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Search History

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. Bridging the gap between the neurocognitive lab and the addiction clinic.

- Citation:** Addictive Behaviors, December 2014(No Pagination Specified), 0306-4603 (Dec 3, 2014)
- Author(s):** Franken, Ingmar H.A; van de Wetering, Ben J.M
- Abstract:** In the past decennium there has been an enormous increase in new insights in cognitive mechanisms of addiction and their neural substrates. These candidate neurocognitive mechanisms, particularly those associated with "drive" and "control" aspects of addiction, are clearly involved in substance use problems but do not yet provide a full explanation. The neurocognitive mechanisms addressed in the present perspective are attentional bias, reward processing (both drive aspects) and error-processing and cognitive control (both control aspects). The time has come to transfer these recent insights more consistently to clinical practice by studying their relevance for diagnosis and treatment in patient samples. The present perspective echoes the development of recent initiatives such as the RDoC system to integrate developments in neuroscience into clinical practice. The aim of this article is to open new vistas for addiction diagnosis and treatment and to discuss why and how these neurocognitive aspects of addictive behavior can be used in clinical practice. In addition, present problematic issues and a future research agenda are provided. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:**
- Source:** PsycINFO
- Full Text:** Available from *Elsevier* in [Addictive Behaviors](#)

2. The motivational basis of cognitive determinants of addictive behaviors.

- Citation:** Addictive Behaviors, November 2014(No Pagination Specified), 0306-4603 (Nov 22, 2014)
- Author(s):** Cox, W. Miles; Klinger, Eric; Fadardi, Javad S
- Abstract:** If a person expects that (a) drinking alcohol or using another addictive substance will enhance positive affect or reduce negative affect, and (b) there is a strong likelihood that these desirable consequences will occur if the substance is used, that person is likely to form a goal of using the substance. The theoretical framework presented here predicts that when that happens, the person will have a current concern for using the substance, with the person thereby sensitized to environmental stimuli related to procuring and using the substance. One indication of the sensitization is selective attention to substance-related stimuli, which is correlated with urges to use and actual use of the substance. Accordingly, interventions have been developed for helping substance users to overcome substance-related attentional bias. The results are promising for reducing both the attentional bias and the substance use. Finally, we discuss other cognitive-modification and motivational techniques that have been evaluated with promising results. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:**
- Source:** PsycINFO
- Full Text:** Available from *Elsevier* in [Addictive Behaviors](#)

3. The reductions in monetary cost and gains in productivity with methadone maintenance treatment: One year follow-up.

- Citation:** Psychiatry Research, November 2014(No Pagination Specified), 0165-1781 (Nov 24, 2014)

Author(s): Hsiao, Chih Yin; Chen, Kao Chin; Lee, Lan-Ting; Tsai, Hsin Chun; Chang, Wei Hung; Lee, I Hui; Chen, Po See; Lu, Ru-Band; Yang, Yen Kuang

Abstract: While methadone maintenance treatment (MMT) is beneficial for heroin dependence, there is little information regarding the reductions in monetary cost and gains in productivity following MMT. The aim of this study was to evaluate the changes in the monetary cost of heroin addiction and productivity after one year of MMT. Twenty-nine participants from an MMT clinic were included. The monetary cost, productivity, quality of life (QOL) and mental health status were assessed at both baseline and one year follow-up. The average annual total cost was approximately US\$26,485 (1.43 GDP per capita in 2010) at baseline, and decreased by 59.3% to US\$10,784 (0.58 GDP) at follow-up. The mean number of months of unemployment dropped from 6.03 to 2.79, the mean income increased to exceed the basic salary, but only reached 45.3% of the national average monthly earnings. The participants' mental health improved, but their QOL scores did not increase significantly. After one year of MMT, the monetary cost of heroin addiction fell, both the productivity and mental health of the participants' improved, but limited gains were seen with regard to their QOL. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

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

4. Reward-based decision making in pathological gambling: The roles of risk and delay.

Citation: Neuroscience Research, September 2014(No Pagination Specified), 0168-0102 (Sep 28, 2014)

Author(s): Wiehler, Antonius; Peters, Jan

Abstract: Pathological gambling (PG) is a non-substance based addiction that shares many behavioral and neural features with substance based addictions. However, in PG behavioral and neural changes are unlikely to be confounded by effects of acute or chronic drug exposure. Changes in reward based decision-making in particular increases in impulsivity are hallmark features of addictions. Here we review studies in PG that applied three reward-related decision tasks: the Iowa Gambling Task, probability discounting and delay discounting. We discuss the findings and focus on the impact of addiction severity and the relation of effects to impulsivity measures. While there is evidence that PGs differ from healthy controls on all three tasks, there is only little support for a further modulation of impairments by addiction severity. Conceptually, delay discounting is related to impulsivity measures and findings in this task show a considerable correlation with e.g. questionnaire-based measures of impulsivity. Taken together, impairments in PG on these three tasks are relatively well replicated, although impairments appear to be largely uncorrelated between tasks. An important next step will be to conceptualize a process-based account of behavioral impairments in PG. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

Full Text: Available from *Elsevier* in [Neuroscience Research](#); Note: ; Collection notes: Academic-License. Please note search only titles within the trial dates: 2010 - to-date

5. The relationship between parental mediation and internet addiction among adolescents, and the association with cyberbullying and depression.

Citation: Comprehensive Psychiatry, November 2014(No Pagination Specified), 0010-440X (Nov 14, 2014)

Author(s): Chang, Fong-Ching; Chiu, Chiung-Hui; Miao, Nae-Fang; Chen, Ping-Hung; Lee, Ching-Mei; Chiang, Jeng-Tung; Pan, Ying-Chun

Abstract: OBJECTIVE: This study examined the relationships between parental mediation and Internet addiction, and the connections to cyberbullying, substance use, and depression among adolescents. METHOD: The study involved 1808 junior high school students who completed a questionnaire in Taiwan in 2013. RESULTS: Multiple logistic regression analysis results showed that adolescents who perceived lower levels of parental attachment were more likely to experience Internet addiction, cyberbullying, smoking, and depression, while adolescents who reported higher levels of parental restrictive mediation were less likely to experience Internet addiction or to engage in cyberbullying. Adolescent Internet addiction was associated with cyberbullying victimization/perpetration, smoking, consumption of alcohol, and depression. CONCLUSION: Internet addiction by adolescents was associated with cyberbullying, substance use and depression, while parental restrictive mediation was associated with reductions in adolescent Internet addiction and cyberbullying. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

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

6. Factors associated with provision of addiction treatment information by community pharmacists.

Citation: Journal of Substance Abuse Treatment, November 2014(No Pagination Specified), 0740-5472 (Nov 21, 2014)

Author(s): Hagemeyer, Nicholas E; Alamian, Arsham; Murawski, Matthew M; Pack, Robert P

Abstract: Community pharmacists in the United States have significant opportunity to engage in community-level prescription substance abuse prevention and treatment efforts, including dissemination of information specific to available addiction treatment options. Our cross-sectional study of Tennessee community pharmacists noted that 26% had previously provided addiction treatment facility information to one or more patients in the past. The purpose of this study was to employ multivariate modeling techniques to investigate associations between community pharmacist and community pharmacy factors and past provision of addiction treatment information to pharmacy patients. Multivariate logistic regression indicated having addiction treatment facility information in a pharmacy setting (aOR=8.19; 95% CI=4.36-15.37), having high confidence in ability to discuss treatment facility options (aOR=4.16; 95% CI=2.65-6.52), having participated in prescription opioid abuse-specific continuing education (aOR=2.90; 95% CI=1.70-4.97), being male (aOR=2.23; 95% CI=1.38-3.59), and increased hours per week in the practice setting (aOR=1.02; 95% CI=1.004-1.05) were all significantly associated with provision of information about addiction treatment. Dissemination of addiction treatment information, improvements in communicative self-efficacy beliefs, and dissemination of prescription opioid abuse-specific continuing education are modifiable factors significantly associated with increased provision of addiction treatment information by community pharmacists. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

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

7. Brain-derived neurotrophic factor and addiction: Pathological versus therapeutic effects on drug seeking.

Citation: Brain Research, November 2014(No Pagination Specified), 0006-8993 (Nov 4, 2014)

Author(s): Barker, Jacqueline M; Taylor, Jane R; De Vries, Taco J; Peters, Jamie

Abstract: Many abused drugs lead to changes in endogenous brain-derived neurotrophic factor (BDNF) expression in neural circuits responsible for addictive behaviors. BDNF is a known molecular mediator of memory consolidation processes, evident at both behavioral and neurophysiological levels. Specific neural circuits are responsible for storing and executing drug-procuring motor programs, whereas other neural circuits are responsible for the active suppression of these "seeking" systems. These seeking-circuits are established as associations are formed between drug-associated cues and the conditioned responses they elicit. Such conditioned responses (e.g. drug seeking) can be diminished either through a passive weakening of seeking- circuits or an active suppression of those circuits through extinction. Extinction learning occurs when the association between cues and drug are violated, for example, by cue exposure without the drug present. Cue exposure therapy has been proposed as a therapeutic avenue for the treatment of addictions. Here we explore the role of BDNF in extinction circuits, compared to seeking-circuits that "incubate" over prolonged withdrawal periods. We begin by discussing the role of BDNF in extinction memory for fear and cocaine-seeking behaviors, where extinction circuits overlap in infralimbic prefrontal cortex (PFC). We highlight the ability of estrogen to promote BDNF-like effects in hippocampal-prefrontal circuits and consider the role of sex differences in extinction and incubation of drug-seeking behaviors. Finally, we examine how opiates and alcohol "break the mold" in terms of BDNF function in extinction circuits. This article is part of a Special Issue entitled SI:Addiction circuits. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

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

8. Cannabinoid modulation of drug reward and the implications of marijuana legalization.

Citation: Brain Research, November 2014(No Pagination Specified), 0006-8993 (Nov 25, 2014)

Author(s): Covey, Dan P; Wenzel, Jennifer M; Cheer, Joseph F

Abstract: Marijuana is the most popular illegal drug worldwide. Recent trends indicate that this may soon change; not due to decreased marijuana use, but to an amendment in marijuana's illegal status. The cannabinoid type 1 (CB1) receptor mediates marijuana's psychoactive and reinforcing properties. CB1 receptors are also part of the brain endocannabinoid (eCB) system and support numerous forms of learning and memory, including the conditioned reinforcing properties of cues predicting reward or punishment. This is accomplished via eCB-dependent alterations in mesolimbic dopamine function, which plays an obligatory role in reward learning and motivation. Presynaptic CB1 receptors control midbrain dopamine neuron activity and thereby shape phasic dopamine release in target regions, particularly the nucleus accumbens (NAc). By also regulating synaptic input to the NAc, CB1 receptors modulate NAc output onto downstream neurons of the basal ganglia motor circuit, and thereby support goal-directed behaviors. Abused drugs promote short- and long-term adaptations in eCB-regulation of mesolimbic dopamine function, and thereby hijack neural systems related to the pursuit of rewards to promote drug abuse. By pharmacologically targeting the CB1 receptors, marijuana has preferential access to this neuronal system and can potentially alter eCB-dependent processing of reward-related stimuli. As marijuana legalization progresses, greater access to this drug should increase the utility of marijuana as a research tool to better understand the eCB system, which has the potential to advance cannabinoid-based treatments for drug addiction. This article is part of a Special Issue entitled SI:Addiction circuits. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

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

9. A randomized control trial of a chronic care intervention for homeless women with alcohol use problems.

- Citation:** Journal of Substance Abuse Treatment, November 2014(No Pagination Specified), 0740-5472 (Nov 21, 2014)
- Author(s):** Upshur, Carole; Weinreb, Linda; Bharel, Monica; Reed, George; Frisard, Christine
- Abstract:** A clinician-randomized trial was conducted using the chronic care model for disease management for alcohol use problems among n=82 women served in a health care for the homeless clinic. Women with problem alcohol use received either usual care or an intervention consisting of a primary care provider (PCP) brief intervention, referral to addiction services, and on-going support from a care manager (CM) for 6months. Both groups significantly reduced their alcohol consumption, with a small effect size favoring intervention at 3months, but there were no significant differences between groups in reductions in drinking or in housing stability, or mental or physical health. However, intervention women had significantly more frequent participation in substance use treatment services. Baseline differences and small sample size limit generalizability, although substantial reductions in drinking for both groups suggest that screening and PCP brief treatment are promising interventions for homeless women with alcohol use problems. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:**
- Source:** PsycINFO
- Full Text:** Available from *Elsevier* in [Journal of Substance Abuse Treatment](#)

10. Dissociation of heroin-induced emotional dysfunction from psychomotor activation and physical dependence among inbred mouse strains.

- Citation:** Psychopharmacology, December 2014(No Pagination Specified), 0033-3158;1432-2072 (Dec 9, 2014)
- Author(s):** Ayranci, G; Befort, K; Lalanne, L; Kieffer, B. L; Lutz, P.-E
- Correspondence Address:** Lutz, P.-E.: McGill Group for Suicide Studies, Douglas Mental Health University Institute, McGill University, 6875, boulevard La Salle, Montreal, Canada, H4H 1R3, pierreeric.lutz@gmail.com
- Institution:** Translational Medicine and Neurogenetics, Institut de Genetique et de Biologie Moleculaire et Cellulaire, INSERM U-964, CNRS UMR-7104, Universite de Strasbourg, Illkirch, France; Translational Medicine and Neurogenetics, Institut de Genetique et de Biologie Moleculaire et Cellulaire, INSERM U-964, CNRS UMR-7104, Universite de Strasbourg, Illkirch, France; Translational Medicine and Neurogenetics, Institut de Genetique et de Biologie Moleculaire et Cellulaire, INSERM U-964, CNRS UMR-7104, Universite de Strasbourg, Illkirch, France; Translational Medicine and Neurogenetics, Institut de Genetique et de Biologie Moleculaire et Cellulaire, INSERM U-964, CNRS UMR-7104, Universite de Strasbourg, Illkirch, France; Translational Medicine and Neurogenetics, Institut de Genetique et de Biologie Moleculaire et Cellulaire, INSERM U-964, CNRS UMR-7104, Universite de Strasbourg, Illkirch, France; Translational Medicine and Neurogenetics, Institut de Genetique et de Biologie Moleculaire et Cellulaire, INSERM U-964, CNRS UMR-7104, Universite de Strasbourg, Illkirch, France
- Abstract:** Rationale: Opiate addiction is a brain disorder emerging through repeated intoxication and withdrawal episodes. Epidemiological studies also indicate that chronic exposure to opiates may lead in susceptible individuals to the emergence of depressive symptoms, strongly contributing to the severity and chronicity of addiction. We recently established a mouse model of heroin abstinence, characterized by the development of depressive-like behaviors following chronic heroin exposure. Objectives: While genetic factors regulating immediate behavioral responses to opiates have been largely investigated, little is known about their contribution to long-term emotional regulation during abstinence. Here, we compared locomotor stimulation and physical dependence induced by heroin exposure, as well as emotional dysfunction following abstinence, across mice strains with distinct genetic backgrounds. Methods: Mice from three inbred strains (C57BL/6J, Balb/cByJ, and

129S2/SvPas) were exposed to an escalating chronic heroin regimen (10-50 mg/kg). Independent cohorts were used to assess drug-induced locomotor activity during chronic treatment, naloxone-precipitated withdrawal at the end of chronic treatment, and emotional-like responses after a 4-week abstinence period. Results: Distinct behavioral profiles were observed across strains during heroin treatment, with no physical dependence and low locomotor stimulation in 129S2/SvPas. In addition, different behavioral impairments developed during abstinence across the three strains, with increased despair-like behavior in 129S2/SvPas and Balb/cByJ, and low sociability in 129S2/SvPas and C57BL/6J. Conclusions: Our results indicate that depressive-like behaviors emerge during heroin abstinence, whatever the severity of immediate behavioral responses to the drug. In addition, inbred mouse strains will allow studying several aspects of mood-related deficits associated with addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings:

Source: PsycINFO

11. Disentangling the correlates of drug use in a clinic and community sample: A regression analysis of the associations between drug use, years-of-school, impulsivity, IQ, working memory, and psychiatric symptoms.

Citation: Frontiers in Psychiatry, June 2014, vol./is. 5/, 1664-0640 (Jun 24, 2014)

Author(s): Heyman, Gene M; Dunn, Brian J; Mignone, Jason

Correspondence Address: Heyman, Gene M.: Boston College, Department of Psychology, Chestnut Hill, MA, US, 02467

Institution: Boston College, Department of Psychology, Chestnut Hill, MA, US; Concordia University, Center for Studies in Behavioral Neurobiology, Department of Psychology, Montreal, PQ, Canada; Prime, Buchholz & Associates, Inc., Portsmouth, NH, US

Language: English

Abstract: Years-of-school is negatively correlated with illicit drug use. However, educational attainment is positively correlated with IQ and negatively correlated with impulsivity, two traits that are also correlated with drug use. Thus, the negative correlation between education and drug use may reflect the correlates of schooling, not schooling itself. To help disentangle these relations we obtained measures of working memory, simple memory, IQ, disposition (impulsivity and psychiatric status), years-of-school and frequency of illicit and licit drug use in methadone clinic and community drug users. We found strong zero-order correlations between all measures, including IQ, impulsivity, years-of-school, psychiatric symptoms, and drug use. However, multiple regression analyses revealed a different picture. The significant predictors of illicit drug use were gender, involvement in a methadone clinic, and years-of-school. That is, psychiatric symptoms, impulsivity, cognition, and IQ no longer predicted illicit drug use in the multiple regression analyses. Moreover, high risk subjects (low IQ and/or high impulsivity) who spent 14 or more years in school used stimulants and opiates less than did low risk subjects who had spent <14 years in school. Smoking and drinking had a different correlational structure. IQ and years-of-school predicted whether someone ever became a smoker, whereas impulsivity predicted the frequency of drinking bouts, but years-of-school did not. Many subjects reported no use of one or more drugs, resulting in a large number of "zeroes" in the data sets. Cragg's Double-Hurdle regression method proved the best approach for dealing with this problem. To our knowledge, this is the first report to show that years-of-school predicts lower levels of illicit drug use after controlling for IQ and impulsivity. This paper also highlights the advantages of Double-Hurdle regression methods for analyzing the correlates of drug use in community samples. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.; HOLDER: Heyman, Dunn and Mignone; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Educational Attainment Level](#)
[*Impulsiveness](#)
[*Intelligence Quotient](#)
[*Psychiatric Symptoms](#)
[*Short Term Memory Clinics](#)
[Drug Usage](#)

Source: PsycINFO

12. Fixed and dynamic predictors of treatment process in therapeutic communities for substance abusers in Belgium.

Citation: Substance Abuse Treatment, Prevention, and Policy, October 2012, vol./is. 7/, 1747-597X (Oct 11, 2012)

Author(s): Goethals, Ilse; Vanderplasschen, Wouter; Vandeveld, Stijn; Broekaert, Eric

Correspondence Address: Goethals, Ilse: Faculty of Psychology and Educational Sciences, Department of Orthopedagogics (Special Education), Ghent University, Henri Dunantlaan 2, Ghent, Belgium, 9000, ilse.goethals@ugent.be

Institution: Faculty of Psychology and Educational Sciences, Department of Orthopedagogics (Special Education), Ghent University, Ghent, Belgium; Faculty of Psychology and Educational Sciences, Department of Orthopedagogics (Special Education), Ghent University, Ghent, Belgium; Faculty of Education, Health and Social Work, Department of Orthopedagogics, University College Ghent, Ghent, Belgium; Faculty of Psychology and Educational Sciences, Department of Orthopedagogics (Special Education), Ghent University, Ghent, Belgium

Language: English

Abstract: Background: Research on substance abuse treatment services in general reflects substantial attention to the notion of treatment process. Despite the growing popularity of process studies, only a few researchers have used instruments specifically tailored to measure the therapeutic community (TC) treatment process, and even fewer have investigated client attributes in relation to early TC treatment process experiences. The aim of the current study is to address this gap by exploring clients' early in-treatment experiences and to determine the predictors that are related to the treatment process, using a TC-specific multidimensional instrument. Methods: Data was gathered among 157 adults in five TCs in Flanders (Belgium). Descriptive statistics were used to explore clients' early in-treatment experiences and multiple linear regressions were conducted to determine the fixed and dynamic predictors of Community Environment and Personal Development and Change (two indicators of TC treatment process). Results: Clients reveal a more positive first-month response to TC social processes than to personal-development processes that require self-reflection and insight. The variance in clients' ratings of Community Environment was primarily due to dynamic client factors, while the variance in clients' ratings of Personal Development and Change was only related to fixed client factors. Suitability for treatment was the strongest predictor of Community Environment ratings, whereas a judicial referral more strongly predicted Personal Development and Change scores. Conclusions: Special attention should be devoted to suitability for treatment as part of motivational assessment as this seems to be a very strong predictor of how clients react to the initiation stage of TC treatment. To help improve clients' (meta-)cognitive skills needed to achieve insight and self-reflection and perhaps speed up the process of recovery, the authors suggest the introduction of (meta-)cognitive training strategies in the pre-program and/or the induction stage of a TC program. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Goethals et al.; licensee BioMed Central Ltd.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Drug Abuse
*Psychotherapeutic Processes
*Therapeutic Community

Source: PsycINFO

Full Text: Available from *Springer NHS Pilot 2014 (NESLi2)* in *Substance Abuse Treatment, Prevention, and Policy*; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only. Available from *ProQuest* in *Substance Abuse Treatment, Prevention and Policy*; Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.
Available from *National Library of Medicine* in *Substance Abuse Treatment, Prevention, and Policy*
Available from *BioMedCentral* in *Substance Abuse Treatment, Prevention, and Policy*

13. Negative moods correlate with craving in female methamphetamine users enrolled in compulsory detoxification.

Citation: Substance Abuse Treatment, Prevention, and Policy, October 2012, vol./is. 7/, 1747-597X (Oct 30, 2012)

Author(s): Shen, Wenwen; Liu, Yu; Li, Longhui; Zhang, Yisheng; Zhou, Wenhua

Correspondence Address: Zhang, Yisheng: Department of Obstetrics, Ningbo First Hospital, 59 Liuting Street, Ningbo, China, 315010, doctorzhangys@163.com

Institution: Ningbo Addiction Research and Treatment Center, School of Medicine, Ningbo University, Ningbo, China; Ningbo Addiction Research and Treatment Center, School of Medicine, Ningbo University, Ningbo, China; Ningbo Addiction Research and Treatment Center, School of Medicine, Ningbo University, Ningbo, China; Department of Obstetrics, Ningbo First Hospital, Ningbo, China; Ningbo Addiction Research and Treatment Center, School of Medicine, Ningbo University, Ningbo, China

Language: English

Abstract: Background: Methamphetamine (METH) use, especially in females, has become a growing public health concern in China. In this study, we aimed to characterize the factors that contributed to drug craving in female METH users under isolated compulsory detoxification. We characterized factors contributing to craving such as duration of detoxification, history of drug use and self-reported mood state. Methods: Subjects (N=113) undergoing a 1- to 3-year METH detoxification program were recruited from the Zhejiang Compulsory Detoxification Center for Women. The Questionnaire of METH-use Urge (QMU) was used to evaluate the level of craving for METH. The Abbreviate Profile of Mood States (A-POMS) was applied as an assessment for the negative mood disturbances. Results: The participants were at a mean age of 25.2, primarily lowly educated and unemployed, and single. Smoking was the only route of METH administration at an average dose of 0.5 g/day, and 4 times/week. The reported craving level was positively correlated with the negative mood disturbances and the weekly dose of METH, but independent of the duration of detoxification. Furthermore, all five aspects of negative mood disturbances, including fatigue, bewilderment, anxiety, depression and hostility, were shown to positively correlate to the self-reported craving level after controlling for weekly dose of METH. Conclusions: The data demonstrate a robust correlation between mood distress and craving for METH. Our results call for close evaluation of mood distress in treatment of METH users in China. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Detoxification](#)
[*Drug Rehabilitation](#)
[*Emotional States](#)
[*Human Females](#)
[*Methamphetamine](#)
[Chinese Cultural Groups](#)
[Craving](#)
[Drug Addiction](#)
[Risk Factors](#)

Source: PsycINFO

Full Text: Available from *Springer NHS Pilot 2014 (NESLi2)* in [Substance Abuse Treatment, Prevention, and Policy](#); Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only. Available from *ProQuest* in [Substance Abuse Treatment, Prevention and Policy](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions. Available from *National Library of Medicine* in [Substance Abuse Treatment, Prevention, and Policy](#) Available from *BioMedCentral* in [Substance Abuse Treatment, Prevention, and Policy](#)

14. Effectiveness of early interventions for substance-using adolescents: Findings from a systematic review and meta-analysis.

Citation: Substance Abuse Treatment, Prevention, and Policy, June 2012, vol./is. 7/, 1747-597X (Jun 14, 2012)

Author(s): Carney, Tara; Myers, Bronwyn

Correspondence Address: Carney, Tara: Alcohol & Drug Abuse Research Unit Medical Research Council, Cape Town, South Africa, tara.carney@mrc.ac.za

Institution: Alcohol & Drug Abuse Research Unit Medical Research Council, Cape Town, South Africa; Alcohol & Drug Abuse Research Unit Medical Research Council, Cape Town, South Africa

Language: English

Abstract: Background: Information on the impact of available interventions that address adolescent substance use and delinquency can inform investment choices. This article aims to identify and evaluate early interventions that target adolescent substance use as a primary outcome, and criminal or delinquent behaviours as a secondary outcome. Method: A systematic review of early interventions for adolescent substance use and behavioural outcomes was conducted. Results: We identified nine studies using specific search strategies. All but one of the studies reported the use of brief intervention strategies. Only seven studies contained information which allowed for the calculation of an effect size, and were therefore included in the meta-analysis. The overall effect size for all outcomes combined was small but significant ($g = 0.25$, $p < 0.001$). The overall outcome for substance use was also small but significant ($g = 0.24$, $p < 0.001$). For studies with behavioural outcomes, the overall effect size reached significance ($g = 0.28$, $p < 0.001$). In general, subgroup analysis showed that individual interventions with more than one session had a stronger effect on the outcomes of interest. Conclusions: Early interventions for adolescent substance use do hold benefits for reducing substance use and associated behavioural outcomes. Interventions are most promising if delivered in an individual format and over multiple sessions. One intervention in particular had large effect sizes. As all the interventions were tested in developed countries, further testing is needed in low- and middle-income countries where there is a lack of research on evidence-based interventions for adolescent risk behaviours. Additional recommendations for policy and practice are provided in this paper. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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original work is properly cited.; HOLDER: Carney and Myers; licensee BioMed Central Ltd.; YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Early Intervention](#)
[Juvenile Delinquency](#)

Source: PsycINFO

Full Text: Available from *Springer NHS Pilot 2014 (NESLi2)* in [Substance Abuse Treatment, Prevention, and Policy](#); Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only. Available from *ProQuest* in [Substance Abuse Treatment, Prevention and Policy](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.
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15. Reports of past alcohol and drug use following participation in a motivation enhancing intervention: Implications for clinical assessment and program evaluation.

Citation: Substance Abuse Treatment, Prevention, and Policy, May 2012, vol./is. 7/, 1747-597X (May 14, 2012)

Author(s): Rosengren, David B; Beadnell, Blair; Nason, Mark; Stafford, Pamela A; Daugherty, Ray; Prevention Research Institute Abstract

Correspondence Address: Rosengren, David B.: Prevention Research Institute, 841 Corporate Dr., Suite 300, Lexington, KY, US, 40503, drosengren@askpri.org

Corporate/Institutional Author: Prevention Research Institute Abstract

Institution: Prevention Research Institute, Lexington, KY, US; Prevention Research Institute, Lexington, KY, US; Prevention Research Institute, Lexington, KY, US; Prevention Research Institute, Lexington, KY, US; Prevention Research Institute, Lexington, KY, US

Language: English

Abstract: Background: There is significant interest in the value of motivational approaches that enhance participant readiness to change, but less is known about clients' self-reports of problematic behavior when participating in such interventions. Methods: We examined whether participants in a motivationally-based intervention for DUI offenders changed their reports of substance use at postintervention (when reporting on the same 30 days that they reported on at preintervention). Specifically, Study 1 (N = 8,387) tested whether participants in PRIME For Life (PFL) changed their reports about baseline substance levels when asked at postintervention versus at preintervention. Study 2 (N = 192) compared changes in self-reported baseline drinking between PFL and intervention as usual (IAU) participants. Results: Many participants in Study 1 did not change their reports about how much they used substances during the 30-day period before baseline. Among those who did, the most common change was an increase in reported amounts of baseline drug use, and typical and peak alcohol use. This sample also showed changes in reports of their baseline pattern of high-risk-use (consistent versus occasional). At postintervention, participants who were younger, single, or endorsing more indicators of alcohol dependence were more likely to later report greater frequency of baseline drug use, and greater peak and typical number of baseline drinks. Gender, education, and race were also associated with reporting inconsistency on some behaviors. In Study 2, PFL participants showed greater increases in reports of peak alcohol use compared to IAU, but both conditions showed similar increases for drugs and typical alcohol use. Conclusions: In both research and clinical settings, a segment of participants may initially report less substance use than they do when asked later about the same baseline period. These preliminary findings suggest clinicians and researchers may find postintervention evaluations yield reports of greater baseline alcohol or drug use for some people. For

some behaviors, this may occur more often in interventions that target client motivation. Future research should attempt to identify which reports - preintervention vs. postintervention - better reflect actual baseline substance use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Alcohol Abuse](#)
[*Drug Abuse](#)
[*Intervention](#)
[*Motivation](#)
[*Self Report](#)
[Alcoholism](#)
[Drug Abuse Prevention](#)
[Drug Dependency](#)
[Program Evaluation](#)
- Source:** PsycINFO
- Full Text:** Available from *Springer NHS Pilot 2014 (NESLi2)* in [Substance Abuse Treatment, Prevention, and Policy](#); Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only. Available from *ProQuest* in [Substance Abuse Treatment, Prevention and Policy](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions. Available from *National Library of Medicine* in [Substance Abuse Treatment, Prevention, and Policy](#)
 Available from *BioMedCentral* in [Substance Abuse Treatment, Prevention, and Policy](#)

16. 12-month follow-up of an exploratory 'brief intervention' for high-frequency cannabis users among Canadian university students.

- Citation:** Substance Abuse Treatment, Prevention, and Policy, April 2012, vol./is. 7/, 1747-597X (Apr 26, 2012)
- Author(s):** Fischer, Benedikt; Jones, Wayne; Shuper, Paul; Rehm, Jurgen
- Correspondence Address:** Fischer, Benedikt: Centre for Applied Research in Mental Health and Addictions, Faculty of Health Sciences, Simon Fraser University, 2400, 515 West Hastings St, Vancouver, BC, Canada, V6B 5K3, bfischer@sfu.ca
- Institution:** Centre for Applied Research in Mental Health and Addictions, Faculty of Health Sciences, Simon Fraser University, Vancouver, BC, Canada; Centre for Applied Research in Mental Health and Addictions, Faculty of Health Sciences, Simon Fraser University, Vancouver, BC, Canada; Centre for Addiction and Mental Health, Toronto, ON, Canada; Centre for Addiction and Mental Health, Toronto, ON, Canada
- Language:** English
- Abstract:** Background: One in three young people use cannabis in Canada. Cannabis use can be associated with a variety of health problems which occur primarily among intensive/frequent users. Availability and effectiveness of conventional treatment for cannabis use is limited. While Brief Interventions (BIs) have been shown to result in short-term reductions of cannabis use risks or problems, few studies have assessed their longer-term effects. The present study examined 12-month follow-up outcomes for BIs in a cohort of young Canadian high-frequency cannabis users where select short-term effects (3 months) had previously been assessed and demonstrated. Findings: N = 134 frequent cannabis users were recruited from among university students in Toronto, randomized to either an oral or a written cannabis BI, or corresponding health controls, and assessed in-person at baseline, 3-months, and 12-months. N = 72 (54 %) of the original sample

were retained for follow-up analyses at 12-months where reductions in 'deep inhalation/breathholding' ($Q = 13.1$; $p < .05$) and 'driving after cannabis use' ($Q = 9.3$; $p < .05$) were observed in the experimental groups. Reductions for these indicators had been shown at 3-months in the experimental groups; these reductions were maintained over the year. Other indicators assessed remained overall stable in both experimental and control groups. Conclusions: The results confirm findings from select other studies indicating the potential for longer-term and sustained risk reduction effects of BIs for cannabis use. While further research is needed on the long-term effects of BIs, these may be a valuable - and efficient - intervention tool in a public health approach to high-risk cannabis use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Cannabis
*Drug Abuse
*Intervention
*Treatment Outcomes
Drug Abuse Prevention

Source: PsycINFO

Full Text: Available from *Springer NHS Pilot 2014 (NESLi2)* in *Substance Abuse Treatment, Prevention, and Policy*; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only. Available from *ProQuest* in *Substance Abuse Treatment, Prevention and Policy*; Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions. Available from *National Library of Medicine* in *Substance Abuse Treatment, Prevention, and Policy* Available from *BioMedCentral* in *Substance Abuse Treatment, Prevention, and Policy*

17. Selective prevention programs for children from substance-affected families: A comprehensive systematic review.

Citation: Substance Abuse Treatment, Prevention, and Policy, June 2012, vol./is. 7/, 1747-597X (Jun 12, 2012)

Author(s): Broning, Sonja; Kumpfer, Karol; Kruse, Katja; Sack, Peter-Michael; Schaunig-Busch, Ines; Ruths, Sylvia; Moesgen, Diana; Pflug, Ellen; Klein, Michael; Thomasius, Rainer

Correspondence Address: Broning, Sonja: Center for Psychosocial Medicine, German Center for Addiction Research in Childhood and Adolescence, University Medical Center Hamburg-Eppendorf, Martinistrasse 52, Hamburg, Germany, D-20246, s.broning@uke.de

Institution: Center for Psychosocial Medicine, German Center for Addiction Research in Childhood and Adolescence, University Medical Center Hamburg-Eppendorf, Hamburg, Germany; College of Health, Department of Health Promotion and Education, University of Utah, Salt Lake City, UT, US; Center for Psychosocial Medicine, German Center for Addiction Research in Childhood and Adolescence, University Medical Center Hamburg-Eppendorf, Hamburg, Germany; Center for Psychosocial Medicine, German Center for Addiction Research in Childhood and Adolescence, University Medical Center Hamburg-Eppendorf, Hamburg, Germany; German Institute for Addiction and Prevention Research, Catholic University of Applied Sciences Nordrhein-Westfalen, Koln, Germany; Center for Psychosocial Medicine, German Center for Addiction Research in Childhood and Adolescence, University Medical Center Hamburg-Eppendorf, Hamburg, Germany; German Institute for Addiction and Prevention Research, Catholic University of Applied Sciences Nordrhein-Westfalen, Koln, Germany; German Institute for Addiction and Prevention Research, Catholic University of Applied Sciences Nordrhein-Westfalen, Koln, Germany; German Institute for Addiction and Prevention Research, Catholic University of Applied Sciences Nordrhein-Westfalen, Koln, Germany; Center for

Psychosocial Medicine, German Center for Addiction Research in Childhood and Adolescence, University Medical Center Hamburg-Eppendorf, Hamburg, Germany

Language:

English

Abstract:

Children from substance-affected families show an elevated risk for developing own substance-related or other mental disorders. Therefore, they are an important target group for preventive efforts. So far, such programs for children of substance-involved parents have not been reviewed together. We conducted a comprehensive systematic review to identify and summarize evaluations of selective preventive interventions in childhood and adolescence targeted at this specific group. From the overall search result of 375 articles, 339 were excluded, 36 full texts were reviewed. From these, nine eligible programs documented in 13 studies were identified comprising four school-based interventions (study 1-6), one community-based intervention (study 7-8), and four family-based interventions (study 9-13). Studies' levels of evidence were rated in accordance with the Scottish Intercollegiate Guidelines Network (SIGN) methodology, and their quality was ranked according to a score adapted from the area of meta-analytic family therapy research and consisting of 15 study design quality criteria. Studies varied in program format, structure, content, and participants. They also varied in outcome measures, results, and study design quality. We found seven RCT's, two well designed controlled or quasi-experimental studies, three well-designed descriptive studies, and one qualitative study. There was preliminary evidence for the effectiveness of the programs, especially when their duration was longer than ten weeks and when they involved children's, parenting, and family skills training components. Outcomes proximal to the intervention, such as program-related knowledge, coping-skills, and family relations, showed better results than more distal outcomes such as self-worth and substance use initiation, the latter due to the comparably young age of participants and sparse longitudinal data. However, because of the small overall number of studies found, all conclusions must remain tentative. More evaluations are needed and their quality must be improved. New research should focus on the differential impact of program components and delivery mechanisms. It should also explore long-term effects on children substance use, delinquency, mental health, physical health and school performance. To broaden the field, new approaches to prevention should be tested in diverse cultural and contextual settings. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication:

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Publication Type:

Journal; Peer Reviewed Journal

Subject Headings:

*Alcohol Abuse
*Drug Abuse
*Family
*Prevention
Mental Disorders

Source:

PsycINFO

Full Text:

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18. Peer relations scale for adolescents treated for substance use disorder: A factor analytic presentation.

