

Search Results

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Search History

1. MEDLINE; exp SUBSTANCE-RELATED DISORDERS/; 190082 results.
2. MEDLINE; addict*.ti,ab; 30846 results.
3. MEDLINE; 1 OR 2; 200293 results.
4. MEDLINE; exp GREAT BRITAIN/; 259597 results.
5. MEDLINE; "United Kingdom".ti,ab; 19970 results.
6. MEDLINE; "Great Britain".ti,ab; 5453 results.
7. MEDLINE; "England".ti,ab; 25898 results.
8. MEDLINE; "Scotland".ti,ab; 9718 results.
9. MEDLINE; "Wales".ti,ab; 13517 results.
10. MEDLINE; UK.ti,ab; 48994 results.
11. MEDLINE; GB.ti,ab; 5203 results.
12. MEDLINE; ireland.ti,ab; 18758 results.
13. MEDLINE; IRELAND/; 10223 results.
14. MEDLINE; "British Isles".ti,ab; 627 results.
15. MEDLINE; "Channel islands".ti,ab; 78 results.
16. MEDLINE; 4 OR 5 OR 6 OR 7 OR 8 OR 9 OR 10 OR 11 OR 12 OR 13 OR 14 OR 15; 334744 results.
17. MEDLINE; 3 AND 16; 6079 results.

1. Investigating contact allergy to CS spray.

Citation:	Contact Dermatitis, February 2012, vol./is. 66/2(109-10), 0105-1873;1600-0536 (2012 Feb)
Author(s):	Bhargava K; Banerjee P; White IR
Institution:	Department of Cutaneous Allergy, St John's Institute of Dermatology, St Thomas' Hospital, London SE1 7EH, UK. k.bhargava@nhs.net
Language:	English
Country of Publication:	Denmark
CAS Registry Number:	2698-41-1 (o-Chlorobenzylidenemalonitrile)
Publication Type:	Case Reports; Journal Article
Subject Headings:	<p>Adult</p> <p>"*Dermatitis Allergic Contact/di [Diagnosis]"</p> <p>"Dermatitis Allergic Contact/et [Etiology]"</p> <p>"*Dermatitis Occupational/di [Diagnosis]"</p> <p>"Dermatitis Occupational/et [Etiology]"</p> <p>"*Drug Eruptions/di [Diagnosis]"</p> <p>"Drug Eruptions/et [Etiology]"</p> <p>Great Britain</p> <p>Humans</p> <p>Legislation Drug</p> <p>Male</p> <p>"*Occupational Exposure/ae [Adverse Effects]"</p> <p>"Occupational Exposure/sn [Statistics and Numerical Data]"</p> <p>Patch Tests</p> <p>*Police</p> <p>"*o-Chlorobenzylidenemalonitrile/to [Toxicity]"</p>
Source:	MEDLINE
Full Text:	Available in <i>fulltext</i> at Wiley

2. Mortality of those who attended drug services in Scotland 1996-2006: record-linkage study.

Citation:	International Journal of Drug Policy, January 2012, vol./is. 23/1(24-32), 0955-3959;1873-4758 (2012 Jan)
Author(s):	Merrall EL; Bird SM; Hutchinson SJ
Institution:	MRC Biostatistics Unit, Robinson Way, Cambridge CB2 0SR, United Kingdom. Elizabeth.merrall@mrc-bsu.cam.ac.uk
Language:	English
Abstract:	<p>BACKGROUND: We examine major causes of death amongst persons in contact with drug-treatment services across Scotland during April 1996-March 2006, hereafter Scottish Drug Misuse Database (SDMD) cohort. METHODS: Drug-treatment records were linked to national registers of deaths and hepatitis C virus (HCV) diagnoses. For eras 1996/97-2000/01 and 2001/02-2005/06, we calculated cause-specific death-rates and standardised mortality ratios (SMRs) using age-, sex- and calendar-rates of the general Scottish population. Major causes of death were identified by high SMRs (>5 across eras) or rates (>50 per 100,000 person-years in either era), and their time-specific influences characterised by proportional hazards analyses. RESULTS: The SDMD cohort comprised 69,456 individuals, 350,315 person-years and 2590 deaths. The overall SMR reduced from 6.4 (95% CI: 6.0-6.9) to 4.8 (95% CI: 4.6-5.0) between eras. We identified five major causes of death: drug-related (1383 deaths), homicide (118) and infectious diseases (90) with high SMRs; suicide (269) and digestive system disease (168) with high rates. HCV diagnosis marked individuals with at least double the risk of cause-specific mortality, including adjusted hazard ratio (HR) for no HCV diagnosis of 0.46 (95% CI: 0.41-0.53) for drug-related deaths (DRDs) and 0.15 (95% CI: 0.10-0.22) for death from</p>

digestive system disease. Increased DRD risk at older age (>34 years) appeared specific to HCV-diagnosed individuals (interaction: $\chi^2=7.7$, $p=0.01$). Alcohol misuse increased HRs: for DRD (1.76, 95% CI: 1.50-2.06), suicide (1.88, 95% CI: 1.35-2.60), deaths from digestive system disease (3.19, 95% CI: 2.21-4.60) and non-major causes (1.87, 95% CI: 1.49-2.35). Stimulant misuse increased suicide risk: adjusted HR 1.91 (95% CI: 1.43-2.54). CONCLUSIONS: Drug-users in Scotland are exposed to variously increased mortality risks. HCV-diagnosed individuals are particularly vulnerable, and may need additional support. Copyright Copyright 2011 Elsevier B.V. All rights reserved.

Country of Publication: Netherlands

CAS Registry Number: 0 (Central Nervous System Stimulants); 0 (Street Drugs)

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Age Factors](#)
["Alcoholism/co \[Complications\]"](#)
["Alcoholism/mo \[Mortality\]"](#)
[*Cause of Death](#)
["Central Nervous System Stimulants/to \[Toxicity\]"](#)
[Cohort Studies](#)
["Digestive System Diseases/co \[Complications\]"](#)
["Digestive System Diseases/mo \[Mortality\]"](#)
[Female](#)
[Follow-Up Studies](#)
["Hepatitis C/co \[Complications\]"](#)
["Hepatitis C/mo \[Mortality\]"](#)
[Humans](#)
[Male](#)
[Medical Record Linkage](#)
[Mortality](#)
["Overdose/mo \[Mortality\]"](#)
[Proportional Hazards Models](#)
[Registries](#)
["Scotland/ep \[Epidemiology\]"](#)
["*Street Drugs/to \[Toxicity\]"](#)
[*Substance Abuse Treatment Centers](#)
["Substance-Related Disorders/co \[Complications\]"](#)
["*Substance-Related Disorders/mo \[Mortality\]"](#)
["Substance-Related Disorders/px \[Psychology\]"](#)
["*Substance-Related Disorders/th \[Therapy\]"](#)
[Suicide](#)

Source: MEDLINE

3. Susceptibility to gold nanoparticle-induced hepatotoxicity is enhanced in a mouse model of nonalcoholic steatohepatitis.

Citation: Toxicology, March 2012, vol./is. 294/1(27-35), 0300-483X;1879-3185 (2012 Mar 29)

Author(s): Hwang JH; Kim SJ; Kim YH; Noh JR; Gang GT; Chung BH; Song NW; Lee CH

Institution: Laboratory Animal Center, Korea Research Institute of Bioscience and Biotechnology, Gwahak-ro 125, Yuseong-gu, Daejeon 305-806, Republic of Korea.

Language: English

Abstract: Although the safety of gold nanoparticle (AuNP) use is of growing concern, most toxicity studies of AuNPs had focused on their chemical characteristics, including their physical dimensions, surface chemistry, and shape. The present study examined the susceptibility of rodents with healthy or damaged livers to AuNP-induced hepatotoxicity. To induce a model of liver injury, mice were fed a methionine- and choline-deficient (MCD) diet for 4 weeks. Sizes and biodistribution of 15-nm PEGylated AuNPs were analyzed by transmission electron microscopy. Levels of alanine aminotransferase (ALT) and aspartate aminotransferase (AST) were estimated with an automatic chemical analyzer, and liver sections were subjected to pathological examination. Activities of antioxidant enzymes

were determined by biochemical assay. Lateral tail vein injection of MCD diet-fed mice with 5 mg kg⁻¹ AuNPs significantly elevated the serum ALT and AST levels compared to MCD diet-fed mice injected with mPEG (methylpolyethylene glycol). Similarly, severe hepatic cell damage, acute inflammation, and increased apoptosis and reactive oxygen species (ROS) production were observed in the livers of AuNP-injected mice on the MCD diet; these liver injuries were attenuated in mice fed a normal chow diet. The results suggest that AuNPs display toxicity in a stressed liver environment by stimulating the inflammatory response and accelerating stress-induced apoptosis. These conclusions may point to the importance of considering health conditions, including liver damage, in medical applications of AuNPs. Copyright ACopyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Gold Compounds); 0 (Reactive Oxygen Species); EC 2-6-1-1 (Aspartate Aminotransferases); EC 2-6-1-2 (Alanine Transaminase)

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: ["Alanine Transaminase/bl \[Blood\]"](#)
[Animals](#)
["Apoptosis/de \[Drug Effects\]"](#)
["Aspartate Aminotransferases/bl \[Blood\]"](#)
[Blotting Western](#)
[Disease Models Animal](#)
[Disease Susceptibility](#)
["*Drug-Induced Liver Injury/et \[Etiology\]"](#)
["Drug-Induced Liver Injury/pa \[Pathology\]"](#)
["*Fatty Liver/co \[Complications\]"](#)
["Fatty Liver/pa \[Pathology\]"](#)
["*Gold Compounds/to \[Toxicity\]"](#)
["Lipid Peroxidation/de \[Drug Effects\]"](#)
["Liver/ch \[Chemistry\]"](#)
["Liver/de \[Drug Effects\]"](#)
["Liver/pa \[Pathology\]"](#)
[Male](#)
["*Metal Nanoparticles/to \[Toxicity\]"](#)
[Mice](#)
["Reactive Oxygen Species/an \[Analysis\]"](#)
[Reverse Transcriptase Polymerase Chain Reaction](#)

Source: MEDLINE

4. A decade of spore-forming bacterial infections among European injecting drug users: pronounced regional variation.

Citation: American Journal of Public Health, January 2012, vol./is. 102/1(122-5), 0090-0036;1541-0048 (2012 Jan)

Author(s): Hope VD; Palmateer N; Wiessing L; Marongiu A; White J; Ncube F; Goldberg D

Institution: Health Protection Services, Health Protection Agency, London, UK.
vivian.hope@hpa.org.uk

Language: English

Abstract: The recent anthrax outbreak among injecting drug users (IDUs) in Europe has highlighted an ongoing problem with severe illness resulting from spore-forming bacteria in IDUs. We collated the numbers of cases of 4 bacterial illnesses (botulism, tetanus, Clostridium novyi, and anthrax) in European IDUs for 2000 to 2009 and calculated population rates. Six countries reported 367 cases; rates varied from 0.03 to 7.54 per million people. Most cases (92%) were reported from 3 neighboring countries: Ireland, Norway, and the United Kingdom. This geographic variation needs investigation.

Country of Publication: United States

Publication Type: Journal Article

Subject Headings: "Anthrax/ep [Epidemiology]"
 "Anthrax/et [Etiology]"
 Bacillus anthracis
 "Bacterial Infections/ep [Epidemiology]"
 "*Bacterial Infections/et [Etiology]"
 "Botulism/ep [Epidemiology]"
 "Botulism/et [Etiology]"
 Clostridium
 "Clostridium Infections/ep [Epidemiology]"
 "Clostridium Infections/et [Etiology]"
 Clostridium botulinum
 Clostridium tetani
 "*Drug Users/sn [Statistics and Numerical Data]"
 "Europe/ep [Epidemiology]"
 "Great Britain/ep [Epidemiology]"
 Humans
 "Ireland/ep [Epidemiology]"
 "Norway/ep [Epidemiology]"
 "*Substance Abuse Intravenous/co [Complications]"
 "Substance Abuse Intravenous/ep [Epidemiology]"
 "Tetanus/ep [Epidemiology]"
 "Tetanus/et [Etiology]"

Source: MEDLINE

Full Text: Available in *fulltext* at [EBSCOhost](#)
 Available in *fulltext* at [EBSCOhost](#)
 Available in *fulltext* at [ProQuest](#)

5. Medical marijuana laws in 50 states: investigating the relationship between state legalization of medical marijuana and marijuana use, abuse and dependence.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(22-7), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Cerda M; Wall M; Keyes KM; Galea S; Hasin D

Institution: Department of Epidemiology, Mailman School of Public Health, Columbia University, 722 W168th St., New York, NY 10032-3727, United States. mc3226@columbia.edu

Language: English

Abstract: BACKGROUND: Marijuana is the most frequently used illicit substance in the United States. Little is known of the role that macro-level factors, including community norms and laws related to substance use, play in determining marijuana use, abuse and dependence. We tested the relationship between state-level legalization of medical marijuana and marijuana use, abuse, and dependence. METHODS: We used the second wave of the National Epidemiologic Survey on Alcohol and Related Conditions (NESARC), a national survey of adults aged 18+ (n=34,653). Selected analyses were replicated using the National Survey on Drug Use and Health (NSDUH), a yearly survey of ~68,000 individuals aged 12+. We measured past-year cannabis use and DSM-IV abuse/dependence. RESULTS: In NESARC, residents of states with medical marijuana laws had higher odds of marijuana use (OR: 1.92; 95% CI: 1.49-2.47) and marijuana abuse/dependence (OR: 1.81; 95% CI: 1.22-2.67) than residents of states without such laws. Marijuana abuse/dependence was not more prevalent among marijuana users in these states (OR: 1.03; 95% CI: 0.67-1.60), suggesting that the higher risk for marijuana abuse/dependence in these states was accounted for by higher rates of use. In NSDUH, states that legalized medical marijuana also had higher rates of marijuana use. CONCLUSIONS: States that legalized medical marijuana had higher rates of marijuana use. Future research needs to examine whether the association is causal, or is due to an underlying common cause, such as community norms supportive of the legalization of medical marijuana and of marijuana use. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Research Support, N.I.H., Extramural; Research Support, Non-U.S. Gov't

Subject Headings: [Adult](#)
[*Cannabis](#)
["*Drug and Narcotic Control/lj \[Legislation and Jurisprudence\]"](#)
[Female](#)
[Health Surveys](#)
[Humans](#)
[Male](#)
["*Marijuana Abuse/ep \[Epidemiology\]"](#)
[Middle Aged](#)
[United States](#)
[Young Adult](#)

Source: MEDLINE

6. The Obsessive Compulsive Cocaine Use Scale: development and initial validation of a self-rated instrument for the quantification of thoughts about cocaine use.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(250-4), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Hormes JM; Coffey SF; Drobos DJ; Saladin ME

Institution: Louisiana State University Health Sciences Center, School of Public Health and Comprehensive Alcohol Research Center, 2020 Gravier Street, 3rd floor, New Orleans, LA 70112, United States.

Language: English

Abstract: BACKGROUND: Craving is a hallmark of addiction and characterized by obsessive thoughts about, and compulsive urges to use, a substance. While craving is frequently thought of as primarily being a feature of acute withdrawal, there is evidence to suggest that it increases in strength over extended periods of abstinence. While several measures are available to assess acute craving states, there remains a lack of clinical measures appropriate for capturing the enduring cognitive aspects of urges to use drugs. The present study was designed to develop and validate a measure of obsessive-compulsive thoughts in cocaine-dependent individuals. METHODS: The proposed 14-item Obsessive Compulsive Cocaine Use Scale (OCCUS) was administered to 107 individuals: 55 participants meeting diagnostic criteria for cocaine dependence and 52 recreational users of cocaine. In addition to the OCCUS, participants also completed the Drug Abuse Screening Test, Cocaine Craving Questionnaire-Now, and Social Desirability Scale of the California Personality Inventory. RESULTS: Results of confirmatory factor analysis indicated that the OCCUS fit the two-factor structure of the Obsessive Compulsive Drinking Scale on which it was based, independently assessing the "obsessive" and "compulsive" aspects of cocaine dependence. The OCCUS demonstrated good internal consistency reliability and convergent, discriminant, and criterion validity. CONCLUSION: The proposed measure is a promising step towards the successful capture of the long-term cognitive features of craving for cocaine via self-report, and should represent a useful tool for clinical and research use. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Research Support, N.I.H., Extramural

Subject Headings: [Adult](#)
["Cocaine-Related Disorders/di \[Diagnosis\]"](#)
["*Cocaine-Related Disorders/px \[Psychology\]"](#)
[Cognition](#)
[Female](#)
[Humans](#)
[Male](#)
["Obsessive Behavior/di \[Diagnosis\]"](#)

"*Obsessive Behavior/px [Psychology]"
 "Questionnaires/st [Standards]"
 Reproducibility of Results

Source: MEDLINE

7. Directly observed antiretroviral therapy eliminates adverse effects of active drug use on adherence.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(174-80), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Nahvi S; Litwin AH; Heo M; Berg KM; Li X; Arnsten JH

Institution: Department of Medicine (Division of General Internal Medicine), Albert Einstein College of Medicine and Montefiore Medical Center, Bronx, NY 10467, United States.

