

# Search Results

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## Search History

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

## 1. Recovery journeys of counselors and clients: A case study of the therapeutic alliance in a drug treatment and rehabilitation center in Malaysia.

- Citation:** Dissertation Abstracts International Section A: Humanities and Social Sciences, 2014, vol./is. 74/9-A(E)(No Pagination Specified), 0419-4209 (2014)
- Author(s):** Amat, Mohamad Isa
- Institution:** U Wyoming, US
- Language:** English
- Abstract:** The therapeutic alliance is a significant research area in counseling. The understanding of the therapeutic alliance, particularly in drug treatment settings helps counselors and clients to increase the treatment outcomes and its treatment process. The present study investigated the journeys of recovering counselors and clients in a private residential drug treatment and rehabilitation center in Malaysia. The center is also known as Rumah Pengasih. Rumah Pengasih in English means "House of Love". An in-depth case study was conducted involving 6 participants. The data were collected through in-depth interview sessions, observations, field notes, and personal reflections. Based on data analysis, the result showed that the therapeutic alliance experience described by counselors and clients were represented along four major themes; the Therapeutic Community, family and brotherhood, roles of spirituality, and behavior change and motivation. The culture of the Therapeutic Community influences the behavior, thinking, emotions, and communication pattern among residents and staff. The family spirit and brotherhood were very strong as the residents helped others. The spirituality in Islamic teaching seemed to be very strong and visible as part of daily routine in recovery process. Behavior change and motivation in recovery journey played an important role for residents. The clients reported a slightly low motivation at early stage of treatment. As time went by, the residents increased their motivational level as other residents, counselors, family members, and staff continuously provided support towards their recovery progress. Overall, the study found that the process of the therapeutic relationship was determined by counselor and client who were both recovering addicts. The counselor became the role model for client. Client was attached, inspired, and motivated by counselor's presence. Both counselor and client shared a similar experience in addiction and received treatment in the facility. Therefore, their connection was beyond the context of the counseling relationships itself. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
- Publication Type:** Dissertation Abstract
- Subject Headings:** [\\*Clients](#)  
[\\*Motivation](#)  
[\\*Treatment Outcomes](#)  
[Counselors](#)  
[Drug Therapy](#)  
[Therapeutic Alliance](#)
- Source:** PsycINFO

## 2. Post-cool kids: How the children born into the counterculture of the American 1960s and 70s became a scattered, disorganized, postmodern tribe.

- Citation:** Dissertation Abstracts International Section A: Humanities and Social Sciences, 2014, vol./is. 74/9-A(E)(No Pagination Specified), 0419-4209 (2014)
- Author(s):** Lovejoy, Rebekah
- Institution:** Pacifica Graduate Inst., US
- Language:** English
- Abstract:** This is an ethnographic and depth psychological study of Post-Cool Kids, people born into the 1960s American counterculture between 1964 and 1978. This population has been predominantly overlooked by the academy apart from the Family Lifestyles Study completed at UCLA twenty years ago. In this, the first study of its kind, I explore the

ethnological specificity of this set of people, Post-Cool Kids. I have integrated the methodologies of Michel Foucault and the theories of archetypal psychology developed by James Hillman with work done by Victor Turner as well as other work from the disciplines of anthropology, sociology, literary criticism, feminist theory, cultural studies and histories of the sixties era. I use this interdisciplinary data to inform a qualitative study of eighteen subjects raised by countercultural parents. I asked my subjects about their lives as children, teenagers, young adults, and currently approaching midlife. Through an analysis of these interviews I identified six cultural complexes specific to the counterculture that I then deconstructed and discussed as systems of knowing within the American culture of the last forty years: freedom, anti-authority, intense experience, cool, being real, and utopia. These complexes together provide a unique way of experiencing the world that informs the ethnological and psychological perspective of Post-Cool Kids, and provides them with a multi-schematic, process-based way of engaging with the world around them. I also discuss such topics as alternative education, communal experiences, drug addiction, creative thinking, embodied trauma, parental entwinement, and personal activism. My objective was to identify the transmission of culture from counterculture parents to their Post-Cool Kids. In the process I developed several unique methodological approaches. Merging postmodern theory, archetypal psychology and methods from religious studies and anthropology, I evaluate the nature of belief within a secular cultural context. Ultimately, I place American historical concepts of utopia side by side with the experience and multi-schematic perspective of Post-Cool Kids to suggest that they represent an emergent pattern in culture, and show how they can inform new theories of utopia. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Archetypes](#)  
[\\*Tribes](#)  
[Ethnography](#)

**Source:** PsycINFO

### 3. Sex differences in methamphetamine pharmacokinetics in adult rats and its transfer to pups through the placental membrane and breast milk.

**Citation:** Drug and Alcohol Dependence, March 2014(No Pagination Specified), 0376-8716 (Mar 29, 2014)

**Author(s):** Rambousek, Lukas; Kacer, Petr; Syslova, Kamila; Bumba, Jakub; Bubenikova-Valesova, Vera; Slamberova, Romana

**Abstract:** BACKGROUND: Methamphetamine (METH) abuse is a growing health problem worldwide, and METH use during pregnancy not only endangers the mother's health but also the developing fetus. To provide better insight into these risks, we performed the following experiments. METHOD: First, we investigated how sex influences the pharmacokinetics of METH and amphetamine (AMP) in male and female rats. Subsequently, we simulated chronic exposure of prenatal infants to METH abuse by investigating brain and plasma levels of METH and AMP in dams and pups. Finally, we modeled chronic exposure of infants to METH via breast milk and investigated sex differences in pups with regard to drug levels and possible sensitization effect of chronic prenatal METH co-treatment. RESULTS: We observed significantly higher levels of METH and AMP in the plasma and brain of female rats compared to males. Additionally, brain concentrations of METH and AMP in pups exposed to METH prenatally were equivalent to 62.13% and 37.78% relative to dam, respectively. Plasma concentrations of AMP were equivalent to 100% of the concentration in dams, while METH was equivalent to only 36.98%. Finally, we did not observe a significant effect relative to sex with regard to METH/AMP levels or sensitization effects linked to prenatal METH exposure. CONCLUSION: We demonstrated that female rats display higher levels of METH and AMP, thus indicating a greater risk of addiction and toxicity. Furthermore, our data show that pups are exposed to both METH and AMP following dam exposure. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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



**Subject Headings:****Source:** PsycINFO**Full Text:** Available from *Elsevier* in [Drug and Alcohol Dependence](#)**4. Relationships that compulsive buying has with addiction, obsessive-compulsiveness, hoarding, and depression.****Citation:** Comprehensive Psychiatry, March 2014(No Pagination Specified), 0010-440X (Mar 21, 2014)**Author(s):** Lawrence, Lee Matthew; Ciorciari, Joseph; Kyrios, Michael**Abstract:** BACKGROUND AND OBJECTIVES: Compulsive buying has been associated with addiction, depression, and obsessive-compulsive disorder, as well as hoarding. The present study investigated the relationship that compulsive buying (CB) has with 'addictive' (i.e., sensitivity to reward), obsessive-compulsive, and depressive phenomena, after controlling for hoarding, substance dependence, manic, and Borderline Personality Disorder symptoms. METHODS: 87 participants from a community population completed the online questionnaires for the study, however 70 participants (M=29.19, SD=10.45; 70% were female) were used in the analyses because of exclusion criteria. RESULTS: As expected, CB measures correlated with hoarding, depression, sensitivity to reward, and, but less so, obsessive-compulsive measures. Sensitivity to reward was the most important predictor of CB severity, compared to obsessive-compulsive and depression symptoms. Hoarding was also an important predictor of CB severity. LIMITATIONS: Small sample size meant gender comparisons could not be made, and the use of a novel, communicated questionnaire meant that interpretation should be considered conservatively. CONCLUSIONS: Overall, findings suggest that CB may be most closely related to the phenomena associated with addiction (an increased sensitivity to reward), rather than obsessive-compulsive or depression symptoms. Hoarding and reward sensitivity perhaps might separate compulsive buying from ordinary and recreational shopping. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)**Publication Type:** Journal; Peer Reviewed Journal**Subject Headings:****Source:** PsycINFO**Full Text:** Available from *Elsevier* in [Comprehensive Psychiatry](#)**5. Clarifying the roles of homeostasis and allostasis in physiological regulation.****Citation:** Psychological Review, April 2014, vol./is. 121/2(225-247), 0033-295X;1939-1471 (Apr 2014)**Author(s):** Ramsay, Douglas S; Woods, Stephen C**Correspondence Address:** Ramsay, Douglas S.: Departments of Oral Health Sciences, Orthodontics, and Pediatric Dentistry, University of Washington, Box #357475, Seattle, WA, US, 98195-7475, ramsay@uw.edu**Institution:** Departments of Oral Health Sciences, Orthodontics, and Pediatric Dentistry, University of Washington, Seattle, WA, US; Department of Psychiatry and Behavioral Neuroscience, University of Cincinnati Medical Center, Cincinnati, OH, US**Language:** English**Abstract:** Homeostasis, the dominant explanatory framework for physiological regulation, has undergone significant revision in recent years, with contemporary models differing significantly from the original formulation. Allostasis, an alternative view of physiological regulation, goes beyond its homeostatic roots, offering novel insights relevant to our understanding and treatment of several chronic health conditions. Despite growing enthusiasm for allostasis, the concept remains diffuse, due in part to ambiguity as to how the term is understood and used, impeding meaningful translational and clinical research on allostasis. Here, we provide a more focused understanding of homeostasis and



allostasis by explaining how both play a role in physiological regulation, and a critical analysis of regulation suggests how homeostasis and allostasis can be distinguished. Rather than focusing on changes in the value of a regulated variable (e.g., body temperature, body adiposity, or reward), research investigating the activity and relationship among the multiple regulatory loops that influence the value of these regulated variables may be the key to distinguishing homeostasis and allostasis. The mechanisms underlying physiological regulation and dysregulation are likely to have important implications for health and disease. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: American Psychological Association; YEAR: 2014

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

**Subject Headings:** [\\*Homeostasis](#)  
[\\*Physiology](#)  
[Addiction](#)  
[Obesity](#)  
[Somatosensory Disorders](#)  
[Thermoregulation \(Body\)](#)

**Source:** PsycINFO

#### 6. Circadian rhythms and addiction: Mechanistic insights and future directions.

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**Citation:** Behavioral Neuroscience, April 2014(No Pagination Specified), 0735-7044;1939-0084 (Apr 14, 2014)

**Author(s):** Logan, Ryan W; Williams, Wilbur P III; McClung, Colleen A

**Abstract:** Circadian rhythms are prominent in many physiological and behavioral functions. Circadian disruptions either by environmental or molecular perturbation can have profound health consequences, including the development and progression of addiction. Both animal and humans studies indicate extensive bidirectional relationships between the circadian system and drugs of abuse. Addicted individuals display disrupted rhythms, and chronic disruption or particular chronotypes may increase the risk for substance abuse and relapse. Moreover, polymorphisms in circadian genes and an evening chronotype have been linked to mood and addiction disorders, and recent efforts suggest an association with the function of reward neurocircuitry. Animal studies are beginning to determine how altered circadian gene function results in drug-induced neuroplasticity and behaviors. Many studies suggest a critical role for circadian rhythms in reward-related pathways in the brain and indicate that drugs of abuse directly affect the central circadian pacemaker. In this review, we highlight key findings demonstrating the importance of circadian rhythms in addiction and how future studies will reveal important mechanistic insights into the involvement of circadian rhythms in drug addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:**

**Source:** PsycINFO

#### 7. Active injection drug-abuse offsets healthcare engagement in hiv-infected patients.

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**Citation:** AIDS and Behavior, April 2014(No Pagination Specified), 1090-7165;1573-3254 (Apr 8, 2014)

**Author(s):** Liappis, Angelike P; Laake, Ann M; Delman, Mark

**Abstract:** Active injection drug use (IDU) is a behavior with the potential to offset healthcare engagement for those with HIV. At the Washington DC Veterans Affairs Medical Center, we identified 316 patients with a history of addiction during an 11-year period while actively engaged in routine visits to our HIV-primary care clinic. Among all IDU, active-abuse was determined in 141/316 (45 %). There were 120 clinically relevant blood stream infection (BSI) episodes. HIV/HCV co-infection (95 %) and use of antiretroviral therapy (76 %) were common at the time of BSI. The majority of BSIs occurred among

those with active-IDU (72/120, 60 %). Active-IDU behavior was associated with more thrombotic disease (12 vs. 2 %,  $P = 0.001$ ) and more frequent hospitalization (1.1/year + 1.2 vs. 0.8/year + 1.1,  $P = 0.03$ ). When compared to drug-users with no active injection practices or those with remote IDU, active-IDU was associated with an increase in all-cause mortality (43 vs. 27 %,  $P = 0.003$ ) and a decrease in age-adjusted survival (HR 1.7, CI 1.16-2.51,  $P = 0.007$ ). Addressing addiction has the potential to impact avoidable medical complications and contribute to the continued, overall health of patients linked to HIV-care. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Springer Science+Business Media New York (outside the USA); YEAR: 2014  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:**  
**Source:** PsycINFO

#### 8. Intermittent ethanol access schedule in rats as a preclinical model of alcohol abuse.

**Citation:** Alcohol, March 2014(No Pagination Specified), 0741-8329 (Mar 15, 2014)  
**Author(s):** Carnicella, Sebastien; Ron, Dorit; Barak, Segev  
**Abstract:** One of the major challenges in preclinical studies of alcohol abuse and dependence remains the development of paradigms that will elicit high ethanol intake and mimic the progressive transition from low or moderate social drinking to excessive alcohol consumption. Exposure of outbred rats to repeated cycles of free-choice ethanol intake and withdrawal with the use of intermittent access to 20% ethanol in a 2-bottle choice procedure (IA2BC) has been shown to induce a gradual escalation of voluntary ethanol intake and preference, eventually reaching ethanol consumption levels of 5-6 g/kg/24 h, and inducing pharmacologically relevant blood ethanol concentrations (BECs). This procedure has recently been gaining popularity due to its simplicity, high validity, and reliable outcomes. Here we review experimental and methodological data related to IA2BC, and discuss the usefulness and advantages of this procedure as a valuable pre-training method for initiating operant ethanol self-administration of high ethanol intake, as well as conditioned place preference (CPP). Despite some limitations, we provide evidence that IA2BC and related operant procedures provide the possibility to operationalize multiple aspects of alcohol abuse and addiction in a rat model, including transition from social-like drinking to excessive alcohol consumption, binge drinking, alcohol seeking, relapse, and neuroadaptations related to excessive alcohol intake. Hence, IA2BC appears to be a useful and relevant procedure for preclinical evaluation of potential therapeutic approaches against alcohol abuse disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:**  
**Source:** PsycINFO  
**Full Text:** Available from *Elsevier* in [Alcohol](#)

#### 9. Dysregulation of dopaminergic regulatory mechanisms in the mesolimbic pathway induced by morphine and morphine withdrawal.

**Citation:** Brain Structure & Function, April 2014(No Pagination Specified), 1863-2653;1863-2661 (Apr 5, 2014)  
**Author(s):** Garcia-Perez, Daniel; Lopez-Bellido, Roger; Rodriguez, Raquel E; Laorden, M. Luisa; Nunez, Cristina; Milanes, M. Victoria  
**Abstract:** Dopamine (DA) is thought to represent a teaching signal and has been implicated in the induction of addictive behaviours. Previously, it has been proposed that the transcription factors Nurr1 and Pitx3, which are critical for transcription of a set of genes involved in DA metabolism in the mesolimbic pathway, are associated with addiction pathology. The aim of our study was to investigate abnormalities in the mesolimbic pathway associated

with morphine dependence and withdrawal. Using quantitative real-time PCR, immunofluorescence, HPLC and Western blotting, here we studied the effects of single morphine administration, morphine dependence and morphine withdrawal on Nurr1 and Pitx3 expression as well as on the DA marker tyrosine hydroxylase (TH) and the turnover of DA in the ventral tegmental area (VTA) and/or nucleus accumbens. We showed that the three experimental conditions caused induction of Nurr1 and Pitx3 in the VTA, which correlated with changes in TH expression during chronic morphine administration. Present data also confirmed the colocalization of Nurr1 and Pitx3 with TH-positive neurons in the posterior VTA. Furthermore, during morphine dependence, Nurr1 was detected in the nucleus compartment of VTA TH-positive neurons, whereas Pitx3 was strongly detected in the nucleus of TH-positive neurons after single morphine administration and during morphine withdrawal. The number of TH neurons, number of Nurr1 or Pitx3-positive cells, and the number of TH neurons expressing Nurr1 or Pitx3 were not modified in the subpopulations of DA neurons. Present data provide novel insight into the potential correlation between Nurr1 and Pitx3 and DA neurons plasticity during opiate addiction in the mesolimbic pathway. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:**

**Source:** PsycINFO

#### 10. A longitudinal study of childhood ADHD and substance dependence disorders in early adulthood.

**Citation:** Psychology of Addictive Behaviors, March 2014, vol./is. 28/1(238-246), 0893-164X;1939-1501 (Mar 2014)

**Author(s):** Breyer, Jessie L; Lee, Susanne; Winters, Ken C; August, Gerald J; Realmuto, George M

**Correspondence Address:** Winters, Ken C.: Department of Psychiatry, University of Minnesota Medical School, F282/2A West, 2450 Riverside Avenue, Minneapolis, MN, US, 55454, winte001@umn.edu

**Institution:** Department of Psychology, Century College, MN, US; Department of Psychiatry, University of Minnesota Medical School, Minneapolis, MN, US; Department of Psychiatry, University of Minnesota Medical School, Minneapolis, MN, US; Department of Psychiatry, University of Minnesota Medical School, Minneapolis, MN, US; Department of Psychiatry, University of Minnesota Medical School, Minneapolis, MN, US

**Language:** English

**Abstract:** Attention deficit hyperactivity disorder (ADHD) is a childhood disorder that is associated with many behavioral and social problems. These problems may continue when an individual continues to meet criteria for ADHD as an adult. In this study, we describe the outcome patterns for three different groups: individuals who had ADHD as children, but no longer meet criteria as adults (Childhood-Limited ADHD, n = 71); individuals who met ADHD criteria as children and continue to meet criteria as young adults (Persistent ADHD n = 79); and a control group of individuals who did not meet ADHD diagnostic criteria in childhood or adulthood (n = 69). Groups were compared with examine differences in change in rates of alcohol, marijuana, and nicotine dependence over 3 time points in young adulthood (mean ages 18, 20, and 22 years). The method used is notable as this longitudinal study followed participants from childhood into young adulthood instead of relying on retrospective self-reports from adult participants. Results indicated that there were no significant group differences in change in rates of substance dependence over time. However, individuals whose ADHD persisted into adulthood were significantly more likely to meet DSM-IV criteria for alcohol, marijuana, and nicotine dependence across the 3 time points after controlling for age, sex, childhood stimulant medication use, and childhood conduct problems. Implications of these findings, as well as recommendations for future research, are discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: American Psychological Association; YEAR: 2014  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Attention Deficit Disorder with Hyperactivity](#)  
[\\*Drug Abuse](#)  
[Comorbidity](#)  
[Risk Factors](#)  
**Source:** PsycINFO

#### 11. Correction to Salemink and Wiers (2013).

**Citation:** Psychology of Addictive Behaviors, March 2014, vol./is. 28/1(172), 0893-164X;1939-1501 (Mar 2014)  
**Author(s):** No authorship indicated  
**Language:** English  
**Abstract:** Reports an error in "Alcohol-Related Memory Associations in Positive and Negative Affect Situations: Drinking Motives, Working Memory Capacity, and Prospective Drinking" by Elske Salemink and Reinout W. Wiers (Psychology of Addictive Behaviors, Advanced Online Publication, May 6, 2013, np). There was an error in the last sentence of the Materials section. The correct sentence is provided. (The following abstract of the original article appeared in record 2013-15122-001.) Although studies on explicit alcohol cognitions have identified positive and negative reinforcing drinking motives that are differentially related to drinking indices, such a distinction has received less attention in studies on implicit cognitions. An alcohol-related Word-Sentence Association Task was used to assess implicit alcohol-related memory associations in positive and negative affect situations in 92 participants. Results revealed that enhancement motives were specifically associated with the endorsement of alcohol words in positive affect situations and coping motives were associated with the endorsement of alcohol words in negative affect situations. Furthermore, alcohol associations in positive affect situations predicted prospective alcohol use and number of binges, depending on levels of working memory capacity. The current findings shed more light on the underpinnings of alcohol use and suggest that implicit memory processes and working memory capacity might be important targets for intervention. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Drinking Behavior](#)  
[\\*Emotions](#)  
[\\*Motivation](#)  
[\\*Short Term Memory](#)  
[Human Information Storage](#)  
**Source:** PsycINFO

#### 12. Positive smoking outcome expectancies mediate the relation between alcohol consumption and smoking urge among women during a quit attempt.

**Citation:** Psychology of Addictive Behaviors, March 2014, vol./is. 28/1(163-172), 0893-164X;1939-1501 (Mar 2014)  
**Author(s):** Lam, Cho Y; Businelle, Michael S; Cofta-Woerpel, Ludmila; McClure, Jennifer B; Cinciripini, Paul M; Wetter, David W  
**Correspondence Address:** Lam, Cho Y.: Department of Health Disparities Research, University of Texas MD Anderson Cancer Center, Unit 1440, PO Box 301402, Houston, TX, US, 77230-1402, cholam@mdanderson.org  
**Institution:** Department of Health Disparities Research, University of Texas MD Anderson Cancer Center, Houston, TX, US; Division of Health Promotion and Behavioral Sciences, University of Texas School of Public Health, TX, US; Department of Behavioral Science, University of Texas MD Anderson Cancer Center, Houston, TX, US; Group Health

Research Institute, Seattle, WA, US; Department of Behavioral Science, University of Texas MD Anderson Cancer Center, Houston, TX, US; Department of Health Disparities Research, University of Texas MD Anderson Cancer Center, Houston, TX, US

**Language:**

English

**Abstract:**

Social learning models of addiction hypothesize that situational factors interact with cognitive determinants to influence a person's motivation to use substances. Ecological momentary assessment was used to examine the association between alcohol consumption, smoking outcome expectancies, and smoking urge during the first 7 days of a smoking quit attempt. Participants were 113 female smokers who enrolled in a study that tested an individually tailored smoking cessation treatment. Participants carried a palm-top personal computer for 7 days and were instructed to complete 4 random assessments each day and to initiate an assessment when they were tempted to smoke. Multilevel mediational analyses were used to examine (a) the effects of alcohol consumption before time  $j$  and positive smoking outcome expectancies at time  $j$  on smoking urge at time  $j + 1$  (Model 1) and (b) the effects of alcohol consumption before time  $j$  and smoking urge at time  $j$  on positive smoking outcome expectancies at time  $j + 1$  (Model 2). Model 1 found a significant effect of alcohol consumption before time  $j$  on smoking urge at time  $j + 1$  ( $p = .04$ ), and this effect was significantly mediated by positive smoking outcome expectancies at time  $j$  ( $p < .0001$ ). Model 2 failed to find a significant effect of alcohol consumption before time  $j$  on positive smoking outcome expectancies at time  $j + 1$ . The findings suggest that alcohol consumption is significantly associated with increased positive smoking outcome expectancies that, in turn, are associated with increased smoking urge in women seeking to quit smoking. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:**

HOLDER: American Psychological Association; YEAR: 2014

**Publication Type:**

Journal; Peer Reviewed Journal

**Subject Headings:**

[\\*Alcohol Drinking Patterns](#)  
[\\*Expectations](#)  
[\\*Motivation](#)  
[\\*Smoking Cessation](#)  
[\\*Tobacco Smoking](#)

**Source:**

PsycINFO

**13. Does negative affect mediate the relationship between daily PTSD symptoms and daily alcohol involvement in female rape victims? Evidence from 14 days of interactive voice response assessment.**

**Citation:**

Psychology of Addictive Behaviors, March 2014, vol./is. 28/1(114-126), 0893-164X;1939-1501 (Mar 2014)

**Author(s):**

Cohn, Amy; Hagman, Brett T; Moore, Kathleen; Mitchell, Jessica; Ehlke, Sarah

**Correspondence Address:**

Cohn, Amy: Schroeder Institute for Tobacco Research and Policy Studies, American Legacy Foundation, 1724 Massachusetts Avenue, NW, Washington, DC, US, 20036, [acohn@legacyforhealth.org](mailto:acohn@legacyforhealth.org)

**Institution:**

Department of Mental Health Law and Policy, University of South Florida, FL, US; National Institute on Alcohol Abuse and Alcoholism, Bethesda, MD, US; Department of Mental Health Law and Policy, University of South Florida, FL, US; Department of Mental Health Law and Policy, University of South Florida, FL, US; Department of Psychology, University of North Carolina, Wilmington, NC, US

**Language:**

English

**Abstract:**

The negative reinforcement model of addiction posits that individuals may use alcohol to reduce negative affective (NA) distress. The current study investigated the mediating effect of daily NA on the relationship between daily PTSD symptoms and same-day and next-day alcohol involvement (consumption and desire to drink) in a sample of 54 non-treatment-seeking female rape victims who completed 14 days of interactive voice response assessment. The moderating effect of lifetime alcohol use disorder diagnosis (AUD) on daily relationships was also examined. Multilevel models suggested that NA mediated the relationship between PTSD and same-day, but not next-day alcohol

involvement. NA was greater on days characterized by more severe PTSD symptoms, and alcohol consumption and desire to drink were greater on days characterized by higher NA. Furthermore, daily PTSD symptoms and NA were more strongly associated with same-day (but not next-day) alcohol consumption and desire to drink for women with an AUD than without. Results suggest that NA plays an important role in female rape victims' daily alcohol use. Differences between women with and without an AUD indicate the need for treatment matching to subtypes of female rape victims. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: American Psychological Association; YEAR: 2014  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Affective Disorders](#)  
[\\*Alcohol Drinking Patterns](#)  
[\\*Crime Victims](#)  
[\\*Posttraumatic Stress Disorder](#)  
[\\*Rape](#)  
[Human Females](#)  
**Source:** PsycINFO

#### 14. Risk for exercise addiction: A comparison of triathletes training for Sprint-, Olympic-, Half-Ironman-, and Ironman-distance triathlons.

**Citation:** Journal of Clinical Sport Psychology, March 2014, vol./is. 8/1(19-37), 1932-9261;1932-927X (Mar 2014)  
**Author(s):** Youngman, Jason; Simpson, Duncan  
**Institution:** Peak Functioning, Miami, FL, US; Barry University, Miami Shores, FL, US  
**Language:** English  
**Abstract:** Researchers have noted that when taken to an excessive level, exercise may become addictive. This study investigated the risk of exercise addiction for triathletes using the Exercise Addiction Inventory (EAI; Terry, Szabo, & Griffiths, 2004). The sample consisted of 1,285 male and female triathletes, ranging in age from 18-70 years old. Results indicated that approximately 20% of triathletes are at risk for exercise addiction, and that training for longer distance races (i.e., Olympic, Half-Ironman, and Ironman) puts triathletes at greater risk for exercise addiction than training for shorter races (i.e., Sprint). No significant association was found between the risk for exercise addiction and the number of years of participating. However, as the number of weekly training hours increased, so did a triathlete's risk for exercise addiction. At-risk triathletes need greater clinical attention, and further research should be conducted to help clinicians develop awareness and appropriate interventions. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Human Kinetics, Inc.; YEAR: 2014  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Addiction](#)  
[\\*Athletic Training](#)  
[\\*Exercise](#)  
[\\*Sports](#)  
[\\*Risk Assessment](#)  
[Athletes](#)  
[Awareness](#)  
[Running](#)  
**Source:** PsycINFO

#### 15. Deaths from "legal highs": A problem of definitions.

**Citation:** The Lancet, March 2014, vol./is. 383/9921(952), 0140-6736 (Mar 15, 2014)  
**Author(s):** King, Leslie A; Nutt, David J; Independent Scientific Committee on Drugs



**Correspondence Address:** King, Leslie A, les@king.myzen.co.uk

**Corporate/Institutional Author:** Independent Scientific Committee on Drugs

**Institution:** Imperial College London, London, United Kingdom

**Language:** English

**Abstract:** Comments on an article "Drug-related deaths in the UK: January-December 2012." by J.Corkery et al. (2012). The National Programme on Substance Abuse Deaths' report lists five deaths linked to phenazepam. This drug is an anxiolytic benzodiazepine that might be new in the UK, but it has been a prescription medicine in Russia for years. Its mentioning here reflects a current dispute between the UK Government and the European Commission concerning new psychoactive substances with commercial value. Among the hundreds of substances reported in Europe in recent years is a large group of medicinal products including phenazepam. There is thus no simple answer to how many deaths were associated, let alone caused, by new psychoactive substances or even "legal highs" in any given period. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

**Subject Headings:** [\\*Death and Dying](#)  
[\\*Drug Abuse](#)  
[\\*Drug Legalization](#)  
[\\*Drug Usage](#)  
[\\*Law Enforcement](#)

**Source:** PsycINFO

**Full Text:** Available from *Lancet* in [Newcomb Library & Information Service](#)  
Available from *Elsevier ScienceDirect Journals* in [Lancet, The](#)  
Available from *Elsevier* in [Lancet, The](#)  
Available from *The Lancet* in [Lancet, The](#)

## 16. Criminality and co-occurring psychiatric and substance use disorders.

**Citation:** Criminal psychology, Vol 1: Theory and research, Vol 2: Typologies, mental disorders, and profiles, Vol 3: Implications for forensic assessment, policing, and the courts, Vol 4: Implications for juvenile justice, corrections, and reentry., 2013(321-339) (2013)

**Author(s):** Lurigio, Arthur J; Lyons, Thomas

**Language:** English

**Abstract:** (from the chapter) Mental illnesses are classified on Axis I (clinical syndromes) and Axis II (personality disorders) of the Diagnostic and Statistical Manual of Mental Disorders, Text Revision (DSM-IV-TR) of the American Psychiatric Association, which is the widely used nomenclature for serious psychiatric disorders (SPDs) (nonaddictive) and substance use disorders (SUDs). The current chapter discusses the prevalence, causes, and treatment of interactive, co-occurring disorders, particularly among people with criminal justice system involvement, who are diagnosed with such illnesses (on Axis I of DSM-IV-TR) at a higher rate than people with no criminal justice system involvement. The former are also more likely than the latter to be diagnosed with antisocial personality disorder (on Axis II of DSM-IV-TR) (Hills, 2000; Osher, 2006). In this chapter, comorbidity is defined as two or more co-occurring mental illnesses, including at least one SPD and at least one SUD. A diagnosis of antisocial personality disorder can aggravate the symptoms of each type of disorder as well as their co-occurrences (NIDA, 2010). The current chapter also presents the results of a qualitative, longitudinal study of the psychological problems and treatment experiences of jail detainees with SUDs. The findings described in the chapter focus on detainees' access to drug and mental health treatment following their release from jail. Finally, the chapter briefly explores the special treatment needs of women offenders with comorbid disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book



