

# 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. Chronic baclofen abuse and withdrawal delirium.**

- Citation:** Australian and New Zealand Journal of Psychiatry, January 2011, vol./is. 45/1(86-87), 0004-8674;1440-1614 (Jan 2011)
- Author(s):** Nasti, Julian J; Brakoulias, Vlasios
- Institution:** Nasti, Julian J.: Nepean Hospital, Penrith, NSW, Australia
- Language:** English
- Abstract:** Presents a case report of a 61-year-old lady who presented with agitation. Her past psychiatric history included alcohol dependence precipitated by her marriage breakdown and several episodes of depression. She also had a history of abusing methylphenidate, dexamphetamine and opiate analgesic agents. On initial assessment a provisional diagnosis of mania was made and olanzapine 2.5 mg bis die (bd) and clonazepam 0.5 mg ter die sumendus (tds) were prescribed. The patient had been taking at least 75 mg of baclofen each day for at least six months and it was likely that the dose had escalated in the week prior to presentation. The patient apparently felt that baclofen made her think more clearly. In this patient, it is possible that baclofen played a role in preventing relapse to dependence on alcohol and other substances. We believe that our patient's delirium was precipitated by withdrawal from baclofen, and is the first reported case of baclofen withdrawal delirium in the setting of chronic baclofen abuse. (PsycINFO Database Record (c) 2010 APA, all rights reserved)
- Country of Publication:** HOLDER: The Royal Australian and New Zealand College of Psychiatrists; YEAR: 2011
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Baclofen](#)  
[\\*Delirium](#)  
[\\*Drug Abuse](#)  
[\\*Drug Therapy](#)  
[\\*Drug Withdrawal](#)  
[Alcoholism](#)
- Source:** PsycINFO

**2. Multidisciplinary theories of addiction.**

- Citation:** PsycCRITIQUES, 2011, vol./is. 56/2(No Pagination Specified), 1554-0138 (2011)
- Author(s):** Gold, Mark S; Werner, Tonia
- Language:** English
- Abstract:** Reviews the book, What is addiction? edited by Don Ross, Harold Kincaid, David Spurrett, and Peter Collins (see record 2009-23652-000). This book looks at how the latest addiction research may affect addiction diagnoses and treatment. The authors seek to include information on genetics, molecular biology, and behavioral economics among other factors. Each of the individual bases for addiction is explored in depth through various chapters in the book. Some of the descriptions of theories and their supporting research may be too in depth for the general clinician to fully comprehend, but they will be able to generate an appreciation for the background supporting the multifactorial basis of addiction. Clinicians without a background in neurobiology may find it difficult to read and comprehend the exact mechanisms that the authors are describing but will appreciate the influence that genes have on addictions. What Is Addiction? is a relevant text for clinicians in all fields. The theory expressed throughout the book is that the basis for addiction is multifactorial in nature. Overall, the book does a thorough job in presenting current research in this area, though there are instances in which the central message becomes muddled in descriptions of neurobiological processes. However, some exposure to aspects of neurobiology assists the reader in fully understanding some of the concepts presented. (PsycINFO Database Record (c) 2010 APA, all rights reserved)
- Publication Type:** Electronic Collection
- Subject Headings:** [\\*Addiction](#)

\*Diagnosis  
 \*Neurobiology  
 \*Treatment  
 Genetics  
 Behavioral Economics  
 Molecular Neuroscience

**Source:** PsycINFO

### 3. Effects of acute cocaine or dopamine receptor agonists on AMPA receptor distribution in the rat nucleus accumbens.

**Citation:** Synapse, January 2011, vol./is. 65/1(54-63), 0887-4476;1098-2396 (Jan 2011)

**Author(s):** Ferrario, Carrie R; Li, Xuan; Wolf, Marina E

**Correspondence Address:** Wolf, Marina E.: Department of Neuroscience, Chicago Medical School at Rosalind Franklin University of Medicine and Science, 3333 Green Bay Road, North Chicago, IL, US, 60064-3095, marina.wolf@rosalindfranklin.edu

**Institution:** Ferrario, Carrie R.: Department of Neuroscience, Rosalind Franklin University of Medicine and Science, North Chicago, IL, US

**Language:** English

**Abstract:** Changes in alpha -amino-3-hydroxy-5-methylisoxazole-4-propionate receptor (AMPA) surface expression in the rodent nucleus accumbens (NAc) are produced by cocaine exposure and implicated in addiction-related behaviors. The direction of change depends on the animal's prior drug history. However, little is known about the effect of a single exposure to cocaine on AMPAR distribution in the NAc of untreated rats. This is essential information for interpreting the literature on AMPAR trafficking after repeated cocaine exposure. In this study, we used a protein cross linking assay to determine the effect of a single cocaine injection on surface and intracellular AMPAR subunit levels in the rat NAc. We found increased AMPAR surface expression in the NAc 24 h, but not 30 min or 2 h, after cocaine injection. A major effect of cocaine is to increase extracellular dopamine (DA) levels, leading to DA receptor activation. Therefore, we also evaluated the effects of directly acting DA receptor agonists. In contrast to the effects of cocaine, AMPAR surface expression was significantly decreased 24 h after injection of the D2-class agonist quinpirole, whereas no significant effects were produced by the D1-class agonist SKF 81297 or the mixed DA agonist apomorphine. Our results show that the effects of a single cocaine exposure in drug- and injection-naive rats are distinct from those previously reported after repeated cocaine administration. They further suggest that cocaine exerts these effects by influencing neuronal circuits rather than simply stimulating NAc DA transmission. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Wiley-Liss, Inc.; YEAR: 2010

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

**Subject Headings:** \*Cocaine  
 \*Dopamine Agonists  
 \*Nucleus Accumbens  
 \*Rats  
 \*AMPA  
 Glutamic Acid  
 Neural Receptors

**Source:** PsycINFO

### 4. The handy psychology answer book: Your smart referenceReg..

**Citation:** The handy psychology answer book: Your smart referenceReg., 2011 (2011)

**Author(s):** Cohen, Lisa J

**Institution:** Cohen, Lisa J.: Beth Israel Medical Center/Albert Einstein College of Medicine, New York, NY, US

**Language:** English

**Abstract:** (from the cover) Today psychology has become either "pop psychology" that seeks to entertain and inspire, or academic science read by few outside the mental health community. The Handy Psychology Answer Book bridges the gap by taking you on a journey through the history and science of psychology and showing how psychology affects us all. Featuring more than 1,000 answers to questions concerning how the human mind and the science of psychology really work, this fascinating guide delivers the real facts of modern psychology and its history along with offbeat factoids and thought-provoking insights into what motivates human behavior. The Handy Psychology Book covers the fundamentals and history of psychology plus the practical psychology behind how people deal with money, sex, morality, family, children, aging, addiction, work, and other everyday issues. This intriguing exploration provides insights into the current science of the mind by answering questions such as: What makes a marriage last? How does the brain change as we age? How have views on morality changed across history? What do we know about celebrity worship? Why do people vote? and How would we diagnose the behavior of Vincent Van Gogh? (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Book; Authored Book

**Subject Headings:** [\\*Psychology](#)  
[History of Psychology](#)  
[Mental Health](#)  
[Mind](#)  
[Sciences](#)  
[Social Psychology](#)

**Source:** PsycINFO

##### **5. Beyond the fascination of online-games: Probing addictive behavior and depression in the world of online-gaming.**

**Citation:** Computers in Human Behavior, January 2011, vol./is. 27/1(473-479), 0747-5632 (Jan 2011)

**Author(s):** Stetina, Birgit U; Kothgassner, Oswald D; Lehenbauer, Mario; Kryspin-Exner, Ilse

**Correspondence Address:** Stetina, Birgit U.: Faculty of Psychology, University of Vienna, Liebiggasse 5, 3. Stock, rechte Stiege, Vienna, Austria, 1010, birgit.stetina@univie.ac.at

**Institution:** Stetina, Birgit U.: Department of Clinical, Biological and Differential Psychology, Division of Clinical Psychology and Health Psychology, University of Vienna, Vienna, Austria

**Language:** English

**Abstract:** This study examined problematic gaming behavior and depressive tendencies among people who play different types of online-games. Other game-related variables were investigated to determine if other differences between three game types could be established. Participants in the current research (n = 468) can be classified into three independent groups. Subjected users either solely played massive multiplayer online role-playing games (MMORPGs) or they preferred online-ego-shooters (OES) or real-time-strategy games (RTS). Results indicate that MMORPG users show more often problematic gaming behavior, depressive tendencies and lower self-esteem compared to users playing other online-games. MMORPG users reported to playing significantly more often in order to escape from real-life problems, which might be a valuable coping strategy but might also lead to problematic gaming behavior. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Elsevier Ltd.; YEAR: 2010

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

**Subject Headings:** [\\*Computer Games](#)

\*Depression (Emotion)  
 \*Games  
 Addiction

**Source:** PsycINFO

#### 6. Sheltered in cyberspace? Computer use among the unsheltered 'street' homeless.

**Citation:** Computers in Human Behavior, January 2011, vol./is. 27/1(296-303), 0747-5632 (Jan 2011)

**Author(s):** Eyrich-Garg, Karin M

**Correspondence Address:** Eyrich-Garg, Karin M.: School of Social Work, Temple University, 1301 Cecil B. Moore Ave., Ritter Annex, 5th Floor, Philadelphia, PA, US, 19122, kgarg@temple.edu

**Institution:** Eyrich-Garg, Karin M.: School of Social Work, College of Health Professions and Social Work, Temple University, Philadelphia, PA, US

**Language:** English

**Abstract:** Although physical health, mental health, and substance use problems are disproportionately high among the homeless, those with greater access to their social support systems report better outcomes than others. Communication with loved ones can be challenging for this population because of lack of access to telephone landlines. Computer technology may be an alternative medium for this population to access their social support systems, which, in turn, could lead toward better health outcomes. This exploratory study examined the computer use of 100 unsheltered homeless men and women in Philadelphia, Pennsylvania. Participants were interviewed using the Homeless Supplement to the Diagnostic Interview Schedule, a technology use module created for this investigation, and the substance use and psychiatric sections of the Addiction Severity Index. Almost half (47%) of the sample reported computer use in the past 30 days (averaging 17.67h and 30 days). Participants used computers to maintain their sense of social connectedness, for business purposes (job and housing searches), and for leisure. Computer technology could be used to disseminate information, prevent, screen, and treat many conditions, and collect data with this difficult-to-reach population. This technology has the potential to increase access to much needed services at a relatively low cost. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Elsevier Ltd.; YEAR: 2010

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

**Subject Headings:** \*Computers  
 \*Homeless  
 \*Social Support  
 \*Technology  
 Mental Health  
 Physical Health

**Source:** PsycINFO

#### 7. Construct validation of the Use, Abuse and Dependence on the Internet inventory.

**Citation:** Computers in Human Behavior, January 2011, vol./is. 27/1(240-247), 0747-5632 (Jan 2011)

**Author(s):** Gnisci, Augusto; Perugini, Marco; Pedone, Roberto; Di Conza, Angiola

**Correspondence Address:** Gnisci, Augusto: Department of Psychology, Second University of Naples, Via Vivaldi, 43, Caserta, Italy, 81100, augusto.gnisci@unina2.it

**Institution:** Gnisci, Augusto: Department of Psychology, Second University of Naples, Caserta, Italy

**Language:** English

**Abstract:** This study aims to validate the structure of the Use, Abuse and Dependence on the Internet (UADI) inventory on a sample of 1056 high school (n = 820) and university (n = 236) students. In particular, we performed exploratory and confirmatory factor analyses

on sub-samples (cross-validation), tested the construct convergent validity, and tested correlations of UADI dimensions with HEXACO personality inventory (HEXACO-PI, where HEXACO stands for the six assessed dimensions: Honesty-Humility, Emotionality, eXtraversion, Agreeableness, Conscientiousness and Openness to experience) and external criteria (daytime internet use, etc.). Five dimensions (Compensatory Escape, Dissociation, Real Life Impact, Experience Making and Addiction) were best captured by a second-order factor structure with a factor reflecting Real Life Impact and Dependence saturated by the other four dimensions. This latter factor converged with other traditional measures of internet dependence. The results are discussed in light of the relationships with validity criteria. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Elsevier Ltd.; YEAR: 2010

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

**Subject Headings:** [\\*Factor Structure](#)  
[\\*Internet Addiction](#)  
[\\*Inventories](#)  
[\\*Test Validity](#)  
[\\*Internet Usage](#)  
[Psychometrics](#)  
[Test Reliability](#)

**Source:** PsycINFO

#### 8. Comments on case vignettes.

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**Citation:** Handbook of office-based buprenorphine treatment of opioid dependence., 2011(275-283) (2011)

**Author(s):** Renner, John A Jr.; Acampora, Gregory

**Institution:** Renner, John A.: Boston University School of Medicine, VA Boston Healthcare System, Boston, MA, US

**Language:** English

**Abstract:** (from the chapter) This chapter provides comments on case vignettes illustrating patient buprenorphine treatment for opiate addiction in primary healthcare settings. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Drug Therapy](#)  
[\\*Opiates](#)  
[\\*Primary Health Care](#)

**Source:** PsycINFO

#### 9. Management of acute and chronic pain.

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**Citation:** Handbook of office-based buprenorphine treatment of opioid dependence., 2011(213-225) (2011)

**Author(s):** Alford, Daniel P

**Institution:** Alford, Daniel P.: Clinical Addiction Research and Education (CARE) Unit, Section of General Internal Medicine, Department of Medicine, Boston Medical Center, Boston University School of Medicine, Boston, MA, US

**Language:** English

**Abstract:** (from the chapter) Adequate treatment of pain is recognized as an essential dimension of quality medical care. Managing pain is complex when patients also have a history of addiction. Treatment of pain can be particularly challenging in a patient with opioid dependence who is receiving opioid agonist therapy (OAT) (i.e., methadone or buprenorphine). Pain medicine specialists and addiction treatment providers commonly

operate in separate spheres without much communication or collaboration. The well-described interplay between addiction and pain calls into question this artificial separation. In this chapter, I cover the epidemiology and neurobiology of pain in patients with opioid dependence. I also discuss buprenorphine analgesic pharmacology and review acute and chronic pain management in patients on buprenorphine maintenance therapy. Cases are presented at the end of this chapter, including related questions for additional consideration. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Chronic Pain](#)  
[\\*Drug Dependency](#)  
[\\*Drug Therapy](#)  
[\\*Opiates](#)  
[\\*Pain Management](#)  
 Epidemiology  
 Neurobiology  
 Pain

**Source:** PsycINFO

#### 10. Clinical management I: Buprenorphine treatment in office-based settings.

**Citation:** Handbook of office-based buprenorphine treatment of opioid dependence., 2011(119-146) (2011)

**Author(s):** Baxter, Jeffrey D

**Institution:** Baxter, Jeffrey D.: Department of Family Medicine and Community Health, University of Massachusetts Medical School, Worcester, MA, US

**Language:** English

**Abstract:** (from the chapter) Adopting a new treatment modality can be challenging, especially in outpatient office settings where providers and staff may feel their resources are stretched to meet the needs of the patient population they already are serving. But the need to expand treatment services is urgent, and the potential to improve the lives of patients hurt by the disease of opioid addiction is great. Most providers have found that buprenorphine treatment integrates easily into their outpatient office practices, and that patients greatly appreciate the opportunity to receive treatment. The purpose of this chapter is to offer some suggestions for managing patients in office-based buprenorphine treatment. It is my hope that the procedures outlined below will provide a foundation for organizing treatment in a way that will be rewarding both for providers and for the patients seeking treatment. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Dependency](#)  
[\\*Drug Rehabilitation](#)  
[\\*Opiates](#)  
[\\*Primary Health Care](#)  
 Behavior Modification  
 Narcotic Agonists  
 Outpatients

**Source:** PsycINFO

#### 11. Patient assessment.

**Citation:** Handbook of office-based buprenorphine treatment of opioid dependence., 2011(79-93) (2011)

**Author(s):** Levounis, Petros

**Institution:** Levounis, Petros: Addiction Institute of New York, New York, NY, US

**Language:** English

**Abstract:** (from the chapter) The assessment of a patient for buprenorphine treatment is essentially the same as the assessment of any patient who has an addiction. In this chapter, I describe the complete evaluation of a patient and cover a broad range of issues that may impact addiction treatment. Everyday clinical practice often dictates a symptom-focused evaluation, and treating patients with buprenorphine is not an exception. For example, I include a brief discussion of physical examination as part of a complete patient assessment. However, the majority of psychiatrists do not routinely conduct physical examinations; typically they collaborate with internists and other primary care physicians who cover this aspect of the patient's medical care. Treating patients with buprenorphine should not change your way of evaluating your patients and managing your practice. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Clinical Practice](#)  
[\\*Drug Dependency](#)  
[\\*Drug Rehabilitation](#)  
[\\*Drug Therapy](#)  
[Measurement](#)  
[Narcotic Agonists](#)  
[Physical Examination](#)  
[Primary Health Care](#)

**Source:** PsycINFO

## 12. General opioid pharmacology.

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**Citation:** Handbook of office-based buprenorphine treatment of opioid dependence., 2011(45-58) (2011)

**Author(s):** Pichot, John T

**Institution:** Pichot, John T.: South Texas Veterans Healthcare System, San Antonio, TX, US

**Language:** English

**Abstract:** (from the chapter) In this chapter, I will review key features of the opioids and their interactions with opioid receptors. I will then focus on buprenorphine interactions with opioid receptors. Finally, I will turn our attention to pharmacological issues with clinical relevance for using buprenorphine in the treatment of opioid addiction, including the treatment of withdrawal and its use as a maintenance medication for opioid dependence disorder. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Dependency](#)  
[\\*Drug Withdrawal](#)  
[\\*Maintenance Therapy](#)  
[\\*Nociceptors](#)  
[\\*Pharmacology](#)  
[Drug Therapy](#)  
[Morphine](#)

**Source:** PsycINFO

## 13. Experience with buprenorphine in the United States, 2002-2008.

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**Citation:** Handbook of office-based buprenorphine treatment of opioid dependence., 2011(27-43) (2011)

**Author(s):** Fiellin, David A

**Institution:** Fiellin, David A.: Departments of Internal Medicine and Investigative Medicine, Yale University School of Medicine, New Haven, CT, US

**Language:** English

**Abstract:** (from the chapter) This chapter is adapted with permission from Fiellin DA: "The First Three Years of Buprenorphine in the United States: Experience to Date and Future Directions." *Journal of Addiction Medicine* 1:62-67, 2007. The implementation of buprenorphine treatment in the United States represented a new treatment paradigm and a collaborative effort between researchers, government, industry, medical societies, and physicians. In this chapter, I review the legislative and regulatory changes that permitted the use of buprenorphine for the treatment of opioid dependence, and present an overview of the experience in the United States since the initiation of this new treatment paradigm. Research in the 1970's through the 1990's funded by the National Institute on Drug Abuse (NIDA) led to the development of buprenorphine and the U.S. Food and Drug Administrations (FDA's) approval in 2002 as a treatment for opioid dependence. The approval of buprenorphine in the United States followed licensing, research, and its use as a treatment for opioid dependence in the 1990's, most notably in France and Australia. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Dependency](#)  
[\\*Drug Therapy](#)  
[\\*Legislative Processes](#)  
[\\*Opiates](#)  
[Drug Rehabilitation](#)  
[Government Policy Making](#)  
[Narcotic Agonists](#)

**Source:** PsycINFO

#### 14. Opioid dependence in America: History and overview.

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**Citation:** Handbook of office-based buprenorphine treatment of opioid dependence., 2011(1-26) (2011)

**Author(s):** Renner, John A Jr.

**Institution:** Renner, John A.: Boston University School of Medicine, VA Boston Healthcare System, Boston, MA, US

**Language:** English

**Abstract:** (from the chapter) Opioid addiction and dependence have been a serious problem in the United States since before the Civil War. This chapter traces the evolution of this problem from the era of opium-laced patent medicines, through the problems with injectable morphine after the Civil War, to the heroin epidemics of the twentieth century, and finally to the current epidemic of opioid pharmaceutical abuse that began in the 1990's. I emphasize the history of medical efforts to manage opioid dependence and recurrent conflicts with a public policy approach that has emphasized criminal justice solutions to the problem. The introduction of office-based buprenorphine treatment is best understood as an effort to restore a medical treatment model and a more coherent public health approach to what has become an intractable medical, legal, and social problem. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Dependency](#)  
[\\*History](#)  
[\\*Medical Model](#)  
[\\*Opiates](#)  
[\\*Primary Health Care](#)  
[Drug Rehabilitation](#)  
[Drug Therapy](#)  
[Public Health](#)

**Source:** PsycINFO

#### 15. Handbook of office-based buprenorphine treatment of opioid dependence.

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**Citation:** Handbook of office-based buprenorphine treatment of opioid dependence., 2011 (2011)

**Author(s):** Renner, John A Jr. [Ed]; Levounis, Petros [Ed]

**Institution:** Renner, John A.: Boston University School of Medicine, Boston, MA, US

**Language:** English

**Abstract:** (from the cover) The Handbook of Office-Based Buprenorphine Treatment of Opioid Dependence will serve as a reliable guide for the addition of buprenorphine treatment into existing psychiatric practices and other primary care settings. The potential to improve the lives of patients with the disease of opioid addiction is great, and this book offers concrete and practical advice for managing patients in an office-based setting. Distinguished practicing psychiatrists, internists, and other clinical experts and researchers contribute their expertise with buprenorphine to this volume. It covers the subject matter thoroughly--from the history of opioid abuse and assessment criteria for potential patients to clinical management and psychiatric comorbidity. This handbook provides the tools and guidelines necessary to help providers cultivate a therapeutic environment for treating opioid addiction that minimizes problem behaviors and optimizes treatment outcomes. The logistical requirements for setting up a successful office-based treatment program are provided in detail. Case vignettes, charts, and tables make the subject matter easily accessible for readers ranging from students to well-established practitioners. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Opiates](#)  
[\\*Primary Health Care](#)  
[\\*Treatment Guidelines](#)  
[Drug Abuse](#)  
[Drug Therapy](#)

**Source:** PsycINFO

#### 16. The history of Alcoholics Anonymous and the experiences of patients.

**Citation:** Psychotherapy for the treatment of substance abuse., 2011(351-373) (2011)

**Author(s):** Nace, Edgar P

**Institution:** Nace, Edgar P.: University of Texas Southwestern Medical School, Dallas, TX, US

**Language:** English

**Abstract:** (from the chapter) This chapter discusses Alcoholics Anonymous (AA), its history and patient reactions. The general public knows that Alcoholics Anonymous (AA) is where people go when they cannot handle alcohol and need to quit drinking. Almost everyone knows somebody who goes or has gone to AA. Relatively little stigma is attached to participating in AA programs today, although those approaching it for the first time may not agree. As familiar as AA is in North America and Europe, few people likely know about its origins and fewer still appreciate its impact on so many lives. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Alcoholics Anonymous](#)  
[\\*Alcoholism](#)  
[\\*History](#)  
[Client Attitudes](#)  
[Experiences \(Events\)](#)

**Source:** PsycINFO

#### 17. Family therapy.

**Citation:** Psychotherapy for the treatment of substance abuse., 2011(329-350) (2011)

**Author(s):** O'Farrell, Timothy J

**Institution:** O'Farrell, Timothy J.: Families and Addiction Program, VA Boston Healthcare System, Brockton, MA, US

**Language:** English

**Abstract:** (from the chapter) In this chapter, we describe different types of family therapy commonly used in the treatment of alcoholism and drug abuse. We also summarize the evidence base for each type of family therapy described. We focus on the use of family-involved treatments to assist the family, initiate change when the substance-abusing individual refuses to seek help, and aid recovery once the substance abuser has sought help. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[\\*Family Therapy](#)  
[Evidence Based Practice](#)

**Source:** PsycINFO

#### 18. Twelve-step facilitation for co-occurring addiction and mental health disorders.

**Citation:** Psychotherapy for the treatment of substance abuse., 2011(299-327) (2011)

**Author(s):** Ries, Richard K; Galanter, Marc; Tonigan, J. Scott; Ziegler, Penelope P

**Institution:** Galanter, Marc: Division of Alcoholism and Drug Abuse, New York University School of Medicine, New York, NY, US

**Language:** English

**Abstract:** (from the chapter) The goal of this chapter is to help clinicians better engage and support patients who have co-occurring or primary alcohol or drug problems through use of 12-step programs to enhance treatment outcomes and recovery. Twelve-step facilitation (TSF) is an evidence-based practice with a large research base, a therapy manual, and a World Wide Web-based training site. TSF is a valuable technique easily available to practicing psychiatrists and other mental health professionals. The research base of TSF has been reviewed by Moos and Timko. This chapter provides a condensed presentation of some of the key techniques and concepts of TSF, with special adaptations useful for psychiatric practice. An important concept to recognize at the outset is that TSF is a therapist's technique, to help patients engage in and maximize their response to 12-step meetings, such as Alcoholics Anonymous (AA). (TSF is not AA, and as far as we know, it is not officially endorsed by AA or other 12-step programs.) TSF can also be applied to treat individuals who are dependent on substances other than alcohol, such as opioids, sedatives, or stimulants. Such individuals can be encouraged to go to Narcotics Anonymous (NA) meetings or meetings of other mutual-help fellowships, where the 12 steps are applied as well. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Conference Information:** American Academy of Addiction Psychiatry annual meeting. Dec, 2006. St. Petersburg. FL, US. This chapter was developed in conjunction with the above meeting.

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Mental Disorders](#)  
[\\*Psychiatry](#)  
[\\*Psychotherapeutic Techniques](#)  
[\\*Twelve Step Programs](#)  
[Alcohols](#)  
[Clinicians](#)  
[Comorbidity](#)  
[Drug Rehabilitation](#)  
[Drug Therapy](#)  
[Evidence Based Practice](#)  
[Mental Health](#)

**Source:** PsycINFO

### 19. Network therapy.

**Citation:** Psychotherapy for the treatment of substance abuse., 2011(249-275) (2011)

**Author(s):** Galanter, Marc; Dermatis, Helen

**Institution:** Galanter, Marc: Division of Alcoholism and Drug Abuse, New York University School of Medicine, New York, NY, US

**Language:** English

**Abstract:** (from the chapter) In recent years, considerable progress has been made in developing psychosocial modalities and new approaches specific to the treatment of addiction. The clinician in office practice, however, often is uncertain as to how to integrate these approaches to meet the needs of a given patient. To address this issue, in this chapter we examine network therapy, a multimodal approach that has been disseminated to practitioners and has been standardized and studied in the clinical research setting. The integrated approach that we discuss is called network therapy because it draws on the support of a group of family and peers who are introduced into individual therapy sessions. This approach is allied to the work of Speck and Attneave, who used a large support group drawn from the patient's family and social network as a tool for psychiatric management. These networks were used for both psychological and practical aid in addressing acute psychiatric illness, so as to avert a hospitalization until the patient's acute symptoms remitted. Once mobilized, the network became available to aid in ambulatory rehabilitation as well. Network therapy, as discussed here, developed a decade later, integrating many approaches that were later formalized. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Multimodal Treatment Approach](#)  
[\\*Psychotherapeutic Techniques](#)  
[\\*Support Groups](#)  
[Disease Management](#)  
[Family Therapy](#)  
[Group Psychotherapy](#)  
[Psychosocial Factors](#)  
[Social Networks](#)

**Source:** PsycINFO

### 20. Psychodynamic psychotherapy.

**Citation:** Psychotherapy for the treatment of substance abuse., 2011(219-247) (2011)

**Author(s):** Lightdale, Hallie A; Mack, Avram H; Frances, Richard J

**Institution:** Lightdale, Hallie A.: Georgetown University School of Medicine, Washington, DC, US

**Language:** English

**Abstract:** (from the chapter) Psychoanalytic and psychodynamic theories are fundamental to modern psychiatric practice, including addiction treatment. Our approach is that psychodynamic principles are a set of skills, knowledge, and attitudes that maybe used in selected dimensions of the care of individuals who misuse substances, regardless of the actual psychotherapeutic modality. In this chapter, we review some basics of the psychodynamic approach in general and then specific to substance misuse. This is followed by a guide to the application of psychodynamic concepts in addiction treatment, including indications and contraindications, and a discussion of how psychoanalytic theory can be used to enhance standard treatment techniques and deepen understanding of addiction treatment. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Drug Rehabilitation](#)  
[\\*Psychoanalytic Theory](#)  
[\\*Psychodynamic Psychotherapy](#)  
[\\*Psychotherapeutic Techniques](#)  
 Psychiatry  
 Psychodynamics

**Source:** PsycINFO

## 21. Intervention with the addicted person.

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**Citation:** Psychotherapy for the treatment of substance abuse., 2011(153-173) (2011)

**Author(s):** Westreich, Laurence M; Leventhal, Eric

**Institution:** Westreich, Laurence M.: Division of Alcoholism and Drug Abuse, Department of Psychiatry, New York University School of Medicine, New York, NY, US

**Language:** English

**Abstract:** (from the chapter) Intervention is an attempt by those who care about an addicted person to change the addiction's course and promote treatment, by the use of convincing techniques, group support, emotional pressure, and sometimes all three. Although many think of intervention only as the formal group intervention developed by Vernon Johnson and popularized by television shows such as the A&E Television Network's weekly documentary 'Intervention', true intervention with an addicted person occupies a broad spectrum of convincing and increasingly coercive tactics, ranging from the quiet friendly word to the group intervention to court-mandated treatment. In this chapter, we discuss the goals of intervention with the addicted person, some general techniques in confronting and then intervening, and some specific intervention models such as Vernon Johnson's seminal intervention, the Community Reinforcement and Family Training (CRAFT) paradigm, and the Pressures to Change protocol. We address strategies involving dually diagnosed patients, medication, legal intervention, and professional interventionists, and therapeutic use of books and videos in the intervention process. The focus throughout is on practical suggestions for helping the addicted person engage in and benefit from addiction treatment. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Intervention](#)  
[\\*Psychotherapeutic Techniques](#)  
 Drug Therapy  
 Dual Diagnosis  
 Early Intervention  
 Goals  
 Legal Processes

**Source:** PsycINFO

## 22. Motivational enhancement.

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**Citation:** Psychotherapy for the treatment of substance abuse., 2011(125-152) (2011)

**Author(s):** DiClemente, Carlo C; Kofeldt, Miranda Garay; Gemmell, Leigh

**Institution:** DiClemente, Carlo C.: University of Maryland, Baltimore County, Baltimore, MD, US

**Language:** English

**Abstract:** (from the chapter) Patient motivation is a necessary ingredient in substance abuse treatment and recovery. Because of the reinforcing nature of addictive substances and the physiological and psychological reliance they engender, individuals with problematic and dependent patterns of substance use often refuse to acknowledge problems or seek treatment. Motivational considerations are now viewed as critical for engagement in treatment and modification of substance use (e.g., American Society of Addiction

Medicine Patient Placement Criteria) and motivational enhancement approaches are becoming an integral part of most outreach, detoxification, and treatment programs. This chapter offers an overview of motivational considerations, highlights how motivational enhancement approaches are being used, and briefly reviews research regarding the application and efficacy of these approaches in the management and treatment of alcohol and drug abuse problems. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Alcohol Abuse](#)  
[\\*Disease Management](#)  
[\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[\\*Motivation](#)  
[Readiness to Change](#)

**Source:** PsycINFO

### 23. Patient placement criteria.

**Citation:** Psychotherapy for the treatment of substance abuse., 2011(99-123) (2011)

**Author(s):** Gastfriend, David R; Mee-Lee, David

**Institution:** Gastfriend, David R.: Scientific Communications, Alkermes, Inc., Waltham, MA, US

**Language:** English

**Abstract:** (from the chapter) In the modern era of treating addictive diseases, science has provided a better foundation for treatment matching. A broad consensus of experts has reviewed this background and provided a model for choosing optimal treatments for each patient at each given moment in the course of his or her illness. This model is known as patient placement criteria. Patient placement criteria are decision rules that guide providers and care managers in assigning patients to the optimal clinical and cost-effective level of care. The patient placement criteria model is designed to match each patient to treatment by first requiring a multidimensional assessment to identify the patient's problems and priorities within the context of severity of illness and level of function. Next, the patient's specific needs are matched to the appropriate available treatment services and the right intensity of service (which requires a broad continuum of care). Finally, the patient's progress and treatment response are assessed on an ongoing basis. This system of continuous quality improvement employs a cycle of assessment, treatment matching, level-of-care placement, and progress evaluation. Through the careful use of limited resources, the clinician can help the patient stay in ongoing treatment, improving his or her outcome and preventing dropout and relapse. Extensive reviews of the treatment outcome literature demonstrate that treatment for addictive disorders is effective but that no single treatment model or level of care is appropriate for all individuals. However, most programs still deliver services with one predominant ideological model. In addition, most treatment and funding systems still provide for only a limited continuum of care. This treatment and funding deficiency continues despite the availability of detailed criteria for a broad array of service levels that has existed for over two decades. Effective use of resources is of great interest in the United States, where a growing number of payers, particularly managed care organizations, are asking or requiring treatment programs to adopt standardized clinical tools. This phenomenon is also occurring internationally, particularly in countries with national health care systems. It is in this larger context of commercial and government payers that patient placement criteria are increasingly being implemented. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Addiction](#)  
[\\*Costs and Cost Analysis](#)  
[\\*Health Care Services](#)  
[\\*Treatment Guidelines](#)  
[\\*Client Treatment Matching](#)  
[Continuum of Care](#)

[Drug Rehabilitation](#)  
[Managed Care](#)  
[Mental Health Services](#)  
[Needs Assessment](#)  
[Sciences](#)  
[Treatment Outcomes](#)

**Source:** PsycINFO

#### 24. Cross-cultural aspects of addiction therapy.

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**Citation:** Psychotherapy for the treatment of substance abuse., 2011(81-97) (2011)

**Author(s):** el-Guebaly, Nady

**Institution:** el-Guebaly, Nady: Division of Addiction Psychiatry, Department of Psychiatry, University of Calgary, Calgary, AB, Canada

**Language:** English

**Abstract:** (from the chapter) The need for clinicians to have cross-cultural sensitivity and competence increases along with the pace of their contacts with people from other cultures. Clinical cultural competence is a lifelong journey. Most of the recent scientific literature in English addresses culture in the context of modern multiethnic societies in the United States, Britain, Canada, and Australia. In this chapter, I outline the clinically relevant variables of culture and their implications for the assessment, engagement, and retention of patients in therapy. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:**

- [\\*Addiction](#)
- [\\*Cross Cultural Differences](#)
- [\\*Cultural Sensitivity](#)
- [\\*Professional Competence](#)
- [\\*Psychotherapy](#)
- [Drug Rehabilitation](#)

**Source:** PsycINFO

#### 25. Psychotherapy for the treatment of substance abuse.

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**Citation:** Psychotherapy for the treatment of substance abuse., 2011 (2011)

**Author(s):** Galanter, Marc [Ed]; Kleber, Herbert D [Ed]

**Institution:** Galanter, Marc: Division of Alcoholism and Drug Abuse, New York University School of Medicine, New York, NY, US

**Language:** English

**Abstract:** (from the cover) In Psychotherapy for the Treatment of Substance Abuse, leading authorities on substance abuse treatment techniques review and illustrate the most common interventions for opioid-related and alcohol-related substance abuse disorders, as well as crucial methodologies for testing and patient placement. Methods reviewed include self-help fellowships such as Alcoholics Anonymous, cognitive-behavioral and psychodynamic treatments, motivational enhancement, group and family therapy, contingency management, and the multimodal approach called Network Therapy, which recruits the support of friends and family to prompt abstinence and prevent relapse. Each chapter includes vivid case studies to illustrate the approach described, as well as a review of the key clinical concepts and a list of essential readings. Adapting a new, clinically focused manual from their popular American Psychiatric Publishing Textbook of Substance Abuse Treatment, now in its fourth edition, Dr. Galanter and Dr. Kleber have designed Psychotherapy for the Treatment of Substance Abuse to be of practical application to both experienced clinicians and those new to the field. The accompanying DVD demonstrates Network Therapy in practice and includes enlightening commentary

on key issues that are relevant across the many modalities of substance abuse treatment discussed in the book. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Book; Edited Book

**Subject Headings:** [\\*Alcohol Abuse](#)  
[\\*Drug Abuse](#)  
[\\*Psychotherapy](#)  
[Alcoholism](#)  
[Authority](#)  
[Drug Rehabilitation](#)  
[Opiates](#)

**Source:** PsycINFO

#### 26. Supervised daily consumption, contingent take-home incentive and non-contingent take-home in methadone maintenance.