Language: English

Abstract: BACKGROUND: The impact of adherence enhancing interventions on the relationship between active drug use and adherence is largely unknown. METHODS: We conducted a 24-week randomized controlled trial of antiretroviral directly observed therapy (DOT) vs. treatment as usual (TAU) among HIV-infected methadone patients. Our outcome measure was pill count antiretroviral adherence, and our major independent variables were treatment arm (DOT vs. TAU) and active drug use (opiates, cocaine, or both opiates and cocaine). We defined any drug use as ≥ 1 positive urine toxicology result, and frequent drug use as $\geq 50\%$ tested urines positive. We used mixed-effects linear models to evaluate associations between adherence and drug use, and included a treatment arm-by-drug use interaction term to evaluate whether DOT moderates associations between drug use and adherence. RESULTS: 39 participants were randomized to DOT and 38 to TAU. We observed significant associations between adherence and active drug use, but these were limited to TAU participants. Adherence was worse in TAU participants with any opiate use than in TAU participants without (63% vs. 75%, $p < 0.01$); and worse among those with any polysubstance (both opiate and cocaine) use than without (60% vs. 73%, $p = 0.01$). We also observed significant decreases in adherence among TAU participants with frequent opiate or frequent polysubstance use, compared to no drug use. Among DOT participants, active drug use was not associated with worse adherence. CONCLUSIONS: Active opiate or polysubstance use decreases antiretroviral adherence, but the negative impact of drug use on adherence is eliminated by antiretroviral DOT. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Anti-HIV Agents)

Publication Type: Journal Article; Randomized Controlled Trial; Research Support, N.I.H., Extramural

Subject Headings: "Anti-HIV Agents/ad [Administration and Dosage]"
 "*Anti-HIV Agents/tu [Therapeutic Use]"
 "Cocaine-Related Disorders/ep [Epidemiology]"
 *Directly Observed Therapy
 Female
 "HIV Infections/co [Complications]"
 "*HIV Infections/dt [Drug Therapy]"
 "HIV Infections/px [Psychology]"
 Humans
 Male
 "*Medication Adherence/px [Psychology]"
 Middle Aged
 "Opioid-Related Disorders/ep [Epidemiology]"
 Prevalence
 "Substance-Related Disorders/co [Complications]"
 "*Substance-Related Disorders/ep [Epidemiology]"
 "Substance-Related Disorders/pc [Prevention and Control]"

Source: MEDLINE

8. Major depression and treatment response in adolescents with ADHD and substance use disorder.

- Citation:** Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(214-9), 0376-8716;1879-0046 (2012 Jan 1)
- Author(s):** Warden D; Riggs PD; Min SJ; Mikulich-Gilbertson SK; Tamm L; Trello-Rishel K; Winhusen T
- Institution:** Department of Psychiatry, University of Texas Southwestern Medical Center at Dallas, 5323 Harry Hines Blvd., Dallas, TX 75390-9119, United States.
Diane.Warden@UTSouthwestern.edu
- Language:** English
- Abstract:** BACKGROUND: Major depressive disorder (MDD) frequently co-occurs in adolescents with substance use disorders (SUDs) and attention deficit hyperactivity disorder (ADHD), but the impact of MDD on substance treatment and ADHD outcomes and implications for clinical practice are unclear. METHODS: Adolescents (n=303; ages 13-18) meeting DSM-IV criteria for ADHD and SUD were randomized to osmotic release methylphenidate (OROS-MPH) or placebo and 16 weeks of cognitive behavioral therapy (CBT). Adolescents with (n=38) and without (n=265) MDD were compared on baseline demographic and clinical characteristics as well as non-nicotine substance use and ADHD treatment outcomes. RESULTS: Adolescents with MDD reported more non-nicotine substance use days at baseline and continued using more throughout treatment compared to those without MDD (p<0.0001 based on timeline followback; p<0.001 based on urine drug screens). There was no difference between adolescents with and without MDD in retention or CBT sessions attended. ADHD symptom severity (based on DSM-IV ADHD rating scale) followed a slightly different course of improvement although with no difference between groups in baseline or 16-week symptom severity or 16-week symptom reduction. There was no difference in days of substance use or ADHD symptom outcomes over time in adolescents with MDD or those without MDD treated with OROS-MPH or placebo. Depressed adolescents were more often female, older, and not court ordered. CONCLUSIONS: These preliminary findings suggest that compared to non-depressed adolescents with ADHD and SUD, those with co-occurring MDD have more severe substance use at baseline and throughout treatment. Such youth may require interventions targeting depression. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.
- Country of Publication:** Ireland
- CAS Registry Number:** 0 (Central Nervous System Stimulants); 113-45-1 (Methylphenidate)
- Publication Type:** Journal Article; Randomized Controlled Trial; Research Support, N.I.H., Extramural
- Subject Headings:** Adolescent
"Alcohol-Related Disorders/co [Complications]"
"*Attention Deficit Disorder with Hyperactivity/co [Complications]"
"Attention Deficit Disorder with Hyperactivity/dt [Drug Therapy]"
"Attention Deficit Disorder with Hyperactivity/th [Therapy]"
"Central Nervous System Stimulants/ad [Administration and Dosage]"
"*Central Nervous System Stimulants/tu [Therapeutic Use]"
Cognitive Therapy
Combined Modality Therapy
"*Depressive Disorder Major/co [Complications]"
Female
Humans
Male
"Methylphenidate/ad [Administration and Dosage]"
"*Methylphenidate/tu [Therapeutic Use]"
"*Substance-Related Disorders/co [Complications]"
"Tobacco Use Disorder/co [Complications]"
Treatment Outcome
- Source:** MEDLINE

9. Diversion and abuse of buprenorphine: findings from national surveys of treatment patients and physicians.

- Citation:** Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(190-5), 0376-8716;1879-0046 (2012 Jan 1)
- Author(s):** Johanson CE; Arfken CL; di Menza S; Schuster CR
- Institution:** Department of Psychiatry and Behavioral Neurosciences, Wayne State University, 2761 E. Jefferson Ave., Detroit, MI 48207, USA. cjohans@med.wayne.edu
- Language:** English
- Abstract:** BACKGROUND: Since 2003, buprenorphine has been approved for the treatment of opioid dependence in office-based practice. Diversion and abuse can be a threat to its continued approval under these conditions. METHODS: As part of a national postmarketing surveillance program, applicants to substance abuse treatment and physicians certified to prescribe buprenorphine were surveyed about their perceptions of buprenorphine/naloxone diversion and abuse. These surveys were supplemented by information from national databases. Availability of buprenorphine/naloxone was measured by number of tablets dispensed. RESULTS: Measures of diversion and abuse of buprenorphine/naloxone increased from 2005 to 2009. The results from the applicant survey showed that the perceptions of the extent of diversion and abuse were lower than positive controls, methadone, oxycodone and heroin, but higher than the negative control, amitriptyline. By 2009, 46% of the physicians believed that buprenorphine/naloxone was diverted but 44% believed illegal use was for self-management of withdrawal and 53% believed the source of the medication was substance abuse patients. Other measures from national databases showed similar results. When adjusted for millions of tablets sold per year, slopes for measures of diversion and abuse were reduced. CONCLUSIONS: The increases in diversion and abuse measures indicate the need to take active attempts to curb diversion and abuse as well as continuous monitoring and surveillance of all buprenorphine products. However, these increases parallel the increased number of tablets sold. Finding a balance of risk/benefit (i.e. diversion and abuse versus expanded treatment) remains a challenge. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.
- Country of Publication:** Ireland
- CAS Registry Number:** 0 (Narcotics); 465-65-6 (Naloxone); 52485-79-7 (Buprenorphine)
- Publication Type:** Journal Article; Research Support, Non-U.S. Gov't
- Subject Headings:** [Attitude of Health Personnel](#)
["*Buprenorphine/tu \[Therapeutic Use\]"](#)
[Female](#)
[Health Surveys](#)
[Humans](#)
[Male](#)
["Naloxone/tu \[Therapeutic Use\]"](#)
["*Narcotics/tu \[Therapeutic Use\]"](#)
["Opiate Substitution Treatment/mt \[Methods\]"](#)
["Opiate Substitution Treatment/sn \[Statistics and Numerical Data\]"](#)
["*Opioid-Related Disorders/ep \[Epidemiology\]"](#)
["Opioid-Related Disorders/et \[Etiology\]"](#)
[Physicians](#)
["United States/ep \[Epidemiology\]"](#)
- Source:** MEDLINE

10. Linking measures of adult nicotine dependence to a common latent continuum and a comparison with adolescent patterns.

- Citation:** Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(88-98), 0376-8716;1879-0046 (2012 Jan 1)
- Author(s):** Strong DR; Schonbrun YC; Schaffran C; Griesler PC; Kandel D

Institution: Brown University, Butler Hospital, Providence, RI 2906, United States. david.strong@brown.edu

Language: English

Abstract: BACKGROUND: An ongoing debate regarding the nature of nicotine dependence (ND) is whether the same instrument can be applied to measure ND among adults and adolescents. Using a hierarchical item response model (IRM), we examined evidence for a common continuum underlying ND symptoms among adults and adolescents. METHOD: The analyses are based on two waves of interviews with subsamples of parents and adolescents from a multi-ethnic longitudinal cohort of one thousand and thirty-nine 6-10th graders from the Chicago Public Schools (CPS). Adults and adolescents who reported smoking cigarettes the last 30 days prior to waves 3 and 5 completed three common instruments measuring ND symptoms and one item measuring loss of autonomy. RESULTS: A stable continuum of ND, first identified among adolescents, was replicated among adults. However, some symptoms, such as tolerance and withdrawal, differed markedly across adults and adolescents. The majority of mFTQ items were observed within the highest levels of ND, the NDSS items within the lowest levels, and the DSM-IV items were arrayed in the middle and upper third of the continuum of dependence severity. Loss of autonomy was positioned at the lower end of the continuum. We propose a ten-symptom measure of ND for adolescents and adults. CONCLUSIONS: Despite marked differences in the relative severity of specific ND symptoms in each group, common instrumentation of ND can apply to adults and adolescents. The results increase confidence in the ability to describe phenotypic heterogeneity in ND across important developmental periods. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Comparative Study; Journal Article; Research Support, N.I.H., Extramural; Research Support, Non-U.S. Gov't

Subject Headings: [Adolescent](#)
[Adult](#)
[Age Factors](#)
[Female](#)
[Humans](#)
[Interviews as Topic](#)
[Longitudinal Studies](#)
[Male](#)
[Psychiatric Status Rating Scales](#)
[Questionnaires](#)
[*Tobacco Use Disorder/di \[Diagnosis\]"](#)
["Tobacco Use Disorder/px \[Psychology\]"](#)

Source: MEDLINE

11. No influence of one right-sided prefrontal HF-rTMS session on alcohol craving in recently detoxified alcohol-dependent patients: results of a naturalistic study.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(209-13), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Herremans SC; Baeken C; Vanderbruggen N; Vanderhasselt MA; Zeeuw D; Santermans L; De Raedt R

Institution: University Hospital (UZBrussel), Psychiatric Department, University Hospital, UZBrussel Vrije Universiteit Brussel, Laarbeeklaan 101, 1090 Brussels, Belgium.

Language: English

Abstract: BACKGROUND: Prior research in substance dependence has suggested potential anti-craving effects of repetitive transcranial magnetic stimulation (rTMS) when applied to the dorsolateral prefrontal cortex (DLPFC). However, no single sham-controlled session studies applied to the right DLPFC have been carried-out in recently detoxified alcohol-dependent patients. Furthermore, no studies examined the effect of a single

HF-rTMS session on craving in these patients' natural habitat. METHODS: To further investigate the effect of high-frequency (HF)-rTMS of the right DLPFC on alcohol craving, we performed a prospective, single-blind, sham-controlled study involving 36 hospitalized patients with alcohol dependence syndrome. After successful detoxification, patients were allocated receiving one active or one sham HF-rTMS session. The obsessive-compulsive drinking scale (OCDS) was administered to evaluate the extent of craving just before and after the HF-rTMS session (on Friday), on Saturday and Sunday during the weekend at home, and on Monday when the patient returned to the hospital. RESULTS: One single blind sham-controlled HF-rTMS session applied to the right DLPFC did not result in changes in craving (neither immediately after the stimulation session, nor in patients' natural environment during the weekend). CONCLUSIONS: One HF-rTMS stimulation session applied to the right DLPFC had no significant effects on alcohol craving in alcohol dependent patients. One such session could have been too short to alter alcohol craving in a sample of alcohol dependent patients. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Clinical Trial; Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Adolescent](#)
[Adult](#)
[Aged](#)
["Alcoholism/pp \[Physiopathology\]"](#)
["Alcoholism/px \[Psychology\]"](#)
["*Alcoholism/th \[Therapy\]"](#)
["Brain/pp \[Physiopathology\]"](#)
[Female](#)
[Humans](#)
[Male](#)
[Middle Aged](#)
[Questionnaires](#)
[Single-Blind Method](#)
[Time Factors](#)
["Transcranial Magnetic Stimulation/mt \[Methods\]"](#)
[*Transcranial Magnetic Stimulation](#)
[Treatment Outcome](#)
[Young Adult](#)

Source: MEDLINE

12. Substance use after participation in laboratory studies involving smoked cocaine self-administration.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(162-7), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Kalapatapu RK; Bedi G; Haney M; Evans SM; Rubin E; Foltin RW

Institution: Substance Use Research Center, Columbia University, New York, NY 10032, United States. rkk2111@columbia.edu

Language: English

Abstract: OBJECTIVE: Laboratory studies in which drugs of abuse are self- or experimenter-administered to non-treatment-seeking research volunteers provide valuable data about new pharmacotherapies for substance use disorders, as well as behavioral and performance data for understanding the neurobiology of drug abuse. This paper analyzed follow-up data from six smoked cocaine self-administration laboratory studies, in order to determine whether changes in substance use occurred 1 and 3 months after study participation compared to pre-study baseline. METHODS: Ninety-eight healthy, non-treatment-seeking cocaine users were admitted to inpatient and combined inpatient/outpatient studies lasting from 12 to 105 days. The studies allowed participants to self-administer repeated doses of smoked cocaine (0, 6, 12, 25, and/or 50mg per dose) on multiple occasions. Participants returned for follow-up at 1 and 3 months, at which time self-reported consumption of cocaine, alcohol, marijuana, and nicotine was

assessed. RESULTS: Compared to baseline (\$374.04/week, S.D. \$350.09), cocaine use significantly decreased at 1 month (\$165.13/week, S.D. \$165.56) and 3 months (\$118.59/week, S.D. \$110.48) after study participation ($p < 0.001$; results based on the 39 participants who completed all 3 time points). This decrease was not accompanied by a change in other drug use, e.g., a compensatory increase in alcohol, marijuana or nicotine use. CONCLUSION: Study participation was not associated with increased post-study cocaine, alcohol, marijuana, or nicotine use. Thus, human laboratory models of cocaine self-administration, conducted in non-treatment-seeking research volunteers, are relatively safe, and study participation does not exacerbate ongoing drug use. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland
CAS Registry Number: 50-36-2 (Cocaine)
Publication Type: Journal Article; Research Support, N.I.H., Extramural
Subject Headings: [Adult](#)
["Alcohol-Related Disorders/et \[Etiology\]"](#)
[Behavioral Research](#)
[*Cocaine](#)
["Cocaine-Related Disorders/et \[Etiology\]"](#)
[Female](#)
[Humans](#)
[Male](#)
["Marijuana Abuse/et \[Etiology\]"](#)
["*Research Subjects/px \[Psychology\]"](#)
[Self Administration](#)
["*Substance-Related Disorders/et \[Etiology\]"](#)
["Tobacco Use Disorder/et \[Etiology\]"](#)
Source: MEDLINE

13. Modafinil for the treatment of methamphetamine dependence.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(135-41), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Anderson AL; Li SH; Biswas K; McSherry F; Holmes T; Iturriaga E; Kahn R; Chiang N; Beresford T; Campbell J; Haning W; Mawhinney J; McCann M; Rawson R; Stock C; Weis D; Yu E; Elkashef AM

Institution: Division of Pharmacotherapies and Medical Consequences of Drug Abuse, National Institute on Drug Abuse, National Institutes of Health, Bethesda, MD 20892-9551, United States. aa135m@nih.gov

Language: English

Abstract: AIM: Modafinil was tested for efficacy in decreasing use in methamphetamine-dependent participants, compared to placebo. METHODS: This was a randomized, double-blind, placebo-controlled study, with 12 weeks of treatment and a 4-week follow-up. Eight outpatient substance abuse treatment clinics participated in the study. There were 210 treatment-seekers randomized, who all had a DSM-IV diagnosis of methamphetamine dependence; 68 participants to placebo, 72 to modafinil 200mg, and 70 to modafinil 400mg, taken once daily on awakening. Participants came to the clinic three times per week for assessments, urine drug screens, and group psychotherapy. The primary outcome measure was a methamphetamine non-use week, which required all the week's qualitative urine drug screens to be negative for methamphetamine. RESULTS: Regression analysis showed no significant difference between either modafinil group (200 or 400mg) or placebo in change in weekly percentage having a methamphetamine non-use week over the 12-week treatment period ($p = 0.53$). Similarly, a number of secondary outcomes did not show significant effects of modafinil. However, an ad-hoc analysis of medication compliance, by urinalysis for modafinil and its metabolite, did find a significant difference in maximum duration of abstinence (23 days vs. 10 days, $p = 0.003$), between those having the top quartile of compliance ($> 85\%$ of urines were positive for modafinil, $N = 36$), and the lower three quartiles of modafinil 200 and 400mg

groups (N=106).CONCLUSIONS: Although these data suggest that modafinil, plus group behavioral therapy, was not effective for decreasing methamphetamine use, the study is probably inconclusive because of inadequate compliance with taking medication. Published by Elsevier Ireland Ltd.

Country of Publication: Ireland

CAS Registry Number: 0 (Benzhydryl Compounds); 0 (Central Nervous System Stimulants); 537-46-2 (Methamphetamine); 68693-11-8 (modafinil)

Publication Type: Journal Article; Randomized Controlled Trial; Research Support, N.I.H., Extramural

Subject Headings: [Adult](#)
["*Amphetamine-Related Disorders/dt \[Drug Therapy\]"](#)
["Amphetamine-Related Disorders/th \[Therapy\]"](#)
["*Benzhydryl Compounds/tu \[Therapeutic Use\]"](#)
["*Central Nervous System Stimulants/tu \[Therapeutic Use\]"](#)
[Combined Modality Therapy](#)
[Double-Blind Method](#)
[Female](#)
[Humans](#)
[Male](#)
[Medication Adherence](#)
[*Methamphetamine](#)
[Patient Dropouts](#)
[Psychotherapy Group](#)
[Treatment Outcome](#)

Source: MEDLINE

14. Characteristics of drug users who witness many overdoses: implications for overdose prevention.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(168-73), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Bohnert AS; Tracy M; Galea S

Institution: VA National Serious Mental Illness Treatment Research and Evaluation Center, Ann Arbor, MI, United States. amybohne@med.umich.edu

Language: English

Abstract: BACKGROUND: Programs to improve response of drug users when witnessing an overdose can reduce overdose mortality. Characteristics of drug users may be associated with the number of overdoses ever witnessed. This information could inform overdose prevention programs.METHODS: Participants in New York City, who were age 18 and older with heroin and/or cocaine use in the past two months, were administered structured interviews (n=1184). Survey topics included overdose response, drug use behavior, treatment history, and demographic information.RESULTS: In a multivariable negative binomial regression model, those persons who were male (IRR [Incidence Rate Ratio]=1.7, CI [95% Confidence Interval]=1.4,2.2), had experienced homelessness (IRR=1.9, CI=1.4,2.6), had used heroin (IRR=2.0, CI=1.3,3.2), had overdosed themselves (IRR=1.9, CI=1.6,2.4), or had attended Narcotics Anonymous (IRR=1.3, CI=1.1,1.6) witnessed a greater count of overdoses in their lifetime. Those persons who have witnessed more overdoses were less likely to have sought medical assistance (OR [Odds Ratio]=0.7) and more likely to report counter-productive or ineffective actions (ORs between 1.9 and 2.4) at the last overdose they witnessed compared to persons who had only ever witnessed one or two overdoses.CONCLUSIONS: Persons at high risk for overdose are likely to witness more overdoses. Persons who had witnessed more overdoses were more likely to report taking ineffective action at the last overdose witnessed. Individuals who have witnessed many overdoses are likely key targets of overdose response training. Published by Elsevier Ireland Ltd.

Country of Publication: Ireland

Publication Type: Journal Article; Research Support, N.I.H., Extramural; Research Support, U.S. Gov't, Non-P.H.S.