**Subject Headings:** [\\*Antisocial Personality Disorder](#)  
[\\*Comorbidity](#)  
[\\*Criminal Behavior](#)  
[\\*Drug Abuse](#)  
[\\*Mental Disorders](#)  
[Criminal Justice](#)  
[Female Criminals](#)  
[Prisoners](#)

**Source:** PsycINFO

#### 17. The phenomenology of addiction and the artifact of criminal behavior.

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**Citation:** Criminal psychology, Vol 1: Theory and research, Vol 2: Typologies, mental disorders, and profiles, Vol 3: Implications for forensic assessment, policing, and the courts, Vol 4: Implications for juvenile justice, corrections, and reentry., 2013(299-320) (2013)

**Author(s):** Polizzi, David

**Language:** English

**Abstract:** (from the chapter) The purpose of this chapter will attempt to provide a description of addiction that precedes the emergence of criminal behavior and, in fact, helps to give this experience its specific meaning. By contextualizing drug use in this way, the subsequent involvement with the criminal justice system may come to be viewed as an artifact of the phenomenology of addiction, but not the central meaning of this experience. Incarceration represents a possible horizon (Gurwitsch, 1964; Husserl, 1962) for the individual who continues to use illegal substances or alcohol, but will oftentimes prove insufficient in providing the necessary motivation to discontinue use. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Criminal Behavior](#)  
[\\*Criminal Justice](#)  
[\\*Phenomenology](#)  
[Incarceration](#)

**Source:** PsycINFO

#### 18. New NIDA resources on treatment approaches for teens.

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**Citation:** Psychiatric Services, March 2014, vol./is. 65/3(402), 1075-2730 (Mar 1, 2014)

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

**Language:** English

**Abstract:** This article discusses, new National Institute on Drug Abuse (NIDA) resources on treatment approaches for teens. Findings from the 2012 National Survey on Drug Use and Health indicated that only 10% of adolescents who need treatment for substance use problems receive any services. This troubling statistic spurred the NIDA to develop resources to help health care professionals treat teenagers with substance use disorders and identify those who may be at risk. The resources include a new online publication, Principles of Adolescent Substance Use Disorder Treatment: A Research Based Guide, which includes 13 principles to consider in treating youths with substance use disorders, as well as evidence-based approaches to the treatment of adolescent drug abuse. NIDA also released an online video curriculum for medical students and resident physicians, "Substance Use Disorders in Adolescents: Screening and Engagement in Primary Care Settings," which demonstrates skills to use in screening adolescents who are at risk. The resources are available on the NIDA Web site at [www.drugabuse.gov/news-events/news-releases/2014/01/new-substance-abuse-treatment-resources-focus-teens](http://www.drugabuse.gov/news-events/news-releases/2014/01/new-substance-abuse-treatment-resources-focus-teens). (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

**Subject Headings:** [\\*At Risk Populations](#)  
[\\*Drug Abuse](#)  
[\\*Evidence Based Practice](#)  
[\\*Treatment](#)  
[Adolescent Psychology](#)  
[Health Personnel](#)

**Source:** PsycINFO

#### 19. SAMHSA's behavioral health barometer.

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**Citation:** Psychiatric Services, March 2014, vol./is. 65/3(401), 1075-2730 (Mar 1, 2014)

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

**Language:** English

**Abstract:** This article discusses, collection of new online reports from the Substance Abuse and Mental Health Services Administration (SAMHSA) summarizing data on the behavioral health of Americans. The 32-page overview report, Behavioral Health Barometer, United States, 2013, assembles dozens of figures and tables presenting national level data on mental health and substance use problems and receipt of treatment among youths and adults, with a separate section on Medicare enrollees. The data provide a snapshot of the current status of behavioral health, as well as trend data for some indicators. The snapshot data provide a useful baseline as the nation implements health care reform and parity and as more people gain access to services. Data are separately analyzed by gender, age group, and race-ethnicity when possible to help decision makers identify disparities in their communities. Copies of the 52 reports are downloadable from the SAMHSA Web site at [store.samhsa.gov/product/SMA13-4796?from=carousel&position=1&date=0130214](http://store.samhsa.gov/product/SMA13-4796?from=carousel&position=1&date=0130214). (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Health Care Psychology](#)  
[\\*Mental Health Services](#)  
[Medicare](#)  
[Health Care Reform](#)  
[Health Disparities](#)

**Source:** PsycINFO

#### 20. Review of The Trial of Dr. Kate.

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**Citation:** Psychiatric Services, March 2014, vol./is. 65/3(e5), 1075-2730 (Mar 1, 2014)

**Author(s):** Hackman, Ann L

**Institution:** Department of Psychiatry, University of Maryland School of Medicine, Baltimore, MD, US

**Language:** English

**Abstract:** Reviews the book, The Trial of Dr. Kate by Michael E. Glasscock III (2014). The novel The Trial of Dr. Kate is about Kate Marlow, a smalltown physician who is on trial in 1952 for the murder of one of her patients. Dr. Kate is a functioning alcoholic who cannot remember anything about what happened the day her patient died. Although the story is told in the third person, the reader benefits from the perspective of Shenandoah Coleman, a spunky reporter from the wrong side of the tracks who returns to her hometown of Round Rock, Tennessee, to cover the trial. There are a number of things wrong with The Trial of Dr. Kate. The story is peopled with every 1950s small-town character stereotype imaginable. The novel builds up to a trial but is not really a courtroom drama. There are interesting ethical issues that arise at the end, but the story finishes without exploring them. The book is infused with a lovely sense of nostalgia for simpler times. It clearly

was written by someone who remembers the early 1950s and shows genuine affection for small towns. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

**Subject Headings:** [\\*Adjudication](#)  
[\\*Alcoholism](#)  
[\\*Ethics](#)  
[\\*Physicians](#)  
[Drama](#)

**Source:** PsycINFO

## 21. Residential treatment for individuals with substance use disorders: Assessing the evidence.

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**Citation:** Psychiatric Services, March 2014, vol./is. 65/3(301-312), 1075-2730 (Mar 1, 2014)

**Author(s):** Reif, Sharon; George, Preethy; Braude, Lisa; Dougherty, Richard H; Daniels, Allen S; Ghose, Sushmita Shoma; Delphin-Rittmon, Miriam E

**Correspondence Address:** George, Preethy, preethygeorge@westat.com

**Institution:** Institute for Behavioral Health, Heller School for Social Policy and Management, Brandeis University, Waltham, MA, US; Westat, Rockville, MD, US; DMA Health Strategies, Lexington, MA, US; DMA Health Strategies, Lexington, MA, US; Westat, Rockville, MD, US; Westat, Rockville, MD, US; Office of Policy, Planning, and Innovation, Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MD, US

**Language:** English

**Abstract:** Objective: Residential treatment is a commonly used direct intervention for individuals with substance use or co-occurring mental and substance use disorders who need structured care. Treatment occurs in nonhospital, licensed residential facilities. Models vary, but all provide safe housing and medical care in a 24-hour recovery environment. This article describes residential treatment and assesses the evidence base for this service. Methods: Authors evaluated research reviews and individual studies from 1995 through 2012. They searched major databases: PubMed, PsycINFO, Applied Social Sciences Index and Abstracts, Sociological Abstracts, and Social Services Abstracts. They chose from three levels of evidence (high, moderate, and low) and described the evidence of service effectiveness. Results: On the basis of eight reviews and 21 individual studies not included in prior reviews, the level of evidence for residential treatment for substance use disorders was rated as moderate. A number of randomized controlled trials were identified, but various methodological weaknesses in study designs-primarily the appropriateness of the samples and equivalence of comparison groups-decreased the level of evidence. Results for the effectiveness of residential treatment compared with other types of treatment for substance use disorders were mixed. Findings suggested either an improvement or no difference in treatment outcomes. Conclusions: Residential treatment for substance use disorders shows value and merits ongoing consideration by policy makers for inclusion as a covered benefit in public and commercially funded plans. However, research with greater specificity and consistency is needed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Residential Care Institutions](#)  
[\\*Treatment](#)  
[Evidence Based Practice](#)  
[Mental Disorders](#)  
[Recovery \(Disorders\)](#)

**Source:** PsycINFO

## 22. Recovery housing: Assessing the evidence.

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**Citation:** Psychiatric Services, March 2014, vol./is. 65/3(295-300), 1075-2730 (Mar 1, 2014)

**Author(s):** Reif, Sharon; George, Preethy; Braude, Lisa; Dougherty, Richard H; Daniels, Allen S; Ghose, Sushmita Shoma; Delphin-Rittmon, Miriam E

**Correspondence Address:** George, Preethy, preethygeorge@westat.com

**Institution:** Institute for Behavioral Health, Heller School for Social Policy and Management, Brandeis University, Waltham, MA, US; Westat, Rockville, MD, US; DMA Health Strategies, Lexington, MA, US; DMA Health Strategies, Lexington, MA, US; Westat, Rockville, MD, US; Westat, Rockville, MD, US; Office of Policy, Planning, and Innovation, Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MA, US

**Language:** English

**Abstract:** Objective: Recovery housing is a direct service with multiple components that provides supervised, short-term housing to individuals with substance use disorders or co-occurring mental and substance use disorders. It commonly is used after inpatient or residential treatment. This article describes recovery housing and assesses the evidence base for the service. Methods: Authors searched PubMed, PsycINFO, Applied Social Sciences Index and Abstracts, Sociological Abstracts, and Social Services Abstracts. They identified six individual articles from 1995 through 2012 that reported on randomized controlled trials or quasi-experimental studies; no reviews or meta-analyses were found. They chose from three levels of evidence (high, moderate, or low) based on benchmarks for the number of studies and quality of their methodology. They also described the evidence of service effectiveness. Results: The level of evidence for recovery housing was moderate. Studies consistently showed positive outcomes, but the results were tempered by research design limitations, such as lack of consistency in defining the program elements and outcome measures, small samples, and single-site evaluations, and by the limited number of studies. Results on the effectiveness of recovery housing suggested positive substance use outcomes and improvements in functioning, including employment and criminal activity. Conclusions: Recovery housing appears to be an important component in the continuum of care for some individuals. However, replication of study findings with greater specificity and in more settings is needed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Evidence Based Practice](#)  
[\\*Housing](#)  
[\\*Recovery \(Disorders\)](#)  
[Drug Abuse](#)  
[Mental Disorders](#)  
[Residential Care Institutions](#)

**Source:** PsycINFO

### 23. Permanent supportive housing: Assessing the evidence.

**Citation:** Psychiatric Services, March 2014, vol./is. 65/3(287-294), 1075-2730 (Mar 1, 2014)

**Author(s):** Rog, Debra J; Marshall, Tina; Dougherty, Richard H; George, Preethy; Daniels, Allen S; Ghose, Sushmita Shoma; Delphin-Rittmon, Miriam E

**Correspondence Address:** George, Preethy, preethygeorge@westat.com

**Institution:** Westat, Rockville, MD, US; Westat, Rockville, MD, US; DMA Health Strategies, Lexington, MA, US; Westat, Rockville, MD, US; Westat, Rockville, MD, US; Westat, Rockville, MD, US; Office of Policy, Planning, and Innovation, Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, MD, US

**Language:** English

**Abstract:** Objectives: Permanent supportive housing provides safe, stable housing for people with mental and substance use disorders who are homeless or disabled. This article describes permanent supportive housing and reviews research. Methods: Authors reviewed individual studies and literature reviews from 1995 through 2012. Databases surveyed were PubMed, PsycINFO, Applied Social Sciences Index and Abstracts, Sociological

Abstracts, Social Services Abstracts, Published International Literature on Traumatic Stress, the Educational Resources Information Center, and the Cumulative Index to Nursing and Allied Health Literature. The authors chose from three levels of evidence (high, moderate, and low) on the basis of benchmarks for the number of studies and quality of their methodology. They also described the evidence of service effectiveness. Results: The level of evidence for permanent supportive housing was graded as moderate. Substantial literature, including seven randomized controlled trials, demonstrated that components of the model reduced homelessness, increased housing tenure, and decreased emergency room visits and hospitalization. Consumers consistently rated this model more positively than other housing models. Methodological flaws limited the ability to draw firm conclusions. Results were stronger for studies that compared permanent supportive housing with treatment as usual or no housing rather than with other models. Conclusions: The moderate level of evidence indicates that permanent supportive housing is promising, but research is needed to clarify the model and determine the most effective elements for various subpopulations. Policy makers should consider including permanent supportive housing as a covered service for individuals with mental and substance use disorders. An evaluation component is needed to continue building its evidence base. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Homeless Mentally Ill](#)  
[\\*Housing](#)  
[Drug Abuse](#)  
[Mental Disorders](#)

**Source:** PsycINFO

#### 24. Intangible outcomes from a policy change: Using contingent valuation to quantify potential stigma from a cannabis offence.

**Citation:** Journal of Experimental Criminology, March 2014, vol./is. 10/1(59-77), 1573-3750;1572-8315 (Mar 2014)

**Author(s):** Shanahan, Marian; Ritter, Alison

**Correspondence Address:** Shanahan, Marian: Drug Policy Modelling Program, National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW, Australia, 2052, M.Shanahan@unsw.edu.au

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

**Language:** English

**Abstract:** Objective: New policies are increasingly required to be evaluated. One form of evaluation is a cost-benefit analysis where inputs and outcomes are all valued monetarily. However, intangible outcomes are often not included in these evaluations as they are perceived to be too difficult to value. The aim of this paper is to value one of the intangible benefits (decrease in stigma) from a potential change in drug policy using contingent valuation. Methods: This paper reports on a contingent valuation study conducted among a community sample of 875 respondents on the internet. Respondents were asked what they would be willing to pay to avoid the stigma of a criminal record. Data were analysed with descriptive and regression analyses. Results: The survey found respondents were willing to pay a mean of \$1,231 (\$1,112-1,322; AUD 2009) to avoid the stigma from a criminal record for a loved one or for themselves. Household income was an important predictor of willingness-to-pay (WTP). The WTP was significantly and positively related to whether the respondent believed cannabis was usually or always addictive while those who had used cannabis recently (within past 12 months) were less likely to pay more, relative to those who had not used recently. Conclusions: This paper demonstrates the feasibility of using economic methods to value intangible benefits from drug policy changes. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Springer Science+Business Media Dordrecht; YEAR: 2013

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

**Subject Headings:** [\\*Cannabis](#)  
[\\*Costs and Cost Analysis](#)  
[\\*Government Policy Making](#)  
[\\*Laws](#)  
[\\*Stigma](#)  
[Marijuana Legalization](#)

**Source:** PsycINFO

**25. Attention deficit/hyperactivity disorders with co-existing substance use disorder is characterized by early antisocial behaviour and poor cognitive skills.**

**Citation:** BMC Psychiatry, December 2013, vol./is. 13/, 1471-244X (Dec 13, 2013)

**Author(s):** Bihlar Muld, Berit; Jokinen, Jussi; Bolte, Sven; Hirvikoski, Tatja

**Correspondence Address:** Hirvikoski, Tatja: Department of Women's and Children's Health, Karolinska Institute, Pediatric Neuropsychiatry Unit, Center of Neurodevelopmental Disorders at Karolinska Institutet (KIND), Gavlegatan 22B, Stockholm, Sweden, SE-113 30, tatja.hirvikoski@ki.se

**Institution:** SiS LVM Institution Horno, Enköping, Sweden; Department of Clinical Neuroscience, Karolinska Institutet, Stockholm, Sweden; Department of Women's and Children's Health, Karolinska Institute, Pediatric Neuropsychiatry Unit, Center of Neurodevelopmental Disorders at Karolinska Institutet (KIND), Stockholm, Sweden; Department of Women's and Children's Health, Karolinska Institute, Pediatric Neuropsychiatry Unit, Center of Neurodevelopmental Disorders at Karolinska Institutet (KIND), Stockholm, Sweden

**Language:** English

**Abstract:** Background: Attention Deficit/Hyperactivity Disorder (ADHD) is associated with an increased risk of co-existing substance abuse. The Swedish legislation on compulsory healthcare can be applied to persons with severe substance abuse who can be treated involuntarily during a period of six months. This context enables a reliable clinical assessment of ADHD in individuals with severe substance use disorder (SUD). Methods: In the context of compulsory care for individuals with severe SUD, male patients were assessed for ADHD, co-morbid psychiatric symptoms, psychosocial background, treatment history, and cognition. The data from the ADHD/SUD group (n = 60) was compared with data from (1) a group of individuals with severe substance abuse without known ADHD (SUD group, n = 120), as well as (2) a group with ADHD from an outpatient psychiatric clinic (ADHD/Psych group, n = 107). Results: Compared to the general SUD group in compulsory care, the ADHD/SUD group had already been significantly more often in compulsory care during childhood or adolescence, as well as imprisoned more often as adults. The most common preferred abused substance in the ADHD/SUD group was stimulant drugs, while alcohol and benzodiazepine abuse was more usual in the general SUD group. Compared to the ADHD/Psych group, the ADHD/SUD group reported more ADHD symptoms during childhood and performed poorer on all tests of general intellectual ability and executive functions. Conclusions: The clinical characteristics of the ADHD/SUD group differed from those of both the SUD group and the ADHD/Psych group in several respects, indicating that ADHD in combination with SUD is a particularly disabling condition. The combination of severe substance abuse, poor general cognitive ability, severe psychosocial problems, including indications of antisocial behaviour, and other co-existing psychiatric conditions should be considered in treatment planning for adults with ADHD and SUD. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: This is an open access article distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/2.0>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.; HOLDER: Bihlar Muld et al.; licensee BioMed Central Ltd.; YEAR: 2013

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



**Subject Headings:** [\\*Antisocial Behavior](#)  
[\\*Attention Deficit Disorder with Hyperactivity](#)  
[\\*Cognitive Ability](#)  
[\\*Comorbidity](#)  
[\\*Drug Abuse](#)

**Source:** PsycINFO

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

## 26. Enhancing the patient involvement in outcomes: A study protocol of personalised outcome measurement in the treatment of substance misuse.

**Citation:** BMC Psychiatry, December 2013, vol./is. 13/, 1471-244X (Dec 16, 2013)

**Author(s):** Alves, Paula C. G.; Sales, Celia M. D; Ashworth, Mark

**Correspondence Address:** Alves, Paula C. G.: Instituto Universitario de Lisboa (ISCTE-IUL), Cis-IUL, Sala 2w17, Av. Forcas Armadas, Edificio ISCTE, Lisboa, Portugal, 1649-026, paulagomesalves@hotmail.com

**Institution:** Instituto Universitario de Lisboa (ISCTE-IUL), Cis-IUL, Lisboa, Portugal; Instituto Universitario de Lisboa (ISCTE-IUL), Cis-IUL, Lisboa, Portugal; Division of Health and Social Care Research, School of Medicine, King's College London, London, United Kingdom

**Language:** English

**Abstract:** Background: Involving patients in treatment is becoming increasingly popular in mental health [Sales & Alves: Personalized evaluation of psychological treatments: A review of tools and research designs, submitted]. However, in substance misuse treatment settings, the patient perspective about treatment tends to be overlooked. This has been cited as a key priority by Orford et al. [Addiction, 103: 875-885, 2008] who included patient feedback about treatment as one of ten areas requiring an urgent paradigm shift in addiction research and practice. This project will apply an innovative method to involve substance misuse patients in psychological therapies, by asking them to suggest topics to evaluate their treatment. These topics suggested by patients can be written as a list of personalised items, so-called as patient-generated outcome measures (PGOM). Despite its patient-friendly features, PGOM's have never been used in this population, which is what this project aims to overcome. Methods/design: This project is part of an International Exchange Platform on Personalising Addiction Treatment. Data will be collected in two phases (pre-post study and focus groups with patients) to explore the following: 1). How reliable and sensitive to change are PGOM's and standardised measures in substance misuse treatment? 2). Do PGOM's add relevant information to standardised measures? 3). What are the views of substance misuse patients about personalised outcome assessment? 4). Development of guidelines on using PGOM's in this population. Discussion: This research will potentially demonstrate the diversity of personal problems among patients seeking substance misuse treatment, suggesting the relevance of PGOM as a method to personalise outcome measurement and, ultimately, guiding treatment provision. It is expected that, as in previous studies, PGOM's will be perceived as helpful and patient-friendly tools, where patients may express their own concerns in a semi-structured setting. Similarly to other populations, we also expect PGOM's to be reliable, valid and sensitive to clinical changes in substance misuse treatment, as well as more content informative than their standardised counterparts. If these results are achieved, we might hypothesize that PGOM's are a potentially valid supplement to traditional standardised scales, by providing a closer insight to what motivates patients to participate in substance misuse treatment programmes. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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original work is properly cited. The Creative Commons Public Domain Dedication waiver (<http://creativecommons.org/publicdomain/zero/1.0/>) applies to the data made available in this article, unless otherwise stated.; HOLDER: Alves et al.; licensee BioMed Central Ltd.; YEAR: 2013

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[\\*Standardized Tests](#)  
[\\*Treatment Outcomes](#)

**Source:** PsycINFO

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

### 27. Therapeutic horticulture deserves wider implementation.

**Citation:** Issues in Mental Health Nursing, March 2014, vol./is. 35/3(155), 0161-2840;1096-4673 (Mar 2014)

**Author(s):** Thomas, Sandra P

**Language:** English

**Abstract:** This editorial discusses wider implementation of therapeutic horticulture. In the greenhouse, master gardeners work with patients to ensure that their hands-on activities in the garden reinforce the growth oriented aims of their addiction treatment. The gardeners deliberately select fast growing plants so that patients can see the results of their efforts before discharge. Some plantings are designed to inculcate lessons. Many residents' occupation prior to their hospitalization was farming, so this work was congenial to them. Misguided legislation later took away this opportunity, mandating that patients would have to be paid a wage if they performed "work" while hospitalized. As the author prepares her flower beds for another growing season, she wishes that therapeutic horticulture were offered to more people battling addictions and mental health problems. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: Informa Healthcare USA, Inc.; YEAR: 2014

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

**Subject Headings:** [\\*Horticulture Therapy](#)  
[\\*Mental Disorders](#)  
[\\*Plants \(Botanical\)](#)  
[Addiction](#)

**Source:** PsycINFO

**Full Text:** Available from *Informa Healthcare* in [Issues in Mental Health Nursing](#)

### 28. Erratum: Book review of Clinical manual of adolescent substance abuse treatment.

**Citation:** Journal of Nervous and Mental Disease, January 2014, vol./is. 202/1(78), 0022-3018;1539-736X (Jan 2014)

**Author(s):** Cagande, Consuelo C; Pumariiega, Andres J

**Institution:** Department of Psychiatry, Cooper University Hospital, Camden, NJ, US; Department of Psychiatry, Cooper University Hospital, Camden, NJ, US

**Language:** English

**Abstract:** Reports an error in "Review of Clinical manual of adolescent substance abuse treatment" by Consuelo C. Cagande and Adres J. Pumariiega (Journal of Nervous and Mental Disease, 2013[Nov], Vol 201[11], 1004). In the original article, the names of the book editors were misspelled. The correct spelling of the book editors are present in the erratum. (The following abstract of the original article appeared in record

2013-39028-016). Reviews the book, *Clinical Manual of Adolescent Substance Abuse Treatment* edited by Yifrah Kaniner and Ken C. Winters (see record 2010-21811-000). Adolescent substance use and disorder remains a highly prevalent challenge today as it has been for many years. However, the past 2 decades have brought more research on adolescent substance use, including its treatment. Resources that inform clinicians about these advances are sorely needed, and this book is a very comprehensive manual that any clinician involved with adolescent substance users will find very applicable. The book is well structured and formatted with comprehensive evidence data. The contributors are highly recognized national experts in adolescents with substance use disorders. There are extensive references and Web sites for readers. Child and adolescent psychiatrists, psychologists, or other mental health professionals who already treat adolescents with substance use disorders may find the book a bit repetitive. However, for many practitioners, including pediatricians, the book can provide the information and perspective needed to treat this special population. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

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

**Source:** PsycINFO

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

#### 29. Whoonga: Potential recreational use of HIV antiretroviral medication in South Africa.

**Citation:** AIDS and Behavior, March 2014, vol./is. 18/3(511-518), 1090-7165;1573-3254 (Mar 2014)

**Author(s):** Grelotti, David J; Closson, Elizabeth F; Smit, Jennifer A; Mabude, Zonke; Matthews, Lynn T; Safren, Steven A; Bangsberg, David R; Mimiaga, Matthew J

**Correspondence Address:** Grelotti, David J.: Department of Epidemiology, Harvard School of Public Health, 677 Huntington Avenue, Boston, MA, US, 02115, [grelotti@hsph.harvard.edu](mailto:grelotti@hsph.harvard.edu)

**Institution:** Department of Epidemiology, Harvard School of Public Health, Boston, MA, US; Fenway Institute, Fenway Health, Boston, MA, US; Maternal, Adolescent and Child Health (MatCH), Department of Obstetrics and Gynaecology, Faculty of Health Sciences, University of the Witwatersrand, Durban, South Africa; Maternal, Adolescent and Child Health (MatCH), Department of Obstetrics and Gynaecology, Faculty of Health Sciences, University of the Witwatersrand, Durban, South Africa; Department of Medicine, Massachusetts General Hospital, Harvard Medical School, Boston, MA, US; Department of Psychiatry, Massachusetts General Hospital, Harvard Medical School, Boston, MA, US; Department of Medicine, Massachusetts General Hospital, Harvard Medical School, Boston, MA, US; Department of Epidemiology, Harvard School of Public Health, Boston, MA, US

**Language:** English

**Abstract:** Whoonga is a drug cocktail in South Africa rumored to contain illicit drugs and HIV antiretroviral (ARV) medication. Although its use may adversely impact adherence to HIV treatment and may have the potential to generate ARV resistance, there is a paucity of research characterizing whoonga. We learned of whoonga during semi-structured interviews about substance abuse and HIV risk at "club-events" known as inkwaris in an urban township of Durban, South Africa. Whoonga was an emerging theme spontaneously identified as a problem for the community by 17 out of 22 informants. Perceptions of whoonga suggest that it is highly addictive, contains ARVs (notably efavirenz), is used by individuals as young as 14, and poses a threat to the health and safety of those who use it, including increasing the risk of HIV infection. Our informants provide preliminary evidence of the dangers of whoonga and reinforce the need for further study. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Springer Science+Business Media New York; YEAR: 2013  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Antiviral Drugs](#)  
[\\*Drug Therapy](#)  
[\\*HIV](#)  
[\\*Infectious Disorders](#)  
[AIDS](#)  
[Health Behavior](#)  
[Methylenedioxymethamphetamine](#)  
[Recreation](#)  
**Source:** PsycINFO

### 30. Review of The world drug report 2013.

**Citation:** Drug and Alcohol Review, March 2014, vol./is. 33/2(216), 0959-5236;1465-3362 (Mar 2014)  
**Author(s):** Burns, Lucy  
**Institution:** National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW, Australia  
**Language:** English  
**Abstract:** Reviews the report, The World Drug Report 2013 (2013). The World Drug Report is an annual report produced by the United Nations Office on Drugs and Crime (UNODC) that outlines the latest developments in world drug markets, covering production, trafficking, consumption and related health consequences. Given the scope of the report and the varying availability of data, the production of this information is a Herculean task and the result an impressive go-to document for anyone who wants information on global or country specific drug trends. Given the dynamic nature of drug markets, the World Drug Report needs to keep up to date about the latest developments. In the most recent 2013 report, chapter 1 discusses the extent of drug use; an overview of drug use and health consequences; an overview of trends related to drugs supply indicators by drug type and region; and detailed accounts of specific drug markets. Chapter 2 provides a comprehensive overview of issues related to the new psychoactive substances (NPS), including a discussion of concepts and definitions. For researchers in the drug and alcohol field, policy makers and clinicians alike, this is a key influential report for understanding current global and local drug trends and should be referred to in any discussion on the topic. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: Australasian Professional Society on Alcohol and other Drugs; YEAR: 2014  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Illegal Drug Distribution](#)  
[\\*Drug Laws](#)  
[\\*Drug Usage](#)  
[Health Behavior](#)  
**Source:** PsycINFO  
**Full Text:** Available from *Wiley* in [Drug and Alcohol Review](#)

### 31. Order of onset of drug use and criminal activities in a sample of drug-abusing women convicted of violent crimes.