**Citation:** Progress in Neuro-Psychopharmacology & Biological Psychiatry, December 2010(No Pagination Specified), 0278-5846 (Dec 10, 2010)

**Author(s):** Gerra, G; Saenz, E; Busse, A; Maremmanni, I; Ciccocioppo, R; Zaimovic, A; Gerra, M.L; Amore, M; Manfredini, M; Donnini, C; Somaini, L

**Abstract:** Methadone maintenance therapy (MMT) has been found effective in treating heroin addiction. Serious consideration should be given to the modality of methadone distribution, as it influences not only treatment outcome but the attitudes of policy makers and the community, too. On one hand, the choice of take-home methadone removes the need for daily attendance at a methadone clinic, which seems to improve patients' quality of life. On the other, this method, because of its lack of supervision and the absence of strict consumption monitoring, runs the risk of methadone misuse and diversion. In this study, we compared A) supervised daily consumption, B) contingent take-home incentives and C) non-contingent take-home in methadone maintenance in three groups of heroin-addicted patients attending three different MMT programmes. Retention rates at 12months were significantly higher in contingent take-home patients (group B) than in those with supervised daily consumption (group A) and the non-contingent take-home (group C). Retention rates were higher in group A than in group C patients. Compared to patients in groups A and B, those in group C showed fewer negative urinalyses and higher rates of self-reported diversion and episodes of crime or violence. Results indicate a more positive outcomes following take-home methadone associated with behavioural incentives and other measures that aim to facilitate treatment compliance than those following daily supervised consumption. By contrast, non-contingent take-home methadone given to non-stabilized patients is associated with a high rate of diversion, along with more crime episodes and maladaptive behaviours. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:**

**Source:** PsycINFO

#### 27. Methamphetamine causes sustained depression in cerebral blood flow.

**Citation:** Brain Research, December 2010(No Pagination Specified), 0006-8993 (Dec 13, 2010)

**Author(s):** Poleskaya, Oksana; Silva, Jharon; Sanfilippo, Christine; Desrosiers, Taylor; Sun, Anita; Shen, Jie; Feng, Changyong; Poleskiy, Aleksey; Deane, Rashid; Zlokovic, Berislav; Kasischke, Karl; Dewhurst, Stephen

**Abstract:** The use prevalence of the highly addictive psychostimulant methamphetamine (MA) has been steadily increasing over the past decade. MA abuse has been associated with both transient and permanent alterations in cerebral blood flow (CBF), hemorrhage, cerebrovascular accidents and death. To understand MA-induced changes in CBF, we exposed C56BL/6 mice to an acute bolus of MA (5mg/kg MA, delivered IP). This elicited a biphasic CBF response, characterized by an initial transient increase (~5minutes)

followed by a prolonged decrease (~30minutes) of approximately 25% relative to baseline CBF--as measured by laser Doppler flowmetry over the somatosensory cortex. To assess if this was due to catecholamine derived vasoconstriction, phentolamine, an alpha-adrenergic antagonist was administered prior to MA treatment. This reduced the initial increase in CBF but failed to prevent the subsequent, sustained decrease in CBF. Consistent with prior reports, MA caused a transient increase in mean arterial blood pressure, body temperature and respiratory rate. Elevated respiratory rate resulted in hypocapnia. When respiratory rate was controlled by artificially ventilating mice, blood PaCO<sub>2</sub> levels after MA exposure remained unchanged from physiologic levels, and the MA-induced decrease in CBF was abolished. In vivo two-photon imaging of cerebral blood vessels revealed sustained MA-induced vasoconstriction of pial arterioles, consistent with laser Doppler flowmetry data. These findings show that even a single, acute exposure to MA can result in profound changes in CBF, with potentially deleterious consequences for brain function. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:**

**Source:** PsycINFO

#### 28. An ontological analysis of mainstream addiction theories: Exploring relational alternatives.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2010, vol./is. 71/5-B(3393), 0419-4217 (2010)

**Author(s):** Hill, W. Benjamin III

**Institution:** Hill, W. Benjamin: Brigham Young U., US

**Language:** English

**Abstract:** Individuals and societies have long struggled to understand and confront, by constructive means, the nemesis of addiction. No other human ill has provoked more concern, accounted for more suffering, or elicited greater consequence than addiction in all its diverse forms. Although alcoholism and drug abuse symbolize the traditional essence of addiction; compulsive sexuality, pathological gambling, eating disorders, tobacco use, etc., are also believed to have addictive properties according to contemporary concepts. Numerous commendable theories and therapies have been offered down through history to explain and mediate addiction's conceptually enigmatic and therapeutically resistant nature. As this paper will clarify, many of these time-honored conceptions and resultant treatments of addiction have been inclined to proceed from a particular philosophical perspective known as abstractionism. The first purpose of this dissertation, therefore, is to explore and analyze the influence of abstractionist ideologies in addiction theory and therapy. Further on, this paper will suggest an alternate theory of addiction that derives its meaning and significance from a philosophical basis known as relationality. A relational perspective of addiction theory and treatment will be proposed along with a number of therapeutic suggestions. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Analysis](#)  
[\\*Drug Addiction](#)  
[\\*Ontologies](#)  
[\\*Theories](#)

**Source:** PsycINFO

#### 29. Two groups of occasional smokers: Different pathways with the same outcome.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2010, vol./is. 71/5-B(3364), 0419-4217 (2010)

**Author(s):** Nguyen, Quyen B

**Institution:** Nguyen, Quyen B.: U California, San Diego and San Diego State University, US

- Language:** English
- Abstract:** Occasional (non-daily) smokers pose difficulties for classic withdrawal-based addiction theory because they can regularly go without cigarettes for days with no apparent discomfort. Occasional smokers can be further divided into two subgroups: (1) occasional smokers who used to smoke daily, also known as former-daily occasional smokers (FDO); and (2) occasional smokers who never smoked daily (NDO). Little is known about the situations under which occasional smokers typically smoke their cigarettes, and even less is known about how daily smokers transition to occasional smoking. Three exploratory studies were conducted to examine the following questions. (1) What proportions of smokers are occasional and daily smokers, and how have the respective proportions changed as social norms become increasingly anti-smoking and as smoking continues to decline? (2) When are occasional smokers most likely to smoke, and how do they compare with daily smokers? (3) How do daily smokers transition to smoking occasionally? When they first cut back to smoking only about half the days in a month, which days are they most likely to forgo? The first study analyzed data from the 1996, 1999, 2002, and 2005 California Tobacco Surveys (CTS); the second used data from the 2002 CTS Young Adult Supplement, which includes questions on smoking situations; and the third focused on 152 occasional smokers recruited from the Internet for detailed interviews on smoking situations. The studies found that occasional smokers represent substantial proportions of all current smokers. Moreover, as the overall smoking prevalence declined from 17.7% in 1996 to 14.2% in 2005, the proportions of occasional smokers did not decrease, as would be predicted by their significantly higher cessation rates compared to that of daily smokers. The proportion of FDO smokers increased, though not significantly, from 1996 to 2005: 12.3% to 14.2% for men and 12.9% to 16.8% for women. The NDO proportion increased from 11.9% to 15.3% for men and decreased slightly from 10.6% to 9.5% for women; but again neither change is statistically significant. The pattern of smoking situations for FDO smokers was quite similar to that of NDO smokers, with greater overall likelihood of smoking in social or episodic situations (i.e., socializing with friends or going out) rather than solitary or routine situations (i.e., working or driving). Both differed significantly from that of daily smokers who tended to smoke across a variety of situations. Most FDO smokers (64.3%) had converted to occasional smoking through quitting smoking completely and then returning to smoking non-daily, rather than by cutting down their consumption gradually. Based on these findings we propose a model explaining how daily smokers could transition to occasional smoking. The minority of daily smokers who cut down gradually to non-daily smoking first forgo those days involving routine, solitary situations, such as at home with no other smokers present. The majority who quit daily smoking and later relapse to occasional smoking restrict their smoking mostly to days that involve episodic social situations, such as at parties. In either case, the results from the present three studies show that FDO smokers are virtually indistinguishable from NDO smokers in their current smoking situations, suggesting their previous smoking pattern has very limited influence on their current smoking behavior. (PsycINFO Database Record (c) 2010 APA, all rights reserved)
- Publication Type:** Dissertation Abstract
- Subject Headings:** [\\*Addiction](#)  
[\\*Drug Withdrawal](#)  
[\\*Smoking Cessation](#)  
[\\*Tobacco Smoking](#)
- Source:** PsycINFO
- 30. Serotonin, dopamine, and addicts' drug of choice.**
- Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2010, vol./is. 71/5-B(3356), 0419-4217 (2010)
- Author(s):** Greenberg, Joel Peter
- Institution:** Greenberg, Joel Peter: The Wright Inst., US
- Language:** English

**Abstract:** This study is about the Drug-of-Choice (DOC) phenomenon and individual differences in serotonin and dopamine. People prone to addiction often prefer one class of substances as compared to another. This has been labeled their DOC. The Neurotransmitter Attributes Questionnaire (NAQ; O'Connor, Berry, & Lewis, 2005) demonstrates a relationship between dopamine and serotonin and personality traits and several types of psychopathology. This study examines the NAQ within a sample of recovering addicts in order to investigate the relationship between neurotransmitters and DOC. Data is archival, obtained through the initial and ongoing NAQ data collection procedure. Data analysis revealed that recovering addicts had higher elevations on the S- and D-Scales than those who did not have a history of addiction. Participants recovering from addiction to stimulants had significantly higher scores on the D-Scale. Former marijuana and stimulant users had significantly higher scores on the S-Scale. Former marijuana and alcohol users scored higher than no-drug-history participants on a measure of anxious temperament. Former marijuana and stimulant users were significantly higher than the no-addiction group on a measure of ADHD symptomatology. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Addiction](#)  
[\\*Dopamine](#)  
[\\*Individual Differences](#)  
[\\*Psychopathology](#)  
[\\*Serotonin](#)

**Source:** PsycINFO

### 31. Influence of social factors on mothers in treatment for substance use disorders.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2010, vol./is. 71/5-B(3358), 0419-4217 (2010)

**Author(s):** Hilton, Nathan V

**Institution:** Hilton, Nathan V.: Rutgers The State U New Jersey, Graduate School of Applied and Professional Psychology, US

**Language:** English

**Abstract:** Consideration of women-specific issues in addictions treatment requires attention be given to the subset of women who are also mothers. For these women, the repercussions of substance use are often profound and far-reaching. Impaired decisions and parenting skills may increase risk for child abuse and neglect. This dissertation sought to better understand how the quality of a mother's social resources and her substance use behaviors are influenced by her primary drug of choice (heroin, cocaine/crack, marijuana, alcohol). Social network characteristics and substance use behaviors were characterized at treatment entry, treatment discharge, and six months post-treatment in a sample of 246 women, with minor children, who received addictions treatment based on involvement with the New Jersey Division of Youth and Family Services. Nearly half of these women had not achieved the equivalent of a high school degree and the majority was unemployed and unmarried. At treatment entry, primary heroin users reported more frequent primary drug use, more poly-drug use, and less abstinence in the past thirty days than women with other drug preferences. However, heroin using mothers improved most during treatment, reporting similar frequencies of substance use and use-related problems at both follow-up assessments as women with other drug preferences. At treatment entry, all participants reported extensive contact with family dense social networks that supported general well-being, abstinence and treatment seeking. Primary marijuana users, however, reported networks that were more neutral towards their continued substance use than women with other drug preferences. Over time, marijuana using women reported an increase in the frequency of substance use by their network members whereas women with heroin and cocaine preferences reported decreases. Importantly, frequency of substance use by network members was the social network characteristic most highly correlated with concurrent and subsequent substance use and use-related problems. The reason for these marijuana-specific social network differences is not immediately clear, but may reflect a

broad societal belief that marijuana is less physiologically, psychologically, and socially harmful than other drugs. Nonetheless, these results suggest that treatment may not adequately address the importance of social factors in the maintenance of marijuana use disorders. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Addiction](#)  
[\\*Drug Abuse](#)  
[\\*Mothers](#)  
[\\*Social Influences](#)  
[Treatment](#)

**Source:** PsycINFO

### 32. The journey of addiction: The spiritual experience of recovery.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2010, vol./is. 71/5-B(3338), 0419-4217 (2010)

**Author(s):** Hobbs-Pahl, Jennifer L

**Institution:** Hobbs-Pahl, Jennifer L.: Inst Transpersonal Psychology, US

**Language:** English

**Abstract:** People in recovery from a substance addiction characterize the journey of recovery as a time of significant transformation, suffering, and even spiritual growth. This researcher used the lens of transpersonal psychology to reframe the addiction recovery process as a meaning making journey during which unique life lessons are taught and personal spirituality is defined through this human experience of suffering. This research approached the subject of defining spirituality in recovery with a qualitative research approach, honoring the growth potential wrapped inside the life stories of 8 participants whom have lived with an addiction and have maintained abstinence for over 2 years. Much of the research contained in this study draws from their stories, the field of transpersonal psychology, Buddhism, Viktor Frankl, spiritual literature, and mainstream psychology. This research project looked into the lives of 8 people who have suffered through an addiction and lived to tell about it, people who have come to view their addiction as a gift from spirit wrapped in suffering. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Addiction](#)  
[\\*Spirituality](#)  
[\\*Suffering](#)  
[\\*Transpersonal Psychology](#)

**Source:** PsycINFO

### 33. Gambling as a means of relieving distress: Understanding the connections among interpersonal trauma, perceived social support and unsupport, and problem gambling.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2010, vol./is. 71/5-B(3400), 0419-4217 (2010)

**Author(s):** Donnelly, Cara L

**Institution:** Donnelly, Cara L.: Carleton U., Canada

**Language:** English

**Abstract:** Different pathways to problem gambling have been offered, including biological, personality, developmental, cognitive, learning, and ecological determinants, and these have been proposed to vary across individuals, but the present research assessed how exposure to interpersonal trauma puts one at risk for a gambling addiction. It has been suggested that individuals who become addicted have a general mistrust of others stemming from experiences of interpersonal trauma, and as such, they avoid seeking help and instead turn to a drug, an object, an activity, or a specific behaviour as a source of

distraction for temporary relief from distress (e.g., Hofler & Kooyman, 1996). From this perspective, addiction may have evolved as a means of relieving distress, wherein those with poor views about people stemming from histories of interpersonal trauma are more likely to cope in this manner (i.e., seeking relief from other sources, such as gambling). It was hypothesized that interpersonal trauma would be associated with problem gambling, and that this relationship would be mediated by perceptions of poor social support. Two studies were conducted examining a young university-based sample (Study 1, N = 284) and an older community-based sample (Study 2, N = 281). Study 2 also examined whether improved perceived social support facilitated by a journal intervention designed to restore and/or encourage positive perceptions of social support was associated with reduced symptoms of problem gambling. Using online survey methodologies, both studies supported the notion that problem gambling was associated with interpersonal trauma experiences and with poor perceptions concerning the supportiveness of people. Moreover, in Study 2, poorly perceived social support served as a significant pathway linking exposure to interpersonal trauma and problem gambling symptoms. Alternative models revealed that, not only did poor views about people serve to promote gambling problems, but gambling problems added to these poor perceptions by prompting distancing on the part of others. This latter effect was replicated by the journal intervention in that reduced problem gambling symptoms were associated with a subsequent diminishment in perceived social distancing. These observed trends were more evident among the male participants and thus might not necessarily apply to female gambling. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Comprehension](#)  
[\\*Distress](#)  
[\\*Pathological Gambling](#)  
[\\*Social Support](#)  
[\\*Trauma](#)  
[Addiction](#)

**Source:** PsycINFO

#### 34. Novel models and neurochemical correlates of social and environmental influences on drug reward and drug-seeking behavior.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2010, vol./is. 71/5-B(3346), 0419-4217 (2010)

**Author(s):** Thiel, Kenneth James

**Institution:** Thiel, Kenneth James: Arizona State U., US

**Language:** English

**Abstract:** Social and environmental factors have a strong influence on the development and maintenance of addiction. Using animal models, two hypotheses were tested regarding the influence of social/environmental factors at different stages of addiction: 1) During initial exposure, drug and social rewards interact synergistically resulting in more robust reward than either component alone; 2) In contrast, during forced abstinence from drug self-administration, social/environmental stimulation decreases motivation for drug. To test the first hypothesis, the effects of cocaine, dextromethorphan, or nicotine on social reward-conditioned place preference (CPP) were examined using sub-threshold parameters for establishing social reward- and drug-CPP. Two pairings of a low dose of either cocaine (2 mg/kg, intraperitoneal) or nicotine (0.1 mg/kg, subcutaneous) or 2 pairings with another rat each failed to produce CPP when examined alone; however, robust CPP was observed with 2 pairings of either drug together with another rat, demonstrating a synergistic interaction between these rewards. In contrast, the non-rewarding drug, dextromethorphan (30 mg/kg, intraperitoneal), failed to enhance social reward-CPP, suggesting that enhancement of social reward-CPP may be specific to rewarding drugs. To test the second hypothesis, rats trained to self-administer cocaine while housed in isolated conditions were then assigned to live in either isolated, pair-housed, or environmental enrichment (EE) conditions during a period of forced

abstinence. EE attenuated cocaine-seeking behavior elicited by stimuli paired previously with cocaine infusions, as well as functional activation (i.e., reduced Fos protein expression) throughout several brain regions associated with incentive motivation for cocaine. EE also blunted cocaine-seeking behavior relative to isolation during both short- and long-term abstinence; however, EE did not prevent the time-dependent increases in cocaine-seeking behavior that occur during abstinence (i.e., incubation effect). Neurochemical correlates examined suggested that the protective effects of EE may involve stress attenuation and neural plasticity. Finally, EE in combination with extinction training during abstinence afforded greater protection against cue-elicited cocaine-seeking behavior than either treatment alone; however, these protective effects did not persist once the treatments were discontinued. The findings are among the first to demonstrate preclinically the impact of social/environmental factors on initiation and withdrawal-induced motivation for drug. Consideration of these factors in future research will aid in developing more efficacious prevention and intervention treatment strategies. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Cocaine](#)  
[\\*Drugs](#)  
[\\*Environmental Effects](#)  
[\\*Neurochemistry](#)  
[\\*Rewards](#)  
[Rats](#)

**Source:** PsycINFO

### 35. Cocaine-induced modification of synaptic plasticity in rat medial prefrontal cortex.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2010, vol./is. 71/5-B(2858), 0419-4217 (2010)

**Author(s):** Lu, Hui

**Institution:** Lu, Hui: U California, Berkeley, US

**Language:** English

**Abstract:** Medial prefrontal cortex (mPFC) is involved in relapse after withdrawal for cocaine exposure, but changes in synaptic function and plasticity in the mPFC during the period of withdrawal remain largely unknown. After the termination of repeated cocaine treatments in rats, I observed a gradual enhancement in the susceptibility of excitatory synapses on layer V mPFC pyramidal neurons to activity-induced long-term potentiation (LTP). This enhanced synaptic plasticity could be attributed to a gradual increase in the expression of brain-derived neurotrophic factor (BDNF) and its suppression of GABAergic inhibition in the mPFC via reducing the surface expression of GABAA receptors. The BDNF effect is mediated by TrkB activation in these neurons and accompanied by elevated protein phosphatase 2A activity and increased de-phosphorylation of GABAA receptor beta 3 subunit in the mPFC. Thus, elevated BDNF expression during cocaine withdrawal sensitizes the excitatory inputs in the mPFC for activity-induced persistent synaptic potentiation that may contribute to cue-induced drug craving and seeking. Prenatal cocaine-exposed new-born babies could be considered as undergoing withdrawal from cocaine exposure in utero. Previous studies have shown that prenatal cocaine exposure results in abnormal brain development and cognitive dysfunction, but the underlying cellular mechanism remains largely unclear. I proposed the hypothesis that prenatal cocaine exposure may cause similar modification of synaptic plasticity in the mPFC as that found in above cocaine withdrawal studies in juvenile rats. Thus, in the second part of my study, I examined synaptic functions in the mPFC of postnatal rats which were exposed to cocaine in utero, using whole-cell recording from mPFC layer V pyramidal neurons in acute brain slices. I found that cocaine exposure in utero also resulted in a facilitated LTP of excitatory synapses on these pyramidal neurons and an elevated neuronal excitability in postnatal rat pups after P15. This facilitated LTP could be largely attributed to the reduction of GABAergic inhibition. Biochemical assays of isolated mPFC tissue from postnatal rats further showed that cocaine exposure in utero

caused a marked reduction in the surface expression of GABA A receptor subunits alpha 1, beta 2, and beta 3, but had no effect on glutamate receptor subunit GluR1. Both facilitated LTP and reduced surface expression of GABAA receptors persisted in rats up to at least P42. Finally, the behavioral consequence of cocaine exposure in utero was reflected by the reduction in the sensitivity of locomotor activity in postnatal rats to cocaine and the dopamine receptor agonist apomorphine. Since the mPFC plays important roles in cognitive functions, these findings offer new insights into the cellular mechanism underlying the adverse effects of cocaine exposure in utero on brain development and cognitive functions. In summary, this thesis work showed that excitatory inputs to mPFC layer V pyramidal neurons are sensitized for activity-induced persistent synaptic potentiation due to the reduction of GABAergic inhibition after withdrawal from repeated cocaine exposure either in utero or after birth. These findings have increased our understanding of the neurobiological basis of cocaine addiction and may help to establish more thorough pharmacological treatments for cocaine addiction. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Animal Models](#)  
[\\*Cocaine](#)  
[\\*Prefrontal Cortex](#)  
[\\*Rats](#)  
[\\*Synaptic Plasticity](#)  
[Drug Therapy](#)  
[Prenatal Exposure](#)

**Source:** PsycINFO

**36. The speed of intravenous cocaine delivery alters its effect on the brain and drug-taking behavior: Implications for addiction liability.**

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2010, vol./is. 71/5-B(2863), 0419-4217 (2010)

**Author(s):** Wakabayashi, Ken Taro

**Institution:** Wakabayashi, Ken Taro: U Michigan, US

**Language:** English

**Abstract:** Cocaine addiction in humans is a severe health and social problem. Therefore, understanding how casual use transforms into addiction is critical. One of the many factors that can facilitate addiction is how rapidly drugs like cocaine enter the brain. Faster rates of cocaine delivery have a greater neurobiological impact on brain reward systems, producing sensitization. This may facilitate the transition to addiction by changing systems in the brain underlying reward. Yet most studies in the rat have shown few effects of rate of delivery on drug-taking behavior. Recently, paradigms have been developed where rats given extended access to take cocaine develop addiction-like behaviors. If the rate of drug delivery influences its addictive liability, it can be predicted that faster rates of cocaine delivery will be associated with a greater neurobiological impact and addiction-like behavior. The studies in this dissertation tested this prediction. In the first study, fast rates (5 sec) of infusion induced more Fos expression, a marker for neurobiological impact, than slower rates (25-100 sec). This effect was equally evident in the patch and matrix subcompartments of the striatum, a brain reward sub-system implicated in addiction, suggesting that fast rates of infusion had a widespread impact on this structure. In the second study, faster rates (5-45 sec) of cocaine infusion facilitated an escalation in overall drug intake in contrast to slower rates (90 sec) when rats were given extended, but not limited, access to cocaine. In the third study, fast (5 sec) rates of cocaine infusion during extended access self-administration was associated with a persistence to reinstate drug-seeking behavior in response to a drug induced priming injection 45 days after their last self-administration session. This behavior in the 5 sec group was also associated with more persistent neuroadaptations in the brain. Thus, faster rates of cocaine infusion have a greater and more persistent impact on brain reward systems, and facilitate the development of behaviors that resemble addiction. This may be one reason

why routes of administration that result in the rapid entry of cocaine into the brain, may preferentially promote the transition to addiction. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Addiction](#)  
[\\*Brain](#)  
[\\*Cocaine](#)  
[\\*Drug Usage](#)  
[Health](#)

**Source:** PsycINFO

### 37. Molecular mechanisms of allosteric modulation of nicotinic acetylcholine receptors.

**Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2010, vol./is. 71/5-B(2851), 0419-4217 (2010)

**Author(s):** Barron, Sean Christopher

**Institution:** Barron, Sean Christopher: U North Carolina at Chapel Hill, US

**Language:** English

**Abstract:** Nicotinic acetylcholine receptors (nAChR) are part of the Cys-loop family of ligand-gated ion channels, and are implicated in a wide variety of neurological disorders such as nicotine addiction, schizophrenia, and cognitive dysfunction. Therefore, they represent a critical molecular target for drug development and targeted therapeutic intervention. Positive allosteric modulators (PAMs) of ligand-gated ion channels have a unique therapeutic potential because they enhance synaptic transmission without disrupting the endogenous timing mechanisms. This research focused on the neuronal alpha 7 nicotinic receptor because they are located both pre- and postsynaptically and can modulate glutamatergic and dopaminergic release in the brain regions involved in drug-seeking behaviors. Understanding the molecular mechanisms by which allosteric modulators enhance activation of neuronal nicotinic acetylcholine receptors is therefore critically important to the development of new drugs for research and therapeutics. Experiments with the Substituted Cysteine Accessibility Method indicate that two chemically different positive allosteric modulators, PNU-120596 and permeable divalent cations, cause structural transitions (or changes in local electrostatic potential) in the extracellular ligand binding domain of the alpha 7 nicotinic receptor that are similar but not identical to those caused by the agonist, acetylcholine. These results suggest that positive allosteric modulators share a conserved mechanism to enhance receptor gating that is unrelated to the chemical structure of the molecule. As an additional approach to study gating of the nicotinic receptors, I developed homology models derived from the structures of bacterial Cys-loop receptors in the closed and open states. A comparison of electrophysiological MTSEA modification data against in silico calculations of solvent accessibility and electrostatic potential showed that electrostatic potential in the extracellular ligand-binding domain of the alpha 7 nAChR is a better predictor of receptor gating from the closed to open states. Overall, this body of work has shown that positive allosteric modulators and agonists of the alpha 7 nAChR induce similar conformational changes in the extracellular-ligand binding domain of the receptor by reducing the large electronegative potential energy along the ion-permeation pathway. A unifying model of receptor gating (electrostatic compensation) and future experiments designed to test this model are discussed. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Acetylcholine](#)  
[\\*Cholinergic Receptors](#)  
[\\*Nervous System Disorders](#)  
[\\*Neurology](#)  
[\\*Nicotine](#)