Subject Headings: [Cross-Sectional Studies](#)
["*Drug Users/px \[Psychology\]"](#)
[Female](#)
[Humans](#)
[Interviews as Topic](#)
[Male](#)
["New York City/ep \[Epidemiology\]"](#)
["Overdose/ep \[Epidemiology\]"](#)
["Overdose/pc \[Prevention and Control\]"](#)
["*Overdose/px \[Psychology\]"](#)
[Risk Factors](#)
["Substance-Related Disorders/co \[Complications\]"](#)
["Substance-Related Disorders/px \[Psychology\]"](#)

Source: MEDLINE

15. A survey study to characterize use of Spice products (synthetic cannabinoids).

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(238-41), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Vandrey R; Dunn KE; Fry JA; Girling ER

Institution: Johns Hopkins University School of Medicine, Baltimore, MD 21224, United States. rvandrey@jhmi.edu

Language: English

Abstract: BACKGROUND: Synthetic cannabinoids are a rapidly emerging class of abused drugs. Synthetic cannabinoids are typically sold as "herbal blends" or "incense," commonly referred to as Spice products. No controlled human experiments have been conducted on the effects of Spice products or the synthetic cannabinoids they often contain. METHODS: An internet-based survey study was conducted with adults reporting at least one lifetime use of a Spice product. RESULTS: Respondents were primarily male, Caucasian and \geq 12 years of education. Use of other psychoactive drugs was common, though 21% identified Spice products as their preferred drug. Spice products were most frequently obtained from retail vendors and smoked, though other forms of ingestion were endorsed. Mean age of first use was 26 and mean frequency of use in the past year was 67 days (range 0-365). Primary reasons for use were curiosity, positive drug effect, relaxation, and to get high without having a positive drug test. Acute subjective effects were similar to known effects of cannabis, and a subset of users met DSM criteria for abuse and dependence on Spice products. CONCLUSIONS: Participants exhibited a diverse profile of use patterns as is typical for other drugs of abuse. There was evidence that users continued to seek and use these drugs after being banned by local authorities. This study should be interpreted with caution due to methodological limitations. Controlled laboratory research is needed to further examine the behavioral pharmacology of individual synthetic cannabinoids found in Spice products. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Cannabinoids); 0 (Street Drugs)

Publication Type: Journal Article; Research Support, N.I.H., Extramural

Subject Headings: [Adult](#)
[*Cannabinoids](#)
[Data Collection](#)
[Female](#)
[Humans](#)
[Male](#)
[*Street Drugs](#)
["*Substance-Related Disorders/ep \[Epidemiology\]"](#)
["United States/ep \[Epidemiology\]"](#)

Source: MEDLINE

16. Beyond income: material resources among drug users in economically-disadvantaged New York City neighborhoods.

Citation:	Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(127-34), 0376-8716;1879-0046 (2012 Jan 1)
Author(s):	Ompad DC; Nandi V; Cerda M; Crawford N; Galea S; Vlahov D
Institution:	Center for Health, Identity, Behavior, and Prevention Studies and Department of Nutrition, Food Studies and Public Health, Steinhardt School of Culture, Education and Human Development, New York University, New York, NY 10003, United States. dco2@nyu.edu
Language:	English
Abstract:	<p>BACKGROUND: Little is known about material resources among drug users beyond income. Income measures can be insensitive to variation among the poor, do not account for variation in cost-of-living, and are subject to non-response bias and underreporting. Further, most do not include illegal income sources that may be relevant to drug-using populations.METHODS: We explored the reliability and validity of an 18-item material resource scale and describe correlates of adequate resources among 1593 current, former and non-drug users recruited in New York City. Reliability was determined using coefficient alpha, omega(h), and factor analysis. Criterion validity was explored by comparing item and mean scores by income and income source using ANOVA; content validity analyses compared scores by drug use. Multiple linear regression was used to describe correlates of adequate resources.RESULTS: The coefficient alpha and omega(h) for the overall scale were 0.91 and 0.68, respectively, suggesting reliability was at least adequate. Legal income >\$5000 (vs. <=\$5000) and formal (vs. informal) income sources were associated with more resources, supporting criterion validity. We observed decreasing resources with increasing drug use severity, supporting construct validity. Three factors were identified: basic needs, economic resources and services. Many did not have their basic needs met and few had adequate economic resources. Correlates of adequate material resources included race/ethnicity, income, income source, and homelessness.CONCLUSIONS: The 18-item material resource scale demonstrated reliability and validity among drug users. These data provide a different view of poverty, one that details specific challenges faced by low-income communities. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.</p>
Country of Publication:	Ireland
Publication Type:	Journal Article; Research Support, N.I.H., Extramural
Subject Headings:	<p>Adolescent Adult Aged Cross-Sectional Studies "Data Collection/st [Standards]" "Economics/sn [Statistics and Numerical Data]" Female Humans "Income/sn [Statistics and Numerical Data]" Male Middle Aged New York City "Poverty/sn [Statistics and Numerical Data]" *Poverty Areas Reproducibility of Results Socioeconomic Factors "Substance Abuse Intravenous/ec [Economics]" "*Substance-Related Disorders/ec [Economics]" Young Adult</p>
Source:	MEDLINE

17. Stressful life events and suicidal behavior in adults with alcohol use disorders: role of event severity, timing, and type.

- Citation:** Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(155-61), 0376-8716;1879-0046 (2012 Jan 1)
- Author(s):** Conner KR; Houston RJ; Swogger MT; Conwell Y; You S; He H; Gamble SA; Watts A; Duberstein PR
- Institution:** University of Rochester Medical Center, 300 Crittenden Boulevard, Rochester, NY 14642, USA. kenneth.conner@urmc.rochester.edu
- Language:** English
- Abstract:** BACKGROUND: Stressful life events (SLEs) play a key role in suicidal behavior among adults with alcohol use disorders (AUD), yet there are meager data on the severity of SLEs preceding suicidal behavior or the timing of such events. METHOD: Patients in residential substance use treatment who made a recent suicide attempt (cases, n=101) and non-suicidal controls matched for site (n=101) were recruited. SLEs that occurred within 30 days of the attempt and on the day of the attempt in cases were compared to SLEs that occurred in the corresponding periods in controls. SLEs were categorized by type (interpersonal, non-interpersonal) and severity (major, minor) and were dated to assess timing. Degree of planning of suicide attempts was also assessed. RESULTS: Major interpersonal SLEs conferred risk for a suicide attempt, odds ratio (95% CI)=5.50 (1.73, 17.53), p=0.005. Cases were also more likely to experience an SLE on the day of the attempt than on the corresponding day in controls, OR (95% CI)=6.05 (1.31, 28.02), p=0.021. However, cases that made an attempt on the day of a SLE did not make lower planned suicide attempts compared to other cases, suggesting that suicide attempts that are immediately preceded by SLEs cannot be assumed to be unplanned. CONCLUSIONS: Results suggest the central importance of major interpersonal SLEs in risk among adults with AUD, a novel finding, and documents that SLEs may lead to suicide attempts within a short window of time (i.e., same day), a daunting challenge to prevention efforts. Published by Elsevier Ireland Ltd.
- Country of Publication:** Ireland
- Publication Type:** Journal Article; Research Support, N.I.H., Extramural
- Subject Headings:** [Adolescent](#)
[Adult](#)
[Aged](#)
[*Alcohol-Related Disorders/px \[Psychology\]](#)
[Case-Control Studies](#)
[Female](#)
[Humans](#)
[Interview Psychological](#)
[*Life Change Events](#)
[Male](#)
[Middle Aged](#)
[Risk Factors](#)
["Stress Psychological/et \[Etiology\]"](#)
["Stress Psychological/px \[Psychology\]"](#)
["*Suicide Attempted/px \[Psychology\]"](#)
[Time Factors](#)
[Young Adult](#)
- Source:** MEDLINE

18. Male injection drug users try new drugs following U.S. deportation to Tijuana, Mexico.

- Citation:** Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(142-8), 0376-8716;1879-0046 (2012 Jan 1)
- Author(s):** Robertson AM; Rangel MG; Lozada R; Vera A; Ojeda VD

Institution: Division of Global Public Health, University of California, San Diego School of Medicine, Institute of the Americas, 10111 N. Torrey Pines Road, Mail Code 0507, La Jolla, CA 92093-0507, USA.

Language: English

Abstract: BACKGROUND: Among male injection drug users (IDUs) in Tijuana, Mexico, U.S. deportation is associated with HIV transmission. Changing drug use behaviors following deportation, including the use of new drugs, may increase HIV risk but are understudied. We identify correlates of trying new drugs following male IDUs' most recent U.S. deportation to Mexico. METHODS: In 2010, we recruited 328 deported male IDUs in Tijuana, Mexico. Questionnaires collected retrospective data on drug use and other HIV risk behaviors throughout migratory events. Logistic regression identified correlates of trying new drugs/combinations following their most recent deportations. Informed consent was obtained from all participants. RESULTS: Nearly one in six men (n=52, 16%) tried new drugs following their most recent deportation, including heroin (n=31), methamphetamine (n=5), and heroin/methamphetamine combined (n=17). Trying new drugs following deportation was independently associated with U.S. incarceration (adjusted odds ratio [AOR]=3.96; 95% confidence interval [C.I.] 1.78, 8.84), increasing numbers of U.S. deportations (AOR=1.11 per deportation; C.I. 1.03, 1.20), feeling sad following deportation (AOR 2.69; C.I. 1.41, 5.14), and perceiving that one's current lifestyle increases HIV/AIDS risk (AOR 3.91; C.I. 2.05, 7.44). CONCLUSIONS: Trying new drugs following U.S. deportation may be related to the unique contexts and stressors experienced by drug-abusing migrants as they attempt to reestablish their lives in Mexico. Findings imply an unmet need for health and social programs to alleviate pre- and post-deportation stressors faced by undocumented and return migrants in the U.S.-Mexico context. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Research Support, N.I.H., Extramural; Research Support, Non-U.S. Gov't

Subject Headings: [Adult](#)
["Amphetamine-Related Disorders/ep \[Epidemiology\]"](#)
[Cross-Sectional Studies](#)
["Heroin Dependence/ep \[Epidemiology\]"](#)
[Humans](#)
[Logistic Models](#)
[Male](#)
[Mexico](#)
[Socioeconomic Factors](#)
["*Substance Abuse Intravenous/ep \[Epidemiology\]"](#)
["Transients and Migrants/lj \[Legislation and Jurisprudence\]"](#)
["*Transients and Migrants/sn \[Statistics and Numerical Data\]"](#)
[United States](#)

Source: MEDLINE

19. Counselor training in several evidence-based psychosocial addiction treatments in private US substance abuse treatment centers.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(149-54), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Olmstead TA; Abraham AJ; Martino S; Roman PM

Institution: George Mason University, School of Public Policy, 3401 Fairfax Drive, Arlington, VA 22201, USA. olmstead@gmu.edu

Language: English

Abstract: BACKGROUND: Given that most addiction counselors enter the field unprepared to implement psychosocial evidence-based practices (EBPs), surprisingly little is known about the extent to which substance abuse treatment centers provide their counselors with formal training in these treatments. This study examines the extent of formal training that treatment centers provide their counselors in cognitive behavioral therapy (CBT),

motivational interviewing (MI), contingency management (CM), and brief strategic family therapy (BSFT).METHODS: Face-to-face interviews with 340 directors of a nationally representative sample of privately funded US substance abuse treatment centers.RESULTS: Although a substantial number of treatment centers provide their counselors with formal training in EBPs that they use with their clients, coverage is far from complete. For example, of those centers that use CBT, 34% do not provide their counselors with any formal training in CBT (either initially or annually), and 61% do not provide training in CBT that includes supervised training cases. Sizable training gaps exist for MI, CM, and BSFT as well.CONCLUSIONS: The large training gaps found in this study give rise to concerns regarding the integrity with which CBT, MI, CM, and BSFT are being delivered by counselors in private US substance abuse treatment centers. Future research should examine the generalizability of our findings to other types of treatment centers (e.g., public) and to the implementation of other EBPs. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Research Support, N.I.H., Extramural

Subject Headings: [Adolescent](#)
[Adult](#)
["Cognitive Therapy/ed \[Education\]"](#)
["*Counseling/ed \[Education\]"](#)
[Directive Counseling](#)
["*Evidence-Based Medicine/ed \[Education\]"](#)
["Family Therapy/ed \[Education\]"](#)
[Female](#)
[Humans](#)
[Male](#)
["*Substance Abuse Treatment Centers/og \[Organization and Administration\]"](#)
["*Substance-Related Disorders/th \[Therapy\]"](#)
[United States](#)

Source: MEDLINE

20. Patterns and levels of illicit drug use among men who have sex with men in Asia.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(246-9), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Wei C; Guadamuz TE; Lim SH; Huang Y; Koe S

Institution: Graduate School of Public Health, University of Pittsburgh, Pittsburgh, PA 15261, USA. chw57@pitt.edu

Language: English

Abstract: BACKGROUND: The emergence of gay communities in Asia may predispose men who have sex with men (MSM) to drug use. We describe patterns and levels of illicit drug use, and characteristics of stimulant drug users among MSM in Asia.METHODS: A cross-sectional Internet-based survey was conducted among 10,861 participants recruited through online methods. Pearson's chi-square tests were used to compare patterns of drug use by participants' HIV status. Multivariable logistic regression analysis was conducted to identify significant correlates of stimulant drug use.RESULTS: Overall, 16.7% of participants reported recreational drug use in the past 6 months. Ecstasy (8.1%) and Viagra (7.9%) were the most prevalent drugs being used. HIV-positive MSM reported significantly higher levels of individual drug use and polydrug use compared to HIV-negative/unknown MSM. Being gay (AOR=1.62, 95% CI: 1.28, 2.05), having casual male partners only or having both casual and regular partners (AOR=2.05, 95% CI: 1.66, 2.53; AOR=2.97, 95% CI: 2.39, 3.69), HIV-positive status (AOR=4.54, 95% CI: 3.63, 5.69), sex work (AOR=1.52, 95% CI: 1.19, 1.93), and having more gay friends ("Some" vs. "A few/None" AOR=1.98, 95% CI: 1.62, 2.43; "Most/All" vs. "A few/None" AOR=4.59, 95% CI: 3.77, 5.59) were independently associated with stimulant drug use.CONCLUSIONS: Our findings point to the urgency of incorporating substance use prevention and treatment into current HIV prevention activities in Asia, which must use a

harm reduction approach and galvanize dignity. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Street Drugs)

Publication Type: Journal Article; Research Support, N.I.H., Extramural

Subject Headings: [Adolescent](#)
[Adult](#)
["Asia/ep \[Epidemiology\]"](#)
[Cross-Sectional Studies](#)
["HIV Infections/ep \[Epidemiology\]"](#)
["HIV Infections/px \[Psychology\]"](#)
["*Homosexuality Male/sn \[Statistics and Numerical Data\]"](#)
[Humans](#)
[Logistic Models](#)
[Male](#)
[Multivariate Analysis](#)
[Socioeconomic Factors](#)
[Street Drugs](#)
["*Substance-Related Disorders/ep \[Epidemiology\]"](#)
["Substance-Related Disorders/px \[Psychology\]"](#)
[Young Adult](#)

Source: MEDLINE

21. Reinstatement of methamphetamine seeking in male and female rats treated with modafinil and allopregnanolone.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(233-7), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Holtz NA; Lozama A; Priszano TE; Carroll ME

Institution: Department of Psychiatry, University of Minnesota, Minneapolis, MN 55455, USA. holt0324@umn.edu

Language: English

Abstract: BACKGROUND: Sex differences in methamphetamine (METH) use (females>males) have been demonstrated in clinical and preclinical studies. This experiment investigated the effect of sex on the reinstatement of METH-seeking behavior in rats and determined whether pharmacological interventions for METH-seeking vary by sex. Treatment drugs were modafinil (MOD), an analeptic, and allopregnanolone (ALLO), a neuroactive steroid and progesterone metabolite.METHOD: Male and female rats were trained to self-administer i.v. infusions of METH (0.05 mg/kg/infusion). Next, rats self-administered METH for a 10-day maintenance period. METH was then replaced with saline, and rats extinguished lever-pressing behavior over 18 days. A multi-component reinstatement procedure followed whereby priming injections of METH (1mg/kg) were administered at the start of each daily session, preceded 30 min by MOD (128 mg/kg, i.p.), ALLO (15 mg/kg, s.c.), or vehicle treatment. MOD was also administered at the onset of the session to determine if it would induce the reinstatement of METH-seeking behavior.RESULTS: Female rats had greater METH-induced reinstatement responding compared to male rats following control treatment injections. MOD (compared to the DMSO control) attenuated METH-seeking behavior in male and female rats; however, ALLO only reduced METH-primed responding in females. MOD alone did not induce the reinstatement of METH-seeking behavior.CONCLUSIONS: These results support previous findings that females are more susceptible to stimulant abuse compared to males, and ALLO effectively reduced METH-primed reinstatement in females. Further, results illustrate the utility of MOD as a potential agent for prevention of relapse to METH use in both males and females. Published by Elsevier Ireland Ltd.

Country of Publication: Ireland

CAS Registry Number: 0 (Benzhydryl Compounds); 0 (Central Nervous System Depressants); 0 (Central Nervous System Stimulants); 128-20-1 (Pregnanolone); 537-46-2 (Methamphetamine); 68693-11-8 (modafinil)

Publication Type: Journal Article; Research Support, N.I.H., Extramural

Subject Headings: ["*Amphetamine-Related Disorders/dt \[Drug Therapy\]"](#)
["Amphetamine-Related Disorders/px \[Psychology\]"](#)
[Animals](#)
["*Benzhydryl Compounds/pd \[Pharmacology\]"](#)
["*Central Nervous System Depressants/pd \[Pharmacology\]"](#)
["*Central Nervous System Stimulants/pd \[Pharmacology\]"](#)
[Female](#)
[Male](#)
[*Methamphetamine](#)
["*Pregnanolone/pd \[Pharmacology\]"](#)
[Rats](#)
[Rats Wistar](#)
[Sex Factors](#)

Source: MEDLINE

22. Alcohol consumption among HIV-positive pregnant women in KwaZulu-Natal, South Africa: prevalence and correlates.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(113-8), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Desmond K; Milburn N; Richter L; Tomlinson M; Greco E; van Heerden A; van Rooyen H; Comulada WS; Rotheram-Borus MJ

Institution: Center for Community Health, University of California at Los Angeles, 10920 Wilshire Blvd., Suite 350, Los Angeles, CA 90024-6543, USA.

Language: English

Abstract: BACKGROUND: HIV-positive pregnant women who drink put their children at risk of both HIV and fetal alcohol spectrum disorders. The province of KwaZulu-Natal (KZN) has the highest prevalence of HIV in South Africa, but has not before been considered an area of high alcohol consumption among women. This paper analyzes a large sample of HIV+ pregnant women in KZN to examine alcohol consumption in that population. METHODS: Data came from assessments of women enrolled in Prevention of Mother-To-Child Transmission programs at 8 clinics in KZN. Descriptive statistics and logistic regressions were used to examine the prevalence and correlates of alcohol consumption and binge drinking. RESULTS: Of 1201 women assessed, 18% reported drinking during pregnancy, and 67% of drinkers usually binged when drinking (had 3+ drinks in one sitting). Over one-third of drinkers binged twice a month or more. Women living in urban and peri-urban locations were more likely to drink, as were those with indicators of higher economic status and greater social engagement. Married women were less likely to drink, while women who had poorer mental health, used tobacco, or had a greater history of sexual risk-taking were more likely to drink. CONCLUSION: Health care workers in KZN should be aware that pregnant women who drink are likely to do so at a level that is dangerous for their babies. Some factors associated with drinking indicate social/environmental influences that need to be counteracted by greater dissemination of information about the dangers of drinking, and greater support for abstinence or moderation. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Research Support, N.I.H., Extramural

Subject Headings: [Adult](#)
["*Alcohol Drinking/ep \[Epidemiology\]"](#)
["Alcoholic Intoxication/ep \[Epidemiology\]"](#)
[Female](#)
["HIV Infections/ep \[Epidemiology\]"](#)

"*HIV Infections/px [Psychology]"
 Humans
 Marital Status
 Pregnancy
 "Pregnancy Complications Infectious/ep [Epidemiology]"
 "*Pregnancy Complications Infectious/px [Psychology]"
 Prevalence
 Risk Factors
 Risk-Taking
 Socioeconomic Factors
 "South Africa/ep [Epidemiology]"
 "Urban Population/sn [Statistics and Numerical Data]"

Source: MEDLINE

23. Correlates of amphetamine-type stimulant use and associations with HIV-related risks among young women engaged in sex work in Phnom Penh, Cambodia.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(119-26), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Couture MC; Evans JL; Sothy NS; Stein ES; Sichan K; Maher L; Page K

Institution: University of California San Francisco, Global Health Sciences, 50 Beale Street, Suite 1200, San Francisco, CA 94105, USA.