- Citation:** Substance Abuse Treatment, Prevention, and Policy, July 2012, vol./is. 7/, 1747-597X (Jul 12, 2012)
- Author(s):** Yao, Ping; Ciesla, James R; Mazurek, Kathryn D; Spear, Sherilynn F
- Correspondence Address:** Ciesla, James R.: Northern Illinois University, DeKalb, IL, US, 60115, jciesla@niu.edu
- Institution:** Northern Illinois University, DeKalb, IL, US; Northern Illinois University, DeKalb, IL, US; Northern Illinois University, DeKalb, IL, US; Northern Illinois University, DeKalb, IL, US
- Language:** English
- Abstract:** Background: The literature indicates that peer relations are an important aspect of the treatment and recovery of adolescents with substance use disorder (SUD). Unfortunately, no standard measure of peer relations exists. The objective of this research is to use exploratory factor analysis to examine the underlying factor structure of a 14-item peer relations scale for use in this treatment population. Methods: Participants are 509 adolescents discharged from primary substance abuse treatment from 2003-2010. The data are from research conducted between six and twelve months post discharge via a 230-item questionnaire that included the 14-item peer relations scale. The scale has questions that assess the degree to which the adolescent's social contacts conform to norms of positive behavior and therefore foster non-use and recovery. The response rate was 62%. Results: The scale was decomposed by principal component factor analysis. When the matrix was rotated by varimax a three factor solution explaining 99.99% of the common variance emerged. The first factor yielded ten items that measure association with peers who engage in positive versus delinquent social behavior (positive versus negative social behavior). The three items in the second factor specify association with peers who use versus those who don't use drugs, and thereby encourage recovery and discourage drug use (drug use). The third and factor contained two items measuring the degree to which the recovering adolescent associates with new or previous friends (post treatment peer association). Conclusions: This scale is useful as a standard measure in that it begins to identify the measurable dimensions of peer relations that influence sustaining post treatment recovery. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
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- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** *Drug Abuse
*Drug Rehabilitation
*Peer Relations
*Rating Scales
Factor Structure
Social Support
Treatment Outcomes
- Source:** PsycINFO
- Full Text:** Available from *Springer NHS Pilot 2014 (NESLi2)* in *Substance Abuse Treatment, Prevention, and Policy*; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only. Available from *ProQuest* in *Substance Abuse Treatment, Prevention and Policy*; Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions. Available from *National Library of Medicine* in *Substance Abuse Treatment, Prevention, and Policy* Available from *BioMedCentral* in *Substance Abuse Treatment, Prevention, and Policy*

19. Social service offices as a point of entry into substance abuse treatment for poor South Africans.

- Citation:** Substance Abuse Treatment, Prevention, and Policy, May 2012, vol./is. 7/, 1747-597X (May 29, 2012)
- Author(s):** Burnhams, Nadine Harker; Dada, Siphokazi; Myers, Bronwyn
- Correspondence Address:** Burnhams, Nadine Harker: Alcohol and Drug Abuse Research Unit, South African Medical Research Council, P.O. Box 19070, Tygerberg, South Africa, 7505, nadine.burnhams@mrc.ac.za
- Institution:** Alcohol and Drug Abuse Research Unit, South African Medical Research Council, Tygerberg, South Africa; Alcohol and Drug Abuse Research Unit, South African Medical Research Council, Tygerberg, South Africa; Alcohol and Drug Abuse Research Unit, South African Medical Research Council, Tygerberg, South Africa
- Language:** English
- Abstract:** Background: In South Africa, district social service offices are often the first point of entry into the substance abuse treatment system. Despite this, little is known about the profile of people presenting with substance-related problems at these service points. This has a negative impact on treatment service planning. This paper begins to redress this gap through describing patterns of substance use and service needs among people using general social services in the Western Cape and comparing findings against the profile of persons attending specialist substance abuse treatment facilities in the region. Methods: As part of a standard client information system, an electronic questionnaire was completed for each person seeking social assistance. Data on socio-demographic characteristics, the range of presenting problems, patterns of substance use, perceived consequences of substance use, as well as types of services provided were analysed for the 691 social welfare clients who reported substance use between 2007 and 2009. These data were compared against clients attending substance abuse treatment centres during the same time period. Results: Findings indicate that social services offices are used as a way of accessing specialist services but are also used as a service point, especially by groups under-represented in the specialist treatment sector. Women, people from rural communities and people with alcohol-related problems are more likely to seek assistance at social service offices providing low threshold intervention services than from the specialist treatment sector. Conclusions: The study provides evidence that social services are a point of entry and intervention for people from underserved communities in the Western Cape. If these low-threshold services can be supported to provide good quality services, they may be an effective and efficient way of improving access to treatment in a context of limited service availability. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
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- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*African Cultural Groups](#)
[*Drug Rehabilitation](#)
[*Social Services](#)
[Drug Abuse](#)
[Health Service Needs](#)
- Source:** PsycINFO
- Full Text:** Available from *Springer NHS Pilot 2014 (NESLi2)* in [Substance Abuse Treatment, Prevention, and Policy](#); Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only. Available from *ProQuest* in [Substance Abuse Treatment, Prevention and Policy](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

Available from *National Library of Medicine* in *Substance Abuse Treatment, Prevention, and Policy*

Available from *BioMedCentral* in *Substance Abuse Treatment, Prevention, and Policy*

20. Validation of the French version of the alcohol, smoking and substance involvement screening test (ASSIST) in the elderly.

- Citation:** Substance Abuse Treatment, Prevention, and Policy, April 2012, vol./is. 7/, 1747-597X (Apr 26, 2012)
- Author(s):** Khan, Riaz; Chatton, Anne; Thorens, Gabriel; Achab, Sophia; Nallet, Audrey; Broers, Barbara; Calzada, Gerard; Poznyak, Vladimir; Zullino, Daniele; Khazaal, Yasser
- Correspondence Address:** Khan, Riaz: Division for Addictology Department of mental health and psychiatry University Hospitals, Geneva University, Geneva, Switzerland, riaz.khan@hcuge.ch
- Institution:** Division for Addictology Department of Mental Health and Psychiatry University Hospitals, Geneva University, Geneva, Switzerland; Division for Addictology Department of Mental Health and Psychiatry University Hospitals, Geneva University, Geneva, Switzerland; Division for Addictology Department of Mental Health and Psychiatry University Hospitals, Geneva University, Geneva, Switzerland; Division for Addictology Department of Mental Health and Psychiatry University Hospitals, Geneva University, Geneva, Switzerland; Division for Addictology Department of Mental Health and Psychiatry University Hospitals, Geneva University, Geneva, Switzerland; Department of Primary care and Community Medicine, University Hospitals, Geneva University, Geneva, Switzerland; Division for Addictology Department of Mental Health and Psychiatry University Hospitals, Geneva University, Geneva, Switzerland; Department of Mental Health and Substance Abuse, World Health Organization, Geneva, Switzerland; Division for Addictology Department of Mental Health and Psychiatry University Hospitals, Geneva University, Geneva, Switzerland; Division for Addictology Department of Mental Health and Psychiatry University Hospitals, Geneva University, Geneva, Switzerland
- Language:** English
- Abstract:** Background: Substance use disorders seem to be an under considered health problem amongst the elderly. The Alcohol, Smoking and Substance Involvement Screening Test (ASSIST), was developed by the World Health Organization to detect substance use disorders. The present study evaluates the psychometric properties of the French version of ASSIST in a sample of elderly people attending geriatric outpatient facilities (primary care or psychiatric facilities). Methods: One hundred persons older than 65 years were recruited from clients attending a geriatric polyclinic day care centre and from geriatric psychiatric facilities. Measures included ASSIST, Addiction Severity Index (ASI), Mini-International Neuropsychiatric Interview (MINI-Plus), Alcohol Use Disorders Identification Test (AUDIT), Revised Fagerstrom Tolerance Questionnaire-Smoking (RTQ) and Mini Mental State(MMS). Results: Concurrent validity was established with significant correlations between ASSIST scores, scores from ASI, AUDIT, RTQ, and significantly higher ASSIST scores for patients with a MINI-Plus diagnosis of abuse or dependence. The ASSIST questionnaire was found to have high internal consistency for the total substance involvement along with specific substance involvement as assessed by Cronbach's , ranging from 0.66, to 0.89. Conclusions: The findings demonstrate that ASSIST is a valid screening test for identifying substance use disorders in elderly. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
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- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Alcohol Abuse](#)
[*Drug Abuse](#)
[*Foreign Language Translation](#)

*Screening Tests
 *Test Validity
 Addiction
 Aging
 Tobacco Smoking

Source: PsycINFO

Full Text: Available from *Springer NHS Pilot 2014 (NESLi2)* in *Substance Abuse Treatment, Prevention, and Policy*; Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only. Available from *ProQuest* in *Substance Abuse Treatment, Prevention and Policy*; Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions. Available from *National Library of Medicine* in *Substance Abuse Treatment, Prevention, and Policy* Available from *BioMedCentral* in *Substance Abuse Treatment, Prevention, and Policy*

21. Criminal charges prior to and after initiation of office-based buprenorphine treatment.

Citation: Substance Abuse Treatment, Prevention, and Policy, March 2012, vol./is. 7/, 1747-597X (Mar 19, 2012)

Author(s): Harris, Elizabeth E; Jacapraro, Janet Soeffing; Rastegar, Darius A

Correspondence Address: Rastegar, Darius A.: Johns Hopkins School of Medicine, Division of Chemical Dependence, Johns Hopkins Bayview Medical Center, 5200 Eastern Avenue, Baltimore, MD, US, 21224, drasteg1@jhmi.edu

Institution: Albert Einstein College of Medicine, Montefiore Medical Center, New York, NY, US; Health Care for the Homeless, Baltimore, MD, US; Johns Hopkins School of Medicine, Division of Chemical Dependence, Johns Hopkins Bayview Medical Center, Baltimore, MD, US

Language: English

Abstract: Background: There is little data on the impact of office-based buprenorphine therapy on criminal activity. The goal of this study was to determine the impact of primary care clinic-based buprenorphine maintenance therapy on rates of criminal charges and the factors associated with criminal charges in the 2 years after initiation of treatment. Methods: We collected demographic and outcome data on 252 patients who were given at least one prescription for buprenorphine. We searched a public database of criminal charges and recorded criminal charges prior to and after enrollment. We compared the total number of criminal cases and drug cases 2 years before versus 2 years after initiation of treatment. Results: There was at least one criminal charge made against 38% of the subjects in the 2 years after initiation of treatment; these subjects were more likely to have used heroin, to have injected drugs, to have had any prior criminal charges, and recent criminal charges. There was no significant difference in the number of subjects with any criminal charge or a drug charge before and after initiation of treatment. Likewise, the mean number of all cases and drug cases was not significantly different between the two periods. However, among those who were opioid-negative for 6 or more months in the first year of treatment, there was a significant decline in criminal cases. On multivariable analysis, having recent criminal charges was significantly associated with criminal charges after initiation of treatment (adjusted odds ratio 3.92); subjects who were on opioid maintenance treatment prior to enrollment were significantly less likely to have subsequent criminal charges (adjusted odds ratio 0.52). Conclusions: Among subjects with prior criminal charges, initiation of office-based buprenorphine treatment did not appear to have a significant impact on subsequent criminal charges. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Conference Information: Society of General Internal Medicine National Meeting. 2011. Preliminary results from this study were presented in abstract form at the aforementioned conference.

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original work is properly cited.; HOLDER: Harris et al; licensee BioMed Central Ltd.;
YEAR: 2012

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Criminal Behavior](#)
[*Drug Rehabilitation](#)
[*Maintenance Therapy](#)
[*Primary Health Care](#)
[Disorders](#)
[Drug Abuse](#)
[Opiates](#)

Source: PsycINFO

Full Text: Available from *Springer NHS Pilot 2014 (NESLi2)* in [Substance Abuse Treatment, Prevention, and Policy](#); Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only. Available from *ProQuest* in [Substance Abuse Treatment, Prevention and Policy](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions. Available from *National Library of Medicine* in [Substance Abuse Treatment, Prevention, and Policy](#) Available from *BioMedCentral* in [Substance Abuse Treatment, Prevention, and Policy](#)

22. Measuring substance use in the club setting: A feasibility study using biochemical markers.

Citation: Substance Abuse Treatment, Prevention, and Policy, February 2012, vol./is. 7/, 1747-597X (Feb 9, 2012)

Author(s): Gripenberg-Abdon, Johanna; Elgan, Tobias H; Wallin, Eva; Shaafati, Marjan; Beck, Olof; Andreasson, Sven

Correspondence Address: Gripenberg-Abdon, Johanna: Department of Public Health Sciences, Karolinska Institutet, Stockholm, Sweden, johanna.abdon@sll.se

Institution: Department of Public Health Sciences, Karolinska Institutet, Stockholm, Sweden; STAD, Stockholm Centre for Psychiatric Research and Education, Department of Clinical Neuroscience, Karolinska Institutet, Stockholm, Sweden; Department of Public Health Sciences, Karolinska Institutet, Stockholm, Sweden; Department of Medicine, Section of Clinical Pharmacology, Karolinska Institutet, Stockholm, Sweden; Department of Medicine, Section of Clinical Pharmacology, Karolinska Institutet, Stockholm, Sweden; Department of Public Health Sciences, Karolinska Institutet, Stockholm, Sweden

Language: English

Abstract: Background: During the last few decades the use of club drugs (e.g., cocaine, amphetamines) has been of increased concern in nightlife settings. Traditionally, surveys have been used to estimate the use of club drugs, however, they mostly rely on self-reports which may not be accurate. Recent advances have allowed for readily accessible drug testing methods such as oral fluid drug testing. Nevertheless, research using oral fluid sampling to measure the frequency of drug use in the club environment is scarce. The objective of this study is to evaluate the feasibility of measuring the frequency of alcohol and drug use among Swedish clubbers using breath alcohol and oral fluid drug testing. Method: The setting was a 40 hour electronic music dance event (EMDE) on a cruise ship on the Baltic Sea, departing from Sweden, with 875 passengers. Groups of participants at the EMDE were randomly invited to participate. Data were collected with face-to-face and self-administered questionnaires. Further, oral fluid samples were collected to determine illicit drug use, and blood alcohol concentration (BAC) levels were measured using a breath analyzer. Results: A total of 422 passengers were asked to participate in the study whereof 21 declined (5.0% refusal rate). Of the 401 study participants (accounting for 45.8% of all attendees), 5 declined oral fluid drug testing. Results show that there was a discrepancy between self-reported and actual drug use as 10.1% of the participants were positive on illicit drug use (amphetamines, ecstasy/MDMA, cannabis, cocaine), while only 3.7% of the participants reported drug use during the last 48 hours. The average BAC level was 0.10% and 23.7% had BAC levels >

0.15%, while 5.9% had levels below the detection limit. The mean BAC levels for the illicit drug users were significantly higher ($p = 0.004$) than for non-drug users (0.13% vs. 0.10%). Self-reported AUDIT-C scores (using a threshold of > 5 for men and > 4 for women) revealed that 76.0% of the men and 80.7% of the women had risky alcohol consumption patterns. Conclusion: This study indicates that it is feasible to conduct breath alcohol and oral fluid drug testing in a Swedish club setting. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcohol Drinking Patterns](#)
[*Biological Markers](#)
[*Drug Abuse](#)
[*Drug Usage Screening](#)
[Blood Alcohol Concentration](#)

Source: PsycINFO

Full Text: Available from *Springer NHS Pilot 2014 (NESLi2)* in [Substance Abuse Treatment, Prevention, and Policy](#); Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only. Available from *ProQuest* in [Substance Abuse Treatment, Prevention and Policy](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions. Available from *National Library of Medicine* in [Substance Abuse Treatment, Prevention, and Policy](#)
 Available from *BioMedCentral* in [Substance Abuse Treatment, Prevention, and Policy](#)

23. Attitudes and knowledge about naloxone and overdose prevention among detained drug users in Ningbo, China.

Citation: Substance Abuse Treatment, Prevention, and Policy, February 2012, vol./is. 7/, 1747-597X (Feb 8, 2012)

Author(s): Liu, Yu; Bartlett, Nicholas; Li, Longhui; Lv, Xiuyi; Zhang, Yahai; Zhou, Wenhua

Correspondence Address: Zhou, Wenhua: School of Medicine, Ningbo University, 818 Fenghua Street, Jiangbei District, Zhejiang, Ningbo, China, 315211, whzhou@vip.163.com

Institution: School of Medicine, Ningbo University, Ningbo, China; Department of Anthropology, History and Social Medicine, University of California, San Francisco, San Francisco, CA, US; Laboratory of Behavioral Neuroscience Ningbo Addiction Treatment and Research Center, Ningbo, China; School of Medicine, Ningbo University, Ningbo, China; Laboratory of Behavioral Neuroscience Ningbo Addiction Treatment and Research Center, Ningbo, China; School of Medicine, Ningbo University, Ningbo, China

Language: English

Abstract: Background: To date there has been limited research on both the prevalence of overdose and drug user knowledge about overdose prevention and response methods in China. In addition, there has been no effort to integrate naloxone information and distribution into pre-release services for drug users detained in isolated compulsory detoxification facilities in China. Methods: The authors conducted a survey of 279 heroin users in isolated compulsory detoxification centers in Ningbo, China in an attempt to evaluate the possibility of conducting pre-release peer naloxone programs in Ningbo isolated compulsory detoxification centers. Respondents' demographic background, history of heroin overdoses, and attitudes/knowledge about overdose prevention and response were collected. Results: While drug users in Ningbo's compulsory detoxification centers have limited understandings of how to effectively respond to overdoses, they expressed concern about the possibility of overdose, interest in participating in overdose prevention and response programs, and a willingness to help their peers. In general, there was no

significant difference in history and attitudes/knowledge of overdose between male and female participants. Conclusion: Based on the findings of this research, our survey provides preliminary evidence that detained drug users have considerable interest in overdose prevention and response information and willingness to help peers. However, drug users in Ningbo isolated compulsory detoxification centers currently have limited understandings of effective ways of helping to prevent overdose deaths. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Chinese Cultural Groups](#)
[*Drug Overdoses](#)
[*Naloxone](#)
[*Prevention](#)
[Detoxification](#)
[Drug Addiction](#)
[Drug Usage Attitudes](#)
[Heroin](#)
[Opiates](#)
[Peers](#)
- Source:** PsycINFO
- Full Text:** Available from *Springer NHS Pilot 2014 (NESLi2)* in [Substance Abuse Treatment, Prevention, and Policy](#); Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only. Available from *ProQuest* in [Substance Abuse Treatment, Prevention and Policy](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions. Available from *National Library of Medicine* in [Substance Abuse Treatment, Prevention, and Policy](#)
 Available from *BioMedCentral* in [Substance Abuse Treatment, Prevention, and Policy](#)

24. Clinical trials and American Indians/Alaska Natives with substance use disorders: Identifying potential strategies for a new cultural-based intervention.

- Citation:** Journal of Public Mental Health, 2014, vol./is. 13/4(175-178), 1746-5729;2042-8731 (2014)
- Author(s):** Dickerson, Daniel L; Venner, Kamilla L; Duran, Bonnie
- Correspondence Address:** Dickerson, Daniel L., daniel.dickerson@ucla.edu
- Institution:** Integrated Substance Abuse Programs, University of California, Los Angeles, Los Angeles, CA, US; Department of Psychology, University of New Mexico, Albuquerque, NM, US; Indigenous Wellness Research Institute, School of Social Work, University of Washington, Seattle, WA, US
- Language:** English
- Abstract:** Purpose: The purpose of this paper is to address a significant public mental health disparity affecting American Indians/Alaska Natives (AI/ANs): the shortage of clinical trials research analyzing the benefits of AI/AN traditional-based treatments, e.g. drumming. Design/methodology/approach: A total of four focus groups were conducted among outpatient and inpatient AI/AN substance abuse patients and providers serving AI/ANs. The purpose of these focus groups was to obtain insights relating to the recent challenges of conducting a clinical trial within the outpatient treatment setting seeking to analyze the benefits of a new substance abuse treatment intervention utilizing drumming for AI/ANs [Drum-assisted Recovery Therapy for Native Americans (DARTNA)] and to obtain recommendations to successfully conduct a similar study within an inpatient treatment setting. Findings: The most prevalent barriers to conducting a clinical trial

within an outpatient setting were transportation and child care issues. Recommendations were obtained with regard to optimizing recruitment and retention for a future study within an inpatient setting. Originality/value: This research offers the field rare information that helps toward identifying strategies to successfully conduct clinical trials investigating the benefits of culturally-appropriate treatments for AI/ANs with substance use disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Emerald Group Publishing Limited

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alaska Natives](#)
[*American Indians](#)
[*Cross Cultural Treatment](#)
[*Drug Abuse](#)
[Alcohol Rehabilitation](#)
[Drug Rehabilitation](#)
[Intervention](#)
[Mental Health](#)
[Public Health](#)
[Traditions](#)
[Treatment Barriers](#)
[Health Disparities](#)

Source: PsycINFO

25. Friendship intimacy, close friend drug use, and self-medication in adolescence.

Citation: Journal of Social and Personal Relationships, December 2014, vol./is. 31/8(997-1018), 0265-4075;1460-3608 (Dec 2014)

Author(s): Shadur, Julia M; Hussong, Andrea M

Correspondence Address: Shadur, Julia M.: Center for Addictions, Personality, and Emotion Research, University of Maryland, Cole Activities Building Suite 2103-D, College Park, MD, US, 20742, jshadur@umd.edu

Institution: University of Maryland, College Park, MD, US; University of North Carolina, NC, US

Language: English

Abstract: The current study tested between-person hypotheses that global negative affect, friendship intimacy, and close friend drug use predict increased substance use, and the within-person hypothesis that friendship intimacy and close friend substance use moderate the temporal relationship between daily negative affect and subsequent substance use (i.e., self-medication). Experience sampling methodology captured daily variations in mood and substance use, and multilevel modeling techniques were used to parse between-versus within-person effects. Findings supported between-person hypotheses that greater negative affect and lower friendship intimacy predicted greater substance use, and a consistent trend indicated that friendship intimacy and close friend drug use interact to predict substance use overall (though not for self-medication). Risk and protective mechanisms indicate that the effect of friendship intimacy on adolescent use depends on close friend drug use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Conference Information: American Psychological Association's 119th Annual Convention. Aug, 2011. Washington. DC, US. This article was first presented at the aforementioned conference.

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adolescent Development](#)
[*Drug Usage](#)
[*Friendship](#)
[*Intimacy](#)
[*Self Medication](#)

Experience Level
 High School Students
 Peers
 Quantitative Methods

Source: PsycINFO

26. Romance, recovery and community re-entry for criminal justice-involved women: Conceptualizing and measuring intimate relationship factors and power.

Citation: Journal of Gender Studies, October 2014, vol./is. 23/4(409-421), 0958-9236;1465-3869 (Oct 2014)

Author(s): Walt, Lisa Christine; Hunter, Bronwyn; Salina, Doreen; Jason, Leonard

Correspondence Address: Walt, Lisa Christine, lwalt9@gmail.com

Institution: Medical Center, Rush University, Chicago, IL, US; Department of Psychology, DePaul University, Chicago, IL, US; Fienberg Medical School, Northwestern University, Chicago, IL, US; Department of Psychology, DePaul University, Chicago, IL, US

Language: English

Abstract: Researchers have suggested that interpersonal relationships, particularly romantic relationships, may influence women's attempts at substance abuse recovery and community re-entry after criminal justice system involvement. The present paper evaluates relational and power theories to conceptualize the influence of romantic partner and romantic relationship qualities on pathways in and out of substance abuse and crime. The paper then combines these conceptualizations with a complementary empirical analysis to describe an ongoing research project that longitudinally investigates these relational and power-driven factors on women's substance abuse recovery and community re-entry success among former substance abusing, recently criminally involved women. This paper is designed to encourage the integration of theory and empirical analysis by detailing how each of these concepts is operationalized and measured. Future research and clinical implications are also discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2013

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Female Criminals](#)
[*Romance](#)
[*Interpersonal Relationships](#)
 Human Females
 Recovery (Disorders)
 Relationship Quality
 Interpersonal Control

Source: PsycINFO

27. In-depth study of personality disorders in first-admission patients with substance use disorders.

Citation: BMC Psychiatry, October 2012, vol./is. 12/, 1471-244X (Oct 29, 2012)

Author(s): Langas, Anne-Marit; Malt, Ulrik Fredrik; Opjordsmoen, Stein

Correspondence Address: Langas, Anne-Marit: Division of Mental Health and Addiction, Department of Mental Health Research and Development, Vestre Viken Hospital Trust, P.O. Box 135, Lier, Norway, NO-3401, anne-marit.langas@vestreviken.no

Institution: Division of Mental Health and Addiction, Department of Mental Health Research and Development, Vestre Viken Hospital Trust, Lier, Norway; Norwegian Research Network on Mood Disorders (NORMOOD), Oslo, Norway; University of Oslo, Institute of Clinical Medicine, Oslo, Norway

Language: English

- Abstract:** Background: Assessment of comorbid personality disorders (PDs) in patients with substance use disorders (SUDs) is challenging due to symptom overlap, additional mental and physical disorders, and limitations of the assessment methods. Our in-depth study applied methods to overcome these difficulties. Method: A complete catchment area sample of 61 consecutively admitted patients with SUDs, with no previous history of specialized treatment (addiction clinics, psychiatry) were studied, addressing PDs and associated clinical and demographic variables. The thorough assessments included the Psychiatric Research Interview for Substance and Mental Disorders and the Structured Clinical Interview for DSM-IV Axis II Personality Disorders. Results: Forty-six percent of the SUD patients had at least one PD (16% antisocial [males only]; 13% borderline; and 8% paranoid, avoidant, and obsessive-compulsive, respectively). Cluster C disorders were as prevalent as Cluster B disorders. SUD patients with PDs were younger at the onset of their first SUD and at admission; used more illicit drugs; had more anxiety disorders, particularly social phobia; had more severe depressive symptoms; were more distressed; and less often attended work or school. Conclusion: The psychiatric comorbidity and symptom load of SUD patients with PDs differed from those of SUD patients without PDs, suggesting different treatment needs, and stressing the value of the assessment of PDs in SUD patients. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
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- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Comorbidity](#)
[*Drug Abuse](#)
[*Personality Disorders](#)
[*Treatment](#)
[Facility Admission](#)
[Physical Disorders](#)
- Source:** PsycINFO
- Full Text:** Available from *National Library of Medicine* in [BMC Psychiatry](#)
Available from *BioMedCentral* in [BMC Psychiatry](#)
Available from *Springer NHS Pilot 2014 (NESLi2)* in [BMC Psychiatry](#); Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.
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28. Interactions among alcohol dependence, perinatal common mental disorders and violence in couples in rural Vietnam: A cross-sectional study using structural equation modeling.

- Citation:** BMC Psychiatry, September 2012, vol./is. 12/, 1471-244X (Sep 19, 2012)
- Author(s):** Tran, Thach Duc; Tran, Tuan; Wynter, Karen; Fisher, Jane
- Correspondence Address:** Tran, Thach Duc: Research and Training Centre for Community Development, Hai Ba Trung District, 39/255 Vong street, Hanoi, Vietnam, indthach@yahoo.com
- Institution:** Research and Training Centre for Community Development, Hanoi, Vietnam; Research and Training Centre for Community Development, Hanoi, Vietnam; Jean Hailes Research Unit, School of Public Health and Preventive Medicine, Monash University, Clayton, Australia; Jean Hailes Research Unit, School of Public Health and Preventive Medicine, Monash University, Clayton, Australia
- Language:** English
- Abstract:** Background: There is increasing recognition that perinatal common mental disorders (PCMDs) are prevalent in women in low and lower-middle income countries and emerging evidence that PCMDs and alcohol abuse occur in men in these settings.

of Psychology, University of Newcastle, Newcastle, Australia; School of Psychology, University of Newcastle, Newcastle, Australia; Central Coast Drug and Alcohol Clinical Service, Northern Sydney Central Coast Area Health Service, Sydney, Australia

- Language:** English
- Abstract:** Background: The rise of the internet and related technologies has significant implications for the treatment of complex health problems, including the combination of depression and alcohol/other drug (AOD) misuse. To date, no research exists to test the real world uptake of internet and computer-delivered treatment programs in clinical practice. This study is important, as it is the first to examine the adoption of the SHADE treatment program, a DVD-based psychological treatment for depression and AOD use comorbidity, by clinicians working in a publicly-funded AOD clinical service. The study protocol that follows describes the methodology of this dissemination trial. Methods/design: 19 clinicians within an AOD service on the Central Coast of New South Wales, Australia, will be recruited to the trial. Consenting clinicians will participate in a baseline focus group discussion designed to explore their experiences and perceived barriers to adopting innovation in their clinical practice. Computer comfort and openness to innovation will also be assessed. Throughout the trial, current, new and wait-list clients will be referred to the research program via the clinical service, which will involve clients completing a baseline and 15-week follow-up clinical assessment with independent research assistants, comprising a range of mental health and AOD measures. Clinicians will also complete session checklists following each clinical session with a client, outlining the extent to which the SHADE computer program was used. Therapeutic alliance will be measured at intake and discharge from both the clinician and client perspectives. Discussion: This study will provide comprehensive data on the factors associated with the adoption of an innovative, computer-delivered evidence-based treatment program, SHADE, by clinicians working in an AOD service. The results will contribute to the development of a model of dissemination of SHADE, which could be applied to a range of technological innovations. Clinical trials registry: Australian Clinical Trial Registration Number: ACTRN12611000382976. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
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- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Alcohol Abuse](#)
[*Drug Abuse](#)
[*Major Depression](#)
[*Computer Assisted Therapy](#)
[Comorbidity](#)
[Internet](#)
[Technology](#)
- Source:** PsycINFO
- Full Text:** Available from *National Library of Medicine* in [BMC Psychiatry](#)
Available from *BioMedCentral* in [BMC Psychiatry](#)
Available from *Springer NHS Pilot 2014 (NESLi2)* in [BMC Psychiatry](#); Note: ; Collection notes: Academic-License. Please when asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.
Available from *ProQuest* in [BMC Psychiatry](#); Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.

30. Endogenous cortisol predicts decreased loss aversion in young men.

- Citation:** Psychological Science, November 2014, vol./is. 25/11(2102-2105), 0956-7976;1467-9280 (Nov 2014)
- Author(s):** Chumbley, J. R.; Krajbich, I.; Engelmann, J. B.; Russell, E.; Van Uum, S.; Koren, G.; Fehr, E.

- Correspondence Address:** Chumbley, J. R.: Translational Neuromodeling Unit, Institute for Biomedical Engineering, University of Zurich, Wilfriedstrasse 6, Zurich, Switzerland, CH-8032, cjustin@ethz.ch
- Institution:** Laboratory for Social and Neural Systems Research (SNS-Lab), University of Zurich, Zurich, Switzerland; Laboratory for Social and Neural Systems Research (SNS-Lab), University of Zurich, Zurich, Switzerland; Laboratory for Social and Neural Systems Research (SNS-Lab), University of Zurich, Zurich, Switzerland; Department of Physiology and Pharmacology, University of Western Ontario, ON, Canada; Department of Medicine, Schulich School of Medicine and Dentistry, University of Western Ontario, ON, Canada; Department of Clinical Pharmacology and Toxicology, University of Toronto, Toronto, ON, Canada; Laboratory for Social and Neural Systems Research (SNS-Lab), University of Zurich, Zurich, Switzerland
- Language:** English
- Abstract:** Human and nonhuman animals respond asymmetrically to predicted punishments and rewards (Dayan & Seymour, 2008; Kahneman, 2011). In human decision making, for example, people pay more to avoid losses than to gain equivalent rewards. Because such loss aversion counterproductively diminishes an individual's expected payoffs, it has become one of the most studied choice biases. It is unclear whether biological markers of punishment or stress exposure—most notably the glucocorticoid stress hormone cortisol of the hypothalamic-pituitary-adrenal (HPA) axis—predict this particular form of behavioral punishment sensitivity. Acute glucocorticoid administration desensitizes subjects to threat and punishment, whereas chronic administration sensitizes them, increasing anxiety (Aerni et al., 2004; de Quervain & Margraf, 2008; Schelling et al., 2006; Soravia et al., 2006). This mirrors the mainstream view that acute stress responses are adaptive, whereas chronic exposure is detrimental (Chrousos, 2009). There is evidence that HPA-axis traits specifically undermine decision making. HPA disturbances predict addictive behavior (Koob & Kreek, 2007; Marinelli & Piazza, 2002; Putman, Antypa, Crysovergi, & van der Does, 2010; Sinha, 2008), and the relation between longterm HPA activity and pathological gambling (Wohl, Matheson, Young, & Anisman, 2008) may reflect altered punishment sensitivity. In nonclinical populations, the threat of financial loss (i.e., imminent poverty) chronically elevates cortisol (Haushofer, de Laat, & Chemin, 2012). Yet it is unknown whether chronically elevated cortisol, in turn, alters exposure to new losses by altering decision making. Such a feedback cycle might be adaptive (negative feedback) or maladaptive (positive feedback), depending on whether it limits or exacerbates financial loss. In the present study, we sidestepped the issue of causation and simply assessed whether an individual's maladaptive loss aversion increased with chronic exposure to endogenous cortisol, which we assayed using hair samples. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
- Country of Publication:** HOLDER: Association for Psychological Science; YEAR: 2014
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Aversion](#)
[*Hydrocortisone](#)
[*Hypothalamic Pituitary Adrenal Axis](#)
[*Punishment](#)
[*Stress](#)
[Anxiety](#)
[Biological Markers](#)
[Choice Behavior](#)
[Decision Making](#)
[Financial Strain](#)
[Pathological Gambling](#)
[Rewards](#)
- Source:** PsycINFO
- Full Text:** Available from *Highwire Press* in [Psychological Science](#)

31. High risk behaviors of injection drug users registered with harm reduction programme in Karachi, Pakistan.

- Citation:** Harm Reduction Journal, February 2007, vol./is. 4/, 1477-7517 (Feb 10, 2007)
- Author(s):** Altaf, Arshad; Shah, Ali Sharaf; Zaidi, Najam A; Memon, Ashraf; ur-Rehman, Nadeem; Wray, Norman
- Correspondence Address:** Altaf, Arshad: Community Health Sciences, Aga Khan University, Karachi, Pakistan, arshad.altaf@gmail.com
- Institution:** Community Health Sciences, Aga Khan University, Karachi, Pakistan; Enhanced HIV/AIDS Control Programme, Government of Sindh, Karachi, Pakistan; Department of Medicine, Memorial Hospital, Brown University, US; Enhanced HIV/AIDS Control Programme, Government of Sindh, Karachi, Pakistan; United Nations Office for Drug Control and Crime Prevention (UNODC), Islamabad, Pakistan; Marie Adelaide Rehabilitation Center, Karachi, Pakistan
- Language:** English
- Abstract:** Background: Surveillance data of Sindh AIDS Control Programme, Pakistan suggest that HIV infection is rapidly increasing among IDUs in Karachi and has reached 9% in 2004-5 indicating that the country has progressed from nascent to concentrated level of HIV epidemic. Findings of 2nd generation surveillance in 2004-5 also indicate 104/395 (26.3%) IDUs HIV positive in the city. Methods: We conducted a cross sectional study among registered IDUs of a needle exchange and harm reduction programme in Karachi, Pakistan. A total of 161 IDUs were included in the study between October-November 2003. A detailed questionnaire was implemented and blood samples were collected for HIV, hepatitis B & C and syphilis. HIV, hepatitis B and C antibody tests were performed using Enzyme Linked Immunosorbent Assay (ELISA) method. Syphilis tests (RPR & TPHA) were performed on Randox kit. Besides calculating frequencies univariate analysis was performed using t tests for continuous variables as age, age at first intercourse and average age of initiation of addiction and chi square for categorical variables like paid for sex or not to identify risk factors for hepatitis B and C and syphilis. Results: Average age of IDU was 35.9 years and average age of initiation of drugs was 15.9 years. Number of drug injections per day was 2.3. Shooting drugs in group sharing syringes was reported by 128 (79.5%) IDUs. Over half 94 (58.3%) reported paying for sex and 64% reported never using a condom. Commercial selling of blood was reported by 44 (28%). 1 of 161 was HIV positive (0.6%). The prevalence of hepatitis B was 12 (7.5%), hepatitis C 151 (94.3%) and syphilis 21 (13.1%). IDUs who were hepatitis C positive were more likely to start sexual activity at an earlier age and had never used condoms. Similarly IDUs who were hepatitis B positive were more likely to belong to a younger age group. Syphilis positive IDUs were more likely to have paid for sex and had never used a condom. Conclusion: Prudent measures such as access to sterile syringes, rehabilitation and opiate substitution therapies are required to reduce high risk behaviors of IDUs in Pakistan. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** STATEMENT: licensee BioMed Central Ltd. This is an Open Access article distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/2.0>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.; HOLDER: Altaf et al.; YEAR: 2007
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Drug Usage](#)
[*Harm Reduction](#)
[*Hepatitis](#)
[*Injections](#)
[*Risk Factors](#)
[HIV](#)
- Source:** PsycINFO
- Full Text:** Available from *National Library of Medicine* in [Harm Reduction Journal](#)
Available from *BioMedCentral* in [Harm Reduction Journal](#)

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

32. Harm reduction services for British Columbia's First Nation population: A qualitative inquiry into opportunities and barriers for injection drug users.