**Source:** PsycINFO

**38. Scanning sex, stress and substance abuse susceptibility: Neural correlates of vulnerability to abuse drugs.**

- Citation:** Dissertation Abstracts International: Section B: The Sciences and Engineering, 2010, vol./is. 71/5-B(2846), 0419-4217 (2010)
- Author(s):** Love, Tiffany Marie
- Institution:** Love, Tiffany Marie: U Michigan, US
- Language:** English
- Abstract:** Despite decades of research, it is still not understood why some individuals are vulnerable to drug addiction while others are resilient. Susceptibility to use and abuse drugs appears to arise from a complex set of interacting variables. It is known that environmental (e.g. stress exposure), trait (e.g. impulsiveness) and genetic factors all contribute to substance abuse risk, however, the biological mechanisms that underlie this risk are not well understood. Though some research has indicated abnormalities in dopaminergic and opiodergic activity in current and former drug addicts, such as lower D2 receptor availability and higher mu-opioid receptor availability within the ventral striatum, it cannot be determined whether such abnormalities represented predisposing factors to drug use or were a consequence of drug consumption or addiction processes. Studying non-drug using individuals who carry factors that have historically been shown to place them at higher risk for substance use and abuse represents a preferable alternative to studying drug addicts. In these studies, we examined the relationships between several susceptibility factors, specifically exposure to recent life stress, genetic variation at the oxytocin gene (OXT), and trait impulsiveness with measures of dopaminergic and opiodergic functioning in healthy, non-drug using subjects utilizing positron emission tomography (PET). The results of these studies are as follows: First, utilizing mu-opioid receptor agonist radiotracer [11C]carfentanil we observed significantly higher regional mu-opioid receptor concentrations and greater stress-induced endogenous opioid system activation in individuals exhibiting high levels of trait impulsiveness. Second, in scans using the D2/D3 dopamine receptor antagonist radiotracer [11C]raclopride, we observed significant differences in stress-induced dopaminergic activity between men and women throughout the striatum. In addition, we noted a significant interaction between sex and environmental stress in the nucleus accumbens. Finally, we observed that single nucleotide polymorphisms (SNPs) located on chromosome 20 upstream of OXT were associated with dopaminergic and behavioral responses to a stressor, but only in women. The data obtained from these studies are broadly relevant for addiction research and provides original information regarding the mechanisms which may underlie individual risk to use and abuse drugs. (PsycINFO Database Record (c) 2010 APA, all rights reserved)
- Publication Type:** Dissertation Abstract
- Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Addiction](#)  
[\\*Neural Receptors](#)  
[\\*Stress](#)  
[\\*Susceptibility \(Disorders\)](#)  
[Polymorphism](#)
- Source:** PsycINFO

**39. Contributions of erk signaling in the striatum to instrumental learning and performance.**

- Citation:** Behavioural Brain Research, December 2010(No Pagination Specified), 0166-4328 (Dec 13, 2010)
- Author(s):** Shiflett, Michael W; Balleine, Bernard W
- Abstract:** The striatum is critical for learning and decision making; however, the molecular mechanisms that govern striatum function are not fully understood. The extracellular signal regulated kinase (ERK) cascade is an important signaling pathway that underlies synaptic plasticity, cellular excitability, learning and arousal. This review focuses on the role of ERK signaling in striatum function. ERK is activated in the striatum by

coordinated dopamine and glutamate receptor signaling, where it underlies corticostriatal synaptic plasticity and influences striatal cell excitability. ERK activation in the dorsal striatum is necessary for action-outcome learning and performance of goal-directed actions. In the ventral striatum, ERK is necessary for the motivating effects of reward-associated stimuli on instrumental performance. Dysregulation of ERK signaling in the striatum by repeated drug exposure contributes to the development of addictive behavior. These results highlight the importance of ERK signaling in the striatum as a critical substrate for learning and as a regulator of ongoing behavior. Furthermore, they suggest that ERK may be a suitable target for therapeutics to treat disorders of learning and decision making that arise from compromised striatum function. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:**

**Source:** PsycINFO

**40. Comment on Edlund et al "Trends in use of opioids for chronic noncancer pain among individuals with mental health and substance abuse disorders: The TROUP study."**

**Citation:** The Clinical Journal of Pain, September 2010, vol./is. 26/7(645), 0749-8047;1536-5409 (Sep 2010)

**Author(s):** Hermos, John

**Institution:** Hermos, John: Massachusetts Veterans Epidemiology Research and Information Center, VA Cooperative Studies Program, VA Boston Healthcare System, Boston, MA, US

**Language:** English

**Abstract:** Comments on an article by Edlund et al (see record 2010-06292-001). The study by Edlund et al presents important data on the disproportional increase between 2000 and 2005 of opioid analgesic prescriptions for patients in Arkansas with noncancer pain and concomitant substance use and mental health disorders. Their data clearly indicate that patients who may be most vulnerable to the potentially addicting and toxic effects of prescribed opioids are increasingly being prescribed these agents. These results further inform the issues around the risks and benefits of chronic opioid prescribing for noncancer pain patients and further establish that patients with mental health and substance abuse comorbidities, may be potentially at increased risks. We have found that, in addition to associating comorbidities with opioid prescriptions, determining concurrently prescribed, potentially abused psychoactive medications can add a further dimension to characterizing potentially vulnerable patients. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

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

**Subject Headings:** [\\*Chronic Pain](#)  
[\\*Drug Abuse](#)  
[\\*Mental Health](#)  
[\\*Opiates](#)  
[\\*Prescription Drugs](#)

**Source:** PsycINFO

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

**41. Substance use, childhood traumatic experience, and posttraumatic stress disorder in an urban civilian population.**

**Citation:** Depression and Anxiety, December 2010, vol./is. 27/12(1077-1086), 1091-4269;1520-6394 (Dec 2010)

**Author(s):** Khoury, Lamya; Tang, Yilang L; Bradley, Bekh; Cubells, Joe F; Ressler, Kerry J

**Correspondence Address:** Ressler, Kerry J.: Howard Hughes Medical Institute, Department of Psychiatry and Behavioral Sciences, Yerkes Research Center, Emory University, 954 Gatewood Dr, Atlanta, GA, US, 30329, [kressle@emory.edu](mailto:kressle@emory.edu)

**Institution:** Khoury, Lamy: Department of Psychiatry and Behavioral Sciences, Emory University School of Medicine, Atlanta, GA, US

**Language:** English

**Abstract:** Objective: Exposure to traumatic experiences, especially those occurring in childhood, has been linked to substance use disorders (SUDs), including abuse and dependence. SUDs are also highly comorbid with Posttraumatic Stress Disorder (PTSD) and other mood-related psychopathology. Most studies examining the relationship between PTSD and SUDs have examined veteran populations or patients in substance treatment programs. The present study further examines this relationship between childhood trauma, substance use, and PTSD in a sample of urban primary care patients. Method: There were 587 participants included in this study, all recruited from medical and OB/GYN clinic waiting rooms at Grady Memorial Hospital in Atlanta, GA. Data were collected through both screening interviews as well as follow-up interviews. Results: In this highly traumatized population, high rates of lifetime dependence on various substances were found (39% alcohol, 34.1% cocaine, 6.2% heroin/opiates, and 44.8% marijuana). The level of substance use, particularly cocaine, strongly correlated with levels of childhood physical, sexual, and emotional abuse as well as current PTSD symptoms. In particular, there was a significant additive effect of number of types of childhood trauma experienced with history of cocaine dependence in predicting current PTSD symptoms, and this effect was independent of exposure to adult trauma. Conclusions: These data show strong links between childhood traumatization and SUDs, and their joint associations with PTSD outcome. They suggest that enhanced awareness of PTSD and substance abuse comorbidity in high-risk, impoverished populations is critical to understanding the mechanisms of substance addiction as well as in improving prevention and treatment. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Wiley-Liss, Inc.; YEAR: 2010

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Emotional Trauma](#)  
[\\*Experiences \(Events\)](#)  
[\\*Posttraumatic Stress Disorder](#)  
[\\*Primary Health Care](#)  
[Patients](#)  
[Urban Environments](#)

**Source:** PsycINFO

**42. "A peer saplings story: Lifting the veil on parents with mental illness and their daughters and sons": Reply.**

**Citation:** Psychiatric Services, May 2010, vol./is. 61/5(532), 1075-2730 (May 2010)

**Author(s):** Jarry, Maggie; Fox, Lindy; Coussons de Reyes, Carol

**Institution:** Jarry, Maggie: Adult Mental Health Division, Minnesota Department of Human Services, St. Paul, MN, US

**Language:** English

**Abstract:** Replies to comments by Alison M. Heru et. al (see record 2010-25784-024) on the current authors' original article (see record 2009-23903-014). More than five million children in the United States have a parent with a serious mental illness, such as schizophrenia, bipolar disorder, and major depression, and some of these parents have co-occurring addictions. It is estimated that 68% of women and 57% of men with a serious mental illness are parents and that 73% of women and 68% of men with posttraumatic stress disorder are parents. Yet it remains common to find mental health professionals who are unaware of or unwilling to see the relevance of this topic to their work and to the success of the people they serve. We urge that the recommendations in this letter be balanced with an understanding that the need to screen children for illnesses is small compared with the need to unveil fortifying messages of resilience and hope within the family. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

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

**Subject Headings:** [\\*Mental Disorders](#)  
[\\*Parents](#)  
[\\*Stigma](#)  
[Autobiography](#)  
[Life Experiences](#)

**Source:** PsycINFO

#### 43. Subacute vocal cord paralysis, facial palsy and paraesthesias of lower limbs following surreptitious administration of disulfiram.

**Citation:** Journal of Neurology, Neurosurgery & Psychiatry, December 2010, vol./is. 81/12(1409-1410), 0022-3050 (Dec 2010)

**Author(s):** Manjunatha, Narayana; Vidyendaran, Rudhran; Rao, Mukund G; Kulkarni, Girish Baburao; Muralidharan, Kesavan; John, John P; Amar, B. R; Jain, Sanjeev

**Correspondence Address:** Manjunatha, Narayana: Department of Psychiatry, National Institute of Mental Health and Neuro Sciences (NIMHANS), Bangalore, India, 560029, manjunatha.adc@gmail.com

**Institution:** Manjunatha, Narayana: Department of Psychiatry, National Institute of Mental Health and Neuro Sciences (NIMHANS), Bangalore, India

**Language:** English

**Abstract:** Presents a case report of subacute onset of neurological sequelae with therapeutic doses of disulfiram administered surreptitiously, without medical consultation and recovery within 6 weeks of stopping disulfiram. A 32-year-old male, with family history of alcohol dependence (AD) in one first-degree relative, personal history of nicotine dependence for 7 years and AD for 9 years presented with complaints of pain in both legs for 10 days, hoarseness of voice and drooping of both eyelids for 8 days. On examination, the patient had a simple withdrawal from alcohol, hoarseness of voice, bilateral lower-motor-neuron facial nerve palsy and paraesthesias in both lower limbs without pyramidal signs. The patient was given ambulatory detoxification with lorazepam 16 mg per day, tapered over 7 days. Thiamine 100 mg per day supplementation and gabapentin 300 mg/day were also prescribed. The patient reported here initially experienced DER everyday with alcohol, after being administered disulfiram without his knowledge. The highlight of this report is that neuropathies developed on therapeutic doses of disulfiram subacutely and following a short duration of administration. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

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

**Subject Headings:** [\\*Disulfiram](#)  
[\\*Drug Therapy](#)  
[\\*Paralysis](#)  
[\\*Somatosensory Disorders](#)  
[\\*Vocal Cords](#)  
[Alcoholism](#)  
[Neurology](#)  
[Side Effects \(Drug\)](#)

**Source:** PsycINFO

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

#### 44. Serotonin function in pathological gambling: Blunted growth hormone response to sumatriptan.

**Citation:** Journal of Psychopharmacology, December 2010, vol./is. 24/12(1802-1809), 0269-8811;1461-7285 (Dec 2010)

**Author(s):** Pallanti, Stefano; Bernardi, Silvia; Allen, Andrea; Hollander, Eric

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**Institution:** Pallanti, Stefano: Department of Psychiatry, Mount Sinai School of Medicine, New York, NY, US

**Language:** English

**Abstract:** Pathological gambling is a disruptive behaviour and an important public health concern that is classified as an impulse control disorder, and is also conceptualized as a prototype of 'behavioural addiction'. Its phenomenology cannot be reduced to a single neurobiological dysfunction; instead, it has been conceived as a complex chain of events in which the serotonergic system (5-HT) has often been suggested as one of the most prominent involved. Acute administration of Sumatriptan, a selective 5-HT<sub>1B/1D</sub> agonist, has been used to investigate the functional responsiveness of 5-HT<sub>1B/1D</sub> receptors in alcoholics, resulting in a blunted growth hormone response. These findings have been interpreted as being due to the down-regulation of these receptors. However, previous studies could not rule out the possibility that the changes in receptor function were induced by chronic substance exposure. Twenty-two pathological gamblers and 19 healthy control subjects were evaluated in response to double-blind administration of both a single dose of oral Sumatriptan (100 mg) and of placebo in a crossover design. All participants were screened to ensure that they were negative for lifetime alcohol and drug addiction, and had been free of substance abuse for at least 6 months. Outcome measures included growth hormone, prolactin, gambling severity, mood, craving and 'high' change scales. A blunted growth hormone response was observed in pathological gamblers compared with healthy controls after Sumatriptan administration. No statistically significant differences were found for prolactin or behavioural measures, except for an increase in anxiety over time in pathological gamblers. These results, together with those obtained in our previous serotonergic challenge study, document the presence of a serotonergic dysfunction in pathological gamblers similar to that reported in alcoholics. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Drug Therapy](#)  
[\\*Pathological Gambling](#)  
[\\*Serotonin](#)  
[\\*Somatotropin](#)  
[\\*Triptans](#)

**Source:** PsycINFO

#### 45. Neurobiological and neuropsychological perspectives on substance dependence.

**Original Title:** Modelle der Substanzabhangigkeit: Neurobiologische und neuropsychologische Modelle der Substanzabhangigkeit.

**Citation:** Zeitschrift fur Neuropsychologie, 2010, vol./is. 21/3(153-166), 1016-264X (2010)

**Author(s):** Martin-Soelch, C

**Correspondence Address:** Martin-Soelch, C.: Klinik fur Psychiatrie und Psychotherapie, Universitatsspital Zurich, Culmannstrasse 8, Zurich, Switzerland, 8091, chantal.martinsoelch@usz.ch

**Institution:** Martin-Soelch, C.: Klinik fur Psychiatrie und Psychotherapie, Universitatsspital Zurich, Zurich, Switzerland

**Language:** German

**Abstract:** Neurobiological models of substance dependence hypothesize that addiction results from interplay between positive and negative reinforcement. Positive reinforcing effects of drugs are mediated through dopamine transmission in the striatum, while negative reinforcement involves the central stress systems. Substance dependence leads to persistent changes in the brain motivational systems. Neuropsychological research showed impairment in decision-making that could be related to a dysfunction in the ventromedial prefrontal cortex. A further critical region is the insula that could be involved in the impaired insight in addictive behaviour and in the mediation of the conscious urge to take the drug. Neurobiological and neuropsychological perspectives are

integrated here in a model combining impulsive subcortical and dopamine-related processes with dysfunction of cortical inhibition and cognitive deficits. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Verlag Hans Huber, Hogrefe AG, Bern; YEAR: 2010  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Drug Dependency](#)  
[\\*Neurobiology](#)  
[\\*Neuropsychology](#)  
**Source:** PsycINFO

#### 46. Drug-induced deactivation of inhibitory networks predicts pathological gambling in PD.

**Citation:** Neurology, November 2010, vol./is. 75/19(1711-1716), 0028-3878;1526-632X (Nov 9, 2010)

**Author(s):** van Eimeren, T; Pellecchia, G; Cilia, R; Ballanger, B; Steeves, T. D. L; Houle, S; Miyasaki, J. M; Zurowski, M; Lang, A. E; Strafella, A. P

**Correspondence Address:** Strafella, A. P.: Toronto Western Hospital, Toronto, ON, Canada, antonio.strafella@uhnres.utoronto.ca

**Institution:** van Eimeren, T.: Division of Brain, Imaging and Behaviour-Systems Neuroscience, BIB-SN, Toronto Western Research Institute, Toronto, ON, Canada

**Language:** English

**Abstract:** Objective: Some patients with Parkinson disease (PD) develop pathological gambling when treated with dopamine agonists (DAs). However, little is known about DA-induced changes in neuronal networks that may underpin this drug-induced change in behavior in vulnerable individuals. In this case-control study, we aimed to investigate DA-induced changes in brain activity that may differentiate patients with PD with DA-induced pathological gambling (gamblers) from patients with PD without such a history (controls). Methods: Following overnight withdrawal of antiparkinsonian medication, patients were studied with H<sup>2</sup>superscript 15O PET before and after administration of DA (3 mg apomorphine) to measure changes in regional cerebral blood flow as an index of regional brain activity during a card selection game with probabilistic feedback. Results: We observed that the direction of DA-related activity change in brain areas that are implicated in impulse control and response inhibition (lateral orbitofrontal cortex, rostral cingulate zone, amygdala, external pallidum) distinguished gamblers from controls. DA significantly increased activity in these areas in controls, while gamblers showed a significant DA-induced reduction of activity. Conclusions: We propose that in vulnerable patients with PD, DAs produce an abnormal neuronal pattern that resembles those found in nonparkinsonian pathological gambling and drug addiction. DA-induced disruption of inhibitory key functions--outcome monitoring (rostral cingulate zone), acquisition and retention of negative action--outcome associations (amygdala and lateral orbitofrontal cortex)--together with restricted access of those areas to executive control (external pallidum)--may well explain loss of impulse control and response inhibition in vulnerable patients with PD, thereby fostering the development of pathological gambling. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: AAN Enterprises, Inc.; YEAR: 2010  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Dopamine Agonists](#)  
[\\*Drug Therapy](#)  
[\\*Parkinson's Disease](#)  
[\\*Pathological Gambling](#)  
[Response Inhibition](#)  
[Side Effects \(Drug\)](#)  
**Source:** PsycINFO  
**Full Text:** Available in *fulltext* at *Ovid*

**47. Decision-making in people who relapsed to driving under the influence of alcohol.**

- Citation:** Alcoholism: Clinical and Experimental Research, December 2010, vol./is. 34/12(2162-2168), 0145-6008;1530-0277 (Dec 2010)
- Author(s):** Kasar, Muzaffer; Gleichgerrcht, Ezequiel; Keskinilic, Cahit; Tabo, Abdulkadir; Manes, Facundo F
- Correspondence Address:** Kasar, Muzaffer: Bakirkoy Ruh ve Sinir Hastaliklari Hastanesi 3.Psikiyatri Klinigi, Zuhuratbaba Mah. Demirkapi Cad., Istanbul, Turkey, 34147, muzafferkasar@hotmail.com
- Institution:** Kasar, Muzaffer: Department of Psychiatry, Bakirkoy Research and Training Hospital for Psychiatry, Neurology and Neurosurgery, Istanbul, Turkey
- Language:** English
- Abstract:** Background: Alcohol use has been previously associated with neurocognitive impairments, especially in decision-making cognition. However, some studies have shown little to no decision-making deficits in relation to different characteristics of people with drinking problems. Relapsing to driving under the influence (DUI) of alcohol is an important issue with legal and psychosocial aspects. We evaluated decision-making performance in second-time DUI offenders by using the Iowa Gambling Task (IGT). Method: Thirty-four male second-time DUI offenders who had been selected for an official psychoeducational rehabilitation program and 31 healthy controls that were matched for age, education, and alcohol use were included. Along with psychiatric assessment, we applied conventional neuropsychological testing comprising cognitive set-shifting, response inhibition, attention, and visuospatial abilities. Also, we used the Temperament and Character Inventory (TCI) to assess personality patterns. A computerized version of IGT was used. Results: No significant differences were found between the groups in regard to sociodemographics and conventional neuropsychological testing. DUI participants had significantly higher scores only in "self-transcendence" subdomain of TCI. On the fifth block of the IGT, DUI participants had significantly lower net scores than controls ( $U = 380.0, p < 0.05$ ). Also, DUI participants chose significantly more risky decks compared to controls. Conclusions: Our results suggest that there may be subtle decision-making deficits in DUI participants, which goes undetected on conventional neuropsychological testing and which is not correlated with TCI subdomains related with impulsivity patterns. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: The Research Society on Alcoholism; YEAR: 2010
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Alcoholism](#)  
[\\*Decision Making](#)  
[\\*Driving Under the Influence](#)  
[\\*Drug Rehabilitation](#)  
[\\*Psychoeducation](#)  
[Criminals](#)
- Source:** PsycINFO

**48. The obsessive compulsive drinking scale is a valid measure of alcohol craving in young adults.**

- Citation:** Alcoholism: Clinical and Experimental Research, December 2010, vol./is. 34/12(2155-2161), 0145-6008;1530-0277 (Dec 2010)
- Author(s):** Connor, Jason P; Feeney, Gerald F. X; Jack, Alyssa; Young, Ross McD
- Correspondence Address:** Feeney, Gerald F. X.: Alcohol and Drug Assessment Unit, Princess Alexandra Hospital, Brisbane, QLD, Australia, 4102, Gerald\_Feeney@health.qld.gov.au
- Institution:** Connor, Jason P.: Centre for Youth Substance Abuse Research, University of Queensland, Brisbane, QLD, Australia
- Language:** English

**Abstract:** Background: Alcohol craving is associated with greater alcohol-related problems and less favorable treatment prognosis. The Obsessive Compulsive Drinking Scale (OCDS) is the most widely used alcohol craving instrument. The OCDS has been validated in adults with alcohol use disorders (AUDs), which typically emerge in early adulthood. This study examines the validity of the OCDS in a nonclinical sample of young adults. Methods: Three hundred and nine college students (mean age of 21.8 years, SD = 4.6 years) completed the OCDS, Alcohol Use Disorders Identification Test (AUDIT), and measures of alcohol consumption. Subjects were randomly allocated to 2 samples. Construct validity was examined via exploratory factor analysis (n = 155) and confirmatory factor analysis (n = 154). Concurrent validity was assessed using the AUDIT and measures of alcohol consumption. A second, alcohol-dependent sample (mean age 42 years, SD 12 years) from a previously published study (n = 370) was used to assess discriminant validity. Results: A unique young adult OCDS factor structure was validated, consisting of Interference/Control, Frequency of Obsessions, Alcohol Consumption and Resisting Obsessions/Compulsions. The young adult 4-factor structure was significantly associated with the AUDIT and alcohol consumption. The 4 factor OCDS successfully classified nonclinical subjects in 96.9% of cases and the older alcohol-dependent patients in 83.7% of cases. Although the OCDS was able to classify college nonproblem drinkers (AUDIT <13, n = 224) with 83.2% accuracy, it was no better than chance (49.4%) in classifying potential college problem drinkers (AUDIT score >=13, n = 85). Conclusions: Using the 4-factor structure, the OCDS is a valid measure of alcohol craving in young adult populations. In this nonclinical set of students, the OCDS classified nonproblem drinkers well but not problem drinkers. Studies need to further examine the utility of the OCDS in young people with alcohol misuse. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Research Society on Alcoholism; YEAR: 2010

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

**Subject Headings:** [\\*Alcohol Drinking Patterns](#)  
[\\*Alcoholism](#)  
[\\*Psychometrics](#)  
[\\*Test Validity](#)  
[Craving](#)  
[Obsessive Compulsive Disorder](#)

**Source:** PsycINFO

#### 49. Cognitive performance in treatment-naïve active alcoholics.

**Citation:** Alcoholism: Clinical and Experimental Research, December 2010, vol./is. 34/12(2097-2105), 0145-6008;1530-0277 (Dec 2010)

**Author(s):** Smith, Stan; Fein, George

**Correspondence Address:** Fein, George: Neurobehavioral Research, Inc., 1585 Kapiolani Blvd, Ste 1030, Honolulu, HI, US, 96814, [george@nbresearch.com](mailto:george@nbresearch.com)

**Institution:** Smith, Stan: Neurobehavioral Research, Inc., Honolulu, HI, US

**Language:** English

**Abstract:** Background: Most studies reporting cognitive deficits in chronic alcoholics have relied on treatment samples (predominantly men) from inpatient or outpatient treatment facilities. However, the majority of chronic alcoholics have never been in treatment and there is increasing evidence that treated and non-treatment-seeking alcoholic samples come from different populations with regard to alcohol use and other factors related to the severity of disease. Accordingly, in the present study, we assessed a broad range of cognitive functions in 55 treatment-naïve alcohol-dependent (TNAD) individuals and 55 nonalcoholic controls (NAC) matched for age and education. In addition, a goal of the present study was to assess potential differential effects of alcohol dependence on cognitive performance in TNAD men and women. Methods: Comprehensive neuropsychological assessment was conducted on TNAD and NAC. The following 9 performance domains, each consisting of multiple measures, were examined: attention,

auditory working memory, verbal processing, abstraction/cognitive flexibility, psychomotor function, immediate memory, delayed memory, reaction time, and spatial processing. Results: Analysis revealed no cognitive deficits in TNAD, relative to NAC, in any of the 9 cognitive domains. TNAD performed better than NAC in the attention domain. In addition, while men performed better than women in the spatial domain, there were no TNAD versus NAC group by gender interactions for any domain. Conclusions: Our results extend findings that TNAD show minimal behavioral effects of chronic heavy alcohol use and are consistent with the contention that TNAD are relatively cognitively intact. Differences between our findings and those often reported for alcoholics recruited from treatment settings may be understood in terms of differences in alcohol use, along with genetic, psychiatric, and nutritional factors. In addition, the lack of differential effects of alcohol dependence on male and female cognitive performance in our study suggests that TNAD men and women do not differ in the severity of cerebral consequences of alcohol dependence. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Research Society on Alcoholism; YEAR: 2010  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** \*Alcohol Rehabilitation  
 \*Alcoholism  
 \*Cognitive Ability  
 Treatment  
**Source:** PsycINFO

#### 50. Body mass index is associated with brain metabolite levels in alcohol dependence--A multimodal magnetic resonance study.

**Citation:** Alcoholism: Clinical and Experimental Research, December 2010, vol./is. 34/12(2089-2096), 0145-6008;1530-0277 (Dec 2010)  
**Author(s):** Gazdzinski, Stefan; Durazzo, Timothy C; Mon, Anderson; Meyerhoff, Dieter J  
**Correspondence Address:** Gazdzinski, Stefan: Jagiellonian University, M. Smoluchowski Institute of Physics, ul. Reymonta 4, Krakow, Poland, 30-059, Stefan.Gazdzinski@yahoo.com  
**Institution:** Gazdzinski, Stefan: Center for Imaging of Neurodegenerative Diseases, San Francisco Veterans Administration Medical Center, San Francisco, CA, US  
**Language:** English  
**Abstract:** Background: Recent studies demonstrated that alcohol dependence and excessive alcohol consumption are associated with increased rates of obesity. In healthy light-drinkers, we and others have observed associations between elevated body mass index (BMI) and reductions in brain volumes, lower concentrations of N-acetyl-aspartate (NAA, marker of neuronal viability) and choline-containing compounds (Cho, involved in membrane turnover), and lower glucose utilization, particularly in frontal lobe--a brain region that is particularly vulnerable to the effects of alcohol dependence. Here, we evaluated whether BMI in alcohol-dependent individuals was independently associated with regional measures of brain structure, metabolite concentrations, and neocortical blood flow. Methods: As part of a study on the effects of alcohol dependence on neurobiology, we analyzed retrospectively data from 54 alcohol-dependent males, abstinent from alcohol for about 1 month and with BMI between 20 and 37 kg/m<sup>2</sup> by structural MRI, perfusion MRI (blood flow), and proton magnetic resonance spectroscopic imaging. Results: After correction for age, smoking status, and various measures of alcohol consumption, higher BMI was associated with lower concentrations of NAA, Cho, creatine and phosphocreatine (Cr, involved in high energy metabolism), and myo-inositol (m-Ino, a putative marker of astrocytes) primarily in the frontal lobe, in subcortical nuclei, and cerebellar vermis ( $p < 0.004$ ). Regional brain volumes and perfusion were not significantly related to BMI. Furthermore, comorbid conditions, clinical laboratory measures, and nutritional assessments were not significant predictors of these MR-based measures. Conclusions: The results suggest that BMI, independent of age, alcohol consumption, and common comorbidities, is related to regional NAA, Cho, Cr, and m-Ino concentrations in this cohort of alcohol-dependent individuals. Additionally, as some

common comorbid conditions in alcohol dependence such as cigarette smoking are associated with BMI, their associations with regional brain metabolite levels in alcohol-dependent individuals may also be influenced by BMI. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Research Society on Alcoholism; YEAR: 2010  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Alcoholism](#)  
[\\*Body Mass Index](#)  
[\\*Cerebral Blood Flow](#)  
[\\*Metabolites](#)  
[\\*Military Veterans](#)  
[Brain](#)  
[Magnetic Resonance Imaging](#)  
**Source:** PsycINFO

### 51. The importance of glucocorticoids in alcohol dependence and neurotoxicity.

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**Citation:** Alcoholism: Clinical and Experimental Research, December 2010, vol./is. 34/12(2011-2018), 0145-6008;1530-0277 (Dec 2010)  
**Author(s):** Rose, A. K.; Shaw, S. G.; Prendergast, M. A.; Little, H. J  
**Correspondence Address:** Rose, A. K.: Department of Psychology, University of Liverpool, Eleanor Rathbone Building, Bedford Street South, Liverpool, United Kingdom, L69 7ZA, [Abi.Rose@liverpool.ac.uk](mailto:Abi.Rose@liverpool.ac.uk)  
**Institution:** Rose, A. K.: Department of Psychology, University of Liverpool, Liverpool, United Kingdom  
**Language:** English  
**Abstract:** Alterations in hypothalamo-pituitary adrenal (HPA) function have been described in alcoholics and in rodents after chronic alcohol consumption but the role of glucocorticoids in alcohol consumption, and the mechanisms involved, has received little attention until recently. Both alcohol consumption and withdrawal from chronic alcohol intake raise circulating glucocorticoid levels, and prolonged high concentrations of glucocorticoids are known to have detrimental effects on neuronal function and cognition. This minireview covers the ways in which glucocorticoids may be involved in drinking behavior, from social drinking to dependence, and the negative consequences of alcohol consumption seen during withdrawal which may have a detrimental effect on treatment outcome. Research shows prolonged increases in brain glucocorticoid concentrations and decreased brain glucocorticoid receptor availability (consistent with increased levels of endogenous ligand) after withdrawal from chronic alcohol treatment. Evidence suggests that increased glucocorticoid levels in the brain after chronic alcohol treatment are associated with the cognitive deficits seen during abstinence which impact on treatment efficacy and quality of life. Studies on organotypic cultures also demonstrate the importance of glucocorticoids in the neuropathological consequences of alcohol dependence. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)  
**Country of Publication:** HOLDER: The Research Society on Alcoholism; YEAR: 2010  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Alcoholism](#)  
[\\*Glucocorticoids](#)  
[\\*Hypothalamic Pituitary Adrenal Axis](#)  
[\\*Neurotoxicity](#)  
**Source:** PsycINFO

### 52. A response to the letter to the editor by Kari Poikolainen.

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**Citation:** Alcoholism: Clinical and Experimental Research, December 2010, vol./is. 34/12(2003), 0145-6008;1530-0277 (Dec 2010)

**Author(s):** Schuckit, Marc

**Institution:** Schuckit, Marc: UCSD School of Medicine, La Jolla, CA, US

**Language:** English

**Abstract:** Comments on the articles Smoking decreases stimulation by alcohol, parental history of alcoholism does not (2005) and (see record 2010-24171-001) by Kari Poikolainen. The author's note raises several important issues with which I fully agree. First, regular smoking is likely to increase the rate of alcohol metabolism and might decrease the level of response to alcohol. Second, as a result of these considerations, the smoking history must be carefully evaluated and controlled in any studies on the impact of the level of response (LR) to alcohol. It is also relevant to point out that the 2005 paper, while offering potentially useful information, was carried out with a number of compromises that potentially diminished the impact of the results. First, compared to our work that usually evaluates the importance of the LR to alcohol in nonalcoholics relatively early in life, the author's sample was older and a substantial proportion already met criteria for apparent alcohol dependence. Second, the Finish subjects were asked to report their impressions of stimulating effects of alcohol at their most recent alcohol intoxication. In summary, we are grateful to the author for reminding us that smoking histories must be carefully considered in any interpretation of a person's level of response to alcohol. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Country of Publication:** HOLDER: The Research Society on Alcoholism; YEAR: 2010

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Children of Alcoholics](#)  
[\\*Parents](#)  
[\\*Tobacco Smoking](#)  
[Alcohols](#)  
[History](#)  
[Stimulation](#)

**Source:** PsycINFO

### 53. Family history of alcoholism, smoking, and subjective responses to alcohol: Reply to Poikolainen (2010).

**Citation:** Alcoholism: Clinical and Experimental Research, December 2010, vol./is. 34/12(2002), 0145-6008;1530-0277 (Dec 2010)

**Author(s):** Newlin, David B; Renton, Rachael M

**Correspondence Address:** Newlin, David B., #2.025 Research and Technology Park, 1450 S. Rolling Road, Baltimore, MD, US, 21227, dnewlin@rti.org

**Institution:** Newlin, David B.: RTI International, Baltimore, MD, US

**Language:** English

**Abstract:** Comments on the articles Smoking decreases stimulation by alcohol, parental history of alcoholism does not (2005) and (see record 2010-24171-001) by Kari Poikolainen. These articles present results concerning the effects of cigarette smoking histories on self-reported stimulation on the Anticipated Biphasic Alcohol Effects Scale (BAES), although the negative results for family history of alcoholism are difficult to interpret. First, the author did not report the simple effects of family history on Anticipated BAES Stimulation scores among the community sample, the smaller group of alcoholic individuals or the combined sample. The authors did not provide results for the Anticipated BAES Sedation scale, so it is unclear whether the effect of smoking history was specific to stimulant like effects of alcohol or characteristic of sedative effects as well. Finally, the Anticipated BAES is not a standard measure for assessing the effects that the author tested, so we cannot compare the results to other studies in the literature. Thus, we conclude that smoking history clearly merits further study as a determinant of

the subjective response to acute alcohol but that smoking is an unlikely explanation of family history differences in these alcohol responses. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Country of Publication:** HOLDER: The Research Society on Alcoholism; YEAR: 2010  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Alcoholism](#)  
[\\*Family Background](#)  
[\\*Responses](#)  
[\\*Tobacco Smoking](#)  
 Alcohols  
**Source:** PsycINFO

#### 54. Level of alcohol response is not a risk factor for alcohol dependence.

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**Citation:** Alcoholism: Clinical and Experimental Research, December 2010, vol./is. 34/12(2001), 0145-6008;1530-0277 (Dec 2010)  
**Author(s):** Poikolainen, Kari  
**Correspondence Address:** Poikolainen, Kari: Finnish Foundation for Alcohol Studies, PO Box 30, Helsinki, Finland, 00271, kari.poikolainen@thl.fi  
**Institution:** Poikolainen, Kari: Finnish Foundation for Alcohol Studies, Helsinki, Finland  
**Language:** English  
**Abstract:** Previous studies have discussed whether low or high level of alcohol response is a risk factor for alcohol dependence. However, these findings are based on physiological and subjective measurements in the laboratory. Such findings are subject to high intra- and inter individual variability and thus associations may be brought about by randomness. I studied 512 subjects from a representative community sample and 167 consecutive hospital patients with alcohol dependence. Stimulation by alcohol correlated negatively with the number of cigarettes smoked daily. In multivariate regression analysis, self reported stimulation by alcohol was negatively related to the number of cigarettes smoked daily, age, and alcohol intake. The analysis suggests that the average person smoking 40 cigarettes a day will experience 20% less stimulation from drinking alcohol compared with a nonsmoker. Smoking may explain why sons of alcoholic fathers have been found to have lower response to alcohol and higher risk for alcoholism than other men. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Country of Publication:** HOLDER: The Research Society on Alcoholism; YEAR: 2010  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Alcoholism](#)  
[\\*Drug Dependency](#)  
[\\*Risk Factors](#)  
 Alcohols  
**Source:** PsycINFO

#### 55. Recommendations on maintaining limits on days and hours of sale of alcoholic beverages to prevent excessive alcohol consumption and related harms.