Language: English

Abstract: BACKGROUND: Amphetamine-type stimulant (ATS) use has increased in Cambodia and emerged as a significant problem among female sex workers (FSWs), potentially contributing to increased risk of HIV. We examined the prevalence of ATS use and its effect on sexual risk behaviors, and sexually transmitted infections (STI) among FSWs in Phnom Penh, Cambodia. METHODS: A one-year prospective study among young women engaged in sex work in brothels, entertainment establishments and on a freelance basis. Socio-demographics, sexual risks, and recent ATS use were assessed by self-report. Blood and urine samples were collected to detect HIV, Chlamydia trachomatis (CT) and Neisseria gonorrhoeae (GC). Bivariate and multivariate longitudinal analyses were conducted to assess the effects of ATS use on number of sex partners, inconsistent condom use with paying partners and incident STI. RESULTS: ATS use was higher among women working freelance (35.6%) and in brothels (34.8%) compared to women working in entertainment establishments (17.7%) or in multiple venues (14.8%). ATS users reported more sex partners and days drunk in the previous month. In multivariate longitudinal analysis, ATS use was associated with having a higher number of sex partners (adjusted relative ratio 1.49; 95% CI: 1.00-2.21) and incident STI (adjusted odds ratio 5.41; 95% CI: 1.15-25.48), but not inconsistent condom use with paying partner. CONCLUSION: ATS users had more sex partners, high level of alcohol use, and were at increased risk of STI. Our findings underscore ATS use as an important emerging risk exposure that should be integrated into HIV prevention interventions targeting this population. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Research Support, N.I.H., Extramural; Research Support, Non-U.S. Gov't

Subject Headings: Adolescent
 Adult
 "*Amphetamine-Related Disorders/ep [Epidemiology]"
 "Amphetamine-Related Disorders/px [Psychology]"
 "Cambodia/ep [Epidemiology]"
 Female
 "*HIV Infections/et [Etiology]"
 "HIV Infections/px [Psychology]"
 Humans
 Prevalence
 Prospective Studies

Questionnaires
 Risk-Taking
 "Sex Workers/px [Psychology]"
 "*Sex Workers/sn [Statistics and Numerical Data]"
 "Sexually Transmitted Diseases/ep [Epidemiology]"
 "Unsafe Sex/px [Psychology]"
 "Unsafe Sex/sn [Statistics and Numerical Data]"
 Young Adult

Source: MEDLINE

24. MDMA (Ecstasy) association with impaired fMRI BOLD thalamic coherence and functional connectivity.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(41-7), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Salomon RM; Karageorgiou J; Dietrich MS; McLellan JY; Charboneau EJ; Blackford JU; Cowan RL

Institution: Psychiatric Neuroimaging Program, Vanderbilt University School of Medicine, Nashville, TN 37212, USA. ron.salomon@vanderbilt.edu

Language: English

Abstract: BACKGROUND: MDMA exposure is associated with chronic serotonergic dysfunction in preclinical and clinical studies. A recent functional magnetic resonance imaging (fMRI) comparison of past MDMA users to non-MDMA-using controls revealed increased spatial extent and amplitude of activation in the supplementary motor area during motor tasks (Karageorgiou et al., 2009). Blood oxygenation level dependent (BOLD) data from that study were reanalyzed for intraregional coherence and for inter-regional temporal correlations between time series, as functional connectivity. METHODS: Fourteen MDMA users and ten controls reporting similar non-MDMA abuse performed finger taps during fMRI. Fourteen motor pathway regions plus a pontine raphe region were examined. Coherence was expressed as percent of voxels positively correlated with an intraregional index voxel. Functional connectivity was determined using wavelet correlations. RESULTS: Intraregional thalamic coherence was significantly diminished at low frequencies in MDMA users compared to controls (p=0.009). Inter-regional functional connectivity was significantly weaker for right thalamo - left caudate (p=0.002), right thalamo - left thalamus (p=0.007), right caudate - right postcentral (p=0.007) and right supplementary motor area - right precentral gyrus (p=0.011) region pairs compared to controls. When stratified by lifetime exposure, significant negative associations were observed between cumulative MDMA use and functional connectivity in seven other region-pairs, while only one region-pair showed a positive association. CONCLUSIONS: Reported prior MDMA use was associated with deficits in BOLD intraregional coherence and inter-regional functional connectivity, even among functionally robust pathways involving motor regions. This suggests that MDMA use is associated with long-lasting effects on brain neurophysiology beyond the cognitive domain. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 42542-10-9 (N-Methyl-3,4-methylenedioxyamphetamine)

Publication Type: Journal Article; Research Support, N.I.H., Extramural

Subject Headings: Adolescent
 Adult
 Case-Control Studies
 Female
 Functional Neuroimaging
 Humans
 Magnetic Resonance Imaging
 Male
 "Motor Cortex/bs [Blood Supply]"
 "Motor Cortex/de [Drug Effects]"
 "Motor Cortex/ph [Physiology]"

"*N-Methyl-3 4-methylenedioxyamphetamine/ae [Adverse Effects]"
 "Nerve Net/de [Drug Effects]"
 "Nerve Net/ph [Physiology]"
 "Putamen/bs [Blood Supply]"
 "Putamen/de [Drug Effects]"
 "Putamen/ph [Physiology]"
 "Substance-Related Disorders/co [Complications]"
 "Thalamus/bs [Blood Supply]"
 "*Thalamus/de [Drug Effects]"
 "Thalamus/ph [Physiology]"
 Young Adult

Source: MEDLINE

25. Factors affecting cognitive function of opiate-dependent patients.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(81-7), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Loeber S; Nakovics H; Kniest A; Kiefer F; Mann K; Croissant B

Institution: Department of General Psychiatry, University of Heidelberg, Vossstrasse 2, 69115 Heidelberg, Germany. Sabine.Loeber@med.uni-heidelberg.de

Language: English

Abstract: BACKGROUND: A wide range of studies found that opiate-dependent patients suffer from cognitive impairment due to a number of different factors. However, this issue has never been examined systematically. Thus, the aim of the present study is to provide a comprehensive analysis of factors that might contribute to cognitive impairment of opiate-dependent patients and specifically differentiates between various cognitive abilities as these might be impacted differently. METHODS: Based on a comprehensive review of the literature with regard to previous findings and suggestions about which factors might affect cognitive functioning, we assessed a wide variety of variables related to substance use and opiate-dependence as well as demographic and socioeconomic variables. Cognitive functioning was assessed through a neuropsychological test-battery. RESULTS: We found that the duration of opiate dependence and maintenance treatment, as well as additional substance consumption (alcohol, amphetamines, and cocaine) are the main variables contributing to cognitive impairment in the domains of attention and executive function. Comorbid depressive symptoms negatively affected reaction times. There was no evidence for the role of demographic variables like age and education on cognitive functioning. CONCLUSIONS: Our findings suggest that it might be important in the treatment of opiate dependence to address the consumption of additional substances and to closely monitor the negative effects of maintenance treatment on cognitive functioning. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: Adult
 Age Factors
 "Cognition/de [Drug Effects]"
 "*Cognition Disorders/ci [Chemically Induced]"
 "Depression/co [Complications]"
 "Depression/px [Psychology]"
 Educational Status
 "Executive Function/de [Drug Effects]"
 Female
 Humans
 Male
 Middle Aged
 Neuropsychological Tests
 "Opioid-Related Disorders/co [Complications]"

"*Opioid-Related Disorders/px [Psychology]"
 Risk Factors
 Socioeconomic Factors
 "Substance-Related Disorders/co [Complications]"
 "Substance-Related Disorders/px [Psychology]"
 Time Factors
 Young Adult

Source: MEDLINE

26. Randomized multi-site trial of the Job Seekers' Workshop in patients with substance use disorders.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(55-64), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Svikis DS; Keyser-Marcus L; Stitzer M; Rieckmann T; Safford L; Loeb P; Allen T; Luna-Anderson C; Back SE; Cohen J; DeBernardi MA; Dillard B; Forcehimes A; Jaffee W; Killeen T; Kolodner K; Levy M; Pallas D; Perl HI; Potter JS; Provost S; Reese K; Sampson RR; Sepulveda A; Snead N; Wong CJ; Zweben J

Institution: Department of Psychology, AWHARE (Addiction & Women's Health: Advancing Research and Evaluation), Virginia Commonwealth University, Old City Hall, Room 350A, 1001 East Broad Street, PO Box 980343, Richmond, VA 23298-0343, USA. dssvikis@vcu.edu

Language: English

Abstract: BACKGROUND: Unemployment is associated with negative outcomes both during and after drug abuse treatment. Interventions designed to increase rates of employment may also improve drug abuse treatment outcomes. The purpose of this multi-site clinical trial was to evaluate the Job Seekers' Workshop (JSW), a three session, manualized program designed to train patients in the skills needed to find and secure a job. METHOD: Study participants were recruited through the NIDA Clinical Trials Network (CTN) from six psychosocial counseling (n=327) and five methadone maintenance (n=301) drug treatment programs. Participants were randomly assigned to either standard care (program-specific services plus brochure with local employment resources) (SC) or standard care plus JSW. Three 4-h small group JSW sessions were offered weekly by trained JSW facilitators with ongoing fidelity monitoring. RESULTS: JSW and SC participants had similar 12- and 24-week results for the primary outcome measure (i.e., obtaining a new taxed job or enrollment in a training program). Specifically, one-fifth of participants at 12 weeks (20.1-24.3%) and nearly one-third at 24 weeks (31.4-31.9%) had positive outcomes, with "obtaining a new taxed job" accounting for the majority of cases. CONCLUSION: JSW group participants did not have higher rates of employment/training than SC controls. Rates of job acquisition were modest for both groups, suggesting more intensive interventions may be needed. Alternate targets (e.g., enhancing patient motivation, training in job-specific skills) warrant further study as well. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Multicenter Study; Randomized Controlled Trial; Research Support, N.I.H., Extramural

Subject Headings: Adolescent
 Adult
 Counseling
 "*Education/mt [Methods]"
 "Employment/px [Psychology]"
 *Employment
 Female
 Humans
 Male
 Middle Aged
 "*Rehabilitation Vocational/mt [Methods]"
 "*Substance-Related Disorders/rh [Rehabilitation]"

Time Factors
 "Unemployment/px [Psychology]"
 Young Adult

Source: MEDLINE

27. Exploring age of onset as a causal link between major depression and nonmedical use of prescription medications.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(99-104), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Schepis TS; McCabe SE

Institution: Department of Psychology, Texas State University, 601 University Drive, San Marcos, TX 78666, United States. schepis@txstate.edu

Language: English

Abstract: BACKGROUND: Nonmedical use of prescription medications (NUPM) has been associated with major depression (MDD), but the specific processes by which they might interact and influence one another are understudied. This investigation attempted to clarify the relationship between MDD and NUPM by examining whether age of MDD onset influenced current and past NUPM and by examining whether age of NUPM onset influenced lifetime or past year MDD. METHODS: These goals were met through use of data from the 2005 to 2007 National Survey on Drug Use and Health. Analyses utilized design-based logistic regression, and current age and order of MDD onset and NUPM initiation were examined in interactions with age of MDD or NUPM onset. RESULTS: For each year MDD onset was delayed, odds of lifetime, past year, past 30-day NUPM and substance dependence from NUPM were decreased by 2.3%, 2.6%, 1.9% and 2.3%, respectively. Earlier NUPM onset increased odds of past year (3.8%) and lifetime MDD (4.3%) in young adults, and lifetime MDD (2.5%) in 26-34 age group. Current age also interacted with age of MDD onset, with effects on NUPM pronounced in the 65 and older cohort. Order of MDD/NUPM onset generally did not interact with age of MDD onset, but it did interact with age of NUPM onset; the effects of NUPM onset on past year MDD were only significant in those with NUPM first. CONCLUSIONS: These results highlight the need for further investigations of the interactions between depression and NUPM, particularly to evaluate potential causal relationships. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Prescription Drugs)

Publication Type: Journal Article; Research Support, N.I.H., Extramural

Subject Headings: Adolescent
 Adult
 Age of Onset
 Aged
 Child
 "*Depressive Disorder Major/ep [Epidemiology]"
 "Depressive Disorder Major/et [Etiology]"
 Female
 Health Surveys
 Humans
 Male
 Middle Aged
 *Prescription Drugs
 "*Substance-Related Disorders/ep [Epidemiology]"
 "Substance-Related Disorders/px [Psychology]"
 Young Adult

Source: MEDLINE

28. Increased risk of Parkinson's disease in individuals hospitalized with conditions related to the use of methamphetamine or other amphetamine-type drugs.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(35-40), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Callaghan RC; Cunningham JK; Sykes J; Kish SJ

Institution: Centre for Addiction and Mental Health, 33 Russell St., Toronto, ON M5S 2S1, Canada. Russell_Callaghan@camh.net

Language: English

Abstract: BACKGROUND: Since methamphetamine and other amphetamine-type stimulants (meth/amphetamine) can damage dopaminergic neurons, researchers have long speculated that these drugs may predispose users to develop Parkinson's disease (PD), a dopamine deficiency neurological disorder. METHODS: We employed a retrospective population-based cohort study using all linked statewide California inpatient hospital episodes and death records from January 1, 1990 through December 31, 2005. Patients at least 30 years of age were followed for up to 16 years. Competing risks analysis was used to determine whether the meth/amphetamine cohort had elevated risk of developing PD (ICD-9 332.0; ICD-10 G20) in comparison to a matched population-proxy appendicitis group and a matched cocaine drug control group. Individuals admitted to hospital with meth/amphetamine-related conditions (n=40,472; ICD-9 codes 304.4, 305.7, 969.7, E854.2) were matched on age, race, sex, date of index admission, and patterns of hospital admission with patients with appendicitis conditions (n=207,831; ICD-9 codes 540-542) and also individuals with cocaine-use disorders (n=35,335; ICD-9 codes 304.2, 305.6, 968.5). RESULTS: The meth/amphetamine cohort showed increased risk of PD compared to both that of the matched appendicitis group [hazard ratio (HR)=1.76, 95% CI: 1.12-2.75, p=0.017] and the matched cocaine group [HR=2.44, 95% CI: 1.32-4.41, p=0.004]. The cocaine group did not show elevated hazard of PD compared to the matched appendicitis group [HR=1.04, 95% CI: 0.56-1.93, p=0.80]. CONCLUSION: These data provide evidence that meth/amphetamine users have above-normal risk for developing PD. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Amphetamines); 537-46-2 (Methamphetamine)

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Adult](#)
["Amphetamine-Related Disorders/co \[Complications\]"](#)
["*Amphetamines/ae \[Adverse Effects\]"](#)
["Appendicitis/co \[Complications\]"](#)
[Case-Control Studies](#)
["Cocaine-Related Disorders/co \[Complications\]"](#)
[Female](#)
[Hospitalization](#)
[Humans](#)
[Male](#)
["*Methamphetamine/ae \[Adverse Effects\]"](#)
[Middle Aged](#)
["*Parkinson Disease Secondary/ci \[Chemically Induced\]"](#)
[Propensity Score](#)
[Retrospective Studies](#)
[Risk Factors](#)

Source: MEDLINE

29. Employment-based reinforcement of adherence to an FDA approved extended release formulation of naltrexone in opioid-dependent adults: a randomized controlled trial.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(48-54), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): DeFulio A; Everly JJ; Leoutsakos JM; Umbricht A; Fingerhood M; Bigelow GE; Silverman K

Institution: Johns Hopkins University, School of Medicine, Baltimore, MD 21224, United States.

Language: English

Abstract: BACKGROUND: Naltrexone provides excellent opioid blockade, but its clinical utility is limited because opioid-dependent patients typically refuse it. An injectable suspension of naltrexone for extended release (XR-NTX) was recently approved by the FDA for treatment of opioid dependence. XR-NTX treatment may require concurrent behavioral intervention to maximize adherence and effectiveness, thus we sought to evaluate employment-based reinforcement as a method of improving adherence to XR-NTX in opiate dependent adults. METHODS: Opioid-dependent adults (n=38) were detoxified and inducted onto oral naltrexone, then randomly assigned to contingency or prescription conditions. Participants received up to six doses of XR-NTX at four-week intervals. All participants could earn vouchers for attendance and performance at a therapeutic workplace. Contingency participants were required to accept XR-NTX injections to access the workplace and earn vouchers. Prescription participants could earn vouchers independent of their acceptance of XR-NTX injections. RESULTS: Contingency participants accepted significantly more naltrexone injections than prescription participants (87% versus 52%, p=.002), and were more likely to accept all injections (74% versus 26%, p=.004). Participants in the two conditions provided similar percentages of samples negative for opiates (72% versus 65%) and for cocaine (58% versus 54%). Opiate positivity was significantly more likely when samples were also cocaine positive, independent of naltrexone blockade (p=.002). CONCLUSIONS: Long-term adherence to XR-NTX in unemployed opiate dependent adults is low under usual care conditions. Employment-based reinforcement can maintain adherence to XR-NTX. Ongoing cocaine use appears to interfere with the clinical effectiveness of XR-NTX on opiate use. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Delayed-Action Preparations); 0 (Narcotic Antagonists); 16590-41-3 (Naltrexone)

Publication Type: Journal Article; Randomized Controlled Trial

Subject Headings: [Adult](#)
[Delayed-Action Preparations](#)
[Employment](#)
[Female](#)
[Humans](#)
[Male](#)
["Medication Adherence/px \[Psychology\]"](#)
[*Medication Adherence](#)
[Middle Aged](#)
["*Naltrexone/ad \[Administration and Dosage\]"](#)
["Naltrexone/tu \[Therapeutic Use\]"](#)
["*Narcotic Antagonists/ad \[Administration and Dosage\]"](#)
["Narcotic Antagonists/tu \[Therapeutic Use\]"](#)
["*Opioid-Related Disorders/dt \[Drug Therapy\]"](#)
["Opioid-Related Disorders/px \[Psychology\]"](#)
[Reinforcement \(Psychology\)](#)
[Workplace](#)

Source: MEDLINE

30. Craving and illicit heroin use among patients in heroin-assisted treatment.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(74-80), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Blanken P; Hendriks VM; Koeter MW; van Ree JM; van den Brink W

Institution: Central Committee on the Treatment of Heroin Addicts (CCBH), University Medical Center Utrecht, Utrecht, The Netherlands. Peter.Blanken@Brijder.nl

Language: English

Abstract: AIMS: To investigate in heroin-assisted treatment (HAT) compared to methadone maintenance treatment (MMT): the course of heroin craving and illicit heroin use, their mutual association, and their association with multi-domain treatment response. DESIGN: RCTs on the efficacy of 12 months co-prescribed injectable or inhalable HAT compared to 12 months continued oral MMT. SETTING: Outpatient treatment in MMT- or specialized HAT-centers in the Netherlands. PARTICIPANTS: Chronic, treatment-refractory heroin dependent patients (n=73). STUDY PARAMETERS: General craving for heroin (Obsessive Compulsive Drug Use Scale); self-reported illicit heroin use; multi-domain treatment response in physical, mental and social health and illicit drug use. FINDINGS: The course of heroin craving and illicit heroin use differed significantly, with strong reductions in HAT but not in MMT. General heroin craving was significantly related to illicit heroin use. Heroin craving was not and illicit heroin use was marginally related to multi-domain treatment response, but only in MMT and not in HAT. CONCLUSIONS: Heroin craving and illicit heroin use were significantly associated and both strongly decreased in HAT but not in MMT. Craving was not related to multi-domain treatment response and illicit heroin use was marginally related to treatment response in MMT, but not in HAT. The latter was probably due to the strong reduction in illicit heroin use in most patients in HAT and the small sample size of the sub-study. It is hypothesized that the strong reductions in craving for heroin in HAT are related to the stable availability of prescribed, pharmaceutical grade heroin. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Narcotics); 561-27-3 (Heroin); 76-99-3 (Methadone)

Publication Type: Comparative Study; Journal Article; Randomized Controlled Trial; Research Support, Non-U.S. Gov't

Subject Headings: [Adult](#)
[Female](#)
["Heroin/ad \[Administration and Dosage\]"](#)
["*Heroin/tu \[Therapeutic Use\]"](#)
["*Heroin Dependence/dt \[Drug Therapy\]"](#)
["Heroin Dependence/px \[Psychology\]"](#)
[Humans](#)
[Male](#)
["*Methadone/tu \[Therapeutic Use\]"](#)
["*Narcotics/tu \[Therapeutic Use\]"](#)
["*Opiate Substitution Treatment/mt \[Methods\]"](#)
["Patient Compliance/px \[Psychology\]"](#)
[Time Factors](#)
[Treatment Outcome](#)

Source: MEDLINE

31. Socializing in an open drug scene: the relationship between access to private space and drug-related street disorder.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(28-34), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Debeck K; Wood E; Qi J; Fu E; McArthur D; Montaner J; Kerr T

Institution: British Columbia Centre for Excellence in HIV/AIDS, Canada.