- Citation:** Harm Reduction Journal, October 2006, vol./is. 3/, 1477-7517 (Oct 11, 2006)
- Author(s):** Wardman, Dennis; Quantz, Darryl
- Correspondence Address:** Wardman, Dennis: Department of Health Care and Epidemiology, University of British Columbia, Vancouver, BC, Canada, dwardman@shaw.ca
- Institution:** Department of Health Care and Epidemiology, University of British Columbia, Vancouver, BC, Canada; Vancouver Coastal Health Authority, Vancouver, BC, Canada
- Language:** English
- Abstract:** Background: Aboriginal injection drug users are the fastest growing group of new Human Immunodeficiency Virus cases in Canada. However, there remains a lack of comprehensive harm reduction services available to First Nation persons, particularly for First Nation people dwelling in rural and reserve communities. This paper reports findings from an exploratory study of current harm reduction practices in First Nation communities. The purpose of this study was to provide an overview of the availability and content of current harm reduction practices, as well as to identify barriers and opportunities for implementing these services in First Nation communities. Methods: Key informant interviews were conducted with 13 addictions service providers from the province of British Columbia, Canada. Results: Participants identified barriers to these services such as community size and limited service infrastructure, lack of financial resources, attitudes towards harm reduction services and cultural differences. Conclusion: It was recommended that community education efforts be directed broadly within the community before establishing harm reduction services and that the readiness of communities be assessed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** STATEMENT: licensee BioMed Central Ltd. This is an Open Access article distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/2.0>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.; HOLDER: Wardman and Quantz.; YEAR: 2006
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** *Harm Reduction
*Indigenous Populations
*Injections
*Intravenous Drug Usage
Communities
Treatment Barriers
- Source:** PsycINFO
- Full Text:** Available from *National Library of Medicine* in *Harm Reduction Journal*
Available from *BioMedCentral* in *Harm Reduction Journal*
Available from *Springer NHS Pilot 2014 (NESLi2)* in *Harm Reduction Journal*; Note: ;
Collection notes: Academic-License. Please when asked to pick an institution please pick
NHS. Please also note access is from 1997 to date only.

33. A chaotic view of behavior change: A quantum leap for health promotion.

- Citation:** The International Journal of Behavioral Nutrition and Physical Activity, September 2006, vol./is. 3/, 1479-5868 (Sep 12, 2006)
- Author(s):** Resnicow, Ken; Vaughan, Roger

- Correspondence Address:** Resnicow, Ken: Department of Health Education and Health Behavior, School of Public Health, University of Michigan, Ann Arbor, MI, US, kresnic@umich.edu
- Institution:** Department of Health Education and Health Behavior, School of Public Health, University of Michigan, Ann Arbor, MI, US; Department of Biostatistics, Columbia University, New York, NY, US
- Language:** English
- Abstract:** Background: The study of health behavior change, including nutrition and physical activity behaviors, has been rooted in a cognitive-rational paradigm. Change is conceptualized as a linear, deterministic process where individuals weigh pros and cons, and at the point at which the benefits outweigh the cost change occurs. Consistent with this paradigm, the associated statistical models have almost exclusively assumed a linear relationship between psychosocial predictors and behavior. Such a perspective however, fails to account for non-linear, quantum influences on human thought and action. Consider why after years of false starts and failed attempts, a person succeeds at increasing their physical activity, eating healthier or losing weight. Or, why after years of success a person relapses. This paper discusses a competing view of health behavior change that was presented at the 2006 annual ISBNPA meeting in Boston. Discussion: Rather than viewing behavior change from a linear perspective it can be viewed as a quantum event that can be understood through the lens of Chaos Theory and Complex Dynamic Systems. Key principles of Chaos Theory and Complex Dynamic Systems relevant to understanding health behavior change include: 1) Chaotic systems can be mathematically modeled but are nearly impossible to predict; 2) Chaotic systems are sensitive to initial conditions; 3) Complex Systems involve multiple component parts that interact in a nonlinear fashion; and 4) The results of Complex Systems are often greater than the sum of their parts. Accordingly, small changes in knowledge, attitude, efficacy, etc may dramatically alter motivation and behavioral outcomes. And the interaction of such variables can yield almost infinite potential patterns of motivation and behavior change. In the linear paradigm unaccounted for variance is generally relegated to the catch all "error" term, when in fact such "error" may represent the chaotic component of the process. The linear and chaotic paradigms are however, not mutually exclusive, as behavior change may include both chaotic and cognitive processes. Studies of addiction suggest that many decisions to change are quantum rather than planned events; motivation arrives as opposed to being planned. Moreover, changes made through quantum processes appear more enduring than those that involve more rational, planned processes. How such processes may apply to nutrition and physical activity behavior and related interventions merits examination. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** STATEMENT: licensee BioMed Central Ltd. This is an Open Access article distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/2.0>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.; HOLDER: Resnicow and Vaughan.; YEAR: 2006
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Behavior Change](#)
[*Health Promotion](#)
[Chaos Theory](#)
[Health Behavior](#)
[Nutrition](#)
[Physical Activity](#)
[Systems](#)
- Source:** PsycINFO
- Full Text:** Available from *National Library of Medicine* in [International Journal of Behavioral Nutrition and Physical Activity](#), *The*
Available from *Springer NHS Pilot 2014 (NESLi2)* in [International Journal of Behavioral Nutrition and Physical Activity](#); Note: ; Collection notes: Academic-License. Please when

asked to pick an institution please pick NHS. Please also note access is from 1997 to date only.

Available from *BioMedCentral* in *International Journal of Behavioral Nutrition and Physical Activity*

34. Significant life events and their impact on alcohol and drug use: A qualitative study.

- Citation:** Journal of Psychoactive Drugs, October 2014, vol./is. 46/5(450-459), 0279-1072;2159-9777 (Oct 2014)
- Author(s):** Jessup, Martha A; Ross, Thekla Brumder; Jones, Ashley L; Satre, Derek D; Weisner, Constance M; Chi, Felicia W; Mertens, Jennifer R
- Correspondence Address:** Jessup, Martha A.: Institute for Health & Aging, University of California, San Francisco, School of Nursing, 3333 California Street, Suite 340, San Francisco, CA, US, 94118, marty.jessup@ucsf.edu
- Institution:** Institute for Health & Aging, School of Nursing, University of California, San Francisco, CA, US; Division of Research, Kaiser Permanente Northern California, Oakland, CA, US; Division of Research, Kaiser Permanente Northern California, Oakland, CA, US; Division of Research, Kaiser Permanente Northern California, Oakland, CA, US; Division of Research, Kaiser Permanente Northern California, Oakland, CA, US; Division of Research, Kaiser Permanente Northern California, Oakland, CA, US; Division of Research, Kaiser Permanente Northern California, Oakland, CA, US
- Language:** English
- Abstract:** This study used a life-course perspective to identify and understand life events related to long-term alcohol and other drug (AOD) use trajectories across the life span. Using a purposive sample, we conducted semi-structured telephone interviews with 48 participants (n = 30 abstinent and 18 non-abstinent) from a longitudinal study of AOD outcomes 15 years following outpatient AOD treatment. A content analysis was conducted using ATLAS.ti software to identify events and salient themes. Caregiving for an ill or dependent family member was related to better AOD outcomes by reinforcing abstinence and reduced drinking, and contributing to alcohol cessation in most individuals who cited caregiving as a pivotal event. Grandparenting and parenting an adult child were motivational for sustaining abstinence and reduced drinking. Findings were mixed on death of a loved one, which was related to abstinence in some and relapse in others. Redemption and mutual fulfillment as caregivers, reconciliations with adult children, and legacy-building as grandparents were themes associated with maintaining abstinence and reduced drinking. AOD treatment has the opportunity to employ motivational interventions for relapse prevention that address the meaning and lifelong reach of intimate relationships for individuals and their AOD use across the life span. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: Taylor & Francis Group, LLC
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Alcoholism](#)
[*Drug Abuse](#)
[*Life Experiences](#)
[Caregivers](#)
[Life Span](#)
[Relationship Quality](#)
- Source:** PsycINFO

35. Perceived barriers to treatment in a community-based sample of illicit-drug-using African American men and women.

- Citation:** Journal of Psychoactive Drugs, October 2014, vol./is. 46/5(444-449), 0279-1072;2159-9777 (Oct 2014)
- Author(s):** Keen, Larry II; Whitehead, Nicole Ennis; Clifford, Lisa; Rose, Jonathan; Latimer, William

Correspondence Address: Keen, Larry, II: Department of Psychology, Virginia State University, 1 Hayden Dive, PO Box 9079, Petersburg, VA, US, 23806, LKeen@vsu.edu

Institution: Department of Psychology, Virginia State University, Petersburg, VA, US; Department of Clinical and Health Psychology, University of Florida, Gainesville, FL, US; Department of Clinical and Health Psychology, University of Florida, Gainesville, FL, US; Department of Clinical and Health Psychology, University of Florida, Gainesville, FL, US; Department of Clinical and Health Psychology, University of Florida, Gainesville, FL, US

Language: English

Abstract: This study examines perceived substance use treatment barriers in a community-based sample of 267 African Americans from Baltimore, MD. Both men and women endorsed "they can handle it alone" as a primary reason they were not currently in treatment. However, men were two times more likely (AOR = 2.29 CI = 1.05, 5.02) to endorse "concerns about losing family" as the reason they are not currently in treatment. The present study yields interesting findings among African Americans, which should be considered when creating interventions for particular groups of African Americans. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adult Attitudes](#)
[*Blacks](#)
[*Drug Abuse](#)
[*Human Sex Differences](#)
[*Treatment Barriers](#)

Source: PsycINFO

36. Maximizing social model principles in residential recovery settings.

Citation: Journal of Psychoactive Drugs, October 2014, vol./is. 46/5(436-443), 0279-1072;2159-9777 (Oct 2014)

Author(s): Polcin, Douglas; Mericle, Amy; Howell, Jason; Sheridan, Dave; Christensen, Jeff

Correspondence Address: Polcin, Douglas: Alcohol Research Group, Public Health Institute, 6475 Christie Avenue, Suite 400, Emeryville, CA, US, 94608-1010, dpolcin@arg.org

Institution: Alcohol Research Group, Emeryville, CA, US; Alcohol Research Group, Emeryville, CA, US; National Alliance for Recovery Residences, Austin, TX, US; Sober Living Network, Los Angeles, CA, US; Sober Living Network, Los Angeles, CA, US

Language: English

Abstract: Peer support is integral to a variety of approaches to alcohol and drug problems. However, there is limited information about the best ways to facilitate it. The "social model" approach developed in California offers useful suggestions for facilitating peer support in residential recovery settings. Key principles include using 12-step or other mutual-help group strategies to create and facilitate a recovery environment, involving program participants in decision making and facility governance, using personal recovery experience as a way to help others, and emphasizing recovery as an interaction between the individual and their environment. Although limited in number, studies have shown favorable outcomes for social model programs. Knowledge about social model recovery and how to use it to facilitate peer support in residential recovery homes varies among providers. This article presents specific, practical suggestions for enhancing social model principles in ways that facilitate peer support in a range of recovery residences. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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named authors have been asserted.; HOLDER: Douglas Polcin, Amy Mericle, Jason Howell, Dave Sheridan, and Jeff Christensen

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Peers](#)
[*Residential Care Institutions](#)
[*Social Support](#)

Source: PsycINFO

37. Patient perspectives on buprenorphine/naloxone: A qualitative study of retention during the Starting Treatment with Agonist Replacement Therapies (START) Study.

Citation: Journal of Psychoactive Drugs, October 2014, vol./is. 46/5(412-426), 0279-1072;2159-9777 (Oct 2014)

Author(s): Teruya, Cheryl; Schwartz, Robert P; Mitchell, Shannon Gwin; Hasson, Albert L; Thomas, Christie; Buoncristiani, Samantha H; Hser, Yih-Ing; Wiest, Katharina; Cohen, Allan J; Glick, Naomi; Jacobs, Petra; McLaughlin, Paul; Ling, Walter

Correspondence Address: Teruya, Cheryl: UCLA Integrated Substance Abuse Programs, 11075 Santa Monica Blvd., Ste. 100, Los Angeles, CA, US, 90025, cteruya@ucla.edu

Institution: UCLA Integrated Substance Abuse Programs, Los Angeles, CA, US; Friends Research Institute, Baltimore, MD, US; Friends Medical Research Institute, Inc., Baltimore, MD, US; UCLA Integrated Substance Abuse Programs, Los Angeles, CA, US; UCLA Integrated Substance Abuse Programs, Los Angeles, CA, US; UCLA Integrated Substance Abuse Programs, Los Angeles, CA, US; UCLA Integrated Substance Abuse Programs, Los Angeles, CA, US; CODA, Inc., Portland, OR, US; Bay Area Addiction Research & Treatment, San Francisco, CA, US; UCLA Integrated Substance Abuse Programs, Los Angeles, CA, US; National Institute on Drug Abuse, Center for the Clinical Trials Network, Bethesda, MD, US; Hartford Dispensary, Manchester, CT, US; UCLA Integrated Substance Abuse Programs, Los Angeles, CA, US

Language: English

Abstract: This study examines the barriers and facilitators of retention among patients receiving buprenorphine/naloxone at eight community-based opioid treatment programs across the United States. Participants (n = 105) were recruited up to three and a half years after having participated in a randomized clinical trial comparing the effect of buprenorphine/naloxone and methadone on liver function. Semi-structured interviews were conducted with 67 patients provided with buprenorphine/naloxone who had terminated early and 38 patients who had completed at least 24 weeks of the trial. Qualitative data were analyzed using the constant comparison method. Barriers to buprenorphine/naloxone retention that emerged included factors associated with: (1) the design of the clinical trial; (2) negative medication or treatment experience; and (3) personal circumstances. The facilitators comprised: (1) positive experience with the medication; (2) personal determination and commitment to complete; and (3) staff encouragement and support. The themes drawn from interviews highlight the importance of considering patients' prior experience with buprenorphine/naloxone and methadone, medication preference, personal circumstances, and motivation to abstain from illicit use or misuse of opioids, as these may influence retention. Ongoing education of patients and staff regarding buprenorphine/naloxone, especially in comparison to methadone, and support from staff and peers are essential. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Addiction](#)
[*Drug Therapy](#)
[*Naloxone](#)
[*Treatment Outcomes](#)

Source: PsycINFO

38. A randomized, controlled trial of the efficacy of an interoceptive exposure-based CBT for treatment-refractory outpatients with opioid dependence.

Citation: Journal of Psychoactive Drugs, October 2014, vol./is. 46/5(402-411), 0279-1072;2159-9777 (Oct 2014)

Author(s): Otto, Michael W; Hearon, Bridget A; McHugh, R. Kathryn; Calkins, Amanda W; Pratt, Elizabeth; Murray, Heather W; Safren, Steven A; Pollack, Mark H

Correspondence Address: Otto, Michael W., 648 Beacon Street, 5th Floor, Boston, MA, US, 02215, mwotto@bu.edu

Institution: Boston University, Boston, MA, Yemen; Boston University, Boston, MA, Yemen; McLean Hospital, Belmont, MA, Yemen; Massachusetts General Hospital-Psychiatry, Boston, MA, Yemen; Boston University, Boston, MA, Yemen; Boston University, Boston, MA, Yemen; Massachusetts General Hospital-Psychiatry, Boston, MA, Yemen; Massachusetts General Hospital-Psychiatry, Boston, MA, Yemen

Language: English

Abstract: Many patients diagnosed with opioid dependence do not adequately respond to pharmacologic, psychosocial, or combination treatment, highlighting the importance of novel treatment strategies for this population. The current study examined the efficacy of a novel behavioral treatment focusing on internal cues for drug use (Cognitive Behavioral Therapy for Interoceptive Cues; CBT-IC) relative to an active comparison condition, Individual Drug Counseling (IDC), when added to methadone maintenance treatment (MMT) among those who had not responded to MMT. Participants (N = 78) were randomly assigned to receive 15 sessions of CBT-IC or IDC as an adjunct to ongoing MMT and counseling. Oral toxicology screens were the primary outcome. Results indicated no treatment differences between CBT-IC and IDC and a small, significant reduction of self-reported drug use, but no change on toxicology screens. Tests of potential moderators, including sex, anxiety sensitivity, and coping motives for drug use, did not yield significant interactions. Among opioid-dependent outpatients who have not responded to MMT and counseling, the addition of IDC or CBT-IC did not result in additive outcome benefits. These results highlight the need for more potent treatment strategies for opioid dependence, particularly among those who do not fully respond to frontline treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Cognitive Behavior Therapy](#)
[*Drug Dependency](#)
[*Drug Usage](#)
[*Opiates](#)
[*Treatment Outcomes](#)
[Treatment Resistant Disorders](#)

Source: PsycINFO

39. Levamisole-adulterated cocaine: What about in European countries?

Citation: Journal of Psychoactive Drugs, October 2014, vol./is. 46/5(389-392), 0279-1072;2159-9777 (Oct 2014)

Author(s): Eiden, Celine; Diot, Caroline; Mathieu, Olivier; Mallaret, Michel; Peyriere, Helene

Correspondence Address: Eiden, Celine: Service de Pharmacologie Medicale et Toxicologie, Hopital Lapeyronie, 191 Avenue du Doyen Gaston Giraud, Montpellier, France, 34295, Cedex 5, c-eiden@chumontpellier.fr

Institution: Centre for Evaluation and Information on Pharmacodependance-Addictovigilance, Medical Pharmacology and Toxicology Department, University Hospital of Montpellier,

Montpellier, France; Centre for Evaluation and Information on Pharmacodependance-Addictovigilance, Medical Pharmacology and Toxicology Department, University Hospital of Montpellier, Montpellier, France; Medical Pharmacology and Toxicology Department, University Hospital of Montpellier, UM1, Montpellier, France; Pharmacology Department, Centre for Evaluation and Information on Pharmacodependance-Addictovigilance, University Hospital of Grenoble, Grenoble, France; Centre for Evaluation and Information on Pharmacodependance-Addictovigilance, Medical Pharmacology and Toxicology Department, University Hospital of Montpellier, UM1, Montpellier, France

Language:

English

Abstract:

Background: A wide variety of somatic complications is reported or expected among cocaine users because of the adulterant levamisole. Most of the reports come from North America. **Methods:** To update the data on levamisole-adulterated cocaine in European countries, we present here a synthesis of data on samples seized by the police with the detection of levamisole, the amount of levamisole in cocaine samples, European drug information reports, and clinical cases. **Results:** Although there is a variation in the percentage of levamisole in cocaine samples between European countries, the trend is an increase of these percentages. As in North America, levamisole is becoming the most common cocaine adulterant. First European cases of complications secondary to the use of adulterated cocaine with levamisole were skin necrosis, vasculitis, and agranulocytosis. Levamisole postmortem data concerned two cases of complications leading to death, possibly related to levamisole or its metabolite (acute coronary syndrome, pulmonary hypertension). **Conclusion:** Even if it is difficult to have a global European view with comparable data, levamisole is present in European cocaine specimens and can lead to severe adverse health effects. However data on the prevalence of toxicity related to levamisole-adulterated cocaine abuse are missing. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication:

HOLDER: Taylor & Francis Group, LLC

Publication Type:

Journal; Peer Reviewed Journal

Subject Headings:

*Addiction
*Cocaine
Countries

Source:

PsycINFO

40. Investigation of "bath salts" use patterns within an online sample of users in the United States.**Citation:**

Journal of Psychoactive Drugs, October 2014, vol./is. 46/5(369-378), 0279-1072;2159-9777 (Oct 2014)

Author(s):

Johnson, Patrick S; Johnson, Matthew W

Correspondence Address:

Johnson, Patrick S.: Behavioral Pharmacology Research Unit, Department of Psychiatry and Behavioral Sciences, Johns Hopkins University School of Medicine, 5510 Nathan Shock Dr., Baltimore, MD, US, 21224, pastejohn@jhmi.edu

Institution:

Johns Hopkins University School of Medicine, Baltimore, MD, US; Johns Hopkins University School of Medicine, Baltimore, MD, US

Language:

English

Abstract:

"Bath salts" are synthetic stimulant "legal highs" that have recently been banned in the US. Epidemiological data regarding bath salts use are limited. In the present study, 113 individuals in the US reporting use of bath salts completed an anonymous, online survey characterizing demographic, experiential, and psychological variables. Respondents were more often male, 18-24 years old, and Caucasian/White with some college education. Past-year use was typically low (< 10 days), but marked by repeated dosing. Intranasal was the most frequently reported administration route and subjective effects were similar to other stimulants (e.g., cocaine, amphetamines). Bath salts use was associated with increased sexual desire and sexual HIV risk behavior, and met DSM-5 diagnostic criteria for disordered use in more than half of respondents. Bath salts use persists in the US despite federal bans of cathinone-like constituents. Self-reported stimulant-like effects of

bath salts suggest their use as substitutes for traditional illicit stimulants. Data revealed more normative outcomes vis-a-vis extreme accounts by media and medical case reports. However, indications of product abuse potential and sexual risk remain, suggesting bath salts pose potential public health harm. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*CNS Stimulating Drugs](#)
[*Drug Usage](#)
[*Risk Taking](#)
[HIV](#)
[Sexual Risk Taking](#)
[Risk Assessment](#)
Source: PsycINFO

41. Exploratory comparative study on the diffusion of synthetic cannabinoids and synthetic cathinones.

Citation: Journal of Psychoactive Drugs, October 2014, vol./is. 46/5(362-368), 0279-1072;2159-9777 (Oct 2014)

Author(s): Arfken, Cynthia L; Owens, Darlene; Madeja, Cheryl; DeAngelis, Christina

Correspondence Address: Arfken, Cynthia L.: Wayne State University-Department of Psychiatry and Behavioral Neurosciences, 3901 Chrysler Service Drive, Detroit, MI, US, 48201, carfken@med.wayne.edu

Institution: Department of Psychiatry and Behavioral Neurosciences, Wayne State University, Detroit, MI, US; Southeast Michigan Community Alliance, Taylor, MI, US; Department of Psychiatry and Behavioral Neurosciences, Wayne State University, Detroit, MI, US; Department of Psychiatry and Behavioral Neurosciences, Wayne State University, Detroit, MI, US

Language: English

Abstract: The use of synthetic cannabinoids and cathinones in southeastern Michigan was explored using Roger's Diffusion of Innovation theory. A mixed methods approach after specific synthetic cannabinoids and cathinone compounds were scheduled was used that included analysis of treatment admissions for two years, surveys of 15 substance abuse treatment providers, and qualitative interviews with a purposive sample of 24 participants. The participant system norm supported trying new drugs, and both drugs were confirmed to have been easier to access than traditional drugs. The participants had negative views of synthetic cathinones due to one sensational news story without counterbalancing positive experiences in their social environment. Although synthetic cannabinoids were also linked to a sensational news story, it was counterbalanced by positive personal experiences. These differences contributed to greater use of synthetic cannabinoids compared to synthetic cathinones as evidenced by admissions, providers' reports, and participants' reports. All participants expressed a preference for traditional drugs, indicating that novel drugs had no relative advantage over other drugs of abuse. Diffusion of Innovation theory can provide a framework for understanding the differential use of novel drugs. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Cannabinoids](#)
[*Drug Usage](#)
[*Theories](#)
[Drug Addiction](#)
[Epidemiology](#)
Source: PsycINFO

42. Nicotine-seeking reinstatement is reduced by inhibition of instrumental memory reconsolidation.

- Citation:** Behavioural Pharmacology, December 2014, vol./is. 25/8(725-731), 0955-8810;1473-5849 (Dec 2014)
- Author(s):** Tedesco, Vincenzo; Mutti, Anna; Auber, Alessia; Chiamulera, Cristiano
- Correspondence Address:** Chiamulera, Cristiano: Sezione Farmacologia, Policlinico GB Rossi, P.le Scuro 10, Verona, Italy, 37134, cristiano.chiamulera@univr.it
- Institution:** Department of Public Health & Community Medicine, University of Verona, Verona, Italy; Department of Public Health & Community Medicine, University of Verona, Verona, Italy; Department of Public Health & Community Medicine, University of Verona, Verona, Italy; Department of Public Health & Community Medicine, University of Verona, Verona, Italy
- Language:** English
- Abstract:** The reinforcing properties of nicotine play a major role in instrumental conditioning to nicotine taking in smokers. Retrieval of nicotine-related memories may promote relapse to nicotine seeking after prolonged abstinence. Once consolidated, memories are stable, but they return to a labile phase, called reconsolidation, after their retrieval. The aim of our study was to investigate whether it was possible to interfere with the reconsolidation of instrumental nicotine-related memories by acting at glutamatergic receptors [N-methyl-D-aspartate receptors (NMDARs)] to prevent relapse to nicotine-seeking behaviour in the rat. We assessed whether the NMDAR antagonist MK-801, administered before or after nicotine-related instrumental memory retrieval, can reduce reinstatement of nicotine-seeking behaviour in rats previously trained to nicotine self-administration. Following a period of forced abstinence, MK-801 (0.1 mg/kg intraperitoneally) was administered 30 min before or 1 h after the re-exposure to 20 lever presses without any contingency in the training context to retrieve instrumental memory. MK-801 administered after, but not before, retrieval inhibited reinstatement compared with vehicle controls and groups without retrieval of instrumental memory. Interestingly, a retrieval factor effect was observed as an increase of reinstatement in vehicle-treated groups, suggesting a behavioural outcome of the occurrence of instrumental memory reconsolidation. Our findings suggest that, by acting on NMDARs, it is possible to reduce the reinstatement of nicotine-seeking behaviour through inhibition of instrumental nicotine-related memory reconsolidation. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: Wolters Kluwer Health ; Lippincott Williams & Wilkins; YEAR: 2014
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Addiction](#)
[*Drug Self Administration](#)
[*Memory](#)
[*Nicotine](#)
[*Reinstatement](#)
[Operant Conditioning](#)
[Rats](#)
- Source:** PsycINFO

43. Review of The saloon and the mission: Addiction, conversion, and the politics of redemption in American culture.

- Citation:** Journal of the History of the Behavioral Sciences, 2014, vol./is. 50/4(400-402), 0022-5061;1520-6696 (Aut, 2014)
- Author(s):** Bayer, Betty M
- Institution:** Martin Marty Center, University of Chicago, Chicago, IL, US
- Language:** English
- Abstract:** Reviews the book, The Saloon and the Mission: Addiction, Conversion, and the Politics of Redemption in American Culture by Eoin F. Cannon (2013). The reviewer states that

by the end of this book, one is well-nigh ready to claim the tale of conversion and redemption sign and symptom of the twentieth century-and, if not that, to name them guideposts to consciousness and conscience, a seeker's constant companion. All to say, conversion is at the center of Cannon's history, but not just any conversion narrative-the drunkard's conversion narrative as genre making. Stories of personal and political change hum with the "felt structures" of this conversion genre descent, revelation, rebirth, reconciliation" National recovery has been construed through these narrative lines, including redemptive stories of presidents, such as George W. Bush's (evangelical salvation from addiction) and Barack Obama's (artist's recovery from escapist self-destruction). Cannon finds even U.S. political recovery visions and electoral campaigns resounding the discursive strains of this conversion narrative. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Country of Publication: HOLDER: Wiley Periodicals, Inc.; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Narratives](#)
[*Politics](#)
[*Social Issues](#)
[Addiction](#)
[Democracy](#)

Source: PsycINFO

44. Model-based and model-free decisions in alcohol dependence.

Citation: Neuropsychobiology, October 2014, vol./is. 70/2(122-131), 0302-282X;1423-0224 (Oct 2014)

Author(s): Sebold, Miriam; Deserno, Lorenz; Nebe, Stefan; Schad, Daniel J; Garbusow, Maria; Hagele, Claudia; Keller, Jurgen; Junger, Elisabeth; Kathmann, Norbert; Smolka, Michael; Rapp, Michael A; Schlagenhauf, Florian; Heinz, Andreas; Huys, Quentin J. M

Correspondence Address: Sebold, Miriam: Department of Psychiatry and Psychotherapy, Mitte Charitem Universitätsmedizin Berlin, Campus Charite, Chariteplatz 1, Berlin, Germany, DE 10117, Miriam.sebold@charite.de

Institution: Department of Psychiatry and Psychotherapy, Mitte Charitem Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Mitte Charitem Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Section of Systems Neuroscience, Technische Universität Dresden, Dresden, Germany; Department of Psychiatry and Psychotherapy, Mitte Charitem Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Mitte Charitem Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Mitte Charitem Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, University Hospital Carl Gustav Carus, Technische Universität Dresden, Dresden, Germany; Institute for Psychology, Humboldt-Universität zu Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Section of Systems Neuroscience, Technische Universität Dresden, Dresden, Germany; University of Potsdam, Potsdam, Germany; Department of Psychiatry and Psychotherapy, Mitte Charitem Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Mitte Charitem Universitätsmedizin Berlin, Berlin, Germany; Translational Neuromodeling Unit, Department of Biomedical Engineering, University of Zurich, Zurich, Switzerland

Language: English

Abstract: Background: Human and animal work suggests a shift from goal-directed to habitual decision-making in addiction. However, the evidence for this in human alcohol dependence is as yet inconclusive. Methods: Twenty-six healthy controls and 26 recently detoxified alcohol-dependent patients underwent behavioral testing with a 2-step task designed to disentangle goal-directed and habitual response patterns. Results: Alcohol-dependent patients showed less evidence of goal-directed choices than healthy

controls, particularly after losses. There was no difference in the strength of the habitual component. The group differences did not survive controlling for performance on the Digit Symbol Substitution Task. Conclusion: Chronic alcohol use appears to selectively impair goal-directed function, rather than promoting habitual responding. It appears to do so particularly after nonrewards, and this may be mediated by the effects of alcohol on more general cognitive functions subserved by the prefrontal cortex. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: S. Karger AG, Basel; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Drug Dependency](#)
[Decision Making](#)
[Dopamine](#)
[Learning Strategies](#)

Source: PsycINFO

Full Text: Available from *Karger Medical and Scientific Publishers* in [Neuropsychobiology](#); Note: ; Collection notes: Academic-License: Only available from an NHS networked computer

45. Pavlovian-to-instrumental transfer in alcohol dependence: A pilot study.

Citation: Neuropsychobiology, October 2014, vol./is. 70/2(111-121), 0302-282X;1423-0224 (Oct 2014)

Author(s): Garbusow, Maria; Schad, Daniel J; Sommer, Christian; Junger, Elisabeth; Sebold, Miriam; Friedel, Eva; Wendt, Jean; Kathmann, Norbert; Schlagenhaut, Florian; Zimmermann, Ulrich S; Heinz, Andreas; Huys, Quentin J. M; Rapp, Michael A

Correspondence Address: Garbusow, Maria: Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Charite Campus Mitte, Chariteplatz 1, Berlin, Germany, DE 10117, maria.garbusow@charite.de

Institution: Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Universitätsklinikum Carl Gustav Carus, Technische Universität Dresden, Dresden, Germany; Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; Department of Psychology, Humboldt-Universität zu Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Universitätsklinikum Carl Gustav Carus, Technische Universität Dresden, Dresden, Germany; Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; Translational Neuromodeling Unit, Institute of Biomedical Engineering, University of Zurich, Zurich, Germany; Department of Health and Sports Sciences, University of Potsdam, Potsdam, Germany

Language: English

Abstract: Background: Pavlovian processes are thought to play an important role in the development, maintenance and relapse of alcohol dependence, possibly by influencing and usurping ongoing thought and behavior. The influence of pavlovian stimuli on ongoing behavior is paradigmatically measured by pavlovian-to-instrumental transfer (PIT) tasks. These involve multiple stages and are complex. Whether increased PIT is involved in human alcohol dependence is uncertain. We therefore aimed to establish and validate a modified PIT paradigm that would be robust, consistent and tolerated by healthy controls as well as by patients suffering from alcohol dependence, and to explore whether alcohol dependence is associated with enhanced PIT. Methods: Thirty-two recently detoxified alcohol-dependent patients and 32 age- and gender-matched healthy

controls performed a PIT task with instrumental go/no-go approach behaviors. The task involved both pavlovian stimuli associated with monetary rewards and losses, and images of drinks. Results: Both patients and healthy controls showed a robust and temporally stable PIT effect. Strengths of PIT effects to drug-related and monetary conditioned stimuli were highly correlated. Patients more frequently showed a PIT effect, and the effect was stronger in response to aversively conditioned CSs (conditioned suppression), but there was no group difference in response to appetitive CSs. Conclusion: The implementation of PIT has favorably robust properties in chronic alcohol-dependent patients and in healthy controls. It shows internal consistency between monetary and drug-related cues. The findings support an association of alcohol dependence with an increased propensity towards PIT. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: S. Karger AG, Basel; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Alcoholism](#)
[*Drug Dependency](#)
[Classical Conditioning](#)
[Experiment Controls](#)
Source: PsycINFO
Full Text: Available from *Karger Medical and Scientific Publishers* in [Neuropsychobiology](#); Note: ; Collection notes: Academic-License: Only available from an NHS networked computer