**Citation:** Drug and Alcohol Review, March 2014, vol./is. 33/2(202-210), 0959-5236;1465-3362 (Mar 2014)  
**Author(s):** Baltieri, Danilo Antonio  
**Correspondence Address:** Baltieri, Danilo Antonio: Sexual Disorders Outpatient Clinic, Department of Psychiatry, ABC Medical School, Avenida Angelica, n 2100, conjunto 13, Santo Andre, Sao Paulo, Brazil, 01228-200, dbaltieri@uol.com.br  
**Institution:** Department of Psychiatry, University of Sao Paulo, Sao Paulo, Brazil

**Language:** English

**Abstract:** Introduction and Aims: This study aims to explore the temporal relationship between age of onset of substance use and criminal activity in women convicted of violent crimes as well as to subdivide them into clinically significant groups to which tailored treatment can be guided. Design and Method: Of the 353 female inmates randomised for this study, 38 (10.8%) refused to participate and 182 (51.6%) met inclusion criteria. Data were obtained only from substance-abusing female inmates serving a sentence for robbery or homicide in a female penitentiary in Brazil. Participant information was gathered through face-to-face interviews during which alcohol and drug abuse, impulsiveness levels, depressive symptoms, and criminological aspects were investigated. Results: Age of first alcohol and drug use significantly preceded the age of onset of criminal activities in the overall sample. Onset ages of alcohol and drug use problems significantly preceded the beginning of criminal activities in women convicted of homicide only. Latent Class Analysis resulted in two groups: cluster 1 (n = 122; 67%), early-onset alcohol and drug users; and cluster 2 (n = 60; 33%), late-onset alcohol and drug users. Higher depression levels, higher incidence of committing robbery and less official history of recidivism were associated with cluster 1 inmates. Discussion and Conclusions: The temporal relationship between the onset age of alcohol/drug use problems and age of the beginning of criminal activities can set apart women convicted of robbery from those convicted of homicide. Further, a distinctive therapeutic approach to early- and late-onset offenders may be valuable. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Australasian Professional Society on Alcohol and other Drugs; YEAR: 2014

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Female Criminals](#)  
[\\*Homicide](#)  
[\\*Onset \(Disorders\)](#)  
[\\*Violent Crime](#)  
[Criminal Behavior](#)  
[Prisoners](#)

**Source:** PsycINFO

**Full Text:** Available from *Wiley* in [Drug and Alcohol Review](#)

### 32. Outcome evaluation of the opioid agonist maintenance treatment in Iran.

**Citation:** Drug and Alcohol Review, March 2014, vol./is. 33/2(186-193), 0959-5236;1465-3362 (Mar 2014)

**Author(s):** Esmacili, Hamid-Reza; Ziaddinni, Hassan; Nikraves, Mohammad-Rafee; Baneshi, Mohammad-Reza; Nakhaee, Nouzar

**Correspondence Address:** Nakhaee, Nouzar: Neuroscience Research Center, Institute of Neuropharmacology, Kerman University of Medical Sciences, Kerman, Iran, nakhaeen@kmu.ac.ir

**Institution:** Research Center for Health Services Management, Institute of Futures Studies in Health, Kerman University of Medical Sciences, Kerman, Iran; Research Center for Social Determinants of Health, Institute of Futures Studies in Health, Kerman University of Medical Sciences, Kerman, Iran; Physiology Research Center, Kerman University of Medical Sciences, Kerman, Iran; Research Center for Modeling in Health, Institute of Futures Studies in Health, Kerman University of Medical Sciences, Kerman, Iran; Neuroscience Research Center, Institute of Neuropharmacology, Kerman University of Medical Sciences, Kerman, Iran

**Language:** English

**Abstract:** Introduction and Aims: Methadone maintenance treatment and buprenorphine maintenance treatment are the two main therapeutic options considered for opioid replacement therapy. This study was conducted to examine the effectiveness of methadone maintenance treatment and buprenorphine maintenance treatment in Iran

under usual clinical conditions. Design and Methods: In this outcome research, 311 patients consented to participate in the study (77.8% response rate). The Opioid Treatment Index, General Health Questionnaire and WHOQOL-BREF questionnaire were used to assess the effectiveness of the therapeutic programs. Drop-out rate was calculated after two and six months of treatment. Results: Mean dose of methadone was in an acceptable range; however, doses for buprenorphine maintenance treatment patients seemed low. The rates of attrition after two and six months of treatment were 24.2% and 44.0% in the methadone maintenance treatment group and 41.3% and 65.4% in the buprenorphine maintenance treatment group, respectively ( $P < 0.001$ ). Drug use, HIV risk-taking behaviour, and mental and physical health improved in both groups at six months of treatment, while quality of life improved only in the methadone maintenance treatment group. Discussion and Conclusions: The retention seen in the buprenorphine group may in part be related to the low buprenorphine doses used. As a whole, the positive results provide support to continuation of maintenance programs. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Australasian Professional Society on Alcohol and other Drugs; YEAR: 2014

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

**Subject Headings:** [\\*Drug Rehabilitation](#)  
[\\*Methadone Maintenance](#)  
[\\*Narcotic Agonists](#)  
[\\*Treatment Effectiveness Evaluation](#)  
[Drug Addiction](#)  
[Opiates](#)

**Source:** PsycINFO

**Full Text:** Available from *Wiley* in [Drug and Alcohol Review](#)

### 33. The healing power of writing: A therapist's guide to using journaling with clients.

**Citation:** The healing power of writing: A therapist's guide to using journaling with clients., 2014 (2014)

**Author(s):** Borkin, Susan

**Language:** English

**Abstract:** (from the jacket) While much has been written about the physical and emotional benefits of writing, little has been written specifically for mental health professionals detailing how to use therapeutic journaling with their clients. Therapeutic journaling-any type of writing or related expressive process used for the purpose of psychological healing or growth-can be an extremely helpful adjunctive therapy. When integrated into an overall treatment plan, regardless of the therapist's clinical orientation, journaling can become a dynamic tool for personal growth and healing. The first part of this book, "Journaling and the Clinical Process," gives an overview of therapeutic journaling and the many potential benefits from its use. It provides concrete and specific steps for introducing journaling to psychotherapy clients and answers questions about structure and logistics. For example, engaging your client in writing a biographical statement will not only help focus the treatment plan but also provide a vast amount of background information. This section also introduces two very beneficial mnemonic devices to help clients focus and organize journaling between sessions. The next section, "Presenting Problems and Journaling Solutions," addresses nine different diagnoses and explains specifically how therapeutic journaling can be integrated into the treatment plan of these diagnoses. Key diagnoses are covered: adjustment disorders, anxiety, depression, grief, low self-esteem, couple and relationship issues, addictions, disordered eating, and post-traumatic stress disorder. The final part of the book, "Journaling Roadblocks and Building Blocks," addresses potentially difficult, sticky, or challenging situations regarding journaling, such as possible resistance to therapeutic journaling, privacy issues, safe boundaries, and protection of client material. Importantly, it also reviews those circumstances in which it is best not to use therapeutic journaling or when journaling is contraindicated. The author offers a program designed for therapists for creating their own therapeutic journaling practice. The Healing Power of Writing is filled with case studies, step-by-step exercises,

and clear and practical guidelines for mental health professionals who want to incorporate journaling into their clients' treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Authored Book

**Subject Headings:** [\\*Creative Arts Therapy](#)  
[\\*Mental Health](#)  
[\\*Psychotherapy](#)  
[\\*Journal Writing](#)

**Source:** PsycINFO

#### 34. Morality, self-control, deterrence, and drug use: Street youths and situational action theory.

**Citation:** Crime & Delinquency, March 2014, vol./is. 60/2(284-305), 0011-1287;1552-387X (Mar 2014)

**Author(s):** Gallupe, Owen; Baron, Stephen W

**Correspondence Address:** Gallupe, Owen: Simon Fraser University, School of Criminology, 8888 University Drive, Burnaby, BC, Canada, V5A 1S6, ogallupe@sfu.ca

**Institution:** School of Criminology, Simon Fraser University, Burnaby, BC, Canada; Department of Sociology, Queen's University, Kingston, ON, Canada

**Language:** English

**Abstract:** Utilizing a sample of homeless street youth, the authors apply Wikstrom's situational action theory (SAT) to explaining drug use. The article examines the assertion that morality is the most important factor in explaining crime and that self-control and deterrence are key factors in understanding criminal behavior only at moderate levels of morality. Results reveal that morality has a strong effect on hard but not soft drug use, whereas the impact of deterrence on both forms of behavior is stronger than self-control. The proposed conditioning effects outlined in SAT do not have significant associations with drug use. Implications for the theory and avenues for future research are offered. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Author(s); YEAR: 2010

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

**Subject Headings:** [\\*Client Characteristics](#)  
[\\*Drug Usage](#)  
[\\*Homeless](#)  
[\\*Morality](#)  
[Criminal Behavior](#)  
[Juvenile Delinquency](#)  
[Self Control](#)  
[Action Research](#)

**Source:** PsycINFO

#### 35. Association of GATA4 sequence variation with alcohol dependence.

**Citation:** Addiction Biology, March 2014, vol./is. 19/2(312-315), 1355-6215;1369-1600 (Mar 2014)

**Author(s):** Karpyak, Victor M; Winham, Stacey J; Biernacka, Joanna M; Cunningham, Julie M; Lewis, Kriste A; Geske, Jennifer R; Colby, Colin L; Abulseoud, Osama A; Hall-Flavin, Daniel K; Loukianova, Larissa L; Schneekloth, Terry D; Frye, Mark A; Heit, John A; Mrazek, David A

**Correspondence Address:** Karpyak, Victor M.: Department of Psychiatry and Psychology, Mayo Clinic Rochester, 200 First Street SW, Rochester, MN, US, 55905, karpyak.victor@mayo.edu

**Institution:** Mayo Clinic, Rochester, MN, US; Mayo Clinic, Rochester, MN, US; Mayo Clinic, Rochester, MN, US; Laboratory Medicine and Pathology, Mayo Clinic, Rochester, MN, US; Mayo Clinic, Rochester, MN, US; Mayo Clinic, Rochester, MN, US; Mayo Clinic,



Rochester, MN, US; Mayo Clinic, Rochester, MN, US; Mayo Clinic, Rochester, MN, US; Mayo Clinic, Rochester, MN, US; Mayo Clinic, Rochester, MN, US; Mayo Clinic, Rochester, MN, US; Mayo Clinic, Rochester, MN, US; Division of Cardiovascular Diseases, Mayo Clinic, Rochester, MN, US; Mayo Clinic, Rochester, MN, US

**Language:** English

**Abstract:** To further explore reports of association of alcohol dependence and response to acamprosate treatment with the GATA4 rs13273672 single nucleotide polymorphism (SNP), we genotyped this and 10 other GATA4 SNPs in 816 alcohol-dependent cases and 1248 controls. We tested for association of alcohol dependence with the 11 SNPs individually and performed a global test for association using a principle components analysis. Our analyses demonstrate significant association between GATA4 and alcohol dependence at the gene level ( $P = 0.009$ ) but no association with rs13273672. Further studies are needed to identify potential causal GATA4 variation(s) and the functional mechanism(s) contributing to this association. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Authors. Addiction Biology-Society for the Study of Addiction; YEAR: 2012

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Drug Therapy](#)  
[\\*Genetics](#)  
[\\*Polymorphism](#)  
[\\*Acamprosate](#)  
[Nucleotides](#)

**Source:** PsycINFO

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

### 36. Epigenetic alteration of the dopamine transporter gene in alcohol-dependent patients is associated with age.

**Citation:** *Addiction Biology*, March 2014, vol./is. 19/2(305-311), 1355-6215;1369-1600 (Mar 2014)

**Author(s):** Nieratschker, Vanessa; Grosshans, Martin; Frank, Josef; Strohmaier, Jana; von der Goltz, Christoph; El-Maarri, Osman; Witt, Stephanie H; Cichon, Sven; Nothen, Markus M; Kiefer, Falk; Rietschel, Marcella

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**Language:** English



**Abstract:** Chronic alcohol abuse and dependence are associated with dysfunctional dopaminergic neurotransmission in mesocorticolimbic circuits. Genetic and environmental factors have been shown to modulate susceptibility to alcohol dependence, and both may act through epigenetic mechanisms that can modulate gene expression, e.g. DNA methylation at CpG sites. Recent studies have suggested that DNA methylation patterns may change over time. However, few data are available concerning the rate of these changes in specific genes. A recent study found that hypermethylation of the promoter of the dopamine transporter (DAT) gene was positively correlated with alcohol dependence and negatively correlated with alcohol craving. The aim of the present study was to replicate these findings in a larger sample of alcohol-dependent patients and population-based controls matched for age and sex. No difference in methylation level was observed between patients and controls, and no difference in methylation level was observed before and after alcohol withdrawal in patients. However, patients with more severe craving showed a trend towards lower DAT methylation levels ( $P = 0.07$ ), which is consistent with previous findings. Furthermore, in our overall sample, DAT methylation levels increased with age. Interestingly, a separate analysis of patients suggested that this finding was mainly driven by the patient group. Although the present data do not clarify whether chronic alcohol abuse is responsible for this phenomenon or merely enhances an ageing-specific process, our findings suggest that hypermethylation in alcohol-dependent patients is a consequence, rather than a cause, of the disorder. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Authors. Addiction Biology-Society for the Study of Addiction; YEAR: 2012

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

**Subject Headings:** [\\*Age Differences](#)  
[\\*Alcoholism](#)  
[\\*Dopamine](#)  
[\\*Genes](#)  
[\\*Epigenetics](#)  
[Patients](#)

**Source:** PsycINFO

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

### 37. Relationship between working-memory network function and substance use: A 3-year longitudinal fMRI study in heavy cannabis users and controls.

**Citation:** Addiction Biology, March 2014, vol./is. 19/2(282-293), 1355-6215;1369-1600 (Mar 2014)

**Author(s):** Cousijn, Janna; Vingerhoets, Wilhelmina A. M; Koenders, Laura; de Haan, Lieuwe; van den Brink, Wim; Wiers, Reinout W; Goudriaan, Anna E

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**Language:** English

**Abstract:** Deficient executive functions play an important role in the development of addiction. Working-memory may therefore be a powerful predictor of the course of drug use, but chronic substance use may also impair working-memory. The aim of this 3-year

longitudinal neuro-imaging study was to investigate the relationship between substance use (e.g. alcohol, cannabis, nicotine, illegal psychotropic drugs) and working-memory network function over time in heavy cannabis users and controls. Forty-nine participants performed an n-back working-memory task at baseline and at 3-year follow-up. At follow-up, there were 22 current heavy cannabis users, 4 abstinent heavy cannabis users and 23 non-cannabis-using controls. Tensor-independent component analysis (Tensor-ICA) was used to investigate individual differences in working-memory network functionality over time. Within the group of cannabis users, cannabis-related problems remained stable, whereas alcohol-related problems, nicotine dependence and illegal psychotropic substance use increased over time. At both measurements, behavioral performance and network functionality during the n-back task did not differ between heavy cannabis users and controls. Although n-back accuracy improved, working-memory network function remained stable over time. Within the group of cannabis users, working-memory network functionality was not associated with substance use. These results suggest that sustained moderate to heavy levels of cannabis, nicotine, alcohol and illegal psychotropic substance use do not change working-memory network functionality. Moreover, baseline network functionality did not predict cannabis use and related problems three years later, warranting longitudinal studies in more chronic or dependent cannabis users. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Cannabis](#)  
[\\*Drug Addiction](#)  
[\\*Short Term Memory](#)  
[\\*Functional Magnetic Resonance Imaging](#)

**Source:** PsycINFO

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

### 38. Functional alteration in frontolimbic systems relevant to moral judgment in cocaine-dependent subjects.

**Citation:** *Addiction Biology*, March 2014, vol./is. 19/2(272-281), 1355-6215;1369-1600 (Mar 2014)

**Author(s):** Verdejo-Garcia, Antonio; Contreras-Rodriguez, Oren; Fonseca, Francina; Cuenca, Aida; Soriano-Mas, Carles; Rodriguez, Joan; Pardo-Lozano, Ricardo; Blanco-Hinojo, Laura; de Sola Llopis, Susana; Farre, Magi; Torrens, Marta; Pujol, Jesus; de la Torre, Rafael

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Unit, CRC Mar, Hospital del Mar, Spain; Human Pharmacology and Clinical Neurosciences Research Group, Neuroscience Research Program, IMIM, Hospital del Mar Research Institute, Parc de Salut Mar, Spain

**Language:** English

**Abstract:** Cocaine addiction is characterized by persistent decision-making deficits, which are linked to structural and functional abnormalities in frontolimbic systems. Moral judgment is as a special instance of decision making, in which both cognitive and emotional signals must be adequately integrated to decide how to resolve moral dilemmas. Here, we employed a moral dilemmas functional magnetic resonance imaging (fMRI) task to explore possible alterations of frontolimbic systems in cocaine-dependent subjects. We also explored if these alterations relate to more basic deficits in functional connectivity within these systems during spontaneous resting-state activation. Ten cocaine-dependent subjects and 14 non-drug-using controls participated in the study. Cocaine-dependent subjects were carefully selected to discard potentially confounding co-morbidities, and they underwent a uniform supervised abstinence period of 10 days. Both groups were scanned, and fMRI maps were generated to identify (1) brain response to moral dilemmas; and (2) the strength of functional connectivity within frontolimbic systems during resting-state. During the moral dilemmas task, cocaine-dependent subjects showed reduced activation involving frontolimbic structures as the anterior cingulate cortex (ACC), left insula and brain stem. Connectivity analyses showed that cocaine users had less resting-state functional connectivity between ACC, thalamus, insula and brain stem. These results demonstrate that cocaine-dependent subjects have functional alterations in the frontolimbic systems that support moral judgment and social decision making. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Authors. Addiction Biology-Society for the Study of Addiction; YEAR: 2012

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

**Subject Headings:** [\\*Cocaine](#)  
[\\*Drug Dependency](#)  
[\\*Judgment](#)  
[\\*Limbic System](#)  
[\\*Morality](#)

**Source:** PsycINFO

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

### 39. Differences in regional cerebral blood flow response to a 5HT3 antagonist in early- and late-onset cocaine-dependent subjects.

**Citation:** Addiction Biology, March 2014, vol./is. 19/2(250-261), 1355-6215;1369-1600 (Mar 2014)

**Author(s):** Adinoff, Bryon; Devous, Michael D; Williams, Mark J; Harris, Thomas S; Best, Susan E; Dong, Hongyun; Zielinski, Tanya

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**Language:** English

**Abstract:** 5-hydroxytryptamine 3 (5HT3) receptors are important modulators of mesostriatal dopaminergic transmission and have been implicated in the pathophysiology of cocaine reward, withdrawal and self-administration. In addition, the 5HT3 antagonist ondansetron is effective in treating early-onset, but not late-onset, alcohol-dependent subjects. To explore the role of 5HT3 receptor systems in cocaine addiction using functioning imaging, we administered ondansetron to 23 abstinent, treatment-seeking cocaine-addicted and 22 sex-, age- and race-matched healthy control participants. Differences between early- (first use before 20 years, n = 10) and late-onset (first use after 20 years, n = 10) cocaine-addicted subjects were also assessed. On two separate days, subjects were administered ondansetron (0.15 mg/kg intravenously over 15 minutes) or saline. Regional cerebral blood flow (rCBF) was measured following each infusion with single photon emission computed tomography. No significant rCBF differences between the cocaine-addicted and control participants were observed following ondansetron relative to saline. Early-onset subjects, however, showed increased ( $P < 0.001$ ) right posterior parahippocampal rCBF following ondansetron. In contrast, late-onset subjects showed decreased rCBF following ondansetron in an overlapping region of the right parahippocampal/hippocampal gyrus. Early-onset subjects also displayed increased rCBF in the left anterior insula and subthalamic nucleus following ondansetron; late-onset subjects showed decreased rCBF in the right anterior insula. These findings suggest that the age of drug use onset is associated with serotonergic biosignatures in cocaine-addicted subjects. Further clarification of these alterations may guide targeted treatment with serotonergic medications similar to those successfully used in alcohol-dependent patients. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Cerebral Blood Flow](#)  
[\\*Cocaine](#)  
[\\*Drug Dependency](#)  
[Dopamine Antagonists](#)  
[Responses](#)  
[Insula](#)  
[Subthalamic Nucleus](#)

**Source:** PsycINFO

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

#### 40. Anti-addiction drug ibogaine inhibits hERG channels: A cardiac arrhythmia risk.

**Citation:** *Addiction Biology*, March 2014, vol./is. 19/2(237-239), 1355-6215;1369-1600 (Mar 2014)

**Author(s):** Koenig, Xaver; Kovar, Michael; Boehm, Stefan; Sandtner, Walter; Hilber, Karlheinz

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**Language:** English

**Abstract:** Ibogaine, an alkaloid derived from the African shrub *Tabernanthe iboga*, has shown promising anti-addictive properties in animals. Anecdotal evidence suggests that ibogaine is also anti-addictive in humans. Thus, it alleviates drug craving and impedes relapse of drug use. Although not licensed as therapeutic drug, and despite evidence that ibogaine may disturb the rhythm of the heart, this alkaloid is currently used as an anti-addiction

drug in alternative medicine. Here, we report that therapeutic concentrations of ibogaine reduce currents through human ether-a-go-go-related gene potassium channels. Thereby, we provide a mechanism by which ibogaine may generate life-threatening cardiac arrhythmias. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Authors. Addiction Biology-Society for the Study of Addiction; YEAR: 2012

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

**Subject Headings:** [\\*Alkaloids](#)  
[\\*Arrhythmias \(Heart\)](#)  
[\\*Risk Factors](#)  
[Craving](#)  
[Drug Addiction](#)  
[Genes](#)  
[Ion Channel](#)

**Source:** PsycINFO

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

#### 41. A novel mGluR5 antagonist, MFZ 10-7, inhibits cocaine-taking and cocaine-seeking behavior in rats.

**Citation:** *Addiction Biology*, March 2014, vol./is. 19/2(195-209), 1355-6215;1369-1600 (Mar 2014)

**Author(s):** Keck, Thomas M; Zou, Mu-Fa; Bi, Guo-Hua; Zhang, Hai-Ying; Wang, Xiao-Fei; Yang, Hong-Ju; Srivastava, Ratika; Gardner, Eliot L; Xi, Zheng-Xiong; Newman, Amy Hauck

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**Language:** English

**Abstract:** Pre-clinical studies suggest that negative allosteric modulators (NAMs) of the metabotropic glutamate receptor subtype 5 (mGluR5), including 2-methyl-6-(phenylethynyl)pyridine (MPEP), 3-[(2-methyl-1,3-thiazol-4-yl)ethynyl]pyridine (MTEP) and fenobam are highly effective in attenuating drug-taking and drug-seeking behaviors. However, both MPEP and MTEP have no translational potential for use in humans because of their off-target effects and short half-lives. Here, we report that 3-fluoro-5-[(6-methylpyridin-2-yl)ethynyl]benzotrile (MFZ 10-7), a novel mGluR5



NAM, is more potent and selective than MPEP, MTEP and fenobam in both in vitro binding and functional assays. Similar to MTEP, intraperitoneal administration of MFZ 10-7 inhibited intravenous cocaine self-administration, cocaine-induced reinstatement of drug-seeking behavior and cocaine-associated cue-induced cocaine-seeking behavior in rats. Although MFZ 10-7 and MTEP lowered the rate of oral sucrose self-administration, they did not alter total sucrose intake. Further, MFZ 10-7 appeared to be more potent than MTEP in inducing downward shifts in the cocaine dose-response curve, but less effective than MTEP in attenuating sucrose-induced reinstatement of sucrose-seeking behavior. MFZ 10-7 and MTEP had no effect on basal locomotor behavior. These findings not only provide additional evidence supporting an important role for mGluR5 in cocaine reward and addiction, but also introduce a new tool for both in vitro and in vivo investigations with which to further characterize this role. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Cocaine](#)  
[\\*Glutamate Receptors](#)  
[\\*Drug Seeking](#)  
[Rats](#)

**Source:** PsycINFO

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

#### 42. Reduced ethanol consumption and preference in cocaine- and amphetamine-regulated transcript (CART) knockout mice.

**Citation:** *Addiction Biology*, March 2014, vol./is. 19/2(175-184), 1355-6215;1369-1600 (Mar 2014)

**Author(s):** Salinas, Armando G; Nguyen, Chinh T. Q; Ahmadi-Tehrani, Dara; Morrisett, Richard A

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**Language:** English

**Abstract:** Cocaine-and amphetamine-regulated transcript (CART) is a neuropeptide implicated in addiction to drugs of abuse. Several studies have characterized the role of CART in addiction to psychostimulants, but few have examined the role of CART in alcohol use disorders including alcoholism. The current study utilized a CART knockout (KO) mouse model to investigate the role of CART in ethanol appetitive behaviors. A two-bottle choice, unlimited-access paradigm was used to compare ethanol appetitive behaviors between CART wild type (WT) and KO mice. The mice were presented with an ethanol solution (3%-21%) and water, each concentration for 4 days, and their consumption was measured daily. Consumption of quinine (bitter) and saccharin (sweet) solutions was measured following the ethanol preference tests. In addition, ethanol metabolism rates and ethanol sensitivity were compared between genotypes. CART KO mice consumed and preferred ethanol less than their WT counterparts in both sexes. This genotype effect could not be attributed to differences in bitter or sweet taste perception or ethanol metabolism rates. There was also no difference in ethanol sensitivity in male mice; however, CART KO female mice showed a greater ethanol sensitivity than the WT females. Taken together, these data demonstrate a role for CART in ethanol appetitive behaviors and as a possible therapeutic drug target for alcoholism and abstinence enhancement. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Authors. Addiction Biology-Society for the Study of Addiction; YEAR: 2012

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

**Subject Headings:** [\\*Amphetamine](#)  
[\\*Cocaine](#)  
[\\*Ethanol](#)  
[Mice](#)

**Source:** PsycINFO

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

#### 43. Potent rewarding and reinforcing effects of the synthetic cathinone 3,4-methylenedioxypyrovalerone (MDPV).

**Citation:** Addiction Biology, March 2014, vol./is. 19/2(165-174), 1355-6215;1369-1600 (Mar 2014)

**Author(s):** Watterson, Lucas R; Kufahl, Peter R; Nemirovsky, Natali E; Sewalia, Kaveish; Grabenauer, Megan; Thomas, Brian F; Marusich, Julie A; Wegner, Scott; Olive, M. Foster

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**Language:** English

**Abstract:** Reports of abuse and toxic effects of synthetic cathinones, frequently sold as 'bath salts' or 'legal highs', have increased dramatically in recent years. One of the most widely used synthetic cathinones is 3,4-methylenedioxypyrovalerone (MDPV). The current study evaluated the abuse potential of MDPV by assessing its ability to support intravenous self-administration and to lower thresholds for intracranial self-stimulation (ICSS) in rats. In the first experiment, the rats were trained to intravenously self-administer MDPV in daily 2-hour sessions for 10 days at doses of 0.05, 0.1 or 0.2 mg/kg per infusion. The rats were then allowed to self-administer MDPV under a progressive ratio (PR) schedule of reinforcement. Next, the rats self-administered MDPV for an additional 10 days under short access (ShA; 2 hours/day) or long access (LgA; 6 hours/day) conditions to assess escalation of intake. A separate group of rats underwent the same procedures, with the exception of self-administering methamphetamine (0.05 mg/kg per infusion) instead of MDPV. In the second experiment, the effects of MDPV on ICSS thresholds following acute administration (0.1, 0.5, 1 and 2 mg/kg, i.p.) were assessed. MDPV maintained self-administration across all doses tested. A positive relationship between MDPV dose and breakpoints for reinforcement under PR conditions was observed. LgA conditions led to escalation of drug intake at 0.1 and 0.2 mg/kg doses, and rats self-administering methamphetamine showed similar patterns of escalation. Finally, MDPV significantly lowered ICSS thresholds at all doses tested. Together, these findings indicate that MDPV has reinforcing properties and activates brain reward circuitry, suggesting a potential for abuse and addiction in humans. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Authors. Addiction Biology-Society for the Study of Addiction; YEAR: 2012

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

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



[\\*Rewards](#)  
[Rats](#)

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

#### 44. Sex differences in yohimbine-induced increases in the reinforcing efficacy of nicotine in adolescent rats.

**Citation:** *Addiction Biology*, March 2014, vol./is. 19/2(156-164), 1355-6215;1369-1600 (Mar 2014)

**Author(s):** Li, Sophia; Zou, Sheng; Coen, Kathleen; Funk, Douglas; Shram, Megan J; Le, A. D

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**Language:** English

**Abstract:** Stress is an important factor in the initiation and maintenance of smoking in adolescents. Women are more vulnerable to the development of addiction to smoking and have more difficulty quitting than men. Women also show enhanced responses to stress. Despite these differences, no work has been done examining the effects of stress on the reinforcing efficacy of self-administered nicotine in adolescent rats, or if there are sex differences. Male and female adolescent Long Evans rats were trained to self-administer one of three different intravenous doses of nicotine (7.5, 15, 30 g/kg/ infusion) first on fixed ratio, and then on a progressive ratio (PR) schedule beginning on postnatal day 33. The effect of the pharmacological stressor yohimbine (0.3, 0.6 mg/kg, i.p.) on the reinforcing efficacy of nicotine was then determined using the PR schedule. Yohimbine stimulated nicotine intake and increased PR breakpoints and numbers of infusions received in both male and female adolescent rats. The infusion dose of nicotine was positively associated with yohimbine-induced increases in responding. Female rats showed significantly increased breakpoints at yohimbine doses and nicotine infusion doses at which males did not. The effects of the pharmacological stressor, yohimbine on the reinforcing efficacy of nicotine are therefore linked to sex and nicotine infusion dose. Female rats are more sensitive to stress-induced potentiation of nicotine self-administration. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Authors. *Addiction Biology*-Society for the Study of Addiction; YEAR: 2012

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

**Subject Headings:** [\\*Animal Sex Differences](#)  
[\\*Nicotine](#)  
[\\*Pharmacology](#)  
[\\*Yohimbine](#)  
[Rats](#)  
[Stress](#)

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

#### 45. Peer research assistants: Promoting the shift from the status of patient to that of fully-fledged citizen.

**Original Title:** Les pairs-assistants de recherche: Pour favoriser l'evolution d'un statut de patients vers celui de citoyens a part entiere.

**Citation:** Drogues, sante et societe, June 2013, vol./is. 12/1(57-78), 1703-8847 (Jun 2013)

**Author(s):** Pelletier, Jean-Francois; Bordeleau, Julie; Dumais, Alexandre; Renaud, Patrice; Rowe, Michael

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**Language:** French

**Abstract:** Context: Scientific literature suggests that the participation of individuals in the recovery process as research partners represents an added scientific and social value to drug addiction research. However, few studies have systematically evaluated the impacts of such participation on the persons concerned and on their perception of it. Objective: This article describes various approaches and levels of possible participation in research. The effects of their participation were discussed by persons who were actively involved in two projects. Discussion groups were held with a view to finding out what they thought active participation in research could offer them and what they thought they could provide to a research dynamic, as peer research assistants. Results: Participating actively in a research project encourages emancipation from poverty, while recognizing skills and offering access to information. It also provides an opportunity for the persons involved to assume responsibilities, and some research topics seem more likely than others to foster greater levels of participation. The two main themes which emerged in regard to the effect of the participation of the peer research assistants were those of non-verbal language and stronger relationship bonds. That is, their presence improved retention and increased the interest of the other participants in the study, since this dynamic made the participants more comfortable in expressing themselves, a fact that was then also transferred to their natural living environment. Conclusion: The various possible levels and degrees of participation in research may be combined and vary over time or according to the themes of the research project. More research is needed to better understand the issues involved in participating in research and its specific effects in drug addiction, as well as the influence of peer research assistants over civic recovery. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Drogues, sante et societe

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

**Subject Headings:** [\\*Peer Evaluation](#)  
[\\*Action Research](#)  
[Drug Addiction](#)  
[Social Values](#)

**Source:** PsycINFO

#### 46. Raves and drug use from an epidemiologic and psychosocial approach: A bibliographic systematic review.

**Original Title:** Raves y consumo de drogas desde una perspectiva epidennologica y psicosocial: Una revision bibliografica sistematica.

**Citation:** Adicciones, 2013, vol./is. 25/3(269-279), 0214-4840 (2013)

**Author(s):** Fernandez-Calderon, Fermin; Lozano-Rojas, Oscar M; Rojas-Tejada, Antonio J

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**Language:** Spanish

**Abstract:** The high drug use that occurs at raves and the specific characteristics of these parties make them a high risk recreational context the health of participants. The aim of this paper is to establish a categorization of research on drug use and raves according to their objectives and main results. Knowledge and research needs identified as a result of this review are discussed. To this end, a systematic review of scientific literature through Medline, Psycinfo and Psycodoc was conducted. After applying the inclusion criteria, 36 papers were obtained, classified into six categories. The results show that 23 studies aim psychosocial profile analysis, and the prevalence and patterns of drug use. Nine studies focus on risks related to drug use, and nine in the drug effects. Given the high risk associated with raves and the scarcity of empirical studies identified, the need to develop further empirical studies is addressed. There is still insufficient evidence to guide intervention strategies to prevent risks and harms among ravers. There is also a need to explore: polydrug use, harm reduction strategies, positive effects and motivations. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Drug Usage](#)  
[\\*Epidemiology](#)  
[\\*Psychosocial Factors](#)  
[\\*Risk Factors](#)

**Source:** PsycINFO

#### 47. Gender differences in the prevalence of DSM-IV alcohol use disorders in adolescents.

**Original Title:** Diferencias de genero en la prevalencia de los trastornos por uso de alcohol del DSM-IV en adolescentes.