Language: English

Abstract: BACKGROUND: Limited attention has been given to the potential role that the structure of housing available to people who are entrenched in street-based drug scenes may play in influencing the amount of time injection drug users (IDU) spend on public streets. We sought to examine the relationship between time spent socializing in Vancouver's drug scene and access to private space. METHODS: Using multivariate logistic regression we evaluated factors associated with socializing (three+ hours each day) in Vancouver's open drug scene among a prospective cohort of IDU. We also assessed attitudes towards

relocating socializing activities if greater access to private indoor space was provided. RESULTS: Among our sample of 1114 IDU, 43% fit our criteria for socializing in the open drug scene. In multivariate analysis, having limited access to private space was independently associated with socializing (adjusted odds ratio: 1.80, 95% confidence interval: 1.28-2.55). In further analysis, 65% of 'socializers' reported positive attitudes towards relocating socializing if they had greater access to private space. CONCLUSION: These findings suggest that providing IDU with greater access to private indoor space may reduce one component of drug-related street disorder. Low-threshold supportive housing based on the 'housing first' model that include safeguards to manage behaviors associated with illicit drug use appear to offer important opportunities to create the types of private spaces that could support a reduction in street disorder. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication:	Ireland
Publication Type:	Journal Article; Research Support, N.I.H., Extramural; Research Support, Non-U.S. Gov't
Subject Headings:	Adult Attitude "British Columbia/ep [Epidemiology]" Cities Female Housing Humans Male Middle Aged Privacy Prospective Studies Risk Factors Social Behavior *Social Environment "Substance Abuse Intravenous/ep [Epidemiology]" "Substance Abuse Intravenous/pc [Prevention and Control]" "*Substance Abuse Intravenous/px [Psychology]" Time Factors
Source:	MEDLINE

32. Association between CHRNA5 genetic variation at rs16969968 and brain reactivity to smoking images in nicotine dependent women.

Citation:	Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(7-13), 0376-8716;1879-0046 (2012 Jan 1)
Author(s):	Janes AC; Smoller JW; David SP; Frederick BD; Haddad S; Basu A; Fava M; Evins AE; Kaufman MJ
Institution:	Brain Imaging Center, McLean Hospital, Harvard Medical School, 115 Mill St., Belmont, MA 02478, USA. ajanes@mclean.harvard.edu
Language:	English
Abstract:	<p>BACKGROUND: Tobacco smoking is the leading preventable cause of death in the developed world. Identifying risk factors for smoking may lead to more effective treatments. Genome wide association studies revealed a relationship between development of nicotine dependence and a single-nucleotide polymorphism (SNP, rs16969968) of the nicotine acetylcholine receptor (nAChR) alpha-5 subunit gene (CHRNA5). The relationship between this SNP and other factors contributing to smoking behavior such as smoking cue reactivity is unclear. METHODS: We assessed the role of rs16969968 on brain functional MRI (fMRI) reactivity to smoking cues by studying nicotine dependent women with the nicotine dependence 'risk' allele (A allele, N=14) and without the 'risk' allele (G/G smokers, N=10). Nicotine dependence severity, as assessed with the Fagerstrom test for nicotine dependence, smoking pack-years, and expired carbon monoxide levels, were equivalent in these groups. RESULTS: We observed a group difference in fMRI reactivity; women without the A allele (G/G smokers) showed</p>

greater fMRI reactivity to smoking images in brain areas related to memory and habitual behavior such as the hippocampus and dorsal striatum. CONCLUSIONS: Our finding suggests that nicotine-dependent smokers lacking the rs16969968 A allele are more likely to recall smoking-related memories and engage in habitual responding to smoking cues than A allele smokers. Although more studies are necessary to determine the mechanism underlying and significance of this cue reactivity difference, these data suggest that smokers may develop and remain nicotine dependent due to different factors including genetics and cue reactivity. This finding may have implications for personalizing smoking treatment. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (CHRNA5 protein, human); 0 (Nerve Tissue Proteins); 0 (Receptors, Nicotinic)

Publication Type: Journal Article; Research Support, N.I.H., Extramural; Research Support, U.S. Gov't, Non-P.H.S.

Subject Headings: [Adult](#)
[Alleles](#)
["*Brain/pp \[Physiopathology\]"](#)
[Cues](#)
[Female](#)
[Functional Neuroimaging](#)
[Humans](#)
[Magnetic Resonance Imaging](#)
[Middle Aged](#)
["*Nerve Tissue Proteins/ge \[Genetics\]"](#)
["*Polymorphism Single Nucleotide/ge \[Genetics\]"](#)
["*Receptors Nicotinic/ge \[Genetics\]"](#)
["*Smoking/ge \[Genetics\]"](#)
["*Smoking/pp \[Physiopathology\]"](#)
["*Smoking/px \[Psychology\]"](#)
["*Tobacco Use Disorder/ge \[Genetics\]"](#)
["*Tobacco Use Disorder/pp \[Physiopathology\]"](#)
["*Tobacco Use Disorder/px \[Psychology\]"](#)

Source: MEDLINE

33. The potential impact of recruitment method on sample characteristics and treatment outcomes in a psychosocial trial for women with co-occurring substance use disorder and PTSD.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(225-8), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Winhusen T; Winstanley EL; Somoza E; Brigham G

Institution: Department of Psychiatry and Behavioral Neuroscience, University of Cincinnati College of Medicine, 3210 Jefferson Avenue, Cincinnati, OH 45220, USA.
winhusen@carc.uc.edu

Language: English

Abstract: BACKGROUND: Recruitment method can impact the sample composition of a clinical trial and, thus, the generalizability of the results, but the importance of recruitment method in substance use disorder trials has received little attention. The present paper sought to address this research gap by evaluating the association between recruitment method and sample characteristics and treatment outcomes in a substance use disorder trial. METHODS: In a multi-site trial evaluating Seeking Safety (SS), relative to Women's Health Education (WHE), for women with co-occurring PTSD (either sub-threshold or full PTSD) and substance use disorders, one site assessed the method by which each participant was recruited. Data from this site (n=106), which recruited participants from newspaper advertising and clinic intakes, were analyzed. RESULTS: Participants recruited through advertising, relative to those from the clinic, had significantly higher levels of baseline drug use and higher rates of meeting DSM-IV-TR criteria for full PTSD. Results suggest that the effectiveness of SS in decreasing PTSD symptoms was greater for participants recruited through advertising relative to those recruited from the clinic.

Conversely, the results revealed a significant treatment effect in the clinic-recruited participants, not seen in the advertising-recruited participants, with SS, relative to WHE, participants being more likely to report past week drug use during the follow-up phase. CONCLUSION: Recruitment method may impact sample composition and treatment effects. Replication of this finding would have important implications for substance use disorder efficacy trials which often utilize advertising to recruit participants. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Research Support, N.I.H., Extramural

Subject Headings: [Adolescent](#)
[Adult](#)
[Aged](#)
["Alcohol-Related Disorders/co \[Complications\]"](#)
["Alcohol-Related Disorders/px \[Psychology\]"](#)
[Bias \(Epidemiology\)](#)
[Female](#)
[Humans](#)
[Middle Aged](#)
[*Patient Selection](#)
[Psychiatric Status Rating Scales](#)
["*Stress Disorders Post-Traumatic/co \[Complications\]"](#)
["Stress Disorders Post-Traumatic/px \[Psychology\]"](#)
["Stress Disorders Post-Traumatic/th \[Therapy\]"](#)
["*Substance-Related Disorders/co \[Complications\]"](#)
["Substance-Related Disorders/px \[Psychology\]"](#)
[Treatment Outcome](#)
[Young Adult](#)

Source: MEDLINE

34. Drug use and HIV risk outcomes in opioid-injecting men in the Republic of Georgia: behavioral treatment + naltrexone compared to usual care.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(14-21), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Otiashvili D; Kirtadze I; O'Grady KE; Jones HE

Institution: Addiction Research Center, Union Alternative Republic of Georgia, Tbilisi 0177, Georgia.

Language: English

Abstract: BACKGROUND: To test the initial feasibility of a novel 22-week comprehensive intervention pairing behavioral treatment with naltrexone that aimed at engaging, retaining, and treating opioid-injecting men in the Republic of Georgia. METHODS: Forty opioid-injecting male and their drug-free female partners participated in a two-group randomized clinical trial at the field site of the Union Alternative Georgia, in Tbilisi, Republic of Georgia. The comprehensive intervention that paired behavioral treatment with naltrexone for the male participants (n=20) included counseling sessions using Motivational Interviewing for both the male participant and the couple, monetary incentives for drug abstinence, and research-supported detoxification followed by naltrexone treatment. Male participants in the usual care condition (n=20) had the opportunity to attend once-a-week individualized education sessions and upon request receive referrals to detoxification programs and aftercare that could or could not have included naltrexone. Outcome measures included entry into inpatient detoxification and naltrexone treatment, urine drug screening, reduction in illicit substance use, use of benzodiazepines, injection of buprenorphine, and needle and syringe sharing. RESULTS: The comprehensive intervention condition showed significantly more weekly urine samples negative for illicit opioids during weeks 1-22 (7.0 vs. 1.4; p<.001) and reported significant declines in use of benzodiazepines and injection of buprenorphine (both ps<.004). CONCLUSIONS: The first behavioral treatment randomized clinical trial in the

Republic of Georgia found that the use of tailored behavioral therapy paired with naltrexone is both feasible and efficacious for treating drug use and reducing HIV drug-risk behavior in Georgian men. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 16590-41-3 (Naltrexone)

Publication Type: Comparative Study; Journal Article; Randomized Controlled Trial; Research Support, N.I.H., Extramural

Subject Headings: [Adult](#)
["*Behavior Therapy/mt \[Methods\]"](#)
[Combined Modality Therapy](#)
[Counseling](#)
[Directive Counseling](#)
[Female](#)
[Georgia \(Republic\)](#)
["*HIV Infections/pc \[Prevention and Control\]"](#)
[Humans](#)
[Male](#)
["*Naltrexone/tu \[Therapeutic Use\]"](#)
["*Opioid-Related Disorders/th \[Therapy\]"](#)
[Patient Education as Topic](#)
[Risk-Taking](#)
["*Substance Abuse Intravenous/th \[Therapy\]"](#)
[Treatment Outcome](#)

Source: MEDLINE

35. The aldehyde dehydrogenase 2 gene is associated with heroin dependence.

Citation: Drug & Alcohol Dependence, January 2012, vol./is. 120/1-3(220-4), 0376-8716;1879-0046 (2012 Jan 1)

Author(s): Wang TY; Lee SY; Chen SL; Chen SH; Chu CH; Huang SY; Tzeng NS; Chang YH; Wang CL; Lee IH; Yeh TL; Yang YK; Lu RB

Institution: Department of Psychiatry, College of Medicine, National Cheng Kung University, Tainan, Taiwan.

Language: English

Abstract: BACKGROUND: Determining the influences of genes involved in metabolizing dopamine and encoding dopamine receptors, such as the aldehyde dehydrogenase 2 (ALDH2) and dopamine D2 receptor/ankyrin repeat and kinase domain containing 1 (DRD2/ANKK1) genes, is critical for understanding addictive behavior. Therefore, we investigated the association between the ALDH2 and DRD2/ANKK1 Taq IA polymorphisms and heroin dependence. METHODS: Heroin-dependent Han Chinese patients (250) and healthy controls (312) were recruited. ALDH2 and DRD2/ANKK1 Taq IA polymorphisms were genotyped. RESULTS: The frequency of ALDH2*1/*2 and *2/*2 genotypes was significantly higher in heroin-dependent patients than in controls, but the frequency of DRD2 Taq IA genotypes was not significantly different. Logistic regression analysis showed no significant interaction between ALDH2 and DRD2 Taq IA genotypes in patients. CONCLUSIONS: The ALDH2 polymorphism, but not the DRD2, was associated with heroin dependence. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Receptors, Dopamine D2); EC 1-2-1-3 (ALDH2 protein, human); EC 1-2-1-3 (Aldehyde Dehydrogenase); EC 2-7-1-37 (ANKK1 protein, human); EC 2-7-11-1 (Protein-Serine-Threonine Kinases)

Publication Type: Journal Article; Research Support, N.I.H., Extramural

Subject Headings: [Adult](#)

"*Aldehyde Dehydrogenase/ge [Genetics]"
 Alleles
 Case-Control Studies
 Female
 Genetic Association Studies
 Genotype
 "*Heroin Dependence/ge [Genetics]"
 Humans
 Logistic Models
 Male
 "Polymorphism Genetic/ge [Genetics]"
 "Protein-Serine-Threonine Kinases/ge [Genetics]"
 "Receptors Dopamine D2/ge [Genetics]"

Source: MEDLINE

36. Changing practitioner behavior and building capacity in tobacco cessation treatment: the TEACH project.

Citation: Patient Education & Counseling, January 2012, vol./is. 86/1(49-56), 0738-3991;1873-5134 (2012 Jan)

Author(s): Herie M; Connolly H; Voci S; Dragonetti R; Selby P

Institution: Nicotine Dependence Clinic, Addictions Program, Centre for Addiction and Mental Health, Toronto, Canada.

Language: English

Abstract: OBJECTIVE: To facilitate interprofessional knowledge transfer to practice by increasing treatment capacity of health care practitioners to deliver evidence-informed smoking cessation counseling.METHODS: TEACH (Training Enhancement in Applied Cessation Counseling and Health) combines diffusion of innovations with principles of adult learning to address the lack of system capacity to implement evidence-based smoking cessation treatments. Participants were professionals from 15 disciplines with commitment from their supervisor to implement the intervention. Pre- and post-training course evaluation surveys assessed the extent to which learning objectives were achieved and guided a continuous quality improvement process.RESULTS: Evaluation of 741 participants that attended the three-day Core Course from June 2007 to January 2009 revealed significant increases in pre- to post-training ratings of feasibility, importance, and confidence in using the intervention. In addition to attitudinal changes, practitioners made changes to practice behavior. At six months post-training, 55% of professionals were implementing the intervention and 91% engaged in knowledge transfer activities in their organizations/communities.CONCLUSION: Findings suggest that TEACH impacted clinical practice and may serve as a model for knowledge translation initiatives in other health behavior domains.PRACTICE IMPLICATIONS: These data demonstrate that it is feasible to operationalize interprofessional knowledge translation models to transfer research findings into practice. Copyright Copyright 2011. Published by Elsevier Ireland Ltd.

Country of Publication: Ireland

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: Clinical Competence
 Curriculum
 Diffusion of Innovation
 Education Medical Continuing
 Educational Measurement
 Educational Status
 *Evidence-Based Medicine
 Health Knowledge Attitudes Practice
 Humans
 Ontario
 Patient Care Team
 "*Physician's Practice Patterns/sn [Statistics and Numerical Data]"

*Physician-Patient Relations
 "**Program Development/mt [Methods]"
 Program Evaluation
 "**Smoking Cessation/mt [Methods]"
 "**Tobacco Use Disorder/pc [Prevention and Control]"

Source: MEDLINE

37. Does the effect go up in smoke? A randomized controlled trial of pictorial warnings on cigarette packaging.

Citation: Patient Education & Counseling, January 2012, vol./is. 86/1(77-83), 0738-3991;1873-5134 (2012 Jan)

Author(s): Schneider S; Gadinger M; Fischer A

Institution: Mannheim Institute of Public Health, Social and Preventive Medicine (MIPH), Mannheim Medical School, Heidelberg University, Mannheim, Germany.
 Teresa.Pawlikowska@warwick.ac.uk

Language: English

Abstract: OBJECTIVE: Placing a combination of a written warning and a graphic image on cigarette packaging (so called "pictorial warnings") is one of the WHO Framework Convention on Tobacco Control's most controversial recommendations. Our randomized controlled trial investigated if pictorial warnings lead to significantly higher motivation to quit, as compared to written warnings alone. METHODS: Four pictorial warnings were selected from the EU Commission's official image catalogue. Study arm 1 (44 adult smokers) viewed only the written warnings while study arm 2 (44 adult smokers) viewed the corresponding pictorial warnings. Self-affirmation was a second randomly manipulated factor, and nicotine dependence a quasi-experimental third factor. The main outcome measured was the motivation to quit, with fear intensity as one of the secondary outcomes. RESULTS: Pictorial warnings were associated with a significantly higher motivation to quit. A pictorial warning was also associated with higher fear intensity. The effect of warnings appears to be independent of nicotine dependence and self-affirmation. CONCLUSIONS: Nationwide implementation of pictorial warnings may be effective in increasing heavy smokers' motivation to quit. PRACTICE IMPLICATION: Due to the fact that perceived vulnerability, response and self-efficacy are not more strongly affected by pictorial warnings this effect may turn out to be short-term. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article; Randomized Controlled Trial

Subject Headings: Adolescent
 Adult
 Analysis of Variance
 Communication
 "Fear/px [Psychology]"
 Female
 Germany
 "**Health Education/mt [Methods]"
 Health Knowledge Attitudes Practice
 "**Health Promotion/mt [Methods]"
 Humans
 Male
 Models Psychological
 Motivation
 "Product Labeling/mt [Methods]"
 Product Packaging
 "**Public Health/mt [Methods]"
 Questionnaires
 "**Smoking/pc [Prevention and Control]"
 "Smoking/px [Psychology]"
 "**Smoking Cessation/mt [Methods]"

Social Marketing
 "*Tobacco Use Disorder/pc [Prevention and Control]"
 Young Adult

Source: MEDLINE

38. RCT of a client-centred, caseworker-delivered smoking cessation intervention for a socially disadvantaged population.

Citation: BMC Public Health, 2011, vol./is. 11/1(70), 1471-2458;1471-2458 (2011)
Author(s): Bonevski B; Paul C; D'Este C; Sanson-Fisher R; West R; Girgis A; Siahpush M; Carter R
Institution: Centre for Health Research & Psycho-oncology (CHeRP), Cancer Council NSW & University of Newcastle, Newcastle, Australia. Billie.Bonevski@newcastle.edu.au
Language: English

Abstract: BACKGROUND: Disadvantaged groups are an important target for smoking cessation intervention. Smoking rates are markedly higher among severely socially disadvantaged groups such as indigenous people, the homeless, people with a mental illness or drug and alcohol addiction, and the unemployed than in the general population. This proposal aims to evaluate the efficacy of a client-centred, caseworker delivered cessation support intervention at increasing validated self reported smoking cessation rates in a socially disadvantaged population. METHODS/DESIGN: A block randomised controlled trial will be conducted. The setting will be a non-government organisation, Community Care Centre located in New South Wales, Australia which provides emergency relief and counselling services to predominantly government income assistance recipients. Eligible clients identified as smokers during a baseline touch screen computer survey will be recruited and randomised by a trained research assistant located in the waiting area. Allocation to intervention or control groups will be determined by time periods with clients randomised in one-week blocks. Intervention group clients will receive an intensive client-centred smoking cessation intervention offered by the caseworker over two face-to-face and two telephone contacts. There will be two primary outcome measures obtained at one, six, and 12 month follow-up: 1) 24-hour expired air CO validated self-reported smoking cessation and 2) 7-day self-reported smoking cessation. Continuous abstinence will also be measured at six and 12 months follow up. DISCUSSION: This study will generate new knowledge in an area where the current information regarding the most effective smoking cessation approaches with disadvantaged groups is limited. TRIAL REGISTRATION NUMBER: ISRCTN: ISRCTN85202510.