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**Citation:** American Journal of Preventive Medicine, December 2010, vol./is. 39/6(605-606), 0749-3797 (Dec 2010)  
**Author(s):** Task Force on Community Preventive Services  
**Corporate/Institutional Author:** Task Force on Community Preventive Services  
**Language:** English  
**Abstract:** In recognition of the need to reduce the negative effects of alcohol use in the U.S., the Task Force on Community Preventive Services (Task Force) has issued three previous

recommendations to reduce excessive alcohol use (Regulation of Alcohol Outlet Density; Increasing Alcohol Taxes; and Enhanced Enforcement of Laws Prohibiting Sales to Minors; and nine recommendations to reduce alcoholimpaired driving. In this report, two new recommendations from the Task Force are presented: Maintaining Limits on Days of Sale, and Maintaining Limits on Hours of Sale. These recommendations are intended to prevent excessive alcohol consumption and related harm by regulating access to alcohol. On the basis of strong evidence of effectiveness, the Task Force recommends maintaining existing limits on the days on which alcoholic beverages are sold as one strategy for the prevention of excessive alcohol consumption and related harms. On the basis of sufficient evidence of effectiveness, the Task Force recommends maintaining existing limits on the hours during which alcoholic beverages are sold at on-premises outlets as another strategy for preventing alcohol-related harms. Laws and/or ordinances govern the hours and days during which alcoholic beverages can be sold. In some communities or municipalities. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

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

**Subject Headings:** [\\*Alcohol Abuse](#)  
[\\*Alcoholic Beverages](#)  
[\\*Alcoholism](#)  
[\\*Treatment Effectiveness Evaluation](#)

**Source:** PsycINFO

#### 56. Effectiveness of policies restricting hours of alcohol sales in preventing excessive alcohol consumption and related harms.

**Citation:** American Journal of Preventive Medicine, December 2010, vol./is. 39/6(590-604), 0749-3797 (Dec 2010)

**Author(s):** Hahn, Robert A; Kuzara, Jennifer L; Elder, Randy; Brewer, Robert; Chattopadhyay, Sajal; Fielding, Jonathan; Naimi, Timothy S; Toomey, Traci; Middleton, Jennifer Cook; Lawrence, Briana; Task Force on Community Preventive Services

**Correspondence Address:** Hahn, Robert A.: Community Guide Branch, Epidemiology and Analysis Program Office, CDC, 1600 Clifton Road, Mailstop E-69, Atlanta, GA, US, 30333, rhahn@cdc.gov

**Corporate/Institutional Author:** Task Force on Community Preventive Services

**Institution:** Hahn, Robert A.: Community Guide Branch, Epidemiology and Analysis Program Office, CDC, Atlanta, GA, US

**Language:** English

**Abstract:** Local, state, and national policies that limit the hours that alcoholic beverages may be available for sale might be a means of reducing excessive alcohol consumption and related harms. The methods of the Guide to Community Preventive Services were used to synthesize scientific evidence on the effectiveness of such policies. All of the studies included in this review assessed the effects of increasing hours of sale in on-premises settings (in which alcoholic beverages are consumed where purchased) in high-income nations. None of the studies was conducted in the U.S. The review team's initial assessment of this evidence suggested that changes of less than 2 hours were unlikely to significantly affect excessive alcohol consumption and related harms; to explore this hypothesis, studies assessing the effects of changing hours of sale by less than 2 hours and by 2 or more hours were assessed separately. There was sufficient evidence in ten qualifying studies to conclude that increasing hours of sale by 2 or more hours increases alcohol-related harms. Thus, disallowing extensions of hours of alcohol sales by 2 or more should be expected to prevent alcohol-related harms, while policies decreasing hours of sale by 2 hours or more at on-premises alcohol outlets may be an effective strategy for preventing alcohol-related harms. The evidence from six qualifying studies was insufficient to determine whether increasing hours of sale by less than 2 hours increases excessive alcohol consumption and related harms. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Treatment Effectiveness Evaluation](#)  
[\\*Health Care Policy](#)  
[Alcohol Abuse](#)  
[Alcoholism](#)  
[Health Care Services](#)

**Source:** PsycINFO

### 57. Effectiveness of policies maintaining or restricting days of alcohol sales on excessive alcohol consumption and related harms.

**Citation:** American Journal of Preventive Medicine, December 2010, vol./is. 39/6(575-589), 0749-3797 (Dec 2010)

**Author(s):** Middleton, Jennifer Cook; Hahn, Robert A; Kuzara, Jennifer L; Elder, Randy; Brewer, Robert; Chattopadhyay, Sajal; Fielding, Jonathan; Naimi, Timothy S; Toomey, Traci; Lawrence, Briana; Task Force on Community Preventive Services

**Correspondence Address:** Hahn, Robert A.: Community Guide Branch, CDC, 1600 Clifton Road, Mailstop E-69, Atlanta, GA, US, 30333, rhahn@cdc.gov

**Corporate/Institutional Author:** Task Force on Community Preventive Services

**Institution:** Middleton, Jennifer Cook: Community Guide Branch, Epidemiology and Analysis Program Office, CDC, Atlanta, GA, US

**Language:** English

**Abstract:** Local, state, and national laws and policies that limit the days of the week on which alcoholic beverages may be sold may be a means of reducing excessive alcohol consumption and related harms. The methods of the Guide to Community Preventive Services were used to synthesize scientific evidence on the effectiveness for preventing excessive alcohol consumption and related harms of laws and policies maintaining or reducing the days when alcoholic beverages may be sold. Outcomes assessed in 14 studies that met qualifying criteria were excessive alcohol consumption and alcohol-related harms, including motor vehicle injuries and deaths, violence-related and other injuries, and health conditions. Qualifying studies assessed the effects of changes in days of sale in both on-premises settings (at which alcoholic beverages are consumed where purchased) and off-premises settings (at which alcoholic beverages may not be consumed where purchased). Eleven studies assessed the effects of adding days of sale, and three studies assessed the effects of imposing a ban on sales on a given weekend day. The evidence from these studies indicated that increasing days of sale leads to increases in excessive alcohol consumption and alcohol-related harms and that reducing the number of days that alcoholic beverages are sold generally decreases alcohol-related harms. Based on these findings, when the expansion of days of sale is being considered, laws and policies maintaining the number of days of the week that alcoholic beverages are sold at on- and off-premises outlets in local, state, and national jurisdictions are effective public health strategies for preventing excessive alcohol consumption and related harms. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcohol Abuse](#)  
[\\*Alcoholism](#)  
[\\*Treatment Effectiveness Evaluation](#)  
[\\*Health Care Policy](#)

**Source:** PsycINFO

### 58. Loss of rhythm as a time disorder.

**Original Title:** Rhythmusverlust als Zeitkrankheit.

**Citation:** Musiktherapeutische Umschau, 2010, vol./is. 31/3(241-250), 0172-5505 (2010)

**Author(s):** Hegi, Fritz

**Correspondence Address:** Hegi, Fritz: Zurcher Hochschule der Kunste ZHDK, Alte Kalchbuhlstr. 23a, Zurich, Germany, CH-8038, fritz.hegi@bluewin.ch

**Institution:** Hegi, Fritz: Zurcher Hochschule der Kunste ZHDK, Zurich, Germany

**Language:** German

**Abstract:** Rhythm is crucial to a successfully organised life. When measured steps are chronically passed over and polarities occur, stress is the consequence. The four rhythmic energy fields of the components theory show differentiated methods of dealing with addictive acceleration and shortage of time. The examples from practice reveal how intrinsic rhythms can be discovered. The magic words are the circle, serenity and the dance through life. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Vandenhoeck & Ruprecht GmbH & Co. KG, Gottingen; YEAR: 2010

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

**Subject Headings:** [\\*Dance](#)  
[\\*Rhythm](#)  
[Stress](#)

**Source:** PsycINFO

#### 59. Replicated association of the NR4A3 gene with smoking behaviour in schizophrenia and in bipolar disorder.

**Citation:** Genes, Brain & Behavior, November 2010, vol./is. 9/8(910-917), 1601-1848;1601-183X (Nov 2010)

**Author(s):** Novak, G; Zai, C. C; Mirkhani, M; Shaikh, S; Vincent, J. B; Meltzer, H; Lieberman, J. A; Strauss, J; Levesque, D; Kennedy, J. L; Le Foll, B

**Correspondence Address:** Kennedy, J. L.: CAMH, 250 College Street R-30, Toronto, ON, Canada, M5T 1R8, james\_kennedy@camh.net

**Institution:** Novak, G.: Neuroscience Research Department, Centre for Addiction and Mental Health, University of Toronto, Toronto, ON, Canada

**Language:** English

**Abstract:** Schizophrenia and bipolar disorder are associated with dopamine neurotransmission and show high comorbidity with tobacco dependence. Recent evidence indicates that the family of the NR4A orphan nuclear receptors, which are expressed in dopamine neurons and in dopaminergic brain areas, may play a role in dopamine-mediated effects. We have, therefore, analysed the association of six single nucleotide polymorphisms (SNPs) within the three genes belonging to the NR4A orphan nuclear receptor family, NR4A1 (rs2603751, rs2701124), NR4A2 (rs12803, rs834835) and NR4A3 (rs1131339, rs1405209), with the degree of smoking in a sample of 204 unrelated schizophrenia patients, which included 126 smokers and 78 non-smokers. SNPs within the NR4A3 gene (rs1131339 and rs1405209) were significantly associated with heavy smoking in this cohort, using a stepwise analysis of the escalated number of cigarettes smoked per day ( $P = 0.008$  and  $0.006$ , respectively; satisfying the Nyholt significance threshold of  $0.009$ , an adjustment for multiple testing). We then repeated the association analysis of the NR4A3 markers (rs1131339 and rs1405209) in a larger cohort of 319 patients with bipolar disorder, which included 167 smokers and 152 non-smokers. We have replicated the positive association with smoking of the NR4A3 SNP rs1131339 in this group ( $P = 0.04$ ), providing an important confirmation of the involvement of the NR4A3 gene in nicotine addiction in patients with mental health disease, a population significantly at risk for nicotine addiction. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The Authors--Blackwell Publishing Ltd and International Behavioural and Neural Genetics Society; YEAR: 2010

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

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

\*Dopamine  
 \*Genes  
 \*Schizophrenia  
 \*Tobacco Smoking

**Source:** PsycINFO

**60. Cytochrome P450-2D6 extensive metabolizers are more vulnerable to methamphetamine-associated neurocognitive impairment: Preliminary findings.**

**Citation:** Journal of the International Neuropsychological Society, September 2010, vol./is. 16/5(890-901), 1355-6177;1469-7661 (Sep 2010)

**Author(s):** Cherner, Mariana; Bousman, Chad; Everall, Ian; Barron, Daniel; Letendre, Scott; Vaida, Florin; Atkinson, J. Hampton; Heaton, Robert; Grant, Igor; The HNRC Group

**Correspondence Address:** Cherner, Mariana: Department of Psychiatry, University of California, 9500 Gilman Drive, La Jolla, CA, US, 92093-0847, mcherner@ucsd.edu

**Corporate/Institutional Author:** The HNRC Group

**Institution:** Cherner, Mariana: Department of Psychiatry, University of California San Diego, La Jolla, CA, US

**Language:** English

**Abstract:** While neuropsychological deficits are evident among methamphetamine (meth) addicts, they are often unrelated to meth exposure parameters such as lifetime consumption and length of abstinence. The notion that some meth users develop neuropsychological impairments while others with similar drug exposure do not, suggests that there may be individual differences in vulnerability to the neurotoxic effects of meth. One source of differential vulnerability could come from genotypic variability in metabolic clearance of meth, dependent on the activity of cytochrome P450-2D6 (CYP2D6). We compared neuropsychological performance in 52 individuals with a history of meth dependence according with their CYP2D6 phenotype. All were free of HIV or hepatitis C infection and did not meet dependence criteria for other substances. Extensive metabolizers showed worse overall neuropsychological performance and were three times as likely to be cognitively impaired as intermediate/poor metabolizers. Groups did not differ in their demographic or meth use characteristics, nor did they evidence differences in mood disorder or other substance use. This preliminary study is the first to suggest that efficient meth metabolism is associated with worse neurocognitive outcomes in humans, and implicates the products of oxidative metabolism of meth as a possible source of brain injury. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Conference Information:** International Neuropsychological Society Mid-Year Meeting. Jul, 2008. Buenos Aires. Argentina. Portions of the information contained in the manuscript have been previously presented at the aforementioned conference and the XVth World Congress on Psychiatric Genetics Oct 2008, Osaka, Japan.

**Country of Publication:** HOLDER: INS; YEAR: 2010

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

**Subject Headings:** \*Cognitive Impairment  
 \*Cytochrome Oxidase  
 \*Drug Dependency  
 \*Methamphetamine  
 \*Neurocognition  
 Individual Differences  
 Neuropsychological Assessment  
 Neurotoxicity  
 Performance

**Source:** PsycINFO

**61. Addictions and strategic therapy.**

**Original Title:** Addictions et therapie strategique.

**Citation:** Alcoologie et Addictologie, September 2010, vol./is. 32/3(249-254), 1620-4522 (Sep 2010)

**Author(s):** Lambrette, Gregory

**Correspondence Address:** Lambrette, Gregory: Centre Emmanuel, Hellef fur drogenofhangege Jugendleche an hir Familjen, NAEJF asbl, 1, rue du Fort Bourbon, Luxembourg, France, L-1249, gregorylambrette@hotmail.fr

**Institution:** Lambrette, Gregory: Centre Emmanuel, Hellef fur drogenofhangege Jugendleche an hir Familjen, Luxembourg, France

**Language:** French

**Abstract:** This article presents the mode of intervention specific to strategic therapy applied to the field of addictions. This approach is based on a different view of addictive behaviors to make them more accessible to change. Rather than based on the postulate of disease, strategic therapy describes addictions in terms of the patient's control of this behavior. This article describes the issues of abstinence and management of consumption. Strategic therapy is based on a problem-solving methodology. The concepts of problem, proposed solution, therapeutic partner and objective are discussed. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Drug Rehabilitation](#)  
[\\*Strategies](#)  
[Problem Solving](#)  
[Psychotherapy](#)

**Source:** PsycINFO

## 62. Study of the at work experience in patients hospitalized for alcohol withdrawal.

**Original Title:** Enquete sur le vecu au travail chez des patients hospitalises pour sevrage alcoolique.

**Citation:** Alcoologie et Addictologie, September 2010, vol./is. 32/3(241-248), 1620-4522 (Sep 2010)

**Author(s):** Prevost, Cecile; Dally, Sylvain

**Correspondence Address:** Prevost, Cecile: PHC, Service d'Addictologie, Hopital de Saint-Cloud, 3, Place de Silly, Saint-Cloud, France, F-92210, cecilemadeprevost@yahoo.fr

**Institution:** Prevost, Cecile: PHC, Service d'Addictologie, Hopital de Saint-Cloud, Saint-Cloud, France

**Language:** French

**Abstract:** The objective of our investigation was to assess the experience of at work situation in patients hospitalized for alcohol withdrawal. Methods: our inquest was conducted for eight months in an internal medicine department in Paris, France, and has included patients hospitalized for weaning alcohol in a work situation. We have collected the appreciation of their experiences at work by contracting three questionnaires, one on stress, another one on work suffering measurement and the last one on their quality of life. We also asked them if their consumption was work-related. Result: our sample was formed of 50 patients including 36 men and 14 women. The men had a 15-year alcohol intake, an estimated life quality of 5 on 10, work suffering of 8 on 20 and a stress level of 21 on 36. 47% related consumption related to labor. Women had an average of 13-year alcohol intake, a quality of life of 4.7 on 10, work suffering of 9 on 20 and a stress level of 21 on 36. 65% reported consumption related to labor. We could find a significant difference for work suffering and consumption of alcohol ( $p < 0,01$ ) among males but not among women. We have also found a difference in women between a high stress level and suffering at work. Other factors are certainly involved. Discussion: this study revealed a relationship between alcohol and work stress and perceived life quality. In

order to understand the mechanisms involved in this situation, further studies should be undertaken. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcohol Withdrawal](#)  
[\\*Alcoholism](#)  
[\\*Hospitalized Patients](#)  
[\\*Job Experience Level](#)

**Source:** PsycINFO

### 63. How does change occur in alcohol-dependent subjects? One centre's experience.

**Original Title:** Comment le changement s'opere-t-il chez l'alcoololo-dependant? Un recit d'experience.

**Citation:** Alcoolologie et Addictologie, September 2010, vol./is. 32/3(237-240), 1620-4522 (Sep 2010)

**Author(s):** Wallenhorst, Thomas; Cornet, Jacques; Liechti, Nadia

**Correspondence Address:** Wallenhorst, Thomas: Centre Hospitalier Robert Morlevat, 3, avenue Pasteur, Semur-en-Auxois, France, F-21140, thomas.wallenhorst@orange.fr

**Institution:** Wallenhorst, Thomas: Centre Hospitalier Robert Morlevat, Semur-en-Auxois, France

**Language:** French

**Abstract:** Medical teams sometimes lose hope when faced with the difficulty of motivating patients, but healthcare professionals can play an essential role by becoming an actor of change. The first step is the appointment made by the patient, which provides an occasion to initiate a relationship with the patient. This initial contact must relieve the shame associated with the drinking problem and must try to give the patient a desire for change. When the patient requests withdrawal, it must be conducted in the local establishment in which the healthcare professional works, as this will strengthen the relationship of confidence, while sharing it with other healthcare professionals and members of patient associations. A talk group is proposed. It is important for the patient to realize that other people believe in him/her so that he/she can believe in himself. The talk group is an opportunity to further the patient's self knowledge; the patient derives a direct benefit from these groups, but also helps others by his/her own testimony. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Behavior Change](#)  
[\\*Drug Rehabilitation](#)  
[\\*Psychotherapeutic Processes](#)

**Source:** PsycINFO

### 64. Prisons in Ile-de-France in 2009: drug users and drug uses.

**Original Title:** Les prisons franciliennes en 2009: Usagers et usages de drogues.

**Citation:** Alcoolologie et Addictologie, September 2010, vol./is. 32/3(227-236), 1620-4522 (Sep 2010)

**Author(s):** Halfen, Sandrine; Michels, M. David; Gremy, Isabelle

**Correspondence Address:** Halfen, Sandrine: Observatoire Regional de sante ORS, d'Ile-de-France, 21-23, rue Miollis, Paris, France, F-75015, s.halfen@ors-idf.org

**Institution:** Halfen, Sandrine: Observatoire Regional de sante (ORS), Paris, France

**Language:** French

**Abstract:** This article examines the modalities of organization of substance abuse management in prison and the way in which the prison environment tends to concentrate a high proportion of drug users, promoting substance use and high-risk practices. Method:

analyses were performed on data derived from various sources: review of the literature, available quantitative data, qualitative data derived from focus groups and task groups. Results: the analyses showed that the management of alcohol problems in prison has improved as a result of better professional training of the personnel involved. The availability of opioid substitution therapy is now satisfactory and continuity of this treatment on admission and on release from prison generally appears to be ensured. Prison nevertheless also predisposes to accentuation and/or initiation of substance use, due to illegal circulation of illicit substances or medicinal products, with a high risk of infection. Conclusion: on the basis of these analyses, health prevention and education in prison must be improved, health and social management should be conducted in parallel, the management of addictions should be adapted and diversified, and the recording of epidemiological data concerning prisoners' health should be improved. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[\\*Environment](#)  
[\\*Prisons](#)  
[\\*Social Environments](#)  
[Disease Management](#)  
[Prisoners](#)

**Source:** PsycINFO

#### 65. Adolescents and addictions.

**Original Title:** Les adolescents face aux addictions.

**Citation:** Alcoolologie et Addictologie, September 2010, vol./is. 32/3(221-226), 1620-4522 (Sep 2010)

**Author(s):** Guillou-Landreat, Morgane; Grall-Bronnec, Marie; Venisse, Jean-Luc

**Correspondence Address:** Guillou-Landreat, Morgane: Service d'Addictologie, Centre Hospitalier des Pays de Morlaix, 15, rue Kersaint Gilly, Morlaix, France, F-29600, mguillou@ch-morlaix.fr

**Institution:** Guillou-Landreat, Morgane: Service d'Addictologie, Centre Hospitalier des Pays de Morlaix, Morlaix, France

**Language:** French

**Abstract:** Adolescence is a period of initiation of psychoactive substance use. It is also a period during which problems related to psychoactive substance use can emerge. The authors conducted a review of the literature via Medline, using "adolescent" and "substance related disorders" as key words. This article describes the specific risk factors of adolescence predisposing to initiation of psychoactive substance use and repetition of this use. The screening tools available to healthcare professionals working with adolescents are also described. A better knowledge of these specific factors allows a better individual and collective understanding of addictions in adolescents. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Adolescent Psychology](#)  
[\\*Drug Abuse](#)  
[\\*Risk Factors](#)

**Source:** PsycINFO

#### 66. Disorder of eating behaviour and addiction. Coping strategies of close relatives.

**Original Title:** Trouble du comportement alimentaire et addiction. Les strategies de coping des proches.

**Citation:** Alcoolologie et Addictologie, September 2010, vol./is. 32/3(197-208), 1620-4522 (Sep 2010)

**Author(s):** Delbaere-Blervacque, Christine; Anne Courbasson, Christine Marie; Antoine, Corinne

**Correspondence Address:** Delbaere-Blervacque, Christine: Institut d'Enseignement a Distance, Universite Paris VIII, 2, rue de la Liberte, Saint-Denis, France, F-93526, Cedex 02, c.delbaere.blervacque@gmail.com

**Institution:** Delbaere-Blervacque, Christine: Institut d'Enseignement a Distance, Universite Paris VIII, Saint-Denis, France

**Language:** French

**Abstract:** The purpose of this research was to provide an overview of coping strategies developed by close relatives faced with addiction problems and to determine whether some strategies are more effective than others to limit the distress experienced by relatives. Method: this qualitative study concerned 19 close relatives of adults with a disorder of eating behaviour and drug addiction and/or alcoholism. Interviews of participants, conducted by using a semi-directed interview guide, were recorded and transcribed word for word, before being submitted to thematic content analysis. Results: only two types of coping strategies are used by all close relatives without exception. The first, problem-centered strategy consists of taking actions to modify the situation, and the second, emotion-centered strategy consists of hoping for cure. This analysis also demonstrated the high level of distress experienced by close relatives and suggests a possible link between a lower level of distress and acceptance of addiction in terms of its uncontrollable duration and prognosis. Discussion: the authors discuss this issue of a more effective coping strategy, which consists of accepting the long-term dimension of the disorders and which involves elaboration of loss and bereavement for the patient before addiction. This bereavement process constitutes a middle road to involvement of relatives in treatment, between systematic exclusion and systematic inclusion. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Coping Behavior](#)  
[\\*Distress](#)  
[\\*Eating Disorders](#)  
[\\*Family Relations](#)

**Source:** PsycINFO

#### **67. Alcoholism and attribution of interpersonal intentions on the basis of emotional facial expressions: A pilot study.**

**Original Title:** Alcoolisme et attribution d'intentions interpersonnelles sur base d'expressions faciales emotionnelles: Etude pilote.

**Citation:** Revue Francophone de Clinique Comportementale et Cognitive, September 2010, vol./is. 15/3(p1-p7), 1375-6249 (Sep 2010)

**Author(s):** Dethier, Marie; Volkova, Alessia; Neumann, Aurore; Blairy, Sylvie

**Correspondence Address:** Dethier, Marie: Universite de Liege, Service de Psychologie Clinique Comportementale et Cognitive., B33. Boulevard du Rectoral, 3., Liege4000, Belgium, Marie.Dethier@ulg.ac.be

**Institution:** Dethier, Marie: Universite de Liege, Departement des Sciences Cognitives, Liege, Belgium

**Language:** French

**Abstract:** The ability to understand the emotional states of others is necessary in order to develop high quality interpersonal relationships. Alcohol-dependents (AD) display interpretative errors when decoding emotional facial expressions (EFE). EFE communicate information not only regarding emotional states but also regarding interpersonal intentions. The purpose of the present study was to investigate whether, exposed to EFE, AD differ from healthy individuals in attributions of interpersonal intentions of dominance and affiliation. The purpose of dominance is to control the environment and the purpose of affiliation is to maintain the relationship with the object. In the present study, twenty AD and 20

healthy subjects attributed intentions of dominance and affiliation to 12 faces portraying joy, anger or sadness. Results revealed that AD differ from healthy individual in attribution of dominance but not of affiliation. AD make mistakes when decoding expressed emotions. The present study suggests that, compared to healthy subjects, they also tend to anticipate, in a biased way, interpersonal intentions. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Attribution](#)  
[\\*Emotional States](#)  
[\\*Facial Expressions](#)  
[\\*Intention](#)  
[Interpersonal Relationships](#)

**Source:** PsycINFO

#### 68. Context and craving for chocolate: Extinction and renewal in health-related behavior.

**Original Title:** Context en craving voor chocolade: extinctie en renewal in gezondheidsgerelateerd gedrag.

**Citation:** Gedragstherapie, September 2010, vol./is. 43/3(225-232), 0167-7454 (Sep 2010)

**Author(s):** Gucht, Dinska Van; Vansteenwegen, Debora; Van den Bergh, Omer; Beckers, Tom

**Correspondence Address:** Gucht, Dinska Van: Centrum voor Leerpsychologie en Experimentele Psychopathologie, Departement Psychologie K.U. Leuven, Tiensestraat 102, Leuven, Belgium, 3000, [dinska.vangucht@psy.kuleuven.be](mailto:dinska.vangucht@psy.kuleuven.be)

**Institution:** Gucht, Dinska Van: Departement Psychologie, K.U. Leuven, Leuven, Belgium

**Language:** Dutch

**Abstract:** In this article we provide a summary of previous research (Van Gucht, Vansteenwegen, Beckers, & Van den Bergh, 2008b; Van Gucht, Vansteenwegen, Van den Bergh & Beckers, 2008c) in which we developed a conditioning paradigm that allows to systematically investigate the acquisition, extinction and return of conditioned appetitive responses in humans with the goal to minimize relapse in disturbed eating behavior and addictive behavior. In addition to the assessment of craving, we also included other dependent measures, such as us expectancy and an indirect behavioral measure of approach and avoiding tendencies. Several experiments provided surprising differences between these measures. We found solid evidence for renewal in terms of expectancy and automatic approach behavior. However, craving was apparently not affected by an extinction procedure even though extinction did effectively reduce the other two conditioned responses. Thus, relapse cannot only be promoted by a return of anticipatory reactions due to a context switch (e.g., renewal in the expectancy and behavioral measure) but also by lingering craving. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Craving](#)  
[\\*Eating Disorders](#)  
[Extinction \(Learning\)](#)

**Source:** PsycINFO

#### 69. Psychotherapy in treating the elderly.

**Original Title:** Psychotherapie alter menschen.

**Citation:** Verhaltenstherapie & Psychosoziale Praxis, 2010, vol./is. 42/3(677-694), 0721-7234 (2010)

**Author(s):** Hirsch, Rolf Dieter

**Correspondence Address:** Hirsch, Rolf Dieter: Abteilung für Gerontopsychiatrie und -Psychotherapie, LVR-Klinik Bonn, Kaiser-Karl-Ring 20, Bonn, Germany, 53111, r.d.hirsch@t-online.de

**Institution:** Hirsch, Rolf Dieter: Lehrstuhl für Psychogerontologie, Universität Erlangen-Nürnberg, Erlangen, Germany

**Language:** German

**Abstract:** Psychotherapy knows no age limits--there is evidence to suggest that it can be a useful, necessary and promising form of treatment for old and young alike. Yet unfortunately, it is only gradually that the barriers and prejudices against treating older people in this way are dissolving and bringing to light the fact that established psychotherapeutic methods can be applied without reductionist limitations. Given appropriate specifications, it is possible to apply both basic psychotherapeutic procedures rooted in psychoanalytic theory and those based on learning theory in treating the elderly, provided they are used in a selective, competent and systematic manner. This article presents psychotherapeutic methods for the treatment of older people with dementia, depression and addictions. It is time to break down the prejudices, discrimination and misguided beliefs surrounding the needs of the older generation, in order to ensure these individuals are guaranteed the level of treatment already received by younger patients as a matter of course. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Aging](#)  
[\\*Psychotherapeutic Techniques](#)  
[\\*Psychotherapy](#)  
[Dementia](#)  
[Drug Addiction](#)  
[Major Depression](#)

**Source:** PsycINFO

**70. Dangerous and addictive alcohol consumption in old age: Prevalence, treatment services and therapeutic approaches--A survey of the current state of research.**

**Original Title:** Riskanter und abhängiger Alkoholkonsum bei älteren Menschen: Prävalenz, Versorgungsstruktur und Behandlungsansätze--Ein Überblick zum Stand der Forschung.