**Citation:** Adicciones, 2013, vol./is. 25/3(260-268), 0214-4840 (2013)

**Author(s):** Secades-Villa, Roberto; Lopez-Nunez, Carla; Fernandez-Artamerdi, Sergio; Weidberg, Sara; Fernandez-Hermida, Jose Ramon

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**Language:** Spanish

**Abstract:** Despite the availability of data about drinking frequency and patterns, the surveys on alcohol use among adolescents carried out in Europe tend not to provide information about diagnostic criteria for alcohol use disorders (AUD) or estimation of their prevalence. This study assesses the prevalence of AUD among a sample of Spanish adolescents, to identify the most prevalent symptoms, and explore gender differences in AUD in this population. The final sample consisted of 604 participants aged 15 to 18, obtained by means of random sampling from all the schools in the region of Asturias (Spain). The presence of alcohol abuse (AA) and alcohol dependence (AD) disorders was evaluated according to DSM-IV-TR criteria. The results showed that 12.5% of the sample met the criteria for the diagnosis of AUD (6.7% for alcohol abuse, AA, and 5.8% for alcohol dependence, AD). The most prevalent symptoms were having social problems for AA diagnosis (9% of students who reported alcohol use in the past year) and tolerance for AD diagnosis (45.8% of students who reported alcohol use in the past year). Males showed a significantly higher score than females in AUD, AA and two AA diagnosis criteria (hazardous use and legal problems). The prevalence of AUD among Spanish

adolescents is very high, males being more likely than females to endorse criteria for AUD and AA, though not for AD. These findings reveal a serious health issue and highlight the need to develop preventive efforts and provide coordinated alcohol-abuse interventions. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Diagnostic and Statistical Manual](#)  
[\\*Human Sex Differences](#)  
[\\*Medical Diagnosis](#)  
[Epidemiology](#)

**Source:** PsycINFO

#### 48. Drugs consumption among Intern Specialists in Jaen (Spain) and their relationship to clinical counseling.

**Original Title:** Consumo de drogas entre los Especialistas Internos Residentes de Jaen (Espana) y su relacion con el consejo clinico.

**Citation:** Adicciones, 2013, vol./is. 25/3(243-252), 0214-4840 (2013)

**Author(s):** Bolivar, Francisco Javier Valverde; Milena, Alejandro Perez; Corredor, Andres Moreno

**Correspondence Address:** Bolivar, Francisco Javier Valverde: Unidad Docente de Medicina Familiar y Comunitaria de Jaen, Complejo Hospitalario de Jaen, C/Avenida Ejercito Espanol numero 14, Jaen, Spain, CP 23007, franciscoj.valverde.sspa@juntadeandalucia.es

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**Language:** Spanish

**Abstract:** There are few studies on the prevalence of alcohol, tobacco and illegal drugs consumption among Specialist Interns (EIR) and their counseling to the patients. A multicenter cross-sectional study is carried out, consisting in a self-administered validated questionnaire to describe the consumption of the EIR of 17 health centers in Jaen (Andalusia) (4 hospitals, 13 primary care) and their relationship with their counseling. 215 EIR participate with 81% of valid questionnaires: mean age 31,2 years (+ 0,7), 70% women, 13% foreigners, only 6% nursing. Of them 78% consumed alcohol (onset age 16,8 years + 0,3), 81% occasionally and 17% weekend. The alcohol average weekly intake was 5,9 (+ 5,8) UBE, especially beer and cocktails; 17% show a binge-drinking pattern (more frequent in men,  $p = ,001 \times 2$ ). 19% smoke. A total of 71% smoke on a daily bases (mean of 8,9 + 1,6 cigarettes/day); the nicotine dependence is low (68%) and two thirds have tried to quit. Only 3% use cannabis. A fifth part of EIR does not usually advise against smoking use (21%), a third part does not advise against alcohol (34%) and almost half of them neither advises against drugs (44%) ( $p = ,001 \times 2$ ). Logistic regression shows greater clinical advice from older EIR. Advice against drinking alcohol provided by EIR women is more frequent (OR 2,93) and, probably, even more in EIR that binge drink (OR 2,32). Late smoking onset is related to less clinical advice against illegal drugs (OR 0,76). (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcohol Abuse](#)  
[\\*Counseling](#)  
[\\*Drug Abuse](#)  
[\\*Medical Personnel](#)  
[Nicotine](#)

**Source:** PsycINFO

**49. The parenting style as protective or risk factor for substance use and other behavior problems among Spanish adolescents.**

- Original Title:** El estilo de socializacion familiar como factor de prevencion o riesgo para el consumo de sustancias y otros problemas de conducta en los adolescentes espanoles.
- Citation:** Adicciones, 2013, vol./is. 25/3(235-242), 0214-4840 (2013)
- Author(s):** Martinez, Isabel; Fuentes, Maria C; Garcia, Fernando; Madrid, Ignacio
- Correspondence Address:** Martinez, Isabel: Facultad de Ciencias de la Educacion y Humanidades, Universidad de Castilla-La Mancha, Avda. de los Alfares, 44, Cuenca, Spain, 16071, MIsabel.Martinez@uclm.es
- Institution:** Universidad de Castilla-La Mancha, Cuenca, Spain; Universidad de Valencia, Valencia, Spain; Universidad de Valencia, Valencia, Spain; Universidad de Castilla-La Mancha, Cuenca, Spain
- Language:** Spanish
- Abstract:** The aim of this study was to analyze the parental socialization styles as a protective or a risk factor for substance use in a sample of 673 Spanish adolescents (51.7% were women) aged 14-17 (M = 15.49, SD = 1.06). All participants completed the Parental Socialization Scale (ESPA29) and a scale of substance use. Additionally they also completed a scale of delinquency and another one of school misconduct. A multivariate (4 x 2 x 2) analysis of variance (MANOVA) was applied for substance use, delinquency and school misconduct with parenting style, sex and age. Results from this study showed that indulgent parenting style was a protective factor for substance use whereas authoritarian style was identified as a risk factor. Moreover, results from protective and risk parenting styles on delinquency and school misconduct were consistent with those obtained on substance use. These findings have important implications for the development of family-based substance use prevention programs among Spanish adolescents and other similar cultures where indulgent parenting style is currently displaying a beneficial impact. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Behavior Problems](#)  
[\\*Drug Usage](#)  
[\\*Parenting Style](#)  
[\\*Protective Factors](#)  
[\\*Risk Factors](#)
- Source:** PsycINFO

**50. Family prevention of drug use in Europe: A critical review of EDDRA programs.**

- Original Title:** Prevencion familiar del consumo de drogas en Europa: Una revision critica de los programas contenidos en EDDRA.
- Citation:** Adicciones, 2013, vol./is. 25/3(226-234), 0214-4840 (2013)
- Author(s):** Irlés, Daniel Lloret; Sanchez, Jose Pedro Espada; Perona, Victor Cabrera; Burkhart, Gregor
- Correspondence Address:** Irlés, Daniel Lloret: Universidad Miguel Hernandez, Departamento de Psicologia de la Salud Ctra, Valencia s/n 03550 Sant Joan, Alicante, Spain, daniel.lloret@umh.es
- Institution:** Universidad Miguel Hernandez, Alicante, Spain; Universidad Miguel Hernandez, Alicante, Spain; Universidad Miguel Hernandez, Alicante, Spain; European Monitoring Centre for Drug and Drug-addictions, Portugal
- Language:** Spanish
- Abstract:** In early adolescence, family is one of the main risk/protection agent for drug misuse. Its influence on health habits acquisition makes family a key target for prevention programs. The aim is to conduct a comparative analysis of European family prevention programs. For this purpose, 85 programs were reviewed. Programs were retrieved from EMCDDA

database EDDRA (Exchange on Drug Demand Reduction Actions). No time period was delimited; hence time span was 1998-2011. 53% of all programs came from 4 countries (Ireland, Germany, Portugal and Spain). 89% were unspecific drug prevention or health promotion programs. Providing information about drugs is the main objective pursued by the majority of the programs. Over half the programs (59.7%) report having undergone an outcome evaluation process. Regarding the program objectives, 70.59% do not address any of the risk factors proposed by the main theories in international literature. Despite the solid theoretical framework that supports coherent evidence about family risk factors, prevention programs' objectives and components have a low theoretical compliance rate and the level of evaluation continues to be a challenge. Some aspects of the EDDRA functioning are reviewed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Drug Abuse Prevention](#)  
[\\*Drug Usage](#)  
[\\*Family](#)  
[\\*Program Evaluation](#)  
[\\*Risk Factors](#)  
[Health Promotion](#)

**Source:** PsycINFO

### 51. Perception of family support in dependents of alcohol and others drugs: Relationship with mental disorders.

**Original Title:** Percepcion del apoyo familiar en los consumidores de drogas y su relacion con trastornos psiquiatricos.

**Citation:** Adicciones, 2013, vol./is. 25/3(220-225), 0214-4840 (2013)

**Author(s):** Baptista, Makilim Nunes; de Aquino Lemos, Valdir; Carneiro, Adriana Munhoz; Morais, Paulo Rogerio

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**Language:** Spanish

**Abstract:** The present article aimed to analyze the relationships between perception of family support, levels of depression, anxiety and hopelessness in alcohol or drug dependent patients (AOD). Participated of this study 97 patients under treatment, aged between 18 and 58 years, of both genders from six private institutions for treatment of drug dependency located in Santos-SP/Brazil. Participants responded to the Inventory of Perceived Family Support-IPSF the Beck Depression Inventory-BDI, Beck Anxiety Inventory-BAI, Hopelessness Scale-BHS and Criteria for substance abuse or dependence at DSM-IV TR. Results indicated negative correlations between perceived family support and levels of depression, anxiety and hopelessness. Moreover, family support proved to be a conditional variable for levels of anxiety and depression. These results indicated that the perception of family support may be an important social support for the patient with AOD. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Anxiety](#)  
[\\*Drug Dependency](#)  
[\\*Family Relations](#)  
[\\*Hopelessness](#)  
[Depression \(Emotion\)](#)

**Source:** PsycINFO



**52. Personality pathological traits and brain metabolites as predictors of non-abstinence in addicts with personality disorders.**

<b>Original Title:</b>	Rasgos patologicos de personalidad y metabolitos cerebrales como predictores de no abstinencia en adictos con trastornos de personalidad.
<b>Citation:</b>	Adicciones, 2013, vol./is. 25/3(208-219), 0214-4840 (2013)
<b>Author(s):</b>	Azcurra, Daniel Serrani
<b>Correspondence Address:</b>	Azcurra, Daniel Serrani, Zeballos, Argentina, 1625, danielserrani@argentina.com
<b>Institution:</b>	Facultad de Psicología, Universidad Nacional de Rosario, Rosario, Argentina
<b>Language:</b>	Spanish
<b>Abstract:</b>	Differences in pathological personality traits and disturbances in brain metabolites between non consumers, abstinent and non abstinent consumers were assessed. Participants (n = 113] aged between 18-45 years with personality disorder (PD) were diagnosed with clinical interview and scales for depression, anxiety, impulsivity and dimensions of personality pathology. Brain metabolites were analyzed with magnetic resonance spectroscopy Data were analyzed with ANOVA and multiple comparisons. Abstinent and non-abstinent differentiated from non-consumers in emotional deregulation, inhibition, and restricted expression; abstinent and non-abstinent differentiated from each other In self-aggression, dissocial behaviour, conduct disorder, stimulus seeking and intimacy problems. N-Acetyl Aspartate and creatine values were lower between non-abstinent in prefrontal, anterior cingulate cortex, cerebellar vermis and superior corona radiata. For abstinent, choline levels were greater in cerebellar vermis and n-acetyl aspartate were lower in dorso-lateral prefrontal and anterior cingulated cortex and insula. Regarding personality traits, insecure attachment, narcissism, lability, self-aggression and anxiety characterize consumers and abstinent, while suspiciousness, rejection and character hardness are found in consumers (non-abstinent and abstinent). Compulsive traits, unplanned body impulsiveness and lack of control in emotional regulation predominated in non-abstinent and participants with co-morbidities. Detachment and inhibition predominate in alcohol abuse disorder and narcissistic traits in substance abuse. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
<b>Publication Type:</b>	Journal; Peer Reviewed Journal
<b>Subject Headings:</b>	<a href="#">*Brain</a> <a href="#">*Drug Addiction</a> <a href="#">*Pathology</a> <a href="#">*Personality Disorders</a> <a href="#">*Personality Traits</a> <a href="#">Metabolites</a>
<b>Source:</b>	PsycINFO

**53. Dual diagnosis and personality traits: Current situation and future research directions.**

<b>Original Title:</b>	Patologia dual y rasgos de personalidad: Situacion actual y lineas futuras de trabajo.
<b>Citation:</b>	Adicciones, 2013, vol./is. 25/3(195-202), 0214-4840 (2013)
<b>Author(s):</b>	Marquez-Arrico, Julia Elena; Adan, Ana
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<b>Language:</b>	Spanish

**Abstract:** Dual diagnosis (DD) is the co-occurrence, in the same person, of a mental disorder (MD) and a substance use disorder (SUD). Nowadays, the study of the personality with DD is realized mainly from a categorical view, focusing on the detection of personality disorders and not on the traits associated to DD and the possible differential profile compared to those patients with only MD or SUD. Studies analyzing personality traits of patients with DD and their possible differential profile are very limited. However, existing data indicates that DD patients show higher levels of Sensation Seeking, Impulsivity, Harm Avoidance and Neuroticism; and lower levels of Persistence, Self-Direction, Self-Transcendence and Cooperation. Therefore, DD is associated to personality characteristics that suggest more disruptive behaviors, fewer resources for recovering and keeping abstinent and worse prognosis compared to those with only one disorder. Progress in the characterization of personality traits in DD, taking into consideration the methodological aspects to be improved could allow better adaptation of the integrated treatment of these patients in the future. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Dual Diagnosis](#)  
[\\*Mental Disorders](#)  
[\\*Personality Traits](#)  
[Methodology](#)

**Source:** PsycINFO

**54. "Vested interests in addiction research and policy. The challenge corporate lobbying poses to reducing society's alcohol problems: Insights from UK evidence on minimum unit pricing": Erratum.**

**Citation:** Addiction, March 2014, vol./is. 109/3(515), 0965-2140;1360-0443 (Mar 2014)

**Author(s):** McCambridge, Jim; Hawkins, Benjamin; Holden, Chris

**Correspondence Address:** McCambridge, Jim: Faculty of Public Health and Policy, London School of Hygiene and Tropical Medicine, 15-17 Tavistock Place, London, United Kingdom, WC1H 9SH, Jim.McCambridge@lshtm.ac.uk

**Institution:** Faculty of Public Health and Policy, London School of Hygiene and Tropical Medicine, London, United Kingdom; Faculty of Public Health and Policy, London School of Hygiene and Tropical Medicine, London, United Kingdom; Department of Social Policy and Social Work, University of York, York, United Kingdom

**Language:** English

**Abstract:** Reports an error in "Vested interests in addiction research and policy. The challenge corporate lobbying poses to reducing society's alcohol problems: Insights from UK evidence on minimum unit pricing" by Jim McCambridge, Benjamin Hawkins and Chris Holden (Addiction, 2014[Feb], Vol 109[2], 199-205). In the original article, the funding acknowledgement was missing. The acknowledgement is present in the erratum. (The following abstract of the original article appeared in record 2014-01638-011).  
 Background: There has been insufficient research attention to alcohol industry methods of influencing public policies. With the exception of the tobacco industry, there have been few studies of the impact of corporate lobbying on public health policymaking more broadly. Methods: We summarize here findings from documentary analyses and interview studies in an integrative review of corporate efforts to influence UK policy on minimum unit pricing (MUP) of alcohol 2007-10. Results: Alcohol producers and retailers adopted a long-term, relationship-building approach to policy influence, in which personal contacts with key policymakers were established and nurtured, including when they were not in government. The alcohol industry was successful in achieving access to UK policymakers at the highest levels of government and at all stages of the policy process. Within the United Kingdom, political devolution and the formation for the first time of a Scottish National Party (SNP) government disrupted the existing long-term strategy of alcohol industry actors and created the conditions for evidence-based policy innovations such as MUP. Conclusions: Comparisons between policy communities within the United Kingdom and elsewhere are useful to the understanding of how different policy

environments are amenable to influence through lobbying. Greater transparency in how policy is made is likely to lead to more effective alcohol and other public policies globally by constraining the influence of vested interests. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

**Subject Headings:** [\\*Alcohol Rehabilitation](#)  
[\\*Alcoholism](#)  
[\\*Costs and Cost Analysis](#)  
[\\*Policy Making](#)  
[Organizations](#)  
[Society](#)

**Source:** PsycINFO

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

### 55. Challenges of surveying wastewater drug loads of small populations and generalizable aspects on optimizing monitoring design.

**Citation:** *Addiction*, March 2014, vol./is. 109/3(472-481), 0965-2140;1360-0443 (Mar 2014)

**Author(s):** Ort, Christoph; Eppler, Jonas Maria; Scheidegger, Andreas; Rieckermann, Jorg; Kinzig, Martina; Sorgel, Fritz

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**Institution:** Urban Water Management, Eawag, Swiss Federal Institute of Aquatic Science and Technology, Dubendorf, Switzerland; Department of Environmental Systems Science, ETH, Swiss Federal Institute of Technology Zurich, Zurich, Switzerland; Urban Water Management, Eawag, Swiss Federal Institute of Aquatic Science and Technology, Dubendorf, Switzerland; Urban Water Management, Eawag, Swiss Federal Institute of Aquatic Science and Technology, Dubendorf, Switzerland; IBMP, Institute for Biomedical and Pharmaceutical Research, Nurnberg-Heroldsberg, Germany; IBMP, Institute for Biomedical and Pharmaceutical Research, Nurnberg-Heroldsberg, Germany

**Language:** English

**Abstract:** Aims: Quantifying illicit drug loads through wastewater analysis (WWA) is an alternative approach to estimating population drug use. This study investigated the variability of daily drug loads in wastewater and their relationships to environmental factors over an extended period to: (i) explore the suitability of WWA in small populations and (ii) optimize the monitoring design for future studies. Design, Setting, Participants: Daily wastewater samples (n = 1369 consecutive days) from a German village with approximately 7160 inhabitants. Measurements: Samples were analysed for cocaine and benzoylecgonine with liquid chromatography-tandem mass spectrometry. Time-series analysis was used to explore the effects of weather and other factors on daily cocaine loads. Subsampling was used to assess monitoring design. Findings: Cocaine loads [mean = 652 mgCOC/day, standard deviation (SD) = 498 mgCOC/day] increased over the study period, with higher values during winter and spring. Despite high day-to-day variation, loads were significantly higher during weekends [+161 mgCOC/day, 95% confidence interval (CI) = 115-207 mgCOC/day, P < 10<sup>-4</sup>] and days with frost (+114 mgCOC/day, 95% CI = 6-223 mgCOC/day, P = 0.039) or snow (+150 mgCOC/day, 95% CI = 46-253 mgCOC/day, P = 0.005). Annual means estimated from 1-week periods were subject to approximately 60% relative error. Increasing sample size and changing sampling from consecutive days to stratified random decreased this uncertainty. Conclusions: Day-to-day variation and seasonality of drug loads from the few long-term wastewater studies available to date suggest that up to 56 stratified random samples are required to obtain reliable (expected uncertainty around 10%) annual estimates of drug loads. Successfully assessing changes in consumption patterns or relationships to external factors requires larger sample sizes than estimating annual means, which holds true for high-prevalence drugs in small communities and low-prevalence drugs in big cities. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Cocaine](#)  
[\\*Drug Abuse](#)  
[\\*Drug Usage](#)  
[\\*Environmental Effects](#)  
[Environmental Attitudes](#)  
[Monitoring](#)

**Source:** PsycINFO

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

**56. 'Not just methadone Tracy': Transformations in service-user identity following the introduction of hepatitis C treatment into Australian opiate substitution settings.**

**Citation:** Addiction, March 2014, vol./is. 109/3(452-459), 0965-2140;1360-0443 (Mar 2014)

**Author(s):** Rance, Jake; Treloar, Carla; On behalf of the ETHOS Study Group

**Correspondence Address:** Rance, Jake: Centre for Social Research in Health, University of New South Wales, Level 3, John Goodsell Building, Sydney, NSW, Australia, 2052, [jake.rance@unsw.edu.au](mailto:jake.rance@unsw.edu.au)

**Corporate/Institutional Author:** On behalf of the ETHOS Study Group

**Institution:** Centre for Social Research in Health, University of New South Wales, Sydney, NSW, Australia; Centre for Social Research in Health, University of New South Wales, Sydney, NSW, Australia

**Language:** English

**Abstract:** Aims: To explore identity transformation among service users attending opiate substitution therapy (OST) clinics following the introduction of hepatitis C (HCV) care and treatment. Design: An interview-based substudy of the Australian ETHOS (Enhancing Treatment for Hepatitis C in Opiate Substitution Settings) project. Setting: Three OST clinics and one community health centre (operating a public OST) in New South Wales, Australia. Participants were interviewed at the recruitment sites. Participants: The sample consisted of 57 OST service users concurrently living with HCV, 16 staff, including specialist HCV clinicians, and three peer-support workers, employed on the ETHOS project. Measurements: Semi-structured interviews. Findings: Service-user participants largely welcomed the introduction of HCV treatment as a practical, clinical intervention that also intimated a more comprehensive, holistic form of care. Negative stereotypes characteristic of OST settings-of limited, routinized clinical exchanges and minimal social-care interaction-were unsettled, opening up the possibility of new relations between staff and service users. The shift in the dynamic of the clinical encounter to address health in addition to dependence appeared to catalyse transformative possibilities not only for the therapeutic alliance but also for service-user understandings of self and identity. Conclusion: Trial introduction of HCV care and treatment in selected Australian opiate substitution therapy (OST) clinics may have facilitated alternative, 'non-addict' identities to emerge from a clinical setting where the stigmatizing figure of 'the drug user' has traditionally prevailed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Drug Therapy](#)  
[\\*Hepatitis](#)  
[\\*Intervention](#)  
[\\*Methadone](#)  
[\\*Opiates](#)

**Source:** PsycINFO

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

**57. Commentary on Konstenius et al. (2014): On medication development for stimulant addiction.**

**Citation:** *Addiction*, March 2014, vol./is. 109/3(450-451), 0965-2140;1360-0443 (Mar 2014)

**Author(s):** Shoptaw, Steve

**Correspondence Address:** Shoptaw, Steve: Department of Family Medicine, Center on Behavioral and Addiction Medicine, UCLA, Los Angeles, CA, US, 90095, sshoptaw@mednet.ucla.edu

**Institution:** Department of Family Medicine, Center on Behavioral and Addiction Medicine, UCLA, Los Angeles, CA, US

**Language:** English

**Abstract:** Comments on an article by Maija Konstenius et al. (see record 2014-05957-018). The effort to identify a medication, any medication, to treat the broad group of individuals who become dependent on stimulants is one of the most significant tasks facing addiction research. Conversely, the trial shares problems common to other reports of stimulant pharmacotherapy outcomes. A probably lackluster response among funders and scientists will highlight that the significant effort to develop medications for stimulant addiction is driven as much by politics as by data. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: Society for the Study of Addiction; YEAR: 2014

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

**Subject Headings:** [\\*Amphetamine](#)  
[\\*Attention Deficit Disorder with Hyperactivity](#)  
[\\*Criminals](#)  
[\\*Drug Therapy](#)  
[\\*Methylphenidate](#)  
[Hyperkinesia](#)  
[Relapse Prevention](#)

**Source:** PsycINFO

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

**58. Ethyl glucuronide in hair and fingernails as a long-term alcohol biomarker.**

**Citation:** *Addiction*, March 2014, vol./is. 109/3(425-431), 0965-2140;1360-0443 (Mar 2014)

**Author(s):** Berger, Lisa; Fendrich, Michael; Jones, Joseph; Fuhrmann, Daniel; Plate, Charles; Lewis, Douglas

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**Language:** English

**Abstract:** Aims: This study aimed to evaluate the performance of ethyl glucuronide (EtG) in hair and fingernails as a long-term alcohol biomarker. Design: Cross-sectional survey with probability sampling. Setting: Midwestern United States. Participants: Participants were 606 undergraduate college students between the ages of 18 and 25 years at the time of selection for potential study participation. Measurements: EtG concentrations in hair and fingernails were measured by liquid chromatography-tandem mass spectrometry at three thresholds [30 picograms (pg) per milligram(mg); 20 pg/mg; and 8 pg/mg]. Any weekly

alcohol use, increasing-risk drinking and high-risk drinking on average during the past 12 weeks was assessed by participant interview using the time-line follow-back method. Findings: In both hair and fingernails at all three EtG thresholds, sensitivity was greatest for the high-risk drinking group [hair: 0.43, confidence interval (CI) = 0.17, 0.69 at 30 pg/mg, 0.71, CI = 0.47, 0.95 at 20 pg/mg; 0.93, CI = 0.79, 1.00 at 8 pg/mg; fingernails: 1.00, CI = 1.00-1.00 at 30, 20 and 8 pg/mg] and specificity was greatest for any alcohol use (hair: 1.00, CI = 1.00, 1.00 at 30 and 20 pg/mg; 0.97, CI = 0.92-0.99 at 8 pg/mg; fingernails: 1.00, CI = 1.00-1.00 at 30, 20 and 8 pg/mg). Areas under the receiver operating characteristic curves were significantly higher for EtG concentration in fingernails than hair for any weekly alcohol use ( $P = 0.02$ , DeLong test, two-tailed) and increasing-risk drinking ( $P = 0.02$ , DeLong test, two-tailed). Conclusions: Ethyl glucuronide, especially in fingernails, may have potential as a quantitative indicator of alcohol use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: Addiction published by John Wiley & Sons Ltd on behalf of Society for the Study of Addiction. This is an open access article under the terms of the Creative Commons Attribution-NonCommercial-NoDerivs License, which permits use and distribution in any medium, provided the original work is properly cited, the use is non-commercial and no modifications or adaptations are made.; HOLDER: The Authors; YEAR: 2013

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Biological Markers](#)  
[\\*Ethanol](#)  
[\\*Risk Factors](#)  
[College Students](#)  
[Hair](#)

**Source:** PsycINFO

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

#### 59. Treatment of comorbid alcohol use disorders and depression with cognitive-behavioural therapy and motivational interviewing: A meta-analysis.

**Citation:** Addiction, March 2014, vol./is. 109/3(394-406), 0965-2140;1360-0443 (Mar 2014)

**Author(s):** Riper, Heleen; Andersson, Gerhard; Hunter, Sarah B; de Wit, Jessica; Berking, Matthias; Cuijpers, Pim

**Correspondence Address:** Riper, Heleen: Department of Clinical Psychology, VU University Amsterdam, Van der Boechorststraat 1, Amsterdam, Netherlands, 1081 BT, h.riper@vu.nl

**Institution:** Department of Clinical Psychology, VU University Amsterdam, Amsterdam, Netherlands; Department of Behavioural Sciences and Learning, Linköping University, Linköping, Sweden; RAND Corporation, Santa Monica, CA, US; Department of Clinical Psychology, VU University Amsterdam, Amsterdam, Netherlands; Division of Online Health Training, Innovation Incubator, Leuphana University Luneburg, Luneburg, Germany; Department of Clinical Psychology, VU University Amsterdam, Amsterdam, Netherlands

**Language:** English

**Abstract:** Background and Aims: To review published studies on the effectiveness of combining cognitive-behavioural therapy (CBT) and motivational interviewing (MI) to treat comorbid clinical and subclinical alcohol use disorder (AUD) and major depression (MDD) and estimate the effect of this compared with usual care. Methods: We conducted systematic literature searches in PubMed, PsycINFO and Embase up to June 2013 and identified additional studies through cross-references in included studies and systematic reviews. Twelve studies comprising 1721 patients met our inclusion criteria. The studies had sufficient statistical power to detect small effect sizes. Results: CBT/MI proved effective for treating subclinical and clinical AUD and MDD compared with controls, with small overall effect sizes at post-treatment [ $g = 0.17$ , confidence interval (CI) =



0.07-0.28,  $P < 0.001$  for decrease of alcohol consumption and  $g = 0.27$ , CI: 0.13-0.41,  $P < 0.001$  for decrease of symptoms of depression, respectively]. Subgroup analyses revealed no significant differences for both AUD and MDD. However, digital interventions showed a higher effect size for depression than face-to-face interventions ( $g = 0.73$  and  $g = 0.23$ , respectively,  $P = 0.030$ ). Conclusions: Combined cognitive-behavioural therapy and motivational interviewing for clinical or subclinical depressive and alcohol use disorders has a small but clinically significant effect in treatment outcomes compared with treatment as usual. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: Addiction published by John Wiley & Sons Ltd on behalf of Society for the Study of Addiction. This is an open access article under the terms of the Creative Commons Attribution-NonCommercial-NoDerivs License, which permits use and distribution in any medium, provided the original work is properly cited, the use is non-commercial and no modifications or adaptations are made.; HOLDER: The Authors; YEAR: 2013

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Cognitive Behavior Therapy](#)  
[\\*Comorbidity](#)  
[\\*Major Depression](#)  
[\\*Motivational Interviewing](#)  
[Intervention](#)  
[Treatment Outcomes](#)

**Source:** PsycINFO

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

#### 60. Cannabis controversies: How genetics can inform the study of comorbidity.

**Citation:** Addiction, March 2014, vol./is. 109/3(360-370), 0965-2140;1360-0443 (Mar 2014)

**Author(s):** Agrawal, Arpana; Lynskey, Michael T

**Correspondence Address:** Agrawal, Arpana: Washington University School of Medicine, Department of Psychiatry, 660 S. Euclid, CB 8134, Saint Louis, MO, US, 63110, arpana@wustl.edu

**Institution:** Washington University School of Medicine, Department of Psychiatry, St Louis, MO, US; Addictions Department, Institute of Psychiatry, King's College London, London, United Kingdom

**Language:** English

**Abstract:** Aims: To review three key and controversial comorbidities of cannabis use-other illicit drug use, psychosis and depression, as well as suicide, from a genetically informed perspective. Design: Selective review. Results: Genetic factors play a critical role in the association between cannabis use, particularly early-onset use and use of other illicit drugs, psychosis and depression, as well as suicide, albeit via differing mechanisms. For other illicit drugs, while there is strong evidence for shared genetic influences, residual association that is attributable to causal or person-specific environmental factors cannot be ruled out. For depression, common genetic influences are solely responsible for the association with cannabis use but for suicidal attempt, evidence for person-specific factors persists. Finally, even though rates of cannabis use are inordinately high in those with psychotic disorders, there is no evidence of shared genetic etiologies underlying this comorbidity. Instead, there is limited evidence that adolescent cannabis use might moderate the extent to which diathesis influences psychosis. Conclusions: Overlapping genetic influences underlie the association between early-onset cannabis use and other illicit drug use as well as depression and suicide. For psychosis, mechanisms other than shared genetic influences might be at play. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Society for the Study of Addiction; YEAR: 2014

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

**Subject Headings:** [\\*Cannabis](#)  
[\\*Comorbidity](#)  
[\\*Drug Usage](#)  
[\\*Psychosis](#)  
[\\*Suicide](#)  
[Genetics](#)

**Source:** PsycINFO

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

#### 61. McCarthyism, conflict of interest and *Addiction's* new transparency declaration procedures.

**Citation:** *Addiction*, March 2014, vol./is. 109/3(341-344), 0965-2140;1360-0443 (Mar 2014)

**Author(s):** Babor, Thomas F; Miller, Peter G

**Correspondence Address:** Babor, Thomas F., [Babor@nso.uhc.edu](mailto:Babor@nso.uhc.edu)

**Institution:** Department of Community Medicine and Health Care, University of Connecticut School of Medicine, Farmington, CT, US; School of Psychology, Deakin University, Geelong, VIC, Australia

**Language:** English

**Abstract:** This editorial discusses instances involving *Addiction* and is aimed at helping to raise awareness of the kinds of issues that arise. It also announces *Addiction's* adoption of the International Society of Addiction Journal Editors (ISAJE) transparency form. *Addiction* has decided to continue to use the ISAJE Transparency Declaration Form indefinitely. The editors hope that their adoption of this policy will provide the basis for a common standard across all ISAJE member journals. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: Society for the Study of Addiction; YEAR: 2014

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Conflict of Interest](#)  
[\\*Decision Making](#)  
[\\*Scientific Communication](#)

**Source:** PsycINFO

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

#### 62. The brief self-control scale predicts jail inmates' recidivism, substance dependence, and post-release adjustment.