Country of Publication: England

Publication Type: Journal Article; Randomized Controlled Trial; Research Support, Non-U.S. Gov't

Subject Headings: Adult
 Clinical Protocols
 Community Health Centers
 "Community Health Workers/og [Organization and Administration]"
 "Community Health Workers/st [Standards]"
 Cost-Benefit Analysis
 Counseling
 Female
 Follow-Up Studies
 Humans
 Male
 "New South Wales/ep [Epidemiology]"
 Outcome Assessment (Health Care)
 Patient Selection
 Patient-Centered Care
 Persuasive Communication
 "Poverty/ec [Economics]"
 "Poverty/lj [Legislation and Jurisprudence]"
 Psychometrics

Research Design
 "Smoking/ep [Epidemiology]"
 "*Smoking/pc [Prevention and Control]"
 "*Smoking Cessation/mt [Methods]"
 *Vulnerable Populations

Source: MEDLINE

Full Text: Available in *fulltext* at [BioMedCentral](#)
 Available in *fulltext* at [National Library of Medicine](#)
 Available in *fulltext* at [ProQuest](#)

39. Drug suicide: a sex-equal cause of death in 16 European countries.

Citation: BMC Public Health, 2011, vol./is. 11/1(61), 1471-2458;1471-2458 (2011)

Author(s): Varnik A; Sisask M; Varnik P; Wu J; Kolves K; Arensman E; Maxwell M; Reisch T; Gusmao R; van Audenhove C; Scheerder G; van der Feltz-Cornelis CM; Coffey C; Kopp M; Szekely A; Roskar S; Hegerl U

Institution: Estonian-Swedish Mental Health and Suicidology Institute; Estonian Centre of Behavioural and Health Sciences, Oie 39, Tallinn 11615, Estonia. airiv@online.ee

Language: English

Abstract: BACKGROUND: There is a lack of international research on suicide by drug overdose as a preventable suicide method. Sex- and age-specific rates of suicide by drug self-poisoning (ICD-10, X60-64) and the distribution of drug types used in 16 European countries were studied, and compared with other self-poisoning methods (X65-69) and intentional self-injury (X70-84). METHODS: Data for 2000-04/05 were collected from national statistical offices. Age-adjusted suicide rates, and age and sex distributions, were calculated. RESULTS: No pronounced sex differences in drug self-poisoning rates were found, either in the aggregate data (males 1.6 and females 1.5 per 100,000) or within individual countries. Among the 16 countries, the range (from some 0.3 in Portugal to 5.0 in Finland) was wide. 'Other and unspecified drugs' (X64) were recorded most frequently, with a range of 0.2-1.9, and accounted for more than 70% of deaths by drug overdose in France, Luxembourg, Portugal and Spain. Psychotropic drugs (X61) ranked second. The X63 category ('other drugs acting on the autonomic nervous system') was least frequently used. Finland showed low X64 and high X61 figures, Scotland had high levels of X62 ('narcotics and hallucinogens, not elsewhere classified') for both sexes, while England exceeded other countries in category X60. Risk was highest among the middle-aged everywhere except in Switzerland, where the elderly were most at risk. CONCLUSIONS: Suicide by drug overdose is preventable. Intentional self-poisoning with drugs kills as many males as females. The considerable differences in patterns of self-poisoning found in the various European countries are relevant to national efforts to improve diagnostics of suicide and appropriate specific prevention. The fact that vast majority of drug-overdose suicides came under the category X64 refers to the need of more detailed ICD coding system for overdose suicides is needed to permit better design of suicide-prevention strategies at national level.

Country of Publication: England

Publication Type: Comparative Study; Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Adolescent](#)
[Adult](#)
[Age Factors](#)
["Cause of Death/td \[Trends\]"](#)
["Europe/ep \[Epidemiology\]"](#)
[Female](#)
[Humans](#)
[International Classification of Diseases](#)
[Linear Models](#)
[Male](#)
[Middle Aged](#)
["Overdose/ep \[Epidemiology\]"](#)

"*Overdose/mo [Mortality]"
 "*Poisoning/ep [Epidemiology]"
 "Self-Injurious Behavior/ep [Epidemiology]"
 "*Self-Injurious Behavior/mo [Mortality]"
 "Self-Injurious Behavior/pc [Prevention and Control]"
 Sex Factors
 Socioeconomic Factors
 "Substance-Related Disorders/co [Complications]"
 "Substance-Related Disorders/ep [Epidemiology]"
 "Suicide/pc [Prevention and Control]"
 "*Suicide/sn [Statistics and Numerical Data]"

Source: MEDLINE

Full Text: Available in *fulltext* at [BioMedCentral](#)
 Available in *fulltext* at [National Library of Medicine](#)
 Available in *fulltext* at [ProQuest](#)

40. Regional drug user services in times of scarce financial resources: using a rapid assessment response approach to evaluate, plan, and prioritize essential services.

Citation: Substance Use & Misuse, February 2012, vol./is. 47/3(254-64), 1082-6084;1532-2491 (2012 Feb)

Author(s): Comiskey CM; O'Sullivan K; Milnes J

Institution: Trinity College Dublin, School of Nursing and Midwifery, Dublin, Ireland.
 catherine.comiskey@tcd.ie

Language: English

Abstract: The objective was to assess need, evaluate projects, and devise a roadmap for future provision given budget cuts. The analysis of 30 substance misuse services in towns and rural areas of Ireland was conducted in 2010. Analysis revealed that 24,315 (95% CI 12,928-40,629) individuals were using illegal drugs in 2006, 893 individuals were using opiates, opiate and cocaine use was increasing as was drug use amongst females. Evaluations demonstrated that not all services were meeting emerging needs, services lacked administrative support, and funding needed to be redirected. The RAR approach was useful for policy decisions and budget cuts in times of economic restraint.

Country of Publication: England

Publication Type: Journal Article

Subject Headings: "*Drug Users/sn [Statistics and Numerical Data]"
 "*Health Resources/sd [Supply and Distribution]"
 "*Health Resources/td [Trends]"
 "*Health Services Accessibility/sn [Statistics and Numerical Data]"
 "*Health Services Needs and Demand/sn [Statistics and Numerical Data]"
 Humans
 Ireland
 "Substance-Related Disorders/ep [Epidemiology]"
 "Substance-Related Disorders/pc [Prevention and Control]"
 "Substance-Related Disorders/th [Therapy]"
 *Substance-Related Disorders

Source: MEDLINE

41. Macrophages-mediated neurotoxic effects of intra-nigral manganese administration are attenuated by minocycline.

Citation: Neuroscience Letters, January 2012, vol./is. 506/1(136-40), 0304-3940;1872-7972 (2012 Jan 6)

Author(s): Ponzoni S

Institution: Departamento de Ciencias Fisiologicas, CCB, Universidade Estadual de Londrina, Caixa Postal 6001, CEP: 86051-970, Londrina, PR, Brazil. ponza@uel.br

Language: English

Abstract: The present study was designed to address the role of macrophages in Mn-induced neurotoxicity and to test the hypothesis that minocycline, a tetracycline derivative, attenuates the biochemical and morphological sequelae of Mn. Mn was unilaterally microinjected into rat nigra followed by systemic minocycline or saline administration 24h later, daily for 3 days. At 72h after the intranigral Mn microinjection, tyrosine hydroxylase immunostaining (TH-IS) was evaluated in the striatum, along with the number of macrophages (as indicated by CD11b immunostaining) in the substantia nigra. Mn significantly reduced striatal TH-IS, and causes an increased macrophage number at the lesion site when compared with the control group. The effects of Mn on striatal TH-IS and the number of macrophages at the lesion site were concentration dependent. Consistent with the stated hypothesis, minocycline significantly reduced the macrophage number in the lesion site and minimized the TH-IS striatal loss induced by Mn. These results indicate that an inflammatory response mediated by macrophages is induced by intranigral Mn microinjection, which is fully attenuated by minocycline treatment, suggesting that suppression of macrophage infiltration provides neuroprotection to dopaminergic neurons. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Antigens, CD11b); 0 (Neuroprotective Agents); 0 (Trace Elements); 10118-90-8 (Minocycline); 7439-96-5 (Manganese); EC 1-14-16-2 (Tyrosine 3-Monooxygenase)

Publication Type: Journal Article

Subject Headings: [Animals](#)
["Antigens CD11b/me \[Metabolism\]"](#)
["Cell Count/mt \[Methods\]"](#)
[Disease Models Animal](#)
[Dose-Response Relationship Drug](#)
["Macrophages/de \[Drug Effects\]"](#)
["*Macrophages/ph \[Physiology\]"](#)
[Male](#)
["*Manganese/to \[Toxicity\]"](#)
["*Minocycline/tu \[Therapeutic Use\]"](#)
["*Neuroprotective Agents/tu \[Therapeutic Use\]"](#)
["*Neurotoxicity Syndromes/et \[Etiology\]"](#)
["Neurotoxicity Syndromes/pa \[Pathology\]"](#)
[Rats](#)
["Substantia Nigra/de \[Drug Effects\]"](#)
["Substantia Nigra/pa \[Pathology\]"](#)
[Time Factors](#)
[Trace Elements](#)
["Tyrosine 3-Monooxygenase/me \[Metabolism\]"](#)

Source: MEDLINE

42. Managing the acutely ill adult with sickle cell disease.

Citation: British Journal of Nursing, January 0001, vol./is. 21/2(90-2, 95-6), 0966-0461;0966-0461 (2012 Jan 26-Feb 8)

Author(s): Brown M

Institution: University of West London, Brentford, London.

Language: English

Abstract: Sickle cell disease (SCD) is an autosomal recessively inherited condition, affecting the structure of the haemoglobin. SCD is a long-term chronic condition which is manifested by periods of acute painful sickling crisis, known as vaso-occlusive crisis (VOC) and is

the cause of 90% of sickle cell-related hospital admissions. SCD is one of the most common genetic conditions worldwide and in the UK there are approximately 12,500 people living with it (Streetly et al,1997; Howard et al, 2008), making it more common than cystic fibrosis, yet there still remains many challenges in managing these patients when they become acutely ill. Lack of awareness and understanding of the illness, concerns regarding addiction and limited attention to the psycho-social implications of the illness, leads to less than effective care for this patient group when they are hospitalized. The aims of this article are to outline the pathophysiology of SCD, identify the causes of VOC and discuss the key principles of nursing management for patients experiencing a VOC.

Country of Publication: England

CAS Registry Number: 0 (Analgesics)

Publication Type: Journal Article; Review

Subject Headings: [Acute Disease](#)
["Analgesics/tu \[Therapeutic Use\]"](#)
["*Anemia Sickle Cell/nu \[Nursing\]"](#)
["Anemia Sickle Cell/pp \[Physiopathology\]"](#)
["*Anemia Sickle Cell/th \[Therapy\]"](#)
[Humans](#)
[Inpatients](#)
[*Nursing Staff Hospital](#)
["Pain/dt \[Drug Therapy\]"](#)
["Pain/nu \[Nursing\]"](#)
[*Patient Discharge](#)

Source: MEDLINE

Full Text: Available in *fulltext* at [EBSCOhost](#)
Available in *print* at [Newcomb Library & Information Service](#)

43. Struggling to make ends meet: exploring pathways to understand why smokers in financial difficulties are less likely to quit successfully.

Citation: European Journal of Public Health, February 2012, vol./is. 22 Suppl 1/(41-8), 1101-1262;1464-360X (2012 Feb)

Author(s): Caleyachetty A; Lewis S; McNeill A; Leonardi-Bee J

Institution: UK Centre for Tobacco Control Studies, University of Nottingham, Nottingham, UK. amrit.caleyachetty@googlemail.com

Language: English

Abstract: **BACKGROUND:** In high-income countries, those with low-to-middle incomes have been observing stagnating median wages and marginal improvements in their living standards. Smokers in financial difficulties appear to be less likely to quit smoking. Understanding the reasons for this is essential to intervening to improve cessation outcomes in this population, and reduce smoking-related health inequalities.**METHODS:** We used longitudinal data from Waves 4 to 7 of the ITC Four Country Survey (ITC-4), and included those with data from at least two consecutive waves. Associations between financial difficulties and making a quit attempt, and quit success were analysed using generalised estimating equations, with adjustment for confounders. Mediation analysis was conducted to identify potential mediators of the observed effects of financial difficulties on cessation outcomes.**RESULTS:** Having financial difficulties had little impact on making quit attempts (adjusted OR 0.84, 95% CI 0.70-1.01). Smokers with financial difficulties were substantially less likely to succeed at quitting (adjusted OR 0.55, 95% CI 0.39-0.76); an effect which was consistent over the survey years. Among the potential mediators examined, those relating to cognition of health-related and quality of life-related consequences of smoking were the most important mediators, though the proportion of the effect mediated by the largest mediator was small (6.8%).**CONCLUSION:** Having financial difficulties remains an important barrier to smokers achieving quit success. This effect does not appear to be due to anticipated

factors such as reduced use of cessation services or treatment. Further research is required to determine strong mediators of the financial difficulties effect on quit success and to tailor more effective cessation programmes.

Country of Publication: England

Publication Type: Journal Article; Research Support, N.I.H., Extramural; Research Support, Non-U.S. Gov't

Subject Headings: [Attitude to Health](#)
["Australia/ep \[Epidemiology\]"](#)
["Canada/ep \[Epidemiology\]"](#)
[Comprehension](#)
["Developed Countries/ec \[Economics\]"](#)
["Great Britain/ep \[Epidemiology\]"](#)
[Humans](#)
[Longitudinal Studies](#)
[Motivation](#)
["*Poverty/sn \[Statistics and Numerical Data\]"](#)
["Smoking Cessation/ec \[Economics\]"](#)
["*Smoking Cessation/px \[Psychology\]"](#)
["Smoking Cessation/sn \[Statistics and Numerical Data\]"](#)
[Socioeconomic Factors](#)
["*Tobacco Use Disorder/ec \[Economics\]"](#)
["*Tobacco Use Disorder/px \[Psychology\]"](#)
["United States/ep \[Epidemiology\]"](#)

Source: MEDLINE

Full Text: Available in *fulltext* at [Oxford University Press](#)
 Available in *fulltext* at [Highwire Press](#)
 Available in *fulltext* at [Ovid](#)

44. The health and psychosocial burden of alcohol abuse.

Citation: British Journal of Nursing, January 0001, vol./is. 21/4(212-3), 0966-0461;0966-0461 (2012 Feb 23-Mar 7)

Author(s): Welton S; Higginson R

Institution: 3rd year Nursing Student, University of Glamorgan, Wales.

Language: English

Country of Publication: England

Publication Type: Journal Article

Subject Headings: ["*Alcoholism/ep \[Epidemiology\]"](#)
["*Alcoholism/nu \[Nursing\]"](#)
["Alcoholism/th \[Therapy\]"](#)
["Great Britain/ep \[Epidemiology\]"](#)
[*Health Policy](#)
[Humans](#)
[Psychology](#)
[*Public Health](#)
[*Specialties Nursing](#)

Source: MEDLINE

Full Text: Available in *fulltext* at [EBSCOhost](#)
 Available in *print* at [Newcomb Library & Information Service](#)

45. High density lipoprotein in patients with liver failure; relation to sepsis, adrenal function and outcome of illness.

Citation: Liver International, January 2012, vol./is. 32/1(128-36), 1478-3223;1478-3231 (2012 Jan)

Author(s): Etogo-Asse FE; Vincent RP; Hughes SA; Auzinger G; Le Roux CW; Wendon J; Bernal W

Institution: Liver Intensive Therapy Unit, Institute of Liver Studies, Kings College Hospital, London, UK.

Language: English

Abstract: BACKGROUND AND AIMS: High density lipoprotein (HDL) plays an important role in the transport of cholesterol to the adrenal gland for steroidogenesis and may have actions that modulate response to infection and critical illness. The clinical relevance of HDL level in patients with liver failure remains poorly characterised. METHODS: In 164 critically-ill patients with acute (ALF) and acute on chronic liver failure (AOCLF) we evaluated the relationship between HDL levels measured on admission to intensive care unit (ICU) and survival, predisposition to sepsis and adrenocortical function assessed through the cortisol response to short synacthen testing (SST). RESULTS: In acute liver failure and acute on chronic liver failure, high density lipoprotein levels were significantly lower in non-survivors ($P < 0.01$). Levels correlated closely with biochemical markers of liver function and the duration of liver failure. However, predictive accuracy was not superior to conventional markers and on multi-variate analysis did not show independent association with survival. Low HDL concentration was not associated with an increased incidence of sepsis either precipitating or complicating ICU admission. Evidence of adrenocortical insufficiency was present in more than half of patients undergoing SST and HDL level but not other lipid parameters correlated closely with cortisol increment after SST ($r = 0.364$, $P < 0.0001$). CONCLUSIONS: High density lipoprotein levels are low in patients with liver failure and reflect its severity. Levels are lower in non-survivors but do not offer an advantage as early indicators of prognosis over conventional markers. No evidence of a major predisposing role for infection was found, but findings suggest a close link to adrenal function. Copyright 2011 John Wiley & Sons A/S.

Country of Publication: England

CAS Registry Number: 0 (Lipoproteins, HDL)

Publication Type: Journal Article

Subject Headings:

- "*Adrenal Glands/me [Metabolism]"
- "Adrenal Glands/pp [Physiopathology]"
- "Adrenal Insufficiency/bl [Blood]"
- "*Adrenal Insufficiency/di [Diagnosis]"
- "Adrenal Insufficiency/mo [Mortality]"
- Adult
- Cohort Studies
- "Drug-Induced Liver Injury/bl [Blood]"
- "*Drug-Induced Liver Injury/di [Diagnosis]"
- "Drug-Induced Liver Injury/mo [Mortality]"
- "End Stage Liver Disease/bl [Blood]"
- "*End Stage Liver Disease/di [Diagnosis]"
- "End Stage Liver Disease/mo [Mortality]"
- Female
- "Great Britain/ep [Epidemiology]"
- Humans
- "*Lipoproteins HDL/bl [Blood]"
- "Liver Failure Acute/bl [Blood]"
- "*Liver Failure Acute/di [Diagnosis]"
- "Liver Failure Acute/mo [Mortality]"
- Male
- Middle Aged
- Prognosis
- Prospective Studies
- "Sepsis/bl [Blood]"
- "*Sepsis/di [Diagnosis]"

"Sepsis/mo [Mortality]"
Survival Rate

Source: MEDLINE
Full Text: Available in *fulltext* at [Wiley](#)

46. Illegally produced alcohol.

Citation: BMJ, 2012, vol./is. 344/(e1146), 0959-535X;1756-1833 (2012)
Author(s): McKee M; Adany R; Leon DA
Language: English
Country of Publication: England
CAS Registry Number: 64-17-5 (Ethanol)
Publication Type: Editorial
Subject Headings: "[*Alcohol-Related Disorders/ep \[Epidemiology\]](#)"
[*Alcoholic Beverages/sn \[Statistics and Numerical Data\]](#)"
[*Ethanol](#)
["Food Industry/is \[Instrumentation\]"](#)
[**Food Industry/lj \[Legislation and Jurisprudence\]"](#)
[Great Britain](#)
[Humans](#)
Source: MEDLINE
Full Text: Available in *print* at [Newcomb Library & Information Service](#)
Available in *fulltext* at [Highwire Press](#)

47. Confirmation of prior evidence of genetic susceptibility to alcoholism in a genome-wide association study of comorbid alcoholism and bipolar disorder.

Citation: Psychiatric Genetics, December 2011, vol./is. 21/6(294-306), 0955-8829;1473-5873 (2011 Dec)
Author(s): Lydall GJ; Bass NJ; McQuillin A; Lawrence J; Anjorin A; Kandaswamy R; Pereira A; Guerrini I; Curtis D; Vine AE; Sklar P; Purcell SM; Gurling HM
Institution: Department of Mental Health Sciences, University College London, Molecular Psychiatry Laboratory, Harvard Medical School, Boston, Massachusetts, USA.
Language: English
Abstract: OBJECTIVES: Alcoholism and affective disorders are both strongly comorbid and heritable. We have investigated the genetic comorbidity between bipolar affective disorder and alcoholism.METHODS: A genome-wide allelic association study of 506 patients from the University College London bipolar disorder case-control sample and 510 ancestrally matched supernormal controls. One hundred forty-three of the bipolar patients fulfilled the Research Diagnostic Criteria diagnosis of alcoholism. A total of 372 193 single nucleotide polymorphisms (SNPs) were genotyped. Genes previously shown to be associated with alcoholism and addiction phenotypes were then tested for association in the bipolar alcoholic sample using gene-wise permutation tests of all SNPs genotyped within a 50-kb region flanking each gene.RESULTS: Several central nervous system genes showed significant (P<0.05) gene-wise evidence of association with bipolar alcoholism. The genes implicated, which replicated genes previously shown to be associated with alcoholism were: cadherin 11, collagen type 11 alpha2, neuromedin U receptor 2, exportin7, and semaphorin-associated protein 5A. The SNPs most strongly implicated in bipolar alcoholism, but, which did not meet conventional genome-wide significance criteria were the insulin-like growth factor-binding protein 7, carboxypeptidase O, cerebellin 2, and the cadherin 12 genes.CONCLUSION: We have confirmed the role of some genes previously shown to be associated with alcoholism in the comorbid bipolar alcoholism subgroup. In this subgroup, bipolar disorder may lower the threshold for the phenotypic expression of these alcoholism susceptibility genes. We

also show that some genes may independently increase susceptibility to affective disorder and alcoholism.

