P < 0.0001$ . All replicable risk markers available for eQTL analysis had nominal cis- and trans-acting regulatory effects on gene expression. The transcript expression of the genes in this region was regulated partly by several nicotine dependence (ND)-related genes and significantly correlated with transcript expression of many alcohol dependence- and ND-related genes. We concluded that the SH3BP5-NR2C2 region on Chromosome 3 might harbor causal loci for alcohol and nicotine co-dependence. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: Wiley Periodicals, Inc.; YEAR: 2012
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Alcoholism](#)  
[\\*Gene Expression](#)  
[\\*Genome](#)  
[\\*Nicotine](#)  
[\\*Risk Factors](#)
- Source:** PsycINFO

**109. Cannabis and traffic collision risk: Findings from a case-crossover study of injured drivers presenting to emergency departments.**

- Citation:** International Journal of Public Health, April 2014, vol./is. 59/2(395-404), 1661-8556;1661-8564 (Apr 2014)
- Author(s):** Asbridge, Mark; Mann, Robert; Cusimano, Michael D; Trayling, Cynthia; Roerecke, Michael; Tallon, John M; Whipp, Alyce; Rehm, Jurgen
- Correspondence Address:** Asbridge, Mark: Department of Community Health and Epidemiology, Centre for Clinical Research, Dalhousie University, 4th Floor, 5790 University Avenue, Halifax, NS, Canada, B3H 1V7, mark.asbridge@dal.ca
- Institution:** Department of Community Health and Epidemiology, Centre for Clinical Research, Dalhousie University, Halifax, NS, Canada; Department of Social and Epidemiological Research, Centre for Addiction and Mental Health, Toronto, ON, Canada; St. Michaels Hospital, Toronto, ON, Canada; Department of Social and Epidemiological Research, Centre for Addiction and Mental Health, Toronto, ON, Canada; Department of Social and Epidemiological Research, Centre for Addiction and Mental Health, Toronto, ON, Canada; Department of Community Health and Epidemiology, Centre for Clinical Research, Dalhousie University, Halifax, NS, Canada; Department of Community Health and Epidemiology, Centre for Clinical Research, Dalhousie University, Halifax, NS, Canada; Department of Social and Epidemiological Research, Centre for Addiction and Mental Health, Toronto, ON, Canada
- Language:** English
- Abstract:** Objectives: This study examined whether acute cannabis use leads to an increased collision risk. Methods: Participants were 860 drivers presenting to emergency departments in Toronto and Halifax, Canada, with an injury from a traffic collision, between April 2009 and July 2011. Cannabis and other drug use were identified either through blood sample or self-report. A case-cross-over design was employed with two control conditions: a fixed condition measuring substance use during last time driving, and whether the driver typically uses cannabis prior to driving. Collision risk was assessed through conditional fixed-effects logistic regression models. Results: Results revealed that 98 (11 %; 95 % CI: 9.0-13.1) drivers reported using cannabis prior to the collision. Regression results measuring exposure with blood and self-report data indicated that cannabis use alone was associated with a fourfold increased (OR 4.11; 95 % CI: 1.98-8.52) odds of a collision; a regression relying on self-report measures only found no significant association. Conclusions: Main findings confirmed that cannabis use increases collision risk and reinforces existing policy and educational efforts, in many high-income countries, aimed at reducing driving under the influence of cannabis. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: Swiss School of Public Health; YEAR: 2013
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Cannabis](#)  
[\\*Drivers](#)  
[\\*Drug Abuse](#)  
[\\*Motor Traffic Accidents](#)  
[\\*Pharmacokinetics](#)  
[Self Report](#)
- Source:** PsycINFO
- Full Text:** Available from *Springer NHS Pilot 2014 (NESLi2)* in [International Journal of Public Health](#); Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

**110. Moving toward integrated behavioral intervention for treating multimorbidity among chronic pain, depression, and substance-use disorders in primary care.**

- Citation:** Medical Care, April 2014, vol./is. 52/4(322-327), 0025-7079;1537-1948 (Apr 2014)

**Author(s):** Haibach, Jeffrey P; Beehler, Gregory P; Dollar, Katherine M; Finnell, Deborah S

**Correspondence Address:** Haibach, Jeffrey P.: School of Public Health and Health Professions, University at Buffalo, State University of New York, 3435 Main Street, 312 Kimball Tower, Buffalo, NY, US, 14214-8028, [jphaibac@buffalo.edu](mailto:jphaibac@buffalo.edu)

**Institution:** School of Public Health and Health Professions, University at Buffalo, State University of New York, Buffalo, NY, US; VA Center for Integrated Healthcare, VA WNY Healthcare System, Buffalo, NY, US; Office of Mental Health Operations, VA Central Office, Johns Hopkins University, Baltimore, MD, US; School of Nursing, Johns Hopkins University, Baltimore, MD, US

**Language:** English

**Abstract:** Introduction: The importance of using integrated treatment for multimorbidity has been increasingly recognized. One prevalent cluster of health conditions is multimorbidity of chronic pain, depression, and substance-use disorders, a common triad of illnesses among primary care patients. This brief report brings attention to an emerging treatment method of an integrated behavioral approach to improve health outcomes for individuals with these 3 conditions in the outpatient setting, particularly primary care. Methods: A multidatabase search was conducted to identify studies of behavioral interventions targeting co-occurrence or multimorbidity among the 3 health conditions in the adult outpatient setting. An independent screening of the articles was accomplished by all authors with consensus on the final inclusion for review. Results: Three studies met formal inclusion criteria for this review. The included studies evaluated cognitive behavioral therapy or combined motivational interviewing with cognitive behavioral therapy. Key findings from other reviews and additional studies are also included in this review to further inform the development of a common approach for treating this triad of conditions in primary care. Conclusions: Although there has been increased recognition for more effective and practical behavioral treatments for patients with multiple chronic health conditions, the evidence-base to inform practice remains limited. The findings from this review suggest that a common approach, rather than a distinct intervention for chronic pain, depression, or substance-use disorders, is indicated and that best care can be provided within the context of a coordinated, interdisciplinary, and patient-centered primary care team. (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:** [\\*Behavioral Sciences](#)  
[\\*Intervention](#)  
[\\*Primary Health Care](#)  
[\\*Morbidity](#)  
[Chronic Pain](#)  
[Depression \(Emotion\)](#)  
[Drug Abuse](#)

**Source:** PsycINFO

**Full Text:** Available from *Ovid* in [Medical Care](#)