**Citation:** *Personality and Social Psychology Bulletin*, March 2014, vol./is. 40/3(334-347), 0146-1672;1552-7433 (Mar 2014)

**Author(s):** Malouf, Elizabeth T; Schaefer, Karen E; Witt, Edward A; Moore, Kelly E; Stuewig, Jeffrey; Tangney, June P

**Correspondence Address:** Malouf, Elizabeth T.: George Mason University, 4400 University Drive, Fairfax, VA, US, 22030, [emalouf@gmu.edu](mailto:emalouf@gmu.edu)

**Institution:** George Mason University, Fairfax, VA, US; George Mason University, Fairfax, VA, US; Michigan State University, East Lansing, MI, US; George Mason University, Fairfax, VA, US; George Mason University, Fairfax, VA, US; George Mason University, Fairfax, VA, US

**Language:** English

**Abstract:** Previous research finds that self-control is positively associated with adaptive and negatively associated with maladaptive behavior. However, most previous studies use cross-sectional designs, low-risk samples, and limited assessments of self-control. This study of 553 jail inmates examined the relationship of a valid measure of self-control (Brief Self-Control Scale) completed on incarceration with behavior before, during, and 1 year after incarceration. After controlling for positive impression management (PIM),

self-control was negatively related to substance misuse, suicidality, risky sex, and criminal history prior to incarceration and post-release illegal substance misuse, recidivism, and positive adjustment. Lower self-control predicted increases in substance dependence at post-release compared with pre-incarceration. Self-control was not related to misbehavior during incarceration, nor alcohol use or HIV-risk behavior 1 year post-release. Results were consistent as a function of age, race, and gender. This study supports self-control as an important risk and protective factor in a sample of criminal offenders. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Society for Personality and Social Psychology, Inc.; YEAR: 2013

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

**Subject Headings:** [\\*Criminals](#)  
[\\*Psychometrics](#)  
[\\*Self Control](#)  
[\\*Test Reliability](#)  
[\\*Test Validity](#)  
[Adjustment](#)  
[Drug Abuse](#)  
[Recidivism](#)

**Source:** PsycINFO

### 63. Viral and bacterial risks associated with mephedrone abuse in HIV-infected men who have sex with men.

**Citation:** AIDS, November 2013, vol./is. 27/18(2971-2972), 0269-9370;1473-5571 (Nov 28, 2013)

**Author(s):** Peyriere, Helene; Jacquet, Jean-Marc; Eiden, Celine; Tuailon, Edouard; Psomas, Christina; Reynes, Jacques

**Institution:** Medical Pharmacology and Toxicology Department, University Hospital Montpellier, Montpellier, France; Infectious Diseases Department, University Hospital Montpellier, Montpellier, France; Medical Pharmacology and Toxicology Department, University Hospital Montpellier, Montpellier, France; Infectious Diseases Department, University Hospital Montpellier, Montpellier, France; Infectious Diseases Department, University Hospital Montpellier, Montpellier, France; UMI 233, Universite Montpellier I, University Hospital Montpellier, Montpellier, France

**Language:** English

**Abstract:** Mephedrone is a designer drug, of the cathinones family, structurally similar to amphetamine and 3,4-methylene-dioxy-N-methylamphetamine. Initially, mephedrone was a legal designer drug largely used for MDMA replacement. Mephedrone has been classified as a narcotic since 2010 in France and UK. Sold on the Internet, it has recently emerged in France in recreational settings, and is frequently consumed by men who have sex with men (MSM). In this paper, the authors report three cases of MSM who experienced viral and bacterial infections associated with mephedrone use. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** HOLDER: Wolters Kluwer Health ; Lippincott Williams & Wilkins; YEAR: 2013

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*HIV](#)  
[\\*Infectious Disorders](#)  
[\\*Same Sex Intercourse](#)  
[Risk Factors](#)

**Source:** PsycINFO

**Full Text:** Available from *Ovid* in [AIDS](#)

### 64. Depression-like effect of prenatal buprenorphine exposure in rats.

**Citation:** PLoS ONE, December 2013, vol./is. 8/12, 1932-6203 (Dec 18, 2013)

- Author(s):** Hung, Chih-Jen; Wu, Chih-Cheng; Chen, Wen-Ying; Chang, Cheng-Yi; Kuan, Yu-Hsiang; Pan, Hung-Chuan; Liao, Su-Lan; Chen, Chun-Jung
- Correspondence Address:** Chen, Chun-Jung, cjchen@vghtc.gov.tw
- Institution:** Department of Anesthesiology, Taichung Veterans General Hospital, Taichung, Taiwan; Department of Anesthesiology, Taichung Veterans General Hospital, Taichung, Taiwan; Department of Veterinary Medicine, National Chung Hsing University, Taichung, Taiwan; Department of Surgery, Fong Yuan Hospital, Taichung, Taiwan; Department of Pharmacology, Chung Shan Medical University, Taichung, Taiwan; Department of Neurosurgery, Taichung Veterans General Hospital, Taichung, Taiwan; Department of Education and Research, Taichung Veterans General Hospital, Taichung, Taiwan; Graduate School of Nursing, HungKuang University, Taichung, Taiwan
- Language:** English
- Abstract:** Studies indicate that perinatal opioid exposure produces a variety of short- and long-term neurobehavioral consequences. However, the precise modes of action are incompletely understood. Buprenorphine, a mixed agonist/antagonist at the opioid receptors, is currently being used in clinical trials for managing pregnant opioid addicts. This study provides evidence of depression-like consequence following prenatal exposure to supra-therapeutic dose of buprenorphine and sheds light on potential mechanisms of action in a rat model involving administration of intraperitoneal injection to pregnant Sprague-Dawley rats starting from gestation day 7 and lasting for 14 days. Results showed that pups at postnatal day 21 but not the dams had worse parameters of depression-like neurobehaviors using a forced swimming test and tail suspension test, independent of gender. Neurobehavioral changes were accompanied by elevation of oxidative stress, reduction of plasma levels of brain-derived neurotrophic factor (BDNF) and serotonin, and attenuation of tropomyosin-related kinase receptor type B (TrkB) phosphorylation, extracellular signal-regulated kinase (ERK) phosphorylation, protein kinase A activity, cAMP response element-binding protein (CREB) phosphorylation, and CREB DNA-binding activity. Since BDNF/serotonin and CREB signaling could orchestrate a positive feedback loop, our findings suggest that the induction of oxidative stress, reduction of BDNF and serotonin expression, and attenuation of CREB signaling induced by prenatal exposure to supra-therapeutic dose of buprenorphine provide evidence of potential mechanism for the development of depression-like neurobehavior. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** STATEMENT: This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.; HOLDER: Hung et al.; YEAR: 2013
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Depression \(Emotion\)](#)  
[\\*Opiates](#)  
[\\*Prenatal Exposure](#)  
[Clinical Trials](#)  
[Intraperitoneal Injections](#)  
[Rats](#)  
[Brain Derived Neurotrophic Factor](#)  
[Phosphorylation](#)
- Source:** PsycINFO
- Full Text:** Available from *ProQuest* in [PLoS One](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions. Available from *National Library of Medicine* in [PLoS ONE](#)

#### 65. Enlarged cavum septum pellucidum as a neurodevelopmental marker in adolescent-onset opiate dependence.

- Citation:** PLoS ONE, October 2013, vol./is. 8/10, 1932-6203 (Oct 24, 2013)
- Author(s):** Hwang, Jaeuk; Kim, Jieun E; Kaufman, Marc J; Renshaw, Perry F; Yoon, Sujung; Yurgelun-Todd, Deborah A; Choi, Yera; Jun, Chansoo; Lyoo, In Kyoou

**Correspondence Address:** Lyoo, In Kyoon, [inkylyoo@ewha.ac.kr](mailto:inkylyoo@ewha.ac.kr)

**Institution:** Department of Psychiatry, Soonchunhyang University, College of Medicine, Seoul, South Korea; Department of Brain and Cognitive Sciences, Ewha Woman's University Graduate School, Seoul, South Korea; McLean Imaging Center, McLean Hospital, Belmont, MA, US; Department of Psychiatry, University of Utah, Salt Lake City, UT, US; Department of Psychiatry, University of Utah, Salt Lake City, UT, US; Department of Psychiatry, University of Utah, Salt Lake City, UT, US; Interdisciplinary Program in Brain Science, Seoul National University, College of Natural Sciences, Seoul, South Korea; Ewha Brain Institute, Graduate School of Pharmaceutical Sciences, Ewha Woman's University, Seoul, South Korea; Ewha Brain Institute, Graduate School of Pharmaceutical Sciences, Ewha Woman's University, Seoul, South Korea

**Language:** English

**Abstract:** Objective: Adolescent-onset exposure to highly addictive substances such as opiates may induce far-reaching deleterious effects on later mental and physical health. However, little is known about the neurodevelopmental basis for adolescent-onset opiate dependence. Here we examined whether having an abnormally large cavum septum pellucidum (CSP), a putative marker of limbic structural maldevelopment, is associated with opiate dependence particularly beginning in adolescence. Method: The overall length of the CSP and the prevalence of abnormal enlargement of the CSP were assessed and compared in 65 opiate-dependent subjects (41 adolescent-onset opiate users and 24 adult-onset opiate users) and 67 healthy subjects. Results: Opiate-dependent subjects showed a greater prevalence of abnormal CSP enlargement relative to healthy subjects (odds ratio [OR] = 3.64,  $p = 0.034$ ). The overall CSP length of adolescent-onset opiate-dependent subjects was greater, as compared not only with healthy subjects ( $F_{1,104} = 11.03$ ,  $p = 0.001$ ) but also with those who began opiate use during adulthood ( $F_{1,61} = 4.43$ ,  $p = 0.039$ ). Conclusions: The current findings provide the first evidence that abnormal CSP enlargement, which reflects limbic system dysgenesis of neurodevelopmental origin, may be linked to later development of opiate dependence. In addition, a greater CSP length, which indicates more severe limbic abnormalities, appears to confer higher risk for earlier onset of opiate use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.; HOLDER: Hwang et al.; YEAR: 2013

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

**Subject Headings:** [\\*Drug Dependency](#)  
[\\*Opiates](#)  
[Brain](#)  
[Risk Factors](#)  
[Neurodevelopmental Disorders](#)

**Source:** PsycINFO

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

#### 66. Cultural influences on substance use among Hispanic adolescents and young adults: Findings from project RED.

**Citation:** Child Development Perspectives, March 2014, vol./is. 8/1(48-53), 1750-8592;1750-8606 (Mar 2014)

**Author(s):** Unger, Jennifer B

**Correspondence Address:** Unger, Jennifer B., 2001 N. Soto St., SSB 302P, Los Angeles, CA, US, 90089, [unger@usc.edu](mailto:unger@usc.edu)

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

**Language:** English

**Abstract:** Hispanic adolescents represent a growing segment of the U.S. population. In addition to the typical stressors encountered during adolescence, Hispanic adolescents may experience acculturative stress, perceived discrimination, and conflicts with parents about acculturation, which can lead to maladaptive behaviors such as substance use. Personal cultural resources may help Hispanic youth cope with cultural stressors and avoid substance use, but little is known about how such factors affect decisions about substance use. In 2005, my research group began studying a group of Hispanic adolescents in Los Angeles. The participants completed surveys annually about cultural issues such as acculturation, ethnic identity, and perceived discrimination; family and peer relationships; and use of alcohol, tobacco, and marijuana. We found that Hispanic adolescents' perceptions that they were discriminated against put them at greater risk for substance use, and that Hispanic orientation protected the youth from substance use. The findings can inform the development of culturally relevant prevention interventions for Hispanic adolescents and emerging adults. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Author. Child Development Perspectives-The Society for Research in Child Development; YEAR: 2014

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

**Subject Headings:** [\\*Acculturation](#)  
[\\*Adolescent Attitudes](#)  
[\\*Drug Abuse](#)  
[\\*Sociocultural Factors](#)  
["Latinos/Latinas"](#)

**Source:** PsycINFO

**Full Text:** Available from *Wiley* in [Child Development Perspectives](#)

#### 67. Patients' experience of auricular acupuncture during protracted withdrawal.

**Citation:** Journal of Psychiatric and Mental Health Nursing, March 2014, vol./is. 21/2(163-169), 1351-0126;1365-2850 (Mar 2014)

**Author(s):** Bergdahl, L; Berman, A. H; Haglund, K

**Correspondence Address:** Bergdahl, L.: Department of Neuroscience, Uppsala University, Uppsala, Sweden, SE-751 85, lena.bergdahl@neuro.uu.se

**Institution:** Department of Neuroscience, Uppsala University, Uppsala, Sweden; Department of Clinical Neuroscience, Center for Psychiatric Research, Karolinska Institutet, Stockholm, Sweden; Department of Neuroscience, Uppsala University, Uppsala, Sweden

**Language:** English

**Abstract:** Over the last decades interest in using auricular acupuncture for substance dependence care has increased. The specific auricular acupuncture protocol used follows the National Acupuncture Detoxification Association (NADA) definition. This paper describes patients' experiences of receiving auricular acupuncture during protracted withdrawal. Interviews were conducted with 15 patients treated at an outpatient clinic for substance dependence. Content analysis was used to analyse the interviews. The analysis resulted in seven categories of positive experiences and seven categories of negative experiences. The positive experiences were: Relaxation and well-being, Peacefulness and harmony, New behaviours, Positive physical impact, Importance of context, Anxiety reduction and Reduced drug and alcohol consumption. The negative experiences were: Nothing negative, Disturbing context, Short-term effect, Depending on someone else, Time-consuming, Physical distractions and Remaining cravings. The conclusion of this study is that all respondents appreciated NADA treatment. This study supports further research on using NADA in addiction treatment to reduce suffering during protracted withdrawal and in other contexts. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: John Wiley & Sons Ltd.; YEAR: 2012

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



**Subject Headings:** [\\*Acupuncture](#)  
[\\*Client Attitudes](#)  
[\\*Drug Dependency](#)  
[Drug Withdrawal](#)  
[Well Being](#)

**Source:** PsycINFO

**Full Text:** Available from *Wiley* in *Journal of Psychiatric and Mental Health Nursing*

#### 68. Integrating psychotherapy research with public health and public policy goals for incarcerated women and other vulnerable populations.

**Citation:** Psychotherapy Research, March 2014, vol./is. 24/2(229-239), 1050-3307;1468-4381 (Mar 2014)

**Author(s):** Johnson, Jennifer E

**Correspondence Address:** Johnson, Jennifer E.: Brown University, Department of Psychiatry and Human Behavior, 700 Butler Drive, Providence, RI, US, 02906, Jennifer\_Johnson@brown.edu

**Institution:** Department of Psychiatry and Human Behavior, Brown University, Providence, RI, US

**Language:** English

**Abstract:** Objective and Method: In this article, I review my research applying interpersonal treatments and interpersonal principles from psychotherapy for major depression and substance use to broader public health goals for incarcerated women and other vulnerable populations. Results: A public health focus has led me to expand the boundaries of psychotherapy research to include partners such as prisons, parole officers, and bachelor's level providers; behaviors like risky sex; service delivery challenges; and ultimately to research with an eye toward informing policy and advocacy. Conclusions: A public health perspective provides context and rationale for conducting sound psychotherapy research; the combination of public health and psychotherapy-specific perspectives can lead to novel research. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Society for Psychotherapy Research; YEAR: 2013

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Incarceration](#)  
[\\*Major Depression](#)  
[\\*Psychotherapy](#)  
[\\*Public Health](#)  
[Human Females](#)

**Source:** PsycINFO

#### 69. Associations between drug use and sexual risks among heterosexual men in the Philippines.

**Citation:** International Journal of STD & AIDS, December 2013, vol./is. 24/12(969-976), 0956-4624;1758-1052 (Dec 2013)

**Author(s):** Regan, Rotrease; Dyer, Typhanye Penniman; Gooding, Taigy; Morisky, Donald E

**Correspondence Address:** Regan, Rotrease: University of California, Los Angeles, Department of Family Medicine, Center for Behavioral & Addiction Medicine, UCLA Vine Street Clinic, 910 Vine Street, Los Angeles, CA, US, 90038, rregan@mednet.ucla.edu

**Institution:** UCLA Center for Behavioral & Addiction Medicine, Department of Family Medicine, David Geffen School of Medicine, UCLA, Los Angeles, CA, US; Department of Epidemiology, University of Florida, Gainesville, FL, US; Research and Development, Jemmott Rollins Group, Los Angeles, CA, US; Department of Community Health Sciences, UCLA, Fielding School of Public Health, Los Angeles, CA, US

**Language:** English

**Abstract:** The relationship between drug use and sexual risk behaviours among 2272 men in the southern Philippines was assessed. Over 20% of participants used drugs. Logistic regression analyses adjusted for age, marital status, income, occupation and geographic region revealed that compared to non-drug users, men who used drugs had earlier sexual debuts (adjusted odds ratio = 1.73; 95% confidence interval = 1.38-2.17), were more likely to report two or more recent sexual partners (adjusted odds ratio = 2.22; 95% confidence interval = 1.59-3.11), and were more likely to report ever having sex with a female sex worker (adjusted odds ratio = 2.99; 95% confidence interval = 2.25-4.00). Condom use was noted to be low overall among the men in this study; however, the odds of more frequent condom use with a regular partner were greater for men who used drugs compared to non-drug users (adjusted odds ratio = 1.60; 95% confidence interval = 1.26-2.02). There were no significant differences in condom use during last sex or frequency of condom use with a sex worker. While injection drug use was not common (1%), use of oral or inhaled substances was prevalent, and associated with increased sexual risk for acquisition and transmission of STI/HIV. Efforts to decrease STI/HIV transmission should specifically target non-injection drug use as a risk factor. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Drug Usage](#)  
[\\*Heterosexuality](#)  
[\\*Human Males](#)  
[\\*Sexual Risk Taking](#)

**Source:** PsycINFO

#### 70. Physicians and the (woman's) body politic.

**Citation:** The New England Journal of Medicine, January 2014, vol./is. 370/3(193-195), 0028-4793;1533-4406 (Jan 16, 2014)

**Author(s):** Charo, R. Alta

**Institution:** School of Law, School of Medicine and Public Health, University of Wisconsin, Madison, WI, US

**Language:** English

**Abstract:** This opinion article discusses the pregnancy experience of Alicia Beltran with her physician. She had stopped using painkillers and weaned herself off the anti-addiction medication. She provided full information to her health care provider. But instead of receiving prenatal care, she was ordered by the state to resume using anti-addiction medication. When she declined, she was arrested and, although she screened negative for all evidence of drug dependence or abuse, was committed to a facility for months before finally being released after a federal complaint was filed on her behalf. If this were simply one of the hundreds of stories that the National Advocates for Pregnant Women has documented of pregnant women criminally charged, jailed, and civilly committed on suspicion that they're failing to fully protect their pregnancies and birth outcomes it would merely be a particularly shocking example of a regrettably frequent phenomenon. Instead, it is the latest example of a disturbing pattern of legislative and judicial misrepresentation and misuse of medical information in the pursuit of partisan aims focused on women and pregnancy. But pregnant women and their physicians have been marked for particularly intense attention by legislators acting as arbiters of medical knowledge despite their lack of expertise or detachment. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Massachusetts Medical Society.; YEAR: 2014

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

**Subject Headings:** [\\*Client Attitudes](#)  
[\\*Human Body](#)

\*Pregnancy  
 \*Therapeutic Processes  
 Drug Therapy

**Source:** PsycINFO

**Full Text:** Available from *New England Journal of Medicine* in *Newcomb Library & Information Service*  
 Available from *ProQuest* in *New England Journal of Medicine, The*; Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

#### 71. Cannabis careers revisited: Applying Howard S. Becker's theory to present-day cannabis use.

**Citation:** Social Science & Medicine, January 2014, vol./is. 100/(133-140), 0277-9536;1873-5347 (Jan 2014)

**Author(s):** Jarvinen, Margaretha; Ravn, Signe

**Correspondence Address:** Jarvinen, Margaretha: Department of Sociology, University of Copenhagen, Oster Farimagsgade 5, Copenhagen, Denmark, DK-1014, K, mja@sfi.dk

**Institution:** Department of Sociology, University of Copenhagen, Copenhagen, Denmark; SFI, Danish National Centre for Social Research, Denmark

**Language:** English

**Abstract:** A considerable part of today's sociological research on recreational drug use is (explicitly or implicitly) inspired by Howard Becker's classical model of deviant careers. The aim of the present paper is to directly apply Becker's theory to empirical data on present-day cannabis use and to suggest a revision of the theory. As part of this, we propose a stretch of the sociological approach represented by Becker and followers in order to include, not only recreational drug use, but also use for which young people have sought treatment. The paper is based on 30 qualitative interviews with young people in treatment for cannabis problems in Copenhagen, Denmark. We suggest a revision of Becker's career model in relation to four aspects: initiation of cannabis use, differentiation between socially integrated and individualised, disintegrated use, social control from non-users, and the users' moral stance on cannabis. A central point of the paper is that social interaction may both motivate cannabis use, as Becker proposed, and serve as a protective factor against extensive, problematic use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** \*Cannabis  
 \*Drug Usage  
 Morale  
 Sociology  
 Theories

**Source:** PsycINFO

#### 72. Posttraumatic stress disorder in opiate-dependent patients with methadone treatment-Relevance of type of heroin addiction, severity of addiction, severity of overall psychopathological symptoms and gender.

**Original Title:** Posttraumatische belastungsstörung bei opiatabhängigen methadonsubstituierten patienten.

**Citation:** Zeitschrift für Psychiatrie, Psychologie und Psychotherapie, 2013, vol./is. 61/3(180-188), 1661-4747 (2013)

**Author(s):** Celenk, Suna; Huber, Christine; Borgwardt, Stefan; Stieglitz, Rolf-Dieter; Olbrich, Hans

**Correspondence Address:** Stieglitz, Rolf-Dieter: Universitäre Psychiatrische Kliniken Basel, Wilhelm Klein-Strasse 27, Basel, Switzerland, 4012, rolf-dieter.stieglitz@upkbs.ch

**Institution:** Zentrum fur Suchtmedizin, Basel, Germany; Zentrum fur Suchtmedizin, Basel, Germany; Universitare Psychiatrische Kliniken, Basel, Germany; Universitare Psychiatrische Kliniken, Basel, Germany; Zentrum fur Suchtmedizin, Basel, Germany

**Language:** German

**Abstract:** Background: The aim of this study is to demonstrate the relevance between the posttraumatic stress disorder (PTSD) after a non-recurring trauma and the use of heroin, the severity of addiction and the severity of the overall psychopathology, as well as sex specific differences. Method: 48 patients with an opiate dependency, enrolled in a methadone treatment and with at least one traumatic event, which occurred once in lifetime, were included. Based on several clinical interviews we determined the presence of a diagnosis of PTSD, the use of heroin, the severity of addiction (Addiction Severity Index; ASI) and of the overall psychopathology (Symptom Checklist; SCL-90-R). Results: 18 patients (37 %) had a diagnosis of PTSD (8 women, 10 men). Compared to Non-PTSD patients, PTSD patients had significantly lower use of heroin within the last 6 months while the severity of addiction was significantly higher. Women (with and without PTSD) showed a higher severity of addiction (ASI) particularly with regard to the items "social/family" and "drugs". The group error with PTSD showed a higher severity of addiction regarding the item "work/alimentation". We found no significant difference of the severity of the overall psychopathology between patients with or without a diagnosis of PTSD. Discussion: The present data are consistent with the previous research findings on PTSD and substance use disorder. The present findings suggest that the use of heroin was significantly lower in the group with PTSD after a non-recurrent trauma. It illustrates that the role of opioids in regard to the classic symptoms of PTSD is diverse and needs to be further examined. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Verlag Hans Huber, Hogrefe AG, Bern; YEAR: 2013

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

**Subject Headings:** [\\*Drug Dependency](#)  
[\\*Heroin Addiction](#)  
[\\*Human Sex Differences](#)  
[\\*Methadone](#)  
[\\*Posttraumatic Stress Disorder](#)  
[Drug Therapy](#)  
[Opiates](#)  
[Psychopathology](#)  
[Severity \(Disorders\)](#)

**Source:** PsycINFO

### 73. Illegal drug use.

**Citation:** The Wiley handbook of cognitive behavioral therapy (Vols. 1-3)., 2014(1339-1358) (2014)

**Author(s):** Kiluk, Brian D; Carroll, Kathleen M

**Institution:** Yale School of Medicine, US; Yale School of Medicine, US

**Language:** English

**Abstract:** (from the chapter) Cognitive behavioral treatments are among the most well-defined and rigorously studied psychotherapeutic interventions for substance use disorders. While this chapter focuses primarily on cognitive behavioral therapy (CBT) for illegal drug use, it should be noted that CBT shares several features with other empirically supported behavioral approaches. At the most simple level, CBT for illegal drug use attempts to help individual patients recognize, avoid, and cope; that is, recognize the situations in which they are most likely to use drugs, avoid those situations when possible or appropriate, and cope more effectively with a range of problems and problematic behaviors associated with substance use. CBT has two critical components and defining features. The first is a thorough functional analysis of the role illicit drugs play in the individual's life. For each instance of substance use the patient experiences during

treatment, the therapist and patient will identify the patient's thoughts, feelings, and circumstances before the substance use, as well as the patient's thoughts, feelings, and circumstances after the substance use. Early in treatment, the functional analysis plays a critical role in helping the patient and therapist assess the determinants, or high-risk situations, that are likely to lead to substance use, as well as in shedding light on some of the reasons the individual may be using drugs. The second critical component of CBT is skills training. In CBT, this consists of a highly individualized training program that helps substance users change old habits associated with their drug use and learn or relearn more adaptive skills and habits (Carroll, 2011b). This chapter explores each of these components in more detail, describing specific techniques and strategies, as well as providing a review of the empirical support for CBT. It also covers several areas that require special consideration when implementing CBT for drug use, such as therapist training and competence, and the impact of impaired cognitive functioning associated with chronic drug use. The chapter ends with an overview of new developments in the treatment of drug use disorders. However, first, because an effective treatment begins with a strong theoretical basis, we will provide a brief overview of the theory underlying CBT for substance use disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Cognitive Behavior Therapy](#)  
[\\*Drug Abuse](#)  
[\\*Drug Addiction](#)  
[\\*Drug Rehabilitation](#)  
[Cognitive Therapy](#)  
[Drug Therapy](#)

**Source:** PsycINFO

#### 74. Alcohol problems.

**Citation:** The Wiley handbook of cognitive behavioral therapy (Vols. 1-3), 2014(1315-1337) (2014)

**Author(s):** Harrell, Nailah O; Pedrelli, Paola; Lejuez, Carl W; MacPherson, Laura

**Institution:** University of Maryland, MD, US; Massachusetts General Hospital, MA, US; University of Maryland, MD, US; University of Maryland, MD, US

**Language:** English

**Abstract:** (from the chapter) Alcohol misuse is an international problem, affecting most populations across age, gender, and cultural bounds. Due to the pervasiveness of alcohol consumption, alcohol use disorders (AUDs) represent one of the most comprehensively studied psychological phenomena resulting in well-formulated, empirically supported cognitive behavioral interventions for this constellation of behaviors. In addition, individuals who seek treatment for other psychological disorders often experience problems with alcohol use. This chapter aims to provide a basic overview of what constitutes diagnostic and problem levels of alcohol use, including common comorbid conditions associated with AUDs, established cognitive behavioral therapy (CBT) interventions for AUDs, and integrated treatments for co-occurring psychological conditions, as well as a review of medications that are supported in their combination with psychosocial interventions. Finally, we present considerations for ways that CBT interventions for AUDs have increased in their reach to broader populations of individuals facing problems with alcohol through integration with technological advances such as Web-based modalities. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Alcohol Rehabilitation](#)  
[\\*Alcoholism](#)  
[\\*Cognitive Behavior Therapy](#)  
[Comorbidity](#)

**Source:** PsycINFO

**75. Case 40-2013: A 36-year-old man with agitation and paranoia.**

- Citation:** The New England Journal of Medicine, December 2013, vol./is. 369/26(2536-2545), 0028-4793;1533-4406 (Dec 26, 2013)
- Author(s):** Benzer, Theodore I; Nejad, Shamim H; Flood, James G
- Institution:** Department of Emergency Medicine, Massachusetts General Hospital, Boston, MA, US; Department of Psychiatry, Massachusetts General Hospital, Boston, MA, US; Department of Pathology, Massachusetts General Hospital, Boston, MA, US
- Language:** English
- Abstract:** Presents a case study of a 36-year-old man with a history of alcohol and substance abuse who was admitted to the hospital because of severe agitation and paranoia. The patient's girlfriend reported that the patient had been sober for approximately 20 months, until he lost his job. Three days before admission, he began drinking alcohol and taking "bath salts" (psychoactive drugs) intranasally after having had no sleep and minimal oral intake. The patient was transported to the emergency department at the hospital. The first priority in the emergency department is to ensure the safety of the patient and caregivers. This patient's most likely source of methcathinone was bath salts. The methcathinone metabolite ephedrine probably also contributed to the observation of immunoreactive amphetamines in the patient's urine. The authors concluded that methcathinone is the major finding in the patient's blood sample that is indicative of the use of bath salts. They also concluded that methcathinone cross-reacted in this hospital's KIMS (kinetic interaction of microparticles in solution) urine immunoassay for amphetamines, contributing to a false positive result. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
- Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Massachusetts Medical Society; YEAR: 2013
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Agitation](#)  
[\\*Alcohol Abuse](#)  
[\\*Drug Abuse](#)  
[\\*Paranoia \(Psychosis\)](#)  
[Case Report](#)  
[Emergency Services](#)  
[Hospital Admission](#)
- Source:** PsycINFO
- Full Text:** Available from *New England Journal of Medicine* in [Newcomb Library & Information Service](#)  
Available from *ProQuest* in [New England Journal of Medicine, The](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