Country of Publication: England

CAS Registry Number: 0 (Cadherins); 0 (Genetic Markers); 156621-71-5 (osteoblast cadherin)

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: ["*Alcoholism/ep \[Epidemiology\]"](#)
["*Alcoholism/ge \[Genetics\]"](#)
["*Bipolar Disorder/ep \[Epidemiology\]"](#)
["*Bipolar Disorder/ge \[Genetics\]"](#)
["Cadherins/ge \[Genetics\]"](#)
[Case-Control Studies](#)
[Comorbidity](#)
[Female](#)
[Genetic Markers](#)
[*Genetic Predisposition to Disease](#)
[*Genome-Wide Association Study](#)
[Humans](#)
["London/ep \[Epidemiology\]"](#)
[Male](#)
["Polymorphism Single Nucleotide/ge \[Genetics\]"](#)
[Reproducibility of Results](#)

Source: MEDLINE

48. Hepatoprotective effect and its possible mechanism of *Coptidis rhizoma* aqueous extract on carbon tetrachloride-induced chronic liver hepatotoxicity in rats.

Citation: Journal of Ethnopharmacology, December 2011, vol./is. 138/3(683-90), 0378-8741;1872-7573 (2011 Dec 8)

Author(s): Feng Y; Wang N; Ye X; Li H; Feng Y; Cheung F; Nagamatsu T

Institution: School of Chinese Medicine, The University of Hong Kong, Pokfulam, Hong Kong, PR China. yfeng@hku.hk

Language: English

Abstract: ETHNOPHARMACOLOGICAL RELEVANCE: *Coptidis rhizoma* is traditionally used for heat-clearing and toxic-scavenging and it belongs to liver meridian in Chinese medicine practice. Clinically, *Coptidis rhizoma* can be used for hepatic and biliary disorders, yet details in the therapies of liver diseases and underlying mechanism(s) remain unclear. Our previous study demonstrated that *Coptidis rhizoma* aqueous extract (CRAE) against CCl₄-induced acute liver damage was related to antioxidant property. In the present study, the protection of CRAE on chronic liver damage induced by carbon tetrachloride (CCl₄) in rats and its related mechanism were explored. MATERIALS AND METHODS: The CCl₄-induced chronic liver damage model was established, and CRAE's protective effect was examined. Serum aspartate aminotransferase (AST) and alanine aminotransferase (ALT) activity, serum and liver superoxide dismutase (SOD) activity were then measured. The histological changes were observed under microscopy and then computed in numerical score. The normal or damaged cells were isolated and related signaling pathway was evaluated. RESULT: Serum AST and ALT activities were significantly decreased in rats treated with different doses of CRAE, indicating its protective effect against CCl₄-induced chronic liver damage. Observation on serum SOD activity revealed that CRAE might act as an anti-oxidant agent against CCl₄-induced chronic oxidative stress. Histological study supported these observations. Erk1/2 inhibition may take part into CRAE's effect on preventing hepatocyte from apoptosis when exposed to oxidative stress. CONCLUSION: CRAE showed protective effect against CCl₄-induced chronic liver damage in rats and its potential as an agent in the treatment of chronic liver diseases by protecting hepatocyte from injury. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Coptidis rhizoma extract); 0 (Drugs, Chinese Herbal); 56-23-5 (Carbon Tetrachloride); EC 2-6-1-1 (Aspartate Aminotransferases); EC 2-6-1-2 (Alanine Transaminase); EC 3-4-22 (Caspase 3)

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: "Alanine Transaminase/bl [Blood]"
Animals
"Apoptosis/de [Drug Effects]"
"Aspartate Aminotransferases/bl [Blood]"
*Carbon Tetrachloride
"Caspase 3/me [Metabolism]"
"DNA Fragmentation/de [Drug Effects]"
"Drug-Induced Liver Injury/bl [Blood]"
"*Drug-Induced Liver Injury/dt [Drug Therapy]"
"Drug-Induced Liver Injury/pa [Pathology]"
"Drugs Chinese Herbal/an [Analysis]"
"*Drugs Chinese Herbal/tu [Therapeutic Use]"
"*Hepatocytes/de [Drug Effects]"
"Hepatocytes/me [Metabolism]"
"MAP Kinase Signaling System/de [Drug Effects]"
Male
Rats
Rats Sprague-Dawley

Source: MEDLINE

49. Novel use patterns of *Salvia divinorum*: unobtrusive observation using YouTube™.

Citation: Journal of Ethnopharmacology, December 2011, vol./is. 138/3(662-7), 0378-8741;1872-7573 (2011 Dec 8)

Author(s): Casselman I; Heinrich M

Institution: Southern Cross Plant Science, Centre for Phytochemistry and Pharmacology, Southern Cross University, Lismore, NSW, Australia. ivan.casselmann@scu.edu.au

Language: English

Abstract: UNLABELLED: ETHNOPHARMACOLOGICAL RELEVANCE AND AIMS: The traditional use of the Hallucinogenic sage, *Salvia divinorum* has been of ethnopharmacological interest for some time. This plant, endemic to Oaxaca Mexico and traditionally used by the Mazatec, is now utilized worldwide for its psychoactive effects. This use demonstrates a novel use pattern which is distinctly different from Mazatec use. This study offers a new methodology to study emerging global plant use and assesses the users' experience with it. The aim of this research was to develop a new methodology to collect and analyze archived data on the World Wide Web, specifically videos which depict *Salvia divinorum* use. METHODS: The basis of the methodology for this project was unobtrusive observation which allows the researcher to observe without influencing the event which is being observed. Qualitative, ethnographic data was used in conjunction with quantitative meta data collected by a customized web crawler programed to archive YouTube™ data. RESULTS: Using this methodology enabled us to understand reported uses and the users' experiences as expressed on the World Wide Web. The main result of this research was the documentation of a distinct, novel use pattern of *Salvia divinorum* which has developed outside of Oaxaca; a use pattern which differs in a number of ways from traditional, Mazatec use. The majority of the YouTube™ videos analyzed were found to present indications of a positive *Salvia divinorum* experience. This result highlighted the contradiction between ethnographic data and what is reported by the media. Finally the representation of *Salvia divinorum* on YouTube™ (and by inference the WWW as a whole) is a growing phenomena. CONCLUSIONS: While anthropological and more specifically medico-anthropological research has, for many years, embraced the dynamics of cultures, until recently, ethnopharmacological research has generally focused on 'traditional' plant use, failing to capture the dynamic elements of plant/human interaction and framing research in the past or as decontextualized largely descriptive

reports. Global migration and urban environments formed a basis for looking at the interplay of continuity and change. Such cultural dynamics are exacerbated by the opportunities which the WWW offers. Copyright Copyright 2011. Published by Elsevier Ireland Ltd.

Country of Publication: Ireland
CAS Registry Number: 0 (Hallucinogens)
Publication Type: Journal Article
Subject Headings: [Data Mining](#)
["Ethnopharmacology/mt \[Methods\]"](#)
[*Hallucinogens](#)
[Humans](#)
[*Internet](#)
[Mexico](#)
[Plant Leaves](#)
[*Salvia](#)
[*Substance-Related Disorders](#)
[*Video Recording](#)
Source: MEDLINE

50. Elder abuse and neglect in Ireland: results from a national prevalence survey.

Citation: Age & Ageing, January 2012, vol./is. 41/1(98-103), 0002-0729;1468-2834 (2012 Jan)
Author(s): Naughton C; Drennan J; Lyons I; Lafferty A; Treacy M; Phelan A; O'Loughlin A; Delaney L
Institution: UCD School of Nursing, Midwifery and Health Systems, UCD Health Sciences Centre, University College Dublin, Belfield, Dublin 4, Ireland. corina.naughton@ucd.ie
Language: English
Abstract: OBJECTIVE: To measure the 12-month prevalence of elder abuse and neglect in community-dwelling older people in Ireland and examine the risk profile of people who experienced mistreatment and that of the perpetrators. DESIGN: Cross-sectional general population survey. SETTING: Community. PARTICIPANTS: People aged 65 years or older living in the community. METHODS: Information was collected in face-to-face interviews on abuse types, socioeconomic, health, and social support characteristics of the population. Data were examined using descriptive statistics and logistic regression, odds ratios (OR) and 95% confidence intervals (95% CI) are presented. RESULTS: The prevalence of elder abuse and neglect was 2.2% (95% CI: 1.41-2.94) in the previous 12 months. The frequency of mistreatment type was financial 1.3%, psychological 1.2%, physical abuse 0.5%, neglect 0.3%, and sexual abuse 0.05%. In the univariate analysis lower income OR 2.39 (95% CI: 1.01-5.69), impaired physical health OR 3.41 (95% CI: 1.74-6.65), mental health OR 6.33 (95% CI: 3.33-12.0), and poor social support OR 4.91 (95% CI: 2.1-11.5) were associated with a higher risk of mistreatment but only social support and mental health remained independent predictors. Among perpetrators adult children (50%) were most frequently identified. Unemployment (50%) and addiction (20%) were characteristics of this group.

Country of Publication: England
Publication Type: Journal Article; Research Support, Non-U.S. Gov't
Subject Headings: [Adult](#)
[Aged](#)
[Aged 80 and over](#)
[Cross-Sectional Studies](#)
["*Elder Abuse/sn \[Statistics and Numerical Data\]"](#)
[Female](#)
[Geriatric Assessment](#)
[Humans](#)
["Ireland/ep \[Epidemiology\]"](#)

Male
 Prevalence
 Social Support
 "Substance-Related Disorders/ep [Epidemiology]"
 "Unemployment/sn [Statistics and Numerical Data]"

Source: MEDLINE

Full Text: Available in *fulltext* at *Oxford University Press*
 Available in *print* at *Newcomb Library & Information Service*

51. The UK takes action on alcohol.

Citation: Lancet, March 2012, vol./is. 379/9822(1172), 0140-6736;1474-547X (2012 Mar 31)

Author(s): anonymous

Language: English

Country of Publication: England

Publication Type: Editorial

Subject Headings: "Advertising as Topic/lj [Legislation and Jurisprudence]"
 "Alcohol Drinking/ec [Economics]"
 "Alcohol Drinking/lj [Legislation and Jurisprudence]"
 "*Alcohol Drinking/pc [Prevention and Control]"
 "*Alcohol-Related Disorders/pc [Prevention and Control]"
 "*Alcoholic Beverages/ec [Economics]"
 "Alcoholic Beverages/sd [Supply and Distribution]"
 "*Alcoholism/pc [Prevention and Control]"
 England
 "*Health Policy/lj [Legislation and Jurisprudence]"
 "*Health Promotion/lj [Legislation and Jurisprudence]"
 Humans
 Social Marketing
 "*State Medicine/lj [Legislation and Jurisprudence]"
 Wales

Source: MEDLINE

Full Text: Available in *fulltext* at *ProQuest*
 Available in *fulltext* at *Elsevier*
 Available in *print* at *Newcomb Library & Information Service*

52. Involvement of immune-related factors in diclofenac-induced acute liver injury in mice.

Citation: Toxicology, March 2012, vol./is. 293/1-3(107-14), 0300-483X;1879-3185 (2012 Mar 11)

Author(s): Yano A; Higuchi S; Tsuneyama K; Fukami T; Nakajima M; Yokoi T

Institution: Drug Metabolism and Toxicology, Faculty of Pharmaceutical Sciences, Kanazawa University, Kanazawa, Japan.

Language: English

Abstract: Drug-induced liver injury (DILI) is a major safety concern in drug development and clinical drug therapy. However, the underlying mechanism of DILI is little known. It is difficult to predict DILI in humans due to the lack of experimental animal models. Diclofenac, a non-steroidal anti-inflammatory drug rarely causes severe liver injury in human, but there is some evidence for immunoallergic idiosyncratic reactions. In this study, the mechanism of diclofenac-induced liver injury in mice was investigated. First, we established the dosing condition for liver injury in normal mice. Plasma ALT and AST levels were significantly increased in diclofenac-administered (80 mg/kg, i.p.) mice in a dose- and time-dependent manner. Among several interleukins (ILs) and chemokines, mRNA expression of helper T (Th) 17 cell-mediated factors, such as retinoid orphan receptor (ROR)-gammat, and signal transducers and activators of transcription factor (STAT) 3 in the liver, and the plasma IL-17 level were significantly increased.

Neutralization of IL-17 tended to suppress the hepatotoxicity of diclofenac, suggesting that IL-17 was partly involved. Gadolinium chloride (GdCl₃) administration demonstrated that Kupffer cells are not likely to be involved in diclofenac hepatotoxicity. Hepatic expressions of IL-1beta mRNA and plasma IL-1beta were significantly increased soon after the diclofenac administration. Then, the results of an in vivo neutralization study of IL-1beta suggested that IL-1beta was involved early in the time of pathogenesis of the diclofenac-induced liver injury. In conclusion, we firstly developed a diclofenac-induced acute liver injury model in normal mice, and the involvement of IL-17 and IL-1beta was clarified. Copyright Copyright 2012 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Anti-Inflammatory Agents, Non-Steroidal); 0 (Interleukin-17); 0 (Interleukin-1beta); 0 (RNA, Messenger); 15307-86-5 (Diclofenac)

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Animals](#)
["Anti-Inflammatory Agents Non-Steroidal/ad \[Administration and Dosage\]"](#)
["*Anti-Inflammatory Agents Non-Steroidal/ae \[Adverse Effects\]"](#)
["Apoptosis/de \[Drug Effects\]"](#)
["Diclofenac/ad \[Administration and Dosage\]"](#)
["*Diclofenac/ae \[Adverse Effects\]"](#)
[Disease Models Animal](#)
[Dose-Response Relationship Drug](#)
["*Drug-Induced Liver Injury/im \[Immunology\]"](#)
["Drug-Induced Liver Injury/me \[Metabolism\]"](#)
["Drug-Induced Liver Injury/pa \[Pathology\]"](#)
["Drug-Induced Liver Injury/pp \[Physiopathology\]"](#)
[Female](#)
["Gene Expression Regulation/de \[Drug Effects\]"](#)
[Injections Intraperitoneal](#)
["Interleukin-17/ai \[Antagonists and Inhibitors\]"](#)
["Interleukin-17/bl \[Blood\]"](#)
["Interleukin-17/ge \[Genetics\]"](#)
["Interleukin-17/me \[Metabolism\]"](#)
["Interleukin-1beta/ai \[Antagonists and Inhibitors\]"](#)
["Interleukin-1beta/bl \[Blood\]"](#)
["Interleukin-1beta/ge \[Genetics\]"](#)
["*Interleukin-1beta/me \[Metabolism\]"](#)
["Kupffer Cells/de \[Drug Effects\]"](#)
["Kupffer Cells/im \[Immunology\]"](#)
["Liver/de \[Drug Effects\]"](#)
["Liver/me \[Metabolism\]"](#)
["Liver/pa \[Pathology\]"](#)
["Liver/pp \[Physiopathology\]"](#)
[Mice](#)
[Mice Inbred BALB C](#)
["Necrosis/ci \[Chemically Induced\]"](#)
["RNA Messenger/bl \[Blood\]"](#)
["Th17 Cells/de \[Drug Effects\]"](#)
["Th17 Cells/im \[Immunology\]"](#)
[Time Factors](#)

Source: MEDLINE

53. Cytarabine induced cerebellar neuronal damage in juvenile rat: correlating neurobehavioral performance with cellular and genetic alterations.

Citation: Toxicology, March 2012, vol./is. 293/1-3(41-52), 0300-483X;1879-3185 (2012 Mar 11)

Author(s): Patel RS; Rachamalla M; Chary NR; Shera FY; Tikoo K; Jena G

Institution:	Facility for Risk Assessment & Intervention Studies, Department of Pharmacology and Toxicology, National Institute of Pharmaceutical Education and Research, Sector-67, S.A.S. Nagar, Punjab 160062, India. ronak2388@gmail.com
Language:	English
Abstract:	<p>Cytosine arabinoside (Ara-C), a pyrimidine analogue induces cerebellar dysfunction and behavioral abnormalities. Although many in vitro experiments have been conducted in the past demonstrating the lethal potential of Ara-C to cerebellar neurons, there is a paucity of literature available regarding the effects of Ara-C on the cellular and genetic material of cerebellum and its subsequent influence on the neurobehavioral performance in vivo. Rats were treated with Ara-C at the dose levels 50, 100 and 200mg/kg/day for 5 and 14 days by intraperitoneal (i.p.) route. Endpoints of the evaluation included food and water intake, body and organ weight, behavioral parameters, histopathology, oxidative stress, DNA damage, apoptosis, expression of p53, caspase-3 and calbindin D-28K (calbindin) as well as histone acetylation and methylation. Ara-C treatment for 14 days significantly decreased the food and water intake, body weight gain and brain weight in rat as compared to the control. Alterations in various behavioral parameters were observed, indicating the impaired cerebellar function. Further, cellular abnormalities in the cerebellum such as Purkinje cell misalignment and granule cell cytotoxicity were observed. Positive correlation was observed between Ara-C induced disturbance in the motor performance and the Purkinje cell loss in rat cerebellum. Moreover, Ara-C treatment significantly increased the oxidative stress, DNA damage, TUNEL positive cells, p53 and caspase-3 positive cells in the rat cerebellum. Unlike short-term treatment, long-term Ara-C treatment significantly reduced calbindin expression in the cerebellum. Apart from this, 14 days Ara-C treatment led to significant alterations in the histone acetylation and methylation in the cerebellum, while in 5 days treatment no such alterations were observed. Present results indicated that Ara-C, by inducing oxidative stress mediated DNA damage, executes neuronal apoptosis which is accompanied by an increase in the p53 and caspase-3, but decrease in the calbindin expression. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.</p>
Country of Publication:	Ireland
CAS Registry Number:	0 (Antimetabolites, Antineoplastic); 0 (Calcium-Binding Protein, Vitamin D-Dependent); 0 (Histones); 0 (Nerve Tissue Proteins); 0 (Tumor Suppressor Protein p53); 0 (calbindin); 147-94-4 (Cytarabine); EC 3-4-22 (Casp3 protein, rat); EC 3-4-22 (Caspase 3)
Publication Type:	Journal Article; Research Support, Non-U.S. Gov't
Subject Headings:	<p>Animals "Antimetabolites Antineoplastic/ad [Administration and Dosage]" "*Antimetabolites Antineoplastic/ae [Adverse Effects]" "Apoptosis/de [Drug Effects]" "Behavior Animal/de [Drug Effects]" "Calcium-Binding Protein Vitamin D-Dependent/me [Metabolism]" "Caspase 3/me [Metabolism]" "*Cerebellum/de [Drug Effects]" "Cerebellum/me [Metabolism]" "Cerebellum/pa [Pathology]" "Cytarabine/ad [Administration and Dosage]" "*Cytarabine/ae [Adverse Effects]" DNA Damage Dose-Response Relationship Drug "Histones/me [Metabolism]" Male "Nerve Tissue Proteins/me [Metabolism]" "*Neurotoxicity Syndromes/me [Metabolism]" "*Neurotoxicity Syndromes/pa [Pathology]" "Organ Size/de [Drug Effects]" "Oxidative Stress/de [Drug Effects]" "*Psychomotor Performance/de [Drug Effects]" "*Purkinje Cells/de [Drug Effects]"</p>

"Purkinje Cells/me [Metabolism]"
 "Purkinje Cells/pa [Pathology]"
 Random Allocation
 Rats
 Rats Sprague-Dawley
 "Tumor Suppressor Protein p53/me [Metabolism]"

Source: MEDLINE

54. Does smoking kill? A study of death certification and smoking.

Citation: Journal of Clinical Pathology, February 2012, vol./is. 65/2(129-32), 0021-9746;1472-4146 (2012 Feb)

Author(s): Proctor I; Sharma V; Khoshzaban M; Winstanley A

Institution: Department of Pathology, University College London, London, UK. ian.proctor@nhs.net

Language: English

Abstract: AIM: To assess how frequently smoking is cited as a cause of death (COD) on death certificates.METHODS: A retrospective study of 2128 death certificates and 236 postmortem reports issued at a large teaching hospital between 2003 and 2009.RESULTS: Smoking was identified as the underlying COD on only 2 (0.1%) death certificates and included in part II of the death certificate on 10 (0.5%). The two death certificates citing smoking as the underlying COD were in cases of lung cancer and chronic obstructive pulmonary disease. The study included 279 deaths in which these diagnoses were cited on the death certificate and in the majority of these cases the deceased was a smoker or ex-smoker. A review of postmortem reports from the same period failed to identify a single case in which the pathologist cited smoking as causing or contributing to death. In marked contrast to smoking, 57.4% (vs 0.5%) of death certificates, which included diagnoses linked to alcohol use, cited alcohol in part I of the death certificate.CONCLUSION: This study demonstrates that smoking is rarely cited on death certificates, even in cases where the causal link with smoking is very strong. There are many reasons why smoking is not cited on death certificates. One frequently cited reason is the reluctance of doctors to stigmatise the deceased. Interestingly, such reluctance did not extend to citing alcohol as a COD. By not recording smoking on death certificates doctors are failing to gather important epidemiological and pathological data.