**Citation:** Verhaltenstherapie & Psychosoziale Praxis, 2010, vol./is. 42/3(661-675), 0721-7234 (2010)

**Author(s):** Hoff, Tanja; Klein, Michael

**Correspondence Address:** Hoff, Tanja: Deutsches Institut für Sucht- und Präventionsforschung, Katholischen Hochschule NRW, Worthstr. 10, Köln, Germany, 50668

**Institution:** Hoff, Tanja: Katholischen Hochschule NRW, Köln (KatHO NRW), Köln, Germany

**Language:** German

**Abstract:** It is estimated that in Germany, the level of alcohol consumption of around 4.7% of individuals aged 50 to 59 years old and 3.3% of 60- to 64-year-olds can be classed as dangerous or even addictive--and these figures are expected to rise further in coming years. The increase is thought to be caused by both demographic change in general and changes in socialisation strategies among the older generation. Until now, however, the prevalence of alcohol-related problems among this age cohort has often been underestimated due to a lack of appropriate methods of diagnosis and assessment. Equally, attempts to extend treatment services to older people with substance abuse problems appear to have been rather unsuccessful so far--yet in cases where elderly individuals have undergone such treatment, it has proved effective. In order to generate sustainable improvements in this area, it is not completely new treatment methods that are required, but rather the modification of therapeutic concepts and approaches within existing diagnosis-specific therapeutic frameworks to suit the needs of the older generation. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Aging](#)  
[\\*Alcohol Abuse](#)  
[\\*Alcohol Rehabilitation](#)  
[\\*Alcoholism](#)  
[\\*Epidemiology](#)

**Source:** PsycINFO

### 71. Circumstances for elderly drug addicts living in Hamburg.

**Original Title:** Lebenslagen von alteren drogenabhängigen in Hamburg.

**Citation:** Verhaltenstherapie & Psychosoziale Praxis, 2010, vol./is. 42/3(637-646), 0721-7234 (2010)

**Author(s):** Zurhold, Heike; Degkwitz, Peter; Martens, Marcus

**Correspondence Address:** Zurhold, Heike: Zentrum für Interdisziplinäre Suchtforschung, Universität Hamburg - ZIS, Klinik für Psychiatrie und Psychotherapie des UKE, Martinistrasse 52, Hamburg, Germany, 20246, zurhold@uke.de

**Institution:** Zurhold, Heike: Zentrum für Interdisziplinäre Suchtforschung, Universität Hamburg - ZIS, Klinik für Psychiatrie und Psychotherapie des UKE, Hamburg, Germany

**Language:** German

**Abstract:** The proportion of drug users in Germany aged 45 and over is steadily increasing, with harm reduction services having contributed significantly to increasing the survival chances of drug-addicted individuals. In order to investigate the circumstances affecting this group, we analysed data from BADO, a regional association in charge of monitoring drug addiction services in Hamburg, according to age group, and also carried out systematic standardised interviews with elderly drug addicts. The results provide a detailed picture of the situation of elderly drug addicts that contrasts with that of younger addicts, with higher burdens in some areas (e.g. health) and lower burdens in others (e.g. law enforcement measures). (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Age Differences](#)  
[\\*Aging](#)  
[\\*Drug Addiction](#)  
[\\*Drug Rehabilitation](#)  
[\\*Harm Reduction](#)

**Source:** PsycINFO

### 72. Maintenance treatments for older opiate consumers.

**Original Title:** Altere opiatkonsumentInnen in substitutionsbehandlung.

**Citation:** Verhaltenstherapie & Psychosoziale Praxis, 2010, vol./is. 42/3(611-623), 0721-7234 (2010)

**Author(s):** Dursteler-MacFarland, Kenneth M; Schmid, Otto; Vogel, Marc

**Correspondence Address:** Dursteler-MacFarland, Kenneth M.: Universitäre Psychiatrische Kliniken Basel, Wilhelm-Klein-Str. 27, Basel, Switzerland, 4012, kenneth.duersteler@upkbs.ch

**Institution:** Dursteler-MacFarland, Kenneth M.: Universitären Psychiatrischen Kliniken Basel, Basel, Switzerland

**Language:** German

**Abstract:** Maintenance treatments with methadone or other long-acting opioids are internationally accepted as effective, well-tolerated and the treatment of choice for opiate dependence, a serious chronic condition that comes with a multitude of health and psychosocial risks. It is due to the effectiveness of opioid maintenance that the population of older maintenance

patients continues to grow rapidly. Many of these patients have aged prematurely as a result of a history of long-standing substance use and associated risk factors, and often suffer from age-related chronic diseases. However, to date there has been almost no research addressing the specific problems and treatment needs of older maintenance patients, and within the healthcare system, shortcomings and resistance are not uncommon. From a medical perspective, older maintenance patients should be accorded treatment appropriate to their age and health problems, just like any other patients--meaning opioids should be considered as a medication for the well-being of these patients without reservation. Nonetheless, the aging maintenance population will pose challenges for treatment providers and the entire health care system in the near term. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Drug Addiction](#)  
[\\*Maintenance Therapy](#)  
[\\*Methadone Maintenance](#)  
[\\*Opiates](#)

**Source:** PsycINFO

### 73. Consumption of alcohol, cigarettes, cannabis products and other illegal drugs with age: Maturing out of addiction, into it, or carrying on as usual?

**Original Title:** Alter und alkohol, zigaretten, cannabisprodukte und andere illegale drogen: Herauswachsen aus der sucht, weitermachen wie gewohnt oder hineinwachsen in die sucht?

**Citation:** Verhaltenstherapie & Psychosoziale Praxis, 2010, vol./is. 42/3(593-609), 0721-7234 (2010)

**Author(s):** Vogt, Irmgard

**Correspondence Address:** Vogt, Irmgard: Institut fur Suchtforschung Frankfurt, FH Frankfurt am Main, Nibelungenplatz 3, Frankfurt a. M., Germany, 60318, vogt@fb4.fh-frankfurt.de

**Institution:** Vogt, Irmgard: Institut fur Suchtforschung Frankfurt, FH Frankfurt am Main, Frankfurt a. M., Germany

**Language:** German

**Abstract:** Psychoactive substances such as alcoholic beverages, cigarettes, cannabis products and opiates are widely used by young people. However, as shown in this study, consumption patterns do not simply change automatically with age, but rather follow specific trends. In 1962, Winick was one of the first to draw attention to this, identifying the process he called 'maturing out of addiction', which he claimed most frequently occurred during an individual's third decade of life. Winick's theory is examined in this study with respect to the psychoactive substances mentioned above. The results suggest that the hypothesis of 'maturing out of addiction' certainly holds water to some extent, but must be further differentiated: in addition to those who mature out of addiction and those who continue, there is also a third group of men and women who, over their lifespan, sustain controlled drinking of alcoholic beverages in moderation. Furthermore, it can also be assumed that some people mature into addiction in later life. The study attempts to corroborate the existence of these four groups, before going on to analyse the public discourse of actors involved in public health, prevention and drug treatment for psychoactive substance use in middle and old age. The outlook is rather bleak: experts agree on the dangers of substance use in old age and underline the associated health problems and costs, without mention or discussion of any positive aspects at all. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Aging](#)  
[\\*Drug Addiction](#)  
[\\*Drug Usage](#)  
[\\*Life Span](#)  
[Alcohol Drinking Patterns](#)

Cannabis  
Tobacco Smoking

Source: PsycINFO

#### 74. Validation of the Psychiatric Diagnostic Screening Questionnaire (PDSQ) in a Spanish sample of alcoholic patients.

**Original Title:** Validacion del Psychiatric Diagnostic Screening Questionnaire (PDSQ) en una muestra de pacientes alcoholicos espanoles.

**Citation:** Adicciones, 2010, vol./is. 22/3(199-206), 0214-4840 (2010)

**Author(s):** Perez Gavez, Bartolome; Fernandez, Lorena Garcia; De Vicente Manzanaroa, Ma Pura; Valenzuela, Ma Angustias Oliveras

**Correspondence Address:** Perez Gavez, Bartolome: Hospital Universitario de San Juan, Servicio de Psiquiatria - Unidad de Alcoholologia, Ctra. Alicante-Valencia, s/n, San Juan, Spain, 03550, bperezgalvez@ono.com

**Institution:** Perez Gavez, Bartolome: Unidad de Alcoholologia, Hospital Universitario de San Juan, San Juan, Spain

**Language:** Spanish

**Abstract:** Objective: This study evaluates the psychometric properties of the Psychiatric Diagnostic Screening Questionnaire (PDSQ) in alcohol-dependent Spanish population as a means of detecting psychiatric comorbidity. Methods: The PDSQ (Zimmerman, 2001) is a self-administered questionnaire with 125 items which can be applied in just 15 minutes, enabling rapid and effective screening of the psychiatric disorders (Axis I) most commonly found among substance abusers. After linguistic adaptation (translation/back-translation) and verification of its content validity, the PDSQ was administered to 156 alcohol-dependent patients (DSM-IV criteria; women = 36%), treated consecutively in an alcohol-disorders treatment setting. Its psychometric properties (reliability and validity) were determined, applying the DSM-IV criteria as a "gold standard", by means of SCID interview. Results: Using the original cut-off points, the PDSQ showed excellent internal reliability ( $\alpha = 0.68-0.96$ ) and diagnostic validity, with mean sensitivity = 99.6% (range: 96.6%-100%), specificity = 69.5% (range: 51.9%-94.6%) and NPV = 99.8% (range: 98.6%-100%). Diagnostic efficiency with the original cut-off points was 73.2%, rising to 91.6% using new cut-off points for certain scales, with a degree of agreement with DSM-IV criteria of  $\kappa = .303-.896$ . Conclusions: The PDSQ is a reliable and valid instrument for detecting psychiatric comorbidity in alcoholic individuals. Its psychometric properties and the added value of self-administration and short application time make it a recommended instrument for use in routine clinical settings. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** \*Alcoholism  
\*Mental Disorders  
\*Psychometrics  
\*Test Reliability  
\*Test Validity  
Comorbidity  
Diagnosis  
Patients  
Questionnaires  
Screening

Source: PsycINFO

#### 75. Assessing coping strategies in alcoholics: Comparison while controlling for personality disorders, cognitive impairment and benzodiazepine misuse.

**Original Title:** Estrategias de afrontamiento en enfermos alcoholicos. Diferencias segun el consumo de benzodiacepinas, los trastornos de la personalidad y el deterioro cognitivo.

**Citation:** Adicciones, 2010, vol./is. 22/3(191-198), 0214-4840 (2010)

**Author(s):** Monras, Miquel; Mondon, Silvia; Jou, Joan

**Correspondence Address:** Monras, Miquel: Unidad de Alcoholologia Hospital Clinico de Barcelona, Villarroel 170, Barcelona, Spain, 08036, mmonras@clinic.ub.es

**Institution:** Monras, Miquel: Unidad de Alcoholologia, Servicio de Psiquiatria, Institut de Neurociencies, Hospital Clinic de Barcelona, Barcelona, Spain

**Language:** Spanish

**Abstract:** Introduction: Better coping skills are related to greater capacity for dealing with stressful situations. This relationship could be relevant for the prevention of alcohol-misuse relapse. Relapse rate is higher among severe alcoholics. The current study examines whether this may be due to a lack of coping skills in those cases. The COPE (Coping Orientations to Problems Experienced) is a questionnaire used for assessing coping strategies. Method: COPE scores of 216 alcohol inpatients are compared while controlling for personality disorders (PDs), cognitive impairment (CI) and benzodiazepine misuse (BM). Results: Patients with PDs score higher on the scales of Humor, Venting emotions, Substance use and Use of instrumental support. However, there are no differences in COPE scores attributable to CI or BM. Conclusions: Alcoholics with Personality disorders use maladaptive coping strategies. Patients presenting CI or BM have low capacity for introspection and are unable to properly evaluate their own abilities, so that they tend to give a socially favorable but unrealistic image of themselves. Longitudinal studies are needed to evaluate the predictive validity of the coping skills before training alcoholics, who are especially difficult to assess due to their lower capacity for objective self-observation. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Benzodiazepines](#)  
[\\*Coping Behavior](#)  
[\\*Drug Abuse](#)  
[Cognitive Impairment](#)  
[Personality Disorders](#)

**Source:** PsycINFO

#### 76. A political history of federal mental health and addiction insurance parity.

**Citation:** Milbank Quarterly, September 2010, vol./is. 88/3(404-433), 0887-378X;1468-0009 (Sep 2010)

**Author(s):** Barry, Colleen L; Huskamp, Haiden A; Goldman, Howard H

**Correspondence Address:** Barry, Colleen L.: Johns Hopkins Bloomberg School of Public Health, 624 North Broadway, Room 403, Baltimore, MD, US, 21205, cbarry@jhsph.edu

**Institution:** Barry, Colleen L.: Johns Hopkins University, Baltimore, MD, US

**Language:** English

**Abstract:** Context: This article chronicles the political history of efforts by the U.S. Congress to enact a law requiring "parity" for mental health and addiction benefits and medical/surgical benefits in private health insurance. The goal of the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity (MHPAE) Act of 2008 is to eliminate differences in insurance coverage for behavioral health. Mental health and addiction treatment advocates have long viewed parity as a means of increasing fairness in the insurance market, whereas employers and insurers have opposed it because of concerns about its cost. The passage of this law is viewed as a legislative success by both consumer and provider advocates and the employer and insurance groups that fought against it for decades. Methods: Twenty-nine structured interviews were conducted with key informants in the federal parity debate, including members of Congress and their staff; lobbyists for consumer, provider, employer, and insurance groups; and other key

contacts. Historical documentation, academic research on the effects of parity regulations, and public comment letters submitted to the U.S. Departments of Labor, Health and Human Services, and Treasury before the release of federal guidance also were examined. Findings: Three factors were instrumental to the passage of this law: the emergence of new evidence regarding the costs of parity, personal experience with mental illness and addiction, and the political strategies adopted by congressional champions in the Senate and House of Representatives. Conclusions: Challenges to implementing the federal parity policy warrant further consideration. This law raises new questions about the future direction of federal policymaking on behavioral health. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Milbank Memorial Fund; YEAR: 2010

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Health Insurance](#)  
[\\*History](#)  
[\\*Mental Health](#)  
[\\*Mental Health Parity](#)  
[Politics](#)

**Source:** PsycINFO

#### 77. Levels of emotional awareness in alcohol-dependent patients and abstinent alcoholics.

**Original Title:** Niveaux de conscience emotionnelle chez les sujets alcoolodépendants et abstinents.

**Citation:** L'Encephale: Revue de psychiatrie clinique biologique et thérapeutique, September 2010, vol./is. 36/4(334-339), 0013-7006 (Sep 2010)

**Author(s):** Bochand, L; Nandrino, J.-L

**Correspondence Address:** Nandrino, J.-L.: Equipe FASE, Laboratoire URECA EA1059, Université de Lille-Nord-de-France, Domaine du pont-de-bois, Villeneuve-d'Ascq, France, 59653, jean-louis.nandrino@univ-lille3.fr

**Institution:** Bochand, L.: Equipe FASE, Laboratoire URECA EA1059, Université de Lille-Nord-de-France, Villeneuve-d'Ascq, France

**Language:** French

**Abstract:** Background: Deficits in the communication and identifying of feelings are usually observed in addiction disorders. These dysfunctions vary according to the type of addiction and are particularly marked for alcoholic subjects. The prevalence of alexithymia evolves in a nearly linear manner according to the severity and the duration of the disorder. As the duration of alcoholism and the quantity of alcohol that is consumed increase, so will the subjects' scores of alexithymia. In addition, certain authors have observed a decrease in alexithymia in abstinent subjects. Subjects having been abstinent for a long period of time were more alexithymic than those having been abstinent for a shorter period of time. However, other studies failed to confirm these findings and did not observe an increase in the levels of alexithymia in polydrug patients. It seems however that the measures of alexithymia obtained using self evaluation tools (TAS 20) lack in precision due to the fact that, even though the subject is supposed to have a deficit in the identifying and the verbalisation of his emotional states, he is asked to do his own evaluation of the said emotional states. Hence, other tools such as the level of emotional awareness scale (LEAS) offer another approach to the measuring of alexithymia, based on the everyday situations and integrated in a general model of the differentiation of emotional states (or of emotional awareness). Design of study: The purpose of the study is to describe the level of emotional differentiation of alcoholic subjects, and to evaluate the development of the emotional processes following alcohol cessation. Our sample consists of 88 subjects distributed in three groups: a group of alcoholic participants who are in the process of quitting alcohol (33 subjects), a group of alcoholic participants that have been abstinent for more than 6 months (20 subjects) and a group of control participants (35 subjects). The prevalence of alexithymia is estimated by the Toronto alexithymia scale (TAS 20) which measures three factors: the difficulty to identify one's feelings (TAS 1),

the difficulty to express one's feelings (TAS 2), and thoughts which are directed towards the outside world (TAS 3). The levels of emotional consciousness are estimated by the LEAS which establishes 20 scenarios in order to measure three scores: emotional consciousness "for oneself" (LEAS 1), emotional consciousness "for others" (LEAS 2) and a total score (total LEAS). Results: The results show a different level of emotional awareness and alexithymia between the three groups of participants. The alcoholic participants are less conscious of their feelings and have more difficulties identifying and expressing their feelings than the control subjects. With regards to the evolution of the emotional deficit linked to alcohol withdrawal, the abstinent subjects obtain weaker scores of alexithymia than the alcoholic subjects. However, abstinent subjects continue to present more difficulties expressing their feelings than control subjects (TAS 2). On the other hand, abstinent subjects' levels of emotional awareness are once again comparable to those of control subjects. Finally, the analysis of the correlations does not show any link between the scores of alexithymia and the scores of emotional consciousness, and this for all of the groups studied. Our major result concerns the recovery of the emotional deficit of abstinent subjects (global score of TAS 20 and the score of emotional consciousness), which underlines the importance of the implementation of therapeutic protocols that focus on the emotional awareness of alcoholic subjects. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: L'Encephale, Paris; YEAR: 2010

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

**Subject Headings:** [\\*Alcohol Rehabilitation](#)  
[\\*Alcoholism](#)  
[\\*Sobriety](#)  
[Awareness](#)  
[Emotional States](#)

**Source:** PsycINFO

#### 78. Workaholism: Between illusion and addiction.

**Original Title:** Boulomanie: Entre illusion et addiction.

**Citation:** L'Encephale: Revue de psychiatrie clinique biologique et therapeutique, September 2010, vol./is. 36/4(285-293), 0013-7006 (Sep 2010)

**Author(s):** Elowe, J

**Correspondence Address:** Elowe, J.: Clinique Psychiatrique, Pole de Psychiatrie et de sante Mentale, Psychiatrie I, Hopitaux Universitaires de Strasbourg, 1, place de l'Hopital, BP 426, Strasbourg, France, 67091, cedex, julien.elowe@chru-strasbourg.fr

**Institution:** Elowe, J.: Clinique Psychiatrique, Pole de Psychiatrie et de sante Mentale, Psychiatrie I, Hopitaux Universitaires de Strasbourg, Strasbourg, France

**Language:** French

**Abstract:** Workaholism surfaced some years ago as a veritable addiction in the wide sense of the term, dependence. It differs from other sorts of dependence in that it is very often viewed in a positive perspective in the sense that it conveys to the person concerned the illusion of well-being, as well as a motivation and dedication in their professional activity. During the past 30 years, several authors have attempted to define this concept and to determine its characteristics. Robinson believes that workaholics have an approach to life whereby their work feeds on time, energy and physical activity. This provokes consequences that affect their physical health and interpersonal relationships. They have a tendency to live in the future rather than in the present. For Scott, Moore and Micelli, the compulsion for work is not necessarily viewed as being detrimental to one's health. Spence and Robbins highlight the notion of the pleasure experienced at work in their theoretical approach. The prevalence of the dependence on work is estimated at between 27 and 30% in the general population. It is correlated to the number of hours of work per week and tends to be higher as annual revenue increases. The sex ratio is 1, and the parents of children 5 to 18 years of age are the most susceptible to considering themselves workaholics. The physical and psychological consequences of professional exhaustion are characterized primarily by

the decrease in self-esteem, symptoms of fatigue, anxiety, depression, irritability and the manifestation of physical problems including cardiovascular ailments, as evidenced by hypertension, as well as heart and kidney complications. All the theoretical point of views, from the psychoanalytical models to the contemporary models, highlight self esteem as being the centerpiece of the question regarding the problem of workaholism. In fact, the narcissism articulated from the sociological evolution of our western way of life permits us to delineate the psychic identity of the individual better, and therefore, to understand this reconstructive attempt of one's self better. In characterizing the personality traits of workaholic individuals, the doctor/therapist is required to deal with this new form of dependence as early as possible, in order to anticipate and avert the numerous personal, professional, social, relational and sanitary complications. Faced with this large prevalence of dependence on work, it seems important to us to look for a symptomatology that would emanate a signal of workaholism so as to envisage and propose to workaholic patients a specific course of action that would be adapted to their needs. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: L'Encephale, Paris; YEAR: 2009

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Professionalism](#)  
[\\*Well Being](#)  
[\\*Workaholism](#)  
[Illusions \(Perception\)](#)

**Source:** PsycINFO

#### **79. Chair massage in treating anxiety in patients withdrawing from psychoactive drugs.**

**Citation:** The Journal of Alternative and Complementary Medicine, September 2010, vol./is. 16/9(979-987), 1075-5535;1557-7708 (Sep 2010)

**Author(s):** Black, Shaun; Jacques, Kathleen; Webber, Adam; Spurr, Kathy; Carey, Eileen; Hebb, Andrea; Gilbert, Robert

**Correspondence Address:** Gilbert, Robert: School of Health Sciences, Faculty of Health Professions, Dalhousie University, Bethune Building, 1278 South Park Street, Halifax, NS, Canada, B3H 2Y9, rgilbert@dal.ca

**Institution:** Black, Shaun: Addiction Prevention and Treatment Services, Capital District Health Authority, Dartmouth, NS, Canada

**Language:** English

**Abstract:** Context: Therapeutic massage has been proven to be an effective, nonpharmacologic, alternative for managing state and trait anxiety in a variety of clinical situations. However, no controlled study has investigated this effect in an addiction treatment setting. Aim: The aim of this study was to investigate the effectiveness of chair massage for reducing anxiety in persons participating in an inpatient withdrawal management program for psychoactive drugs. Design: The design was a randomized, controlled clinical trial conducted from June 2008 to January 2009. Subjects: Eighty-two (82) adult patients received inpatient treatment for psychoactive drug withdrawal (alcohol, cocaine, and opiates). Setting: This study was conducted at the Withdrawal Management Services at the Capital District Health Authority, Halifax, Nova Scotia. Interventions: Subjects were randomly assigned to receive chair massage (n = 40) or a relaxation control condition (n = 42). Treatments were offered for 3 consecutive days. Standard counseling and pharmacologic management were also offered concurrently to patients in all conditions. Measurements: The primary outcome measure was anxiety assessed using the Spielberger State-Trait Anxiety Inventory (STAI). State and trait anxiety scores were determined immediately prior to and following each treatment intervention. Results: Analysis of STAI scores showed a significant reduction in state and trait anxiety for both interventions (p < 0.001). The magnitude in the reduction in state (p = 0.001) and trait (p = 0.045) anxiety was significantly greater in the chair massage group where the effect on state anxiety was sustained, at least in part, for 24 hours. Conclusions: Within the clinical context of this study, chair massage was more effective than relaxation control in reducing

anxiety. Further investigation of chair massage as a potential nonpharmacologic adjunct in the management of withdrawal related anxiety is warranted. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Mary Ann Liebert, Inc.  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Anxiety](#)  
[\\*Drug Withdrawal](#)  
[\\*Massage](#)  
[\\*Treatment Effectiveness Evaluation](#)  
[Drug Therapy](#)  
[Drugs](#)  
[Patients](#)  
**Source:** PsycINFO  
**Full Text:** Available in *fulltext* at [EBSCO Host](#)

#### 80. Review of Tackling addiction: Pathways to recovery.

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**Citation:** British Journal of Social Work, September 2010, vol./is. 40/6(2015-2018), 0045-3102;1468-263X (Sep 2010)  
**Author(s):** Paylor, Ian  
**Institution:** Paylor, Ian: Department of Applied Social Science, Lancaster University, Lancaster, England  
**Language:** English  
**Abstract:** Reviews the book, Tackling addiction: Pathways to recovery edited by Rowdy Yates and Margaret S. Malloch (2010). The title of this book is somewhat misleading. The subtitle of the book, Pathways to Recovery, is much more applicable to what is actually in the book. The book is an interesting exploration of and discussion around the concept of 'recovery'. Models of 'recovery' present a complex domain suggesting both consumer and scientific models. This book contains twelve chapters plus a short introductory piece as well as a very good subject index and author index. In terms of professional practice, social work is particularly aligned with 'recovery' and its relationship to related themes such as social models and person-centered planning. (PsycINFO Database Record (c) 2010 APA, all rights reserved)  
**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: The Author; YEAR: 2010  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Addiction](#)  
[\\*Models](#)  
[\\*Recovery \(Disorders\)](#)  
[\\*Rehabilitation](#)  
[\\*Social Casework](#)  
**Source:** PsycINFO

#### 81. An investigation on the living conditions and mental health of children whose parents are drug abusers.

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**Citation:** Psychological Science (China), November 2009, vol./is. 32/6(1500-1503), 1671-6981 (Nov 2009)  
**Author(s):** Xu, Shuping; Li, Guoruil; Fu, Liming  
**Correspondence Address:** Xu, Shuping: School of Psychology and Cognitive Science, East China Normal University, Shanghai, China, 200062, xushuping\_psy@yahoo.com.cn  
**Institution:** Xu, Shuping: School of Psychology and Cognitive Science, East China Normal University, Shanghai, China  
**Language:** Chinese

**Abstract:** The authors used questionnaires, Symptom Checklist 90 and Children's Behavior Checklist to investigate the living condition and mental health of children whose parents, were drug abusers. The results were that (1) 37.6% of the subjects reported mental symptoms, the main symptoms being obsessive-compulsiveness, hostility, paranoid ideation, interpersonal sensitivity, depression, etc. (2) With K-Means Clusters Analysis 5 groups were classified according to their mental health and father addiction years, the worst mental health condition being found largely when the father reached his 5th year of addiction. (3) Non-students subjects scored significantly higher than students subjects in all of factors in SCL-90 except obsessive compulsiveness. (4) Subjects raised by mother scored significantly higher than raised by parents and grandparents in interpersonal sensitivity, depression and paranoid ideation. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Living Arrangements](#)  
[\\*Mental Health](#)  
[\\*Parents](#)  
[Drug Abuse](#)

**Source:** PsycINFO

## 82. A review of the compatibility of harm-reduction and recovery-oriented best practices for dual disorders.

**Citation:** Best Practices in Mental Health: An International Journal, 2008, vol./is. 4/2(99-113), 1553-555X (Sum, 2008)

**Author(s):** Mancini, Michael A; Hardiman, Eric R; Eversman, Michael H

**Institution:** Mancini, Michael A.: School of Social Work, St. Louis University, St. Louis, MO, US

**Language:** English

**Abstract:** Community mental health practitioners often provide services to clients who struggle with co-occurring mental illness, addictions, and homelessness. Although controversial in the United States, programs serving this population are increasingly turning toward harm-reduction approaches to enhance service engagement. Opponents claim that harm-reduction approaches endorse and enable destructive behavior, while advocates claim that they are effective at reducing harm drug users do to themselves and society. Caught in the middle are practitioners who may be unclear as to how harm reduction fits with their practice philosophies and training. In this article, intersections of recovery-oriented mental health best practices for dual disorders and harm-reduction approaches are explored within the domains of empowerment, supportive relationships, and resource access in order to clarify how practitioners can integrate harm reduction into their practice. Implications for program implementation and research are discussed. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Lyceum Books, Inc.; YEAR: 2008

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Harm Reduction](#)  
[\\*Mental Disorders](#)  
[\\*Recovery \(Disorders\)](#)  
[\\*Best Practices](#)  
[Drug Rehabilitation](#)

**Source:** PsycINFO

## 83. Conclusions.

**Citation:** Alcohol Research & Health, 2008, vol./is. 31/3(278), 1535-7414;1930-0573 (2008)

**Author(s):** Hitzemann, Robert; Oberbeck, Denesa

**Institution:** Hitzemann, Robert: Department of Behavioral Neuroscience, Oregon Health & Science University, Portland, OR, US

**Language:** English

**Abstract:** Although alcohol affects almost all tissues and organs in the body, the brain can be considered the most significant target of alcohol use and/or abuse. Thus, alcohol's effects on the brain are immediate and widespread, ranging from effects on normal physiology, metabolism, and gait to changes in emotions, cognition, and other functions. It is crucial to explore alcohol's effects on the brain at many levels, from cellular and molecular biology studies or isolated cells or cell components to functional imaging studies investigating brain function in the living organism. This Special Section has provided a representative sampling of the latest strategies being used by scientists to understand the neural mechanisms of the alcoholic brain. The results obtained using these strategies will not only elucidate the mechanisms through which alcohol acts on specific brain cells or signaling systems but also will allow researchers from a variety of areas to design novel diagnostic approaches as well as develop new intervention strategies (e.g., pharmacotherapies) to treat alcohol dependence. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Brain](#)  
[\\*Drug Therapy](#)  
[\\*Neurobiology](#)

**Source:** PsycINFO

**Full Text:** Available in *fulltext* at [EBSCO Host](#)  
Available in *fulltext* at [ProQuest \(Legacy Platform\)](#)

#### 84. Proteomic solutions for analytical challenges associated with alcohol research.

**Citation:** Alcohol Research & Health, 2008, vol./is. 31/3(251-255), 1535-7414;1930-0573 (2008)

**Author(s):** MacCoss, Michael J; Wu, Christine C

**Institution:** MacCoss, Michael J.: Department of Genome Sciences, University of Washington, Seattle, WA, US

**Language:** English

**Abstract:** Alcohol addiction is a complex disease with both hereditary and environmental influences. Because molecular determinants contributing to this phenotype are difficult to study in humans, numerous rodent models and conditioning paradigms have provided powerful tools to study the molecular complexities underlying these behavioral phenotypes. The proteomic analysis of brain tissue poses a complex analytical problem; this problem is further exacerbated in behavioral studies. However, given the throughput capability of differential mass spectrometry and the software available for the analysis of these data, combined with the sensitivity and multiplexing capability of targeted mass spectrometry, the promise of large-scale proteomics analyses in neuroscience is a certainty. As always, however, the "devil is in the details," and although these technologies currently are possible, it will require continued application-driven developments in mass spectrometry hardware, sample preparation, automated sample handling, and computational analysis before these approaches become routine. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Alcohols](#)  
[\\*Brain](#)  
[\\*Experimentation](#)  
[\\*Phenotypes](#)  
[Genetics](#)

**Source:** PsycINFO  
**Full Text:** Available in *fulltext* at [EBSCO Host](#)  
 Available in *fulltext* at [ProQuest \(Legacy Platform\)](#)