**76. Review of research on inner mechanisms for decision-making deficits in pathological gamblers.**

- Citation:** Chinese Journal of Clinical Psychology, October 2013, vol./is. 21/5(719-722), 1005-3611 (Oct 2013)
- Author(s):** Luo, Qiu-ling; Wei, Xiao-bo; Lu, Xia-ping; Qu, Chen
- Correspondence Address:** Qu, Chen: Center for the Study of Applied Psychology, South China Normal University, Guangzhou, China, 51063, chenqu@scnu.edu.cn
- Institution:** Center for the Study of Applied Psychology, South China Normal University, Guangzhou, China; Center for the Study of Applied Psychology, South China Normal University, Guangzhou, China; Center for the Study of Applied Psychology, South China Normal University, Guangzhou, China; Center for the Study of Applied Psychology, South China Normal University, Guangzhou, China
- Language:** Chinese



**Abstract:** Pathological gambling is a kind of decision-making deficits. Decision-making deficits, as a significant characteristic of pathological gambling, have great effect on the development of addictive gambling. Pathological gamblers are prone to make risky, impulsive and overconfident decisions, which are always biased by psychological factors such as sensitivity of rewards and punishments, personal control, feedback processing and personal characteristic. Physical index(e.g. blood pressure and heart rate) and hormone reactivity (e.g. Cortisol and dopamine) are different between pathological gamblers and normal decision makers. Moreover, pathological gamblers have been found to have abnormal prefrontal cortices activity during decision making. The review concluded with a discussion regarding the new developments in the research of neurobiological gambling. We expect that future studies will obtain further insight into the mechanisms of decision making deficits in pathological gamblers. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Decision Making](#)  
[\\*Pathological Gambling](#)  
[Psychodynamics](#)  
[Psychosocial Factors](#)

**Source:** PsycINFO

#### 77. Nalmefene: A review of its use in the treatment of alcohol dependence.

**Citation:** CNS Drugs, September 2013, vol./is. 27/9(761-772), 1172-7047;1179-1934 (Sep 2013)

**Author(s):** Keating, Gillian M

**Correspondence Address:** Keating, Gillian M.: Adis, 41 Centorian Drive, Private Bag 65901, Mairangi Bay, North Shore, Auckland, New Zealand, 0754, demail@springer.com

**Institution:** Adis, Auckland, New Zealand

**Language:** English

**Abstract:** The opioid system modulator nalmefene (Selincro) is approved in the EU for as-needed use to reduce alcohol consumption in alcohol-dependent adults with a high drinking risk level. This article reviews the efficacy and tolerability of as-needed oral nalmefene in the treatment of alcohol dependence, as well as summarizing its pharmacological properties. In two randomized, double-blind, multinational trials (ESENSE 1 and ESENSE 2), as-needed nalmefene significantly reduced the number of heavy drinking days (in both trials) and total alcohol consumption (in ESENSE 1) at month 6. In the randomized, double-blind, multinational SENSE trial, as-needed nalmefene significantly improved both of these endpoints at month 13, but not at month 6. As-needed nalmefene had a greater beneficial effect in the target population (i.e. alcohol-dependent patients with at least a high drinking risk level at screening and randomization), with post hoc analyses revealing significant reductions in both the number of heavy drinking days and total alcohol consumption at month 6 (in ESENSE 1 and ESENSE 2) and at month 13 (in SENSE). Oral nalmefene was generally well tolerated in patients with alcohol dependence, with the most commonly occurring adverse events including nausea, insomnia and dizziness. In conclusion, as-needed nalmefene provides an important new option for use in the treatment of alcohol dependence. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Springer International Publishing Switzerland; YEAR: 2013

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

**Subject Headings:** [\\*Alcohol Rehabilitation](#)  
[\\*Alcoholism](#)  
[\\*Clinical Trials](#)  
[\\*Drug Therapy](#)  
[\\*Narcotic Antagonists](#)

**Source:** PsycINFO

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

#### 78. Veterans' attitudes toward work and disability compensation: Associations with substance abuse.

**Citation:** Addictive Behaviors, February 2014, vol./is. 39/2(445-448), 0306-4603 (Feb 2014)

**Author(s):** Meshberg-Cohen, Sarah; Reid-Quinones, Kathryn; Black, Anne C; Rosen, Marc I

**Correspondence Address:** Meshberg-Cohen, Sarah: VA Connecticut Healthcare System, 950 Campbell Avenue, WestHaven, CT, US, 06516, sarah.meshberg-cohen@yale.edu

**Institution:** VA Connecticut Healthcare System, Psychiatry Department, West Haven, CT, US; National Crime Victims Research and Treatment Center, Department of Psychiatry and Behavioral Sciences, Medical University of South Carolina, Charleston, SC, US; VA Connecticut Healthcare System, Psychiatry Department, West Haven, CT, US; VA Connecticut Healthcare System, Psychiatry Department, West Haven, CT, US

**Language:** English

**Abstract:** Introduction: Veterans deemed disabled for conditions resulting from, or aggravated by, their service in the military are eligible for service-connected disability payments. Despite many positive effects of disability payments, one concern is that Veterans with psychiatric conditions who receive disability payments are less likely to be employed compared to those who are denied benefits. Little is known about the attitudes of substance using Veterans, for whom work is a particularly important part of recovery, toward work and disability compensation. Methods: This study compared the responses of Veterans with (n = 33) and without substance use problems (n = 51) to questions about work's significance and its relationship to disability payments. T- and chi-square tests were conducted to determine if Veterans with substance use problems differed from the others on work-related attitudes and perceptions of the relation between work and Veterans' benefits. Results: Veterans endorsed high levels of agreement with statements that working would lead to loss of benefits. Veterans with substance use agreed more strongly that they would rather turn down a job offer than lose financial benefits. Conclusions: The greater preference for disability payments among substance-using Veterans may reflect a realistic concern that they are particularly likely to have difficulty maintaining employment. The widespread concern among Veterans that work will lead to loss of VA disability payments is striking given the ambiguity about how likely loss of benefits actually is, and should be addressed during the service-connection application process. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Disabilities](#)  
[\\*Drug Abuse](#)  
[\\*Employment Status](#)  
[\\*Military Veterans](#)  
[\\*Work \(Attitudes Toward\)](#)

**Source:** PsycINFO

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

#### 79. Integrating smoking cessation into substance use disorder treatment for military veterans: Measurement and treatment engagement efforts.

**Citation:** Addictive Behaviors, February 2014, vol./is. 39/2(439-444), 0306-4603 (Feb 2014)

**Author(s):** Shealy, Suzanne E; Winn, Jaime L

**Correspondence Address:** Shealy, Suzanne E.: James A. Haley Veterans' Hospital, Mental Health and Behavioral Sciences Service (116A), 13000 Bruce B. Downs Blvd., Tampa, FL, US, 33612, Suzanne.shealy@va.gov

**Institution:** James A. Haley Veterans' Hospital, Tampa, FL, US; James A. Haley Veterans' Hospital, Tampa, FL, US

**Language:** English

- Abstract:** Military personnel and veterans smoke at higher rates than the general population, compromising physical performance readiness and health (Committee on Smoking Cessation in Military and Veteran Populations & Institute of Medicine, 2009). While efforts are being made within both the Department of Defense and the Veterans' Administration (VA) hospitals to prevent onset, change the smoking culture, and promote smoking cessation; smoking rates are increasing among combat deployed service members, and smoking rates are particularly high among veterans with mental health and other substance use disorders (McFall, 2006). Recent research supports making smoking cessation widely available and integrated with other forms of care (Gierisch et al., 2012; McFall et al., 2010). This paper describes the efforts of one VA substance use disorder (SUD) treatment program to integrate smoking cessation in routine care, including assessment of tobacco use and motivation and intention to quit via the proposed Nic-BAM assessment. Our team was 100% successful in incorporating the Nic-BAM into our regular assessment of treatment program participants. This suggests that staff members are amenable to assessing for tobacco addiction alongside other substance addictions. Although smoking did not decrease according to the Nic-BAM, an increase in the use of nicotine-replacement products suggests that participants are willing to initiate a quit attempt during SUD treatment. The availability of new evidence-based approaches for integration of tobacco cessation with mental health and SUD treatment may help to enhance programmatic efforts. Environmental changes are needed to fully incorporate tobacco recovery into SUD programming, and additional resources may include peer support specialists. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Conference Information:** Annual Meeting of the American Psychological Association. 2012. Orlando. FL, US. Portions of the Nic-BAM were presented
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Drug Rehabilitation](#)  
[\\*Military Veterans](#)  
[\\*Smoking Cessation](#)  
[Client Participation](#)
- Source:** PsycINFO
- Full Text:** Available from *Elsevier* in [Addictive Behaviors](#)

#### 80. Alcohol misuse, alcohol-related risky behaviors, and childhood adversity among soldiers who returned from Iraq or Afghanistan.

- Citation:** Addictive Behaviors, February 2014, vol./is. 39/2(414-419), 0306-4603 (Feb 2014)
- Author(s):** Clarke-Walper, Kristina; Riviere, Lyndon A; Wilk, Joshua E
- Correspondence Address:** Clarke-Walper, Kristina: Center for Military Psychiatry and Neuroscience, 503 Robert Grant Ave., Silver Spring, MD, US, 20910, kristina.clarke@amedd.army.mil
- Institution:** Center for Military Psychiatry and Neuroscience, Silver Spring, MD, US; Center for Military Psychiatry and Neuroscience, Silver Spring, MD, US; Center for Military Psychiatry and Neuroscience, Silver Spring, MD, US
- Language:** English
- Abstract:** Background: Soldiers face a great number of traumatic combat exposures while deployed, which research has shown to contribute to the development of alcohol misuse. In addition to this known risk factor, we hypothesize that adverse childhood experiences (ACEs) also contribute to the likelihood that soldiers will engage in these behaviors, even after adjusting for deployment-related factors (mental health problems and combat exposure). Methods: Soldiers were surveyed anonymously approximately 3 months upon return from Operation Enduring Freedom (OEF) or Operation Iraqi Freedom (OIF) from 2003 to 2006. Six brigade combat teams were included in the analyses (n = 7849). Participants were asked about ACEs, mental health symptoms, alcohol misuse, risky behaviors related to alcohol misuse, and combat exposure. Results: Of the 7849 soldiers in the sample, 31.5% screened positive for alcohol misuse and of those almost half also screened positive for risky behaviors related to alcohol misuse (43.3%). Having an alcoholic in the

household and experiencing sexual abuse were significantly associated with screening positive for alcohol misuse and alcohol misuse with risky behaviors. Experiencing sexual abuse was a strongly associated ACE item, with an almost 2-fold increase in risk of both outcomes even after adjusting for mental health problems and combat exposure. Conclusions: Findings suggest that ACEs are a substantial risk factor for alcohol misuse with and without risky behaviors among soldiers returning from deployments and should be considered when directing prevention efforts. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Alcohol Abuse](#)  
[\\*Combat Experience](#)  
[\\*Mental Health](#)  
[\\*Military Veterans](#)  
[\\*Risk Taking](#)  
[Alcoholism](#)  
[Early Experience](#)  
[Risk Factors](#)

**Source:** PsycINFO

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

#### 81. Co-occurring mental health and alcohol misuse: Dual disorder symptoms in combat injured veterans.

**Citation:** Addictive Behaviors, February 2014, vol./is. 39/2(392-398), 0306-4603 (Feb 2014)

**Author(s):** Heltemes, Kevin J; Clouser, Mary C; MacGregor, Andrew J; Norman, Sonya B; Galarneau, Michael R

**Correspondence Address:** Heltemes, Kevin J.: Naval Health Research Center, 140 Sylvester Road, San Diego, CA, US, 92106, heltemesk@gmail.com

**Institution:** Department of Medical Modeling, Simulation, and Mission Support, Naval Health Research Center, San Diego, CA, US; Department of Medical Modeling, Simulation, and Mission Support, Naval Health Research Center, San Diego, CA, US; Department of Medical Modeling, Simulation, and Mission Support, Naval Health Research Center, San Diego, CA, US; VA San Diego Healthcare System, Department of Psychiatry, San Diego, CA, US; Department of Medical Modeling, Simulation, and Mission Support, Naval Health Research Center, San Diego, CA, US

**Language:** English

**Abstract:** Objective: Service members face difficulties during military deployment potentially resulting in morbidities such as posttraumatic stress disorder (PTSD), depression, and alcohol misuse. The co-occurrence of alcohol misuse and mental health disorders is termed dual disorder and has been associated with adverse outcomes. Methods: The study included 812 high-risk (i.e., endorsing combat exposure with documented combat injury) male U.S. veterans of Operation Iraqi Freedom, injured between October 2004 and November 2007, identified from the Expeditionary Medical Encounter Database. Results: PTSD and depression symptoms were significant correlates of alcohol misuse. Veterans with dual disorder symptoms reported a significantly higher mean number of health complaints on the Post-Deployment Health Reassessment compared with those endorsing only mental health symptoms. Conclusions: These results highlight how mental health disorders among injured service members increases the odds of problem drinking and those with dual disorder have elevated health complaints. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Mental Health](#)  
[\\*Military Deployment](#)

\*Military Veterans  
 Injuries  
 Major Depression  
 Posttraumatic Stress Disorder

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

### 82. Quality of life in veterans with alcohol dependence and co-occurring mental illness.

**Citation:** Addictive Behaviors, February 2014, vol./is. 39/2(386-391), 0306-4603 (Feb 2014)  
**Author(s):** Ralevski, Elizabeth; Gianoli, Mayumi O; McCarthy, Elissa; Petrakis, Ismene  
**Correspondence Address:** Ralevski, Elizabeth: VA Connecticut Healthcare System, Psychiatry Service (116A), West Haven, CT, US, 06516, elizabeth.ralevski@yale.edu  
**Institution:** Department of Psychiatry, Yale University School of Medicine, New Haven, CT, US; Department of Psychiatry, Yale University School of Medicine, New Haven, CT, US; Department of Veterans Affairs, VA Connecticut Healthcare System, West Haven, CT, US; Department of Psychiatry, Yale University School of Medicine, New Haven, CT, US  
**Language:** English  
**Abstract:** Quality of life is negatively impacted by diagnosis of mental illness. Those with mental illness report problems in physical, psychological, cognitive, social, and occupational functioning. This study was designed to examine changes in quality of life in veterans with dual diagnoses. All veterans participated in a treatment study designed to treat alcohol dependence with naltrexone, disulfiram, and the combination of naltrexone/ disulfiram or placebo for 12 weeks. Quality of life was assessed before treatment and at the end of treatment. Quality of life improved for all veterans and the improvement was more significant for those who abstained from alcohol throughout treatment. Severity of psychiatric symptom was associated with worse quality of life. This study demonstrates the importance of addressing social functioning in veterans with dual diagnosis. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)  
**Country of Publication:** HOLDER: Elsevier Ltd.; YEAR: 2013  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** \*Alcoholism  
 \*Comorbidity  
 \*Dual Diagnosis  
 \*Mental Disorders  
 \*Quality of Life  
 Military Veterans  
**Source:** PsycINFO  
**Full Text:** Available from *Elsevier* in *Addictive Behaviors*

### 83. Characteristics and drinking patterns of veterans with alcohol dependence with and without post-traumatic stress disorder.

**Citation:** Addictive Behaviors, February 2014, vol./is. 39/2(374-378), 0306-4603 (Feb 2014)  
**Author(s):** Fuehrlein, Brian; Ralevski, Elizabeth; O'Brien, Erin; Jane, J. Serrita; Arias, Albert J; Petrakis, Ismene L  
**Correspondence Address:** Petrakis, Ismene L.: VA Connecticut Healthcare System, 116-A, 950 Campbell Avenue, West Haven, CT, US, 06516, ismene.petrakis@yale.edu  
**Institution:** VISN I Mental Illness Research Education and Clinical Center (MIRECC), VA, US; VISN I Mental Illness Research Education and Clinical Center (MIRECC), VA, US; VISN I Mental Illness Research Education and Clinical Center (MIRECC), VA, US; VISN I Mental Illness Research Education and Clinical Center (MIRECC), VA, US; VISN I Mental Illness Research Education and Clinical Center (MIRECC), VA, US; VISN I Mental Illness Research Education and Clinical Center (MIRECC), VA, US

**Language:** English

**Abstract:** Alcohol use disorders and post-traumatic stress disorder (PTSD) are highly prevalent and commonly co-occur, notably in veterans. We explored differences in the pre-treatment characteristics of veterans with alcohol dependence (AD) alone compared to those with co-occurring AD and PTSD. Veterans were recruited to participate in two different treatment studies and baseline characteristics were compared. Those with co-occurring illnesses demonstrated significantly higher pre-treatment pathology across all psychopathological domains. While those with AD alone averaged more days of drinking and had more heavy drinking days, those with co-occurring illnesses reported more drinking-related symptoms. The presence of a major depressive episode had no effect on drinking. Within the PTSD group, combat exposure was associated with increased drinking independent of the severity of PTSD symptoms. This study underscores the importance of screening for comorbidity in clinical treatment settings, and for collecting detailed drinking histories and assessing psychiatric symptoms across all domains of psychopathology. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcohol Drinking Patterns](#)  
[\\*Alcoholism](#)  
[\\*Military Veterans](#)  
[\\*Posttraumatic Stress Disorder](#)  
[Comorbidity](#)  
[Major Depression](#)  
[Psychopathology](#)

**Source:** PsycINFO

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

#### 84. Neuropsychological assessment of decision making in alcohol-dependent commercial pilots.

**Citation:** Aviation, Space, and Environmental Medicine, September 2013, vol./is. 84/9(980-985), 0095-6562 (Sep 2013)

**Author(s):** Georgemiller, Randy; Machizawa, Sayaka; Young, Kathleen M; Martin, Cynthia N

**Correspondence Address:** Georgemiller, Randy, 4115 Columbia Rd., Ste. 5-305, Martinez, GA, US, 30907-0410, rgeorgemiller@hotmail.com

**Institution:** Georgemiller, Whyte & Associates, PC, Des Plaines, IL, US; Chicago School of Professional Psychology, Chicago, IL, US; American Schools of Professional Psychology, Argosy University, Schaumburg, IL, US; Chicago School of Professional Psychology, Chicago, IL, US

**Language:** English

**Abstract:** Background: The aim of this exploratory archival study was to discern the utility of the Iowa Gambling Task (IGT) in identifying adaptive decision-making capacities among pilots with a history of alcohol dependence both with and without Cluster B personality features. Methods: Participants included 18 male airmen at the rank of captain with a history of receiving alcohol dependence treatment and subsequent referral for a fitness-for-duty evaluation. Data from prior comprehensive neuropsychological evaluations conducted in a private practice setting at the mandate of the FAA utilizing criteria outlined in the HIMS program was used. ANOVA was conducted to compare pilots with (N = 4) and without Cluster B personality features (N = 14) on measures of decision-making capacities, intelligence, and executive functioning. Results: Pilots with Cluster B personality features were found to have a significantly lower Total Net T-Score on IGT (M = 35.00, SD = 9.27) than pilots without features of Cluster B (M = 56.36, SD = 9.55). Furthermore, with the exception of the first 20 cards (i.e., Net 1); the groups significantly differed in their Net scores. No statistically significant difference was found on airmen's intelligence and executive functioning. Discussion: The present study found that alcohol-dependent airmen with Cluster B personality features evidenced significantly poorer decision-making capacities as measured by the IGT in comparison to alcohol



dependent airman without Cluster B personality features. Implications and limitations of the study are discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Aerospace Medical Association, Alexandria, VA  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Aircraft Pilots](#)  
[\\*Alcoholism](#)  
[\\*Decision Making](#)  
[\\*Neuropsychological Assessment](#)  
**Source:** PsycINFO

#### 85. Positivity, coping style and tobacco and alcohol use in adolescence.

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**Citation:** Electronic Journal of Research in Educational Psychology, September 2013, vol./is. 11/2(345-366), 1699-5880;1696-2095 (Sep 1, 2013)  
**Author(s):** Lara, M. Dolores; Bermudez, Jose; Perez-Garcia, Ana M  
**Correspondence Address:** Bermudez, Jose: Facultad de Psicología, UNED, c/ Juan del Rosal, 10, Madrid, Spain, 28040, jbermudez@psi.uned.es  
**Institution:** Facultad de Psicología, UNED, Madrid, Spain; Facultad de Psicología, UNED, Madrid, Spain; Facultad de Psicología, UNED, Madrid, Spain  
**Language:** English  
**Abstract:** Introduction: Adolescence is a period when at-risk health behaviors often begin, such as tobacco and alcohol use; thus, it is a critical period for implementing preventive strategies. Method: In this context, 106 adolescents took part in this research (54 females and 52 males; mean age for both groups = 14.10). The main objectives were to first study the relationships between psychosocial factors, such as coping style and the new construct of positivity, and tobacco and alcohol use; then to analyze the potential effect of gender and age differences. Results: Results revealed (1) significant relationships among coping, positivity, and substance use; (2) that these effects were modulated by age and gender, and (3) that positivity was one of the most significant predictors of tobacco and alcohol use, having a protective role. Conclusion: Results concerning the contribution of coping style, age and gender in explaining adolescents' tobacco and alcohol use tend to be consistent with previous research on this topic. On the other hand, results regarding the positivity dimension constitute a novel contribution to the research in this area, suggesting its significant protective role against the development of risk behaviors such as tobacco and alcohol use (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Education & Psychology I+D+i and Editorial EOS (Spain)  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Adolescent Development](#)  
[\\*Coping Behavior](#)  
[\\*Drug Usage](#)  
[\\*Psychosocial Factors](#)  
[\\*Tobacco Smoking](#)  
[Health Behavior](#)  
**Source:** PsycINFO

#### 86. Denial.

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**Citation:** Albert Ellis revisited., 2014(253-266) (2014)  
**Author(s):** Gerstein, Joseph; Ellis, Albert  
**Institution:** Harvard Medical School, Cambridge, MA, US  
**Language:** English

**Abstract:** (from the chapter) This reprinted chapter originally appeared in *When AA Doesn't Work for You: Rational Steps to Quitting Alcohol*, edited by A. Ellis & E. Velten, 1992. In this chapter, Ellis examines denial in relation to chemical dependency. He notes that the major reason people deny (fail to admit) their responsibility for their poor behavior is that they believe that to admit responsibility is to condemn themselves, not just their behavior. Denial is categorized into 2 types: related to existence of the problem, and denial of responsibility for the problem. Responsibility denial is related to the "disease theory" of addiction. Ellis argues that both individual and group approaches to rational emotive behavior therapy may help propel individuals toward recovery. In his introduction, Gerstein outlines the major themes of Ellis's (and Velten's) article and discusses denial in relation to other treatment programs, and the use of Ellis's ABC approach in Self-Management And Recovery Training (SMART) recovery programs. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Denial](#)  
[\\*Rational Emotive Behavior Therapy](#)  
[Drug Addiction](#)  
[Drug Dependency](#)

**Source:** PsycINFO

#### 87. Where chocolate begins and research methods end: Understanding Kuna cacao consumption.

**Citation:** Human Organization, 2013, vol./is. 72/3(211-219), 0018-7259;1938-3525 (Fal, 2013)

**Author(s):** Barnes, Jeffrey

**Institution:** Dawson College, Montreal, PQ, Canada

**Language:** English

**Abstract:** Contrary to a recent deluge of scientific and popular publications, the island-dwelling Kuna people of Ailigandi, San Bias Panama do not consume large amounts of locally derived cacao beverages. This paper introduces new research on the actual consumption of Theobroma cacao among the people of Ailigandi. The chocolate tree, Theobroma cacao, is of great cultural importance for Kuna people, and its fruits are used within multiple contexts as an irreplaceable element of Kuna identity and cultural life. However, cacao cultivation has become dramatically more difficult because of the numerous fungal pathogens that attack the tree. Despite the constraints this has placed on local cacao production, recent studies suggest that Kuna people consume large amounts of local cacao. This research evaluates the livelihood strategies and dietetic intake of the Kuna in a cross-cultural context. Findings suggest that recent studies may have misunderstood the local reality in their depictions of the Kuna people of Ailigandi as prolific consumers of locally derived cacao. Using a methodology that incorporates a local nomenclature, I found that the actual consumption of locally grown cacao among Kuna people is negligible, notwithstanding the claims of researchers whose work is largely funded by an industrial chocolate manufacturer (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Society for Applied Anthropology; YEAR: 2013

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

**Subject Headings:** [\\*Beverages \(Nonalcoholic\)](#)  
[\\*Drug Usage](#)  
[Cross Cultural Differences](#)  
[Methodology](#)  
[Scientific Communication](#)

**Source:** PsycINFO

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

**88. Beyond well-being: The fascination of risk and of the new psychological addictions.**

- Citation:** Beyond well-being: The fascination of risk and of the new psychological addictions., 2013 (2013)
- Author(s):** Tappata, Laura
- Language:** English
- Abstract:** (from the preface) In this thought-provoking book, Laura Tappata brilliantly guides the reader from a description of the existential problem of psychological addictions to a possible solution leading to a potentially positive outcome for the individual. The central theme of the book is anchored in the dismal nature of "postmodern identity" with a focus on searching for meaning in what we are and who we are. This identity is characterized as being narcissistic and fragile, suggesting from the outset that we need to somehow strive for a stronger and more well-defined self in order to, first, survive and, then, possibly thrive emotionally. Living in this postmodern world naturally leads to a superficial existence and the seemingly blind quest of acquiring nonessential and meaningless things designed to bolster our ill-defined, weak and vulnerable self. Although this leads to a false sense of happiness, it does not generate true contentment let alone a sense of well-being. As such, many of us are left to drift with few essential values, certainties and stable points of reference. This book attempts to lead the reader on the path from "the postmodern dependence on psychological addictions" to freedom, the expression of one's identity and a true sense of well-being. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
- Publication Type:** Book; Authored Book
- Subject Headings:** [\\*Addiction](#)  
[\\*Happiness](#)  
[\\*Narcissism](#)  
[Risk Factors](#)  
[Well Being](#)
- Source:** PsycINFO

**89. "Try not to judge": Mothers of substance exposed infants.**

- Citation:** MCN: The American Journal of Maternal/Child Nursing, July 2013, vol./is. 38/4(200-205), 0361-929X;1539-0683 (Jul-Aug 2013)
- Author(s):** Cleveland, Lisa M; Gill, Sara L
- Correspondence Address:** Cleveland, Lisa M., [clevelandl@uthscsa.edu](mailto:clevelandl@uthscsa.edu)
- Institution:** Department of Family & Community Health Systems, University of Texas Health Science Center at San Antonio, School of Nursing, San Antonio, TX, US; Department of Family & Community Health Systems, University of Texas Health Science Center at San Antonio, School of Nursing, San Antonio, TX, US
- Language:** English
- Abstract:** Purpose: To describe the hospital experiences of mothers who give birth to substance-exposed infants. Study Design and Methods: Secondary analysis of data from a larger study that was focused on the experiences of Mexican-American mothers in the neonatal intensive care unit (NICU) was conducted. Semi structured interviews with five women who were recovering addicts on methadone were analyzed. Each of their infants spent time in an NICU following birth. The transcribed interviews were analyzed using qualitative content analysis. Results: Four themes were identified: (a) "try not to judge," (b) "scoring" the baby, (c) "share with me," and (d) "I'm the mother here!" Clinical Implications: The quality of the relationship between the mothers and the nurses in the NICU was a crucial aspect of the mothers' experiences and may have an effect on long-term outcomes. Women with addictions often have other significant risk factors that may further jeopardize their ability to mother; therefore, it is essential to develop a strong support network. Nurses can be instrumental in organizing resources for this population of women. Judging behaviors may have a detrimental effect on women with addictions.