Country of Publication: England

Publication Type: Journal Article

Subject Headings: "Alcoholism/mo [Mortality]"
 *Cause of Death
 *Death Certificates
 Humans
 "London/ep [Epidemiology]"
 Retrospective Studies
 "**Smoking/mo [Mortality]"

Source: MEDLINE

Full Text: Available in *fulltext* at [Highwire Press](#)

55. Icon and user interface design for emergency medical information systems: a case study.

Citation: International Journal of Medical Informatics, January 2012, vol./is. 81/1(29-35), 1386-5056;1872-8243 (2012 Jan)

Author(s): Salman YB; Cheng HI; Patterson PE

Institution: Software Engineering Dept., Faculty of Engineering, Bahcesehir University, Turkey. ysalman@bahcesehir.edu.tr

Language: English

Abstract: A usable medical information system should allow for reliable and accurate interaction between users and the system in emergencies. A participatory design approach was used to develop a medical information system in two Turkish hospitals. The process consisted of task and user analysis, an icon design survey, initial icon design, final icon design and evaluation, and installation of the iconic medical information system with the icons. We observed work sites to note working processes and tasks related to the information system and interviewed medical personnel. Emergency personnel then participated in the design process to develop a usable graphical user interface, by drawing icon sketches for 23 selected tasks. Similar sketches were requested for specific tasks such as family medical history, contact information, translation, addiction, required inspections, requests and applications, and nurse observations. The sketches were analyzed and redesigned into computer icons by professional designers and the research team. A second group of physicians and nurses then tested the understandability of the icons. The user interface layout was examined and evaluated by system users, followed by the system's installation. Medical personnel reported the participatory design process was interesting and believed the resulting designs would be more familiar and friendlier. Copyright Copyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

Publication Type: Journal Article

Subject Headings: [*Computer Graphics](#)
["*Emergency Service Hospital/og \[Organization and Administration\]"](#)
[*Hospital Information Systems](#)
[Task Performance and Analysis](#)
[Turkey](#)
[*User-Computer Interface](#)

Source: MEDLINE

56. Do psychiatric inpatients know their rights? A re-audit on information given to inpatients at a London mental health trust about their rights and admission to hospital.

Citation: Medicine, Science & the Law, January 2012, vol./is. 52/1(36-9), 0025-8024;0025-8024 (2012 Jan)

Author(s): Lomax GA; Raphael F; Pagliero J; Patel R

Institution: St George's Mental Health Trust, Springfield University Hospital, London SW19 2RY, UK. alice_lomax@hotmail.com

Language: English

Abstract: This re-audit assessed whether wards at South West London and St Georges' mental health trust (SWLSTG) met agreed standards regarding informing inpatients about their legal status in hospital and rights, following an initial audit in 2009. Three general adult wards were re-audited, and other general and specialist wards (addictions, eating disorders, deaf services and obsessive compulsive disorder) were added. One hundred and five people (61 informal, 44 detained under the Mental Health Act 1983, revised 2007) on 10 wards were interviewed using an agreed proforma. The re-audit of wards A-C showed improvement: 81.3% of informal inpatients were aware of their legal status, versus 54.2% in 2009 ($P = 0.101$). Including new wards D-K, 90.2% knew their status ($P = 0.0002$). Of the informal patients, 65.6% knew they could refuse treatment ($P = 0.0184$) (on wards A-C, 68.8%, $P = 0.105$) versus 37.5% in 2009. Despite some improvement, the patient experience of informal admission or detention in hospital still sometimes crosses legal boundaries. This audit highlights the need to improve awareness of patient rights and demonstrated how local presentation of audit improves practice.

Country of Publication: England

Publication Type: Journal Article

Subject Headings: [Adult](#)
[Female](#)
[Humans](#)

"*Inpatients/lj [Legislation and Jurisprudence]"
 London
 Male
 Medical Audit
 "Mental Disorders/th [Therapy]"
 "Mental Health Services/lj [Legislation and Jurisprudence]"
 "*Patient Rights/lj [Legislation and Jurisprudence]"
 *Psychiatric Department Hospital

Source: MEDLINE

57. Laws to detain individuals with substance dependency: breaching human rights or restoring health?.

Citation: Journal of Law & Medicine, December 2011, vol./is. 19/2(225-31), 1320-159X;1320-159X (2011 Dec)

Author(s): McSherry B; Lenthall S

Institution: Monash University. Bernadette.McSherry@monash.edu

Language: English

Abstract: At the turn of the 20th century in the United Kingdom and Australia, legislation was introduced to detain and treat "inebriates". Since that time, variations of such laws have continued to exist. This column examines current laws in Australia and New Zealand with a particular focus on recent law reform efforts in New South Wales and Victoria. The column raises some of the issues with these laws in relation to breaching human rights for the purpose of treatment.

Country of Publication: Australia

Publication Type: Journal Article

Subject Headings: Australia
 "*Human Rights/lj [Legislation and Jurisprudence]"
 Humans
 "*Institutionalization/lj [Legislation and Jurisprudence]"
 New Zealand
 Police
 "*Prisoners/lj [Legislation and Jurisprudence]"
 Substance Abuse Treatment Centers
 "*Substance-Related Disorders/rh [Rehabilitation]"

Source: MEDLINE

58. Drug-related deaths with evidence of intracorporeal drug concealment at autopsy: five case reports.

Citation: American Journal of Forensic Medicine & Pathology, December 2011, vol./is. 32/4(314-8), 0195-7910;1533-404X (2011 Dec)

Author(s): Wilcher G

Institution: Anatomy Dissection Laboratory, Gross Anatomy Support Unit, School of Medical Sciences, University of New South Wales, Sydney, Australia. fourensic@hotmail.com

Language: English

Abstract: Intracorporeal concealment of illicit drugs is a rare observation at coronial autopsy examinations. The article reports 5 cases of accidental drug overdoses at the Westmead Coronial Morgue, Sydney New South Wales, over a 6-year period with evidence of intracorporeal drug concealment known as body packing or body stuffing. Three different forms of anatomic concealment of drugs are illustrated, Case 2 involving therapeutic medication in the form of glass ampoules for parenteral injection not previously reported. Three deaths were the result of acute toxicity due to polydrug abuse rather than as a consequence of the body packing behavior and rupture of the drug packaging, with the intracorporeal drug concealments an adjunct finding at the autopsy examinations. The cause of death in Case 3 was the direct result of acute cocaine intoxication due to rupture of drug packages in the rectum and mucosal absorption. The article details forensic

sociological aspects of drug concealment and subcultural group human behavior that can assist in providing information for the initiation of investigations.

Country of Publication: United States

CAS Registry Number: 0 (Narcotics); 0 (Street Drugs); 12794-10-4 (Benzodiazepines); 50-36-2 (Cocaine); 561-27-3 (Heroin); 76-99-3 (Methadone)

Publication Type: Case Reports; Journal Article

Subject Headings: [Adult](#)
[Anal Canal](#)
["Benzodiazepines/po \[Poisoning\]"](#)
["Cocaine/po \[Poisoning\]"](#)
[*Crime](#)
[Forensic Pathology](#)
[Forensic Toxicology](#)
[Foreskin](#)
["Heroin/po \[Poisoning\]"](#)
[Humans](#)
[Male](#)
["Methadone/po \[Poisoning\]"](#)
[Middle Aged](#)
["Narcotics/po \[Poisoning\]"](#)
[Neck](#)
[Overdose](#)
[Penis](#)
[Rectum](#)
[*Street Drugs](#)
["*Substance-Related Disorders/co \[Complications\]"](#)

Source: MEDLINE

59. Brucellosis acquired by eating imported cheese.

Citation: Journal of Paediatrics & Child Health, November 2011, vol./is. 47/11(840-1), 1034-4810;1440-1754 (2011 Nov)

Author(s): Brough HA; Solomon AW; Wall RA; Isaza F; Pasvol G

Institution: Department of Paediatrics, Northwick Park Hospital, Harrow, United Kingdom.

Language: English

Abstract: Pyrexia of unknown origin is an important clinical presentation in both paediatric and adult medicine. We present a case of pyrexia of unknown origin in a 14 year-old boy which turned out to be due to infection with *Brucella melitensis*, despite the patient not having left Great Britain - an officially brucellosis-free country - in six years. Repeated history-taking provided a clue to the diagnosis. Copyright 2011 The Authors. Journal of Paediatrics and Child Health Copyright 2011 Paediatrics and Child Health Division (Royal Australasian College of Physicians).

Country of Publication: Australia

Publication Type: Case Reports; Journal Article

Subject Headings: [Adolescent](#)
["Brucellosis/co \[Complications\]"](#)
["Brucellosis/di \[Diagnosis\]"](#)
["*Brucellosis/et \[Etiology\]"](#)
["*Cheese/mi \[Microbiology\]"](#)
["Cheese/po \[Poisoning\]"](#)
["Fever/et \[Etiology\]"](#)
[*Food Contamination](#)
["Foodborne Diseases/co \[Complications\]"](#)
["Foodborne Diseases/di \[Diagnosis\]"](#)
[Humans](#)

Male
Tomography X-Ray Computed

Source: MEDLINE

Full Text: Available in *fulltext* at *Wiley*

60. Robert Garrett, Tasmanian penal colony surgeon: alcoholism, medical misadventure and the penal colony of Sarah Island.

Citation: Journal of the Royal College of Physicians of Edinburgh, September 2011, vol./is. 41/3(256-62), 1478-2715;2042-8189 (2011 Sep)

Author(s): Stride P

Institution: University of Queensland School of Medicine, Redcliffe Hospital, Queensland, Australia. peter_stride@health.qld.gov.au

Language: English

Abstract: Robert Garrett emigrated from Scotland to Van Diemen's Land (now Tasmania) in 1822. Within a few months of arrival he was posted to the barbaric penal colony in Macquarie Harbour, known as Sarah Island. His descent into alcoholism, medical misadventure and premature death were related to his largely unsupported professional environment and were, in many respects, typical of those subjected to this experience.

Country of Publication: Scotland

Publication Type: Biography; Historical Article; Journal Article

Subject Headings: "Alcoholism/hi [History]"
"Emigration and Immigration/hi [History]"
"*General Surgery/hi [History]"
History 19th Century
Humans
"Prisoners/hi [History]"
"*Prisons/hi [History]"
"*Professional Misconduct/hi [History]"
Scotland
Tasmania

Source: MEDLINE

Full Text: Available in *print* at *Newcomb Library & Information Service*

61. Seeing through the alcohol statistics haze.

Citation: BMJ, 2012, vol./is. 344/(e1273), 0959-535X;1756-1833 (2012)

Author(s): Hawkes N

Institution: nigel.hawkes1@btinternet.com

Language: English

Country of Publication: England

Publication Type: Journal Article

Subject Headings: "Alcohol Drinking/td [Trends]"
"Alcohol-Related Disorders/ec [Economics]"
"*Alcohol-Related Disorders/ep [Epidemiology]"
*Clinical Coding
"Great Britain/ep [Epidemiology]"
"Hospitalization/ec [Economics]"
"*Hospitalization/sn [Statistics and Numerical Data]"
Humans
Statistics as Topic

Source: MEDLINE

Full Text: Available in *print* at [Newcomb Library & Information Service](#)
Available in *fulltext* at [Highwire Press](#)

62. A one-year monitoring of nicotine use in sport: frontier between potential performance enhancement and addiction issues.

Citation: Forensic Science International, December 2011, vol./is. 213/1-3(73-84), 0379-0738;1872-6283 (2011 Dec 10)

Author(s): Marclay F; Grata E; Perrenoud L; Saugy M

Institution: Swiss Laboratory for Doping Analyses, University Center of Legal Medicine, Geneva and Lausanne, Centre Hospitalier Universitaire Vaudois and University of Lausanne, Ch. des Croisettes 22, 1066 Epalinges, Switzerland. Francois.Marclay@chuv.ch

Language: English

Abstract: Tobacco consumption is a global epidemic responsible for a vast burden of disease. With pharmacological properties sought-after by consumers and responsible for addiction issues, nicotine is the main reason of this phenomenon. Accordingly, smokeless tobacco products are of growing popularity in sport owing to potential performance enhancing properties and absence of adverse effects on the respiratory system. Nevertheless, nicotine does not appear on the 2011 World Anti-Doping Agency (WADA) Prohibited List or Monitoring Program by lack of a comprehensive large-scale prevalence survey. Thus, this work describes a one-year monitoring study on urine specimens from professional athletes of different disciplines covering 2010 and 2011. A method for the detection and quantification of nicotine, its major metabolites (cotinine, trans-3-hydroxycotinine, nicotine-N'-oxide and cotinine-N-oxide) and minor tobacco alkaloids (anabasine, anatabine and nornicotine) was developed, relying on ultra-high pressure liquid chromatography coupled to triple quadrupole mass spectrometry (UHPLC-TQ-MS/MS). A simple and fast dilute-and-shoot sample treatment was performed, followed by hydrophilic interaction chromatography-tandem mass spectrometry (HILIC-MS/MS) operated in positive electrospray ionization (ESI) mode with multiple reaction monitoring (MRM) data acquisition. After method validation, assessing the prevalence of nicotine consumption in sport involved analysis of 2185 urine samples, accounting for 43 different sports. Concentrations distribution of major nicotine metabolites, minor nicotine metabolites and tobacco alkaloids ranged from 10 (LLOQ) to 32,223, 6670 and 538 ng/mL, respectively. Compounds of interest were detected in trace levels in 23.0% of urine specimens, with concentration levels corresponding to an exposure within the last three days for 18.3% of samples. Likewise, hypothesizing conservative concentration limits for active nicotine consumption prior and/or during sport practice (50 ng/mL for nicotine, cotinine and trans-3-hydroxycotinine and 25 ng/mL for nicotine-N'-oxide, cotinine-N-oxide, anabasine, anatabine and nornicotine) revealed a prevalence of 15.3% amongst athletes. While this number may appear lower than the worldwide smoking prevalence of around 25%, focusing the study on selected sports highlighted more alarming findings. Indeed, active nicotine consumption in ice hockey, skiing, biathlon, bobsleigh, skating, football, basketball, volleyball, rugby, American football, wrestling and gymnastics was found to range between 19.0 and 55.6%. Therefore, considering the adverse effects of smoking on the respiratory tract and numerous health threats detrimental to sport practice at top level, likelihood of smokeless tobacco consumption for performance enhancement is greatly supported. Copyright ACopyright 2011 Elsevier Ireland Ltd. All rights reserved.

Country of Publication: Ireland

CAS Registry Number: 0 (Alkaloids); 0 (Performance-Enhancing Substances); 0 (Pyridines); 27323-64-4 (hydroxycotinine); 36508-80-2 (cotinine-N-oxide); 486-56-6 (Cotinine); 494-52-0 (Anabasine); 54-11-5 (Nicotine); 5746-86-1 (nornicotine); 581-49-7 (anatabine)

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: ["Alkaloids/ur \[Urine\]"](#)
["Anabasine/ur \[Urine\]"](#)
[*Athletes](#)
[Chromatography Liquid](#)

"Cotinine/aa [Analogues and Derivatives]"
 "Cotinine/ur [Urine]"
 Doping in Sports
 Humans
 Mass Spectrometry
 "Nicotine/aa [Analogues and Derivatives]"
 "*Nicotine/ur [Urine]"
 "Performance-Enhancing Substances/ur [Urine]"
 "Pyridines/ur [Urine]"
 "Smoking/ur [Urine]"
 Spectrometry Mass Electrospray Ionization
 "*Tobacco Smokeless/an [Analysis]"

Source: MEDLINE

63. Recent advances in opioid prescription for chronic non-cancer pain.

Citation: Postgraduate Medical Journal, February 2012, vol./is. 88/1036(66-72), 0032-5473;1469-0756 (2012 Feb)

Author(s): Snidvongs S; Mehta V

Institution: Pain and Anaesthesia Research Centre, Barts and The London NHS Trust, West Smithfield, London EC1A 7BE, UK. saz@lookrai.demon.co.uk

Language: English

Abstract: Chronic pain is pain that persists past the normal time of healing, and is seen as a common problem with a significant socioeconomic impact. Pharmacological management for chronic non-cancer pain also involves the prescription of opioids, with the aim of an improved quality of life for the patient. New guidelines have been published to aid prescribing clinicians improve opioid safety and patient care, and include recommendations on when to refer patients to a pain specialist. In recent years there has been a rapid increase in opioid prescription in the UK and USA, prompting further concern regarding opioid abuse and side effects. Opioid use may also result in physical dependence and tolerance. Earlier recognition and diagnosis of unwanted effects of long-term opioid use is needed, such as opioid induced suppression of the hypothalamic-pituitary-gonadal axis, and opioid induced immunosuppression. Patients may themselves discontinue opioids, however, due to minor side effects. Recent advances in opioid prescription include the increasing use of transdermal preparations and extended release, oral, once daily preparations. New formulations of existing drugs have been developed, as well as a new chemical entity. Abuse deterrent formulations and delivery systems may prevent the artificial acceleration of drug delivery and reduce the potential for opioid addiction. Overdose concerns and the potential for fatal overdose may necessitate mandatory training for all clinicians who prescribe opioids. Despite the widespread use of opioids in the management of chronic non-cancer pain, significant research gaps remain. An improvement in the evidence base for its prescription is required.

Country of Publication: England

CAS Registry Number: 0 (3-(3-dimethylamino-1-ethyl-2-methylpropyl)phenol); 0 (Analgesics, Opioid); 0 (Phenols)

Publication Type: Journal Article; Review

Subject Headings: "*Analgesics Opioid/ad [Administration and Dosage]"
 "Analgesics Opioid/ae [Adverse Effects]"
 "*Analgesics Opioid/tu [Therapeutic Use]"
 "*Chronic Pain/dt [Drug Therapy]"
 Disease Management
 Drug Tolerance
 Humans
 Patient Compliance
 Phenols

Quality of Life
Substance-Related Disorders

Source: MEDLINE

Full Text: Available in *fulltext* at *Highwire Press*

64. Seeing through the alcohol statistics haze.

Citation: BMJ, 2012, vol./is. 344/(e1273), 0959-535X;1756-1833 (2012)

Author(s): Hawkes N

Institution: nigel.hawkes1@btinternet.com

Language: English

Country of Publication: England

Publication Type: Journal Article

Subject Headings: "Alcohol Drinking/td [Trends]"
"Alcohol-Related Disorders/ec [Economics]"
"*Alcohol-Related Disorders/ep [Epidemiology]"
*Clinical Coding
"Great Britain/ep [Epidemiology]"
"Hospitalization/ec [Economics]"
"*Hospitalization/sn [Statistics and Numerical Data]"
Humans
Statistics as Topic

Source: MEDLINE

Full Text: Available in *print* at *Newcomb Library & Information Service*
Available in *fulltext* at *Highwire Press*