46. Too difficult to stop: Mechanisms facilitating relapse in alcohol dependence.

Citation: Neuropsychobiology, October 2014, vol./is. 70/2(103-110), 0302-282X;1423-0224 (Oct 2014)
Author(s): Garbusow, Maria; Sebold, Miriam; Beck, Anne; Heinz, Andreas
Correspondence Address: Garbusow, Maria: Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Campus Charite Mitte, Chariteplatz 1, Berlin, Germany, DE 10117, maria.garbusow@charite.de
Institution: Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany
Language: English
Abstract: Background: In alcohol and other substance dependencies, patients often suffer relapse despite better knowledge and their intention to remain abstinent. A variety of neurotransmitter systems and their respective alterations due to the chronic drug intake are involved in mechanisms that facilitate relapse. It has been postulated that these neurotransmitter systems are related to changes in motivational and learning mechanisms, and engender a shift from goal-directed to habitual behavior in dependent patients that facilitates drug-seeking behavior. Methods: We review learning mechanisms facilitating relapse, as identified and tested to date. We focus on studies examining the interaction between alcohol-related changes in monoaminergic neurotransmission and their respective effects on pavlovian and operant learning mechanisms in alcohol dependence. Results: Animal experiments and first human studies suggest that chronic alcohol intake impairs goal-directed behavior and facilitates habitual drug intake. Key symptoms of alcohol dependence such as tolerance development, withdrawal, craving and reduced control of alcohol intake can be explained by alcohol-induced alteration of dopaminergic neurotransmission and its GABAergic and glutamatergic modulation and their respective effects on pavlovian and operant conditioning as well as pavlovian-to-instrumental transfer. Conclusion: Chronic alcohol intake impairs neurotransmitter systems that regulate prefrontal-striatal circuits and interfere with goal-directed decision-making and the acquisition of new, non-drug-related behavior patterns. Alcohol craving induced by pavlovian conditioned cues can facilitate habitual drug intake. Such learning mechanisms

and their alterations by chronic alcohol intake might be targeted by specific interventions. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: S. Karger AG, Basel; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Neurobiology](#)
[*Relapse \(Disorders\)](#)
[Goal Orientation](#)
[Neurotransmission](#)

Source: PsycINFO

Full Text: Available from *Karger Medical and Scientific Publishers* in [Neuropsychobiology](#); Note: ; Collection notes: Academic-License: Only available from an NHS networked computer

47. From symptoms to neurobiology: Pathological gambling in the light of the new classification in DSM-5.

Citation: Neuropsychobiology, October 2014, vol./is. 70/2(95-102), 0302-282X;1423-0224 (Oct 2014)

Author(s): Romanczuk-Seiferth, Nina; van den Brink, Wim; Goudriaan, Anna E

Correspondence Address: Romanczuk-Seiferth, Nina: Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Charite Campus Mitte, Berlin, Germany, DE 10117, nina.seiferth@charite.de

Institution: Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry, Amsterdam Institute for Addiction Research, Academic Medical Centre, University of Amsterdam, Amsterdam, Netherlands; Department of Psychiatry, Amsterdam Institute for Addiction Research, Academic Medical Centre, University of Amsterdam, Amsterdam, Netherlands

Language: English

Abstract: Pathological gambling (PG), as defined until recently in the DSM-IV, shares many clinical characteristics with substance use disorders (SUDs), such as craving and loss of control. Moreover, an increasing body of literature also revealed neurobiological similarities between PG and substance-related addictions. Further, specific treatments for SUD are also effective in pathological gamblers. These observations resulted in a recent change in the diagnostic classification of PG in DSM-5: maladaptive gambling behavior is now subsumed as 'gambling disorder' (GD) under the category 'substance-related and addictive disorders'. On the basis of similarities in clinical characteristics between GD and SUDs, this article proposes 3 main clusters of diagnostic criteria: 'loss of control', 'craving/withdrawal' and 'neglect of other areas in life'. These symptom clusters can then be related to the experimental paradigms commonly used in the neuroscience of addiction, including neuropsychological, neurophysiological and neuroimaging studies. In this paper, we present the neurobiological evidence for PG by focusing on key functional magnetic resonance imaging studies related to these 3 symptom clusters. It is concluded that these symptom clusters provide a useful framework for systematic comparisons of new evidence in GD and SUDs in the future. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: S. Karger AG, Basel; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Craving](#)
[*Diagnostic and Statistical Manual](#)
[*Neurobiology](#)
[*Pathological Gambling](#)
[Addiction](#)
[Functional Magnetic Resonance Imaging](#)

Source: PsycINFO

Full Text: Available from *Karger Medical and Scientific Publishers* in [Neuropsychobiology](#); Note: ;
Collection notes: Academic-License: Only available from an NHS networked computer

48. Genetics of alcohol dependence: A review of clinical studies.

Citation: Neuropsychobiology, October 2014, vol./is. 70/2(77-94), 0302-282X;1423-0224 (Oct 2014)

Author(s): Samochowiec, Jerzy; Samochowiec, Agnieszka; Puls, Imke; Bienkowski, Przemyslaw; Schott, Bjorn H

Correspondence Address: Schott, Bjorn H.: Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Chariteplatz 1, Berlin, Germany, DE 10117, bjoern.schott@charite.de

Institution: Department of Psychiatry, Pomeranian Medical University, Poland; Institute of Psychology, Department of Clinical Psychology, University of Szczecin, Szczecin, Poland; Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; Institute of Psychiatry and Neurology, Warsaw, Poland; Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany

Language: English

Abstract: Background/Aims: Alcohol dependence is a common severe psychiatric disorder with a multifactorial etiology. Since the completion of the human genome project and with the increased availability of high-throughput genotyping, multiple genetic risk factors for substance-related disorders, including alcohol dependence, have been identified, but not all results could be replicated. Methods: We systematically review the clinical literature on genetic risk factors for alcohol dependence and alcohol-related phenotypes, including candidate gene-based studies, linkage studies and genome-wide association studies (GWAS). Results: Irrespectively of the methodology employed, the most robust findings regarding genetic risk factors for alcohol dependence concern genetic variations that affect alcohol metabolism. GWAS confirm the importance of the alcohol dehydrogenase gene cluster on chromosome 4 in the genetic risk for alcohol dependence with multiple variants that exert a small, but cumulative influence. A single variant with strong influence on individual risk is the aldehyde dehydrogenase 2 ALDH2*2 variant common in Asian populations. Other robust associations have been found with previously uncharacterized genes like KIAA0040, and such observations can lead to the identification of thus far unknown signaling pathways. Converging evidence also points to a role of glutamatergic, dopaminergic and serotonergic neurotransmitter signaling in the risk for alcohol dependence, but effects are small, and gene-environment interactions further increase the complexity. Conclusion: With few exceptions like ALDH2*2, the contribution of individual genetic variants to the risk for alcohol-related disorders is small. However, the concentration of risk variants within neurotransmitter signaling pathways may help to deepen our understanding of the underlying pathophysiology and thereby contribute to develop novel therapeutic strategies. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: S. Karger AG, Basel; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Pathophysiology](#)
[*Risk Factors](#)
[Genetics](#)
[Phenotypes](#)

Source: PsycINFO

Full Text: Available from *Karger Medical and Scientific Publishers* in [Neuropsychobiology](#); Note: ;
Collection notes: Academic-License: Only available from an NHS networked computer

49. How do we 'learn' addiction? Risk factors and mechanisms getting addicted to alcohol.

- Citation:** Neuropsychobiology, October 2014, vol./is. 70/2(67-76), 0302-282X;1423-0224 (Oct 2014)
- Author(s):** Hagele, Claudia; Friedel, Eva; Kienast, Torsten; Kiefer, Falk
- Correspondence Address:** Hagele, Claudia: Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Campus Charite Mitte, Chariteplatz 1, Berlin, Germany, DE 10117, claudia.hagele@charite.de
- Institution:** Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; Department of Addictive Behavior and Addiction Medicine, Central Institute of Mental Health, Medical Faculty Mannheim, University of Heidelberg, Mannheim, Germany
- Language:** English
- Abstract:** Background: Alcohol dependence is one of the leading contributors to the burden of disease in the world. A range of genetic and environmental risk factors has been identified to date, and preclinical and clinical studies including imaging studies have identified neuronal networks involved in the development of alcohol dependence. Methods: We review genetic and environmental risk factors for the development of alcohol addiction as well as structural and neuronal changes, including their transmitter systems, due to regular alcohol intake. Results: Stress as well as family background and, in juveniles, the peer group could be identified as environmental risk factors for alcohol dependence. Heritability is estimated at around 50%, and it seems to be comparable in women and men. There is ongoing research on a broad range of putative endophenotypes such as tolerance of the effects of alcohol intake or personal traits like 'impulsivity'. On the neurobiological level, chronic alcohol intake seems to render mesolimbic circuits hypersensitive to alcohol and alter the motivational reward system including dopaminergic neurotransmission. Conclusion: Environmental and genetic risk factors, and especially their interaction, facilitate the development of alcohol dependence. Ongoing alcohol intake results in profound alterations of neuronal systems crucial for motivation, learning, memory and cognition control. Future studies should further combine the knowledge of neurobiological mechanisms and risk factors to develop new prevention strategies. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: S. Karger AG, Basel; YEAR: 2014
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Alcoholism](#)
[*Genetics](#)
[*Risk Factors](#)
[Environmental Effects](#)
[Learning Strategies](#)
- Source:** PsycINFO
- Full Text:** Available from *Karger Medical and Scientific Publishers* in [Neuropsychobiology](#); Note: ; Collection notes: Academic-License: Only available from an NHS networked computer

50. Editorial.

- Citation:** Neuropsychobiology, October 2014, vol./is. 70/2(65-66), 0302-282X;1423-0224 (Oct 2014)
- Author(s):** Hagele, Claudia; Strik, Werner; Heinz, Andreas
- Correspondence Address:** Heinz, Andreas: Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Campus Charite Mitte, Chariteplatz 1, Berlin, Germany, DE-10117, andreas.heinz@charite.de

Institution: Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany; University Hospital of Psychiatry, Bern, Switzerland; Department of Psychiatry and Psychotherapy, Charite Universitätsmedizin Berlin, Berlin, Germany

Language: English

Abstract: This editorial presents the summary of the articles which were featured in this issue of *Neuropsychobiology*. The articles present current developments in addiction research that can help to bridge the gap between genetic findings and neurobiological alterations on the one hand and key clinical symptoms of alcohol dependence such as craving, reduced control or compulsive drug intake on the other. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Country of Publication: HOLDER: S. Karger AG, Basel; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Craving](#)
[*Drug Addiction](#)
[Experimentation](#)
[Genetics](#)
[Neuropsychology](#)

Source: PsycINFO

Full Text: Available from *Karger Medical and Scientific Publishers* in [Neuropsychobiology](#); Note: ; Collection notes: Academic-License: Only available from an NHS networked computer

51. Erratum to: "Predictors of disapproval toward "hard drug" use among high school seniors in the US".

Citation: Prevention Science, October 2014, vol./is. 15/5(736-737), 1389-4986;1573-6695 (Oct 2014)

Author(s): Palamar, Joseph J

Correspondence Address: Palamar, Joseph J.: Department of Population Health, New York University Langone, Medical Center, One Park Avenue, 7th Floor, New York, NY, US, 10016, joseph.palamar@nyu.edu

Institution: Department of Population Health, New York University Langone, New York, NY, US

Language: English

Abstract: Reports an error in "Predictors of disapproval toward "hard drug" use among high school seniors in the US" by Joseph J. Palamar (Prevention Science, 2014[Oct], Vol 15[5], 725-735). The original version of this article unfortunately contained a systematic error in the reporting of unadjusted odds ratios (ORs) for some variables reported in Tables 3-5. The corrected Tables 3-5 is present in the erratum. (The following abstract of the original article appeared in record 2013-35813-001). Attitudes toward drug use strongly determine whether an individual initiates use. Personal disapproval toward the use of a particular drug is strongly protective against use; however, little is known regarding how the use of one drug affects attitudes toward the use of other drugs. Since marijuana use is on the rise in the US and disapproval toward use is decreasing, research is needed to determine whether the use of marijuana or other licit or illicit drugs reduces disapproval toward the use of "harder," more potentially dangerous drugs. The Monitoring the Future study assesses a national representative sample of high school seniors in the US each year. This study investigated predictors of disapproval toward the use of powder cocaine, crack, lysergic acid diethylamide (LSD), heroin, amphetamine, and ecstasy ("Molly") in a weighted sample of 29,054 students from five cohorts (2007-2011). Results suggest that lifetime use of cigarettes and use of more than one hard drug consistently lowered odds of disapproval. In multivariable models, lifetime alcohol use did not affect odds of disapproval and lifetime marijuana use (without the use of any "harder" drugs) lowered odds of disapproval of LSD, amphetamine, and ecstasy, but not cocaine, crack, or heroin. In conclusion, marijuana use within itself is not a consistent risk factor for lower disapproval toward the use of harder drugs. Cigarette and hard drug use, however, are more consistent risk factors. As marijuana prevalence increases and policy becomes more

lenient toward recreational and medicinal use, public health and policy experts need to ensure that attitudinal-related risk does not increase for the use of other drugs. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Addiction](#)
[*High School Students](#)
[*Marijuana Usage](#)
[Drug Usage Attitudes](#)
[High Schools](#)
[Risk Factors](#)
[Social Norms](#)

Source: PsycINFO

52. Correlates of sexual abuse in a sample of adolescent girls admitted to psychiatric inpatient care.

Citation: Journal of Child Sexual Abuse: Research, Treatment, & Program Innovations for Victims, Survivors, & Offenders, October 2014, vol./is. 23/7(804-823), 1053-8712;1547-0679 (Oct 2014)

Author(s): Kanamuller, Juha; Riala, Kaisa; Nivala, Maija; Hakko, Helina; Rasanen, Pirkko

Correspondence Address: Riala, Kaisa: Department of Adolescent Psychiatry, Helsinki University Central Hospital, Helsinki, Finland, 00029, kaisa.riala@hus.fi

Institution: Department of Psychiatry, Oulu University Hospital, Oulu, Finland; Helsinki University Central Hospital, Helsinki, Finland; Department of Psychiatry, University of Oulu, Oulu, Finland; Research and Development Unit, Department of Psychiatry, Oulu University Hospital, Oulu, Finland; University of Oulu, Oulu, Finland

Language: English

Abstract: We examined correlations of child sexual abuse among 300 adolescent girls in psychiatric inpatient treatment. Diagnostic and Statistical Manual of Mental Disorders (4th ed.)-based psychiatric diagnoses were obtained from the Schedule for Affective Disorder and Schizophrenia for School-Age Children-Present and Lifetime and from data on family and behavioral characteristics from the European Addiction Severity Index (EuropASI). A total of 79 girls (26.3%) had experienced child sexual abuse during their lifetime. Child sexual abuse was associated with an adolescent's home environment, sibling status, smoking, posttraumatic stress disorder diagnosis, self-mutilating behavior, and suicidal behavior. At least 62% of the perpetrators were acquaintances of the victims. Correlates of child sexual abuse can be used to identify child sexual abuse victims and persons at heightened risk for child sexual abuse. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Child Abuse](#)
[*Health Care Services](#)
[*Hospital Admission](#)
[*Mental Disorders](#)
[*Sexual Abuse](#)
[Adolescent Attitudes](#)
[Clinics](#)
[Human Females](#)
[Mental Health](#)
[Self Destructive Behavior](#)

Source: PsycINFO

53. The Montreal Cognitive Assessment (MoCA) is superior to the Mini Mental State Examination (MMSE) in detection of Korsakoff's syndrome.

its devastation. Trauma has emerged as one of the great public health challenges of our time, not only because of its well-documented effects on combat veterans and on victims of accidents and crimes, but because of the hidden toll of sexual and family violence and of communities and schools devastated by abuse, neglect, and addiction. Drawing on more than thirty years at the forefront of research and clinical practice, Bessel van der Kolk shows that the terror and isolation at the core of trauma literally reshape both brain and body. New insights into our survival instincts explain why traumatized people experience incomprehensible anxiety and numbing and intolerable rage, and how trauma affects their capacity to concentrate, to remember, to form trusting relationships, and even to feel at home in their own bodies. Having lost the sense of control of themselves and frustrated by failed therapies, they often fear that they are damaged beyond repair. *The Body Keeps the Score* is the inspiring story of how a group of therapists and scientists-together with their courageous and memorable patients-has struggled to integrate recent advances in brain science, attachment research, and body awareness into treatments that can free trauma survivors from the tyranny of the past. These new paths to recovery activate the brain's natural neuroplasticity to rewire disturbed functioning and rebuild step by step the ability to "know what you know and feel what you feel." They also offer experiences that directly counteract the helplessness and invisibility associated with trauma, enabling both adults and children to reclaim ownership of their bodies and their lives. Readers will come away from this book with awe at human resilience and at the power of our relationships-whether in the intimacy of home or in our wider communities-to both hurt and heal. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Authored Book

Subject Headings: [*Attachment Behavior](#)
[*Brain](#)
[*Neurosciences](#)
[*Posttraumatic Stress Disorder](#)
[*Trauma](#)
[Body Awareness](#)
[Eye Movement Desensitization Therapy](#)
[Military Veterans](#)
[Mind](#)
[Neural Plasticity](#)
[Self Regulation](#)
[Survivors](#)
[Yoga](#)
[Neurotherapy](#)
[Exposure to Violence](#)

Source: PsycINFO

55. Representation of the disease, the motivational sphere and medical communication as an objective for HIV prevention and the treatment of HIV infection in substance users.

Citation: Psychology in Russia: State of the Art, 2014, vol./is. 7/2(84-92), 2074-6857 (2014)

Author(s): Buzina, Tatiana S

Correspondence Address: Buzina, Tatiana S., tbuzina@gmail.com

Institution: Moscow State University of Medicine and Dentistry, Moscow, Russia

Language: English

Abstract: The psychological aspect of treating HIV-infected substance users entails changing their behaviour, as their behaviour is what leads to the risk of them transmitting and spreading HIV. Psychological treatment must facilitate their adaptation so that they may be otherwise treated for substance abuse and HIV. We propose establishing the psychological objective of helping patients overcome substance addiction by addressing their internal representation of the disease (IRD), value-sense and motivational sphere, as well as their relationships with their physician, as this is the main person who interacts with the patient in the clinic. An IRD study of patients with an opioid dependency, complicated with

infectious diseases, showed that the IPD emotional level of opioid patients, as interconditional for other levels, can be an indicator of the status and impact of the main objective. A comparative study of substance users who received psychotherapy with those not receiving psychotherapy showed that the value-sense and motivational sphere is also an important target for preventive action. A study of the physician's image of drug treatment clinics' patients revealed that increases in the communicative competence of drug treatment facilities' personnel represents a third course of preventing the transmission of HIV among substance dependent patients. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Lomonosov Moscow State University-Russian Psychological Society; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*AIDS Prevention](#)
[*Drug Abuse](#)
[*HIV](#)
[*Motivation](#)
[*Professional Consultation](#)
[Drug Therapy](#)
[Physicians](#)
[Psychotherapy](#)
[Values](#)

Source: PsycINFO

56. Psychological factors of propensity for alcoholism (social anxiety, hostility, Machiavellianism) in depressive patients.

Citation: Psychology in Russia: State of the Art, 2014, vol./is. 7/2(73-83), 2074-6857 (2014)

Author(s): Pugovkina, Olga D; Popinako, Anastasia V

Correspondence Address: Pugovkina, Olga D., olgapugovkina@yandex.ru

Institution: Moscow Research Institute of Psychiatry, Moscow, Russia; Politechnical college N 39, Moscow, Russia

Language: English

Abstract: Based on the analysis of psychosocial models of alcoholism and depression the general and specific factors of occurrence and course of illness are identified in the present study. The authors put forward hypotheses regarding the mechanisms of activation of psychological addiction to alcohol as an ineffective coping strategy. The necessity of empirical research needed to refine the techniques and targets of patient care within the psychiatric and psychological care is justified. The results of the pilot study show that depressed patients who are subject to alcohol dependence feature marked distress in interpersonal relations, coupled with hostility and aim at gaining profit and pleasure by manipulating other people. These patients are hostile to others, while in interpersonal relationships personal safety is important to them, so they may be more likely to resort to manipulation. In their attitudes with respect to health the communication of these patients is characterized by hedonistic tendencies and histrionic traits in interpersonal contacts. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Lomonosov Moscow State University-Russian Psychological Society; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Hostility](#)
[*Machiavellianism](#)
[*Recurrent Depression](#)
[*Social Anxiety](#)
[Disease Course](#)
[Patients](#)

Source: PsycINFO

57. Identifying problematic Internet users: Development and validation of the Internet Motive Questionnaire for Adolescents (IMQ-A).

Citation: Journal of Medical Internet Research, October 2014, vol./is. Vo 16/10(110-121), 1438-8871 (Oct 2014)

Author(s): Bischof-Kastner, Christina; Kuntsche, Emmanuel; Wolstein, Jorg

Correspondence Address: Wolstein, Jorg: Institute of Psychology, Faculty of Humanities, University of Bamberg, Markusstrasse 8a, Bamberg, Germany, 96047, joerg.wolstein@uni-bamberg.de

Institution: Institute of Psychology, Faculty of Humanities, University of Bamberg, Bamberg, Germany; Addiction Switzerland, Lausanne, Switzerland; Institute of Psychology, Faculty of Humanities, University of Bamberg, Bamberg, Germany

Language: English

Abstract: Background: Internationally, up to 15.1% of intensive Internet use among adolescents is dysfunctional. To provide a basis for early intervention and preventive measures, understanding the motives behind intensive Internet use is important. Objective: This study aims to develop a questionnaire, the Internet Motive Questionnaire for Adolescents (IMQ-A), as a theory-based measurement for identifying the underlying motives for high-risk Internet use. More precisely, the aim was to confirm the 4-factor structure (ie, social, enhancement, coping, and conformity motives) as well as its construct and concurrent validity. Another aim was to identify the motivational differences between high-risk and low-risk Internet users. Methods: A sample of 101 German adolescents (female: 52.5%, 53/101; age: mean 15.9, SD 1.3 years) was recruited. High-risk users (n = 47) and low-risk users (n = 54) were identified based on a screening measure for online addiction behavior in children and adolescents (Online-Suchtverhalten-Skala, OSVK-S). Here, "high-risk" Internet use means use that exceeds the level of intensive Internet use (OSVK-S sum score >7). Results: The confirmatory factor analysis confirmed the IMQ-A's 4-factor structure. A reliability analysis revealed good internal consistencies of the subscales (.71 up to .86). Moreover, regression analyses confirmed that the enhancement and coping motive groups significantly predicted high-risk Internet consumption and the OSVK-S sum score. A mixed-model ANOVA confirmed that adolescents mainly access the Internet for social motives, followed by enhancement and coping motives, and that high-risk users access the Internet more frequently for coping and enhancement motives than low-risk users. Low-risk users were primarily motivated socially. Conclusions: The IMQ-A enables the assessment of motives related to adolescent Internet use and thus the identification of populations at risk. The questionnaire enables the development of preventive measures or early intervention programs, especially dealing with internal motives of Internet consumption. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: Originally published in the Journal of Medical Internet Research (<http://www.jmir.org>), 09.10.2014. This is an open-access article distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/2.0/>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work, first published in the Journal of Medical Internet Research, is properly cited. The complete bibliographic information, a link to the original publication on <http://www.jmir.org/>, as well as this copyright and license information must be included.; HOLDER: Christina Bischof-Kastner, Emmanuel Kuntsche, Jorg Wolstein

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Motivation
*Psychometrics
*Test Construction
*Test Validity
*Internet Usage
Addiction
Adolescent Development

[Factor Analysis](#)
[Measurement](#)
[Questionnaires](#)

Source: PsycINFO

Full Text: Available from *National Library of Medicine* in *Journal of Medical Internet Research*

58. The administration of atomoxetine during alcohol deprivation induces a time-limited increase in alcohol consumption after relapse.

Citation: International Journal of Neuropsychopharmacology, November 2014, vol./is. 17/11(1905-1910), 1461-1457;1469-5111 (Nov 2014)

Author(s): Alen, Francisco; Serrano, Antonia; Gorriti, Miguel Angel; Pavon, Francisco Javier; Orio, Laura; de Heras, Raquel Gomez; Ramirez-Lopez, Maria Teresa; Anton, Maria; Pozo, Miguel Angel; de Fonseca, Fernando Rodriguez

Correspondence Address: Alen, Francisco: Laboratorio de Medicina Regenerativa, Instituto IBIMA, Hospital Regional Universitario de Malaga, Av. Carlos Haya 82, Sotano, Malaga, Spain, 29010, p_alen@yahoo.es

Institution: Departamento de Psicobiologia, Facultad de Psicologia, Universidad Complutense de Madrid, Madrid, Spain; Instituto IBIMA, Unidad de Gestion Clinica de Salud Mental, Hospital Regional Universitario de Malaga, Universidad de Malaga, Malaga, Spain; Departamento de Psicobiologia, Facultad de Psicologia, Universidad Complutense de Madrid, Madrid, Spain; Instituto IBIMA, Unidad de Gestion Clinica de Salud Mental, Hospital Regional Universitario de Malaga, Universidad de Malaga, Malaga, Spain; Instituto IBIMA, Unidad de Gestion Clinica de Salud Mental, Hospital Regional Universitario de Malaga, Universidad de Malaga, Malaga, Spain; Departamento de Psicobiologia, Facultad de Psicologia, Universidad Complutense de Madrid, Madrid, Spain; Departamento de Psicobiologia, Facultad de Psicologia, Universidad Complutense de Madrid, Madrid, Spain; Instituto IBIMA, Unidad de Gestion Clinica de Salud Mental, Hospital Regional Universitario de Malaga, Universidad de Malaga, Malaga, Spain; Instituto Pluridisciplinar, Universidad Complutense de Madrid, Malaga, Spain; Departamento de Psicobiologia, Facultad de Psicologia, Universidad Complutense de Madrid, Madrid, Spain

Language: English

Abstract: The administration of selective serotonin reuptake inhibitors (SSRIs) typically used as antidepressants increases alcohol consumption after an alcohol deprivation period in rats. However, the appearance of this effect after the treatment with selective noradrenaline reuptake inhibitors (SNRIs) has not been studied. In the present work we examined the effects of a 15-d treatment with the SNRI atomoxetine (1, 3 and 10 mg/kg, i.p.) in male rats trained to drink alcohol solutions in a 4-bottle choice test. The treatment with atomoxetine (10 mg/kg, i.p.) during an alcohol deprivation period increased alcohol consumption after relapse. This effect only lasted one week, disappearing thereafter. Treatment with atomoxetine did not cause a behavioral sensitized response to a challenge dose of amphetamine (1.5 mg/kg, i.p.), indicating the absence of a supersensitive dopaminergic transmission. This effect is markedly different from that of SSRI antidepressants that produced both long-lasting increases in alcohol consumption and behavioral sensitization. Clinical implications are discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: CINP; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Animal Drinking Behavior](#)
[*Relapse \(Disorders\)](#)
[*Atomoxetine](#)
[Rats](#)

Source: PsycINFO

59. The mammalian target of rapamycin pathway in the basolateral amygdala is critical for nicotine-induced behavioural sensitization.

- Citation:** International Journal of Neuropsychopharmacology, November 2014, vol./is. 17/11(1881-1894), 1461-1457;1469-5111 (Nov 2014)
- Author(s):** Gao, Yang; Peng, Shuxian; Wen, Quan; Zheng, Chunming; Lin, Jue; Tan, Yalun; Ma, Yan; Luo, Yixiao; Xue, Yanxue; Wu, Ping; Ding, Zengbo; Lu, Lin; Li, Yanqin
- Correspondence Address:** Li, Yanqin: Key Laboratory of Combinatorial Biosynthesis and Drug Discovery, Ministry of Education, Wuhan University, School of Pharmaceutical Sciences, 185, Dong Hu Road, Wuhan, China, 430071, yqli@whu.edu.cn
- Institution:** Key Laboratory of Combinatorial Biosynthesis and Drug Discovery, Ministry of Education, Wuhan University, School of Pharmaceutical Sciences, Wuhan, China; Key Laboratory of Combinatorial Biosynthesis and Drug Discovery, Ministry of Education, Wuhan University, School of Pharmaceutical Sciences, Wuhan, China; Key Laboratory of Combinatorial Biosynthesis and Drug Discovery, Ministry of Education, Wuhan University, School of Pharmaceutical Sciences, Wuhan, China; Key Laboratory of Combinatorial Biosynthesis and Drug Discovery, Ministry of Education, Wuhan University, School of Pharmaceutical Sciences, Wuhan, China; Key Laboratory of Combinatorial Biosynthesis and Drug Discovery, Ministry of Education, Wuhan University, School of Pharmaceutical Sciences, Wuhan, China; Key Laboratory of Combinatorial Biosynthesis and Drug Discovery, Ministry of Education, Wuhan University, School of Pharmaceutical Sciences, Wuhan, China; Key Laboratory of Combinatorial Biosynthesis and Drug Discovery, Ministry of Education, Wuhan University, School of Pharmaceutical Sciences, Wuhan, China; Key Laboratory of Combinatorial Biosynthesis and Drug Discovery, Ministry of Education, Wuhan University, School of Pharmaceutical Sciences, Wuhan, China; National Institute on Drug Dependence, Peking University, Beijing, China; National Institute on Drug Dependence, Peking University, Beijing, China; National Institute on Drug Dependence, Peking University, Beijing, China; National Institute on Drug Dependence, Peking University, Beijing, China; National Institute on Drug Dependence, Peking University, Beijing, China; Key Laboratory of Combinatorial Biosynthesis and Drug Discovery, Ministry of Education, Wuhan University, School of Pharmaceutical Sciences, Wuhan, China
- Language:** English
- Abstract:** Repeated exposure to nicotine increases psychomotor activity. Long-lasting neural plasticity changes that contribute to the nicotine-induced development of locomotor sensitization have been identified. The mammalian target of rapamycin complex 1 (mTORC1) signalling pathway is involved in regulating the neuroplasticity of the central nervous system. In this study, we examined the role of mTORC1 in the amygdala in nicotine-induced locomotor sensitization. Rapamycin, an inhibitor of mTORC1, was infused into the basolateral amygdala (BLA) and central amygdala (CeA) or systemically administered to investigate the role of the mTORC1 in the development and expression of nicotine-induced locomotor sensitization. We found that locomotor activity progressively increased during the initiation of nicotine-induced locomotor sensitization and the expression of nicotine sensitization was induced by nicotine challenge injection (0.35 mg/kg s.c.) after five days of withdrawal. The initiation of nicotine-induced locomotor sensitization was accompanied by the increased phosphorylated level of mTORC1 downstream target proteins including p-p70s6k and p-4EBP in the BLA, but not CeA. Intra-BLA infusion or systemic administration of rapamycin blocked locomotor activity. Increased p-p70s6k and p-4EBP were also observed in the expression of nicotine sensitization, which was demonstrated to be inhibited by systemic rapamycin administration. Our findings indicated that mTORC1 activity in the BLA, but not the CeA, mediated the initiation and expression of nicotine-induced locomotor sensitization, and may become a potential target for the treatment of nicotine addiction. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: CINP; YEAR: 2014
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Amygdala](#)
[*Drugs](#)

*Neural Pathways
 *Nicotine
 *Sensitization
 Animal Locomotion
 Rats

Source: PsycINFO

60. A randomized controlled trial of targeted prefrontal cortex modulation with tDCS in patients with alcohol dependence.

Citation: International Journal of Neuropsychopharmacology, November 2014, vol./is. 17/11(1793-1803), 1461-1457;1469-5111 (Nov 2014)

Author(s): Klauss, Jaisa; Pinheiro, Leon Cleres Penido; Merlo, Bruna Lima Silva; Santos, Gerson de Almeida Correia; Fregni, Felipe; Nitsche, Michael A; Nakamura-Palacios, Ester Miyuki

Correspondence Address: Nakamura-Palacios, Ester Miyuki: Programa de Pos-Graduacao em Ciencias Fisiologicas, Centro de Ciencias da Saude, Universidade Federal do Espirito Santo, Av. Marechal Campos, 1468, ES, Vitoria, Brazil, 29.047-105, emnpalacios@gmail.com

Institution: Laboratory of Cognitive Sciences and Neuropsychopharmacology, Program of Postgraduation in Physiological Sciences, Federal University of Espirito Santo, Vitoria, Brazil; Laboratory of Cognitive Sciences and Neuropsychopharmacology, Program of Postgraduation in Physiological Sciences, Federal University of Espirito Santo, Vitoria, Brazil; Laboratory of Cognitive Sciences and Neuropsychopharmacology, Program of Postgraduation in Physiological Sciences, Federal University of Espirito Santo, Vitoria, Brazil; Laboratory of Cognitive Sciences and Neuropsychopharmacology, Program of Postgraduation in Physiological Sciences, Federal University of Espirito Santo, Vitoria, Brazil; Laboratory of Neuromodulation, Department of Physical Medicine & Rehabilitation, Spaulding Rehabilitation Hospital, Harvard Medical School, Boston, MA, US; Laboratory of Neuroplasticity, Department of Clinical Neurophysiology, University Medical Centre, Georg-August-University, Gottingen, Germany; Laboratory of Cognitive Sciences and Neuropsychopharmacology, Program of Postgraduation in Physiological Sciences, Federal University of Espirito Santo, Vitoria, Brazil

Language: English

Abstract: Preliminary small studies have shown that transcranial direct current stimulation (tDCS) reduces craving in alcoholic subjects. It is unclear whether tDCS also leads to changes in clinically meaningful outcomes for alcohol dependence in a properly powered phase II randomized clinical trial. We aimed to investigate whether repetitive tDCS changes the risk of alcohol use relapse in severe alcoholics from outpatient services. Thirty-five subjects were randomized to receive active bilateral [left cathodal/right anodal over the dorsolateral prefrontal cortex (dlPFC)] repetitive (five consecutive days) tDCS (2 mA, 35 cm², two times daily stimulation for 13 min with a 20-min interval) or sham-tDCS. There were two dropouts before treatment. From 33 alcoholic subjects, 17 (mean age 45.5 + 8.9 S.D., 16 males) were randomized to sham and 16 (44 + 7.8 S.D., 16 males) to real tDCS treatment. By the end of the six months of follow-up, two subjects treated with sham (11.8%) and eight treated with real tDCS (50%) were still alcohol-abstinent [$p = 0.02$, Long-rank (Mantel-Cox) Test, HR = 0.35 (95% CI, 0.14-0.85)]. No differences with regard to changes on scores of craving, frontal function, global mental status, depressive or anxiety symptoms were observed between groups. However, subjects from the tDCS group improved with regard to their overall perception of quality of life ($p = 0.02$), and increased their scores in the environment domain ($p = 0.04$) after treatment. Bilateral tDCS over dlPFC reduces relapse probability in severe alcoholic subjects and results in improved perception of quality of life. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: CINP; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Alcoholism
 *Electrical Brain Stimulation
 *Prefrontal Cortex

*Quality of Life
*Relapse (Disorders)

Source: PsycINFO

61. Effects of the 5-HT_{2C} receptor agonist CP809101 in the amygdala on reinstatement of cocaine-seeking behavior and anxiety-like behavior.