Maternal adaptation to the mothering role can be enhanced by making reasonable efforts to include the mother in the care of the infant. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: Unauthorized reproduction of this article is prohibited.; HOLDER: Lippincott Williams & Wilkins; YEAR: 2013

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

**Subject Headings:** [\\*Mexican Americans](#)  
[\\*Prenatal Exposure](#)  
[\\*Neonatal Intensive Care](#)  
[\\*Chemical Exposure](#)  
[Mother Child Relations](#)  
[Nurses](#)  
[Risk Factors](#)

**Source:** PsycINFO

#### 90. Tailored treatment for HIV+ persons with mental illness: The intervention cascade.

**Citation:** JAIDS Journal of Acquired Immune Deficiency Syndromes, June 2013, vol./is. 63/Supp 1(S44-S48), 1525-4135;1077-9450 (Jun 1, 2013)

**Author(s):** Blank, Michael B; Eisenberg, Marlene M

**Correspondence Address:** Blank, Michael B.: Center for Mental Health Policy and Services Research, University of Pennsylvania, 3535 Market St., Room 3020, Philadelphia, PA, US, 19104, mblank2@mail.med.upenn.edu

**Institution:** Department of Psychiatry, Center for Mental Health Policy and Services Research, University of Pennsylvania, Philadelphia, PA, US; Department of Psychiatry, Center for Studies of Addiction, Perelman School of Medicine, University of Pennsylvania, Philadelphia, PA, US

**Language:** English

**Abstract:** The public health literature demonstrates disturbingly high HIV risk for persons with a serious mental illness, who are concurrently comorbid for substance abuse. Many HIV positives have not been tested and therefore do not know their status, but for individuals who are triply diagnosed, adherence to HIV treatment results in meaningful reductions in viral loads and CD4 counts. Barriers to treatment compliance are reviewed, low-threshold/low-intensity community-based interventions are discussed, and preliminary evidence is presented for the efficacy of the intervention cascade, defined as an integrated intervention delivered by specially trained nurses who individualize a treatment compliance intervention in real time as an adaptive response to demand characteristics of the individual. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Lippincott Williams & Wilkins; YEAR: 2013

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

**Subject Headings:** [\\*Comorbidity](#)  
[\\*Drug Abuse](#)  
[\\*HIV](#)  
[\\*Mental Disorders](#)  
[\\*Treatment Barriers](#)  
[Intervention](#)  
[Public Health](#)  
[Risk Factors](#)

**Source:** PsycINFO

**Full Text:** Available from *Ovid* in *JAIDS Journal of Acquired Immune Deficiency Syndromes*

#### 91. Mania associated with brain injury.

**Citation:** Casebook of neuropsychiatry., 2013(10-17) (2013)

**Author(s):** Dagg, Paul; Klages, Jennifer

**Institution:** British Columbia Neuropsychiatry Program, University of British Columbia, Vancouver, BC, Canada; British Columbia Neuropsychiatry Program, Interior Health Authority, Kamloops, BC, Canada

**Language:** English

**Abstract:** (from the chapter) This chapter presents a case of a 45 year old man with mania associated with brain injury. The challenge in this case is in determining the relative contributions of structural brain injury and primary psychiatric illness in the genesis of the patient's psychopathology. Premorbidly, he had cyclical mood patterns and risk-taking behavior but had never been formally diagnosed with nor treated for bipolar disorder. Ruptured aneurysms of the anterior communicating artery have been associated with psycho behavioral dysfunction and pervasive cognitive intellectual impairment, especially in those patients who have complicating vasospasm. Deficits are varied and can include memory impairment, thought to be related to damage to the basal forebrain, and increased risk-taking behavior, possibly associated with orbitofrontal damage. Structural damage to the orbitofrontal lobes has been implicated in inappropriate social behaviors and impaired self-insight. These difficulties may result in poorly adjudicated and risky behavior, which may escalate to antisocial behavior and possible substance abuse and addiction. The right ventromedial prefrontal cortex, which extends into the orbitofrontal cortex has been particularly associated with problems in social conduct and decision making. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Bipolar Disorder](#)  
[\\*Brain Damage](#)  
[\\*Mania](#)  
[\\*Mental Disorders](#)  
[Comorbidity](#)  
[Emotional States](#)  
[Neuropsychiatry](#)  
[Psychopathology](#)  
[Risk Taking](#)

**Source:** PsycINFO

## 92. Dopamine excess in Parkinson's disease.

**Citation:** Casebook of neuropsychiatry., 2013(3-10) (2013)

**Author(s):** Howard, Andrew K

**Institution:** British Columbia Neuropsychiatry Program, University of British Columbia, Vancouver, BC, Canada

**Language:** English

**Abstract:** (from the chapter) Dopamine plays a critical role in reward and addiction, so it is important to both educate patients about the risks and ask about the presence of impulse-control disorders, which occur in up to 25% of Parkinson's patients. These disorders include pathological gambling, hypersexuality, and excessive shopping, which are the most commonly described, but also intermittent explosive disorder, kleptomania, pyromania, binge eating, and trichotillomania. The syndrome of hedonistic homeostatic dysregulation, now referred to as dopamine dysregulation syndrome (DDS), occurs in at least 4% of patients receiving dopamine replacement therapy. Patients with DDS take large doses of dopamine in excess of those required to control their motor symptoms. Features of addiction are present. These patients develop behavioral and social handicaps similar to those seen in psychostimulant disorders, such as the pattern of pathological use, patients feel like they are "on" only if they are dyskinetic or excessively medicated, and medication seeking is common) and interference with social and occupational functioning. Core clinical phenomena include affective instability, including hypomania

when intoxicated and dysphoria when withdrawing, paranoia, anxiety about medication reductions, stereotypies, walkabouts, "punding", continuous and repetitive handling, examining, and sorting of common objects, and sleep disturbance. Involvement of the ventromedial orbitofrontal cortex, the amygdala, and the ventral striatum/nucleus accumbens is likely. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Dopamine](#)  
[\\*Drug Therapy](#)  
[\\*Major Depression](#)  
[\\*Parkinson's Disease](#)  
[Amygdala](#)  
[Cerebral Cortex](#)  
[Frontal Lobe](#)  
[Neuropsychiatry](#)  
[Risk Factors](#)

**Source:** PsycINFO

### 93. Physician health programmes and malpractice claims: Reducing risk through monitoring.

**Citation:** Occupational Medicine, June 2013, vol./is. 63/4(274-280), 0962-7480;1471-8405 (Jun 2013)

**Author(s):** Brooks, E; Gendel, M. H; Gundersen, D. C; Early, S. R; Schirmacher, R; Lembitz, A; Shore, J. H

**Correspondence Address:** Brooks, E.: University of Colorado Denver, Mail Stop F800, 13055 E.17th Ave, Room 238, Aurora, CO, US, 80045, elizabeth.brooks@ucdenver.edu

**Institution:** University of Colorado Denver, Aurora, CO, US; Colorado Physician Health Program, Denver, CO, US; Colorado Physician Health Program, Denver, CO, US; Colorado Physician Health Program, Denver, CO, US; COPIC Insurance, Denver, CO, US; COPIC Insurance, Denver, CO, US; University of Colorado Denver, Aurora, CO, US

**Language:** English

**Abstract:** Background: Physician health programs (PHPs) are peer-assistance organizations that provide support to physicians struggling with addiction or with physical or mental health challenges. While the services they offer are setting new standards for recovery and care, they are not immune to public debate and criticism since some have concerns about those who are enrolled in, or have completed, such programs and their subsequent ability to practice medicine safely. Aims: To examine whether medical malpractice claims were associated with monitoring by a PHP using a retrospective examination of administrative data. Methods: Data on PHP clients who were insured by the largest malpractice carrier in the state were examined. First, a business-model analysis of malpractice risk examined relative risk ratings between program clients and a matched physician cohort. Second, Wilcoxon analysis examined differences in annual rates of pre- and post-monitoring claims for PHP clients only. Results: Data on 818 clients was available for analysis. After monitoring, those enrolled in the program showed a 20% lower malpractice risk than the matched cohort. Furthermore physicians' annual rate of claims were significantly lower after program monitoring among PHP clients ( $P < 0.01$ ). Conclusions: This is the only study examining this issue to date. While there are a variety of reasons why physicians present to PHPs, this study demonstrates that treatment and monitoring is associated with a lowered risk of malpractice claims and suggests that patient care may be improved by PHP monitoring. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: Published by Oxford University Press on behalf of the Society of Occupational Medicine. All rights reserved.; HOLDER: The Author; YEAR: 2013

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

**Subject Headings:** [\\*Health Care Services](#)  
[\\*Mental Health](#)



\*Monitoring  
 \*Physicians  
 \*Professional Liability  
 Hospital Administration  
 Risk Factors

**Source:** PsycINFO

**Full Text:** Available from *Oxford University Press* in *Occupational Medicine*

#### 94. Food and addiction: Scientific, social, legal, and legislative implications.

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**Citation:** Food and addiction: A comprehensive handbook., 2012(439-446) (2012)

**Author(s):** Brownell, Kelly D; Gold, Mark S

**Institution:** Rudd Center for Food Policy and Obesity, Yale University, New Haven, CT, US;  
 McKnight Brain Institute, College of Medicine, University of Florida, Gainesville, FL, US

**Language:** English

**Abstract:** (from the chapter) Whether food and addiction is a viable concept is scarcely in question. This book has marshaled the world's top experts in nutrition, addiction, and the intersection of these fields. The work is impressive in quality and scope, joins together studies using animal models with highly sophisticated human research, and converges on clear conclusions. Food can act on the brain as an addictive substance. Certain constituents of food, sugar in particular, may hijack the brain and override will, judgment, and personal responsibility, and in so doing create a public health menace. The foods most likely to trigger an addictive process appear to be those marketed most aggressively by industry, which manipulates its products to maximize palatability. Just like drugs of abuse, brain-rewarding effects or reinforcement from food can lead to loss of control. Vast numbers of people are likely to be affected, particularly those most vulnerable, such as youth. The addictive impact of food may be a contributor to the global health crises created from obesity and diabetes, to the point where legislative and legal efforts might be informed by advances in this field, much as they were with tobacco. We expect the concept of food and addiction to enter the public and public policy limelight shortly-the evidence is too strong to do otherwise. The implications could be significant in the way the public views nutrition and disease, in matters such as culpability for health problems related to food, and in the way nations work to prevent diet-related problems. Given the potential importance of this concept, it is essential that the work be robust, adequately funded, and communicated in accurate and effective ways. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** \*Addiction  
 \*Eating Behavior  
 \*Eating Disorders  
 \*Food  
 \*Health Promotion  
 Government Policy Making  
 Legal Processes  
 Legislative Processes  
 Public Health  
 Sciences

**Source:** PsycINFO

#### 95. Lessons from drug policy.

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**Citation:** Food and addiction: A comprehensive handbook., 2012(423-429) (2012)

**Author(s):** Dupont, Robert L

**Institution:** School of Medicine, Georgetown University, Washington, DC, US

**Language:** English

**Abstract:** (from the chapter) I proceed to a discussion of drug policy with several key assumptions: (1) drug abuse treatment has been characterized as futile, but data support a more positive conclusion; (2) addiction is a merciless teacher, labeled "cunning, baffling and powerful" by Alcoholics Anonymous; (3) recovery from addiction is characterized by not merely a return to premorbid condition, but to greatly enhanced lives; (4) a great achievement of drug abuse research has been the identification of disordered brain reward as the sine qua non of addiction, not withdrawal; (5) although the risk of addiction varies with the substance, the route of administration, and many other factors, the risk of addiction is universal to all individuals who use brain-rewarding substances or behaviors repeatedly and intensely; (6) changes in biology and thinking brought about by substances of abuse make the concepts of choice and personal responsibility of limited relevance when it comes to the continuation of drug use, as the brain reward from drugs of abuse is produced by a sledgehammer effect on the delicate brain reward mechanism; and (7) addictive disorders are often lifelong, hence the term "chronic relapsing brain diseases." After this short introduction let us explore five lessons from drug abuse that have relevance to food addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[\\*Eating Disorders](#)  
[\\*Government Policy Making](#)  
[Brain](#)  
[Drugs](#)  
[Eating Behavior](#)  
[Rewards](#)

**Source:** PsycINFO

#### 96. What lessons for food policy can be learned from alcohol control?

**Citation:** Food and addiction: A comprehensive handbook., 2012(411-415) (2012)

**Author(s):** Gilmore, Ian; Chandaria, Karishma

**Institution:** University of Liverpool, Liverpool, United Kingdom; Alzheimer's Society, London, United Kingdom

**Language:** English

**Abstract:** (from the chapter) Alcohol has become part of the social and cultural fabric of many countries and is associated with pleasure and relaxation. It is now consumed by almost half the world's population, although there is a large degree of variation between and within countries. Alcohol has been shown to confer some health benefits-for instance, in men over 40 years and postmenopausal women moderate consumption leads to decreased risk of myocardial infarction. However, it is also a toxic and psychoactive substance that can induce dependence and addiction and cause a significant amount of harm to public health. There are some similarities between the public health approaches that have been used to tackle alcohol misuse and obesity, but one important difference exists: the fact that alcohol, like tobacco, is not essential to life, whereas food is. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Alcoholic Beverages](#)  
[\\*Drug Laws](#)  
[\\*Food](#)  
[\\*Government Policy Making](#)  
[\\*Public Health](#)  
[Alcohol Abuse](#)  
[Obesity](#)

**Source:** PsycINFO

### 97. Legal implications: Regulating sales and marketing.

**Citation:** Food and addiction: A comprehensive handbook., 2012(406-410) (2012)

**Author(s):** Pomeranz, Jennifer L

**Institution:** Rudd Center for Food Policy and Obesity, Yale University, New Haven, CT, US

**Language:** English

**Abstract:** (from the chapter) As science continues to reveal the addictive properties of certain foods and beverages, government regulation of the sale and marketing of such products may become necessary. In the United States, both the federal and state governments have regulatory authority over food and beverages (hereinafter "food"). The Food and Drug Administration (FDA) has the primary authority over the safety and labeling of both food and added ingredients, such as sugar, caffeine, and chemicals to enhance shelf-life, color, and other physical properties. State governments (via their legislatures, state agencies, and attorneys general) can regulate consumer goods, including food, to the extent not preempted by federal law. State and local governments also have the authority to act to protect public health, safety, and welfare under their traditional police powers, and they can use this power to regulate the sale of food. Although not a food, tobacco products are highly addictive and legally available for sale in the United States. Federal and state regulation of tobacco products provides valuable insight into potential avenues to regulate the sale and marketing of food if it is found to be addictive. Government regulation of tobacco includes restrictions on advertisements for such products; however, the First Amendment of the Constitution protects marketers from government interference with their right to advertise. This constitutional protection of "commercial speech" has proven to be a barrier to some restrictions on marketing and will be explored in this chapter in the context of tobacco products. A review of federal and state regulation of addictive substances and products reveals gaps in the current regulatory framework and the potential for future government intervention in response to scientific advances in the field of food and addiction. This chapter will review the FDA's regulatory framework for food and the government's regulation of caffeine, sugar, and tobacco products to suggest legally permissible regulations in the realm of food and addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Business](#)  
[\\*Food](#)  
[\\*Government Policy Making](#)  
[\\*Legal Processes](#)  
[\\*Marketing](#)  
[Addiction](#)  
[Caffeine](#)  
[Government Agencies](#)  
[Sugars](#)  
[Tobacco Smoking](#)

**Source:** PsycINFO

### 98. Legal and policy implications: Litigation.

**Citation:** Food and addiction: A comprehensive handbook., 2012(401-405) (2012)

**Author(s):** Teret, Stephen P; Rutkow, Lainie

**Institution:** Center for Law and the Public's Health, Bloomberg School of Public Health, Johns Hopkins University, Baltimore, MD, US; Bloomberg School of Public Health, Johns Hopkins University, Baltimore, MD, US

**Language:** English

**Abstract:** (from the chapter) This chapter considers efforts to impose liability on the makers of other potentially addictive products, and what that teaches us about the likelihood that liability may be imposed on manufacturers and marketers of unhealthy foods that can be addictive. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Business](#)  
[\\*Food](#)  
[\\*Litigation](#)  
[\\*Marketing](#)  
[Legal Processes](#)  
[Policy Making](#)  
[Professional Liability](#)

**Source:** PsycINFO

### 99. Nutrition practices in schools.

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**Citation:** Food and addiction: A comprehensive handbook., 2012(394-398) (2012)

**Author(s):** Schwartz, Marlene B; Novak, Nicole L

**Institution:** Rudd Center for Food Policy and Obesity, Yale University, New Haven, CT, US; Rudd Center for Food Policy and Obesity, Yale University, New Haven, CT, US

**Language:** English

**Abstract:** (from the chapter) The mounting evidence that food, especially food of low nutritional value, has addictive properties underscores the importance of healthy food environments in schools. As with any addiction, a child's susceptibility to the addictive properties of food hinges not only on genetics but also on the child's environment. Monitoring and reforming the food environment of schools is critical to ensure that children are offered nutritious food choices and develop tastes and habits that will support their health. The importance of schools is emphasized by the White House Task Force on Childhood Obesity, which identifies "Healthy Food in Schools" as one of the four priority areas for childhood obesity prevention. This chapter will review (a) the importance of school food for student nutrition, (b) the current status of the school food landscape, and (c) current efforts to improve school food by the federal government, state governments, and segments of the food industry. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Food](#)  
[\\*Nutrition](#)  
[\\*School Environment](#)  
[\\*Schools](#)  
[Business](#)  
[Government Policy Making](#)  
[Students](#)

**Source:** PsycINFO

### 100. Is food advertising feeding Americans' sugar habit? An analysis of exposure to television advertising for high-sugar foods.

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**Citation:** Food and addiction: A comprehensive handbook., 2012(382-387) (2012)

**Author(s):** Harris, Jennifer L

**Institution:** Rudd Center for Food Policy and Obesity, Yale University, New Haven, CT, US

**Language:** English

**Abstract:** (from the chapter) "I'm cuckoo for Cocoa Puffs," "Get your chocolate fix without undoing your day" with Special K Chocolatey Delight or "Crave those crazy [Cinnamon Toast

Crunch] squares." These cereal advertising slogans imply addictive properties of highly sweetened foods. Americans consume too much sugar, and this chapter explores the possibility that food advertising contributes to this sugar habit. Increasing evidence that sugar and other caloric sweeteners have addictive properties, together with skyrocketing obesity rates, indicates that limiting sugar consumption should be a beneficial public health initiative. However, the enormous volume of advertising for foods high in sugar provides a continuous reminder of the rewards of consuming highly sweetened products. Young people's exposure to advertising for these foods is of special concern as it likely increases their preferences for high levels of sugar, influences beliefs about how much sugar consumption is normal, and potentially fuels an addictive process. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Eating Behavior](#)  
[\\*Food Preferences](#)  
[\\*Sugars](#)  
[\\*Television Advertising](#)  
[\\*Media Exposure](#)  
[Addiction](#)  
[Eating Attitudes](#)  
[Food](#)

**Source:** PsycINFO

#### 101. Food and addiction: A personal story.

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**Citation:** Food and addiction: A comprehensive handbook., 2012(360-363) (2012)

**Author(s):** Rosenberg, Anne

**Language:** English

**Abstract:** (create) In this chapter, the author provides a personal account of her experience with binge eating, food addiction, and her treatment and recovery process. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Binge Eating](#)  
[\\*Food](#)  
[\\*Recovery \(Disorders\)](#)  
[\\*Treatment](#)  
[Eating Behavior](#)  
[Eating Disorders](#)  
[Life Experiences](#)

**Source:** PsycINFO

#### 102. From the front lines: A clinical approach to food and addiction.

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**Citation:** Food and addiction: A comprehensive handbook., 2012(354-359) (2012)

**Author(s):** Werdell, Philip

**Institution:** Food Addiction Professional Training Program, ACORN Food Dependency Recovery Services and The Food Addiction Institute, Sarasota, FL, US

**Language:** English

**Abstract:** (from the chapter) This chapter provides a brief history of food addiction treatment; the key differences between obesity, eating disorders, and chemical dependency on food; five principles of effective treatment for food addiction; and a vision for integrated food addiction recovery services. Since 1986, I have worked professionally with over 4,000 late-stage food addicts, first at the residential food addiction program of Glenbeigh Psychiatric Hospital of Tampa, then at the outpatient program of Rader Institute of Washington. Over the last 15 years, I have developed ACORN Food Dependency

Recovery Services and, most recently, the Food Addiction Institute. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book  
**Subject Headings:** [\\*Addiction](#)  
[\\*Eating Behavior](#)  
[\\*Eating Disorders](#)  
[\\*Food](#)  
[\\*Treatment](#)  
[Chemicals](#)  
[Integrated Services](#)  
[Obesity](#)  
[Recovery \(Disorders\)](#)  
**Source:** PsycINFO

### 103. From the front lines: The impact of refined food addiction on well-being.

**Citation:** Food and addiction: A comprehensive handbook., 2012(348-353) (2012)  
**Author(s):** Ifland, Joan; Sheppard, Kay; Wright, H. Theresa  
**Institution:** Refined Food Addiction Research Foundation, Houston, TX, US; National Heart, Lung, and Blood Institute, National Institutes of Health, Bethesda, MD, US  
**Language:** English  
**Abstract:** (from the chapter) From our clinical standpoint, refined food addiction impacts people as extensively as do other addictions. Refined food addiction is characterized by behaviors described under the diagnostic criteria in The Diagnostic and Statistical Manual of Mental Disorders, fourth edition (DSM-IV) for substance use disorders. Refined food addiction is characterized by cognitive, behavioral, and physiological symptoms, including increased tolerance for the substance; withdrawal symptoms when the substance is withheld; unintended use; failure to cut back; time spent obtaining, consuming, and recovering; missed social activities; and use in spite of knowledge of consequences. Because of the distracting characteristic of excessive adipose tissue (obesity), the nature and scope of refined food addiction are often overlooked. In decades past, the extent of adverse consequences associated with addiction in general was also largely unrecognized. This lack of awareness gave rise to The Addiction Severity Index (ASI), which serves as an instrument for gathering data on the full constellation of consequences of addiction. Considered the gold standard for assessing addiction severity, the ASI is broadly accepted and validated for a variety of addictions across cultures. Thus, the ASI provides an appropriate vehicle for organizing a comprehensive description of refined food addiction and illustrating that obesity is only one consequence of this disorder, and not necessarily the most important. Herein a group of clinicians report their clinical observations of self-identified food addicts. Clinical observations are a valid, indispensable source of data in the early stages of describing and defining psychiatric diseases. Our observations span 30 years of assessment and treatment of self-identified food addicts. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book  
**Subject Headings:** [\\*Addiction](#)  
[\\*Eating Behavior](#)  
[\\*Eating Disorders](#)  
[\\*Food](#)  
[\\*Well Being](#)  
[Psychological Assessment](#)  
[Treatment](#)  
**Source:** PsycINFO

### 104. New treatments for obesity based on addiction models.

**Citation:** Food and addiction: A comprehensive handbook., 2012(342-347) (2012)



**Author(s):** Shriner, Richard L

**Institution:** University of Florida, Gainesville, FL, US

**Language:** English

**Abstract:** (from the chapter) Two-thirds of Americans are overweight, and one-third are obese. Even more penetrating is the statistic that type 2 diabetes is the leading cause of death, and obesity is the major factor. New treatments and new paradigms for treatment are obviously needed to address the obesity epidemic. This chapter outlines some of these new treatments. We also argue for a new paradigm that might help in future modeling of effective antiobesity interventions. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Eating Behavior](#)  
[\\*Obesity](#)  
[\\*Treatment](#)  
[\\*Clinical Models](#)  
[Diabetes Mellitus](#)  
[Epidemics](#)  
[Intervention](#)  
[Overweight](#)

**Source:** PsycINFO

#### 105. Exercise addiction and aversion: Implications for eating and obesity.

**Citation:** Food and addiction: A comprehensive handbook., 2012(336-341) (2012)

**Author(s):** Williams, David M; Marcus, Bess H

**Institution:** Brown University, Providence, RI, US; Department of Family and Preventive Medicine, University of California, San Diego, La Jolla, CA, US

**Language:** English

**Abstract:** (from the chapter) Regular physical activity leads to numerous health benefits, both directly and through its impact on weight loss/maintenance. In addition to its health benefits, popular media publications often proclaim that exercise results in the release of endorphins leading to euphoria, often described as a "runner's high." Moreover, there is evidence that some individuals display behaviors consistent with addiction to physical exercise. However, prevalence rates of regular physical activity among the general population are low, especially among overweight and obese adults. The low rates of physical activity are consistent with recent research showing that physically inactive adults actually tend to experience exercise as aversive. In this chapter we review evidence regarding affective response to exercise, ranging from euphoria to aversion, and associated patterns of physical activity behavior, ranging from exercise addiction to physical inactivity. Additionally, we discuss the relationships between exercise behavior, eating, and obesity. We begin with an overview of basic information on physical activity and exercise. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Aversion](#)  
[\\*Eating Behavior](#)  
[\\*Exercise](#)  
[\\*Obesity](#)  
[Activity Level](#)  
[Emotional Responses](#)  
[Euphoria](#)  
[Health Behavior](#)  
[Physical Activity](#)

**Source:** PsycINFO

#### 106. Treatment of alcohol and drug dependence in 2011 and relevance to food addiction.

**Citation:** Food and addiction: A comprehensive handbook., 2012(318-328) (2012)

**Author(s):** Blumenthal, Kimberly; DuPont, Robert L; Gold, Mark S

**Institution:** Harvard Medical School, Massachusetts General Hospital, Boston, MA, US; Institute for Behavior and Health, School of Medicine, Georgetown University, Washington, DC, US; McKnight Brain Institute, College of Medicine, University of Florida, Gainesville, FL, US

**Language:** English

**Abstract:** (create) This chapter focuses on the model of current abstinence-based addiction treatment and recovery services provided at treatment centers such as the Betty Ford Center, the Florida Recovery Center, or Hazelden. These programs are commonly used by the state physician health programs. Behavioral treatments, cognitive-behavioral therapy, and 12-step programs are discussed. This chapter also discusses the definition of recovery, treatment today, barriers to recovery, and the physician health program model. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Alcoholism](#)  
[\\*Drug Dependency](#)  
[\\*Drug Rehabilitation](#)  
[\\*Eating Disorders](#)  
[Alcohol Rehabilitation](#)  
[Behavior Therapy](#)  
[Cognitive Behavior Therapy](#)  
[Drug Abstinence](#)  
[Eating Behavior](#)  
[Mental Health Programs](#)  
[Recovery \(Disorders\)](#)  
[Treatment Facilities](#)  
[Twelve Step Programs](#)

**Source:** PsycINFO

#### 107. Pharmacotherapy of addictive disorders.

**Citation:** Food and addiction: A comprehensive handbook., 2012(296-302) (2012)

**Author(s):** Tek, Ece; O'Malley, Stephanie S

**Institution:** Cornell Scott Hill Health Center, School of Medicine, Yale University, New Haven, CT, US; Division of Substance Abuse Research, School of Medicine, Yale University, New Haven, CT, US

**Language:** English

**Abstract:** (from the chapter) Recent advances in genomic and molecular biology, genetic manipulation, and psychopharmacological neuroimaging have helped scientists to identify the pharmacokinetic sites of action for many drugs of abuse. Building upon this knowledge, pharmacological treatments have been evaluated for their ability to facilitate abstinence, restore homeostasis, and prevent relapse. Pharmacological treatments of addiction have their effects through a variety of mechanisms. Agonist drugs act on the same receptors as a drug of abuse, produce similar effects, and are often used to treat withdrawal or as maintenance replacement therapy. Partial agonists typically have mild agonist effects in the absence of drug, thereby relieving withdrawal. However, these agents also antagonize or "block" the effects of the abused drug. Antagonists bind to the pharmacological site of action but do not stimulate or produce the same reinforcing effect. Other medications could have indirect modes of action; for example, they indirectly

influence the firing of dopamine, a neurotransmitter considered central to the reinforcing effects of drugs. Immune therapies use vaccines that cause the body to produce antibodies to the drug of abuse. These antibodies bind to the drug, resulting in a molecule too large to pass through the blood-brain barrier, thereby reducing the reinforcing effects of the drug of abuse. This chapter provides a brief review of medications that are currently approved by the Food and Drug Administration (FDA) for the treatment of substance use disorders and medications under investigation for alcohol, nicotine, opiates, stimulants, and marijuana. Information about dosing, adverse events, and contraindications are presented briefly in tables, but the reader should refer to the product information on each medication for complete information. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book  
**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Addiction](#)  
[\\*Drug Rehabilitation](#)  
[\\*Drug Therapy](#)  
[\\*Drugs](#)  
[Government Agencies](#)  
**Source:** PsycINFO

#### 108. Psychological treatments for substance use disorders.

**Citation:** Food and addiction: A comprehensive handbook., 2012(285-289) (2012)  
**Author(s):** Merlo, Lisa J  
**Institution:** College of Medicine, University of Florida, Gainesville, FL, US  
**Language:** English  
**Abstract:** (from the chapter) Although alcohol and other drugs negatively impact virtually every human organ system, it is clear that these substances exert profound effects upon the brain. Specific substance-related deficits in frontal lobe functioning include problems with impulse control, delay of gratification, decision making, and planning. Substance use also impairs cognition (e.g., memory and reasoning), preventing individuals from rationally evaluating and coping with situations or adequately engaging in problem solving. In addition, substance use significantly affects behavior. Drugs and alcohol compete with natural reinforcers to drive drug-seeking and drug-taking behavior, and addiction is believed to result, in part, from the positively and negatively reinforcing effects of repeated drug use. Indeed, the substance use disorders (SUDs) are diagnosed on the basis of behavioral indicators. Recovery from an SUD is extremely challenging because it requires changing deeply embedded behaviors. Many patients do not have adequate coping skills or social support to be successful on their own. So psychological treatments target a number of different goals (e.g., helping the patient understand the nature of addiction, initiating/maintaining sobriety, improving patient functioning across lifestyle domains, repairing relationships, and returning to a productive lifestyle). Relapse prevention is another crucial component of psychological treatment, because substance use disorders are chronic conditions, and relapse is a common concern. The preferred type and intensity of psychological treatment for each individual with an SUD will depend upon his or her personal and situational characteristics. For example, marital and/or family therapy may be needed to salvage or repair important relationships, participation in group therapy or self-help groups may help to combat denial and shame, and individual therapy may be needed to address underlying psychological issues. In addition, the severity of substance use, presence of comorbid medical/psychiatric conditions, and the quality of the individual's social, intellectual, and financial resources will impact treatment decisions. As a result, good treatment should begin with adequate assessment. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book  
**Subject Headings:** [\\*Addiction](#)  
[\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)

[Psychological Assessment](#)  
[Recovery \(Disorders\)](#)  
[Relapse Prevention](#)

**Source:** PsycINFO

#### 109. Clinical assessment of food and addiction.

**Citation:** Food and addiction: A comprehensive handbook., 2012(281-284) (2012)

**Author(s):** Gearhardt, Ashley N; Corbin, William R

**Institution:** University of Michigan, Ann Arbor, MI, US; Arizona State University, Tempe, AZ, US

**Language:** English

**Abstract:** (from the chapter) Spurred by provocative findings in animal models and human neuroimaging studies, the topic of food and addiction has received increased attention by researchers in both the addictions and eating disorders fields. The idea of food addiction has also entered the public consciousness and has been proposed as one possible explanation for increased rates of obesity. Although research on food addiction is still in its nascent stages, application of the food addiction concept in treating obesity is gaining a foothold, and programs based on addiction models are in early stages of evaluation. Critical to both clinical intervention and research is a clear definition of food addiction as well as a valid approach to assessing its presence or absence. In the limited number of research studies assessing food addiction, self-identification has often been used. In other words, individuals are simply asked whether they think they are addicted to food or particular types of food (e.g., chocolate). In clinical settings, multiple-item screening tools are often used, but it is not clear how the items were derived and there is generally no evidence for the reliability or validity of the measures that are used. In the remainder of this chapter, we will examine how food addiction is currently being assessed in clinical and research settings, and we will review recent studies designed to develop valid tools for the assessment of food addiction. We will conclude with a discussion of limitations of existing approaches, and we will highlight future directions in the assessment of food addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Eating Behavior](#)  
[\\*Eating Disorders](#)  
[\\*Food Intake](#)  
[\\*Psychological Assessment](#)

**Source:** PsycINFO

#### 110. Public attitudes about addiction as a cause of obesity.

**Citation:** Food and addiction: A comprehensive handbook., 2012(173-177) (2012)

**Author(s):** Barry, Colleen L

**Institution:** Department of Health Policy and Management, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD, US

**Language:** English

**Abstract:** (from the chapter) This chapter examines public attitudes about food addiction as a cause of obesity. It is vital to understand beliefs about this issue since public opinion can greatly affect policymaker views about the appropriateness and feasibility of enacting public policies aimed at solving the problem of obesity. Oliver and Lee found that individuals who attributed obesity primarily to bad personal choices were significantly less likely to support government obesity prevention policies than those who recognized factors external to the individual (e.g., societal, economic) as important contributors. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Eating Behavior](#)  
[\\*Etiology](#)  
[\\*Obesity](#)  
[\\*Public Opinion](#)  
[Eating Disorders](#)  
[Food](#)  
[Government Policy Making](#)  
[Prevention](#)