#### 85. Magnetic resonance imaging approaches for studying alcoholism using mouse models.

**Citation:** Alcohol Research & Health, 2008, vol./is. 31/3(247-248), 1535-7414;1930-0573 (2008)  
**Author(s):** Boudreau, Eilis A; Chen, Gang; Li, Xin; Kroenke, Christopher D  
**Institution:** Boudreau, Eilis A.: Department of Neurology, Oregon Health & Science University, Portland, OR, US  
**Language:** English  
**Abstract:** Mice are one of the most commonly used animal models of alcoholism, and extensive genetic and behavioral data related to alcohol consumption and its consequences in different strains are available. This article reviews the challenges associated with the use of these technologies in mice and discusses the application of these advanced technologies to mouse models of alcoholism. Animal models, particularly studies in mice and rats, have greatly advanced researchers' understanding of the effects that alcohol has on the body, including the brain. Because of the animals' small size and the associated technical challenges, however, brain imaging studies in live animals only recently have become feasible, thanks to improvements in the required instrumentation and adaptations of the experimental designs. The full potential of these technological advances is only beginning to be realized. (PsycINFO Database Record (c) 2010 APA, all rights reserved)  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Alcoholism](#)  
[\\*Animal Models](#)  
[\\*Brain](#)  
[\\*Magnetic Resonance Imaging](#)  
[Mice](#)  
**Source:** PsycINFO  
**Full Text:** Available in *fulltext* at [EBSCO Host](#)  
 Available in *fulltext* at [ProQuest \(Legacy Platform\)](#)

#### 86. The use of magnetic resonance spectroscopy and magnetic resonance imaging in alcohol research.

**Citation:** Alcohol Research & Health, 2008, vol./is. 31/3(243-246), 1535-7414;1930-0573 (2008)  
**Author(s):** Nagel, Bonnie J; Kroenke, Christopher D  
**Institution:** Nagel, Bonnie J.: Department of Psychiatry and Behavioral Neuroscience, Oregon Health & Science University, Portland, OR, US  
**Language:** English  
**Abstract:** The recent emergence of magnetic resonance (MR)based neuroimaging techniques has dramatically improved researchers' ability to understand the neuropathology of alcoholism. These techniques range from those that directly monitor the metabolism and the biochemical and physiological effects (i.e., the pharmacodynamics) of alcohol within the brain to techniques that examine the impact of heavy alcohol use on brain structure and function. Different MR-based technologies have allowed researchers to monitor alcohol levels in the brain, identify alcohol-induced structural changes in the brain, and study the impact of alcohol on brain function. To date, most of these studies have been conducted in human subjects. (PsycINFO Database Record (c) 2010 APA, all rights reserved)  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Alcoholism](#)  
[\\*Magnetic Resonance Imaging](#)  
[\\*Neuropathology](#)

[\\*Spectroscopy](#)  
[Brain](#)

**Source:** PsycINFO  
**Full Text:** Available in *fulltext* at [EBSCO Host](#)  
Available in *fulltext* at [ProQuest \(Legacy Platform\)](#)

### 87. From event-related potential to oscillations: Genetic diathesis in brain (dys)function and alcohol dependence.

**Citation:** Alcohol Research & Health, 2008, vol./is. 31/3(238-246), 1535-7414;1930-0573 (2008)  
**Author(s):** Rangaswamy, Madhavi; Porjesz, Bernice  
**Institution:** Rangaswamy, Madhavi: Henri Begleiter Neurodynamics Laboratory, State University of New York Downstate Medical Center, Brooklyn, NY, US  
**Language:** English  
**Abstract:** Recording the brain's electrical activity using electrodes placed on the individual's scalp provides noninvasive sensitive measures of brain function in humans. Regardless of whether an individual receives sensory information or performs higher cognitive processes, the brain regions involved exhibit measurable electrical activity, and by recording this activity with numerous electrodes placed on different areas of the scalp, researchers can determine when and where in the brain information processing occurs. Alcohol dependence and related disorders result from a complex interaction of genetic and environmental liabilities that change across development, with a greater impact of genetic factors in early-onset disorders. The use of quantitative brain oscillations provides a means to better understand the network dynamics of brain functions, and, by using these oscillations as endophenotypes, researchers can localize and characterize disease susceptibility genes more easily than if they have to rely on diagnostic categories. The utility of electrophysiological measures as endophenotypes for studying the genetic risk of disinhibitory disorders, including alcoholism, is very promising. (PsycINFO Database Record (c) 2010 APA, all rights reserved)  
**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Alcoholism](#)  
[\\*Brain Disorders](#)  
[\\*Electrical Activity](#)  
[\\*Evoked Potentials](#)  
[\\*Genetics](#)  
[Alcohols](#)  
[Brain](#)  
**Source:** PsycINFO  
**Full Text:** Available in *fulltext* at [EBSCO Host](#)  
Available in *fulltext* at [ProQuest \(Legacy Platform\)](#)

### 88. Positron emission tomography as a tool for studying alcohol abuse.

**Citation:** Alcohol Research & Health, 2008, vol./is. 31/3(233-237), 1535-7414;1930-0573 (2008)  
**Author(s):** Thanos, Panayotis K; Wang, Gene-Jack; Volkow, Nora D  
**Institution:** Thanos, Panayotis K.: Laboratory of Neuroimaging, National Institute on Alcohol Abuse and Alcoholism (NIAAA), Bethesda, MD, US  
**Language:** English  
**Abstract:** Positron emission tomography (PET) is an imaging technology that measures the concentration, distribution, and pharmacokinetics of radiotracers--molecules that are labeled with short-lived positron-emitting variants (i.e., radioisotopes) of chemical elements naturally found in the body. These radioisotopes can be attached to compounds involved in normal brain function and then injected into the blood stream. PET analyses have helped examine the neurochemistry underlying the relationship between alcoholism and aggression and, more specifically, whether signal transmission mediated by the

neurotransmitter serotonin contributes to this relationship. The investigators evaluated the density of the serotonin transporter in alcoholic patients who were assessed for aggressive characteristics. The results showed that none of the clinical measures used, including measures of aggression, correlated with serotonin transporter binding in the alcoholic subjects. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

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

**Subject Headings:** [\\*Alcohol Abuse](#)  
[\\*Alcoholism](#)  
[\\*Pharmacokinetics](#)  
[\\*Positron Emission Tomography](#)  
[Brain](#)

**Source:** PsycINFO

**Full Text:** Available in *fulltext* at [EBSCO Host](#)  
 Available in *fulltext* at [ProQuest \(Legacy Platform\)](#)

### 89. Strategies to study the neuroscience of alcoholism: Introduction.

**Citation:** Alcohol Research & Health, 2008, vol./is. 31/3(231-232), 1535-7414;1930-0573 (2008)

**Author(s):** Hitzemann, Robert; Oberbeck, Denesa

**Institution:** Hitzemann, Robert: Department of Behavioral Neuroscience, Oregon Health & Science University, Portland, OR, US

**Language:** English

**Abstract:** Alcohol use and abuse are widespread in the U.S. population. A detailed survey of the strategies used to investigate the neural mechanisms associated with alcohol use and abuse would easily fill multiple volumes. Instead, this Special Section provides brief reviews of topics largely associated with two areas of research: the strategies that researchers can use to image the acute and chronic effects of alcohol on brain function, and the way by which investigators detect the genes, gene products, and gene networks associated with alcohol-related traits. Neither area is covered completely, but the reader is provided a reasonable sampling. In any field of investigation--and especially in the neuroscience arena--there are multiple levels of analysis that can be used. Accordingly, this section is organized using a top-down approach. For many topics, the broad impact of alcohol research on molecular and behavioral neuroscience is emphasized. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

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

**Subject Headings:** [\\*Alcohol Abuse](#)  
[\\*Alcoholism](#)  
[\\*Brain](#)  
[\\*Neurosciences](#)

**Source:** PsycINFO

**Full Text:** Available in *fulltext* at [EBSCO Host](#)  
 Available in *fulltext* at [ProQuest \(Legacy Platform\)](#)

### 90. Translational studies of alcoholism: Bridging the gap.

**Citation:** Alcohol Research & Health, 2008, vol./is. 31/3(215-230), 1535-7414;1930-0573 (2008)

**Author(s):** Zahr, Natalie M; Sullivan, Edith V

**Institution:** Zahr, Natalie M.: SRI International, Menlo Park, CA, US

**Language:** English

**Abstract:** Human studies are necessary to identify and classify the brain systems predisposing individuals to develop alcohol use disorders and those modified by alcohol, while animal models of alcoholism are essential for a mechanistic understanding of how chronic voluntary alcohol consumption becomes compulsive, how brain systems become damaged, and how damage resolves. Our current knowledge of the neuroscience of

alcohol dependence has evolved from the interchange of information gathered from both human alcoholics and animal models of alcoholism. Together, studies in humans and animal models have provided support for the involvement of specific brain structures over the course of alcohol addiction, including the prefrontal cortex, basal ganglia, cerebellum, amygdala, hippocampus, and the hypothalamic-pituitary-adrenal axis. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

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

**Source:** PsycINFO

**Full Text:** Available in *fulltext* at [EBSCO Host](#)  
 Available in *fulltext* at [ProQuest \(Legacy Platform\)](#)

### 91. Communication networks in the brain: Neurons, receptors, neurotransmitters, and alcohol.

**Citation:** Alcohol Research & Health, 2008, vol./is. 31/3(196-214), 1535-7414;1930-0573 (2008)

**Author(s):** Lovinger, David M

**Institution:** Lovinger, David M.: Laboratory for Integrative Neuroscience, National Institute on Alcohol Abuse and Alcoholism, Bethesda, MD, US

**Language:** English

**Abstract:** Nerve cells (i.e., neurons) communicate via a combination of electrical and chemical signals. Within the neuron, electrical signals driven by charged particles allow rapid conduction from one end of the cell to the other. Communication between neurons occurs at tiny gaps called synapses, where specialized parts of the two cells (i.e., the presynaptic and postsynaptic neurons) come within nanometers of one another to allow for chemical transmission. The presynaptic neuron releases a chemical (i.e., a neurotransmitter) that is received by the postsynaptic neuron's specialized proteins called neurotransmitter receptors. The neurotransmitter molecules bind to the receptor proteins and alter postsynaptic neuronal function. Two types of neurotransmitter receptors exist--ligand-gated ion channels, which permit rapid ion flow directly across the outer cell membrane, and G-protein-coupled receptors, which set into motion chemical signaling events within the cell. Hundreds of molecules are known to act as neurotransmitters in the brain. Neuronal development and function also are affected by peptides known as neurotrophins and by steroid hormones. This article reviews the chemical nature, neuronal actions, receptor subtypes, and therapeutic roles of several transmitters, neurotrophins, and hormones. It focuses on neurotransmitters with important roles in acute and chronic alcohol effects on the brain, such as those that contribute to intoxication, tolerance, dependence, and neurotoxicity, as well as maintained alcohol drinking and addiction. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcohols](#)  
[\\*Brain](#)  
[\\*Neural Receptors](#)  
[\\*Neurons](#)  
[\\*Neurotransmitters](#)  
[Communication](#)  
[Neurotoxicity](#)

**Source:** PsycINFO

**Full Text:** Available in *fulltext* at [EBSCO Host](#)  
 Available in *fulltext* at [ProQuest \(Legacy Platform\)](#)

### 92. Neurobiology of alcohol dependence: Focus on motivational mechanisms.

**Citation:** Alcohol Research & Health, 2008, vol./is. 31/3(185-195), 1535-7414;1930-0573 (2008)

**Author(s):** Gilpin, Nicholas W; Koob, George F

**Institution:** Gilpin, Nicholas W.: Committee on the Neurobiology of Addictive Disorders, Scripps Research Institute, La Jolla, CA, US

**Language:** English

**Abstract:** Alcoholism is a debilitating disorder for the individual and very costly for society. A major goal of alcohol research is to understand the neural underpinnings associated with the transition from alcohol use to alcohol dependence. Positive reinforcement is important in the early stages of alcohol use and abuse. Negative reinforcement can be important early in alcohol use by people self-medicating coexisting affective disorders, but its role likely increases following the transition to dependence. Chronic exposure to alcohol induces changes in neural circuits that control motivational processes, including arousal, reward, and stress. These changes affect systems utilizing the signaling molecules dopamine, opioid peptides, gamma -aminobutyric acid, glutamate, and serotonin, as well as systems modulating the brain's stress response. These neuroadaptations produce changes in sensitivity to alcohol's effects following repeated exposure (i.e., sensitization and tolerance) and a withdrawal state following discontinuation of alcohol use. Chronic alcohol exposure also results in persistent neural deficits, some of which may fully recover following extended periods of abstinence. However, the organism remains susceptible to relapse, even after long periods of abstinence. Recent research focusing on brain arousal, reward, and stress systems is accelerating our understanding of the components of alcohol dependence and contributing to the development of new treatment strategies. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Neurobiology](#)  
[\\*Reinforcement](#)  
[Motivation](#)

**Source:** PsycINFO

**Full Text:** Available in *fulltext* at [EBSCO Host](#)  
Available in *fulltext* at [ProQuest \(Legacy Platform\)](#)

### 93. From wrongdoing to ecstasy. A narcissistic strategy?

**Original Title:** De la faute a l'extase une strategie narcissique?

**Citation:** Revue Adolescence, 2008, vol./is. 26/1 63(131-141), 0751-7696 (Spr, 2008)

**Author(s):** Brousselle, Andre

**Correspondence Address:** Brousselle, Andre, 85, Bd. Saint-Michel, Paris, France, 75005, abrousselle@orange.fr

**Language:** French

**Abstract:** The spiritual exercise becomes a narcissistic strategy when brooding over one's own wrongdoing leads to ecstasy ! This (fusional) narcissism of indifferentiation and the narcissism of differentiation (such as that of little differences) re-characterize the sin in the opposite sense, by being only indirectly interested in the sexual or aggressive wrong done to the object. We find these strategies in adolescence among the offspring of the New Age, often drug-addicted, and in certain behaviours. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Narcissism](#)  
[\\*Religious Experiences](#)  
[\\*Spirituality](#)  
[Psychoanalytic Theory](#)

**Source:** PsycINFO

**94. Mysticism and conversion in adolescence.**

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- Original Title:** Mystique et conversion a l'adolescence.
- Citation:** Revue Adolescence, 2008, vol./is. 26/1 63(41-63), 0751-7696 (Spr, 2008)
- Author(s):** Bonnet, Gerard
- Correspondence Address:** Bonnet, Gerard: Ecole de Propedeutique a la Connaissance de l'Inconscient, 1, Rue Pierre Bourdan, Paris, France, 75012, bonnet.vannieu@wanadoo.fr
- Institution:** Bonnet, Gerard: Ecole de Propedeutique a la Connaissance de l'Inconscient, Paris, France
- Language:** French
- Abstract:** The author approaches mystical experience using classical narratives such as Plato's myth of the cave and Moses' conversion to shed light on accounts that come to us from current psychoanalytical practice. He shows that mystical experience is an intense moment, wherein the subject experiences in a flash the sensation of attaining the ideal enjoyment that was madly imagined in childhood and plunges in with pleasure, without knowing exactly what is going on. This is also the moment when the flaws and the shadows of early experiences come back to him in a painful way, and when he is in danger of giving in body and soul, since these are so dissociable from the enjoyment in question, which lends itself to symptoms, to addictions, and to passages to the act which are under their rule. It is finally and above all the instant where he is obliged to assume responsibility for the conflicts that result, if he wishes to balance these exceptional experiences, whose hopes he bears in the deepest part of himself, and the reality in which he must invest himself today. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Adolescent Attitudes](#)  
[\\*Adolescent Development](#)  
[\\*Mysticism](#)  
[\\*Psychoanalytic Theory](#)
- Source:** PsycINFO

**95. Stepping mindfully into recovery from addictions.**

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- Citation:** PsycCRITIQUES, 2011, vol./is. 56/1(No Pagination Specified), 1554-0138 (2011)
- Author(s):** Knowles, Philip
- Language:** English
- Abstract:** Reviews the book, Mindfulness and the 12 Steps: Living recovery in the present moment by Therese Jacobs-Stewart (see record 2010-10858-000). Jacobs-Stewart describes one alternative way of working through the 12 Steps that will be helpful to some. Using principles drawn from Buddhism and emphasizing the use of mindfulness tools, she skillfully illustrates how the two systems may be used to build on each other and contribute to an individual's psychological growth. This straight-forward book includes numerous personal anecdotes that will be helpful to a reader. Each chapter progresses through the 12 Steps and at the end includes mindfulness exercises for the reader to practice as he or she works that particular step. Mindfulness and the 12 Steps is one more tool that can be used to help an individual develop the cognitive and behavioral strengths to overcome an addiction and to construct a comfortable sobriety that will lead to lifelong abstinence. (PsycINFO Database Record (c) 2010 APA, all rights reserved)
- Publication Type:** Electronic Collection
- Subject Headings:** [\\*Alcoholism](#)  
[\\*Drug Addiction](#)  
[\\*Sobriety](#)  
[\\*Twelve Step Programs](#)  
[\\*Mindfulness](#)

[Buddhism](#)  
[Recovery \(Disorders\)](#)

**Source:** PsycINFO

#### 96. Promoting change in working with addictions.

**Citation:** PsycCRITIQUES, 2011, vol./is. 56/1(No Pagination Specified), 1554-0138 (2011)

**Author(s):** Hodgins, David; MacKay, Terri-Lynn

**Language:** English

**Abstract:** Reviews the book, Handbook of motivation and change: A practical guide for clinicians edited by Petros Levounis and Bachaar Arnaout (see record 2010-10445-000). A primary purpose of Handbook of motivation and change: A practical guide for clinicians is to provide a handbook for busy practitioners who have an interest, but not specialized expertise or experience, in addiction treatment. The handbook is organized around two main theoretical platforms: Prochaska and DiClemente's (1984) transtheoretical model (TTM) and Miller and Rollnick's (2002) motivational interviewing model (MI). Two introductory chapters and the final chapter provide the fundamentals of the MI model, and the 13 remaining chapters cover different stages of change as well as pertinent issues such as dual diagnosis, integrating medications and self-help groups, and working with adolescents and older adults. There is also much repetition of other ideas such as the fundamentals of MI and TTM. The overarching question we had when reading this book is whether it is appropriately structured for an audience of busy practitioners. The chapter templates include suggestions for teaching and supervision, movie illustrations, and multiple-choice questions. There is little consistency in describing how MI should be taught and supervised despite existing guidelines. Most notable is why someone reading an introductory book would engage in supervising MI. A final comment is warranted about the title of this book. The issue of motivation is, of course, relevant beyond the addictions field, and MI and TTM provide direction for practitioners working with many health behaviors. However, this book is specifically devoted to addictions treatment. It is unfortunate that the title fails to provide this information. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Electronic Collection

**Subject Headings:** [\\*Addiction](#)  
[\\*Behavior Change](#)  
[\\*Motivation](#)  
[\\*Motivational Interviewing](#)  
[\\*Treatment](#)  
[Clinicians](#)  
[Models](#)

**Source:** PsycINFO

#### 97. Geographies of addiction and recovery: Drugs, spaces, and body politics.

**Citation:** Dissertation Abstracts International Section A: Humanities and Social Sciences, 2010, vol./is. 71/5-A(1753), 0419-4209 (2010)

**Author(s):** Moreno, Christopher M

**Institution:** Moreno, Christopher M.: U California, Santa Barbara and San Diego State University, US

**Language:** English

**Abstract:** In this project, I work through and build on relational understandings of bodies and spaces to bring different sensibilities to discussions of drug addiction and recovery, particularly as they relate to geographical matters. Largely drawing from post-structural, feminist, and Deleuzian inspired geographical theory and practice, I explore body-space relations in and through various drug addiction and recovery contexts to present alternative political and ethical mappings than those given by hegemonic narratives and ordered practices. Through different modes of encounter (film, families, institutions, and communities), I present the different ways in which drug users (including their social and familial

relations) and spaces of drug addiction and recovery evolve and work to create for themselves a new, more active, healthy, body-space not necessarily confined to or limited by institutional or ideological controls. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Publication Type:** Dissertation Abstract

**Subject Headings:** [\\*Addiction](#)  
[\\*Drug Addiction](#)  
[\\*Geography](#)  
[\\*Politics](#)

**Source:** PsycINFO

**98. The effect of marriage on young adult heavy drinking and its mediators: Results from two methods of adjusting for selection into marriage.**

**Citation:** Psychology of Addictive Behaviors, December 2010, vol./is. 24/4(712-718), 0893-164X;1939-1501 (Dec 2010)

**Author(s):** Lee, Matthew R; Chassin, Laurie; MacKinnon, David

**Correspondence Address:** Lee, Matthew R.: Department of Psychology, Arizona State University, P.O. Box 871104, Tempe, AZ, US, 85287, mrlee2@asu.edu

**Institution:** Lee, Matthew R.: Department of Psychology, Arizona State University, Tempe, AZ, US

**Language:** English

**Abstract:** This study tested the effect of marriage on young adult heavy drinking and tested whether this effect was mediated by involvement in social activities, religiosity, and self-control reasons for limiting drinking. The sample of 508 young adults was taken from an ongoing longitudinal study of familial alcoholism that over-sampled children of alcoholics (Chassin, Rogosch, & Barrera, 1991). In order to distinguish role socialization effects of marriage from confounding effects of role selection into marriage, analyses used both the analysis of covariance (ANCOVA) method and the change score method of adjusting for pre-marriage levels of heavy drinking and the mediators. Results showed role socialization effects of marriage on post-marriage declines in heavy drinking. This effect was mediated by involvement in social activities such that marriage predicted decreased involvement in social activities, which in turn predicted decreased heavy drinking. There were no statistically significant mediated effects of religiosity. The mediated effect of self-control reasons for limiting drinking was supported by the ANCOVA method only, and further investigation suggested that this result was detected erroneously due to violation of an assumption of the ANCOVA method that is not shared by the change score method. Findings from this study offer an explanation for the maturing out of heavy drinking that takes place for some individuals over the course of young adulthood. Methodologically, results suggest that the ANCOVA method should be employed with caution, and that the change score method is a viable approach to confirming results from the ANCOVA method. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Conference Information:** Joint Scientific Meeting for the Research Society on Alcoholism and the International Society for Biomedical Research on Alcoholism. Jun, 2008. Washington. DC, US. Portions of these data were presented at the aforementioned meeting.

**Country of Publication:** HOLDER: American Psychological Association; YEAR: 2010

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

**Subject Headings:** [\\*Alcohol Drinking Patterns](#)  
[\\*Alcoholism](#)  
[\\*Marriage](#)  
[\\*Self Control](#)  
[\\*Social Behavior](#)  
[Religiosity](#)  
[Roles](#)  
[Socialization](#)

**Source:** PsycINFO

### 99. Measuring mindfulness and examining its relationship with alcohol use and negative consequences.

**Citation:** Psychology of Addictive Behaviors, December 2010, vol./is. 24/4(608-616), 0893-164X;1939-1501 (Dec 2010)

**Author(s):** Fernandez, Anne C; Wood, Mark D; Stein, L. A. R; Rossi, Joseph S

**Correspondence Address:** Fernandez, Anne C.: Department of Psychology, University of Rhode Island, 10 Chafee Road, Suite 8, Kingston, RI, US, 02881, [annefernandez@my.uri.edu](mailto:annefernandez@my.uri.edu)

**Institution:** Fernandez, Anne C.: Department of Psychology, University of Rhode Island, Kingston, RI, US

**Language:** English

**Abstract:** Mindfulness has been proposed as a useful adjunct to alcohol abuse treatment. However, very little research has examined the basic relationship between alcohol use and mindfulness. Inconsistency in definition and measurement of mindfulness across studies makes such research difficult to interpret and conduct. Therefore, the current research sought to validate an emerging mindfulness measure, the Five Facet Mindfulness Questionnaire (FFMQ), and examine its relationship with alcohol use and alcohol-related negative consequences among a sample of 316 college-aged adults. The purported factor structure of the FFMQ was examined using confirmatory factor analysis. Structural equation modeling was used to examine relations among mindfulness, alcohol use, and alcohol-related negative consequences. Consistent with past research, results supported the five-factor structure of the FFMQ. Structural equation modeling analyses revealed that two awareness-based factors of mindfulness were negatively related to alcohol use. After controlling for alcohol use, one acceptance-based factor (nonjudging of thoughts and feelings) was negatively related to alcohol-related consequences, and one awareness-based factor was positively related to consequences (all  $ps < .05$ ). Effect sizes were small-medium. The results reported here inform the burgeoning development of mindfulness-based addiction treatment and provide additional psychometric validation of the FFMQ. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: American Psychological Association; YEAR: 2010

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

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

**Source:** PsycINFO

### 100. Factor structure of a Korean-language version of the Stages of Change Readiness and Treatment Eagerness Scale (SOCRATES) in a clinical sample of clients with alcohol dependence.

**Citation:** Psychology of Addictive Behaviors, December 2010, vol./is. 24/4(555-562), 0893-164X;1939-1501 (Dec 2010)

**Author(s):** Chun, Young-Min; Cho, Sung-Min; Shin, Sung-Man

**Correspondence Address:** Shin, Sung-Man: School of Counseling Psychology, Handong Global University, Gyeongbuk, Korea, 791-708, [sshin@handong.edu](mailto:sshin@handong.edu)

**Institution:** Chun, Young-Min: Gambling Addiction Prevention & Treatment Gyeonggi Center, College of Nursing, Catholic University, Suwon-si, Korea

**Language:** English

**Abstract:** The Stages of Change Readiness and Treatment Eagerness Scale (SOCRATES) is an instrument used to measure the level of motivation in regards to changing drinking and other addictive behaviors. While some initial factor analysis studies on the SOCRATES described a three-factor orthogonal structure of the scale, some other studies found a

two-factor correlated structure. Therefore, the primary objective of the present study was to test the validity of the Korean language version of the instrument using a Korean population. The study examined the factor structure of the Korean version of the SOCRATES with clinical samples consisting of 219 inpatients and 271 outpatients with alcohol dependency. An exploratory factor analysis with an alpha factoring method revealed a three-factor correlated structure (i.e., Taking Steps, Recognition, and Ambivalence). The factorial structure of the SOCRATES Korean version corresponded almost exactly to that of its original French version as well as the German version. Moreover, confirmatory factor analyses showed that a three-factor correlated structure provided the best fit for the data. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: American Psychological Association; YEAR: 2010

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

**Subject Headings:** [\\*Alcoholism](#)  
[\\*Health Care Seeking Behavior](#)  
[\\*Readiness to Change](#)  
[\\*Stages of Change](#)  
[\\*Test Validity](#)  
[Addiction](#)  
[Factor Structure](#)  
[Motivation](#)  
[Test Construction](#)  
[Native Language](#)

**Source:** PsycINFO

**101. Life beyond sobriety: A developmental framework to restore normal development during recovery from substance addiction.**

**Citation:** Journal of Family Psychotherapy, October 2010, vol./is. 21/4(299-304), 0897-5353;1540-4080 (Oct 2010)

**Author(s):** Lam, Sarah Kit-Yee

**Correspondence Address:** Lam, Sarah Kit-Yee: Department of Counseling, Special Education and Rehabilitation, California State University, 5005 N. Maple Avenue M/S ED3, Fresno, CA, US, 93740-8025, sarahl@csufresno.edu

**Institution:** Lam, Sarah Kit-Yee: Department of Counseling, Special Education and Rehabilitation, California State University, Fresno, CA, US

**Language:** English

**Abstract:** People who have substance dependence or addiction spend a lot of time on activities relating to the substance; give up important social, occupational, or recreational activities because of substance use; and lose control over substance use despite physical or psychological problems caused or exacerbated by the substance. In order to help clients resume their normal development during their sober years, counselors may consider the approach of embedding treatment goals and interventions in the context of their clients' normal development. For the purpose of this article, Arthur Chickering's theory of psychosocial development is used as a framework to integrate different counseling strategies to facilitate clients' development into adulthood during their recovery from substance addiction. Counselors may use this framework to assess their clients' current status of development and apply different counseling strategies to help clients address their symptoms, concerns, or problems with a sense of direction: leading a mature adult life. Besides conducting a clinical assessment, establishing the developmental status of clients will set the stage for work toward growth and development. As illustrated previously, a developmental framework may help counselors integrate their counseling strategies and treatment plans in the context of their clients' overall growth that has been thwarted by their addiction. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

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

**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Drug Addiction](#)  
[\\*Recovery \(Disorders\)](#)  
[\\*Sobriety](#)  
[Adult Development](#)  
**Source:** PsycINFO

### 102. Addiction: Cracking the code of addiction.

**Citation:** Nature Reviews Neuroscience, October 2010, vol./is. 11/10(668), 1471-003X (Oct 2010)  
**Author(s):** Welberg, Leonie  
**Language:** English  
**Abstract:** Comments on the articles, MeCP2 in the nucleus accumbens contributes to neural and behavioral responses to psychostimulants by J. V. Deng et al & MeCP2 controls BDNF expression and cocaine intake through homeostatic interactions with microRNA-212 by H. -I. Im et al. (2010). This two new studies focus on the role of the transcriptional repressor methyl CpG-binding protein 2 (MeCP2). They show that drugs of abuse regulate the expression and/or activity of MeCP2 and that this contributes to behavioral and neural responses to the drug. In the first paper, Deng et al. used lentivirus-mediated knock down and overexpression of Mecp2 in the nucleus accumbens (NAc)--a striatal area involved in reward processing--of adult mice. In the second paper, Im et al. reported increased MeCP2 expression and microRNA (miR)-212 (as well as miR-132) levels in the dorsal striatum in rats that had extended access to cocaine. The findings of this study suggest that homeostatic regulation of MeCP2 and miR-212 controls the effects of cocaine on striatal BDNF levels, and that striatal BDNF has a role in the development of escalating cocaine intake. Taken together, these two studies point to a role for MeCP2 in the behavioral response to psychostimulants, although many questions remain regarding the undoubtedly complex mechanisms involved in its interactions with microRNAs and its modulation of synaptic plasticity. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Macmillan Publishers Limited; YEAR: 2010

**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Addiction](#)  
[\\*CNS Stimulating Drugs](#)  
[\\*Nucleus Accumbens](#)  
[\\*Proteins](#)  
[\\*Brain Derived Neurotrophic Factor](#)  
[Cocaine](#)  
[Neural Pathways](#)  
**Source:** PsycINFO

### 103. Long-term depression in the CNS.

**Citation:** Nature Reviews Neuroscience, July 2010, vol./is. 11/7(459-473), 1471-003X (Jul 2010)  
**Author(s):** Collingridge, Graham L; Peineau, Stephane; Howland, John G; Wang, Yu Tian  
**Correspondence Address:** Collingridge, Graham L.: MRC Centre for Synaptic Plasticity, Department of Anatomy, School of Medical Sciences, University Walk, Bristol, United Kingdom, BS8 1TD, G.L.Collingridge@bristol.ac.uk  
**Institution:** Collingridge, Graham L.: MRC Centre for Synaptic Plasticity, Department of Anatomy, School of Medical Sciences, Bristol, United Kingdom  
**Language:** English  
**Abstract:** Long-term depression (LTD) in the CNS has been the subject of intense investigation as a process that may be involved in learning and memory and in various pathological

conditions. Several mechanistically distinct forms of this type of synaptic plasticity have been identified and their molecular mechanisms are starting to be unravelled. Most studies have focused on forms of LTD that are triggered by synaptic activation of either NMDARs (N-methyl-D-aspartate receptors) or metabotropic glutamate receptors (mGluRs). Converging evidence supports a crucial role of LTD in some types of learning and memory and in situations in which cognitive demands require a flexible response. In addition, LTD may underlie the cognitive effects of acute stress, the addictive potential of some drugs of abuse and the elimination of synapses in neurodegenerative diseases. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: All rights reserved; HOLDER: Macmillan Publishers Limited; YEAR: 2010

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

**Subject Headings:** [\\*Central Nervous System](#)  
[\\*Long-term Depression \(Neuronal\)](#)  
[Learning](#)  
[Memory](#)  
[Synapses](#)  
[Synaptic Plasticity](#)