Citation: International Journal of Neuropsychopharmacology, November 2014, vol./is. 17/11(1751-1762), 1461-1457;1469-5111 (Nov 2014)

Author(s): Pockros-Burgess, Lara A; Pentkowski, Nathan S; Der-Ghazarian, Taleen; Neisewander, Janet L

Correspondence Address: Neisewander, Janet L.: School of Life Sciences, Arizona State University, 427 East Tyler Mall, Tempe, AZ, US, 85287, Janet.Neisewander@asu.edu

Institution: Department of Psychology, Arizona State University, Tempe, AZ, US; Department of Psychology, Arizona State University, Tempe, AZ, US; School of Life Sciences, Arizona State University, Tempe, AZ, US; Department of Psychology, Arizona State University, Tempe, AZ, US

Language: English

Abstract: Serotonin 2C receptor (5-HT_{2CR}) agonists attenuate reinstatement of cocaine-seeking behavior. These receptors are found throughout the limbic system, including the basolateral amygdala (BLA), which is involved in forming associations between emotional stimuli and environmental cues, and the central amygdala (CeA), which is implicated in the expression of conditioned responding to emotional stimuli. This study investigated whether 5-HT_{2CR}s in the amygdala are involved in cue and cocaine-primed reinstatement of cocaine-seeking behavior. Rats were trained to self-administer cocaine (0.75 mg/kg, i.v.) which that was paired with light and tone cues, and then subsequently they underwent daily extinction training. Rats then received bilateral microinfusions of the 5-HT_{2CR} agonist CP809101 (0.01-1.0 g/0.2 l/side) into either the BLA or CeA prior to tests for cue or cocaine-primed (10 mg/kg, i.p.) reinstatement. Rats were also tested for CP809101 effects on anxiety-like behavior on the elevated plus-maze (EPM). Surprisingly, intra-BLA CP809101 had no effect on cue reinstatement, though it did increase anxiety-like behavior on the EPM. Intra-CeA infusions of CP809101 attenuated cocaine-primed reinstatement, an effect that was prevented with concurrent administration of the 5-HT_{2CR} antagonist SB242084 (0.1 g/0.2 l/side). CP809101 had no effect on cue reinstatement or anxiety-like behavior on the EPM. These findings suggest that 5-HT_{2CR}s in the BLA modulate anxiety, whereas those in the CeA modulate incentive motivational effects induced by cocaine priming injections. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: CINP; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Amygdala
*Anxiety
*Cocaine
*Serotonin Agonists
*Drug Seeking
Drug Addiction
Motivation
Rats
Reinstatement

Source: PsycINFO

62. Concurrent treatment of PTSD and substance use disorders using prolonged exposure (COPE): Patient workbook.

Citation: Concurrent treatment of PTSD and substance use disorders using prolonged exposure (COPE): Patient workbook., 2015 (2015)

Author(s): Back, Sudie E; Foa, Edna B; Killeen, Therese K; Mills, Katherine L; Teesson, Maree; Cotton, Bonnie Dansky; Carroll, Kathleen M; Brady, Kathleen T

Institution: Department of Psychiatry and Behavioral Sciences, Medical University of South Carolina, Charleston, SC, US; University of Pennsylvania, Philadelphia, PA, US; Department of Psychiatry and Behavioral Sciences, Medical University of South Carolina, Charleston, SC, US; National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW, Australia; National Drug and Alcohol Research Centre, University of New South Wales, Sydney, NSW, Australia; Microsoft Corporation, Redmond, WA, US; Yale University School of Medicine, New Haven, CT, US; Medical University of South Carolina, Charleston, SC, US

Language: English

Abstract: (from the cover) Concurrent Treatment of PTSD and Substance Use Disorders Using Prolonged Exposure (COPE) is a cognitive-behavioral psychotherapy program designed for patients who have posttraumatic stress disorder (PTSD) and a co-occurring alcohol or drug use disorder. COPE represents an integration of two evidence-based treatments: Prolonged Exposure (PE) therapy for PTSD and Relapse Prevention for substance use disorders. COPE is an integrated treatment, meaning that both the PTSD and substance use disorder are addressed concurrently in therapy by the same clinician, and patients can experience substantial reductions in both PTSD symptoms and substance use severity. Patients use the COPE Patient Workbook while their clinician uses the Therapist Guide to deliver treatment. The program is comprised of 12 individual, 60 to 90 minute therapy sessions. The program includes several components: information about how PTSD symptoms and substance use interact with one another; information about the most common reactions to trauma; techniques to help the patient manage cravings and thoughts about using alcohol or drugs; coping skills to help the patient prevent relapse to substances; a breathing retraining relaxation exercise; and in vivo (real life) and imaginal exposures to target the patient's PTSD symptoms. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Authored Book

Subject Headings: [*Cognitive Behavior Therapy](#)
[*Drug Abuse](#)
[*Interdisciplinary Treatment Approach](#)
[*Mental Health Programs](#)
[*Posttraumatic Stress Disorder](#)
[Exposure Therapy](#)
[Relapse Prevention](#)

Source: PsycINFO

63. Offending, drug abuse and life chances-A longitudinal study of a Stockholm birth cohort.

Citation: Journal of Scandinavian Studies in Criminology and Crime Prevention, July 2014, vol./is. 15/2(128-142), 1404-3858;1651-2340 (Jul 2014)

Author(s): Nilsson, Anders; Estrada, Felipe; Backman, Olof

Correspondence Address: Nilsson, Anders, anders.nilsson@criminology.su.se

Institution: Department of Criminology, Stockholm University, Stockholm, Sweden; Department of Criminology, Stockholm University, Stockholm, Sweden; Swedish Institute for Social Research, Stockholm University, Stockholm, Sweden

Language: English

Abstract: There are many factors, both empirical and theoretical, which indicate that drug abuse can play an important role in explaining the links between criminality and life chances when viewed from a life-course perspective. In this article, we examine the links between crime and drug abuse and social inclusion and exclusion in adult life, and look at whether there are gender-specific patterns in these regards. The Stockholm Birth Cohort database allows us to follow a birth cohort born in 1953 to age 56. The results show that drug abuse is central both to processes of continuity in and desistance from crime and to life chances in

adulthood. For the adult outcomes that relate to work and health, we also note a tendency towards polarization; the size of both the relative and the absolute differences between the comparison group and offenders with registered drug abuse increases over time. The same general pattern can be seen for males and females. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Criminal Behavior](#)
[*Drug Abuse](#)
[*Life Span](#)
[*Social Isolation](#)
[Cohort Analysis](#)
Source: PsycINFO

64. Beyond criminal law: The multiple constitution of addiction in Australian legislation.

Citation: Addiction Research & Theory, October 2014, vol./is. 22/5(438-450), 1606-6359;1476-7392 (Oct 2014)

Author(s): Seear, Kate; Fraser, Suzanne

Correspondence Address: Seear, Kate: National Drug Research Institute, Faculty of Health Sciences, Curtin University, Suite 6, 19-35 Gertrude Street, Fitzroy, VIC, Australia, 3065, kate.seear@curtin.edu.au

Institution: National Drug Research Institute, Faculty of Health Sciences, Curtin University, Fitzroy, VIC, Australia; National Drug Research Institute, Faculty of Health Sciences, Curtin University, Fitzroy, VIC, Australia

Language: English

Abstract: The role of the criminal law in the regulation of drugs and addiction is both well known and the subject of considerable academic debate. Judges are frequently enjoined to make decisions about different kinds of addictions, and the relationships between substance use, addiction, agency, subjectivity, responsibility, treatment and punishment. The criminal law is not the only legal realm in which such questions are being explored, however. Addiction figures in non-criminal contexts in various ways, including via statute, regulations, common law and the law of equity. The significance of how addiction is understood and managed in these non-criminal contexts is sometimes overlooked in academic research. Drawing upon research being undertaken in Australia, this article seeks to highlight the wide range of non-criminal contexts within which questions about "addiction" are regularly being asked. Using examples from Australian legislation, we draw attention to several fundamental tensions and inconsistencies in legislative approaches regarding addiction and ask how tensions and inconsistencies between legal realms may impact on the health, wellbeing and opportunities of affected individuals. In so doing, we seek to make a case for the importance of academic research beyond the criminal law, including comparative work across different legal realms where laws, standards of proof and rules of evidence may differ. We consider the assumptions that underpin (and emerge from) this legislation, raising questions about the role of the law in the production and management of addiction as "multiple", and the possible "effects" of the constitution of addictions beyond the criminal law. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa UK Ltd.; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Addiction](#)
[*Criminal Law](#)
[Alcohols](#)
[Debates](#)
[Drug Abuse](#)
[Laws](#)

Source: PsycINFO
Full Text: Available from *Informa Healthcare* in [Addiction Research and Theory](#)

65. Exercise addiction in team sport and individual sport: Prevalences and validation of the exercise addiction inventory.

Citation: *Addiction Research & Theory*, October 2014, vol./is. 22/5(431-437), 1606-6359;1476-7392 (Oct 2014)

Author(s): Lichtenstein, Mia Beck; Larsen, Klaus Sig; Christiansen, Erik; Stoving, Rene Klinkby; Bredahl, Thomas Viskum Gjelstrup

Correspondence Address: Lichtenstein, Mia Beck: Department of Clinical Institute, University of Southern Denmark, Sdr. Boulevard 29, Odense, Denmark, 5000, mia.beck.lichtenstein@rsyd.dk

Institution: Department of Clinical Institute, University of Southern Denmark, Odense, Denmark; Department of Sport Science and Clinical Biomechanics, University of Southern Denmark, Odense, Denmark; Department of Child and Adolescent Psychiatry, University of Southern Denmark, Odense, Denmark; Department of Eating Disorders, Odense University Hospital, Odense, Denmark; Department of Sport Science and Clinical Biomechanics, University of Southern Denmark, Odense, Denmark

Language: English

Abstract: Exercise addiction is characterized by increasing exercise amounts which take priority over other areas of life. It is mostly observed in individual sports, such as running and weight-lifting, whereas addiction in team sport has not previously been investigated. The aim of this study was to estimate the prevalence of exercise addiction in a team sport (football) compared to an individual sport (fitness) and to test the psychometric properties of the Exercise Addiction Inventory in these populations. The Exercise Addiction Inventory was completed by 274 men in the age group of 16-39 years (98 football players and 176 fitness exercisers). The prevalence of exercise addiction was statistically equal in the two groups (7.1% in football and 9.7% in fitness). The Cronbach's alpha showed good internal reliability in both groups and factor analysis found one underlying factor interpreted as exercise addiction. Less of the variance was explained in the football sample with low loading on item 2: conflicts (0.2). We compared the structure of the scale between the two groups by using structural equation models and we found that exercise addiction can explain the six Exercise Addiction Inventory (EAI) variables. Thus, the EAI is recommended for identification of addiction in both populations but in football players the item of conflicts could be replaced. Motivation for exercise in the football group seemed to be enjoyment and competition, while the fitness group exercised for health and weight reasons. Different motivation for exercise might explain the psychometric differences of the scale, but further studies are warranted. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Epidemiology](#)
[*Exercise](#)
[*Inventories](#)
[*Psychometrics](#)
[Football](#)
[Sports](#)

Source: PsycINFO

Full Text: Available from *Informa Healthcare* in [Addiction Research and Theory](#)

66. Development of the Australian Dominant Drug Discourses Scale.

Citation: *Addiction Research & Theory*, October 2014, vol./is. 22/5(416-423), 1606-6359;1476-7392 (Oct 2014)

Author(s): Bright, Stephen Jason; Kane, Robert; Bishop, Brian; Marsh, Ali

Correspondence Address: Bright, Stephen Jason, GPO Box U1987, Perth, WAU, Australia, 6845, s.bright@curtin.edu.au

Institution: Department of Psychology, Curtin University of Technology, Perth, WAU, Australia; Department of Psychology, Curtin University of Technology, Perth, WAU, Australia; Department of Psychology, Curtin University of Technology, Perth, WAU, Australia; Department of Psychology, Curtin University of Technology, Perth, WAU, Australia

Language: English

Abstract: There are a limited number of dominant discourses available to frame drug use within Australia. These dominant discourses play an important role in policy debate and development, and also drug use behaviour. We describe the development of a psychometric instrument that is hypothesised to measure the degree to which individuals internalise dominant drug discourses. Sixty items were developed to reflect six dominant discourses of drug use. A substantive validity analysis was conducted. The highest loading items were included in a 27-item measure that was administered to 370 people seeking substance use treatment in Perth, Western Australia. In addition, participants completed the Locus of Control of Behaviour Scale. Confirmatory Factor Analysis tested the fit of a predicted six factor model, in addition to three other plausible models. The best fitting model was the predicted model. Internal locus of control was correlated with medical and legal discourse. The Dominant Drug Discourses Scale appears to measure internalisation of six dominant discourses. The tool has utility in research examining policy development and drug use behaviours. To establish the construct validity of the tool and better understand the constructs being measured, further research is required. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Internalization](#)
[*Psychometrics](#)
[*Test Construction](#)
[Sociology](#)

Source: PsycINFO

Full Text: Available from *Informa Healthcare* in [Addiction Research and Theory](#)

67. Research staff training in a multisite randomized clinical trial: Methods and recommendations from the stimulant reduction intervention using dosed exercise (STRIDE) trial.

Citation: Addiction Research & Theory, October 2014, vol./is. 22/5(407-415), 1606-6359;1476-7392 (Oct 2014)

Author(s): Walker, Robrina; Morris, David W; Greer, Tracy L; Trivedi, Madhukar H

Correspondence Address: Walker, Robrina: Department of Psychiatry, University of Texas Southwestern Medical Center, Dallas, TX, US, robrina.walker@utsouthwestern.edu

Institution: Department of Psychiatry, University of Texas Southwestern Medical Center, Dallas, TX, US; Department of Psychiatry, University of Texas Southwestern Medical Center, Dallas, TX, US; Department of Psychiatry, University of Texas Southwestern Medical Center, Dallas, TX, US; Department of Psychiatry, University of Texas Southwestern Medical Center, Dallas, TX, US

Language: English

Abstract: Background: Descriptions of and recommendations for meeting the challenges of training research staff for multisite studies are limited despite the recognized importance of training on trial outcomes. The STRIDE (Stimulant Reduction Intervention using Dosed Exercise) study is a multisite randomized clinical trial that was conducted at nine addiction treatment programs across the United States within the National Drug Abuse Treatment Clinical Trials Network (CTN) and evaluated the addition of exercise to

addiction treatment as usual (TAU), compared to health education added to TAU, for individuals with stimulant abuse or dependence. Research staff administered a variety of measures that required a range of interviewing, technical, and clinical skills. Purpose: In order to address the absence of information on how research staff are trained for multisite clinical studies, the current manuscript describes the conceptual process of training and certifying research assistants (RAs) for STRIDE. Methods: Training was conducted using a three-stage process to allow staff sufficient time for distributive learning, practice, and calibration leading up to implementation of this complex study. Results: Training was successfully implemented with staff across nine sites. Staff demonstrated evidence of study and procedural knowledge via quizzes and skill demonstration on six measures requiring certification. Overall, while the majority of staff had little to no experience in the six measures, all RAs demonstrated ability to correctly and reliably administer the measures throughout the study. Conclusions: Practical recommendations are provided for training research staff and are particularly applicable to the challenges encountered with large, multisite trials. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa UK Ltd.; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Clinical Trials](#)
[*Intervention](#)
[*Training](#)
[Drug Addiction](#)
Source: PsycINFO
Full Text: Available from *Informa Healthcare* in [Addiction Research and Theory](#)

68. Changes in method for obtaining better outcomes in the recruitment of synthetic drug users.

Citation: *Addiction Research & Theory*, October 2014, vol./is. 22/5(380-385), 1606-6359;1476-7392 (Oct 2014)
Author(s): Remy, Lysa; Von Diemen, Lisia; Surratt, Hilary L; Kurtz, Steven P; Pechansky, Flavio
Correspondence Address: Remy, Lysa: Center for Drug and Alcohol Research, Rua Ramiro Barcelos, 2350, Room 2201A, Porto Alegre, Brazil, lysaremy@gmail.com
Institution: Center for Drug and Alcohol Research, Porto Alegre, Brazil; Center for Drug and Alcohol Research, Porto Alegre, Brazil; Nova Southeastern University, Coral Gables, FL, US; Nova Southeastern University, Coral Gables, FL, US; Center for Drug and Alcohol Research, Porto Alegre, Brazil
Language: English
Abstract: Objective: To describe the problems encountered and resolved in the course of using respondent-driven sampling (RDS), targeted canvassing (TARC), and ethnographic fieldwork (EFW) to recruit ecstasy and/or lysergic acid diethylamide (LSD) users. Method: This study is nested within a larger project designed to investigate the course of drug use, sexual risk behaviors, and psychiatric comorbidities in 240 ecstasy/LSD users. Eligible participants were males and females with ages ranging from 18 to 39 years, who reported ecstasy and/or LSD use at least once during the 90 days prior to interview and were not under treatment for drug and alcohol problems. Strategies were implemented sequentially, over four-month time frames for each method, aiming at fulfilling study objectives. Results: The final sample included 174 participants (64.36% males). Eight (4.6%) were selected using RDS, 26 (14.94%) with TARC, and 140 (80.45%) using EFW. RDS recruited participants with a higher education level, employed, and with a higher monthly income. Conversely, a higher frequency of drug usage and a higher number of drugs ever used were evident among participants selected via EFW. Conclusions: Different recruitment techniques reached different types of participants. EFW showed the best performance, granting access to the largest number of participants and with a higher number of drugs ever used. Both RDS and TARC required more time to recruit participants and yielded a lower number of eligible subjects. Participants recruited via

RDS had a higher socioeconomic level but also a shorter lifetime history of drug use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa UK Ltd.; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Comorbidity
 *Drug Usage
 *Lysergic Acid Diethylamide
 *Methylenedioxymethamphetamine
 Ethnography
 Sexual Risk Taking
Source: PsycINFO
Full Text: Available from *Informa Healthcare* in *Addiction Research and Theory*

69. The interactive effects of effort to regulate alcohol use, anxiety disorders and affective disorders on long-term remission from alcohol dependence.

Citation: Addiction Research & Theory, October 2014, vol./is. 22/5(371-379), 1606-6359;1476-7392 (Oct 2014)
Author(s): Haller, Moira; Wang, Frances; Bountress, Kaitlin; Chassin, Laurie
Correspondence Address: Haller, Moira: Arizona State University, Department of Psychology, 950 S. McAllister, P.O. Box 871104, Tempe, AZ, US, 85287-1104, moira.haller@asu.edu
Institution: Department of Psychology, Arizona State University, Tempe, AZ, US; Department of Psychology, Arizona State University, Tempe, AZ, US; Department of Psychology, Arizona State University, Tempe, AZ, US; Department of Psychology, Arizona State University, Tempe, AZ, US
Language: English
Abstract: Objective: This study examined how effort to regulate alcohol use may interact with anxiety and affective disorders to influence long-term remission from alcohol dependence. Method: Using participants (n = 96; 73% male; 66% children of alcoholics; 71% non-Hispanic Caucasian; 26% Hispanic) from a high-risk community study who showed evidence of recovered alcohol dependence at baseline, this study examined whether effort to regulate alcohol use at the baseline assessment significantly influenced the likelihood of maintaining remission from alcohol dependence for a period of five years or more. This study also examined whether having an anxiety or affective disorder interacted with effort to regulate alcohol use. All analyses controlled for treatment history, baseline alcohol use, parent alcoholism, age and gender. Results: Results from logistic regressions showed that effort to regulate alcohol use had a significant unique main effect on long-term maintenance of remission from alcohol dependence. Having an affective and/or anxiety disorder did not have a significant main effect on the maintenance of remission. However, having an anxiety/affective disorder significantly moderated the influence of effort to regulate alcohol use such that the protective effect of effort to regulate use on remission from alcohol dependence was only significant for those without an affective or anxiety disorder. Conclusions: Individuals who try harder to limit their drinking are more likely to maintain long-term remission from alcohol dependence. However, affective and anxiety disorders may undermine the protective effect of effort to regulate alcohol use on long-term remission. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Country of Publication: HOLDER: Informa UK Ltd.; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Affective Disorders
 *Alcoholism
 *Anxiety Disorders
 *Protective Factors
 *Remission (Disorders)
 Alcohol Rehabilitation

[Comorbidity](#)
[Self Control](#)

Source: PsycINFO
Full Text: Available from *Informa Healthcare* in [Addiction Research and Theory](#)

70. Passing the baton.

Citation: Addiction Research & Theory, October 2014, vol./is. 22/5(362), 1606-6359;1476-7392 (Oct 2014)
Author(s): Rotgers, Frederick
Correspondence Address: Rotgers, Frederick: Independent Practice, 32 Brunswick Avenue, Metuchen, NJ, US, 08840, fred_eto@yahoo.com
Institution: Independent Practice, Metuchen, NJ, US
Language: English
Abstract: The Editor-in-Chief expresses his feelings while resigning from his post for a new phase of professional life. Additionally, the editor congratulates and give thanks to Derek Heim who will continue as the sole Editor-in-Chief, Cynthia Glidden-Tracy and her predecessor as Associate Editor, Bill Gottdiener for their hard work and support over the years. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
Country of Publication: HOLDER: Informa UK Ltd.; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Addiction](#)
[*Experimentation](#)
[*Scientific Communication](#)
Source: PsycINFO
Full Text: Available from *Informa Healthcare* in [Addiction Research and Theory](#)

71. Laying solid foundations: Fred Rotgers.

Citation: Addiction Research & Theory, October 2014, vol./is. 22/5(361), 1606-6359;1476-7392 (Oct 2014)
Author(s): Heim, Derek
Correspondence Address: Heim, Derek, derekheim@gmail.com
Institution: Edge Hill University, Ormskirk, United Kingdom
Language: English
Abstract: The editor appreciates the contribution of Fred Rotgers as an Editor in Chief of Addiction Research & Theory. After many years of service Fred Rotgers has stepped down as the US Editor in Chief so that he can dedicate more of his time to new challenges and ventures. His achievements during his tenure have been considerable. Under his stewardship the number of submissions from the Americas has increased exponentially and now stands at an all time high. It is in no small part a result of Fred's contributions that a number of changes to the editorial procedures are being implemented in tandem with the change in his role to help ensure speedy and thorough reviews of our record number of submissions. Personally, and on behalf of the editorial board, the editor thanks Fred for helping ensure that Addiction Research and Theory is in excellent health. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
Country of Publication: HOLDER: Informa UK Ltd.; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Psychologists](#)
[*Scientific Communication](#)
[Addiction](#)
[Experimentation](#)

Source: PsycINFO
Full Text: Available from *Informa Healthcare* in [Addiction Research and Theory](#)

72. Comorbidity of affective disorders, alcohol use and gambling.

Citation: New perspectives on generalized anxiety disorder., 2014(95-105) (2014)
Author(s): Blanco, Pamela; Guglielmo, Riccardo; Righino, Elisabetta
Correspondence Address: Blanco, Pamela: Institute of Psychiatry and Clinical Psychology, Catholic University Medical School of Rome, Largo Francesco Vito 1, Rome, Italy, 00168, blanco_pam@yahoo.it
Institution: Institute of Psychiatry and Clinical Psychology, Catholic University Medical School of Rome, Rome, Italy; Institute of Psychiatry and Clinical Psychology, Catholic University Medical School of Rome, Rome, Italy; Institute of Psychiatry and Clinical Psychology, Catholic University Medical School of Rome, Rome, Italy
Language: English
Abstract: (from the chapter) Generalized anxiety disorder (GAD) is one of the most common anxiety disorders and it is frequently comorbid with several other psychiatric disorders, each of which may complicate the diagnosis, treatment, and outcome for the patient. Because of the widespread prevalence of mood, anxiety, and substance use disorders and their associated disabilities and social costs, an accurate understanding of their comorbidity is crucial to prevention and treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
Publication Type: Book; Edited Book
Subject Headings: [*Affective Disorders](#)
[*Alcoholism](#)
[*Comorbidity](#)
[*Generalized Anxiety Disorder](#)
[*Pathological Gambling](#)

Source: PsycINFO

73. Clinical presentation.

Citation: New perspectives on generalized anxiety disorder., 2014(83-93) (2014)
Author(s): Guglielmo, Riccardo; Janiri, Luigi; Pozzi, Gino
Correspondence Address: Guglielmo, Riccardo: Institute of Psychiatry and Clinical Psychology, Catholic University Medical School of Rome, Largo Francesco Vito 1, Rome, Italy, 00168, ricguglielmo@gmail.com
Institution: Institute of Psychiatry and Clinical Psychology, Catholic University Medical School of Rome, Rome, Italy; Institute of Psychiatry and Clinical Psychology, Catholic University Medical School of Rome, Rome, Italy; Institute of Psychiatry and Clinical Psychology, Catholic University Medical School of Rome, Rome, Italy
Language: English
Abstract: (from the chapter) Generalized Anxiety Disorder (GAD) is a common and disabling disorder characterised by excessive worry (apprehensive expectation), anxiety and somatic symptoms. Unfortunately, being that the diagnosis of GAD is poorly recognized, general practitioners and mental healthcare professionals are not exactly aware of the presenting symptoms. The disorder is associated with severe subjective impairment and high social costs. Consequently, unrecognized GAD results in an intensive use of unnecessary and expensive healthcare facilities for a long time. GAD can be considered as a gateway disorder that, if not recognized and treated in time, may lead to the development of other psychiatric disorders such as anxiety disorders, depressive disorders, addictive disorders and also psychosis. Because of its relevance as a predisposing factor for the development of other psychopathologies, GAD requires more consideration from a clinical point of view. In this regard, several evidences suggest that

GAD is better conceptualized as a dimensional construct, and in light of this, a dimensional approach to generalized anxiety disorder has important implications for conceptual models, assessment and treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Edited Book
Subject Headings: [*Generalized Anxiety Disorder](#)
[*Psychopathology](#)
[*Therapeutic Processes](#)
[*Treatment](#)
Source: PsycINFO

74. Physical and mental health issues among homeless youth in British Columbia, Canada: Are they different from older homeless adults?

Citation: Journal of the Canadian Academy of Child and Adolescent Psychiatry / Journal de l'Academie canadienne de psychiatrie de l'enfant et de l'adolescent, August 2014, vol./is. 23/3(200-206), 1719-8429 (Aug 2014)

Author(s): Saddichha, Sahoo; Linden, Isabelle; Krausz, Michael Reinhardt

Correspondence Address: Saddichha, Sahoo, saddichha@gmail.com

Institution: Department of Psychiatry, Melbourne Health, Melbourne, VIC, Australia; Centre for Health Evaluation and Outcome Sciences, University of British Columbia, Vancouver, BC, Canada; Department of Psychiatry, University of British Columbia, Vancouver, BC, Canada

Language: English

Abstract: Objectives: Youth homelessness is on the rise in North America, yet this vulnerable population is rarely studied and compared with adults. This paper aimed to study the homeless youth and identify specific vulnerabilities, which rendered them different from the adult homeless population. It also aimed to describe the youth homeless population and their significant co-morbidities. Methods: Data was derived from the BC Health of the Homeless Study (BCHOHS), carried out in three cities in British Columbia, Canada: the large urban centre Vancouver (n = 250); the mid-sized city and capital of the province Victoria (n = 150). Measures included socio-demographic information, the Maudsley Addiction Profile (MAP), the Childhood Trauma Questionnaire (CTQ) and the Mini International Neuropsychiatric Interview (MINI) Plus. Results: Youth constituted 16.5% (n = 82) of the homeless population. Compared to the adult homeless, the homeless youth were more often female (55%), were Aboriginal (47.6%), had greater substance abuse of alcohol (70.7%), amphetamines (8.5%) and cannabis (75.6%). A lower prevalence of sexually transmitted diseases (0.2%) and psychotic disorders (13.4%) was also observed. The prevalence of traumatic experiences, other psychiatric disorders and physical illnesses were similar between the adult and homeless youth. Conclusion: Homeless youth have high rates of physical and psychiatric co-morbidity, similar to the adult homeless, despite being 20 years younger. An urgent need for interventions that go beyond the standardized ones being offered to homeless populations as a whole, and to derive specific strategies that target this vulnerable population is required. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Homeless](#)
[*Mental Disorders](#)
[*Mental Health](#)
[*Morbidity](#)
[Population](#)
Source: PsycINFO
Full Text: Available from *National Library of Medicine* in [Journal of the Canadian Academy of Child and Adolescent Psychiatry](#)

75. The impact of clinical experience with alcoholics on Brazilian nursing students' attitudes toward alcoholism and associated problems.

- Citation:** Journal of Addictions Nursing, July 2013, vol./is. 24/3(180-186), 1088-4602;1548-7148 (Jul-Sep 2013)
- Author(s):** de Vargas, Divane
- Correspondence Address:** de Vargas, Divane, Av. Dr. Eneas de Carvalho Aguiar, 419, Sao Paulo, Brazil, SP-05403-000, vargas@usp.br
- Institution:** School of Nursing, University of Sao Paulo (EEUSP), Sao Paulo, Brazil
- Language:** English
- Abstract:** This quasiexperimental study assessed the impact of a clinical experience involving alcoholics on nursing students' attitudes. The study participants were 195 students at a large university-based nursing school in Brazil. They were divided into experimental and control groups. Individuals in the experimental group (n = 56) participated in 6 weeks of a clinical practicum at a specialized treatment service for addiction, during a course in psychiatric nursing. In the same period, the control group (n = 144) participated in a 6-week clinical practicum at a specialized mental health service that did not treat people with addiction. At the end of the theoretical course and clinical practica, both groups completed an attitude measurement scale. Data analysis, using analysis of variance, indicated a statistically significant difference in the overall score on the attitude scale between the experimental and control groups (p = .04), indicating that the experimental group participants' have more positive attitudes, perceptions, opinions, and feelings toward alcoholic individuals and working and relating to these patients. In conclusion, educational interventions that include clinical experience with alcoholics may be an effective teaching strategy that contributes to better skill preparation and more comfortable feelings for nurses intervening in problems related to the use and abuse of alcohol and other drugs. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** STATEMENT: Unauthorized reproduction of this article is prohibited.; HOLDER: International Nurses Society on Addictions; YEAR: 2013
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Alcoholism](#)
[*Health Personnel Attitudes](#)
[*Life Experiences](#)
[*Nursing Students](#)
- Source:** PsycINFO

76. Identifying medical-surgical nursing staff perceptions of the drug-abusing patient.

- Citation:** Journal of Addictions Nursing, July 2013, vol./is. 24/3(168-172), 1088-4602;1548-7148 (Jul-Sep 2013)
- Author(s):** Nilsen, Stacy L; Stone, Wendy L; Burlison, Stephanie L
- Correspondence Address:** Nilsen, Stacy L.: Naval Hospital, Box 555191, Camp Pendleton, CA, US, 92055, stacy.nilsen@med.navy.mil
- Institution:** Naval Medical Center San Diego, San Diego, CA, US; Naval Medical Center San Diego, San Diego, CA, US; Naval Medical Center San Diego, San Diego, CA, US
- Language:** English
- Abstract:** Nurses report a negative, stereotypical, and moralistic view of substance-abusing patients. Unaddressed bias may impede delivery of quality care. There is limited research of the needs specific to medical-surgical nursing staff interacting with substance-abusing patients. Nursing therapeutic commitment refers to the degree the nurse feels prepared with an adequate knowledge base, professional support, and personal ownership of a patient condition. Low therapeutic commitment correlates with job dissatisfaction. The Drug and Drug Problems Perceptions Questionnaire assesses healthcare provider attitude

and therapeutic commitment to patients using or abusing medication or illicit substances. This therapeutic commitment survey serves as a staff needs assessment for a targeted educational innovation. The results show that the medical and surgical nursing staff has a constructive attitude and a moderately high degree of therapeutic commitment to the drug-abusing patient population, similar to more specialized multidisciplinary, mental healthcare workers. This study showed that medical-surgical nurses feel professionally responsible and clinically supported with patients with primary or comorbid drug abuse. Consistent with established results, focused and ongoing education on the risk factors, outcomes, and physical and psychological effects of illicit substances is necessary to improve therapeutic commitment to drug-dependent patients. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: Unauthorized reproduction of this article is prohibited.; HOLDER: International Nurses Society on Addictions; YEAR: 2013

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Health Personnel Attitudes](#)
[*Nursing](#)
[*Surgery](#)
[*Therapeutic Processes](#)
[Drug Abuse](#)

Source: PsycINFO

77. A tailored curriculum of alcohol screening, brief intervention, and referral to treatment (SBIRT) for nurses in inpatient settings.

Citation: Journal of Addictions Nursing, July 2013, vol./is. 24/3(130-141), 1088-4602;1548-7148 (Jul-Sep 2013)

Author(s): Broyles, Lauren M; Kraemer, Kevin L; Kengor, Caroline; Gordon, Adam J

Correspondence Address: Broyles, Lauren M.: Center for Health Equity Research and Promotion, VA Pittsburgh Healthcare System, 7180 Highland Drive, Bldg. 2, Rm. 4020W (151C-H), Pittsburgh, PA, US, 15206, lauren.broyles@va.gov

Institution: Center for Health Equity Research and Promotion, VA Pittsburgh Healthcare System, Department of Medicine, School of Medicine, University of Pittsburgh, Pittsburgh, PA, US; Division of General Internal Medicine, Department of Medicine, School of Medicine, University of Pittsburgh, Pennsylvania, PA, US; Center for Health Equity Research and Promotion, VA Pittsburgh Healthcare System, Pennsylvania, PA, US; Center for Health Equity Research and Promotion, VA Pittsburgh Healthcare System, Department of Medicine, School of Medicine, University of Pittsburgh, Pittsburgh, PA, US

Language: English

Abstract: A package of clinical strategies known as alcohol screening, brief intervention, and referral to treatment (SBIRT) is increasingly recommended for reducing unhealthy alcohol use, the spectrum of alcohol consumption from at-risk drinking (defined as consumption above recommended guidelines) to alcohol abuse and alcohol dependence. The United States' Joint Commission issued new SBIRT-related hospital accreditation measures for alcohol. Ongoing initiatives aim to promote, support, and sustain SBIRT implementation in hospital settings. In hospital settings, nurse-delivered SBIRT may be a particularly viable and efficient model for SBIRT implementation. However, like physicians, most nurses have not been trained in how to perform SBIRT, and few authors have described alcohol-related curricula specifically for nurses. In addition, historical differences in nurse and physician professional scopes of practice, role perceptions, and patterns of care delivery suggest the need for effective SBIRT initial and continuing education and training that are tailored to the nursing profession and inpatient environments. In this article, we provide an in-depth description of the registered nurse SBIRT curriculum and describe its development and contents as well as various nurse- and setting-specific adaptations. In addition, we describe how we engaged nursing stakeholders in the development and implementation of the curriculum and discuss potential implications for future SBIRT training and delivery by nurses. SBIRT continuing education and training for nurses represents one of the first steps in expanded

SBIRT implementation. Comprehensive workforce and organizational development of inpatient and nurse-delivered SBIRT may provide the means to address the entire spectrum of unhealthy alcohol use across healthcare settings. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: STATEMENT: Unauthorized reproduction of this article is prohibited.; HOLDER: International Nurses Society on Addictions; YEAR: 2013

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Curriculum](#)
[*Nurses](#)
[*Nursing Education](#)
[Hospitalization](#)
[Screening](#)
[Training](#)

Source: PsycINFO

78. In Memorium: David McDowell (1963-2014).

Citation: Journal of Gay & Lesbian Mental Health, October 2014, vol./is. 18/4(412-414), 1935-9705;1935-9713 (Oct 2014)

Author(s): Vaughan, Susan C

Correspondence Address: Vaughan, Susan C., 25 West 81st St., Suite 1C, New York, NY, US, 10024, scv1@columbia.edu

Institution: Columbia University College of Physicians and Surgeons, New York, NY, US

Language: English

Abstract: Presents an obituary of David McDowell (1963-2014). It was only natural that he specialized in psychiatry, completing a residency at Columbia followed by a substance abuse fellowship at New York University. He then returned to Columbia where he joined his mentor Herb Kleber, Deputy Director of the Office of National Drug Control Policy in the first Bush administration, as Medical Director of STARS (Substance Treatment and Research Service). This novel service allowed non-treatment-seeking substance abusers access to illicit substances such as heroin or cocaine in a controlled inpatient setting in exchange for allowing researchers to examine all aspects of their physiology, brain activity and behavior. According to The New York Times in 2004, Dr. McDowell's subject group had an 88% success rate in preventing relapse with addicts in the first six months of treatment, besting typical success rates with methadone by almost 40%. Recognizing that if recovering addicts were to return to work they could not stand in daily methadone lines with other addicts and succeed, David helped bring office-based buprenorphine to the United States. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse Prevention](#)
[*Psychiatrists](#)

Source: PsycINFO

79. Barriers and facilitators to veterans administration collaboration with community providers: The Lodge Project for homeless veterans.