**Source:** PsycINFO

### 111. Relationships between drugs of abuse and eating.

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**Citation:** Food and addiction: A comprehensive handbook., 2012(254-265) (2012)

**Author(s):** Blumenthal, Daniel M; Gold, Mark S

**Institution:** Harvard Medical School, Massachusetts General Hospital, Boston, MA, US; McKnight Brain Institute, College of Medicine, University of Florida, Gainesville, FL, US

**Language:** English

**Abstract:** (from the chapter) While numerous biological theories and cognitive explanations have been put forward to explain rising rates of overweight and obesity, recent research strongly implicates both psychological and biological processes in the development of these conditions. Moreover, these studies have demonstrated a number of striking, and disturbing, similarities between how humans and animals respond to certain foods and to substances of abuse-including cocaine, heroin, nicotine, and alcohol. This chapter, which is divided into three sections, explores this relationship between food and drugs of abuse. Section one presents the DSM-IV definition of substance dependence and the clinical stages of addiction. Section two highlights important clinical, neurobiological, and social evidence that food addiction occurs and should be recognized as a disease. The third and final section of this chapter presents an argument for using alcohol dependence as a model for furthering our understanding of food dependence. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Drug Abuse](#)  
[\\*Drug Dependency](#)  
[\\*Eating Behavior](#)  
[\\*Food Intake](#)  
[Alcoholism](#)  
[Eating Disorders](#)  
[Food](#)  
[Models](#)

**Source:** PsycINFO

### 112. Caffeine, addiction, and food consumption.

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**Citation:** Food and addiction: A comprehensive handbook., 2012(238-243) (2012)

**Author(s):** Evatt, Daniel P; Griffiths, Roland R

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

**Language:** English

**Abstract:** (from the chapter) Caffeine, the most widely used psychoactive drug in the world, is usually consumed in beverages and foods. It is a natural constituent of at least 60 species of plants, including coffee, tea, cocoa, cola nut, and yerba mate. Tea consumption dates back at least two millennia in China. Coffee, tea, and cocoa consumption became

widespread in Europe and elsewhere in the seventeenth and eighteenth centuries with the development of worldwide trading routes. In the United States, 87% of the population regularly consume caffeinated foods and beverages. Mean daily dietary caffeine intake among all caffeine users is 193 mg/day; caffeine consumption is greatest among men aged 35-54 years, who consume, on average, 336 mg/day. Although caffeine is most usually prepared and consumed directly from its natural plant forms (e.g., coffee and tea), caffeine has a long history of being used in combination with food products. Legend holds that the ancient Galla tribe of Ethiopia combined coffee cherries with animal fat to create small edible balls to provide sustenance during wartime raids. The practice of adding sugar to coffee and tea dates back at least several hundred years. This review will first discuss several clinical effects of caffeine that are important to understanding the role of caffeine in food consumption; subjective effects, reinforcing effects, conditioned flavor preferences, tolerance, withdrawal, and clinical dependence (i.e., addiction). The final sections will discuss caffeine as a promoter of weight loss, caffeine as an added as well as a naturally occurring ingredient in beverages and foods, and children and adolescents as a vulnerable population. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Caffeine](#)  
[\\*Food Intake](#)  
[Weight Loss](#)

**Source:** PsycINFO

### 113. Is sugar as addictive as cocaine?

**Citation:** Food and addiction: A comprehensive handbook., 2012(232-237) (2012)

**Author(s):** Ahmed, Serge H

**Institution:** Institute of Neurogenerative Diseases, University of Bordeaux, Bordeaux, France

**Language:** English

**Abstract:** (from the chapter) In contemporary affluent societies, people report consuming sugar-sweetened foods and beverages not only to get calories but also to experience pleasant sensations, to cope with stress or fatigue, to enhance cognition, and/or to ameliorate mood (e.g., relief of negative affect). As a result, sweetened foods and drinks have often been metaphorically likened to certain drugs of abuse, including psychostimulants and opiates. However, it is not until recently after having taken full measure of the rapid "sweetening of the world's diet" and the associated obesity epidemic that serious concerns have begun to emerge about the real addictive potential of sugar-sweetened goods. There is also a rapidly rising issue about the potential long-term impact of overconsumption of sugar-sweetened diets during infant and adolescent development on subsequent adult psychosocial functioning (e.g., impulse control, motivation). (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Eating Behavior](#)  
[\\*Food](#)  
[\\*Food Intake](#)  
[\\*Sugars](#)  
[Cocaine](#)  
[Diets](#)  
[Obesity](#)

**Source:** PsycINFO

### 114. Liking versus wanting food in human appetite: Relation to craving, overconsumption, and "food addiction"

**Citation:** Food and addiction: A comprehensive handbook., 2012(220-225) (2012)

**Author(s):** Finlayson, Graham; Dalton, Michelle; Blundell, John E



**Institution:** Institute of Psychological Sciences, Faculty of Medicine and Health, University of Leeds, Leeds, United Kingdom; Institute of Psychological Sciences, Faculty of Medicine and Health, University of Leeds, Leeds, United Kingdom; Institute of Psychological Sciences, Faculty of Medicine and Health, University of Leeds, Leeds, United Kingdom

**Language:** English

**Abstract:** (from the chapter) In recent years there has been a strong tendency for hedonic processes of appetite control to be regarded as exerting a more powerful influence over real-world food consumption than homeostatic mechanisms. This has been reflected in a number of articles comparing the two domains and describing their neural substrates. However, the most persuasive arguments arise from observations that the increasing palatability of food stimulates an orexigenic drive and that this potent oro-sensory stimulus-apparently independent from hunger or energy need-can lead to overconsumption. Eating is a reliable source of pleasure for most people, and reward plays an important role in the pattern of consumption from food selection to the initiation, maintenance, and cessation of each eating episode. The semantics of language describing eating-related pleasure imply that food hedonics are more than simply liking the taste of a food. We also talk about wanting, craving and desiring food. In addition to this, research in nonhuman studies has demonstrated neural-chemical dissociations between the mediation of affective responses to the hedonic impact of primary reinforcers (e.g., food), and those substrates responsible for attributing stimuli with motivational significance. This suggests that reward is not a unitary process but may consist of subcomponents. In broad terms, distinct psychological components can be identified according to "liking" (hedonic pleasure or affect) and "wanting" (hedonic motivation or desire), these dual processes provide a theoretical framework for studying drugs of abuse and other natural pleasures such as palatable food. Recently a view has emerged that eating behavior, driven by the attractiveness of high-fat, highly rewarding food, could lead to forms of disordered eating that resonate with the concept of "food addiction." This chapter will examine the notion of liking versus wanting as separable components of reward in human eating behavior; challenges and solutions in the definition and measurement of these processes; their relation to food craving and overconsumption; and their involvement in "food addiction." (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Appetite](#)  
[\\*Craving](#)  
[\\*Eating Behavior](#)  
[\\*Food Intake](#)  
[Eating Disorders](#)  
[Food Preferences](#)

**Source:** PsycINFO

### 115. Bingeing, withdrawal, and craving: An animal model of sugar addiction.

**Citation:** Food and addiction: A comprehensive handbook., 2012(206-213) (2012)

**Author(s):** Avena, Nicole M; Hoebel, Bartley G

**Institution:** College of Medicine, University of Florida, Gainesville, FL, US; Princeton Neuroscience Institute, Princeton University, Princeton, NJ, US

**Language:** English

**Abstract:** (from the chapter) In light of the recent publicity surrounding the obesity epidemic, the concept of "food addiction" has been popularized. In particular, clinical accounts of "sugar addiction" have been the topic of many books and popular diet programs. In these accounts, people describe symptoms of withdrawal when they deprive themselves of sugar-rich foods, and these feelings are combined with food craving, particularly for carbohydrates, chocolate, and sugar, which can trigger impulsive eating. This leads to a vicious cycle of self-medication with sweet foods that, for some people, may result in obesity or an eating disorder Although food addiction has been popular in the media and

proposed to be based on brain neurochemistry, this phenomenon has only recently been systematically studied in the laboratory. Based on these clinical accounts of "sugar addiction" in people, it is clear that sweet taste can be a powerful reinforcer. This is further validated by studies of laboratory animals. Rats born with a strong tendency to drink saccharin more rapidly learn to self-administer cocaine, and rats will even prefer sugar over cocaine in some situations. The concept of addiction in animals and the means by which it can be studied are rooted in the classical drug addiction literature. We have used models that were developed with rats for studying drug dependence and adapted them to test for signs of sugar dependence. In our animal model, rats are food deprived daily for 12 h, then are given food and a sugar solution (25% glucose or 10% sucrose) after a delay of 4 h into their normal circadian-driven active period to stimulate a large meal. As a result, rats drink the sugar solution copiously, especially when it first becomes available each day (i.e., they binge) and they ultimately enter a state that resembles drug dependence on several dimensions. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Animal Models](#)  
[\\*Binge Eating](#)  
[\\*Craving](#)  
[\\*Sugars](#)  
[Eating Disorders](#)  
[Food Intake](#)  
[Obesity](#)

**Source:** PsycINFO

#### 116. Hormones, hunger, and food addiction.

**Citation:** Food and addiction: A comprehensive handbook., 2012(200-205) (2012)

**Author(s):** Dagher, Alain

**Institution:** Montreal Neurological Institute, McGill University, Montreal, PQ, Canada

**Language:** English

**Abstract:** (from the chapter) The conceptual link between drug addiction and feeding rests on multiple lines of evidence. Here we review one of these: gut and adipose tissue hormones that provide short- and long-term energy balance signals, which regulate food intake, act on brain systems also involved in drug addiction, most notably dopamine neurons and their projection sites. The major anorexigenic hormones, leptin, insulin, and PYY, and the single known orexigenic hormone, ghrelin, all appear to exert their effects predominantly through the modulation of brain circuitry involved in incentive motivation. In addition, the secretion by the periphery of these hormones is itself partly controlled by the brain, forming a gut-brain feed-forward loop that controls appetite. This chapter will outline the animal and human neuroimaging data that support these statements. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Food Intake](#)  
[\\*Hormones](#)  
[\\*Hunger](#)  
[\\*Neuroimaging](#)  
[Eating Behavior](#)  
[Equilibrium](#)  
[Neural Networks](#)  
[Stomach](#)  
[Body Fat](#)

**Source:** PsycINFO

**117. Food addiction and diagnostic criteria for dependence.**

- Citation:** Food and addiction: A comprehensive handbook., 2012(167-171) (2012)
- Author(s):** Gearhardt, Ashley N; Corbin, William R
- Institution:** University of Michigan, Ann Arbor, MI, US; Arizona State University, Tempe, AZ, US
- Language:** English
- Abstract:** (from the chapter) Rates of obesity in the United States and . internationally have reached epidemic proportions and there are no signs of slowing. Approximately 66% of American adults are now overweight or obese, and rates of childhood obesity continue to grow at an alarming rate. Increases in obesity in the United States and other developed nations have been paralleled by major changes in the food environment Specifically, there has been an influx of highly processed foods that are rich in fat and sugar These foods are typically cheap, easily accessible, and highly advertised. The correspondence between changes in the food environment and increased rates of obesity have led some to argue that these highly processed, high-fat and high-sugar foods are addictive. Such a model might help explain why so many people struggle to control their weight despite repeated attempts, much like smokers trying to quit. Consistent with this hypothesis, animal models and neuroimaging studies in humans have identified striking similarities between excess food consumption and addictive behaviors. Specifically, the opioid and dopaminergic systems are implicated in both obesity and substance dependence. Although data on shared biological mechanisms for food and substances of abuse suggest a possible addictive process, based on the diagnostic criteria outlined in The Diagnostic and Statistical Manual for Mental Disorders, fourth edition, text revision (DSM-IV-TR), substance dependence is a behavioral disorder defined by the experience of the individual rather than his or her physiology. Thus, it is critical to examine behavioral indicators of food dependence that correspond to the criteria for substance dependence. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
- Publication Type:** Book; Edited Book
- Subject Headings:** [\\*Addiction](#)  
[\\*Diagnosis](#)  
[\\*Eating Behavior](#)  
[\\*Eating Disorders](#)  
[\\*Food Intake](#)  
[Obesity](#)
- Source:** PsycINFO

**118. Environmental toxins as triggers for obesity.**

- Citation:** Food and addiction: A comprehensive handbook., 2012(143-146) (2012)
- Author(s):** Tremblay, Angelo; Sanchez, Marina
- Institution:** Department of Kinesiology, Faculty of Medicine, Laval University, Quebec City, PQ, Canada; Department of Kinesiology, Faculty of Medicine, Laval University, Quebec City, PQ, Canada
- Language:** English
- Abstract:** (from the chapter) It is not necessarily obvious for a physiologist interested in toxicology to present a message that is of entire relevance regarding the study of addiction in obesity. However, if one considers the addiction of humankind for everything that could be a source of pleasure and easiness, even chemical toxins become a relevant issue. The increased prevalence of obesity has forced a thorough examination of what may explain the apparent proneness of people to store spontaneously more fat under free-living conditions. In this regard, there is a consensus among health professionals and scientists about the idea that environmental changes have promoted what has been ultimately described as an epidemic. These changes have also been proposed to represent a toxic environment by making reference to the suboptimal compatibility between what is offered by the socio-psycho-economic context of living and what is needed by the human body to

reach an optimal functionality. This notion also reminds us that the environment favors the exposure to nonnatural compounds that exert a genuine toxic effect. In this chapter, this question is addressed by mainly referring to the case of lipid soluble contaminants and their potential negative effect on energy balance. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Environmental Effects](#)  
[\\*Obesity](#)  
[\\*Toxins](#)  
[Equilibrium](#)  
[Lipids](#)

**Source:** PsycINFO

### 119. Lessons from Prader-Willi syndrome and pathological brain reinforcement.

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**Citation:** Food and addiction: A comprehensive handbook., 2012(138-142) (2012)

**Author(s):** Liu, Yijun; Zhang, Yi

**Institution:** Department of Psychiatry, College of Medicine and McKnight Brain Institute, University of Florida, Gainesville, FL, US; Life Sciences Research Center, School of Life Sciences and Technology, Xiadian University, Xi'an, China

**Language:** English

**Abstract:** (from the chapter) A broader understanding of the genetic causes of hyperphagia and appetite control may aid in distinguishing the differences between normal eating and aberrant eating disorders. A limited number of studies have been conducted on Prader-Willi syndrome in order to shed more light on how external and internal food cues regulate appetite in these individuals as compared to normal obese patients. PWS is an ideal mechanistic model since these individuals have a higher drive for food consumption despite physiological and emotional satiety. Neuroimaging studies using functional magnetic resonance imaging (fMRI) are crucial in determining whether this type of behavior is a possible model for food addiction. In this review, we will address how environmental cues affect PWS and normal obese patients. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Appetite](#)  
[\\*Eating Behavior](#)  
[\\*Hyperphagia](#)  
[\\*Prader Willi Syndrome](#)  
[\\*Reinforcement](#)  
[Cues](#)  
[Eating Disorders](#)  
[Environmental Effects](#)  
[Food Intake](#)  
[Obesity](#)

**Source:** PsycINFO

### 120. Leptin gene therapy for hyperphagia, obesity, metabolic diseases, and addiction: A new opportunity.

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**Citation:** Food and addiction: A comprehensive handbook., 2012(131-137) (2012)

**Author(s):** Kalra, Satya P

**Institution:** McKnight Brain Institute, College of Medicine, University of Florida, Gainesville, FL, US

**Language:** English

**Abstract:** (from the chapter) Close associations between hyperphagia and metabolic diseases, such as obesity and the attendant disease cluster of metabolic syndrome, with substance abuse

have been described in ancient scriptures and writings. Recently it has become evident that the innate human desire to improve the quality of daily life and advances in science and technology have jointly, but quite unintentionally and imperceptibly, conspired to boost the adverse health consequences of energy imbalance to epidemic proportions worldwide. Since the times of formative environment of ancestral hunter-gatherers, a complex interplay of those changes in daily lifestyle and habits that have progressively orchestrated these disorders are as follows: (1) hyperphagia, that is, compulsive consumption of easily accessible, energy-dense meals enriched with palatable addictive nutrients; (2) urban lifestyle, rise in income supporting increased comfort punctuated by less physically demanding work, adoption of automated technology for transport and living comforts; (3) increased passive pursuits benefited by marked improvement in health delivery; and (4) pharmacologic therapies for psychiatric disorders and drug abuse. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Hyperphagia](#)  
[\\*Metabolic Syndrome](#)  
[\\*Obesity](#)  
[\\*Gene Therapy](#)  
[Leptin](#)

**Source:** PsycINFO

#### 121. Stress and addiction: A brief overview.

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**Citation:** Food and addiction: A comprehensive handbook., 2012(59-66) (2012)

**Author(s):** Sinha, Rajita

**Institution:** Psychology Section in Psychiatry, Yale Stress Center, School of Medicine, Yale University, New Haven, CT, US

**Language:** English

**Abstract:** (from the chapter) Engaging in rewarding and pleasurable behaviors is a natural part of human existence. Consuming highly palatable foods, engaging in sex, smoking cigarettes, drinking alcohol, and taking illicit and/or prescription drugs are among the behaviors that are vulnerable to excess, overconsumption, and addiction. But not all individuals develop addictive behaviors, and hence there are at least two sets of questions critical to the problem of addiction. First, who and under what conditions and contexts are humans most susceptible to develop addictive behaviors, and second, once addicted, which individuals and what conditions and contexts contribute to the high rates of relapse commonly seen in addiction. To address these two questions, this chapter focuses on stress and the integral role that stress mechanisms play in the development of addiction and in addiction relapse risk. The concept of stress and allostasis as it pertains to addiction vulnerability is discussed, followed by an overview of the literature linking types of stress to addiction. The neurobiological mechanisms that could drive this association is presented and this is followed by an overview of the effects of regular and chronic engagement in addictive behaviors and their concomitant allostatic changes on stress coping and addiction relapse. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Stress](#)  
[Coping Behavior](#)  
[Relapse \(Disorders\)](#)  
[Risk Factors](#)  
[Susceptibility \(Disorders\)](#)

**Source:** PsycINFO

#### 122. The study of craving and its role in addiction.

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**Citation:** Food and addiction: A comprehensive handbook., 2012(53-58) (2012)

**Author(s):** Monti, Peter M; Ray, Lara A

**Institution:** Center for Alcohol and Addiction Studies, Brown University, Providence, RI, US; University of California Los Angeles, Los Angeles, CA, US

**Language:** English

**Abstract:** (from the chapter) Although the notion of craving and its association with addiction has been around since antiquity, it has only been the purview of scientific study for the past 60 years or so. Craving for a substance is defined as a strong desire to consume that substance, which in turn has been associated with The Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) criterion of loss of control over substance use, one of the seven criteria for substance dependence. Craving itself represents a criterion for substance dependence in the current version of the International Classification of Diseases (ICD-10). A longitudinal study of alcoholism course and chronicity found that craving was associated with the highest relative risk of all ICD-10 criteria for alcohol dependence. Furthermore, recent studies have advanced our understanding of the genetic bases of craving. Many of these studies use one or a combination of the following: self-report data in family-based designs, experimental laboratory paradigms, and more recently, neuroimaging techniques. Pharmacological studies have also leveraged craving paradigms to screen and to test promising medications for alcoholism. In short, the construct of craving has been successfully applied to the study of addiction etiology and treatment. This review of the scientific study of craving and substance use will begin with a discussion of the phenomenology and assessment of craving, followed by a review of selective studies on craving neurobiology and genetics. We will then briefly discuss clinical applications and will conclude by highlighting limitations of the extant research and by providing directions for future inquiry in the field. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Craving](#)  
[Genetics](#)  
[Measurement](#)  
[Neurobiology](#)  
[Phenomenology](#)

**Source:** PsycINFO

### 123. Co-occurring addiction and psychiatric disorders.

**Citation:** Food and addiction: A comprehensive handbook., 2012(47-52) (2012)

**Author(s):** Greenfield, Shelly F; Crisafulli, Michele A

**Institution:** Harvard Medical School, Boston, MA, US; University of Maryland, Baltimore County, Baltimore, MD, US

**Language:** English

**Abstract:** (from the chapter) There is converging evidence that the co-occurrence of an untreated psychiatric disorder with an SUD worsens the prognosis for the SUD, and conversely, co-occurring untreated SUDs worsen the outcome of psychiatric disorders. In general, there are three models of care for co-occurring disorders: sequential, parallel, and integrated. Where empirical studies exist, they tend to support integrated models of care. Insofar as data are available regarding treatment indications for each co-occurring disorder, this evidence will also be briefly reviewed. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

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



[\\*Mental Disorders](#)  
[Evidence Based Practice](#)  
[Integrated Services](#)  
[Treatment](#)

**Source:** PsycINFO

#### 124. Feeding systems and drugs of abuse.

**Citation:** Food and addiction: A comprehensive handbook., 2012(40-46) (2012)

**Author(s):** Mason, Brittany L; Nestler, Eric J; Lutter, Michael

**Institution:** University of Texas at Southwestern Medical Center, Dallas, TX, US; Friedman Brain Institute, Mount Sinai School of Medicine, New York, NY, US; University of Texas at Southwestern Medical Center, Dallas, TX, US

**Language:** English

**Abstract:** (from the chapter) This advice first provided by Alcoholics Anonymous 70 years ago recognized the importance of food intake in preventing the relapse to alcoholism. This clinical observation is now supported by scientific evidence demonstrating that disruption of feeding can lead to a drive in addictive, drug-seeking behaviors. For example, food deprivation increases the self-administration of drugs of abuse, lowers the threshold dose for the reinforcing properties of drugs, increases behavioral motivation to obtain drugs, and increases the amount of drug finally consumed. Modern neurobiological techniques now make it possible to study the interaction between feeding systems and addictive processes. Many neuropeptides that regulate food intake and body weight, including the proappetite peptides orexin (hypocretin), ghrelin, and neuropeptide Y (NPY) as well as the appetite-suppressing hormones leptin and melanocortin, have also been shown to regulate addiction behaviors. This is reflected in the prominent circuit-level connections between these well-established feeding pathways and the brain's reward regions that mediate the addicting actions of drugs of abuse. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Eating Behavior](#)  
[\\*Food](#)  
[\\*Food Intake](#)  
[Drug Addiction](#)

**Source:** PsycINFO

#### 125. Epigenetic changes in addiction and eating disorders.

**Citation:** Food and addiction: A comprehensive handbook., 2012(34-39) (2012)

**Author(s):** Kobeissy, Firas H; Razafsha, Mahdi; Zhang, Zhiqun; Gold, Mark S

**Institution:** Center for Neuroproteomics and Biomarkers Research at the Evelyn F. and William L. McKnight Brain Institute, College of Medicine, University of Florida, Gainesville, FL, US; Center for Neuroproteomics and Biomarkers Research at the Evelyn F. and William L. McKnight Brain Institute, College of Medicine, University of Florida, Gainesville, FL, US; Department of Psychiatry, University of Florida, Gainesville, FL, US; McKnight Brain Institute, College of Medicine, University of Florida, Gainesville, FL, US

**Language:** English

**Abstract:** (from the chapter) Genes have been well recognized to form and shape human phenotype and are considered to define innate characteristics. However, another major factor in determining self phenotype involves environmental factors that can modulate gene expression. Different studies have focused on the (gene-environment) interaction to elucidate the dynamic effects of how environmental cues can modulate genetic expression, which was later introduced as the field of epigenetics. In principle, epigenetics refers to the regulation of genomic functions such as gene expression

independent of DNA sequence but rather controlled by potentially reversible chemical modifications occurring on the DNA and/or histones leading to chromatin remodeling and histone modification, inducing alteration in gene expression. In the area of psychiatry, epigenetics studies evaluate how gene-environment interaction contributes to the state of psychiatric disorders. It has been shown that exposure to certain drugs of abuse (amphetamine, cocaine, nicotine, and morphine) can induce neuronal structural changes that will remain persistent long after exposure to these drugs, as will be discussed later. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Eating Disorders](#)  
[\\*Epigenetics](#)  
[Environmental Effects](#)  
[Gene Expression](#)  
[Genes](#)  
[Genetics](#)

**Source:** PsycINFO

#### 126. Genetics of addiction.

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**Citation:** Food and addiction: A comprehensive handbook., 2012(30-33) (2012)

**Author(s):** Noble, Ernest P

**Institution:** David Geffen School of Medicine, University of California, Los Angeles, Los Angeles, CA, US

**Language:** English

**Abstract:** (from the chapter) Is the association of DRD2 unique to alcoholism, or is this association found also in other substance dependencies? To answer this question, an assessment was made of the relationship of variants of DRD2 with other substance dependencies. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Drug Addiction](#)  
[\\*Drug Dependency](#)  
[\\*Genes](#)  
[\\*Genetics](#)

**Source:** PsycINFO

#### 127. Neuroanatomy of addiction.

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**Citation:** Food and addiction: A comprehensive handbook., 2012(20-29) (2012)

**Author(s):** Koob, George F

**Institution:** Committee on the Neurobiology of Addictive Disorders, Scripps Research Institute, La Jolla, CA, US

**Language:** English

**Abstract:** (from the chapter) The symptoms and syndrome of addiction define different stages described as an addiction cycle: binge/intoxication, withdrawal/negative affect, and preoccupation/anticipation. These three stages are conceptualized as interacting with each other, becoming more intense, and ultimately leading to the pathological state known as addiction. Much of the recent progress in understanding the neurobiology of addiction has derived from the study of animal models of addiction to specific drugs such as stimulants, opioids, alcohol, nicotine, and 9-tetrahydrocannabinol. Although no animal model of addiction fully emulates the human condition, animal models do permit the investigation of specific elements of the process of drug addiction. The present review focuses on the brain neurocircuitry that is engaged at each stage of the addiction cycle, how the

neurocircuitry changes with increasing engagement with drugs of abuse, and how different neurocircuits interact to produce the pathological state known as addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book  
**Subject Headings:** [\\*Addiction](#)  
[\\*Neuroanatomy](#)  
[Animal Models](#)  
[Brain](#)  
[Drug Abuse](#)  
[Neurotransmission](#)  
**Source:** PsycINFO

#### 128. Human laboratory models of addiction.

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**Citation:** Food and addiction: A comprehensive handbook., 2012(14-19) (2012)  
**Author(s):** Mason, Barbara J; Higley, Amanda E  
**Institution:** Laboratory of Clinical Psychopharmacology, Pearson Center for Alcoholism and Addiction Research, Scripps Research Institute, La Jolla, CA, US; Scripps Research Institute, La Jolla, CA, US  
**Language:** English  
**Abstract:** (from the chapter) Palatable food and drugs compete for similar neurotransmitter receptors. This has led to the theory that excessive food consumption may be conceptualized as an addictive behavior. Neuroimaging and animal models have demonstrated that excessive food consumption is associated with neurobiological changes in the opiate and dopaminergic systems that parallel changes caused by drugs of abuse. Many of the closest connections between food and addictive substances have been drawn between alcohol and high-fat, high-sugar foods. In addition to producing behavioral reinforcement through the same neurobiological pathway, both high-fat sweets and alcohol are frequently used to regulate emotions. Research on human eating habits has also found behavioral evidence that maps onto substance dependence criteria such as loss of control, continued use despite negative consequences, and an inability to reduce consumption of calorie-dense foods. (PsycINFO Database Record (c) 2014 APA, all rights reserved)  
**Publication Type:** Book; Edited Book  
**Subject Headings:** [\\*Addiction](#)  
[\\*Food](#)  
[\\*Food Intake](#)  
[\\*Models](#)  
[Drug Addiction](#)  
**Source:** PsycINFO

#### 129. Animal models of drug addiction.

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**Citation:** Food and addiction: A comprehensive handbook., 2012(3-13) (2012)  
**Author(s):** Koob, George E  
**Institution:** Committee on the Neurobiology of Addictive Disorders, Scripps Research Institute, La Jolla, CA, US  
**Language:** English  
**Abstract:** (from the chapter) For the present chapter, the animal models are organized by the stage of the addiction cycle that they most likely represent. However, it is critical to note that the particular behavior being used for an animal model may or may not be symptomatic of the disorder, but it must be defined objectively and observed reliably. Indeed, the behavior being used may be found both in pathological and nonpathological states but still have predictive validity. A good example of such a situation is the widespread use of

drug reinforcement or reward as an animal model of addiction. Drug reinforcement does not necessarily lead to addiction (e.g., social drinking of alcohol). Self-administration of alcohol has major predictive validity for the binge/intoxication stage of addiction, and it is difficult to imagine addiction without alcohol reinforcement. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Animal Models](#)  
[\\*Drug Addiction](#)  
[Drug Self Administration](#)  
[Reinforcement](#)

**Source:** PsycINFO

### 130. Food and addiction: A comprehensive handbook.

**Citation:** Food and addiction: A comprehensive handbook., 2012 (2012)

**Author(s):** Brownell, Kelly D; Gold, Mark S

**Institution:** Rudd Center for Food Policy and Obesity, Yale University, New Haven, CT, US;  
McKnight Brain Institute, College of Medicine, University of Florida, Gainesville, FL, US

**Language:** English

**Abstract:** (from the jacket) Can certain foods hijack the brain in ways similar to drugs and alcohol, and is this effect sufficiently strong to contribute to major diseases such as obesity, diabetes, and heart disease? If so, does this constitute a public health crisis? Terms like "chocoholic" and "food addict" abound in popular culture, diet books make bold claims about food addiction, and those wishing to lose weight can join groups such as Food Addicts in Recovery Anonymous. Clinicians often hear the language of addiction when individuals speak of irresistible cravings, withdrawal symptoms when starting a diet, and increasing intake of palatable foods over time. But what does science show, and how strong is the evidence that addiction to food is a real and important phenomenon? Food and Addiction: A Comprehensive Handbook brings scientific order to the issue of food and addiction, spanning multiple disciplines to create the foundation for what is a rapidly advancing field and to highlight needed advances in science and public policy. The book assembles leading scientists and policy makers from fields such as nutrition, addiction, psychology, epidemiology, and public health to explore and analyze the scientific evidence for the addictive properties of food. It provides complete and comprehensive coverage of all subjects pertinent to food and addiction, from basic background information on topics such as food intake, metabolism, and environmental risk factors for obesity, to diagnostic criteria for food addiction, the evolutionary and developmental bases of eating addictions, and behavioral and pharmacologic interventions, to the clinical, public health, and legal and policy implications of recognizing the validity of food addiction. Each chapter reviews the available science and notes needed scientific advances in the field. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Food](#)  
[Diagnosis](#)  
[Environmental Effects](#)  
[Food Intake](#)  
[Intervention](#)  
[Metabolism](#)  
[Obesity](#)  
[Public Health](#)  
[Risk Factors](#)

**Source:** PsycINFO