**Source:** PsycINFO

#### 104. Nicotine addiction and nicotinic receptors: Lessons from genetically modified mice.

**Citation:** Nature Reviews Neuroscience, June 2010, vol./is. 11/6(389-401), 1471-003X (Jun 2010)

**Author(s):** Changeux, Jean-Pierre

**Correspondence Address:** Changeux, Jean-Pierre, 25 Rue du Dr Roux, Paris, France, 75015, changeux@pasteur.fr

**Institution:** Changeux, Jean-Pierre: College de France, CNRS URA 2182, Paris, France

**Language:** English

**Abstract:** The past decades have seen a revolution in our understanding of brain diseases and in particular of drug addiction. This has been largely due to the identification of neurotransmitter receptors and the development of animal models, which together have enabled the investigation of brain functions from the molecular to the cognitive level. Tobacco smoking, the principal--yet avoidable--cause of lung cancer is associated with nicotine addiction. Recent studies in mice involving deletion and replacement of nicotinic acetylcholine receptor subunits have begun to identify the molecular mechanisms underlying nicotine addiction and might offer new therapeutic strategies to treat this addiction. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Macmillan Publishers Limited.; YEAR: 2010

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

**Subject Headings:** [\\*Animal Models](#)  
[\\*Cholinergic Receptors](#)  
[\\*Drug Addiction](#)  
[\\*Nicotine](#)  
[\\*Treatment](#)  
[Genetic Engineering](#)  
[Mice](#)  
[Tobacco Smoking](#)

**Source:** PsycINFO

#### 105. From the editors.

**Citation:** Nature Reviews Neuroscience, June 2010, vol./is. 11/6(371), 1471-003X (Jun 2010)

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

**Language:** English

**Abstract:** Articles in this issue range from the epigenetic control of neuronal precursor fate, the molecular basis of nicotine addiction and the role of the somatosensory system in social perception, to the use of yeast in studying mechanisms of neurodegenerative diseases. Epigenetic control of developmental genes determines cell fate. One of the articles discusses epigenetic mechanisms that control the expression of developmental genes by reversible or long-term repression. Changing epigenetic marks during development results in the activation or suppression of reversibly repressed genes and contributes to sequential cell fate restrictions of pluripotent stem cells, ultimately leading to terminally differentiated neurons and glial cells. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Macmillan Publishers Limited.; YEAR: 2010

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

**Subject Headings:** [\\*Neurodegenerative Diseases](#)  
[\\*Neurons](#)  
[\\*Stem Cells](#)  
[\\*Neuroglia](#)  
[\\*Epigenetics](#)  
[Somatosensory Cortex](#)

**Source:** PsycINFO

#### 106. Emerging roles for G protein-gated inwardly rectifying potassium (GIRK) channels in health and disease.

**Citation:** Nature Reviews Neuroscience, May 2010, vol./is. 11/5(301-315), 1471-003X (May 2010)

**Author(s):** Luscher, Christian; Slesinger, Paul A

**Correspondence Address:** Luscher, Christian: Department of Basic Neurosciences, Medical Faculty, University of Geneva, 1 Michel Servet, Geneva, Switzerland, CH 1211, christian.luscher@unige.ch

**Institution:** Luscher, Christian: Department of Basic Neurosciences, Medical Faculty, University of Geneva, Geneva, Switzerland

**Language:** English

**Abstract:** G protein-gated inwardly rectifying potassium (GIRK) channels hyperpolarize neurons in response to activation of many different G protein-coupled receptors and thus control the excitability of neurons through GIRK-mediated self-inhibition, slow synaptic potentials and volume transmission. GIRK channel function and trafficking are highly dependent on the channel subunit composition. Pharmacological investigations of GIRK channels and studies in animal models suggest that GIRK activity has an important role in physiological responses, including pain perception and memory modulation. Moreover, abnormal GIRK function has been implicated in altering neuronal excitability and cell death, which may be important in the pathophysiology of diseases such as epilepsy, Down's syndrome, Parkinson's disease and drug addiction. GIRK channels may therefore prove to be a valuable new therapeutic target. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Macmillan Publishers Limited.; YEAR: 2010

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

**Subject Headings:** [\\*Electrical Activity](#)  
[\\*Physiology](#)  
[\\*Synapses](#)  
[\\*Potassium Channel](#)  
[Health Impairments](#)  
[Proteins](#)

**Source:** PsycINFO

**107. Cannabis against heroin?**

- Citation:** Nature Reviews Neuroscience, January 2010, vol./is. 11/1(No Pagination Specified), 1471-003X (Jan 2010)
- Author(s):** Wiedemann, Claudia
- Language:** English
- Abstract:** Briefly profiles the work by Y. Ren et al. (2009) showing that the non-psychoactive component of cannabis, cannabidiol (CBD), antagonizes cue-induced drug-seeking behavior after heroin withdrawal and discovered that it acts by normalizing glutamate and cannabinoid receptor expression levels in neurons that are involved in the drug-seeking behavior. Relapse after addictive-drug withdrawal is a big societal problem and is thought to be induced by environmental cues. The authors investigated the effect of CBD on the maintenance, extinction and relapse of heroin seeking in rats. (PsycINFO Database Record (c) 2010 APA, all rights reserved)
- Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Macmillan Publishers Limited; YEAR: 2010
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Cannabis](#)  
[\\*Drug Addiction](#)  
[\\*Drug Withdrawal](#)  
[\\*Heroin](#)  
[\\*Drug Seeking](#)  
[Extinction \(Learning\)](#)  
[Rats](#)  
[Relapse Prevention](#)
- Source:** PsycINFO
- Full Text:** Available in *fulltext* at [ProQuest \(Legacy Platform\)](#)

**108. The speech and language FOXP2 gene modulates the phenotype of frontotemporal lobar degeneration.**

- Citation:** Journal of Alzheimer's Disease, 2010, vol./is. 22/3(923-931), 1387-2877;1875-8908 (2010)
- Author(s):** Padovani, Alessandro; Cosseddu, Maura; Premi, Enrico; Archetti, Silvana; Papetti, Alice; Agosti, Chiara; Bigni, Barbara; Cerini, Carlo; Paghera, Barbara; Bellelli, Giuseppe; Borroni, Barbara
- Correspondence Address:** Borroni, Barbara: Clinica Neurologica, Università degli Studi di Brescia, Piazza Spedali Civili 1, Brescia, Italy, [bborroni@inwind.it](mailto:bborroni@inwind.it)
- Institution:** Padovani, Alessandro: Centre for Brain Aging and Neurodegenerative Disorders, Neurology Unit, University of Brescia, Brescia, Italy
- Language:** English
- Abstract:** The FOXP2 gene is mutated in a severe monogenic form of speech and language deficits, but no study on the influence of genetic variations within FOXP2 in neurological disorders characterized by language impairment is available yet. In the present study, we investigated the impact of common FOXP2 polymorphisms with regard to frontotemporal lobar degeneration (FTLD). Two-hundred ten FTLD patients underwent clinical and a wide standardized neuropsychological examination as well as brain imaging. In all patients, and in 200 age-matched healthy controls, four FOXP2 polymorphisms were evaluated, namely rs2396753, rs1456031, rs17137124 and rs1852469. SPECT images were analyzed by Statistical Parametric Mapping (SPM5). No significant differences of the four FOXP2 polymorphisms in genotype distribution and allele frequency between FTLD and controls were observed. A significant and specific association between rs1456031 TT and rs17137124 TT genotypes and verbal fluency scores was reported. The two polymorphisms showed an additive effect. When the analysis was computed on the number of observations over time, and 391 assessments considered, comparable results

were obtained. FTLN patients carrying at-risk polymorphisms showed greater hypoperfusion in the frontal areas, namely the left inferior frontal gyrus, and putamen, compared to the non-carriers ( $p < 0.005$ ). Genetic variations within FOXP2 do not represent a genetic risk to FTLN per se, but modulate FTLN presentation when disease is overt, affecting language performances and leading to hypoperfusion in language-associated brain areas. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: IOS Press and the authors.; YEAR: 2010

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

**Subject Headings:** [\\*Frontal Lobe](#)  
[\\*Genes](#)  
[\\*Polymorphism](#)  
[\\*Temporal Lobe](#)  
[\\*Neurodegeneration](#)  
[Language](#)  
[Oral Communication](#)  
[Phenotypes](#)

**Source:** PsycINFO

### 109. Basal ganglia activity in pathological gambling: A fluorodeoxyglucose-positron emission tomography study.

**Citation:** Neuropsychobiology, July 2010, vol./is. 62/2(132-138), 0302-282X;1423-0224 (Jul 2010)

**Author(s):** Pallanti, Stefano; Haznedar, M. Mehmet; Hollander, Eric; LiCalzi, Elizabeth M; Bernardi, Silvia; Newmark, Randall; Buchsbaum, Monte S

**Correspondence Address:** Pallanti, Stefano: Mount Sinai School of Medicine, 1, Gustave Levy Place, New York, NY, US, stefanopallanti@yahoo.it

**Institution:** Pallanti, Stefano: Department of Psychiatry, Mount Sinai School of Medicine, New York, NY, US

**Language:** English

**Abstract:** Background: Pathological gambling (PG) is a disorder classified as an impulse control disorder (DSM-IV) bridging impulsive, compulsive and addictive behaviors. The striatum and thalamus are supposed to be involved in the pathophysiological substrate of these behaviors. An increased relative glucose metabolic rate (rGMR) in patients with a diagnosis of PG had previously been reported in the medial and orbitofrontal cortex. We extended our studies to include functional alterations of the striatum and thalamus in a cohort of patients with PG before and after treatment with lithium. Methods: Twenty-one patients with PG who met lifetime comorbid bipolar spectrum diagnoses and a comparison group of 21 age- and sex-matched controls underwent a baseline positron emission tomography (PET) scan. Sixteen of these patients entered a randomized double-blind placebo- controlled parallel-group-design trial of lithium and underwent a follow-up PET scan at week 10. Anatomical MRI were obtained and the structures outlined on consecutive axial slices. These individual hand-drawn templates were used to identify structures on the PET scan of each patient, and the rGMR was measured. Results: The PG patients had a decrement of the rGMR in the ventral parts of the striatum and thalamus, and an increment of the rGMR in the dorsal parts as compared with the controls. Lithium treatment increased the ventral caudate rGMR to a trend level in the patients, but had no effect on the metabolism of either the putamen or the thalamus. Conclusion: Because of their extensive connectivity to the frontal cortex, striatal and thalamic functional alteration may contribute to faulty decision making processes in PG patients. By increasing the ventral rGMR of the caudate nucleus, lithium treatment may reduce cognitive dysfunction and symptoms in PG patients. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: S. Karger AG, Basel; YEAR: 2010

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

**Subject Headings:** [\\*Basal Ganglia](#)

\*Lithium  
 \*Metabolic Rates  
 \*Pathological Gambling  
 \*Thalamus  
 Glucose Metabolism  
 Neurochemistry  
 Positron Emission Tomography

**Source:** PsycINFO

#### 110. Epidemiology and management of alcohol dependence in individuals with post-traumatic stress disorder.

**Citation:** CNS Drugs, December 2010, vol./is. 24/12(997-1007), 1172-7047 (Dec 1, 2010)

**Author(s):** McCarthy, Elissa; Petrakis, Ismene

**Correspondence Address:** Petrakis, Ismene: VA Connecticut Healthcare System, #116A, 950 Campbell Avenue, West Haven, CT, US, 06510, ismene.petrakis@yale.edu

**Institution:** McCarthy, Elissa: VA Connecticut Healthcare System, Newington, CT, US

**Language:** English

**Abstract:** Post-traumatic stress disorder (PTSD) is a chronic and disabling psychiatric disorder with an estimated lifetime prevalence of 7.8%. Co-morbid alcohol dependence is a common clinical occurrence with important clinical considerations. For example, in individuals with both PTSD and alcohol dependence, the symptoms of PTSD tend to be more severe, and there is evidence that these individuals are more prone to alcohol use relapse than non-co-morbid individuals. Co-morbidity of PTSD and alcohol dependence is also associated with a higher rate of psychosocial and medical problems and higher utilization of inpatient hospitalization than either disorder alone. This article highlights the epidemiology of alcohol dependence in PTSD and reviews the evidence for effective treatments. Management of these individuals requires an understanding of the epidemiology and an awareness of treatment interventions, which include both psychosocial treatments (e.g. Seeking Safety, Concurrent Treatment of PTSD and Cocaine Dependence, Transcend, Trauma Recovery and Empowerment Model) and pharmacotherapy (e.g. selective serotonin reuptake inhibitors [SSRIs] and topiramate). Effective treatment of co-morbid PTSD and alcohol dependence may include a combination of these psychosocial and pharmacological interventions. The key element seems to be to ensure an adequate intervention for each disorder administered collaboratively. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Adis Data Information BV.; YEAR: 2010

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

**Subject Headings:** \*Alcoholism  
 \*Comorbidity  
 \*Disease Management  
 \*Epidemiology  
 \*Posttraumatic Stress Disorder

**Source:** PsycINFO

#### 111. Cognitive behavioral therapy for problematic video game players: Conceptual considerations and practice issues.

**Citation:** Journal of CyberTherapy and Rehabilitation, 2010, vol./is. 3/3(261-273), 1784-9934 (Fall, 2010)

**Author(s):** King, Daniel L; Delfabbro, Paul H; Griffiths, Mark D

**Correspondence Address:** King, Daniel L.: School of Psychology, University of Adelaide, Hughes Building, North Terrace, Adelaide, SA, Australia, 5005, Daniel.King@adelaide.edu.au

**Institution:** King, Daniel L.: School of Psychology, University of Adelaide, Adelaide, SA, Australia

**Language:** English

**Abstract:** Cognitive-behavioral therapy (CBT) is rationalized to be a highly appropriate treatment modality for problem and addicted users of video games. Drawing on available empirical research in this and allied areas (e.g., problem gambling), this paper presents some preliminary treatment techniques that may be well suited to the known features, correlates, and consequences of video game addiction. These techniques involve monitoring video game use, setting appropriate goals, and overcoming problem cognitions that intensify and maintain video game use. Specialized knowledge of the structural and situational characteristics that develop and maintain problem video game playing is also provided. While problem video game playing appears to resemble pathological gambling in many ways, some distinct phenomenological aspects of video game playing prevent a direct translation of gambling CBT programs to video game players. It is suggested that further research is needed to provide further guidelines and treatment techniques for video game players who suffer problems with their behavior. There is also need for greater funding for more basic and applied research on problem video game players. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Virtual Reality Medical Institute

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Cognitive Behavior Therapy](#)  
[\\*Computer Games](#)

**Source:** PsycINFO

## 112. Closing the gaps: The impact of inpatient detoxification and continuity of care on client outcomes.

**Citation:** Journal of Psychoactive Drugs, September 2010, vol./is. Sarc Suppl 6/(303-314), 0279-1072 (Sep 2010)

**Author(s):** Ford, Lucy K.; Zarate, Patrick

**Correspondence Address:** Ford, Lucy K.: Ventura County Alcohol and Drug Programs, 24 E. Main St., Ventura, CA, US, 93001, lucy.ford@ventura.org

**Institution:** Ford, Lucy K.: Ventura County Alcohol and Drug Programs, Ventura, CA, US

**Language:** English

**Abstract:** Inpatient detoxification is a critical element of the continuum of care for chemically dependent individuals, especially for those unable to establish sobriety on an outpatient basis. This study evaluated the impact of one such detoxification program on client outcomes during the year after detoxification. The program was a public/private partnership between Ventura County, California, and Tarzana Treatment Center in Los Angeles. Before admission, applicants agreed to enroll in treatment after detoxification. Clients were contacted at one month post-admission and quarterly thereafter for one year to collect data, corroborated by county records, on treatment and outcome variables. The sample included 117 consecutive admissions between July 2007 and June 2009. Detoxification completion rates and follow-up treatment enrollment rates were substantial: 85% of the sample completed detoxification; 71 % enrolled in treatment afterward. Client outcomes were positive, particularly for those enrolled in followup treatment: compared to clients not completing detoxification, and to client functioning in the year before admission, sobriety and employment rates increased, and rates of homelessness, arrests and days incarcerated decreased. The study concludes that public investment in inpatient detoxification services and aftercare is an effective means to decrease both individual and societal costs of addiction. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Continuum of Care](#)  
[\\*Detoxification](#)  
[\\*Drug Abuse](#)  
[Clients](#)

**Source:** PsycINFO  
**Full Text:** Available in *fulltext* at [ProQuest \(Legacy Platform\)](#)

### 113. Chronic care and addictions treatment: A feasibility study on the implementation of posttreatment continuing recovery monitoring.

**Citation:** Journal of Psychoactive Drugs, September 2010, vol./is. Sarc Suppl 6/(295-302), 0279-1072 (Sep 2010)

**Author(s):** Stanford, Mark; Banerjee, Kakoli; Garner, Robert

**Correspondence Address:** Stanford, Mark: Santa Clara Valley Health and Hospital System, Department of Alcohol and Drug Services, Addiction Medicine Division, 2425 Enborg Lane, San Jose, CA, US, 95128, Mark.Stanford@hhs.sccgov.org

**Institution:** Stanford, Mark: Santa Clara County Department of Alcohol & Drug Services - Addiction Medicine Division, San Jose, CA, US

**Language:** English

**Abstract:** In the treatment of drug addiction, as with other chronic conditions, the effects of treatment are significant but not long lasting after discharge unless continuing monitoring is provided. Efforts to help patients sustain positive treatment outcomes are generally directed to community support. Postdischarge checkups can help patients evaluate their behavior and recovery-related issues--similar to a person with diabetes reporting on blood sugar levels and diet and exercise patterns. The challenge for providers is to raise awareness of the importance of continuing recovery monitoring and the responsibility of the treatment program to build a more seamless continuum of care for patients who have completed a primary treatment episode. This article reviews a pilot project of the Department of Alcohol & Drug Services of Santa Clara County, California that tested the feasibility of implementing a continuing recovery monitoring (CRM) service using post-discharge telephone check-ups for volunteer patients (N = 32) who completed treatment. The aims of the study were to (a) develop a model for continuing recovery monitoring, (b) gather data on the model's utility including identifying organizational and logistical challenges and, (c) describe several changes needed in the system of care to add CRM. The study showed that the model of continuing recovery monitoring is a feasible way to extend a system's existing continuum of care. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Continuum of Care](#)  
[\\*Drug Addiction](#)  
[\\*Drug Rehabilitation](#)

**Source:** PsycINFO  
**Full Text:** Available in *fulltext* at [ProQuest \(Legacy Platform\)](#)

### 114. Inside the black box: Measuring addiction treatment services and their relation to outcomes.

**Citation:** Journal of Psychoactive Drugs, September 2010, vol./is. Sarc Suppl 6/(269-276), 0279-1072 (Sep 2010)

**Author(s):** Crevecoeur-MacPhail, Desiree; Ransom, Loretta; Myers, Ana Ceci; Annon, Jeffrey J; Diep, Nancy; Gonzales, Rachel; Rawson, Richard A; Viernes, John Jr.; Sugita, Wayne; Barger, James

**Correspondence Address:** Crevecoeur-MacPhail, Desiree: UCLA Integrated Substance Abuse Programs, 1640 S. Sepulveda Blvd., Suite 320, Los Angeles, CA, US, 90025, desireec@ucla.edu

**Institution:** Crevecoeur-MacPhail, Desiree: Integrated Substance Abuse Programs, Semel Institute for Neuroscience and Human Behavior, University of California, Los Angeles, CA, US

**Language:** English

**Abstract:** The adoption of performance-based management has been under consideration by addiction treatment funding agencies, and, recently, many state and county agencies have

developed performance-based measurement/management systems in an attempt to improve their treatment system. This article describes one such effort in Los Angeles County, California. The Performance-Based Pilot Project linked treatment encounters (counseling sessions, drug testing, case management, and methadone dosing) with client outcomes (abstinence or reduced drug use at discharge) and longer lengths of stay in treatment. Eleven outpatient counseling programs and three narcotic treatment programs participated in the nine-month project. Results indicated that for both outpatient counseling and narcotic treatment programs, more sessions attended in the first 30 days was associated with better client outcomes and longer lengths of stay. Furthermore, in outpatient counseling programs, more group sessions during the first 30 days predicted abstinence or greater reductions in primary drug use; in narcotic treatment programs, more doses received during the first 30 days was correlated to longer treatment retention. This research implies that increasing the availability of counseling sessions for a client's first 30 days and engaging clients early is a promising area for program efforts to improve treatment outcomes and program performance. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Drug Abstinence](#)  
[\\*Drug Addiction](#)  
[\\*Drug Rehabilitation](#)  
[\\*Drug Therapy](#)  
[\\*Methadone Maintenance](#)  
Case Management  
Counseling

**Source:** PsycINFO

**Full Text:** Available in *fulltext* at [ProQuest \(Legacy Platform\)](#)

#### 115. Performance improvement in addiction treatment: Efforts in California.

**Citation:** Journal of Psychoactive Drugs, September 2010, vol./is. Sarc Suppl 6/(261-268), 0279-1072 (Sep 2010)

**Author(s):** Herbeck, Diane M; Gonzales, Rachel; Rawson, Richard A

**Correspondence Address:** Herbeck, Diane M.: UCLA Integrated Substance Abuse Programs, 1640 S. Sepulveda Blvd., Suite 200, Los Angeles, CA, US, 90025, dherbeck@ucla.edu

**Institution:** Herbeck, Diane M.: Integrated Substance Abuse Programs, Semel Institute for Neuroscience and Human Behavior, University of California, Los Angeles, CA, US

**Language:** English

**Abstract:** This article examines performance data improvement efforts among alcohol and other drug (AOD) county and program stakeholders within California's publicly-funded treatment system. County AOD system administrators from approximately two-thirds of California counties (N = 37) and a random sample of treatment program managers (N = 63) were surveyed about practices and priorities related to using performance data to improve service delivery. Survey results showed that over half (56.8%) of the county administrators reported using performance and/or outcome measures to guide decision-making about the treatment programs with which they contract. Measures of treatment engagement and retention were most frequently reported as high priorities for performance data collection. Treatment providers reported considerable variation with their use of performance measures to improve practices. Overall, findings from this study suggest that many programs and counties are taking steps toward adopting practices of performance measurement and management for treatment improvement, although they still require assistance and support in establishing, collecting, and using performance data. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Alcohol Abuse](#)

\*Drug Abuse  
\*Drug Rehabilitation

**Source:** PsycINFO  
**Full Text:** Available in *fulltext* at [ProQuest \(Legacy Platform\)](#)

#### 116. "I've been NIATxed": Participants' experience with process improvement.

**Citation:** Journal of Psychoactive Drugs, September 2010, vol./is. Sarc Suppl 6/(249-259), 0279-1072 (Sep 2010)

**Author(s):** Crevecoeur-MacPhail, Desiree; Bellows, Anne; Rutkowski, Beth A; Ransom, Loretta; Myers, Ana Ceci; Rawson, Richard A

**Correspondence Address:** Crevecoeur-MacPhail, Desiree: UCLA Integrated Substance Abuse Programs, 1640 S. Sepulveda Blvd., Suite 320, Los Angeles, CA, US, 90025, desireec@ucla.edu

**Institution:** Crevecoeur-MacPhail, Desiree: Integrated Substance Abuse Programs, Semel Institute for Neuroscience and Human Behavior, University of California, Los Angeles, CA, US

**Language:** English

**Abstract:** Process improvement strategies provide industries with a method for improving outcomes and performance at a low cost and with minimal training. In Los Angeles County, two process improvement projects were implemented as a way to improve access to, and engagement and retention in, alcohol and other drug abuse treatment. A qualitative evaluation was completed after the Phase II pilot project to assess how the providers felt about the project, what worked, what did not work, what was learned, and the degree to which process improvements changed program operations. Semistructured interviews were conducted with 33 individuals, representing every level of staff participation in the project. Overall, comments indicated a positive experience for staff, administrators, and clients. Providers noted the relative ease of implementation and how quickly changes resulted in impressive improvements. Challenging issues included resistant staff or a lack of additional resources to pay for the project; however, most noted that these issues were resolved. Interview participants also requested more training on data collection and a reduction in the frequency of the project conference calls. This study gives support to the idea of process improvement being a tool that dramatically improves services to consumers of addiction treatment services. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** \*Alcohol Abuse  
\*Alcohol Rehabilitation  
\*Drug Abuse  
\*Drug Rehabilitation

**Source:** PsycINFO  
**Full Text:** Available in *fulltext* at [ProQuest \(Legacy Platform\)](#)

#### 117. Adoption of medications in substance abuse treatment: Priorities and strategies of single state authorities.

**Citation:** Journal of Psychoactive Drugs, September 2010, vol./is. Sarc Suppl 6/(227-238), 0279-1072 (Sep 2010)

**Author(s):** Rieckmann, Traci; Kovas, Anne E; Rutkowski, Beth A

**Correspondence Address:** Rieckmann, Traci: Oregon Health and Science University, 3181 S.W. Sam Jackson Park Road, Portland, OR, US, 97239, rieckman@ohsu.edu

**Institution:** Rieckmann, Traci: Department of Public Health and Preventive Medicine, Oregon Health and Science University, Portland, OR, US

**Language:** English

**Abstract:** Research has confirmed the effectiveness of medications, when used in conjunction with ongoing counseling, to treat substance abuse disorders. This article describes a national, mixed-methods research project designed to investigate single state authorities' (SSAs)

perceptions of adoption of evidence-based practices in substance abuse treatment. Results are focused specifically on medication-assisted treatment, one of five evidence-based practices defined by the National Quality Forum. Medication-assisted treatment (MAT) is an important and effective part of comprehensive care options available to clients who are chronically ill with alcohol and other drug disorders. Despite mounting clinical evidence and increased availability, overall rates of implementation and sustained adoption of medications to treat addiction remain limited. The results illustrate that the SSA representatives who fund public treatment programs believe MAT is a priority and worthy of system-wide implementation. Current strategies utilized by SSAs to support the adoption of MAT are detailed, as are barriers to adoption and implementation. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[\\*Drug Therapy Strategies](#)  
**Source:** PsycINFO  
**Full Text:** Available in *fulltext* at [ProQuest \(Legacy Platform\)](#)

#### 118. Improving the accountability of California's public substance abuse treatment system through the implementation of performance models.

**Citation:** Journal of Psychoactive Drugs, September 2010, vol./is. Sarc Suppl 6/(211-214), 0279-1072 (Sep 2010)  
**Author(s):** Rawson, Richard A; Gonzales, Rachel; Crevecoeur-MacPhail, Desiree; Urada, Darren; Brecht, Mary-Lynn; Chalk, Mady; Kemp, Jack; Cunningham, Michael  
**Correspondence Address:** Rawson, Richard A.: UCLA Integrated Substance Abuse Programs, 1640 S. Sepulveda Blvd., Suite 200, Los Angeles, CA, US, 90025, rrawson@mednet.ucla.edu  
**Institution:** Rawson, Richard A.: Integrated Substance Abuse Programs, Semel Institute for Neuroscience and Human Behavior, University of California, Los Angeles, CA, US  
**Language:** English  
**Abstract:** Improving the care for individuals with substance use disorders is a national health policy priority. Like other parts of the health care system, the addiction field is under pressure for higher accountability--more efficient use of treatment resources, the delivery of quality services, and the production of positive client outcomes. This introductory article highlights the importance of the collection of articles being published in this special issue as they describe California's efforts toward making the alcohol and drug (AOD) treatment system more accountable and effective. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Publication Type:** Journal; Peer Reviewed Journal  
**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[Accountability](#)  
[Quality of Services](#)  
**Source:** PsycINFO  
**Full Text:** Available in *fulltext* at [ProQuest \(Legacy Platform\)](#)

#### 119. Editor's introduction: Improving the addiction treatment system in California through the use of data and evidence-based practices--California Substance Abuse Research Consortium (SARC) meetings, 2009.

**Citation:** Journal of Psychoactive Drugs, September 2010, vol./is. Sarc Suppl 6/(207-210), 0279-1072 (Sep 2010)  
**Author(s):** Rutkowski, Beth A; Rawson, Richard A; Freese, Thomas E

**Institution:** Rutkowski, Beth A.: Integrated Substance Abuse Programs, Semel Institute for Neuroscience and Human Behavior, University of California, Los Angeles, CA, US

**Language:** English

**Abstract:** The California Substance Abuse Research Consortium (SARC) has, for approximately 25 years, documented (1) California's developing and evolving substance abuse trends; (2) critical research efforts within the state conducted to raise awareness of and increase knowledge about local and regional substance abuse problems; and (3) relevant policy decisions and initiatives. The thirty-ninth and fortieth semiannual SARC meetings in Burbank and Sacramento collectively succeeded in bringing together a diverse group of 200 substance abuse professionals, including researchers, county alcohol and drug program administrators and staff, law enforcement personnel, criminal justice and social service agency staff, treatment practitioners, and policy makers. In these challenging economic times, it is critical for policy makers and treatment providers to ensure that the highest quality of service is provided to clients to maximize successful outcomes. All 2009 SARC meeting series presenters were invited to submit an article based on their meeting presentation. Participation as a presenter at the meetings was in no way contingent upon submission of an article. It is our intention that the valuable information discussed at SARC meetings should be disseminated beyond the attendees who hear it firsthand to the many others who are responsible for the formulation of California's health and safety policies. The 2009 SARC meeting series presenters were selected because they have new and/or innovative information related to the need to improve the alcohol and other drug treatment system in California. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

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

**Subject Headings:** [\\*Alcohol Rehabilitation](#)  
[\\*Drug Abuse](#)  
[\\*Drug Addiction](#)  
[\\*Drug Rehabilitation](#)  
[\\*Evidence Based Practice Trends](#)  
[Quality of Services](#)

**Source:** PsycINFO

**Full Text:** Available in *fulltext* at [ProQuest \(Legacy Platform\)](#)

#### 120. Substance Abuse Research Consortium (SARC) introduction: Moving forward to improve addiction treatment in California.

**Citation:** Journal of Psychoactive Drugs, September 2010, vol./is. Sarc Suppl 6/(205-206), 0279-1072 (Sep 2010)

**Author(s):** Zito, Renee

**Institution:** Zito, Renee: California Department, Alcohol and Drug Programs, CA, US

**Language:** English

**Abstract:** With the coming of health care reform, alcohol and other drug treatment providers will see changes in the way they do business in California. Treatment for substance use disorders will include primary care providers. Providers will find that most--if not all--of their clients are covered by insurance and those clients will want choices in their treatment services. New payer sources, such as insurance companies or exchanges, also will demand services identified with recognized standards of care for substance use disorders. It was timely and appropriate, then, that the theme for the thirty-ninth and fortieth California Substance Abuse Research Consortium (SARC) meetings in September 2009 focused on guidelines for treatment and evidence-based practices in the state. In addition to the work being done by researchers and practitioners in the field, the California Department of Alcohol and Drug Programs (ADP) has been moving forward to improve addiction treatment in California through a variety of projects. The State Epidemiological Outcomes Workgroup (SEOW) project provides a multiyear cycle of federal funding to states and territories to prevent substance abuse and reduce associated

problems with substance use. California was awarded its second cycle of funding in 2009. The SARC meetings brought together not only the creative minds and enthusiastic energy of the participants, but also a wealth of ideas and information that will spark additional steps toward our goal of creating a responsive, client-centered, evidenced-based, culturally competent system of services for substance use disorders in California. (PsycINFO Database Record (c) 2010 APA, all rights reserved)

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

**Subject Headings:** [\\*Alcohols](#)  
[\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[\\*Drug Therapy](#)  
[\\*Evidence Based Practice](#)  
 Addiction  
 Health Care Reform

**Source:** PsycINFO

**Full Text:** Available in *fulltext* at [ProQuest \(Legacy Platform\)](#)

### 121. Methadone maintenance as last resort: A social phenomenology of a drug policy.

**Citation:** Sociological Forum, December 2010, vol./is. 25/4(804-823), 0884-8971;1573-7861 (Dec 2010)

**Author(s):** Jarvinen, Margaretha; Miller, Gale

**Correspondence Address:** Jarvinen, Margaretha: Department of Sociology, University of Copenhagen, Herluf Trolles gade 11, Copenhagen, Denmark, 1052, K, mja@sfi.dk

**Institution:** Jarvinen, Margaretha: Department of Sociology, University of Copenhagen, Copenhagen, Denmark

**Language:** English

**Abstract:** Drawing on qualitative interviews with drug addicts in Copenhagen, Denmark, this article offers a phenomenological reading of a methadone maintenance program. The program is set within the principles of harm reduction, meaning that its aim is not to cure the participants' addiction but to keep them stable on substitution medicine and slow the deterioration of their lives. We analyze the program's implications for participants' sense of agency and constraint and for their orientations toward the past, present, and future. A major concern is with the program as a last resort policy that challenges neoliberal ideals of self-governance and self-development. While the program increases the participants' sense of stability by providing them with methadone and by allowing them to better address their economic, housing, and other needs of everyday life, it also represents a context of physical, emotional, and social dependence. The interviews cast the program as a paradox that simultaneously increases participants' sense of stability and vulnerability. In essence, the Danish methadone program has the effect of both helping the participants by reducing the drug-related harm in their lives and of fostering conditions of inferiorization and enduring nonbecoming. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Eastern Sociological Society; YEAR: 2010

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

**Subject Headings:** [\\*Government Policy Making](#)  
[\\*Harm Reduction](#)  
[\\*Methadone Maintenance](#)  
[\\*Phenomenology](#)

**Source:** PsycINFO

### 122. Target-specific encoding of response inhibition: Increased contribution of AMPA to NMDA receptors at excitatory synapses in the prefrontal cortex.