Citation: Social Work in Health Care, September 2014, vol./is. 53/8(698-713), 0098-1389;1541-034X (Sep 2014)

Author(s): Cretzmeyer, Margaret; Moeckli, Jane; Liu, William Ming

Correspondence Address: Cretzmeyer, Margaret: Iowa City VA Healthcare System, 601 Highway 6 West, Mailstop 152, Iowa City, IA, US, 52246-2208, margaret.cretzmeyer@va.gov

Institution: VA Office of Rural Health (ORH), Veterans Rural Health Resource Center-Central Region, Iowa City VA Healthcare System, Iowa City, IA, US; VA Office of Rural Health (ORH), Veterans Rural Health Resource Center-Central Region, Iowa City VA Healthcare System, Iowa City, IA, US; College of Education, University of Iowa, Iowa City, IA, US

Language: English

Abstract: Since 2009, the U.S. Veterans Administration has made concentrated efforts to end homelessness among veterans. As part of these efforts, the Iowa City, Iowa, VA Health Care System in collaboration with local community providers deployed a supportive housing program aimed at homeless veterans. Called the Lodge program, it is intended to serve a Mid-Western mid-size city and its surrounding rural communities. This article presents qualitative findings from a mixed-method, two-year formative evaluation of the Lodge's implementation. Primary barriers to the effectiveness of the Lodge program were regulations hindering cooperation between service programs, followed by problems regarding information sharing and client substance abuse. Facilitators included personal communication and cooperation between individuals within and among service groups. The feasibility of implementing a Lodge program in a more rural community than Iowa City was also discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Homeless](#)
[*Military Veterans](#)
[*Program Evaluation](#)
[*Social Services](#)
[*Treatment Barriers](#)
[Communication](#)
[Cooperation](#)
[Drug Abuse](#)
[Rural Environments](#)

Source: PsycINFO

80. Medical marijuana: More questions than answers.

Citation: Journal of Psychiatric Practice, September 2014, vol./is. 20/5(389-391), 1527-4160;1538-1145 (Sep 2014)

Author(s): Hill, Kevin P

Correspondence Address: Hill, Kevin P.: McLean Hospital, 115 Mill Street, Belmont, MA, US, 02478, khill@mclean.harvard.edu

Institution: McLean Hospital, Belmont, MA, US

Language: English

Abstract: With 23 states and the District of Columbia having enacted medical marijuana laws as of August 2014, it is important that psychiatrists be able to address questions about medical marijuana from patients, families, and other health care professionals. The author discusses the medical literature on synthetic cannabinoids and medical marijuana. The synthetic cannabinoids dronabinol and nabilone are approved by the United States Food and Drug Administration for nausea and vomiting associated with cancer chemotherapy and appetite stimulation in patients with wasting diseases such as acquired immunodeficiency syndrome (AIDS). Results of clinical trials of these agents for other conditions have varied widely thus far. In addition, few data are available on the use of the marijuana plant as a medical treatment. The author concludes that there is a clear need for additional research on possible medical uses of cannabinoids. He notes that discussions with prospective medical marijuana patients should emphasize the importance of communication among all parties due to the possible side effects of treatment with marijuana and its potential to interact with other medications the patient may be taking. Facilitating a thorough substance abuse consultation is one of most positive ways that

psychiatrists, especially addiction psychiatrists, can make an impact as medical marijuana becomes increasingly common. A careful review of the prospective medical marijuana user's substance use history, co-occurring medical and psychiatric conditions, family history, and psychosocial stressors is essential in evaluating the potential risks of medical marijuana for these patients. The author concludes that psychiatrists can have a significant impact by increasing the likelihood that medical marijuana will be used in a safe and responsible way. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Lippincott Williams & Wilkins Inc.; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *AIDS
 *Drug Therapy
 *Marijuana
 *Family History
 Family
 Side Effects (Drug)
Source: PsycINFO

81. Personality traits and exercise dependence: Exploring the role of narcissism and perfectionism.

Citation: International Journal of Sport and Exercise Psychology, October 2014, vol./is. 12/4(368-381), 1612-197X;1557-251X (Oct 2014)
Author(s): Miller, Kyle J; Mesagno, Christopher
Correspondence Address: Miller, Kyle J., kylemiller@students.ballarat.edu.au
Institution: School of Health Sciences, Federation University, Ballarat, VIC, Australia; School of Health Sciences, Federation University, Ballarat, VIC, Australia
Language: English
Abstract: There are currently limited investigations that have examined the relationship between personality traits and exercise dependence. The purpose of the present study was to explore the relationship between exercise dependence, narcissism and perfectionism. Ninety regular exercisers were recruited from various gyms, fitness centres and sporting events to complete the Narcissistic Personality Inventory [Raskin, R. N., & Terry, H. (1988). A principal-components analysis of the Narcissistic Personality Inventory and further evidence of its construct validity. *Journal of Personality and Social Psychology*, 54(5), 890-902], Multidimensional Perfectionism Scale [Hewitt, P. L., & Flett, G. L. (1991). Perfectionism in the self and social contexts: Conceptualization, assessment, and association with psychopathology. *Journal of Personality and Social Psychology*, 60(3), 456-470] and Exercise Dependence Scale-Revised [Symons Down, D., Hausenblas, H. A., & Nigg, C. R. (2004). Factorial validity and psychometric examination of the Exercise Dependence Scale-Revised. *Measurement in Physical Education and Exercise Science*, 8(4), 183-201] either online or in person. Exercise dependence was positively related to narcissism, self-orientated perfectionism and socially prescribed perfectionism. Gender differences between these relationships were also found. Hierarchical regression analysis indicated that a combination of narcissism and self-orientated perfectionism uniquely predicted a greater degree of exercise dependence. These findings indicate that both narcissism and perfectionism may be important antecedents of exercise dependence, and that a combination of these personality traits is associated with exercise dependence. Future research should continue to determine which personality traits contribute to the personality profile of individuals with exercise dependence. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
Country of Publication: HOLDER: International Society of Sport Psychology; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Exercise
 *Human Sex Differences
 *Narcissism

*Perfectionism
*Personality Traits
Addiction

Source: PsycINFO

82. What's trust got to do with it? Revisiting opioid contracts.

Citation: Journal of Medical Ethics: Journal of the Institute of Medical Ethics, October 2014, vol./is. 40/10(673-677), 0306-6800 (Oct 2014)

Author(s): Buchman, Daniel Z; Ho, Anita

Correspondence Address: Ho, Anita: W. Maurice Young Centre for Applied Ethics, University of British Columbia, 227-6356 Agricultural Road, Vancouver, BC, Canada, V6T 1Z1, anita.ho@ubc.ca

Institution: Interdisciplinary Studies Graduate Program, University of British Columbia, Vancouver, BC, Canada; W. Maurice Young Centre for Applied Ethics, University of British Columbia, Vancouver, BC, Canada

Language: English

Abstract: Prescription opioid abuse (POA) is an escalating clinical and public health problem. Physician worries about iatrogenic addiction and whether patients are 'drug seeking', 'abusing' and 'diverting' prescription opioids exist against a backdrop of professional and legal consequences of prescribing that have created a climate of distrust in chronic pain management. One attempt to circumvent these worries is the use of opioid contracts that outline conditions patients must agree to in order to receive opioids. Opioid contracts have received some scholarly attention, with trust and trustworthiness identified as key values and virtues. However, few articles have provided a critical account of trust and trustworthiness in this context, particularly when there exists disagreement about their role in terms of enhancing or detracting from the patient-physician relationship. This paper argues that opioid contracts represent a misleading appeal to patient-physician trust. Assuming the patient is untrustworthy may wrongfully undermine the credibility of the patient's testimony, which may exacerbate certain vulnerabilities of the person in pain. However, misplaced trust in certain patients may render the physician vulnerable to the potential harms of POA. If patients distrust their physician, or feel distrusted by them, this may destabilise the therapeutic relationship and compromise care. A process of epistemic humility may help cultivate mutual patient-physician trust. Epistemic humility is a collaborative effort between physicians and patients that recognises the role of patients' subjective knowledge in enhancing physicians' self-understanding of their theoretical and practice frameworks, values and assumptions about the motivations of certain patients who report chronic pain. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Opiates
*Physicians
*Public Health
Chronic Pain
Drug Therapy

Source: PsycINFO

Full Text: Available from *Highwire Press* in *Journal of medical ethics*

83. Prescription stimulants are "A Okay": Applying neutralization theory to college students' nonmedical prescription stimulant use.

Citation: Journal of American College Health, October 2014, vol./is. 62/7(478-486), 0744-8481;1940-3208 (Oct 2014)

Author(s): Cutler, Kristin A

Correspondence Address: Cutler, Kristin A.: Department of Sociology, Washington State University, PO Box 644020, Pullman, WA, US, 99164-4020, kcutler@wsu.edu

Institution: Department of Sociology, Washington State University, Pullman, WA, US

Language: English

Abstract: Objective: National college health data indicate that prescription stimulants are the most widely misused prescription drugs among college students, with 9% admitting to nonmedical use within the past year. Although motivations for the nonmedical use of these drugs have been explored, scant attention has been paid to justifications for nonmedical use. This article fills that gap by expounding upon the justifications students incite to defend their nonmedical use of these drugs. Participants: Seventy-six college students from a large, public northwestern university. Methods: Semistructured interviews were conducted during the 2010-2011 academic year. Results: Inductive analysis uncovered social learning theories of crime/deviance, more specifically, Sykes and Matza's neutralization theory as helping to inform justifications for nonmedical stimulant use. This theory was modified to better encompass the justifications that students employed. Conclusion: Justifications for use must become a more central part of the conversation surrounding nonmedical stimulant use among the college population. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*CNS Stimulating Drugs](#)
[*College Students](#)
[*Drug Usage](#)
[*Prescription Drugs](#)
[Community Services](#)
[Crime](#)

Source: PsycINFO

84. Social networks, substance use, and mental health in college students.

Citation: Journal of American College Health, October 2014, vol./is. 62/7(470-477), 0744-8481;1940-3208 (Oct 2014)

Author(s): Mason, Michael J; Zaharakis, Nikola; Benotsch, Eric G

Correspondence Address: Mason, Michael J.: Department of Psychiatry, Virginia Commonwealth University, 515 N. 10th Street, Richmond, VA, US, 23298-0489, mjmason@vcu.edu

Institution: Department of Psychiatry, Virginia Commonwealth University, Richmond, VA, US; Department of Psychiatry, Virginia Commonwealth University, Richmond, VA, US; Department of Psychology, Virginia Commonwealth University, Richmond, VA, US

Language: English

Abstract: Objectives: The relationship between social network risk (alcohol-using close friends), perceived peer closeness, substance use, and psychiatric symptoms was examined to identify risk and protective features of college students' social context. Participants: Six hundred and seventy undergraduate students enrolled in a large southeastern university. Methods: An online survey was administered to consenting students. Results: Students with risky networks were at a 10-fold increase of hazardous drinking, 6-fold increase for weekly marijuana use, and 3-fold increase for weekly tobacco use. College students' who feel very close to their peers were protected against psychiatric symptoms yet were at increased risk for marijuana use. Perceived closeness of peers was highly protective against psychiatric symptoms, adding a natural preventive effect for a population at great risk for mental illness. Conclusions: Results support targeting college students through network-oriented preventive interventions to address substance use as well as mental health. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*College Students](#)
[*Drug Usage](#)

*Mental Health
 *Psychiatric Symptoms
 *Social Networks
 Peers

Source: PsycINFO

85. Finding their way: Conditions for successful reintegration among women offenders.

Citation: Journal of Offender Rehabilitation, October 2014, vol./is. 53/7(562-586), 1050-9674;1540-8558 (Oct 2014)

Author(s): Doherty, Sherri; Forrester, Pamela; Brazil, Amanda; Matheson, Flora I

Correspondence Address: Matheson, Flora I.: Centre for Research on Inner City Health, St. Michael's Hospital, 30 Bond St., Toronto, ON, Canada, M5B1W8, mathesonf@smh.ca

Institution: Correctional Service Canada, Montague, PE, Canada; Correctional Service Canada, Montague, PE, Canada; Canadian Mental Health Association, Charlottetown, PE, Canada; St. Michael's Hospital, Toronto, ON, Canada

Language: English

Abstract: The transition from prison to community is challenging for women. Herein we propose a framework of reintegration readiness from women's experiences of community re-entry after a prison stay. In qualitative interviews with 31 women who spent time in Canadian federal prisons, they described the time immediately following their release, specifically person-specific and context-specific factors that allowed them to successfully adapt to society. Addictions and unresolved trauma were barriers to reintegration success. In their transition from prison to the community, it is important to address these person- and context-specific conditions as well as trauma and addictions to improve reintegration readiness. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Criminal Rehabilitation
 *Criminals
 *Human Females
 *Readiness to Change
 *Risk Factors
 Drug Abuse

Source: PsycINFO

86. Economic costs of a postrelease intervention for incarcerated female substance abusers: Recovery management checkups for women offenders (RMC-WO).

Citation: Journal of Offender Rehabilitation, October 2014, vol./is. 53/7(543-561), 1050-9674;1540-8558 (Oct 2014)

Author(s): McCollister, Kathryn E; Scott, Christy K; Dennis, Michael L; Freitas, Derek M; French, Michael T; Funk, Rodney R

Correspondence Address: McCollister, Kathryn E.: Department of Public Health Sciences, University of Miami, Miller School of Medicine, Clinical Research Building, Office 1043, 1120 NW 14th St., Miami, FL, US, 33136, kmccolli@med.miami.edu

Institution: University of Miami, Miami, FL, US; Chestnut Health Systems, Normal, IL, US; Chestnut Health Systems, Normal, IL, US; New York University School of Medicine, New York, NY, US; University of Miami, Coral Gables, FL, US; Chestnut Health Systems, Normal, IL, US

Language: English

Abstract: This study estimates the economic costs of Recovery Management Checkups for Women Offenders (RMC-WO), highlighting the unique mix of services across two phases of the

intervention. Participants were randomly assigned to quarterly outcome monitoring (OM) only (n = 242) or OM plus Recovery Management Checkups (OM-plus-RMC) (n = 238). The total annual economic cost of OM only was \$76,010, which translates to \$81 quarterly per person. OM-plus-RMC generates a total annual economic cost of \$126,717, or \$137 quarterly per person. The clinical, economic, and policy implications of incorporating RMC-WO into existing corrections and/or community-based treatment settings are discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis Group, LLC
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: *Costs and Cost Analysis
 *Criminals
 *Drug Abuse
 *Intervention
 *Program Evaluation
 Economics
 Human Females
Source: PsycINFO

87. GRIK1 Genotype moderates topiramate's effects on daily drinking level, expectations of alcohol's positive effects and desire to drink.

Citation: International Journal of Neuropsychopharmacology, October 2014, vol./is. 17/10(1549-1556), 1461-1457;1469-5111 (Oct 2014)

Author(s): Kranzler, Henry R; Armeli, Stephen; Feinn, Richard; Tennen, Howard; Gelernter, Joel; Covault, Jonathan

Correspondence Address: Kranzler, Henry R.: Treatment Research Center, University of Pennsylvania Perelman School of Medicine, 3900 Chestnut Street, Philadelphia, PA, US, 19104, kranzler@mail.med.upenn.edu

Institution: Center for Studies of Addiction, Department of Psychiatry, Perelman School of Medicine, University of Pennsylvania, Philadelphia VAMC, Philadelphia, PA, US; Department of Psychology, Fairleigh Dickinson University, Teaneck, NJ, US; Frank Netter School of Medicine, Quinnipiac University, Hamden, CT, US; Department of Community Medicine and Healthcare, University of Connecticut School of Medicine, Farmington, CT, US; Department of Psychiatry, Yale University School of Medicine, New Haven, CT, US; Alcohol Research Center, Department of Psychiatry, University of Connecticut School of Medicine, Farmington, CT, US

Language: English

Abstract: We (Kranzler et al., 2014) reported that topiramate 200 mg/day reduced heavy drinking days and increased abstinent days in 138 heavy drinkers whose treatment goal was to reduce drinking to safe levels. In that 12-week, placebo-controlled study, we measured drinking using the Timeline Follow-back method at each treatment visit. In addition to the intent-to-treat effects of topiramate, we found that a single nucleotide polymorphism (rs2832407) in GRIK1, encoding the GluK1 subunit of the kainate receptor, moderated the treatment effect in European Americans (EAs; n = 122). Topiramate reduced heavy drinking only in rs2832407*C allele homozygotes. Here, we augment those analyses by using patients' daily reports obtained using interactive voice response technology; (a) to validate the interactive effects of GRIK1 and topiramate as predictors of drinking level; and, (b) to examine changes in expected positive effects of drinking (i.e. positive outcome expectancies) and desire to drink. We found that rs2832407*C allele homozygotes treated with topiramate drank less overall during treatment than those receiving placebo, validating our earlier findings for heavy drinking days (Kranzler et al., 2014). There was also a study day x medication group x genotype interaction that predicted both positive alcohol expectancies and desire to drink, with rs2832407*C-allele homozygotes treated with topiramate showing the largest decreases in these outcomes during the study period. Changes in positive alcohol expectancies or desire to drink did not mediate the effects on drinking. These findings validate and extend our previous pharmacogenetic

findings with topiramate. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: CINP; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Drug Therapy](#)
[*Genotypes](#)
[*Neural Receptors](#)
[*Polymorphism](#)
[Alcohol Drinking Patterns](#)

Source: PsycINFO

88. Topiramate for alcoholism treatment: Novel pharmacogenetic evidence for the journey to personalized medicine?

Citation: International Journal of Neuropsychopharmacology, October 2014, vol./is. 17/10(1541-1544), 1461-1457;1469-5111 (Oct 2014)

Author(s): Leggio, Lorenzo; Schwandt, Melanie L

Correspondence Address: Leggio, Lorenzo: Section on Clinical Psychoneuroendocrinology and Neuropsychopharmacology, NIAAA, NIH, 10 Center Drive (10CRC/15330) MSC 1108, Room 1-5429, Bethesda, MD, US, 20892-1108, lorenzo.leggio@nih.gov

Institution: Section on Clinical Psychoneuroendocrinology and Neuropsychopharmacology, Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, National Institutes of Health, Bethesda, MD, US; Laboratory of Clinical and Translational Studies, National Institute on Alcohol Abuse and Alcoholism, National Institutes of Health, Bethesda, MD, US

Language: English

Abstract: The small number of medications approved for the treatment of alcoholism is, by itself, an important justification for the significant efforts directed towards medication development. Perhaps an even more important issue is why a medication (approved or used off-label) does not always reproduce the same results across randomized clinical trials (RCTs). Indeed, even clinical trials that find effects report that there are both treatment responders and non-responders, and the ability to identify responders and non-responders could help explain variation across clinical trials. This variation forms the foundation of 'personalized medicine' approaches, and highlights the need to identify patient sub-types that respond better to a certain medication. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Drug Therapy](#)
[*Therapeutic Processes](#)
[*Treatment](#)

Source: PsycINFO

89. Non-suicidal self-harm behavior within the previous year among 10th-grade adolescents in Istanbul and related variables.

Citation: Nordic Journal of Psychiatry, October 2014, vol./is. 68/7(481-487), 0803-9488;1502-4725 (Oct 2014)

Author(s): Evren, Cuneyt; Evren, Bilge; Bozkurt, Muge; Can, Yesim

Correspondence Address: Evren, Cuneyt: Icadiye Cad. Menten Sok., Selcuk Apt. 1/17 Kuzguncuk, Uskudar, Istanbul, Turkey, 34674, cuneytevren@hotmail.com

Institution: Alcohol and Drug Research, Treatment and Training Center (AMATEM), Bakirkoy State Hospital for Mental Health and Neurological Disorders, Istanbul, Turkey; Department of Psychiatry, Baltalimani State Hospital for Musculoskeletal Disorders, Istanbul, Turkey;

Alcohol and Drug Research, Treatment and Training Center (AMATEM), Bakirkoy State Hospital for Mental Health and Neurological Disorders, Istanbul, Turkey; Alcohol and Drug Research, Treatment and Training Center (AMATEM), Bakirkoy State Hospital for Mental Health and Neurological Disorders, Istanbul, Turkey

Language: English

Abstract: Background: Non-suicidal self-harm behavior (SHB), which is a pervasive and dangerous problem, is frequent among adolescents and it is important to evaluate the associated psychological and social factors to better understand its nature and to plan treatment programs. Aims: Aim of the present study is to determine the prevalence of SHB and the associated variables such as substance use, psychological, behavioral and social factors among 10th-grade students in Istanbul/Turkey. Methods: Cross-sectional online self-report survey conducted in 45 schools from the 15 districts in Istanbul/Turkey. A representative sample of 4957 10th-grade students was studied between October 2012 and December 2012. Results: SHB within the previous year were reported by 14.4% of the students (n = 713). Lifetime suicidal thoughts or behavior, tobacco, alcohol and/or drug use, symptoms of depression, anxiety and impulsive, delinquent and aggressive behaviors were also associated with SHB in Turkish 10th-grade students. Conclusions: The findings of the present study may be relevant in prevention and management of SHB as well as important problems among students, such as substance use, impulsive, delinquent, aggressive and suicidal behavior. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa Healthcare; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Self Injurious Behavior](#)
[Drug Abuse](#)
[Epidemiology](#)
[Suicide](#)

Source: PsycINFO

Full Text: Available from *Informa Healthcare* in [Nordic Journal of Psychiatry](#)

90. Boredom research: An analysis of topical domain and historical trends.

Citation: Journal of Instructional Psychology, 2013, vol./is. 40/2(50-52), 0094-1956 (2013)

Author(s): Piotrowski, Chris

Correspondence Address: Piotrowski, Chris, Piotrowskichris@hotmail.com

Institution: University of West Florida, Pensacola, FL, US

Language: English

Abstract: This study attempts to identify the structural-intellectual domain of the Boredom construct. To that end, a bibliometric content analysis was performed on the major studies (n = 312 articles) on boredom indexed in the PsycINFO database from 1923-2013. In order to examine historical trends, the analysis compared recent studies (1991-2013) to nascent research (1923-1990). The findings revealed that boredom research continues to struggle with rudimentary concerns like taxonomy, construct issues, and a lack of investigatory direction. Despite these concerns, studies with a focus on individual differences, measures, and mental health seem to be popular over the last 2 decades. Historically, from 1950-1988, a sizeable majority of the research reflected the impact of boredom in psychotherapy. Interestingly, during the seminal era (1930-1950), researchers studied the effects of boredom directly in industrial settings. The current analysis identified several neglected areas of research, i.e., work-life factors, drug abuse, burnout, and creativity. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Boredom](#)
[*Personality Traits](#)

[*Quality of Work Life](#)[*Trends](#)[Drug Abuse](#)**Source:** PsycINFO**Full Text:** Available from *ProQuest* in *Journal of Instructional Psychology*; Note: ; Collection notes: If asked to log in click "Athens Login" and then select "NHSEngland" in the drop down list of institutions.**91. The prevalence of common mental and substance use disorders in general practice: A literature review and discussion paper.****Citation:** Mental Health and Substance Use, October 2014, vol./is. 7/4(497-508), 1752-3281;1752-3273 (Oct 2014)**Author(s):** Klimas, Jan; Neary, Anna; McNicholas, Claire; Meagher, David; Cullen, Walter**Correspondence Address:** Cullen, Walter, walter.cullen@ul.ie**Institution:** Graduate Entry Medical School, Faculty of Education and Health Sciences, University of Limerick, Limerick, Ireland; Graduate Entry Medical School, Faculty of Education and Health Sciences, University of Limerick, Limerick, Ireland; Graduate Entry Medical School, Faculty of Education and Health Sciences, University of Limerick, Limerick, Ireland; Graduate Entry Medical School, Faculty of Education and Health Sciences, University of Limerick, Limerick, Ireland; Graduate Entry Medical School, Faculty of Education and Health Sciences, University of Limerick, Limerick, Ireland**Language:** English**Abstract:** Enhanced primary care management of common mental and substance use disorders is a key healthcare target. Though primary care may be well placed to achieve this target, a greater understanding of the prevalence and profile of common mental and substance use disorders in primary care settings is needed. We searched the MEDLINE database (2002-2012) to provide an update on biomedical literature describing the prevalence of common mental and substance use disorders in European general practice. Following "PRISMA" guidelines, 17 studies were kept for qualitative synthesis. Prevalence, profile, screening instruments, associated co-morbidities, and gender distribution were tabulated. Depending on the screening method, the prevalence of common mental and substance use disorders ranged from 10.4% (Luxemburg) to 53.6% (Spain). Mood disorders were the most common. High co-morbidity with anxiety and somatisation hindered early identification and management. The continuing burden of common mental and substance use disorders, coupled with poor identification described in the updated EU biomedical literature, suggests that the unmet need for health care-identified by the World Health Organization a decade ago-remains unmet. Understanding the prevalence of common mental and substance use disorders, associated morbidity, and the extent to which general practice represents an important catchment mechanism can enhance their management at this level. General practitioners should be trained in accurate screening. Short screening instruments for general practitioners should be unified and promoted. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)**Country of Publication:** HOLDER: Taylor & Francis; YEAR: 2014**Publication Type:** Journal; Peer Reviewed Journal**Subject Headings:** [*Clinical Practice](#)
[*Drug Abuse](#)
[*Mental Disorders](#)
[*Primary Health Care](#)
[*Screening](#)
[Epidemiology](#)
[Psychiatry](#)**Source:** PsycINFO**92. Alcoholism and mental illness: Overlapping diseases requiring a renewed focus.**

Citation: Mental Health and Substance Use, October 2014, vol./is. 7/4(487-496), 1752-3281;1752-3273 (Oct 2014)

Author(s): Cavanaugh, Sarah E

Correspondence Address: Cavanaugh, Sarah E., scavanaugh@pcrm.org

Institution: Physicians Committee for Responsible Medicine, Washington, DC, US

Language: English

Abstract: Alcohol addiction and psychiatric disorders frequently occur together, and individuals affected by both conditions represent a unique patient population in need of specialized treatment. Decades of research have pointed to promising prospective therapeutic options, yet no standardized diagnostic measures or treatment regimens are available for clinicians or their patients. As a result, patients with both alcohol abuse and mental disorders frequently do not receive specialized treatment that addresses both conditions. Moreover, a great deal of research regarding alcohol use disorder treatment has failed to include patients with co-occurring mental illnesses. To address this serious public health concern, a renewed focus on large-scale trials is required to examine the benefits of various therapeutic practices and delivery methods in the mentally ill, alcohol-dependent population. This commentary will provide a brief overview of the diagnostic and therapeutic challenges associated with treating dually diagnosed individuals, the state of current research strategies, and a potential roadmap for improving the future of research in this field. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Mental Disorders](#)
[Comorbidity](#)
[Dual Diagnosis](#)
[Intervention](#)

Source: PsycINFO

93. Mentalization and affect regulation reflected in interviews with men diagnosed with psychosis and substance abuse.

Citation: Mental Health and Substance Use, October 2014, vol./is. 7/4(461-472), 1752-3281;1752-3273 (Oct 2014)

Author(s): Stalheim, Jonas; Tidefors, Inga; Fahlke, Claudia

Correspondence Address: Stalheim, Jonas, jonas.stalheim@vgregion.se

Institution: Department of Psychology, University of Gothenburg, Goteborg, Sweden; Department of Psychology, University of Gothenburg, Goteborg, Sweden; Department of Psychology, University of Gothenburg, Goteborg, Sweden

Language: English

Abstract: People with psychosis have a high prevalence of problematic substance use that is generally thought to complicate their treatment. One explanation of the co-occurrence of psychosis and substance-use disorders is that people with psychosis more often than others use substances to ameliorate distress by regulating their affect and self-experience. Affect regulation is related to mentalization, which can be problematic for many people with psychosis. The aim of this study was to investigate the relationship between substance use, mentalization, and affect regulation in psychosis from an experience-based perspective. We interviewed 12 men with diagnoses of psychosis and a concurrent substance-use disorder about their mental health problems, life history, relationships, and substance use. We analysed the semi-structured interviews thematically and deductively, and organized the data into two main themes, each containing related sub-themes. The first theme concerned general ways of handling distress, which we organized hierarchically according to the level of mentalization required. The other theme grouped

together different regulating functions of substance use. We discuss, from a theoretical point of view, the systematic interactions among substance use, affect regulation, and mentalization indicated in the data and propose mentalization styles that may indicate especially high risk for substance abuse. These findings may have implications for theoretical understandings of how substance use and mental health problems interact and for verbal therapy for people with both psychosis and substance-use disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Dual Diagnosis](#)
[*Mental Health](#)
[*Psychosis](#)
[Comorbidity](#)
[Emotional Regulation](#)
[Mentalization](#)

Source: PsycINFO

94. DSM-IV schizotypal personality disorder: A taxometric analysis among individuals with and without substance use disorders in the general population.

Citation: Mental Health and Substance Use, October 2014, vol./is. 7/4(446-460), 1752-3281;1752-3273 (Oct 2014)

Author(s): Kerridge, Bradley T; Saha, Tulshi D; Hasin, Deborah S

Correspondence Address: Kerridge, Bradley T., bradleykerridge@gmail.com

Institution: Department of Epidemiology, Mailman School of Public Health, Columbia University, New York, NY, US; Laboratory of Epidemiology and Biometry, Intramural Division of Clinical and Biological Research, National Institutes on Alcohol Abuse and Alcoholism, National Institutes of Health, Rockville, MD, US; Department of Epidemiology, Mailman School of Public Health, Columbia University, New York, NY, US

Language: English

Abstract: This study examined the underlying structure of DSM-IV schizotypal personality disorder (SPD) among individuals with and without a substance use disorder (SUD). Using a nationally representative sample of US adults, taxometric analyses were conducted on SPD in the total sample and among individuals with and without an SUD. The structure of SPD in the total sample and among individuals without SUDs was dimensional (comparison curve fit indices (CCFI): 0.440 and 0.365) whereas a taxonic structure was demonstrated among individuals with an SUD (CCFI: 0.679). Taxonicity underlying schizotypy and SPD in prior taxometric research may have been the result of sampling high-risk subsamples of the population. Taxometric research on SPD and other personality psychopathology among high-risk subgroups of the population can help elucidate the complex etiology of SPD and the role played by comorbid SUDs in the expressivity of these disorders. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Schizotypal Personality Disorder](#)
[Diagnostic and Statistical Manual](#)
[Factor Structure](#)

Source: PsycINFO

95. Classification of offenders with mental health problems and problematic substance use using the Addiction Severity Index version 6: Analysis of three-year follow-up data and predictive validity.

Citation: Mental Health and Substance Use, October 2014, vol./is. 7/4(431-445), 1752-3281;1752-3273 (Oct 2014)

Author(s): Alm, Charlotte; Eriksson, Asa; Durbeej, Natalie; Palmstierna, Tom; Berman, Anne H; Kristiansson, Marianne; Gumpert, Clara Hellner

Correspondence Address: Alm, Charlotte, charlotte.alm@psychology.su.se

Institution: Department of Psychology, Stockholm University, Stockholm, Sweden; Department of Clinical Neuroscience, Stockholm, Sweden; Department of Clinical Neuroscience, Huddinge, Sweden; Department of Clinical Neuroscience, Huddinge, Sweden; Department of Clinical Neuroscience, Huddinge, Sweden; Department of Clinical Neuroscience, Huddinge, Sweden; Department of Clinical Neuroscience, Huddinge, Sweden

Language: English

Abstract: Previous research is scarce on the problems and needs of the "triple troubled"-among offenders with mental health problems and problematic substance use. Classifying this population into clusters based on problem profiles may provide information about individual needs for treatment. In a previous study, we identified four clusters of triple troubled: less troubled, severely triple troubled, triple troubled with medical problems, and working triple troubled. The present study explored the stability and predictive validity of these clusters in a naturalistic design. In total, 125 triple troubled individuals included in any of the four clusters were followed for approximately three years with regard to their inpatient and outpatient treatment participation. They were also interviewed with the 6th version of the Addiction Severity Index, the Psychopathy Checklist-Revised, and the World Health Organization Quality of Life-Bref. The main finding of the study was that on average the participants of all four clusters exhibited substantial improvements over the course of time but that improvements were cluster-specific rather than sample-specific. Implications of the study are discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Mentally Ill Offenders](#)
[*Psychodiagnostic Typologies](#)
[*Quality of Life](#)
[*Severity \(Disorders\)](#)

Source: PsycINFO

96. Contingency management reduces symptoms of psychological and emotional distress among homeless, substance-dependent men who have sex with men.

Citation: Mental Health and Substance Use, October 2014, vol./is. 7/4(420-430), 1752-3281;1752-3273 (Oct 2014)

Author(s): Fletcher, Jesse B; Shoptaw, Steven; Peck, James A; Reback, Cathy J

Correspondence Address: Fletcher, Jesse B., jfletcher@friendsresearch.org

Institution: Friends Research Institute, Inc., Los Angeles, CA, US; Department of Family Medicine, David Geffen School of Medicine, UCLA, Los Angeles, CA, US; Friends Research Institute, Inc., Los Angeles, CA, US; Friends Research Institute, Inc., Los Angeles, CA, US

Language: English

Abstract: This prospective analysis evaluated the efficacy of a contingency management (CM) intervention to improve the psychological health of non-treatment seeking, homeless, substance-dependent men who have sex with men (MSM) in Los Angeles. It was hypothesized that the administration of CM would be associated with reductions in participants' symptoms of psychological and emotional distress. One hundred and thirty-one participants were randomized into either a voucher-based CM (n = 64)

condition reinforcing substance abstinence and prosocial/health-promoting behaviors, or to a control condition (n = 67). Participants' symptoms of psychological and emotional distress were assessed at intake and at 12-months post-randomization. Participants randomized into the CM intervention exhibited significantly lower levels of psychological distress in all measured symptom domains up to one year post-randomization, reductions not evidenced in the control arm. Omnibus tests resultant from seemingly unrelated regression analysis confirmed that CM was significantly associated with reductions in symptoms of psychological and emotional distress, even when controlling for biomarker-confirmed substance-use outcomes (2(9) = 17.26; p < 0.05). Findings demonstrate that a CM intervention reduced symptoms of psychological and emotional distress among a sample of non-treatment seeking, homeless, substance-dependent MSM. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Contingency Management](#)
[*Distress](#)
[*Drug Abuse](#)
[*Homeless](#)
[*Same Sex Intercourse](#)
[Dual Diagnosis](#)
[Human Males](#)
[Intervention](#)
[Symptoms](#)
[Treatment Effectiveness Evaluation](#)

Source: PsycINFO

97. Key performance indicators for mental health and substance use disorders: A literature review and discussion paper.

Citation: Mental Health and Substance Use, October 2014, vol./is. 7/4(407-419), 1752-3281;1752-3273 (Oct 2014)

Author(s): Henderson, Carla; Klimas, Jan; Dunne, Colum; Leddin, Des; Meagher, David; O'Toole, Thomas; Cullen, Walter

Correspondence Address: Cullen, Walter, walter.cullen@ul.ie

Institution: Centre for Interventions in Infection, Inflammation & Immunity (4i), Graduate Entry Medical School, University of Limerick, Limerick, Ireland; Centre for Interventions in Infection, Inflammation & Immunity (4i), Graduate Entry Medical School, University of Limerick, Limerick, Ireland; Centre for Interventions in Infection, Inflammation & Immunity (4i), Graduate Entry Medical School, University of Limerick, Limerick, Ireland; Department of Medicine, Division of Gastroenterology, Dalhousie University, Halifax, NS, Canada; Centre for Interventions in Infection, Inflammation & Immunity (4i), Graduate Entry Medical School, University of Limerick, Limerick, Ireland; US Department of Veterans Affairs, Washington, DC, US; Centre for Interventions in Infection, Inflammation & Immunity (4i), Graduate Entry Medical School, University of Limerick, Limerick, Ireland

Language: English

Abstract: With an increasing recognition of the importance of mental and substance use disorders (MESUDS) for population health and health systems and the potential value of systems-based performance indicators in addressing this issue, we aimed to describe the development and content of key performance indicators (KPIs) for MESUDS. Publications were identified through official websites, Google searches and PubMed. Following "PRISMA" guidelines, 25 studies were kept for qualitative synthesis and six for quantitative analysis. We describe their use in practice by comparing their application across a range of public and mixed healthcare systems. Currently, the KPI development for MESUDS adopts several methodologies, including expert opinion, literature review, stakeholder consultation, and the structured consensus method. The rationales provided for selection of particular KPIs vary greatly between systems. Systems exhibit different

levels of KPI adaptability, which is reflective of dynamic changes in evidence-based practices. We noted bias in the level of KPI assessment toward system/health plan evaluation followed by program/service evaluation. Similarly, there is a large skew toward KPIs that reflect evaluation of processes. Collection of data in all systems is nearly exclusively reliant on electronic administrative/medical data. Experiences from these systems are synthesized into methodological recommendations and considerations for further research and clinical practice are provided. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Mental Disorders](#)
[*Mental Health](#)
[Evaluation](#)
[Performance](#)
[Quality of Services](#)

Source: PsycINFO

98. Risk factors for medication non-adherence among psychiatric patients with substance misuse histories.

Citation: Mental Health and Substance Use, October 2014, vol./is. 7/4(381-390), 1752-3281;1752-3273 (Oct 2014)

Author(s): Magura, Stephen; Mateu, Pedro F; Rosenblum, Andrew; Matusow, Harlan; Fong, Chunki

Correspondence Address: Magura, Stephen, stephen.magura@wmich.edu

Institution: Evaluation Center, Western Michigan University, Kalamazoo, MI, US; Evaluation Center, Western Michigan University, Kalamazoo, MI, US; National Development and Research Institutes, New York, NY, US; National Development and Research Institutes, New York, NY, US; National Development and Research Institutes, New York, NY, US

Language: English

Abstract: Medication non-adherence among psychiatric patients is known to be associated with poorer treatment outcomes. The study examined a comprehensive set of modifiable risk factors for non-adherence in a theoretical framework among a diverse, high-risk sample of psychiatric patients with substance misuse histories (N = 299). Medication side effects and excessive alcohol use were related to lower medication adherence, and higher motivation for mental health treatment and recovery support were related to greater adherence. The results suggest that a multifaceted model for intervention to increase psychiatric medication adherence should be developed and tested. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2013

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Drug Therapy](#)
[*Psychiatric Patients](#)
[*Treatment Compliance](#)
[*Treatment Outcomes](#)
[Risk Factors](#)

Source: PsycINFO

99. Predictors of smoking cessation among persons in remission from substance-use disorders.

Citation: Mental Health and Substance Use, October 2014, vol./is. 7/4(363-369), 1752-3281;1752-3273 (Oct 2014)

Author(s): Agosti, Vito

Correspondence Address: Agosti, Vito, agostiv@nyspi.columbia.edu

Institution: Depression Evaluation Service, New York State Psychiatric Institute, New York, NY, US

Language: English

Abstract: Though remission of substance-use disorders (SUDs) has been correlated with increased odds of smoking cessation, a subgroup of remitters continues to smoke. However, information regarding this population is lacking. Data from the National Epidemiologic Survey on Alcohol and Related Conditions were analyzed. The sample included 1417 smokers with SUDs who completed Wave 1 (Baseline) and Wave 2 (Follow-up) assessments. Results indicated that the presence of generalized anxiety disorder, Cluster A personality disorders, major depression/dysthymic disorder, or manic depression/hypomanic disorder since Wave 1 was associated with a reduced likelihood of smoking cessation. These data suggest that healthcare providers who treat smokers in remission from SUDs should carefully assess for the presence of mood disorders and provide appropriate treatment, as well as offering adjunctive evidence-based smoking cessation treatments. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Smoking Cessation](#)
[Affective Disorders](#)
[Comorbidity](#)
[Dual Diagnosis](#)

Source: PsycINFO

100. Experience in care, burden, and hope of the family members of HIV patients with and without a history of injecting drug use in Indonesia: An exploratory case.

Citation: Mental Health and Substance Use, October 2014, vol./is. 7/4(343-352), 1752-3281;1752-3273 (Oct 2014)

Author(s): Iskandar, Shelly; Trianda, Pramita; Fitriana, Efi; Pinxten, W. J. Lucas; De Jong, Cor A. J

Correspondence Address: Iskandar, Shelly, shelly_bdg@yahoo.com

Institution: Department of Psychiatry, Faculty of Medicine, Padjadjaran University, Hasan Sadikin Hospital, Bandung, Indonesia; Department of Clinical Psychology, Radboud University, Nijmegen, Netherlands; Faculty of Psychology, Padjadjaran University, Bandung, Indonesia; Nijmegen Institute for Scientist-Practitioners in Addiction (NISPA), Nijmegen, Netherlands; Nijmegen Institute for Scientist-Practitioners in Addiction (NISPA), Nijmegen, Netherlands

Language: English

Abstract: Addiction and human immunodeficiency virus (HIV) patients suffer from many medical problems. Family can be a source of stress or relief for the patients. Therefore, we explored and compared the perception of family members of HIV patients with and without a history of injecting drug use (IDU) in Indonesia in the context of: (i) care provided for HIV patients, (ii) harmful impact of the disease for their relatives, and (iii) the hopes of family members concerning the future of their sick relatives. An exploratory case study was conducted with 79 family members: 36 family members of HIV patients with a history of IDU and 43 family members of HIV patients without a history of IDU. They were recruited through consecutive sampling in a HIV clinic in an urban setting in West Java. The Family Contact Information Support scale, the Family Member Impact scale, and the Hopefulness-hopelessness questionnaire were used to interview the family members. Most family members were spouses/partners (30%) or parents (28%). Families of HIV patients showed good satisfaction about the care given by health care providers. Families of HIV patients with a history of IDU perceived more worrying behaviour of their sick relatives compared to the families of HIV patients without a history of IDU. Hope for the future of their sick relatives was high and comparable in these two groups. This study shows that family members of HIV patients with a history of IDU perceived

the disease as more harmful, which should be addressed by the healthcare providers to support the family and heighten their involvement in the treatment. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Drug Dependency](#)
[*HIV](#)
[Family Members](#)
[Health Care Services](#)
[Hope](#)
[Intravenous Drug Usage](#)
[Opiates](#)
[Psychological Assessment](#)

Source: PsycINFO

101. Protective factors against involvement with illegal drugs: The perception of family members and significant others.

Citation: Mental Health and Substance Use, October 2014, vol./is. 7/4(329-342), 1752-3281;1752-3273 (Oct 2014)

Author(s): Ventura, Carla A. Arena; de Souza, Jacqueline; Hayashida, Miyeko; Ferreira, Paulo Sergio

Correspondence Address: Ventura, Carla A. Arena, caaventu@eerp.usp.br

Institution: College of Nursing, University of Sao Paulo at Ribeirao Preto, Sao Paulo, Brazil; College of Nursing, University of Sao Paulo at Ribeirao Preto, Sao Paulo, Brazil; College of Nursing, University of Sao Paulo at Ribeirao Preto, Sao Paulo, Brazil; College of Nursing, University of Sao Paulo at Ribeirao Preto, Sao Paulo, Brazil

Language: English

Abstract: Protective factors are aspects that enhance resiliency and decrease the probability of drug abuse. The aim of this study was to identify the opinion of family members or people significant to illegal drug users about protective factors that help to prevent involvement with these drugs. The study used a convergent parallel mixed methods design that combines quantitative and qualitative methods. In the quantitative component, 100 subjects participated in the study. Participants were recruited at a primary health-care service located in the Northern district of an inner city in Brazil. They defined themselves as being personally affected by having a family member or significant other who was a former or current illegal drugs user. The subjects were asked about protective factors in general and linked to the specific case of their relative or significant other who is or was a drug user. Data were statistically analyzed using the Statistical Package for the Social Sciences. The qualitative data were collected through semistructured interviews with 10 subjects who were selected among the participants and declared themselves as highly involved with the illegal drug user. Qualitative data were analyzed through thematic analysis. Among the protective factors mentioned, the participants highlighted the community circumstances with a higher percentage than the other domains, suggesting a notion of institutionalization of the problem of illegal drug use. The results brought key information for the implementation of protective factors at the individual, family, and community levels by different private and public actors. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Drug Abuse Prevention](#)
[*Drug Usage](#)
[*Protective Factors](#)

[Community Involvement](#)
[Family Members](#)
[Involvement](#)
[Significant Others](#)

Source: PsycINFO

102. Correlates of recent and lifetime aggression among veterans with co-occurring PTSD and substance-use disorders.

Citation: Mental Health and Substance Use, October 2014, vol./is. 7/4(315-328), 1752-3281;1752-3273 (Oct 2014)

Author(s): Flanagan, Julianne C; Teer, Andrew; Beylotte, Francis M; Killeen, Therese K; Back, Sudie E

Correspondence Address: Flanagan, Julianne C., hellmuth@musc.edu

Institution: Department of Psychiatry and Behavioral Sciences, Medical University of South Carolina, Charleston, SC, US; Department of Psychiatry and Behavioral Sciences, Medical University of South Carolina, Charleston, SC, US; Department of Psychiatry and Behavioral Sciences, Medical University of South Carolina, Charleston, SC, US; Department of Psychiatry and Behavioral Sciences, Medical University of South Carolina, Charleston, SC, US; Department of Psychiatry and Behavioral Sciences, Medical University of South Carolina, Charleston, SC, US

Language: English

Abstract: Aggressive behavior is strongly associated with both posttraumatic stress disorder (PTSD) and substance-use disorders (SUDs) among civilians. However, little research has examined correlates of aggression among Veterans with co-occurring PTSD and SUD. This exploratory study examined the prevalence and correlates of recent (i.e. past 30 days) and lifetime aggressive behavior among a sample of US Veterans (n = 97) enrolled in a study examining integrated psychosocial treatment of co-occurring PTSD/SUD. The findings revealed high rates of recent and lifetime aggressive behaviors (39.2% and 57.7%, respectively). Participants who endorsed recent aggressive behaviors were younger, had less education, more severe PTSD numbing and hyperarousal symptoms, were more likely to report recent suicidal ideation, more frequent alcohol and marijuana use, had higher rates of physical and sexual abuse, greater combat exposure, and more severe aftermath of battle experiences. Participants who endorsed lifetime aggression were younger, reported more total PTSD symptom severity, PTSD re-experiencing severity, depression severity, and fewer post-deployment stressors compared to those who did not. Logistic regression analyses indicated that education and number of drinking days were correlated with recent aggression while depression and post-deployment stressors were correlated with lifetime aggression. The findings demonstrate high rates of aggressive behaviors among Veterans with PTSD/SUD as well as clinically relevant correlates of aggressive behaviors. Although preliminary, the findings suggest potential targets for improving assessment and treatment of Veterans with PTSD/SUD. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Military Veterans](#)
[*Posttraumatic Stress Disorder](#)
[Aggressive Behavior](#)
[Comorbidity](#)
[Mental Health](#)

Source: PsycINFO

103. Post-traumatic stress disorder symptom clusters predicting substance abuse in adolescents.

Citation: Mental Health and Substance Use, October 2014, vol./is. 7/4(299-314), 1752-3281;1752-3273 (Oct 2014)

Author(s): Donbaek, Dagmar Feddern; Elklit, Ask; Pedersen, Mads Uffe

Correspondence Address: Donbaek, Dagmar Feddern, df@crf.au.dk

Institution: Centre for Alcohol and Drug Research, Department of Psychology and Behavioural Sciences, Aarhus University, Aarhus, Denmark; Danish Research Unit of Psychological Trauma, Institute of Psychology, University of Southern Denmark, Odense, Denmark; Centre for Alcohol and Drug Research, Department of Psychology and Behavioural Sciences, Aarhus University, Aarhus, Denmark

Language: English

Abstract: The majority of studies exploring the mental health disorders, post-traumatic stress disorder (PTSD) and substance use disorders (substance abuse (SA) and dependence), have shown high co-morbidity rates in adolescents, indicating a well-established relationship. However, only a few studies have attempted to examine the functional mechanisms believed to underlie this common form of co-morbidity, and no studies have been carried out in adolescent samples. Knowledge is thus lacking on how specific PTSD symptom clusters may account for the development of specific types of problematic substance use in adolescents. Therefore, we studied this issue in relation to alcohol abuse (AA) and drug abuse (DA) in a probability sample of Danish 15-18-year-olds (n = 1988) in the form of an online survey using self-report questionnaires following the Diagnostic and statistical manual of mental disorders, fourth edition [DSM-IV; APA. (1994). Washington, DC: Author]. After demographic and substance-related variables were controlled for, hierarchical multiple regression models revealed that a significant proportion of variance in AA severity was explained positively by arousal symptoms and negatively by re-experiencing symptoms, whereas DA severity was significantly increased by avoidance symptoms and decreased by arousal symptoms. Current findings suggest that specific PTSD symptom clusters to some extent are independently related to AA and DA, providing this research field with a better understanding of the interrelationship between these two mental health disorders in adolescents while underpinning the importance of acknowledging the specific functional mechanisms underlying the common co-occurrence of PTSD and SA in adolescence. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2013

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adolescent Psychopathology](#)
[*Drug Abuse](#)
[*Posttraumatic Stress Disorder](#)
[*Symptoms](#)
[Comorbidity](#)

Source: PsycINFO

104. Posttraumatic stress disorder, alcohol use, and life stress among African-American women.

Citation: Mental Health and Substance Use, October 2014, vol./is. 7/4(286-298), 1752-3281;1752-3273 (Oct 2014)

Author(s): Davis, Telsie A; Carr, Erika R; Hickman, Enith; Rosenberg, Amy; Kaslow, Nadine J

Correspondence Address: Kaslow, Nadine J., nkaslow@emory.edu

Institution: Atlanta Veterans Administration and Medical Center, Decatur, GA, US; Memphis Veterans Administration and Medical Center, Memphis, TN, US; Georgia Regional Hospital, Savannah, GA, US; Winthrop University Hospital, Mineola, NY, US; Department of Psychiatry and Behavioral Sciences, EUSM, Atlanta, GA, US

Language: English

Abstract: Robust data document the strong association between posttraumatic stress disorder (PTSD) symptoms and problematic alcohol use in female psychiatric patients. Reasons

for this frequent co-morbidity remain unclear, highlighting the value of investigating factors common to both disorders to gain additional clarity. The current study examined whether the psychosocial factor, life stress, mediated the link between PTSD symptomatology and alcohol use in a sample of African-American women from low-income backgrounds with a history of intimate partner violence and suicidality (n = 143). Bootstrapping analysis demonstrated that life stress fully mediated the effect of PTSD symptoms on alcohol use. Consistent with the self-medication hypothesis of addiction, our findings indicate that life stress may be a causal mechanism in the development of subsequent alcohol problems among women with existing PTSD symptomatology. Prevention and treatment implications concerning the target population are discussed. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2013
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Alcohol Abuse](#)
[*Blacks](#)
[*Human Females](#)
[*Posttraumatic Stress Disorder](#)
[Drug Abuse](#)
[Stress](#)
Source: PsycINFO

105. Pregabalin for detoxification from opioids: A single case study.

Citation: Mental Health and Substance Use, October 2014, vol./is. 7/4(263-285), 1752-3281;1752-3273 (Oct 2014)
Author(s): Scanlon, Adrian
Correspondence Address: Scanlon, Adrian, adrian.scanlon@hse.ie
Institution: ACCEPT, Waterford Mental Health Service, Waterford, Ireland
Language: English
Abstract: The objective of this research is to develop a clearer understanding as to whether pregabalin is an appropriate and efficacious method to treat individuals presenting with withdrawal symptoms following cessation of opiate drug abuse. The focus of this study is to identify the value of a particular medicine within a particular case, representative of a particular group. The author has identified the participant in advance of the study to meet criteria of opiate dependence and will explore the dynamics of the case in great detail. The sample for this study was a purposive sample of one female lady who has been diagnosed as opiate dependent (DSM-IV criteria). The analysis of data is an inductive cyclical process that involves a process of observing the particular phenomenon from more general to specific observations. Data analysis commenced with interviews with the patient with emphasis on history taking, information gathering, and treatment. Data analysis will include a cross-tabulation of the subjective and objective data and the measurement of change using an evidence-based rating scale. The Clinical Opiate Withdrawal Scale was used to compare the analysis of the presenting symptoms longitudinally. From the objective data, it was a reasonable assumption that the symptoms of withdrawal were controlled better with pregabalin for the subject of this study. The patient acknowledged that this detoxification episode was "a lot easier than previous ones". It was a positive response in relation to the prescription of pregabalin that she first of all completed the prescribed detoxification regime and second it was acknowledged that the symptoms were alleviated more effectively than previous detoxification episodes. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Taylor & Francis; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Detoxification](#)
[*Drug Abuse](#)

*Drug Dependency
 *Opiates
 Drug Therapy
 Drug Withdrawal
 Screening
 Pregabalin

Source: PsycINFO

106. Effects of a brief school-based media literacy intervention on digital media use in adolescents: Cluster randomized controlled trial.

Citation: Cyberpsychology, Behavior, and Social Networking, September 2014, vol./is. 17/9(616-623), 2152-2715;2152-2723 (Sep 2014)

Author(s): Walther, Birte; Hanewinkel, Reiner; Morgenstern, Matthis

Correspondence Address: Morgenstern, Matthis: Institute for Therapy and Health Research (IFT-Nord), Harmsstrasse 2, Kiel, Germany, 24114, morgenstern@ift-nord.de

Institution: Institute for Therapy and Health Research (IFT-Nord), Kiel, Germany; Institute for Therapy and Health Research (IFT-Nord), Kiel, Germany; Institute for Therapy and Health Research (IFT-Nord), Kiel, Germany

Language: English

Abstract: The aim of this study was to evaluate the effects of a four-session school-based media literacy curriculum on adolescent computer gaming and Internet use behavior. The study comprised a cluster randomized controlled trial with three assessments (baseline, posttest, and 12-month follow-up). At baseline, a total of 2,303 sixth and seventh grade adolescents from 27 secondary schools were assessed. Of these, 1,843 (80%) could be reached at all three assessments (Mage = 12.0 years; SD = 0.83). Students of the intervention group received the media literacy program Vernetzte www.Welten ("Connected www.Worlds ") implemented by trained teachers during class time. The control group attended regular class. Main outcome measures were adolescents' computer gaming and Internet use: days per month, hours per day, and addictive use patterns. Parental media monitoring and rules at home were assessed as secondary outcomes. Results of multilevel growth-curve models revealed a significant intervention effect in terms of a lower increase in self-reported gaming frequency (= -1.10 [95% CI -2.06, -0.13]), gaming time (= -0.27 [95% CI -0.40, -0.14]), and proportion of excessive gamers (AOR = 0.21 [95% CI 0.08, 0.57]) in the intervention group. There were also significant group-time interactions for the addictive gaming scale (= -0.08 [95% CI -0.12, -0.04]), and the Internet Addiction Scale (= -0.06 [95% CI -0.10, -0.01]). No effect was found for days and hours of Internet use or parental media behavior. The study shows that the program Vernetzte www.Welten can influence adolescents' media use behavior. Future research should address mediating and moderating variables of program effects. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *Adolescent Development
 *Curriculum
 *Mass Media
 *School Based Intervention
 *Computer Mediated Communication
 Computer Literacy
 Internet Addiction

Source: PsycINFO

107. The perceived effects of cocaine on the driving performance of long-term users.

Citation: Drugs: Education, Prevention & Policy, October 2014, vol./is. 21/5(420-425), 0968-7637;1465-3370 (Oct 2014)

- Author(s):** Zdun, Steffen
- Correspondence Address:** Zdun, Steffen: IKG, Bielefeld University, Bielefeld, Germany, steffen.zdun@uni-bielefeld.de
- Institution:** Institute for Interdisciplinary Research on Conflict and Violence, Bielefeld University, Bielefeld, Germany
- Language:** English
- Abstract:** While there is a relatively large body of research on the effects of alcohol and cannabis on driving, the impact of cocaine on driving performance and behaviour has been neglected. This exploratory empirical study addresses this shortcoming by examining middle-aged, socially established long-term cocaine users who habitually drive or used to drive under the influence of this drug. Thirty interviews were conducted with cocaine users from six German cities of different sizes. One common theme to emerge from the interviews was that cocaine is perceived a performance enhancement for driving, although a negative impact on concentration was also noted. Interviewees ignored and rejected the real dangers to self and others, and were instead afraid of losing their driver's licence. Moreover, driving immediately after consumption or drug use while driving were perceived as unproblematic unless police controls were expected. Finally, expanded driving under the influence of drugs controls over the past decade have motivated changes in drug driving behaviour, although not leading to complete cessation of either drug use or drug driving. The immense concern about loss of driver's licence among socially established long-term users suggests that it might be worthwhile continuing current law enforcement efforts. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)
- Country of Publication:** HOLDER: Informa UK Ltd.; YEAR: 2014
- Publication Type:** Journal; Peer Reviewed Journal
- Subject Headings:** [*Cocaine](#)
[*Driving Behavior](#)
[*Driving Under the Influence](#)
[*Drug Abuse](#)
[*Performance](#)
- Source:** PsycINFO
- Full Text:** Available from *Informa Healthcare* in [Drugs: Education, Prevention, and Policy](#)
- 108. Connecting patients to services: Screening, brief intervention and referral to treatment in primary health care.**
- Citation:** Drugs: Education, Prevention & Policy, October 2014, vol./is. 21/5(370-379), 0968-7637;1465-3370 (Oct 2014)
- Author(s):** Agle, Jon; McIntire, Russell; DeSalle, Mallori; Tidd, David; Wolf, Jim; Gassman, Ruth
- Correspondence Address:** Agle, Jon: Department of Applied Health Science, Indiana Prevention Resource Center, School of Public Health, Indiana University, 501 N. Morton St., Suite 110, Bloomington, IN, US, 47404, jagley@indiana.edu
- Institution:** Department of Applied Health Science, Indiana Prevention Resource Center, School of Public Health, Indiana University, Bloomington, IN, US; Department of Applied Health Science, Indiana Prevention Resource Center, School of Public Health, Indiana University, Bloomington, IN, US; Department of Applied Health Science, Indiana Prevention Resource Center, School of Public Health, Indiana University, Bloomington, IN, US; Department of Applied Health Science, Indiana Prevention Resource Center, School of Public Health, Indiana University, Bloomington, IN, US; Department of Applied Health Science, Indiana Prevention Resource Center, School of Public Health, Indiana University, Bloomington, IN, US; Department of Applied Health Science, Indiana Prevention Resource Center, School of Public Health, Indiana University, Bloomington, IN, US; Department of Applied Health Science, Indiana Prevention Resource Center, School of Public Health, Indiana University, Bloomington, IN, US
- Language:** English

Abstract: Screening, brief intervention and referral to treatment (SBIRT) in primary care is a burgeoning environmental treatment strategy for illicit and prescription drug abuse and a variety of other health behaviors. While clinical research on SBIRT's efficacy continues to produce positive results, translational research focusing on the integration of the evidence-based processes into primary care settings has been less prevalent. This paper describes the decisions made in the design of the Indiana SBIRT project and describes several barriers that prevented eligible patients from receiving services provided through SBIRT. It then elaborates on the qualitative mechanisms used to identify solutions to those barriers and provides preliminary quantitative evidence for the effectiveness of the solutions that were implemented. The intention of this translational research is to provide a broad perspective on program improvement so that other SBIRT projects in the United States and internationally might benefit from the lessons learned by Indiana SBIRT. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Intervention](#)
[*Primary Health Care](#)
[*Screening](#)
[Treatment Duration](#)

Source: PsycINFO

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

109. Misuse of prescription opioid analgesics among adolescents in Greece: The importance of peer use and past prescriptions.

Citation: Drugs: Education, Prevention & Policy, October 2014, vol./is. 21/5(357-369), 0968-7637;1465-3370 (Oct 2014)

Author(s): Fotiou, Anastasios; Kanavou, Eleftheria; Richardson, Clive; Ploumpidis, Dimitrios; Kokkevi, Anna

Correspondence Address: Fotiou, Anastasios: University Mental Health Research Institute, 2 Soranou tou Efesiou str., Athens, Greece, 11527, afotiou@med.uoa.gr

Institution: Department of Neurology-Psychiatry-Social Medicine, National & Kapodistrian University of Athens, Medical School, Athens, Greece; Substance Use Epidemiology and Psychosocial Research Unit, University Mental Health Research Institute, Athens, Greece; Department of Economic and Regional Development, Panteion University of Social and Political Sciences, Athens, Greece; Department of Neurology-Psychiatry-Social Medicine, National & Kapodistrian University of Athens, Medical School, Athens, Greece; Department of Neurology-Psychiatry-Social Medicine, National & Kapodistrian University of Athens, Medical School, Athens, Greece

Language: English

Abstract: Aims: The study explored the prevalence and correlates of the non-prescribed use (misuse) of prescription opioid analgesics in a nationally representative sample of adolescent students in Greece. Methods: Cross-sectional data were collected through anonymous questionnaires administered to a random stratified sample of 676 high schools involving 23,279 students aged 15-19 in 2011. Findings: About 16.2% reported lifetime misuse, 6.3% repeated misuse at least three times-most of them to alleviate pain. Results of multivariate logistic regression showed that among the strongest correlates of repeated misuse were peer misuse (Odds ratio [OR] = 4.10, 99% Confidence Interval [CI] = 3.11-5.42), past prescription of opioid analgesics (OR = 3.19, 99% CI = 2.28-4.48 in males, OR = 2.38, 99% CI = 1.78-3.19 in females), lifetime misuse of tranquilisers/sedatives (OR = 3.16, 99% CI = 2.22-4.48), and frequent use of over-the-counter analgesics (OR = 2.37, 99% CI = 1.92-2.92). Other correlates included: female gender, daily smoking (by girls), frequent alcohol use, antisocial behaviour, physical or emotional maltreatment, and past prescription of tranquilisers/sedatives. Illicit

drug use failed to explain opioid analgesics misuse. Conclusions: Misuse of prescription analgesics is common among adolescents in Greece and seems to emerge within a self-treating rather than a mood-altering context of use. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa UK Ltd.; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Adolescent Attitudes](#)
[*Analgesic Drugs](#)
[*Drug Abuse](#)
[*Opiates](#)
[Antisocial Behavior](#)
Source: PsycINFO
Full Text: Available from *Informa Healthcare* in [Drugs: Education, Prevention, and Policy](#)

110. An examination of the first Oxford House in the UK: A preliminary investigation.

Citation: Drugs: Education, Prevention & Policy, October 2014, vol./is. 21/5(347-356), 0968-7637;1465-3370 (Oct 2014)
Author(s): Majer, John M; Beers, Kimberly; Jason, Leonard A
Correspondence Address: Majer, John M.: Department of Social Sciences, Harry S. Truman College, 1145 W. Wilson Ave., Chicago, IL, US, 60640, jmajer@ccc.edu
Institution: Department of Social Sciences, Harry S. Truman College, Chicago, IL, US; DePaul University, Center for Community Reserach, Chicago, IL, US; DePaul University, Center for Community Reserach, Chicago, IL, US
Language: English
Abstract: An exploratory investigation was conducted to examine the implementation of the first self-run, communal-living setting based on the Oxford House model, in the UK. A cross-sectional, mixed-methods design was used to examine the Oxford House model's total abstinence approach to recovery from substance use disorders among residents (n = 7) living in the first Oxford House established in the UK. Several measures commonly used in addiction research and personal narratives were used to assess residents' response to Oxford House living. Findings suggest that the Oxford House model is a post-treatment intervention that meets the needs of individuals seeking an abstinence-based recovery from alcohol and/or drug dependence in the UK. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: Informa UK Ltd.; YEAR: 2014
Publication Type: Journal; Peer Reviewed Journal
Subject Headings: [*Drug Abstinence](#)
[*Drug Abuse](#)
[*Drug Rehabilitation](#)
[*Recovery \(Disorders\)](#)
[*Residential Care Institutions](#)
[Addiction](#)
[Alcoholism](#)
[Treatment](#)
Source: PsycINFO
Full Text: Available from *Informa Healthcare* in [Drugs: Education, Prevention, and Policy](#)

111. Memory and attention functions in adolescents using cannabis regularly.

Original Title: Gedachtnis- und aufmerksamkeitsfunktionen bei Jugendlichen mit intensivem regelmasigem cannabiskonsum.
Citation: Zeitschrift fur Neuropsychologie, September 2014, vol./is. 25/3(165-174), 1016-264X (Sep 2014)

Author(s): Wartberg, Lutz; Thomsen, Monika; Thomasius, Rainer

Correspondence Address: Wartberg, Lutz: Universit Tsklinikum Hamburg-Eppendorf, Zentrum fur Psychosoziale Medizin, Deutsches Zentrum fur Suchtfragen des Kindes- und Jugendalters (DZSKJ), Martinistr. 52, Hamburg, Germany, 20246, lwartber@uke.de

Institution: Deutsches Zentrum fur Suchtfragen des Kindes- und Jugendalters (DZSKJ), Universitatsklinikum Hamburg-Eppendorf, Hamburg, Germany; Deutsches Zentrum fur Suchtfragen des Kindes- und Jugendalters (DZSKJ), Universitatsklinikum Hamburg-Eppendorf, Hamburg, Germany; Deutsches Zentrum fur Suchtfragen des Kindes- und Jugendalters (DZSKJ), Universitatsklinikum Hamburg-Eppendorf, Hamburg, Germany

Language: German

Abstract: Only few studies have investigated memory or attention functions in adolescents using cannabis regularly, and the empirical findings are not consistent. We conducted neuropsychological assessments in 20 adolescents using cannabis regularly and intensively as well as in 20 adolescents without illicit drug use. We used established test methods like the VLMT, the subtest "visual memory span" (WMS-R) and a test for selective attention (FAIR). Additionally, we assessed subjectively experienced attention deficits with a standardized questionnaire (FEDA). Compared to the control group, the cannabis users showed worse results in the first trial as well as in the overall learning performance of the VLMT and reported more attention deficits. The findings should be considered for the conception of intervention measures. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

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

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Adult Development](#)
[*Attention](#)
[*Cannabis](#)
[*Memory](#)
[Drug Usage](#)

Source: PsycINFO

112. Incentive salience in addiction and over-consumption.

Citation: The interdisciplinary science of consumption., 2014(185-197) (2014)

Author(s): Robinson, Michael J. F; Robinson, Terry E; Berridge, Kent C

Institution: Department of Psychology, University of Michigan, MI, US; Department of Psychology, University of Michigan, MI, US; Department of Psychology, University of Michigan, MI, US

Language: English

Abstract: (from the chapter) The incentive-sensitization theory helps explain why the development of addiction is a gradual and incremental process, but also why addiction is a persistent problem once established. Essentially, the magnification of decision utility can create a sense of compulsive motivation without altering the predicted utility, the experienced utility, or the remembered utility of the drug. Exaggerated discounting of other rewards relative to the drug will result, as will a probabilistic form of compulsion in which the addict remains in principle capable of resisting temptation on any single trial but in practice is likely to succumb to relapse if required to encounter a series of repeated temptations. Powerful "wanting," often in the absence of equivalent "liking," is not restricted to addictive drugs. The incentive-sensitization theory may provide an explanation for why consumer goods and certain foods can also become excessively compelling incentives. In turn, cues such as those contained in advertisements can trigger potent "wanting" peaks that propel susceptible individuals toward over-consumption of material goods and toward addiction-like disorders such as binge eating. However, there is a tremendous amount of individual variation in sensitization and in the functioning of the mesolimbic dopamine system. Some individuals, owing to their genes, their

hormones, their life experiences, and other factors, are highly susceptible to sensitization. Other individuals are relatively resistant and less likely to develop the neurobiological changes in brain dopamine systems that underlie sensitization. This may explain why relatively few people who take drugs or over-indulge in other forms of reward actually develop compulsive levels of "wanting," and why certain individuals may be better equipped to resist temptation than others. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Addiction](#)
[*Consumer Behavior](#)
[*Incentives](#)
[*Motivation](#)

Source: PsycINFO

113. Appetite, consumption, and choice in the human brain.

Citation: The interdisciplinary science of consumption., 2014(163-184) (2014)

Author(s): Knutson, Brian; Karmarkar, Uma

Institution: Department of Psychology, Stanford University, Stanford, CA, US; Harvard Business School, MA, US

Language: English

Abstract: (from the chapter) According to the Tibetan Buddhist bhavacakra (wheel of life), people who have lived less-than-exemplary lives are reborn in lower realms. Those unfortunate enough to be sent to the realm of pretas (hungry ghosts) awaken as ravenous beings whose tiny mouths and necks block sustenance from entering their large but empty stomachs. The hungry ghosts thus continually suffer from insatiable appetites. This seemingly exotic fate of the hungry ghosts symbolizes a more common earthly state of affairs: when appetite cannot be sated with consumption, as in the case of addiction, the rhythm of life is permanently disrupted. Without the eventual calming effects of consumption, excessive appetites may drive organisms to ruin. The plight of the hungry ghosts implies that appetite and consumption are different but must eventually connect. From the perspective of neuroscience, this mythical dilemma raises a number of questions. Can different phases of reward processing be distinguished neurally? How do they interact? Can their coordinated function contribute to optimal choice and well-being? In this chapter, we attempt -to define appetite and consumption psychologically, and then to describe human neuroimaging research indicating that these phases of reward processing can be visualized in the human brain. We then survey emerging research suggesting that neural study of these processes may help scientists to better predict choice and understand processes that promote decision making. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Appetite](#)
[*Brain](#)
[*Buddhists](#)
[*Choice Behavior](#)

Source: PsycINFO

114. The interdisciplinary science of consumption.

Citation: The interdisciplinary science of consumption., 2014 (2014)

Author(s): Preston, Stephanie D [Ed]; Kringelbach, Morten L [Ed]; Knutson, Brian [Ed]

Institution: Department of Psychology, University of Michigan, MI, US; Department of Psychiatry, University of Oxford, Oxford, United Kingdom; Department of Psychology, Stanford University, Stanford, CA, US

Language: English

Abstract: (from the jacket) Our drive to consume-our desire for food, clothing, smart phones, and megahomes-evolved from our ancestors' drive to survive. But the psychological and neural processes that originally evolved to guide mammals toward resources that are necessary but scarce may mislead us in modern conditions of material abundance. Such phenomena as obesity, financial bubbles, hoarding, and shopping sprees suggest a mismatch between our instinct to consume and our current environment. This volume brings together research from psychology, neuroscience, economics, marketing, animal behavior, and evolution to explore the causes and consequences of consumption. Contributors consider such topics as how animals' food storing informs human consumption; the downside of evolved "fast and frugal" rules for eating; how future discounting and the draw toward immediate rewards influence food consumption, addiction, and our ability to save; over consumption as social display; and the policy implications of consumption science. Taken together, the chapters make the case for an emerging interdisciplinary science of consumption that reflects commonalities across species, domains, and fields of inquiry. By carefully comparing mechanisms that underlie seemingly disparate outcomes, we can achieve a unified understanding of consumption that could benefit both science and society. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Consumer Behavior](#)
[Environment](#)
[Food](#)
[Psychodynamics](#)
[Rewards](#)

Source: PsycINFO

115. Dopamine receptor signaling in the forebrain: Recent insights and clinical implications.

Citation: Neurology, August 2014, vol./is. 83/8(758-767), 0028-3878;1526-632X (Aug 19, 2014)

Author(s): Savica, Rodolfo; Benarroch, Eduardo E

Correspondence Address: Savica, Rodolfo, rodolfo.savica@utah.edu

Institution: Sleep and Movement Disorders Division, Department of Neurology, University of Utah, Salt Lake City, UT, US; Department of Neurology, Mayo Clinic, Rochester, MN, US

Language: English

Abstract: Dopamine (DA) is an important modulator of neuronal activity and synaptic plasticity throughout the CNS. The actions of DA are mediated by D1- and D2-type receptors, which are distributed presynaptically, postsynaptically, and extrasynaptically, in projection and interneurons. These receptors utilize phosphorylation cascades or direct membrane interactions to affect the function of voltage- and neurotransmitter-gated channels, cytosolic enzymes, and transcription factors. Via these mechanisms, DA receptors have complex effects on neurotransmitter release, neuronal excitability, synaptic integration, synaptic plasticity, and circuit interactions. D1- and D2-type receptors may also form complexes with each other and with other receptors, which adds to the complexity and flexibility of dopaminergic signaling. In the CNS, DA receptors are primarily distributed in the striatum and frontal cortex, where they affect action selection, exertion of effort, attention and working memory, behavioral activation, and learning from both rewarding and aversive events. Abnormal DA signaling in these circuits is associated with Parkinson disease (PD), dystonia, schizophrenia, drug addiction, and attention-deficit disorders. The manifestations of these conditions reflect both the direct effects of impaired DA receptor signaling and DA receptor-triggered plastic changes in striatal and cortical synapses. The physiology, signaling, and pharmacology of DA receptors and their involvement in disease have been the subject of several reviews. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Country of Publication: STATEMENT: Unauthorized reproduction of this article is prohibited.; HOLDER: American Academy of Neurology; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: *[Dopamine](#)
 *[Neural Receptors](#)
 *[Neurotransmitters](#)
 *[Interneurons](#)
 *[Synaptic Plasticity](#)

Source: PsycINFO

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

116. Physiological correlates of neurobehavioral disinhibition that relate to drug use and risky sexual behavior in adolescents with prenatal substance exposure.