**Citation:** The Journal of Neuroscience, August 2010, vol./is. 30/34(11493-11500), 0270-6474;1529-2401 (Aug 25, 2010)

**Author(s):** Hayton, Scott J; Lovett-Barron, Matthew; Dumont, Eric C; Olmstead, Mary C

**Correspondence Address:** Olmstead, Mary C.: Department of Psychology, Queen's University, 62 Arch Street, Kingston, ON, Canada, K7L 3N6, olmstead@queensu.ca

**Institution:** Hayton, Scott J.: Centre for Neuroscience Studies, Queen's University, Kingston, ON, Canada

**Language:** English

**Abstract:** Impulse control suppresses actions that are inappropriate in one context, but may be beneficial in others. The medial prefrontal cortex (mPFC) mediates this process by providing a top-down signal to inhibit competing responses, although the mechanism by which the mPFC acquires this ability is unknown. To that end, we examined synaptic changes in the mPFC associated with learning to inhibit an incorrect response. Rats were trained in a simple response inhibition task to withhold responding until a signal was presented. We then measured synaptic plasticity of excitatory synapses in the mPFC, using whole-cell patch-clamp recordings, in brain slices prepared from trained rats. Response inhibition training significantly increased the relative contribution of AMPA receptors to the overall EPSC in prelimbic, but not infralimbic, neurons of the mPFC. This potentiation of synaptic transmission closely paralleled the acquisition and extinction of response inhibition. Using a retrograde fluorescent tracer, we observed that these plastic changes were selective for efferents projecting to the ventral striatum, but not the dorsal striatum or amygdala. Therefore, we suggest that response inhibition is encoded by a selective strengthening of a subset of corticostriatal projections, uncovering a synaptic mechanism of impulse control. This information could be exploited in therapeutic interventions for disorders of impulse control, such as addiction, attention deficit-hyperactivity disorder, and schizophrenia. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The authors; YEAR: 2010

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

**Subject Headings:** [\\*N-Methyl-D-Aspartate](#)  
[\\*Prefrontal Cortex](#)  
[\\*Response Inhibition](#)  
[\\*Synapses](#)  
[\\*AMPA](#)  
[Neural Receptors](#)  
[Rats](#)

**Source:** PsycINFO

### 123. Rats markedly escalate their intake and show a persistent susceptibility to reinstatement only when cocaine is injected rapidly.

**Citation:** The Journal of Neuroscience, August 2010, vol./is. 30/34(11346-11355), 0270-6474;1529-2401 (Aug 25, 2010)

**Author(s):** Wakabayashi, Ken T; Weiss, Mark J; Pickup, Kristen N; Robinson, Terry E

**Correspondence Address:** Robinson, Terry E., 530 Church Street, East Hall, Ann Arbor, MI, US, 48109-1043, ter@umich.edu

**Institution:** Wakabayashi, Ken T.: Neuroscience Graduate Program, University of Michigan, Ann Arbor, MI, US

**Language:** English

**Abstract:** When drugs enter the brain rapidly, liability for addiction is increased, but why this is the case is not well understood. Here we examined the influence of varying the speed of intravenous cocaine delivery on self-administration behavior in rats given limited or extended opportunity to take drug. The speed of cocaine delivery had no effect on self-administration behavior when rats were given only 1 h each day to take cocaine.

When given sixfold more time to take cocaine, rats that received cocaine rapidly (5- 45 s) increased their total intake eightfold. However, rats that received cocaine more slowly (> 90 s) did not avail themselves of the opportunity to take much more drug: they increased their intake only twofold. Furthermore, when tested 45 d after the last self-administration session, a drug-priming injection reinstated drug-seeking behavior only in rats that in the past had cocaine injected rapidly (5 s), and this was associated with a persistent suppression in the ability of cocaine to induce immediate early gene expression. Cocaine may be potentially more addictive when it reaches the brain rapidly because (1) this promotes a marked escalation in intake and (2) it renders individuals more susceptible to relapse long after the discontinuation of drug use. This is presumably because the rapid uptake of drug to the brain preferentially promotes persistent changes in brain systems that regulate motivation for drug, and continuing exposure to large amounts of drug produces a vicious cycle of additional maladaptive changes in brain and behavior. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: The authors; YEAR: 2010

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

**Subject Headings:** [\\*Cocaine](#)  
[\\*Drug Administration Methods](#)  
[\\*Drug Self Administration](#)  
[\\*Reinstatement](#)  
[Rats](#)

**Source:** PsycINFO

#### 124. ADA Title I allegations related to unlawful discharge: Characteristics of charging parties.

**Citation:** Advances in Developing Human Resources, August 2010, vol./is. 12/4(429-447), 1523-4223 (Aug 2010)

**Author(s):** Rumrill, Phillip D; Fitzgerald, Shawn M; McMahon, Brian T

**Correspondence Address:** McMahon, Brian T.: Department of Rehabilitation Counseling, Virginia Commonwealth University, Richmond, VA, US, 23298-0330, btmcmaho@vcu.edu

**Institution:** Rumrill, Phillip D.: Rehabilitation Counseling Program, Kent State University, OH, US

**Language:** English

**Abstract:** This article describes findings from a causal comparative study of the characteristics of charging parties who filed allegations of discrimination related to discharge with the U.S. Equal Employment Opportunity Commission (EEOC) under Title I of the Americans with Disabilities Act (ADA) between 1992 and 2008. Charging party characteristics derived from 140,581 closed unlawful discharge and constructive discharge allegations were compared and contrasted to 165,447 closed allegations aggregated from four other prevalent forms of discrimination, including hiring, disability harassment and intimidation, reasonable accommodations, and terms and conditions of employment. Tests of proportion distributed as chi-square were used to form comparisons along a variety of factors, including age, gender, type of impairment, and race/ethnicity of the charging party. In comparison to nondischarge allegations, discharge-related allegations were more likely to be filed by charging parties who are male; younger (between the ages of 15 and 34); and coping with heart/cardiovascular conditions, cancer, bipolar disorder, epilepsy, HIV/AIDS, alcoholism, drug addiction, and mental retardation. People with disabilities who filed discharge allegations were comparatively less likely to be female; between the ages of 35 and 64; and White or of Asian, Hispanic, or Native American extraction. Implications for future research and HRD practice are discussed. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: SAGE Publications; YEAR: 2010

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

**Subject Headings:** [\\*Employee Characteristics](#)  
[\\*Employment Discrimination](#)

[\\*Personnel Termination](#)

[\\*Disability Laws](#)

**Source:** PsycINFO

**125. Relation between newspaper coverage of 'light' cigarette litigation and beliefs about 'lights' among American adolescents and young adults: The impact on risk perceptions and quitting intentions.**

**Citation:** Tobacco Control: An International Journal, August 2010, vol./is. 19/4(267-273), 0964-4563 (Aug 2010)

**Author(s):** Dunlop, Sally M; Romer, Daniel

**Correspondence Address:** Dunlop, Sally M.: Adolescent Risk Communication Institute, Annenberg Public Policy Centre, University of Pennsylvania, 202 S 36th Street, Philadelphia, PA, US, 19104, sdunlop@asc.upenn.edu

**Institution:** Dunlop, Sally M.: Adolescent Risk Communication Institute, Annenberg Public Policy Centre, University of Pennsylvania, Philadelphia, PA, US

**Language:** English

**Abstract:** Aim: To investigate the impact of newspaper use in a year of increased coverage of litigation against the tobacco industry on youths' beliefs about the health risks of 'light' cigarettes, and examine relations between inaccurate beliefs about 'lights', perceptions of risk and intentions to quit smoking. Participants: The data come from the 2004 National Annenberg Survey of Youth, a representative random digit dial telephone survey of youths aged 14-22 years in the USA (n=1501; current smokers, n=305; 'lights' smokers, n=112). Design: All youths were asked about newspaper use and beliefs regarding 'light' cigarettes (riskiness, addictiveness, ease of quitting). Smokers reported on risk perceptions and quitting intentions. We also examined changes in newspaper coverage related to 'lights' from January 2001 to April 2004. Results: Newspaper coverage related to 'lights' increased in the first months of 2003, and continued into 2004. Logistic regression analyses suggest that 'lights' smokers with lower levels of newspaper use were most likely to hold inaccurate beliefs about 'lights' (OR=5.93, 95% CI 1.48 to 23.77). Smokers of 'lights' with inaccurate beliefs were less likely to perceive their smoking as risky (OR=0.29, 95% CI 0.11 to 0.87), and smokers with inaccurate beliefs were less likely to have strong quitting intentions (OR=0.52, 95% CI 0.28 to 0.96). Conclusions: Inaccurate beliefs about the risks of 'lights' were negatively related to youth smokers' perceptions of risk and intentions to quit smoking. News coverage surrounding the tobacco industry's failure to disclose these risks might help reduce these inaccurate, and potentially dangerous, beliefs. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Litigation](#)  
[\\*Newspapers](#)  
[\\*Risk Perception](#)  
[\\*Smoking Cessation](#)  
[\\*Tobacco Smoking](#)  
[Adolescent Attitudes](#)  
[Adult Attitudes](#)  
[Health Knowledge](#)  
[Intention](#)

**Source:** PsycINFO

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

**126. Breastfeeding rates among mothers of infants with neonatal abstinence syndrome.**

**Citation:** Breastfeeding Medicine, August 2010, vol./is. 5/4(159-164), 1556-8253;1556-8342 (Aug 2010)

**Author(s):** Wachman, Elisha M; Byun, John; Philipp, Barbara L

**Correspondence Address:** Philipp, Barbara L.: Department of Pediatrics, Boston Medical Center, YACC 5, 850 Harrison Avenue, Boston, MA, US, 02118, Bobbi.Philipp@bmc.org

**Institution:** Wachman, Elisha M.: Department of Pediatrics, Boston Medical Center, Boston, MA, US

**Language:** English

**Abstract:** Background: Woman who struggle with drug addiction during pregnancy are perhaps the most vulnerable of new mothers. The opioid substitution medications methadone and buprenorphine are both compatible with breastfeeding. The objective of this study is to determine breastfeeding rates among opioid-dependent women giving birth in a Baby-Friendly Hospital. Methods: We performed a retrospective chart review of all infants born at Boston Medical Center (Boston, MA) between July 2003 and January 2009 with a diagnosis of neonatal abstinence syndrome. Feeding information was obtained, as well as baseline medical information about the mother-infant pairs. Breastfeeding eligibility was determined by a negative urine toxicology screen on admission, no illicit drug use in the third trimester, and a negative human immunodeficiency virus status. Results: Two hundred seventy-six mother-infant pairs were identified. Forty percent of the mothers carried one or more psychiatric diagnoses; 24% were taking two or more psychiatric medications. Sixty-eight percent of the mothers were eligible to breastfeed; of those, 24% breastfed to some extent during their infant's hospitalization. Sixty-percent of those who initiated stopped breastfeeding after an average of 5.88 days (SD 6.51). Conclusions: Breastfeeding rates among opioid-dependent women were low, with three-quarters of those eligible electing not to breastfeed. Of the minority of women who did choose to breastfeed, more than half stopped within 1 week. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*Breast Feeding](#)  
[\\*Drug Addiction](#)  
[\\*Opiates](#)  
[\\*Pregnancy](#)  
[Mothers](#)  
[Syndromes](#)

**Source:** PsycINFO

#### 127. Internet addiction: A descriptive clinical study focusing on comorbidities and dissociative symptoms.

**Citation:** Comprehensive Psychiatry, November 2009, vol./is. 50/6(510-516), 0010-440X (Nov-Dec 2009)

**Author(s):** Bernardia, Silvia; Pallanti, Stefano

**Correspondence Address:** Bernardia, Silvia: Department of Psychiatry, University of Florence, Florence, Italy, 50137, silvia.bernardi@gmail.com

**Institution:** Bernardia, Silvia: Department of Psychiatry, Mount Sinai School of Medicine, Manhattan, NY, US

**Language:** English

**Abstract:** Aims: Internet addiction (IAD) is an emerging cause of morbidity and has been recently considered to merit inclusion in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Given the paucity of knowledge about IAD, we conducted a descriptive clinical analysis of patients focusing on clinical, demographic features, and comorbidities. The detachment has been suggested as a reason for the attractiveness of the Internet; thus, we assessed dissociative symptoms and their association with IAD disability. Design and Setting: A cohort of 50 adult outpatients were screened using the Internet Addiction Scale. Exclusion criterion was using the Internet for only one purpose such as gaming or gambling. Participant: Nine women and 6 men constituted the sample of Internet addicts; each of them had a score of 70 or higher on the Internet Addiction Scale. Measurement: Comorbidities and subthreshold symptoms were screened carefully.

Dissociative symptoms were analyzed with the Dissociative Experience Scale, and disability was assessed using the Sheehan Disability Scale. Findings: Hours/week spent on the Internet were 42.21 +or- 3.09. Clinical diagnoses included 14% attention deficit and hyperactivity disorder, 7% hypomania, 15% generalized anxiety disorder, 15% social anxiety disorder; 7% dysthymia, 7% obsessive compulsive personality disorder, 14% borderline personality disorder, and 7% avoidant personality disorder. One patient met criteria for binge eating disorder. Severity measures of IAD were associated with higher perception of family disability ( $r = 0.814$ ;  $P \leq .001$ ) and with higher Yale-Brown Obsessive Compulsive Severity score ( $r = 0.771$ ;  $P \leq .001$ ). Scores for the Dissociative Experience Scale were higher than expected (23.20 +or- 1.83) and were related to higher obsessive compulsive scores ( $r = 0.618$ ;  $P \leq .001$ ), hours per week on the Internet ( $r = 0.749$ ;  $P \leq .001$ ), and perception of family disability ( $r = 0.677$ ;  $P \leq .001$ ). Conclusion: From a phenomenological point of view, IAD in our sample population seems to be more compulsory than rewarding or mood driven. Dissociative symptoms are related to severity and impact of IAD. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Conference Information:** Italian Society of Psychopathology (SOPSI). Feb, 2008. Rome. Italy. Part of the data have been previously presented at the aforementioned conference.

**Country of Publication:** STATEMENT: All rights reserved.; HOLDER: Elsevier Inc.; YEAR: 2009

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

**Subject Headings:** [\\*Comorbidity](#)  
[\\*Diagnosis](#)  
[\\*Dissociative Disorders](#)  
[\\*Gambling](#)  
[\\*Internet Addiction](#)  
[Outpatients](#)

**Source:** PsycINFO

#### 128. Consequences of drug abuse and HIV/AIDS in China: Recommendations for integrated care of HIV-infected drug users.

**Citation:** AIDS Patient Care and STDs, October 2009, vol./is. 23/10(877-884), 1087-2914 (Oct 2009)

**Author(s):** Li, Xianhong; He, Guoping; Wang, Honghong; Williams, Ann Bartley

**Correspondence Address:** He, Guoping, 72 Tongzipo Road, Changsha, China, 410013, hgpcsu@yahoo.com.cn

**Institution:** Li, Xianhong; School of Nursing, Central South University, Changsha, China

**Language:** English

**Abstract:** Drug abuse is a complicated social phenomenon rather than a neural disease. It especially fuels the HIV/AIDS epidemic. Researchers have shown interest in HIV-infected drug users as the socially and medically marginalized population, but they did not provide good enough care. Based on published English and Chinese journal articles and official reports, this integrated literature review summarizes the epidemic of drug abuse and HIV/AIDS, and comments on the clinical and psychosocial consequences, and harm reduction measures in China. Officially registered drug users have reached more than 1 million recently. A little under half of the people living with HIV/AIDS are injection drug users, as they transmit the disease through needle sharing and unprotected sexual behavior. The main consequences of drug abuse and HIV/AIDS included high prevalence of hepatitis viruses and tuberculosis co-infections, severe mental problems and extreme poverty. Even health professionals hold discriminative attitude toward drug users because of condemnation of drug abuse behavior and fear of HIV infection. Although interventions for drug addiction and harm reduction have been scaled up quickly, such as methadone maintenance treatment and needle syringe programs, the measures should be further revised, and the effectiveness needs to be evaluated appropriately. To enhance HIV-infected drug users' quality of life and the utility of medical services, improving health care providers' attitude is the first step. Then securing good quality of integrated

medical care services with multidisciplinary cooperation will be essential. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

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

**Subject Headings:** [\\*AIDS](#)  
[\\*Drug Abuse](#)  
[\\*Harm Reduction](#)  
[\\*HIV](#)  
[\\*Integrated Services](#)

**Source:** PsycINFO

**Full Text:** Available in *fulltext* at [EBSCO Host](#)

### 129. Attentional bias in drug abuse: Theory and method.

**Original Title:** Vies atencional no abuso de drogas: Teoria e metodo.

**Citation:** Psicologia: Teoria e Pesquisa, October 2009, vol./is. 25/4(603-609), 0102-3772 (Oct-Dec 2009)

**Author(s):** Peuker, Ana Carolina; Lopes, Fernanda Machado; Bizarro, Lisiane

**Correspondence Address:** Peuker, Ana Carolina: Universidade Federal do Rio Grande do Sul, Instituto de Psicologia, Laboratorio de Psicologia Experimental, Neurociencias e Comportamento (LPNeC), Rua Ramiro Barcelos 2600, sala 106, Porto Alegre, Brazil, CEP 90035-003, [acepeuker@terra.com.br](mailto:acepeuker@terra.com.br)

**Institution:** Peuker, Ana Carolina: Universidade Federal do Rio Grande do Sul, Porto Alegre, Brazil

**Language:** Portuguese

**Abstract:** Attentional bias to drug-related cues can induce craving, decrease concentration on non-related drug tasks and increase vulnerability to relapse in drug addicts. The aim of this study is to discuss current theories and research methods about the attentional bias role on addictive behaviors. The literature review of Medline, Pubmed and Lilacs databases showed that the dot-probe task and the emotional Stroop test are among the main methods of attentional bias investigation. This review also pointed out the methodological limitations in attentional bias research, suggesting that this phenomenon should be studied under better controlled conditions, which should consider levels of dependence, withdrawal and craving. Further studies on attentional bias can help to understand cognitive processes that underlie addictive behaviors. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Attention](#)  
[\\*Cues](#)  
[\\*Drug Abuse](#)  
[\\*Drug Addiction](#)  
[\\*Methodology](#)  
[Response Bias](#)  
[Stroop Color Word Test](#)

**Source:** PsycINFO

### 130. Adolescence, drug-addiction and public policies: Contemporary scenarios.

**Original Title:** Adolescencia, drogadicao e politicas publicas: Recortes no contemporaneo.

**Citation:** Estudos de Psicologia, October 2009, vol./is. 26/4(445-454), 0103-166X (Oct-Dec 2009)

**Author(s):** Raupp, Luciane; Milnitsky-Sapiro, Clary

**Correspondence Address:** Milnitsky-Sapiro, Clary: Universidade Federal do Rio Grande do Sul, Instituto de Psicologia, Departamento de Psicologia Social e Intitucional, Av. Ramiro Barcelos, 2600,

Sala 211, Campus da Saude, RS, Porto Alegre, Brazil, 90035-003,  
clarysapiro@uol.com.br

- Institution:** Raupp, Luciane: Universidade de Sao Paulo, Programa de Pos-Graduacao em Saude Publica, Sao Paulo, Brazil
- Language:** Portuguese
- Abstract:** At the present time, drug abuse by adolescents is considered to be a serious public health issue, with potentially harmful consequences for the "peculiar conditions of a person in development". The present work aims to investigate three public institutions that accept adolescents for drug abuse treatment. The findings were compared to the adopted public policies that serve as justification for the conception of these services and investigate whether these policies practice what they preach. The Ethnographic Description was used as the method of investigation, followed by a Content Analysis of the informal dialogue, document checks, and interviews with professionals and adolescents at the locations under review. The results indicate a mismatch between what is prescribed by public policies and the actual reality of the services provided, emphasizing the importance of interventions that take the peculiarities of adolescence and individuality into account. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [\\*Adolescent Psychology](#)  
[\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[\\*Government Policy Making](#)  
[\\*Public Health](#)  
[Drug Addiction](#)
- Source:** PsycINFO

### 131. Injection drug using women and the means by which they support their drug use.

- Original Title:** Injektionsmissbrukande kvinnors inkomstfallor och anskaffning av droger.
- Citation:** NAT Nordisk alkohol & narkotikatidskrift, 2009, vol./is. 26/5(365-383), 1455-0725 (2009)
- Author(s):** Richert, Torkel
- Correspondence Address:** Richert, Torkel: Malmo Hogskola Fakulteten for Hals och Samhalle, Malmo, Sweden, 205 06, torkel.richert@mah.se
- Institution:** Richert, Torkel: Malmo Hogskola Fakulteten for Hals och Samhalle, Malmo, Sweden
- Language:** Finnish
- Abstract:** Aims and methods: The purpose of the present paper is to investigate the ways in which women who inject heroin or amphetamines procure drugs and finance their drug use. The results are based on standardised interviews conducted at the needle exchange programme in Malmo between 1 July 2005 and 30 September 2006. In total, 188 out of the 232 women who visited the programme during this period were interviewed. Results: A vast majority of the women (93%) buy most of the drugs they use themselves. Among the women interviewed, the most common sources of income were: social benefits (45%), dealing (23%), prostitution (22%), theft (21%) and paid work (16%). A majority of the women (53%) reported use of both formal and informal incomes to finance their drug use over the last two weeks, just over a third of the women (36%) reported only formal incomes, and a small minority (12%) reported only informal incomes. A majority of the women also reported to have been provided with drugs by others. In most cases, the provider was a man ( $p > .01$ ). Women with heroin as their principal drug more frequently reported multiple sources of income ( $p > .01$ ), income through prostitution ( $p > .001$ ), dealing ( $p > .01$ ) or theft ( $p > .05$ ), whereas women with amphetamines as their principal drug more frequently reported income through paid work ( $p > .05$ ) or pensions ( $p > .01$ ). Conclusions: Few women correspond to the stereotypical image of the homeless and outcast street addict who supports her drug habit mainly through prostitution and illegal activities or by contacts with male addicts. The majority of the women in this study have

a relatively stable housing situation, the vast majority (93%) are active actors on the drug market who buy most of the drugs they use themselves, and most of the women use incomes from both formal/legal and informal/illegal sources. For most of the women, drugs provided by others only constituted a complement to those obtained by the women themselves. A few women, however, who did not report any personal income, seem to be highly dependent on others to secure a safe supply of drugs. Some women also reported that they had had to perform sexual services in order to get access to drugs from male suppliers. For women with heroin as their principal drug, it seemed much more difficult to finance their drug use by legal incomes only. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Amphetamine](#)  
[\\*Heroin](#)  
[\\*Human Females](#)  
[\\*Income \(Economic\)](#)  
[\\*Intravenous Drug Usage](#)

**Source:** PsycINFO

### 132. Possibilities for interventions for alcohol problems among the elderly.

**Original Title:** Moglichkeiten der intervention bei alkoholproblemen im hoheren lebensalter.

**Citation:** Sucht: Zeitschrift fur Wissenschaft und Praxis, October 2009, vol./is. 55/5(303-311), 0939-5911 (Oct 2009)

**Author(s):** Rumpf, Hans-Jurgen; John, Ulrich; Hapke, Ulfert; Bischof, Gallus

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**Language:** German

**Abstract:** Aims: Elderly people with problematic alcohol consumption are underserved with respect to early intervention and addiction-specific treatment. This article gives an overview of diagnostic instruments, brief interventions, and treatment possibilities. Method: An online search in PubMed was conducted. Results: Screening and in-depth diagnostic procedures for younger age groups cannot be simply transferred to older age groups without modification. In the initial studies, brief interventions used in primary care settings were shown to be effective. Studies of addiction-specific treatments have shown that the elderly have at least similar short-term outcomes as younger age groups and better long-term rates of abstinence. There is, however, some evidence that age-specific adaptations of interventions can enhance treatment adherence and outcome. Conclusions: There are effective treatment possibilities for problematic alcohol use in the elderly. Improved provision of care that includes brief interventions and additional treatment measures is urgently needed. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Alcohol Abuse](#)  
[\\*Alcohol Rehabilitation](#)  
[\\*Diagnosis](#)  
[\\*Intervention](#)  
[Aging](#)

**Source:** PsycINFO

### 133. At-risk drinking in older age: An overview of prevalence and consequences.

**Original Title:** Riskanter alkohlkonsum im hoheren alter: Haufigkeit und folgen--Ein ublich.

**Citation:** Sucht: Zeitschrift fur Wissenschaft und Praxis, October 2009, vol./is. 55/5(266-280), 0939-5911 (Oct 2009)

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**Language:** German

**Abstract:** Aims: This paper reviews the epidemiological research related to prevalence, demographic characteristics, and consequences of at-risk drinking among older people. Methods: Literature searches were conducted using PsycINFO, PubMed, and the bibliography of the German Centre for Addiction Issues. Results: The studies are characterized by considerable methodological heterogeneity, a fact which limits their comparability significantly. The relationship between different levels of alcohol consumption and potentially beneficial or harmful consequences is unclear. Nevertheless, the available findings are consistent in regard of two things: Both alcohol consumption and at-risk drinking are significantly less common among older women than among older men, and both of them decline with increasing age in both sexes. However, there are still substantial rates of at-risk drinking in higher age groups, which is frequently associated with other adverse health-related behaviours (i.e. smoking) and with a significant increase in the risk of severe health damage and mortality. Conclusions: There is a need to identify at-risk drinking patterns among older people and to find early, effective, and efficient interventions for them. Evidence suggests that these goals could be realized in primary care settings. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

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

**Subject Headings:** [\\*Aging](#)  
[\\*Alcohol Drinking Patterns](#)  
[\\*At Risk Populations](#)  
[\\*Demographic Characteristics](#)  
[\\*Epidemiology](#)

**Source:** PsycINFO

#### 134. Acculturation stress, anxiety disorders, and alcohol dependence in a select population of young adult Mexican Americans.

**Citation:** Journal of Addiction Medicine, December 2009, vol./is. 3/4(227-233), 1932-0620;1935-3227 (Dec 2009)

**Author(s):** Ehlers, Cindy L; Gilder, David A; Criado, Jose R; Caetano, Raul

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**Language:** English

**Abstract:** Objectives: Mexican Americans comprise one of the most rapidly growing populations in the United States, and within this population, the process of acculturation has been suggested to be associated with some mental health problems. This study sought to ascertain quantitative information indexing acculturation stress and it's association with mental health disorders in a select community sample of Mexican Americans. Methods: Demographic information, Diagnostic and Statistical Manual-III-R diagnoses, and information on cultural identity and acculturation stress were obtained from 240 Mexican American young adults that were recruited by fliers and were residing in selected areas of San Diego. Results: No associations were found between measures of cultural

identification and lifetime diagnoses of drug or alcohol dependence, major depressive disorder, anxiety disorders, or antisocial personality disorder or conduct disorder in this sample of Mexican American young adults. However, lifetime diagnoses of alcohol dependence, substance dependence, and anxiety disorders were associated with elevations in acculturation stress. Conclusion: Quantitative measures of acculturation stress, but not cultural identity per se, were found to be associated significantly with substance dependence and anxiety disorders in this select population of Mexican American young adults. These data may be helpful in designing prevention and intervention programs for this high-risk population. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: American Society of Addiction Medicine; YEAR: 2009

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

**Subject Headings:** [\\*Acculturation](#)  
[\\*Alcoholism](#)  
[\\*Anxiety Disorders](#)  
[\\*Mental Disorders](#)  
[\\*Mexican Americans](#)  
[Stress](#)

**Source:** PsycINFO

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

### 135. The effect of computer-mediated administration on self-disclosure of problems on the Addiction Severity Index.

**Citation:** Journal of Addiction Medicine, December 2009, vol./is. 3/4(194-203), 1932-0620;1935-3227 (Dec 2009)

**Author(s):** Butler, Stephen F; Villapiano, Albert; Malinow, Andrew

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**Language:** English

**Abstract:** Objectives: People tend to disclose more personal information when communication is mediated through the use of a computer. This study was conducted to examine the impact of this phenomenon on the way respondents answer questions during computer-mediated, self-administration of the Addiction Severity Index (ASI) called the Addiction Severity Index-Multimedia Version (ASI-MV). Methods: A sample of 142 clients in substance abuse treatment were administered the ASI via an interviewer and the computerized ASI-MV, 3 to 5 days apart in a counterbalanced order. Seven composite scores were compared between the 2 test administrations using paired t tests. Post hoc analyses examined interviewer effects. Results: Comparisons of composite scores for each of the domains between the face-to-face administered and computer-mediated, self-administered ASI revealed that significantly greater problem severity was reported by clients in 5 of the 7 domains during administration of the computer-mediated, self-administered version compared with the trained interviewer version. Item analyses identified certain items as responsible for significant differences, especially those asking clients to rate need for treatment. All items that were significantly different between the 2 modes of administration revealed greater problem severity reported on the ASI-MV as compared with the interview administered assessment. Post hoc analyses yielded significant interviewer effects on 4 of the 5 domains where differences were observed. Conclusions: These data support a growing literature documenting a tendency for respondents to be more self-disclosing in a computer-mediated format over a face-to-face interview. Differences in interviewer skill in establishing rapport may account for these observations. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: American Society of Addiction Medicine; YEAR: 2009

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

**Subject Headings:** [\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[\\*Psychometrics](#)  
[\\*Test Reliability](#)  
[\\*Test Validity](#)  
 Computers  
 Drug Addiction  
 Self Disclosure  
 Severity (Disorders)

**Source:** PsycINFO

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

### 136. Perceived social support and recovery from substance abuse: A qualitative enquiry.

**Citation:** Indian Journal of Community Psychology, September 2008, vol./is. 4/2(131-143), 0974-2719 (Sep 2008)

**Author(s):** Shaikh, Fouzia Alsabah; Ghosh, Anjali

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**Language:** English

**Abstract:** Social Support has been considered to be one of the primary resources for successful recovery from substance abuse and maintenance of abstinence. In spite of several addicts going for outpatient and residential de-addiction treatment, they fail to maintain abstinence after the end of treatment regimen. Apart from individual factors like self-control, perceived social support received from significant others help in maintenance of prolonged sobriety. The present research is an in-depth qualitative study of social support perceived by 12 persons addicted to alcohol and drugs getting rehabilitation in a de-addiction center. The study reveals pattern of social support perceived by the participants in relation to their demographic and substance use features. In depth analysis of four case studies further throw light on the role played by social support on recovery from substance abuse and hindrances faced in the process. (PsycINFO Database Record (c) 2010 APA, all rights reserved) (journal abstract)

**Country of Publication:** HOLDER: Community Psychology Association of India; YEAR: 2008

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

**Subject Headings:** [\\*Addiction](#)  
[\\*Drug Abuse](#)  
[\\*Drug Rehabilitation](#)  
[\\*Social Support](#)

**Source:** PsycINFO