Citation: Developmental Neuroscience, July 2014, vol./is. 36/3-4(306-315), 0378-5866;1421-9859 (Jul 2014)

Author(s): Conradt, Elisabeth; Lagasse, Linda L; Shankaran, Seetha; Bada, Henrietta; Bauer, Charles R; Whitaker, Toni M; Hammond, Jane A; Lester, Barry M

Correspondence Address: Lester, Barry M.: Brown Center for the Study of Children at Risk, Warren Alpert Medical School, Brown University, Women and Infants Hospital of Rhode Island, 101 Dudley Street, Providence, RI, US, 02905, Barry_Lester@Brown.edu

Institution: Brown Center for the Study of Children at Risk, Department of Pediatrics, Women and Infants Hospital of Rhode Island, Providence, RI, US; Brown Center for the Study of Children at Risk, Department of Pediatrics, Women and Infants Hospital of Rhode Island, Providence, RI, US; Department of Pediatrics, Wayne State University School of Medicine, Detroit, MI, US; Department of Pediatrics, University of Kentucky College of Medicine, Lexington, KY, US; Department of Pediatrics, University of Miami Miller School of Medicine, Miami, FL, US; Department of Pediatrics, University of Tennessee, Memphis, TN, US; Research Triangle Institute, Research Triangle Park, NC, US; Brown Center for the Study of Children at Risk, Department of Pediatrics, Women and Infants Hospital of Rhode Island, Providence, RI, US

Language: English

Abstract: Physiological correlates of behavioral and emotional problems, substance use onset and initiation of risky sexual behavior have not been studied in adolescents with prenatal drug exposure. We studied the concordance between baseline respiratory sinus arrhythmia (RSA) at age 3 and baseline cortisol levels at age 11. We hypothesized that children who showed concordance between RSA and cortisol would have lower neurobehavioral disinhibition scores which would in turn predict age of substance use onset and first sexual intercourse. The sample included 860 children aged 16 years participating in the Maternal Lifestyle Study, a multisite longitudinal study of children with prenatal exposure to cocaine and other substances. Structural equation modeling was used to test pathways between prenatal substance exposure, early adversity, baseline RSA, baseline cortisol, neurobehavioral disinhibition, drug use, and sexual behavior outcomes. Concordance was studied by examining separate male and female models in which there were statistically significant interactions between baseline RSA and cortisol. Prenatal substance exposure was operationalized as the number of substances to which the child was exposed. An adversity score was computed based on caregiver postnatal substance use, depression and psychological distress, number of caregiver changes, socioeconomic and poverty status, quality of the home environment, and child history of protective service involvement, abuse and neglect. RSA and cortisol were measured during a baseline period prior to the beginning of a task. Neurobehavioral disinhibition, based on composite scores of behavioral dysregulation and executive dysfunction, substance use and sexual behavior were derived from questionnaires and cognitive tests administered to the child. Findings were sex specific. In females, those with discordance between RSA and cortisol (high RSA and low cortisol or low RSA and high cortisol) had the most executive dysfunction which, in turn, predicted earlier initiation of alcohol by age 16. Among boys, there also existed a significant baseline RSA by baseline cortisol interaction. Boys with low baseline RSA and high baseline cortisol had the highest levels of behavioral dysregulation. This increase in behavioral dysregulation was in turn related to initiation of alcohol use by age 16 and lower age of first sexual intercourse. We found sex-specific pathways to the

initiation of alcohol use and risky sexual behavior through the combined activity of parasympathetic and neuroendocrine functioning. The study of multiple physiological systems may suggest new pathways to the study of age of onset of substance use and engagement in risky sexual behavior in adolescents. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: S. Karger AG, Basel; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Drug Usage](#)
[*Drugs](#)
[*Heart Rate](#)
[*Response Variability](#)
[Behavior Problems](#)
[Human Sex Differences](#)
[Executive Function](#)

Source: PsycINFO

Full Text: Available from *Karger Medical and Scientific Publishers* in [Developmental Neuroscience](#) ; Note: ; Collection notes: Academic-License: Only available from an NHS networked computer

117. Dopamine D1-D2 receptor heteromer regulates signaling cascades involved in addiction: Potential relevance to adolescent drug susceptibility.

Citation: Developmental Neuroscience, July 2014, vol./is. 36/3-4(287-296), 0378-5866;1421-9859 (Jul 2014)

Author(s): Perreault, Melissa L; O'Dowd, Brian F; George, Susan R

Correspondence Address: George, Susan R.: Department of Pharmacology and Toxicology, University of Toronto, Medical Sciences Building, Room 4358, 1 King's College Circle, Toronto, ON, Canada, M5S 1A8, s.george@utoronto.ca

Institution: Campbell Family Mental Health Research Institute, Centre for Addiction and Mental Health, University of Toronto, Toronto, ON, Canada; Campbell Family Mental Health Research Institute, Centre for Addiction and Mental Health, University of Toronto, Toronto, ON, Canada; Campbell Family Mental Health Research Institute, Centre for Addiction and Mental Health, University of Toronto, Toronto, ON, Canada

Language: English

Abstract: Adolescence is a developmental period that has been associated with heightened sensitivity to psychostimulant-induced reward, thus placing adolescents at increased risk to develop drug addiction. Although alterations in dopamine-induced synaptic plasticity are perhaps the most critical factor in mediating addiction processes, developmental differences in the cell signaling mechanisms that contribute to synaptic plasticity, and their contribution to adolescent reward sensitivity, has been grossly understudied. The most abundant dopamine receptors, the D1 and D2 receptors, as well as the dopamine D1-D2 receptor heteromer, exhibit age-dependent and brain region-specific changes in their expression and function and are responsible for regulating cell signaling pathways known to significantly contribute to the neurobiological mechanisms underlying addiction. The D1-D2 receptor heteromer, for instance, has been associated with calcium calmodulin kinase II, brain-derived neurotrophic factor and glycogen synthase kinase 3 (GSK-3) signaling, three proteins highly implicated in the regulation of glutamate transmission and synaptic plasticity and which regulate addiction to amphetamine, opioids and cocaine. Therefore, in this review the importance of these signaling proteins as potential mediators of addiction susceptibility in adolescence will be highlighted, and the therapeutic potential of the D1-D2 receptor heteromer in addiction will be discussed. It is the overall goal of this review to draw attention to the research gap in dopamine-induced cell signaling in the adolescent brain-knowledge that would provide muchneeded insights into adolescent addiction vulnerability. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: S. Karger AG, Basel; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Calcium](#)
[*Dopamine](#)
[*Glycogen](#)
[*Brain Derived Neurotrophic Factor](#)
[Addiction](#)
[Adolescent Development](#)
[Animal Models](#)
[Drug Addiction](#)
[Mice](#)
[Neural Receptors](#)
[Rewards](#)
[Synaptic Plasticity](#)

Source: PsycINFO

Full Text: Available from *Karger Medical and Scientific Publishers* in [Developmental Neuroscience](#)
; Note: ; Collection notes: Academic-License: Only available from an NHS networked computer

118. The role of dopamine D1 and D2 receptors in adolescent methylphenidate conditioned place preference: Sex differences and brain-derived neurotrophic factor.

Citation: *Developmental Neuroscience*, July 2014, vol./is. 36/3-4(277-286), 0378-5866;1421-9859 (Jul 2014)

Author(s): Cummins, Elizabeth D; Griffin, Stephen B; Duty, Chase M; Peterson, Daniel J; Burgess, Katherine C; Brown, Russell W

Correspondence Address: Brown, Russell W.: Department of Psychology, East Tennessee State University, 307 Stout Drive, Box 70649, Johnson City, TN, US, 37614-0076, brown1@mail.etsu.edu

Institution: Department of Psychology, East Tennessee State University, Johnson City, TN, US;
Department of Psychology, East Tennessee State University, Johnson City, TN, US;
Department of Psychology, East Tennessee State University, Johnson City, TN, US;
Department of Psychology, East Tennessee State University, Johnson City, TN, US;
Department of Psychology, East Tennessee State University, Johnson City, TN, US;
Department of Psychology, East Tennessee State University, Johnson City, TN, US

Language: English

Abstract: This study analyzed the role of dopamine D1 and D2 receptors in methylphenidate (MPH) conditioned place preference (CPP) in adolescent male and female rats, in addition to the role of these receptors in the effects of MPH on brain-derived neurotrophic factor (BDNF) in the dorsal striatum and nucleus accumbens. Using a nonbiased CPP procedure, the animals were conditioned from postnatal day (PD) 33 to 37. On conditioning trials, animals were first administered saline or their respective antagonist (0.1 or 0.2 mg/kg SCH-23390; 0.01 or 0.03 mg/kg eticlopride HCl), followed by MPH (5 mg/kg). Approximately 10 min after MPH administration, the rats were placed into the paired context for a 10-min trial. One day after conditioning on PD38, a preference test was administered with dividers removed. One day following the preference test on PD39, brain tissue was removed, and the nucleus accumbens and striatum were analyzed for BDNF. Results revealed that MPH conditioning resulted in an increased preference that was blocked by either dose of SCH-23390, but generally not affected by either dose of eticlopride. Further, the higher dose of SCH-23390 resulted in a conditioned place aversion in males, presumably due to an increased number of dopamine D1 receptors in adolescent males. MPH produced a significant increase of striatal and accumbal BDNF alleviated by SCH-23390 or eticlopride. These results show that MPH results in CPP in adolescent male and female rats and these effects appear to be mediated by the dopamine D1 receptor, but the effects of MPH on BDNF appear to be mediated by both dopamine receptor families. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: S. Karger AG, Basel; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Dopamine](#)
[*Drugs](#)
[*Methylphenidate](#)
[Animal Models](#)
[Animal Sex Differences](#)
[Drug Abuse](#)
[Rats](#)
[Neurotrophic Factor](#)

Source: PsycINFO

Full Text: Available from *Karger Medical and Scientific Publishers* in [Developmental Neuroscience](#); Note: ; Collection notes: Academic-License: Only available from an NHS networked computer

119. Edgar Allan Poe and neurology.

Citation: Arquivos de Neuro-Psiquiatria, June 2014, vol./is. 72/6(466-468), 0004-282X;1678-4227 (Jun 2014)

Author(s): Teive, Helio Afonso Ghizoni; de Paola, Luciano; Munhoz, Renato Puppi

Correspondence Address: Teive, Helio Afonso Ghizoni, Rua General Carneiro, 1103/102, Centro, PR, Curitiba, Brazil, 80060-150, hageive@mps.com.br

Institution: Setor de Disturbios do Movimento, Servico de Neurologia, Departamento de Medicina Interna, Hospital de Clinicas, Universidade Federal do Parana, Curitiba, Brazil; Setor de Epilepsia e Eletroencefalografia, Servico de Neurologia, Hospital de Clinicas, Universidade Federal do Parana, Curitiba, Brazil; Movement Disorders Centre, Toronto Western Hospital, Toronto University, Toronto, ON, Canada

Language: English

Abstract: Edgar Allan Poe was one of the most celebrated writers of all time. He published several masterpieces, some of which include references to neurological diseases. Poe suffered from recurrent depression, suggesting a bipolar disorder, as well as alcohol and drug abuse, which in fact led to his death from complications related to alcoholism. Various hypotheses were put forward, including Wernicke's encephalopathy. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Nervous System Disorders](#)
[*Neurology](#)
[*Writers](#)
[Encephalopathies](#)
[Literature](#)
[Major Depression](#)

Source: PsycINFO

120. Further characterization of quinpirole-elicited yawning as a model of dopamine D3 receptor activation in male and female monkeys.

Citation: The Journal of Pharmacology and Experimental Therapeutics, August 2014, vol./is. 350/2(205-211), 0022-3565;1521-0103 (Aug 2014)

Author(s): Martelle, Susan E; Nader, Susan H; Czoty, Paul W; John, William S; Duke, Angela N; Garg, Pradeep K; Garg, Sudha; Newman, Amy H; Nader, Michael A

Correspondence Address: Nader, Michael A.: Department of Physiology and Pharmacology, Wake Forest University School of Medicine, 546 NRC, Medical Center Boulevard, Winston-Salem, NC, US, 27157-1083, mnader@wakehealth.edu

Institution: Department of Physiology and Pharmacology, Wake Forest School of Medicine, Winston-Salem, NC, US; Department of Physiology and Pharmacology, Wake Forest School of Medicine, Winston-Salem, NC, US; Department of Physiology and Pharmacology, Wake Forest School of Medicine, Winston-Salem, NC, US; Department of Physiology and Pharmacology, Wake Forest School of Medicine, Winston-Salem, NC, US; Department of Physiology and Pharmacology, Wake Forest School of Medicine, Winston-Salem, NC, US; Department of Radiology, Wake Forest School of Medicine, Winston-Salem, NC, US; Department of Radiology, Wake Forest School of Medicine, Winston-Salem, NC, US; Intramural Research Program, National Institute on Drug Abuse, Baltimore, MD, US; Department of Physiology and Pharmacology, Wake Forest School of Medicine, Winston-Salem, NC, US

Language: English

Abstract: The dopamine (DA) D3 receptor (D3R) has been associated with impulsivity, pathologic gambling, and drug addiction, making it a potential target for pharmacotherapy development. Positron emission tomography studies using the D3R-preferring radioligand [C]PHNO ([C](+)-propyl-hexahydro-naphtho-oxazin) have shown higher binding potentials in drug abusers compared with control subjects. Preclinical studies have examined D3R receptor activation using the DA agonist quinpirole and the unconditioned behavior of yawning. However, the relationship between quinpirole-elicited yawning and D3R receptor availability has not been determined. In Experiment 1, eight drug-naïve male rhesus monkeys were scanned with [C]PHNO, and the ability of quinpirole (0.01-0.3 mg/kg i.m.) to elicit yawning was examined. Significant positive (globus pallidus) and negative (caudate nucleus, putamen, ventral pallidum, and hippocampus) relationships between D3R receptor availability and quinpirole-induced yawns were noted. Experiment 2 replicated earlier findings that a history of cocaine self-administration (n = 11) did not affect quinpirole-induced yawning and extended this to examine monkeys (n = 3) with a history of methamphetamine (MA) self-administration and found that monkeys with experience self-administering MA showed greater potency and significantly higher quinpirole-elicited yawning compared with controls. Finally, quinpirole-elicited yawning was studied in drug-naïve female monkeys (n = 6) and compared with drug-naïve male monkeys (n = 8). Sex differences were noted, with quinpirole being more potent and eliciting significantly more yawns in males compared with females. Taken together these findings support the use of quinpirole-elicited yawning as a behavioral tool for examining D3R activation in monkeys and that both drug history and sex may influence individual sensitivity to the behavioral effects of D3R compounds. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Dopamine](#)
[*Drug Addiction](#)
[*Monkeys](#)
[*Quinpirole](#)
[Positron Emission Tomography](#)

Source: PsycINFO

121. Long-term chronic diseases and crash responsibility: A record linkage study.

Citation: Accident Analysis and Prevention, October 2014, vol./is. 71/(137-143), 0001-4575 (Oct 2014)

Author(s): Orriols, Ludivine; Avalos-Fernandez, Marta; Moore, Nicholas; Philip, Pierre; Delorme, Bernard; Laumon, Bernard; Gadegebeku, Blandine; Salmi, Louis-Rachid; Lagarde, Emmanuel

Correspondence Address: Orriols, Ludivine: INSERM U897, Equipe PPCT, 146 rue Leo Saignat, Bordeaux, France, ludivine.orriols@isped.u-bordeaux2.fr

Institution: Univ. Bordeaux, ISPED, Centre INSERM U897-Epidemiologie-Biostatistique, Bordeaux, France; Univ. Bordeaux, ISPED, Centre INSERM U897-Epidemiologie-Biostatistique, Bordeaux, France; INSERM U657, CIC-P0005, Departement de Pharmacologie,

Universite Bordeaux Segalen, Bordeaux, France; USR CNRS SANPSY 3413, Universite Bordeaux Segalen, Bordeaux, France; Pole information des professionnels et du public, Direction de la communication et de l'information, Agence nationale de securite du medicament et des produits de sante (ANSM), Saint-Denis, France; Universite de Lyon, Lyon, France; Universite de Lyon, Lyon, France; Univ. Bordeaux, ISPED, Centre INSERM U897-Epidemiologie-Biostatistique, Bordeaux, France; Univ. Bordeaux, ISPED, Centre INSERM U897-Epidemiologie-Biostatistique, Bordeaux, France

Language:

English

Abstract:

Objective: To assess the population impact of chronic conditions on the risk of road traffic crashes. **Methods:** Data from three French national databases were extracted and matched: the national health care insurance database, police reports and the national police database of injurious crashes. Exposure to chronic conditions were compared between responsible and nonresponsible drivers. Analysis was performed using the Lasso (least absolute shrinkage and selection operator) method. **Results:** 69,630 drivers involved in an injurious crash in France between 2005 and 2008, were included. 6210 (8.9%) were suffering from at least one long-term disease. When adjusted for prescription of medicines, blood alcohol, demographic driver characteristics and crash characteristics, increased risk of being responsible for a crash was found in drivers registered in the French healthcare database with the following long-term diseases: epilepsy (odds ratio [OR]=2.53 [1.53-4.20]), type 1 diabetes (OR=1.47) [1.12-1.92], alcoholic liver disease (OR=3.37 [1.40-8.13]), asthma (OR=1.72 [1.13-2.60]) and specific personality disorders (OR=1.35 [1.05-1.74]). No association was found for cardiovascular diseases or Alzheimer's disease. **Conclusion:** The results update the list of medical conditions that may impair driving skills. However, results should be considered cautiously with regards to potential regulatory driving judgments that could have a negative impact on patients' social life. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication:

HOLDER: Elsevier Ltd; YEAR: 2014

Publication Type:

Journal; Peer Reviewed Journal

Subject Headings:

*Chronicity (Disorders)
 *Drivers
 *Motor Traffic Accidents
 *Physical Health
 *Responsibility
 Alcoholism
 Client Characteristics
 Diabetes
 Epilepsy

Source:

PsycINFO

122. A monoclonal antibody specific for 6-monoacetylmorphine reduces acute heroin effects in mice.**Citation:**

The Journal of Pharmacology and Experimental Therapeutics, June 2014, vol./is. 349/3(568-576), 0022-3565;1521-0103 (Jun 2014)

Author(s):

Bogen, Inger Lise; Boix, Fernando; Nerem, Elisabeth; Morland, Jorg; Andersen, Jannike Morch

Correspondence Address:

Bogen, Inger Lise, P.O. Box 4404 Nydalen, Oslo, Norway, N-0403, inger.lise.bogen@fhi.no

Institution:

Department of Drug Abuse Research and Method Development, Division of Forensic Sciences, Norwegian Institute of Public Health, Oslo, Norway; Department of Drug Abuse Research and Method Development, Division of Forensic Sciences, Norwegian Institute of Public Health, Oslo, Norway; Department of Drug Abuse Research and Method Development, Division of Forensic Sciences, Norwegian Institute of Public Health, Oslo, Norway; Department of Drug Abuse Research and Method Development, Division of Forensic Sciences, Norwegian Institute of Public Health, Oslo, Norway; Department of Drug Abuse Research and Method Development, Division of Forensic Sciences, Norwegian Institute of Public Health, Oslo, Norway; Department of Drug Abuse Research and Method Development, Division of Forensic Sciences, Norwegian Institute of Public Health, Oslo, Norway

Language: English

Abstract: Immunotherapy against drugs of abuse is being studied as an alternative treatment option in addiction medicine and is based on antibodies sequestering the drug in the bloodstream and blocking its entry into the brain. Producing an efficient vaccine against heroin has been considered particularly challenging because of the rapid metabolism of heroin to multiple psychoactive molecules. We have previously reported that heroin's first metabolite, 6-monoacetylmorphine (6-MAM), is the predominant mediator for heroin's acute behavioral effects and that heroin is metabolized to 6-MAM primarily prior to brain entry. On this basis, we hypothesized that antibody sequestration of 6-MAM is sufficient to impair heroin-induced effects and therefore examined the effects of a monoclonal antibody (mAb) specific for 6-MAM. In vitro experiments in human and rat blood revealed that the antibody was able to bind 6-MAM and block the metabolism to morphine almost completely, whereas the conversion of heroin to 6-MAM remained unaffected. Mice pretreated with the mAb toward 6-MAM displayed a reduction in heroin-induced locomotor activity that corresponded closely to the reduction in brain 6-MAM levels. Intraperitoneal and intravenous administration of the anti-6-MAM mAb gave equivalent protection against heroin effects, and the mAb was estimated to have a functional half-life of 8 to 9 days in mice. Our study implies that an antibody against 6-MAM is effective in counteracting heroin effects. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The American Society for Pharmacology and Experimental Therapeutics; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Addiction](#)
[*Antibodies](#)
[*Heroin](#)
[*Immunotherapy](#)
[Mice](#)

Source: PsycINFO

123. Risk factors in patients with perimesencephalic hemorrhage.

Citation: European Journal of Neurology, June 2014, vol./is. 21/6(816-819), 1351-5101;1468-1331 (Jun 2014)

Author(s): Mensing, L. A; Ruigrok, Y. M; Greebe, P; Vlak, M. H. M; Algra, A; Rinkel, G. J. E

Correspondence Address: Ruigrok, Y. M.: Department of Neurology and Neurosurgery, Brain Center Rudolf Magnus, University Medical Center Utrecht, PO Box 85500, Utrecht, Netherlands, 3508 GA, ij.m.ruigrok@umcutrecht.nl

Institution: Department of Neurology and Neurosurgery, Brain Center Rudolf Magnus, University Medical Center Utrecht, Utrecht, Netherlands; Department of Neurology and Neurosurgery, Brain Center Rudolf Magnus, University Medical Center Utrecht, Utrecht, Netherlands; Department of Neurology and Neurosurgery, Brain Center Rudolf Magnus, University Medical Center Utrecht, Utrecht, Netherlands; Department of Neurology and Neurosurgery, Brain Center Rudolf Magnus, University Medical Center Utrecht, Utrecht, Netherlands; Department of Neurology and Neurosurgery, Brain Center Rudolf Magnus, University Medical Center Utrecht, Utrecht, Netherlands; Department of Neurology and Neurosurgery, Brain Center Rudolf Magnus, University Medical Center Utrecht, Utrecht, Netherlands; Department of Neurology and Neurosurgery, Brain Center Rudolf Magnus, University Medical Center Utrecht, Utrecht, Netherlands

Language: English

Abstract: Background and purpose: Smoking and hypertension are risk factors for aneurysmal subarachnoid hemorrhage (aSAH), whilst excessive alcohol consumption is less consistently linked with aSAH. Perimesencephalic hemorrhage (PMH) is a benign subset of non-aneurysmal subarachnoid hemorrhage. The exact cause of PMH is unknown, and its risk factor profile may help to elucidate the pathogenesis. The influence of smoking, hypertension and excessive alcohol consumption on the occurrence of PMH was studied. Methods: Seventy-nine patients admitted with a PMH to the University Medical Center

Utrecht were studied. As controls 574 persons were selected from five different general practices in the referral region of the University Medical Center Utrecht. All participants filled in a questionnaire about smoking habits, the presence of hypertension and alcohol consumption before their hemorrhage. Odds ratios (ORs) with corresponding 95% confidence intervals (CIs) were calculated to assess the association of risk factors and PMH, and multivariable logistic regression was used to adjust for possible confounding by age and sex. Results: Adjusted ORs for the occurrence of PMH were 1.7 (95% CI 1.0-2.8) for smoking cigarettes, cigars, pipes or any combination of these, 1.1 (95% CI 0.6-2.0) for hypertension and 1.1 (95% CI 0.5-2.1) for excessive alcohol consumption. Conclusions: Similar to aSAH, smoking is a risk factor for PMH and excessive alcohol consumption is not. In contrast to aSAH, hypertension is not a risk factor for PMH. This implies that the pathophysiological mechanisms causing PMH might be slightly different from those causing aSAH. (PsycINFO Database Record (c) 2014 APA, all rights reserved) (journal abstract)

Country of Publication: HOLDER: The Author(s) European Journal of Neurology-EAN; YEAR: 2014

Publication Type: Journal; Peer Reviewed Journal

Subject Headings: [*Alcoholism](#)
[*Hypertension](#)
[*Risk Factors](#)
[*Tobacco Smoking](#)
[*Subarachnoid Hemorrhage](#)

Source: PsycINFO

Full Text: Available from *Wiley* in [European Journal of Neurology](#)

124. Drugs of abuse: Pharmacology and molecular mechanisms.

Citation: Drugs of abuse: Pharmacology and molecular mechanisms., 2014 (2014)

Author(s): Howard, Sherrel

Institution: Molecular and Medical Pharmacology and Child Psychiatry, University of California, Los Angeles, Los Angeles, CA, US

Language: English

Abstract: (from the cover) Drugs of Abuse: Pharmacology and Molecular Mechanisms opens with a brief history of drug use and abuse. Subsequent sections look at specific families of drugs, including stimulants, depressants, and hallucinogens among others, and explores how their chemical make-up interacts with brain function. The final chapter provides a brief overview of clinical substance abuse treatment. Providing a concise, accessible introductory overview of the topic, Drugs of Abuse: Pharmacology and Molecular Mechanisms will be a valuable resource for students, researchers, and others interested in how drugs interact with the brain. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Authored Book

Subject Headings: [*Drug Abuse](#)
[*Drug Dependency](#)
[*Drug Usage](#)
[*Neurotransmission](#)
[*Pharmacology](#)
[Analgesic Drugs](#)
[Anesthetic Drugs](#)
[CNS Depressant Drugs](#)
[CNS Stimulating Drugs](#)
[Drug Rehabilitation](#)
[Hallucinogenic Drugs](#)
[Hypnotic Drugs](#)
[Sedatives](#)
[Side Effects \(Drug\)](#)
[Tranquilizing Drugs](#)

Source: PsycINFO

125. "Escaping reality": Adolescent substance abuse.

Citation: Youth at risk: A prevention resource for counselors, teachers, and parents (6th ed.), 2014(367-393) (2014)

Author(s): Glowiak, Matthew V

Institution: Walden University, Doctor of Philosophy: Counselor Education & Supervision Program, Minneapolis, MN, US

Language: English

Abstract: (from the chapter) The aim of this chapter is to provide the reader with an overview of adolescent substance abuse. Given space constraints, this chapter is able to address only some of the more pressing concerns, commonly used substances, and most widely used approaches. To be more specific, in this chapter I define substance abuse and explain exactly how it affects the adolescent-mentally, physically, and socially. Substances discussed in this chapter include alcohol, marijuana, inhalants, ecstasy, methamphetamine, and prescription and over-the-counter (OTC) drugs. To address concerns in these areas, I discuss various means of prevention and intervention. Because there are numerous ways for counselors to address a substance abuse problem, depending on the specific individual and situation, some general suggestions are provided. For more information on adolescent substance abuse, please be sure to view the additional resources provided at the end of this chapter. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Drug Abuse](#)
[*Drug Abuse Prevention](#)
[*Intervention](#)

Source: PsycINFO

126. Alcohol and drug problems.

Citation: Clinical manual of geriatric psychiatry., 2014(211-234) (2014)

Author(s): Oslin, David W; Mavandadi, Shahrzad

Institution: University of Pennsylvania, Philadelphia, PA, US; University of Pennsylvania, Philadelphia, PA, US

Language: English

Abstract: (create) This chapter discusses the changes in demographic and cohort trends in recent years that reveal an increase in the number of older adults who misuse or abuse alcohol and drugs. Topics examined include the following: proper screening, diagnosis, and treatment of individuals with drug and/or alcohol problems; epidemiology of late-life substance use; correlates and consequences of substance use problems; screening and diagnosis of substance use problems; treatments for substance use problems; and medical and psychiatric comorbidity. The authors note that while there is a growing awareness that older adults often engage in at-risk or problem substance use, individuals in need of treatment or at risk for future problems often go unidentified and untreated. Due to this fact, the authors conclude that research and clinical efforts aimed at improving screening efforts and identifying system, provider, and patient factors that may interfere with screening and referral processes for older adults at risk are warranted. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Alcohol Abuse](#)
[*At Risk Populations](#)
[*Drug Abuse](#)
[*Geriatric Psychiatry](#)

*Risk Factors
Comorbidity
Diagnosis
Drug Usage Screening
Epidemiology
Treatment

Source: PsycINFO

127. Clinical manual of geriatric psychiatry.

Citation: Clinical manual of geriatric psychiatry., 2014 (2014)

Author(s): Thakur, Mugdha E [Ed]; Blazer, Dan G [Ed]; Steffens, David C [Ed]

Institution: Department of Psychiatry and Behavioral Sciences, Duke University School of Medicine, Durham, NC, US; Department of Psychiatry and Behavioral Sciences, Duke University School of Medicine, Durham, NC, US; Department of Psychiatry, University of Connecticut Health Center, Farmington, CT, US

Language: English

Abstract: (from the cover) Clinical Manual of Geriatric Psychiatry is a concise reference that contains the most current information on psychiatric diagnoses seen in older patients, from delirium and dementia to schizophrenia and sleep disorders. The authors present clinically relevant information and evidence-based treatments for a wide range of disorders, as well as cover the psychiatric interview of older adults, psychopharmacology, psychotherapy, and clinical psychiatry in the nursing home, providing a complete and well-rounded reference for the field. Each chapter is broken into specific, easily digestible sections, replete with tables, and includes references and suggested readings. Written by experts in geriatric psychiatry, this clinical manual provides a much needed "field guide" for the care of older adults and nursing home patients. Busy clinicians, as well as researchers, residents, fellows, clinical psychologists, and social workers, will find this compact volume to be of the utmost value, as will anyone seeking to update their knowledge of geriatric psychiatry. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: *Geriatric Patients
*Geriatric Psychiatry
*Mental Disorders
*Nursing Homes
*Psychopharmacology
Affective Disorders
Anxiety Disorders
Delirium
Dementia
Drug Abuse
Group Psychotherapy
Individual Psychotherapy
Paranoia (Psychosis)
Schizophrenia
Sleep Disorders

Source: PsycINFO

128. Incentive-based interventions: Historical context and new directions.

Citation: Social neuroscience and public health: Foundations for the science of chronic disease prevention., 2013(141-159) (2013)

Author(s): Gaalema, Diann E; Lopez, Alexa A; Higgins, Stephen T

Correspondence Address: Gaalema, Diann E.: Department of Psychiatry, University of Vermont, UHC Campus, OH3, MS482, 1 South Prospect Street, Burlington, VT, US, 05401, diann.gaalema@uvm.edu

Institution: Department of Psychiatry, University of Vermont, Burlington, VT, US; Department of Psychiatry, University of Vermont, Burlington, VT, US; Department of Psychiatry, University of Vermont, Burlington, VT, US

Language: English

Abstract: (from the chapter) The use of financial incentives for changing health-related behavior dates back to the 1960s and the advent of behavior modification and behavior therapy with some of the earliest applications being in the areas of obesity and substance use disorders (SUDs). However, as was mentioned above, the most systematic development of this treatment approach has occurred in the SUDs field. This chapter provides a brief overview of the development of the incentives approach, primarily using research on SUDs to illustrate its methods and outcomes, while also discussing how incentives are being applied in other health-related areas. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Drug Abuse](#)
[*Health Behavior](#)
[*Incentives](#)
[*Monetary Incentives](#)
[Behavior Therapy](#)

Source: PsycINFO

129. Picoeconomics in neural and evolutionary contexts.

Citation: Social neuroscience and public health: Foundations for the science of chronic disease prevention., 2013(3-18) (2013)

Author(s): Ainslie, George

Correspondence Address: Ainslie, George: Veterans Affairs Medical Center, University of Cape Town, Coatesville, PA, US, George.Ainslie@va.gov

Institution: Veterans Affairs Medical Center, University of Cape Town, Coatesville, PA, US

Language: English

Abstract: (from the chapter) Picoeconomics studies the implications for motivational science of nonexponential delay discounting. Many of these can only be mentioned in this chapter, but all except the most recent publications under the author's control can be downloaded from www.picoeconomics.org. Reward is the selective principle of choice, a process that has presumably been selected in turn by evolution to be a proxy for fitness. However, addictions and other maladaptive behaviors are often strongly rewarded, raising questions about both the unity of the person and the efficiency of natural selection. This divergence of rewardingness from fitness can be accounted for by the apparently inborn form in which we discount prospective rewards as a function of their delay. Nevertheless, the survival of this form in evolution makes sense. Here I will review a rationale developed elsewhere for how this form generates both motivational conflict and somewhat imperfect means of resolving it, and discuss relevant research, particularly the neuroimaging studies that have begun to go beyond the simple anatomy of motivation. I will also suggest evolutionary and historical frameworks for the conflict between impulse and control. (PsycINFO Database Record (c) 2014 APA, all rights reserved)

Publication Type: Book; Edited Book

Subject Headings: [*Decision Making](#)
[*Economics](#)
[*Motivation](#)

Source: PsycINFO

130. Social neuroscience and public health: Foundations for the science of chronic disease prevention.

- Citation:** Social neuroscience and public health: Foundations for the science of chronic disease prevention., 2013 (2013)
- Author(s):** Hall, Peter A [Ed]
- Correspondence Address:** Hall, Peter A.: University of Waterloo, Waterloo, ON, Canada, pahall@uwaterloo.ca
- Institution:** Faculty of Applied Health Sciences, University of Waterloo, Waterloo, ON, Canada
- Language:** English
- Abstract:** (from the cover) Traditionally, neuroscience and public health have been considered strange bedfellows. Now a new collection of studies shows the two fields as logical collaborators with major potential for the evolution of both fields. Social Neuroscience and Public Health assembles current theoretical viewpoints, research findings in familiar and emerging areas, and updates on assessment methods to give readers a unique in-depth guide to the social brain and its central role in health promotion. This stimulating reference spans the intersection of two disciplines, offering new insights into the mechanics of risks, rewards, and willpower, revisiting the developmental effects of adversity and the impact of exercise on brain health, and applying epidemiology to cognitive science. Accessibly written for researchers and professionals within and outside both fields, the chapters include bullet-point and policy implication features for ease of retention. The book's innovative ideas lend themselves to a variety of applications, from fine-tuning disease prevention strategies to deeper understanding of addictions. A rich resource pointing to a promising future in research and prevention efforts, Social Neuroscience and Public Health benefits professionals and researchers in public health, medicine, cognitive neuroscience, health psychology, epidemiology, sociology and affiliated fields. (PsycINFO Database Record (c) 2014 APA, all rights reserved)
- Publication Type:** Book; Edited Book
- Subject Headings:** [*Public Health](#)
[*Social Neuroscience](#)
[Chronic Illness](#)
[Health Promotion](#)
[Cognitive Neuroscience](#)
- Source:** PsycINFO